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April 13, 2023

ND Department of Human Services
600 East Boulevard Avenue, Dept. 325
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Attn: Mr. Chris Jones, HHS Commissioner; Dr. Nizar Wehbi, State Health Officer; and all members of the ND State Health Council

By regular mail and email: dhseo@nd.gov

Re: State COVID vaccination policies

Greetings:

ND HHS wants the public to believe that the COVID vaccines are “safe and effective.” But is it true that they are safe and effective?

We can begin to grapple with this question by asking more questions. First, why does HHS believe this to be true? I am told it is because the CDC tells them so.¹ Second, is it reasonable for HHS to believe this on the authority of the CDC? I believe the answer is no, but I will have to spill some digital ink to begin to make the case.

But first let me anticipate some objections. Some would say that a layman really can’t have an informed opinion on complex public health matters. Political scientist Aaron Wildavsky disagreed. See his book, *But Is It True? A Citizen’s Guide to Environmental Health and Safety Issues*.² Wildavsky not only showed how non-experts can competently participate in decisions with scientific content, he also argued this is something we have to do in order to fulfill the requirements of citizenship in this scientific and technological age.

Some would also say that it is always best to trust the experts. In this case, the CDC is the leading expert on all matters COVID. Its pronouncements are based on the best science, gilt-edged, and unimpeachable, they say. However, that simply begs the question and flies in the

¹ “COVID-19 vaccines are safe, effective, and free.” <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/index.html>

² Aaron Wildavsky, *But Is It True? A Citizen’s Guide to Environmental Health and Safety Issues* (Cambridge: Harvard University Press, 1995)

face of common sense, human experience, and recent history³. To be sure, before the pandemic it was reasonable to presume their authoritativeness, but that presumption is not irrebuttable. It is now quite timely to question authority.

Let's put Dr. Anthony Fauci in the dock as the expert witness defending the proposition that the vaccines are safe and effective. There are good reasons for making him the face and representative of the alphabet soup of entities within HHS (CDC, FDA, NIH, NIAID, and others) who pushed for mass vaccination. Fauci was our COVID czar during the pandemic. He is also reputed to have been the de facto head of the entire HHS. He, more than anyone, is responsible for making mass vaccination the centerpiece of our nation's response to the pandemic.⁴

In the courtroom there are many ways to impeach or attack the credibility of an expert witness. (1) The expert may have a fancy degree (Fauci has several) and loads of experience (he's been at it for over 40 years) but is he competent? In other words, does he get things right? Do his predictions prove to be true? Do his policies achieve the desired outcomes? (2) The expert may be brilliant, but is he honest? Proving that a witness has previously lied (intentionally made false claims), especially on a key issue, should be devastating to that witness's credibility. (3) The expert may be very believable, but has he contradicted himself? For example, has he claimed "X is true" on one occasion, but he now is saying "X is not true"? (4) Does the expert have a conflict of interest? (5) Has the expert made any damning admissions? (6) Has the expert committed prior bad acts? (7) Is the expert biased? And so on.

So, how has Dr. Fauci earned our distrust?

A. By telling us things that are not true.

Dr. Robert Malone offers us a sample of the government's false COVID claims (1-9)⁵:

1. SARS-CoV-2 coronavirus has a far higher fatality rate than influenza virus by several orders of magnitude.
2. No one has immunity, because this virus is new ("novel"), and so expedited vaccine development and deployment is essential.
3. Everyone has a significant risk of death from COVID19.
4. Everyone is dangerous and spreads the infection.
5. Asymptomatic people are major drivers of the spread of disease.
6. Locking down—closing schools and businesses, confining people to their homes, stopping non-COVID medical care, and eliminating travel—will stop/eliminate the virus.
7. Masks will protect everyone and stop the spread.
8. Immune protection can only be obtained with a vaccine.

³ A good place to start cracking the façade of the CDC's infallibility is Chapter 7 of Robert W. Malone's book (cited later), titled "Scientific Fraud at the Centers for Disease Control." Robert W. Malone, *Lies My Gov't Told Me and the Better Future Coming*, (New York: Skyhorse Publishing, 2022), 89-94.

⁴ Hereafter, as I level charges against Fauci, I arguably am implicating the rest of the federal public health apparatus, including the CDC. Likewise, if I indict any specific public health official or agency, that charge implicates Fauci as well. After all, he was in charge.

