What You Need to Know about COVID-19 PCR Tests

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Hi Micky,

Since the start of the SARS-CoV-2 pandemic and the "lockdown" responses, we've heard a lot about reverse transcription polymerase chain reaction (RT-PCR) tests. There's a lot of confusion about these tests and plenty of misinformation, so here, briefly, is what you need to know.

First, there are popular claims still being spread widely that the virus has never been proven to even exist. This is false. The virus has been isolated and its whole genome sequenced repeatedly by scientists all over the world. There are sequence databases scientists use to track evolutionary changes in the virus as it moves through the human population.

There also seems to be a fairly widespread belief that PCR tests produce lots of false positives because they don't discriminate between SARS-CoV-2 and viral RNA of common human coronaviruses, other viruses, or even human DNA. This is also untrue. The tests are specific to SARS-CoV-2 and will not return a positive result for other viruses, much less human DNA. What *can* cause false positives is contamination or other human error in handling or processing the tests.

The tests work by cyclically amplifying any present SARS-CoV-2 RNA. If a certain cycle threshold value is met, the result is "positive". If fewer cycles are required to reach the threshold, the inference is of a higher "viral load"; whereas if a greater number of cycles are required, the inference is that less viral RNA was present in the sample.

I've seen the belief expressed many times that if the threshold value is set high enough, the tests will be positive no matter what. This is also incorrect. If there is no SARS-CoV-2 RNA present in the sample, there is nothing to amplify and so the result will be negative.

Where the cycle threshold (or "Ct") value really matters is in the implication with respect to contagiousness. The key point, which I have emphasized repeatedly in my writings over the past several months, is that the detection of SARS-CoV-2 RNA is not necessarily indicative of the presence of viable, infectious virus.

So when the *New York Times* and other media have reported, for example, that SARS-CoV-2 is airborne transmissible because such-and-such study found viral RNA in air samples, they were stating a fallacious conclusion.

For another example, when they've said that children are contagious because they have "viral loads" at least as high as adults, they are stating a fallacious conclusion.

Similarly, PCR tests are highly relevant for the shifted justification for extreme lockdown measures. These measures were originally sold to the public on the grounds they were *temporarily* required to "flatten the curve" and prevent hospitals from being overwhelmed. But then, the justification shifted and we were told that the measures must continue indefinitely to reduce "cases" to near zero.

The number of "cases" in turn is dependent on the numbers of "positive" PCR tests. You may have seen the term "casedemic" being used to describe the situation, and while that term can also be misused, it legitimately calls attention to the problem of using PCR tests for diagnostic purposes and justifying policies based on "cases".

For example, how meaningful of a metric is an increasing number of "cases" when it's a consequence of increased testing? How meaningful is it when hospitalizations and deaths are declining?

The use of "cases" to justify lockdown measures is all the more absurd given the fact that a positive result *does not even mean that "case" is infected with SARS-CoV-2*.

Again, all it means is that viral RNA was present in the sample. Even the prolockdown *New York Times* has admitted that 90% of people identified as "cases" by PCR testing were probably not contagious, as inferred from Ct values indicating low viral loads and a high likelihood of "positive" results indicating presence of non-viable RNA fragments as opposed to infectious virus.

The appropriate threshold for positive PCR test results has not been determined scientifically. They are arbitrary, and the *Times* acknowledged that they the tests are *wrongly* being used to diagnose patients on the basis of threshold values that are too high.

Also, even if a high "viral load" *is* inferred from Ct values, it *still* does not necessarily indicate the presence of infectious virus. For example, in one study, researchers were unable to detect viable virus (using cell cultures to see whether there are

cytopathic effects and viral reproduction) after 8 days since symptom onset *despite* continued high viral loads as determined by PCR tests.

In other words, there is not a perfect correlation between a high viral load and infectiousness.

Another aspect of the testing regimes is the mathematical implication of false positives, especially in areas with low prevalence. If 1% of results *falsely* indicate the presence of SARS-CoV-2 RNA, then out of a tested population of 10,000 people, 100 people will be counted as "cases" *even if there is no transmission of SARS-CoV-2 in that community*. There can be a "casedemic" in areas of low prevalence just because there's a massive amount of testing happening.

So, to sum up, while PCR tests can be useful to *confirm* a diagnosis of COVID-19, they should never be used by themselves as a diagnostic tool. Yet, in "case" counts, that is precisely what's been done: people *who do not have the disease* and *are not contagious* are being counted as COVID-19 "cases", and these numbers in turn are being cited to justify continued lockdown measures.

In my latest article, "New York Times Lies about Science to Push School Closures". I discuss how policymakers and the media have misused, misinterpreted, and deceived about the meaning of PCR test results since the start of the pandemic to create fear and manufacture consent for extremely harmful lockdown measures.

In case you haven't read it yet:

Learn how the *New York Times* misreports science using PCR tests to advocate continued school closures.

Also, in case you haven't signed up yet for the free online viewing of the forthcoming *Money Revealed* docu-series, you can do so here.

It features over 30 successful entrepreneurs and investors sharing their insights into how to create and preserve wealth. Among them is Jeff Walker, whose freely shared knowledge about marketing I've personally benefited from. (In fact, I'm utilizing some of that knowledge in this very newsletter! It has to do with freely delivering *real value* to people via a mailing list as opposed to just trying to "sell" them something.)

To get a better idea of what I'm talking about, <u>watch this sneak peek of the interview</u> with Jeff Walker.

Then be sure to sign up here for the free viewing of *Money Revealed*, episodes of which will be available to watch for a limited time starting October 17:

Sign up to watch *Money Revealed* for free

Regards,



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