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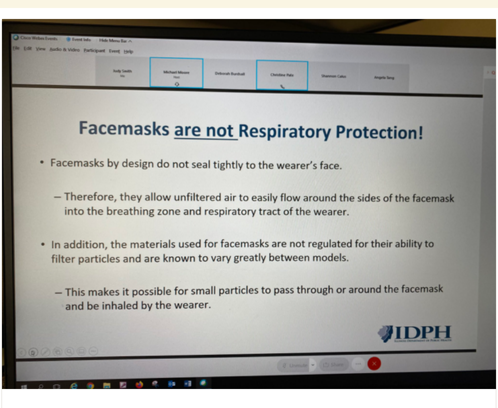


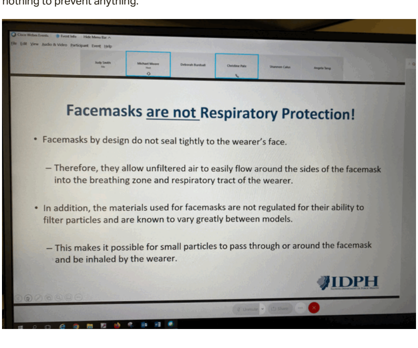
APR 9, 2021 AT 4:12 PM

"Facemasks ARE NOT Respiratory Protection!" - Illinois Dept Health

Nurse on twitter @wine&wit https://twitter.com/WineWit1 posted:

"Then there's this gem from Friday's @IDPH webinar. The speaker actually said "nonrespirator masks cannot filter small particles...like viruses".

I was stunned listening to that admission. Yet they continue to endorse mere cloth rags or procedure masks despite all the evidence that concludes they do little to nothing to prevent anything.



This is your mask when you exhale.

FULL FILM HERE https://www.patreon.com/posts/inoculum-of-2-49778922 *The Inoculum of Truth is the world's most comprehensive & accurate Coronavirus documentary film series to date.*

I have provided over 9 hours of peer reviewed published medical science journals & the highest tiers of Published evidence on screen with government data resources for all claims made. This film is irrefutable. That is far more data & evidence than any public health authority has provided to the public.

see 8 minute trailer here https://tinyurl.com/w4f2sep6

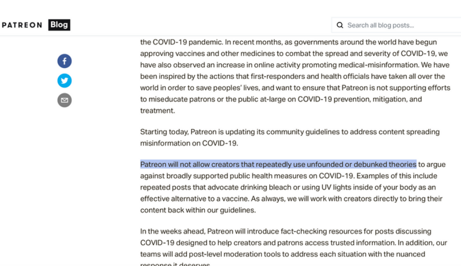
There is so much misinformation & confusion going around. We need to do a deep dive into the available data & make sense from the worlds leading experts in the field & compare it to what is being recommended & how those recommendations are perfectly aligned with a pre ordained agenda by multinational tech, surveillance capitalism, & 4th industrial revolution giants, the patents & policies being put in place that serve their purpose. I do not wish to spread sensationalism, or false claims, which is why i've included all my cited references on screen for fact checking all claims made.

IInoculum of Truth 2💉🦠🧬 Cov🆔 2021 ☣️ CoronaVirus Documentary 👀 Follow The Psyence 🤖Lifting The Veil part 1 here https://tinyurl.com/aevy7ftx

If you disagree or are offended with parts of the video, I ask you to actually take notes, make a researched rebuttal, please feel free & post the evidence that provides correction & I will take measures to review it and correct my work accordingly. #Coronavirus, #LiftingTheVeil #Science

CRUCIAL UPDATE!

PATREON SUPPORT IS TRYING TO MAKE ME DELETE THIS DATA, CLAIMING THAT IT VIOLATES "MEDICAL MISINFO" POLICY AGAINST "UNFOUNDED OR DEBUNKED THEORIES"!



