

# Scientists Warn Bird Flu Outbreak Could be 100 Times Worse Than COVID. “Weaponized Bird Flu”

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Global Research, April 10, 2024

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Theme: [Science and Medicine](#)

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***Historical concerns about the lethality of bird flu to humans have consistently proven unfounded, with no recorded deaths in the U.S. from such outbreaks, despite significant government spending and public warnings in the past***

*Recent discussions around “global biosecurity” and the potential for disease outbreaks to foster a totalitarian world government have intensified. **A weaponized bird flu could be the next major threat***

*Recent cases of bird flu affecting various mammals, including livestock and pets, suggest the virus may be adapting to new hosts, raising alarms about its potential impact on humans*

*In March 2024, the first case of bird flu in livestock was found in a goat in Minnesota. That same month, infected cows were identified in Kansas, Texas, New Mexico, Idaho and Michigan. Three cats have also reportedly died from H5N1 infection, and one individual who came into close contact with infected cows has tested positive after presenting with conjunctivitis (pink eye)*

*Current countermeasures against bird flu, such as culling infected and exposed animals, hinder the development of natural immunity. Smaller flock sizes and better management would also reduce the disease risk*

\*

**So far, every instance of fearmongering about the possibility of a lethal bird flu**

**has turned out to be false.** That's why I wrote my New York Times best-selling book "[The Great Bird Flu Hoax](#)," 15 years ago in 2009. Four years earlier, in 2005, then-President George Bush spent over \$7 billion dollars on preparations and warned that more than 2 million Americans could die.<sup>1</sup>

The reality is that no one in the U.S. died from bird flu. Not one. Annual outbreaks of bird flu were also recorded and hyped between 2014 and 2017, again with no human victims.<sup>2</sup>

Fast-forward a couple of decades, and "global biosecurity" has become one of the primary tactics chosen to usher in a totalitarian One World Government. COVID-19 was just the warmup. I've repeatedly stated that more outbreaks, be they real or imagined, are to be expected for that very reason. The only question, really, is which pathogen it will be.

## Is Weaponized Bird Flu Next?

In the spring of 2022, **Bill Gates warned that another pandemic will emerge**, and that this yet-to-come pandemic "will get attention this time."<sup>3</sup> Based on the news chatter emerging right now, a weaponized bird flu seems a possibility.

According to virologists speaking at a White House briefing, the bird flu (H5N1) has mutated to "spread more easily among mammals," and an outbreak in the human population could be "100 times worse than COVID," killing up to half of those infected.<sup>4</sup> As reported by MSN on April 3, 2024.<sup>5</sup>

"Multiple cases of the infection in a variety of mammals, including cows, cats and, more recently, humans, are all raising the risk of the virus mutating to become more transmissible ...

But others at the briefing said it was too early to panic because there were still too many unknowns about recent cases to warrant sounding the alarm. A White House representative said today it was tracking bird flu in the U.S."

A graphic by the Daily Mail purporting to illustrate how bird flu is "edging closer to human spillover" lists the following cases:<sup>6</sup>

- Mammals infected with bird flu since 2022 include fox, bobcat, striped skunk, racoon and coyote
- In March 2024, the first case of bird flu in livestock was found in a goat in Stevens County, Minnesota
- In March 2024, bird flu also sickened cow herds at two dairy farms in Kansas, three dairy farms in the Panhandle, Texas, and one in New Mexico. Unpasteurized milk samples from the sick cows also tested positive for the pathogen. According to the U.S. Department of Agriculture's Animal and Plant Health Inspection Service, bird flu has also been detected in dairy herds in Idaho<sup>7</sup> and Michigan.<sup>8</sup>

According to reports,<sup>9</sup> the bird flu strain transmitted between the cows is a new strain, "which signifies the virus could be adapting to mammalian (as opposed to avian) hosts,"

MSN writes.<sup>10</sup> Incidentally, one of the biggest changes to the H5N1 virus occurred in 2020, when the wild and domestic versions combined to create a new strain<sup>11</sup>

- In April 2024, bird flu reportedly killed three cats in Texas

By late December 2023, hundreds of elephant seals in Antarctica were also found to have perished from the infection<sup>12</sup> and mink farms across Europe were decimated that same year.<sup>13</sup> Well over half a million seabirds have also perished from the virus, according to some estimates.<sup>14</sup>

