

Subject Title: Inquiry
Date: February 12, 2021

From Mark Dery (MD)

Mark:

Apologies, in advance, for the length of this mail.

It's been a while. I'm now a freelance cultural critic, essayist, and independent scholar. (More about my recent books and articles, if you're curious about what I've been up to, here: <https://www.markdery.com/>).

In the past few years, I've followed your FB, Twitter, and blog posts with growing interest. Your evolution from the Neil Postman/Ben Bagdikian-style media critic I knew, sounding the alarm about the dangers of the media monopoly and the propaganda function of the mass media, to ardent skeptic of seemingly any official narrative—about 9/11, about vaccines, about COVID-related protocols such as masking and lockdowns—caught my attention. I've watched a number of your interviews (with Gary Null, with Matt Taibbi, and others). It's clear you regard yourself, as you did when we were NYU colleagues, as a standard-bearer of old-guard liberalism (as opposed to what you regard as the "illiberal" liberalism of "cancel culture," *soi-disant*) and that you believe yourself to be, now as then, a defender of skeptical inquiry founded on a respect for objective fact (as evidenced by your comment in one interview that you exhort your students never to take your word for anything, and to challenge your assertions if they discover evidence to the contrary). Yet a number of the positions you've staked out—your stance on vaccines and 9/11, your assertion that "mask mouth" causes heart attacks and that the flu vaccine is being used to euthanize "useless eaters" in nursing homes (<https://markcrispinmiller.com/2020/10/new-study-links-flu-shots-to-covid-19-deaths-worldwide-among-the-elderly/>), and so forth—are perceived by your critics as conspiracy theories (a term you reject, I know, but your critics seem to agree on that point).

Your recent contretemps with NYU stirs up a (murder?) hornet's nest's worth of issues, from the limits of academic freedom to the question of how to tell when radical skepticism shades into the paranoid style of the conspiratorial worldview to the tension between the current generation of social-justice warriors and the liberal old guard to university administrators' terror of the Twitter mob's ability to torpedo their brand.

To get to the bottom of these and other, timely questions, I'm writing an article for *The Chronicle of Higher Ed*. While pegged to your libel lawsuit against the signatories to the letter mentioned here (<https://patch.com/new-york/west-village/nyu-professor-sues-fellow-faculty-members-over-mask-controversy>), its focus will be your intellectual trajectory, from the media critic of *Boxed In* and the *Bush Dyslexicon* to the radical skepticism of your current worldview, and what that odyssey says about the larger loss of faith in official narratives on both the Left *and* the Right. I'm especially curious to hear your thoughts on the relationship between your earlier media criticism and your current cultural critique.

I realize you can't speak on the record about anything related to your lawsuit, but since you've addressed, with Taibbi and others, the charges leveled by your student, and your belief that "cancel culture" must be rebuked in order to preserve free speech (and free thought), I'm hoping you'll be willing to be interviewed, in depth, about the lightning-rod issues detailed above, and your intellectual evolution since 9/11, for this article. Naturally, I'd record our conversation (via phone or Zoom) to ensure that all quotes are scrupulously accurate, and would provide you with a copy of that recording to settle any disputes about misquotes that might arise (but won't arise, since the recording would instantly reveal them). Any topics bearing directly on ongoing legal actions would of course be off-limits.

Let me know if you're willing to speak. I'll write the article regardless, but would much rather include your perspective, and afford you the opportunity to address points of argument raised by your critics, than not.

Thanks for taking the time to read this mail,

M. Dery

Subject Title: CHRONICLE OF HIGHER ED Article

Date: April 15-16, 2021

From MD

Some weeks ago, I mailed you regarding an article I'm writing for *The Chronicle of Higher Education* about your student's allegations on Twitter, the resulting actions taken by NYU and your colleagues, and your lawsuit in response to your colleagues' assertions in their letter.

To date, I've received no response to my earlier mail, but my editor and I strongly feel that space should be made, in my article, for you to address the charges leveled by your student, your colleagues, and critics outside the academy. If you're willing to be interviewed—by e-mail, phone, or Zoom—my editor, Len Gutkin (copied here), and I will make every effort to ensure that you're given the opportunity to respond at thoughtful length to the most serious allegations.

If your health, or the need to ensure that nothing you say jeopardizes your lawsuit, or both disincline you to consent to an interview, perhaps you'll be willing to refer me to a sympathetic colleague, whether at NYU or any other academic institution, who will be willing to respond in your stead, addressing (and, presumably, rebutting) the charges leveled.

I'll leave a message at your NYU number for redundancy's sake, in the unlikely event that you're not checking your e-mail.

Yours sincerely,

M. Dery

From MCM (Mark Crispin Miller)

Mark, It's good to hear from you; I recall our conversations back when we were colleagues here at NYU, and the class of yours that you asked me to visit. I also recall how shabbily they treated you; and was very glad to see, and read, your excellent study of the Gulf War.

I did get your first email, and have just been too busy to respond, what with my difficult Lyme protocol (I'm on medical leave this term), my efforts to keep up with current events (mostly propaganda-wise), and, of course, the lawsuit. All of that has left me little time to think about your proposal, which I do find intriguing, though I'm naturally concerned that it be fair.

Since this story is as complex as it is (I think) important, shedding light on Academia today, and the bizarre convergence of "woke" ideology with neoliberal practices and policies—a complication with dire implications for free speech and academic freedom—I would be grateful to have someone do a thoughtful job, rather than a long and nuanced hit-piece on myself. Which is to say that "space" should *certainly* "be made" for me to address all those accusations.

So do let's talk about it. I know you'd like to get it going sooner rather than later; and I myself would like to see a solid essay on this controversy sooner rather than later, since the judge will very likely rule at any moment on my colleagues' motion to dismiss, so I would like the *Chronicle's* readership to understand what's really going on. (The documents in this case—especially the exhibits that my colleagues submitted to "prove" their claims about me, most of them their own email exchanges with each other—make for fascinating reading, and should be studied carefully, as I know you would do.)

I have been doing a lot of podcasts on the subject—I just did one today—so am surely not averse to speaking out; I just want to be fairly represented, which these days, in this censorious climate, is increasingly unlikely.

MCM

From MD

Mark:

Thank you for this prompt, collegial reply. I do hope you're not confusing me with another colleague, since I haven't written a study of the Gulf War, although I touched on it back when I was doing media theory/media criticism. Perhaps you're thinking of my 1993 *Culture Jamming* pamphlet, in which I use the Gulf War as an example of media spectacle and pro-war propaganda (and in which you're quoted).

I'm pleased to hear you're willing to respond to the allegations made by your colleagues and former student, specifically those that raise the question of academic freedom and the constraints imposed on it by disciplinary boundaries and standards.

Of necessity, our discussion will touch on the charge leveled by your critics, namely, that what you characterize in your interviews as a principled skepticism about the "propagandistic" nature of official narratives is in fact "conspiracy theory" and therefore not protected by academic freedom. You reject that characterization of your views, obviously, but it's important, nonetheless, that you respond to your critics, addressing some of the controversial assertions that in some quarters have earned the "conspiracist" label.

To be clear, it isn't my intent to debate you on any of these points; this is emphatically not a cross-examination. My goal, as interviewer, will be to draw you out about *whether* you hold some of the more controversial positions attributed to you by your critics; *whether* you subscribe to some of the more lightning-rod theories you've posted, tweeted, or blogged about. You'll be given full rein to

explain your thinking about specific claims and, if you're so moved, to defend your positions. I'll listen and, when necessary, ask for clarification or play devil's advocate.

We can conduct our interview by phone, Zoom, or e-mail. Let me know which you prefer, and what days and times are best for you. I'm free this Sunday and throughout the week as well as both days next weekend. I will, of course, record our conversation to ensure not only that you'll be quoted accurately but that there's an objective record of what was said.

Yours sincerely,

M. Dery

Subject Title: ROUND TWO

Date: April 26, 2021

From MD Thanks for your willingness to go another round, Mark. Let me know what day and time work best for you and I'll make it work on my end. We'll devote that session to your *intramural* speech—the truth claims you make in the classroom, questions of academic freedom versus the epistemological standards and boundaries of your discipline, etc.