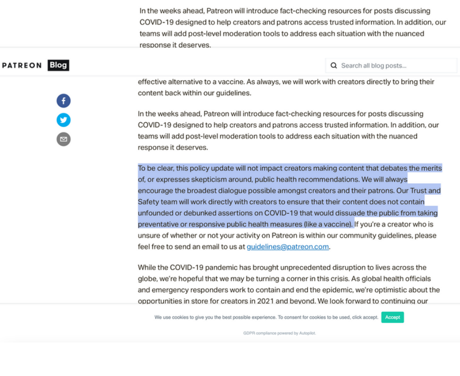
PATREON Blog

the COVID-19 pandemic. In recent months, as governments around the world have begun approving vaccines and other medicines to combat the spread and severity of COVID-19, we have also observed an increase in online activity promoting medical-misinformation. We have been inspired by the actions that first-responders and health officials have taken all over the world in order to save peoples' lives, and want to ensure that Patreon is not supporting efforts to miseducate patrons or the public at-large on COVID-19 prevention, mitigation, and treatment.

Starting today, Patreon is updating its community guidelines to address content spreading misinformation on COVID-19.

Patreon will not allow creators that repeatedly use unfounded or debunked theories to argue against broadly supported public health measures on COVID-19. Examples of this include repeated posts that advocate drinking bleach or using UV lights inside of your body as an effective alternative to a vaccine. As always, we will work with creators directly to bring their content back within our guidelines.

In the weeks ahead, Patreon will introduce fact-checking resources for posts discussing COVID-19 designed to help creators and patrons access trusted information. In addition, our teams will add post-level moderation tools to address each situation with the nuanced response it deserves.



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effective alternative to a vaccine. As always, we will work with creators directly to bring their content back within our guidelines.

In the weeks ahead, Patreon will introduce fact-checking resources for posts discussing COVID-19 designed to help creators and patrons access trusted information. In addition, our teams will add post-level moderation tools to address each situation with the nuanced response it deserves.

To be clear, this policy update will not impact creators making content that debates the merits of, or expresses skepticism around, public health recommendations. We will always encourage the broadest dialogue possible amongst creators and their patrons. Our Trust and Safety team will work directly with creators to ensure that their content does not contain unfounded or debunked assertions on COVID-19 that would dissuade the public from taking preventative or responsive public health measures (like a vaccine). If you're a creator who is unsure of whether or not your activity on Patreon is within our community guidelines, please feel free to send an email to us at guidelines@patreon.com.

While the COVID-19 pandemic has brought unprecedented disruption to lives across the globe, we're hopeful that we may be turning a corner in this crisis. As global health officials and emergency responders work to contain and end the epidemic, we're optimistic about the opportunities in store for creators in 2021 and beyond. We look forward to continuing our

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DEAR PATREON TRUST AND SAFETY TEAM: *THIS POST IS NOT UNSUBSTANTIATED OR UNFOUNDED OR DEBUNKED THEORY*, IT IS WELL ESTABLISHED MEDICAL SCIENTIFIC FACT IN THE PEER REVIEWED LITERATURE!

FROM THE EUROPEAN CDC!

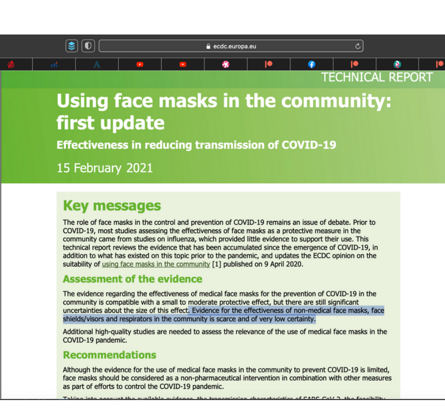
"The role of face masks in the control and prevention of COVID-19 remains an issue of debate.

Prior to COVID-19, most studies assessing the effectiveness of face masks as a protective measure in the community came from studies on influenza, which provided little evidence to support their use.

This technical report reviews the evidence that has been accumulated since the emergence of COVID-19, in addition to what has existed on this topic prior to the pandemic,"

. Evidence for the effectiveness of non-medical face masks, face shields/visors and respirators in the community is scarce and of very low certainty.