## **Current Bird Flu Countermeasures Are the Wrong Approach**

In early April 2024, the largest egg producer in the U.S., Cal-Maine Foods, Inc., also halted egg production at a Texas facility after bird flu was detected there. According to a company announcement, 1.6 million egg-laying hens were killed as a precaution, along with 337,000 pullets (3.6% of the total flock).<sup>15</sup>

But by culling animals whenever a case is detected basically guarantees that natural immunity will never develop. A far saner strategy would be to eliminate the chickens that die from the infection but keep those who survive it alive. An interesting article by regenerative farmer Joel Salatin, in which he discusses the bird flu cycle, was published by Brownstone Institute in mid-March 2023:<sup>16</sup>

“If thinking people learned only one thing from the COVID pandemic, it was that official government narratives are politically slanted and often untrue. In this latest HPAI [highly pathogenic avian influenza] outbreak, perhaps the most egregious departure from truth is the notion that the birds have died as a result of the disease and that euthanasia for survivors is the best and only option ...

To be sure, HPAI is and can be deadly, but it never kills everything. The policy of mass extermination without regard to immunity, without even researching why some birds flourish while all around are dying, is insane. The most fundamental principles of animal husbandry and breeding demand that farmers select for healthy immune systems. We farmers have been doing that for millennia ...

But in its wisdom, the US Department of Agriculture ... has no interest in selecting, protecting, and then propagating the healthy survivors. The policy is clear and simple: kill everything that ever contacted the diseased birds. The second part of the policy is also simple: find a vaccine to stop HPAI ...

The scorched earth policy is the only option even though it doesn't seem to be working. In fact, the cycles are coming faster and seem to be affecting more birds. Someone ought to question the efficacy.”

## **Bird Flu Solutions That Make Sense**

As noted by Salatin, it's well-recognized among farmers that cramped quarters and having too many chicken farms too close together, geographically, is the problem. “The USDA and

the industry desperately want to blame wild birds, backyard flocks, and dirty shoes rather than looking in the mirror and realizing this is nature's way of screaming 'Enough!'" Salatin writes.

The answer is relatively simple. Save birds that survive the infection and breed them. That way, future generations will have natural immunity. "If a flock gets HPAI, let it run its course. It'll kill the ones it'll kill but in a few days the survivors will be obvious. Keep those and put them in a breeding program," Salatin writes.

Secondly, chicken farmers can also ward off epidemics by focusing on optimal herd sizes. For example, wild turkeys stay in flocks of no more than a couple of hundred. Wild pigs rarely exceed groups of 100. For chickens, optimal herd size is about 1,000, according to Salatin. He goes on to explain:

"An elderly poultry industry scientist visited our farm once and told me that if houses would break up chickens into 1,000-bird groups it would virtually eliminate diseases.

He said it was okay to have 10,000 birds in a house as long as they were in 1,000-bird units. That way their social structure can function in a natural interaction. Animals have a hierarchy of bullies and timids. That social structure breaks down above optimal size ...

While I don't want to sound flippant or above HPAI susceptibility, incident rates definitely indicate less vulnerability in well-managed pastured flocks.

Creating an immune-building protocol surely merits research as much as overriding the immune system with vaccines and trying to stay ahead of disease mutations and adaptations with human cleverness. How about humbly seeking nature for solutions rather than relying on hubris?

The parallels between HPAI expert orthodoxy and COVID orthodoxy are too numerous to mention ... The HPAI worry feeds food worry, which makes people clamor for government security. People will accept just about anything if they're afraid ... Think it through and then embrace a more natural remedy: well-managed decentralized pastured poultry with appropriate flock sizes."

## **Second Human Case of Bird Flu in the US**

Within a week of bird flu being found in Texas dairy cows in late March 2024, a Texas resident also tested positive for the virus after coming into close contact with the infected cows. The primary symptom this person experienced was conjunctivitis (pink eye).<sup>17</sup> It's said to be the second human case of avian influenza A(H5N1) in the U.S. No human-to-human transmission has as yet been identified. Citing "federal and state health authorities investigating the outbreak," MSN reported:<sup>18</sup>

"Avian influenza A(H5N1) viruses have only rarely been transmitted from person to person ... As such, the risk to the general public is believed to be low; however, people with close contact with affected animals suspected of having avian influenza A(H5N1) have a higher risk of infection."

