

FLCCC[®]
ALLIANCE

Be Your Own Research Detective



Why You Should Learn How to Read Research

Knowledge is power and when you know how to read and understand the facts, you then have a strong line of reasoning when having a discussion with family, friends, and colleagues.

Scientific papers were once trusted sources for the latest breaking and noteworthy discoveries in the world of science and medicine. Today, those fields are influenced and controlled by companies and entities that have little interest in educating and informing the public.

Journals and scientific papers have become a form of advertising products and methods.

It is up to you, the consumer, to read and decide if something is the truth or if someone is twisting data to influence the public and ultimately sell more products.

Corporations have become master manipulators at molding data. Information can be presented in ways that show a study is 'truthful' and 'factual', even when the raw data shows another conclusion. The purpose of this guide is to introduce you to some common tactics they use and help you understand how to read research to recognize how data can be manipulated to produce a biased conclusion.

With these insights you can become a research detective and decide for yourself where the truth lies.



The Hidden Tricks Used to Form Biased Conclusions

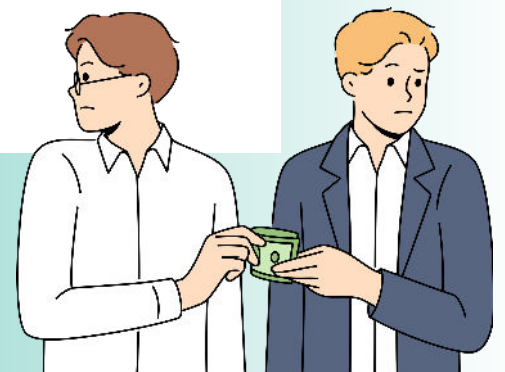
It is hard to believe that science could be controlled by money and power and manipulated to push a product or intervention. Unfortunately, this has become the status quo in much of scientific research.

A study can be manipulated in several ways. For example, many papers showing negative outcomes simply do not get published. The truth is hard to discern because of this. Many other studies are “zombie studies” - meaning the study was not actually conducted. It is estimated this happens to about 20% of papers.

Important data is often not included in the papers, so you need to know what to look for. What is not in a paper can be very revealing. An example of this is when details on adverse effects or subgroup analyses are left off. You may ask, ‘why is this information being hidden?’

One way to tell if a trial is manipulated is to compare the pre-registered protocols with the methods actually employed in the paper. Read more about this [here](#). Questions to ask:

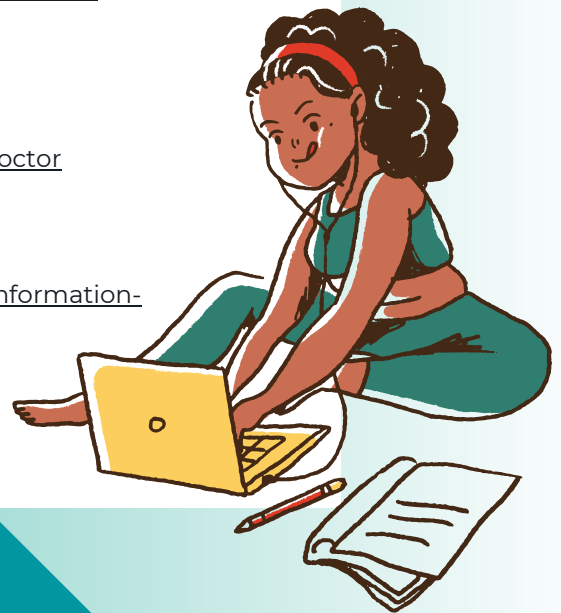
- Did outcomes change from the original protocol?
- Did statistical methods, sample size, inclusion or exclusion criteria change?
- Was there a clear sample group and control group?
- Were factors excluded (or included) that would cause the data to lean towards a particular result?



Deepen Your Knowledge with More Reading

The following are great resources to further your understanding about reading research. They are clinicians, have careers in research science, are data experts, and/or have written and presented lectures on research and research design.

