

MASK FRAUD

Written by J. Meehan
Wednesday, 10 February 2021 10:34 -

MASK FRAUD AND THE LIES OF PUBLIC HEALTH 'AUTHORITIES'

BY JIM MEEHAN MD

A response to people who use the classic fallacious argument, "Well, if masks don't work, then why do surgeons wear them?"

I'm a surgeon that has performed over 10,000 surgical procedures wearing a surgical mask. However, that fact alone doesn't really qualify me as an expert on the matter. More importantly, I am a former editor of a medical journal. I know how to read the medical literature, distinguish good science from bad, and fact from fiction. Believe me, the medical literature is filled with bad fiction masquerading as medical science. It is very easy to be deceived by bad science.

Since the beginning of the pandemic I've read hundreds of studies on the science of medical masks. Based on extensive review and analysis, there is no question in my mind that healthy people should not be wearing surgical or cloth masks. Nor should we be recommending universal masking of all members of the population. That recommendation is not supported by the highest level of scientific evidence.

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First, let's be clear. The premise that surgeons wearing masks serves as evidence that "masks must work to prevent viral transmission" is a logical fallacy that I would classify as an argument of false equivalence, or comparing "apples to oranges."

Although surgeons do wear masks to prevent their respiratory droplets from contaminating the surgical field and the exposed internal tissues of our surgical patients, that is about as far as the analogy extends. Obviously, surgeons cannot "socially distance" from their surgical patients (unless we use robotic surgical devices, in which case, I would definitely not wear a mask).

The CoVID-19 pandemic is about viral transmission. Surgical and cloth masks do nothing to prevent viral transmission. We should all realize by now that face masks have never been shown to prevent or protect against viral transmission. Which is exactly why they have never been recommended for use during the seasonal flu outbreak, epidemics, or previous pandemics.

The failure of the scientific literature to support medical masks for influenza and all other viruses, is also why Fauci, the US Surgeon General, the CDC, WHO, and pretty much every infectious disease expert stated that wearing masks won't prevent transmission of SARS CoV-2. Although the public health "authorities" flipped, flopped, and later changed their recommendations, the science did not change, nor did new science appear that supported the wearing of masks in public. In fact, the most recent systemic analysis once again confirms that masks are ineffective in preventing the transmission of viruses like CoVID-19: https://wwwnc.cdc.gov/eid/article/26/5/19-0994_article

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If a surgeon were sick, especially with a viral infection, they would not perform surgery as they know the virus would NOT be stopped by their surgical mask.

Another area of "false equivalence" has to do with the environment in which the masks are worn. The environments in which surgeons wear masks minimize the adverse effects surgical masks have on their wearers.

Unlike the public wearing masks in the community, surgeons work in sterile surgical suites equipped with heavy duty air exchange systems that maintain positive pressures, exchange and filter the room air at a very high level, and increase the oxygen content of the room air. These conditions limit the negative effects of masks on the surgeon and operating room staff. And yet despite these extreme climate control conditions, clinical studies demonstrate the negative effects (lowering arterial oxygen and carbon dioxide re-breathing) of surgical masks on surgeon physiology and performance.

Surgeons and operating room personnel are well trained, experienced, and meticulous about maintaining sterility. We only wear fresh sterile masks. We don the mask in a sterile fashion. We wear the mask for short periods of time and change it out at the first signs of the excessive moisture build up that we know degrades mask effectiveness and increases their negative effects. Surgeons NEVER re-use surgical masks, nor do we ever wear cloth masks.

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The public is being told to wear masks for which they have not been trained in the proper techniques. As a result, they are mishandling, frequently touching, and constantly reusing masks in a way that increase contamination and are more likely than not to increase transmission of disease.

Just go watch people at the grocery store or Walmart and tell me what you think about the effectiveness of masks in the community.

If you can't help but believe and trust the weak retrospective observational studies and confused public health "authorities" lying to you about the benefits and completely ignoring the risks of medical masks, then you should at least reject the illogical anti-science recommendation to block only 2 of the 3 ports of entry for viral diseases. Masks only cover the mouth and nose. They do not protect the eyes.

Jim Meehan MD is a physician, accomplished leader, and entrepreneur who provides innovative science and solutions that adhere to open, honest, transparent, and uncompromisingly patient-centered principles. He transforms raw data and scientific research into easy to understand information that educates, informs, and motivates changes in behavior to lead to improved health and wellness. Dr. Meehan believes in educating patients to be scientists of their own health.

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