The Nelson Thinker

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"NEVER BE AFRAID TO RAISE YOUR VOICE FOR HONESTY AND TRUTH AND COMPASSION AGAINST INJUSTICE AND LYING AND GREED. IF PROPLE ALL OVER THE WORLD... WOULD DO THIS, IT WOULD CHANGE THE EARTH." -WILLIAM FAULKNER, WRITER

SPECIAL EDITION

Silenced no more - NZ doctor speaks out

Doctor Anne O'Reilly hails from Ireland but has practiced in New Zealand for over 20 years, about half of her medical career; the last five years in Nelson. During that time she upskilled into Functional Medicine, recognising "we're not really trained, as doctors, to improve health - we're taught to manage disease. I find that sad and frustrating." The last year of her career has been by far the most difficult: a challenge of conscience, of disputing heavy-handed authority, and upholding her commitment to the Hippocratic Oath.

Since the beginning of 2020 Dr O'Reilly and colleagues observed and researched the response to the international outbreak of Covid-19. She has involved herself in the sharing of information, networking with medical professionals across New Zealand and the world. Anne now feels privileged to be part of groups that reach over 50 different countries. She's working closely with New Zealand Doctors Speaking Out with Science (NZDSOS) which is linked in with the people-funded non-profit World Council for Health - educating and empowering people around their health decisions.

"We realised early in 2020, that a lot of information wasn't coming through publicly: particularly in relation to treatments that could be used early on when symptoms first appeared rather than taking panadol and waiting it out. Experienced and respected intensive care specialists and MD's were collaborating around the world, producing papers from multicentre trials by May 2020 and saving people's lives with early treatment protocols... But they were being challenged and silenced. When talk of the vaccine began, we knew there was no need (and many scientific reasons called it into question)... in amazement we saw it unfolding, and realised there are bigger powers at work here."

Online webinars were publicly broadcast in August 2020 and February 2021, by 'Covid Plan-B': a multi-disciplinary group of experts from New Zealand collaborating with public health experts around the world who suggested different approaches to managing the pandemic. The group explored whether New Zealand's attempt to eliminate Sars-Cov2 would cause more health, social and economic harm than the virus itself, "They approached the Government via the Ministry of Health but were met with an unwillingness to dialogue, censoring of their messages and obstacles to putting on their webinars. This active resistance of valid ideas was highly unusual," says Dr O'Reilly.

"The webinars by Covid-Plan B, were truly wonderful and affirming to hear at that time. To listen to such an array of international public health specialists, epidemiologists, statisticians and economists who presented different viewpoints on pandemic management was gratifying – particularly the prospects of early treatment capabilities: but they were challenged and shut down."



Nelson's Dr Anne O'Reilly, General Practitioner of 42 years.

"In February '21, our prescribing abilities became restricted," she says. "I had been prescribing Ivermectin for a patient who was very ill. It was making a big difference within a protocol of other drugs and lifestyle changes. Then, in a trend mirrored worldwide, doctors got a letter from authorities banning Ivermectin as a prescription for Covid-19 - not long after hydroxychloroquine was trashed overseas, despite all the evidence of it being helpful."

Dr O'Reilly says the vaccine rollout steamrolled safe treatments that studies were showing to be effective. Instead, the Pfizer/BioNTech injection was heralded as the saviour - though it was not a traditional vaccine.

"It was actually an untested genetic therapy that should have had a lot of restrictions around it, but it got approval with restrictions. When it came to NZ, it was under Emergency Use Authorisation (EUA) which means it could only be given to a restricted number of people - but it was rolled out countrywide almost straight away."

Dr O'Reilly was asked to be on a team of doctors helping lawyer Sue Grey challenge the Government on the legality of their mass vaccination programme at the High Court in Wellington in May 2021. The court upheld the claim that the nationwide rollout was *unlawful* because it was not kept to a restricted number of people under the terms of the EUA... *continued Page* 2.



Contributions/feedback welcome via email: gbthinker@protonmail.com The Thinker relies on your generous donations: Kiwibank 38-9008-0243382-02 Thank you to those who regularly donate. Previous issues found on our Facebook page. So the Government changed the law the next day.

