

Flying Pigs Saga Continued: WHO admits no Deadly Mutation of the 2009 H1N1 Swine Flu

By [F. William Engdahl](#)

Global Research, January 01, 2021
29 September 2009

Theme: [Science and Medicine](#)
In-depth Report: [THE H1N1 SWINE FLU PANDEMIC](#)

Alleged Mutation of the **H1N1 virus**, then in 2009 and now in 2020-2021 with the **SARS-2-CoV virus**.

This article was first published on September 29, 2009.

*The World Health Organization, the UN agency (ir-)responsible for declaring a Phase 6 "PANDEMIC" global alert over what it calls H1N1 Influenza A or Swine Flu, whose chief Dr Margaret Chan has repeatedly warned that while Swine Flu to date had been rather mild, **that the emergency declaration was necessary because it "could mutate" aggressively** into a deadly pandemic killing millions, now admits well into the flu season in the Northern Hemisphere that H1N1 has apparently not mutated.*

Margaret Chan, the head of the World Health Organization, at a meeting with health officials in her native Hong Kong, has just stated that the swine flu virus has not yet mutated into a more deadly strain. WHO Director of the Initiative for Vaccine Research, Dr Marie-Paule Kieny, reinforced that statement in a press conference September 24 in Geneva when she stated, "we are lucky that the pandemic is moderate in severity that most people experience a mild illness and recover spontaneously." That means recovery with no vaccination, no Tamiflu or other dangerous "antiviral" drugs. Just with letting nature take its course.

Last summer, when the WHO decided to declare a global "pandemic emergency" over what it called the **H1N1 Influenza A global spread**, it also announced in a notice buried among its press releases that most countries had stopped testing ill populations for H1N1, and that the WHO therefore simply arbitrarily "assumed" all patients with a stated set of symptoms were automatically H1N1 victims. So the H1N1 pandemic case counts, to quote the WHO, "no longer reflect actual disease activity."

The symptoms the WHO listed as indication that a patient has H1N1? A fever, cough, sore throat, headache... in short, all the symptoms of a common cold. The pandemic declaration by the agency entrusted by the UN with monitoring and guarding the world's health came anyway, on recommendation of the WHO's "experts," the Strategic Advisory Group of Experts, or SAGE.

However, even though the WHO admits it is not testing patients for H1N1 around the world, they also state that the H1N1 "pandemic virus" is becoming more common than the common seasonal flu virus. A simple question in the interest of accuracy: How in hell's

blazes do they know that if they stopped testing around the world? Gut feeling? WHO's "intuition" that everyone who has a fever, cough, headache and or sore throat around the world automatically must have H1N1? The alarming aspect of this entire charade is that it will likely have severe health consequences for millions or tens of millions of some three billion people around the world targeted to get injections of largely untested so-called H1N1 Swine Flu vaccines.

Vaccines for South nations?

Equally bizarre is the fact that in her latest comments, the WHO's Chan seemed preoccupied with how to get vaccines to poorer countries mainly in the Southern Hemisphere. Yet the same WHO Strategic Advisory Group of Experts, SAGE, states on the WHO official website that H1N1 does not pose a major risk to the Southern Hemisphere.

The number of swine flu cases is now expected to rise as the Northern Hemisphere moves into winter, WHO Director-General Margaret Chan says. But she claims that the biggest challenge in combatting the pandemic would be ensuring enough vaccines got to the world's poorest countries. Three billion doses could be produced worldwide annually, enough to cover almost half the world's population, Chan said.

The WHO is working to raise a billion dollars to help buy vaccines for developing countries that cannot produce them themselves. The United States and several other countries have stated they plan to make 10 percent of their vaccine supply available to others in need. The vehicle to raise funds for the apparently not-threatened countries of the south is a public-private partnership of the WHO established in 2000, called GAVI.

Tricks with WHO death data

Another little known fact about the WHO pandemic operation which gives their dire warnings about H1N1 the necessary gravitas to scare the dickens out of pregnant women, parents and just about anybody, are the death statistics constantly cited when data on purported H1N1 cases are mentioned. As of the last report at end September 2009 the WHO claimed 3917 deaths due to H1N1 Influenza A or Swine Flu.

In most cases, even the WHO and the Atlanta US Government's CDC has been forced to admit, deaths were in patients who already had some severe respiratory disorder or grave illness when they contracted what was named H1N1 Influenza A. They never to date have offered the slightest proof that it was not those grave prior illnesses which caused death and that the flu symptoms were merely a coincident event, what epidemiologists term an "opportunistic infection."

But it gets even more interesting. The WHO, it turns out, lumps its statistics for flu deaths together with those from pneumonia, a completely separate and far more common illness and a far larger cause of death, in a disease classification it calls "Influenza and Pneumonia (J09-J18)."

So in 2007 the WHO recorded 21883 deaths attributed to "flu and pneumonia" without dividing each as to direct cause. But of those WHO classifications, flu itself only goes for symptoms in categories J09-J11. The entire rest of the categories deal with pneumonia and related lung infectious manifestations. Yet far and away the largest group of deaths from infectious diseases comes from pneumonia, not from influenza. The number of certified

deaths from “influenza virus”, with or without pneumonia complications was a far less alarming 14 persons in 2007. This clever trick allows pharmaceutical manufacturers like GlaxoSmithKline or Baxter Labs to promote their “flu” vaccines.

If we are dealing with an illness whose symptoms in the vast majority of cases are mild and disappear from itself with no medication after five or more days, and whose mortality rate is at worst infinitesimally small, there would be no need for panic, no need to line up in queues to get jabbed with untested vaccines whose contents including various adjuvants like aluminum hydroxide and nanoparticles are potentially nerve crippling or even death-causing. But then that would not be “good” for Bill Gates, David Rockefeller and other members of the Good Club, would it?

F. William Engdahl, author of [Full Spectrum Dominance: Totalitarian Democracy in the New World Order](#).

F. William Engdahl is a Research Associate of the Centre for Research on Globalization

The original source of this article is Global Research
Copyright © [F. William Engdahl](#), Global Research, 2021

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [F. William Engdahl](#)

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca
www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca