



## Monkey Pox – Conspiracy (Theory) for Advanced Learners...

### Description

### and some thoughts on prospective tests of such a theory

When one types “Monkeypox” into internet search engines, the first thing that comes up is agency reports from Reuter and Co debunking “conspiracy theories” about Monkeypox. Interested readers ask themselves: Why does this have to be mentioned so prominently? We examine what exactly could have given rise to a conspiracy theory and how, at best, this conspiracy could be checked prospectively, i.e. concerning the future.

### Monkeypox

Monkeypox, we learn from a recent [information column](#) published in the Journal of the American Medical Association (JAMA) [1], is a virus from the smallpox family that is relatively harmless to humans and whose final hosts are not humans but small rodents such as gopher, prairie dog, etc. As a DNA virus, the Monkeypox virus is much more stable and therefore mutates only slowly and little. The doctor and biochemist who writes under the pseudonym Jochen Ziegler on Achgut has [written a very concise article](#) on this. Therefore, I do not need to repeat it.

Normally, 2-4 people contract it per year in our latitudes; the infectivity is low and is below  $R_0 = 1$ . This means that one sick person normally infects less than one other person. Therefore, the risk of an epidemic is negligible if one does not touch or come too close to the rashes of the sick. For comparison,  $R_0$  was around 2.5 to 3 at the beginning of the SARS-CoV2 spread and is apparently higher with the omicron variant. The figure is around 6-8 for typical viral diseases such as measles.

Apparently, a significant proportion of those who have contracted Monkeypox in the USA belong to the homosexual scene, having contracted the disease during homosexual intercourse. This is why, untypically, the pustules do not appear on the hands or face of these people, but around the anal and penile regions. But beware of talking about a sexually transmitted disease; that would probably be politically incorrect.

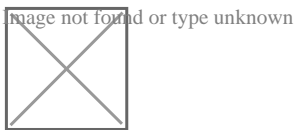
So there is not much to fear from normal Monkeypox in our latitudes, especially since, similar to other animal pox diseases – think cowpox, to which Jenner owed one of the first smallpox vaccines – it is relatively less aggressive and easily treatable. Moreover, vaccine protection against human smallpox is also effective against

Monkeypox, and this is likely to be still present in a large proportion of the world's population, especially the elderly.

So where is the excitement coming from? Where did the “conspiracy narrative” come from, I wondered. And did a bit of browsing and found:

**The Monkeypox exercise by the Nuclear Threat Initiative and the Munich Security Conference took place in March 2021 and is described in a [report from November 2021](#).**

If you go to the Nuclear Threat Initiative page ([www.nti.org](http://www.nti.org)) and search for “Monkeypox”, you won't find the report. You have to go to “Reports” at “Analysis” and move backwards in time to November 2021. Then one finds the report and [can download it as a PDF](#) [2].



The report describes one of the popular simulation games hosted by the Munich Security Conference together with the Nuclear Threat Initiative (NTI) in March 2021. The NTI is one of the many foundations formed over nuclear threat analysis. It has now taken up the issue of biosecurity with Margaret Hamburg, the vice-president of the NTI. The lady has already done so at Event 101, the simulation in October 2019, when it was practised how an altered coronavirus coming from South America floods the world. As we know, this actually happened in a somewhat different form and from other parts of the world in December 2019; the prehistory and this exercise have been very well documented by Paul Schreyer [3]. Therefore, bear with the excited minds that are now crying “alarm” after seeing something similar: an exercise on an intrinsically harmless and inconspicuous pathogen is taking place, about half a year before reports of the first sick people hit the media. As it happens, this scenario has quite accurately anticipated the time of the outbreak, May/June 2022.

I'm sure this is all just pure coincidence. Speaking of coincidence. Here's a little challenge for our science journalists, who I'm sure can work this out more quickly than I can: out of the vast pool of all conceivable pathogens that can cause any disease in humans – from scabies to polio, from intestinal worms to elephantiasis, from Monkeypox to Covid-19 pneumonia – what is the probability that exactly the one will be discussed in an exercise that will then actually emerge 6 months later at pretty much the exact time as anticipated in the exercise?

