



A Closer Look at the COVID Mortality Rate

Description

One of the most consistent efforts made by “experts” during the early stages of the pandemic was to attempt to impress on the public that COVID was an extremely deadly disease.

While it’s clear that for the extremely elderly and severely immunocompromised, COVID does present significant and serious health concerns, the “experts” did their best to convince people of all age groups that they were in danger.

Initially the World Health Organization (WHO), in their infinite incompetence, made a substantial contribution to this perception by claiming that the mortality rate from COVID was shockingly high.

In March 2020, with precious little data, the WHO made the alarming claim that 3.4 percent of people who got COVID had died.

CNBC reported that an early press conference by WHO Director-General Tedros Ghebreyesus compared that expected mortality of COVID-19 to the flu:

“‘Globally, about 3.4 percent of reported COVID-19 cases have died,’ WHO Director-General Tedros Adhanom Ghebreyesus said during a press briefing at the agency’s headquarters in Geneva. In comparison, seasonal flu generally kills far fewer than 1 percent of those infected, he said.”

This stood in contrast to previous estimates, which were also above 2 percent:

“Early in the outbreak, scientists had concluded the death rate was around 2.3 percent.”

While “experts” could be forgiven for being unsure about the death rate of a brand new illness with very little data available, the fear-mongering and world-altering policy enacted based on these estimates has caused incalculable damage.

It’s now widely known and accepted that these estimates were wildly incorrect, off by orders of magnitude.

But a new paper out from one of the world’s leading experts confirms that they were off even more

than we previously realized.

John Ioannidis is one of the nation's leading public health experts, employed at Stanford University as Professor of Medicine in Stanford Prevention Research, of Epidemiology and Population Health," as well as "of Statistics and Biomedical Data Science."

You'd think that those impeccable qualifications and a track record of being one of the most published and cited scientists in the modern world would insulate him from criticism, but unfortunately that's no longer how The Science™ works.

Ioannidis first drew the ire of The Keepers of The Science™ early in the outbreak, when he cautioned that society might be making tremendous decisions based on limited data that was of poor quality.

He also took part in the infamous seroprevalence study conducted in Santa Clara County, led by Dr. Jay Bhattacharya.

That examination, which looked at antibody prevalence in the San Jose area, came to the conclusion that COVID was already significantly more widespread by March and April 2020 than most people realized.

This had wide-ranging implications, but the most important revelation was that the estimates of COVID's mortality rate used by "scientists" and the WHO were almost certainly much too high.

Those estimates were created under the assumption that COVID cases were overwhelmingly detectable; that cases were captured by testing and thus tracking deaths could be achieved with a "case fatality rate," instead of "infection fatality rate."

That was the mistake Tedros and the WHO made two and a half years ago.

Of course, for providing substantial evidence and data that COVID was less deadly than initially feared, Ioannidis (and Bhattacharya) was attacked from within the "expert community."

In what has now become a familiar insult, those behind the study were vilified as COVID minimizers and dangerous conspiracy theorists who would get people killed by not taking the virus seriously enough.

But Ioannidis remained undeterred, and with several authors, he recently released another review of the infection fatality rate of COVID. Importantly, the paper looks at the pre-vaccination time period and covers the non-elderly age groups; those who were most affected by COVID restrictions and endless mandates.

The Numbers

The review begins with a statement of fact that was almost entirely ignored by lockdown "experts" throughout the pandemic, but especially when restrictions, lockdowns and mandates were at their peak early on.

"The infection fatality rate (IFR) of COVID-19 among non-elderly people in the absence of vaccination or prior infection is important to estimate accurately, since **94 percent of the global population is younger than 70 years and 86 percent is younger than 60 years**

.” [Emphasis added.]

94 percent of the global population is younger than 70 years old.

6 percent of is older than 70 years old.

86 percent is younger than 60 years old.

This is relevant because restrictions overwhelmingly impacted the 86–94 percent of people who are younger than 60 or 70 years old.

Ioannidis and his co-writers reviewed 40 national seroprevalence studies that covered 38 countries to come to determine their estimates of infection fatality rate for the overwhelming majority of people.

