

THE “INDUSTRIAL SCIENTIFIC COMMUNITY” LIED TO US ABOUT COVID-19 AND mRNA INJECTIONS

COULD THIS SAME ENTITY BE LYING ABOUT CLIMATE CHANGE?

By LtCol Kevin Loughrey(Ret'd), BE Mech(Hons), Grad Dip Strategic Studies(ANU)
10 March 2023

Introduction

I shall answer the title’s question immediately by saying, “Yes”. In this short opinion piece I shall explain why I am suspicious this is indeed the case.

The Alleged Cause of Global Warming

It is asserted by some scientists that Carbon Dioxide(CO₂), Nitrous Oxide(N₂O) and Methane(CH₄) are catastrophically warming the atmosphere. Based on this assertion, these scientists, and those politicians and people who are adherents of this belief, demand that mankind dramatically reduce the emissions of these gases. In the agreements reached so far, major emitters of these gases such as Communist China and India are exempt from these restrictions.

But what if the earth’s atmosphere is not warming but instead cooling? Would this not put an end to this thesis given that the concentration of CO₂ has been rising steadily for around a century?

Data taken from Ice Cores show no Correlation between CO₂ and Atmospheric Temperature

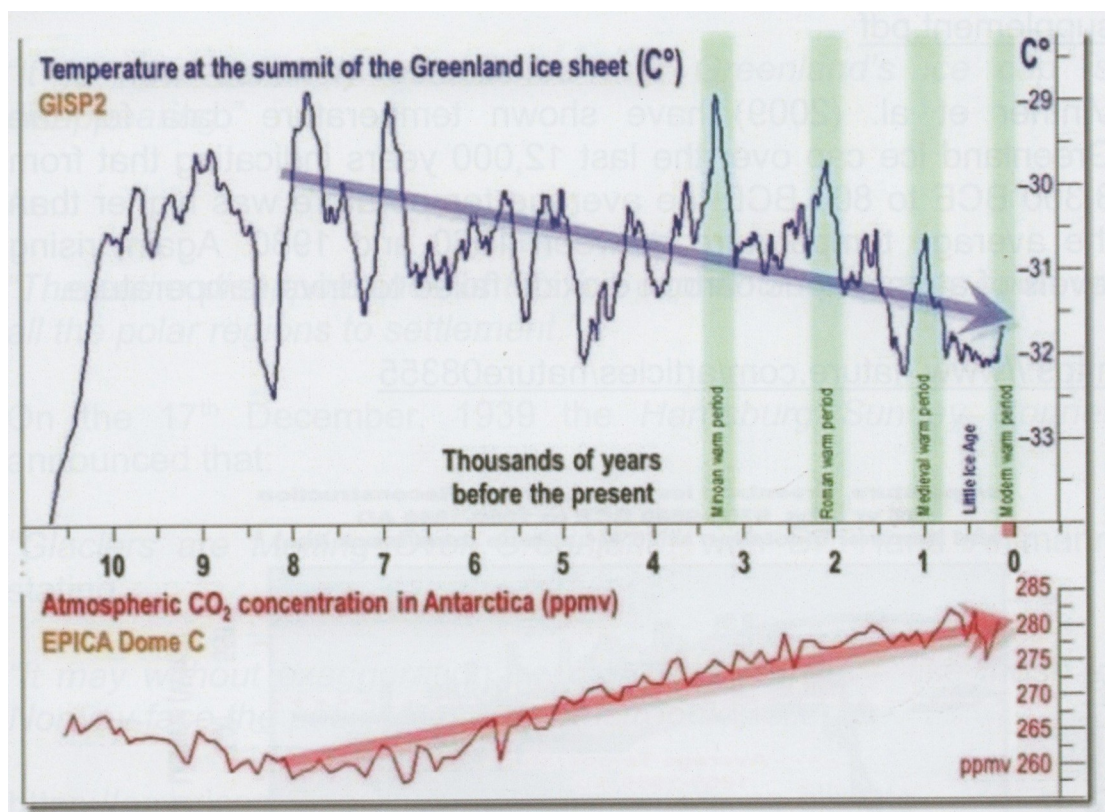


Figure 1: As CO₂ Concentration increases, Atmospheric Temperature decreases

Figure 1 shows that temperatures and CO₂ concentration extracted from ice cores shows that there is no correlation between CO₂ concentration and the temperature of the atmosphere.

