
Neil Ferguson and Andrew Pollard sharing a taxi...?

Elizabeth Hart <elizmhart@gmail.com>
To: Elizabeth Hart <elizmhart@gmail.com>

Thu, Aug 5, 2021 at 9:12 PM

Please see below my email to Professor Neil Ferguson, Imperial College London, asking whether he shared a taxi with Professor Andrew Pollard in January 2020, i.e. if he was the person who suggested that COVID-19 could be "**a pandemic not unlike the 1918 flu**" during that taxi journey.

This has important implications because it can be argued that comparing COVID-19 with the 1918 flu pandemic has resulted in a grossly disproportionate response to COVID-19.

I'm pursuing this matter further.

Elizabeth Hart

Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

----- Forwarded message -----

From: **Elizabeth Hart** <elizmhart@gmail.com>

Date: Thu, Aug 5, 2021 at 8:53 PM

Subject: Neil Ferguson and Andrew Pollard sharing a taxi...?

To: <neil.ferguson@imperial>

Cc: <gcsa@go-science>, <c.whitty@nhs>, <andrew.pollard@paediatrics>, <fgodlee@bmj>, <sdavies@bmj>, <pdoshi@bmj>, <kabbasi@bmj>, <tbloom@bmj>, <allyson.pollock@ncl>, <jioannid@stanford>, <simon.wain-hobson@pasteur>, <ebright@waksman.rutgers>, <mlipsitc@hsph.harvard>, <mto@umn>, <tinglesby@jhu>, <carl.heneghan@phc ox>, <michael.levitt@stanford>, <mkulldorff@bwh.harvard>, Jayanta Bhattacharya <jay@stanford>, Bhakdi, Sucharit <sbhakdi@uni-mainz>, Gus Dalgleish <dalgleis@sgul>, <karol.sikora@buckingham>, <anders.tegnell@folkhalsomyndigheten>, <johan.giesecke@ki>, <i.frazer@uq>, <pcd@unimelb>, <peter.collignon@act>, <roy.anderson@imperial>, <p.openshaw@imperial>, <president@royalsociety>, <dcannadi@princeton>, <ramak@mrc-lmb.cam>, <InstituteDirector@turing>, <Andrew.Goddard@rcplondon>, <chris.conlon@ndm ox>, <Dan.Sumners@rcplondon>, <j.shine@garvan>, <robert.clancy181@>, <sunetra.gupta@zoo ox>, <Heidi.Larson@lshtm>, <graham.medley@lshtm>, <melinda.mills@sociology ox>, <regius@medsci ox>, <dak30@psu>, <a.read@psu>, <PeterAMcCullough@>, <nick.hudson@>, <ejminoz@>

For the attention of:

Professor Neil Ferguson

Consortium Director

Vaccine Impact Modelling Consortium

Imperial College London

Professor Ferguson, **did you share a taxi with Andrew Pollard in mid-January 2020?**

As you know, Professor Pollard is the current chief investigator on the Oxford/AstraZeneca vaccine trials[1], and Chair of the Joint Committee on Vaccination and Immunisation (JCVI), which "advises UK health departments on immunisation"[2], i.e. advises UK health departments on vaccine products for the taxpayer-funded schedule.

Professor Ferguson, according to a BBC report last December "**In the middle of January [2020] Prof Andrew Pollard, the director of the Oxford Vaccine Group, which runs clinical trials, shared a taxi with a modeller who worked for the UK government's Scientific Advisory Group for Emergencies. During the journey, the scientist told him data suggested there was going to be a pandemic not unlike the 1918 flu**".[3] (The BBC report omitted to note that Professor Andrew Pollard was Chair of the Joint Committee on Vaccination and Immunisation at the time.)

The BBC article reports Professor Pollard said: "**I went from someone who was aware of a small outbreak in China, which was of academic interest, to realising that it was going to change our lives. It was a chilling moment.**"

Professor Ferguson, 'the modeller' who alarmed Andrew Pollard about the data suggesting "**there was going to be a pandemic not unlike the 1918 flu**" sounds very much like it could be you, **is this correct?** (Or another member of your Vaccine Impact Modelling Consortium?)

That's what you said in your Imperial College Report 9, Professor Ferguson, published in March 2020, i.e. "**The global impact of COVID-19 has been profound, and the public health threat it represents is the most serious**

seen in a respiratory virus since the 1918 H1N1 influenza pandemic".[4]

This is a very alarming statement, as the US CDC reports the H1N1 virus spread around the world in 1918-1919, resulting in estimated deaths of at least 50 million.[5] This was in a global population of around 1.8 billion at the time.