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- **Dr. Tess Lawrie's Substack**
 - <https://substack.com/@drtesslawrie>
 - **Alex Marinos' Substack**
 - <https://substack.com/@doyourownresearch>
 - Tess Lawrie's interview with Andrew Hill: <https://twitter.com/alexandrosM/status/1500124283850219528?lang=en> Tess Lawrie's interview with Andrew Hill
 - **Aaron Hertz's Substacks**
 - <https://ashmedai.substack.com/p/the-complete-idiot's-guide-to-cooking>
 - <https://ashmedai.substack.com/p/did-the-cdc-doctor-their-2021-study>
 - **Dr. Pierre Kory's Substack**
 - <https://pierrekory.substack.com/>
 - **A Midwestern Doctor's Substack**
 - <https://substack.com/@amidwesterndoctor>
 - **Kelly Kronherth's Substack** - <https://substack.com/@kelleyk>
 - **The Disinformation Playbook**
 - <https://www.ucsus.org/resources/disinformation-playbook>



8 Steps to Begin Analyzing a Research Study

01 READ THE DISCLOSURES SECTION

02 CHECK THE PUBLISHED DATE OF THE PAPER

03 SKIM ALL THE SECTIONS OF THE PAPER

04 READ THE INTRODUCTION

05 IDENTIFY HOW THIS PAPER FITS IN WITH THE FIELD OF RESEARCH OR ON A SPECIFIC TOPIC OF INTEREST

06 READ THE DISCUSSION

07 READ THE ABSTRACT

08 LOOK THROUGH THE RESULTS AND METHODS SECTIONS

Step One: Always Read the Disclosure Section

This section is crucial to decipher whether the study is biased.

The disclosures section will reveal whether the study was conducted independently or whether a person, company, or other group had an impact on the study outcome. A study should ideally not have any conflicts of interest.

If the section shows that the researchers have received money from a company or work for a university that is receiving money from a drug company, they are not independent researchers. You should stop here and dismiss the study.

If you are unsure or if another entity is sponsoring the research, find out who is involved in the noted organizations and see if they have another agenda or receive support of companies.

This requires a little time and detective work. Do you see that they have received support from any companies? Do the researchers have investments in the company's drug? Are they receiving monies from an organization that supports a company?

See below for an example of author affiliations from [a vaccine study](#). See also the [list of investigators](#). Another example is [this Substack](#) showing conflicts of interest.

ORIGINAL ARTICLE

Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine

Fernando P. Polack, M.D., Stephen J. Thomas, M.D., Nicholas Kitchin, M.D., Judith Absalon, M.D., Alejandra Gurtman, M.D., Stephen Lockhart, D.M., John L. Perez, M.D., Gonzalo Pérez Marc, M.D., Edson D. Moreira, M.D., Cristiano Zerbini, M.D., Ruth Bailey, B.Sc., Kena A. Swanson, Ph.D., [et al.](#), for the C4591001 Clinical Trial Group*

Author Affiliations

From Fundacion INFANT (F.P.P.) and iTrials-Hospital Militar Central (G.P.M.), Buenos Aires; State University of New York, Upstate Medical University, Syracuse (S.J.T.), and Vaccine Research and Development, Pfizer, Pearl River (J.A., A.G., K.A.S., K.K., W.V.K., D.C., P.R.D., K.U.J., W.C.G.) — both in New York; Vaccine Research and Development, Pfizer, Hurley, United Kingdom (N.K., S.L., R.B.); Vaccine Research and Development (J.L.P., P.L.) and Worldwide Safety, Safety Surveillance and Risk Management (S.M.), Pfizer, Collegeville, PA; Associação Obras Sociais Irmã Dulce and Oswaldo Cruz Foundation, Bahia (E.D.M.), and Centro Paulista de Investigação Clínica, São Paulo (C.Z.) — both in Brazil; Global Product Development, Pfizer, Peapack, NJ (S.R.); Cincinnati Children's Hospital, Cincinnati (R.W.F.); Johns Hopkins Bloomberg School of Public Health, Baltimore (L.L.H.); BioNTech Mainz (Ö.T., U.Ş.), and Medizentrum Essen Borbeck, Essen (A.S.) — both in Germany; Tiervlei Trial Centre, Karl Bremer Hospital, Cape Town, South Africa (H.N.); Hacettepe University, Ankara, Turkey (S.Ü.); and Worldwide Safety, Safety Surveillance and Risk Management, Pfizer, Groton, CT (D.B.T.).

Address reprint requests to Dr. Absalon at Pfizer, 401 N. Middletown Rd., Pearl River, NY 10965, or at judith.absalon@pfizer.com.

A complete list of investigators in the C4591001 Clinical Trial Group is provided in the [Supplementary Appendix](#), available at NEJM.org.

Step Two: Check the Published Date of the Paper

Is this research up to date?