Raw Data from Numerous Climatology Networks all show the same Trend – Downwards!

Here are a series of plots of raw temperature data taken from weather stations of long standing around the world that have not been encroached upon by urbanisation; something that would

artificially exaggerate the real situation with respect to the atmospheric temperature close to earth's surface.

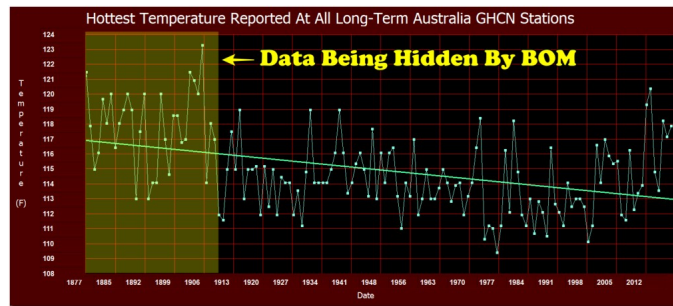


Figure 2: Australia - 1885-2019

According to Figure 2, from 1885 to around 1998, Australia's climate has been cooling. After 1998, the temperature record is broken because the Bureau of Meteorology:

- replaced the analogue measuring systems with digital technology,
- used digital equipment *incapable* of reading temperatures below -10C,
- did not run the two systems in parallel so that the digital system could be calibrated against the analogue and thereby ensure that temperature comparisons would be from the same reference base,
- put the new equipment in smaller housings (called Stevenson Screens) causing them to record a higher temperature, and
- painted the insides of the boxes black so that they radiate onto the measuring equipment – once again causing higher temperatures to be registered.



Figure 3: A Stevenson Screen

Was this incompetence or was it a deliberate ploy to gain Government grants?

So what about the rest of the world? Figures 4 to 9 show the same trend. Temperatures have been on a gradual decline whilst the concentration of CO₂ in the atmosphere has been steadily rising.