Dr O'Reilly and her colleagues had already informed MCNZ and The Royal College of General Practitioners (RNZCGP) of their intention to support the court case and their concerns around the potential risks of an untested therapy to the under 50 population, with references to peer reviewed scientific papers. They were shocked to receive individual short letters which referred them to the Ministry of Health's website and reiterated that they would be expected to take the injection. "MCNZ essentially ignored the evidence, our concerns and reasoning, and told us to follow orders."

"It was chilling to realise we could not trust the Medical Council of NZ (or RNZCGP) anymore to provide information about all the available options for treatment."

"It became impossible not to speak out directly to the public. We had written by then to many agencies, Medsafe, The NZ Human Rights Commission (who agreed with our concerns but had no power to act further.) Never mind informed consent - you can't give informed consent if you don't know the risks and safety. It's only since then that a US Court judge has ordered Pfizer to disclose the necessary clinical data.

"Covid Plan-B raised the flag of alarm in the beginning, and they have been so badly treated... by colleagues, by media, by Government... they tried to warn the public for a long time. By speaking out like this, I have been and will be reprimanded, severely. But what are we meant to do? How can we not warn people? It's horrific how much information is missing. However it's complicated and complex for people to understand... it's been such a mirage of dressed up scientific jargon, so it's confused people. I feel privileged to have dived deeply for over two years... Most people have no time to do this. Doctors included. We are trained to follow guidelines few will question who they consider medical authorities. That's been ingrained since our first hospital posts."

Dr O'Reilly says working on the NZDSOS online help clinic at the end of 2021 was the hardest time in her career – first dealing with mandated health professionals and teachers who wanted to keep their jobs without being forced to take the jab – then dealing with the fallout of those who'd been harmed.

"The vaccine-injured we've had contact with have been sent from pillar to post, they're so ill. They cannot get the help and treatment - it's not even being acknowledged. It's like a new medical syndrome. Doctors are not prepared for disease that's so systemic, affecting every organ in the body - each person reacts differently. They can't fit everyone into a box, yet the common denominator is the vaccine. In these people, there is often a temporal relation of being perfectly healthy and functioning - to disabled. In some, sudden death. They need proper investigation yet there have been only 3 autopsies and in 2 we are still waiting for the Coroner's verdict which may take years. This is unacceptable medical practice, happening here in NZ and in countries overseas. An OIA request by independent lawyers dated February 2021 revealed the Government assumed there would be 1.1% serious adverse reactions from the vaccination rollout.¹ This means they were willing to risk 55,000 serious adverse reactions in New Zealand! Adverse event reporting and records are known both

here and overseas to be inadequate and to underestimate actual numbers. Both here and overseas statistical reports of excess deaths this year are extremely concerning in younger age groups. This evidence has been presented to our authorities (who should be monitoring anyway.)"

"We know there's harm... people have been affected who had willingly participated as they had been told to help their communities. People have reported workplace bullying or peer pressure... Coercion to the worst degree. That wouldn't happen in a free and independent society that we think we're in - and that's why people can't believe it's happening.

"The pattern that's in NZ is the same as everywhere else in the world: the same legal restrictions, the same silencing, bullying, the same information being hidden. The same medical institutional abuse of their authority to all healthcare workers. Overreach. It's not about facts or science or evidence - there's so much evidence! It's about bias, it's about belief - it's all about how we perceive it, how we're conditioned, and the pressure of the groups we're in.

"Values have been trashed. Ethics have been trashed. There are assumptions of medical consensus where in fact medical controversy is silenced and debate actively discouraged. This is very hard to acknowledge as the majority of people still believe we live in a democracy with freedom of speech."

Wrangling her right to free speech

Dr O'Reilly's medical license was suspended in January '22. "I received a letter from the Medical Council in August '21. They called my participation in a July video "unprofessional behaviour." The video was with an anonymous teenager on the discussion taking place in this age group ahead of the rollout. They also questioned my adherence to their May '21 Guidance Statement (which essentially contradicted our Hippocratic Oath, previous MCNZ guidance and their rules on Informed Consent.)

Dr O'Reilly was asked to sign a voluntary undertaking to comply with MCNZ conditions on how she spoke about Covid-19 and vaccination. This would restrict her from "sharing information or materials, speaking publicly or in consultation with patients without stating that opinions were not shared by the majority of my peers, and I should refer patients to the Ministry of Health and Government websites for any information related to Covid 19 and the vaccination rollout, offering to refer the patient to another nearby doctor who can provide them with advice in line with guidance issued by the Ministry of Health. I had to agree to being monitored on my compliance to these undertakings."