From MCM

Yes. Just FYI, I don't make "truth claims" in my propaganda course. Rather, I urge the class to dig, comprehensively, into the evidence for and against whatever propaganda narrative we're studying, and whichever ones they choose to give reports and write their papers on. If they ask me what I personally think about some issue, I will tell them, but *always* with the caveat that they "must not believe a single word I say" (as you surely know I say, as I've mentioned it repeatedly in interviews).

I've been thinking about our conversation earlier (I quite enjoyed it, by the way), and want to make an observation here, while it's fresh in my mind (and you may feel free to consider this exchange a part of our ongoing discussion, for your purposes).

I noticed, in several of your questions, a certain veneration for professional expertise—a stance exemplified by, e.g., your invocation of "virologists," and also in your several references to "peer review." As to the former, I hope I made clear that my own views and online writings on, say, vaccine safety, and—more urgently—the safety of the COVID-19 "vaccines" in particular, are all informed by, and squarely based on, the talks and writings of (and, often, my own exchanges with) specialists well-qualified to question the official narrative. That those experts *don't* get quoted in the NYTimes, or on NPR, or any other such outlet, and that such experts even find themselves under attack, makes them that much more credible, as far as I'm concerned, because they make convincing arguments, and have nothing to gain from going against the grain. (NB most doctors learn almost nothing about vaccinology in med school, and are mightily persuaded to observe the CDC's vaccination schedule, which they question, or depart from, at their peril.)

Now, as for peer review, there really are no grounds for confidence in that process, as far as medical and scientific journals are concerned, largely because the fields in which Big Pharma has an interest have been thoroughly corrupted by it, and so has peer review—as has been widely noted in scientific studies, books for laypersons and

outlets like the Times and New York Review. Here are just a few examples:

<https://ahrp.org/medical-journals-complicit-in-corruption-of-medicine/>
<https://link.springer.com/article/10.1007/s13277-017-5487-6>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1126057/>
<https://jamanetwork.com/journals/jama/fullarticle/196846>
<https://www.nybooks.com/articles/2009/01/15/drug-companies-doctors-a-story-of-corruption/>

Such controversy may come as a shock to profs in other disciplines—especially in the humanities: academics who no doubt comprise a large percentage of the *Chronicle's* readership. In *those* fields, peer review has its own problems, as wags like Alan Sokal and James Lindsay have shown (satirically). So, inasmuch as peer review tends to reflect received opinion—which is just as influential among academics as it is outside the so-called "ivory tower" (if not even *more* influential)—I see no reason to regard it as sacrosanct.

I hope we can pursue this line of argument, because it has a lot to do with what has happened to me here.

MCM

p.s. At the moment, Wednesday looks good; I will try to let you know ASAP.

From MD

Mark: I'll keep Wednesday open. Please let me know ASAP. I will respond to your letter at the thoughtful length it deserves when I can clear away the underbrush in my workday. Sincerely, M.D.

Subject Title: Round Two?

Date: April 27, 2021

From MD

Mark:

Are you able to confirm a time slot for our second session, whether tomorrow or later this week? Advance warning would be helpful in ensuring that I can juggle my schedule to accommodate yours.

Sincerely,

M. Dery

From MCM

Oh, yes, yes, sorry.

Quite sick today. May we resume on Thursday afternoon?

From MD

I'm sorry to hear that, Mark. Thursday afternoon works. Name a time and I'll schedule the Zoom.

From MCM

2:00

Subject Title: Migraine

Date: April 29, 2021

From MCM

Mark, I thought I could beat it but can't.

I have a funeral and doctor's appt tomorrow. Are you free any time this weekend?

1,000 apologies

From MD

Understood, Mark. Let me double-check with my editor. In the meantime, I don't suppose you'd be willing to answer a few questions by e-mail, given that your schedule doesn't permit a Zoom? I thought the asynchronous nature of e-mail might permit a response or two during whatever downtime you've got. M.D.

From MCM

Let me take a whack at it.

From MD

Thanks, Mark. I'll send a few questions later tonight. While I have your attention, are you able to suggest a time slot for a weekend Zoom?

Subject Title: QUESTIONS

Date: April 29, 2021

From MD, numbered questions in bold red, with answers by MCM in plain black

Mark: Here, as agreed, are a few questions—low-hanging fruit, mostly.

1. In one of her tweets, Jackson claims that you sent her an e-mail insisting that she "must acknowledge 'both sides' of the 'mask effectiveness debate' or I'm essentially allowing myself to be manipulated by the mainstream media." Here's a screenshot:



Is her account of your e-mail exchange factually accurate?

No. The only email exchange I ever had with her took place in mid-September, when she asked to join the class; so I never "told" her anything of the kind. There's an exhibit, submitted by, I think, my colleague Natasha Shull, recounting her conversation with JJ after the *first* class that she attended, in which she spoke up for the one and only time she spent with us. It was a class on Edward Bernays' *Propaganda*. I asked for responses from the class. She raised her hand, and said that it's "a work of white supremacy." I said that that was very interesting, that I'd never heard that before, and could she give us an example? Long silence.

I then suggested that, when we're dealing with complex issues, it's good to try to take as comprehensive a view as possible; that, in the Twenties, when the book came out, the most influential movement against the "unfit," in both the US and UK, was eugenics, which I explained, noting that it was not a "white supremacist" movement, exactly, because it dismissed as "unfit" not just black and brown people, but also Appalachian whites, Southern European immigrants, etc. I made the point that propaganda tends to reduce all ills to just one thing, so that we should try to take as broad a view as possible, etc.

So after *that* class, JJ marched off to this colleague's office, to complain that I "had basically called her a race reductionist." I did not "call" her anything, but was just trying to do my job as a professor. Similarly, I never told her that she was "essentially allowing [her]self to be manipulated by the mainstream media." That's something she herself inferred from that one class discussion of the masking issue.

2. In another tweet, Jackson charges that you “spent an entire class period telling students that wearing masks doesn’t prevent the spread of COVID-19, and that hydroxychloroquine trials were made to fail so more people would be given the vaccine and have their DNA changed.” Is her characterization of your remarks to her and her classmates accurate?

No. That part of the class discussion, on the effectiveness of masks, lasted maybe 20 minutes, and was a sequel to the *first* class of the term, wherein I recommended that the class read *all* the scientific literature on masks and respiratory viruses. JJ wasn't there, as she had not yet joined us.

In the class that she refers to, the subject of masks came up again, when another student started taking shots at an article I'd recommended to them for convenience's sake: Denis Rancourt's summary of seven of the eight RCT's that I'd encouraged the class to read. (At that time there actually were ten, which I didn't know.) I recognized the student's point "debunking" Rancourt's article, because they all came from a hit-piece published in *Psychology Today*. The student had read just that hit-piece, not the studies per se; and so I talked about the need to look beyond what Google throws up first, because their algorithms favor certain views and vilify and/or bury others (which is, of course, another propaganda tactic).

<https://ocla.ca/wp-content/uploads/2020/04/Rancourt-Masks-dont-work-review-science-re-COVID19-policy.pdf>

<https://davidkylejohnson.wordpress.com/2020/07/28/a-complete-debunking-of-denis-rancourts-argument-that-masks-dont-work/>

In that class, I also mentioned scientific critiques of those HCQ trials that *were* designed to fail, but that took up a few minutes.

Specifically, do you believe the hydroxychloroquine trials were designed to fail, and if so by whom?

Do I "believe" it? That question has rather an inquisitorial ring to it. What I "believe" is that there were three trials in the US, and one in China, that all used excessively high doses of HCQ, so as to deem the drug too dangerous to use in treating SARS-CoV-2. Those trials, and the many other measures used to make that cheap, effective SARS-CoV-2 remedy seem toxic and/or ineffective, are noted in this overview by Dr. Meryl Nass, a biowarfare epidemiologist (and a key advocate of the many troops sickened by the anthrax vaccine from 1997 on):

<https://anthraxvaccine.blogspot.com/2020/06/how-false-hydroxychloroquine-narrative.html>

Now, what Dr. Nass evokes there, in noting all those different tactics, is a very powerful propaganda drive—the sort of thing we'd study in my class, or that a student might decide to tackle in a final paper. The purpose of that drive has been to make it seem as if there are *no* remedies for SARS-CoV-2, which we can therefore deal with *only* by "vaccinating" everyone on Earth, as Bill Gates has said.

