

Covid-19 PCR Testing is Worthless

As the New York Times finally admits.

Fri Oct 30, 2020 Jack Kerwick



While some of us who value thinking and science above politics have long known it, it seems that even the *New York Times* (and, by implication, all who equate its pronouncements with the Gospel) are beginning to realize that the much vaunted PCR test is essentially worthless.

At the very least—and this is putting it undoubtedly too generously—it is anything but “the gold standard” of COVID-19 determiners that we have been led to believe it is. In fact, it’s not even “the divining rod” that my martial arts instructor and USMC Lieutenant-Colonel Al Ridenhour (<https://protectyourself.mykajabi.com/>), who has some experience working with deadly nuclear, biological, and chemical agents, once referred to it in a conversation with me.

While some self-styled “fact-checkers”—who are invariably leftist partisans who are only interested in “fact-checking” the claims of those who dare to challenge their agenda—are accusing conservatives who repeat its assertion that the PCR test has a 90% false positive rate of “misinterpreting” the *Times* piece, there wasn’t any misinterpretation at all.

One American News Network (OANN) (<https://archive.is/C2xqr>), *The Blaze* (<https://archive.vn/Oqhyd>), *Red State* (<https://archive.vn/TBFnD>), and *Townhall Media* (<https://web.archive.org/web/20200904002731/https://townhall.com/tipsheet/bronsonstocking/2020-looks-like-a-lot-of-those-positive-covid-tests-should-have-been-negative-n2575305>) are among the sites that have come under fire for having allegedly misread *The Times*. The *Health Feedback* “fact-checker” (<https://healthfeedback.org/claimreview/misinterpreted-new-york-times-report-leads-to-false-claim-that-the-number-of-covid-19-cases-in-the-u-s-is-inflated-by-up-to-90/>) states:



“The claim that the U.S. has an inflated COVID-19 case count due to the sensitivity of the diagnostic PCR test for the virus that causes COVID-19...is a misinterpretation of a New York Times news report...[which questions whether] PCR test results for the virus that causes COVID-19 are a practical way of informing an infected person what steps they should take after their diagnosis [.]”

In other words, the “fact-checkers” at *Health Feedback* are resolved to debunk conservatives’ alleged misrepresentation of the *Times* report that up to “90% of positive COVID-19 tests should be negative [.]”

Presumably, given the take of *Health Feedback*, the PCR test is infallible: “The high number of COVID-19 cases reported in the U.S. is due to a large number of infected people, not the PCR test’s sensitivity.”

Are these conservatives guilty of the charge of “Flawed Reasoning” leveled against them by *Health Feedback*’s “fact-checkers?”

Well, the title of the *Times* piece alone, “Your Coronavirus Test is Positive. Maybe it Shouldn’t Be,” strongly suggests that the alleged conservative misinterpretation isn’t a *mis*interpretation at all. The subtitle—“The usual diagnostic tests may simply be *too sensitive* and too slow to contain the spread of the virus”—*proves* that conservatives’ characterization of the *Times*’ article couldn’t be more accurate.

The verdict is decisive: not only are the conservative commentators who *Health Feedback* convicts of “Flawed Reasoning” innocent of this charge. It is its self-proclaimed “fact-checkers” who are guilty of this and worse, namely, the inability to read a simple headline, to say nothing of an article.

This is probably uncharitable on my part, for it is more likely than not that the partisans at *Health Feedback*, not unlike their fellow ideologues who have been invested for the better part of this year in furthering the Official Narrative on “The Virus,” are quite capable of making sense of the piece under discussion. Yet, being the political animals that they are, they choose instead to engage in the crassest sophistry in the hope of explaining away what is as clear on the nose of one’s face to anyone who reads *The Times* piece.

The following passages from the report are unambiguous:

“The PCR test amplifies genetic matter from the virus in cycles; the fewer cycles required, the greater the amount of virus, or viral load, in the sample. The greater the viral load, the more likely the patient is to be contagious [.]”

The problem, however, is that the vast majority of PCR tests have a threshold of 40 cycles. Yet at this many cycles, tests “may detect not just live virus but also live fragments, leftovers from infection that pose no particular risks—akin to finding a hair in a room long after a person has left,” as Dr. Michael Mina, an epidemiologist from Harvard to whom *The Times* essay refers, puts it.

Juliet Morrison, a virologist at the University of California who is also featured in this *Times* piece, is incredulous that this high a threshold has been established for the PCR test:



“I’m shocked that people would think that 40 could represent a positive.”

Translation: If it requires 40 cycles to return a positive PCR test, it is a *false* positive and the patient tested is, in point of fact, *negative*.

The Times continues:

“A more reasonable cutoff would be 30 to 35, she [Morrison] added. Dr. Mina said he would set the figure at 30, or even less.”

Though the average person doesn’t realize it, the significance of lowering the threshold from 40 to something like what Drs. Morrison and Mina suggest is immense:

“Those changes would mean the amount of genetic material in a patient’s sample would have to be **100-fold to 1,000-fold that of the current standard for the test to return a positive result**—or at least one worth acting on” (boldfaced added).

The Times puts this in perspective:

“In Massachusetts, from **85 to 90 percent of people who tested positive** in July with a cycle threshold of 40 **would have been deemed negative** if the threshold were 30 cycles, Dr. Mina said” (boldfaced added).

But it isn’t only Massachusetts where it has been discovered that up to 90% of people who tested positive for COVID should have tested negative.

“In three sets of testing data that include cycle thresholds, compiled by officials in Massachusetts, New York and Nevada, up to 90 percent of people testing positive carried barely any virus [.]”

What this means is that whatever “the new number of recorded coronavirus cases” Big Media breathlessly reports upon, it’s eminently reasonable to conclude that the real number is about one-tenth of it.

“On Thursday, the United States recorded 45,604 new coronavirus cases...If the rates of contagiousness in Massachusetts and New York were to apply nationwide, then perhaps **only 4,500 of those people** may actually need to isolate and submit to contact tracing” (boldface added).

In other words, only 4,500 people *should have* tested positive.

The Times informs us that “Dr. Mina and other researchers are questioning the use of PCR tests as a frontline diagnostic tool.”

Go figure.

Health Feedback is representative of the left in accusing those who listen to them and quote back to them their own words of having misconstrued them.

As should now be obvious, the PCR test, as “Dr. Mina and other researchers” are *now* admitting, is basically worthless as far as the purpose for which it is designed—the detection of an infectious virus—is concerned. Up to 90% of those who have tested positive for COVID-19 should not have tested positive. This means that, for practical purposes, they were negative.



This is what the *New York Times* revealed in its report, despite the intellectual contortions of leftist “fact-checkers” to explain this away.

