

Rationalizing lies, deception, and fraudulent interpretations with AI

This is an excellent example of summarizing lies, deception, and fraudulent interpretations in the so-called science of medicines and viruses. Every single word/sentence is based on lies and deception. It confirms that the science of medicine/virology is a false and fraudulent activity and must be stopped immediately, followed by an accountability trial.

The main and critical error, as noted in AI assessment as well, is that it (medical/virology science) considers "isolates" (junk/gunk) as a pure and fully characterized (isolated) virus. Only an ignorant of actual science can make such a claim, confirming that medical or virology is not a science subject.

An item-by-item response to Grok's assessment is provided below (in red).

Achyutha Sastry

Dear sir , when I ask the grok to validate this then ,

Background on Spike Protein:

- The spike protein is a well-characterized glycoprotein on the surface of coronaviruses, including SARS-CoV-2, which facilitates viral entry into host cells by binding to the ACE2 receptor. Its existence and structure have been extensively **documented** through multiple scientific methods, including X-ray crystallography, cryo-electron microscopy, and mass spectrometry. For example, the atomic structure of the SARS-CoV-2 spike protein was published in peer-reviewed journals (e.g., Wrapp et al., science, 2020).

Indeed, they are documented for virus isolates (junk/gunk), not with isolated, purified, and fully characterized viruses, which actual science demands and depends on. The reason for such a twisted/false claim is that no purified virus sample exists/is available. Please see here for the difference between virus isolates and isolated viruses. [Link](#), [link](#), [link](#)

2. Detection and Measurement:

- Scientifically **validated methods** to detect and measure spike proteins exist. These include:
 - Enzyme-Linked Immunosorbent Assay (ELISA): Widely used to quantify spike protein levels in biological samples, relying on antibodies specific to the spike protein.
 - Western Blot: Detects spike protein based on molecular weight and antibody binding.

- Mass Spectrometry: Identifies peptide fragments of the spike protein with high specificity, often used in research to confirm its presence.
- RT-PCR and Sequencing: Indirectly confirms spike protein production by detecting its mRNA in cells or vaccines (e.g., mRNA vaccines like Pfizer-BioNTech encode the spike protein).
- **These methods use reference standards** such as **recombinant spike proteins** produced in controlled laboratory settings (e.g., from mammalian or bacterial expression systems). Companies like Sino Biological and Thermo Fisher provide such standards, calibrated against known concentrations and validated through rigorous testing.

No scientifically valid methods/assay can be developed without the availability of purified and fully characterized reference compounds (be it the virus itself or its components, like RNA, mRNA, or spike protein). None of these are available. This is not an opinion but a fact. Therefore, the claim that validated tests have been used is incorrect.

Mentioning of "recombinant spike proteins" is irrelevant. They have no relation to the virus or its components.

3. Reference Standard Availability:

- The claim that there is no "spike-protein reference standard" is incorrect. **Recombinant spike proteins and their subunits (e.g., S1, S2, receptor-binding domain) are commercially available and widely used in research and diagnostics.** These standards are purified, sequenced, and validated to ensure consistency. For instance, the National Institute of Standards and Technology (NIST) and similar bodies provide guidelines for such standards in protein analysis.

The discussion here is about the virus and its components, "not Recombinant spike proteins and their subunits." Therefore, this response or argument is irrelevant and deceptive

4. Existence of Spike Protein:

- The assertion that the spike protein's existence is false because of a lack of a validated test ignores the **overwhelming evidence from direct observation (e.g., electron microscopy), functional studies (e.g., neutralization assays), and genetic sequencing.** The **spike protein's role** in infection and its production by mRNA vaccines have been demonstrated in vitro, in animal models, and in human clinical trials (e.g., Polack et al., NEJM, 2020, on the Pfizer-BioNTech vaccine).

They all deal with culture or isolates (junk/gunk), not with viruses or their components. Therefore, the argument is irrelevant and invalid.

The discussion here is not about the "spike protein role. But about the spike protein itself. There is no spike protein sample available to study its role. Hence, the claim and its assertion are irrelevant and invalid.

5. Conclusion on This Claim:

- The claim is scientifically false. Validated tests and reference standards for the spike protein exist, and its presence is well-established across multiple lines of evidence. The argument hinges on a **misunderstanding or rejection of standard biochemical and virological techniques** without providing credible counter-evidence.

That is the point that "standard biochemical and virological techniques" are not science-based as they are based on or developed without actual reference standards, as noted above. Hence, "standard biochemical and virological techniques" are false and fraudulent, and must be stopped immediately.