⁵ Malone, *Lies My Gov't Told Me*, 89-94.

9. Natural immunity conferred by infection and recovery is short-lived and inferior to vaccine-induced immunity.

Here are some others:

10. The virus did not come the lab in Wuhan.
11. The Wuhan lab was not conducting US-funded gain-of-function research.
12. Ivermectin is just horse medicine.⁶
13. Ivermectin has no anti-viral properties.⁷
14. Ivermectin and hydroxychloroquine are not an effective COVID treatments.
15. Remdesivir is an effective and safe therapeutic for acute infection.⁸

Depending on who made the claim and when, the above examples certainly could include falsehoods advanced in good faith. Such falsehoods don't undermine integrity but certainly undermine competence. It is also possible that some of the false claims were made while the proponents were in a state of willful ignorance. Again, this doesn't necessarily undermine integrity, but it certainly undermines the proponents' professionalism.

At the other end of the spectrum are bold-faced lies (falsehoods advanced even though the proponent knew the claim to be false). I offer 8, 9, 12,13, and 15⁹ as candidates.

And then there are the various instances of intellectual dishonesty, all of which involve some kind of deception. Some false claims were forcefully advanced even though they had no public health precedent (6) or had weak scientific support (7). Many were presented as settled and established science even though they were in fact highly controverted. Some false claims were based on conjecture even though there was little or no evidence to back them up at the time (1-5). Some were, and still are being, promoted even though there is strong evidence they are not true (11).

Back to bold-faced lies: A prime example is the claim that the mRNA injections would protect against infection (8). After she left government service, Dr. Deborah Birx, the White House Coronavirus Response Coordinator under President Donald Trump from 2020 to 2021 (and a Fauci protégé'), stunningly admitted they knew this claim was contradicted by the established science of the time. Yet she helped lead the effort to make vaccination the centerpiece of their COVID strategy.¹⁰

⁶ <https://www.theguardian.com/us-news/2021/aug/23/fda-horse-message-ivermectin-covid-coronavirus>

⁷ <https://www.aier.org/article/the-fdas-war-against-the-truth-on-ivermectin/>

⁸ Dr. Peter McCullough says this about the drug: "Remdesivir has two problems. First, it doesn't work. Second, it is toxic and it kills people." Quoted in *The Real Anthony Fauci*, 70.

⁹ As will be related later, how remdesivir gained FDA approval is a particularly sordid tale: in short, by administrative fiat supported by arguably fraudulent science.

¹⁰ <https://www.westernjournal.com/dr-birxs-bombshell-vaccine-admission-knew-vaccines-wouldnt-protect-infection/>

Dr. David Bell reports that Anthony Fauci has also come clean.¹¹ According to Bell, Fauci co-authored a recent paper¹² in which he made damning admissions. Bell states:

The authors of this paper are not developing new hypotheses to explain why Covid vaccine performance was disappointing. They are simply restating previous knowledge. Predictions of high and sustained vaccine efficacy, and vaccination paving the ‘way out of the pandemic,’ were not expected to come true. These claims were a ploy to encourage adherence to a plan that would dramatically enrich certain corporate and public health figures. People with reasonable knowledge of the subject knew the rhetoric to be incorrect, though relatively few said so. The rest, presumably, were fooled... Fauci and co-authors therefore make an important contribution to the Covid narrative, underlining the deception of the past two years. Claims that this deception promoted an overall good – that there was a ‘global pandemic’ and compliance with mass vaccination would be for the population’s benefit – are refuted by Fauci et al.’s evidence.

They knew the vaccines wouldn’t work even while they were predicting the vaccines would prevent infection, stop transmission of COVID, and end the pandemic. Kennedy reports that when Fauci and Bill Gates were predicting a “miraculous vaccine” in the Spring of 2020, “Even vaccinology’s most stalwart tub thumpers—true believers like Dr. Peter Hotez and Dr. Paul Offit—regarded these forecasts as farfetched and foolhardy. After all, for decades, two perilous and seemingly insurmountable impediments [leaky vaccines and pathogenic priming] had thwarted every attempt to craft a coronavirus vaccine.”¹³

Government officials, principally Fauci, have attempted to justify their lies as “noble lies” (lies knowingly propagated by the government for the common good). In addition to Fauci’s Big Lie about vaccine efficacy, discussed in the Bell article, there is his infamous moving of the goalposts on what percentage of COVID infection/vaccination will achieve herd immunity.¹⁴

But a “noble” lie is still a lie, and we should not take for granted the good intentions of the liar.

