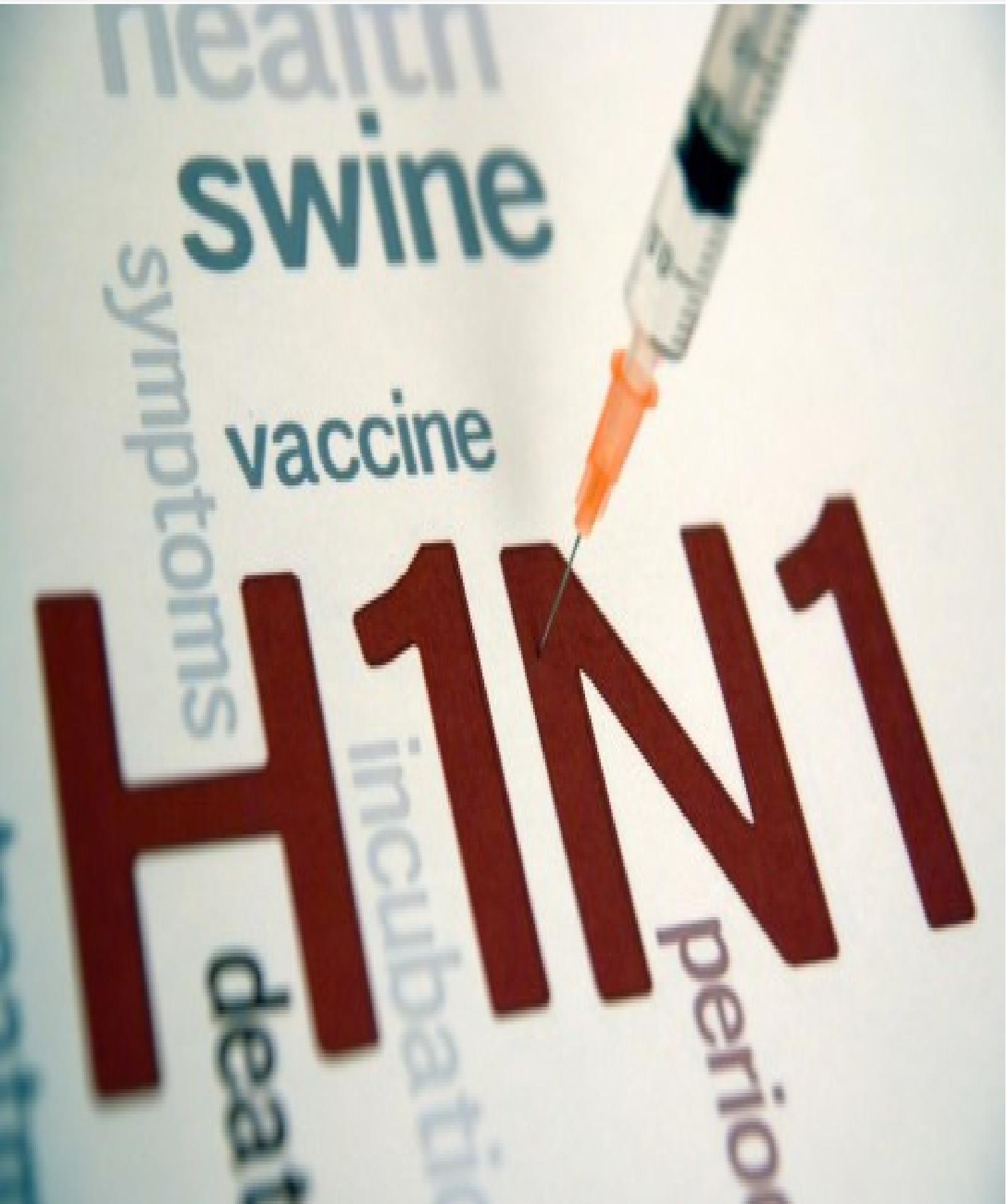


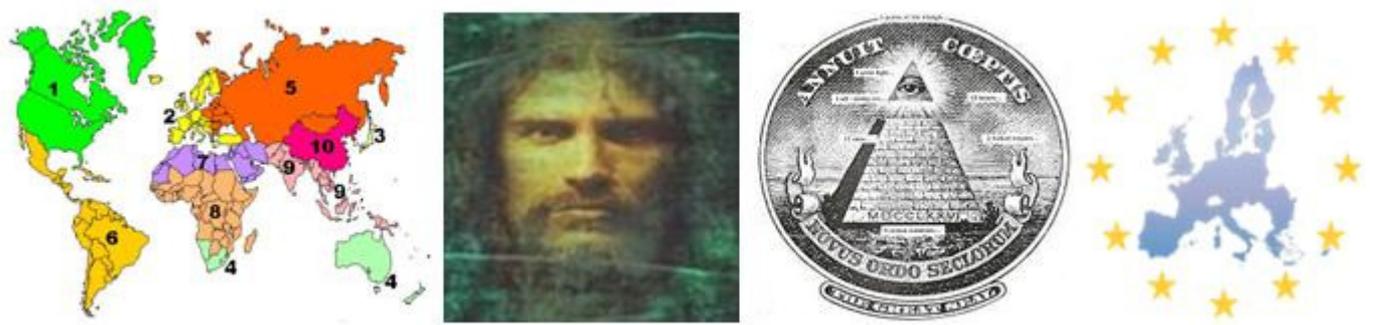
# Global Watch Weekly Report

A Weekly Global Watch Media Publication ([www.globalreport2010.com](http://www.globalreport2010.com))

September 28th, 2012



# Global Watch Weekly Report



“The Number one weekly report which provides concrete evidence of a New World Order & One World Government agenda”

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# Global Watch Weekly Report

## Welcome to the Global Watch Weekly Report

In 2009 the message was clear – we are all going to die from swine flu. It spreads fast, it is dangerous, and it must be feared – says the World Health Organization (WHO). But worry not – there is a way to save yourself. Just get a flu shot – and purchase a remedy for the deadly virus. Those are the instructions from the WHO.

However, the WHO soon found itself coughing up explanations, as more and more scientists and health researchers, and even journalists, started to question the organization's motives behind raising the alert so quickly.

According to the Danish Daily Information newspaper, the WHO and pharmaceutical companies were suffering from the profit bug. Or, to put it simply, the chief health care organization in the world had teamed up with the drug makers to create a phantom monster – and to rake in cash by selling a remedy for it.

Plastered all over the front pages and headlines news, swine flu made its triumphant entrance into limelight, heralded as the next “in” virus, which threatened to bring an end to humanity as we know it.

