

between:-

THE QUEEN on the application of MR ROBIN CLARKE

Claimant

and

THE GOVERNMENT OF THE UK*

Defendant

**REPLY TO
DEFENDANTS' SUMMARY GROUNDS**

1. The Defendants' Summary Grounds purports to make out a strong case but in reality it reflects their complete lack of any genuine defence.
2. At no point do they engage, or have they ever engaged, with any of the evidence presented in SoFG paragraphs 19-29 (esp. 22) and 35-45 (esp. 43). They do not because they cannot. Those facts are undeniable and damning and that is the end of this matter. Likewise they present no counter-reasoning whatsoever. They just resort to asserting that 100% solid undeniable facts are mere "opinions". They do not present any alternative facts because there are none, these are the facts. Their consistent comprehensive avoidance of scientific debate reflects this charlatanism.
3. It will be shown here that they instead resort to irrelevant whataboutery insinuation, combined with misleading misrepresentation.

* Including: The Secretary of State for Health and Social Care, The Secretary of State for the Home Department, The Secretary of State for Business, Energy, and Industrial Strategy, Parliamentary Under-Secretary of State at the DHSC, Parliamentary Under-Secretary of State at the Dept for Business, Energy, and Industrial Strategy.

4. Their paragraph 1 makes irrelevant and misleading reference to the Order of Bourne J. That Order explicitly states about:

“The premise underlying both Claim and application....”....

that:

”Whether or not that premise proves to have any merit is not to be decided on this application.”

It thus could not have been made any more clearly by Bourne J that his Order had no relevance whatsoever to the merits of the Claim per se. Hence no relevance in this Summary Grounds.

5. Their paragraph 2 incorrectly asserts that “The Claimant has not properly identified the decision(s) which he is challenging.” And yet they were adequately and properly identified as “*the various ongoing regulations relating to the Covid-19 pandemic ...*” in SoFG paragraphs 1, 62, and 63. The Defendants’ attempt to imply that they do not know what that means lacks credibility. And all the more so in that reference was made to their own list of the regulations, and with that list copied out in para 62 of the grounds. To the extent that some regulations may no longer be “ongoing”, that hardly constitutes some significant problem worth fussing over here. Most to the point is that older regulations may be being rolled on or reactivated, and no-one knows what new ones may be added in coming months.
6. Their paragraph 3 is again baseless assertions. The grounds present FACTS. The Gompertz curves are not “opinions” or “assertions” or “views”. These graphs showing lack of effects of lockdown and masks are FACTS, not “opinions” or “assertions”. Likewise are the graphs showing that the asserted increase of so-called “cases” reflects merely the false use of tests. Likewise are the quotations showing lack of validity of the “tests”, not least the FACT that the best these hugely-resourced Defendants could come up with was yet another untruth (SoFG para 43). Likewise is the FACT that the Defendant’s own document of “evidence” for the lockdowns actually contained no real evidence whatsoever (SoFG para 28).
7. Thus contrary to their paragraph 3, the grounds present solid legal grounds, to which the Defendants can only respond with the nonsenses refuted in the preceding paragraph here. The Claimant has stated in clear paragraphs what the grounds are, and what the facts are that substantiate those grounds.

8. The Defendants' paragraph 4 seeks to make a point that some of the earlier decisions involved could be out of time. That point is not well-founded. Judicial reviews normally have time limits for good reasons relating to the need to not delay the projects involved such as building or redevelopment, with the need for those working on such schemes to obtain a position of legal certainty within a reasonable time. But no such consideration has any relevance to these regulations, which have in any case just been steamed into enforcement without even any attempt at proper parliamentary or other public debate or consultation. The Claim makes clear that it is only concerned with those regulations that are ongoing (or in the future) and, in the context of constantly changing facts and other realities (*and* the Defendants' constantly changing *on-off-on-off-on* of their various lockdown regimes), it is proper that the amenability to judicial review remain live concurrently with such ongoing churning of the regulations. There can not be any prejudice against the Defendants thereby. Hence, even where there might be a question of time limit, there is no justification for its application in this case as a defence.

