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Why Mask Mandates Should be Repealed Immediately

BY CARLA PEETERS NOVEMBER 15, 2021 POLICY, PUBLIC HEALTH 10 MINUTE READ

During the past 18 months, masks have been mandated worldwide as a major tool to prevent the transmission of the SARS-CoV-2 virus. Sweden is one of the few countries that wisely did not introduce the wearing of masks in a broader sense. At the start of the pandemic when there was not yet much information on the virus available, Sweden asked community members to wear masks during rush hours in public transport. This was a temporary solution and removed at the time a large proportion of vulnerable people was vaccinated.

The statement of Swedish policy advisor professor Anders Tegnell was clear: the wearing of non-medical masks to prevent viral transmission has never been used successfully and science has not yet proved the opposite. The wearing of masks by healthy people in public surroundings might even backfire. The viral spread could become worse. Effectiveness and safe use of non-medical masks in both indoor and outdoor settings is debated by many scientists.

A false sense of security could be a major risk. During the pandemic Dr Fauci and WHO experts changed their policies frequently from no beneficial effect for wearing masks by the general public (interim report WHO 5 June 2020, to a mandate, wearing two masks, wearing masks

for children from the age of five or even two years and even wearing masks outdoors.

Politicians argue that wearing masks will help to respect other measures like 1.5 meter distancing, frequent hand washing, working from home and adjusting to a stay-at-home policy. However, positive effects of the behavioral aim of masks are flawed and have not been published in a peer-reviewed scientific journal.

Politicians still push mask mandates. A frequently used political statement is “although there is no profit it will not harm.” Unfortunately when masks are frequently used and for long periods, there is a tremendous risk to people’s health and the environment. Effects may turn out to be irreversible and negatively affect the health of future generations.

During this pandemic wearing of non-medical masks is the most twisted symbol in the war against a virus to reach the ultimate aim of most politicians: a zero Covid policy. Masks reached the highest level of the medical and political agenda, as a comfort blanket for feeling safe and a mechanism of control to circumvent the fear of becoming infected.

Dr Rochelle Walensky from CDC is claiming in advertisements, without evidence, that wearing a mask could reduce the risk of infection by 80%. However, a Cochrane study by Jefferson et al. and a report of the European Center of Disease Control concluded there is no high-quality evidence in favor of facemasks. No association was observed between

mask mandates or use and reduced Covid-19 spread in US states. Up to now there are no results available of randomized clinical trials that could demonstrate beyond any doubt that wearing masks prevent people from viral infection and could slow the spread of the virus.

Randomized controlled trials during this pandemic on the effects of wearing medical masks in Denmark by the general population could not alter the conclusions of previous trials with (medical) masks on the spread of influenza virus in a hospital setting or in non healthcare settings: there is no substantial effect.

In September, results of a randomized clinical trial in Bangladesh were published. This study, which is not peer reviewed yet, concluded that the wearing of medical masks could reduce asymptomatic seroprevalence with 9% when mask wearing among villagers improved 29% as compared to members of other villages that did not improve in mask wearing (controlgroup). However this small difference could not be observed when villagers used cloth masks.

The question remains: if the methods of analysis used in this study is evidence that wearing medical masks by the general population is able to prevent viral infections and transmission, should it be promoted to other regions?

Another recent study by the Max Planck Institute claiming a clear protective effect on preventing viral infections and slowing down the spread of the virus by wearing non medical masks by the general population was based on modelling studies based on assumptions and

data from an observational study and a small study in two hospitals in Wuhan.

Moreover, wearing masks by children and students on the effects of slowing down the spread of the virus in schools has never been studied in a randomized controlled trial. In general children younger than 18 years of age are not at risk of a severe disease. It is presumed children are protected by natural immunity as a result of cross reactivity with other coronaviruses and/or the presence of lower levels of ACE2 receptors which are required for the virus to replicate.

Moreover, studies of Karolinska Institute and Institute Pasteur concluded that children are not the main drivers of spreading the SARS-CoV-2 virus. A study of the Swedish Institute of Public Health did not observe a difference of infections in children and teachers in Sweden where schools were open without wearing masks as compared to children and teachers in Finland where schools were closed.

Meanwhile political mandates are forcing children and adults to wear masks many hours a day. An ethical and careful risk benefit evaluation for the wearing of masks on slowing the spread of SARS-CoV-2 virus has never been made while existing and scientific papers on harmful effects for people and environment have been neglected.

The exponential use of masks and other personal protective equipment (PPE) during the pandemic is polarizing the natural immune system and biodiversity with a devastating loss of plasticity resulting in an advanced

risk for new virus variants, multiresistant bacteria, infectious diseases and severe chronic diseases.

Although the environment might have made some gains in terms of the reduction of the carbon footprint and improved air and surface water quality during the pandemic there is a pending threat to our collective existence and the survival of marine organisms.

The worldwide estimate is that disposable masks or face shields are discarded at a rate of 3.4 million per day. The presence of a diversity of plastics, toxic and cancerous compounds like perfluorocarbon, aniline, phthalate, formaldehyde, bisfenol A as well as heavy metals, biocides (zinc oxide, graphene oxide) and nanoparticles are found. An increasing number of environmental experts worry about the long-term effects. Most (85%) of the masks used worldwide are made in China where no environmental qualification is needed.

