

Medical Scandal of the Decade Erupts as Lancet and NEJM Both Retract Studies Finding Hydroxychloroquine Deadly and Ineffective

At 3:15 pm on June 4, I got a text from my friend Josh in Los Angeles that stopped me in my tracks.

The text read: "The fake Lancet Hydroxychloroquine study has been retracted."


I called Josh. "Are you serious?"

He'd already texted me [the retraction](#), but still I could barely believe it. Turns out NEJM had also retracted. This was huge.

Dr. James Todaro, who runs a website, MedicineUncensored, which publishes the results of HCQ studies, tweeted yesterday:

"This is exploding into one of the most twisted and unbelievable medical scandals of the decade." Todaro (and social media "sleuths") were the first to expose the truth, in late May on his site:



James Todaro, MD  @JamesTodaroMD · Jun 4, 2020
BOOM. Lancet study on hydroxychloroquine retracted.



Published study existed for only 13 days.

Did Twitter peer-review result in the quickest retraction ever for a study of this magnitude? [#LancetGate](#) twitter.com/thelancet/stat...

The Lancet  @TheLancet

Today, three of the authors have retracted "Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis" Read the Retraction notice and statement from The Lancet hubs.ly/H0r7gh50

Comment

Retraction—Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis



After publication of our Lancet Article,¹ several concerns were raised with respect to the veracity of the data and analyses conducted by Surgisphere Corporation and its founder and our co-author, Sapan Desai, in our publication. We launched an independent third-party peer review of Surgisphere with the consent of Sapan Desai to evaluate the origination of the database

We all entered this collaboration to contribute in good faith and at a time of great need during the COVID-19 pandemic. We deeply apologise to you, the editors, and the journal readership for any embarrassment or inconvenience that this may have caused.

Published Online
June 4, 2020
[https://doi.org/10.1016/S0140-6736\(20\)31324-6](https://doi.org/10.1016/S0140-6736(20)31324-6)

MMR reports personal fees from Abbott, Medtronic, Janssen, BMS.



James Todaro, MD
@JamesTodaroMD

First detailed investigation into Surgisphere reported here:[medicineuncensored.com/a-study-out-of...](https://medicineuncensored.com/a-study-out-of-...)

A Study Out of Thin Air | MedicineUncensored

A research investigation into Surgisphere and the Lancet study on hydroxychloroquine
medicineuncensored.com

381 12:03 PM - Jun 4, 2020



177 people are talking about this



The Lancet
@TheLancet



Today, three of the authors have retracted "Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis" Read the Retraction notice and statement from The Lancet hubs.ly/H0r7gh50

Comment

Retraction—Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis



After publication of our Lancet Article,¹ several concerns were raised with respect to the veracity of the data and analyses conducted by Surgisphere Corporation and its founder and our co-author, Sapan Desai, in our publication. We launched an independent third-party peer review of Surgisphere with the consent of Sapan Desai to evaluate the origination of the database elements to confirm the completeness of the database.

We all entered this collaboration to contribute in good faith and at a time of great need during the COVID-19 pandemic. We deeply apologise to you, the editors, and the journal readership for any embarrassment or inconvenience that this may have caused.

MMB reports personal fees from Abbott, Medtronic, Janssen, Roivant, Triple Gene, Mesoblast, Baim Institute for Clinical Research, Portola, Bayer.

Published Online
June 4, 2020
<https://doi.org/10.1016/j.soi.2020.06.006>

♥ 10.9K 11:39 AM - Jun 4, 2020



💬 10.2K people are talking about this



UncoverDC reached out to Dr. Todaro to confirm that he was the first to expose the scandal.

“Yes that is correct,” he wrote. “My report was the first to make a detailed investigation into Surgisphere. [The data company.] My report came out May 29.”

6 days later, on June 4, the two most prominent medical journals in the world had both retracted the HCQ papers; Two ships hitting the same iceberg.

It is *very* rare for a major medical journal to retract a paper, especially one that supports an entire orthodoxy. This paper pinned together the very trinity of Covid-19’s economic and political faith: By taking down HCQ, as “dangerous,” it took direct aim also at President Trump.

Based on this research team’s data, in lockstep, the WHO halted global trials for Hydroxychloroquine, (HCQ.) Word went out through controlled global media that HCQ was ineffective and even deadly.

