

„Coronavirus Vaccine: Billions of profits despite serious health risks?“ – Interview with Del Bigtree

**In the current corona crisis, there is no longer any scientific consensus on how to successfully cure corona patients. But does this justify the eager wait for a corona virus vaccine? What health risks could be associated with this? Do quarantine measures benefit society and the development of a necessary herd immunity? These and other questions are addressed by film producer Del Bigtree in this Kla.TV interview. But one thing is certain: Whoever manages to make their vaccine available globally this year can earn more than 100 billion dollars.**

Kla: Well we're delighted to have Del Bigtree on today. I don't think anybody has done a more extensive job and a more honest job of reporting on the corona crisis. So, good afternoon Del and thank you for coming on.
Bigtree: Thank you for having me on. I appreciate it.
Kla: Let's start this way. Let's do this. And we can get into the details a little later, but, let's say that I'm Joe Average, and I wonder if you could give me your one-minute elevator pitch: Concerning the coronavirus, why should I be skeptical of the experts?
Big: Well, first of all, I wouldn't say you have to be skeptical of the experts. I think what you have to decide is what experts you're going to listen to. We actually find ourselves in a moment right now, in the world, where we do not have scientific consensus any longer on what the Coronavirus is, how to treat the coronavirus, or whether or not quarantine or lockdowns, whatever you want to call them, are benefitting society or hurting society, or even hurting this illness at all.
There is now a massive divide across the world between the illuminati, the very top level scientists, whether they're mathematicians, or virologists, schools against schools, you got Cambridge and Oxford, I think very clearly coming forward, many of their scientists, they're saying that the lockdown was the wrong approach to this. You know, you've got the imperial model which was set out of the UK, that came crumbling down just about three weeks ago and they dropped from an expected or projected death rate of 500,000 deaths down to 20,000 deaths. And then of course you have mainstream media, which isn't really telling anyone those stories. We don't hear about the fact that the mainstream, or the biggest modeler around coronavirus was off by about 2,400%. That doesn't make the news.
So you have multiple issues now, where you're starting to see, I think, a problem with the amount of funding that is going into government agencies, the pharmaceutical industries and amount of funding going into your media from the pharmaceutical industries so we are getting really a one-sided story but there are definitively two sides. It's not, you know, Del Bigtree and the Highwire against the experts; I'm bringing on experts every single week. We've been showing you top scientists like Dr. Peter Gøtzsche, who's the founding father, or member of the Cochrane collaboration, one of the most trusted scientific bodies in the world, came out and said very early on, this looks like an ordinary coronavirus, there is nothing that tells us any differently, and to be going through draconian measures, be careful when these numbers are low, when they come in low to where we all knew they'd be, they're going to tell you they were low because of the draconian measures and we will never get out from under them. That's just one of, you know, just so many scientists now speaking out. So, I think the real issue is, who are we going to listen to, and why are our governments, you know, when I look at Germany, when we look at the United States of America, why is it just Anthony Fauci and Deborah Birx that are doing all the decision making for this nation? Why do we not have opposing views. What's happening in the back room?
You know I had a great mathemetician, a biostatistician, who'd been with the Rockefeller Institute for many many years on my show last week, Knut Wittkowski. And, I mean, the guy's been building models. He says “I don't know of a single mathematician that talks about this issue.”
Why are there no mathematicians really crunching the numbers? He said I think if you did you'd see we need to open up and get, especially our kids back in school and get people back to work, so, you know, those are the discussions and how do we go about that now, that's the real question, how do we move forward.
Kla: Yes, and speaking of draconian measures and deaths, what about this false comparison, when people get angry at us when we are questioning the official story, they come up with this false comparison that well, you know, we're not going to compare deaths with money, when we talk about closing down the economy, right? But you could also ask this, well, if you do close down the economy and you do have these draconian measures, you could end up with a situation where there are actually more deaths, with a quarantine, with a loss of jobs, everything that comes with shutting things down. Deaths versus deaths- why aren't they looking at that?
