A Survivor of COVID – 19 Chronicles the Pandemic in Paris – an Israel News Talk Radio – Beyond the Matrix interview with Nidra Poller.



By Jerry Gordon and Rod Reuven Dovid Bryant

To understand what is happening in Europe during the coronavirus Pandemic, Rod Reuven Dovid Bryant and Jerry Gordon reached out to long term American ex-pat in Paris, writer, translator, journalist and author, Nidra Poller. Poller and Gordon have known each other for over 17 years when they first met in Boston when Poller was involved in the Mohammed al Dura affair investigations and reporting on jihadist murders of fellow Jews in France. We last <u>interviewed</u> Poller about the disruptive Gillet Jaunes "Yellow Vests" protests of workers in France with demonstrable anti-Semitic attacks. To our surprise, we found out that Poller had suffered symptoms of a

COVID-19 attack — dry cough, lack of taste, fever, fatigue that took her 10 days to gradually recover. This prompted her to begin a daily journal of what it was like under total confinement in Paris then in its third week on April 6, 2020. The interview occurred just before Passover, that disrupted Poller's plans including the delayed visit of a new great grandchild from Los Angeles.

According to World Coronavirus reports compiled by Johns Hopkins University on the date of our interview with Poller,

April 6<sup>th</sup>, France ranked sixth in the world with over 98,839 confirmed COVID-19 cases and 8,078 deaths. The world had over 1, 274,265 cases and over 69, 971 deaths; the US had 336,830 cases and 9,618 deaths, most of the latter were reported in the New York 'hotspot'. Israel had 8,403 cases of COVID-19 and 49 fatalities. But those numbers have changed dramatically with significant indications of spreading and possible plateauing given the increasing extent of confinement. Poller is skeptical about the figures, as they may not be reflective of testing, or cases like her's who experienced the symptoms of COVID-19 but recovered without hospitalization.

She said colleagues who wrote from the US at the end of February and early March saying, "What is all this fuss about a thing that is causing a common cold or a little bit of the flu?" But she was getting information from Japan through her husband Jiro and others in Asia to take it more seriously. Then on March 8<sup>th</sup> she started to have a dry cough like she never had. A strange dry cough twisting her chest muscles and she could not taste food, then she noted when she took her temperature it began to rise.

As Poller told us, Paris was the hotspot in France, and that confinement was having a demonstrable effect in that the death toll was decreasing. The French according to her were doing an effective job of shutting things down as their hospitals had not been overwhelmed. Unlike the US, polls in France she noted posted a 98% approval for confinement which she noted was extremely strict. Each person must carry a form with their name, address, date and place of birth, the date and time they go out. They are allowed out for only one hour each day to buy necessities and for a bit of exercise and fresh air but must remain within one kilometer of their designated residence. She noted that in her neighborhood few shops are open where you can buy food. You do not walk into the shop; you stand in front. People have masks or plastic screens. You do not pay in cash, but with a card.

In many places they are checked and if found in violation are fined. If they rebel, they can be sentenced to jail with no right of appeal. The drug dealers she noted are really put out about confinement. You cannot jump into your car, take a plane, except for emergencies, as the Schengen borders are closed across the EU. Orly Airport is closed. The strictness, she noted had a benefit, the hospitals are not overwhelmed. She says, "This means that people who could recover are getting everything possible to recover". While she and others are confined, they are still in contact with the outside world.

The pandemic is not without its instances of Anti-Semitism and Islamic terrorism. Poller noted that the French Health Minister and his wife are Jewish and have been attacked for not relenting to calls for permitting the use of the controversial immune suppressive and anti-malarial drug, hydroxychloroquine developed during World War II. She noted the limited 'anecdotal' trials by a respected French medical researcher at the University of Marseilles have triggered the controversy in France – paralleling calls for its use in the US by the President and others. Poller contends that what is required are controlled clinical trials to establish credible efficacy and safety, without triggering adverse side effects, of hydroxychloroquine. The interim and ultimate solutions may lie with development of credible antibodies therapies and vaccines several of which are under development in the US, UK and in Israel. On April 23<sup>,</sup> 2020, the US Food and Drug Administration <u>issued</u> an advisory cautioning the use of hydroxychloroquine for treatment of COVID-19 based on safety issues – risk of heart rhythm problems from trials in the US. This followed earlier actions reported in France and Sweden that evidenced cardiac risks in COVID-19 case treatment using hydroxychloroquine. The uses of the anti-malarial drug for treatment of lupus and rheumatoid arthritis continue.

