

OPEN LETTER TO THE CHAIR OF THE COMMONS HEALTH COMMITTEE

**CALLING FOR AN INVESTIGATION INTO IRREGULARITIES IN
WHO'S EBOLA EMERGENCY DECLARATION
EBOLA VACCINE TRIALS
IN THE CONTEXT OF THE MEDICAL INNOVATION BILL**

Dr Sarah Wollaston MP,
Chair of the Commons Health Committee,
House of Commons,
London SW1A 0AA
United Kingdom

February 17, 2015

Dear Dr Sarah Wollaston,

I am writing to you to request an investigation into irregularities indicating that **fraud, abuse and corruption and mismanagement involving the World Health Organization (WHO) and GlaxoSmithKline (GSK) occurred in WHO's declaration of Ebola as a Public Health Emergency of International Concern on 8th August, 2014 .**

The impact of the WHO declaration on **the tax money, health and the human rights of the UK public** is far-reaching. Given the enormity -- yes, global impact -- of the declaration, it is regrettable that it has once more been **made for the profit of pharmaceutical companies in a repeat of the swine flu scandal of 2009** as I show in this letter.

I would like respectfully to invite you to view my wordpress blog, birdflu666, for **more evidence and proofs.**

The GSK Ebola vaccine is to be produced in **large quantities -- 230,000 doses in April --** at about the **same time as the Medical Innovation Bill is set to become law.**

http://news.sciencemag.org/sites/default/files/Norway_submission_WHO_EVD_23Oct2014.pdf

According to the FT, **Johnson & Johnson has already manufactured enough Ebola drugs to treat more than 400,000 people** with the potential for 2m courses by the end of the year.

<http://www.ft.com/cms/s/0/bd312d5a-9d92-11e4-8946-00144feabdc0.html#axzz3PSUXhVDD>

The **combination** of a deregulated drug environment foreseen in the **Medical Innovation Bill**, **experimental Ebola vaccine and drugs** from GSK and other pharmaceutical companies as well as provisions for **forced vaccination and quarantine** allowed in the context of the International Health Regulations by a WHO emergency epidemic declaration, constitute an **extraordinary and unprecedented threat to the health and safety of the UK public.**

You may remember investigations into **WHO's pandemic swine flu declaration in 2010, including by the Council of Europe and BMJ, found that**

- the swine flu was a **non event**
- the **threat was exaggerated** by WHO, pandemic criteria were lowered to allow for a declaration
- **“Key scientists advising the World Health Organization on planning for an influenza pandemic had done paid work for pharmaceutical firms that stood to gain from the guidance they were preparing. These conflicts of interest have never been publicly disclosed by WHO,**

and WHO has dismissed inquiries into its handling of the A/H1N1 pandemic as “conspiracy theories.”

<http://www.bmj.com/content/340/bmj.c2912>

- **pharmaceutical companies made billions** from the swine pandemic vaccine and drug contracts
- numerous **adverse events**, notably narcolepsy, have since been attributed by the UK government to **the swine flu vaccine**

http://assembly.coe.int/CommitteeDocs/2010/20100604_H1n1pandemic_E.pdf

<http://www.telegraph.co.uk/lifestyle/wellbeing/jameslefanu/10455755/Doctors-Diary-Swine-flu-scientists-were-too-close-to-big-pharma.html>

The Council of Europe inquiry concluded the abuse of the swine flu declaration had led to a **loss of trust among the public, which “may prove disastrous** in the case of the next disease of pandemic scope.”

Five years later on, it is apparent **none of the reforms promised in 2010** by WHO General Director Dr Margaret Chan in relationship to **transparency and accountability** took place.

I offer evidence that a scheme was put in place and executed by WHO officials to make **false statements to induce the public to accept an unnecessary Ebola declaration to direct vaccine contracts to GSK**. WHO officials

- **exaggerated the Ebola threat**
- **concealed vested interests in a declaration** and masked that **pharmaceutical companies were set to make billions** from Ebola vaccine and drug contracts
- **failed to disclose that scientists with personal and organizational links to pharmaceutical companies sat on the key board advising WHO to declare Ebola an epidemic**
- **allowing trials which could involve up to 30,000 people in Liberia to go ahead in an atmosphere of intimidation**
- **downplaying the risks of the trial, and scientific literature suggesting the vaccine itself could infect people with Ebola**

An unnecessary Ebola declaration

I will deal, first of all, with the evidence proving that **WHO officials knowingly and systematically exaggerated the threat of Ebola to create the impression that the outbreak was raging out of control** to induce the public **to accept a vaccine which is unnecessary, detrimental to tax money, the public health, and human rights**.

