

Journal Neurocirugia, PMID 18500410: "Our study revealed a decrease in oxygen saturation of arterial pulsations".

New England Journal of Medicine, PMID 32237672: "We know that wearing a mask outside health care facilities offers little, if any, protection from infection.

American journal of infection control, PMID 19216002: "Face mask use in healthcare workers has not been demonstrated to provide benefit in terms of cold symptoms or getting colds".

Annals of internal medicine: "..both surgical and cloth masks seem to be ineffective in preventing the dissemination of Sars-Cov 2 from the coughs of patients with Covid-19 to the environmental and external mask surface".

British medical journal, PMID 25903751: ".. laboratory confirmed respiratory virus were significantly higher in the cloth masks group... penetration of cloth masks by particles was almost 97%. This study is the first RCT of cloth masks, and the results caution against the use of cloth masks...Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection".

Medical news today on Respiratory acidosis: "Respiratory acidosis develops when air inhaled into and exhaled from the lungs does not get adequately exchanged between the carbon dioxide from the body and oxygen from the air".

Journal headache, PMID 32232837: "Most healthcare workers develop de novo PPE such as N95 face masks associated headaches or exacerbation of their pre-existing headache disorders".

Journal of influenza and other respiratory virus, PMID 22188875: "None of the studies established a conclusive relationship between mask/respirator use and protection against Influenza infection".

Journal of Life and Environmental sciences, PMID 31289698: "This study showed that the filtering efficiency of cloth face masks were relatively lower, and washing and drying practices deteriorated the efficiency."

Journal of epidemiology and infection, PMID 20092668: "There is little evidence to support the effectiveness of face masks to reduce the risk of infection".

Journal of American medical association: "Face masks should not be worn by healthy individuals to protect themselves from acquiring respiratory infection because there is no evidence to suggest that face masks worn by healthy individuals are effective in preventing people from becoming ill".

University of Edinburgh: "...surgical, hand made masks and face shields, generate significant leakage jets that have the potential to disperse virus-laden fluid particles by several meters...makes the direction of these jets difficult to be predicted...they all showed an intense backward jet for heavy breathing and coughing conditions...be aware of this jet, to avoid a false sense of security that may arise when standing to the side of, or behind a person wearing a surgical, handmade mask or shield".

University of New South Wales In 2015, conducted a study of cloth masks, titled: Cloth masks, dangerous to your health? Concluding: "The widespread use of cloth masks by healthcare workers might actually put them at an increased risk of respiratory illness and viral infection, their global use should be discouraged. UNSW study provides. "

Nonpharmaceutical measures for Pandemic influenza in Nonhealthcare settings- "...we found no significant reduction in influenza transmission with the use of face masks".

Medical Care minister, Tamara van Ark, stated: "..there is no evidence of medical effect of wearing face masks..".

WHO states: "If you do not have any respiratory symptoms....you do not need to wear a medical mask..". (bit.ly/2QN3QOp)

Via Zerohedge.com: Sweden's PM stated masks offer a "False sense of security".

A CDC study based off 14 clinical trials showed face masks, do not work.

(https://wwwnc.cdc.gov/eid/article26/5/19-0994_article)

(<http://tapnewswire.com/2020/07/cdc-study-based-on-14-clinical-trials-shows-face-masks-dont-work>)

After saying that Medical staff should wear N95 masks because they are at higher risk of "getting" (SARS), they say "...dizziness, headache, and short of breath are commonly experienced by the medical staff wearing N95 masks. The ability to make correct decisions may be hampered too".

(<https://clinicaltrials.gov/ct2/show/NCT00173017>)

"Non Medical masks may reduce transmission from individuals who are shedding the virus. 24 However the extent to this benefit is unknown (especially in children) And would only be potentially beneficial if done properly. In fact, if worn incorrectly, it could lead to increased risk of infection and it is not practical for a child to wear a mask properly for the duration of the school day"

(<https://www.sickkids.ca/PDFs/About-SickKids/81407-COVID19-Recommendations-fir-School-Reopening-Sickkids.pdf>) {Notice the use of 'May' or 'Potentially' due to the lack of evidence they protect you, any "evidence" that's provided claiming they do usually offers statistically insignificant difference in infection rate, thereby the unsure language. The evidence suggesting Masks increase your risk, don't protect you at all from Respiratory Pathogens and decrease your Overall Immune function heavily outweighs any "Evidence" for the contrary}. Let's keep going.

PMID 15340662: "70% of the patients showed a reduction in partial pressure of oxygen and 19% developed various degrees of hypoxemia".

PMID 23514282: ..."phonic respiration and low work rates significantly higher levels of Co2 rebreathing.."

PMID 4202234: High bacterial contamination on the outside area of the used masks was demonstrated, and it showed a significant correlation with microbial air quality of working wards.

<https://pubmed.ncbi.nlm.nih.gov/25337311/>

PMID 7087880: ".n95 and surgical facemasks can induce significantly different temperatures and humidity in the microclimates of face masks, which have profound influences on heart rate and thermal stress..."