I tried to make such a calculation myself, but failed. Because to do that you would have to know the number of all possible types of pathogens, and apparently that is not so easy to find. Maybe I was too lazy. But the people I asked didn't know. Let's take  $10^3$  as the number, i.e. 1,000 pathogen types. Then the probability of one of these being selected would be  $1/10^3$ , or  $10^{-3}$ , assuming equal probabilities, i.e. an unbiased die. Now, if the exact same selected disease actually appeared, and prominently, then, if I am not mistaken, the probability would be  $10^{-3}$ . Not included in this rough maths are time constants, varying prevalence of pathogens, etc., which of course complicate the picture.

But simply on the basis of this one simple consideration, one can understand how people get the idea that there is something planned going on in the background. I challenge anyone who is familiar with these initial probabilities to calculate that a little more precisely. I think that would be a thankful task for the science editors of the big newspapers and talk shows. I'm sure they know lots of clever people who can calculate this. Then the probability of such a thing happening by chance could be widely communicated, thus removing the ground from all conspiracy theories. Because then you would know: it was quasi-random, because such coincidences can happen quite easily.

## **The scenario**

The interesting thing about the exercise scenario is: it is not a real normal, natural Monkeypox virus at all, but a Monkeypox virus bioengineered to be highly destructive by a terrorist state called Brinia, which is next to a likewise fictional Arnica, created in a bioweapons lab with inadequate security technology, stolen or released from there. This is pure fiction, of course, because such rogue states that circumvent the Biological Weapons Convention and make viruses more infectious do not exist in reality. In the end, 3 billion people are sick and 270 million of them die, because the case-fatality rate, i.e. the ratio of dead to sick, is 1:10. Every tenth sick person dies in the scenario.

Because – big difference to normal Monkeypox – the laboratory-modified Monkeypox is altered in such a way, that the normal immunity that many people still have from the old smallpox vaccines does not take effect. Therefore, the old vaccines cannot simply be revived and distributed quickly, but completely new ones have to be developed. How convenient that there are already the mRNA and vector vaccine platforms that have been developed for SARS-CoV2.

They need to be fired up quickly now. Ideally, as suggested at the end by the troops playing this, there should be a few producer states that are especially good at this, which then supply everyone else (and get paid by them, of course). Yay, Germany can rejoice and become “vaccination world champion”. By the way, this is what Chancellor Olaf Scholz, as candidate for chancellor, said during the election campaign in front of the Brandenburg Chamber of Commerce as his plan on how to pay off the huge Corona debt mountain, as I was assured by a participant who heard Scholz at this event: Germany will be “vaccination world champion”.

## **A new international entity to control bio-risk**

Perhaps the most interesting idea: there needs to be a new international “entity”, i.e. an organization. This could be a new NGO, a UN body, something that has an advisory and supervisory function. Because, according to the logic, there are already countless “dual-use” laboratories that handle dangerous pathogens and there will be several more in the future. Because countries that have not had any so far will also want to acquire such laboratories and conduct dual-use research. That needs to be controlled. The countries need advice. There should also be a body that has an overview of who is researching where and in which direction with which pathogen, so that if another stupid accident like Covid-19 happens, we can react quickly and, if necessary, reach into the spokes of the rogue states in time.

Sounds clever. But actually it is a scandal. For behind it lie two, perhaps even three, implicit assumptions and admissions. “Dual-use” means research that is carried out both for charitable purposes, namely to gain knowledge and develop vaccines, and for warlike purposes. No, of course not to produce bioweapons. After all, that is forbidden by the [Biological Weapons Convention](#), which all states, even the USA, Russia and China have signed. But you never know. A Brinia or some other rogue state could come and undermine the Biological Weapons

Convention. Then it is very important to know what they might have in their arsenal for the world to defend itself. Then we can react proactively, perhaps we have already developed a vaccine, etc. This “dual-use” research and especially the call for its central control and registration is ultimately a clear admission of the fact that we are exposed to a permanent danger through such research. From my point of view, it is also an admission of the fact that we have to thank this research for the Covid-19 pandemic.

How about the idea of simply outlawing this research worldwide? No, that’s too far off the monkey game panel, then. Instead, they expect the number of biosafety labs to multiply in the next few years, especially in countries in Africa and Asia that do not yet have such research or have little of it. So I guess the only thing left to do is: record data and advise the labs. One could also say that this is capitulation to the power of the factual. I find it appalling that such a simulation does not even begin to question the problematic nature of this “dual-use” research.