9. The Defendants' paragraph 5 is again a series of indefensible mere assertions. "*The Secretary of State provided the Claimant with a detailed response to his pre-action letter*" But on the contrary that response contained not one jot of scientific evidence in justification and instead the major outright untruth in its paragraph 20, as made clear in SoFG paragraph 43 (bundle page 29). The allegedly "detailed" response had nothing else to say in response to any of the following in the original LoC:

- (1) there is a failure to take into account the considerable evidence that there is no credible scientific basis in justification of these policies;
- (2) there is a failure to take account of the considerable evidence that these policies are causing and will continue to cause massive adverse consequences, including increased morbidity and mortality, such as to considerably outweigh any benefits;
- (3) there is a lack of credible coherent scientific basis for the policies, such that no reasonable or rational decisionmaker would make such decisions.

In particular:

There is no basis for assuming that the PCR tests have validity for diagnosing cases or infections, and much reason for concluding that they do not.

There is no good reason to believe that there is currently a concerning high level of cases or infections, or rapid increase of cases or infections.

There is no basis for assuming that a pandemic would become excessively harmful in absence of the socially-oppressive policies and or use of quack vaccine technologies.

Unless there be demonstrated a credibly sound scientific basis,

“The Claimant’s grounds do not remedy the deficiencies pointed out in the Secretary of State’s response”. On the contrary, there were no such deficiencies, as made clear in the Claimant’s Commentary on their LoR, at 151-2 in the bundle.

“Therefore,.....”

As those predicates were untrue, the real “therefore” is that the follow-on invitation cannot have any sound rationale therefrom. Thus the whole of paragraph 5 is unfounded. As for the Defendants’ concept of their “providing more information”, the Claimant (and the whole nation) is still (ten months on) awaiting even one jot of scientific facts in justification for this gigantic imposition of regulations, and encountering only their major outright untruth in LoR paragraph 20 as made clear in SoFG paragraph 43 (bundle page 29).

10. The Defendants’ paragraph 6 makes irrelevant reference to the Dolan case. It is irrelevant because Dolan’s case depended on entirely different grounds and basic premises and majorly different evidence in support. Indeed, this Claimant only filed this claim because he noted that Dolan had hopelessly failed to present the evidential case here provided (that the Defendants have no genuine scientific basis for their decisions and on the contrary the science clearly disproves their case).
11. In their paragraph 7 they cite two other JR claims, which are completely irrelevant here because they are on entirely unrelated matters and evidence. Even the point they raise is meritless, an attempt to imply that because similar arguments and evidence were deployed against both HS2 and RIS2, “therefore” something must be at fault. But that great similarity was entirely justified, because both HS2 and RIS2 are major transport schemes, both based on exactly the same pseudo-economics make-believe as is condemned even by many in economics itself (as detailed right there in those documents they reckon to sneer at, in paragraphs 3, 7, and 8 of the relevant Statements).