Knowing the publication date will help you determine whether these are the most recent findings. Sometimes additional research has been done since a study's publication date.

One way investigators can manipulate data is by releasing some data first to create a certain belief and then quietly releasing the rest later. This is an effective strategy for manipulating public opinion.

Aaron Hertz talks about this and other ways of playing with timing [in this section of his Substack](#). This Substack is written satirically from the viewpoint of someone studying how to write propaganda.

Researchers can also decide to stop publishing data. Sometimes, a paper even mysteriously disappears! One important tip is to download a copy of whatever research paper you are reading and save it to your computer.

Review > Swiss Med Wkly. 2021 Oct 19;151:w30087. doi: 10.4414/smw.2021.w30087.

eCollection 2021 Oct 11.

The very low risk of myocarditis and pericarditis after mRNA COVID-19 vaccination should not discourage vaccination

Philip Haaf^{1,2}, Gabriela M Kuster^{1,3}, Christian Mueller¹, Christoph T Berger⁴, Pierre Monney^{2,5}, Peter Burger², Simon F Stämpfli^{2,6}, Christine Helena Attenhofer Jost^{2,7}, Michael J Zellweger¹, Stefan Osswald¹, Birgit C Donner⁸, Simon C Koestner^{2,9}, Felix C Tanner^{3,10}

Affiliations + expand

PMID: 34668687 DOI: 10.4414/smw.2021.w30087

Free

globulins or corticosteroids should be individually assessed in severe cases [4, 10, 16]. Chest pain can be treated with paracetamol, non-steroidal anti-inflammatory drugs (NSAIDs), or morphine as needed [4, 10, 16].

Clinical outcome and risk evaluation

Clinical outcome of mRNA vaccine-associated myocarditis has been mostly very favourable without relevant arrhythmias and with rapid complete spontaneous recovery [7, 10]. Only a few cases in older adults have been reported with outcomes varying depending on other pre-existing conditions [7], in addition to two cases with a fulminant course [17].

So far, Israel and the United States provide most information about vaccine-associated inflammation of the heart. There seems to be no increased risk of myocardial inflammation in male adolescents and younger adults. Based on the data available to date, myocarditis occurring after mRNA vaccination is still very rare [4]. The US Military Health System administered more than 2.5 million doses of mRNA-based vaccines in healthy individuals and detected only 23 myocarditis cases [19, 11].

Up to 21 September 2021 and after more than 10.2 million doses of mRNA COVID-19 vaccines had been administered in Switzerland, 151 potential cases of vaccine-associated myocarditis have been reported to Swissmedic [19, 11].

All these interventions need to be evaluated balancing benefit versus harm. The risk of myocarditis after mRNA vaccination in terms of prevented hospitalizations compared with its risk of vaccine-associated myocarditis seems to be very clearly in favour of vaccination (Fig. 2), even more with increasing age.

Given that SARS-CoV-2 is constantly mutating, it seems likely that globally most individuals will be contact with this increasingly virulent virus – both the vaccinated and unvaccinated. To vaccinate or not to vaccinate both incur certain risks: a recently published Israeli study tried to put risks for adverse events by the mRNA vaccine in the context of the risks of the same adverse events after documented infection with SARS-CoV-2 [11]. The risk ratio of myocarditis was estimated to increase by factor 3.2 after mRNA vaccination, with 1 to 5 events per 100,000 persons [11].

Are there subclinical injuries in other organs and why is heart inflammation more evident?

What is the risk and best recommendation regarding future mRNA-based vaccines in patients with mRNA-associated inflammation of the heart?

Conclusion

Based on all available current clinical and scientific evidence, the benefits of COVID-19 vaccines by far outweigh the potential risk of vaccine-associated myocarditis and pericarditis. It is unlikely that there will ever be a completely risk-free vaccine. All medical interventions – including vaccines – incur potential risks that need to be balanced with their benefits. COVID-19 vaccines continue to be recommended for all eligible individuals. Precautions concerning COVID-19 infection, transmission, hospitalization, long COVID, and severe influenza-like symptoms continue to be children and adults, and is crucial to the further relaxation of all social restrictions. Nevertheless, as the uncertainty and research are needed to better understand and prevent vaccine-associated cardiac damage.

Some knowledge gaps

What are the long-term effects of mRNA vaccine-associated myocarditis?

Review > Immun Inflamm Dis. 2023 Mar;11(3):307. doi: 10.1002/iid3.807.