PMID 30035033: "Surgical masks as source of Bacterial contamination during operative procedures....surgeons should change the mask after each operation, especially those beyond two hours"

PMID 6409147: "Infection rate was 4.7% with masks and 3.5% without the masks and there was no increase in surgical site infections when masks were not worn".

PMID 18331781: "Chronic Hypoxia-Hypercapnia influences cognitive function"

"Hypercapnia status has been shown to predict mild cognitive impairment"

(https://www.nature.com/articles/s41598-018-35797-3?fbclid=IwAR0oiB6FN7ZB1oJAUroWnBfDZPG5vfb3qsxoESd7B1upF6h61Ac-VHu_izo)

"Chronic hypoxia-Hypercapnia has been seen as a cause of cognitive impairment"

<https://www.sciencedirect.com/science/article/abs/pii/S0306987708000455/?fbclid=IwAR1BlOucacu3FEcpFEGoK>

Shortness of breath and lightheadedness, Dr Rashmi Byakodi states: "These symptoms are seen due to increases in Co2 levels in your body... breathing over exhaled air that turns into carbon dioxide might make you feel dizzy".

Headaches: Dr Leann says: "Headaches may occur due to the band fitting around the head all day, stress from breathing through the mask, or slight changes in oxygen and carbon dioxide levels in the blood".

Acne, Dr Barsky states: "Re-wearing unwashed reusable masks or re-wearing disposable masks can lead to inhalation of dust, pollen, bacteria and other particle contaminants trapped within the mask material...they can clog your pores and cause breakouts, primarily around your chin".

Chronic Dermatitis, Dr Sanul Corrielus says: "some people who have sensitive skin can break out and develop some form of dermatitis as a result of the repeated exposure". {From chemicals of make fibers}.

Weak Immune system, Dr Esteban Kosak says: "There are studies indicating that low oxygen levels in the tissues (hypoxia) can suppress some aspects of the immune response...prolonged denial of oxygen in the body can cripple the ability of our Immune system..".

Skin wrinkles, Dr Visislav Tobkovic states that prolonged face mask use can cause "new patterns of sling wrinkling".

Chronic respiratory conditions, Dr Corrielus states: "The exposure {to nonwoven fabric}, for some people can trigger an asthma-like inflammatory response in the lungs".

Europe's Top health officials says masks are not helpful in beating Covid 19. Henning Bundgaard, chief physician at Denmark's Rigshospitale, via Bloomberg News stated: "... countries recommending face masks haven't made their decisions based on new studies".

U.S Surgeon general stated: "Seriously, stop buying masks, they are NOT effective in preventing the general public from catching Coronavirus...".

Optometrist Robert Zoellner, Clayton Clark, Dr. James Meehan and Tulsa based businesses are suing Tulsa officials for mandatory mask mandates. Clayton Clark stated: "On the OSHA website it states that employers shouldn't make employees work in an environment where they have less than a 19.5% oxygen level...and the mandated masks cause employees to dip below a 19.5% oxygen level within 10 seconds of wearing a mask....".

Dr Anthony Fauci stated: "In early March, Dr. Anthony Fauci, a leading voice on the White House Coronavirus Task Force, told "60 Minutes" face masks were not necessary for the general population amid the novel coronavirus outbreak, noting that while masks might make people "feel a little bit better," they don't provide the protection folks believe they do and might create "unintended consequences."

(<https://youtu.be/oLNBw7XCM4Q>)

Dr. Rashid Butler stated: "When a person is wearing a facemask, they are breathing their own carbon dioxide, becoming hypoxic, they are reducing oxygen, stressing your body out because you have to suck oxygen in...when you do that you are causing the body to go into a 'stress' state....which spikes cortisol, and cortisol, suppresses immune system...which makes you now susceptible to any pathogen, bacteria, virus etc".

(<https://www.instagram.com/tv/CFKwoP8B3D9/?igshid=a578zubmjvha>)

TG Tunevall- "It has never been shown that wearing surgical face masks decreases postoperative wound infections. On the contrary, a 50% decrease has been reported after omitting facemasks"

(<https://pubmed.ncbi.nlm.nih.gov/1853618/>)

USDOL, OSHA: "Cloth masks: Will not protect the wearer against airborne transmissible infectious agents due to loose fit and lack of seal or inadequate filtration. Surgical Masks: Will not protect the wearer against airborne transmissible infectious agents due to loose fit and lack of seal or inadequate filtration."

(<https://www.osha.gov/SLTC/covid-19/covid-19-faq.html>)

CDC: Those who come in close contact with people showing COVID-19 symptoms or someone who has tested positive for the virus can spread the infection whether or not they are wearing masks.