Poller drew our attention to the attack during national confinement by a Sudanese refugee in southeastern France with several killed and injured. Reviews by police investigators of his writings revealed hatred of Kuffars, meaning infidels – evidence of Islamic Jihad ideology.

In the meantime, Poller endeavors to compile a chronicle of her views for the French publication <u>Causeur</u> of what is occurring during the COVID-19 Pandemic in France, the UK, the US and Israel.

What follows is the *Israel News Talk Radio -Beyond the Matrix* interview with Nidra Poller.



Nidra Poller

**Rod Bryant:** This is Rod Bryant with Jerry Gordon and you are listening to Beyond the Matrix here on Israel News Talk Radio. We are happy to have our guest Nidra Poller with us to do another show. So, thank you for coming on the show.

Nidra Poller: It is always a pleasure.

**Rod Bryant:** What is the impact of the toll of COVID-19 on Paris, the deaths, recoveries? What are the latest statistics in that part of Europe?

Nidra Poller: The deaths in France, are something like 5,000 and that is including from the old people's homes [in fact, the figure is higher, see below]. I am terrible at figures. But what I can tell you is that the daily death toll is decreasing. We are in the third week of confinement and this is the result. Paris was a hotspot this week. Every single effort was made so that the hospitals would not be overwhelmed. Some patients were transferred by train, some by plane, some went to the Czech Republic, some went to Germany, some went to other parts of France. Unless I am mistaken, I do not think I am, our hospitals have not been overwhelmed. Our medical workers are not dying or getting infected in huge numbers. Of course, France is a small country, but this has been very strictly organized from the beginning.

**Rod Bryant:** There is an indication that you were saying the French did an exceptionally good job in their process of shutting things down. However, it is not just that, it must have to with the citizens. How are they performing in this whole task?

Nidra Poller: I think there is an approval rating of 98% for confinement. Our confinement is extremely strict. I sent you the paper that we must carry with us when we go out. We must note our name, address, date and place of birth and the time that we go out, and the date. We can go out for one hour every day to buy necessities or to have some little bit of exercise, fresh air. In many places, people have been checked, and if they do not respect it, they are fined. In some instances where people have been rebellious, they have been sentenced with no appeal and immediately sent to jail. I know that there are some troublesome neighborhoods that are always troublesome and there is much more difficulty there. However, it is with a minority in those neighborhoods. For instance, the drug dealers, they are very put out because their dealing is not allowed. One thing I think Americans do not understand is in France, you cannot jump into your car and go someplace. I did not mention that we can only go one kilometer from our home. That is, it. The borders all over Europe have been closed. When the weekend came, there were extremely strict controls in the train station. You cannot go and jump on a train. There is virtually no airplane traffic, only for emergencies. The Orly airport is closed. It has been an extremely strict confinement, and this is important. When the confinement is strict, you can keep the hospitals from being overwhelmed. That means that people who could recover are getting everything possible. It does not stop the virus. This virus is so contagious. Another aspect in our neighborhood is there are a few shops open where you can buy food, and every shop is carefully equipped to deal with the new situation. You do not walk into the shop; you stand in front. The people have either a plastic screen or Plexiglas before them. You do not pay in cash, you pay with a card, they have masks. Everything is being done just to reduce the spread and we are starting to see results. I know that the latest death rate in 24 hours was something like 230. They are seeing some results in Spain and in Italy. Confinement is what works. Confinement is very primitive, if you will, but that is what works more than

anything else.