Danish journalists research also concluded in accusations that the WHO, and scientists who appear to be independent are, were in fact, on pharmaceutical companies' payroll.

Many point out that the WHO declared the status of pandemic when only a few thousand people were infected with it – something that is highly illogical, considering the hundred thousand more cases of seasonal flu never gets paid such high attention.

The virus was reported to be extremely deadly. Parallels were drawn to the Spanish Flu, which killed roughly 50 million people worldwide in the span of six months.

As panic spread, people rushed to clinics for Tamiflu – \$145 a pop and by prescription only in the US – and for vaccinations, which range anywhere from \$10 to \$50. And despite the fact that many have lost their jobs in the financial crisis, and were left without health insurance, vaccinations and pharmaceutical sales skyrocketed. Nobody wants to die a grisly death from the supposedly new virus.

This weeks edition takes a look back at possibly one of the most controversial so called “pandemics” of all time.

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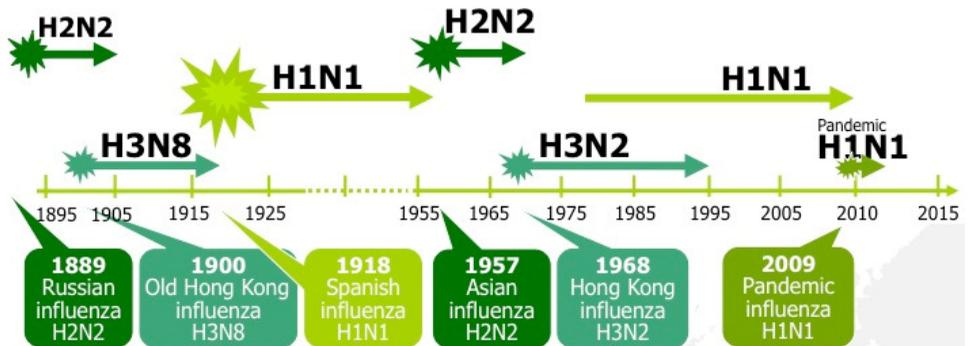
# THE SWINE FLU CONTROVERSY

“A total population of 250-300 million people, a 95% decline from present levels, would be ideal.” Ted Turner, founder of CNN and major UN donor

In 2009, a new influenza strain, the new A-influenza H1N1 strain, was raging across the world. The influenza, which allegedly originated in Mexico, spread rapidly, from Mexico to the US, Europe, New Zealand, Asia, Russia, the Arab world.