In declaring Ebola an public health emergency in August, **WHO discounted the assessment of its own Ebola expert, Dr Pierre Formenty, who was best informed about the outbreak**.

In a **press briefing** in Geneva on **June 27th** -- just five weeks before the declaration -- WHO media spokesperson Glenn Thomas introduced **WHO's Ebola expert Dr Pierre Formenty**. In response to aggressive questioning from reporters and Doctors without Borders, **Dr Formenty categorically denied that Ebola was "out of control"**. He **repeated this denial in the face of aggressive questioning**.

<http://webtv.un.org/topics-issues/specialized-agencies/watch/geneva-press-briefing-hrc-ipu-wto-unece-who-ohchr-unhcr-iom-wfp/3646279074001#full-text>

A UN press release states:

"Responding to a question on whether the situation had ‘got out of hand’ **Dr. Formenty replied that the situation was not out of hand**, and a lot of work had been done in the three affected countries - Guinea, Sierra Leone and Liberia – to tackle the situation and stop the transmission of Ebola virus," according to a

UN press release.

[http://www.unog.ch/80256EDD006B9C2E/\(httpNewsByYear_en\)/DCE688E6FA389F05C1257D040044F954?OpenDocument](http://www.unog.ch/80256EDD006B9C2E/(httpNewsByYear_en)/DCE688E6FA389F05C1257D040044F954?OpenDocument)

Formenty's statement that Ebola was not out of control contradicted the assessment of NGOs and other entities.

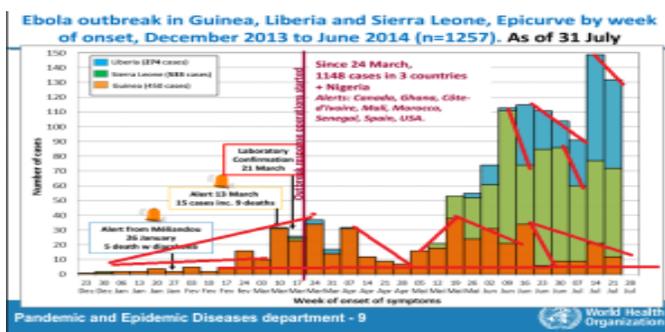
"When Doctors Without Borders began warning in April that the outbreak was out of control, a **dispute broke out between the NGO and a World Health Organization official who insisted it was contained.**"

<http://www.haaretz.com/news/world/1.621314>

WHO postponed an emergency declaration until August when **Glenn Thomas was declared dead in the MH17 plane crash and no longer able to give Dr Formenty a platform** at press conferences to give a factual assessment of the Ebola threat.

<http://www.globalresearch.ca/mh17-verdict-real-evidence-points-to-us-kiev-cover-up-of-failed-false-flag/5393317>

A WHO chart showing Ebola cases in Guinea, Liberia and Sierra Leone show **Ebola cases were falling on July 31st, 2014. This offers more proof** Ebola was under control the week before the declaration was made under false pretences. Please see attachment 1 (Formenty).



In September, WHO affiliate, the U.S. Centers for Disease Control and Prevention (CDC) released a forecast claiming Ebola could potentially infect 1.4 million people in Liberia and Sierra Leone by the end of January, 2015 as part of the hype.

http://www.nytimes.com/2014/09/24/health/ebola-cases-could-reach-14-million-in-4-months-cdc-estimates.html?_r=0

In fact as of January 26th, 2015, only five confirmed Ebola cases were reported in Liberia. The containment of Ebola was achieved using standard epidemic control measures such as quarantine, contact tracing, and isolation, illustrating, firstly, that the Ebola outbreak was under control as Dr Formenty stated, and secondly, that there is no need to deploy experimental vaccines to eradicate Ebola.

<http://www.theguardian.com/world/2015/jan/26/liberia-ebola-only-five-people-being-treated-for-ebola>

<http://www.militarytimes.com/story/military/pentagon/2015/02/04/military-ebola-mission-in-liberia-coming-to-an-end/22888079/>

New confirmed Ebola cases in Liberia, Sierra Leone and Guinea totalled 99 in the week to January 25 were the lowest tally since June 2014, according to the WHO.

An Ebola declaration made for the benefit of pharmaceutical companies

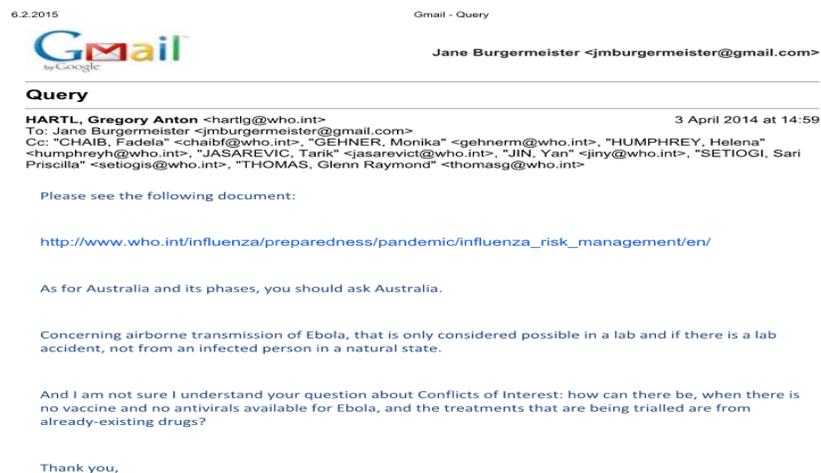
I would like to direct your attention to evidence that **WHO officials conspired as early as April, 2014, to conceal from the public that the Ebola declaration was made not because of a raging outbreak but for the benefit of pharmaceutical companies.**

Aware of the criticisms of the inquiries in 2010, and afraid of the disastrous collapse in trust predicted by the Council of Europe if the public became aware that GSK had a vested interest in an Ebola declaration, WHO officials hatched out a plan to misrepresent the truth to the public in order to **avoid public scrutiny and direct vaccine contracts to GSK, Merck and other pharmaceutical companies.**

On April 3rd, I sent a **query to WHO spokespersons Glen Thomas and Gregory Haertl** in my capacity as a science journalist who has a blog, the birdflu666 wordpress blog, asking whether there were **any conflicts of interests** which could influence WHO to declare Ebola an emergency.

I would like to direct your attention to the reply of **WHO s leading spokesperson Haertl. In an email sent at 14: 59 on April 3 he stated that there was "no vaccine and no antivirals available for Ebola."**

"And I am not sure I understand your question about Conflicts of Interest: how can there be,



when there is no vaccine and no antivirals available for Ebola,” he wrote.

Please see attachment 2 for a copy of the email.

In fact, in **May 2013, GlaxoSmithKline (GSK) bought a Swiss vaccine-maker for \$325m, called Okairos, which had a preclinical Ebola vaccine candidate. On 24 March 2014, Dr Ripley Ballou, Vice President of GlaxoSmithKline (GSK) Biologicals, contacted WHO to lask if they were interested in their vaccine.**

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4271692/>

A WHO official speaking English, who appears to be Dr Marie Paule Kieny, can be heard saying in a German radio broadcast on 15 February 2015:

“He sent me a message in March, and said you know we have this vaccine on the shelf. Are you interestedthinking that this was way too late.

http://www.deutschlandfunk.de/medizin-versuch-und-irrtum-ebola-studien-im-eilverfahren.740.de.html?dram:article_id=310899

This shows that management at WHO received a timely update on March 24 of the GSK vaccine. It is to be expected that WHO spokesperson Haertl, whose Department of Communications is directly subordinate to the Director General's Office in the organizational hierarchy, would have declared this potential conflict of interest when I asked.

My query is significant because it was the one time a media query appears to have been directed to WHO concerning potential conflicts of interests. Also, Haertl, as the WHO Coordinator of News, Social Media and Monitoring, sent a copy of his email containing the false claim there was no Ebola vaccine to seven other media and communication officials in WHO. Concealing conflicts of interest appears to have been the official policy adopted as early as April 2014.

I would respectfully like draw your attention to the **growing importance of the alternative media** as a source of information for the public today. I am an **experienced science journalist who has written for Nature, the BMJ, The Scientist, The Guardian and other publications as Google Scholar shows.**

<https://scholar.google.com/scholar?hl=de&q=jane+burgermeister&btnG=&lr=>

My birdflu666 wordpress blog has followed WHO and pandemics since 2009. Regrettably, the blog has catalogued a record of abuse.

