

## Masks Work

There is no debate here. A decades-long body of evidence confirms the obvious: air-filtering masks that intercept nasty germs reduce infection risk. That one 'scientific study' that kinda-sorta claimed otherwise (the 'Cochrane review') has been thoroughly discredited, proving only garbage in → garbage out.

<https://www.scientificamerican.com/article/masks-work-distorting-science-to-dispute-the-evidence-doesnt/>

All masks are not created equal, of course. Basic surgical masks and cloth masks are maybe 30% effective. We can do way better!

A disposable N95 (eg 3M Aura) cuts down exposure by 95% or better, assuming it fits well and is worn correctly — and they *can* be reused. N99 is 5× better, at 99%. A properly fitted P100 respirator blocks an astounding 99.97% (*at least*) of airborne contaminants.

<https://www.cdc.gov/niosh/docs/96-101/default.html>

A low-profile P100 elastomeric respirator (eg Dräger X-plore 2100) provides top-notch protection without looking *too* weird.

Cartridge-type respirators can be remarkably comfortable, go for months and months on a cheap pair of replaceable P100 filters, and come in both half-face (mouth and nose only, eg GVS Elipse) and full-face (protects the eyes too, eg 3M FF-800). These 'gas masks' will, unsurprisingly, get you some curious looks.

But! Whatever mask you prefer, it's only effective if you *wear it*, consistently and properly, whenever you're sharing indoor air with people who aren't your household.

**A good mask works really well. If you use it.**

<https://billius27.substack.com/p/masks-evidence-and-use>

## We Could End This

Right now, because our leaders have *chosen* to abandon public health and let this plague run unchecked, staying safe requires extreme precautions at the individual level.

The air in our buildings is a disease-laden soup only because we aren't bothering to do anything about it. If we really wanted to bring COVID transmission down into the declining 'negative growth' range ( $R < 1$ ), *we could*. Better ventilation reduces transmission. So do HEPA filters. Upper-room UVGI and far-UVC disinfectant lamps. Good masks (subsidized and mandated). Sick days. Test-and-trace. Isolation requirements when sick. And so on.

We're not likely to *eradicate* the SARS-CoV-2 virus, but if we as a society cared enough to stack together our *already available* tools in a sustained defence (the 'swiss cheese' model), we absolutely have the capacity to *subdue* it.

Why are we *pretending* the pandemic is over while everyone keeps getting sicker and sicker, when we could *actually* end it if we wanted to?

<https://www.aspe.org/pipeline/ashrae-completes-draft-of-first-ever-pathogen-mitigation-standard/>

Our tap water is kept safe to drink and free of dangerous pathogens thanks to legal mandates, testing, and expensive infrastructure.

### Why aren't we making our safe air to breathe?

[https://ospe.on.ca/wp-content/uploads/2023/01/Safer\\_Indoor\\_Air\\_Nov22\\_Final.pdf](https://ospe.on.ca/wp-content/uploads/2023/01/Safer_Indoor_Air_Nov22_Final.pdf)

Feel free to bring that question up with your school, employer, church, elected reps, etc.

**Want a long and healthy life?**

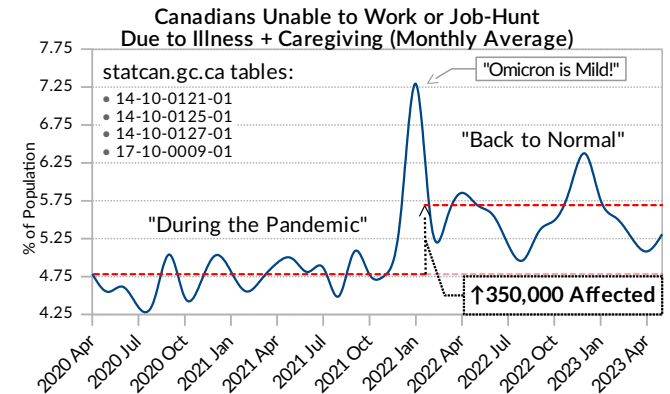
**Avoid COVID.**

**Mask up.**

## Why I'm (Still) Wearing This Mask

### COVID Is Not Over

Ignoring COVID-19 is a failed strategy, and lots of people are (still) getting very sick.



This is no surprise, given that each bout of COVID (yes, even the 'mild' ones) incurs "profound long-term immune suppression." And vaccination provides minimal protection against this insidious, *cumulative* harm.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9568269/>

Our current policy of mass infection is thus actively *undermining* herd immunity.

Always tired? Everyone's constantly sick with *something-or-other* now? And the usual medicines don't work so well anymore? Yeah, it's not just you: that's what population-wide immune system damage looks like.

