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To: Sandra Taylor
Case Manager
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Manchester M13 9WL

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Dear Sandra

You state in your letter (attached) that it is routine practice to test for hiv whenever hiv prevalence is more than 2 in 1000 population, but the point I was making is that no test has ever been manufactured that is able to test for live hiv virus in the human body. The so-called antibody tests that you use all carry disclaimers, and the reason for this is that the manufacturers know full well that they are unable to pinpoint hiv, simply because there is no gold standard, and correct me if I am wrong, but I think that this means that hiv has never been isolated, never been purified, and never been found in the human body. If it had, then clearly, there would be no need for non-specific antibody tests that cross-react with anything and everything, whose results depend on the interpretation of a laboratory technician who will be trying to make sense out of the senseless, who will also be deeply entrenched in grand assumptions and entrenched beliefs.

What you need, is a test that can pinpoint live virus hiv in the human body, but as we all know, there is no test. From what I have been able to ascertain, and I may be right, I may be wrong, but no one, not even the two co-discoverers (Gallo and Montagnier) have been able to achieve this. This is why your hiv testing, or any hospital or doctor who uses these tests, are not practicing good medicine. It is nothing more than bad science, and that is certainly not good science. As a hospital, you need a philosophy, you need a standard of medical ethics, and you need to apply yourselves to good science, as this should then translate into good medicine. May I say that when you do this, then I have a great deal of praise for you as you do perform miracles when this is the case, but when you revert to bad science, then bad medicine will surely follow, and sadly, this is the history of hiv/aids, and it is not a pretty story.

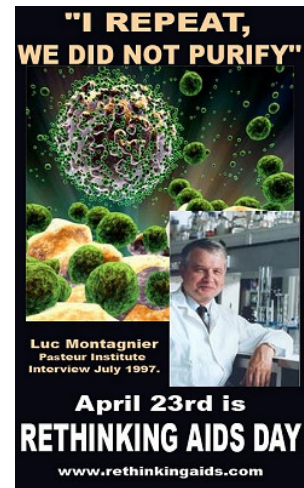
"No particle of HIV has ever been obtained pure, free of contaminants; nor has a complete piece of HIV RNA (or the transcribed DNA) ever been proved to exist." (Continuum Sept./Oct. 1996)

Dr. Stefan Lanka: Virologist, Germany.

<http://www.virusmyth.com/aids/data2/citations.htm>

Moreover, you need to be honest with not only your patients, but also with yourselves, and state clearly that a hiv antibody test, when positive, is not 'hiv positive'. It is more likely to mean that a person is 'non-specific antibody positive'. You must then figure out what that means, if indeed it means anything. It may be good news, because your immune system is working as it should, or it may be that your system is going through some kind of stress, but the results of a non-specific antibody test should not be confused with so-called hiv, because it is well known that these tests cross-react with endless medical conditions.

Look at it this way, a patient is having an operation in the Manchester Royal, and the doctor tells the patient beforehand that the science he is using is a fraud, that he does not understand the test results, that they all carry a disclaimer, and that when he performs surgery, he will be wearing a blindfold, and also that the medications that he will be prescribing are long term and toxic. Now with respect, I do not think that the patient will be feeling too happy with this doctor or the hospital. But it is no different concerning hiv testing, and if you could see this, then perhaps you would have reservations in what you are doing.



"The HIV-causes-AIDS dogma represents the grandest and perhaps the most morally destructive fraud that has ever been perpetrated on young men and women of the Western world." (Sunday Times (London) 3 April 1994)

Dr. Charles Thomas, former Professor of Biochemistry, Harvard and John Hopkins Universities
<http://www.virusmyth.com/aids/controversy.htm>

You may justify these tests by stating that poverty-stricken countries are suffering a mass pandemic of aids and it is a terrible thing. But look at the facts, there is no money in these countries to test for so-called hiv, and so the end result is that we guess; the tests are a fraud in any case, and all we have done is thrown away the word 'poverty', and replaced it with aids. In reality, a better idea would be to address any corruption in politics that may be causing the poverty, and to also address clean drinking water and the issue of nourishment.

I do not know the amount of wasted money that you are throwing down the drain on hiv, but this should be used for other more essential services in your hospital. Are you able to tell me how much this is costing, how much funding and resources that you are throwing into the waste bin on a test that is completely meaningless? I would guess not, but please pass this letter onto the relevant area and we shall see if I ever receive a response that is able to justify what your hospital is doing. I believe that there is no justification whatsoever apart from your hospital is jumping on the hiv/aids bandwagon for its own political ends.

Neither of the "HIV-antibody" tests - the Elisa or the Western Blot - has ever been properly validated, which means that no one knows what their results mean. The tests are chemical reactions to antigens, which are substances that provoke an immune response. Many dozens of conditions can produce a positive result on these tests, including drug abuse, flu vaccinations, past infection with malaria, pregnancy, and liver disease. Nevertheless, physicians still use these worthless tests, assume that positive results mean HIV infection, and give their patients doom-diagnoses of "HIV-positive" or "AIDS".

AIDS: A Death Cult' by John Lauritsen
<http://www.whale.to/w/quotes.html>

Yours faithfully
John Wantling