Why? Because the researchers entrusted with collecting and interpreting the data concluded that HCQ a) did not work and b) was associated with *increased deaths*.

The paper, numbingly titled: “Hydroxychloroquine or Chloroquine with or without a Macrolide for treatment of Covid-19: a multinational registry analysis” was published online on May 22, 2020, and it claimed to draw on cohorts of a staggering 96,000 patients (more than two packed Shea Stadiums) in 671 hospitals worldwide.

The truth now emerging is that the data was never vetted, either by the authors of the paper or by the journals that published its conclusions.

The Lancet retraction was requested by *three* of the study's authors: Mandeep Mehra, Frank Ruschitzka, and Amit Patel, and read in part: "After publication of our *Lancet* Article, several concerns were raised with respect to the veracity of the data and analyses conducted by Surgisphere Corporation and its founder and our co-author, Sapan Desai."

Here is an interview with Desai: <https://www.youtube.com/watch?v=ZVoYZXPUS7w>

The NEJM retraction was signed by all five authors, including Desai. It read:

TO THE EDITOR:

BECAUSE ALL THE AUTHORS WERE NOT GRANTED ACCESS TO THE RAW DATA AND THE RAW DATA COULD NOT BE MADE AVAILABLE TO A THIRD-PARTY AUDITOR, WE ARE UNABLE TO VALIDATE THE PRIMARY DATA SOURCES UNDERLYING OUR ARTICLE, "CARDIOVASCULAR DISEASE, DRUG THERAPY, AND MORTALITY IN COVID-19."¹ WE THEREFORE REQUEST THAT THE ARTICLE BE RETRACTED. WE APOLOGIZE TO THE EDITORS AND TO READERS OF THE *JOURNAL* FOR THE DIFFICULTIES THAT THIS HAS CAUSED.

Mandeep R. Mehra, M.D.

Brigham and Women's Hospital Heart and Vascular Center, Boston, MA

mmehra@bwh.harvard.edu

Sapan S. Desai, M.D., Ph.D.

Surgisphere, Chicago, IL

SreyRam Kuy, M.D., M.H.S.

Baylor College of Medicine, Houston, TX

Timothy D. Henry, M.D.

Christ Hospital, Cincinnati, OH

Amit N. Patel, M.D.

University of Utah, Salt Lake City, UT

Incredibly, after *The Lancet* paper was published, after The WHO stopped all HCQ studies. “Independent peer reviewers” informed the paper’s authors that the private data collection company “Surgisphere,” owned by co-author –Sapan Desai–would not provide the full dataset for analysis. “As such,” they wrote, “our reviewers were not able to conduct an independent and private peer review and therefore notified us of their withdrawal from the peer-review process.”

That’s medical journal Latin for “We published despite having no idea if our data was real.”

The Guardian Newspaper, in addition to Dr. Todaro, actually [did excellent reporting](#) leading to yesterday’s sudden retractions, after their investigation led to findings of potential data fraud. Surgisphere claimed to run “one of the largest and fastest hospital databases in the world,” (a global total of 1200 hospitals) but when *The Guardian* reached out to five hospitals in Australia, they said they had never *heard* of Surgisphere, never mind submitted patient data to them. One red flag was that Surgisphere was reporting that as of April 21 they said there had been 73 deaths in Australia from Covid-19, but there had only been 67, according to data from Johns Hopkins University. Desai, a vascular surgeon based in Chicago, had also been named in at least three malpractice lawsuits, had raised funds for a shady “human augmentation device” that never came to fruition; His company lists only 11 employees, one of whom, *The Guardian* points out, is an X rated model, another, a science fiction writer. And to make matters even more unsettling, Desai’s Wikipedia page has been deleted, and he is stonewalling investigators.

The Guardian quoted Peter Ellis, a data scientist from Nous Group, which does data integration for governments. He said that the Surgisphere database was “...almost certainly a scam.” He said there was no evidence that Surgisphere had *any* analytical software “earlier than a year ago,” and that it would have taken possibly years to achieve data collection and hospital participation on the scale they claimed. The Lancet study was not only questioned by *The Guardian*, but also by 120 doctors, who [penned a protest](#). Soon it emerged on Twitter that Surgisphere was placed in *liquidation* in 2015.