Another physician who has spoken out about the efficacy of HCQ is Dr. Harvey Risch at Yale (where his colleagues then went after him, rather like the way my colleagues have come after me): <https://www.nydailynews.com/opinion/ny-oped-lets-all-be-honest-about-hydroxychloroquine-20201013-5j5q4i23qvufuzos4jh7ztc3usa-story.html>

(If you would like to email either Dr. Nass or Dr. Risch, I'll gladly send you their email addresses.)

Is she correct in her allegation that you believe the vaccine alters recipients' DNA? If so, which vaccine (Moderna, Pfizer, Johnson & Johnson) does this?

We did not discuss the COVID-19 sera (they aren't actually vaccines) in the classes that JJ attended, because they had not been rolled out yet. I don't recall their coming up in any extended class discussion until the end of the semester. It's entirely possible that, the day JJ was there, I made some mention of concerns raised about the gene-editing technology that's key to the Pfizer and Moderna "vaccines" in particular.

Whether that technology can alter one's DNA is still an open question, so my mind is open on the subject.

Who do you believe is behind this conspiracy (or whatever term you prefer) to alter recipients' DNA? What's the endgame? Who would want to do this, and why? Is this part of the Great Reset?

Note how you've jumped from Julia Jackson's "allegation" to a tacit accusation of "conspiracy theory," again demanding to know what I "believe."

These questions are important—indeed, urgent—and have been much studied and discussed. Not sure what you want from me here. Have you read Klaus Schwab's book? Alison McDowell has a lot to say about the Great Reset. And have you looked into transhumanism? That's not a figment of my wild imagination.

3. You're adamant (on your blog, and in interviews) that you were merely challenging Jackson and her fellow students to question "the case for universal masking as defense against transmission of SARS-COV-2," as you said on *News From Underground*, urging them to weigh the evidence to the contrary ("the randomized, controlled tests...finding that masks...are ineffective at preventing such transmission") and to pay special attention to the "possible financial links" between those who defend masking and "Big Pharma and the Gates Foundation."

That's a somewhat garbled version of what I said in that class. Let me clarify:

I urged the students to read all the studies, pro and con, and to come to their own conclusions as to which are most convincing. How do laypersons judge the soundness of *new* scientific studies, which have not yet stood the test of time? I gave *two* suggestions: find scientific reviews (which are often posted with new studies); and take note of the university where a certain study was conducted, to see if there might be some conflict of interest.

But as we discussed on Zoom, if you're going to choose an example of a propaganda campaign, you need to explain to your students *why* you believe the media narrative in question isn't what it appears to be—public-health messaging about masking—but is, rather, propaganda.

Woah. "Public-health messaging about masking" *is* propaganda: i.e., an organized attempt to get large numbers of people to think or do something (or not think or not do something). So anti-drunk-driving PSAs are propaganda, as are anti-smoking drives. Propaganda can be deceptive or accurate, benign or malign. We can't determine which until we've looked into it carefully.

You'd do that if you were discussing the propaganda campaigns orchestrated by, say, Ivy Lee or Edward Bernays or Lee Atwater or Roger Ailes. Did you do it in this instance? Did you offer your theory for the hidden agenda behind lockdowns, mask mandates, and the full-court press for mass vaccination—namely, the Great Reset? Did you make it clear to Jackson and her classmates that this, in your opinion, was the motivation for the “propaganda drives” in question?

You're getting way ahead of yourself, on the assumption that I was nudging them toward buying my own—just come right out and say it—*conspiracy* "theory" of lockdowns, mask mandates, mandatory injections, etc. But I did not do so. I encourage them to do their own research, and then make a case one way or the other. Attached are a couple of final papers that I think are very good, representing the kind of thorough and impartial analysis I encourage them to do.

Now, some people feel threatened by this kind of inquiry, as its *implications* can be frightening (and, as well, because they want to see themselves as "well-informed," and too smart to be fooled). All I do in the propaganda course is encourage close examination of official narratives. Do they hold up, or not? If not, whose interests do they serve? What interests were served by, say, JFK's murder? It's no less legitimate to ask that question vis-a-vis the COVID propaganda (which has included the stigmatization of HCQ) as it is re: Dallas '63, or the Allied propaganda drive against "the Hun" during World War I, or the Red Scare after World War II, or 9/11 and the "war on terror," or "Russia-gate"—and so on.

Julia Jackson obviously couldn't handle it, and so she took to Twitter to demand that I be fired. And, from the tenor of your questions here, it seems, if I may say so, that you may have some trouble dealing with it, too—hence your apparent eagerness to find some grounds for casting me as prone to crazy "theories" with no basis in reality.

Naturally I hope that's not the case, and that your piece will be both fair and accurate; and I hope also that I've answered all your questions here.

MCM

Subject Title: A CLARIFICATION--AND A CORRECTION

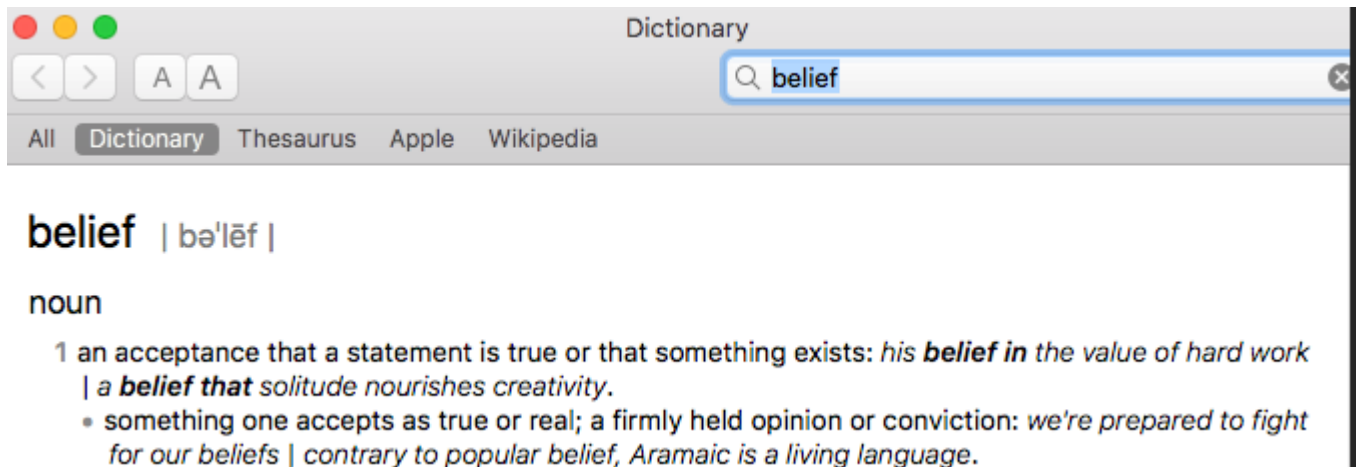
Date: April 30, 2021

From MD

Mark:

1. First, thank you for this point-by-point response.
2. Second, a request for further clarity: you're saying Jackson's claim, in the tweet I sent a screenshot of, is unequivocally false, a complete fabrication? You'll forgive me for pursuing the question, but I want to be absolutely certain that you're saying she fabricated that claim out of whole cloth: the e-mail she claims to have received does not exist.

3. Third, you're misreading me. When I ask if you "believe" the hydroxychloroquine trials were designed to fail, as Jackson claims you do, "believe" isn't "inquisitorial," merely inquisitive. It's a flatly factual descriptor, as in:



Likewise the term "conspiracy," helpfully defined by the same source as "a secret plan by a group to do something unlawful or harmful."

4. As I made clear in our first Zoom, my interest in the NYU imbroglio has entirely to do with my curiosity about your intellectual evolution, specifically the epistemological assumptions that undergird the views you espouse—in the classroom, on social media, and in interviews. Debating the empirical veracity of any of your claims (about 9/11, vaccines, the Parkland shooting, the moon landing, or whatever) is a distraction—a waste of your time and mine. I may touch on those claims in our second Zoom, but only in the context of my attempts, as an interviewer, to understand the epistemological assumptions that buttress your worldview.

Sincerely,

M. Dery

From MCM

Very well. Thank you for that clarification, Mark.

