

Title	HOW DO THEY ACTUALLY TEST FOR BIRD FLU?
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Article Text

OCTOBER 28, 2005. Recently, I have been writing about testing for bird flu. As in, ARE THE TESTS ANY GOOD? ARE THEY DONE CORRECTLY? ARE THEY USEFUL? ARE THEY REALLY IDENTIFYING AN ILLNESS CALLED BIRD FLU? IS THIS JUST ANOTHER HOAX?

I've pointed out that testing for antibodies to a germ is not good enough, and that such testing is, in fact, deceiving, BECAUSE ANTIBODIES ARE NORMALLY A SIGN THAT THE BODY HAS SUCCESSFULLY WARDED OFF A GERM. IN OTHER WORDS, HAVING ANTIBODIES TO A GERM IS NOT A SIGN OF PAST OR PRESENT OR FUTURE ILLNESS.

I'll be a little more specific. Antibodies are like scouts for the immune system. They are part of the body's overall effort to bring a germ under control. A vaccine, for example, PRODUCES ANTIBODIES TO A GERM. (Of course, there are many dangers associated with vaccines, but the IDEA of a vaccine is that it produces antibodies. So conventional medical authorities would say that the arising of antibodies in the body is a GOOD thing.)

However, about 20 years ago, for no good reason, all this science was turned on its head. Suddenly, everybody began testing for antibodies, and if antibodies were found, the conclusion was reached: the person is sick or he will get sick.

There is another way to test people. You actually ISOLATE AND IDENTIFY THE GERM IN QUESTION. You do it directly. (Even then, there are other questions to ask, but I won't take that up here.)

So naturally, when all the hysteria started coming down the pipeline about bird flu and the H5N1 strain of that virus, I wondered how doctors and researchers WERE DOING THE TESTS. By and large, were they isolating the H5N1 virus directly, or were they off on another ridiculous goofball hunt for antibodies?

I'm talking about tests run on both animals and humans.

And I had another question. If they were actually isolating the H5N1 virus, were they figuring out HOW MUCH OF THAT VIRUS WAS IN THE BODY OF A PARTICULAR ANIMAL OR HUMAN?

Why did I ask that? Because you need millions and millions and millions of an active germ in a body before you can even begin to wonder whether that germ is contributing to illness.

I knew, for example, that the famous PCR test was often used to take tiny possible gene fragments of a germ and amplify them, blow them up into something that could be seen. From this test--- wrongly applied---many scientists have inferred that a specific germ was present in great numbers and was causing disease---but what they ignored was this: the PCR test was not giving them

ACTUAL numbers of a germ present in the body. The PCR test was giving them an amplification AFTER the tiny fragments were taken out of the body.

I decided to search for articles that would give us an idea about how tests for bird flu (H5N1) were being done. I'm presenting you a sprinkle here. You'll get the idea. You'll see how blithely medical professionals assume that the presence of antibodies to H5N1 is A VERY OMINOUS INDICATOR OF DISEASE---when in fact antibodies mean no such thing. Antibodies all by themselves mean nothing about actual illness. They do not point to illness. Okay.

Here we go: H5N1 Antibodies in Poultry Workers in India Recombinomics Commentary May 11, 2005 >> But virus isolation and sequencing has not been attempted in India, as there is a lack of such a secure bio-safety facility, said Dr A C Mishra, director of the National Institute of Virology, Pune..... Indian researcher Dr Nalini Ramamurthy, director of The King Institute of Preventive Medicine, Chennai said their group chanced upon these three cases of "sero-positivity" in a poultry farm in Kattangalathur, about 45 km south of Chennai, while routinely monitoring the human population for influenza antibodies. All the three who show positivity have never travelled overseas nor is any poultry imported into India from regions where epidemics have occurred-East Asia-so a native exposure to the virus is the only alternative, she says.

<< The finding of H5N1 antibodies in poultry workers in India is cause for concern. Since the positive serum was collected in 2002, the current situation in India is unknown. Prior to 2002, the only reported human cases of H5N1 infection were in Hong Kong in 1997. The evolution of H5N1 has been significant since 1997, and the only reported recent cases of infection have been in Vietnam and Thailand, other than low titer antibody detected in Japan in workers who were sanitizing a heavily infected farm in 2004. More screening for antibody in more recent serum collections from poultry workers would help define the current situation.... end of excerpt Wow.

This all ABOUT ANTIBODY TESTING. That's what they're talking about. They're not trying to find the virus directly at all. Boom. Useless non-science. USELESS. Okay.

Here is next article excerpt: Commentary H5N1 Bird Flu False Negatives In Indonesia Recombinomics Commentary September 29, 2005 ...The initial familial cluster involved three fatalities. All three fatalities were clearly due to H5N1 infection, but only one tested positive for H5N1 by PCR. The failure to detect H5N1 in the other two fatalities was simply due to the improper collection of samples... end of excerpt

What do we have here? Three human deaths in Indonesia attributed to bird flu (H5N1). Only one tested positive, and the test was the PCR, which, as I pointed out above, is completely unreliable for this purpose, because it doesn't give any sort of picture of how many H5N1 germs are really in a body. USELESS.