Adverse events following COVID-19 mRNA vaccines: A systematic review of cardiovascular complication, thrombosis, and thrombocytopenia

Farah Yasmin¹, Hala Najeeb¹, Unaiza Naeem¹, Abdul Moeed¹, Abdul Raafiq Atif¹, Muhammad Sohaib Asghar², Nayef Nimri³, Maryam Saleem³, Dhruvajyoti Bandyopadhyay⁴, Chayakrit Krittana Wong⁵, Mohammed Mahmoud Fadelallah Eljakk⁶, Muhammad Junaid Tahir⁷, Fahad Waqar³

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PMID: 36988252 PMID: 36988252 PMID: 36988252 DOI: 10.1002/iid3.807

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Results: A total of 81 articles analyzed confirmed cardiovascular complications following post-COVID-19 mRNA vaccines in 17,636 individuals and reported 284 deaths with any cardiovascular complication. Of 17,636 individuals, 17,192 were observed with the BNT162b2 (Pfizer-BioNTech) vaccine, 444 events with mRNA-1273 (Moderna). Thrombosis was frequently reported with any mRNA vaccine (n = 13,936), followed by stroke (n = 758), myocarditis (n = 511), pericardial infarction (n = 377), pulmonary embolism (n = 301), and arrhythmia (n = 254). Stratifying the results by vaccine type showed that thrombosis (80.8%) was common in the BNT162b2 cohort, while stroke (39.9%) was common with mRNA-1273 for any dose. The time between the vaccination dosage and the first symptom onset averaged 5.6 and 4.8 days with the mRNA-1273 vaccine and BNT162b2, respectively. The mRNA-1273 cohort reported 56 deaths compared to the 228 with BNT162b2, while the rest were discharged or transferred to the ICU.

Step Three: Skim All the Sections of the Paper

Make notes for yourself while reading each section to help evaluate the study and clarify questions you may have.

As you go along, take notes, and look up the definitions of any words you're unsure of. If you come across an acronym later in a work, a helpful suggestion is to use "CTRL F" on the keyboard to search for the first time it is mentioned, as here is where it will be defined.

Note the definitions, the sample population, the method of testing, and other important facts that can impact the study outcome.



Step Four: Read the Introduction

Read the introduction carefully to learn more about the background of the subject.

This includes past research on the subject and the factors that led the researchers to choose to conduct this study. If you are not familiar with the subject, take your time to learn more about it.

As you learn more about the subject, you should also check out some of the references in the introduction.

Note the definitions, the sample population, the method of testing, and other important facts that can impact the study outcome.

Also note that defining the content can have an impact on the outcome of the study. Aaron Hertz discusses definitions [here](#) in his Substack.



Step Five: Identify How the Paper Fits Into the Field of Research

Does this paper fit in with the field of research and with the special topics of interest or have the authors tampered with the data?

What is the principle issue this paper is attempting to address? Will you be better able to comprehend the work's significance and motivation after reading and analyzing the paper?

What is the researcher's rationale for studying this intervention or drug? Are there safe alternatives available? Is there a financial incentive for the researchers to draw a particular conclusion? Look for evidence of "spin". Read more about "spin" [here](#).

PNAS

NOW READING:

Misrepresentation and distortion of research in biomedical literature

PNAS

Vol. 115 | No. 11

Abstract

Methods

Definition of the Concept of Spin

Practices of Spin

Prevalence of Some

Forms of Spin in...

Impact of Spin

Why Researchers Add Spin to Their Reports

How Can We Reduce the Use of Spin?

Conclusions

Acknowledgments

References

Definition of the Concept of Spin

Spin has become a standard concept in public relations and politics in recent decades. It is "a form of propaganda, achieved by providing a biased interpretation of an event or campaigning to persuade public opinion in favor of or against some organization or public figure" ([https://en.wikipedia.org/w/index.php?title=Spin_\(propaganda\)&oldid=793952705](https://en.wikipedia.org/w/index.php?title=Spin_(propaganda)&oldid=793952705)). "Spin doctors" modify the perception of an event to reduce any negative impact or to increase any positive impact it might have on public opinion. For this purpose, spin doctors could attempt to bury potentially negative information or selectively "cherry-pick" specific information or quotes.

