

**FURTHER EVIDENCE TUBERCULOSIS
BACTERIUM MASQUERADES AS
COVID-19 CORONAVIRUS
By Bill Sardi**

With Lawrence Broxmeyer MD, by exclusive interview

One source reports [80.9% of newly infected COVID-19 coronavirus patients were asymptomatic](#) (no symptoms) in the early stage of their infection. Among these individuals who are asymptomatic there is a [47% chance of a false positive coronavirus test](#) (the test said they are infected, but they really aren't). There just has to be a reason why 47% of tests for COVID-19 coronavirus are false positive. If not coronavirus, then what?

Dr. Lawrence Broxmeyer, a long-time disease investigator and skeptic of modern assumptions regarding the origins of infectious disease, postulates that a small and prevalent mycobacterium that causes 1.7 million deaths a year, is the origin of the infection, hospitalizations and deaths attributed to a newly mutated coronavirus, now identified as COVID-19.

According to Dr. Broxmeyer, COVID-19 may be nothing more than a passenger virus while the mycobacterium commonly known as tuberculosis, is wreaking all the damage in the lungs in the current epidemic that is holding the world in a news media-created grip of terror. Cause and effect have not been proven.

Tuberculosis: the great masquerader

Mycobacteria tuberculosis is the great masquerader. Just type in "tuberculosis" and "masquerade" into your web browser and [see how many maladies TB pretends to be](#). The TB mycobacterium has fooled doctor after doctor. And it may be fooling the entire world now.

Mycobacteria tuberculosis (TB) acts like a virus. It is a seasonal infection peaking in winter just like cold and flu viruses. While the TB mycobacterium is spread throughout the year, it is only when vitamin D levels are low and the immune system weak that it produces symptoms. It is a cell-wall deficient germ that appears like a virus under a microscope. It attacks the lungs, resulting in inflammation that essentially drowns infected patients who cannot breathe, just like COVID-19 coronavirus is said to do.

Demographic evidence

Now further circumstantial demographic evidence appears to correlate with the mycobacterial origins of the current lung disease pandemic that is said to have spread geographically via airplane travel from its epicenter in China to a long list of other countries.

Nowadays, TB is largely a disease of poverty and malnutrition.

The COVID-19 coronavirus epidemic in China occurred while China had been battling a rampant TB outbreak for many months.

The so-called expansion of COVID-19 coronavirus infections has been slow, traced to airline travel from China to destinations around the world. Of interest, [most cases \(70%\) of TB in the U.S. emanate from immigrants who travel to the U.S. or who are foreign born and acquired TB years ago](#), only for latent TB to erupt into symptomatic disease when the immune system could no longer keep it in check.

Italy erupts with COVID-19 infections

Inexplicably, there are [far more cases of COVID-19 in Italy than other European countries](#). These cases of COVID-19 coronavirus infection occurred, like in China, in a background outburst of TB infections.

Italy's Prime minister Matteo Salvini claims migrants have brought on this TB plague to his country. News [reports dating back to September of 2018](#) cite Salvini's assertion that a TB "invasion without rules or controls" has swept through Italy, carried by indigent migrants seeking asylum in his country.

At the same time, denials that migrants are spreading coronavirus throughout Italy have been aired and political criticism has been launched against Prime Minister Salvini for not being humanitarian by blocking entry to Italy by migrants. [Political opponents say](#): "Rescued migrants have been disembarking in Italy for many years; this has not led to any major outbreaks of disease among Italians."

But now what is to explain the exceptionally high number of COVID-19 infections in Italy compared to other European countries? Maybe it IS TB and not COVID-19.

While TB rates in Italy have generally been low, the [rate of COVID-19 infection on a comparative basis is now greater in Italy than in China](#) (97.3 cases per million in Italy, 56.1 cases per million in China)!

It is not necessarily newly arriving migrants that are carrying TB, masquerading as COVID-19 coronavirus, to Italy. TB can remain in a latent state in the human body for many years before it erupts into disease symptoms.

It is latent TB that largely threatens Italy. Poverty, squalid living conditions and stress is thought to [reactivate latent cases of TB](#) among migrants in Italy. An estimated [52% of TB cases in Italy emanate among foreigners in Italy](#). In a study of TB cases in Italy, 65% of study subjects were immigrants and their [median time since arrival in Italy was 3.6-12.5 years](#), which suggests latent rather newly acquired TB predominates.

Closing the borders to migrants in Italy may not quell the number of cases of TB. According to a recent report, there are ~6 million immigrants in Italy. Apart from immigrants, Italy has a very low rate of TB. [Place of birth predicts latent TB which predominates in immigrants](#). Fortunately, while one study shows ~33% of immigrants with TB exhibit no symptoms and could be carriers of TB to infect others, [transmission from migrants to the host country population is uncommon](#). This is believed due to the health status of native Italians.