(<https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>)

2008 Report on Surgical mask induced deoxygenation during major surgery, A.Beder of Baskent University: "Considering our findings, pulse rates of the surgeon's increase and SpO₂ decrease after the first hour. This early change in SpO₂ may be either due to the facial mask or the operational stress. Since a very small decrease in saturation at this level, reflects a large decrease in PaO₂, our findings may have a clinical value for the health workers and the surgeons..." "Our study revealed a decrease in the oxygen saturation of arterial pulsations (SpO₂) and a slight increase in pulse rates compared to preoperative values in all surgeon groups. The decrease was more prominent in the surgeons aged over 35" "...Surgical masks may impose some measurable airway resistance, but it seems doubtful if this significantly increases the process of breathing. (It has been proven by now) Although it might have appeared to be likely that hypoxemia results from the increased CO₂ content of the inspired air due to the exhaled CO₂ getting trapped beneath the surgical face mask; there has been no controlled study concerning with the effect of surgical masks on the level of blood oxygenation (There has been now, and it has been proven to decrease Blood oxygenation, keep in mind this study was over a decade ago. This study simply proves, that in 2008, it was well aware masks negatively effect surgeons) In this study we have measured the oxygen saturation of arterial pulsations (SpO₂) by a pulse oximeter and found a statistically significant decrease in the blood O₂ saturation level of the surgeons post operationally, which is not due to prolonged standing or stress.

Coronavirus Particles are 0.06-0.14 microns in size. Influenza is 0.08-0.12 microns. Single use face masks and surgical masks filter particles that are 3 microns or larger. N95 masks filter particles that are 0.30 or larger.

(<https://www.medrxiv.org/content/10.1101/2020.03.29.20046557v2>)

Dr Redfield, CDC Director on C-Span, House Foreign Affairs Subcommittee on Asia, the Pacific and Nonproliferation, was asked "Should you wear a mask if you're healthy"? He answered, "No".

Vision Launch Media reports: 'More than a Dozen Credible Medical Studies prove face masks do not work even in Hospitals!' on August 15, 2020.

(<https://visionlaunch.com/more-than-a-dozen-credible-medical-studies-prove-face-masks-do-not-work-even-in-hospitals/?fbclid=IwAR1CTloX3Ezq6jb89nfNdills8WhyXdwcslKNuEUsdKDq2XuGM6wkOcoXxo>)

Dr Merritt, (Naval Surgeon/Biotech Researcher/Spinal Surgeon) stated: "In my entire medical I've never heard anybody actually believe, that any kind of masks, short if any level 4 containment suit, made a difference to small particle viruses...in fact the CDC themselves published an article in May exactly saying that...you cannot contain influenza with these masks, and that's even larger than this virus....people who are now purporting to, scientifically prove masks work, are either being paid or being played.." She then Cites a conference entitled "Medical Technocracy" in Nevada in her name, that gives scientific evidence regarding these claims.

Effectiveness of Masks and respirators against respiratory Infections in healthcare workers, Clin Infect Dis. Doi 10.1093/cid/cix681, Published August 7, 2017 stated: "Our analysis confirms the effectiveness of medical masks and respirator against SARS, disposable masks, cotton masks or paper masks are not recommended.....single use medical masks are preferable to cloth masks, for which there is no evidence of protection..." (Although, despite this study, many studies contradict the notion, that Medical masks/N95 masks protect you from SARS).

BMJ on April 9, 2015 stated: "The use of reusable cloth masks globally, particularly in Asia, which is an important REGION FOR EMERGING INFECTIONS....there is no clinical research to inform their use and most policies offer no guidance on them.."

(<https://www.ncbi.nlm.nih.gov/pubmed/25858901>)

Dr Judy Mikovits, published a book entitled: "The case against Masks: Ten reasons why Mask use should be limited". The book contains a plethora, of credited Studies defending the very real, scientifically backed claims, that Masks are not healthy nor helpful for human immunity and viral transmission.

(<https://www.google.com/url?sa=t&source=web&rct=j&url=https://www.amazon.com/Case-Against-Masks-Reasons-Limited/dp/1510764275&ved=2ahUKEwio7a6m36zsAhVjg-AKHf4RB8MQFjAAegQIDhAC&usg=AOvVaw2NgMgfReCHRa9U3eEB6zjO>)

The "Symposium with Ron Paul" at the Moses Institute by Tom Woods detailed the correlation of less Covid cases with Areas that had not instituted a mandatory mask mandate. Whereas, the areas that ordered a Mask mandate, saw more Covid 19 cases than those who didn't. The Sources also provide information regarding Mandatory Mask mandates coming at the, Low-Point, of many "outbreaks" throughout the world. And following the Mask mandates, a sudden increase in Covid 19 cases came about.

