Advance Of The Killer Ducks

Assuming we believe the media coverage of H5N1, then the world will be afflicted in the near future by a world-wide epidemic caused by a mutation of a bird flu virus with the fascinatingly eerie name H5N1. On which facts are the horror reports based? An investigation.

By Torsten Engelbrecht, David Crowe

On page 1 of the German weekly newspaper Die Zeit, Germany’s most reputable print media along with Der Spiegel, we read with a shudder: “Death on quiet wings – the bird flu is on the advance.” Furthermore, what is to be understood in the article under “forthcoming attack of the killer ducks” seems as if it is about creating a title for the second part of the Hollywood’s movie shocker “Outbreak”, as the paper writes: “H5N1 plays Blitzkrieg”. Der Spiegel, meanwhile, relies on the testimonies of David Nabarro, who was named the UN’s chief coordinator in the fight against the bird flu at the end of September: “A new flu pandemic can break out any moment – and it can kill up to 150 million people.” The Foreign Policy Journal quotes an expert of the US epidemic authority Centers for Disease Control (CDC), who raised the death count up to 360 million. While Reinhard Kurth, director of the Robert-Koch-Institut (RKI), cannot be topped after his interview with the Frankfurter Allgemeine Zeitung (another very reputable newspaper in Germany), saying that “a pandemic threatens potentially all six billion human beings.”

With so much sentiment of apocalypse present in the media, one has to be allowed to question the facts: Are the warnings covered up by scientific data? Are there independent studies proving that the H5N1-virus exists, that it is highly pathogenic in animals, and that it can jump to humans and trigger a pandemic? And is there sound proof that other factors (environmental poisons, foreign proteins, etc.) can be excluded as a cause for the illness of the birds?

The journalists themselves do not have any such proofs at hand. Not only the large number of experts who had a say in the matter hinted at this. An inquiry, sent to several print media, remains without result, but Die Zeit merely says: “All primary sources can be easily found through DIMDI or Pubmed and then can be ordered easily through Subito. Experts from the RKI or the Friedrich-Löffler-Institut (FLI) are open to questions from all journalists. And also the relevant CDC and WHO publications are freely accessible.” That is to say that Die Zeit itself does not possess concrete studies. Instead, even Die Zeit – as is usual in science journalism – relies on the statements of medical authorities.

A Time Bomb. And so thinks the media: At least the medical authorities have their statements scientifically substantiated. And thus the German Ministry for Consumer Protection, together with the respective offices from the USA, Canada, or France or the persons responsible at the world health agency WHO, firmly act on the assumption that H5N1 is a “highly pathogenic and highly contagious” virus – “a time bomb waiting to go off”, as Anthony Fauci, director of the US NIAID and grey eminence of American virus science, expresses it.

We sent four questions to the German Ministry for consumer protection, and they turned out the following reply: “You are inquiring about very specific issues to which the German Ministry cannot respond as quickly at the present time as it was necessary for your investigation. We thank you for your understanding” – though we didn’t even mention any deadline or any need to hurry! After we pointed out that we are not in a hurry and that it would just be nice to know when we could expect a reply, the German Ministry for Consumer Protection then only responded in reference to the scientific instances with: “Your questions about the substantiation of the pathogenicity and pandemic potential of the H5N1 virus as well as the study confirming this can only be answered by the experts from RKI or FLI.”
The FLI, which according to the German Ministry for Consumer Protection “possesses virus isolates of H5N1”, sent us four studies, which were published in an American professional magazine, as an answer to our questions. These papers discuss pathogenicity or pandemic potential, but they do not go into if other factors like toxins might come into question for the cause of the sickness of the birds. And concerning the request for substantiation of pandemic potential, the FLI conceded: “There is no scientific forecasting method that could support the possibility that an influenza virus can induce a new pandemic at this time.”

**Pure Material.** And not even in regard to the existence and pathogenicity of H5N1 can the studies presented by FLI really deliver substantial facts. If a virus exists that can cause that kind of disease, it must be detectable. In trade language: There must be pure virus material present. But exactly this is not the case in these studies.

But if the existence, the pathogenicity, and the pandemic potential of H5N1 is unproven, and if it cannot be excluded that other factors made the birds sick, then the requirement for a possible conclusion is missing. Die Zeit demands: "It is high time that Germany buys a sufficient amount of medication", but at the same time the newspaper confines: “The antiviral drugs do not prevent the illness, but they alleviate its course.” That is correct in the opinion of established medicine; but in general however it is not even sure that the drugs – a main focus is Tamiflu (Oseltamivir) – “alleviate” the symptoms. In fact, there are studies, which support this view. But what power do these studies have to testify if it cannot be guaranteed that they are free from conflicts of interest?

**Illness of Reverence.** Often the "Spanish flu" of 1918/19 is, in a way, being brought into play as a reference for an H5N1 panic. Also in this case one is referred to statements of experts and studies, published, for example, in Science. But whoever concludes quickly that the "Spanish flu" was caused by only one virus and that this virus alone can be made responsible for the deaths of 25 to 50 million people, makes it too easy. There are in no case any facts for such a thesis.

In addition, mass mortality occurred at the end of the World War One – at a time when innumerable people were exhausted, malnourished, and stressed after four years of war. Moreover, many drugs at that time contained highly toxic substances like heavy metals, arsenic, formaldehydes, or chloroform, which can cause heavy flu symptoms. And many chemicals intended for military purposes could be found wandering around in the civil sector (agriculture, medicine) without the necessary controls.

The only fact that exists in relation to the bird flu virus, as Reuters reported on July 20th 2005, is that in the course of the H5N1 panic prefacing the worldwide flu precautions, the Tamiflu manufacturer and pharmaceutical giant “Roche reported a big win”. More specifically: “Global Tamiflu sales increased in the first six months of 2005 by 363 percent up to 580 mio. Swiss Francs” – also thanks to German tax payer. According to Die Zeit, the German federal state Nordrhein-Westfalen “announced in July that it will store drugs amounting to 30 Mio. €”.

**Results.** But which editorial staff checks to see if the Tamiflu studies are free from conflicts of interest and are de facto meaningful? By searching the Internet you can easily detect if Roche funds Tamiflu (Oseltamivir) studies or not. Key words like “Roche funded pubmed Oseltamivir” result in proud 128 hits.

Nothing unusual: Just recently the UK parliament asserted in a comprehensive investigation that three quarters of all clinical studies published in the leading scientific magazines like Lancet, NEJM, and JAMA are financed by pharmaceutical firms. And even studies of “highest standard” are being deterred. Nevertheless in 2002, for example, the NEJM changed its guidelines so that reviews and editorials are also allowed to be written by experts who take in payments of up to 10,000 dollars per year – although the payments largely also come from companies whose products are mentioned in the articles in question. The fundamental reasoning from NEJM’s in regards to the change in guidelines: One is just plain not in the position anymore to find enough top experts who have no connection to the pharmaceutical industry.

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