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## 2 Correspondence

## medical hypotheses

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## Avian flu virus H5N1: No proof for existence, pathogenicity, or pandemic potential; non-''H5N1'' causation omitted

7 WHO, CDC, Robert Koch Institute (RKI), and Fried8 rich Loeffler Institute (FLI) claim that H5N1 (avian
9 flu virus) is ''highly contagious''. Further, Reinhard
10 Kurth, president of RKI, says that H5N1 ''threatens
11 potentially all six billion people on earth''.
12 We identified four fundamental questions under13 lying these claims and requested supporting studies

14 from FLI (which according to the German Govern-15 ment ''possesses virus isolates of H5N1''):

16 1. Does H5N1 exist?

17 2. Is it pathogenic to animals?

18 3. Is it transmissible and pathogenic to humans,and does it have pandemic potential?

20 4. Have other causes for observed disease been21 studied?

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FLI responded with four papers: PNAS [1], Science [2], J Virol [3] directed towards questions 1
and 2; EID [4] towards question 3; PNAS [1] towards
question 4.

Question 1 (existence). FLI responded with, 27 28 "H5N1/asia virus can be produced completely 29 in vitro by using reverse genetics. The virus generated this way, also called infectious clone, cannot 30 contain contaminants from sick animals" [trans-31 lated from German]. However, PCR cannot be used 32 to identify viruses which have not been previously 33 34 sequenced [5].

35 The PNAS paper (as the others) does not show or reference the composition of the stock virus – nor 36 does Subbarao et al. (referenced by the EID paper), 37 which claims first characterization of H5N1 disease 38 in a human in 1997 [6]. Though the EID study failed 39 40 to detect "H5N1" in several of the diseased organs, this anomaly was labelled an "enigma", 41 rather than a "contradiction". 42

Robert Webster, corresponding author of the 43 PNAS paper and Director of WHO's Collaborating 44 Center for Studies on the Ecology of Influenza in 45 Animals and Birds, informed us that stock viruses 46 "are classified as select agents" and "we are not 47 at liberty to release this information''. Without 48 verification, and without purification described in 49 any of these papers, we cannot accept that stock 50 virus is pure and fully characterized. Inquiries for 51 clarification to Webster, CDC Select Agents Pro-52 gram, and FLI received no response. 53

Question 2 (animal pathogenicity). Papers de-54 scribe the use of natural routes, but disease was 55 only achieved with extraordinary concentrations, 56 up to 10 million EID per animal. None of the 57 experiments used controls or blinding. The Sci-58 ence paper is highly abstract molecular science, 59 employing elevated concentrations of chimeric 60 variants. 61

Question 3 (human pathogenicity and pandemic 62 potential). The EID paper is an anecdotal report 63 of a 6-year-old boy from Thailand with severe multi-organ disease. No evidence was given for transmissibility to humans. The scientists found 66 evidence of aspergillosis, and the boy was treated 67 with toxic agents (broad-spectrum antimicrobial 68 and antivirals) before he died. 69

Subbarao et al. (referenced by the EID paper), 70 describes a previously healthy 3-year-old Hong 71 Kong boy who developed flu-like symptoms in 72 May 9, 1997, and was treated with broad-spec-73 trum antibiotics and salicylic acid, though this is 74 commonly contraindicated. He developed Reye's 75 Syndrome and died eleven days later [7]. A search 76 commenced for causation within a limited range 77 of flu viruses. H5N1 was claimed causative, even 78 though coronaviruses, flaviviruses, enteroviruses, 79 2

other pathogens and chemicals can also cause flu 80 symptoms. There was no confirmation of prior 81 82 avian contact. Regardless, warnings of an "explo-83 sive pandemic'' appeared in this early document, though FLI conceded: "There is no scientific fore-84 85 casting method that can evaluate the possibility that an influenza virus induces a new pandemic." 86 87 Question 4 (non-''H5N1'' causation). Neither the 88 Subbarao et al study nor the FLI references con-89 sider reasonable, competing theories for disease causation, e.g., environmental and pharmaceutical 90

91 factors.

92 Our analysis shows the papers do not satisfy our 93 four basic questions. Claims of H5N1 pathogenicity 94 and pandemic potential need to be challenged 95 further.

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