## **Lockdown hard**

With Monkeypox, it is clear: there is no hesitation from the start. Because the states that hesitate to crack down – after all, we learned that in the Covid-19 pandemic – have enormous numbers of dead to mourn. Therefore: Lockdown hard and fast, otherwise nothing will help. Accordingly, in the model game, the hard-hitters are rewarded with moderate casualties, while the others suffer. Do you finally get the message, you Corona and Monkeypox deniers?

## **Vaccine tax**

It is also noted that there is far too little capacity to produce vaccines. They need to be produced quickly and fast. Newly designed, of course. Because the genetics of the new Monkeypox virus are different from those of the wild types. Since such things have to be reckoned with again and again, permanent cash flows of 10 billion USD annually over the next 10 years should be planned for. After all, the market for Covid-19 vaccines is already 150 billion dollars. So a permanent fund of this size should be set up, into which all states pay their share. And the managers of this fund should be given “executive power”. In other words, all states should pay a pandemic tax. Normally, the state and, within limits, the voters, by electing parties according to their election programmes, have the power to decide on the allocation of taxes. This is different here. Here, the states no longer have the power to decide how this pandemic tax is used. Instead?

## **Pandemic council**

Tada: At this point, the scenario pulls a whole new pink rabbit out of the hat. The new international authority already mentioned above. You have to think of a name for it first. I suggest “international pandemic council”. This authority has executive power – yes, you have to roll it off your tongue: Power – to decide over the use the money that countries pay in, e.g. to have vaccines produced, for example by certain companies. It has the power to order and allocate these vaccines. All in this business game, of course, clearly, not in reality.

## **Science control**

And the brand-new pitch: journals and editors should install a biosecurity review in advance so that dangerous information is not published in the first place. This is not stupid at all. If certain information about new virus manipulations such as [4] had not been published, it would have been more complex to understand what actually happened in the SARS-CoV2 pandemic. I think it is completely naïve to believe that the world will be a safer place if the labs doing such research can no longer publish the results in Science, Nature or Cell. Then the labs

will keep their knowledge to themselves and share it informally.

But of course one can also use such a new biosecurity review to curb unwelcome information: if scientists want to publish information that contradicts what the Pandemic Council decides, then this new biosecurity review takes hold without further ado. Where will we end up if the Walachs, Ioannidisses and other scatterbrains of this world can simply publish what they think is right? The journals, of course, cooperate voluntarily.

Original quote: “Support effective pre-publication biosecurity review. The entity could collaborate with editors and publishers to improve biosecurity review of manuscripts and reduce the risks of public release of information hazards (i.e., information that may increase risks of intentional misuse of bioscience knowledge and biotechnology capabilities).”

You only want the best, after all: that no dangerous information about pathogens is released, just as dangerous pathogens should be kept in the laboratory. Information is at least as infectious as pathogens. Well spotted. Hence: general cooperation and control.

There are, of course, some very clever and not self-evident findings: You have to secure supply chains. The best way to do this is to stockpile important goods in advance, say the experts. Listen up, all house husbands: Go to Walmart and buy toilet paper, noodles and canned tomatoes!

### **A clever innovation: no binary pandemic criterion, but staggered alert levels**

The panel correctly recognized that the WHO’s current practice of declaring a pandemic needs improvement. Currently, there is a non-public WHO panel that declares a Public Health Emergency of International Concern (PHEIC), i.e. pandemic yes or no, based on various assessments. This is lacking transparency and prone to error. True. Moreover, this binary system would tempt people to wait too long before taking action. That is probably also true. Therefore, there must be new criteria, which should be developed both at the country and international level and which should contain clear trigger criteria, on when a danger level is declared, i.e. a kind of traffic light from green to orange to red; or even with more levels. Countries should also do this adapted to the situation in the respective country. This would allow countries to adapt the levels to the local situation – supply capacities, hospital beds, etc. This assessment should be made by an international, publicly accountable body; by an international council of experts meeting in public.

I think this is a very wise idea. Because the redefinition of the pandemic criterion and the non-transparent handling have caused a lot of criticism. Also, that different views should be represented in this body is a hopeful sign, as well as the fact that gradations are being discussed.