One thing that troubles me is how the authors *requested* the retraction of their own article, from both Lancet and NEJM. Note how both journals stood back as impervious as hospital walls, or parents whose only task is to quietly witness their children’s shameful confession before them. The journals take no responsibility for the utter lack of vetting. Not a word. The authors of the fake study are wearing shame-caps and marched before the reader, while the journal editors stand back. Kind of like Buzzfeed with the “Russian dossier.”

We are seeing the Emperor's naked body. We are seeing that what stands between the world's most prestigious medical journals and the world at large on matters of international life-and-death importance is essentially nothing. They ran with it because it was fashionable. It was the thing to think and say in the era of Covid V. Trump, Covid as the new Russiagate and Impeachment.

But only in the US is the good news about HCQ held hostage by political fervor. It has gotten Covid-19 under control in many countries, including France, South Korea, India, and Turkey.

Here are studies proving the safety and efficacy of HCQ that any honest journalist could have accessed online in seconds:

https://docs.google.com/document/d/1545C_dJWMIAgqeLEsfo2U8Kq5WprDuARXrJI6N1aDjY/preview

<https://www.connexionfrance.com/French-news/French-researcher-in-Marseille-posts-successful-Covid-19-coronavirus-drug-trial-results>

“How do you get so much data that quickly? It's extremely difficult and time consuming to negotiate data sharing agreements with hospitals,” said Dr. Jonathan Fishbein, President of Veracuity, a bio-pharmaceutical safety, informatics and analytics firm based in PA. “That should have set off alarm bells. It would have been an issue to pursue before deciding to publish what seemed to be such a seminal paper.”

“The whole HCQ thing has turned from being a medical thing to a political one. Anybody who is anti Trump will be anti HCQ,” he said in a phone interview. “The real tragedy here is that The WHO acted rapidly on Surgisphere's findings. As a result, there may have been patients who should have received hydroxychloroquine but didn't, and paid with their lives.”

The conflicts of interest are also rather shocking.

The research teams's lead author, Dr. Mehra, is a director at Boston's Bingham & Women's Hospital, credited with funding the study. Both Mehra and The Lancet failed to disclose that the hospital has a “partnership” with Gilead, and is running trials of competing Covid-treatment, Remdesivir, “touted” by Anthony Fauci. Remdesivir costs \$1,000 *per pill*, whereas HCQ's generic price is \$0.64.

The day before *The Lancet* retracted the paper, The WHO announced it would resume trials of HCQ, suddenly discovering that it did not in fact increase the risk of death in patients. Little detail.

How did this disaster come to pass? How did HCQ go from being a 65 year old malaria drug with no issues to being, by April of 2020, the new Trump attackology, in pill form? The media—that's how. Medicine is now utterly weaponized in the all engulfing anti-Trump media-driven pogrom. It happened very fast:


President Trump had come out at more than one press conference, singing the drug's praises, and saying he himself was taking it. The media began its breast-beating right on cue: It was fish tank cleaner. It was deadly. Trump was killing people. Jimmy Kimmel said Trump was “trying to kill himself,” while Neil Cavuto flatly insisted: “This will kill you.”

Chris Cuomo [thundered](#) that the “numbers are black and white, they don't lie.” *Numbers* don't lie, Mr. Cuomo, but research scientists do. And they did.

As soon as Trump backed HCQ, in line with his consistent message that he would rather see a successful treatment than a vaccine, because a vaccine can “destroy a person,” absurd and cartoonish fear mongering around this time tested medication erupted through the mass media, designed to crush the hopes of the world, that HCQ could solve the problem, and we could re-open the world for business. They ignored a vast body of medical evidence going back over half a century proving the drug safe for human use, and years of studies proving it worked against SARS, and months of studies from several countries, proving it was effective both a prophylactic and yes, cure, for Covid-19, *when used with zinc*. The zinc is the thing—the HCQ opens the cellular pathway for the zinc to get into cells.

“Zinc is the bullet. HCQ is the gun. Treat Covid-19 early and live. Reopen the world economy now,”

Dr. Vladimir Zelenko, a strong advocate of HCQ who uses it successfully in his practice, wrote on Twitter.