Bigtree: Well because it doesn't fit the narrative. You know, you're right, they try to say, “You want to compare deaths to making money.” Here in America we have really good science; you know, dozens of studies over the last several years that have looked at the death rate on unemployment. And what they say in America, based on our population, is for every 1 percent of unemployment, the death rate is about 58,000 people, or your mortality goes up by 58,000 people. Here in America we believe that these draconian measure are already leading to what's expected to be about a 20% unemployment rate- it could be as high as 30%. And we're talking if we stop it right now. When you listen to people that are saying, we're going to wait 18 months for whenever this, what I call the unicorn, this idea of a vaccine, I have a real problem with government officials, people we elected, that their plan is based on something that does not exist as we speak. There is no vaccine. This is one of the most difficult vaccines ever attempted, whether or not we want to get into that or not, but you do not make policy for the world and nation based on hope, wishful thinking and dreams. That is not what science is based on. And when science is telling us, we're supposed to hope and dream for something their working on right now...There's a term my dad used to use, a colloquialism which is, “A bird in the hand is better than two in the bush. I don't know if you say that in Germany but essentially, don't give up what you already have in your hand for the dream of what you could possibly get in your future.
The world is based on what we have. We should be looking at the drugs we have in our arsenal right now- amazing studies and things going on with cloroquine, which is an anti-malarial drug, in combination with either zinc or erythromycin. You know we're also talking about blood product from people who have already become immune. But here's the problem, and this is what, you know, you've got to turn off your television. We've got to be logical about what we're hearing. What I'm calling the plan that Germany, and America and the UK. We are on a road to nowhere right now. A road to nowhere is the plan. So let's say we all lock down, long enough, the sun is shining really bright, and the virus is somehow unable to stay alive out in the sunshine, right? Great! Oh, we won! We're back to work! It's going to last like two or three months. Because as soon as the fall comes, just like they're saying, we did not achieve herd immunity. We achieved absolutely nothing. We hid, and now it's waiting for us. And so, what, are we going to lock down again in the fall? Are we going to keep locking down? Our economies cannot handle that. We will not be able to put food on the table. You better start selling your cars and your extra television set. Oh, and guess what? If we keep printing money, how are you going to buy your cell phone in the future? How many people are going to be out of work? How many people won't be able to afford their medication? You know, I mean the list goes on and on and on.
We're already seeing domestic violence through the roof. We're starting to watch more, you know, alcoholism, and abuse. I mean all these things, it's unfortunate that they're a part of our society, but what happens when that gets out of control? What happens when people start smashing in the window of the grocery store because they didn't get whatever check they were promised, or they blew through it so quickly whether or not they spent it on good things like food, or went out and got drunk. Either way, those masses that were out there were placated by, you know, entry-level jobs that kept them busy; we're taking all of that away- for what? For a road to nowhere. The only way out of this, is that we have to have population-wide immunity, just like we've had with the flu and coronavirus every year of our lives, and before, you know, since the dawn of man with every illness that's out there. There is nothing different with this. And when we look at the death rate, we gotta ask ourselves, is it really so much more deadly, that we're taking on that greater risk. The study that just came out of Germany last week. They're now saying they believe the death rate is 0.037%.
kla: Higher than average.
Bigtree: So about 1.3 of 1% areat risk of dying if they get the illness. And we're seriously saying we're gonna destroy the world for that?
kla: Yes, yes. And I've also seen the Italian figures on comorbidity- the percentages of people who are dying of 1, 2 or even 3 possibly fatal diseases. It's off the charts. Speaking of cloroquine, I picked up a real interesting quote from Bill Gates the other day. He did a Reddit, ask me anything. I don't know if you saw that.
Bigtree; I didn't.
kla: But I wonder if I might read it to you.
Bigtree: Sure.
kla: This is pretty recently. And this isn't one of these, oh, gotcha Bill Gates. Here's what he said in a Ted conference ten years ago. This is something he decided to put on his webpage. So they're asking him about about his opinion of cloroquine and he says, “There are a lot of therapeutic drugs being examined. This is one of many, but it's not proven. If it works, we'll need to make sure the finite supplies are held for the patients who need it most. We have a study going on to figure this out. We also have a screening effort to look at all the ideas for therapeutics, because the number being proposed is very large and only the most promising should be tried in patients. China was testing some things, but now they have so few cases that the testing needs to move to other locations,” Gates said.
