

Exhibit 386

Retractions are the tip of the censorship iceberg

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RETRACTIONS ARE THE TIP OF THE CENSORSHIP ICEBERG



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R **ronald_kostoff**  [Follow](#) **Opinion Article** 

- at -
May. 7, 2023, 4:00 p.m.

Retraction of a published paper from a journal is its removal from the journal. It is typically done after findings of malfeasance, such as fabrication of data, substantial plagiarism, etc. However, in the era of COVID-19, retractions have taken on a new (or perhaps previously hidden) politically-driven dimension. Papers of high technical quality have been retracted if they question the government-industry approach to the treatment of COVID-19, and especially adverse effects resulting from the COVID-19 “vaccines”.

The [Website Retraction Watch](#) has been tracking retracted COVID-19 papers, and has identified 325 as of this writing (early May 2023). COVID-19 paper retractions have been addressed in [substack articles](#), [journal articles](#), and many other forums. The retraction of our paper on vaccinating children against COVID-19 was described in detail in an [online newsletter](#).

However, it is important that retractions do not become distractions. A paper’s retraction is the tail end of a long multi-step process, where culling and blatant censorship are applied at each step. The remainder of this Op-ed will describe the larger process of journal paper censorship,

and will examine each of these steps that precedes the actual retraction.

Step 1 – Funding of Research

In order for research to be published, it must be performed. In order to be performed, in most cases, it will require some external support. In the USA today, there are three major sources of funding for biomedical research support: the Federal Government (mainly NIH); Industry; Foundations. All three were strong promoters of the measures taken to control the COVID-19 “pandemic” and the COVID-19 “vaccines”.

In order for funds to be allocated for studies on adverse effects of COVID-19 “vaccines”, two conditions must be met: 1) the sponsor’s Program Manager must be willing to fund such proposals and there need to be potential performers willing to conduct such studies. Unfortunately, in the COVID-19 era, sponsoring and performing such studies is not a career-enhancing move for either the Program Manager or the potential performer. For the potential performer in particular, careers are enhanced by publishing many papers, with high citations, and receiving continuing grants. For a study that would show the extensive damage from the COVID-19 “vaccines”, much time would be required to find a journal willing to publish such results, with the potential of additional time required to prevent a retraction. So, the incentives are not in place for such studies to be funded or performed.

Step 2 – Submission of Results for Publication

For those few cases where funds are made available for such research, or even where the research was done without external funding, the next step is to submit the paper for publication in a journal. The journal Editor has three main choices: 1) reject the paper outright; 2) accept the submission, and send out for peer-review to reviewers who will most probably recommend rejection; 3) accept the submission, and send out for peer-review to reviewers who will most probably be unbiased.

At this point, the Editor's perspectives need to be discussed before proceeding further. There are a number of stakeholders for any journal, and they will influence the selection of the Editor. First is the Publisher of the journal, and they will want an Editor who advances the interests of the Publisher. For those journals that are sponsored by a professional society, the society will want an Editor who advances their interest, and especially the interests of the main donors to the society and the members of the society (who will typically be employed in the discipline represented by the journal). Because of the strong role played by government and industry in funding many of the publishers, many of the professional societies, and many of those employed in the area of the journal's discipline, the interests of government and industry will play a strong role in the selection of any journal Editor. Given the strong support of government and industry for the measures taken to combat the "pandemic" and the development and distribution of the COVID-19 "vaccines", the person selected (and maintained) for the

Editor position will most likely be a strong supporter of the measures and “vaccines” as well (at least outwardly).

Step 3 – Response of Editor

3A – Reject Submission Outright

While I don't have data on this, I would suspect that, in the COVID-19 era, this is the most frequent action taken by the Editors who don't want to rock the boat. There are standard reasons they can give for rejection (e.g., out of scope, poor research merit, poor research approach, etc.). Given the subjectivity of the acceptance/rejection process, it is difficult to counter such subjective reasons. It minimizes wasting the time required by a peer-review whose ending they can predict, and it minimizes the problems they will face by a potential retraction.

3B – Send for Peer-Review to Selected Opponents of the Paper's Results

This action would compete with 3A in terms of frequency. Many Editors want to give the appearance of objectivity, if not the substance, and therefore are willing to spend the time and effort on a peer-review whose results they can predict beforehand. Most journal Editors know many of the experts in the field, and know quite well whom they can rely on for acceptance or rejection of papers to be reviewed.

3C – Send for Objective Peer-Review

For those few paper submissions that are sent for an objective peer-review based on the merits, some will be

recommended for rejection and some for publication. Because of the incentives that are in place presently, it is difficult to see how any Editor would be incentivized materially to have such a paper published. The only incentives would be higher-order, such as ethical and moral.