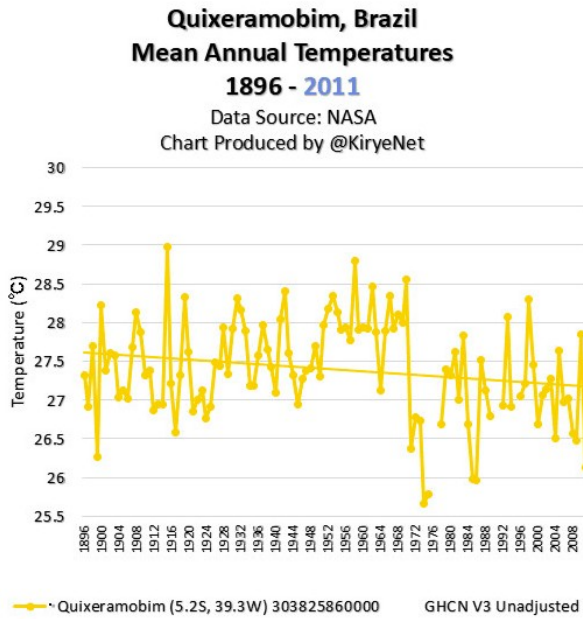


Figure 4: Brazil - 1896 -> 2011

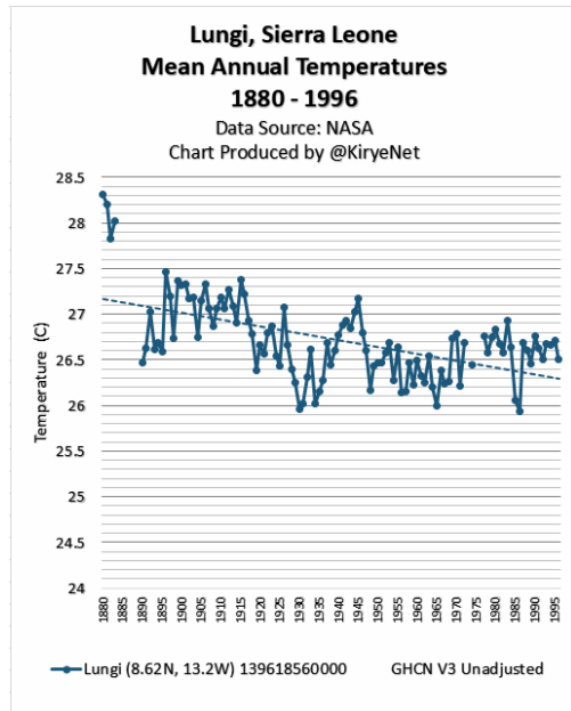


Figure 5: Sierra Leone Africa 1880-1996

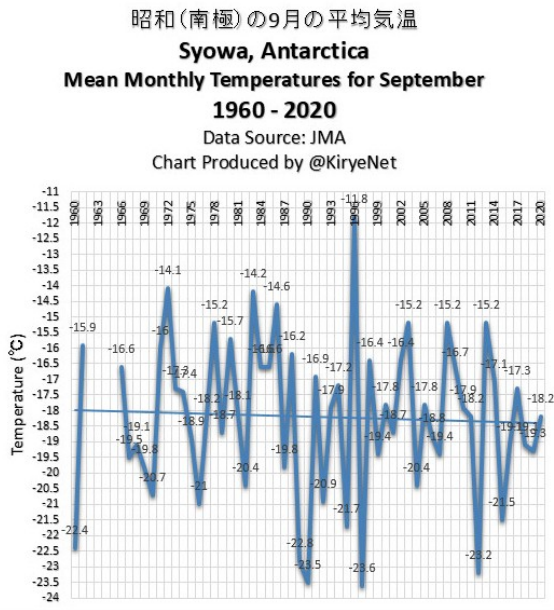


Figure 6: Antarctica 1960->2020

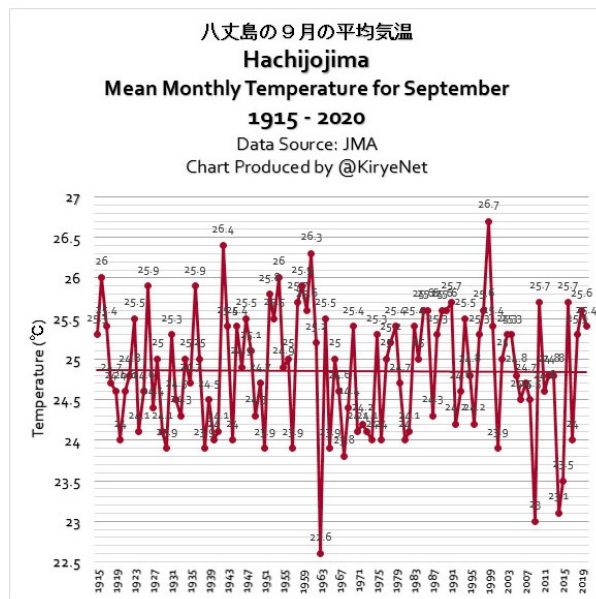


Figure 7: Japan 1915-2020

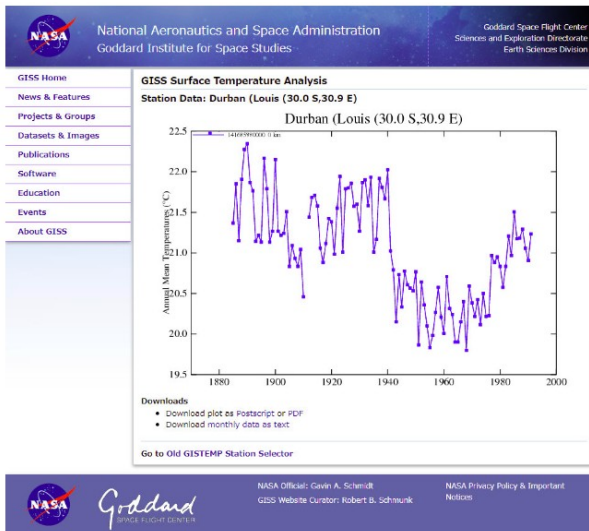


Figure 8: Durban Sth Africa 1885-1995

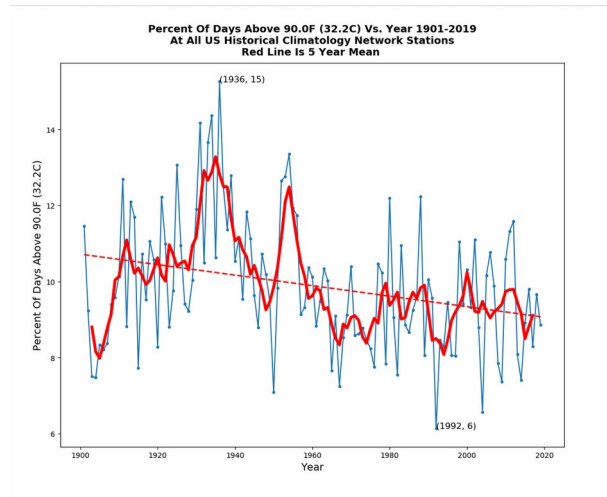


Figure 9: USA 1901-> 2019

The Chances of this being an error are Zero!

Given that these temperature measuring networks recorded their data in isolation of each other because of the lack of global communications in those days, it is an impossibility that they could all be wrong. How is it then, that we are constantly being told that the world will end in a fireball when all historical data shows exactly the opposite?!

A Congregation of the Evil and Wicked

What you are seeing is very similar to what you saw with the lies promulgated about COVID-19. COVID-19 (alpha) was a disease that was no more dangerous than Influenza if people were given early treatment with a range of low cost medicines. But the use of these treatments was bizarrely banned by Western Governments worldwide! Doctors have been denied the opportunity to properly care for their patients and many have been deregistered for speaking out. Millions of people have died unnecessarily. The wealthy elite have greatly increased their fortunes whilst the middle class and the poor have been further impoverished.