How else has Fauci earned our distrust?

B. By prior bad acts, corruption, bias, conflicts of interest...

In his book, *The Real Anthony Fauci* Robert Kennedy, Jr. gives us many reasons to doubt the good intentions of Fauci.¹⁵ He sets the tone in his introduction:

I wrote this book to help Americans--and citizens across the globe--understand the historical underpinnings of the bewildering cataclysm that began in 2020. In that single

¹¹ <https://brownstone.org/articles/dr-fauci-comes-clean-on-vaccines-and-respiratory-viruses/>

¹² [https://www.cell.com/cell-host-microbe/fulltext/S1931-3128\(22\)00572-8?_returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS1931312822005728%3Fshowall%3Dtrue](https://www.cell.com/cell-host-microbe/fulltext/S1931-3128(22)00572-8?_returnURL=https%3A%2F%2Flinkinghub.elsevier.com%2Fretrieve%2Fpii%2FS1931312822005728%3Fshowall%3Dtrue)

¹³ *The Real Anthony Fauci*, 70.

¹⁴ <https://www.axios.com/2020/12/25/fauci-goalposts-herd-immunity>

¹⁵ Robert F. Kennedy Jr., *The Real Anthony Fauci, Bill Gates, Big Pharma, and the Global War on Democracy and Public Health* (New York: Skyhorse Publishing, 2021)

annus horribilis, liberal democracy effectively collapsed worldwide. The very governmental health regulators, social media eminences, and media companies that idealistic populations relied upon as champions of freedom, health, democracy, civil rights, and evidence-based public policy, seemed to collectively pivot in a lockstep assault against free speech and personal freedoms.

Suddenly those trusted institutions seem to be acting in concert to generate fear, promote obedience, discourage critical thinking, and herd 7 billion people to march to a single tune, culminating in mass public health experiments with a novel, shoddily tested, and improperly licensed technology so risky that manufacturers refused to produce it unless every government on Earth shielded them from liability.¹⁶

The book is dense with information and heavily documented. Here are some highlights.

The fact that the CDC is such a strong advocate for mass COVID vaccination is primarily due to power and influence of Anthony Fauci, our now retired COVID czar, who was the overall architect of for our government's response to the crisis. Necessary background for understanding our government's handling of the COVID crisis is Fauci's mishandling of the AIDS crisis. Fauci's career was launched when he partnered with pharmaceutical companies to sabotage safe and effective off-patent therapeutic treatments for AIDS developed by front-line physicians. He choreographed fraudulent research and then pressured the FDA to approved the use of AZT, a deadly chemotherapy drug he had good reason to know was ineffective against AIDS.

Another very shocking accusation, which Kennedy documents, is that Fauci violated federal informed consent laws and exploited poor children of color as lab rats in deadly experiments with toxic AIDS and cancer chemotherapies.

Fauci championed the official orthodoxy that AIDS is caused by the HIV virus.¹⁷ This was the necessary pretext for the expenditure of billions on the development of a vaccine, which has proved to be a futile endeavor. Kennedy says:

Even today, incoherence, knowledge gaps, contradictions, and inconsistencies continue to bedevil the official dogma. The unified chorus demanding blind adherence to that official dogma drowned out the lively public disputes of earlier years and ignored the clamor for scientific proof. An obsequious national media had consecrated the orthodoxy and anointed Anthony Fauci with an infallibility formerly reserved for popes.

And, of course, heretics were ruthlessly marginalized, ostracized, and made to suffer the degradation rituals commonly used in academia and bureaucracies to discipline dissenters.

Fauci emerged from the AIDS era as the director of the National Institute of Allergy and Infectious Diseases (NIAID). According to Wikipedia: "NIAID is one of the 27 institutes and

¹⁶ *The Real Anthony Fauci*, xiv.

¹⁷ Regarding HIV, Fauci promoted the work of the Robert Gallo, who falsely claimed to be the sole discoverer of the HIV virus. That distinction belongs the French researcher, Luc Montagnier.

centers that make up the National Institutes of Health (NIH), an agency of the United States Department of Health and Human Services (HHS). NIAID's mission is to conduct basic and applied research to better understand, treat, and prevent infectious, immunologic, and allergic diseases.” From that perch, Fauci controlled billions of dollars of government funding for research. With his financial clout, Fauci was able dictate the content and outcome of scientific health research across the globe.