In brief, I started the birdflu666 blog in 2009 reporting on a scandal involving the contamination of 72 kilos of seasonal flu with the deadly bird flu in Baxter's biosecurity level 3 facilities in Orth an der Donau . Baxter sent the deadly material to labs in four countries, nearly sparking a global bird flu pandemic. I would also like to draw your attention to a letter from the Austrian Ministry of Health confirming that the state prosecutor opened an investigation into the Baxter contamination incident after I filed charges in April 2009. Please see attachment 3 (Hinausschrift). Strict biosecurity level 3 procedures at the Orth an der Donau facilities make an accidental contamination virtually impossible.

In addition, I would like to draw your attention to my subsequent coverage of the **swine flu scandal and WHO s involvement** on my blog and elsewhere. For example, a YouTube clip in German on the Baxter incident and the dangers of the experimental swine flu vaccine received about 450,000 views.

https://www.youtube.com/watch?v=5_R5EHn9IOY

The impact which alternative media can have on the public opinion is illustrated by the fact that only, for example, 3% of the Austrians and 6% of the Germans and French took the swine flu vaccine in 2009. This in spite of massive encouragement to do so from their governments and the mainstream media.

I allege WHO officials resorted to a **conspiracy to make false statements to my blog and other media precisely in order to avoid the intense public scrutiny**, which WHO could expect for its second emergency declaration in five years. **If the public had been made aware through my blog and other alternative media that GSK had offered WHO its Ebola vaccine already in March 2014, it would have led to a much greater scrutiny of conflicts of interests ahead of the declaration, and may even have prevented the declaration altogether** given the many other irregularities, including the assessment by Dr Formenty that there was no out of control Ebola epidemic - an assessment backed up by WHO charts.

I turn now to the **second of piece of evidence that WHO adopted a policy of conspiring to make false statements to conceal conflicts.** The head of WHO, **Director General Dr Margaret Chan**, grabbed headlines around the world in November 2014 when she made the misleading statement that there was no Ebola vaccine there was "no incentive for drug companies to make something that won't be profitable."

http://www.salon.com/2014/11/04/who_director_condemns_profit_driven_pharmaceutical_industry_for_failing_to_produce_ebola_cure/

<http://www.biopharma-reporter.com/Markets-Regulations/WHO-slams-pharma-for-failing-to-invest-in-non-profitable-Ebola-R-D>

<http://time.com/3555706/who-ebola-vaccine-pharmaceutical-industry-margaret-chan/>

<http://time.com/3555706/who-ebola-vaccine-pharmaceutical-industry-margaret-chan/>

Furthermore, WHO failed to disclose that several of WHO's Ebola emergency declaration **advisors have links to pharmaceutical companies which should have disqualified them from participation in matters concerning an Ebola declaration which directs substantial contracts to pharmaceutical companies.** For example, Sam Zaramba, who sits on the Mectizan Expert Committee sponsored by GSK and Merck and who has participated in meetings sponsored by GSK and Merck, among other links.

http://www.who.int/ihr/procedures/emerg_comm_members_20140806/en/

<http://www.mectizan.org/about/mectizan-expert-committee>

Professor Lucille Blumberg also has links to pharmaceutical companies, including Novartis and Sanofi Pasteur.

<http://www.astm.org/de/downloads/files/lrmt20.pdf>

http://www.who.int/csr/resources/publications/swineflu/h1n1_guidelines_pharmaceutical_mngt.pdf

Ebola vaccine trials in Liberia: carried out in secrecy and under threat of arrest

The Ebola emergency declaration gave pharmaceutical companies the advantage that it **lowered standards for vaccine and drugs**, and so gave GSK and other pharmaceutical companies

- **an instant market for a preclinical experimental Ebola vaccine**

A **standard vaccine undergoes three clinical trials under the traditional approach and takes on average 10.71 years to develop.** Also, a vaccine only has a 6% chance of entering the market. Drugs can take 10 to 15 years to develop with 95% failure risk at point of discovery. The GSK Ebola vaccine is one of the most rapidly fast-tracked vaccines in history with only four weeks of phase one clinical trials on 60 people in the UK before a phase 3 trial planning to enroll about 30,000 people started at the end of January in Liberia.

http://news.sciencemag.org/sites/default/files/Norway_submission_WHO_EVD_23Oct2014.pdf

- **huge potential profits**

Dr. Anthony Fauci, Director of the U.S. National Institute for Allergy and Infectious Diseases, told The Canadian Press that it's "**quite conceivable, if not likely**" that **fast-tracked Ebola vaccines may have to be given to entire countries.**

<http://www.globalresearch.ca/u-s-national-institute-of-health-nih-we-may-have-to-vaccinate-whole-countries-to-stop-ebola-outbreak/5407196>

A WHO **business plan has the goal of developing enough pandemic vaccine to immunize the world's population.**

http://apps.who.int/vaccine_research/documents/Report%20McKinsey%20Business%20Plan%20Flu3.p

df

- **a blank cheque to conduct trials on vast numbers of people circumventing controls**

The PREVAIL vaccine trial does not appear to follow WHO Standard Operating Procedures for conducting clinical vaccines trials.

