

# The Cost of Ignorant 'Expert' Policy Makers During COVID

Analysis by [Dr. Joseph Mercola](#)

✓ Fact Checked

February 13, 2023

## STORY AT-A-GLANCE

- › The Cochrane Library recently updated its 2020 systematic review of physical interventions to reduce respiratory illnesses. The update included an additional 11 randomized controlled trials, bringing the total number of RCTs included to 78
- › As in its 2020 review, they found no evidence to support the use of surgical face masks or N95 respirators to prevent influenza or COVID-19 infection
- › The relative risk reduction of using surgical masks in the general population (within hospitals and communities at large) to reduce symptoms of flu-like/COVID-like illness (not lab confirmed) was a statistically insignificant 0.95
- › The same goes for reducing laboratory-confirmed influenza and COVID. Here, the relative risk reduction was 1.01 with a confidence interval of 0.72 to 1.42. In other words, it's a wash. On average, it raises your risk of lab-confirmed infection by 1%. Range-wise, it may lower your risk by 28% or raise it by as much as 42%
- › The review also found "no clear differences between the use of medical/surgical masks compared with N95/P2 respirators"

The question of whether we should wear face masks or not to prevent the spread of COVID-19 has been a hotly contested issue ever since our so-called health authorities came out with the recommendation in early 2020. Some of us were quick to point out the obvious, namely that masks cannot filter out viruses due to the virus being far smaller than the holes in the fabric.

Surgical masks have only ever been used to prevent droplets of saliva to drip into open wounds during surgery, potentially causing an infection. That's all they were ever designed to do.

Numerous studies looking at mask-wearing during cold and flu season in years past came up empty, showing masks are not a viable prevention method. Yet the narrative we were fed was that masks will somehow prevent respiratory infection, and not wearing one meant you had no regard for the health and safety of others.

Never mind the fact that a healthy person cannot transmit disease in the first place. The **asymptomatic spread fallacy** was still used to reinforce the idea that everyone had to wear a mask, regardless of whether they were ill or not. You couldn't even debate the issue. The propaganda angle was the only viewpoint allowed to circulate.

Today, three years later, mask policies are cropping up yet again, especially in schools,<sup>1</sup> and health care facilities. In December 2022, the Occupational Safety and Health Administration (OSHA) submitted a final rule to the Office of Information and Regulatory Affairs and Office of Management and Budget for review which, if approved and implemented, would make universal masking in health care facilities a PERMANENT rule.

The largest nursing union in the U.S., National Nurses United, is also pushing to include permanent rules for “screening and testing of patients, visitors and staff, measures ensuring optimal PPE, exposure notifications for healthcare workers and paid leave for those exposed or infected with COVID-19,” according to Health Care Dive.<sup>2</sup> All of this despite the fact that the scientific underpinnings are now even shakier than they were in 2020.

The AARP (formerly the American Association of Retired Persons) is even going so far as to claim mask wearing can help prevent heart attacks!<sup>3</sup> Florida Surgeon General Dr. Joseph Ladapo had the following to say about the AARP's attempt to invent benefits for mask wearers:<sup>4</sup>



Joseph A. Ladapo, MD, PhD   
@FLSurgeonGen

...

[aarp.org/health/conditi...](https://aarp.org/health/conditi...) So masks prevent heart attacks now?! 🤔

Does @AARP know that @cochranecollab just published a review showing that masks don't stop the spread of respiratory viruses...including COVID? We need accurate info about health, not more self-serving propaganda.



11:00 AM · Feb 3, 2023 · 87.5K Views

## Gold-Standard Scientific Review Published

The latest of these studies is a meta-analysis and systematic review by the Cochrane Library,<sup>5,6,7,8,9</sup> an independent research organization that has been reviewing the use of physical interventions to reduce respiratory illnesses since 2010.<sup>10</sup>

Cochrane reviews have long been recognized as the gold standard in evidence-based health care as their analyses look at the whole body of published science, and every few years, reviews are updated to include the latest research findings.