## Symptoms of Bird Flu Infection

According to the Texas Department of State Health Services, symptoms of bird flu infection can include:<sup>19</sup>

|                                  |  |                            |
|----------------------------------|--|----------------------------|
| <b>Cough</b>                     | <b>Sore throat</b>                                 | <b>Fever and/or chills</b> |
| <b>Runny or stuffy nose</b>      | <b>Headache</b>                                    | <b>Fatigue</b>             |
| <b>Conjunctivitis (pink eye)</b> | <b>Shortness of breath or breathing difficulty</b> | <b>Diarrhea</b>            |
| <b>Nausea and/or vomiting</b>    | <b>Seizures</b>                                    |                            |

Severe cases may progress to fulminant pneumonia, respiratory failure, acute respiratory distress syndrome, septic shock and death.

## Fingerprints of COVID Are All Over Weaponized Bird Flu

Historically, natural avian influenza (H5N1) never posed a threat to mankind, but then scientists started tinkering with it, creating a hybrid with human pandemic potential.<sup>20</sup> Some of that research has been undertaken in Pentagon-funded biolabs in Ukraine.<sup>21,22,23</sup>

Bill Gates and Dr. Anthony Fauci, former director of the National Institutes of Allergy and Infectious Diseases (NIAID), have also funded gain-of-function research on H5N1.<sup>24</sup> One scientist whose work on H5N1 has been funded by both Fauci and Gates is Dr. Yoshihiro Kawaoka.<sup>25</sup>

In one experiment, Kawaoka mixed bird flu virus with the Spanish flu virus, resulting in a highly lethal respiratory virus with human transmission capability. Kawaoka has also played around with mixtures of H5N1 and the 2009 H1N1 (swine flu) virus, creating an airborne hybrid<sup>26,27,28</sup> capable of evading the human immune system, effectively rendering humans defenseless against it,<sup>29</sup> and this extremely risky research was done at a biosafety Level 2 lab!<sup>30</sup>

Fauci also funded the work of virologist Ron Fouchier, a Dutch researcher whose team created an airborne version of the bird flu using a combination of genetic engineering and serial infection of ferrets.<sup>31</sup> So, the bird flu has been manipulated and tinkered with in a variety of different ways, making it both airborne (which it was not initially) and capable of cross-species infection.

In 2012, the work of Kawaoka and Fouchier sparked widespread concern about gain-of-function research, as it was readily recognized that it could accidentally cause a human pandemic.<sup>32,33</sup>

As a result, the U.S. government issued a temporary ban on gain-of-function research on

certain viruses in 2014, which remained in place until December 2017.<sup>34</sup> We now know this ban was circumvented by Fauci, who continued to fund gain-of-function research on coronaviruses in China during those years.

It now looks as though weaponized bird flu might eventually be released to achieve the geopolitical aims of the technocratic cabal that is trying to give the World Health Organization a monopoly on pandemic decision-making.

So, if we do end up with a lethal human bird flu, there's every reason to suspect it was manmade. There's also every reason to suspect a bird flu vaccine will be either ineffective, hazardous or both. Moderna launched a small human trial for an mRNA shot for avian influenza in the spring of 2023,<sup>35</sup> but results have yet to be released.

## **Inoculate Yourself Against Upcoming Fearmongering**

As we move forward, it is vitally important for you to keep an eye on the narratives we're being fed. **If bird flu becomes a human epidemic or pandemic, there are plenty of reasons to suspect it's a weaponized virus, and the "solution" offered will be the same as that for COVID-19: "Get vaccinated."**

Considering the widespread harm caused by the COVID-19 mRNA shots, can we really trust that fast-tracked bird flu shots will be any safer or more effective? Already, the U.S. and other countries are stockpiling H5N1 vaccine<sup>36</sup> "just in case," which is telling.

While some traditional vaccines are in the lineup, mRNA shots tweaked to target H5N1 are also in the pipeline,<sup>37</sup> and they probably won't need to undergo additional testing over and beyond what was already done for the COVID jabs. As reported by Reuters:<sup>38</sup>

"Some of the world's leading makers of flu vaccines say they could make hundreds of millions of bird flu shots for humans within months if a new strain of avian influenza ever jumps across the species divide ...

In a pandemic, vaccine manufacturers would shift production of seasonal flu vaccines and instead make shots tailored to the new outbreak when needed ...