Dr Vladimir (Zev) Zelenko
@zev_dr

Zinc is the bullet and hydroxychloroquine is the gun.
[@ZelenkoProtocol](#) [@realDonaldTrump](#) [@RudyGiuliani](#)
[@MarkMeadows](#)

5,239 likes 6:03 PM - May 27, 2020

2,816 people are talking about this

The debate about HCQ's safety has always been baseless and fake. It's been used safely for 65 years, and the CDC's website ([CDC.gov](https://www.cdc.gov)) lists it as a medication that can safely be prescribed to "adults and children of all ages."

"CDC has no limits on the use of hydroxychloroquine for the prevention of malaria," the site states.

The only risk the CDC website lists, apart from transient symptoms such as headache, nausea, and itching, is that if you take high doses over many years you have to get your eyes checked as it can lead to a rare eye condition called retinopathy.

But despite the truth being out in the open for all to access, a psy-op of terror and recrimination formed around the drug, along with a "major study," appearing way too quickly, that served to puncture not only the drug's future as a Covid-treatment but also, re-write its entire history, safety profile, and branding. Voila.

There it was—the "large scale study" that proved that Trump was wrong, dangerous, and crazy, and that NIH head Anthony Fauci, was correct to dismiss it, (though he was on record advocating it as safe and effective against SARS.) Fauci was of course the good father, warning us all; Trump was the bad father, raising "false hope" about a "deadly drug." Good father Fauci, was pushing Gilead's anti-viral HIV drug Remdesivir, claiming it reduced recovery times for Covid-19 patients.

Meanwhile, Remdesivir is both proven unsafe and proven unproven. From MedPage Today:

"For Remdesivir, one review in the *American Journal of Emergency Medicine* cited [concern about cardiac arrhythmias](#), but another in *Cardiovascular Research* called [CV effects and toxicities unknown](#)."

Another astonishing line from the same article cites Remdesivir's use in an experimental Ebola study. You will have to read this sentence twice to believe it:

"The only adverse events reported in that trial were deaths, and the only one adjudicated as possibly related to Remdesivir was [one case of hypotension](#) followed rapidly by cardiac arrest."

The side effects for the drug on its lengthy Wikipedia page are hardly reassuring:

"The most common adverse effects in studies of remdesivir for COVID-19 include [respiratory failure](#) and [organ](#) impairment, including [low albumin](#), [low potassium](#), [low count of red blood cells](#), [low count of platelets](#) that help with clotting, and [yellow discoloration of the skin](#).^[12][\[unreliable medical source?\]](#)Other

reported side effects include gastrointestinal distress, elevated [transaminase](#) levels in the blood (liver enzymes), and infusion site reactions.[\[3\]](#)

Why does Anthony Fauci think Remdesivir is safer than HCQ? Why does he have a job at all, protecting “public health” when he thinks we should all be taking a drug that is associated with liver failure and heart attacks, as most anti-HIV drugs are? I’m glad Trump has not spoken to him in two weeks. Make it two months. I feel safer each day POTUS does not speak to Fauci.

The truth of HCQ, ironically, were captured in the NYT Magazine’s cover story on famous French microbiologist Didier Raoult, which caught my eye when it was published a month ago. The “dek” which sums up the zeitgeist perfectly, reads: “He Was A Science Star. Then He Promoted A Questionable Cure For Covid-19: The man behind Trump’s favorite unproven treatment has made a great career assailing orthodoxy. His claim of a 100 percent cure rate shocked scientists around the world.”

For the record, and as the article concedes, Raoult’s star has only brightened after his HCQ successes. His face is on coffee cups, in France. Raoult has won every major science award in France, is the most cited microbiologist in Europe, and the 7th most cited worldwide.

From the [NYT Magazine feature](#), by Scott Sayare:




“Raoult, who founded and directs the research hospital known as the Institut Hospitalo-Universitaire Méditerranée Infection, or IHU, has made a great career assailing orthodoxy, in both word and practice.