12. The Defendants also seek to make out that the Claimant has incorrectly specified who are the Defendants. The Claimant understands the situation as follows. From the outset, and ongoing, there has been considerable lack of transparency as to who was making these decisions. There remains no clear protocol specified as to who could make such decisions in future instances. There is no reason to believe that the Prime Minister himself could not play a decisive role in any ongoing decisions. It is in the nature of this Claim that the relevant Defendant/s cannot be precisely specified in advance. In any case, the Claim has made clear (via a footnote) that the list of potential defendants includes the SoS for Health and Social Care.
13. Meanwhile, more and more facts and other evidence is accumulating in support of the Claimant's case, not that more has been needed anyway. For instance an article in the British Medical Journal here appended as Exhibit RC13, which gives authoritative endorsement to the Claimant's portrayal of the catastrophic malfunctioning of the system of "scientific" "expertise" (a subject about which he had already written a weighty book, *Experts Catastrophe*). Note may also be taken of the numerous informative responses to that Editorial, not least the following:
<https://www.bmj.com/content/371/bmj.m4425/rr-31>
<https://www.bmj.com/content/371/bmj.m4425/rr-35>
<https://www.bmj.com/content/371/bmj.m4425/rr-39>
14. In extreme contrast to that highly critical content in the BMJ, there is this article in the Guardian in which Prof Jim Al-Khalili crows about how supposedly wonderfully the scientific "expertise" system has been functioning:
<https://www.theguardian.com/commentisfree/2020/dec/28/scientists-fought-coronavirus-now-they-face-the-battle-against-disinformation> .
And here is another of the many such:
<https://www.theguardian.com/commentisfree/2020/dec/25/scientists-covid-studies-vaccine-2020>
15. In addition, there is the letter to the government from "UK Medical Freedom Alliance", which presents numerous further facts of the outright pseudoscience underlying these regulations. https://uploads-ssl.webflow.com/5fa5866942937a4d73918723/5fbd13488af2de09d68bd61c_UKM_FA_Letter_to_MHRA_JCVI.pdf

16. In addition, you can hear (from BBC Radio 4, 27th Nov) the damning words of Professor of Public Health Alyson Pollock (to which again not the slightest rebuttal has been made), pointing out that a *Hundred Billion* of working taxpayers' money is being abused on utterly pseudoscientific “testing”, here:
www.pseudoexpertise.com/covid27novradio4.wav and
www.pseudoexpertise.com/covid27novradio4.mp3

17. In conclusion, this response from the Defendants should be recognised as their final admission that despite their huge resources they have absolutely nothing to say by way of defence of the pseudo-reasoning and pseudo-evidence exposed by the Claimant’s SoFG paragraphs 19-29 (esp. 22) and 35-45 (esp. 43).

STATEMENT OF TRUTH

I believe that the facts stated in this Reply are true.

I understand that proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.*

Robin Clarke

Robin Clarke, Claimant

Dated 2nd January 2020

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* I consider the new requirement to include this sentence here to be highly offensive.
I tell the truth because I am honest, not because of such threats.
And those who do lie to a court do not deserve such a warning.



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Covid-19: politicisation, “corruption,” and suppression of science

When good science is suppressed by the medical-political complex, people die

Kamran Abbasi *executive editor*

Politicians and governments are suppressing science. They do so in the public interest, they say, to accelerate availability of diagnostics and treatments. They do so to support innovation, to bring products to market at unprecedented speed. Both of these reasons are partly plausible; the greatest deceptions are founded in a grain of truth. But the underlying behaviour is troubling.

Science is being suppressed for political and financial gain. Covid-19 has unleashed state corruption on a grand scale, and it is harmful to public health.¹ Politicians and industry are responsible for this opportunistic embezzlement. So too are scientists and health experts. The pandemic has revealed how the medical-political complex can be manipulated in an emergency—a time when it is even more important to safeguard science.

The UK’s pandemic response provides at least four examples of suppression of science or scientists. First, the membership, research, and deliberations of the Scientific Advisory Group for Emergencies (SAGE) were initially secret until a press leak forced transparency.² The leak revealed inappropriate involvement of government advisers in SAGE, while exposing under-representation from public health, clinical care, women, and ethnic minorities. Indeed, the government was also recently ordered to release a 2016 report on deficiencies in pandemic preparedness, Operation Cygnus, following a verdict from the Information Commissioner’s Office.^{3,4}

Next, a Public Health England report on covid-19 and inequalities. The report’s publication was delayed by England’s Department of Health; a section on ethnic minorities was initially withheld and then, following a public outcry, was published as part of a follow-up report.^{5,6} Authors from Public Health England were instructed not to talk to the media. Third, on 15 October, the editor of the *Lancet* complained that an author of a research paper, a UK government scientist, was blocked by the government from speaking to media because of a “difficult political landscape.”⁷

