



## The Medical Community is Baffled by SADS But “Whatever You Do Don’t Solve the Mystery”

### Description



**The medical establishment’s ability to conjure a ‘diagnosis’ that can never be wrong takes a leaf out of the Catholic Church’s doctrine of Papal infallibility.**

In an article, Rusere Shoniwa performs an autopsy of Sudden Adult Death Syndrome (“SADS”): deconstructing the corporate media propaganda and some commentary on the strange new union of the church and the medical establishment. What follows is an excerpt from this article titled ‘*SADS – Sponsored by the Medical Establishment, the Mail Online and the Vatican*’.

“I won’t deny that if you suffer some physical trauma hospitals are the right place to seek help,” Shoniwa wrote.

“Surgery for some medical conditions can greatly improve the quality of your life. But, with iatrogenic harm found to be the third leading cause of death in the US, walking into a hospital is more of a throw of the dice than most people know.

“The truth is that neither the medical establishment nor orthodox religion knows the answers to most of life’s mysteries.

“How fitting then that these two naked emperors should consummate a union of their respective religions with a commemorative coin issued by the Vatican to promote the ‘need to be vaccinated’.”

By Rusere Shoniwa

### The omniscient medical establishment is baffled

The medical establishment professes to know an awful lot. A few days before lockdown in March 2020, it knew that [covid was not a High Consequence Infectious Disease and downgraded it accordingly](#). Exhibiting an Orwellian capacity for doublethink, it also knew that societies ought to be bludgeoned with lockdowns to prevent the spread of the not so highly consequential, and therefore downgraded, pathogen. In addition, it somehow just knew, without being able to explain why, that a cost-benefit

analysis would be superfluous, so none was done. Until July 2020, it knew, based on decades of established science, that masking in community settings was useless in preventing the spread of respiratory illnesses. Then, with no new science to support a 180-degree turn, it just knew that masks had to be mandated.

It was so certain that mass vaccination with the experimental injections was the only course of action to take in the face of the not so highly consequential covid disease that it suppressed alternative cheap, safe and effective treatments. It was also quite sure that it had to censor and threaten doctors like Sam White with debarment because he expressed concerns about mass vaccination with the shoddily tested and hastily marketed novel 'vaccines'. It somehow reasoned that doctors expressing genuine concern for patient safety was a threat to patient safety and that the only way to guarantee patient safety was for every single doctor, journalist and media outlet to sing from the same Big Pharma-sponsored hymn sheet.

Granted, the medical establishment's stance during covid has not been underpinned by rational considerations, but that is precisely what has given it so much latitude to respond to 'the crisis'. There is no limit to what you can know *and do* when you don't have to prove rationally how you came to know it. Life is a never-ending carousel of trade-offs. You can either plod through things methodically and get it right or you can blast ahead at [Warp Speed](#) with the misplaced confidence of [Joe Biden on a bicycle](#).

So, given the medical establishment's boundless knowledge in times of crisis, it's more than a little odd that it does *not* know why young and apparently healthy adults all over the world are dying in unprecedentedly large numbers. It is uncharacteristically stumped: it professes that there are simply no clues whatsoever to this disturbing phenomenon.

It is in the grip of such uncharacteristic knowledge paralysis that it seems incapable of exploring obvious lines of enquiry, such as asking questions like: when was the last time that governments all over world put a jackboot on the neck of every adult citizen to inject them with novel 'vaccines' employing an experimental gene-based technology tested under quality control conditions that would have run-of-the-mill crack dealers shaking their heads in disbelief?

## What's in a name?

Once you unlock the mystery of the medical establishment's peculiar brand of epistemology, you begin to understand that how it comes to 'know' things is directly related to how it defines the problems it is trying to solve. For people who think in straitjackets, the problem of young people dying inexplicably is a medical problem. But, for the unbounded thinkers in charge of the medical establishment, it is a Public Relations problem. Through that lens, the obvious line of enquiry into experimental mass vaccination gets ruled out because it is too rational, too much of a threat to its reputation and too unprofitable.

The solution to this PR problem is to repackage it in such a way that it is seen as an insoluble medical mystery, as insoluble as the mystery of life itself – a mystery that one can debate in philosophical terms but never get to grips with in any practical way. The most insoluble mysteries are those that have been around since the dawn of time and yet continue to evade unravelling. This is axiomatic to the quality of insolubility – Plato, Seneca, Aquinas, Voltaire and Heidegger will have all given it their best shot and yet here we are today, none the wiser. The seed must be sown in the public mind that this is not a new

problem that arose coterminously with mass global experimental covid vaccination but has been 'a thing' since the dawn of medical things.

The key to all successful narrative management is naming the problem. When Edward Bernays, the father of propaganda, was tasked by the tobacco industry in the early 20<sup>th</sup> century with breaking the taboo against women smoking cigarettes, he didn't call them cancer sticks. He called them torches of freedom. With one ingenious stroke of the naming pen, the tobacco industry doubled its market overnight and women won the right to lung cancer.

In a similar vein, society must understand that young adults inexplicably dying before their time is the result of a bona fide disease of unfathomable cause – a mysterious and yet proper medical thing – and not a possible crime against humanity.

