

# COVID19 PCR Tests are Scientifically Meaningless

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Though the whole world relies on RT-PCR to “diagnose” Sars-Cov-2 infection, the science is clear: they are not fit for purpose

From [Torsten Engelbrecht and Konstantin Demeter](#)

Lockdowns and hygienic measures around the world are based on numbers of cases and mortality rates created by the so-called SARS-CoV-2 RT-PCR tests used to identify “positive” patients, whereby “positive” is usually equated with “infected.”

But looking closely at the facts, the conclusion is that these PCR tests are meaningless as a diagnostic tool to determine an alleged infection by a supposedly new virus called SARS-CoV-2.

UNFOUNDED “TEST, TEST, TEST,...” MANTRA

At the [media briefing on COVID-19 on March 16, 2020](#), the WHO Director General Dr Tedros Adhanom Ghebreyesus said:

*We have a simple message for all countries: test, test, test.”*

The message was spread through headlines around the world, for instance by [Reuters](#) and the [BBC](#).

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Still on the 3 of May, the moderator of the heute journal — one of the most important news magazines on German television— was passing the mantra of the corona dogma on to his audience with the admonishing words:

*Test, test, test—that is the credo at the moment, and it is the only way to really understand how much the coronavirus is spreading.”*

This indicates that the belief in the validity of the PCR tests is so strong that it equals a religion that tolerates virtually no contradiction.

But it is well known that religions are about faith and not about scientific facts. And as Walter Lippmann, the two-time Pulitzer Prize winner and [perhaps the most influential journalist of the 20th century](#) said: “Where all think alike, no one thinks very much.”

So to start, it is very remarkable that Kary Mullis himself, the inventor of the Polymerase Chain Reaction (PCR) technology, did not think alike. His invention got him the Nobel prize in chemistry in 1993.

Unfortunately, Mullis passed away last year at the age of 74, but there is no doubt that the biochemist regarded the [PCR as inappropriate to detect a viral infection](#).

The reason is that the intended use of the PCR was, and still is, to apply it as a manufacturing technique, being able to replicate DNA sequences millions and billions of times, and not as a diagnostic tool to detect viruses.

How declaring virus pandemics based on PCR tests can end in disaster was described by Gina Kolata in her 2007 New York Times article [Faith in Quick Test Leads to Epidemic That Wasn't](#).

## LACK OF A VALID GOLD STANDARD

Moreover, it is worth mentioning that the PCR tests used to identify so-called COVID-19 patients presumably infected by what is called SARS-CoV-2 do not have a valid gold standard to

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compare them with.

This is a fundamental point. Tests need to be evaluated to determine their preciseness — strictly speaking their “sensitivity”[1] and “specificity” — by comparison with a “gold standard,” meaning the most accurate method available.

As an example, for a pregnancy test the gold standard would be the pregnancy itself. But as Australian infectious diseases specialist Sanjaya Senanayake, for example, stated in an [ABC TV interview](#) in an answer to the question “*How accurate is the [COVID-19] testing?*”:

*If we had a new test for picking up [the bacterium] golden staph in blood, we’ve already got blood cultures, that’s our gold standard we’ve been using for decades, and we could match this new test against that. But for COVID-19 we don’t have a gold standard test.”*

Jessica C. Watson from Bristol University confirms this. In her paper “[Interpreting a COVID-19 test result](#)”, published recently in *The British Medical Journal*, she writes that there is a “*lack of such a clear-cut ‘gold-standard’ for COVID-19 testing.*”

But instead of classifying the tests as unsuitable for SARS-CoV-2 detection and COVID-19 diagnosis, or instead of pointing out that only a virus, proven through isolation and purification, can be a solid gold standard, Watson claims in all seriousness that, “pragmatically” COVID-19 diagnosis itself, remarkably including PCR testing itself, “*may be the best available ‘gold standard’.*” But this is not scientifically sound.