Fauci did much to enhance the mystique and importance of NIAID and the CDC. Kennedy writes:

Today CDC and NIAID promote the popular orthodoxy: that intrepid public health regulators, armed with innovative vaccines, played the key role in abolishing mortalities from these contagious diseases. Both science and history dismiss this self-serving mythology as baseless.¹⁸

When the COVID crisis hit, Fauci followed his playbook developed during the AIDS crisis. Development of a vaccine became the centerpiece of his program to combat the disease. Fauci assumed the role of gatekeeper for COVID research. He and his minions waged war against repurposed therapeutics like hydroxychloroquine and ivermectin and promoted their favored therapeutic, the expensive, ineffective, and toxic remdesivir. Along with a willing media, he bombarded the public with propaganda designed to fuel panic and justify the draconian lockdowns and other measures.

Kennedy reflects on his 40-year career as an environmental and public health advocate. Much of his time was spent suing the EPA to get them to do their job. But this was a difficult project given the many corrupt sweetheart relationships between the regulators and the polluting industries they regulated. But when he became interested in vaccine safety in 2005, he discovered the problem of regulatory capture was much worse in the public health domain.

I was astonished to realize that the pervasive web of deep financial entanglements between Pharma and the government health agencies had put regulatory capture on steroids. The CDC, for example, owns 57 vaccine patents and spends \$4.9 of its \$12.0 billion-dollar annual budget (as of 2019) buying and distributing vaccines. NIH owns hundreds of vaccine patents and often profits from the sale of products it supposedly regulates. High level officials, including Dr. Fauci, receive yearly emoluments of up to \$150,000 in royalty payments on products that they develop and then usher through the approval process. The FDA receives 45 percent of its budget from the pharmaceutical industry, through what are euphemistically called “user fees.” When I learned that extraordinary fact, the disastrous health of the American people was no longer a mystery; **I wondered what the environment would look like if the EPA received 45 percent of its budget from the coal industry!** [bold-face added]¹⁹

Fauci greatly facilitated this regulatory capture through his use of a network of “principal investigators,” or PIs. According to Kennedy:

¹⁸ *The Real Anthony Fauci*, 129.

¹⁹ *The Real Anthony Fauci*, xv.

PIs are powerful academic physicians and researchers who use federal grants and pharmaceutical industry contracts to build feudal empires at universities and research hospitals that mainly conduct clinical trials—a key stage in the licensing process—for new pharmaceutical products. Thanks to NIH’s largesse, and NIAID in particular, a relatively tiny network of PIs—a few hundred—determines the content and direction of virtually all of America’s biomedical research.²⁰

Kennedy further explains:

Today, when people refer to the “Medical Cartel,” they are principally speaking of pharmaceutical companies, hospital systems, HMOs and insurers, the medical journals, and public health regulators. But the glue that holds all these institutions together, and allows them to march in lockstep, is the army of PIs who act as lobbyists, spokespersons, liaisons, and enforcers. Tony Fauci play a key historic role in elevating this cohort to dominate public health policy.²¹

To give the reader a clear understanding of Fauci’s modus operandi, consider the following lengthy account of his machinations in promoting remdesivir as the standard COVID treatment for acute cases:

Anthony Fauci needed to use all his moxie and all his esoteric bureaucratic maneuvers--mastered during his half century at NIH--to win FDA's approval for his vanity drug, remdesivir. Remdesivir has no clinical efficacy against COVID, according to every legitimate study. Worse, it is deadly poisonous, and expensive poison at \$3000 [per] treatment. In fact, remdesivir's wholesale cost is roughly 1000x more costly than hydroxychloroquine [HCQ] and ivermectin [IVM]. The challenge required doctor Fauci to first sabotage HCQ and IVM. Under federal rules discussed earlier, FDA's recognition of HCQ and IVM efficacy would automatically kill remdesivir's ambitions for EUA [Emergency Use Authorization] designation. And even if Dr. Fauci somehow finagled an FDA license for remdesivir, demand for the product, which doctors were administering late in the disease, as it had to be given through an IV in the hospital, would plummet if either HCQ or IVM stopped the COVID-19 infections early.

