How did Fauci memory-hole a cure for AIDS and get away with it?

By Helen Buyniski

Over 700,000 Americans have died of AIDS since 1981, with the disease claiming some 42.3 million victims worldwide. While an HIV diagnosis is no longer considered a certain death sentence, the disease looms large in the public imagination and in public health funding, with contemporary treatments running into thousands of dollars per patient annually.

But was there a cure for AIDS all this time – an affordable and safe treatment that was ruthlessly suppressed and attacked by the US public health bureaucracy and its agents? Could this have saved millions of lives and billions of dollars spent on AZT, ddI and failed HIV vaccine trials? What could possibly justify the decision to disappear a safe and effective approach down the memory hole?

The inventor of the cure, Gary Null, already had several decades of experience creating healing protocols for physicians to help patients not responding well to conventional treatments by the time AIDS was officially defined in 1981. Null, a registered dietitian and board-certified nutritionist with a PhD in human nutrition and public health science, was a senior research fellow and Director of Anti-Aging Medicine at the Institute of Applied Biology for 36 years and has published over 950 papers, conducting groundbreaking experiments in reversing biological aging as confirmed with DNA methylation testing. Additionally, Null is a multi-award-winning documentary filmmaker, bestselling author, and investigative journalist whose work exposing crimes against humanity over the last 50 years has highlighted abuses by Big Pharma, the military-industrial complex, the financial industry, and the permanent government stay-behind networks that have come to be known as the Deep State.

Null was contacted in 1974 by Dr. Stephen Caiazza, a physician working with a subculture of gay men in New York living the so-called “fast track” lifestyle, an extreme manifestation of the gay liberation movement that began with the Stonewall riots. Defined by rampant sexual promiscuity and copious use of illegal and prescription drugs, including heavy antibiotic use for a cornucopia of sexually-transmitted diseases, the fast-track never included more than about two percent of gay men, though these dominated many of the bathhouses and clubs that defined gay nightlife in the era.

These patients had become seriously ill as a result of their indulgence, generally arriving at the clinic with multiple STDs including cytomegalovirus and several types of herpes and hepatitis, along with candida overgrowth, nutritional deficiencies, gut issues, and recurring pneumonia. Every week for the next 10 years, Null would counsel two or

three of these men – a total of 800 patients – on how to detoxify their bodies and de-stress their lives, tracking their progress with Caiazza and the other providers at weekly feedback meetings that he credits with allowing the team to quickly evaluate which treatments were most effective. He observed that it only took about two years on the "fast track" for a healthy young person to begin seeing muscle loss and the recurrent, lingering opportunistic infections that would later come to be associated with AIDS – while those willing to commit to a healthier lifestyle could regain their health in about a year.

It was with this background that Null established the Tri-State Healing Center in Manhattan in 1980, staffing the facility with what would eventually run to 22 certified health professionals to offer safe, natural, and effective low- and no-cost treatments to thousands of patients with HIV and AIDS-defining conditions. Null and his staff used variations of the protocols he had perfected with Caiazza's patients, a multifactorial patient-tailored approach that included high-dose vitamin C drips, intravenous ozone therapy, juicing and nutritional improvements and supplementation, aspects of homeopathy and naturopathy with some Traditional Chinese Medicine and Ayurvedic practices. Additional services offered on-site included acupuncture and holistic dentistry, while peer support groups were also held at the facility so that patients could find community and a positive environment, healing their minds and spirits while they healed their bodies.

"Instead of trying to kill the virus with antiretroviral pharmaceuticals designed to stop viral replication before it kills patients, we focused on what benefits could be gained by building up the patients' natural immunity and restoring biochemical integrity so the body could fight for itself," Null wrote in a 2014 article describing the philosophy behind the Center's approach, which was wholly at odds with the pharmaceutical model.[1]

Patients were comprehensively tested every week, with any "recovery" defined solely by the labs, which documented AIDS patient after patient – 1,200 of them – returning to good health and reversing their debilitating conditions. Null claims to have never lost an AIDS patient in the Center's care, even as the death toll for the disease – and its pharmaceutical standard of care AZT – reached an all-time high in the early 1990s. Eight patients who had opted for a more intensive course of treatment – visiting the Center six days a week rather than one – actually sero-deconverted, with repeated subsequent testing showing no trace of HIV in their bodies.

As an experienced clinical researcher himself, Null recognized that any claims made by the Center would be massively scrutinized, challenging as they did the prevailing scientific consensus that AIDS was an incurable, terminal illness. He freely gave his

protocols to any medical practitioner who asked, understanding that his own work could be considered scientifically valid only if others could replicate it under the same conditions. After weeks of daily observational visits to the Center, Dr. Robert Cathcart took the protocols back to San Francisco, where he excitedly reported that patients were no longer dying in his care.

Null's own colleague at the Institute of Applied Biology, senior research fellow Elana Avram, set up IV drip rooms at the Institute and used his intensive protocols to sero-deconvert 10 patients over a two-year period. While the experiment had been conducted in secret, as the Institute had been funded by Big Pharma since its inception half a century earlier, Avram had hoped she would be able to publish a journal article to further publicize Null's protocols and potentially help AIDS patients, who were still dying at incredibly high rates thanks to Burroughs Wellcome's noxious but profitable AZT. But as she would later explain in a 2019 letter to Null, their groundbreaking research never made it into print – despite meticulous documentation of their successes – because the Institute's director and board feared their pharmaceutical benefactors would withdraw the funding on which they depended, given that Null's protocols did not involve any patentable or otherwise profitable drugs. When Avram approached them about publication, the board vetoed the idea, arguing that it would "draw negative attention because [the work] was contrary to standard drug treatments." With no real point in continuing experiments along those lines without institutional support and no hope of obtaining funding from elsewhere, the department she had created specifically for these experiments shut down after a two-year followup with her test subjects – all of whom remained alive and healthy – was completed.[2]

While the Center was receiving regular visits by this time from medical professionals and, increasingly, black celebrities like Stokely Carmichael and Isaac Hayes, who would occasionally perform for the patients, the news was spreading by word of mouth alone – not a single media outlet had dared to document the clinic that was curing AIDS patients for free. Instead, they gave airtime to Anthony Fauci, director of the National Institute of Allergies and Infectious Diseases, who had for years been spreading baseless, hysteria-fueling claims about HIV and AIDS to any news outlet that would put him on. His claim that children could contract the virus from "ordinary household conduct" with an infected relative proved so outrageous he had to walk it back,[3] and he never really stopped insisting the deadly plague associated with gays and drug users was about to explode like a nuclear bomb among the law-abiding heterosexual population. Fauci by this time controlled all government science funding through NIAID, and his zero-tolerance approach to dissent on the HIV/AIDS front had already seen prominent scientists like virologist Peter Duesberg stripped of the resources they needed for their

work because they had dared to question his commandment: *There is no cause of AIDS but HIV, and AZT is its treatment*. Even the AIDS activist groups, which by then had been coopted by Big Pharma and essentially reduced to astroturfing for the toxic failed chemotherapy drug AZT backed by the institutional might of Fauci's NIAID,[4] didn't seem to want to hear that there was a cure. Unconcerned with the irrationality of denouncing the man touting his free AIDS cure as an "AIDS denier," they warned journalists that platforming Null or anyone else rejecting the mainstream medical line would be met with organized demands for their firing.