If the CDC's estimate of H1N1 deaths in 1918-1919 is accurate - with a 2020 global population of 7.8 billion - **it's equivalent to 216 million deaths in two years, i.e. the insinuation from your Imperial College Report 9 is that COVID-19 could potentially amount to 216 million deaths in the world in the same time period.**

Professor Ferguson, **while you inferred COVID-19 represented a public health threat in the same league as the 1918 H1N1 influenza pandemic**, a few days after your report was published, Public Health England reported: "As of 19 March 2020, **COVID-19 is no longer considered to be a high consequence infectious disease (HCID) in the UK**".

According to Public Health England (PHE): "The 4 nations public health HCID group made an interim recommendation in January 2020 to classify COVID-19 as an HCID. This was based on consideration of the UK HCID criteria about the virus and the disease with information available during the early stages of the outbreak. **Now that more is known about COVID-19, the public health bodies in the UK have reviewed the most up to date information about COVID-19 against the UK HCID criteria. They have determined that several features have now changed; in particular, more information is available about mortality rates (low overall)**, and there is now greater clinical awareness and a specific and sensitive laboratory test, the availability of which continues to increase." (My emphasis.)

It was also noted that "**The Advisory Committee on Dangerous Pathogens (ACDP) is also of the opinion that COVID-19 should no longer be classified as an HCID**". (See attached HCID webpage which was last updated 17 June 2020, to compare with the HCID webpage accessible online today: High consequence infectious diseases (HCID). Last updated 12 May 2021.)

Subsequent PHE HCID reports don't even mention SARS-CoV-2/COVID-19.

This is **extremely confusing** Professor Ferguson.

Your Imperial College Report 9 insinuated the world could be facing approximately 216 million deaths as a consequence of COVID-19, and that an aggressive suppression strategy would "need to be maintained until a vaccine becomes available (potentially 18 months or more) - given that we predict that transmission will quickly rebound if interventions are relaxed".

Despite the fact COVID-19 was downgraded from a high consequence infectious disease on 19 March 2020, and it was known it had low overall mortality, the mainstream media has maintained **very alarming reporting for the past 17 months** re the number of 'cases' and deaths attributed to COVID-19.

Professor Ferguson, according to Statista[6], around 4.25 million deaths have been attributed to COVID-19 globally in say the past 17 months, likely mostly in elderly people with comorbidities, this is **well below** the potentially 216 million deaths inferred by you with your comparison with the 1918 H1N1 influenza pandemic.

The 4.25 million global deaths figure over 17 months attributed to COVID-19 must also be **seen in the context of deaths expected in the global population of 7.9 billion during that time**, i.e. around 83.9 million deaths over 17 months.[7]

Professor Ferguson, clearly something isn't adding up here...**can you please clarify the situation?**

How did you come up with data that suggested COVID-19 was on a par with the 1918 H1N1 influenza pandemic, and thereby unleash a grossly disproportionate response to COVID-19?

And also please clarify if you are indeed the modeller who travelled in a taxi with Professor Andrew Pollard in mid-January 2020? (Or another member of your Vaccine Impact Modelling Consortium?)

I would appreciate your response on these matters.

Sincerely

Elizabeth Hart

Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

References:

1. Andrew Pollard is the chief investigator of the global clinical trials of the Oxford COVID19 vaccine sponsored by the University of Oxford: <https://www.research.ox.ac.uk/researchers/andrew-pollard-covid>
2. Joint Committee on Vaccination and Immunisation: <https://www.gov.uk/government/groups/joint-committee-on-vaccination-and-immunisation> (Accessed 5 August 2021.)

3. Oxford-AstraZeneca vaccine: Bogus reports, accidental finds - the story of the jab. BBC, 14 December 2020: <https://www.bbc.com/news/health-55308216>
4. Neil M Ferguson et al. Report 9: Impact of non-pharmaceutical interventions (NPIs) to reduce COVID-19 mortality and healthcare demand. Imperial College COVID-19 Response Team. 16 March 2020: <https://www.imperial.ac.uk/media/imperial-college/medicine/mrc-gida/2020-03-16-COVID19-Report-9.pdf>
5. 1918 Pandemic (H1N1 virus). CDC, page last reviewed: March 20, 2019: <https://www.cdc.gov/flu/pandemic-resources/1918-pandemic-h1n1.html>
6. Number of novel coronavirus (COVID-19) deaths worldwide as of August 4, 2021, by country. (4,259,667 deaths - accessed 5 August 2021.): <https://www.statista.com/statistics/1093256/novel-coronavirus-2019ncov-deaths-worldwide-by-country/>
7. Our World in Data projected 59.23 million annual deaths in 2020. Adding another 5 months of deaths, i.e. 24.67 million deaths, gives a total of 83.9 million deaths to be expected over a 17 month period. https://ourworldindata.org/grapher/number-of-deaths-per-year?country=~OWID_WRL

 **High consequence infectious diseases (HCID) - GOV.UK.pdf**

213K