Why would Dr. Fauci care to undermine any medicine that might compete with remdesivir? Might it have something to do with NIAID and CDC having just spent \$79 million developing remdesivir for Gilead, a company in which the Bill and Melinda Gates Foundation owns \$6.5 million dollar stake? [describes others with a vested interest in the drug] At the outset of the coronavirus plague, remdesivir was just another pharma-owned molecule that FDA had never approved as safe and efficacious for any purpose. In 2016 remdesivir demonstrated middling antiviral properties against Zika, but the disease disappeared before the expensive non-remedy got traction. After the Zika threat vanished, NIAID put some \$6.9 million into identifying a new pandemic against which to

²⁰ *The Real Anthony Fauci*, 135-136.

²¹ *The Real Anthony Fauci*, 135.

deploy remdesivir. In 2018 Gilead entered remdesivir in a NIAID-funded clinical trial against Ebola in Africa.

This is how we know that Anthony Fauci was well aware of remdesivir's toxicity when he orchestrated its approval for COVID patients. NIAID sponsored that project... However, six months into the Ebola study, the trial's Safety Review Board suddenly pulled remdesivir and Zmapp from the trial. Remdesivir, it turned out, was hideously dangerous. Within 28 days, subjects taking remdesivir had lethal side effects including multiple organ failure, acute kidney failure, septic shock, and hypotension, and 54 percent of the remdesivir group died—the highest mortality rate among the four experimental drugs. Anthony Fauci's drug, ZMapp, ran up the second-highest body count at 44 percent. NIAID was the primary funder of this study, and its researchers published the bad news about remdesivir in the *New England Journal of Medicine* in December of 2019. By then, COVID-19 was already circulating in Wuhan, but two months later, on February 25, 2020, Dr. Fauci announced, with great fanfare, that he was enrolling hospitalized COVID patients in a clinical trial to study remdesivir's efficacy.²² [!!]

In the rest of the chapter, Kennedy documents how Fauci's NIAID-Gilead study employed a phony placebo, suffered from fatal irregularities in protocol, and failed to demonstrate any ability to reduce mortality. What's more, a separate Chinese study had been published which showed remdesivir was "utterly ineffective at keeping hospitalized patients alive OR reducing the duration of hospitalization."²³ Despite all that, Fauci announced that remdesivir had "a clear-cut, significant, positive effect in diminishing the time to recovery." This, of course, was a lie. On May 1, 2020 the FDA granted the pandemic's first EUA (Emergency Use Authorization).

And that is how a dangerous and ineffective drug became the "Standard of Care" under the Fauci regime.

Bill Gates is mentioned frequently in connection with Fauci's atrocities. Relating Gates's activities would take many more pages. Suffice it to say that Gates and Fauci were partners in crime. The Bill and Melinda Gates Foundation has contributed millions of dollars to health research, but, as in the case of remdesivir, the money is going to companies in which Gates holds a stake. Kennedy has a term for this: philanthropic capitalism. Gates also has a penchant for using third world residents as guinea pigs for his sponsored research.

Chapter 12 of Kennedy's book is titled "War Games: Genesis of the Biosecurity State." It lays bare the bioweapons background of the COVID crisis and the intersection between the medical-industrial complex and the military-industrial complex. In this context, Fauci's on-going funding of gain-of-function research at the Wuhan lab takes on a very sinister significance.

As I said above, Kennedy's book is dense with information, and all I can accomplish here is provide the highlights and good cause to believe that Fauci does not deserve the titles

²² *The Real Anthony Fauci*, 63-70.

²³ *The Real Anthony Fauci*, 66.

“America’s Doctor” and “National Treasure.” Instead of accolades, the man deserves to be tried for crimes against humanity.

C. ...his prior inconsistent statements, conflicts between his public and private statements, lack of transparency...

Fauci’s shifting advice on masking is illustrative. According to Newsweek, on March 8, 2020, Fauci said ‘there's no reason to be walking around with a mask.’²⁴ Then CDC updated its guidance on masks on April 3 and recommended that people wear face coverings “in public settings when around people outside their household, especially when social distancing measures are difficult to maintain.” Fauci then then started encouraging mask-wearing and even told NBC News on January 25, 2021 that wearing two masks was “common sense.”

But did he really believe in the CDC guidelines? Consider some private advice he gave to Sylvia Burwell, health and human services secretary for three years under President Barack Obama. Burwell asked for advice about wearing face masks while traveling. According to Newsweek:

Fauci wrote: "Masks are really for infected people to prevent them from spreading to people who are not infected rather than protecting uninfected people from acquiring infection.

