

17 Medical Articles Debunking Masking

- 1) “There is little evidence to support the effectiveness of face masks to reduce the risk of infection.” https://www.cambridge.org/core/services/aop-cambridge-core/content/view/64D368496EBDE0AFCC6639CCC9D8BC05/S0950268809991658a.pdf/face_masks_to_prevent_transmission_of_influenza_virus_a_systematic_review.pdf
- 2) “...laboratory-confirmed viral infections were significantly higher in the cloth masks group. Virus particle penetration was almost 97%. ...the results caution against the use of cloth masks.. Moisture retention, reuse of cloth masks, and poor filtration may result in increased risk of infection.” <https://www.bmj.com/content/369/bmj.m1435>
- 3) “...surgical and handmade masks, and face shields, generate significant leakage jets that have the potential to disperse virus-laden fluid particles by several meters.They all showed an intense backward jet for heavy breathing and coughing conditions. It is important to be aware of this jet, to avoid a false sense of security that may arise when standing to the side of, or behind, a person wearing a surgical, or handmade mask, or shield.” <https://arxiv.org/ftp/arxiv/papers/2005/2005.10720.pdf>
- 4) JAMA: “Face masks should not be worn by healthy individuals to protect themselves from acquiring respiratory infection because there is no evidence to suggest that face masks worn by healthy individuals are effective in preventing people from becoming ill.” <https://jamanetwork.com/journals/jama/fullarticle/2762694>
- 5) “Face mask use in health care workers has not been demonstrated to provide benefit in terms of cold symptoms or getting colds.” <https://pubmed.ncbi.nlm.nih.gov/19216002/>
- 6) From one meta analysis of masks to prevent infection, N95 masks and respirators no less: “None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection.” <https://pubmed.ncbi.nlm.nih.gov/22188875/>
- 7) “...both surgical and cotton masks seem to be ineffective in preventing the dissemination of SARS-CoV-2 from the coughs of patients with COVID-19 to the environment and external mask surface.” <https://www.acpjournals.org/doi/10.7326/M20-1342>
8. NEJM: “We know that wearing a mask outside health care facilities offers little, if any, protection from infection.The chance of catching Covid-19 from a passing interaction in a public space is therefore minimal. In many cases, the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.” <https://www.nejm.org/doi/full/10.1056/NEJMp2006372>
- 9) Just a note, respiratory acidosis is bad and leads to also polyuria, urinary acidosis, kidney damage, and hypercapnia. The stress response from lowered oxygen causes cortisol to rise, potently so, which lowers immune vigilance increasing infection risk. “Respiratory acidosis develops when air into and exhaled from the lungs does not get adequately exchanged between the carbon dioxide from the body and oxygen from the air.” <https://www.medicalnewstoday.com/articles/313110>
- 10) Also note, deoxygenation is bad and not only leads to and/or exacerbates headaches disorders, a hypoxic state can create and/or activate malignant cells within 48 hours. Know what else leads to increased cancer risk? Acidosis. (note article above this one on respiratory acidosis) This is old work from Otto Warburg himself. “Most health care workers develop de novo PPE associated

headaches or exacerbation of their pre-existing headache disorders.”

<https://pubmed.ncbi.nlm.nih.gov/32232837/>

11) The meta analysis is the most reliable data set as the reproducibility of results is scientifically so powerful. 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>

12) “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.”

Meta analysis of 17 studies. Key points: “There is little evidence to support the effectiveness of face masks to reduce the risk of infection.” and “None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection.”

<https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1750-2659.2011.00307.x>

13) A 2017 meta-analysis of 23 studies and six controlled trials found, as did the current 2020 analysis, that yet again there was bias in studies that claimed masks provide protective benefits. The analysis removed the bias and concluded that that masks are not effective: “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.”

<https://www.cmaj.ca/content/188/8/567>

14) Even in May 2020 the CDC (yes, the CDC) published an analysis of several studies that notes the ineffectiveness of hand washing and mask wearing for prevention of influenza infection and transmission. https://wwwnc.cdc.gov/eid/article/26/5/19-0994_article

15) From the CDC, again: “Available evidence shows that (cloth masks)... may even increase the risk of infection due to moisture, liquid diffusion and retention of the virus. Penetration of particles through cloth is reported to be high... Altogether, common fabric cloth masks are not considered protective against respiratory viruses and their use should not be encouraged.” <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html>

16) Four authors of this scientific analysis of numerous publications has stood since 2011: “None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection.” <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5779801>

17) Top EU health officials also agree that masks are pseudoscientific.

<https://fee.org/articles/europes-top-health-officials-say-masks-arent-helpful-in-beating-covid-19>