REAL FACTS

about

CHILDREN WEARING MASKS

- 1. Face masks create oxygen deficiency.1
 - This can result in the following effects:
 - •Irregular breathing •Accelerated heartbeat •Impaired attention and thinking •Impaired coordination •Rapid fatigue that may lead to permanent heart damage
- 2. Face masks create difficulty expelling carbon dioxide.²
 - This can result in the following effects:
 - •Headache •Increased pressure inside the skull •Nervous system changes •Increased "work of breathing", which is result of breathing through a filter medium •Cardiovascular effects •Fatigue
- 3. Face masks commonly worn are not proven to stop viral transmission.^{3a} And they have only been approved for *Emergency Use* which means, by law, they can be refused.^{3b}
- 4. OSHA has very strict guidelines for wearing masks correctly for effectiveness, which includes medical screening, training & proper supervision of workers.⁴ This is *not happening* with children and the general public.
- 5. This past year, some high-quality studies of short-term impacts on children have been published, showing harm.⁵ The effects of *prolonged* mask use in the young have not been studied.

BREATH is LIFE!

References:

1. **Pritchard JA** (1976). *A Guide to Industrial Respiratory Protection*. Los Alamos Scientific Laboratory.

https://books.google.com/books?hl=en&lr=&id=W30 K lcjksC&oi=fnd&pg=PR7&ots=

- 2. Williams J, Cichowicz J K, Hornbeck A, et al. (2020). The Physiological Burden of Prolonged PPE Use on Healthcare Workers during Long Shifts. CDC's NIOSH Blog, posted on June 10. https://blogs.cdc.gov/niosh-science-blog/2020/06/10/ppe-burden/
- 3. a. **WHO December Interim Report**, *Mask use in the context of COVID-19*, p. 13-14.
 - __ MacIntyre C.R., Seale H., Dung T.C., Hien N.T., et al. (2015). A cluster randomised trial of cloth masks compared w/ medical masks in healthcare workers. BMJ Open. 2015;5(4):e006577. Retrieved from: https://drive.google.com/file/d/1B34ATIETrTM4tq0khZE64 OrjoR42fj4/view
 - b. https://www.fda.gov/regulatory-information/search-fda-guidance-documents/emergency-use-authorization-medical-products-and-related-authorities
- 4. a. https://www.healthchoicevt.com/wp-content/uploads/2021/07/OSHA-SARS-FACT-SHEET.pdf
 - b. https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134
- 5. a. **Schwarz S, et. al.**, (2021). Corona children studies "Co-Ki": First results of a Germany-wide registry on mouth and nose covering (mask) in children. *Research Square*: Preprint, Feb. 22. https://doi.org/10.21203/rs.3.rs-124394/v1
 - b. **Lubrano R, Bloise S, Testa A, et al.** (2021). Assessment of respiratory function in infants and young children wearing face masks during the COVID-19 pandemic. *JAMA Network Open March*, 4(3):e210414. doi:10.1001/jamanetworkopen.2021.0414.
 - c. **Walach H, Weikl R, Prentice J, et al.** (2021). Experimental assessment of carbon dioxide content in inhaled air with or without face masks in healthy children: A randomized clinical trial. Research letter, *JAMA Pediatrics*, June 30, online.

https://jamanetwork.com/journals/jamapediatrics/fullarticle/2781743#pld210019t1?

This article was retracted by the editors several weeks after publication, after complaints about inappropriate measuring devices used. This retraction should be understood in the context of current widespread censorship of scientific information that does not support the current political paradigm. This article is still available for viewing at the above URL.

Additional information:

Vermont Mask Survey. (2020-21). https://vtmasksurvey.com/

Swiss Policy Research. (Current) An overview of the current evidence regarding the effectiveness of face masks. Including: **A**) Published studies **B**) Real-world evidence **C**) N95/FFP2 masks **D**) Additional aspects **E**) The aerosol issue **F**) Contrary evidence **G**) Mask-related risks **H**) Conclusions. Includes many citations of the latest peer-reviewed science on the subject. https://swprs.org/face-masks-evidence/