Many of the potential pandemic shots are pre-approved by regulators, based on data from human trials showing the vaccines are safe and prompt an immune response, a process already used with seasonal flu vaccines.

This means they might not require further human trials, even if they have to be tweaked to better match whichever strain does jump to humans. Data on how well the vaccines actually protect against infection would be gathered in real-time ..."

To think that an mRNA-based jab against a weaponized bird flu will be any safer than the shots for COVID-19 would be naïve in the extreme, if you ask me, yet you can be sure we'll be told otherwise, if bird flu does end up spreading among the human population.

## **Be Prepared**

One of the best things I did in my youth was join the Boy Scouts. Their motto "Be Prepared"

has been enormously useful my entire life. Well, it applies to bird flu as well. While we don't know for sure, as no studies have been done, it is highly likely that many of the same protocols used in early outpatient treatment of COVID will also work for bird flu, since they are both viral respiratory pathogens.

So, as a first basic prevention step, optimize your vitamin D (the ideal range is between 60 ng/ml and 80 ng/ml). Be sure to measure it to confirm, as there is no way to know what your vitamin D level is without doing a blood test.

Summer is nearly here, so ditch your oral vitamin supplement and strip off your clothes and get out in the sun around solar noon, which is 1 p.m. for most people in the U.S. To learn more, download my "Vitamin D in the Prevention of COVID-19" report, available on [stopCOVIDcold.com](http://stopCOVIDcold.com).

In case you do get sick, I would strongly advise you to purchase a nebulizer so that you can nebulize hydrogen peroxide at first signs of symptoms. If you have not previously viewed my Hydrogen Peroxide video below and purchased all the ingredients, you must do so now. If this crisis hits and you do not have a nebulizer you could be out of luck.

More comprehensive [prevention](#) and [treatment protocols](#) can be downloaded from the Front Line COVID-19 Critical Care Alliance's (FLCCC) website, [covid19criticalcare.com](http://covid19criticalcare.com).<sup>39</sup> They also have a [treatment protocol for RSV and influenza](#). Print them out and make sure you have the basic supplements in your medicine cabinet.

## Hydrogen Peroxide Rapidly Inactivates Viruses

Hydrogen peroxide (H<sub>2</sub>O<sub>2</sub>) consists of a water molecule (H<sub>2</sub>O) with an extra oxygen atom (O<sub>2</sub>), and it is the additional oxygen atom that allows it to inactivate viral pathogens. Some of your immune cells produce hydrogen peroxide to destroy pathogens. By killing the infected cell, viral reproduction is stopped. So, hydrogen peroxide therapy aids your immune cells to perform their natural function more effectively.

Many studies have investigated the use of hydrogen peroxide against different pathogens. For example, a 2020 review<sup>40</sup> of 22 studies found that 0.5% hydrogen peroxide effectively inactivated a range of human coronaviruses, including those responsible for SARS and MERS, within one minute of exposure.

According to Brownstein, all pathogens studied to date have been found to succumb to hydrogen peroxide, albeit at varying concentrations and for different amounts of exposure.

## How to Properly Dilute the Peroxide

While you can use virtually any percentage of food grade peroxide, it's crucial to dilute it properly before use. What you want is a 0.1% dilution, so even a 3% hydrogen peroxide will need to be diluted at least 30 times.

In a pinch, you could use commercial 3% hydrogen peroxide, the stuff used for wound care, but I don't recommend routine use of it as it contains stabilizing chemicals that can detract from the benefits. Also, you want to dilute the hydrogen peroxide with hypertonic saline, not plain water, as the lack of electrolytes in the water can damage your lungs if you nebulize

that. Using saline prevents the osmotic differential that can damage lung cells.

To end up with a final peroxide/hypertonic saline solution concentration of 0.1%, you need to go through two steps:

1. Create the hypertonic saline solution
2. Dilute the peroxide

I used to recommend using normal saline, which contains 0.9% salt, but a 2021 study<sup>41</sup> found that a 1.5% sodium chloride solution (hypertonic saline) achieved a 100% inhibition of SARS-CoV-2 replication in vitro (in cell culture). Using lower levels of saline, like 1.1%, only inhibited 88%. So, I now recommend using hypertonic saline instead, which would be slightly less than double the amount of salt used to make normal saline.

To make hypertonic (1.5%) saline, simply mix 1.5 teaspoons of high-quality unprocessed salt to one pint of purified or distilled water. Stir until the salt is thoroughly dissolved. Be sure to use proper measuring spoons and not a regular kitchen teaspoon. For even greater precision, you could use a digital scale to measure out exactly 7.1 grams of salt.