Broader Context of the Documents:

The documents present several additional claims that warrant brief scrutiny to assess their scientific validity:

1. "Vaccines have never been tested against viruses, as no one had samples of viruses":

- This is incorrect. Vaccine development, including for SARS-CoV-2, involves testing against **viral isolates** in preclinical (cell culture, animal models) and clinical phases. For example, SARS-CoV-2 was isolated in early 2020 (e.g., Zhu et al., NEJM, 2020), and vaccines were tested for efficacy against it in trials involving tens of thousands of participants. Virus samples are routinely maintained in biosafety level 3/4 labs worldwide.

Note using "virus isolates," not virus (or isolated virus). However, claims are being made for the virus – an incorrect and deceptive argument and an inexcusable misunderstanding of basic science/chemistry.

2. "Viruses do not exist":

- This contradicts foundational virology. Viruses, including SARS-CoV-2, have been **visualized** (e.g., via electron microscopy), sequenced (genomes publicly available on databases like GenBank), and cultured. Denying their existence dismisses decades of peer-reviewed research without offering a testable alternative hypothesis.

"This contradicts foundational virology." Exactly that is the point that the foundation of virology is based on false assumptions, i.e., the virus is assumed, but there is nothing to show.

"visualized" is correct. The dots from the cultures are marked/labeled as viruses – a big difference. For reality and scientific proof – these dots must be isolated/extracted and characterized (physically and chemically), which has not been done.

3. "Medical education lacks science, and biology isn't a science":

- Medical education includes rigorous training in biochemistry, physiology, and pharmacology—fields grounded in chemistry and physics. Biology, while broader and sometimes descriptive, employs the scientific method and integrates chemistry and physics (e.g., molecular biology). The claim misrepresents these disciplines' scientific basis.

"Medical education includes rigorous ..." incorrect. Training hardly includes science subjects, such as chemistry, and zero education/training in conducting scientific (lab) research. See here for details, [link](#), [link](#), [link](#).

4. "Vaccines are a concoction akin to witchcraft":

- Vaccines are formulated with known ingredients (e.g., mRNA, adjuvants, stabilizers), tested for safety and efficacy under regulatory oversight (e.g., FDA, EMA). This claim relies on rhetoric rather than evidence, ignoring documented development processes.

Incorrect claims. No valid scientific evidence for the supposedly active ingredient, mRNA, indicates that it is present in the vaccines. This claim can only be established by having a validated test/method that is not available, as no reference standard is available for the claimed mRNA.

No efficacy studies of mRNA vaccines have been done against the virus, its infection, or in patients ([link](#), [link](#)). Grok's claim is false and deceptive.

There is no evidence that safety studies have been conducted using mRNA. It is a categorically false claim.

"ignoring documented development processes." It is a false claim, and no evidence is available in this regard.

Overall Assessment:

The documents reflect a deep skepticism of mainstream science, **asserting that medical and virological research is fraudulent** because it lacks a "true" scientific basis (defined here as chemistry/physics). However, these assertions:

Indeed, medical research and virological research are fraudulent. It is a fact. They claim to work with the virus, but no virus sample is available. Instead, they use "(virus) isolates," irrelevant to the claimed virus. The claim is based on ignorance of science and can be considered fraudulent.

- **Mischaracterize** established scientific methods and evidence.

Incorrect. Medical experts and virologists are mischaracterizing the well-established scientific techniques and methods. Practically every claim made here is fake and false. These experts must seek advice from the techniques and method experts/scientists, who will clarify their misunderstanding and help them withdraw their false claims.

- Lack empirical support for alternative explanations (e.g., no virus samples, no spike protein).

Incorrect assertion. There cannot be an alternative explanation. Medical and virological experts must substantiate their claims by providing samples of isolated, purified, and fully characterized viruses and their components, RNA, and spike proteins. Do not replace the claim with "(virus) isolates" terminology. It is a deceptive and fraudulent claim.

- Rely on conspiracy-like framing (e.g., "fraudulent act" by medical experts) without substantiation.

The specific claim about spike proteins is invalid based on the availability of validated detection methods and reference standards. The broader arguments similarly fail to align with **scientific consensus**, which is built on reproducible evidence rather than the author's **chemistry-centric** redefinition of science.

There is no such thing as scientific consensus - science requires physical and certified samples of reference standards and tests/methods validated against them. This is a fundamental/essential requirement for test developments, validations, and applications. Denying it clearly indicates that medical and virological experts lack basic understanding and training in science. They must retract all their work (published or in progress) based on such assumptions and assumptions.

The argument, assumption, and assertion such as particles/viruses, its components/molecules, RNA, spike-proteins, mRNA, technique/methods mentioned, isolation, purification, characterization, testing/methods, their development, validation, and application, belongs to the science of chemicals, which is chemistry. Therefore, the

assessment has to be chemistry-centric. Medical science and virology is a twisted and fraudulent version of the actual and well-established science/chemistry. This fact needs to be acknowledged openly and freely.

Is the answer I got . Please guide us how to handle this .

I hope the above responses will be helpful to you.