Determined to breach the institutional iron curtain and get his message to the masses, Null and his team staged a press conference in New York, inviting scientists and doctors from around the world to share their research on alternative approaches to HIV and AIDS in 1993. To emphasize the sound scientific basis of the Center's protocols and encourage guests to adopt them into their own practices, Null printed out thousands of abstracts in support of each nutrient and treatment being used. However, despite over 7,000 invitations sent three times to major media, government figures, scientists, and activists, almost none of the intended audience members showed up. Over 100 AIDS patients and their doctors, whose charts exhaustively documented their improvements using natural and nontoxic modalities over the preceding 12 months, gave filmed testimonials, declaring that the feared disease was no longer a death sentence, but the conference had effectively been silenced. Bill Tatum, publisher of the Amsterdam News, suggested Null and his patients would find a more welcoming audience in his home neighborhood of Harlem – specifically, its iconic Apollo Theatre. For three nights, the theater was packed to capacity. Hit especially hard by the epidemic and distrustful of a medical system that had only recently stopped being openly racist (the Tuskegee syphilis experiment only ended in 1972), black Americans, at least, did not seem to care what Anthony Fauci would do if he found out they were investigating alternatives to AZT and death.

PBS journalist Tony Brown, having obtained a copy of the video of patient testimonials from the failed press conference, was among a handful of black journalists who began visiting the Center to investigate the legitimacy of Null's claims. Satisfied they had something significant to offer his audience, Brown invited eight patients – along with Null himself – onto his program over the course of several episodes to discuss the work.

It was the first time these protocols had received any attention in the media, despite Null having released nearly two dozen articles and multiple documentaries on the subject by that time. A typical patient on one program, Al, a recovered IV drug user who was diagnosed with AIDS at age 32, described how he "panicked," saw a doctor and started taking AZT despite his misgivings – only to be forced to discontinue the drug after just a

few weeks due to his condition deteriorating rapidly. Researching alternatives brought him to Null, and after six months of “detoxing [his] lifestyle,” he observed his initial symptoms – swollen lymph nodes and weight loss – begin to reverse, culminating with sero-deconversion. On Bill McCreary’s Channel 5 program, a married couple diagnosed with HIV described how they watched their T-cell counts increase as they cut out sugar, caffeine, smoking, and drinking and began eating a healthy diet. They also saw the virus leave their bodies.

For HIV-positive viewers surrounded by fear and negativity, watching healthy-looking, cheerful “AIDS patients” detail their recovery while Null backed up their claims with charts must have been balm for the soul. But the TV programs were also a form of outreach to the medical community, with patients’ charts always on hand to convince skeptics the cure was scientifically valid. Null brought patients’ charts to every program, urging them to keep an open mind: “Other physicians and public health officials should know that there’s good science in the alternative perspective. It may not be a therapy that they’re familiar with, because they’re just not trained in it, but if the results are positive, and you can document them…” He challenged doubters to send in charts from their own sero-deconverted patients on AZT, and volunteered to debate proponents of the orthodox treatment paradigm – though the NIH and WHO both refused to participate in such a debate on Tony Brown’s Journal, following Fauci’s directive prohibiting engagement with forbidden ideas.

Aside from those few TV programs and Null’s own films, suppression of Null’s AIDS cure beyond word of mouth was total. The 2021 documentary *The Cost of Denial*, produced by the Society for Independent Journalists, tells the story of the Tri-State Healing Center and the medical paradigm that sought to destroy it, lamenting the loss of the lives that might have been saved in a more enlightened society. Nurse practitioner Luanne Pennesi, who treated many of the AIDS patients at the Center, speculated in the film that the refusal by the scientific establishment and AIDS activists to accept their successes was financially motivated. “It was as if they didn’t want this information to get out. Understand that our healthcare system as we know it is a corporation, it’s a corporate model, and it’s about generating revenue. My concern was that maybe they couldn’t generate enough revenue from these natural approaches.”[5]

Funding was certainly the main disciplinary tool Fauci’s NIAID used to keep the scientific community in line. Despite the massive community interest in the work being done at the Center, no foundation or institution would defy Fauci and risk getting itself blacklisted, leaving Null to continue funding the operation out of his pocket with the profits from book sales. After 15 years, he left the Center in 1995, convinced the

mainstream model had so thoroughly been institutionalized that there was no chance of overthrowing it. He has continued to counsel patients and advocate for a reappraisal of the HIV=AIDS hypothesis and its pharmaceutical treatments, highlighting the deeply flawed science underpinning the model of the disease espoused by the scientific establishment in 39 articles, six documentaries and a 700-page textbook on AIDS, but the Center's achievements have been effectively memory-holed by Fauci's multi-billion-dollar propaganda apparatus.

FRUIT OF THE POISONOUS TREE

To understand just how much of a threat Null's work was to the HIV/AIDS establishment, it is instructive to revisit the 1984 paper, published by Dr. Robert Gallo of the National Cancer Institute, that established HIV as the sole cause of AIDS. The CDC's official recognition of AIDS in 1981 had done little to quell the mounting public panic over the mysterious illness afflicting gay men in the US, as the agency had effectively admitted it had no idea what was causing them to sicken and die. As years passed with no progress determining the causative agent of the plague, activist groups like Gay Men's Health Crisis disrupted public events and threatened further mass civil disobedience as they excoriated the NIH for its sluggish allocation of government science funding to uncovering the cause of the "gay cancer."[6] When Gallo published his paper declaring that the retrovirus we now know as HIV was the sole "probable" cause of AIDS, its simple, single-factor hypothesis was the answer to the scientific establishment's prayers. This was particularly true for Fauci, as the NIAID chief was able to claim the hot new disease as his agency's own domain in what has been described as a "dramatic confrontation" with his rival Sam Broder at the National Cancer Institute. After all, Fauci pointed out, Gallo's findings – presented by Health and Human Services Secretary Margaret Heckler as if they were gospel truth before any other scientists had had a chance to inspect them, never mind conduct a full peer review – clearly classified AIDS as an infectious disease, and not a cancer like the Kaposi's sarcoma which was at the time its most visible manifestation. Money and media attention began pouring in, even as funding for the investigation of other potential causes of AIDS dried up. Having already patented a diagnostic test for "his" retrovirus before introducing it to the world, Gallo was poised for a financial windfall, while Fauci was busily leveraging the discovery into full bureaucratic empire of the US scientific apparatus.