As to Julia Jackson's tweet, the answer is, unfortunately, yes. It is a total fabrication. I'll shortly send you the entire email correspondence between her and myself. Let me say *off* the record that I think the girl's ██████—which makes my colleagues' respect for her, and NYU's exploitation of her grievance, all the worse.

And now that you've re-emphasized your true interest in my story, I think it may be helpful if, tomorrow, we talk about exactly how I came to move from the sort of close readings that I did back in the Seventies and Eighties, which fill *Boxed In*, to where I am today. Although now and then some longtime reader, or, rather, former reader of my work will ask me, plaintively, "What happened to you?", I insist I have not fundamentally changed, but have at once broadened my perspective, and deepened my critique, as I have come to learn more about the media, and what I called "the culture of TV."

See you at 2:00, then.

MCM

From MD (May 1, 2021, Clarification – and Correction, cont.)

Mark:

While I don't think it's prudent, on either of our parts, to engage a lengthy colloquy via email since it's too often the mother of misunderstandings, I do want to clarify my intentions and correct an error of fact.

1) My intentions:

Regarding my "true interest in your story," I've made every effort from our first e-mail exchange to the first of our two Zoom interviews to be clear on my interest in this story. Thus, I'm not quite sure what you mean by "true" interest, which implies a deeper truth beneath my stated interests.

Let me attempt to dispel any misapprehensions.

First, there's my interest in what I would call your epistemological evolution, an apparent shift in foundational epistemological assumptions chronicled in your comments on various social-media platforms and culminating, as I see it, in the Julia Jackson affair.

But there's another aspect of this story that captured my interest. Although I've mentioned it before, I'll underscore it here because your mail (below) makes no mention of it and I want to be certain my motivations in pursuing this story are clear, since I'm committed to transparency in my dealings with you. That aspect is: the tension between academic freedom and academic responsibility (to the epistemological standards and disciplinary boundaries of your field).

Please know that I'm not going to debate, via e-mail, my characterization of your intellectual evolution as "an apparent shift in foundational epistemological assumptions," although you're perfectly welcome to rebut that perception during our Zoom if you feel it's inaccurate.

2) As for the factual error, you wrote in your April 30 response to my mail (I'll include my statement, which prompted yours):

3. You're adamant (on your blog, and in interviews) that you were merely challenging Jackson and her fellow students to question "the case for universal masking as defense against transmission of SARS-COV-2," as you said on *News From Underground*, urging them to weigh the evidence to the contrary ("the randomized, controlled tests...finding that masks...are ineffective at preventing such transmission") and to pay special attention to the "possible financial links" between those who defend masking and "Big Pharma and the Gates Foundation."

That's a somewhat garbled version of what I said in that class. Let me clarify...

I'd be curious to know what's "garbled" about it, since all quoted matter in that paragraph is taken directly from "The Background," on your website

(<https://markcrispinmiller.com/2020/10/nyu-must-affirm-mcms-academic-freedom-petition/>).

Here's the full paragraph from the original, with the phrases I excerpted — for brevity's sake — highlighted:

On Sept. 20, after a class discussion of **the case for universal masking as defense against transmission of SARS-COV-2** (in which discussion she did not participate), a student took

to Twitter to express her fury that Prof. Miller had brought up **the randomized, controlled tests**—all of those so far conducted on the subject—**finding that masks and ventilators are ineffective at preventing such transmission**, because the COVID-19 virions are too small for such expedients to block them. Prof. Miller urged the students to read those studies, as well as others that purport to show the opposite, with due attention to the scientific reviews thereof, and **possible financial links** between the researchers conducting them, and such interests as **Big Pharma and the Gates Foundation**. Prof. Miller followed up by providing the links to the former studies (not easily found on Google, though they have all appeared in reputable medical journals), and other materials, including a video of a debate on the subject.

Though seemingly trivial, this correction matters since, like you, I believe I “follow the facts.” As a journalist and as a cultural critic, I’m committed to epistemological rigor, specifically the carefully sourced verification—or debunking—of falsifiable assertions of fact, whenever that’s possible.

I hope that brings into sharp focus my interest in this story, and settles the question of whether I “garbled” one of your statements.

Sincerely,

M. Dery

Subject Title: One last email, re: “biofascism”

Date: May 1, 2021

From MCM

My thinking on that notion is based partly on the work of Giorgia Agamben (another “outlier”).

<https://d-dean.medium.com/biosecurity-and-politics-giorgia-agamben-396f9ab3b6f4>

MCM

Subject Title: OUTLIERS

Date: May 2, 2021

From MCM Mark, I’m not the only one who holds the view that those “vaccines” are killers; and these three are indisputably expert on the matter.

[COVID SHOTS TO “DECIMATE WORLD POPULATION,” WARNS DR. BHAKDI](https://www.bitchute.com/video/7Xz588RN1JKU/)
<https://www.bitchute.com/video/7Xz588RN1JKU/>

<https://principia-scientific.com/mike-yeardon-warns-vaccines-may-be-deliberate-depopulation-ploy/>

<https://truth11.com/2021/04/25/sherri-tenpenny-eight-ways-mrna-covid-vaccine-can-kill-you/>

I reckon you'd consider them "outliers." So be it. There were similar "outliers" throughout Hitler's rise; Phillipe Soupault was tireless in his struggle to alert the French to what was coming, and many Jews strove desperately to make the world aware of the ongoing extermination drive—to no avail, because their claims seemed (to the NYTimes, for instance) "self-evidently" false.

Let me end by saying that, whatever you write about me, I really hope that you and yours think very carefully about those shots.

MCM

From MD

Mark:

I'm very interested by your equation of Bhakdi, Yeadon, and Tenpenny with the activist Jews who "strove desperately to make the world aware of the ongoing extermination drive—to no avail, because their claims seemed (to the NYTimes, for instance) 'self-evidently' false."

That's a striking claim, especially coming from a Jewish intellectual who has, as you noted, given not a little thought to the Holocaust and the NYT's shameful inattention to it, when it was in full swing, not to mention the many ominous portents that foretold it. Do you really believe that these three doctors can be equated with Jews like Soupault who frantically sounded the alarm about the coming Holocaust?

I'm well aware you're not alone in your views on the COVID vaccines or, for that matter, vaccines more generally. And yes, Bhakdi, Yeadon, and Tenpenny are, statistically, outliers. No need for the ironic air quotes; theirs is demonstrably the minority view within the relevant fields of vaccinology, immunology, virology, and epidemiology. This isn't an ideological point of argument, merely a matter of bean-counting: there are far, far fewer Tenpennies (that would be the plural, wouldn't it?) in the fields I mentioned than there are medical professionals who oppose their views and are persuaded, on the evidence, that the benefits of the currently available vaccines outweigh their risks, and far outweigh the threat posed by a virus that according to your alma mater, Johns Hopkins University, has infected 150 million worldwide and killed 3.15 million. (<https://www.washingtonpost.com/nation/2021/04/30/coronavirus-covid-live-updates-us/>)

Thank you for your concern about me and my family. We've all been vaccinated without incident, as has everyone we know, and are much relieved to have our odds of surviving the virus's implacable "extermination drive" through the global population significantly improved.

Sincerely,

M. Dery

From MCM

Soupault wasn't Jewish; and, yes, I think the equation is quite sound---as does my friend Vera Sharav, and other Holocaust survivors who have seen all this before, and are speaking out against it. So do those Israelis who are suing their government for egregious violations of the Nuremberg Code. Now as then, the number of those raising the alarm may be voicing a "minority view," but that doesn't make them wrong; and, now as then, I believe that one ignores them at one's peril.

I sincerely hope you and your family stay well. Just FYI, "the virus" per se has certainly not killed as many people as JHU et al. have sensationally claimed. The survival rate for SARS-CoV-2 is around 99% (as Dr

Fauci estimated in February of last year). The recent spike in active cases has demonstrably resulted from the "vaccination" drives themselves, as we've seen in Israel, Gibraltar and now India. (Those shots have NOT protected you and your family from infection with SARS-CoV-2. The stated purpose of those "vaccines" is to lessen the severity of symptoms.)