(<https://youtu.be/mcm8Sc8f66o>) (Source: Our World in Data, Twitter: Yinonw)

Writer, Jordan Davidson, for the Federalist, detailed a Report released by the CDC in September: "A study conducted in the United States in July found that when they compared 154 "case-patients," who tested positive for COVID-19, to a control group of 160 participants from health care facilities who were symptomatic but tested negative, over 70 percent of the case-patients were contaminated with the virus and fell ill despite "always" wearing a mask." (<https://thefederalist.com/2020/10/12/cdc-study-finds-overwhelming-majority-of-people-getting-coronavirus-wore-masks/>)

CDC Study showed: Of Those who got Sick from Covid-19, 70.6%, always wore a mask. Whereas, 3.9% of those who got sick, never wore masks. Constitutional Lawyer, Rocco Galatti, expounded on the point: "...there is a greater risk of contamination from improper mask wearing...than the contaminate without the mask". (<https://t.co/f79gZ6JDzG?amp=1>)

A Pro Mask study, was withdrawn after the Virus spread across the counties that were analyzed by researchers: (<https://www.google.com/amp/s/madisonarealymesupportgroup.com/2020/11/17/pro-mask-study-withdrawn-after-virus-spread-in-counties-analyzed-by-researchers/amp/>)

TL Peters, OSHA Instructor that worked for University of Arlington stated this about Masks: 'The masks are of no value... please don't think you're protecting yourself...and really please don't think you are protecting somebody else'. The man he was interviewed by, stated: ".we are causing more people to become ill with this virus and to become ill with other ailments being accentuated as a result of wearing a mask". TL Peters then says "They are essentially cross-contaminating themselves".

Dr. Roger Hodkinson (CEO/Medical Director, MA/MB, FRCPC, FCAP) Speaking about how, Healthy People, shouldn't be wearing masks. He also expounds on the point, this is the biggest Psychological Operation/Hoax being pushed by Big Pharma, Politicians and the Mainstream media. (<https://youtu.be/YvYzfoMqObg>)

Published Study, Annals of Internal Medicine, November 18, 2020: "...a recommendation to wear a surgical mask when outside the home among others did not reduce, at conventional levels of statistical significance, incident SARS-CoV-2 infection compared with no mask recommendation." (<https://www.acpjournals.org/doi/10.7326/M20-6817>)

Article, Via- Primary Doctor: 'Censorship vs The Science on masks':
(<https://www.primarydoctor.org/censorship-vs-the-scienc-on-masks>)

Article, Via- Primary Doctor: 'Masks are neither effective nor safe':
(<https://www.primarydoctor.org/masks-not-effect>) This Article contains, 42, Credited Studies along with sites, done by Medical Professionals showing Masks "..serve more as instruments of obstruction of normal breathing, rather than as effective barriers to pathogens".

Margareta Brisson, World Renowned Neurologist, Warns Against wearing facemasks. States:
"Oxygen Deprivation Causes Permanent Neurological Damage"
(<https://www.sott.net/article/442455-German-Neurologist-Warns-Against-Wearing-Facemasks-Oxygen-Deprivation-Causes-Permanent-Neurological-Damage>)

A Website entitled 'No masks for kids', is a forum for parents, to detail the effects of mask wearing on their children. (<https://nomasksforkids.com/reports/>)

Articles Entitled: Masks, False Safety and Real dangers Parts 1-3, cover: (Part 1-Friable Mask Particulate and Lung Vulnerability; Part 2- Microbial Challenges and Part 3-Hypoxia, Hypercapnia and Physiological effects). Medical Professionals conducting Studies: Boris Borovoy, Colleen Huber, Maria Crisler and Q Makeeta.

Parts 1-2: (<https://www.primarydoctor.org/public-health>)

Part 3- Twitter of Colleen Huber, NMD, November 19th, 2020, 8:31 AM, Link to Article is provided there.

Article Curated by M.D, Marilyn Singleton, detailing Mask facts and their ineffectiveness Against Covid-19. (<https://aapsonline.org/mask-facts/>)

Dr Tom Cowan breaks down a list of Studies, put together by Author, Arthur Firstenberg, regarding the Efficacies of using masks, specifically in Operating Rooms and Dialysis Centers. He Cites studies that clearly show, there is no Correlation with Mask usage and those being operated on or cared for. On the contrary, it showed Infection rates were higher when masks were used, then without.
(<https://www.bitchute.com/video/SAKBas3BjhZ/>)

Dr Tom Cowan breaks down a list of Studies, coming from the Banned Article written by Denis Rancourt PHD "Masks Don't Work: A review of Science relevant to Covid-19 social policy", (April

2020), showing there is no benefit to our health to wearing masks. He quotes the final studies conclusion "...no randomized controlled study with verified outcomes shows a benefit for healthcare workers or community members in households to wear masks or a respirator, there is no such study, there are no exceptions. Likewise, no study exists that shows a benefit from a broad policy to wear masks in public... furthermore, if there were any benefit to wearing a mask because of the blocking power of droplets and aerosol particles, then there should be more of a benefit from wearing a respirator compared to a surgical mask. Yet, several large Meta-analysis and all the randomized controlled trials, prove that there is no such relative benefit, masks and respirators DO NOT WORK...".

[\(https://archive.org/details/covid-censorship-at-research-gate-2/\)](https://archive.org/details/covid-censorship-at-research-gate-2/)

<https://youtu.be/6vj78TA-xMk>

LTPMN Sports Mask Impact Survey January 4-11: 84% had shortness of breath, 48% Experienced dizziness, 14 kids collapsed, 11 kids needed emergency care, 2,600 responses. Dawn Hillman stated "The Results of the survey are frightening. Governor Tim Walz needs to let our kids play safely."

