

thathelpfuldad.com

Do Masks Work? The Science that Supports or Rebuts whether Face Masks Stop the Spread of Covid-19

28-36 minutes

The article serves as a warehouse of **verifiable** scientific evidence that seeks to answer the question – Do Face Masks Work to Stop the Spread of Covid-19?

On this page you will ONLY find medical evidence and analytical data from verifiable medical professionals and gov't analytic sources – links are provided for every citation and you can verify everything and do your own research.

There is evidence that supports BOTH viewpoints and regardless of which side of the debate you are on, perhaps the scientific data on this page will help you feel more comfortable about your decision.



Hello, Friends, I'm Mike – you may know me as [That Helpful Dad](#). I like giving people helpful tips on how to live a better life. Mostly I write about everyday *slice of life* topics like [BBQ'g](#), watching tv online, and [having fun with family](#), but today I'm tackling a serious issue – compiling a warehouse of evidence about the effectiveness of face masks vs the spread of Covid-19.

Please Note:

1. I am not a medical doctor, I don't pretend to be one, and I'm not here to give you medical advice.
2. I encourage you to NOT just take my word for everything and instead do your own research – **the text you see in BLUE is linked to the articles/references that support the statements made below** – click the link and do your own research by looking at the references and medical papers for yourself. Make your own decisions about what's best for your family.
3. To be clear, I am NOT suggesting that YOU not wear a mask if you prefer to – I believe it's your right

to do so, just like I believe other people have a right to decide not to.

4. If you have a link to share that supports either side of this debate, [please contact me](#) so I can review it. Thanks

The Scientific Data that SUPPORTS the Effectiveness of Face Masks in stopping the spread of Covid-19



Source: REUTERS

As it stands now, there does not appear to be much current (i.e. from 2019-2020) medical evidence that supports the effectiveness of face masks specifically vs Covid-19. If you are aware of more current medical evidence that supports face mask use [please share it with me](#) so I can add it to this page. Until then, all we can rely on is a medical review piece from the US Centers for Disease Control (CDC) from Oct 2020. Additionally there is the earlier science behind the use of masks vs other respiratory conditions (influenza, SARS, etc). That entire collection of evidence is as follows....

Evidence FOR the use of Face Masks vs Coronavirus

1-CDC October 2020: [“Effectiveness of Cloth Masks for Protection Against Severe Acute Respiratory Syndrome Coronavirus 2”](#)

- # of Subject: n/a since this was a medical review not clinical trial
- Conclusion: “Cloth masks may provide some protection **if well designed and used correctly.**”
- Key Point: “To our knowledge, only 1 randomized controlled trial (4) has been conducted to examine the efficacy of cloth masks in healthcare settings, and the results do NOT favor use of cloth masks.”

Evidence FOR Face Masks vs Other Respiratory Conditions

1-Aug 2017 Clinical Infectious Disease Journal, [“Effectiveness of Masks and Respirators Against](#)

Respiratory Infections in Healthcare Workers: A Systematic Review and Meta-Analysis

- # of Subjects: 4169 from meta-analysis of 6 RCTs, 8 observational studies, and 4 cohort studies.
- Of Note: this review included analysis of SARS-COV (the original SARS epidemic from 2002-2003), influenza A&B, H1N1, and other respiratory conditions.
- Key Points:
- Data from the 6 RCTs: “Compared to medical masks, N95 respirators conferred superior protection against Clinical Respiratory Illness and laboratory-confirmed bacterial, but not viral infections or Influenza-like illness.” Viral Infections were defined to include adenovirus, influenza A and B, rhinovirus A/ B, and multiple coronaviruses.
- From the 8 observational studies: 3 studies “reported a protective effect of medical masks against SARS” but “no protective effect against SARS was reported for disposable, cotton, or paper masks” in any of the studies.
- From the 4 cohort studies: the evidence was less conclusive. 2 of 4 studies reported moderate protection against SARS-CoV among HCWs wearing a N95 respirator. 1 of 4 studies reported reduced risk of SARS-CoV among HCWs wearing a medical mask. 2 studies found no protective effect of either medical masks or N95 respirators against SARS.
- When ALL studies were combined, 7 of the 17 studies favored the use of respiratory personal protective equipment (rPPE) vs not using rPPE and the authors concluded that wearing medical masks or N95 respirators both reduced the risk of SARS by approximately 80% and there was no specific difference in risk reduction vs N95 respirators vs medical masks.
- We found NO clear benefit of either medical masks or N95 respirators against pH1N1.
- Cloth masks – “there is no evidence of protection” and their use “might facilitate transmission of pathogens when used repeatedly without adequate sterilization.”
- “Disposable, cotton, or paper masks are NOT recommended.”
- “Continuous adjustments and inappropriate wearing may even reverse the benefits of N95 respirators through the contamination of hands, face, and other PPE.”
- Conclusion: “This systematic review and meta-analysis supports the use of respiratory protection. However, the existing evidence is sparse and findings are inconsistent within and across studies.”