**Rod Bryant:** Right. That is something that we have noticed that was exactly the cure for the 1918 flu epidemic. Everybody was told to get inside, stay inside and not come out. It is an old cure, which works, right?

**Nidra Poller:** Yes. However, very few places did that in 1918, so many people died. This time, we have every modern technique at our disposal. When we are confined, we are in touch with the outside world. Marvelous.

**Rod Bryant:** To think about it, we are having a conversation now, and you are in France and we are over here. This is an amazing time too, if you are going to endure something like this, this is when to do it. Jerry, you had something you wanted to ask Nidra?

**Jerry Gordon:** A couple of stats and then a question. Apparently, France is ranked number six in total COVID-19 cases in the world. It had 92,839 cases and 8,078 deaths as of this interview.

**Nidra Poller:** The thing about the statistics is that there is such variability in testing in both France and the US. There are vast parts of the United States that are just in the first phase, so the total number of infected people depends on what phase you are in and the amount of testing. Extremely hard to judge. You're sure it is 8,000 dead in France?

**Jerry Gordon:** That is what the John Hopkins University COVID-19 records showed

**Nidra Poller:** Johns Hopkins, okay. Now then, the question is... because I do not want to be fighting with other countries about the figures, as they are so hard to judge. Do you know that in some countries, for instance in Germany, until recently, they said, "Oh no, we don't count every person that came in with COVID-19, we only count the people who died from COVID-19." You do not know how much is due to the virus, how much to pneumonia, how much to inflammation. In France, I know every patient suffering from COVID-19 is counted as a COVID-19 fatality. Now the question is, after another few months, we may be able to see the relative results in different countries, but until then it is extremely hard to judge.

What I judge by is, are the hospitals overwhelmed, are the doctors dying in great numbers, are the medical or healthcare people getting sick in great numbers? If the hospitals are not overwhelmed, then they are doing the best they can. Of course, France is a crossroads in Europe. The United States is isolated, so it took longer for it to come, and longer for it to spread, and we have no idea how far it is going to go.

Jerry Gordon: Nidra, did you have any symptoms of COVID-19?

Nidra Poller: Yes, and it is quite comical, if you will, because my first intention was to write about it. This was at the end of February, beginning of March. I was getting so many articles from friends and colleagues in the United States. They were saying, "What is all this fuss about a thing that's causing a common cold or a little bit of flu?" I wanted to make a judgment on my own and decide whether I thought it was something serious or not. I was also getting information from Japan, Jiro was in Japan, and I am always in touch with Asia. So I decided that, yes, it is something profoundly serious. Then, on the eighth of March, I started to have a dry cough like I have never had, I have had very few respiratory illnesses. It was a strange dry cough, and it twisted the muscles in my chest. It was not coughing fits, but cough, cough, cough. Then another symptom that had not been made public at that time as a symptom of the virus: food had no taste. I had no appetite; I could not digest. I kept saying, "Well, maybe I could eat this or that." No matter what I tried to eat, I could not taste it. I thought, "Well, this is ridiculous. I am writing about COVID-19... here I am... as always very deeply involved in my writing... and now I think I have it?

This is impossible." Then I did get a thermometer and started to take my temperature, but I didn't know what a fever is. As it turns out, my normal temperature is between 35.6°-35.0 C. And I was up to 37.9°C.

**Rod Bryant:** Nidra you were saying about your symptoms that you really did not know if you had a fever, but when you checked it was considerably higher?

Nidra Bryant: In fact, it was a fever. One day for a few hours, I sneezed as if I had a cold and that went away. Then I I slept all day, all night, two days in a aot very tired. row. The whole time... for about 10 days, I was so tired. The other aspect of it is I did not feel like myself, I did not recognize myself. I would get up in the morning and I did not feel like I was awake. It is a very strange illness. Then the cough went away, but the way I handled it, I said to myself, "I'm not going to let this touch my lungs." Did that have any effect or is it just that I had a mild case? But in my mind, it was, "No, it's not going to go beyond here, it's not going to touch my lungs." I had this extraordinarily strong in my mind, "Cough but don't have a coughing fit." I felt that if I had a coughing fit, I would suffocate. Maybe the fact that I am a very calm person helped me to fight it.