Now, a new example concerns the controversy over point-of-care antibody testing for covid-19.⁸ The prime minister’s Operation Moonshot depends on immediate and wide availability of accurate rapid diagnostic tests.⁹ It also depends on the questionable logic of mass screening—currently being trialled in Liverpool with a suboptimal PCR test.^{10,11}

The incident relates to research published this week by *The BMJ*, which finds that the government procured an antibody test that in real world tests falls well short of performance claims made by its manufacturers.^{12,13} Researchers from Public Health

England and collaborating institutions sensibly pushed to publish their study findings before the government committed to buying a million of these tests but were blocked by the health department and the prime minister’s office.¹⁴ Why was it important to procure this product without due scrutiny? Prior publication of research on a preprint server or a government website is compatible with *The BMJ*’s publication policy. As if to prove a point, Public Health England then unsuccessfully attempted to block *The BMJ*’s press release about the research paper.

Politicians often claim to follow the science, but that is a misleading oversimplification. Science is rarely absolute. It rarely applies to every setting or every population. It doesn’t make sense to slavishly follow science or evidence. A better approach is for politicians, the publicly appointed decision makers, to be informed and guided by science when they decide policy for their public. But even that approach retains public and professional trust only if science is available for scrutiny and free of political interference, and if the system is transparent and not compromised by conflicts of interest.

Suppression of science and scientists is not new or a peculiarly British phenomenon. In the US, President Trump’s government manipulated the Food and Drug Administration to hastily approve unproved drugs such as hydroxychloroquine and remdesivir.¹⁵ Globally, people, policies, and procurement are being corrupted by political and commercial agendas.¹⁶

The UK’s pandemic response relies too heavily on scientists and other government appointees with worrying competing interests, including shareholdings in companies that manufacture covid-19 diagnostic tests, treatments, and vaccines.¹⁷ Government appointees are able to ignore or cherry pick science—another form of misuse—and indulge in anti-competitive practices that favour their own products and those of friends and associates.¹⁸

How might science be safeguarded in these exceptional times? The first step is full disclosure of competing interests from government, politicians, scientific advisers, and appointees, such as the heads of test and trace, diagnostic test procurement, and vaccine delivery. The next step is full transparency about decision making systems, processes, and knowing who is accountable for what.

Once transparency and accountability are established as norms, individuals employed by government should ideally only work in areas unrelated to their competing interests. Expertise is possible without competing interests. If such a strict rule becomes impractical, minimum good practice is that people

with competing interests must not be involved in decisions on products and policies in which they have a financial interest.

Governments and industry must also stop announcing critical science policy by press release. Such ill judged moves leave science, the media, and stock markets vulnerable to manipulation. Clear, open, and advance publication of the scientific basis for policy, procurements, and wonder drugs is a fundamental requirement.¹⁹

The stakes are high for politicians, scientific advisers, and government appointees. Their careers and bank balances may hinge on the decisions that they make. But they have a higher responsibility and duty to the public. Science is a public good. It doesn't need to be followed blindly, but it does need to be fairly considered. Importantly, suppressing science, whether by delaying publication, cherry picking favourable research, or gagging scientists, is a danger to public health, causing deaths by exposing people to unsafe or ineffective interventions and preventing them from benefiting from better ones. When entangled with commercial decisions it is also maladministration of taxpayers' money.

Politicisation of science was enthusiastically deployed by some of history's worst autocrats and dictators, and it is now regrettably commonplace in democracies.²⁰ The medical-political complex tends towards suppression of science to aggrandise and enrich those in power. And, as the powerful become more successful, richer, and further intoxicated with power, the inconvenient truths of science are suppressed. When good science is suppressed, people die.

Competing interests: I have read and understood BMJ policy on declaration of interests and have no relevant interests to declare.

Provenance and peer review: Commissioned; not externally peer reviewed.

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