Uncomfortable with the conditions, she refused to sign, twice. A third request was accompanied with a suspension warning and the threat of withdrawal of Dr O'Reilly's medical legal advice through her Medical Insurance company, meaning she'd have to represent herself if needed against the Medical Council. "By that time, six more of my colleagues, involved with the work of NZDSOS, also received similar letters after trying to educate the public about what we saw happening. Months before, our letters with questions of concern were met with silence from MCNZ and the RNZCGP.







Dr O'Reilly recently attended the World Covid-19 Congress by Medicos Pela Vida (Doctors for Life) in Brazil. L to R, pictured with Doctors for Life founder Dr Maria Emilia Gadelha Serr; the speakers at the conference; Dr Richard Urso, ICU Lung Specialist Pierre Kory and Pathologist Ryan Cole.

After a group discussion with our medical insurers, we each reluctantly signed adapted versions of these voluntary undertakings. With this, I submitted 31 questions to the Medical Council, supported by an enormous database of valid peer-reviewed medical evidence.

As vaccine mandates and the Government's 'traffic light' system set in across the country, Dr O'Reilly received a letter from the MCNZ just before Christmas, suspending her from all forms of medical practice until a Professional Conduct Committee (PCC) could be held – estimated to take place in 9–12 months. "I could not earn a living from any training or skills I had attained in 42 years of practice or I would be charged with the criminal offense of practicing medicine without a license."

She could appeal the decision in the District Court, but that would take up to eight months. Lawyers told her waiting for the PCC to defend her position could take up to two years. Efforts by Dr O'Reilly's legal team to recover the Minutes of the meeting or the voting split on the decision to suspend her revealed there were no records.

After 9 months of written tussle and the prospect of a long drawn out appeal process, Dr O'Reilly realised she didn't want to return to the control and regulation of her medical autonomy in relation to her patients and the freedom to practice as she believed best. "After five months of not being able to earn a living in medicine under the suspension rules, I decided to ask for deregistration and surprisingly (especially to my lawyers) it was granted." Dr O'Reilly traded her medical license for the freedom to speak without restrictions placed on her profession by Covid policy.

"I believe I can be of more help to my clients and my colleagues in future if I am free to practice what I research, learn from respected experienced and wise clinicians and what I believe is helpful - without the constraints of the political agendas or the financial lobbying that has become commonplace throughout our society, institutions and media. We have sadly become accustomed and numbed to the consequences of these insidious and deliberately concealed forces, in the last few decades. I had been training in craniosacral therapy over the last 3 years, which is a form of osteopathy. With this modality and my Functional Medicine experience, I hope I can address some of the health consequences of these very stressful and disturbing couple of years."

Dr O'Reilly is in a unique position of being able to speak out. One of her colleagues who is fighting for their freedom of speech is suspended from practicing, unable to make a living as they wait for their day in court. Others have been forced to sign the 'voluntary' undertaking in order to serve their community in silence. Many more have taken jabs and boosters in order to practice, against their wishes - nudged by coercion.

"Despite the severe staff shortages and collapse of health services, these public health policies of workforce restrictions stand. There is no evidence, scientific or otherwise, to back these policies up. As in other countries, bureaucrats make up the rules as they go along. There is no tolerance or willingness to be criticized. No one is held accountable.

"Colleagues are leaving New Zealand and finding jobs elsewhere with less draconian and illogical restrictions on their practice - further adding to the skilled shortage.

"NZDSOS will keep providing censored and restricted health information to the NZ population and stand for our rights as healthcare clinicians and the health and human rights of our patient population ... we have presented all the studies, all the evidence accumulating from overseas to validate our perspective - while the Medical Council have presented essentially nothing except their statements and assumptions of best available evidence to justify vaccination/immunisation having a critical role in protecting the health of the NZ public by reducing community risk of acquiring and transmission of Covid -19. As we all know now, the injection does not prevent acquiring or transmission of the virus and there is now even doubt on any benefit in shortening the advanced serious complications. So this clinical trial is not an immunisation as defined by other vaccines.

"Medical science and practice is always in evolution. It is never settled. That is why ongoing discussion, open debate and continued research gathering is vital. This has always been a regular feature of medical practice, until March 2020 . I believe statements made by bureaucrats (not clinicians) from public health departments and medical regulatory agencies in New Zealand and around the world supplying so-called "expert evidence" and "modeling" to Governments has misled the public and the healthcare profession."