While it would serve as the sole basis for all US government-backed AIDS research to follow – quickly turning Gallo into the most-cited scientist in the world during the 1980s,[7] Gallo's "discovery" of HIV was deeply problematic. The sample that yielded the

momentous discovery actually belonged to Prof. Luc Montagnier of the French Institut Pasteur, a fact Gallo finally admitted in 1991, four years after a lawsuit from the French government challenged his patent on the HIV antibody test, forcing the US government to negotiate a hasty profit-sharing agreement between Gallo's and Montagnier's labs. That lawsuit triggered a cascade of official investigations into scientific misconduct by Gallo, and evidence submitted during one of these probes, unearthed in 2008 by journalist Janine Roberts, revealed a much deeper problem with the seminal "discovery." While Gallo's co-author, Mikulas Popovic, had concluded after numerous experiments with the French samples that the virus they contained was not the cause of AIDS, Gallo had drastically altered the paper's conclusion, scribbling his notes in the margins, and submitted it for publication to the journal *Science* without informing his co-author.

After Roberts shared her discovery with contacts in the scientific community, 37 scientific experts wrote to the journal demanding that Gallo's career-defining HIV paper be retracted from *Science* for lacking scientific integrity.[8] Their call, backed by an endorsement from the 2,600-member scientific organization Rethinking AIDS, was ignored by the publication and by the rest of mainstream science despite – or perhaps because of – its profound implications.

That 2008 letter, addressed to *Science* editor-in-chief Bruce Alberts and copied to American Association for the Advancement of Science CEO Alan Leshner, is worth reproducing here in its entirety, as it utterly dismantles Gallo's hypothesis – and with them the entire *HIV is the sole cause of AIDS* dogma upon which the contemporary medical model of the disease rests:

On May 4, 1984 your journal published four papers by a group led by Dr. Robert Gallo. We are writing to express our serious concerns with regard to the integrity and veracity of the lead paper among these four of which Dr. Mikulas Popovic is the lead author.[1] The other three are also of concern because they rely upon the conclusions of the lead paper .[2][3][4]

In the early 1990s, several highly critical reports on the research underlying these papers were produced as a result of governmental inquiries working under the supervision of scientists nominated by the National Academy of Sciences and the Institute of Medicine. The Office of Research Integrity of the US Department of Health and Human Services concluded that the lead paper was "fraught with false and erroneous statements," and that the "ORI believes that the careless and unacceptable keeping of research records…reflects irresponsible laboratory management that has

permanently impaired the ability to retrace the important steps taken."[5] Further, a Congressional Subcommittee on Oversight and Investigations led by US Representative John D. Dingell of Michigan produced a staff report on the papers which contains scathing criticisms of their integrity.[6]

Despite the publically available record of challenges to their veracity, these papers have remained uncorrected and continue to be part of the scientific record.

What prompts our communication today is the recent revelation of an astonishing number of previously unreported deletions and unjustified alterations made by Gallo to the lead paper. There are several documents originating from Gallo's laboratory that, while available for some time, have only recently been fully analyzed. These include a draft of the lead paper typewritten by Popovic which contains handwritten changes made to it by Gallo.[7] This draft was the key evidence used in the above described inquiries to establish that Gallo had concealed his laboratory's use of a cell culture sample (known as LAV) which it received from the Institut Pasteur.

These earlier inquiries verified that the typed manuscript draft was produced by Popovic who had carried out the recorded experiment while his laboratory chief, Gallo, was in Europe and that, upon his return, Gallo changed the document by hand a few days before it was submitted to Science on March 30, 1984. According to the ORI investigation, "Dr. Gallo systematically rewrote the manuscript for what would become a renowned LTCB [Gallo's laboratory at the National Cancer Institute] paper."[5]

This document provided the important evidence that established the basis for awarding Dr. Luc Montagnier and Dr. Francoise Barré-Sinoussi the 2008 Nobel Prize in Medicine for the discovery of the AIDS virus by proving it was their samples of LAV that Popovic used in his key experiment. The draft reveals that Popovic had forthrightly admitted using the French samples of LAV renamed as Gallo's virus, HTLV-III, and that Gallo had deleted this admission, concealing their use of LAV.

However, it has not been previously reported that on page three of this same document Gallo had also deleted Popovic's unambiguous statement that, "Despite intensive research efforts, the causative agent of AIDS has not yet been identified," replacing it in the published paper with a statement that said practically the opposite, namely, "That a retrovirus of the HTLV family might be an etiologic agent of AIDS was suggested by the findings."

It is clear that the rest of Popovic's typed paper is entirely consistent with his statement that the cause of AIDS had not been found, despite his use of the French LAV. Popovic's final conclusion was that the culture he produced "provides the possibility" for detailed studies. He claimed to have achieved nothing more. At no point in his paper did Popovic attempt to prove that any virus caused AIDS, and it is evident that Gallo concealed these key elements in Popovic's experimental findings.

It is astonishing now to discover these unreported changes to such a seminal document. We can only assume that Gallo's alterations of Popovic's conclusions were not highlighted by earlier inquiries because the focus at the time was on establishing that the sample used by Gallo's lab came from Montagnier and was not independently collected by Gallo. In fact, the only attention paid to the deletions made by Gallo pertains to his effort to hide the identity of the sample. The questions of whether Gallo and Popovic's research proved that LAV or any other virus was the cause of AIDS were clearly not considered.

Related to these questions are other long overlooked documents that merit your attention. One of these is a letter from Dr. Matthew A. Gonda, then Head of the Electron Microscopy Laboratory at the National Cancer Institute, which is addressed to Popovic, copied to Gallo and dated just four days prior to Gallo's submission to Science.[8] In this letter, Gonda remarks on samples he had been sent for imaging because "Dr Gallo wanted these micrographs for publication because they contain HTLV." He states, "I do not believe any of the particles photographed are of HTLV-I, II or III." According to Gonda, one sample contained cellular debris, while another had no particles near the size of a retrovirus. Despite Gonda's clearly worded statement, Science published on May 4, 1984 papers attributed to Gallo et al with micrographs attributed to Gonda and described unequivocally as HTLV-III.

In another letter by Gallo, dated one day before he submitted his papers to Science, Gallo states, "It's extremely rare to find fresh cells [from AIDS patients] expressing the virus… cell culture seems to be necessary to induce virus," a statement which raises the possibility he was working with a laboratory artifact. [9]

Included here are copies of these documents and links to the same. The very serious flaws they reveal in the preparation of the lead paper published in your journal in 1984 prompts our request that this paper be withdrawn. It appears that key experimental findings have been concealed. We further request that the three associated papers published on the same date also be withdrawn as they depend on the accuracy of this paper.