SOURCE:
https://www.ecdc.europa.eu/sites/default/files/documents/covid-19-face-masks-community-first-update.pdf

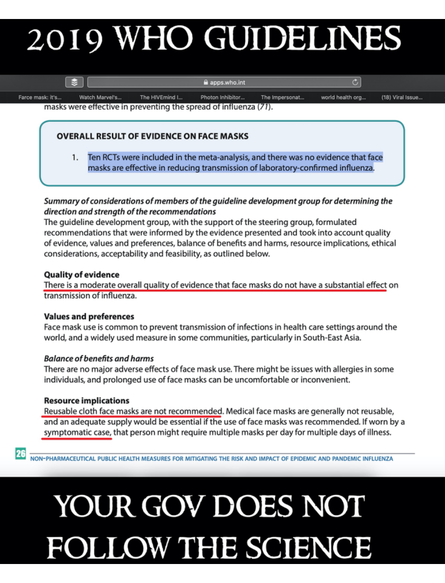


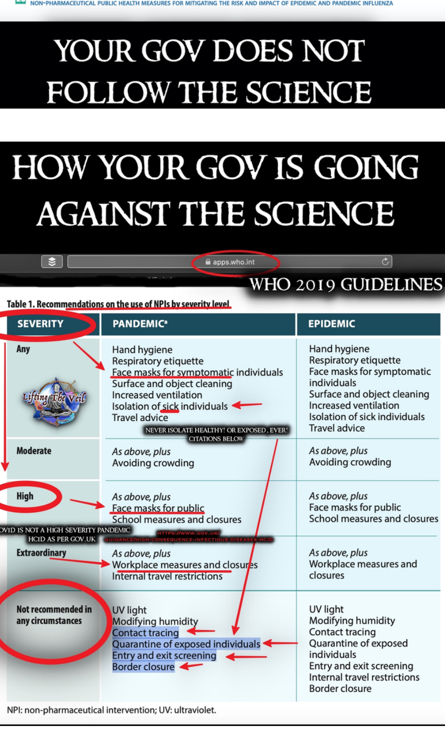
Masks are neither effective nor safe:

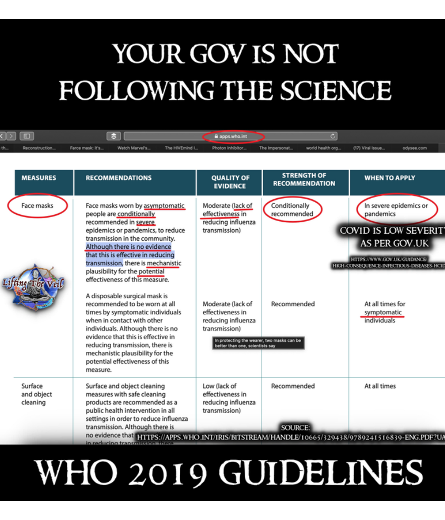
Review of the Medical Literature Non-pharmaceutical public health measures for mitigating the risk and impact of epidemic and pandemic influenza

https://www.who.int/influenza/publications/public_health_measures/publication/en/

Authors: World Health Organization







see my ENTIRE ARCHIVE of data and studies confirming this on masks vs respirators.
Mask Debate: Review of Best Data 😷😷😷

https://www.patreon.com/posts/mask-debate-of-39459071?cid=57200625

FURTHER CITED CONCLUSIVE STUDIES: PUBLISHED IN JOURNAL OF AMERICAN MEDICAL ASSOCIATION
A HIGHLY PRESTIGIOUS MEDICAL JOURNAL!