## Pandemics of influenza

Recorded human pandemic influenza  
(early sub-types inferred)



## Recorded new avian influenzas



Reproduced and adapted (2009) with permission of Dr Masato Tashiro, Director, Center for Influenza Virus Research, National Institute of Infectious Diseases (NIID), Japan.

Animated slide: Press space bar 3

Initially, the flu strain was called swine flu, but because humans were infected by the swine virus and it is unpleasant for people to say they have the ‘swine flu’, and because the World Health Organization (WHO) claimed it had originated in Mexico, it was decided to rename it and call it the Mexican flu. By April 28, the flu had ‘already’ led to 159 fatalities, according to official channels, including the World Health Organization,

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not only in Mexico, but in other countries as well, although numbers there were low. Soon, the casualty numbers turned out to be wrong, due to misinformation and incorrect counting. Rather than causing the demise of 159 people, the Mexican flu had claimed the lives of only seven. In addition, they did not die as a result of the flu, but of underlying conditions.

The wheels of the WHO, governments and health councils were in full motion. The 'real flu wave' could come in the autumn or winter of 2009, when the virus would have mutated and be many times more dangerous. Feelings of fear were encouraged and governments were promoting inoculation campaigns.



On April 29, 2009, Margaret Chan, the director-general of the WHO, talked about a 'moderately serious pandemic'. Several days later, she declared alert level 5. On May 18, she expressed grave concerns about the impending pandemic. She pointed out that the world should be grateful that the leaders of the 194 countries had signed the

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International Health Regulations (IHR) of the Constitution of the WHO and its objectives from a shared sense of responsibility.

According to articles 21 and 22 of this agreement, which came into force in June of 2007, the director-general of the WHO has the right to declare an international state of health emergence, in which case it can be decided to impose quarantine, travel limitations and 'forced' inoculation. All the countries that have signed the WHO agreement are obliged to carry out its decisions.

On the basis of 'scientific criteria', Margaret Chan declared in a conference on June 11, 2009, that she has decided to go from alert level 5 to alert level 6:

"The world is now at the beginning of the 2009 influenza pandemic."

Chussodovsky in *Martial Law and the Militarization of Public Health: The world-wide H1N1 Flu Vaccination Program*.

Alert level 6 indicates that it is now certain that there is an animal or animal-human virus that is transmitted between humans all over the world, especially through the air (which explains the many respiratory ailments).

The new strain of influenza could be compared to the ordinary seasonal flu.

"The Mexican flu is less dangerous than the normal flu," Telegraph of July 27, 2009.

according to the French professor Bernard Debré, who accuses the WHO of deliberately creating a panic.

In July 2009, reports appear in the Western media that claimed that up to

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two billion people could be infected in the next two years, about a third of the world's population! The pharmaceutical company Baxter and other pharmaceutical companies, like Sanofi-Aventis, GlaxoKlineSmith (GSK), Novartis and Gilead- Sciences, assured the WHO that they would be able to produce a vaccine quickly. Instead of the customary 26 weeks, it would take them only 13 weeks. It appears that the entire pharmaceutical sector was ready to come to the rescue of mankind way before alert level 6 was declared.



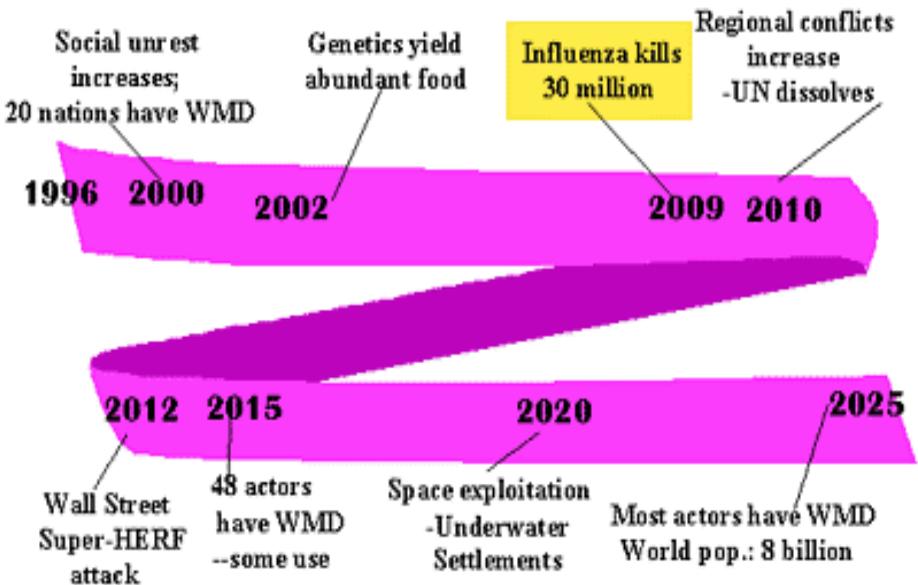
Baxter International, for example, had applied for a patent for the H1N1 vaccine as early as August 28, 2008. The patent for the H1N1 vaccine that was published in March 2009, a month before the virus was released in Mexico, was filed seven months before the 'new strain' officially made its appearance! Surely one of the most blatant set-ups one could ever imagine.

