

concerns re 2 "HPV" papers, 2012/2013

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Dear Dr. O'Sullivan,

I don't know if you would recall, but I worked with you on a couple of HPV/cancer papers in or around 2012. I was the statistician assigned to some of your projects from the Biostatistics department at Princess Margaret Hospital, University Health Network.

It has been a long time and I sincerely hope that this message finds you well.

My reason for contacting you is probably going to seem very strange, and I hope you will keep an open mind on what I am about to share with you.

Please be assured that this is not in any way intended as a criticism of you or any of our co-authors, but as an opportunity to assist with a course-correction that is long overdue in this world.

I doubt there is any way to soften this, and don't want to waste more of your time than necessary, so will get to the point.

As a result of the "covid" phenomenon that we have all been living through for almost 2 years now, I ended up, quite unexpectedly, learning some things about virology that are surprising to say the least.

During the last 1.5 years I have:

- reviewed many "virus isolation" studies (mainly studies that are purportedly about the alleged COVID-19 virus aka "SARS-COV-2", but numerous other alleged viruses as well),
- obtained and collected Freedom of Information (FOI) responses from around the world in regards to isolation/purification of "SARS-COV-2" and other alleged viruses.

Based on the above, I have discovered that:

- virology is not a science;
- virologists do not employ scientific method when alleging to have isolated or sequenced or characterized or studied a "virus";
- virologists have failed to even demonstrate the existence of the specific particles that they refer to as "viruses" (i.e. in the case of "SARS-COV-2", an alleged RNA strand of 30,000 base pairs, with a known genome, surrounded by a spiky protein shell, etc.), let alone demonstrate disease-causation;
- the methods employed by virologists when alleging to have isolated or sequenced or characterized or studied a "virus" are frankly ridiculous;
- virologists do not obtain purified samples of the particles they claim to be "viruses"; they do not characterize, sequence or study purified samples;
- instead, virologists work with patient samples and/or cell culture fluid, in other words soups of material, typically without any sort of control group, and they never perform fully controlled experiments;
- "viral genomes" are fabricated, fraudulent and correspond to nothing in the physical realm;
- virologists affix meaningless arrows pointing to particles in EM images and insist "that's the virus" but never purify and study those particles;

 virologists make wild assumptions and draw irresponsible, irrational conclusions based on anti-scientific procedures.

141 institutions (41 of them Canadian) in over 25 countries have all failed, in FOI responses or court proceedings, to provide or cite even 1 study/report, by anyone, anywhere, describing purification of the alleged "SARS-COV-2". This includes all 5 Canadian institutions that claimed to have "isolated the virus".

And, both the CDC and the Public Health Agency of Canada have both failed in FOI responses to provide or cite even 1 study/report, by anyone, anywhere, describing purification of any "HPV virus" (see attached).

There is a growing collection of FOI responses re many other alleged viruses as well; again, no records of purification.

In FOI responses from various institutions we are told that "viruses" are never purified and they have made clear that "isolation" in virology means genetic contamination of a patient sample (i.e. with fetal bovine serum and monkey kidney cells), starving the cell line and poisoning it with toxic drugs, then blaming a "virus" for the cytopathic effects that occur.

Cytopathic effects are interpreted as "isolation" of a virus and proof of "its" infectivity. I.e.

"The gold standard assay used to determine the presence of intact virus in patient samples is viral isolation in cell culture [an oxymoron]. With this assay, if virus is present in the patient sample, it will multiply and produce visible cytopathic effects, which means that infected cells demonstrate visible changes"

-- Public Health Agency of Canada

This means that no one has ever extracted genetic material from a sample of purified "virus" and sequenced IT, or characterized IT, or studied IT with controlled experiments.

In the absence of a gold standard (an actual purified sample of the alleged virus), it is impossible to validate any test. And there can be no valid publications and no science at all with regards to a "virus" that is in fact only theoretical.

The 2 HPV-related papers that I was involved in are:

Natural course of distant metastases following radiotherapy or chemoradiotherapy in HPV-related oropharyngeal cancer, and

Outcomes of HPV-related oropharyngeal cancer patients treated by radiotherapy alone using altered fractionation.

You may recall that "HPV status" was measured via a **surrogate marker**: p16INK4A (p16) staining.

I am concerned that these papers are invalid and should be retracted.

I am open to correction, if anyone is able to cite a valid study or studies proving the existence of the specific particles alleged to be "HPV virus" and that they spread disease (cancer) via natural modes of exposure.

My sincere apologies if this message has come as a shock to you, Dr. O'Sullivan.

Again, my goal is not to upset or offend or accuse you or any of our co-authors. This information came as a huge surprise to me as well, as it has to many others around the world who have been learning about virology as a result of "covid".

Best wishes, Christine Massey, M.Sc.

- CDC HPV Nov 3 PACKAGE redacted.pdf 757K
- PHAC HPV PACKAGE November 2021.pdf 753K
- Natural course of distant metastases following radiotherapy or chemoradiotherapy in HPV related.....pdf 758K
- Outcomes of HPV-related oropharyngeal cancer patients treated by radiotherapy alone using altered....pdf 469K