Original Investigation

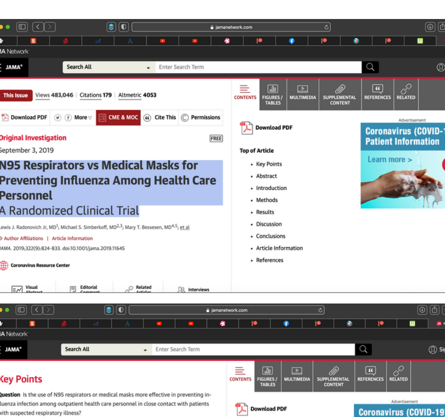
September 3, 2019

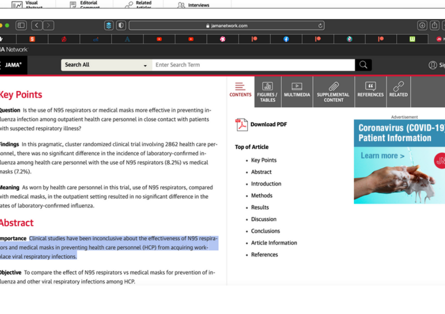
N95 Respirators vs Medical Masks for Preventing Influenza Among Health Care PersonnelA Randomized Clinical Trial

Lewis J. Radonovich Jr, MD1; Michael S. Simberkoff, MD2,3; Mary T. Bessesen, MD4,5; et alAlexandria C. Brown, PhD6; Derek A. T. Cummings, PhD7,8; Charlotte A. Gaydos, MD9; Jenna G. Los, MLA9; Amanda E. Krosche, BS9,10; Cynthia L. Gibert, MD11,12; Geoffrey J. Gorse, MD13,14; Ann-Christine Nyquist, MD5,15; Nicholas G. Reich, PhD6; Maria C. Rodriguez-Barradas, MD16,17; Connie Savor Price, MD5,18; Trish M. Perl, MD8,19; for the ResPECT investigators

Author Affiliations Article Information

JAMA. 2019;322(9):824-833. doi:10.1001/jama.2019.11645





Key Points

Question Is the use of N95 respirators or medical masks more effective in preventing influenza infection among outpatient health care personnel in close contact with patients with suspected respiratory illness?

Findings In this pragmatic, cluster randomized clinical trial involving 2862 health care personnel, there was no significant difference in the incidence of laboratory-confirmed influenza among health care personnel with the use of N95 respirators (8.2%) vs medical masks (7.2%).

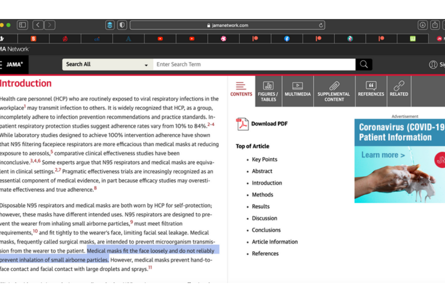
Meaning As worn by health care personnel in this trial, use of N95 respirators, compared with medical masks, in the outpatient setting resulted in no significant difference in the rates of laboratory-confirmed influenza.

Abstract

Importance Clinical studies have been inconclusive about the effectiveness of N95 respirators and medical masks in preventing health care personnel (HCP) from acquiring workplace viral respiratory infections.

Objective To compare the effect of N95 respirators vs medical masks for prevention of influenza and other viral respiratory infections among HCP.

Importance "*Clinical studies have been inconclusive about the effectiveness of N95 respirators and medical masks in preventing health care personnel (HCP) from acquiring workplace viral respiratory infections."*



Introduction

Health care personnel (HCP) who are routinely exposed to viral respiratory infections in the workplace[1] may transmit infection to others. It is widely recognized that HCP, as a group, incompletely adhere to infection prevention recommendations and practice standards. In-patient respiratory protection studies suggest adherence rates vary from 10% to 84%.[2-4] While laboratory studies designed to achieve 100% intervention adherence have shown that N95 filtering facepiece respirators are more efficacious than medical masks at reducing exposure to aerosols,[5] comparative clinical effectiveness studies have been inconclusive.[3,4,6] Some experts argue that N95 respirators and medical masks are equivalent in clinical settings.[2,7] Pragmatic effectiveness trials are increasingly recognized as an essential component of medical evidence, in part because efficacy studies may overestimate effectiveness and true adherence.[8]