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In reality, at the time, the H1N1 strain of the flu had not been isolated with an electron microscope by the WHO or any CDC (Centre for Disease Control) and was still mutating. This, of course, begs the question as to what possible protection the vaccines, which cost billions of dollars, provided against a mutating virus, the structure of which is not even fully known.

## US AIRFORCE 2025 RESEARCH REPORT

Air Force 2025 is a military study that was carried out by high-ranking colonels, lieutenant colonels and majors, which was published on June 17, 1996. It was commissioned by the chief staff of the American air force to examine concepts, possibilities and technologies the United States needs to maintain hegemony in the air and outer space in the future.



In Chapter 5 of the report, a timeline is included that represents a 'possible history'. Parallels are drawn with the 1918-1919 Spanish flu

## THE SWINE FLU CONTROVERSY

epidemic which, it is estimated, killed ‘over 20 million people worldwide’.

A footnote informs:

“In that sense, the influenza virus is unique among viruses, in that it is able to undergo that much anti-genetic modification that an anti-genetically new virus can rage across the world in a year or two, causing high levels of casual- ties.”

The ‘source’ of this fictitious pandemic is listed in this report as ‘unknown’.

Could it be possible to trace this ‘unknown’ source that is mentioned in the ‘Air- force 2025 research report’? In that case, the ‘unknown source’ may have had prior knowledge in June of 1996 about a new virus that now appears to manifest itself.

Many fear that the Mexican flu was the product of bio-engineering. There is a lot of evidence to support this idea. For example, the H1N1 virus contains element from three continents and four different bird, swine and human flu strains. Evolutionary speaking, this is impossible. Everything points to the suggestion that the H1N1 virus is a manufactured entity.

According to Désirée L. Röver, a medical research journalist,

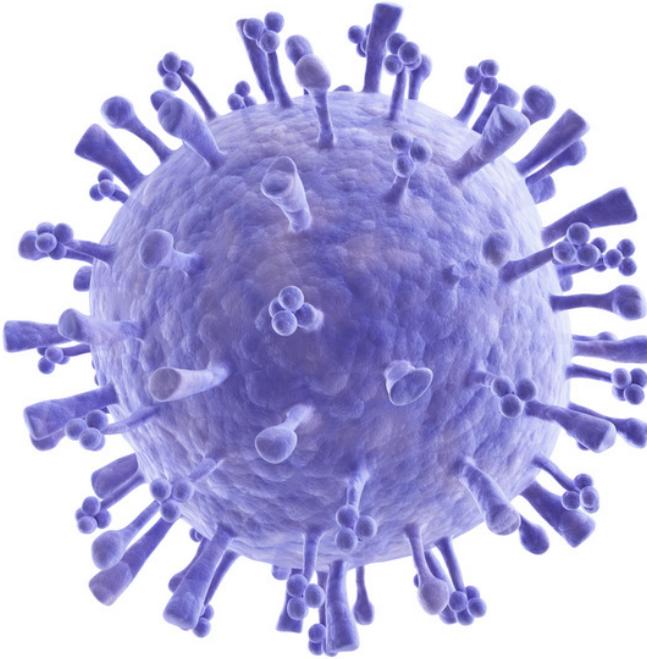
“Just as it happened in 1918, soon the (forced) vaccinations – based on WHO virus material - will signal the start of a pandemic that is aimed specifically at ‘clearing’ a large portion of the current global population.”

If we look read them through the eyes of the Devil’s advocate, there are two WHO documents from 1972 that contain the detailed recipe, cloaked in scientific jargon, for using vaccines as ‘weapons of mass destruction’. It is a strategy that has three separate phases.