Author Shawn Stevenson, produced a short documentary Entitled, The Science and History of Masks in Medicine. He states to have worked with experts, reviewing databases of hospitals and Universities and looking over 50 peer reviewed studies. You can find the studies at: themodelhealthshow.com/maskfacts)

Via: Research Square "Corona children studies "Co-Ki": First results of a Germany-wide registry on mouth and nose covering (mask) in children. Impairments were reported by 68%. Irritability at 60%. Headache at 53%. Difficulty concentrating at 50%. Less happiness at 49%. Reluctance to go to school at 44%. Malaise at 42%. Impaired learning at 38% and drowsiness or fatigue at 37%.

Doctors cited: Silke Schwartz, Ekkehart Jenetzky, Hanno Krafft, Tobias Maurer and David Martin.

Via Wall street Journal, and Highwiredtalk "Case for Mask Mandate rests on bad data". They cite Christopher Murray's Institute of Health Metrics and NIH Director Francis Collins whose claims are that masks will save lives. Collins claims on the NIH Director's blog that they can save 130,000 lives. He uses Nature's Medicine study as a cite, a study that was directly backed by the IHME (That is directly funded by the Bill and Melinda Gates Foundation) to show a 40%reduction in mask wearers, and that mask usage in the U.S avg at 49%. However, other more credible studies, consistently showed masks avg hovered between 70-90%.

<https://www.instagram.com/tv/CHo2iyYHd7m/?igshid=1mpjj3jghkm2v>

Here is a link to an Account on Twitter, that gets it's analysis through the Covid Tracking Program. In each of these statistics, mask mandates show no Correlation in less case numbers, and if anything, a surge in cases was immediately preceded by a mask mandate. Showing mask mandates actually contribute to increased numbers and deterioration of Immune systems. (<https://twitter.com/ianmSC?s=09>)

Via, Mercola.com: Dr Mercola breaks down 8 studies/facts, and provides links to 12 of his articles, showing a lack of consistent information regarding face masks and their presumed Protection from viral particles. The lack of evidence supporting mask usage, and the overwhelming evidence showing their ill effect towards our Immune system, shows that mandates are more about fear than actual science. (https://www.mercola.com/facemasks-facts.htm/?cid_source=twitter&cid_medium=int&cid=mask_wearing_20210120&cid_content=cstop?cid_source=instagram&cid_medium=social&cid_content=instagramhealth&cid=20210127_igpost)

Article Entitled, Mask mandates are absolutely useless. Written By Dr Mercola. Rational Ground looked at Covid 19 cases from May 1st–December 15th in all 50 states. And found, per 100,000, states that Instituted mask mandates, averaged 10 more cases than those that didn't. For the countries and I.S states studied, once the region experienced 25 cumulative Covid-19 deaths, the growth rates of Covid 19 deaths fell from initially high levels, to close to zero within 20-30 days. After this initial period, growth rates of daily Covid 19 deaths, "hovered around zero or below everywhere in the world" with it without Nonpharmaceutical interventions. (https://articles.mercola.com/sites/articles/archive/2020/12/31/pandemic-face-mask.aspx?cid_source=instagram&cid_medium=social&cid_content=instagramhealth&cid=nonlead1_20201231)

Journal of Infectious diseases, Written by: David Morena, Jeffery Taubenberger and Anthony Fauci. (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2599911/>)

"Bacterial Pneumonia" during the 1918-1919 Pandemic, where they mandated Mask Usage. Keep in mind, when aerobic bacteria are deprived of oxygen, they create poisons, it isn't the bacterias fault, rather it is the act of wearing the mask that causes them to react in such a way. Keep in mind, the 1918-1919 Pandemic was proven to not be contagious (MJ Rosenau, "Experiments to determine mode of spread of Influenza" Journal of American Medical Association 73, no. 5 (August 2, 1919):311-313. Shocking? I know. It's almost like mandating face masks during a "Global Pandemic", makes Bacterial Pneumonia SURGE.

Review of Scientific reports of Harms Caused by face masks, up to February 2021, Via Researchgate.net by D.G Rancourt, Ontario Civil Liberties Association.

(<https://www.americasfrontlinedoctors.com/wp-content/uploads/5thsciencereview-masksharm-1.pdf>)

PMID: 33303303- "...The data suggest that both medical and non-medical facemasks are ineffective to block human-to-human transmission of viral and infectious disease.....Wearing facemasks has been demonstrated to have substantial adverse physiological and psychological effects. These include hypoxia, hypercapnia, shortness of breath, increased acidity and toxicity, activation of fear and stress response, rise in stress hormones, immunosuppression, fatigue, headaches, decline in cognitive performance, predisposition for viral and infectious illnesses, chronic stress, anxiety and depression....health deterioration, developing and progression of chronic diseases and premature death."