Altogether 19 representatives from the UK government and two from GSK were engaged in a WHO meeting on financing the Ebola vaccines on January 8th, which overrode the decisions of a previous meeting, the Joint Review of ChAd3 Ebola Vaccine Trials, on December 15th, in which African countries scheduled to participate in the Ebola trial appear to have asked for more safety data before proceeding with clinical phase 2 trials in five countries other than the three affected by Ebola.

<http://www.who.int/mediacentre/events/2015/ebola-vaccine-access/en/>

<http://www.who.int/medicines/ebola-treatment/vaccines-meeting-lop.pdf?ua=1>

A WHO meeting report stated that preparations for **concurrent Phase II and Phase III trials** were *already* at an advanced stage,” that is to say, clinical phase 2 trials were scraped altogether.

“Preparations for concurrent Phase II trials in healthy volunteers outside the affected countries and **Phase III trials in the affected countries are already at an advanced stage.**”

http://apps.who.int/iris/bitstream/10665/149045/1/WHO_EVD_Meet_HIS_15.1_eng.pdf?ua=1

<http://www.who.int/medicines/ebola-treatment/meetings/gsk-vaccine-trials.pdf>

The January 8th WHO meeting report states that **critical safety data were not available** when the decision was made to go ahead with large-scale trials.

“However, further data on the immune response elicited by each vaccine will need to be analysed in the coming weeks to inform dose selection for forthcoming efficacy trials. Results from a study by an Oxford University group investigating the effects of a booster dose with an MVA-EBO vaccine after priming with the Chad3-ZEBOV vaccine suggest that immune responses were up to a 10-fold higher 2 weeks after boosting. Further results will be available soon. Critical decisions about the next phase of clinical development will be made for both vaccines very soon, once the totality of safety and immunogenicity data are available, “ states the WHO report on the January 8th meeting.

http://apps.who.int/iris/bitstream/10665/149045/1/WHO_EVD_Meet_HIS_15.1_eng.pdf?ua=1

- **the capacity to suspend freedom of speech, freedom of the press and government oversight in Liberia**

The **Liberian Deputy Minister for Public Affairs at the Ministry of Information**, Isaac Jackson, appearing at the side of the WHO scientist in charge of the trials, Dr Stephen Kennedy, **threatened to arrest any journalist, lawyer of government official who expressed criticism or legitimate concerns about the Ebola experimental vaccine trials** on February 10th, 2015.

<http://www.inprofiledaily.com/?q=article/108-take-trial-vaccines-42-side-effects-reported-but%E2%80%A6>

- **a blank cheque to circumvent political controls**

On February 3rd, Liberian parliament assumed its responsibilities imposed upon it as representatives of the people attempted to ascertain the facts behind this trial conducted in a veil of secrecy. It “mandated several of its committees to investigate **why decision on the trial of two separate Ebola vaccines in Liberia has not been adequately explained to the Liberian people through the Legislature.**”

<http://allafrica.com/stories/201502050985.html>

One week after the announcement, the threat of arrest was issued by the **Liberian Deputy Minister for Public Affairs at the Ministry of Information and it is not clear if the investigation will proceed.**

The victims of these vaccine trials are often illiterate, the poor, people without access to the internet. They cannot inform themselves of the risks. Nor should they. It is the obligation of the authorities to inform people of the risks of this unprecedented experiment.