2-2013 Cambridge University: “Testing the Efficacy of Homemade Masks: Would They Protect in an Influenza Pandemic?”

- # of Subjects: 21
- Conclusion: “Our findings suggest that a homemade mask should only be considered as a last resort to prevent droplet transmission from infected individuals, but it would be better than no protection”

3-2011: Science Direct “Mask-wearing and respiratory infection in healthcare workers in Beijing, China”

- # of Subjects: 400
- Key Points
- “The protective efficacy of masks/respirators is provided through a combined effect of transmission

blocking potential, the fit and related air leakage of the mask/respirator, and the consistency in the use of masks/ respirators. Their efficacy is graded on the level of protection the material offers, *assuming a perfect fit and optimal compliance.*

- Research studies on the filtration and fit of medical masks show wide variation in penetration of aerosol particles (4% to 90%) and a higher amount of face seal leakage when compared to respirators.
- The fit of cloth masks...is likely to be even looser than medical masks and hence, cloth masks are likely to have a lower level of protection.
- In addition, reuse of cloth masks may lead to contamination, which adds to the risk of respiratory infection.
- There are no clinical data associated with cloth masks currently."
- Conclusion: "[Medical-grade] Mask-wearing and seasonal influenza vaccination are protective for respiratory infection in Health Care Workers (HCWs)" (assuming a perfect fit and optimal compliance).

4-2010 Cambridge University "Face masks to prevent transmission of influenza virus: a systematic review"

- (12 article meta-analysis)
- # of Subjects: 3000+
- Key Points:
- "While there is some experimental evidence that masks should be able to reduce infectiousness under controlled conditions [7], there is less evidence on whether this translates to effectiveness in natural settings. There is little evidence to support the effectiveness of face masks to reduce the risk of infection."
- Conclusion: "There is some evidence to support the wearing of masks or respirators during illness to protect others, and public health emphasis on mask wearing during illness may help to reduce influenza virus transmission. There are fewer data to support the use of masks or respirators to prevent becoming infected."

5-2010 Oxford University "Mask use, hand hygiene, and seasonal influenza-like illness among young adults: A randomized intervention trial"

- # of Subjects: 1437 (these subjects were included as part of the 3000+ patient review from Cambridge's 2010 meta analysis above)
- Conclusion: "Face masks and hand hygiene may reduce respiratory illnesses in shared living settings and mitigate the impact of the influenza A(H1N1) pandemic."
- Key Points:
- "Neither face mask use and hand hygiene, nor face mask use alone was associated with a significant reduction in the rate of influenza-like illness cumulatively."

6-2009 Annals of Internal Medicine "Facemasks and hand hygiene to prevent influenza transmission in households: a cluster randomized trial"

- # of Subjects: 1201 (these subjects were included as part of the 3000+ patient review from Cambridge's 2010 meta analysis above)
- Conclusion: "Hand hygiene and surgical facemasks seemed to prevent household transmission of influenza virus when implemented within 36 hours of index patient symptom onset."

What Type of Mask Works Best?

Cloth Masks: there is much debate as to if cloth masks do anything vs Covid19 because the filtration appears to be lacking (given that the size of the Covid-19 molecule at 0.1 microns is very small compared to the filtration capability of cloth masks at 5 microns, which could be why cloth masks may allow up to 97% of small pollutants to pass through), HOWEVER the CDC continues to say that cloth masks MAY provide some protection.

Surgical Masks: the data indicates that surgical masks are consistently more effective vs cloth masks when it comes to general respiratory illness spread. Of note here is the CDC Guidance from November 2020: "While a surgical mask may be effective in blocking splashes and large-particle droplets, a face mask, by design, does **not** filter or block very small particles in the air...Surgical masks also do not provide complete protection from germs and other contaminants because of the loose fit between the surface of the mask and your face. Surgical masks are not intended to be used more than once."