At first glance, the name they've hit on does not fill you with confidence that the best medical minds were enlisted in the brainstorming session. But it certainly has an air of does-what-it-says-on-the-tin. It is partly for that reason that Sudden Adult Death Syndrome ("SADS") is a stroke of marketing genius. It's got an easy acronym that chimes flippantly with the tragic outcome and yet is also readily accessible to authoritative tones after three pints in the pub. This is 90 per cent of the battle in getting the public to understand in no uncertain terms that SADS is 'a thing'. A serious thing. It trips off the tongue very easily and yet is not so silly that it sounds like the lead-in to a crazy story developed by a contestant in an episode of BBC One's *Would I Lie to You*.

As far as the medical establishment is concerned, the perception that SADS on this scale is a recent global phenomenon must be resisted on the grounds that it could become associated with a big new event – like mass global experimental covid vaccination. So no, SADS is not new. It's been a thing for eons. And for sure, a Google search seems to suggest that SADS has been around for as long as cancer. But [Allan Stevo's investigation](#) using his "8.6 pound Webster's Encyclopaedic Unabridged Dictionary of the English Language from 1992" – which is impervious to algorithmic re-engineering – reveals that the term did not exist in 1992. But who are you going to trust – the colourful, digital pages of Google or the crumbling ancient parchments of Webster's Encyclopaedic Unabridged Dictionary of the English Language?

I'm not saying there have never been mysterious unexplained deaths of young and apparently healthy adults. They were just so rare that they weren't on the radar, even of dictionaries whose job it is to define all things known to the vast bulk of humanity. Surely this merits delving into a little deeper?

## **Whatever you do, don't solve the problem – autopsies die a sudden death**

One way to solve the apparently insoluble problem of sudden adult death would be to conduct autopsies on as many sudden adult deaths as resources will allow. It turns out that the Chief Pathologist at the University of Heidelberg, Dr. Peter Schirmacher, was doing just that very thing. In the summer of 2021, his team had just finished conducting 40 autopsies on people who had died within two weeks of vaccination and concluded that 30-40% of them died from the vaccine. He was pushing for many more autopsies of vaccinated people.

His claims were naturally dismissed by the German Government. From Dr. Schirmacher's perspective, the dismissal by bureaucrats of his professional autopsy findings must have felt like being an army

private in the battlefield reporting by radio to a lieutenant that he'd just been shot in the leg, only to have the lieutenant ask, "How can you be sure?". But the powerful bureaucrats must have had good reason to dismiss his professional work although these reasons weren't made clear.

Calls by the Federal Association of German Pathologists pushing for more autopsies of vaccinated people were also treated with disdain. No other autopsies have been performed apart from 15 done by Dr. Arne Burkhardt towards the end of 2021, which [found](#) "clear evidence of vaccine-induced autoimmune-like pathology in multiple organs" in 14 of 15 cases, all of which were ignored by all health authorities and mainstream media. No further autopsies have been reported and Dr. Schirmacher and his colleagues have gone quiet, after being so emphatic about the risks and the need for as many autopsies as possible.

On the face of it, the only way to prove what is causing the uptick in mysterious sudden deaths has died a sudden death. But the sensible and mature conclusion to draw from the silence of the autopsy doctors is that they have realised they were wrong and that the powerful bureaucrats and MSM journalists, who know nothing about autopsies, were right. Only a 'conspiracy theorist' would think there was a cover-up going on, right?

## Public Relations – The Mail Online takes a proper gander at SADS

In any case, why bother with autopsies when, according to this article in the *Mail Online*, the best medical minds in Australia are getting to grips with the problem by "opening up a new national register". Yes, that's right, they're at the cutting edge of the Fourth Industrial Revolution (4IR) in which all our problems will be solved by data, algorithms, AI and registers. We're leaving behind the grime of autopsies, post-mortems and diagnosing diseased patients by prodding them with stethoscopes and asking them time-wasting questions. We've got registers now.

Now, at first glance it might seem that the article would not be out of place in *The Onion* or the *Babylon Bee* because of idiotic tautologies like this one:

But pointing out that SADS, a *death* syndrome, is fatal is not cheap satire. It is a reminder that contained in SADS is both the disease and its inescapable prognosis of death.

Another reason why SADS is more of a thing than any other medical thing is that a diagnosis of SADS can never be wrong. It can only be given after death has occurred and only three boxes need to be ticked – did the deceased die without warning; was the deceased an adult in the prime of life and, crucially; do we intend to follow 4IR protocols to establish cause of death by doing nothing other than entering some data in a register? Yes, to all three? Job done. The clever cardiologist who is quoted extensively in the article jokes that SADS is a "diagnosis of nothing" but, once she has taken her tongue out of her cheek, I'm sure she is only too aware of how clever a diagnosis this is.