(Meta Analysis of 65 Mask Studies show Masks cause great harm)

<https://www.mdpi.com/1660-4601/18/8/4344/htm>

"...We objectified evaluation evidenced changes in respiratory physiology of mask wearers with significant correlation of O₂ drop and fatigue (p < 0.05), a clustered co-occurrence of respiratory impairment and O₂ drop (67%), N95 mask and CO₂ rise (82%), N95 mask and O₂ drop (72%), N95 mask and headache (60%), respiratory impairment and temperature rise (88%), but also temperature rise and moisture (100%) under the masks. Extended mask-wearing by the general population could lead to relevant effects and consequences in many medical fields"

47 studies confirming that masks are useless in preventing Covid infection and transmission
This has been a growing, serious concern in recent months as the dangerous health and emotional effects, especially on children, who are at almost zero risk of Covid harm, are becoming more pronounced and deeply worrisome.

VARIOUS FACE MASK STUDIES PROVE THEIR INEFFECTIVENESS

1. Surgical mask / cloth face mask studies

Community and Close Contact Exposures Associated with COVID-19 Among Symptomatic Adults ≥18 Years in 11 Outpatient Health Care Facilities — United States, July 2020

The US Centre for Disease Control performed a study which showed that 85 percent of those who contracted Covid-19 during July 2020 were mask wearers. Just 3.9 percent of the study participants never wore a mask.

Original: <https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6936a5-H.pdf>

Erratum. correction:

https://www.cdc.gov/mmwr/volumes/69/wr/mm6938a7.htm?s_cid=mm6938a7_w

<https://www.theblaze.com/op-ed/horowitz-cdc-study-covid-masks>

2. Facial protection for healthcare workers during pandemics: a scoping review

This study used 5462 peer-reviewed articles and 41 grey literature records.

“Conclusion: The COVID-19 pandemic has led to critical shortages of medical-grade PPE. Alternative forms of facial protection offer inferior protection. More robust evidence is required on different types of medical-grade facial protection. As research on COVID-19 advances, investigators should continue to examine the impact on alternatives of medical-grade facial protection”

So how is your cloth and surgical mask working again if EVEN medical grade alternatives are failing ?

Study Article: <https://pubmed.ncbi.nlm.nih.gov/32371574/>

3. Physical interventions to interrupt or reduce the spread of respiratory viruses

“There is moderate certainty evidence that wearing a mask probably makes little or no difference to the outcome of laboratory-confirmed influenza compared to not wearing a mask”

Study article: <https://pubmed.ncbi.nlm.nih.gov/33215698/>

4. Disposable surgical face masks for preventing surgical wound infection in clean surgery

“We included three trials, involving a total of 2106 participants. There was no statistically significant difference in infection rates between the masked and unmasked group in any of the trials”

Study article: <https://pubmed.ncbi.nlm.nih.gov/27115326/>

5. Disposable surgical face masks: a systematic review

Two randomized controlled trials were included involving a total of 1453 patients. In a small trial there was a trend towards masks being associated with fewer infections, whereas in a large trial there was no difference in infection rates between the masked and unmasked group.

Study article: <https://pubmed.ncbi.nlm.nih.gov/16295987/>

6. Evaluating the efficacy of cloth facemasks in reducing particulate matter exposure

“Our results suggest that cloth masks are only marginally beneficial in protecting individuals from particles $< 2.5 \mu\text{m}$ ”

Study article: <https://pubmed.ncbi.nlm.nih.gov/27531371/>

7. Face seal leakage of half masks and surgical masks

“The filtration efficiency of the filter materials was good, over 95%, for particles above 5 micron in diameter but great variation existed for smaller particles.

Coronavirus is 0.125 microns. therefore these masks wouldn't protect you from the virus”

Study article: <https://pubmed.ncbi.nlm.nih.gov/4014006/>

8. Comparison of the Filter Efficiency of Medical Nonwoven Fabrics against Three Different Microbe Aerosols

“The filter efficiencies against influenza virus particles were the lowest”

“We conclude that the filter efficiency test using the phi-X174 phage aerosol may overestimate the protective performance of nonwoven fabrics with filter structure compared to that against real pathogens such as the influenza virus”

Study article: <https://pubmed.ncbi.nlm.nih.gov/29910210/>

9. Aerosol penetration through surgical masks “Although surgical mask media may be adequate to remove bacteria exhaled or expelled by health care workers, they may not be sufficient to remove the submicrometer-size aerosols containing pathogens ”

Study article: <https://pubmed.ncbi.nlm.nih.gov/1524265/>

10. Particle removal from air by face masks made from Sterilization Wraps: Effectiveness and Reusability

“We found that 60 GSM face mask had particle capture efficiency of 94% for total particles greater than 0.3 microns”

How big is the virus again? 0.125 microns.

Study article: <https://pubmed.ncbi.nlm.nih.gov/33052962/>

11. A New Method for Testing Filtration Efficiency of Mask Materials Under Sneeze-like Pressure

This study states that “alternatives” like silk and gauze etc could possibly be good options in the pandemic. It’s done on starch particles.

