

COVID-19: Continuous Wearing of Mask Aggravates Risk of Infection. “Psychological Terrorism”?

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Continuous wearing of masks aggravates the risk of infection.

This statement is based on scientific and medical analysis.

The air, once exhaled, is heated, humidified and charged with CO₂. It becomes a perfect culture medium for infectious agents (bacteria, fungi, viruses).

Studies have shown that the porosity (microscopic holes) of the masks allows exhaled germs to accumulate on the external surface of the mask. Not only do we re-inhale our own CO₂, but by touching our mask all the time (an inevitable gesture), we spread germs everywhere!

Forcing everyone to wear them all the time, while the epidemic is in a process of decline, is a scientific and medical aberration!

A pharmaceutical analysis has shown that in masks for personal use, there are “*staphylococci, streptococci, neisseria, bacilli which contribute to contamination...*”

Non-pharmaceutical Interventions”.

Masks with gloves, physical distancing (1.5 -2.0 m) and containment (lockdown) are part of so-called “*Non-pharmaceutical Interventions*”.

Masks are considered by governments as a “protection against the transmission of Covid-19”. It is better to wear a mask (any mask) than nothing. People are instructed to obey the guidelines of the Ministry of Health. These guidelines are erroneous.

They are imposed on population groups which have been traumatized by the fear campaign, applied in countries which have applied the lockdown.

In Belgium, 4 months after the lockdown was first introduced and more than 2 months after the end of confinement, **wearing a mask is now compulsory for everyone, everywhere**, even on the dikes, except for children under 12 years of age, who were not at the heart of the epidemic.

People are being masked and there is talk of reconfinement for the wrong reasons:

Authorities are confusing a *resurgence of positive RT-PCR tests with a resurgence of COVID-19 infections*, which is not the same thing!

The media say: “the number of infections is increasing again”, whereas it is the number of positive tests that is increasing.

The reality is that the epidemic is subsiding.

Masks: dangers not to be overlooked

Apart from overestimating the benefit of masks, the authorities underestimate its deleterious effects.

“The researchers found that about a third of the workers developed headaches with the use of the mask, most had pre-existing headaches that were aggravated by wearing the mask, and 60% needed pain medication to relieve it. With respect to the cause of the headaches, while the straps and pressure of the mask may be causative, most of the evidence points to hypoxia and/or hypercapnia as the cause. That is, a reduction in blood oxygenation (hypoxia) or an increase in blood CO₂ (hypercapnia).” [1]

Hypoxia (lack of blood oxygenation) due to prolonged mask wear is common [2-3-4] in apparently healthy individuals. It is even worse when worn by people suffering from chronic respiratory insufficiencies, already hypoxemic and/or hypercapnic at baseline.

Do our authorities underestimate or trivialize the deleterious effects of hypoxemia and chronic hypercapnia? These disorders can far outweigh the respiratory problems caused by COVID-19.



Image Source: Pikist.com

Masks: a usefulness to be put into perspective

Strong scientific evidence through randomized controlled trials (RCTs) has been required to validate the efficacy and safety of **hydroxychloroquine!**

Surprisingly, in the case of face masks, this criterion is no longer required.

Based on existing randomized controlled trials, there is no evidence that face masks work to reduce transmission by droplets and aerosol particles in viral respiratory diseases such as influenza or colds [5].

Professor Denis Rancourt [5] has conducted an extensive review of the literature on this topic.

The type of mask most widely used by the population, **paper surgical masks, does not protect against viral transmission** [6] :

“A surgical mask does not provide the wearer with a reliable level of protection against inhalation of small airborne particles and is not considered respiratory protection.

Permission to wear a surgical mask made more sense when scientists initially thought that the virus (SARS-CoV-2) was spread by large droplets. But more and more research shows that the virus is spread by tiny viral particles. “

Cotton (cloth) masks worn by some people do not do any better [7] :

“Neither surgical masks nor cotton masks effectively filtered out CoV-2 SARS when infected patients coughed. It should be noted that we found **greater contamination on the outside surfaces than on the inside surfaces of the masks.**

In conclusion, surgical and cotton masks appear to be ineffective in preventing the spread of SARS-CoV-2 from the cough of COVID-19 patients to the environment and to the external surface of the mask. “

Especially since masked people touch their faces more often than unmasked people.

Masks: a false sense of security

Wearing the mask induces a false sense of security.

People no longer pay attention and “forget” other gestures that are more essential than wearing a mask: **hand washing** or **physical distance** of more than 1.5 metres.

The WHO (World Health Organization) insists on the importance of washing hands, keeping one’s distance and **avoiding touching one’s face, nose and mouth!** It only recommends wearing a mask (surgical, N95 or FFP2) if you are ill or if you are caring for a sick person (health care staff) [8].

[8] “ At this time, there is no direct evidence (from studies of COVID-19 and healthy people in the community) on the effectiveness of widespread mask use by healthy people to prevent infections due to respiratory viruses, including COVID-19. ” [8]

In shopping malls, restaurants, bars or even on the street, I have observed a large number of people touching their faces regularly, distractedly, sometimes ten to fifteen times a minute, either as a reflex or to readjust their masks.