- **a blank cheque to cause death and sickness**

Liberians are, and should be, concerned about the incredible plan to give to 30,000 people a vaccine for which there is no proof that it is safe or effective. On the contrary, what documentation there is indicates the **GSK vaccine could even infect people with Ebola.** Developed with NIH, the GSK Ebola “ChAd3” vaccine is made from a combination of an Ebola virus and a cold virus, a chimp adenovirus type 3 (ChAd3). An HIV vaccine, which used the same cold virus as the GSK Ebola vaccine, was halted because it was found to give people HIV. Men who had previously caught colds caused by the “cold” virus used to make the HIV vaccine were two to four times as likely to become infected with HIV if they got the HIV vaccine. **The Step trial of the NIAID and Merck HIV vaccine was halted in phase IIb in 2007 when results showed that people were being infected by the vaccine, but the GSK vaccine trial will not undergo the same clinical trials.**

<http://www.nytimes.com/2012/05/18/health/research/trial-vaccine-made-some-more-vulnerable-to-hiv-study-confirms.html>

http://www.nlm.nih.gov/databases/alerts/hiv_step_study.html

The GSK vaccine is based on data obtained from trials in monkeys, which did not show lasting protection. **Six of the eight macaques monkeys who were given one Ebola “ChAd3” shot died at ten months.**

<http://www.reuters.com/article/2014/09/07/us-health-ebola-vaccines-idUSKBN0H20NQ20140907>

Also, the monkey trial involved a mild lab form of Ebola and not the harsh west Africa type so it is hard to extrapolate the data. Apart from the animal trial, the GSK vaccine has only undergone a four week clinical phase 1 trial on 60 healthy adults in the UK, **which reported few adverse events.**

“Fever developed in 2 of the 59 participants who were evaluated. Prolonged activated partial-thromboplastin times and transient hyperbilirubinemia were observed in 4 and 8 participants, respectively.” <http://www.nejm.org/doi/pdf/10.1056/NEJMoa1411627>

By contrast, the PREVAIL trial has reported 42 adverse events on the first 108 participants alone.

<http://www.inprofiledaily.com/?q=article/108-take-trial-vaccines-42-side-effects-reported-but%E2%80%A6>

Prior to 2014 all Ebola vaccine trials were discontinued. The three most recent Ebola vaccine trials were suspended, terminated or withdrawn in phase 1 of clinical trials.

http://news.sciencemag.org/sites/default/files/Norway_submission_WHO_EVD_23Oct2014.pdf

In brief, the GSK experimental vaccine could never be given to so many people if WHO had not lowered the bar to allow even dangerous vaccines to be given to people.

The slightest risk that the vaccine could give someone Ebola should be enough to stop the trials immediately. To infect someone with Ebola, a deadly disease, which might kill them is an act of murder, torture and an atrocity. It has nothing to do with medicine. However, the Liberian trial could be conducted on thirty thousand people. There are plans to have a control group scrapped if Ebola surges as it may well do if people are infected by the vaccine.

Questions have also been asked why PREVAIL, the administrators of the vaccine trial, are giving participants **two shots of a syringe or two doses** at once on a single volunteer. It is not clear how safe the Ebola virus in the vaccine is given the problem of **cold chain supply, quality control and contamination as the Baxter bird flu case shows.**

- **a blank check to evade accountability**

If the experimental subjects are infected with Ebola as a result of the GSK vaccine and if some of whom died as a result, and others were caused great pain and suffering, there is **no guarantee that this will be recorded in the clinical results. Infection due to the vaccine can be falsely attributed to direct contact with Ebola patients in the chaotic conditions prevailing in Liberia allowing GSK plausibility of denial.**

I would also like to draw your attention to court documents in Italy which reveal that GSK masked the death of 67 infants within ten days of receiving a GSK vaccine.

http://www.naturalnews.com/048430_vaccines_sudden_death_Big_Pharma.html

Also, according to a study, **collecting data on vaccines during an epidemic may be “impossible”.** Also, **“any data obtained to assess benefit or toxicity could have innumerable biases and misappropriations, making their application under current research standards impossible.”**

<http://annals.org/article.aspx?articleid=1915876>

- **a shield against compensation claims in the event of dangerous side effects**

It emerged during a hearing in the Liberian Parliament at the beginning of February that if participants in the trial are infected with Ebola, or die from the vaccine, if they suffer an agonizing illness or death, there **will be no compensation for them.** PREVAIL trial leader Dr Stephen Kennedy said there would be no financial compensation for people but **negotiations with the Liberian Ministry of Justice were underway on the legal aspect. Even if money could redress the terrible sickness that could be visited on people from a defective Ebola vaccine, the coffers of the Liberian government seem to be empty.** What will happen if thousands suffer long term effects from GSK vaccines in Liberia and other poor African countries? Who will compensate them?