For the scientific record to be reliable, it is vital that papers shown to be flawed, or falsified be retracted. Because a very public record now exists showing that the Gallo papers drew unjustified conclusions, their withdrawal from Science is all the more important to maintain integrity. Future researchers must also understand they cannot rely on the 1984 Gallo papers for statements about HIV and AIDS, and all authors of papers that previously relied on this set of four papers should have the opportunity to consider whether their own conclusions are weakened by these revelations.

Gallo's handwritten revision, submitted without his colleague's knowledge despite multiple experiments that failed to support the new conclusion, was the sole foundation for the HIV=AIDS hypothesis. Had *Science* published the manuscript the way Popovic had typed it, there would be no AIDS "pandemic" – merely small clusters of people with AIDS. Without a viral hypothesis backing the development of expensive and deadly pharmaceuticals, would Fauci have allowed these patients to learn about the cure that existed all along?

Faced with a potential rebellion, Fauci marshaled the full resources under his control to squelch the publication of the investigations into Gallo and restrict any discussion of competing hypotheses in the scientific and mainstream press, which had been running virus-scare stories full-time since 1984. The effect was total, according to biochemist Dr. Kary Mullis, inventor of the polymerase chain reaction (PCR) procedure. In a 2009 interview, Mullis recalled his own shock when he attempted to unearth the experimental basis for the HIV=AIDS hypothesis. Despite his extensive inquiry into the literature, "there wasn't a scientific reference…[that] said 'here's how come we know that HIV is the probable cause of AIDS.' There was nothing out there like that."[9] This yawning void at the core of HIV/AIDS "science" turned him into a strident critic of AIDS dogma – and those views made him persona non grata where the scientific press was concerned, suddenly unable to publish a single paper despite having won the Nobel Prize for his invention of the PCR test just weeks before.[10]

DISSENT BECOMES "DENIAL"

While many of those who dissent from the orthodox HIV=AIDS view believe HIV plays a role in the development of AIDS, they point to lifestyle and other co-factors as being equally if not more important. Individuals who test positive for HIV can live for decades in perfect health – so long as they don't take AZT or the other toxic antivirals fast-tracked by Fauci's NIAID – but those who developed full-blown AIDS generally engaged in highly risky behaviors like extreme promiscuity and prodigious drug abuse, contracting STDs they took large quantities of antibiotics to treat, further running down their immune systems. While AIDS was largely portrayed as a "gay disease," it was only the "fast track" gays, hooking up with dozens of partners nightly in sex marathons fueled

by “poppers” (nitrate inhalants notorious for their own devastating effects on the immune system), who became sick. Kaposi’s sarcoma, one of the original AIDS-defining conditions, was widespread among poppers-using gay men, but never appeared among IV drug users or hemophiliacs, the other two main risk groups during the early years of the epidemic. Even Robert Gallo himself, at a 1994 conference on poppers held by the National Institute on Drug Abuse, would admit that the previously-rare form of skin cancer surging among gay men was not primarily caused by HIV – and that it was immune stimulation, rather than suppression, that was likely responsible.[11] Similarly, IV drug users are often riddled with opportunistic infections as their habit depresses the immune system and their focus on maintaining their addiction means that healthier habits – like good nutrition and even basic hygiene – fall by the wayside.

Supporting the call for revising the HIV=AIDS hypothesis to include co-factors is the fact that the mass heterosexual outbreaks long predicted by Fauci and his ilk in seemingly every country on Earth have failed to materialize, except – supposedly – in Africa, where the diagnostic standard for AIDS differs dramatically from those of the West. Given the prohibitively high cost of HIV testing for poor African nations, the WHO in 1985 crafted a diagnostic loophole that became known as the “Bangui definition,” allowing medical professionals to diagnose AIDS in the absence of a test using just clinical symptoms: high fever, persistent cough, at least 30 days of diarrhea, and the loss of 10% of one’s body weight within two months. Often suffering from malnutrition and without access to clean drinking water, many of the inhabitants of sub-Saharan Africa fit the bill, especially when the WHO added tuberculosis to the list of AIDS-defining illnesses in 1993 – a move which may be responsible for as many as one half of African “AIDS” cases, according to journalist Christine Johnson. The WHO’s former Chief of Global HIV Surveillance, James Chin, acknowledged their manipulation of statistics, but stressed that it was the entire AIDS industry – not just his organization – perpetrating the fraud. “There’s the saying that, if you knew what sausages are made of, most people would hesitate to sort of eat them, because they wouldn’t like what’s in it. And if you knew how HIV/AIDS numbers are cooked, or made up, you would use them with extreme caution,” Chin told an interviewer in 2009.[12]

With infected numbers stubbornly remaining constant in the US despite Fauci’s fearmongering projections of the looming heterosexually-transmitted plague, the CDC in 1993 broadened its definition of AIDS to include asymptomatic (that is, healthy) HIV-positive people with low T-cell counts – an absurd criteria given that an individual’s T-cell count can fluctuate by hundreds within a single day. As a result, the number of “AIDS cases” in the US immediately doubled. Supervised by Fauci, the NIAID had been quietly piling on diseases into the “AIDS-related” category for years, bloating the

list from just two conditions – pneumocystis carinii pneumonia and Kaposi's sarcoma – to 30 so fast it raised eyebrows among some of science's leading lights. Deeming the entire process "bizarre" and unprecedented, Kary Mullis wondered aloud why no one had called the AIDS establishment out: "There's something wrong here. And it's got to be financial."[13]

Indeed, an early CDC public relations campaign was exposed by the Wall Street Journal in 1987 as having deliberately mischaracterized AIDS as a threat to the entire population so as to garner increased public and private funding for what was very much a niche issue, with the risk to average heterosexuals from a single act of sex "smaller than the risk of ever getting hit by lightning." Ironically, the ads, which sought to humanize AIDS patients in an era when few Americans knew anyone with the disease and more than half the adult population thought infected people should be forced to carry cards warning of their status, could be seen as a reaction to the fear tactics deployed by Fauci early on.[14]