“There’s nothing I like more than blowing up a theory that’s been so nicely established,” he once said. He has a reputation for bluster but also for a certain creativity. He looks where no one else cares to, with methods no one else is using, and finds things. In just the past 10 years, he has helped identify nearly 500 novel species of human-borne bacteria, about one-fifth of all those named and described. Until recently, he was perhaps best known as the discoverer of the first giant virus, a microbe that, [in his opinion](#), suggests that viruses ought to be considered a fourth and separate domain of living things. The discovery helped win him the Grand Prix Inserm, one of France’s top scientific prizes. It also led him to believe that the tree of life suggested by Darwinian evolution is “entirely false,” he told me, and that Darwin himself “wrote nothing but inanities.” He detests consensus and comity; he believes that science, and life, ought to be a fight.

It is in this spirit that, over the objections of his peers, and no doubt because of them, too, he has promoted a combination of Hydroxychloroquine, an antimalarial drug, and Azithromycin, a common antibiotic, as a remedy for Covid-19. He has taken to declaring, “We know how to cure the disease.” Trump was not the only one eager to embrace this possibility.”

Twitter, last night, raged at *The Lancet*, NEJM, WHO and Fauci.

Indy Jones tweeted: "Willful fraud...someone needs to be prosecuted for this."

 **The Lancet**  @TheLancet · Jun 4, 2020 

Today, three of the authors have retracted "Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis" Read the Retraction notice and statement from The Lancet hubs.ly/H0r7gh50

Comment 

Retraction—Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis



After publication of our Lancet Article,¹ several concerns were raised with respect to the veracity of the data and analyses conducted by Surgisphere Corporation and its founder and our co-author, Sapan Desai, in our publication. We launched an independent third-party peer review of Surgisphere with the consent of Sapan Desai to evaluate the origination of the database elements, to confirm the completeness of the database, and to replicate the analyses presented in the paper.

Our independent peer reviewers informed us that Surgisphere would not transfer the full dataset, client contracts, and the full ISO audit report to their servers for analysis as such transfer would violate client agreements and confidentiality requirements. As such, our reviewers were not able to conduct an independent and private peer review and therefore notified us of their withdrawal from the peer-review process.

We always aspire to perform our research in accordance with the highest ethical and professional guidelines. We can never forget the responsibility we have as researchers to scrupulously ensure that we rely on data sources that adhere to our high standards. Based on this development, we can no longer vouch for the veracity of the primary data sources. Due to this unfortunate development, the authors request that the paper be retracted.

We all entered this collaboration to contribute in good faith and at a time of great need during the COVID-19 pandemic. We deeply apologise to you, the editors, and the journal readership for any embarrassment or inconvenience that this may have caused.

MRM reports personal fees from Abbott, Medtronic, Janssen, Roivant, Triple Gene, Mesoblast, Baim Institute for Clinical Research, Portola, Bayer, NupulseCV, FineHeart, and Leviticus. FR has been paid for time spent as a committee member for clinical trials, advisory boards, other forms of consulting, and lectures or presentations; these payments were made directly to the University of Zurich and no personal payments were received in relation to these trials or other activities since 2018. Before 2018 FR reports grants and personal fees from SJM/Abbott, grants and personal fees from Servier, personal fees from Zoll, personal fees from AstraZeneca, personal fees from Sanofi, grants and personal fees from Novartis, personal fees from Amgen, personal fees from BMS, personal fees from Pfizer, personal fees from Fresenius, personal fees from Vifor, personal fees from Roche, grants and personal fees from Bayer, personal fees from Cardioentis, personal fees from Boehringer Ingelheim, other from Heartware, and grants from Mars. ANP declares no competing interests.

*Mandeep R Mehra, Frank Ruschitzka, Amit N Patel
mmehra@bwh.harvard.edu

Brigham and Women's Hospital Heart and Vascular Center and Harvard Medical School, Boston, MA 02115, USA (MRM); University Heart Center, University Hospital Zurich, Zurich, Switzerland (FR); Department of Biomedical Engineering, University of Utah, Salt Lake City, UT, USA (ANP); and HCA Research Institute, Nashville, TN, USA (ANP)

¹ Mehra MR, Desai SS, Ruschitzka F, Patel AN. Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis. Lancet 2020; published online May 22. [https://doi.org/10.1016/S0140-6736\(20\)31180-6](https://doi.org/10.1016/S0140-6736(20)31180-6).