The concept of spin can also be applied to scientific communications. Spin can also be defined as a specific reporting that fails to faithfully reflect the nature and range of findings and that could affect the impression that the results produce in readers, a way to distort science reporting without actually lying (7). Spin could be unconscious and unintentional. Reporting results in a manuscript implies some choices about which data analyses are reported, how data are reported, how they should be interpreted, and what rhetoric is used. These choices, which can be legitimate in some contexts, in another context can create an inaccurate impression of the study results (3). It is almost impossible to determine whether spin is the consequence of a lack of understanding of methodologic principles, a parroting of common practices, a form of unconscious behavior, or an actual willingness to mislead the reader. However, spin, when it occurs, often favors the author's vested interest (financial, intellectual, academic, and so forth) (3).

Step Six: Read the Discussion

The discussion section is where you find the paper's data findings.

The discussion section of the paper is where that data findings are explained and the "story unfolds about the subject matter". In this section, the samples and measuring tools are presented. The effectiveness of the study is discussed along with whether the study confirmed or disproved the hypothesis. Unfortunately, here the narrative can also be controlled.

Aaron Hertz discusses [in this section](#) of his Substack how the data can be manipulated and not adjusted correctly to control the results in the favor of what the researchers want. It will be important in this section to pay attention to how they discuss the data. Look closely at the diagrams and charts, too.

PNAS

Vol. 115 | No. 11

Abstract

Methods

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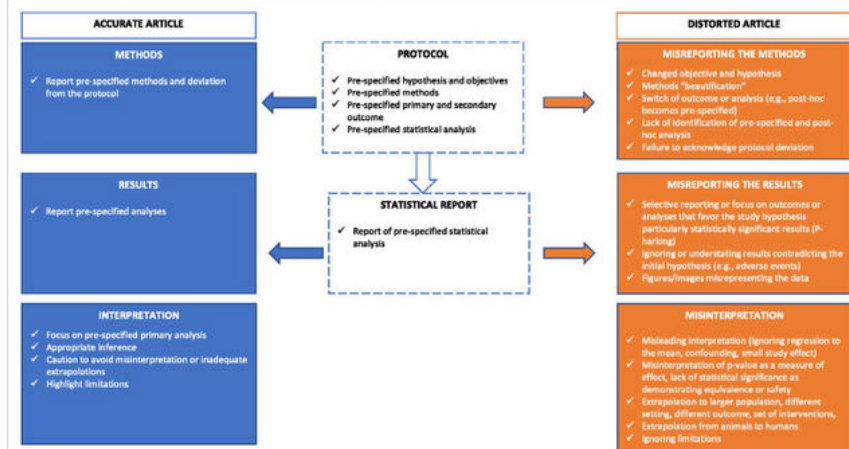
How Can We Reduce the Use of Spin?

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References

Fig. 1.



Practices of spin in published reports.

Misreporting the Methods.

Authors could intentionally or unintentionally misrepresent the methods they used. This type of spin will alter the readers' critical appraisal of the study and could impact the interpretation

Step Seven: Read the Abstract

Here is where you find the general summary of the material.

The study's main objectives, the method of investigation, the key findings, the overview of the interpretations, and the conclusions are often summarized in the abstract. Compare the abstract's important points to the information offered in the paper's other sections, such as the discussion, the results, and the conclusions sections.

It will be important to consider the Methods section when looking at the abstract to check to see if the abstract reflects what the data is showing in the conclusion of the study. Here are some examples for further reading:

- [This link](#) is from Kelly Kronhert's Substack, in which she points out numerous flaws in different studies on Long COVID.
- [This study](#) where [this article](#) shows where the data was manipulated in a complex manner.



Step Eight: Read the Results and Methods Sections

These are the most complex sections of the study and often where data can be most manipulated.

When reading the results and methods sections, it's crucial to keep the following things in mind:

- Sample size
- Statistical significance
- Graphics and tables — do they match the conclusions?
- Supplemental materials

Aaron Hertz spends a lot of time in his Substack explaining the numerous ways researchers can manipulate and cherry-pick data to slant the outcome of the study in their favor. These 3 sections are extremely useful in explaining how this is done:

- [How to rig a study](#)
- [Doctoring the datasets](#)
- [Control the standards of evidence](#)