**Rod Bryant:** Let me just say this Nidra, you must have strong genes.

**Nidra Poller:** Immune system. Yes, it is true. There is a young man, 37, that died today. He was a top Judoka, and a security guard for the transportation system. That happens often. A lot of extraordinarily strong, healthy, young people either suffer enormously or die from it. The idea that it is just old people that die…that's one of the things that misleads people into thinking, "Oh well, they were going to die anyway. So, what." But it is not. There is so much that we don't know about this… we can only go by what we <u>do</u> know: it is utterly, highly, contagious and the death rate, the mortality t is 10 times

that of the flu. If we use confinement to keep the level down, and let it go more slowly, of course it is not going to kill millions. Thank you, wonderful. But then it is no reason to turn around and say we did more than what is necessary. Isn't that the line... The roof only leaks when it is raining... that line about why we didn't fix the roof. This is probably the most enormous, worldwide defense against a killer virus.

**Rod Bryant:** I was just thinking about this, that if we practice the same level of sanitation and safety just in our regular life, do you realize how much we could just shut down so many small diseases, what you call the influenza period. How much the death rate will drop if we just practice that on a regular basis.

**Nidra Poller:** Yes, and healthy living, which we of course do in Europe. For something that happens once in a century, the question is, "Do people learn the lessons?" I do not think so. When I had it, it took me 12 days before I could start writing again. I wrote the second episode of my Journal, in French, published by *Causeur*, where I explained that I did in fact have it. Because it became clear. I did call the doctor after five days. He said they would not test me because they were only testing people with severe symptoms. The best thing I did was to stay home and rest. It is especially important.

**Rod Bryant:** That was what I was going to say is most people who do not realize how essential rest is for recovery from influenza. You know, when you get something like this, the best thing to do is park yourself in a chair or bed and rest, just sleep it off and not fight the fatigue, fight the virus.

**Nidra Poller:** I am concerned about everyone in my family, all my friends because people are terrified of getting it. It just happened to me and I came through it very well, but it could have gone another way. It is terrifying. It is very wrong to compare it to the flu. People who have it can tell you it is nothing like the flu.

**Rod Bryant:** It is a hybrid of something. They said it sort of mimics pneumonia as well. In several places in the US, people are working on special acts of kindness and benevolence to help store owners that own businesses, to purchase things from them and go there and bring them out to the curbs. There is a stimulus package in the United States that would have been granted to help people that have laid off to keep them on employment rolls. What is the situation in France? I realize that we have a different system set up. When it comes to your sort of a social safety net there. What do you have and what does it look like?

Nidra Poller: We have an extraordinarily strong safety net. An extraordinarily strong public health system. We have one of the best public health systems. It is just naturally adapted to the situation, in that ordinary unemployment compensation is already very consistent, and it is just extended. Everything that is normally done to protect workers that lose their jobs is just extended and increased. Like all governments, the French government is dipping into reserves, finding some money and handing it out. The job loss is incredible, but the shock is less than the United States, and people do not lose their health care. There is an extraordinarily strong public spirit. However, our confinement is so strict that the kind of gestures you might make in the US are extremely limited in France. However, people here help their neighbors. The spirit is particularly good. At 8 o'clock every evening people go to the windows and the balconies, they applaud the healthcare providers, the church bells ring. It is very sincere. There is a feeling that it is a time to take advantage of the shock to rethink things. Now, the question is, when people rethink are, they going to rethink the same way they thought before or will they adopt new things? We will see. We will see.

**Rod Bryant:** I have said this for many years, the crazier things have gotten in politics and the world of terrorism that

we need a reset button. When people ask me, "What do you mean a reset button?" I told them, "I'm not really sure what that would be, but it would be nice to be able to hit a pause button and everybody just rethink where they are at right now. What they are doing. This is probably the best reset button I can think of, to give people a chance to really think about what this is and what it really means. 9/11 though it happened in United States had a major impact all over the world. Now this virus is a worldwide event. I think one of the things our responsibility would be is to encourage people to really look at themselves to see "How can we make our society better, from this. Not worse."