I realize that our contention really comes down to your faith in what you take to be "the general consensus" of "the medical establishment," as expressed throughout the media, which ("consensus") I see as illusory, based not on the opinion of disinterested physicians but the program of some mighty corporations and the state and global agencies attached to them. The doctors speaking out against that program, and those quietly evading it, are not just a few "outliers," but actually comprise a large resistance all around the world; but you dismiss them, basically because you haven't read about it in the Times---just as, in the early 1940's, you would not have read about the Holocaust.

So if you now regard that prior "inattention" as a "shameful" journalistic failure, what makes you so certain that the Times is now reliable in covering the COVID crisis? The Times was a loud propaganda chorister in 1917, when only a few "outliers" were trying to correct the thunderous Big Lies about "the Hun." But NOW it's giving us a trustworthy "consensus," in spite of its dependence on Big Pharma and the Gates Foundation?

In short, would you have been more skeptical of that newspaper's coverage then than you are now? Or would you have trusted that "consensus," too? That question has everything to do with the effectiveness of propaganda, which is most effective when we don't (want to) see it for what it is.

MCM

From MD

Mine, inline (MD's remarks in red):

On May 2, 2021, at 1:27 PM, Mark Crispin Miller <markcrispinmiller@gmail.com> wrote:

Soupault wasn't Jewish; and, yes, I think the equation is quite sound---as does my friend Vera Sharav, and other Holocaust survivors who have seen all this before, and are speaking out against it. So do those Israelis who are suing their government for egregious violations of the Nuremberg Code.

Most interesting.

Now as then, the number of those raising the alarm may be voicing a "minority view," but that doesn't make them wrong; and, now as then, I believe that one ignores them at one's peril.

No, the simple fact of voicing a minority view doesn't, ipso facto, make the adherent wrong—nor does it make him, her, or them right.

I sincerely hope you and your family stay well. Just FYI, "the virus" per se has certainly not killed as many people as JHU et al. have sensationally claimed. The survival rate for SARS-CoV-2 is around 99% (as Dr Fauci estimated in February of last year). The recent spike in active cases has demonstrably resulted from the "vaccination" drives themselves, as we've seen in Israel, Gibraltar and now India. (Those shots have NOT protected you and your family from infection with SARS-CoV-2. The stated purpose of those "vaccines" is to lessen the severity of symptoms.)

As noted repeatedly throughout our correspondence, I have neither the time nor the inclination to debate you on the facts of this matter.

I realize that our contention really comes down to your faith in what you take to be "the general consensus" of "the medical establishment," as expressed throughout the media, which ("consensus") I see as illusory, based not on the opinion of disinterested physicians but the program of some mighty corporations and the state and global agencies attached to them. The doctors speaking out against that program, and those quietly evading it, are not just a few "outliers," but actually comprise a large resistance all around the world; but you dismiss them, basically because you haven't read about it in the Times---just as, in the early 1940's, you would not have read about the Holocaust.

This is the merest straw-manning, Mark. I'm happy to continue our correspondence in the service of my article, as long as I'm clacking away at it, but caricaturing me as some gape-mouthed rube gulled by the men in white coats and credulously subservient to the Gray Lady is unworthy of you—and not worth my time. If you find our correspondence stimulating, be more civil.

So if you now regard that prior "inattention" as a "shameful" journalistic failure, what makes you so certain that the Times is now reliable in covering the COVID crisis? The Times was a loud propaganda chorister in 1917, when only a few "outliers" were trying to correct the thunderous Big Lies about "the Hun." But NOW it's giving us a trustworthy "consensus," in spite of its dependence on Big Pharma and the Gates Foundation?

In short, would you have been more skeptical of that newspaper's coverage then than you are now? Or would you have trusted that "consensus," too? That question has everything to do with the effectiveness of propaganda, which is most effective when we don't (want to) see it for what it is.

MCM

From MCM

Good Lord, I said nothing of the kind, and never would. I have the same respect for you now as I did back in the day; I merely raised the question as to whether you would have found the Times just as authoritative then as you do now. How that casts you as "some gape-mouthed rube," etc., I don't see.

But if I somehow enabled you to take it that way, I apologize.

From MD

Understood; accepted.

Subject Title: Essay on masking

Date: May 3, 2021

From MD

Mark, in our Round Two, you refer to your essay on masking, which I can't seem to find online and which I don't believe you sent me. If you have it handy and are willing to share it, I'd like to have a look. Thanks, M.D.

From MCM

Sure. "Masking Ourselves to Death" is on my website. (By now a number of the links to certain agencies, like the CDC, and New Zealand's Ministry of Health, have been severed, I'm told.) Since I posted it in early September, a lot more highly relevant material has come out, and I may update it this summer, health permitting.

From MD

Got it, thanks.

Subject Title: UNANSWERED QUESTION

Date: May 3, 2021

From MD

Mark:

Having transcribed both of our marathon interviews, I now realize several pressing questions went unanswered, possibly because I wasn't sufficiently clear or concise in the way I formulated them, or because we wandered down digressive byways and never returned to the main point. If you're willing to take one last stab at these questions, my article will be the better for it. If, on the other hand, you're out of time or out of patience, I'll certainly understand.

As it happens, one of the unanswered questions appears in the mail below. For ease of reading, I'll cut and paste the relevant back-and-forth here:

But as we discussed on Zoom, if you're going to choose an example of a propaganda campaign, you need to explain to your students *why* you believe the media narrative in question isn't what it appears to be—public-health messaging about masking—but is, rather, propaganda.

Woah. "Public-health messaging about masking" *is* propaganda: i.e., an organized attempt to get large numbers of people to think or do something (or not think or not do something). So anti-drunk-driving PSAs are propaganda, as are anti-smoking drives. Propaganda can be deceptive or accurate, benign or malign. We can't determine which until we've looked into it carefully.

To ensure we don't wander off into the weeds yet again, let me sharpen the point of argument. My focus, in this question, is explicitly *not* on the efficacy of masks, their alleged health risks, the psychological effects of protracted lockdowns, and the many other public-health issues and virological, immunological, and epidemiological issues you've raised in the classroom and on social media. It is exclusively on the covert agenda you believe was masked by the media narratives and public-health messaging about the pandemic—and whether you offered any theories, in your classroom discussions, for what the agenda might be, and whose ends it served.

Here, I elaborate on that question, providing illustrative examples that I hoped would clarify it:

You'd do that if you were discussing the propaganda campaigns orchestrated by, say, Ivy Lee or Edward Bernays or Lee Atwater or Roger Ailes. Did you do it in this instance? Did you offer your theory for the hidden agenda behind lockdowns, mask mandates, and the full-court press for mass vaccination—namely, the Great Reset? Did you make it clear to Jackson and her classmates that this, in your opinion, was the motivation for the "propaganda drives" in question?

Here's your response (again, all of this appears in the mail appended at the end of this one):

You're getting way ahead of yourself, on the assumption that I was nudging them toward buying my own—just come right out and say it—*conspiracy* "theory" of lockdowns, mask mandates, mandatory injections, etc. But I did not do so. I encourage them to do their own research, and then make a case

one way or the other. Attached are a couple of final papers that I think are very good, representing the kind of thorough and impartial analysis I encourage them to do.

Here, you're leaping to an assumption unwarranted by my question.

I wasn't asking if you "nudged them" toward anything. I was asking *whether* you, as a professor of media studies teaching a course on propaganda, proposed any possible or probable *motivation* for media narratives and public-health messaging that you suggested *could* be viewed as propaganda drives. I can't for the life of me imagine how your students can embark on "their own research, then make a case one way or the other" about the possible motivations for COVID media coverage without some guidance from you about what vested interests might be orchestrating such a propaganda campaign, and why. In teaching the historical examples we discussed—Ivy Lee, Bernays, the fabricated tale of Kuwaiti babies torn from incubators, Operation Gladio, etc.—you would, of course, discuss not only the misinformation or disinformation of the propaganda campaigns in question but the powerful interests they served, and what their endgame was. Is that "nudging"? I don't see how you can teach a course on propaganda without discussing hidden agendas. Nor do I see how you can single out a media narrative for scrutiny unless something about it raises the suspicion, in your mind, that it may be part of a propaganda campaign. Otherwise, you'd simply be choosing narratives arbitrarily, which you're clearly not: mask mandates, lockdowns, vaccination, and so forth are subjects of grave concern to you, which you've written about extensively on social media and in your masking essay. More to the point, you've been unequivocal in scores of podcast interviews, not to mention our interviews, that you believe the media narratives and public-health messaging about the COVID pandemic to be part of a massive, well-coordinated, sustained propaganda drive.