### **The actors**

Who bothered to cook up these thoughts? One finds at the beginning the participants who played and in the back, on p.27, the experts who developed the scenario. You meet quite a few familiar names: The heads of the Bill and Melinda Gates and the Rockefeller Foundations are there, the Wellcome Trust, Dr. Gao from the Chinese Academy of Science, a couple of people from the pharmaceutical industry, Margaret Hamburg, who used to be at the FDA and is now vice-president of the NTI, Dr. Nkengasong from the African Centre for Prevention and Infection Control, two WHO and UN representatives respectively, and from Germany, Dr. Leiss from the Centre for International Cooperation.

Also among the experts, one meets familiar names: Jennifer Nuzzo from the Center for Health Security at the

Bloomberg School of Public Health; finally, Johns Hopkins University will set up the dashboard. Homeland Security is represented, the bioweapons specialists of the US military. New to the mix is the Future of Humanity Institute in Oxford, founded by Nick Bostrom, one of the founding fathers of the transhumanist movement, and the largest think tank for transhumanist concepts and security against degenerate artificial intelligence. The Pandemic Action Network is represented by co-founder Carolyn Reynolds. According to [self-report](#), it is a network of over 250 actors and individuals who have come together to end the Covid-19 pandemic. The success of this action will probably be judged differently. But clearly it suggests itself to put in the hands of such experts some of the certainty of decision-making, for the next pandemic, I mean. Could it be that the international pandemic council will conveniently be handed over to this NGO? We shall see.

## The parameters

In the appendix is the model. I recommend all journalists to read it well and to memorize the boundary conditions. It is conceivable that the RKI, the CDC, the Imperial College or some other institution will soon present a model that calculates what will happen to the Monkeypox epidemic in the future and conveniently adopt some of these parameters. Because that is easier than empiricism and careful documentation.

The model is based on a simplistic epidemiological SEIR – susceptible, exposed, infected, recovered – model. Simplistic because no immunity is assumed to be present and natural immunity to viral diseases is completely excluded. Then the model assumes that there are mild cases, 50% of which later have to go to hospital, severe cases, 40% of which end up in intensive care units and half of which die, a total of 10% of all cases. There are no asymptomatic cases. The infection period of a mild infection is 14 days, the pre-symptomatic period is 8 days. These three parameters – no asymptomatic cases, the duration of infection – are the only ones taken from the known Monkeypox literature. Everything else is pure fantasy. Never mind, it's only a game.

These model parameters are used to calculate what happens when a country reacts harshly and appropriately, moderately and quite inappropriately. In the first case, the reproduction rate quickly falls below 1. In the second case, it takes a while, and in the third, it does not succeed. Quite like the completely inadequate model presented by Imperial College, the RKI oder CDC for SARS-CoV2 [5, 6].

The result: as I said, 3 billion sick people worldwide and almost 300 million – 10% – dead.

## Prospective testing

We can now [apply the strategy](#) we discussed earlier:

We consider what happens if this scenario is a simulation in the sense that the Monkeypox outbreak was actually planned, and if it was a very unlikely coincidence that the simulation chose Monkeypox of all things.

The latter is simple: if it was a coincidence, nothing much happens except a bit of media hype driving new pigs through the media village now that Covid-19 is slowly losing its charm. But that too will pass.

## If it was a plan, this is what happens:

Case numbers will increase rapidly – “exponentially”. Conveniently, the Bloomberg School of Public Health, led presumably by Jennifer Nuzzo, who knows all about this, will generate a dashboard that counts cases. At the same time, a new model calculation will be published, presumably in Science or Nature or on a corresponding website, which will have a striking resemblance to the one in the scenario paper. Perhaps even written by its

authors (Yassif, O'Prey, Isaac) or colleagues? The RKI will adopt the model relatively unchanged. The Bidens, Macrons and Trudeaus of this world will want to use pithy speeches to convince citizens that without lockdown we have no chance of escaping doom. The Bhakdis and Hockertz' of this world no longer exist. Therefore, there will be little opposition this time.

Relatively quickly, the Drostens of this world will discover that the virus has a very dangerous "mutation" that enables it to subvert vaccine protection and makes it very infectious, much more infectious, than normal Monkeypox. So panic is quickly spread in big media: a new killer virus. This time, other Drostens will have developed a new PCR test that is "quite specific" for this virus. Later it will turn out: a cross-reaction with other viruses of similar type, hamster-, cow-, mouse-, chicken- and whatever-pox not excluded. This time, the money printing machine of PCR tests will probably not go to Germany, but to France or the USA.

