

# COVID-19 TEST RESULTS SERIOUSLY WRONG

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20MARCH2020

[http://www.vidaclara.com/Assets/Covid-19\\_Test\\_Wrong.pdf](http://www.vidaclara.com/Assets/Covid-19_Test_Wrong.pdf)

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link to PubMed article: <https://pubmed.ncbi.nlm.nih.gov/32133832/>

It's all BS, people. The whole flipping thing. Billions of people freaking out, millions having their businesses and livelihoods busted. All for exactly nothing.

The whole covid-19 conspiracy **DEPENDS, at the very first and foremost, on VERIFIED POSITIVE TEST RESULTS**. All the quarantines, lockdowns, shut businesses, home quarantines, travel restrictions, maxed out hospitals, social distancing, and on and on and on ABSOLUTELY DEPEND ON HOW MANY TRULY POSITIVE CASES ARE FOUND.

Below you can see for yourself. Chinese scientists very recently determined that **TEST RESULTS CLAIMED TO BE POSITIVE FOR COVID-19** were **47-80% FALSE**.

Read that again – **All the test results are half to 80% WRONG**.

Which means that 50-80% of supposed covid-19 cases are NOT covid-19 cases at all.

Now think about the current world pandemic situation. Think about **your** current situation. Do you like what you see? Do you like what has been imposed on you, and imposed on the rest of the world?

Next, notice your very first reaction, your very first reactive thought about this information I have just presented to you.

Is your very first thought something like, “The ‘authorities’ cannot all be wrong. Surely they are correct, they are doing the right and necessary things. They are very concerned for all of us, and so I must obey their orders... **we** must obey. I shall ignore what this study says about false covid-19 cases.”

Or is your very first thought something like, “This is BS. The whole covid panic thing has smelled fishy since the beginning. All the ‘for our own good’ orders, shutdowns, restrictions and aggravations are also BS. The so-called

'authorities', culpable or not, in on it or just caught up in it and 'doing their jobs,' have made things seriously difficult. They are all making this whole pandemic panic a royal pain in the neck. They are creating huge problems for millions of people, severely hurting or killing millions of small businesses, even wrecking the economies of whole nations... for what? For nothing."

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Further investigation of the actual test used to diagnose covid-19, the [PCR test](#), finds that it is quite difficult to reproduce accurately, and errors abound in the many steps required to obtain a specimen sample, transport it, handle it carefully whilst doing the required lab procedures properly, with the right equipment and right reagents, and analyzing the results correctly. [Note: the article at the PCR test link above is very highly skewed and carefully worded to try to minimize the actual reported problems with the test. For example, in the article the term 'false negative' is used throughout, implying that many people are actually positive for covid-19, but the test unfortunately didn't find it. In real life use, the test actually gives mostly false positives, as the study below proves. The PCR test article purposefully gets it backwards.]

Likewise, consider this: The actual inventor/creator of the PCR test, Kary Mullis, died of pneumonia at the age of 74 in August 2019, just 5 months before this covid panic erupted, and he was vocally adamant that 'authorities' were using his test wrong and improperly to diagnose HIV and Ebola virus. What would he have said about covid-19 were he still alive?

So, the issue is errors upon errors, compounding along the way. Apparently, whenever they are in any doubt about test result accuracy on suspected patients, the so-called 'health authorities' around the world simply proclaim 'Positive for COVID-19' and add that patient to the 'confirmed cases' statistics. Then, of course, the main stream media turbo-hypes the case total statistics to stoke the pandemic all around the world.

Finally, open your heart and empathize with the thoughts, feelings and physical health of the tens of thousands of people falsey diagnosed as covid-19 cases. These people have been put into some kind of strict quarantine or into hospital intensive care units, cut off from most or all contact with families and friends. They have likely been intimidated into or forcefully given seriously dangerous antiviral drugs. Overall they have been stressed out beyond imagination.

Imagine the intense sense of fear and betrayal these people must feel.

Now imagine this is **you**.