This is the case in hospitals, health care services, from caregivers, including doctors.

It’s stronger than you are, it’s an unconscious gesture.

The mask increases the contact between our fingers and our face [9] and that’s really harmful!

In Denmark [10], the Public Health Agency [10] testifies:

“We create a false sense of security (with the masks). **Hans Jorn Jepsen Kolmos**, a microbiologist and researcher at Odense University Hospital, puts it bluntly: “We don’t believe it. They are effective for the nursing staff or employees of retirement homes. But I am really very much opposed to their

widespread use. It becomes a ritual that is adopted for no reason, and creates a false sense of security. The most important thing is to keep your distance, to wash your hands, and to clean the surfaces you have touched, such as door handles. This is the winning formula for hygiene. “

241 scientists [11] emphasize the need for **proper air ventilation** in workplaces, buildings, schools, hospitals and nursing homes. Opening doors and windows will have a far greater impact on the fight against viral transmission than wearing a mask, which, as we have seen, does not really protect and has deleterious effects on health.

Masks: a shock strategy tool

Here again, is the real problem more psychological than scientific?

Certainly, for the general public, the wearing of the mask reassures, whether its protection is real or not, whether it is well worn or not, or even, what is more serious, whether it makes things worse or not.

People need to believe in something that protects them from the scourge and it is true that the media and our “experts”, at least in Belgium, have done everything to make people very afraid and accept anything and everything.

Astronomical fines for not wearing the mask!

1000 euros in a closed space in Campanile, Italy [12].

250 euros fine in public places [13], in Belgium, 3 times more for restaurants and unmasked waiters.

What psychological terrorism!

Yet the wearing of masks everywhere and by everyone is not based on science or common sense and has serious deleterious effects on our health.

It impedes the application of **essential non-pharmaceutical measures** and **gives a false sense of security**.

Rather than being strengthened, all these measures must be dissipated, as this epidemic is doing.

Physical distancing destroys the social relationships that are dear to every human being.

We are social beings: psychology, sociology, medicine, everyone knows that.

Excessive hand washing becomes a pathological hyperhygienism that takes on the appearance of OCD: obsessive compulsive disorder.

These extreme measures, which are no longer justified, must give way to common sense, to authentic social relations and to the return of confidence in one’s immune system and in the natural extinction of this epidemic contaminated by hysteria.

It is high time.

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Translation from French. Maya for Global Research

Featured Image: pixabay.com

Notes :

[1] [Le danger mortel des masques](#), by Dr. Russell L Blaylock, author, U.S. neurosurgeon, Assistant Professor of Clinical Neurosurgery at the University of Mississippi Medical Center and currently Visiting Professor in the Department of Biology at Belhaven College. Translation of the original article : [Face Masks Pose Serious Risks to the Healthy](#), 26 may 2020 on the Global Research website.

[2] [Preliminary report on surgical mask induced deoxygenation during major surgery](#), A Beder & al, Neurocirugia, 2008, 19, pp 121-126

[3] [Respiratory consequences of N95-type Mask usage in pregnant healthcare workers—a controlled clinical study](#), Antimicrob Resist Infect Control, 2015, 4 : 48

[4] [Headaches and the N95 face-mask amongst healthcare providers](#), Acta Neurologica Scandinavica, avril 2006

[5] [La science est concluante : les masques n’empêchent PAS la transmission des virus](#), 26 mai 2020, article initialement paru en anglais sur le site ResearchGate, écrit par le Dr Denis Rancourt, PhD, consultable ici : [Masks Don’t Work: A Review of Science Relevant to COVID-19 Social Policy](#)

[6] [Widely used surgical masks are putting health care workers at serious risk](#), 28 avril 2020

[7] [Effectiveness of Surgical and Cotton Masks in Blocking SARS-CoV-2 : A Controlled Comparison in 4 Patients](#), Ann Intern Med, 6 avril 2020

[8] [Nouveau coronavirus \(2019-nCov\) : conseils au grand public – Quand et comment utiliser un masque](#), WHO, mise à jour le 17 juin 2020, PDF téléchargeable : Conseils sur le port du masque dans le cadre de la COVID-19.

[9] [Masques et gants, fausse bonne idée contre le virus](#), 17 March 2020, False good idea against the virus, on the Le Télégramme website. In the face of the spread of the coronavirus, masks and gloves have almost become a trend, “just in case”. But for the general population, wearing them is not necessarily effective, and may even encourage contamination, warn experts.

[10] [Danemark : ce pays qui ne croit pas aux masques](#), 7 May 2020 on the website Le Point.fr. The Danish government advises against wearing them and epidemiologists are so unconvinced of their usefulness that they have launched a study on the subject

[11] [It is Time to Address Airborne Transmission of COVID-19](#), par Lidia Morawska et Donald K Milton, 2020, Published by Oxford University Press for the Infectious Diseases Society of America.

[12] [Déconfinement dans le sud de l’Italie : 1000 euros d’amende pour non-respect du port du masque en lieu clos](#)

[13] [Les amendes « corona » de 250 euros vont-elles pleuvoir ? Le ministre annonce un durcissement](#)

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