Interestingly, the same people involved in the Climate Change movement were behind COVID-19. These are:

- large financial institutions with massive investments in the Pharmaceutical Industry but also in “renewable” energy technology.
- The World Economic Forum, an organisation aiming to destroy Western economies so that there can be “A Great Reset”.
- People who just generally hate humanity and believe the world’s population should be culled.
- The Chinese Communist Party (CCP), a huge criminal cabal that wants to be the dominant power of the world by 2049, the 100th year of the reign of the CCP of China. The CCP has benefited hugely from “Climate Change”. Nearly all renewables hardware is purchased from China and they have not had to reduce their emissions at all so their electricity is 5 times cheaper than most countries comprising the Western economies.

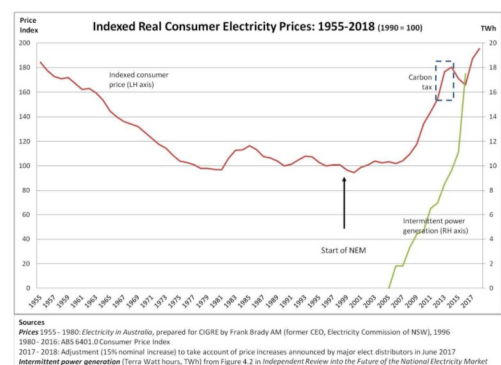


Figure 10: Electricity Cost and effect of Injection of Renewable Power

Figure 10 shows that there is a direct correlation between the cost of electricity in Australia and the injection of intermittent power from appliances like roof top solar and windmills. The cost of electricity has risen by more than 7 times the Consumer Price Index whilst, all the time, the Australian public has been assured that renewable energy would be cheaper. Clearly it is not!

Cheap reliable energy is the foundation stone of any modern society. With energy costs many times greater than that of Communist China, Australia is well on the way to being both impoverished and vulnerable to take-over by foreign interests.