Published Online
June 4, 2020
[https://doi.org/10.1016/S0140-6736\(20\)31324-6](https://doi.org/10.1016/S0140-6736(20)31324-6)

 **Indy Jones**
@indy_jones3

Willful Fraud... Someone needs to be prosecuted for this  

We all entered this collaboration to contribute in good faith and at a time of great need during the COVID-19 pandemic. We deeply apologise to you, the editors, and the journal readership for any embarrassment or inconvenience that this may have caused.

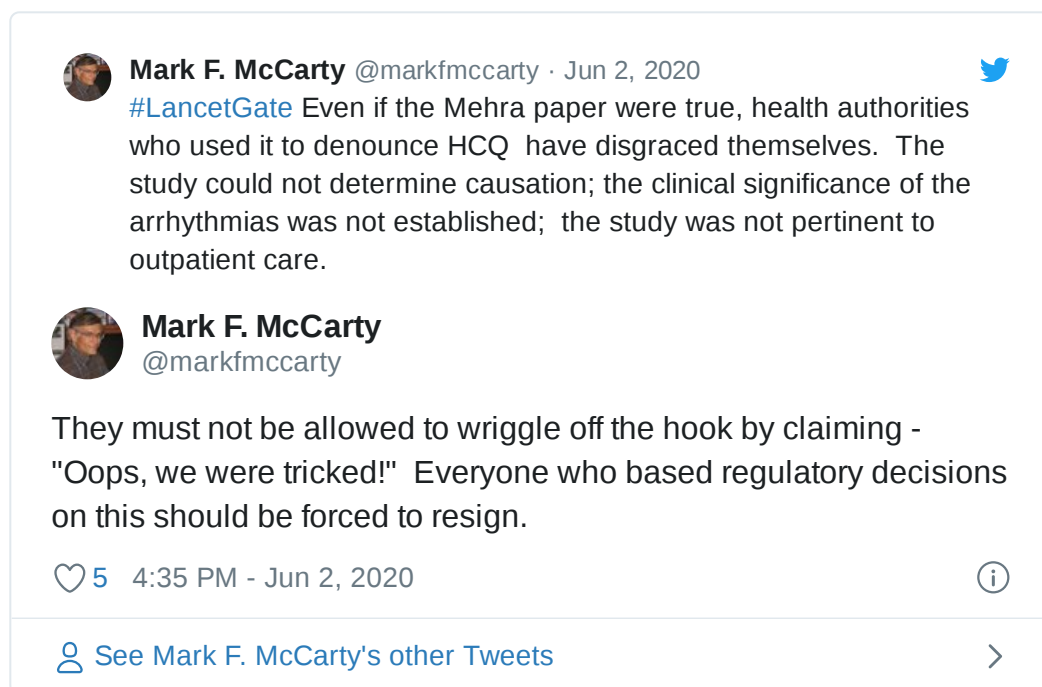
 389 12:02 PM - Jun 4, 2020



89 people are talking about this

Mark F. McCarty wrote: “The people who have died, or will die, because of the idiotic and craven over-reaction of certain health authorities to this fraudulent report, likely consider the situation more than “an embarrassment or inconvenience.”

He also tweeted:



The screenshot shows a tweet from Mark F. McCarty (@markfmccarty) dated June 2, 2020. The tweet text reads: "#LancetGate Even if the Mehra paper were true, health authorities who used it to denounce HCQ have disgraced themselves. The study could not determine causation; the clinical significance of the arrhythmias was not established; the study was not pertinent to outpatient care." Below the tweet, there is a reply from the same user: "They must not be allowed to wriggle off the hook by claiming - 'Oops, we were tricked!' Everyone who based regulatory decisions on this should be forced to resign." The tweet has 5 likes and was posted at 4:35 PM on June 2, 2020. At the bottom of the screenshot, there is a link to "See Mark F. McCarty's other Tweets".

“You have lost all credibility. The Lancet is turning into political propaganda,” wrote Ben Golan.

“This is a disgrace,” wrote Woman in Science. “The obscene power of Big Pharma...”

“Mass Murder,” wrote Frente Civico.

“RIP # The Lancet” wrote Cybertempus.

“How long does it take,” wondered Stephen W. Shipman, “for people to understand that Fauci is a Deep State tool?”