A total breakdown of these dangerous compounds is expected to last 450 years. Problems corresponding to the various sizes of plastics of PPE in the environment and the ecosystems could serve as potential vectors of pathogens and could lead to injuries and death. The use of plastic bottles began in 1950. We consume about a credit card a week of plastic(s) as reported in “Assessing Plastic Ingestion’ from Nature to People.”

Plastics and non-biodegradable PPE made from plastics in the environment can influence human and animal fertility. Professor Schwan writes in her book *Countdown* that without changing our

attitude to nature it might be that in 2045 fertilization will only be possible via artificial insemination. In April 2020 researchers from Harvard and Worldbank showed a statistical link of air pollution and mortality numbers of Covid-19.

The influence of harmful compounds, nanoparticles and biocides in masks on children, adults, animals, plants and the environment have not been intensively investigated so far. However based on the available peer-reviewed scientific articles the possible harmful effects on health of healthcare workers is known and an increase in infections and chronic diseases could have been expected.

A recent meta-analysis of 65 peer-reviewed scientific articles concluded a serious danger for developing MIES Mask Induced Exhaustion Syndrome. Symptoms vary from low O₂, high CO₂, dizziness, exhausted breathing and heartbeat, toxicity, inflammation, increased levels of stress hormone, anxiety, anger, headache, slow thinking and drowsiness.

For children the possible risks for psychosocial, biological and immunological effects make long-term wearing of face masks difficult to maintain. In history medical masks have only been used by doctors and nurses during specific conditions. Infected wounds were found to be similar or could be increased during the wearing of masks as compared to non wearing masks.

Masks were meant to wear for short-term use only to protect for blood or saliva squashes in operation rooms. Every two hours a new mask is

recommended as well as alternating with a period of not wearing masks.

There is no doubt why many have started challenging the mask mandates for healthy people. US Senator Rand Paul has spoken out against mask mandates. He argues that they don't work and cases can actually increase. In a tribunal in the German District Court in Weinheim in April 2021 expert professor Christof Kuhbänder explained the dangers of wearing masks by children. It is a significant threat for their physical and emotional well-being and their general development by disturbing their nonverbal communication.

Furthermore there is a serious risk for a change in the bacterial flora in the mouth resulting in bad breath, tooth decay and inflammation. In the long term the change in the microbial flora might increase the risk for skin problems, heart problems, digestive problems and a waning innate immune system.

Professor Dr Ines Kappstein explained during the same court meeting there is no evidence that wearing masks can significantly decrease the risk for an infection with the SARS-CoV-2 virus. Improper use of masks may increase infections. The court judged that wearing masks is useless and unconstitutional. More judges should follow this decision.

In August 2008, the NIH published a paper that during the flu pandemic in 1918 most people died due to bacterial pneumonia. Scientists debate that wearing masks lengthened the duration of the pandemic. During the current SARS-CoV-2 pandemic bacterial co-

infection have been observed as well. Nowadays young adults with pneumonia caused by *Staphylococcus aureus*, which seldom occurred before, can land in ICU's. Another remarkable phenomenon recently observed in hospitals is the enormous increase in up to 25% of Covid patients co-infected with black fungus.

An infection that may end in death normally occurs in people with a compromised immune system. A possible explanation for this could be the use of dexamethasone. Similarly a rise in more RSV infections in young children is being seen. The role of the long-term use of dirty, humid masks and the presence of toxic compounds in masks resulting in a waning immune system needs further attention. Presence of respiratory viruses on the outer surface of medical masks used by hospital healthcare workers is demonstrated and may result in self-contamination.

A possible link to neurological damage and an increasing risk for lung cancer due to decreased availability of oxygen and as a result dysbiosis of the lower respiratory tract has been published. Wearing masks at higher temperatures and high humidity e.g summer or places like hairdressers may lead to dehydration, increased heartbeat and other heat-related health problems.

There are possible effects from the wrong use of masks that could damage human health. People might use the microwave to disinfect their mask, or sprays to disinfect or ethereal oils for a nice smell, which may be harmful. In Canada, Belgium, Germany, and The Netherlands nonmedical and medical masks financed by the governments had to be

withdrawn from the market due to the amount of toxic and harmful substances found. Unfortunately most batches of masks used by the general public are not subjected to such analysis.

It is time to stop mask mandates for healthy people. It is no longer possible to justify a behavioral experiment with such far-reaching harmful consequences. Many scientific studies and analysis all arrive at the same conclusion: the wearing of masks by healthy people cannot stop the spread of a virus.

People without any symptoms tested and a positive PCR test (due to the presence of a nonviable piece of RNA) rarely spread a virus. The most important magic rule is from ancestral wisdom: rest and go to bed when experiencing Covid or flu-like symptoms. Strengthening the immune system with a healthy food and lifestyle will decrease the risk for infections and chronic diseases

Governments and politicians should act with a moral compass. They should repeal all mask mandates immediately. Any action on Covid-19 policy will gain more impact if matched with a focus on restoring public health, the environment, and trust. In high-trust societies like Sweden, the result is a low number of Covid infections and mortality rates without restriction, mask mandates, or vaccine passports.

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