The Path to Salvation

It would be comparatively simple to rectify what has happened:

1. Abolish all subsidies related to energy generation of any sort.
2. Abolish any regulations that mandate in any way the use of “renewables” and “renewable” energy.
3. Revert back to the way that electricity was generated before 2007. It is madness to inject power intermittently into a power grid.
4. Explore the feasibility of placing modular nuclear reactors, based on the latest proven technology, at all existing coal fired power stations. (If this were practical, the cost and time needed to transition to nuclear technology would be far, far less than building new base-load power generating facilities, based upon nuclear technology, from scratch.)

If we fail to do this, the future for our children, grandchildren and their successors looks extremely bleak.

-End of Paper -

In reply quote: CMN-211021-a


<https://kevinloughrey.com.au/COVID/Facts.html>

Reply to:


21 October 2021

See Distribution List

A LETTER TO THE PRIME MINISTER, DEPUTY PRIME MINISTER PREMIERS AND CHIEF MINISTERS OF THE COMMONWEALTH OF AUSTRALIA, CONCERNING THE GROSS MISMANAGEMENT, MALFEASANCE AND PROPAGANISING OF COVID-19

We write to you to express our grave concern about the handling by Government agencies at all levels within the Commonwealth of Australia of the disease and virus known as COVID-19 and SARS-CoV2 respectively.

As at the time of writing, the average age of death from this disease in Australia according to statistics provided at <https://www.health.gov.au/resources/covid-19-deaths-by-age-group-and-sex> is 79.2 years for males and 83.7 years for females. COVID-19 poses virtually no danger to anyone below the age of 70 who is medically fit. This is especially the case both for the young and even the elderly if preventatives and treatments, including vitamin D, vitamin C, Ivermectin, Hydroxychloroquine and zinc, were communicated and made available. If early treatment and proven effective therapeutics had been adopted early in the pandemic, many loved ones, especially the elderly would be still alive today.

Further facts which put into context the limited threat SARS-CoV2/COVID-19 poses the community are:

- 1 The majority of the persons who have died from this disease in Australia were suffering from serious, life-threatening comorbidities.
- 2 It is probable that many of these persons died *with* SARS-CoV2/COVID-19 *not* directly because of it. We are suspicious that the number of deaths attributed to SARS-CoV2/COVID-19 have been deliberately inflated so as to instil fear and panic into the public in order to encourage them to seek 'vaccination' as their only salvation. Inflation of these figures was achieved not only by wrongly attributing the cause of death to COVID-19 but also by a testing regimen which was over-amplified so as to give a large number of false positives.
- 3 Because of protocols enforced by public health officials and agencies, all patients that have died were *not* given life-saving medicines in the first week of contracting this disease. This has been further reinforced by the Australian Therapeutic Goods Administration unreasonably prohibiting the use of low-cost, safe drugs that have proven to be very effective in treating SARS-CoV2/COVID-19 in its early stage.

Despite the fact that this disease, properly treated, poses no significant threat to the health of the general public, there has been, in our opinion, a concerted campaign of misinformation and disinformation to create in the minds of the public and politicians exactly the opposite impression. There has also been a deliberate campaign to deny Australians access to early treatment using therapeutics which a large number of doctors, who have successfully cured thousands of sufferers of

SARS-CoV2/COVID-19, attest are effective. These same therapeutics have been wrongly disparaged by the media, certain politicians and public health officials.

Specifically, here is a list of some of the medicines which we know to be safe and highly effective when administered, as deemed appropriate to the patient's circumstances, by a qualified medical practitioner, in sequenced combinations:

- 1 Hydroxychloroquine,
- 2 Ivermectin,
- 3 Quercetin,
- 4 Azithromycin,
- 5 Doxycycline,
- 6 Soluble Zinc Salt,
- 7 Vitamins C & D,
- 8 Anticoagulants appropriate for the patient's medical circumstances,
- 9 Fluvoxamine,
- 10 Colchicine,
- 11 Prednisone, and
- 12 Melatonin.

(The foregoing list is not exhaustive but contains most of those medicines that have been found, from extensive front-line experience, to be highly effective in treating SARS-CoV2/COVID-19 in the early stage of the disease.)