The vaccine industry will turn on its kettles and generate vaccine. Since it worked so famously before, EMA, FDA and co will wipe all need for studies off the table or thin them out so that a pro forma study will be on the table in three months and in that case there may even be a vaccine available 4 months after the pandemic is declared.

Presumably, Bill Gates will then announce on Austrian and German television at Christmas that he will graciously front the billions it will cost to produce and distribute the vaccines, but that it would be nice if governments would pay back their debt. That he and his foundations have already made this money on the COVID-19 vaccine machinery need not be mentioned. It is, after all, common knowledge.

The major publishers may get together and decide on a biosecurity pre-review for papers to be published on this topic. The interpretation of "biosecurity" will be broad. Both papers that seek to publish dangerous pathogen information and those that are critical of the general mindset will fall under it.

This is quite easy to do in the age of AI. The people from Google and from Oxford can help with this: You just have to type in a few code words – Monkeypox, for instance. An AI system of the efficiency of commercial systems already available checks the result and the semantic context and the censorship machine is ready and there is an end to scientific plurality. Finally. We have. Just one. Truth.

And at the same time, the UN will be discussing creating a new pandemic preparedness instrument. In any case, it will be the requested body that collects countries' pandemic taxes and then distributes them to producing countries, including Germany, Switzerland, Canada, the US, China, perhaps India and Nigeria. We can already start buying Johnson&Johnson and Merck shares. Because they will probably go up because these companies will produce the vaccines.

Well, maybe some unforeseen things will happen, like the population not wanting to play pandemic games any more?

After all, a few waking heads have also seen: In the simulation, the Monkeypox outbreak was moved to May/June 2022. When was the first real case discovered? I think May 2022.

The interesting thing about prophecies is: if you take them seriously, you usually prevent their anticipated outcome. The stupid thing: often they are not taken seriously. See Cassandra.

Actually, such a game is scandalous in itself. For it presupposes, quite unquestioningly and as a matter of course, that the Biological Weapons Convention – which prohibits tampering with biological systems to make them more dangerous – is not being respected. No one gets upset about it any more because it's happening everywhere. In



the USA. In China. In Germany. In France and God knows where else. That is the real scandal: that gain-of-function research is being done everywhere. That it is illegal, but no one controls or monitors, whether countries stick to the boundaries of legality. Least of all our press, which should actually have this function if governments do not. Because if it didn't, we wouldn't have SARS-CoV2, and we wouldn't have to worry about possibly modified Monkeypox.

Dear governments: How about effective gain-of-function research control instead of lockdowns? It's very simple: turn off the money tap. Dear UN: How about an effective ban on this nonsense instead of pandemic panels? It's not that difficult: countries that don't comply will be outlawed. Dear press, dear daily news: How about a barrage of film documentaries about the many bioweapons and gain-of-function laboratories of this world and also of this republic for a change? Finally, something new!

## Sources and literature

1. Harris E. What to Know About Monkeypox. JAMA. 2022. doi: <https://doi.org/10.1001/jama.2022.9499>.
2. Yassif JM, O'prey Kp, Isaacn CR. Strengthening Global Systems to Prevent and Respond to High-Consequence Biological Threats. Results from the 2021 Tabletop Exercise Conducted in Partnership with the Munich Security Conference. Washington: Nuclear Threat Initiative, 2021 November 2021. Report No.
3. Schreyer P. Chronik einer angekündigten Krise: Wie ein Virus die Welt verändern könnte. Frankfurt: Westend; 2020.
4. Menachery VD, Yount BL, Debbink K, Agnihothram S, Gralinski LE, Plante JA, et al. A SARS-like cluster of circulating bat coronaviruses shows potential for human emergence. Nature Medicine. 2015;21(12):1508-13. doi: 10.1038/nm.3985.
5. Ferguson N, Laydon D, Nedjati Gilani G, Imai N, Ainslie K, Baguelin M, et al. Impact of non-pharmaceutical interventions (NPIs) to reduce COVID19 mortality and healthcare demand. London: Imperial College, 2020.
6. an der Heiden M, Buchholz U. Modellierung von Beispielszenarien der SARS-CoV-2-Epidemie 2020 in Deutschland. Berlin: Robert Koch Institut, 2020.

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