- **What is a Medical Mask?** Medical masks are typically worn in healthcare settings to prevent the spread of pathogens during surgical procedures, protecting both the patient and healthcare provider.
- **Is a Medical Mask the same as a Surgical Mask?** Not necessarily. A Surgical Mask is a specific type of Medical Mask, therefore a surgical mask IS a medical mask, however not all "Medical" masks are surgical masks. Medical masks include surgical masks, N95 respirators, and ordinary medical care (loose-fitting) masks worn in a healthcare setting.
- FDA.gov further defines Surgical Masks as "A mask that covers the user's nose and mouth and provides a physical barrier to fluids and particulate materials. Surgical masks meets certain fluid barrier protection standards and Class I or Class II flammability tests. Surgical masks are considered personal protective equipment (PPE). While a surgical mask may be effective in blocking splashes and large-particle droplets, they do not provide complete protection from germs and other contaminants because of the loose fit between the surface of the mask and your face. Surgical masks are NOT respiratory protective devices such as respirators."
- **Does a Medical Mask protect against Covid-19?** Data suggests that "medical masks can protect the wearer from larger respiratory droplets (> 5µm), however, smaller particles such as airborne particles (generally < 5 µm), or single virus particles (60-140nm) would still be able to pass through the pores in these masks."

N95 Mask: Although there is certainly evidence to the contrary (noted below), based on the medical evidence above that is in favor of masks, one TYPE of mask appears to potentially work best – the **N95 Respirator** seems to be potentially effective vs Covid-19 (based on its performance vs other respiratory conditions).



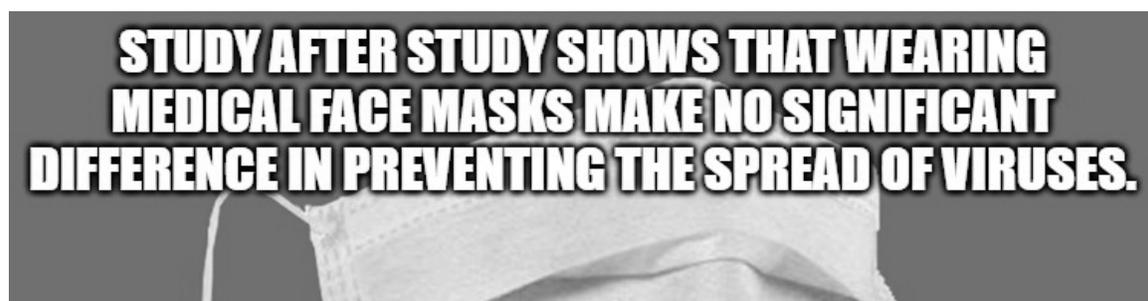


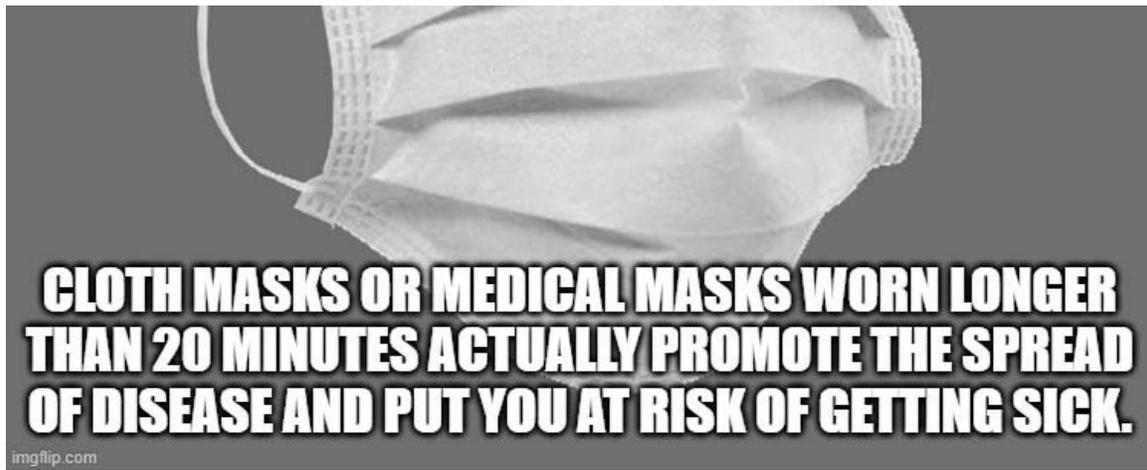
Important Things to Know about the N95 Face Mask

- Fair Balance: Even those medical professionals who are *against* face masks (as noted below), generally agree that the N95 mask is the best option if you choose to wear a mask.
- November 2020: “The CDC does NOT recommend that the general public wear N95 respirators to protect themselves from respiratory diseases, including COVID-19. Those are critical supplies that must continue to be reserved for health care workers and other medical first responders.”
- Per CDC: “All FDA-cleared N95 respirators are labeled as “single-use,” therefore N95 masks should not be shared **or reused.**”
- Evidence suggests that even these masks work “only when they are the right size and have been fit-tested to demonstrate they achieve an adequate protection factor....To protect yourself, you need an N95 respirator mask that is properly fitted.”
- To maintain effectiveness, N95 Masks “need to be re-sterilized every four hours using UV light or properly dispose of it and start over with a new one.”