Does not state how big they are either, but they can still get through the material and my research points out that starch particles are “big”, much bigger than most viruses.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32503823/>

12. Protecting staff against airborne viral particles: in vivo efficiency of laser masks

“The laser mask provided significantly less protection than the FFP2 respirator ($P=0.02$), and only marginally more protection than the surgical mask. The continued use of laser masks for respiratory protection is questionable. Taping masks to the face only provided a small improvement in protection”

Study article: <https://pubmed.ncbi.nlm.nih.gov/16920222/>

13. Quantitative Method for Comparative Assessment of Particle Removal Efficiency of Fabric Masks as Alternatives to Standard Surgical Masks for PPE

“Worn as designed, both commercial surgical masks and cloth masks had widely varying effectiveness (53 – 75 percent and 28 – 91 percent particle removal efficiency, respectively)”. Different brand, different results and only when they applied “nylon layers” did the “efficiency” improve. Synthetic fibres do not breathe, so this will inevitably effect your breathing.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32838296/>

14. The efficacy of standard surgical face masks: an investigation using “tracer particles”

“Since the microspheres were not identified on the exterior of these face masks, they must have escaped around the mask edges and found their way into the wound”. Human albumin cells, aka aborted fetal tissue, is much larger than the virus and still escaped the mask.

Study article: <https://pubmed.ncbi.nlm.nih.gov/7379387/>

15. Testing the efficacy of homemade masks: would they protect in an influenza pandemic?

“Our findings suggest that a homemade mask should only be considered as a last resort to prevent droplet transmission from infected individuals” so why has the government suggested you make your own when they are not effective ?

Study article: <https://pubmed.ncbi.nlm.nih.gov/24229526/>

16. Using half-facepiece respirators for H1N1

“Increasing the filtration level of a particle respirator does not increase the respirator’s ability to reduce a user’s exposure to contaminants”

<https://pubmed.ncbi.nlm.nih.gov/19927872/>

17. Why Masks Don’t Work Against COVID-19

The site is full of studies proving masks dont work for coronavirus or the flu.

Article:

https://www.citizensforfreespeech.org/why_masks_don_t_work_against_covid_19?fbclid=IwARoQviyvt6BObOg_aMijo3CjofgTcm_gm5jhXcMkO8GcH3Kur-bwiboo8rf8

18. Masks Don’t Work: A Review of Science Relevant to COVID-19 Social Policy

This is full of studies proving mask protection is negligible for coronavirus, flu etc.

Article:

https://www.rcreader.com/commentary/masks-dont-work-covid-a-review-of-science-relevant-to-covide-19-social-policy?fbclid=IwARoQviyvt6BObOgaMijo3CjofgTcm_gm5jhXcMkO8GcH3Kur-bwiboo8rf8

19. Face masks to prevent transmission of influenza virus: a systematic review

There is less data to support the use of face masks or respirators to prevent becoming infected.

Study article: <https://pubmed.ncbi.nlm.nih.gov/20092668/>

20. “Exercise with facemask; Are we handling a devil’s sword?” – A physiological hypothesis
No evidence to suggest that wearing a mask during exercise offers any benefit from the droplet transfer from the virus.

“Exercising with facemasks may reduce available Oxygen and increase air trapping preventing substantial carbon dioxide exchange. The hypercapnic hypoxia may potentially increase acidic environment, cardiac overload, anaerobic metabolism and renal overload, which may substantially aggravate the underlying pathology of established chronic diseases”

Study article: <https://pubmed.ncbi.nlm.nih.gov/32590322/>

21. Use of face masks by non-scrubbed operating room staff: a randomized controlled trial
Surgical site infection rates did not increase when non-scrubbed personnel did not wear face masks.

2010 Study article: <https://pubmed.ncbi.nlm.nih.gov/20575920/>

22. Surgical face masks in modern operating rooms – a costly and unnecessary ritual?
When the wearing of face masks by non-scrubbed staff working in an operating room with forced ventilation seems to be unnecessary.

Study article: <https://pubmed.ncbi.nlm.nih.gov/1680906/>

23. Masks: a ward investigation and review of the literature
Wearing multi layer operating room masks for every visit had no effect on nose and throat carriage rates.

Study article: <https://pubmed.ncbi.nlm.nih.gov/2873176/>

24. Aerosol penetration and leakage characteristics of masks used in the health care industry
The protection provided by surgical masks may be insufficient in environments containing potentially hazardous submicrometer-sized aerosols.

“Conclusion: We conclude that the protection provided by surgical masks may be insufficient in environments containing potentially hazardous submicrometer-sized aerosols”

Study article: <https://pubmed.ncbi.nlm.nih.gov/8239046/>

25. Masks for prevention of viral respiratory infections among health care workers and the public: PEER umbrella systematic review
Meta analysis review that says there is limited evidence to suggest that the use of masks may reduce the risk of spreading viral respiratory infections.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32675098/>

26. Modeling of the Transmission of Coronaviruses, Measles Virus, Influenza Virus, Mycobacterium tuberculosis, and Legionella pneumophila in Dental Clinics

Evidence to suggest that transmission probability is strongly driven by indoor air quality, followed by patient effectiveness and the least by respiratory protection via mask use.