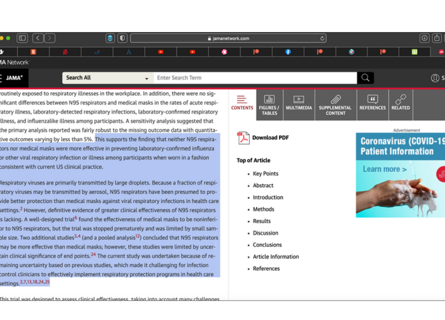
Disposable N95 respirators and medical masks are both worn by HCP for self-protection; however, these masks have different intended uses. N95 respirators are designed to prevent the wearer from inhaling small airborne particles,[9] must meet filtration requirements,[10] and fit tightly to the wearer's face, limiting facial seal leakage. Medical masks, frequently called surgical masks, are intended to prevent microorganism transmission from the wearer to the patient. Medical masks fit the face loosely and do not reliably prevent inhalation of small airborne particles. However, medical masks prevent hand-to-face contact and facial contact with large droplets and sprays.[11]

"there was no significant difference between the effectiveness of N95 respirators and medical masks in preventing laboratory-confirmed influenza among participants routinely exposed to respiratory illnesses in the workplace.

In addition, there were no significant differences between N95 respirators and medical masks in the rates of acute respiratory illness, laboratory-detected respiratory infections, laboratory-confirmed respiratory illness, and influenzalike illness among participants.

A sensitivity analysis suggested that the primary analysis reported was fairly robust to the missing outcome data with quantitative outcomes varying by less than 5%.

This supports the finding that neither N95 respirators nor medical masks were more effective in preventing laboratory-confirmed influenza or other viral respiratory infection or illness among participants when worn in a fashion consistent with current US clinical practice.



routinely exposed to respiratory illnesses in the workplace. In addition, there were no significant differences between N95 respirators and medical masks in the rates of acute respiratory illness, laboratory-detected respiratory infections, laboratory-confirmed respiratory illness, and influenzalike illness among participants. A sensitivity analysis suggested that the primary analysis reported was fairly robust to the missing outcome data with quantitative outcomes varying by less than 5%. This supports the finding that neither N95 respirators nor medical masks were more effective in preventing laboratory-confirmed influenza or other viral respiratory infection or illness among participants when worn in a fashion consistent with current US clinical practice.

Respiratory viruses are primarily transmitted by large droplets. Because a fraction of respiratory viruses may be transmitted by aerosol, N95 respirators have been presumed to provide better protection than medical masks against viral respiratory infections in health care settings.[2] However, definitive evidence of greater clinical effectiveness of N95 respirators is lacking. A well-designed trial[6] found the effectiveness of medical masks to be noninferior to N95 respirators, but the trial was stopped prematurely and was limited by small sample size. Two additional studies[3,4] (and a pooled analysis[12]) concluded that N95 respirators may be more effective than medical masks; however, these studies were limited by uncertain clinical significance of end points.[24] The current study was undertaken because of remaining uncertainty based on previous studies, which made it challenging for infection control clinicians to effectively implement respiratory protection programs in health care settings.[2,7,13,18,24,25]

Respiratory viruses are primarily transmitted by large droplets. Because a fraction of respiratory viruses may be transmitted by aerosol, N95 respirators ***have been presumed to provide better protection*** than medical masks against viral respiratory infections in health care settings.2 ***However, definitive evidence of greater clinical effectiveness of N95 respirators is lacking.***

A well-designed trial6 found the effectiveness of medical masks to be noninferior to N95 respirators, ***but the trial was stopped prematurely and was limited by small sample size.***

Two additional studies3,4 (and a pooled analysis12) concluded that N95 respirators ***may be*** more effective than medical masks; ***however, these studies were limited by uncertain clinical significance of end points***.24

The current study was undertaken because of remaining uncertainty based on previous studies, which made it challenging for infection control clinicians to effectively implement respiratory protection programs in health care settings.2,7,13,18,24,25