If you choose to wear a mask and you do the steps required to keep it clean/sterilized then the N95 Mask may well protect you vs Covid-19. If you can't get an N95, a single-use surgical mask may offer some protection. A cloth mask would seem to be your choice of 'last resort.'

The Scientific Data that is Shows Face Masks do NOT Work to prevent the spread of Covid-19





Although there is a dearth of medical evidence that supports the use of face masks specifically vs Coronavirus, there IS a growing body of scientific data that indicates face masks do NOT work to stop the spread of Covid-19.

Evidence AGAINST Face Masks vs Coronavirus

1-Nov 2020 Annals of Internal Medicine (“The Danish Study“) [“Effectiveness of Adding a Mask Recommendation to Other Public Health Measures to Prevent SARS-CoV-2 Infection in Danish Mask Wearers”](#)

- # of Subjects: 4862
- KEY POINTS:
- **This is first randomized-control trial involving face masks and Covid-19**
- This study found no statistically significant difference in coronavirus infection rates between mask-wearers and non-mask-wearers.
- Additionally, according to the data, mask usage may actually increase the likelihood of infection.

2-Nov 2020 Mass Inst of Tech, BMJ Yale [“Decrease in Hospitalizations for COVID-19 after Mask Mandates in 1083 U.S. Counties”](#) – **Study Terminated**

- **Study Terminated:** “The authors have withdrawn this manuscript because there are **INCREASED** rates of SARS- CoV-2 cases in the areas that we originally analyzed in this study.”

3-October 2020 US CDC: [“Effectiveness of Cloth Masks for Protection Against Severe Acute Respiratory Syndrome Coronavirus 2”](#)

- Key Point: Only 1 randomized controlled trial (4) has been conducted to examine the efficacy of cloth masks in healthcare settings, and the results do NOT favor use of cloth masks.”

4-July 2020 US CDC [“Community and Close Contact Exposures Associated with COVID-19 Among Symptomatic Adults ≥18 Years in 11 Outpatient Health Care Facilities —United States”](#)

- # of Subjects: 802
- Key Point: “More than 70 percent of COVID-positive patients contracted the virus in spite of faithful mask wearing while in public. Moreover, 14 percent of the patients who said they “often” wore masks

were also infected. Meanwhile, just four percent of the COVID-positive patients said they “never” wore masks in the 14 days before the onset of their illness.”

5-May 2020 New England Journal of Medicine [“Universal Masking in Hospitals in the Covid-19 Era”](#)

Key Points:

- “Universal masking alone is not a panacea.”
- “A mask will not protect providers caring for a patient with active Covid-19 if it’s not *accompanied by meticulous hand hygiene, eye protection, gloves, and a gown.*”
- “Focusing on universal masking alone may, paradoxically, lead to more transmission of Covid-19 if it diverts attention from implementing more fundamental infection-control measures.”
- “The chance of catching Covid-19 from a passing interaction in a public space is therefore minimal.”
- “Wearing a mask outside health care facilities offers little, if any, protection from infection.”

Evidence Against Face Masks vs Other Respiratory Conditions

1-May 2020 US CDC: [“Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings—Personal Protective and Environmental Measures”](#)

- # of Subjects: 10,000+ from an meta-analysis 10 Randomized Controlled Trials
- Key Point: “we identified 10 RCTs that reported estimates of the effectiveness of face masks in reducing laboratory-confirmed influenza virus infections in the community from literature published during 1946–2018...we found no significant reduction in influenza transmission with the use of face masks.” Furthermore “We did NOT find evidence that **surgical-type** face masks are effective in reducing laboratory-confirmed influenza transmission, either when worn by infected persons or by persons in the general community to reduce their susceptibility.”

2-Feb 2020 Journal of Evidenced-Based Medicine: [“Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta-analysis.”](#)

- # of Subjects: 9,171 from 6 RCTs
- KEY POINT:
- “There were no statistically significant differences in preventing laboratory-confirmed influenza, laboratory-confirmed respiratory viral infections, laboratory-confirmed respiratory infection, and influenza-like illness using N95 respirators and surgical masks.
- “The use of N95 respirators compared with surgical masks is not associated with a lower risk of laboratory-confirmed influenza.”

3-Sept 2019 Journal of American Medical Association [“N95 Respirators vs Medical Masks for Preventing Influenza Among Health Care Personnel: A Randomized Clinical Trial”](#)

- # of Subjects 2862 Health Care Workers
- Key Points:
- “N95 respirators vs medical masks...resulted in no significant difference in the incidence of

laboratory-confirmed influenza.”