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Is there actually a covid-19 virus? Probably. There are many types of corona virus, more than you could count. The vast majority of types of viruses have not been identified or studied. There are far more viruses that are unknown than known; for every 100 viruses known, there are millions unknown.

Is covid-19 pathogenic (causes disease)? Maybe, but not much. The majority of cases, apparently, do not get ill from it; they are symptom-free. Some have symptoms similar to influenza, with varying degrees of severity. Those with pre-existing chronic diseases – diabetes, heart disease, lung disease, high blood pressure, etc – likely have less than healthy immune systems, and these are the people who tend to suffer the most. Elderly people also fall into this category. So why the big panic about this disease? There should be no panic at all. There should be no pandemic status to it. There should be a conventional 'heads up' alert about it, which only medical personnel would even know about. It's a very minor disease, with very few cases, compared to many other diseases. It's severity is minor or non-existent for most everyone. And as we now know, all the hype about the number of actual cases is way overblown.

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So listen up everyone: RELAX. This covid-19 is No Big Deal. Remember, people get sick all over the world, all the time. The chances of anyone having a real covid-19 disease is **Extremely** Unlikely (if there even is such a disease). In the extremely remote chance you do have it, it's VERY Highly Unlikely you'll have any serious problems. Probably no symptoms at all; sometimes mild to moderate symptoms, like a common cold or influenza. According to recent stats from Italy, the only people who actually died from 'covid-19' (even if the PCR test for it was somehow accurate) were already very sick or dying anyway.

As for the worldwide hysteria, there are most certainly ulterior motives for stirring up this disease pandemic. It's clearly coordinated on multiple fronts. See [here](#), and realize this occurred 2 months before the covid-19 'outbreak'. I'll leave it to you to investigate it for yourself. Plenty of damning evidence on many aspects, most of it easy to find. If you do not know how to begin researching for yourself, ask others to show you how to do it.

## **Exercise your brain, not your fear response.**

After researching for yourself, when all is said and done, this whole fiasco and your clearer understanding of it will greatly decrease your faith in governments, conventional medical 'public health' science and service, mainstream news and media, and anyone else in whom you place your trust to give you good information and reliable advice. Indeed, if you've been paying attention for a while now, your faith in these institutions should already be at rock bottom, if you have any at all.

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A reminder: [https://www.youtube.com/watch?v=eNEyLn1Zz\\_g](https://www.youtube.com/watch?v=eNEyLn1Zz_g)

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*[please feel free to repost this or pass it along (unedited) to anyone you like.*

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## **[Potential False-Positive Rate Among the 'Asymptomatic Infected Individuals' in Close Contacts of COVID-19 Patients]**

[Article in Chinese]

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- PMID: **32133832**
- DOI: [10.3760/cma.j.cn112338-20200221-00144](https://doi.org/10.3760/cma.j.cn112338-20200221-00144)

## **Abstract**

in [English](#) , [Chinese](#)

**Objective:** As the prevention and control of COVID-19 continues to advance, the active nucleic acid test screening

in the close contacts of the patients has been carrying out in many parts of China. However, the false-positive rate of positive results in the screening has not been reported up to now. But to clarify the false-positive rate during screening is important in COVID-19 control and prevention. **Methods:** Point values and reasonable ranges of the indicators which impact the false-positive rate of positive results were estimated based on the information available to us at present. The false-positive rate of positive results in the active screening was deduced, and univariate and multivariate-probabilistic sensitivity analyses were performed to understand the robustness of the findings. **Results:** When the infection rate of the close contacts and the sensitivity and specificity of reported results were taken as the point estimates, the positive predictive value of the active screening was only 19.67%, in contrast, the false-positive rate of positive results was 80.33%. The multivariate-probabilistic sensitivity analysis results supported the base-case findings, with a 75% probability for the false-positive rate of positive results over 47%. **Conclusions:** In the close contacts of COVID-19 patients, nearly half or even more of the 'asymptomatic infected individuals' reported in the active nucleic acid test screening might be false positives.

**Keywords:** COVID-19; Close contacts; False-positive; Nucleic acid test; Screening.