# THE SWINE FLU CONTROVERSY

## PHASE 1. TAKE OUT THE IMMUNE SYSTEM

*This scenario is implemented by administering different, widely distributed vaccinations with varying components. The global population has been inoculated with a wide range of vaccines that are supposed to protect us from a host of diseases. In reality, these vaccines take out the immune system.*



## PHASE 2. INTRODUCE VIRUSES IN EVERY CELL OF THE BODY

*It turns out that vaccines contain all kinds of toxic substances that consist of bacterial and viral elements in a water or salt solution with a tissue fixative (formaldehyde, aluminium phosphate, aluminium hydroxide) and a conserving agent (thiomersal, or thimerosal, which contains mercury). Worldwide, thiomersal is associated with, among other things, autism, heart diseases, hyperactivity and nerve conditions. On July 30,*

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*2009, the Washington Post reported that the vaccine for the mexican flu contains thiomersal (mercury!) and squalene, which is associated, among other things, with the so-called Gulf War Syndrome.*

*Dr. Sherri Tenpenny, an international expert on vaccines, warns us of the high number of toxins in vaccines: the conserving agent Polysorbate 80 (trademark Tween 80), which can cause various strong allergic reactions, and the antibiotic Gentamycine. The new influenza vaccine of Novartis contains MF59, which is based on oil and contains, among other things, squalene and Tween 80. Rats who are injected with MF59 become paralyzed from the waste down.*

### PHASE 3. TURN UP THE IMMUNE SYSTEM FULL BLAST AND CREATE A CYTOKINE STORM:

*A cytokine storm causes the body to be attacked by its own immune system. Anti-bodies attack the body tissue, causing patients to drown in their own blood, like they did in 1918 (Spanish flu).*

*EXAMPLE: After the American population had been forcefully inoculated with the whooping cough vaccine in 1915 (phase 1), soldiers were administered the typhus vaccine (along with other vaccines) (phase 2). Nobody know which other germs were included in the vaccine (viruses were unknown at the time). When they ar- rived in Spain, the American troops were exposed to gases based on arsenic and chloride (phase 3).*

*Possible modern ways of switching the immune system back on completely and create an avalanche of aggressive cells (cytokine storm) are:*

- 1. specific substances in food, drinking water and/or chemtrails;*
- 2. signals from FM radio and digital television (S-quad technologies);*
- 3. electromagnetic pulses from UMTS towers and/or satellites. These*

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*technologies are currently available and operational.*

*We are told that vaccines do not contain 'living viruses' and we are only inoculated with 'lifeless' broken virus particles (and other substances). Nevertheless, living bird flu viruses mixed with human seasonal flu viruses, like the H5N1 virus, have been discovered in vaccines developed by one of Baxter International's companies. This is the fuse in the powder keg! Combined with the H3N2 virus, this is simply a lethal biological weapon, because such a virus, unlike the H5N1 virus, is airborne.*

*Baxter is only one of the companies involved in the profitable pandemic business that was given the 'seed virus', which was selected carefully for maximum virulence, by the WHO. Other manufacturers of the current experimental pandemic vaccines include GlaxoSmithKline, SanofiPasteur and Novartis.*

*Worldwide, the pharmaceutical industry is politically protected from any form of responsibility in case of any negative effects as a result of vaccination for the Mexican flu.*

## THE SWINE FLU CONTROVERSY

### PATENTS: 'Vaccines' against Mexican Flu

(6025182) Method for producing a virus from an African green monkey kidney cell line.

(6117667) Method for producing an adapted virus population from an African green monkey kidney cell line.

(5911998) Method of producing a virus vaccine from an African green monkey kidney cell line.

(5646033) African green monkey kidney cell lines useful for maintaining viruses and for preparation of viral vaccines.

### BAXTER VACCINE PATENT Application US 2009/0060950 A1

“In particular preferred embodiments the composition or vaccine comprises more than one antigen ... such as influenza A and influenza B in particular selected from one or more of the human H1N1, H2N2, H3N2, H5N1, H7N7, H1N2, H9N2, H7N2, H7N3, H10N7 subtypes, of the pig flu H1N1, H1N2, H3N1 and H3N2 subtypes, of the dog or horse flu H7N7, H3N8 subtypes or of the avian H5N1, H7N2, H1N7, H7N3, H13N6, H5N9, H11N6, H3N8, H9N2, H5N2, H4N8, H10N7, H2N2, H8N4, H14N5, H6N5, H12N5 subtypes.”

“Suitable adjuvants can be selected from mineral gels, aluminium hydroxide, surface active substances, lysolecithin, pluronic polyols, polyanions or oil emulsions such as water in oil or oil in water, or a combination thereof. Of course, the selection of the adjuvant depends on the intended use. E.g. toxicity may depend on the destined subject organism and can vary from no toxicity to high toxicity.”