And my response would be,
number 1: Aren't the doctors who are reporting near 100% levels of cloroquine success- Doesn't that constitute some kind of proof? What proof does he want? And what is more promising than these doctors' reports?
number 2: If it works, and it seems to, why talk about finite supplies when you should be talking about ramping up production? Like all the money he's willing to put into vaccines.
and 3: This one seems obvious to me. If China has so few cases now, while we're looking for new locations for testing we might ask, “What have they done to reduce the cases?”
Bigtree: Right. Those are all great questions and you're right. All around the world we've had amazing testing done. Dr. Didier Raoult from France really started this discussion. We've talked about it on our show- almost two months ago now, where they have run studies in China using cloroquine. He ran studies then about a month ago with 80 people. I believe he's just finished a study with over a thousand people. We have a doctor in New York that's treated I think, nearly 800 people successfully. And more and more around the world saying this really works. And people coming forward saying, “I was going to die. They were about to put me on a respirator, and they gave me cloroquine, and within eight hours I felt incredibly better and was discharged the next day.”
Now, that may be anecdotal. Certainly it is, but look at on the flip side. We're talking about thousands of people in different spaces, you know, different approaches around the world, and yet we're supposed to have hope in vaccine trials that currently have 45 people in them. They're going to tell us it was proven safe because 45 people were tested? So you see, you know, you see the discrepancy in the approach and the concern about safety, right? You know, on the one hand we all have the dream for this mythological product, and we shouldn't put too much hope in this thing that seems to be working, you know, at an above 90% level all around the world. So, I mean, then you gotta start wondering, you know, what's behind? This is what journalists do. What I say is, that makes no sense. I've never seen a drug that, you know, the media didn't like, but then when you look at cloroquine, it's a six dollar a pill generic drug. It's not patented any longer. It's past its patent. Nobody can make any real money on it. So then you have this issue that why aren't they supporting it?
And then when we look at vaccines, and this is really where, you know, I'm trying clarify some things. People say, Del Bigtree is anti-vaccine. The truth is, is, I want to very clear. I believe that products made by the pharmaceutical industry should be designed for the people that need them. The people that are at risk. In this case, it's less than 1% of people that will die. They're over the age of 55 years old and as you pointed out, they have other co-morbidities. Usually heart disease, diabetes, asthma, COPD (chronic obstructive pulmonary disease) are the top contenders. And most of these people were going to die this year anyway. They might have gotten a cold. It might have been the flu. Or they might have just succumbed to the fact that their illnesses had gotten so severe. All of those will be listed now as covid deaths to bolster that number. But no matter what, here's why vaccines bother me. Bill Gates is not pushing to get a vaccine for that 0.6% as China's model shows, or Germany 0.3%. Nobody wants that money. That's a few million dollars, OK? They don't want a cloroquine fix. They don't want a drug because think about it. If you actually..and why wouldn't we be excited...and by the way they were using cloroquine against SARS successfully- studies a decade ago showed that this worked. Why aren't they excited about it? Because think about it. We all go back to work the second that there's a cure for anyone that's having severe complications which is seriously in the 3% or less of people. Everyone else is going to have a common cold. So the rest of us don't need any products at all. If we could just take care of those that are honestly in high-risk categories, especially about 0.37%. Why don't we dream about one of these products if it cures them and keeps them from dying, we're all back to work! This is game over. And yet there's like an allergy to the idea that that could be possible.
They would rather dream about a distant vaccine, and say we're all waiting for the vaccine. We're not going to get our lives back to normal until the vaccine. So let's do the math, shall we. You know, 0.67%. Less than 1% of the population. If you have a drug that cures it. And by the way, I don't mean to rule out vitamin C. Vitamin C intraveneously has been extremely effective in studies all around the world too.
kla: Did you see...........

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