After correctly informing the reader that *this particular* death syndrome is *fatal*, the article recounts how a typical sudden death unfolds. The victim doesn't come down for breakfast, but no one is concerned because we (white-collar workers at least) all work from home these days so having a lie-in is par for the course. The whole tone of the description of the tragic death of a young person in the peak of life is bizarrely deadpan. Again, you would be wrong to interpret this apparently tasteless approach as cheap satire. The banal tone is deliberately intended to drive home the point that SADS is just another puzzle

in the countless puzzles that the universe, with its twisted sense of humour, flings at humanity on a regular basis.

The article contains pictures of very young actors clutching at their hearts with distressed expressions. Again, you would be wrong to think this is cheap and tasteless. How else are we to understand that SADS really is a thing? I think the visual message here is that if you're under 40 and find yourself clutching at your heart while out jogging, be appropriately but not overly distressed because, while your heart may stop beating and no-one will ever know exactly why, SADS is definitely a thing. And the national register will never forget you.

Because the article is intended to be as informative as possible, it shares some very helpful warning 'signs' of SADS. Top warning sign number one is a family history of a SADS diagnosis. The happy smiley cardiologist who was selected to educate the public about SADS advises that your SADS clock might be silently ticking down if any of the following things have happened to you: fainting from exercise, over-excitement or just being 'startled'. If you are one of those people who faints at the mere thought of exercise, you would have obviously been on the SADS register a very long time ago, had it been in operation. Your continued existence is actually more of a mystery than SADS itself, but let's not complicate things any further. Suffice to say your clock is ticking down and your housemates should not be too surprised if you don't come down for breakfast in the next couple of weeks. At least the Mail Online has prepared them. And you, come to think of it.

If you are wondering why I refer to the cardiologist as "the happy smiley doctor", click the [link to the article](#) and it will be as clear to you as her sparkling eyes and teeth. There is a photo of her beaming as though she has just been awarded the Nobel Prize for medicine when in fact, she is being quizzed about the grizzly business of young people dying for reasons that cannot be fathomed by the best brains in medicine. Why is she happy and smiley instead of sombre and uneasy? Is this another tactless error by the *Mail Online* inadvertently making the whole article look like cheap satire? Not at all. World War II propaganda used the very same technique to placate the masses in times of great uncertainty. Here is a WWII poster of a woman exuding the same brand of devil-may-care insouciance in the face of adversity:





Ok, so I've chosen a Nazi propaganda poster to compare with the happy smiley Australian doctor. Is this in bad taste? Personally, I don't think so. Today's brave new world of forced masking, forced lockdowns and forced medical experimentation must be met head-on with bold comparisons. Yesterday's Nazis weren't big on bodily autonomy and nor are today's Australians (or Canadians, or Austrians, or French for that matter). Am I saying, rather unsubtly, that the Western world is becoming the very thing it fought 75 years ago? Only if you believe that people were robbed of the human right to voluntary informed consent by being coerced into taking the 'vaccines'. 'Vaccines' which, let's be clear, have absolutely nothing to do with the current spate of sudden adult deaths all over the world.

Am I unsubtly hinting that the *Mail Online's* proper gander at SADS is actually propaganda for the

medical establishment? Only if you believe that the responsible thing to do would be to show a picture of a doctor holding her head in her hands, tears of shame flowing from her eyes for failing to at least consider one potential and obvious cause of the mysterious deaths. I think we're all in agreement here – that would not be responsible journalism. Far better to show a happy beaming doctor exuding the confidence of someone who is certain that SADS really is a thing, that it's been a big thing for quite some time and that, while getting a 'diagnosis' of SADS is indeed the end of the world for you, you will die knowing that we are getting on top of this very real thing because we're fighting it with a register and not with futile autopsies.

There's a mention in the article about the role of genes because you can't have a totally mysterious and fatal death syndrome (if the *Mail Online* can get away with this clever tautology, why can't I?) without genes playing a role. Of course they haven't, and never will, find a SADS gene, but that's beside the point when proffering genes causality. Genes are the building blocks of life; your life ends suddenly without warning, ergo there *must have been* something wrong with your building blocks.

The 'best advice' the happy smiley cardiologist can give is: if you're related to anyone who's had an unexplained death, 'it's extremely recommended you see a cardiologist.' Which seems pointless because a SADS diagnosis rests entirely on you having no detectable condition right up to the point you clutch your heart in desperation and keel over. If the condition was a recognised detectable one, mitigation strategies would likely kick in pre-heart clutching and, even if you ended up dying from that condition, your death would be labelled something other than SADS by virtue of its having been detected. SADS is the ultimate catch-22 – the doctors don't know what's wrong with the patient before they die *and* there's no way of knowing afterwards (autopsies now being off the table) so the patient gets a posthumous SADS 'diagnosis', and is successfully entered on a register.

The *Mail Online* article is perfect except for that flawed bit of advice which seems to fail to recognise the complex circular nature of SADS. Telling people to have a thorough check-up before SADS threatens the very existence of SADS. Being cynical, I would say this advice is a ruse to give a boost to the happy smiley doctor's billings.

*Featured image: Vatican's new 20-euro coin dedicated to a theme very close to Pope Francis' heart...the need to be vaccinated, posted by [Diane Montagna on Twitter](#).*

posted by Rhoda Wilson

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