

# DOOR TO FREEDOM

## TAKING A GOOD LOOK AT PANDEMIC PREPAREDNESS

Meryl Nass, MD

### 1. As currently planned, Pandemic Preparedness is a scam/boondoggle/Trojan horse designed to:

- a) transfer tens or hundreds of \$ billions in taxpayer funds to favored industries, nations and the WHO,
- b) justify censorship and propaganda in the name of public health,
- c) transfer sovereignty and decision-making for public health to the WHO Director-General,
- d) use the “One Health” concept to wrap humans, animals, plants and ecosystems, including climate change, into the “One Health” basket under the authority of the WHO,
- e) obtain more potential pandemic pathogens (biowarfare agents) and broadly distribute them, increasing the likelihood of pandemics and making it impossible to know where they came from,
- f) possibly to increase the number of pandemics, which can justify more vaccines, vaccine passports and digital currencies, and greater control over populations,
- g) justify the imposition of rapidly produced, poorly tested and liability-free vaccines; and possibly mandate unlicensed vaccines, as was done during the COVID pandemic,
- h) continue a vaccine program despite negative efficacy overall and serious medical side effects.

### 2. We have failed to prevent, detect or be prepared for biological warfare/ pandemics:

- a) The \$ multi-billion air sampling programs instituted by the federal government in large cities after 9/11 failed to be useful.
- b) Available tests are either too sensitive or too insensitive to detect a deliberate release of microorganisms.
- c) Purchases of biodefense materiel have often been from well-connected companies to obtain products that were not used and later expired, such as anthrax and smallpox vaccines and drugs.
- d) Purchases of masks, gloves and gowns were not replenished after the small US Ebola outbreak of 2014 and were generally unavailable for COVID.
- e) Personnel have not been trained on the proper use of PPE, because due to shortages CDC guidelines were adapted to permit reuse, despite declining filtration and greater risk of contamination with prolonged or repeat use.
- f) With 200 accidents with potential pandemic pathogens (PPPs or “select agents”) being reported to the CDC’s Select Agent program yearly, the US has proved that even with the best biosafety level 3 and 4 labs and training, **research on PPPs cannot be performed safely.**
- g) So far, no one has been unable to engineer around all human and mechanical error.
- h) We cannot 100% prevent infected experimental animals biting researchers and animal handlers

### 3. What would pandemic prevention, preparedness and response really look like if the WHO was serious about this issue?

- a) There would be strict oversight and limitations on the research on PPP’s to be certain it was only for peaceful purposes, such as vaccine or drug development.
- b) The search for new PPP’s would be discouraged, not incentivized by the pandemic treaty.
- c) The transfer of PPP’s would be strictly regulated, in accordance with Security Council resolution 1540 and the US Select Agent regulations.
- d) Gain of Function research would be strictly prohibited.
- e) Former CDC Director Redfield told Congress that no drug, vaccine or therapeutic had been developed through biowarfare (Gain of Function) research, to his knowledge. GOF should cease.
- f) The Biological Weapons Convention of 1972 should be strengthened with the addition of provisions for challenge inspections and punishments for noncompliance.
- g) Broad spectrum, cheap, licensed antiviral drugs like hydroxychloroquine and ivermectin should be made available, not suppressed.