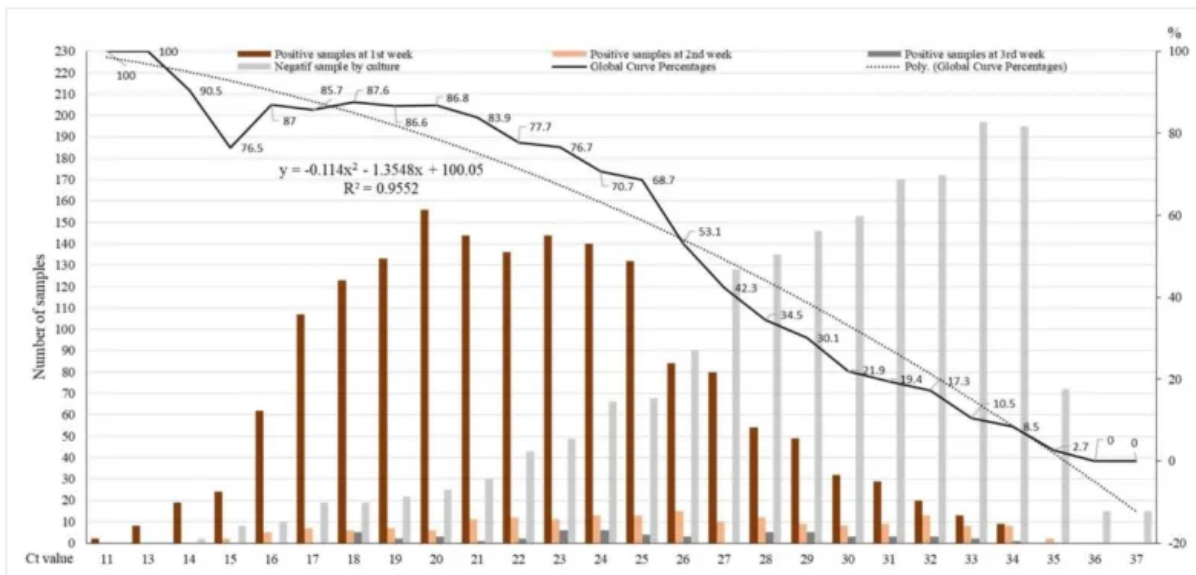




## The failure of PCR mass testing



PCR cycle threshold (11-37) and positive cell culture (black line, 100% to 0%). The colored bars indicate the number of positive cell cultures per ct per week after infection (1 to 3 weeks).

(Jafaar/Raoult)

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A new German study confirms and explains the failure of PCR mass testing.

In March 2020, SPR [warned that](#) PCR mass testing in the general population (“test, test, test”) would be a serious mistake. The issue never was that PCR tests didn’t work or that the Drosten PCR paper was “peer-reviewed” in just one day. The issue is that PCR tests [cannot determine](#) an acute infection, ongoing infectiousness, and actual disease, especially if ct values are not taken into account.

Several studies have since shown that national PCR testing rates have had [no influence at all](#) on covid mortality. In addition, a new German study re-analyzed PCR tests of 160,000 people and concluded:

“In light of our findings that more than half of individuals with positive PCR test results are unlikely to have been infectious, RT-PCR test positivity should not be taken as an accurate measure of infectious SARS-CoV-2 incidence. Our results confirm the findings of others that the routine use of ‘positive’ RT-PCR test results as the gold standard for assessing and controlling infectiousness fails to reflect the fact ‘that 50-75% of the time an individual is PCR positive, they are likely to be post-infectious.’” ([Stang et al, Journal of Infection](#), May 2021)

Why has mass PCR testing failed so badly? Most likely because of the [role of pre-symptomatic transmission](#): by the time someone gets a ‘positive’ test result, the infectious virus is already being neutralized, or in some cases is [already long gone](#). Hence PCR testing really only makes sense in targeted, preemptive high-risk settings, such as hospitals, nursing homes or early border controls, or possibly in Chinese-style preemptive, [pooled mass testings](#) of entire 10-million-people cities.

Overall, PCR mass testing has achieved essentially nothing but hundreds of billions in unnecessary costs and large-scale psychological trauma, especially in children. Nevertheless, with [millions of deaths](#), covid was not just a “casedemic” or a “fake pandemic” (as the 2009 swine flu), but a PCR-driven “casedemic” *on top of* a real pandemic – or in other words: a [“strange pandemic”](#).

**Related:** [The trouble with PCR tests](#) (October 2020)

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