We are of the opinion that the administration of these medicines by a qualified medical practitioner as soon as symptoms of SARS-CoV2/COVID-19 present, will result in a reduction of hospitalisation by at least 85%. In other words, if indeed there have been 1,590 deaths as a consequence of COVID-19, as at the time of writing, it is possible that greater than 1,300 persons have died unnecessarily as a consequence of the TGA refusing to allow the early treatment of patients with the above medicines (and others as appropriate).

It is our opinion that, if these medicines had been allowed, then the risks, attendant with the use of COVID-19 vaccines, which have not been thoroughly tested in accordance with past standards, would not have been warranted. These COVID-19 vaccines are, in our opinion, unacceptably dangerous. We believe they have been responsible for hundreds of deaths and tens of thousands of serious injuries in Australia. It is also likely there will be long-term ill effects from these vaccines. Determining the exact number of deaths and injuries is made exceptionally difficult due to a failure by the public health authorities to disambiguate counting methods and because of opaque criteria. Specifically, the immunological and general medical health state of the person to be vaccinated was not established prior to vaccination, nor is there any sort of rigorous, periodic check of persons after they have been vaccinated in order to determine if there has been a change in the injected person's health state. In a similar vein, should a person die within 12 months of being vaccinated, there is no set program of autopsy to properly ascertain the cause of death and record this data in case a pattern of likely injury, which could be attributed to the effect of the vaccination, becomes apparent.

It is our opinion that banning low-cost therapeutics, both as a prophylactic and as early treatment protocols, and instead recklessly promoting the use of COVID-19 vaccines which have subsequently been shown to be unacceptably harmful to public health, amounts to gross incompetence on the part of those involved. Indeed, the actions of these persons are, in our opinion, worthy of a transparent investigation by an appropriate authority for the purposes of eventual judicial action.

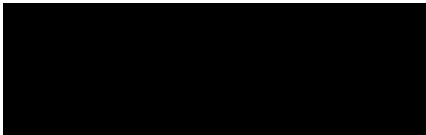
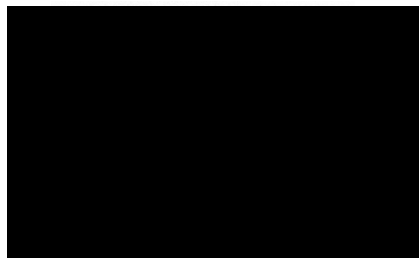
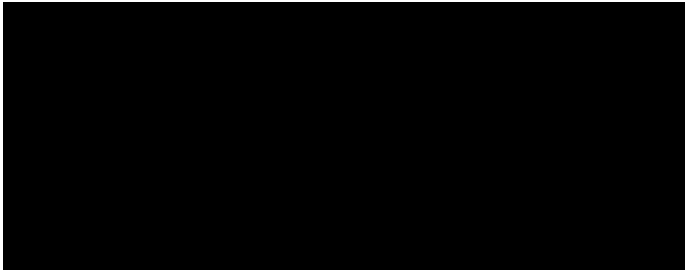
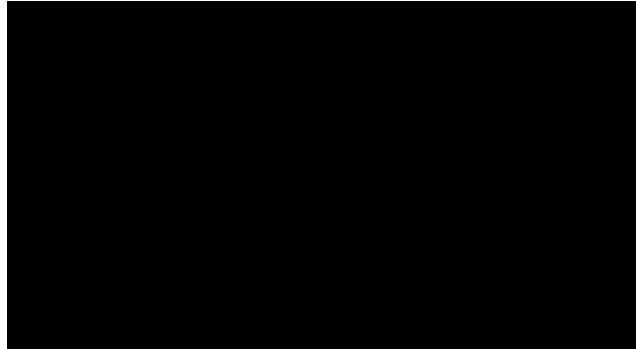
There are other matters associated with the handling of this medical emergency that are also worthy of comment. These are:

- 1 The long-term wearing of masks by the public:
 - poses a psychological and physiological health hazard to the wearers,
 - instils unnecessary alarm in the public, and
 - is totally ineffective in stopping the spread of COVID-19 and therefore does far more harm to the public than any imagined benefit it might confer.
- 2 As but one of many examples worldwide, the continuing rise of cases in Victoria while undergoing severe lockdowns coupled with the increase in drug-addiction, breakdown of marriages, destruction of small business, the interruption of education services at all levels and a significant increase in mental health illness, confirm that lockdowns are both detrimental to society and ineffective in stopping the spread of COVID-19.
- 3 We are of the opinion that mask wearing and lock-downs are being used, not to control the disease, but to cause anxiety and distress, thereby encouraging everyone to submit to a COVID-19 vaccination.
- 4 Mass COVID-19 vaccination of the public is absolutely the wrong thing to do when trying to bring a disease such as this under control. It will do a great deal more harm than good because it will give rise to variants which will likely be resistant to the vaccines being used.
- 5 It has been conclusively established that persons who contract and recover from SARS-CoV2/COVID-19 have a broad and enduring immunity to the disease and its variants. This immunity has been found to be significantly superior to that which is conferred by vaccination.
- 6 Latest data suggests that persons who are vaccinated still contract, spread and die from this disease; possibly in greater numbers than those that are not. It therefore makes no sense that persons involved in the health services, the military or the police forces should be compelled to be vaccinated.

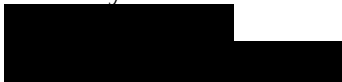
We strongly recommend that you:

- 1 institute a protocol of prophylaxis and early treatment using the medicines that we have listed plus any others that qualified medical practitioners feel are appropriate for the patient's circumstances,
- 2 cease interfering in the patient-doctor relationship but help doctors share their knowledge and experiences for the greater good,
- 3 cease immediately the vaccination of the public using these experimental COVID-19 vaccines until they have been thoroughly tested in accordance with long-accepted test and evaluation standards,
- 4 per 3 above, prohibit any sort of mandate, either in Government or in business, that would coerce people into submitting to vaccination,
- 5 provide isolates of SARS-CoV2 for national and international scrutiny and provide the specimens tested by PCR for full confirmatory sequence analysis so as to quantify the accuracy of these tests,
- 6 take the required action to dismiss those persons who have been responsible for this unsatisfactory state of affairs, both as advisers and public health officials, and
- 7 appoint a Royal Commission with the broadest possible terms of reference to investigate the Government's handling of this pandemic, including but not limited to:
 - lock-downs,
 - border closures,
 - mask and vaccine mandates,

- the role of the media,
- the role of advisory committees and individuals not members of the public service, and
- why life-saving therapeutics and early treatment were denied the Australian public.



LtCol Kevin Loughrey (Ret'd) BE Mech(hons), psc, jssc
Secretary



AUSTRALIA

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In reply quote: CMN-220106-a

Reply to:

LtCol(Ret'd) K. A. Loughrey

6 January 2022

See Distribution List

**REQUEST FOR EACH ODPF LISTED BELOW TO FORMALLY INVESTIGATE
THE POSSIBILITY OF MURDER, MANSLAUGHTER, OFFICIAL MALFEASANCE
AND RECKLESS ENDANGERMENT WITHIN ITS JURISDICTION**

PURPOSE

1. The purpose of this letter is to:
 - a. bring to your attention my suspicions that, here in Australia, there has been murder, manslaughter, official malfeasance and reckless endangerment committed by politicians, public-health bureaucrats and contracted consultants/advisers to the Government on the matter of COVID-19, at the highest levels of the Federal, State and Territory Governments; and
 - b. request that your office urgently assign a specialist police task force within your jurisdiction to ascertain whether these suspicions have substance.

BACKGROUND

The COVID Medical Network

2. Because of my military background and my intense interest in this matter, I have become involved with an eclectic group of world-renowned specialists in medicine, virology, immunology & microbiology, engineers, scientists, legal practitioners and concerned citizens called, "The COVID Medical Network". In connection with this, I developed the enclosed letter (Enclosure A) which was sent by registered mail to the 33 addressees provided in its distribution list. Approximately four months have elapsed since that letter was dispatched. I have not received a single reply. I have therefore decided to commence the 2nd phase of this operation to bring this unsatisfactory state of affairs to a conclusion and to see those responsible for what I believe are criminal offences and crimes against humanity brought before the courts.

