
During his March 8, 2020, interview on 60 Minutes, early in the COVID-19 pandemic, Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases (NIAID), advised the public, “There’s no reason to be walking around with masks…When you’re in the middle of an outbreak, wearing a mask might make people feel a little bit better and it might even block a droplet, but it’s not providing the perfect protection that people think that it is.”

On Mar 31, 2020, Dr. Fauci received an email from NIAID colleague, Dr. Andrea Lerner, citing a published review stating that masks have no effect on transmission of upper respiratory infections or influenza-like illnesses.

Dr. Fauci and Dr. Lerner reflected the scientific consensus at the time, supported by years of government influenza pandemic preparedness plan statements by the Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO). No evidence existed demonstrating that widespread masking was a useful public health tool.

However, three days later, on Apr 3, 2020, at a White House press briefing, despite no new evidence that universal masking was effective in blocking the spread of airborne respiratory viruses, CDC recommended that all Americans wear masks outside their homes. The agency based its mask guidelines on the disproven theory of asymptomatic COVID-19 spread.

Although Dr. Fauci knew that masks were of little to no use in preventing respiratory virus transmission, and even asserted, “An epidemic is not driven by asymptomatic carriers,” he ignored what he knew was true and allied himself with the politically charged CDC mask policy.

The CDC mask recommendations soon became government mandates, leaping to the top as the supreme public health measure to fight COVID-19, before vaccine development. Multimillion-dollar ad campaigns promoting masks expanded across the country in cities, states, and social media.

In this book, author and data analyst Ian Miller carefully documents, through statistics from public sources, how masks were mandated without scientific rationale, how masks failed to prevent COVID-19 transmission, and how politicians, public health agencies, and the media bear no accountability for their mistakes in promoting masks.

Having tracked COVID-19 data for the Brownstone Institute, and worked with pandemic tracking websites, e.g., Rational Ground, Miller assembled a book packed with information comparing virus case and death data from early 2020 to summer 2021, adding dates when mask mandates began, were extended, and ended. He incorporates graphs from every U.S. state, including some county and city data, as well as those of foreign countries, with explanations of the salient features.

Miller concludes, “Mask mandates could not bring the pandemic under control or lead to obvious benefits compared with areas without mandates or with little to no compliance, nor could they prevent rampant, uncontrolled outbreaks. Despite extraordinary worldwide compliance, the mask experiment resulted in an unequivocal failure.”

Readers may need a magnifying glass to read some of the notes on the graphs. Nevertheless, the book offers definitive proof that mask mandates provided no public health benefits during the COVID-19 pandemic.

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I received this book because the author, also known as Dr. Cristina Rizza, and her husband, Dr. Peter LePort, have been longstanding AAPS supporters. The cover of the book is an irresistible invitation: A patient is holding a card that says, “Your heart attack will arrive in one hour.”

The very first blurb on the back cover is by Lee Child: “High stakes, breathless suspense, and real insider authenticity—terrific debut.”

I found the book to have many things in common with Lee Child’s own Jack Reacher books. First, you have to keep reading. Second, the suspenseful story is interwoven with national political intrigue and international peril. Dr. LePort adds authentic medical crises and an insider’s view of hospital responses. Some victims are people that physicians who work in hospitals hate, such as hospital administrators and FDA bureaucrats.

Dr. LePort has practiced cardiology for 30 years. She was inspired to take up writing novels after listening to Ayn Rand’s lectures on The Art of Fiction, and she apparently shares Rand’s philosophical perspective.

The plot depends on a mechanism of causing acute arterial dissections by means of a directed energy device. The method is of course fictitious, but it would not be surprising if secret government agencies specializing in assassinations are not researching technologies that might have such a lethal effect, along with work on chemical and biological weapons that can mimic causes of natural death.

AAPS physicians will certainly recognize the stultifying effects that federal bureaucracy and hospital administrators have on the practice of medicine, and the ways in which they interfere with offering individualized care to patients.

Besides being a good read, the book offers both patients and physicians insights into an important medical emergency as well as the political influences that are destroying private medicine and killing patients.

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