For example, reports on "Physical Interventions to Interrupt or Reduce the Spread of Respiratory Viruses" were published in 2010, 2011, 2020 and January 30, 2023.

In the video above, Dr. Vinay Prasad, a hematologist-oncologist, health researcher and professor of epidemiology and biostatistics at the University of California, reviews<sup>11</sup> the latest Cochrane review, which added 11 new randomized controlled trials (RCTs) and cluster-RCTs to their previous 2020 analysis.

That brings the total number of RCTs included in the systematic review to 78. Six of the 11 new RCTs were conducted during the COVID pandemic and looked at the spread of COVID-19 specifically.

## **Still No Evidence to Back Surgical Mask Recommendations**

The Cochrane investigators concluded that, while there's "uncertainty about the effects of face masks" due to trial bias and low adherence by participants, the pooled results of randomized controlled trials (RCTs) "did not show a clear reduction in respiratory viral infection with the use of medical/surgical masks." Here's an excerpt from the review:<sup>12</sup>

*"Medical or surgical masks – Ten studies took place in the community, and two studies in healthcare workers.*

*Compared with wearing no mask in the community studies only, wearing a mask may make little to no difference in how many people caught a flu-like illness/COVID-like illness (9 studies; 276,917 people); and probably makes little or no difference in how many people have flu/COVID confirmed by a laboratory test (6 studies; 13,919 people)."*

The relative risk reduction of using surgical masks in the general population (within hospitals and communities at large) to reduce symptoms of flu-like/COVID-like illness (not lab confirmed) was 0.95.

A value below 1 indicates the intervention improved outcomes, whereas a value above 1 shows it made it worse. So, here, surgical masks was associated with a relative risk reduction of 5%.

However, it's not statistically significant, as the confidence interval ranges from 0.84 to 1.09.<sup>13</sup> So, it may lower your risk by as much as 16% or raise it by 9%. As noted by Prasad, the most accurate way to describe this finding is that "we have not proven there is an effect."

**“ This is conclusive ... This is the reality ... You just don't have credible evidence [for masking], and the science didn't change ... This is what the science has always shown. ~ Dr. Vinay Prasad ”**

The same goes for reducing laboratory-confirmed influenza and COVID. Here, the relative risk reduction was 1.01 with a confidence interval of 0.72 to 1.42. In other words, it's a complete wash. On average, it raises your risk of lab-confirmed infection by 1%. Range-wise, it may lower your risk by 28% or raise it by as much as 42%.

So, masking really has no effect on confirmed infection rates (which, by the way, is more important than reports of perceived symptoms). As noted by the authors, the analysis "suggests that wearing a medical/surgical mask probably makes little or no difference compared to not wearing a mask for this outcome."

*"This is conclusive," Prasad says. "This is the reality ... You just don't have credible evidence [for masking], and I want to tell you this: The science didn't change ... This is what the science has always shown."*

## **N95 Masks Are Useless Too**

The review also found "no clear differences between the use of medical/surgical masks compared with N95/P2 respirators." As detailed by the authors:<sup>14</sup>

*"N95/P2 respirators – Four studies were in healthcare workers, and one small study was in the community. Compared with wearing medical or surgical masks, wearing N95/P2 respirators probably makes little to no difference in*

*how many people have confirmed flu (5 studies; 8407 people); and may make little to no difference in how many people catch a flu-like illness (5 studies; 8407 people), or respiratory illness (3 studies; 7799 people)."*

## **Public Health Experts Simply Lied**

So, in conclusion, none of the new studies that were added made one iota of difference. Masks were unable to prevent influenza transmission before the pandemic, and they still fail to prevent respiratory infections, be it the flu or COVID.

But, if there was no evidence to back masking in the first place, how did we end up with mask mandates? In short, our public health authorities started lying. As noted by Prasad: "Anthony Fauci told the truth on '60 Minutes' – the first time. The second time when he said you have to wear a cloth mask ... he was lying."