FACTS

3. The enclosed letter (Enclosure A) provides an excellent background adumbration of the facts pertaining to this matter and a framework for the expression of my concerns. In addition to that, by way of a further background briefing, I recommend you watch:
 - a. <https://rumble.com/vkfzi9-dr-zelenko-discusses-his-affordable-covid-treatment-and-the-censorship-tha.html> - Dr Vladimir Zelenko interview,
 - b. <https://odysee.com/@Corona-Investigative-Committee:5/sam-Session-85-en.mp4:3?&sunset=lbrytv> - Dr Sam White / Reiner Fuellmich interview, and
 - c. <https://rumble.com/vq8med-former-nsw-police-sergeant-stephen-kelly.html> – Former NSW Police Sergeant Stephen Kelly’s testimony.

4. At the core of my concerns, expressed in paragraph 1.a above, is the fact that the Australian public have been deliberately denied access to life-saving early treatments for COVID-19 based on highly-effective, low-cost, readily-available therapeutics and that, as a consequence of this, over 1,000 Australians have needlessly died of this disease. Similarly, I suspect health authorities have deliberately not informed the public of medicines, such as Hydroxychloroquine, Ivermectin, Quercetin, Vitamin D, Zinc salts and Vitamin C that provide some level of prophylaxis against this disease¹.

5. Related to this, Australia has accrued a National Debt of greater than \$1 trillion, businesses, particularly small businesses, have been disrupted and a number of them irrevocably ruined, civil rights have been trampled upon, society has been destabilised with mental illness and marriage breakups and the population has been coerced, through mandates and restrictions of their liberty and livelihoods, into submitting to a series of injections of substances that have not been subjected to proper testing before being forced upon the whole Australian population. This has resulted in hundreds of deaths and many tens of thousands of injuries; a significant number of which will leave people with permanent and even life-threatening disabilities.

6. As per the enclosed paper and recommended video interviews, this suspected criminal activity was motivated by the desire to impose upon the Australian population, and, indeed, the world, experimental medical therapies presented as being novel vaccines. The motives for doing this and the parties involved are multi-various. Some were motivated by profit and others by ideology and political advantage whilst others were driven by global strategic considerations. These parties are both national and international.

7. With respect to Australia, I suspect that the foremost perpetrators/instigators of this criminal activity have been:

- a. members of the National Covid19 Clinical Evidence Task Force (NC19CT),
- b. the Ministers for Health and Chief Medical Officers of the Federal, State and Territory Departments of Health,
- c. the Therapeutic Goods Administration of Australia, and
- d. members of the Australian Health Practitioner Regulation Agency.

8. Complicit in this have been:

- a. the Prime Minister, Deputy Prime Minister and the Premiers and Chief Ministers of each State and Territory, and
- b. various politicians of opposition parties who have demonised early treatment for political advantage or ideology.

9. In some instances, the denial of early treatment and related information was deliberate and with the full knowledge of its consequences. In others, it was due to profound incompetence, sloth, politics and ignorance. That is the discriminator between murder, manslaughter and official malfeasance whilst the forced imposition of dangerous injections upon the Australian Public on the pretext of a contrived health emergency constitutes reckless endangerment.

10. It is up to your expert police investigatory team to decide which offence belongs to the above listed persons as well as any others identified during the course of this investigation.

¹ The World Council for Health represents over 100 reputable medical and scientific organisations. It lists a wide range of alternative treatments. See: <https://www.worldcouncilforhealth.org>

RECOMMENDATION

11. I recommend that a Specialist Police Task Force be constituted at both the Federal and State level to thoroughly investigate this matter, with the Federal Task Force playing a coordinating but not a controlling role.

ACKNOWLEDGEMENT OF RECEIPT/ADVICE ON INTENDED ACTION

12. Your acknowledgement of receipt of this letter and your advice as to what action you intend to take to address my concerns would be appreciated within the next 14 days.

[REDACTED]

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[REDACTED]

AUSTRALIA

Enclosure:

A. CMN-211021-a, A Letter, to the Prime Minister, Deputy Prime Minister, Premiers and Chief Ministers of the Commonwealth of Australia, concerning the Gross Mismanagement, Malfeasance and Propagandising of COVID-19, dated 21 Oct 2021

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