4-Aug 2017 Clinical Infectious Disease Journal, “[Effectiveness of Masks and Respirators Against Respiratory Infections in Healthcare Workers: A Systematic Review and Meta-Analysis](#)“

- # of Subjects: 4169 from Meta-Analysis of 6 RCTS, 8 Observational Studies, and 4 Cohort Studies.
- KEY POINTS:
- “Evidence of a protective effect of masks or respirators against verified respiratory infection (VRI) was not statistically significant.”
- Data from the 6 RCTs: “Compared to medical masks, N95 respirators conferred superior protection against Clinical Respiratory Illness and laboratory-confirmed bacterial, but not viral infections or Influenza-like illness.” Viral Infections were defined to include adenovirus, influenza A and B, rhinovirus A/ B, and multiple coronaviruses.
- From the 8 observational studies: only 3 of 8 studies “reported a protective effect of medical masks against SARS” and “no protective effect against SARS was reported for disposable, cotton, or paper masks” in any of the studies.
- From the 4 cohort studies: the evidence was less conclusive. 2 of 4 studies reported moderate protection against SARS-CoV among HCWs wearing a N95 respirator. Only 1 of 4 studies reported reduced risk of SARS-CoV among HCWs wearing a medical mask. 2 studies found no protective effect of either medical masks or N95 respirators against SARS.
- When ALL studies were combined, only 7 of the 17 studies favored the use of respiratory personal protective equipment (rPPE) vs not using rPPE however the authors concluded that wearing medical masks or N95 respirators both reduced the risk of SARS by approximately 80%?
- There was NO clear benefit of either medical masks or N95 respirators against pH1N1.
- Cloth masks – “there is no evidence of protection” and their use “might facilitate transmission of pathogens when used repeatedly without adequate sterilization.”
- “Disposable, cotton, or paper masks are NOT recommended.”
- “Continuous adjustments and inappropriate wearing may even reverse the benefits of N95 respirators through the contamination of hands, face, and other PPE.”

5-Canadian Medical Assoc Journal, May 2016: “[Effectiveness of N95 respirators versus surgical masks in protecting health care workers from acute respiratory infection: a systematic review and meta-analysis](#)”

- Type: a meta-analysis from 31 medical articles
- KEY POINT: “We found no significant difference between N95 respirators and surgical masks in associated risk of (a) laboratory-confirmed respiratory infection, (b) influenza-like illness, or (c) reported work-place absenteeism.”

6-2015 BMJ Journal “[A cluster randomized trial of cloth masks compared with medical masks in healthcare workers](#)”

- # of Subjects: 1607 Health Care Workers

- Key Points:
- **This is the first RCT of cloth masks**
- The results caution against the use of cloth masks.
- The rates of all infection outcomes were highest in the cloth mask arm compared with the medical mask arm.
- Penetration of cloth masks by particles was almost 97% and medical masks 44%.

7-2012 *Journal of Influenza and Other Respiratory Viruses* “The use of masks and respirators to prevent transmission of influenza: a systematic review of the scientific evidence,”

- Type: Meta-analysis of 17 medical studies
- Key Points: “None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection.”

8-2010 Cambridge University “Face masks to prevent transmission of influenza virus: a systematic review”

- Type: Meta-analysis of 12 medical articles
- Key Point: “While there is some experimental evidence that masks should be able to reduce infectiousness under controlled conditions [7], there is less evidence on whether this translates to effectiveness in natural settings. There is little evidence to support the effectiveness of face masks to reduce the risk of infection.”

9-2009 *American Journal of Infection Control*, Jacobs, J. L. et al. “Use of surgical face masks to reduce the incidence of the common cold among health care workers in Japan: A randomized controlled trial”

- # of Subjects: 32 Health Care Workers
- KEY POINT: “Face mask use was not demonstrated to provide benefit in terms of cold symptoms or getting colds.”
- Key Points:
- “Using a mask incorrectly however, may actually increase the risk of transmission, rather than reduce it.”
- Regarding cloth masks & similar non-medical grade masks “there is insufficient information available on their effectiveness.”

Recommendations from the US Coronavirus Tasks Force & US Surgeon General

- Dr Anthony Fauci SUPPORTS face mask use. That said, we would be remiss if we did not point out that Dr Fauci is on record with 60 Minutes as saying “face masks were not necessary for the general population amid the novel coronavirus outbreak,” noting that while masks might make people “feel a little bit better,” masks do not provide the protection folks believe they do and might create “unintended consequences.” In spite of that statement, Dr Fauci is currently FOR the use of face

masks and favors a national mask mandate.