It's hard to tell where fraud ends and incompetence begins with Gallo's HIV antibody test. Much like Covid-19 would become a "pandemic of testing," with murder victims and motorcycle crashes lumped into "Covid deaths" thanks to over-sensitized PCR tests that yielded as many as 90% false positives,[15] HIV testing is fraught with false positives – and unlike with Covid-19, most people who hear they are HIV-positive still believe they are receiving a death sentence. Due to the difficulty of isolating HIV itself from human samples, the most common diagnostic tests, ELISA and the Western Blot, are designed to detect not the virus but antibodies to it, upending the traditional medical understanding that the presence of antibodies indicates only exposure – and often that the body has actually vanquished the pathogen. Patients are known to test positive for HIV antibodies in the absence of the virus due to at least 70 other conditions, including hepatitis, lupus, rheumatoid arthritis, syphilis, recent vaccination or even pregnancy. (https://www.chcfl.org/diseases-that-can-cause-a-false-positive-hiv-test/) Positive results are often followed up with a PCR "viral load" test, even though the inventor of the PCR technique Kary Mullis famously condemned its misuse as a tool for diagnosing infection. Packaging inserts for all three tests warn the user that they cannot be reliably used to diagnose HIV.[16] The ELISA HIV antibody test explicitly states: "At present there is no recognized standard for establishing the presence and absence of HIV antibody in human blood."[17]

That the public remains largely unaware of these and other massive holes in the supposedly airtight HIV=AIDS=DEATH paradigm is a testament to Fauci's multi-layered control of the press. Like the writers of the Great Barrington Declaration and other Covid-19 dissidents, scientists who question HIV/AIDS dogma have been brutally

punished for their heresy, no matter how prestigious their prior standing in the field and no matter how much evidence they have for their own claims. In 1987, the year the FDA's approval of AZT made AIDS the most profitable epidemic yet (a dubious designation Covid-19 has since surpassed), Fauci made it clearer than ever that scientific inquiry and debate – the basis of the scientific method – would no longer be welcome in the American public health sector, eliminating retrovirologist Peter Duesberg, then one of the most prominent opponents of the HIV=AIDS hypothesis, from the scientific conversation with a professional disemboweling that would make a cartel hitman blush. Duesberg had just eviscerated Gallo's 1984 HIV paper with an article of his own in the journal *Cancer Research*, pointing out that retroviruses had never before been found to cause a single disease in humans – let alone 30 AIDS-defining diseases.

Rather than allow Gallo or any of the other scientists in his camp to respond to the challenge, Fauci waged a scorched-earth campaign against Duesberg, who had until then been one of the most highly regarded researchers in his field. Every research grant he requested was denied; every media appearance was canceled or preempted. The University of California at Berkeley, unable to fully fire him due to tenure, took away his lab, his graduate students, and the rest of his funding. The few colleagues who dared speak up for him in public were also attacked, while enemies and opportunists were encouraged to slander Duesberg at the conferences he was barred from attending and in the journals that would no longer publish his replies. When Duesberg was summoned to the White House later that year by then-President Ronald Reagan to debate Fauci on the origins of AIDS, Fauci convinced the president to cancel, allegedly pulling rank on the Commander-in-Chief with an accusation that the "White House was interfering in scientific matters that belonged to the NIH and the Office of Science and Technology Assessment." After seven years of this treatment, Duesberg was contacted by NIH official Stephen O'Brien and offered an escape from professional purgatory. He could have "everything back," he was told, and shown a manuscript of a scientific paper – apparently commissioned by the editor of the journal *Nature* – "HIV Causes AIDS: Koch's Postulates Fulfilled" with his own name listed alongside O'Brien's as an author.[18] His refusal to take the bribe effectively guaranteed the epithet "AIDS denier" will appear on his tombstone.

The character assassination of Duesberg became a template that would be deployed to great effectiveness wherever Fauci encountered dissent – never debate, only demonize, deplatform and destroy.

Even Luc Montagnier, the real discoverer of HIV, soon found himself on the wrong side of the Fauci machine. With his 1990 declaration that "the HIV virus [by itself] is harmless and passive, a benign virus," Montagnier began distancing himself from Gallo's fraud,

effectively placing a target on his own back. In a 1995 interview, he elaborated: “four factors that have come together to account for the sudden epidemic [of AIDS]: HIV presence, immune hyper-activation, increased sexually transmitted disease incidence, sexual behavior changes and other behavioral changes” such as drug use, poor nutrition and stress – all of which he said had to occur “essentially simultaneously” for HIV to be transmitted, creating the modern epidemic. Like the professionals at the Tri-State Healing Center, Montagnier advocated for the use of antioxidants like vitamin C and N-acetyl cysteine, naming oxidative stress as a critical factor in the progression from HIV to AIDS.[19] When Montagnier died in 2022, Fauci’s media mouthpieces sneered that the scientist (who was awarded the Nobel Prize in 2008 for his discovery of HIV, despite his flagging faith in that discovery’s significance) “started espousing views devoid of a scientific basis” in the late 2000s, leading him to be “shunned by the scientific community.”[20] In a particularly egregious jab, the Washington Post’s obit sings the praises of Robert Gallo, implying it was the American scientist who really should have won the Nobel for HIV, while dismissing as “unlikely” Montagnier’s later theory that HIV requires the presence of mycoplasma to cause AIDS.[21]

It is this media smear machine where Fauci’s influence truly shines. Establishment journalists are forbidden to interview dissidents, told they will receive no access to government officials if they do, threatened with firing campaigns and boycotts by AIDS activist groups, and finally fired, deplatformed, and demonized themselves if they persist in contacting these scientific lepers or giving airtime to their ideas. Next, the “reputable” press dismisses those ideas as pseudoscience, quackery, or “conspiracy theory” without engaging on the merits, with ad hominem attacks inserted wherever possible (off-color social media posts, youthful indiscretions, and photos taken in questionable company are unearthed as weapons in this character assassination). Any member of the public who attempts to research the blacklisted individual independently runs into libelous Wikipedia articles written by a proudly biased coterie of editors who call themselves “Skeptics” and boast of their rejection of any work that does not carry the imprimatur of scientific materialism, and those articles are in turn used by lazy journalists as a substitute for research, isolating the victim in a Kafkaesque nightmare from which he cannot escape. Those journalists who bypass the Wikipedia writeup and make the mistake of interviewing the dissident risk have *their* lives destroyed, professionally and personally. “Every journalist who tackled [HIV=AIDS dogma] in every medium found themselves targeted, eliminated, if not driven from the profession permanently,” journalist Celia Farber recalled in 2021. “It’s not just that your article is going to be decried or not published or protested against. It’s going to filter out into every facet of your life and it’s not going to stop.”[22]

Funding is the Achilles' heel of most scientific research, and decades of Fauci exercising control over every science dollar dispensed by Washington have profoundly crippled American science. The Tri-State Healing Center was only able to do its work for 15 years because Gary Null had written a string of best-selling books, and only able to publicize that work – albeit minimally and with much resistance from the establishment – because his investigative experience and connections had clued him in to the corruption at the heart of the paradigm he was challenging. The rise of Wikipedia and other Deep State-controlled social media platforms now rivals Fauci's lock on research dollars in its ability to impose ideological conformity, however. Libeled on Wikipedia as an "AIDS denier" and worse by editors who wear their disdain for non-mainstream healing protocols on their sleeves ever since his biography was added to the site without his knowledge in 2007, Null would have a much harder time in 2025 securing a publisher for the bestsellers that financed the Center, and this is perhaps the biggest threat this weaponized system of informational control poses to the nation's future. The full-scale assault on First Amendment freedom of speech the government marshaled during Covid-19, which saw no less than a dozen agencies colluding with Big Tech platforms to silence influential dissidents and suppress information about lifesaving medicines like ivermectin, would not have been possible without the decades of rigid ideological conformity Fauci enforced across the scientific field.