"The typical mask you buy in the drug store is not really effective in keeping out virus, which is small enough to pass through material. It might, however, provide some slight benefit in keep out gross droplets if someone coughs or sneezes on you."

He added: "I do not recommend that you wear a mask, particularly since you are going to a very low risk location."

Consider also his January 28, 2020 speech to HHS regulators which explained the futility of masking asymptomatic people²⁵

His statements on natural immunity are also inconsistent. On October 11, 2004, during an appearance on C-SPAN, Fauci said: “The best vaccination is to get infected yourself. And if she really has the flu, she definitely doesn’t need the flu vaccine.” But, as we know, Fauci et al now denigrate natural immunity gained from a COVID infection and tout the superiority of immunity gained from vaccination.

Finally, hiding data and other modes of obfuscation and lack of transparency undermine credibility. There are many instances of this in the COVID saga. Perhaps the most notorious is the attempt by the FDA to delay the complete release of Pfizer’s clinical trial data. In response to a FOIA request, the FDA proposed a release schedule which wouldn’t achieve a complete release for decades. But in 2022 a federal judge ordered a more accelerated release. According to Reuters: “Rather than producing 500 pages a month — the FDA's proposed timeline — he

²⁴ <https://www.newsweek.com/fauci-said-masks-not-really-effective-keeping-out-virus-email-reveals-1596703>

²⁵ *The Real Anthony Fauci*, 2.

ordered the agency to turn over 55,000 a month. That means all the Pfizer vaccine data should be public by the end of the summer rather than, say, the year 2097.”²⁶

D. ...his warped understanding of science, his elitist and authoritarian bent, and his use of propaganda against the American people...

Fauci’s words and conduct throughout displayed hubris on a grand scale. In a June 9, 2021 interview, he stated that Americans who questioned his claims were, per se, anti-science. He said, “Attacks on me, quite frankly, are attacks on science.”²⁷ Someone who arrogantly claims to be Science personified and demands that we have blind faith in his authority, has actually abandoned the grand enterprise of science and established a new religion. G.K. Chesterton and C.S. Lewis warned us about the oligarchs who will be only too eager to assume the role of cultural high priests.²⁸ This describes Fauci perfectly.

And Fauci’s minions displayed the same mindset. Fauci acolyte Dr. Peter Hotez published an article in a scientific journal calling for legislation to “expand federal hate crime protections” to make criticism of Fauci a felony!²⁹

And then there are all the attempts to censor and cancel dissidents.

And think of Fauci’s utter presumption in dictating public policy to presidents, governors, and mayors. Rather than staying in his own lane and simply offering his best scientific advice to elected officials, whose job is to do the delicate balancing necessary to policy decision-making, Fauci arrogantly presumed that the myriad other considerations and factors were less important than the implementation of his public health prescriptions.

And his prescriptions were always the most self-serving, draconian, and authoritarian options.

Consider also—and this is discernible in how our government handled other health crises as well—its penchant for instilling fear and panic. We shouldn’t suffer any delusions about the noble motives of those in charge. Time and time again they propagandized us to herd us into behavior which hurt us and only benefitted Fauci and his cabal.³⁰

What are other reasons we should not trust Fauci?

E. His prescriptions have proved to be catastrophic failures.

²⁶ <https://www.reuters.com/legal/government/paramount-importance-judge-orders-fda-hasten-release-pfizer-vaccine-docs-2022-01-07/>

²⁷ Quoted in *The Real Anthony Fauci*, xvii.

²⁸ *Lies My Government Told Me*, 97.

²⁹ Ibid

³⁰ To gain an appreciation of the mass psychology techniques our government used against us, see Chapter 7 of Malone’s book, cited earlier. It is written by Mattias Desmet and titled “Mass Formation and the Psychology of Totalitarianism.