- Dr Deborah Birx is a [proponent of face masks and advocates for a national mask mandate](#).
 - [The US Surgeon General warned against face masks](#) saying masks “are NOT effective in preventing general public from catching #Coronavirus, but if healthcare providers can’t get them to care for sick patients, it puts them and our communities at risk! <https://t.co/UxZRwxKL9> ” (@Surgeon_General). However, in [November, 2020 the Surgeon General has advocated for face masks](#).
 - Dr Scott Atlas is against the use of face masks. You can hear his reasons why in this video:
-

Additional Guidance from Medical Doctors and Researchers

1. University of Minnesota [“Masks-for-all for COVID-19 not based on sound data”](#)
2. Dr Denis Rancourt [Masks Don’t Work: A Review of Science Relevant to COVID-19 Social Policy](#)
3. Dr Jim Meehan [“Healthy People Should Not Wear Face Masks”](#)
 - Key Points:
 - Viral particles move through face masks with relative ease. Studies show that about 44% of viral particles pass through surgical masks, 97% pass through cloth masks, and about 5% through N95 masks.
 - **Any SARS CoV-2 particles on, in, or around the mask are more forcefully suctioned into the mouth and lungs.”**
4. Dr Sheetal DeCaria [“Can Face Mask Protect Against Coronavirus?”](#)
 - Key Point:
 - **“A regular medical or surgical face mask is not at all the ideal solution to deal with coronavirus. This is because a surgical mask does not actually fit tightly over your mouth and nose, it is also difficult to keep a mask on the face for a longer time period, it is impossible to prevent airborne virus infection, and also when you touch the face mask, you lose the protection.”**
5. [ER/Trauma MD Kelly Victory](#)
 - KEY POINTS:
 - “Masks are intended for the ill when they will potentially be in contact with others and for those who are caring for them.”
 - **“Multiple medical authorities, including the World Health Organization, the CDC, the new England Journal of Medicine have all acknowledged that there is no scientific justification for normal, healthy people to be wearing masks.”**
 - **“Prolonged mask wearing actually increases the risk of disease to the wearer.”**
- 6-[Dr Joseph Mercola](#)
 - Dr Mercola PREVIOUSLY ENDORSED face-masks but who later changed his stance to being Anti-mask BASED ON SCIENCE.
 - Here’s a 1 hour vid interview with Denis Rancourt, Ph.D., a researcher with the Ontario Civil Liberties Association in Canada, who discusses his in-depth review of the scientific literature on face masks...
7. Dr Scott Jenson, US Senator
 - Here is an interview conducted by [Tony Robbins](#) with Senator Scott Jensen, a family physician from Minnesota, who talks about the size of Covid19 particles vs masks. He also talks specifically about

the N95 mask. Of note "A Covid19 particle is about 0.1 micron [but] a surgical mask or a cloth mask are really designed only for particulate matter greater than 5 microns..."

8-37,500+ Medical Doctors and 12,500+ Medical & Public Health Scientists have signed The Great Barrington Declaration which advocates for building herd immunity without the use of masks, lockdowns, etc for the general public while reserving N95 face masks only for the most vulnerable members of society (i.e. at risk elderly people).

The Effectiveness of Face Masks in Graph Form

In Europe, no matter how strictly mask laws are enforced nor the level of mask compliance the population follows, cases all fall and rise around the same time. Note the chart below – the countries that required masks are shown in BLACK, those that did not require masks are shown in RED.



Source The Covid Tracking Project

When it comes to mask effectiveness...

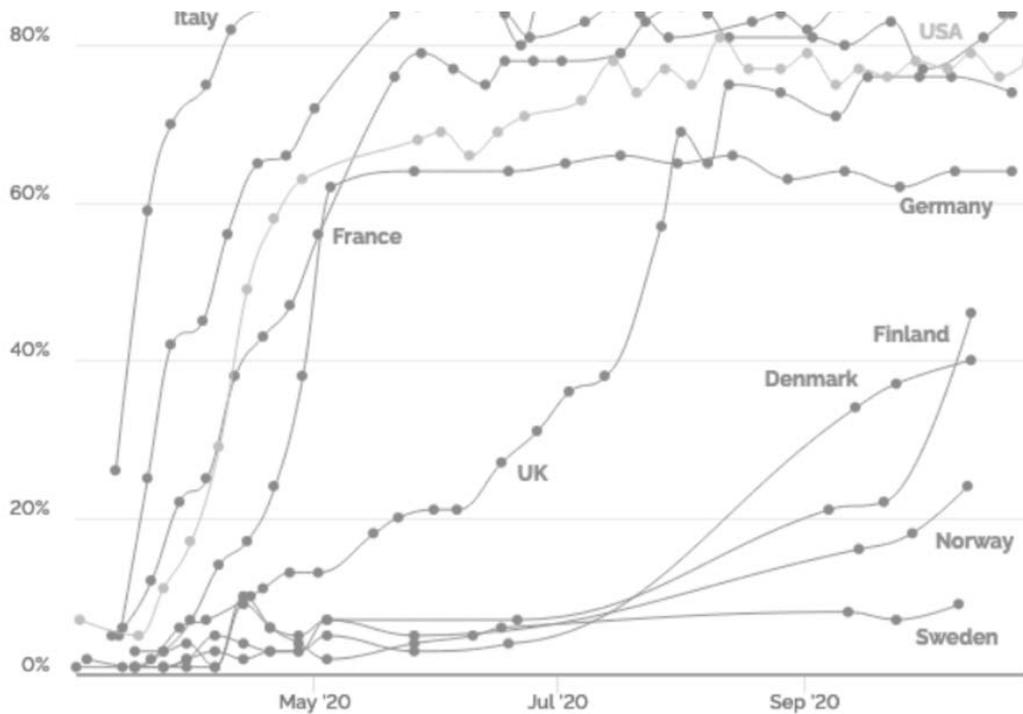
- Dr Fauci and other mask advocates suggest that the COMPLIANCE of the public with consistently wearing a mask is the key to success.
- However when we look at what's actually happening in the world, the analytics do NOT support Dr Fauci's claim...