Step 4 – Retraction

For those few papers that have survived Steps 1-3 to get published, they now face the hurdle of avoiding retraction. At this point, as the Op-ed on our [retraction showed](#), the Hired Guns come into play. Much of the underlying collusion is unknown, since it is not something the perpetrators would want to advertise. Typically, it is the academics at the bottom of the chain who form the public face of the opposition, supported by the media (including the captive Publishers), while the industry and their government proxies remain hidden in the background. As will be seen in many reported cases of retraction, the Publishers/Editors will use the misinformation provided by the lowest-level Hired Guns to justify retraction.

CONCLUSIONS

Retractions are important, and for those at the beginning or mid-point of their careers, can be career-threatening. However, they are at the tail end of a long culling process, and I would contend that most culling and censorship occurs well before the retraction process. I suspect the real culling occurs at Step 1, especially for the potential performers. If they do not see studies on COVID-19

“vaccines” adverse effects as career-enhancing, but rather as career-stagnation at best, they will not propose such studies, and eventually will not even think about ideas for such studies. We need to expend more effort into

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ronald_kostoff

May. 8, 2023, 4:36 a.m.

Two of the key issues identified in this Op-ed were 1) lack of incentives to sponsor and perform studies on (especially) adverse effects of COVID-19 measures taken and COVID-19 vaccines and 2) lack of transparency (especially) in the paper submittal evaluation process. Changing the incentives would require major structural and personnel changes. However, there are measures that can be taken to improve the transparency of the journal paper review process.

Perhaps the time has come to re-think the blinded peer-review process that lies at the core of the present evaluation system. While blinded peer-review is good in concept, and works well in a system

where technical merit predominates, it can be misused when political and other non-technical merit considerations predominate (as seems to have occurred during this pandemic). While unblinding the peer-review is not a panacea for fixing the underlying problem, it will offer insight on the comments and decisions that are made during the editorial review process.

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C

cpageinkeller

May. 8, 2023, 6:56 a.m.

Thanks to Ronald Kostoff for penning this review and to Trial Site News for publishing it. I believe the focus of the article is right on the mark. The current process has, fortunately, led both authors and readers to depend on other sources (e.g., Substack) for legitimate information based on each reader's own actions as a "peer reviewer." I think that process works well most of the time.

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therealrestoreinc

May. 8, 2023, 12:02 p.m.

The tip of the iceberg, yes -- so what consists of the mass of the hidden iceberg?

Too many paper submissions and reviews piling up? Moving the information through the system? Stopped or slowed at FDA approval process?

or

The medical community bureaucracy engaged in censorship, of the medical authority, of any physician who looks at available preliminary studies of, say, some less-than-conventional compound's efficacy against COVID-19 in vitro or from a nutritional supportive role -- and says, "No, these COVID-19 "countermeasures" must come from a more sophisticated pharmacological authority" . . . ?

The peer-review process of paper approval is biased against studies making statements that there is "evidence that" anything at all can prevent, treat, mitigate, or cure disease -- a kind of "medical OSHA" safety policy of NOT OVERSTATING BENEFITS.

Researchers become a part of the chain.

Possible, promising disease treatments are not immediately used by physicians who are trained by

policy to heed the prevailing wind of approval. Retracted studies due to peer pressure from industry-captured people, and "not enough evidence, more studies needed" statements in papers -- may add to the red flags that are thrown when a research paper does not bring profit and promise of profit.

Part of the problem is in researchers trying to fit career continuity to pandemic opportunity. Writing about medicine and disease, and getting money to experiment with -- is not the same as front line physicians trying to solve the problem of increasing numbers of patients not having adequate, immediate solutions. Hence, the off-label, repurposed COVID-19 "countermeasures" were highly disrespected by the clinical trial world in collusion with drug developers and government medical career people all making work for themselves, a continuity of opportunity for every position in the chronological sequence of sellable drug production (that goes into the candidacy of Emergency Use Authorization or FDA approval).

It is a big racket, slowing down the available-compound use by physicians. The physicians are policy burdened, the patients steered into use of pharma products that make profits.

This should not be. Human disease is on the negative balance side of the accounting sheet of humankind. Profits acquired from the pandemic should have been only incidental so that the motivation would be to return to normal, even optimum, health.

Citizens can learn too. Not every "countermeasure" of disease should come to citizen patients through controlled studies/controlled procedures/controlled substances approaches. That is what medical papers and review boards have led to -- a dependency on policy adherence that made Medicine science into STATUTORY POLICY (not that it meets the needs of people to get well immediately during the SARS-CoV-2 pandemic). We were lowered on the priority list for conformity, policy and profits from manufactured, marketed and sold "countermeasures".

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