Subhash Kak





Fauci changed policy on #HCQ based on an apparently fraudulent paper published in @TheLancet . That kind of bad judgment means that he should resign.#LancetGate twitter.com/swshipman/stat...

Stephen W. Shipman @swshipman

#FireFauci Fauci told @CNNnewsroom that this Lancet study provided him with the evidence to dismiss the efficacy of HCQ treatments. How long does it take for people to understand that Fauci is a Deep State tool? #Lancetgate [twitter.com/JamesTodaroMD/...](https://twitter.com/JamesTodaroMD/)

186 7:39 AM - Jun 3, 2020



99 people are talking about this



Horton remained blithe and sarcastic in his tweets.

“Resign,” one tweet said.

“Sorry,” Horton tweeted. “The best editors get fired. I’m waiting.”

“How much did The Lancet get paid to publish this paper in the first place?” asked Jeu Decisif.

“Not enough, obviously,” Horton replied.

Renato Lopes tweeted: “I feel ashamed to publish anything in The Lancet..Political agenda ahead of the science. Embarrassed.”



richard horton @richardhorton1 · Jun 4, 2020



It's retracted. Here is a statement from three of the authors.
twitter.com/thelancet/stat...

The Lancet @TheLancet

Today, three of the authors have retracted "Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis" Read the Retraction notice and statement from The Lancet hubs.ly/H0r7gh50

Comment

Retraction—Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis



After publication of our *Lancet* Article,¹ several concerns were raised with respect to the veracity of the data and analyses conducted by Surgisphere Corporation and its founder and our co-author, Sapan Desai, in our publication. We launched an independent third-party peer review of Surgisphere with the consent of Sapan Desai to evaluate the origination of the database elements, to confirm the completeness of the database, and to replicate the analyses presented in the paper.

Our independent peer reviewers informed us that Surgisphere would not transfer the full dataset, client contracts, and the full ISO audit report to their servers for analysis as such transfer would violate client agreements and confidentiality requirements. As such, our reviewers were not able to conduct an independent

We all entered this collaboration to contribute in good faith and at a time of great need during the COVID-19 pandemic. We deeply apologise to you, the editors, and the journal readership for any embarrassment or inconvenience that this may have caused.

MRM reports personal fees from Abbott, Medtronic, Janssen, Rokvant, Triple Gene, Mesoblast, Baim Institute for Clinical Research, Portola, Bayer, NupulseCV, FineHeart, and Leviticus. FR has been paid for time spent as a committee member for clinical trials, advisory boards, other forms of consulting, and lectures or presentations; these payments were made directly to the University of Zurich and no personal payments were received in relation to these trials or other activities since 2018. Before 2018 FR reports grants and personal fees from SJM/Abbott, grants and personal fees from Servier, personal fees from Zoll, personal fees from AstraZeneca, personal fees from Sanofi, grants and personal fees from Novartis, personal fees from Amgen, personal fees from BMS, personal fees from Pfizer, personal fees from Fresenius, personal fees from Vifor, personal fees from Roche, grants and personal fees from Bayer, personal fees from Cardioerentis, personal fees from Boehringer

Published Online
June 4, 2020
[https://doi.org/10.1016/j.s0140-6736\(20\)31324-6](https://doi.org/10.1016/j.s0140-6736(20)31324-6)



Renato Lopes

@renatopllopes

I feel ashamed to publish anything in The Lancet and NEJM from now. The reputation and integrity of two magazines and their editors are in check. Politically biased and no qualified to peer review a study. Political agenda ahead of the science. Embarrassed.

94 1:44 PM - Jun 4, 2020



23 people are talking about this



“Ah, we’ll miss you,” Horton tweeted back.