YouGov COVID-19 behaviour changes tracker: Wearing a face mask when in public places

% of people in each market who say they are: Wearing a face mask when in public places.

From To Zoom





Source: YouGov.Co.UK

If you compare the Mask Compliance Chart from YouGov to the Covid-Cases Chart from The Covid Tracking Project (1st chart above), you can see that **the countries that had the HIGHEST Mask Wearing Compliance were consistently among the countries with the HIGHEST Covid-19 Cases.** **The data here is indisputable – mask compliance does NOT correlate to a preventing Covid-19 cases.**

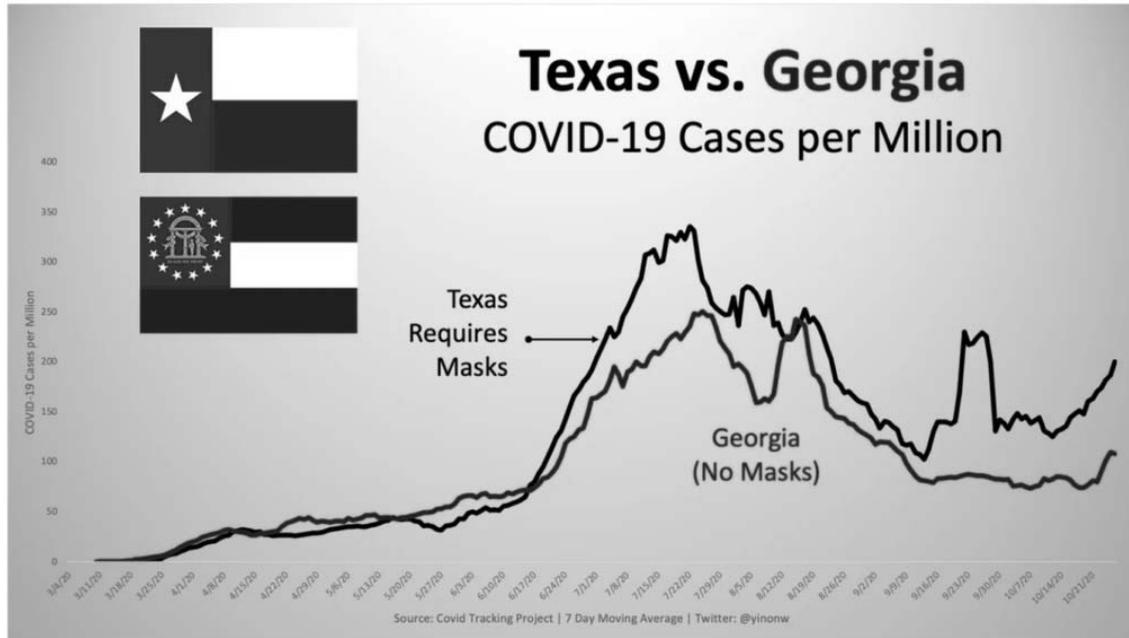
What about in the United States?

California started requiring masks in June but cases still went up by more than 300 percent and the state remains heavily locked down with some of the toughest Covid-19 restrictions – yet to no avail...