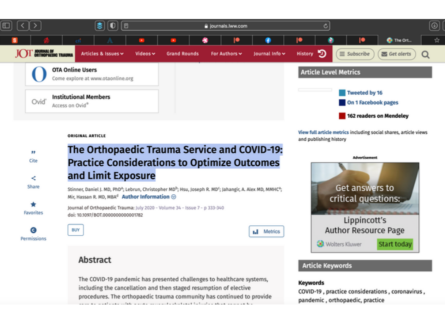
ORIGINAL ARTICLE

The Orthopaedic Trauma Service and COVID-19: Practice Considerations to Optimize Outcomes and Limit Exposure

Author Information Stinner, Daniel J. MD, PhDa; Lebrun, Christopher MDb; Hsu, Joseph R. MDc; Jahangir, A. Alex MD, MMHCa; Mir, Hassan R. MD, MBAd

Journal of Orthopaedic Trauma: July 2020 - Volume 34 - Issue 7 - p 333-340doi: 10.1097/BOT.0000000000001782

https://journals.lww.com/jorthotrauma/Abstract/2020/07000/The_Orthopaedic_Trauma_Service_and_COVID_19_.1.aspx



airborne contaminants should occur before anyone who is not wearing respiratory protection enters the room and before environmental cleaning is done.[17,22,23] In addition, some authors have also advocated for the establishment of zones or levels of protection, so that personnel are fully protected when at the point of maximal potential for exposure in the operating room.[23]

Given the concerns for global shortages of PPE, rationing of PPE has occurred at many medical facilities, leading to a growing concern for appropriate personal protection (Table 1). Although standard surgical masks may provide enough protection for the prevention of influenza and other viral respiratory infections in health care personnel,[24] they may not be as effective as the N95 respirator at preventing infection with SARS-CoV-2.[8,25] Standard surgical masks and respirators are usually assigned a "fit factor," which is a quantitative estimate of the concentration of a substance in the ambient air to the concentration of the substance in the respirator when it is worn.[26] Most standard surgical masks have a

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fit factor between 2.5 and 9. Adding additional surgical masks, that is, wearing multiple masks, can increase the fit factor, but the fit factor is still less than 15 even when 5 masks are worn.[27] In addition, taping the surgical mask to your face improves the fit factor by nearly a factor of 2,[28] but regardless of these adjuncts, they do not meet the qualification of a "respirator" and fall far short of the N95 respirator that has a fit factor of 100. An adjunct that is included in the algorithm [redacted]

ALL THE STUDIES FIND THAT MASKS ARE NOT RESPIRATORY PROTECTION!

Here are key anchor points to the extensive scientific literature that establishes that wearing surgical masks and respirators (e.g., "N95") does not reduce the risk of contracting a verified illness:

Jacobs, J. L. et al. (2009) "Use of surgical face masks to reduce the incidence of the common cold among health care workers in Japan: A randomized controlled trial." American Journal of Infection Control, Volume 37, Issue 5, 417 – 419.
https://www.ncbi.nlm.nih.gov/pubmed/19216002

N95-masked health-care workers (HCW) were significantly more likely to experience headaches. Face mask use in HCW was not demonstrated to provide benefit in terms of cold symptoms or getting colds.

Cowling, B. et al. (2010) "Face masks to prevent transmission of influenza virus: A systematic review," Epidemiology and Infection, 138(4), 449–456.
https://www.cambridge.org/core/journals/epidemiology-and-infection/article/face-masks-to-prevent-transmission-of-influenza-virus-a-systematic-%20review/64D368496EBDE0AFCC6639CCC9D8BC05

None of the studies reviewed showed a benefit from wearing a mask, in either HCW or community members in households (H). See summary Tables 1 and 2 therein.

bin-Reza et al. (2012) "The use of masks and respirators to prevent transmission of influenza: a systematic review of the scientific evidence," Influenza and Other Respiratory Viruses 6(4), 257–267. https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1750-2659.2011.00307.x

"There were 17 eligible studies. ... None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection."

Smith, J.D. et al. (2016) "Effectiveness of N95 respirators versus surgical masks in protecting health care workers from acute respiratory infection: a systematic review and meta-analysis," CMAJ Mar 2016 https://www.cmaj.ca/content/188/8/567

"We identified six clinical studies .... In the meta-analysis of the clinical studies, we found no significant difference between N95 respirators and surgical masks in associated risk of (a) laboratory-confirmed respiratory infection, (b) influenza-like illness, or (c) reported work-place absenteeism."