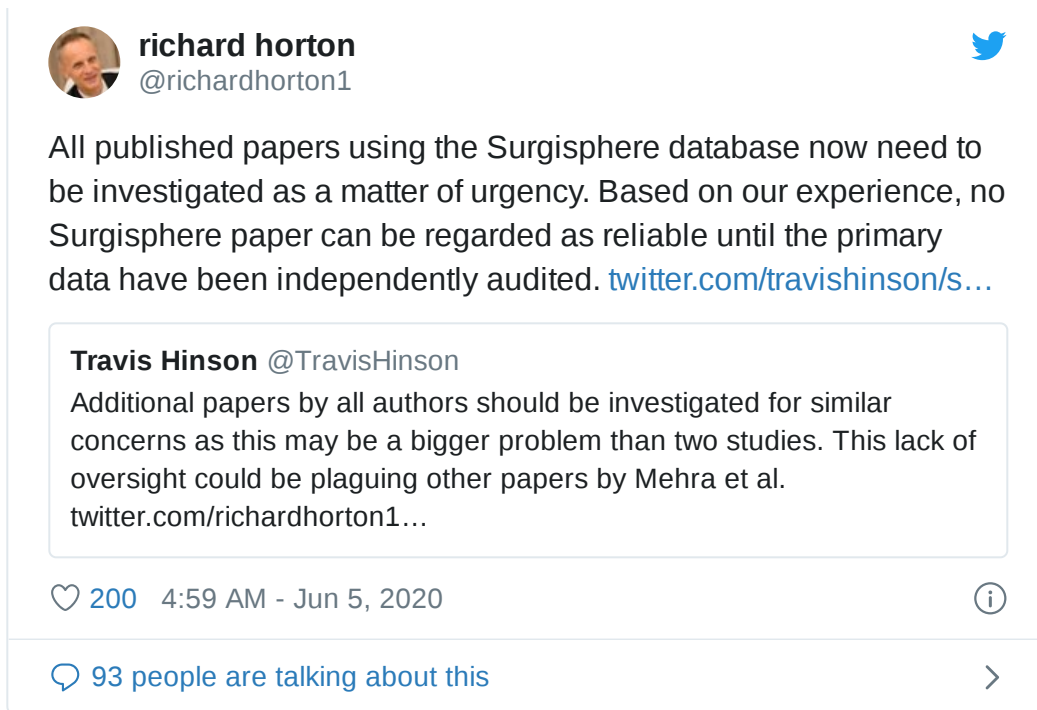
I asked Andrew Wakefield, famously persecuted after a 1998 paper he co-authored on the MMR vaccine was retracted from *The Lancet*, for comment.

He texted:

“Horton confuses honest science such as my 1998 Lancet paper with allegedly corrupt science such as that on Hydroxychloroquine. Both instances serve to advance the vaccine industry narrative.”

By Friday morning, Horton was sounding more contrite. He tweeted:

“All published papers using the Surgisphere database now need to be investigated as a matter of urgency. Based on our experience, no Surgisphere paper can be regarded as reliable until the primary data have been independently audited.”



A screenshot of a Twitter post. At the top left is a circular profile picture of Richard Horton, followed by his name "richard horton" and handle "@richardhorton1". To the right is a blue Twitter bird icon. The main text of the tweet reads: "All published papers using the Surgisphere database now need to be investigated as a matter of urgency. Based on our experience, no Surgisphere paper can be regarded as reliable until the primary data have been independently audited. [twitter.com/travishinson/s...](#)". Below this is a quote from Travis Hinson (@TravisHinson): "Additional papers by all authors should be investigated for similar concerns as this may be a bigger problem than two studies. This lack of oversight could be plaguing other papers by Mehra et al. [twitter.com/richardhorton1...](#)". At the bottom of the tweet, it shows "200" likes and the time "4:59 AM - Jun 5, 2020". Below the tweet is a blue bar indicating "93 people are talking about this" with a right-pointing arrow.

Asked to place the scandal in context, Dr. Todaro told UnCoverDc:

“This medical scandal directly embarrassed the world’s most prestigious medical institutions including Harvard, The Lancet and the World Health Organization as well as countless government officials, including Dr. Fauci, who all touted the study’s findings.”

Meanwhile, how many have, as Dr. Fishbein said, “paid with their lives?” How many will, at the very least, pay with their jobs?

Celia Farber is half Swedish, raised there, so she knows “socialism” from the inside. She has focused her writings on freedom and tyranny, with an early focus on the pharmaceutical industry and media abuses on human liberties. She is the recipient of the Semmelweis International Society Clean Hands Award For Investigative Journalism, and the author of “Serious Adverse Events: An Uncensored History of AIDS”

Twitter: [@CeliaFarber](#)

Web: www.truthbarrier.com

FB: [Celia Ingrid Farber](#)