So, again, my question is: What *motivation*, or *motivations*, did you propose to your students when discussing COVID-related media narratives *as* possible propaganda drives? In the backstory to the Jackson controversy you provide on your website, you note—as you and I discussed in e-mail—that

Prof. Miller urged the students to read those studies, as well as others that purport to show the opposite, with due attention to the scientific reviews thereof, and possible financial links between the researchers conducting them, and such interests as Big Pharma and the Gates Foundation.

That's the motivation I've been asking about—in fact, *did* ask about in the mail appended to this one. In response, you raised a wary eyebrow about whether I was insinuating that you "nudged" them in the direction of your preferred explanation for the motivation behind what you regard as a propaganda drive. Nothing of the sort. As I've said repeatedly, a professor submitting for his class's consideration a media narrative he suggests may in fact be propaganda must provide at least some hint of who might be behind that drive, and what their agenda might be. But "financial links" is a little vague. If you'd proposed that researchers who knew that universal masking was ineffective in preventing transmission of the COVID virus knowingly cooked their research to suggest otherwise because "possible financial links between the researchers ... and such interests as Big Pharma and the Gates Foundation" made it worth their while to do so, logic surely compelled you to connect the dots so your students could follow your argument. How would financial links affect the researchers? Because Big Pharma and Gates were underwriting their research? Got it. But if I were one of your undergrads, I would've asked the inevitable question, what was Big Pharma's interest in promoting the use of demonstrably useless masks to ward off a virus that even you concede is "2 or 3 times worse than flu," which kills 250,000-500,000 annually, worldwide (<https://www.medscape.com/answers/219557-3459/what-is-the-global-incidence-of-influenza>)? What was the Gates Foundation's interest in promoting the use of masks whose ineffectiveness in preventing viral transmission is, you believe, proven by clinical tests? Whether the Great Reset was on your radar or not at that point, you must have offered a coherent theory that answered these obvious questions. What was it? Did you offer other possible explanations for the shadowy actors and hidden agenda behind the COVID-related propaganda drive?

My apologies for the length of this. If you do decide to read and respond to it, thanks for doing so.

Sincerely,

M. Dery

From MCM

Yes, I believe we did discuss some of the likely motivations for the mask mandates, following some group reports on aspects of the COVID crisis. The mask mandates have served the purpose of preparing people psychologically for the vaccines, both by getting them accustomed to compliance as a way of staying "safe," and, as well, by adding to the burden of the lockdowns overall, from which the vaccinations promise us release. You get to go unmasked if you've been vaccinated. There's always been something punitive about forced masking—as in Reading Gaol, and during slavery in the antebellum South (and, of course, in *The Man in the Iron Mask*—so people have been likelier to get themselves injected for deliverance's sake.

This is why it is significant that, for example, the PNAS study, which was last year's most heavily publicized journal article finding that the masks *have* been effective, came out of Texas A&M, which has a multimillion-dollar vaccine research facility in a partnership with GlaxoSmithKline. (That study is so shoddy that it had dozens of scientists demanding its retraction.) Such conflicts of interest make several of those recent studies dubious, because of confirmation bias.

In short, I think the overwhelming propaganda drive for masking (Hill & Knowlton was just one of the PR firms behind it) was organized with the vaccine mandates in mind. That's mainly what we talked about; and there was also some discussion of the divisiveness of masking, which had people squaring off against each other over it. Throughout the term we touched on the imperial strategy of divide-and-conquer, both in electoral politics after the Sixties, and, last year, both over COVID and throughout the unrest and protests following the George Floyd incident. We talked in particular about the worldwide surge of spontaneous grass-roots protest movements throughout 2019—from the Yellow Vests, to feminist protest movements throughout South America, to many months of protests of election fraud in Honduras in particular, to the Lebanese protests that broke out in the fall, to the Bernie movement in the US, and the (not entirely spontaneous) protests in Hong Kong—and how the COVID crisis served to snuff them out.

I myself have further thoughts about the multifarious purposes of masking. As you might expect, I don't think we can rule out the possibility (I wish we could) that the masks have served the purpose of making people *more* susceptible to respiratory illnesses (bacterial pneumonia in particular, but also COVID-19, which attacks those whose immune systems have been weakened). Never has the CDC, or WHO, or any of the politicians pushing COVID as an issue said a word about the basic steps that anyone can take to strengthen their immunities—Vitamin D above all, as well as zinc and Vitamin; good diet; plenty of sunlight; avoiding stress, etc.—but, instead, have just pushed masking, "social distancing," hand sanitizers and vaccines. That no US health authorities said anything about the risks of strenuous exercise in masks strikes me as shocking, and m

I'm also interested in what seems to be a certain occult quality to masking (think *Eyes Wide Shut*).

Subject Title: LAST QUESTION, AND A MUCH BRIEFER ONE

Date: May 3, 2021

From MD

Mark:

I'm struck, again and again, by your apparent focus, in the course Jackson took, on the scientific questions under debate—"the case for universal masking as defense against transmission of SARS-COV-2," "the randomized, controlled tests...finding that masks and ventilators are ineffective at preventing such transmission, because the COVID-19 virions are too small for such expedients to block them," etc., etc.—rather than the propaganda campaigns that you believe are weaponizing mis- and disinformation about the pandemic and, crucially, who's behind them and what their hidden agenda is. As you note on your website, "The aim is to teach students to identify such drives for what they are, think carefully about their claims, seek out whatever data and/or arguments have been blacked out or misreported to protect those claims from contradiction, **and look into the interests financing and managing the propaganda, so as to figure out its purpose.**" (<https://markcrispinmiller.com/2020/10/nyu-must-affirm-mcems-academic-freedom-petition/>)

That last, crucial component seems to have gotten short shrift. The source materials you directed your students to (during the unit on the pandemic) had, by all accounts, entirely to do with the virological, immunological, epidemiological, and public-health facts of the pandemic. This is perplexing. Your course was a course on propaganda, yet the central question--**the interests financing and managing the propaganda, so as to figure out its purpose**—seems to have taken a backseat to questions about the efficacy of masks and the like. As you told me in one of your mails,

I urged the students to read all the studies, pro and con, and to come to their own conclusions as to which are most convincing. How do laypersons judge the soundness of *new* scientific studies, which have not yet stood the test of time? I gave *two* suggestions: find scientific reviews (which are often posted with new studies); and take note of the university where a certain study was conducted, to see if there might be some conflict of interest.

This, I think, dramatizes the course's misplaced focus. Determining the factitiousness of a media narrative or official messaging—proving that it's not the factually accurate statement it appears to be, but is instead persuasive rhetoric that uses mis- or disinformation to manufacture consent for an agenda, typically a hidden one—is *part* of propaganda analysis, but only a preliminary one, clearing the way for the deeper, more consequential analysis of what that agenda is, and whose ends it serves.

That your students focused less on that question than on the medical, scientific, and/or public-health aspects of the media narratives or official messaging is abundantly clear from the papers you sent. One thing jumps out immediately: in a course on propaganda, these final papers don't so much as mention the word. Nor do they deal in any substantive depth with a propaganda campaign and the hidden agenda it serves.

"Reopening Schools During Covid: What Is Actually Putting Children in Danger?" examines the public debate surrounding the return to in-person schooling and long-term psychological effects of Zoom schooling as well as media coverage of this debate. "By continuing to report the number of children who test positive and keeping the debate about schools alive and well, the media has aided in the overall fear mongering that surrounds this virus, while also avoiding statistics and evidence that very clearly show that online school and modified in person school are not the solution to protecting the children of this country." This is an essay in media criticism, weighing the effects of media coverage on public debate. What it manifestly is *not* is a

dissection of a propaganda campaign, exposing the ways in which public opinion is manipulated; who's doing the manipulating; and why.