If the 1.5% hypertonic solution causes nasal burning, irritation or cough, you can lower the concentration to 0.9% salt, which is isotonic normal saline. For this you would decrease the salt to one level teaspoon to one pint of water. Once you have your saline solution and a food grade hydrogen peroxide, dilute the peroxide according to the following chart, based on the concentration you're starting with.

| STARTING PEROXIDE CONCENTRATION | HYDROGEN PEROXIDE | + | SALINE SOLUTION* | = | FINAL PEROXIDE CONCENTRATION |
|---------------------------------|-------------------|---|------------------|---|------------------------------|
| 3%                              | 16 ml (1 tbsp)    | + | 1.5%             | = | <b>0.1%</b>                  |
| 12%                             | 4 ml (1 tsp)      | + | 1.5%             | = | <b>0.1%</b>                  |
| 36%                             | 1.3 ml (¼ tsp)    | + | 1.5%             | = | <b>0.1%</b>                  |

\*To make hypertonic (1.5%) saline, simply mix 1.5 teaspoons of high-quality unprocessed salt to one pint of purified or distilled water. Stir until the salt is thoroughly dissolved.

**Warning:** Food grade peroxide at concentrations of 12% and 36% should NEVER be used full-strength either topically or internally. It MUST be diluted or severe injury can occur. Your safest bet is to use 3% food grade peroxide and dilute it as indicated so you end up with a solution of 0.1%.

Once you have your peroxide-saline solution, simply pour 1 teaspoon of it into the nebulizer and inhale the entire amount. If you like, you can add one drop of 5% Lugol's iodine solution to the nebulizer as well. Some find it boosts the effects.

I recommend using nebulized peroxide for any suspected respiratory infection, and the earlier you start, the better. If you're already presenting with a runny nose or sore throat, use the nebulizer for 10 to 15 minutes four times a day until your symptoms are relieved.



You can also use nebulized hydrogen peroxide for prevention and maintenance, which may be advisable during flu season. There is no danger in doing it every day if you're frequently exposed, and there may even be additional beneficial effects, such as a rapid rise in your blood oxygen level.

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## Notes

<sup>1</sup> [A Retrospective on the Avian Flu Scare of 2005 AIER March 22, 2020](#)

<sup>2, 9, 10</sup> [MSN April 4, 2024 Bird Flu Outbreaks Popping Up](#)

<sup>3, 23</sup> [Ice Age Farmer April 8, 2022](#)

<sup>4, 5, 6, 11</sup> [MSN April 3, 2024](#)

<sup>7</sup> [USDA April 2, 2024](#)

<sup>8</sup> [Ag Daily April 1, 2024](#)

<sup>12, 14</sup> [Salon December 10, 2023](#)

<sup>13</sup> [Salon August 6, 2023](#)

<sup>15</sup> [NPR April 3, 2024](#)

<sup>16</sup> [Brownstone Institute March 14, 2023](#)

<sup>17, 18, 19</sup> [MSN April 4, 2024](#)

<sup>20</sup> [Slate December 22, 2011](#)

<sup>21, 24, 25</sup> [OCA January 4, 2023](#)

<sup>22</sup> [Youtube Ice Age Farmer](#)

<sup>26</sup> [Journal of Virology May 2009; 83\(10\): 5278-5281](#)

<sup>27, 31, 32</sup> [Cidrap June 21, 2012](#)

<sup>28</sup> [Scott McPherson February 22, 2010 \(Archived\)](#)

<sup>29, 30</sup> [Business Insider July 1, 2014](#)

<sup>33</sup> [Science May 2, 2012 \(Archived\)](#)

<sup>34</sup> [Nature December 19, 2017](#)

<sup>35</sup> [CBC March 20, 2023](#)

<sup>36</sup> [Precision Vaccination Audenz for 2022 \(Archived\)](#)

<sup>37, 38</sup> [Reuters March 20, 2023 \(Archived\)](#)

<sup>39</sup> [Covid19criticalcare.com](#)

<sup>40</sup> [J Hosp Infect. 2020 Mar;104\(3\):246-251](#)

<sup>41</sup> [ACS Pharmacol Transl Sci October 8, 2021; 4\(5\): 1514-1527](#)

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