Yet somehow, they managed to convince everyone that the truth was the lie and the lie was the truth.

A clip from Fauci's "60 Minutes" appearance is featured in "The Jimmy Dore Show" video above, as are some of his later public announcements where he suddenly promotes mask wearing and defends mask mandates.

## **Population-Wide Mask Mandates 'Never Made Sense'**

In a February 3, 2023, article in The Spectator,<sup>15</sup> lead author Tom Jefferson and Carl Heneghan, director of the University of Oxford's Centre for Evidence-Based Medicine and former editor-in-chief of BMJ Evidence-Based Medicine, explained why the 2020 Cochrane review was unable to influence public health policy on masking:

*"This is the second update of the review since the start of the pandemic. The first update was delayed by seven months due to unexplained editorial decisions. It was too late when it came out in November 2020 to make a difference to national COVID policy; by then, activism, low-quality observational*

*evidence and government policy had set the agenda for mask mandates, and the damage had been done.*

*Often these government policies relied on observational studies on mask usage and the spread of COVID. But there are lots of flaws in observational evidence.*

*For example, in the absence of a study protocol setting out methods before the study is done, it is possible to shift the dates of an observational analysis to suit the rise and fall in infections. So if you time your analysis near the peak of infections, the results will favor mask interventions as the infection rate quickly decreases.*

*But when we pointed out in November 2020<sup>16</sup> the troubling lack of robust evidence on face masks and the problems with observational studies, we were shouted down, removed from Facebook and put on the government's secret watchlist ...*

*Mandates that affected the whole population never made sense ... even in high adherence populations such as Japan, they have not stemmed an inevitable rise in infections. Part of the problem may be that during the pandemic the government had to be seen to be doing something. Interventions like handwashing and vaccines are invisible, but masks acted as a visible sign of compliance.*

*What we have witnessed in this pandemic are strong beliefs about what works and what doesn't ... Several policies such as mask mandates, restrictions, and unproven interventions now seem absurd in hindsight. And as the culture of fear has lifted, the population has become all too aware of their detrimental effects.*

*We failed to follow an evidence-based approach during the pandemic. We are now left with the human, social and economic aftermath of evidence-free policies."*

## **Public Health Agencies 'Steeped in Failure'**

As noted by Prasad in an accompanying Substack post:<sup>17</sup>

*"Who should we be angry with? Obviously there is a class of twitter expert that doesn't understand how to read evidence. Some of them have even been promoted to be deans for public health schools. So much for public health.*

*But the real failure is NIAID [National Institutes of Allergy and Infectious Diseases] and CDC [U.S. Centers for Disease Control and Prevention]. It is Tony Fauci.*

*Fauci controlled NIAID budget. He could have run 10 RCTs of masking – different masks, different ages, different settings. He chose to run zero. Instead he went on TV 1,000 times and lied about effectiveness of cloth masks ...*

*CDC and AAP [American Academy of Pediatrics] are also steeped in failure. These agency forced 2 year olds to mask. Against the advice of the World Health Organization and UNICEF.*

*The Cochrane review fails to identify any data that pertains to 2 year olds. The CDC should be ashamed of themselves. Tens of thousands of people working from home, and no one inside the organization with the ability to stop this policy."*

## **Scientists Censored by Propagandists**

Perhaps the most disturbing aspect of this masking debacle has been the massive censorship and shutting down of healthy scientific debate, not just among laypeople but among scientists themselves.

Only the yes-men were ever given room to air their perfectly scripted views, while those who had concerns were silenced, regardless of their credentials. YouTube even censored a roundtable discussion with Florida Gov. Ron DeSantis and several medical



experts. Why? Because in multiple instances, the doctors said children didn't need to wear masks, and this position violated YouTube's "COVID-19 medical misinformation" policy.