In the early phase of the COVID pandemic, Fauci’s strategy was to slow the spread, flatten the curve, and wait for the (unproven) vaccine. According to other health experts, this strategy “represented a profound and unprecedented departure from accepted public health practice.”³¹ Fauci’s prescription did not include urging the public to follow standard medical advice: lose weight, avoid tobacco, get plenty of sunlight, and fortify the immune system with zinc and vitamin D.³² His strategy ignored and suppressed the early treatment of infected patients. At that time, the government’s recommended treatment protocol amounted to this: Stay at home until your condition is acute. Then come to the hospital and get put on a ventilator and IV remdesivir.³³ A typical outcome of this protocol was death for acutely ill patients. No wonder the early US death rate from COVID per million ranked very high compared to other nations.³⁴

And then there were the lockdowns, which were costly in terms of economic loss, mental health problems, aggravated health problems caused by delays in getting treatment and care, loss of privacy, social deprivation, and violations of constitutional rights.³⁵

Next consider the catastrophic failure of the “vaccines” themselves. A common understanding is that vaccination confers immunity from a disease and prevents infection. In fact, as of May 4, 2021, the CDC defined vaccination as “The act of introducing a vaccine into the body to produce immunity to a specific disease.”³⁶ So when the government announced the development of COVID vaccines, the public’s expectation was the vaccines would make us immune from the disease, just like polio vaccines make us immune from polio. The technical term for this is “sterilizing immunity,” which means that the vaccine would completely obliterate viral colonies in vaccinated individuals and prevent transmission and mutation.³⁷

But it is now common knowledge that even fully vaccinated people are not “immune” to COVID and its variants. In other words, the fears of the vaccinologists before the rollout of the vaccines proved true. The vaccines are “leaky.” So, at best, the shots provide some degree of protection from getting infected.

But is it even true that the shots are relatively or partially effective at preventing infection? Dr. Colleen Huber cites evidence that the shots actually have “negative efficacy” in that one has a “greater likelihood of infection and/or hospitalization and/or death from COVID after having received the vaccine than not receiving it.” And this negative efficacy appears to increase with each vaccination.³⁸

³¹ *The Real Anthony Fauci*, 7.

³² *The Real Anthony Fauci*, 6.

³³ *The Real Anthony Fauci*, 11.

³⁴ *The Real Anthony Fauci*, xvii.

³⁵ See: Douglas Axe, William M. Briggs, and Jay W. Richards, *The Price of Panic, How the Tyranny of Experts Turned a Pandemic Into a Catastrophe* (Washington DC: Regnery Publishing, 2020)

³⁶ <https://www.cnsnews.com/article/national/susan-jones/cdcs-definition-vaccine-has-changed-over-time-protection-vs-immunity>

³⁷ *The Real Anthony Fauci*, 70.

³⁸ Colleen Huber, *Neither Safe Nor Effective, The Evidence Against the COVID Vaccines* (self-published, 2022), 30-39.

Let's complete our inventory of all the ways the COVID vaccines fail: Leading virologists such as Nobel Laureate Luc Montagnier, tell us that because the vaccines are non-sterilizing or leaky, they do not arrest transmission. Even worse, vaccinated persons would become asymptomatic carriers and “mutant factories.”³⁹

What then could be the justification for the shots? It is often claimed that getting the shot mitigates the effects of the disease. The CDC undoubtedly can cite studies in support of that, but even if that is true, it is a small incentive for most people to get the shot, especially when weighed against the risk of vaccine injury.

Regarding vaccine safety, Part V of Chapter 1 of Kennedy's book is very instructive. See also Chapter 8 of Robert Malone's book and the work of Dr. Colleen Huber, cited above. In short, the shots are not safe by any reasonable standard. Kennedy reports:

In 1976, US regulators pulled the swine flu vaccine after it was linked to 25 deaths. In contrast, between December 14, 2020 and October 1, 2021, American doctors and bereaved families have reported more than 16,000 deaths and a total of 778,685 injuries to the Vaccine Adverse Event Reporting System (VAERS) following COVID vaccination. The Europeans' surveillance sites tallied 40,000 deaths and 2.2 million adverse reactions. Due to chronic undercounting by VAERS and its European sister system, those numbers are almost certainly a fraction of the true injuries.⁴⁰

Huber reports that Pfizer, in its court-ordered data release, “confessed over 1,500 types of adverse reactions, many of them known to be permanently disabling.”⁴¹

I can go on for many pages with documentation that the vaccines are not safe. Authoritative voices have been sounding alarms from the beginning.