KILL TO CURE

It is impossible to estimate how many other safe and effective AIDS cures have disappeared down the memory hole in the last 45 years thanks to Fauci's pharmacratic dictatorship. While a handful of scientific papers published in the last 40 years attest to achieving sero-deconversion of HIV/AIDS patients, including a 1996 Chinese paper describing eight sero-deconversions with the use of Traditional Chinese Medicine[23] and a 2012 paper outlining the case of a Nigerian man who returned to HIV-negative status from full-blown AIDS after an unspecified five-month herbal regimen,[24] there is no evidence of further research into holistic protocols in the US in the medical literature.

With its important clinical trial positions occupied by Burroughs Wellcome executives, Fauci's NIAID was so faithful to AZT that it studied almost nothing else during his first three years at the helm, burning through $374 million between 1984 and 1987 without bringing a single AIDS drug to market even as patients clamored for access to some of the safer (and considerably cheaper) off-patent drugs that had shown promise in treating AIDS-defining conditions like pneumocystis carinii pneumonia, the primary cause of death for AIDS patients in the first decade of the epidemic. While it was known as early as 1977 that Bactrim (trimethoprim/sulfamethoxazole), a relatively inexpensive

two-drug antibiotic combination, was effective in treating the infection, the medical establishment refused to acknowledge it for over a decade, waiting until 1989 – after 30,534 Americans had already died of AIDS-associated PCP – to publicly recommend its use in treating the condition.

AIDS patient and activist Michael Callen recalled the 1987 meeting in which he and a group of fellow activists personally met with Fauci, "beg[ging] him to issue interim guidelines urging physicians to prophylax those patients deemed at high risk for PCP. He steadfastly refused to issue such guidelines. His reason? No data. As a result many more people died of PCP who didn't have to."[25]And Fauci didn't just tell desperate AIDS patients to stop taking PCP prophylaxis because it was untested and useless – he alleged it could even be dangerous. Besides, NCI director Sam Broder added, AZT was about to make any PCP-specific treatment obsolete.[26]

AZT had been rejected by its inventor in 1964 over its deadly side effects and was rescued from the scrap heap and patented by Burroughs Wellcome with full knowledge of those effects. Famously described by physician Joseph Sonnabend as "toxic to life," it blocks DNA synthesis, preventing new cells from developing and killing healthy cells, and a manufacturer's insert warns prescribers that the drug's horrific side effects mirror the symptoms of AIDS itself: among them life-threatening anemia, caused by the destruction of bone marrow; muscle wasting; and damage to the liver, kidney, and nerves, causing severe headaches, muscular pain and nausea. While cancer patients are typically put on chemotherapy for brief periods in the hope the drug kills the cancer before it kills the patient, AZT was deemed too toxic even for these short bursts – and AIDS patients, already severely weakened by their disease, were expected to take the drug for life.

Even before these debilitating effects resurfaced in clinical trials, Fauci was smoothing the way for AZT's approval by the FDA, skipping animal trials and massaging human trials to camouflage some of the more egregious outcomes, including deaths. He even fast-tracked the human trials to a mere four months – then unheard-of for a chemotherapy drug patients were supposed to take for the rest of their lives – declaring it "unethical" to withhold the supposedly life-saving drug from the placebo arm of the study, a practice that would infamously crop up again in the Pfizer Covid-19 vaccine trials. The decision to throw the full might of the US public health bureaucracy behind AZT as the gold standard for treating not just AIDS patients but HIV-positive asymptomatic individuals despite the drug's obvious harms was morally inexcusable and amounted to nothing short of a premeditated chemical assault on these populations, one that would only be multiplied by the NIAID's horrific experiments on AIDS orphans and African children exposed in detail in Robert F. Kennedy's *The Real Anthony Fauci.*

Fauci and his colleagues' insistence on a clinical trial to endorse Bactrim rang utterly hollow in light of the fraud that buoyed AZT through its approval. Basic safety protocols were sidelined or discarded entirely, according to multiple accounts including that of whistleblower Lynn Gannett, who worked as a data manager on the NIH's AZT trials in Syracuse from 1987 to 1990. Gannett attempted to alert the agency to what she described as "gross irregularities and medical incompetence" extending to patient endangerment, noting that adverse effects from the drug often went unrecorded. "If there was a rule that could be broken – they broke it!" Gannett wrote in a 2000 account of her work on the trials, calling for a congressional investigation as the NIH had refused to act on the information she provided. "The level of medical incompetence, unprofessionalism, unethical, dishonest, corrupt, illegal and immoral behavior was shocking and inexcusable."

"For the NIH to knowingly ignore serious and credible DOCUMENTED reports of gross scientific misconduct coming from someone working on the INSIDE of these trials – if that doesn't constitute scientific 'fraud,' I don't know what does," she continued, adding that "if the general public knew what I knew about AZT, this so-called 'drug' would be banned immediately."[27] The trial site that employed Gannett was hardly an outlier – journalist John Lauritsen documented similarly egregious violations across the Phase 2 trials of the drug in his book AZT: Poison by Prescription, pointing out that the supposedly double-blind placebo controlled studies "became unblinded almost immediately" as patients could tell by the taste of their pills whether they were receiving the sugar placebo or the active drug, adverse events were routinely removed even when clearly recorded as AZT-related, and the FDA actually recommended one trial center's data be rejected due to "multiple deviations from standard protocol procedure." In fact, FDA analyst Harvey Chernov, tasked with evaluating the trial data, recommended against AZT's approval, citing the drug's extreme toxicity.[28]

By permitting Burroughs Wellcome and AZT to monopolize NIAID's clinical trial process to the exclusion of all competitors, Fauci was potentially responsible for hundreds of thousands – if not millions – of deaths. "We could have saved millions of lives with repurposed and therapeutic drugs. But there's no profit in it. It's all got to be about newly patented antivirals and their mischievous vaccines," National Cancer Institute virologist Dr. Frank Ruscetti told Robert F. Kennedy Jr. in 2020 as the same corrupt clinical trial process was giving another toxic antiviral drug, remdesivir, and its manufacturer Gilead a monopoly on treating Covid-19.[29]

It was not simply corruption but AZT itself that killed many of those early "AIDS casualties" – at least 333,000 mostly gay men, according to journalist John Lauritsen.[30] AIDS deaths in the US actually *increased* following the FDA approval of AZT in 1987, jumping from 4,135 to 14,544 in just two years. In 1990, one year after

Burroughs Wellcome caved to pressure from ACT UP and other astroturf groups and lowered the drug's price by 20%, there were 18,447 US deaths. The numbers continued to climb with the introduction of ddI and the protease inhibitors, finally peaking in 1995 with 48,371 Americans dead of the disease.[31] Fauci was fully aware of the potential for debilitating or fatal harm from consuming his wonder drugs, just as he was aware of the harms of the experimental mRNA shots he pushed on the public as lifesaving Covid-19 vaccines. His actions then and now constitute an egregious violation of medical ethics and a violation of the Nuremberg Code, which requires patients give informed consent before participating in a medical experiment.