In a February 6 Substack article, Jefferson describes the propaganda effort to twist the findings of the 2023 Cochrane review on masking and other physical interventions against COVID-19:<sup>18</sup>

*"We, the co-authors of the Cochrane review ... have received several ... 'can I please check the main facts and, by the way, tell me what your review says because I cannot be bothered to do my job' type of messages. However, we recently got another query ... This request comes from a very powerful press syndicate:*

*'I'm reaching out because I've been seeing some posts [links redacted by TJ] spreading widely on social media that seem to be misrepresenting the conclusions of your recently published study on physical interventions and respiratory viruses.*

*Do you think it is a misrepresentation to claim (as the tweets I link to above do) that your study definitively proves that masks don't work in preventing the spread of viruses such as COVID-19 and the flu? If so, I'd be interested in debunking these claims to set the record straight and would love to speak with you more about the study.'*

*The disturbing aspect of this request is as follows: the stringer is making contact with one of us. After exchanging pleasantries, he/she will ask a few superfluous questions.*

*We have an abstract, a plain language summary, TTE [Trust the Evidence] posts and a podcast, and Carl and I have written a Spectator piece covering the review. If you are a real masochist, you can read all the 300-plus pages of the review ...*

*So there is nothing to explain or fact-check. But the stringer is not really interested in checking facts. What they want to do is to write truthfully that they have spoken to one of us and then put the spin required in the release to ensure the 'misinterpretation' of twitterati is set straight. 'Debunking' is the term used, and it will be actioned if the stringer thinks the Twitterati have 'misinterpreted' our findings ...*

*What disturbs me ... is the idea of 'debunking' or 'normalization' of the information flow. We have done the tough work over two decades, reporting results separately from our interpretation, as in all Cochrane reviews. The studies' results are the results reported by the authors of the single studies included in the reviews.*

*Our interpretation is one you can – and should if you want – challenge. However, successfully challenging our interpretation requires hard work, elbow grease, graft, focus, and application. So picking up the phone and speaking to someone, then deciding how to 'debunk' or normalize the message, is so much easier.*

*The reach of this particular press syndicate is global and powerful. I wonder why the stringer wanted to 'debunk' the interpretation of the twitterati mentioned in the text. To ensure 'truth' triumphed? Or to ensure no more waves in the official narratives were made by a bunch of academics or Twitter dwellers?"*

While Jefferson now avoids interactions with the mainstream media, he did agree to an interview with investigative journalist Maryanne Demasi, which you can [read here](#).<sup>19</sup> He also granted an interview with Paul D. Thacker, which you can [read on Thacker's Substack](#).

## **Pro-Maskers Guilty of Creating Massive Pollution Problem**

In addition to the many [health problems associated with prolonged mask wearing](#), which I've addressed previously, mask policies have also created a massive pollution problem. Ironically, many pro-mask activists also claim to be environmentalists, yet they completely ignore the environmental effects of mask mandates.

According to UNICEF, the world used and discarded an estimated 2.4 billion masks in 2020.<sup>20</sup> Another estimate, calculated by the University of Southern Denmark,<sup>21</sup> put that number at 129 billion face masks EACH MONTH. As reported by Business Insider:<sup>22</sup>

*"Since the very first lockdowns of 2020, these plastic-based coverings have ... been an environmental disaster in the making ... [The] rapid adoption of face masks ... means their waste can now be found everywhere ...*

*Discarded masks have seeped into every corner of our lives, from city sidewalks to solemn niches of the internet.<sup>23</sup> They've washed up on the shores of Hong Kong's deserted Soko Islands and cloaked octopi off the coast of France.*

*Scientists and environmental advocates expressed alarm<sup>24</sup> about this tsunami of waste ... They foresaw the dire ecological ramifications of our mask waste – especially once those masks made their inevitable way into the earth's waterways.*

*Elastic loops pose entanglement hazards for turtles, birds, and other animals. Fish could eat the plastic-fiber ribbons that unfurl from a discarded mask's body. Then, there is the untold menace to human health that would likely present, at the microscopic level, once masks began to disintegrate."*