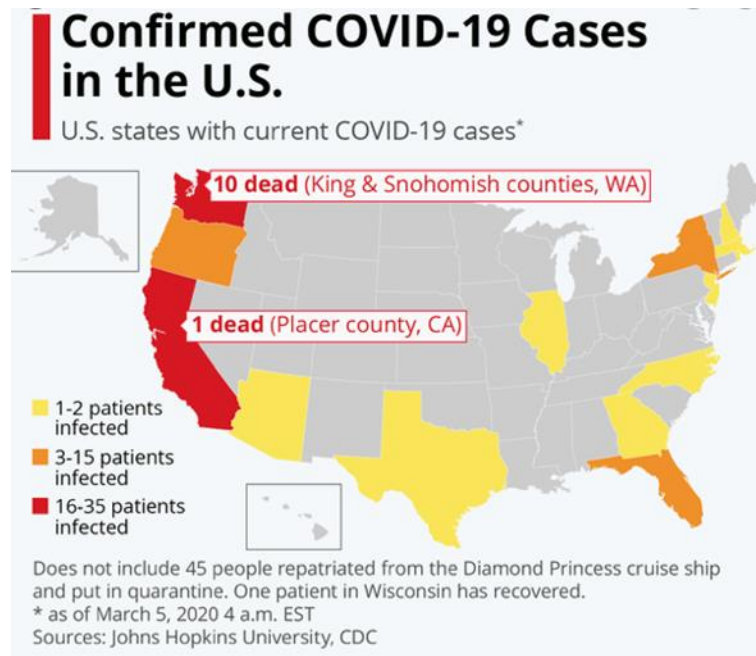
According to a 2017 report published in [Clinical Infectious Diseases](#) in 2017, the prevalence of tuberculosis of the lungs is 6.7 per 100,000 Italians, however the prevalence among migrants is 80 times greater.

According to [Statista](#), Italy has drastically cut uncontrolled migration from a high of 181,436 in 2016 to just 11,471 in 2019. From 2014 through the first two months of 2020 some 659,380 migrants entered Italy. [Reuters reports](#) Italy is fining rescue ships sponsored by charities in an attempt to reduce and even expulse migrants who have no legal right to cross its borders. Despite efforts to reduce or totally block migration into Italy, an estimated [5.3 million foreigners legally reside inside its borders](#).

[Cough is a major symptom of COVID-19](#). Coughs are often caused by excess mucus in the bronchus, an airway to the lungs. Swelling and narrowing of the bronchus with excess mucus (bronchiectasis) was [detected among 52% of COVID-19 cases](#) examined by chest x-ray. However, bronchiectasis is a finding that is [far more common \(8X\) among patients in Italy with a history of tuberculosis](#) (0.47% versus 0.06%) than other lung infections.

COVID-19 in U.S.: immigrant port of entry

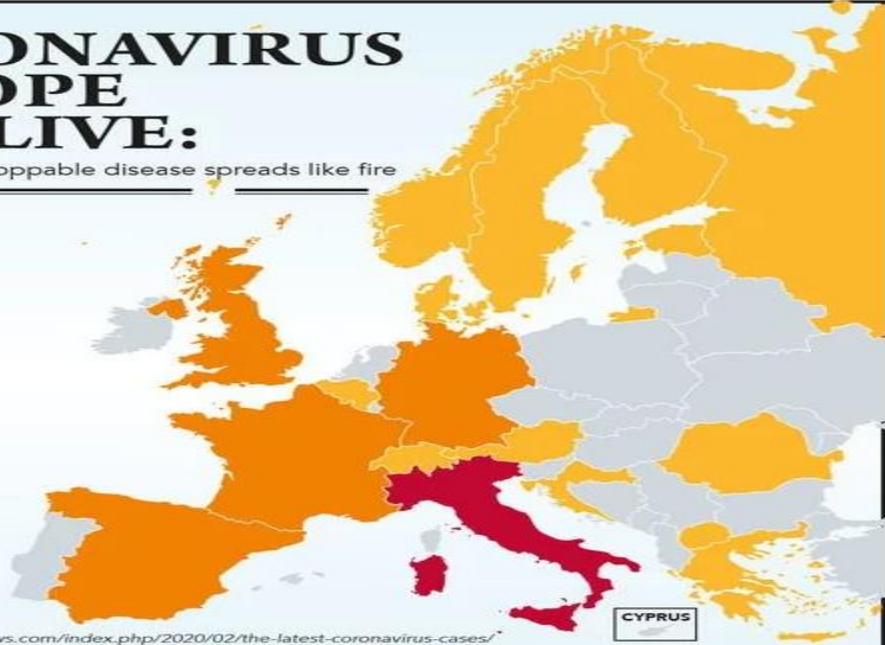
Back in the U.S., examination of the states that report the most cases of COVID-19 coronavirus correlate with the number of migrants crossing America's southern border. California and Mexico having the largest number of COVID-19 coronavirus infections. [Mexico is No. 1 foreign importer of TB to the U.S.](#)



CORONAVIRUS EUROPE MAP LIVE:

UPDATES as unstoppable disease spreads like fire

Italy **1,694**
Germany **130**
France **130**
Spain **84**
UK **36**
Switzerland **24**
Sweden **14**
Norway **19**
Croatia **7**
Austria **14**
Greece **7**
Russia **2**
Finland **6**
Romania **3**
Denmark **3**
Belgium: **2**
Macedonia **1**
Estonia **1**



SOURCE: <https://bnonews.com/index.php/2020/02/the-latest-coronavirus-cases/>

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