Yet the CDC tells us, without any qualification, that the vaccines are safe and effective. Huber, however, alerts us to this pertinent fact: Even BioNTech (Pfizer's partner company), in its latest SEC filing, admits they lack proof of the safety or efficacy of their vaccine!⁴²

All of this is in addition to his mishandling of other health crises, most especially AIDS, and his role in causing the general decline in public health, which Kennedy addresses below:

The “J. Edgar Hoover of public health” has presided over cataclysmic declines in public health, including an exploding chronic disease epidemic that has made the “Fauci generation”—children born after his elevation to NIAID kingpin in 1984—the sickest generation in American history, and has made Americans among the least healthy citizens on the planet. His obsequious subservience to the Big Ag, Big Food, and pharmaceutical companies has left our children drowning in a toxic soup of pesticide

³⁹ *The Real Anthony Fauci*, 70.

⁴⁰ *The Real Anthony Fauci*, 87.

⁴¹ *Neither Safe Nor Effective*, 40.

⁴² *Neither Safe Nor Effective*, 29.

residue, corn syrup, and processed foods, while also serving as pincushions for 69 mandated vaccine doses by age 18—none of them properly safety tested.⁴³

D. Final thoughts and observations.

So what has been accomplished here? However imperfectly and partially I have made my case, a reasonable person would conclude, at a minimum, that the HHS COVID policies must be re-examined. Arguably, a reasonable person would conclude Anthony Fauci has been utterly discredited, and the reputations of the CDC, FDA, NIH, NIAID, and all the other agencies who played a role the grand mRNA vaccine experiment have been severely damaged.

I conclude that North Dakota's public health officials, physicians, and the rest of the medical community should no longer uncritically accept the CDC's pronouncements concerning COVID vaccine safety and efficacy. When the next "novel" viral threat emerges, North Dakotans must be prepared to forge an independent path through the next crisis. The federal government's guidance concerning viral contagions should no longer be trusted implicitly.

If we can't trust the CDC, then whom can we trust? Many independent voices emerged early in the pandemic. Notable among them was Dr. Jay Battacharya, a Professor of Medicine at Stanford University, where he received both an M.D. and a Ph.D. in economics.⁴⁴ As one of the signers of the Great Barrington Declaration⁴⁵ he was an advocate for "focused protection" instead of lockdowns and the quarantining of the healthy. Among the early advocates for early COVID treatment was the Front Line COVID-19 Critical Care Alliance (FLCCC), founded by a group of leading critical care specialists in March 2020, including Dr Paul Marik and Dr. Pierre Kory. Dr. Peter McCullough also was an important voice. Dr. Robert Malone, who holds patents for early mRNA technology, is a prominent vaccine critic. For a more extensive list of the heroic scientists and physicians who defied the Fauci regime, see Kennedy's *Dedication & Acknowledgments*.⁴⁶

Ultimately, we have to trust ourselves, and this means we have to improve our own capabilities to evaluate scientific research and adjudicate between the competing claims of experts. We also need to beef up our capabilities and resources in data collection and analysis.

Alexander Solzhenitsyn exhorted us to "live not by lies."⁴⁷ At issue here is the CDC's claim—adopted by HHS--that the COVID vaccines are safe and effective. We now should know that this claim is not true and encompasses many lies. HHS must stop participating in those lies.

Your duty is to serve the people of North Dakota and not the CDC and Big Pharma. While your marching in lockstep with the federal government in the beginning of the pandemic is understandable and forgivable, continuing to do so is a grave mistake and constitutes a grave dereliction of duty.

⁴³ *The Real Anthony Fauci*, xxi.

⁴⁴ <https://imprimis.hillsdale.edu/sensible-compassionate-anti-covid-strategy/>

⁴⁵ <https://gbdeclaration.org>

⁴⁶ *The Real Anthony Fauci*, viii-xi.

⁴⁷ <https://honestyculture.com/alexander-solzhenitsyn-live-not-by-lies/>

When the definitive history of the COVID pandemic is written, how do you want to be remembered? As zealous and independent guardians of the public health and the common good, as champions of evidence-based science and ethical medicine, and as voices of sanity and clarity in a time of turmoil and propaganda-induced panic? Or as willing servants of the medical-industrial complex?

As always, I would appreciate hearing from you. If you think I am wrong or unjust in any of my claims, please initiate a dialogue.

Sincerely,

/s/ David Crane

David Crane

Cc: Governor Doug Burgum; District 13 Senator Judy Lee, Chairman of Senate Human Services Committee; District 31 Representatives Dawson Holle and Karen Rohr; District 31 Senator Donald Schaible; District 8 Senator Jeff Magrum; ND Medical Association