The GB Thinker thanks and applauds Dr Anne O'Reilly for her courageous and dedicated work that moves her uncomfortably against the grain. The time she gave to this story interrupted precious time visiting family in Ireland but like her colleagues around the world, Anne recognises the necessity to carefully share her story wherever possible, to crack the density of the walls against it. Such times call for your discernment - is it mis-information, or **missing** information?

Flip to Page 4 for recommendations of more resources from Dr O'Reilly, further education of how authorities influence public behaviour, international organisations presenting insights into the deceptions of the worldwide pandemic response, and books and documentaries that shine light more deeply into a story that has impacted so many, so much.

~Samantha Blanchard

Mandates continue to compromise local health services

Healthy, experienced workers are still being lost to a health system already starving for staff, due to the Government's hard-line vaccination policy.

A Nelson dental hygienist (whose name has been changed for privacy) with 35 years experience and practical abilities has clutched on to her job until now. Josephine Goodall would attract comments from clients about her gentle approach whilst scaling teeth. She took the necessary first two jabs to keep her job just three weeks apart last year, against her personal wishes, but to stay in employment. "News came out the day after my second vaccination which said 6-8 weeks between shots was recommended. I was gutted. And I developed some concerning side-effects."

Josephine had pains in the area of her heart, and shooting through her head. "I took Nurofen and Panadol, which helped – I've only since heard they help with heart inflammation. But I endured a prevailing feeling of weirdness along with breathlessness and arrhythmia for a couple of days. After that, I had chronic diarrhea and pain for three months."



The reaction meant a mandated booster was out of the question.

Well-placed annual leave followed by an Omicron infection where immunity was acknowledged, gave Josephine a few more months of her livelihood. But, despite Nelson already struggling to fill a shortage of dental hygienists, her contract was terminated last month. Unable to fill her role, the practice has had to cut dental hygiene services down from seven days a week, to just three.

Fortunately, Josephine says her management and several Nelson dental practices are sick of the controls and pushing back. "My boss thinks it's all ridiculous, and the last Nelson-region NZ Dental Association meeting revealed several other dentists are fed-up and annoyed because they're losing staff. They contacted the Dental Council whose hands are tied because it's a directive from the Ministry of Health. But they're continuing to push: my boss has told me the next step is to get written submissions from everyone who's been directly affected. That's progress - the more people that stand up and call out the ridiculousness, the more chance there is they'll do something about it." ~Samantha Blanchard



Do you wonder why the media continually churn out more and more drama and scaremongering?

Ever wondered how "anti vaxxer" and "conspiracy theorist" became household words with little understanding of the origins or meaning?

Do you ever wonder how we got to be so fearful and anxious and overly concerned with "contagion"?

Further content recommended by Doctor Anne O'Reilly:

Books

A State of Fear by Laura Dodson The United States of Fear by Dr Mark MacDonald

Documentaries

Monopoly Uniformed Consent A Letter to my MP Vaxxed 2

Website resources

NZ Doctors Speaking Out with Science - nzdsos.com Covid Plan B - covidplanb.co.nz

 $Reaching\ People\ -\ www.reachingpeople.net$

International Business Strategist David Charalambous has put together this excellent website on how to communicate about hidden agendas. The fragmentation and polarisation of society and relationships by behavioural strategies has taken

a major toll. How to communicate with family, friends and colleagues - so they can listen?
Why are "facts" and "evidence" useless?
Pandata.Org - "Breaking the Chains"
International group of professionals educating about what is going on beneath the knowledge or awareness of the public.

gins or meaning?

2010 UK Institute for Government MINDSPACE document, easily found by googling 'Mindspace Government' says:

"Today's policymakers are in the business of influencing behaviour and decisions" - what about decisions about health choices without people's knowledge or consent? Do you trust elected representatives to make your healthcare decisions?

There is an excellent YouTube video by 'Reaching People' summarising this long document, which is an integral part of every Western Government with a team of behavioural strategists paid to influence or "nudge" compliance with government policy.

Is this ethical? There has been no public consultation in 12 years on this subtle means of control.

The NZ Department of the Prime Minister and Cabinet references the MINDSPACE document. These 9 pillars of coercion reduce people's ability to question and so the river of propaganda flows...