Offeddu, V. et al. (2017) "Effectiveness of Masks and Respirators Against Respiratory Infections in Healthcare Workers: A Systematic Review and Meta-Analysis," Clinical Infectious Diseases, Volume 65, Issue 11, 1 December 2017, Pages 1934–1942,
https://academic.oup.com/cid/article/65/11/1934/4068747

"Self-reported assessment of clinical outcomes was prone to bias. Evidence of a protective effect of masks or respirators against verified respiratory infection (VRI) was not statistically significant"; as per Fig. 2c therein:

Radonovich, L.J. et al. (2019) "N95 Respirators vs Medical Masks for Preventing Influenza Among Health Care Personnel: A Randomized Clinical Trial," JAMA. 2019; 322(9): 824–833.
https://jamanetwork.com/journals/jama/fullarticle/2749214

"Among 2862 randomized participants, 2371 completed the study and accounted for 5180 HCW-seasons. ... Among outpatient health care personnel, N95 respirators vs medical masks as worn by participants in this trial resulted in no significant difference in the incidence of laboratory-confirmed influenza."

Long, Y. et al. (2020) "Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta-analysis," J Evid Based Med. 2020; 1- 9.
https://onlinelibrary.wiley.com/doi/epdf/10.1111/jebm.12381

"A total of six RCTs involving 9,171 participants were included. There were no statistically significant differences in preventing laboratory-confirmed influenza, laboratory-confirmed respiratory viral infections, laboratory-confirmed respiratory infection, and influenza-like illness using N95 respirators and surgical masks. Meta-analysis indicated a protective effect of N95 respirators against laboratory-confirmed bacterial colonization (RR = 0.58, 95% CI 0.43-0.78). The use of N95 respirators compared with surgical masks is not associated with a lower risk of laboratory-confirmed influenza."

Conclusion Regarding That Masks Do Not Work

No RCT study with verified outcome shows a benefit for HCW or community members in households to wearing a mask or respirator. There is no such study. There are no exceptions.

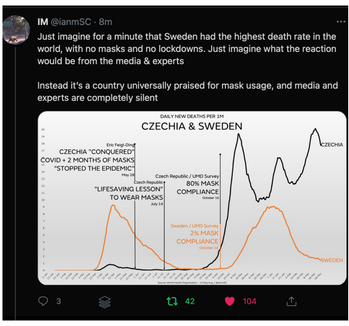
Likewise, no study exists that shows a benefit from a broad policy to wear masks in public (more on this below).

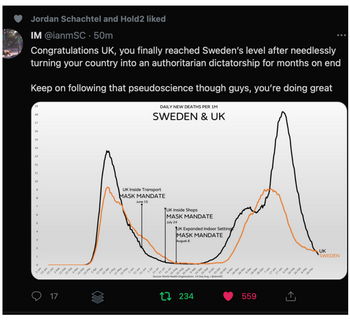
Furthermore, if there were any benefit to wearing a mask, because of the blocking power against droplets and aerosol particles, then there should be more benefit from wearing a respirator (N95) compared to a surgical mask, yet several large meta-analyses, and all the RCT, prove that there is no such relative benefit.

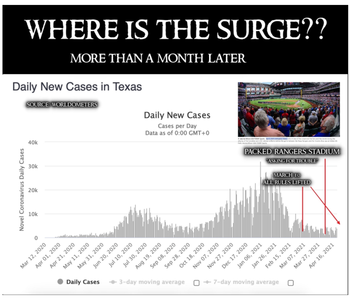
Masks and respirators do not work.

(Excerpt from link below)

https://www.rcreader.com/commentary/masks-dont-work-covid-a-review-of-science-relevant-to-covide-19-social-policy?fbclid=IwAR0fndWSaafaQt5oY1ASlNuG2xn4gROxrUrzQ1xPBg8-TK3m3mKsVDTpVL4







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