Likewise, "Mask-wearing and Public Figures" considers the politicizing of mask-wearing by political leaders such as Trump, their influence on the public, and the consequent public-health effects. It touches, too, on varying public policies related to COVID, as well as public-health advisories. Conclusion? "We have examined the correlations (or lack thereof) between the mask-wearing and general covid messaging of political executives and the caseloads and recorded deaths of their respective polities. It appears that regardless of country or state or the degree of strictness with regards to policy, covid will take its course." This, as the author makes clear, is an analysis of disparate public-health policies and media strategies and their varying effects on "caseloads and recorded deaths." What it is *not* is an essay on a propaganda drive, considering the motivations behind it.

The fact that these students missed the bull's-eye so widely is instructive. Both papers, along with your many statements about the course section on the pandemic, make it clear that you were far less attentive to media narratives about COVID as propaganda and the covert actors behind them than to the public-health questions that concern you on social media and in your interviews. If I'm wrong on that count, can you help me understand how these students' papers do, in fact, address the course's core subject areas?

And this really *is* my last question.

Sincerely, M.D.

Subject Title Oh, and ...

Date: May 4, 2021

From MD

Mark:

Although my last (in every sense) question may seem somewhat redundant on the heels of the immediately previous question, which you answered in depth, it isn't. The previous question zeroed in on *whether* you offered possible theories for what hidden agendas might lie behind the COVID-related media narratives and official dispatches you suggested to your students may, in fact, be propaganda drives. The second, most recent question looks at whether you emphasized the medical and scientific and public-health aspects of the pandemic to the near-exclusion of what ought to have been the central question of a course on propaganda, namely, which narratives are propagandistic and what purposes do those propaganda drives serve. I used your students' papers as evidence of what seems, based on those papers but also on your remarks to me, to have been a case of "topic drift"—a wandering away from the ostensible focus of propaganda, and toward those questions that so absorb you on social media and in your many interviews.

I hope that makes the difference clear.

Sincerely,

M.D.

Subject Title FACT-CHECK/ ON DEADLINE, SO PLEASE RESPOND ASAP

Date: May 4, 2021

From MCM On May 2, 2021 (not answered by MD until May 4),

I sincerely hope you and your family stay well. Just FYI, "the virus" per se has certainly not killed as many people as JHU et al. have sensationally claimed. The survival rate for SARS-CoV-2 is around 99% (as Dr Fauci estimated in February of last year). The recent spike in active cases has demonstrably resulted from the "vaccination" drives themselves, as we've seen in Israel, Gibraltar and now India. (Those shots have NOT protected you and your family from infection with SARS-CoV-2. The stated purpose of those "vaccines" is to lessen the severity of symptoms.)

From MD

Mark:

Can you please clarify, as concisely as possible,

- 1) why you place the virus, below, in quotes ("the virus), and
- 2) how the vaccination drives result in active cases, and
- 3) why you place "vaccination" in quotes

Thanks,
M.D.

From MCM

> I called it "'the virus' per se" in that paragraph because, according to CDC data, it was *not* SARS-CoV-2 *alone* that killed c. 94% of them, but one or more of four serious co-morbidities, as well as old age. In other words, some 6% died *of* SARS-CoV-2, while the rest died *with* it. This is not to say that COVID-19 wasn't the decisive factor in some patients' deaths—the straw that broke the camel's back—but it does mean that the sensational claims about the COVID-19 toll (e.g., over half a million Americans) must be reconsidered.

Moreover: (a) Countless of those said to have died of SARS-CoV-2 were just "presumed" to have had it, in line with the CDC's very loose criteria.

(b) The PCR tests used to diagnose COVID-19 have yielded so many false positives as to be largely worthless, as the NYTimes reported last August 29. Since Kary Mullis, the inventor of that test, did *not* believe it should be used to diagnose diseases, its universal use throughout the COVID crisis should, to say the least, be questioned; and throughout the COVID crisis it has been abused by agencies running their tests at cycle thresholds so high that they've picked up stray bits of genetic debris that are then deemed evidence of "positive" results in people who did not COVID-19.

(c) The fact that the official rates of influenza plummeted amazingly last year suggests that many of those said to have died of "the coronavirus" actually died of flu, which also is a very serious disease.

(d) Finally, COVID-19 was denoted as the cause of death on countless death certificates for people who had died of something else, according to Dr. Scott Jensen in Minnesota, a number of morticians in NYC and others. Since US hospitals have been incentivized to inflate the number of COVID-19 patients they have treated, all such imprecision was to be expected.

> You can find the numbers on Israel and Gibraltar on my website. Worldwide, fully "vaccinated" people have come down with COVID-19 shortly after—e.g., 37 doctors at a hospital in India, recently reported by

the NYTimes, which, like all the other media, attributes all such post-jab infections to some ferocious new "variant" of COVID-19, as opposed to the vaccines themselves.

Moreover—and more important—it's becoming ever clearer that the vaccinated pose a threat to the unvaccinated, as the latter shed the spike protein in the mRNA sera by exhalation and touch. This is something Pfizer knew, as noted in its testing protocol (pp. 67-68): https://cdn.pfizer.com/pfizercom/2020-11/C4591001_Clinical_Protocol_Nov2020.pdf.

> I place "vaccination" in quotes because the Pfizer/BioNTech and Moderna sera, or elixirs, are not vaccines. Vaccines use a weakened bit of pathogen to induce immunity thereto. (Look up Edward Jenner, who probably has not been canceled yet.) Those two so-called "vaccines" don't use a weakened bit of pathogen, but an experimental mRNA technology, never before used on human subjects, intended to induce an antibody response to an artificial spike protein, with the aim of lessening the severity of COVID-19 symptoms, should you catch that virus. Thus they don't confer immunity, as vaccines do; so injecting people with those products is *not* vaccination.

From MD

Confirming receipt. Thanks for taking time out of your busy schedule to answer this fact-checking question.

From MCM

I almost feel as if I wrote this with you; yet I reckon I won't feel that way for long.

From MD

Think of us as co-conspirators, Mark.

From MCM

I like that.

So when they're coming to take me away, I can ask them to bring you along, for company?

From MD

I'll send thoughts and prayers.

From MCM

Chicken.

Subject Title More new studies on how those "vaccines" may damage human tissues

Date: May 5, 2021

From MCM

From Dr. Meryl Nass:

Tuesday, May 4, 2021

List of articles discussing 3 ways the Covid vaccines may damage human tissues

3 papers discussing homologies between the spike protein and human tissue that could induce autoimmune adverse effects.

1. [https://www.cell.com/cell-reports-medicine/fulltext/S2666-3791\(21\)00116-6](https://www.cell.com/cell-reports-medicine/fulltext/S2666-3791(21)00116-6)

2. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7499017/>

3. <https://www.nature.com/articles/s41420-020-00321-y>

4. Here is an interesting paper that investigated the mechanisms by which the Astra-Zeneca vaccine causes blood clots and low platelet counts. My limited understanding is that even though the vaccine used a chimpanzee adenovirus to avoid autoimmunity, the altered virus was grown in human kidney cells. And the vaccine (rolled out in haste and not very pure) contains over 1000 proteins, some of which do cross react with human tissues.

<https://www.researchsquare.com/article/rs-440461/v1>

5. This study suggests a mechanism for the effects on the brain of Spike protein subunits.

"Blood-brain barrier function is negatively affected by SARS-CoV-2 spike protein subunits. Brain endothelial cells show a distinct pro-inflammatory response when exposed to various SARS-CoV-2 spike protein subunits."

<https://www.sciencedirect.com/science/article/pii/S096999612030406X>

6. This study shows Spike protein damages endothelial cells that line blood vessels. "...scientists studying other coronaviruses have long suspected that the spike protein contributed to damaging vascular endothelial cells, but this is the first time the process has been documented." I felt the authors were trying to politicize their findings in the last paragraph of the paper, twisting them to support vaccination. But there may be other interpretations.

Press release: <https://www.salk.edu/news-release/the-novel-coronavirus-spike-protein-plays-additional-key-role-in-illness/>

Study: <https://www.ahajournals.org/doi/10.1161/CIRCRESAHA.121.318902>

7. FDA was notified of potential serious toxicity from the Spike protein last December by Patrick Whelan, MD, PhD.

<https://anthraxvaccine.blogspot.com/2020/12/the-spike-protein-of-sars-cov-2-what.html>

On May 5, 2021, at 11:45 AM, Mark Crispin Miller <markcrispinmiller@gmail.com> wrote:

I've sent out many urgent emails since I started News from Underground years ago (it now feels like a century), but this one is the most important yet; and so word of this new study by the Salk Institute must now be spread to everyone you know, every media outlet, governments at every level—and, especially, to all those schools now mandating "vaccination" for its students in the fall.