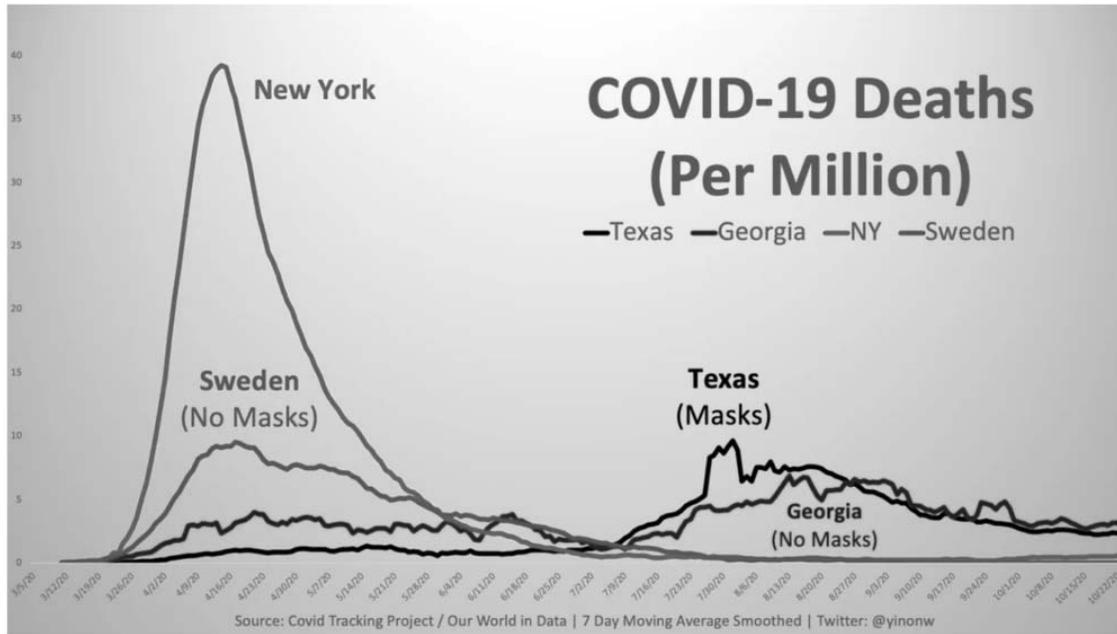


When you compare states that have mask mandates vs those that don't, the story is the same. Note

Texas vs George – With and without mask mandates, Covid-19 cases are similar...



How about if we look at Covid-19 suspected deaths? Again, it doesn't seem to matter – masks are NOT proving effective at preventing the spread of Covid-19. And in the case of Sweden, which focused on Herd Immunity over face mask mandates, there is a far different story to tell...



Summary on the Effectiveness of Face Masks vs Covid-19

Summary of SUPPORT for Face Masks

- There is ONE piece of medical evidence that SUPPORTS the use of face masks vs Covid-19
- There are SIX pieces of medical evidence that SUPPORTS the use of face masks vs other respiratory conditions
- There is a wide variation of effectiveness of face masks vs respiratory conditions depending on the

TYPE of face mask used, it's fit, user compliance, and mask cleanliness.

- Two members of the US Coronavirus Task Force (Dr Fauci & Dr Birx), as well as the US Surgeon General, and the US CDC all recommend the use of face masks vs Covid-19. World leaders from countless countries advocates the use of face masks.

Summary AGAINST Face Masks

- There are FIVE pieces of medical evidence that indicates face masks do NOT work to stop the spread of Covid-19
 - There are TEN pieces of medical evidence that could not find a benefit to the use of face masks vs other respiratory conditions and some even found potential harm.
 - Former US Coronavirus Task Force Member Dr Scott Atlas is against the use of face masks.
 - At last SEVEN Medical Doctors and Researchers are on individual record as being against the use of face masks
 - 37,500+ Medical Doctors and 12,500+ Medical & Public Health Scientists have signed [The Great Barrington Declaration](#) which advocates for building herd immunity without the use of masks, lockdowns, etc for the general public.
 - In chart after chart, the analytics of Covid-19 cases and deaths from around the world clearly show that face masks are NOT working to stop the spread of Covid-19.
-

It's YOUR Call

If you believe face masks work to stop the spread of Covid-19 there IS some evidence to support your belief. Although the majority of evidence just doesn't support the effectiveness of face masks, it should be noted that many prominent world health leaders, medical organizations, and political figures from around the world continue to advocate for face masks. Ultimately, if it makes you feel better to wear a mask, then by all means please do so.

If you believe face masks do not work to stop the spread of Covid-19 there is a growing mountain of medical evidence AND analytical data to support your belief. Although we didn't discuss it today, there is also medical evidence that suggests [face masks may actually be harmful to your health](#). There is a growing body of evidence to suggest that [face masks are particularly harmful to children](#). Additionally, you also have [nearly 50,000 medical doctors and health professionals and over 650,000 concerned citizens](#) from around the world who share your viewpoint. If you choose not to wear a mask, you have the evidence on your side.

You May Also Enjoy

For More on this topic, check out the following articles...