So this could explain “second waves” and has nothing to do with hand shaking, or not wearing a mask.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32614681/>

27. Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings–Personal Protective and Environmental Measures

The use of face masks, either by infected or non infected persons, does not have a significant effect on influenza transmission..

Study article: <https://pubmed.ncbi.nlm.nih.gov/32027586/>

28. Effectiveness of personal protective measures in reducing pandemic influenza transmission: A systematic review and meta-analysis

Meta analyses suggest that regular hand hygiene provided a significant protective effect over face masks and their insignificant protection.

Study article: <https://pubmed.ncbi.nlm.nih.gov/28487207/>

29. Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta-analysis

Use of n95 respirators compared to surgical masks is not associated with a lower risk of laboratory confirmed influenza.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32167245/>

30. Adolescents' face mask usage and contact transmission in novel Coronavirus

Face mask surfaces can become contamination sources. People are storing them in their pockets, bags, putting them on tables, people are reusing them etc. This is why this study is relevant:

Study article: <https://pubmed.ncbi.nlm.nih.gov/32582579/>

31. Visualizing the effectiveness of face masks in obstructing respiratory jets Loosely folded face masks and “bandana style” face coverings provide minimum stopping capability for the smallest aerosolized droplets.

This applies to anyone who folds or shoves a mask into their pockets or bag. It also applies to cloth and homemade cloth masks:

Study article: <https://pubmed.ncbi.nlm.nih.gov/32624649/>

32. Use of surgical face masks to reduce the incidence of the common cold among health care workers in Japan: a randomized controlled trial

Face mask use in healthcare workers has not been demonstrated to provide benefit in terms of colds symptoms or getting colds.

Study article: <https://pubmed.ncbi.nlm.nih.gov/19216002/>

33. A cluster randomised trial of cloth masks compared with medical masks in healthcare workers

Penetration of cloth masks by influenza particles was almost 97 percent and medical masks 44 percent. so cloth masks are essentially useless, and “medical grade” masks don’t provide adequate protection.

Study article: <https://pubmed.ncbi.nlm.nih.gov/25903751/>

34. Simple respiratory protection—evaluation of the filtration performance of cloth masks and common fabric materials against 20–1000 nm size particles

Cloth masks and other fabric materials tested in the study had 40–90 percent instantaneous penetration levels against polydisperse NaCl aerosols.

“Results obtained in the study show that common fabric materials may provide marginal protection against nanoparticles, including those in the size ranges of virus-containing particles in exhaled breath”

Study article: <https://pubmed.ncbi.nlm.nih.gov/20584862/>

35. Respiratory performance offered by N95 respirators and surgical masks: human subject evaluation with NaCl aerosol representing bacterial and viral particle size range

“The study indicates that N95 filtering facepiece respirators may not achieve the expected protection level against bacteria and viruses”

Study article: <https://pubmed.ncbi.nlm.nih.gov/18326870/>

36. Do N95 respirators provide 95% protection level against airborne viruses, and how adequate are surgical masks?

The n95 filtering respirators may not provide expected protection level against small virions

Study article: <https://pubmed.ncbi.nlm.nih.gov/16490606/>

37. Do Surgical Masks Stop the Coronavirus?

Study article:

<https://slate.com/news-and-politics/2020/01/coronavirus-surgical-masks-china.html>

38. Effectiveness of personal protective measures in reducing pandemic influenza transmission: A systematic review and meta-analysis

This study states that an N95, depending on the brand, can range from 0.1-0.3 microns. however, most people cannot buy an N95 with a micron smaller than 0.3 micron because they are expensive and not readily available on the public market.

“N95 respirators made by different companies were found to have different filtration efficiencies for the most penetrating particle size (0.1 to 0.3 micron)”

“Above the most penetrating particle size the filtration efficiency increases with size; it reaches approximately 99.5% or higher at about 0.75 micron”

“Meta-analyses suggest that regular hand hygiene provided a significant protective effect (OR=0.62; 95% CI 0.52-0.73; I₂=0%), and facemask use provided a non-significant protective effect (OR=0.53; 95% CI 0.16-1.71; I₂=48%) against 2009 pandemic influenza infection”

Study article: <https://pubmed.ncbi.nlm.nih.gov/28487207/>

39. Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta- analysis

“The use of N95 respirators compared with surgical masks is not associated with a lower risk of laboratory- confirmed influenza. It suggests that N95 respirators should not be recommended for the general public or non high-risk medical staff who are not in close contact with influenza patients or suspected patients”

N95 masks did show a positive effect for BACTERIA but not viruses.

Study article: <https://pubmed.ncbi.nlm.nih.gov/32167245/>

40. Adolescents' face mask usage and contact transmission in novel Coronavirus
This study used dye to show if masks were contaminated.

<https://www.frontiersin.org/articles/10.3389/fpubh.2023.1125150/full>

https://www.medscape.com/viewarticle/993281?ecd=wnl_edit_tpal&uac=210502CG&impID=5537177&faf=1

https://www.cochrane.org/CD006207/ARI_do-physical-measures-such-hand-washing-or-wearing-masks-stop-or-slow-down-spread-respiratory-viruses