### You call this 'living your best life'?

- **COVID Is Airborne** (not just 'droplets')
- **Masks Work** (and good masks work better)
- **COVID Is Bad For You** (no, really)
- **Nobody Said It Was Safe** (sly insinuations...)
- **We Could End This** (so why don't we?)

## COVID Is Airborne

*We were not forcefully saying: "This is an airborne virus." I regret that we didn't do this much, much earlier.*

- WHO's chief scientist, 23 Nov 2022

<https://www.science.org/content/article/who-s-departing-chief-scientist-regrets-errors-debate-over-whether-sars-cov-2-spreads>

Forget the 'droplet dogma'. The idea that only heavy droplets that fall to the ground within two meters can carry a viable viral load has turned out to be simply wrong.

Forget hand sanitizer. There is little if any evidence for 'smear transmission' of COVID-19 from contaminated surfaces.

Just like its close cousin SARS, just like the flu, just like measles, COVID is exhaled with *every breath*, and spreads through the air like smoke, potentially lingering for many hours.

The bad news is that two-meter distancing, Plexiglas barriers, and hand sanitizer are ineffectual against an airborne virus.

The good news is that *decent* masks, adequate ventilation, HEPA filters, and UV disinfection are effective and cost-effective defences. These 'non-pharmaceutical interventions' will work on *all* COVID-19 variants, colds, bird flu...

Distancing *in conjunction* with those mitigations is a valuable precaution. More room between you and a contagious carrier means more opportunity for the ventilation and air purifiers to suck up the virus, or for the UV light to neutralize it, before it reaches you.

But distancing on its own, in an inadequately ventilated space, is an empty gesture, like the 'no smoking' section in restaurants years ago.

**Sick & tired of COVID? Don't breathe it in.**

## COVID Is Bad For You

Every time you catch COVID, you take a 10-20% chance (at minimum) of 'Post-Acute Sequelæ of COVID-19', PASC for short, aka Long COVID. Common symptoms include memory problems, chronic fatigue, depression, and other persistent — or permanent — issues.

<https://academic.oup.com/ooim/article/3/1/iqac002/6604756>

That's *at least* one in ten odds in the *best* case: vaccinated, fully boosted, young, and healthy. Every infection, however 'mild', is another roll of the dice. Children are not spared, but face the same Long COVID odds as anyone else.

There is, to date, no treatment.

<https://www.who.int/europe/news-room/fact-sheets/item/post-covid-19-condition>

Roughly a quarter of COVID-19 infections result in measurable cognitive decline.

<https://www.health.harvard.edu/blog/brain-fog-memory-and-attention-after-covid-19-202203172707>

### **Call me crazy, but I don't like those odds.**

Every COVID-19 infection also does *cumulative* damage to the brain, heart, blood vessels, and immune system, among other things. This dramatically increases the risk of heart failure, Alzheimer's, stroke, and more.

<https://www.scientificamerican.com/article/even-mild-covid-can-increase-the-risk-of-heart-problems>

When the (notoriously conservative) insurance industry describes the ongoing plague as a "mass disabling event", it can't be good news.

<https://www.insurancebusinessmag.com/ca/news/breaking-news/new-report-warns-long-covid-could-be-mass-disabling-event-439109.aspx>

Even if you can't avoid COVID-19 entirely, the *less often* you catch it, the better your chances.

**The time to prevent your next infection is now.**

## Nobody Said It Was Safe

Have you noticed that none of our politicians and public health officials *ever* come out and claim that it's safe to drop precautions, or that catching COVID over and over isn't massively harmful, or anything of the sort? If you pay close attention, you'll find that they don't.

No, they keep saying we all "have the tools" to keep ourselves safe. Everyone has to "make their own assessment" of the risks. "COVID is everywhere" so we all have to just "learn to live with it". And so on.

Maybe that's because they know perfectly well it's *not* safe and catching COVID over and over *is* doing serious harm. Maybe they're carefully walking a fine line, abdicating their public health responsibilities without *quite* being on the hook for lying about the danger.

It's not like the evidence is being kept under wraps or anything. The world's infectious disease experts keep publishing study after study confirming the mounting harm and long-term risks incurred with every bout of COVID.

Problems can show up *years* post-infection, but the official statistics only count issues that occur in the first *30 days* as COVID-related.

If you look beyond the politicians, their tightly-leashed bureaucrats, and the popular press (all of whom are clearly, short-sightedly fixated on 'the economy', not protecting people's health), and seek out the actual medical researchers, they make it *abundantly* clear that COVID is in no way 'over'.

Effective COVID-19 precautions are, in truth, still *very much* needed, like it or not.

**Ignoring the danger doesn't make it go away.**