The global consumption of other single-use plastics also increased by a whopping 300% in the last three years, further adding to the problem of plastic pollution. You'd think governments that claim to be so concerned about "saving the planet" would address the issue, but no. As noted by Business Insider:<sup>25</sup>

*"[W]orld leaders have ignored the problem. And once the immediate public-health emergency superseded ecological concerns – the heads of Big Plastic*

*made sure it stayed that way."*

## **Medical Masks Are Hazardous Waste**

Research<sup>26</sup> from Swansea University in Wales reveals single-use masks readily disintegrate when submerged in water, releasing both micro- and nanoplastic particles, even after relatively brief periods of submersion.<sup>27</sup>

As if that's not bad enough, the masks also release nanoparticles of heavy metals like lead, cadmium, copper and arsenic. Not only can this mask litter result in contaminated drinking water, but the particles can also disrupt entire marine food chains.

Nanoparticles are particularly troublesome as they can penetrate cell walls and damage DNA, and this is true not just in animals and humans but also in plants. As reported by Business Insider:<sup>28</sup>

*"Recent research<sup>29</sup> on silicon nanoparticles, in particular, has shown that if a particle is very small in nano scale, it can act almost as a tiny, carcinogenic bomb. Multiply that by a minimum of several hundred per mask, at a rate of 50,000 masks disposed per second, and the scope of the dilemma grows vivid."*

According to research<sup>30</sup> published in Science of the Total Environment in September 2021, the polypropylene in medical face masks could be recycled either by mechanical or thermal means, and biodegradable mask options are also available. Yet no one in a position of power is advocating for these solutions.

## **High Time to Discard False Mask Narratives**

It's time to put an end to the false narratives that mask wearing lowers infection rates and/or that it "protects others." They protect no one. Not the wearer and not those around the wearer.

And, as noted by Prasad in the featured video, the burden of proof lays on the proponent of a given intervention. In this case, those claiming we should mask up to protect others are the ones who have the responsibility to prove they're correct. The burden of proof is not on those who object, based on logical and existing evidence.

Universal mask wearing is also resulting in environmental pollution that is completely unnecessary and avoidable. So, please, just stop wearing disposable masks. It's time. The record has been set straight. There are no benefits, and plenty of risks and negative impacts.

## Sources and References

---

- <sup>1, 8, 10</sup> [Daily Sceptic February 2, 2023](#)
- <sup>2</sup> [Health Care Dive December 9, 2022](#)
- <sup>3</sup> [AARP January 30, 2023](#)
- <sup>4</sup> [Twitter Joseph Ladapo February 3, 2023](#)
- <sup>5, 12, 14</sup> [Cochrane Library January 30, 2023](#)
- <sup>6</sup> [Daily Mail February 2, 2023](#)
- <sup>7, 11, 17</sup> [Vinay Prasad Substack February 1, 2023](#)
- <sup>9, 15</sup> [The Spectator February 3, 2023](#)
- <sup>13</sup> [Cochrane Library January 30, 2023, Summary of findings 1](#)
- <sup>16</sup> [The Spectator November 19, 2020](#)
- <sup>18</sup> [Tom Jefferson Substack February 6, 2023](#)
- <sup>19</sup> [Maryanne Demasi Substack February 5, 2023](#)
- <sup>20</sup> [UNICEF December 1, 2021](#)
- <sup>21</sup> [Science Daily March 10, 2021](#)
- <sup>22, 25, 27, 28</sup> [Business Insider March 25, 2022](#)
- <sup>23</sup> [Covid Litter](#)
- <sup>24</sup> [DW April 23, 2020](#)
- <sup>26</sup> [Water Research May 15, 2021; 196: 117033](#)
- <sup>29</sup> [Carcinogenicity and Mutagenicity of Nanoparticles](#)
- <sup>30</sup> [Science of the Total Environment September 10, 2021; 786: 147628](#)