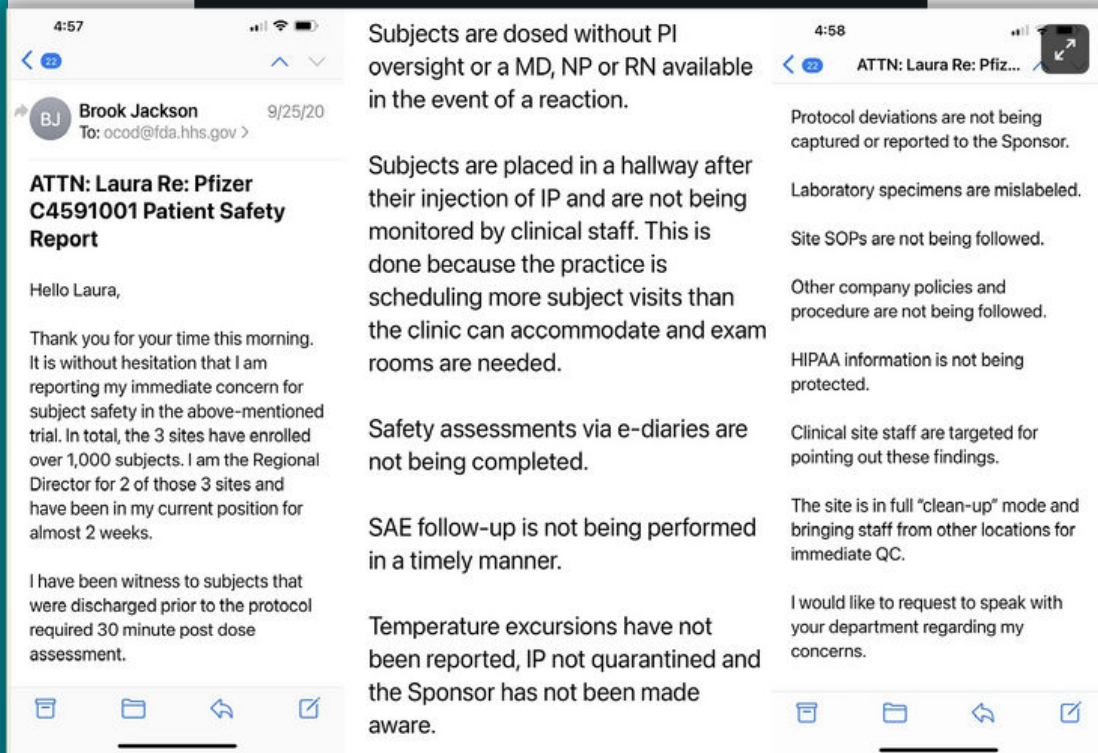


How the Results and Methods Sections Can Be Manipulated

Rigging the study design involves these and other tactics. For a more in depth discussion, see links in text.

- Writing the rules so the results come out in your favor by manipulating the sample and control groups.
- Rigging the study protocol so it comes out in your favor.
- Sabotaging the administration of the treatment and/or the placebo. Aaron Hertz explains this [here](#).
- Influencing the behavior of the study participants with money or other rewards.
- Hiring staff that don't really know what they are doing.
- Removing data or subjects that conflict with what you want to data to show.
- Not adjusting the data properly.
- Manipulating the data endpoints.
- Using [measurement tools](#) to best manipulate your data.
- Recruiting the media to spin the study.
- Controlling the standards:, for example calling a study "low quality" when in fact it is not.

Brook Jackson's Email to FDA Regarding Ventavia Pfizer Trial Site:



Conclusions

Interpreting science has never been as difficult as it is now, but with these tips and tricks, hopefully you will be a better investigator.

Science has been hijacked by corporate interests and sometimes the researchers don't have the consumer, the clinician, or the patient's best interest at heart.

There are numerous ways in which the information can be skewed to push or sell an intervention or product. The "bad" data is used as propaganda to corrupt journals, medical schools, hospital patient care protocols, and the treatment methods used in the treatment plans.

When you dive deep into the conflicts of interest, you will most quickly find who is funding these studies and why they are trying to push a certain conclusion. It is up to you to become an informed consumer and actively be involved in picking apart the information presented to you in these studies. Be wary that the media and government agencies may also not be using unbiased studies to push their mandates, regulations, and guidelines.

Always remember, when you have found something questionable in a research study, or you have found a study with good and factual results, your healthcare provider should be open to having a discussion with you about what you have found or would like to try out and/or answer any questions you may have about the validity of a study you have read.

A trusted and knowledgeable healthcare provider will want to have these discussions with you, and they should also always offer you informed consent first before suggesting a procedure. This information should include ALL RESEARCH known about the medication or intervention.



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The Organization and Mission

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