Here is the next one: 1: J Clin Microbiol. 1999 Apr;37(4):937-43. Detection of antibody to avian influenza A (H5N1) virus in human serum by using a combination of serologic assays. Rowe T, Abernathy RA, Hu-Primmer J, Thompson WW, Lu X, Lim W, Fukuda K, Cox NJ, Katz JM. Influenza Branch, Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases, Centers for Disease Control and Prevention, Atlanta, Georgia 30333, USA. From May to December 1997, 18 cases of mild to severe respiratory illness caused by avian influenza A (H5N1) viruses were identified in Hong Kong. The emergence of an avian virus in the human population prompted an epidemiological investigation to determine the extent of human-to-human transmission of the virus and risk factors associated with infection. The hemagglutination inhibition (HI) assay, the standard method for serologic detection of influenza virus infection in humans, has been shown to be less sensitive for the detection of antibodies induced by avian influenza viruses. Therefore, we developed a more sensitive microneutralization assay to detect antibodies to avian influenza in humans. Direct comparison of an HI assay and the microneutralization assay demonstrated that the

latter was substantially more sensitive in detecting human antibodies to H5N1 virus in infected individuals. An H5-specific indirect enzyme-linked immunosorbent assay (ELISA) was also established to test children's sera. The sensitivity and specificity of the microneutralization assay were compared with those of an H5-specific indirect ELISA. When combined with a confirmatory H5-specific Western blot test, the specificities of both assays were improved. Maximum sensitivity (80%) and specificity (96%) for the detection of anti-H5 antibody in adults aged 18 to 59 years were achieved by using the microneutralization assay combined with Western blotting. Maximum sensitivity (100%) and specificity (100%) in detecting anti-H5 antibody in sera obtained from children less than 15 years of age were achieved by using ELISA combined with Western blotting. This new test algorithm is being used for the seroepidemiologic investigations of the avian H5N1 influenza outbreak. end of excerpt This one was ALL ABOUT various methods for finding antibodies. That's all it was about. Totally off-track and useless. USELESS.

Here is the next one: First avian flu case Centers for Disease Control serology test preliminary results Saturday, December 27, 1997 [CDC report] Antibody to influenza A H5N1 virus was found in nine blood samples out of 502 tested in relation to the first avian flu case detected in Hong Kong. The antibody to the virus was detected mainly among poultry workers and people directly exposed to the virus. The results, based on studies related to the first avian flu case in a human, suggested that the main mode of H5N1 transmission was from bird-to-human. Analysis of the viral genes shows that they are avian in nature without evidence of re-assortment with human influenza virus genes. end of excerpt In this instance, again, the antibody test was used. Useless.

Also, there was some sort of analysis done of the "viral genes" present in the bodies of the people tested. These genes were found to be "avian in nature." Two points here. There is no mention that the genes found in the humans were specifically from H5N1. That probably means they weren't. Or that the researchers just don't know. And second, there is no mention of how many H5N1 viruses, if any, were found in the bodies of the humans tested. Useless. Completely useless.

Here is the next one: Friday, June 24, 2005 [from a thoughtful site called Effect Measure] How much H5N1 infection in Vietnam? A nagging question about H5N1 infection in Vietnam is whether there is considerably more mild, clinically undetected or inapparent infection than accounted for by only considering the most seriously ill cases admitted to the hospital. Since the most seriously ill are the tip of the iceberg in most human viral diseases this is a plausible concern. Its significance would be that there is more transmission of the virus either from poultry to humans or from human to human than has been conceded at present. Equivocal evidence to suggest this has apparently been obtained by a joint Vietnamese-Canadian research team working in Hanoi. Using a method called a Western blot, the researchers tested hundreds of stored blood samples to see if they showed evidence of antibodies to H5N1. Rumors are that "scores of samples came back positive." As a consequence Vietnam asked for international assistance: A team of international influenza experts is in Hanoi, at the invitation of the Vietnamese government, to investigate worrisome signs the avian flu virus known as H5N1 may be adapting in ways that may make it more likely to spark an influenza pandemic, the World Health Organization has confirmed.... end of excerpt Again, we're talking about nothing more than antibody testing. Astounding. USELESS.

Here's the next one: Cohort studies on avian flu [a release from the government of Hong Kong] November 13, 1998 Results of three cohort studies conducted among healthcare workers on the risk of influenza A H5N1 (avian flu) infection tied in with preliminary investigation and observations of the Department of Health (DH) during the occurrence of the avian flu cases in Hong Kong last year that man-to-man transmission may have occurred but is inefficient. DH's Consultant (Community Medicine), Dr Mak Kwok-hang, said today (Friday) that the primary mode of transmission of H5N1 infection is believed to be from poultry to man; most likely through contact with the faeces of poultry. There is no evidence that H5N1 infection is transmitted to man from raw, chilled or frozen poultry foods. "Infection control measures, like washing hands and the use of masks is effective in reducing the chance of man-to-man transmission." He noted that the

preventive measures implemented in the past 10 months had proved to be effective in preventing H5N1 in Hong Kong. "No new avian flu cases had occurred in Hong Kong since December 29, 1997 after a number of measures, including chicken slaughter, were taken to stamp out the virus." On the cohort studies, Dr Mak said they were conducted in hospital settings and aimed at comparing the prevalence of influenza A (H5N1) antibody among healthcare workers exposed to H5N1 case-patients with the prevalence among non-exposed healthcare workers. They covered 547 healthcare workers in three hospitals in Hong Kong with influenza A (H5N1) infected case-patients and one Hong Kong hospital with no known cases... end of except Once again, it's all about useless antibody testing. USELESS.

Here is the last one. This is about pigs, and it's just a quote from a Google entry about a published study. The study citation is Choi et al; J Virol 2005; 79: 10821-10825. Here is the Google entry: Of the 3175 pig sera tested, 8 (0.25%) were positive for avian H5N1 ... sera that gave positive reactions in the H5N1 virus-neutralizing antibody test... end Google entry More antibody testing. Worthless. Are you starting to get a clue? Major antibody testing---everywhere---and from THAT, all sorts of meaningless inferences about avian flu spreading...and FROM THAT, all sorts of dire predictions about a coming pandemic. It's a house of cards. It's based on nothing. Science? Are you kidding? JON RAPPOPORT www.nomorefakenews.com