THE COST OF DENIAL

Had the findings of Gary Null and the Tri-State Healing Center come to the public's awareness in the early 1990s, at the same time as Gallo was taking a beating by successive misconduct probes and Montagnier was urging reevaluation of the medical-pharmaceutical model, they might have sunk Fauci's battleship, which had by that point been fortified into a veritable aircraft carrier with profits from AZT and its similarly deadly sequels. Instead, 700,000 Americans have died of AIDS since 1981.[32] The UN estimates the total number of deaths worldwide from AIDS and related conditions at 42.3 million.[33] While the disease is no longer the headline-grabbing plague it was during the 1980s and 1990s, and deaths have declined 69% since 2004, hundreds of thousands of people still die from AIDS-related illnesses every year.

It is impossible to calculate how many of those might have been saved had they (or their doctors) been aware of the existence of the Tri-State Healing Center and its affiliates' success in treating and even curing HIV and AIDS. Beyond those who would have physically benefited from these treatments, an even wider pool of HIV-positive individuals frightened to death (sometimes literally) by their diagnosis would have retained a ray of hope to cling to. The suggestion that there was not only a cure but one that was inexpensive and harmless might have stayed the hand of many of those who killed themselves upon receiving what was portrayed as a death sentence via a profoundly unscientific diagnostic test.

The devastating effects of Fauci's militant groupthink on scientific research itself are also impossible to ignore. Dissent is necessary for science to progress, and entire disciplines terrified of stepping out of line – even if only to unveil a promising new discovery or propose a novel hypothesis – cannot evolve. The corrupt and unsafe drug development model pioneered by Fauci and his Burroughs Wellcome principal investigators with AZT has become the industry standard, leading to untold millions of deaths and injuries from pharmaceuticals rushed to market without adequate safety studies. The problem extends far beyond HIV/AIDS and Covid-19 to broader American

public health policy, which under Fauci has been slowly depriving patients of both their wealth and health through increasingly pricey and unsafe medications. Merck's bestselling painkiller Vioxx killed tens of thousands before it was taken off the market in 2004 despite the company having discovered during clinical trials that the drug caused heart attacks and strokes.[34] Blame for the opioid crisis that has replaced AIDS as the top killer of young Americans can arguably be traced back to the overly-permissive regulatory climate fostered by Fauci and his PIs, with Sackler Pharmaceuticals passing off its novel opioid OxyContin as a wonder drug that miraculously avoided the pitfalls of addiction in order to dramatically expand a market that had previously been limited to hospice patients and other terminally ill populations for whom addiction was a lesser evil.

Fauci's embrace of shameless price-gouging by Burroughs Wellcome, selling AZT for $10,000 per year when it cost cents to make, opened the door to the torrent of medical debt that has become the top cause of bankruptcy in the US, where the high prevalence of chronic disease has increasingly meant patients who try a new drug are expected to stay on it for life. While his motives for allowing such predation are known only to him, the Bayh-Dole Act, which became law in 1980, allowed the NIAID and Fauci himself to file patents on the drugs his PI network were shepherding to market and license those patents to drug companies for royalties that quickly ran into the millions.[35]

Fauci's emphasis on pharmaceuticals as the sole legitimate healing modality has objectively made the US less healthy. In a decline that has snowballed since the US became only the second country to allow direct-to-consumer prescription drug advertising in 1997, Americans are increasingly sicker and shorter-lived than any other developed nation, despite spending nearly twice as much per person on healthcare as the next biggest spender.[36] In fact, the practice of allopathic medicine itself is the leading cause of death in the US, according to Gary Null, who worked with a team of doctors on 2003's Death by Medicine to expose how iatrogenic harm outstrips even cancer and heart disease in annual casualties.[37]

MORE RELEVANT NOW THAN EVER

The HIV/AIDS pandemic may seem like ancient history to some, but the atrocities committed by Fauci and his collaborators nearly half a century ago continue to echo into the present in the form of the Covid-19 response and the ongoing march toward medical totalitarianism. Millions of people still live with HIV and AIDS because these power-mad bureaucrats opted to suppress of a cure that has been freely available for decades in order to profit off the disease by price-gouging supposedly lifesaving drugs. This is a crime against humanity disguised as a business model. There is no statute of limitations

on atrocities like the US government response to AIDS, and while Fauci may believe the pardon he received from outgoing President Joe Biden will safeguard him from accountability, that pardon only dates back to 2014. Nor is Fauci the only individual who could be considered at least indirectly responsible for millions of AIDS-related deaths who continues to receive a paycheck from the US government, having been rewarded for holding the pharmaceutical line against the factual assault from AIDS dissidents. Even setting aside the moral outrage of medical science rejecting the scientific method to swear fealty to Robert Gallo's flagrant fraud, from a purely academic perspective, the dangers of allowing it to go unchallenged must not be underestimated. Scientific advances proceed linearly with new discoveries, building on the work of their predecessors so that hypotheses and theories are gradually cemented into assumed fact. Science that is based on flawed assumptions is necessarily flawed by default. This is hardly unique to the realm of HIV/AIDS – nearly two decades ago, Professor John Ioannidis warned that medical science was effectively broken, as over 90% of published experimental results could not be replicated.[38] However, the stakes are especially high with regards to HIV/AIDS due to the disproportionate amount of government funds expended in the study and treatment of the disease, and one wrong assumption could (and has) cost taxpayers billions if not trillions of dollars. By the time Covid-19 was declared a pandemic in 2020, half a trillion dollars had been spent on HIV/AIDS research – none of it producing anything approaching the "cure" or vaccine Fauci and others like him had long promised.

