

Twitter Thread by Alison Blunt

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**1/ "Unbelievable: WHO warns of unreliability of PCR test" <https://t.co/659Xk3WOBO>
pcr-test/ 22.1.21 Auto translation quotes below**

'Anyone who expressed doubts about whether the PCR test, co-developed in large part by Christian Drosten, can really provide evidence of infection..'

2/ '..is virtually considered a heretic in Germany, or worse, a Corona denier. When Luthe, a non-party member of the Berlin parliament, saw doubts about the test's informative value in terms of the Infection Protection Act confirmed by a response from the Berlin Senate..'

3/ '..in November 2020, I reported on it [<https://t.co/RvCq02qib3>]. The report was accompanied by a warning from Facebook that fact-checkers had found it to be false. In doing so, they proceed with argumentative shell games (as I described here) [<https://t.co/8AwYIRPhoy>].'

4/ 'And now this! All the self-proclaimed "fact-finders" have to dress warmly. In a new "information note" [<https://t.co/mMKpFQarXr>], the World Health Organisation (WHO) announced something remarkable on Wednesday. I ask for your understanding if I now reproduce all the..'

5/ '..technical terms in the original - but for the sake of accuracy it has to be. I'll try to explain them afterwards: "WHO diagnostic test guidelines for SARS-CoV-2 state that careful interpretation of weak positive results is required. The cycle threshold (Ct) required..'

6/ '..to detect the virus is inversely proportional to the patient's viral load." This means that the lower the "viral load", the more laboratory cycles are needed to find anything (the Ct value represents the number of cycles).
It goes on to say, "If the test results do not..'

7/ '..match the clinical presentation, a new sample should be taken and retested using the same or a different NAT technology." So if there are no symptoms, and yet a positive test result, retesting should be done.
The organisation then states: "WHO reminds users of in vitro..'

8/ '..diagnostic medical devices that the prevalence of disease changes the predictive value of test results. As prevalence decreases, the risk of false positive results increases. This means that the probability that a person with a positive result (SARS-CoV-2 detected) is..'

9/ ..'actually infected with SARS-CoV-2 decreases with decreasing prevalence, regardless of the claimed specificity." In short, the fewer people who are sick, the higher the risk that healthy people will test positive. And the lower the probability that someone who tests..'

10/ ..'positive is actually infected. And - attention - all this is "independent of the claimed specificity": specificity of a diagnostic test procedure is the probability that healthy people are really recognised as healthy. So, to put it simply, there is a risk of false..'

11/ ..'positive results regardless of how high the "claimed" error rate of the test is.

In conclusion, WHO writes: "Most PCR tests are specified as aids to diagnosis. Therefore, health care providers must consider each result in combination with the time of sample collection,..'

12/ ..'sample type, test specifications, clinical observations, patient history, confirmed status of contacts and epidemiological information." This means: there is a lot of interpretation involved in the tests, the room for manoeuvre is large, and in order to be able to..'

13/ ..'classify the test at all, one must also take into account the contacts of the person tested and his or her condition. All this fundamentally contradicts how, to the best of my knowledge, the tests have been handled in Germany so far. According to the WHO, the purpose..'

14/ ..'of the "information note" is: "To clarify the information previously provided by the WHO. This note replaces the WHO information note issued on 14 December 2020" Even then, the WHO went in the same direction and one could interpret its statements as..'

15/ ..'a warning. [<https://t.co/JzLD82mD74>] But it was still much more cautious. Now its warnings are clearer.

The organisation is pouring water on the mills of precisely those critics who have long criticised the validity of PCR tests. And they complain that in Germany,..'

16/ ..'for example, people still had to be quarantined even if virus components were only found in the laboratory after a very large number of cycles (Ct value). Even one of Drosten's partners has criticised this (see my article "Half of those tested not infectious").'

17/ 'The portal <https://t.co/hDz0758zc9> [<https://t.co/uL0Uw1GBrW>] evaluates the WHO warning as follows: "Essentially, this means that, according to the WHO, a PCR test is useless if a person tested shows NO symptoms. Since the majority of those tested for SARS-CoV-2..'

18/ ..'are asymptomatic, i.e. show no symptoms, one can imagine the approximate extent of the deception, the fraud, the measurement error." The strikethroughs are intentional and a stylistic device of the portal. Doubts about the significance of the PCR test have existed for..'

19/ ..'a long time. I raised them at the Federal Press Conference on 10 November 2020. And I wanted to know explicitly whether the test really proved an infection in the sense of the law. At the time, I found the Federal Government's answer evasive ..'

20/ ..' & unsatisfactory (see here). [<https://t.co/Z5CCbDJAOf>]. After the information from the WHO quoted above, my doubts are now much greater than before. "If a PCR test is carried out, then we assume a specificity of almost one hundred percent" - this is how Sebastian Gülde,..'

21/ ..'spokesperson of the Federal Ministry of Health, answered my repeated question about the error rate of the tests at the Federal Press Conference (see here). [<https://t.co/HuvYtdKDkA>] In plain language, the spokesperson's statement meant: The PCR tests are as good ..'

22/ ..'as error-free. And now the WHO itself warns - I repeat the core statement from above: "As prevalence (spread of the disease) decreases, the risk of false positive results increases. This means that the probability that a person with a positive ..'

23/ ..'result (SARS-CoV-2 detected) is actually infected with SARS-CoV-2 decreases with decreasing prevalence (spread of the disease), regardless of the claimed specificity (error rate)." There are no binding limits for Ct values above which a test is considered positive..'

24/ ..'in Germany. Each laboratory decides for itself. At least that was the case until recently. When I asked whether a standardisation was planned, Spahn spokesperson Gülde answered on 23 October that he was not aware of any such plans (see here). [<https://t.co/ejI7RkR3pF>]

25/ 'You have to bear all this in mind: Since last spring, thousands and thousands of people in Germany have been deprived of their freedom and effectively sent to house arrest because of positive PCR tests, for which every laboratory can apply its own standards - and for..'

26/ ..'which the WHO itself is now warning of the risk of false positive results. This should have become clear to any attentive individual, even without the WHO, because in many cases celebrities such as professional footballers have been "cleared" after positive tests,..'

27/ ..'i.e. the first positive test result is refuted by further negative tests.

This raises the question even more vehemently than before on what basis our basic rights are being massively restricted, economic life is being largely shut down, gigantic negative consequences..'

28/ ..'are being accepted, when what is currently probably the most important parameter for measuring health risks stands on such shaky ground.'

'TRANSPARENCY NOTE:' [see image]

Original article <https://t.co/fRVdB6qJBo> published 22.1.21. Auto-translation in thread.

TRANSPARENCY NOTE: As a medical layman, I am as cautious as possible in my assessment of medical facts. Nevertheless, I am not immune to mistakes. For this reason, I am always grateful for expert advice, and I explicitly do not claim to be spreading "truths". I want to point out what I see as contradictions and stimulate a broad discussion about them, because that is precisely what I am missing. This morning at 10 o'clock I will be at a federal press conference with Health Minister Spahn, RKI head Wieler and Christian Drosten to ask them about the issues raised here. I will report back to you on their answers, and you will also be able to see them for yourself on Phoenix.