Apart from the fact that it is downright absurd to take the PCR test itself as part of the gold standard to evaluate the PCR test, there are no distinctive specific symptoms for COVID-19, as even people such as Thomas Löscher, former head of the Department of Infection and Tropical Medicine at the University of Munich and member of the Federal Association of German Internists, conceded to us[2].

And if there are no distinctive specific symptoms for COVID-19, COVID-19 diagnosis — contrary to Watson’s statement — cannot

be suitable for serving as a valid gold standard.

In addition, “experts” such as Watson overlook the fact that only virus isolation, i.e. an unequivocal virus proof, can be the gold standard.

That is why I asked Watson how COVID-19 diagnosis “may be the best available gold standard,” if there are no distinctive specific symptoms for COVID-19, and also whether the virus itself, that is virus isolation, wouldn’t be the best available/possible gold standard. But she hasn’t answered these questions yet – despite multiple requests. And she has not yet responded to our rapid response post on her article in which we address exactly the same points, either, though [she wrote us on June 2nd](#): “*I will try to post a reply later this week when I have a chance.*”

## NO PROOF FOR THE RNA BEING OF VIRAL ORIGIN

Now the question is: What is required first for virus isolation/proof? We need to know where the RNA for which the PCR tests are calibrated comes from.

As textbooks (e.g., White/Fenner. Medical Virology, 1986, p. 9) as well as leading virus researchers such as [Luc Montagnier or Dominic Dwyer state](#), particle purification — i.e. the separation of an object from everything else that is not that object, as for instance Nobel laureate Marie Curie purified 100 mg of radium chloride in 1898 by extracting it from tons of pitchblende — is an essential pre-requisite for proving the existence of a virus, and thus to prove that the RNA from the particle in question comes from a new virus.

The reason for this is that PCR is extremely sensitive, which means it can detect even the smallest pieces of DNA or RNA — but it cannot determine *where these particles came from*. That has to be determined beforehand.

And because the PCR tests are calibrated for gene sequences (in this case RNA sequences because SARS-CoV-2 is believed to be a RNA virus), we have to know that these gene snippets are part of the looked-for virus. And to know that, correct isolation and purification of the presumed virus has to be executed.

Hence, we have asked the science teams of the relevant papers which are referred to in the context of SARS-CoV-2 for proof whether the electron-microscopic shots depicted in their in vitro experiments show purified viruses.

But not a single team could answer that question with “yes” — and NB., nobody said purification was not a necessary step. We only got answers like “*No, we did not obtain an electron micrograph showing the degree of purification*”(see below).

**Study 1:** Leo L. M. Poon; Malik Peiris. “Emergence of a novel human coronavirus threatening human health” *Nature Medicine*, March 2020

**Replying Author:** Malik Peiris

**Date:** May 12, 2020

**Answer:** “*The image is the virus budding from an infected cell. It is not purified virus.*”

**Study 2:** Myung-Guk Han et al. “Identification of Coronavirus Isolated from a Patient in Korea with COVID-19”, *Osong Public Health and Research Perspectives*, February 2020

**Replying Author:** Myung-Guk Han

**Date:** May 6, 2020

**Answer:** “*We could not estimate the degree of purification because we do not purify and concentrate the virus cultured in cells.*”

**Study 3:** Wan Beom Park et al. “Virus Isolation from the First Patient with SARS-CoV-2 in Korea”, *Journal of Korean Medical Science*, February 24, 2020

**Replying Author:** Wan Beom Park

**Date:** March 19, 2020

**Answer:** “*We did not obtain an electron micrograph showing the degree of purification.*”

**Study 4:** Na Zhu et al., “A Novel Coronavirus from Patients with Pneumonia in China”, 2019, *New England Journal of Medicine*, February 20, 2020

**Replying Author:** Wenjie Tan

**Date:** March 18, 2020

**Answer:** “*[We show] an image of sedimented virus particles, not purified ones.*”

For more read the article [here](#).