<http://www.firstwordpharma.com/node/1262602?tsid=33#axzz3S1siLKW1>

<http://www.heritageliberia.net/heritagenews/index.php/2014-07-17-17-09-31/item/930-ebola-vaccines-trial-backfires-as-lawmakers-launch-investigation>

I would like to draw your attention to the fact that **people who suffered damage from GSK swine flu vaccine are also seeking compensation from the UK government.**

Participants in the Liberian Ebola trials receive \$40USD in exploitation of their dire poverty. It is not clear if they receive compensation for follow up visits or if there are any follow up visits planned to monitor side effects.

- **the capacity to deploy the military and violate human rights in the context of the**

International Health Regulations

Liberia, for example, declared a state of emergency in early August, with a 9 pm. **curfew** and soldiers and police officers patrolling the streets. Communities were **quarantined** including a part of the Liberian capital called West Point, home to about 75,000 people. **Barbed wire** was used to lock in the residents without food and water. The **military fired on residents, killing a 15-year-old boy and severely wounding a 22-year-old man.**

I would also like to draw your attention to much more sinister aspect running like a red thread through these researches. **Dr. Francis Boyle, a scholar of bio warfare and international law at the University of Illinois, who drafted the Biological Weapons Anti-Terrorism Act of 1989, the US implementing legislation for the 1972 Biological Weapons Convention, has said that Ebola originated in a US bio weapons lab.** “This isn’t normal Ebola at all,” he said. “I believe it’s been genetically modified.” Boyle points to the existence of US government laboratories in Africa that are creating bio weapons under the guise of working on cures. In addition, Boyle says the speed of Ebola's spread and the number it is killing is proof that Ebola is a modified form.

<http://www.informationclearinghouse.info/article40012.htm>

<http://www.informationclearinghouse.info/article40013.h>

<http://www.waronwethepeople.com/another-ebola-problem-solved-natural-source-found/>

<http://www.globalresearch.ca/ebola-genetically-modified-organism-developed-in-us-biowarfare-laboratories-in-africa/5409003>

<http://www.washingtonsblog.com/2014/10/ebola-2.html>

<http://www.washingtonsblog.com/2014/10/bioweapons-expert-reaffirms-belief-ebola-escaped-biowarfare-lab.html>

US bioweapons scientists working for Army Medical Research Institute of Infectious Diseases helped Okairos, a Swiss-Italian biotechnology company acquired by GSK in 2013, develop the GSK Ebola vaccine.

<http://www.niaid.nih.gov/news/QA/Pages/EbolaVaxQA.aspx>

Ebola is one of the principal diseases which is researched by the US military, which raises questions about why the UK government believes ISIS could ever use it.

Conclusion

WHO made false statements about conflicts of interests, systematically exaggerated the threat of Ebola and abused an Ebola declaration for the profit of pharmaceutical companies recalling the swine flu declaration scandal in 2009.

WHO and GSK appear to have calculated that the gigantic potential gains from a fraudulent Ebola declaration outweighed the possibility of being held to account. Confident that weak internal controls, weak external oversight and a weak mainstream media would allow irregularities to go undetected, they advanced to what **may be violations of criminal laws on fraud.** Knowing the GSK Ebola vaccine is not safe and anticipating damage, GSK and WHO chose victims from one of the world's most impoverished countries for a highly irregular trial. In the face of the justified concerns, the Liberian government has threatened to arrest journalists, lawyers and government officials who investigate the trial and its conduct.

The trials are supposed to be justified by the Ebola outbreak. Yet, a trial of a potential Ebola drug in Liberia brincidofovir was cancelled on February 3rd because the Ebola case numbers in the country are now so low that it is unlikely to get a clear result. How, then, can the GSK vaccine trials be

justified?

<http://www.theguardian.com/world/2015/feb/03/ebola-drug-trial-liberia-halted>

The value of the trials, conducted in the chaotic conditions of Liberia and in an atmosphere of terror and intimidation, will be worthless. Yet, if GSK Ebola vaccine is approved, it could be given to millions of people all around the world, including in the UK, and in a short time.

The UK public will expect MPs to be **proactive in investigating and referring to the appropriate investigative organizations evidence of potential fraud or corruption**. A proactive investigation is needed to reassure the public that the white wash inquiries after WHO's unnecessary swine flu declaration in 2009 will not be repeated.

I ask in particular for the role of Dame Sally Davies in the Ebola declaration to be put under scrutiny. Due to her double role as the UK Chief Medical Officer and a member of the WHO Executive Board, Dame Sally Davies is in a unique position to coordinate the activities of WHO, the UK public health bodies and pharmaceutical companies.