Importantly, those seroprevalence studies were conducted before the vaccines were released, meaning the IFR’s were calculated before whatever impact vaccines had on younger age groups.

So what did they find?

The median infection fatality rate for those aged 0–59 was 0.035 percent.

This represents 86 percent of the global population and the survival rate for those who were infected with COVID pre-vaccination was 99.965 percent.

For those aged 0–69, which covers 94 percent of the global population, the fatality rate was 0.095 percent, meaning the survival rate for nearly 7.3 billion people was 99.905 percent.

Those survival rates are obviously staggeringly high, which already creates frustration that restrictions were imposed on all age groups, when focused protection for those over 70 or at significantly elevated risk would have been a much more preferable course of action.

But it gets worse.

The researchers broke down the demographics into smaller buckets, showing the increase in risk amongst older populations, and conversely, how infinitesimal the risk was amongst younger age groups.

- Ages 60–69, fatality rate 0.501 percent, survival rate 99.499 percent
- Ages 50–59, fatality rate 0.129 percent, survival rate 99.871 percent
- Ages 40–49, fatality rate 0.035 percent survival rate 99.965 percent
- Ages 30–39, fatality rate 0.011 percent, survival rate 99.989 percent
- Ages 20–29, fatality rate 0.003 percent, survival rate 99.997 percent
- Ages 0–19, fatality rate 0.0003 percent, survival rate 99.9997 percent

They added that “Including data from another 9 countries with imputed age distribution of COVID-19 deaths yielded median IFR of 0.025-0.032 percent for 0-59 years and 0.063-0.082 percent for 0-69 years.”

These numbers are astounding and reassuringly low, across the board.

But they're almost nonexistent for children.

Yet as late as fall 2021, Fauci was still fear-mongering about the risks of COVID to children in order to increase vaccination uptake, saying in an interview that it was not a "benign situation":

"We certainly want to get as many children vaccinated within this age group as we possibly can because as you heard and reported, that this is not, you know, a benign situation."

It's nearly impossible for any illness to be less of a risk, or more "benign" than a 0.0003 percent risk of death.

Even in October 2021, during that same [interview with NPR](#), Fauci said that masks should continue on children as an "extra step" to protect them, even after vaccination:

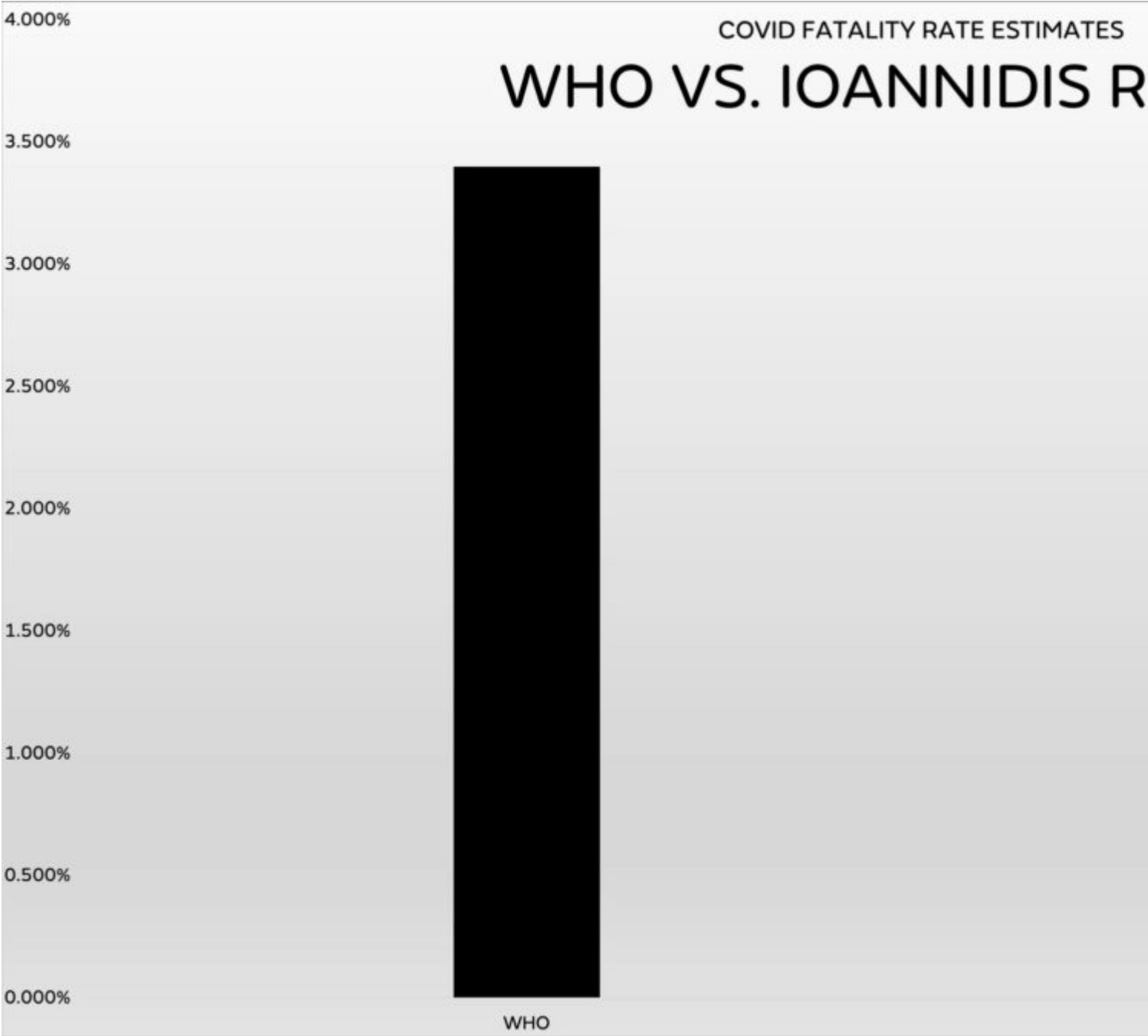
"And when you have that type of viral dynamic, even when you have kids vaccinated, you certainly—when you are in an indoor setting, you want to make sure you go the extra step to protect them. So I can't give you an exact number of what that would be in the dynamics of virus in the community, but hopefully we will get there within a reasonable period of time. You know, masks often now—as we say, they're not forever. And hopefully we'll get to a point where we can remove the masks in schools and in other places. But I don't believe that that time is right now."

Nothing better highlights the incompetence and misinformation from Dr. Fauci than ignoring that pre-vaccination, children were at vanishingly small risks from COVID, that vaccination uptake amongst kids was entirely irrelevant since they do not prevent infection or transmission, and that mask usage is completely ineffective at protecting anyone. Especially for those who didn't need protection in the first place.

The CDC, "expert" community, World Health Organization, media figures—all endlessly spread terror that the virus was a mass killer while conflating detected case fatality rates with infection fatality rates.

Yet now we have another piece of evidence suggesting that the initial WHO estimates were off by 99 percent for 94 percent of the world's population.

Just for some perspective, here's the difference visually portrayed between what the WHO claimed and what Ioannidis found:



Even if the lockdowns, mask mandates, capacity limits, and shuttered playgrounds worked, the dangers of the virus were so minuscule that the collateral damage instantly and immediately outweighed any potential benefit.

Economic destruction, increased suicide attempts due to seemingly indefinite isolation, horrifying levels of learning loss, increasing obesity amongst kids, plummeting test scores, increased poverty and hunger, supply chain problems, rampant inflation; all of it is a direct result of policies imposed by terrified, incompetent “experts.”

Their estimates were hopelessly, catastrophically wrong, yet they maintained their unchallenged sense of authority for multiple years, and still receive awards, praise, increased funding and a sense of

infallibility amongst politicians and decision-makers.

If sanity and intellectual honesty still existed, these estimates would be front page news for every major media outlet in the world.

Instead, because the media and their allies in the tech, corporate, and political classes promoted and encouraged lockdowns and restrictions while censoring dissent, it's ignored.

Nothing could be more perfectly COVID than that.

by Ian Miller

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Date Created

10/31/2022