Those spike proteins in the experimental "vaccines" now being forcibly injected into millions the world over, and more easily injected into those made eager for it, are *in themselves* highly dangerous, capable of doing irreversible damage to the vascular system of the healthy and the sick alike. As Robin Monotti Graziadei puts it, explaining the Salk Institute's discovery:

"Trillions [of these proteins] induced by the vaccine injection have the capacity to create damage in your vascular system. This is what the study says and what has been published by an extremely important center for biological studies. This is not a conspiracy theory.

"I think, at this stage, there is enough information to consider whether we will be told the truth in the coming days, because such information should be on the cover of every newspaper and the top story on every news channel. And what they should say is this: "The fundamental and technological basis on which all of the vaccines that were distributed in the West is flawed. We thought that the spike protein would only enter the cells to create antibodies, so if you faced the wild virus, it would latch onto your cells. However, we were wrong. We were wrong because the spike protein in itself creates disease; and if you inject trillions of them into a human body, there will be manifestations of disease in many cases." <https://www.youtube.com/watch?v=Fz0H5vMJFMc>

The Salk Institute study is attached. Below is Mike Whitney's excellent article about it, and, below that, an article on the pathogenesis of the SARS-CoV-2 spike protein alone—the one in the virus—once it enters the cell.

(My thanks to Kevin Ryan for sending this material to his list.)

New Report Sheds Light on Vaccine Doomsday Cult

<https://www.globalresearch.ca/new-report-sheds-light-vaccine-doomsday-cult/>

By [Mike Whitney](#)

Global Research, May 04, 2021

Theme: [Science and Medicine](#)

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“The risk-benefit calculus is therefore clear: the experimental vaccines are needless, ineffective and dangerous. Actors authorizing, coercing or administering experimental COVID-19 vaccination are exposing populations and patients to serious, unnecessary, and unjustified medical risks.” [Doctors for Covid Ethics](#), April 29, 2021

An explosive new study by researchers at the prestigious Salk Institute casts doubt on the current crop of gene-based vaccines that may pose a grave risk to public health. The article, which is titled [“The novel coronavirus’ spike protein plays additional key role in illness”](#), shows that SARS-CoV-2’s “distinctive ‘spike’ protein”..“damages cells, confirming COVID-19 as a primarily vascular disease.” While the paper focuses strictly on Covid-related issues, it unavoidably raises questions about the new vaccines that contain billions of spike proteins that could greatly increase the chances of severe illness or death. Here’s an excerpt from the article dated April 30, 2021:

“In the new study, the researchers created a “pseudovirus” that was surrounded by SARS-CoV-2 classic crown of spike proteins, but did not contain any actual virus. Exposure to this pseudovirus resulted in damage to the lungs and arteries of an animal model—proving that the spike protein alone was enough to cause disease. Tissue samples showed inflammation in endothelial cells lining the pulmonary artery walls. (Note— “Vascular endothelial cells line the entire circulatory system, from the heart to the smallest capillaries.”)

The team then replicated this process in the lab, exposing healthy endothelial cells (which line arteries) to the spike protein. They showed that the spike protein damaged the cells by binding ACE2. This binding disrupted ACE2’s molecular signaling to mitochondria (organelles that generate energy for cells), causing the mitochondria to become damaged and fragmented.

Previous studies have shown a similar effect when cells were exposed to the SARS-CoV-2 virus, but this is the first study to show that the damage occurs when cells are exposed to the spike protein on its own.” ([“The novel coronavirus’ spike protein plays additional key role in illness”](#), [Salk.edu](#))

The new research paper is the equivalent of a hydrogen bomb. It changes everything by confirming what vaccine critics have been theorizing for months but were unable to prove.

Now there is solid evidence that:

1. Covid-19 is primarily a disease of the vascular system (The vascular system, also called the circulatory system, is made up of the vessels that carry blood and lymph through the body.) and not the respiratory system.
2. The main culprit is the spike protein. (Spike protein—"a glycoprotein that protrudes from the envelope of some viruses" Merriam-Webster "Like a key in a lock, these spike proteins fuse to receptors on the surface of cells, allowing the virus's genetic code to invade the host cell, take over its machinery and replicate."

Bruce Lieberman) **Click on the link for the rest.**

Roles of spike protein in the pathogenesis of SARS coronavirus

DY Jin, BJ Zheng

Department of Biochemistry, The University of Hong Kong

<https://www.hkmi.org/abstracts/v15n1s2/37.htm>

[Full paper in PDF](#)

1. Infection with SARS coronavirus (SARS-CoV) induces a cellular stress condition known as the unfolded protein response (UPR). UPR induction is mediated primarily by viral spike (S) protein. The modulation of UPR by S protein involves activation of PERK protein kinase. Other branches of the UPR pathways controlled by IRE1 and ATF6 proteins, respectively, are not involved.
2. The protease inhibitor Ben-HCl effectively suppresses SARS-CoV infection by blocking virus entry. Viral infectivity is associated with the cleavage of S protein by the cellular protease factor Xa.
3. Two new aspects of the interaction between SARS-CoV S protein and the cell have been defined. These have important implications in the pathogenesis of SARS, providing opportunities for developing vaccines and antivirals against SARS-CoV.
4. Counteracting the UPR and targeting the cleavage of S protein with small molecule pharmaceutical agents represent two new anti-SARS-CoV strategies.
5. The receptor-binding domain of S protein delivered via adeno-associated virus can efficiently induce mucosal immunity and provide long-term protection against SARS-CoV infection.

On Wed, May 5, 2021 at 9:40 AM Kevin Ryan <kncryan@msn.com> wrote:

People have been noticing that the SARS-COV-2 spike protein, which is produced by the experimental gene therapies being administered as "vaccines" against the virus, is itself pathogenic.

The attached article has recently been circulating. At Global Research, this article discusses the one attached and asks some obvious questions.

<https://www.globalresearch.ca/new-report-sheds-light-vaccine-doomsday-cult/>

Here's another paper on the pathogenesis driven by only the Spike protein of SARS-COV (the previous one) once it enters the cell.

<https://www.hkmj.org/abstracts/v15n1s2/37.htm>

Kevin

From MD

Mark:

No more of these dispatches, if you don't mind. I'm always curious to hear your unique take on matters of moment, if and when you write an extended essay (such as the masking one) on whatever catches your attention. But I have zero interest in anything Nass has to say and, more to the point, am too busy to revisit a question I regard as settled.

Two quick questions:

- Did you receive my fact-checking question?
- Will you continue to blog at NFU, or are you moving the Miller roadshow, lock, stock, and barrel, to Substack?

M.D.

From MCM

The one about our last meeting? Yes.

As to my move to Substack, I'm still mulling it over.

Subject Title URGENT: Spike proteins in those "vaccines" are, in themselves, highly dangerous, according to new study by Salk Institute

Date: May 5, 2021

From MCM

You've probably put your piece to bed by now, so news of this study, from the highly reputable Salk Institute, is probably too late for you to factor into your overall take on my position re: the COVID-19 "vaccines."

If not, and if you've somehow cast me, Naomi Wolf and Bobby K. as the Three Stooges of "conspiracy theory," perhaps that study will persuade you otherwise. Or if it *is* too late, I really hope you'll read it FYI, as it is terribly important, and people must be made aware of it. Those who haven't had the shots should read the study before getting them, while those who *have* had their two shots should think it over carefully before getting a third "booster" shot, which Dr. Fauci has suggested will be necessary.

In any case, be well.

MCM

From MD

Mark:

- The piece is on my editor's desk and being edited.
- Which means I may have more queries, though strictly of a fact-checking nature. Let me know if you're unwilling to answer them. They'll be brief and, again, strictly to do with matters of fact.
- Thanks for the study. My piece is carved in stone, as is my position on the vaccines, but I may give it a glance (purely out of curiosity) when I've put this piece to bed, my schedule permitting.

Sincerely,

M.D.

From MCM

Carved in stone? Wow.