At the very least Dame Sally Davies **must be held responsible for the lack of management control and oversight that allowed WHO to make an Ebola emergency declaration fraudulently for the direct benefit of pharmaceutical companies for the second time in five years in spite of pledges by WHO to reform**. Also, it must be asked why she has chosen to implement **lax quarantine and screening policies in the UK** when the NHS is **ill prepared to handle Ebola cases** and when these lax policies delayed the diagnosis of Scottish nurse Pauline Cafferkey when she arrived at Heathrow and asked to be tested seven times.

I would like to direct your attention to the fact that the governors of the states of New Jersey, Connecticut and New York all introduced mandatory quarantine and tougher airport screening measures in October. The US army also introduced mandatory quarantines for its soldiers serving in Liberia.

<http://www.wsj.com/articles/new-york-new-jersey-quarantines-fuel-ebola-debate-1414192508>

<http://www.theguardian.com/us-news/2014/oct/29/us-troops-ebola-face-21-day-quarantine-low-risk>

In January, New York Governor Andrew Cuomo announced financial support and other protections for returning Ebola health workers for their 21 day quarantine in a move designed to encourage personnel to continue to treat Ebola patients in West Africa.

http://article.wn.com/view/2015/01/20/Ebola_Aid_Workers_Said_to_Get_Protections_in_Cuomo_s_NY_Budget/

Furthermore, I ask for investigation into whether the **UK government has plans to follow the policy of the Liberian government and threaten to arrest lawyers, journalists or government officials** who express legitimate concerns about the GSK and other Ebola vaccines, should these vaccines ever be deployed for use in the UK. In particular, I also ask for clarification if there are any plans to use the new Facebook warriors belonging to the **British army 77th Brigade, operative from April, in any psychological operations to intimidate, harass people who express legitimate concerns about the safety and effectiveness of Ebola vaccines on the social media.**

<http://www.theguardian.com/uk-news/2015/jan/31/british-army-facebook-warriors-77th-brigade>

In this context, I would like to draw your attention to evidence that **reprisals are being conducted against whistleblowers. I am an experienced science journalist** (a dual Austrian and Irish citizen, grew up in London, graduate of Edinburgh University) and my warnings about the swine flu vaccine in 2009

were accurate, yet **several attempts were made by the Austrian government to psychiatrize me using illegal means in 2010. Austrian police charged an researcher employed by the government and with links to pharmaceutical organizations for his illegal attempt to confine me in 2010, but my case has not come to court. I felt forced to leave Austria in 2012 and now live in fear of my life.**

I would also like to point to the strange death of WHO spokesperson **Glenn Thomas allegedly in the MH17 plane crash in the Ukraine on July 17th. You may recall Glenn Thomas gave a platform to the WHO Ebola expert Pierre Formenty who stated there was no need for an Ebola declaration as late as June 27th. Glenn Thomas s death removed a key obstacle to the WHO declaration on August 8th. Relatives of the crash victims have called the investigation into the MH17 crash a cover up.**

<http://rt.com/news/212895-mh17-dutch-reject-un/>

Given the huge amounts of money involved in the Ebola declaration, I ask for an investigation also into the role played by **non state actors, specifically philanthropic organizations such as the Bill and Meldinda Gates Foundation, George Soros, the Wellcome Trust as well as NGOs such as Doctors without Borders, in funding key personnel in a bioweapons lab in Sierra Leone, in inflating the Ebola threat and in seeking to profit from a declaration.**

In view of the catalogue of abuse of the International Health Regulations – the Baxter bird flu contamination scandal, the swine flu scandal and the Ebola declaration driven by commercial imperatives – in just five years, **I call for these regulations to be abolished. I also call for proposals to increase the powers of WHO in the event of a future epidemic declaration to be blocked.**

Information relating to irregularities in WHO's Ebola declaration and vaccine trials has been circulating around the globe in a number of languages for many months. I believe the disastrous **collapse in public trust predicted by the Council of Europe in 2010 in the event of another abuse of a public health declaration** has already occurred and if the GSK Ebola vaccine is pushed on the people of the UK or Europe, the consequences could be unpredictable.

Finally, I would like respectfully to invite you to view a copy of this letter on my wordpress blog, birdflu666, together with **other evidence and proofs**. Please note WHO has recently reorganized its website, and some of the links for WHO documents may have changed or disappeared altogether.

If you would like more information, please do not hesitate to contact me. Thank you for your attention.

Yours sincerely,

Jane Burgermeister