Because the perpetrators of the AIDS deception effectively "got away with it" – Fauci attained the near-mythical heroic status he would subsequently weaponize to humanity's detriment during the Covid-19 outbreak and now enjoys round-the-clock security on the taxpayer's dime, having enjoyed the dubious distinction of being the highest-paid federal employee in the US – others who might have been discouraged by the possibility of punishment have instead been emboldened to follow in their footsteps. It is imperative that both the original and more recent perpetrators be held accountable for their misdeeds to discourage copycats. This is especially urgent as the medical-industrial complex appears to be preparing for H5N1 "bird flu" as the next pandemic following the HIV/AIDS-Covid playbook, with the CDC recently ordering US hospitals to test all influenza patients for H5N1[39] and a vaccine already approved without human trials.[40]

Nor are the harms of the HIV/AIDS pandemic itself firmly in the rearview mirror. Amid the growing problem of HIV and associated pathogens becoming resistant to the effects of its drug cocktails, Big Pharma parlayed the threat into a novel revenue stream, selling the gullible public on the idea that while while their drugs may not be able to cure AIDS – or even treat it effectively – they can maybe at least prevent it, so long as you take

this pill for the rest of your sexually-active life. Marketed as “pre-exposure prophylaxis (PrEP),” the antiviral drugs tenofivir and emtricitabine were combined into a branded blue pill called Truvada by Gilead Pharmaceuticals and sold as “safe and effective in reducing the risk of sexual HIV acquisition in adults.” A sunny fact-sheet on the CDC’s website touts the supposed breakthrough as if the agency itself had been deputized by Gilead (makers of remdesivir, which similarly destroys patients’ kidneys) to hawk their product, declaring PrEP is “99% effective when used as directed.”[41]

Even though AIDS no longer commands the public attention it once did, it remains an outsize destination for public health dollars wholly out of proportion to its actual effect on the population. Aid workers in some African countries have complained that no funding is available for clean water or malaria prevention – only AIDS (with the occasional vaccine). Given the wildly unscientific diagnostic process associated with AIDS in Africa, it is much more likely that clean water and nutritious food, not antiviral drugs and condoms, would help these people for a fraction of the cost – but that cost, as former WHO AIDS head David Chin has pointed out, has increasingly become the raison d’être for UNAIDS and other global programs now that even these organizations have had to acknowledge that HIV infection numbers have been trending steadily downwards for years.[42] While the specter of entire African nations falling prey to HIV infection is used to extract money abroad, Fauci and his private-sector counterparts like Gates use well-worn promises that an “HIV vaccine” is just around the corner to suck out tax dollars domestically. Despite over three decades of promises and billions of dollars spent, no HIV vaccine has ever made it to market – even the most cutting edge medicine cannot vaccinate against behavioral cofactors, after all.

Perhaps the starkest indicator of AIDS’ continuing relevance to the biopharmaceutical state Covid-19 served to advance was Microsoft founder turned vaccine evangelist Bill Gates’ recent meeting with US President Donald Trump ahead of the latter’s inauguration to discuss what Gates referred to as “Operation Warp Speed 2” – an HIV vaccine using mRNA technology.[43] The mRNA shots hurriedly rolled out for Covid-19 and forced into many Americans’ arms on penalty of losing their jobs turned out to be wholly ineffective in preventing infection, and – like AZT – their potential for debilitating side effects was amply documented during clinical trials but pushed on the public anyway. Gates presumably glossed over decades of failed HIV vaccine trials in his bid to convince the incoming president that a cure was finally just around the corner so long as all good citizens rolled up their sleeves.

Gates, whose Bill and Melinda Gates Foundation funded the development of Pfizer, Moderna, and several other companies’ mRNA ooronavirus vaccines, was one of the loudest and earliest voices pushing mandatory vaccination and a slate of draconian

controls to accompany it, including digital vaccine certificates.[44] Even in the absence of a vaccine, similarly strict measures have been proposed surrounding HIV/AIDS detection and treatment, meeting far more public acceptance than similar measures for Covid-19 due to public perception that the disease meant certain death. In 2007, the state of New Jersey sought to compel pregnant women and their newborns to be tested for HIV. While the version passed into law allowed the mother to skip the screening if she objected, babies must be tested if the HIV status of the mother is unknown – tests which are also compulsory in New York, Connecticut, and Illinois – and infected mothers who refuse to take AZT during pregnancy have had their children taken by the state, injected with the drug, and placed into foster care. HIV-positive children whose parents or guardians refuse to subject them to standard drug protocols may be forcibly removed from their homes, even if they were improving on the drug-free regimen.[45]

Both Gates and Trump have repeatedly dismissed the harms caused by Operation Warp Speed and the shots it rushed into American arms. However, Trump was reelected in part due to his perceived support for the "Make America Healthy Again" movement, which seeks to hold corporations – including Big Pharma – accountable for the detrimental effect their products have on consumers. Gates' foundation has been associated with a long list of scandals around the world, from polio vaccine recipients contracting polio from the oral vaccine in four African countries[46] to young Kenyan women being sterilized without their knowledge or consent during a purported tetanus vaccination campaign.[47] Gates' foundation and its public-private vaccine program Gavi are the largest private contributors to the World Health Organization. Gates briefly became the largest contributor outright after Trump pulled the US out of the WHO in 2020 only to pour billions of dollars into Gavi, and Gates bragged during the president's first term that he had advised Trump to drop plans for a vaccine safety commission headed by lawyer and Children's Health Defense founder Robert F. Kennedy, Jr.

The US Senate's approval of Kennedy as Secretary of the Department of Health and Human Services has provided Americans with an unprecedented opportunity to refocus the nation's public health policy on actually keeping people healthy, rather than marketing pharmaceuticals or maximizing corporate profits. The Trump administration must understand that this simple agenda has numerous powerful enemies who will constantly seek to pit the president against his new HHS secretary, as Gates claimed to have done in 2016.

Kennedy's HHS should prioritize a reexamination of HIV/AIDS, including publicizing the cure. This will begin to dislodge the stranglehold Big Pharma has on the operations of government and allow the new administration to reallocate resources effectively to improve Americans' health instead of plutocrats' stock portfolios. The incoming Justice

Department should prioritize investigating and prosecuting Fauci and his cronies for their crimes against humanity during that HIV/AIDS crisis. Instead of being permitted to live out his days in comfortable retirement, milking the taxpayer until he draws his last breath, the highest-paid federal employee in US history will be required to answer for his actions. Such a probe would only begin to deliver justice to the millions harmed by Fauci's policies, but it is a necessary first step. If momentum is allowed to lapse, the Trump administration risks being led by the nose into another pandemic, most likely the H5N1 bird flu the CDC is currently struggling to present as a valid public health threat. That the NIAID chief, supposedly tasked with safeguarding the health of Americans, allowed so many to die who could have been saved with low-cost, low-risk interventions in order to save his own empire is inexcusable. That he has gotten away with it for so long is unspeakable. There is no statute of limitations on crimes against humanity, and Fauci's actions during the AIDS crisis constitute the worst crime against humanity ever perpetrated in modern times, full stop. Armed with the solution to the crisis he caused, we can begin to right these historical wrongs.

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