**Nidra Poller:** That is why I am writing this journal. It is called L'homme est dangereuse pour l'homme. It is a play on "The man is a wolf for man." It started when I recovered from COVID-19 and it is going to go on as the pandemic exists. It is being published regularly in French. I will propose articles in English soon. This is a natural thing for me to use writing as a way of not feeling helpless and of telling the world what it was like when it was happening. Of course, Europeans are more likely to be philosophic about something, and to be intellectual about it. I am very troubled of what is happening in the United States. There are so many things that are so negative. I do not even know how bad it is going to be. I am very troubled. For instance, you hear about people all buying guns. So, if they cannot get food and supplies that they want are they going to start shooting each other? There is an issue about price gouging for the medical equipment that they need. Fighting between the president and the governors and insulting the hospital workers and saying, "What do they need all these masks for?" These things are shocking to me.

**Rod Bryant:** Well, it is unfortunate that is what you are seeing that side of the world. It is regrettable to say the least.

Nidra Poller: Could I add something? Because when I was

telling you about how strict confinement is in France, perhaps I should mention this. When they announced, in a few days we will have confinement, you chose where you want to be and with whom, and you cannot change that until the confinement is over. No going here and there. No going back to different members of the family or anything like that. It is extremely strict.

Jerry Gordon: Nidra, there is rising incidence in France and in Europe connected with this pandemic of anti-Semitism and terrorism, and then there is a peculiar problem with French studies on this unproven drug, hydroxychloroquine.

**Nidra Poller:** I will begin with anti-Semitism. It is good in all seasons, in all areas of the world and it is certainly going now. I do not ever go on the social networks to see what they are saying, but I know that it is happening. We had a health minister who... both she and her husband are Jewish. The anti-Semites are accusing them of manipulating and, precisely, of preventing people from getting hydroxychloroguine. It was complicated, but they managed to find a way to accuse them. And whenever they do not like President Macron, they also accuse him of being a Crypto-Jewish, rich man's president. Because of confinement, they cannot go and beat up on Jews, with exception of our Sudanese refugee...two days ago in a small beautiful town in France. He went on a rampage. He killed two people, wounded five, two of them are between life and death. He is what I call an Allahu Akbar. He did not hide his motivation. When they went to his home and found his writings. He said that he was horrified at living in this Ramblings. country of Kuffar (unbelievers in Islam)." He was granted refugee status with a 10-year residence permit in 2017! He told the police that he was nervous because of the confinement. Some people get nervous because of the confinement and maybe they would try to listen to music or Zoom with a friend or family. He got nervous so went out on a killing rampage. We do not even know, did he stab them or

slit their throats? So that is something that always pops up.

Rod Bryant: Were there Jewish victims or just French victims?

**Nidra Poller:** These days a lot of our Allahu Akbars just go after anybody, or they go after the police. Some are precisely after Jews. But as we were telling everyone, we are all kuffars; whether they are Christians, atheists, Jews, for them we are kuffar. Now this hydroxychloroquine. A very highly esteemed specialist in Marseille came out with a study based on something like 24 patients saying that this, plus an antibiotic, the name of which I cannot remember ...

Jerry Gordon: It is called azithromycin.

Nidra Poller: ...that this is a fantastic treatment for COVID-19. Then he followed up with another study of about 70 patients. These are not clinical trials, they are not doubleblind, they are not peer group approved, because they do not respect the rules for any kind of study of the effectiveness of a given drug. It is turned into a big controversy in France, I will be writing about that soon, where some people say, "He's right, and why are they trying to stop him." And other people say, "Wait a minute, we don't even know if it works." You cannot know if it works if you do not have a clinical trial. One thing about COVID-19 is that the virus is in the nose and the throat, just the first few days, and then it goes deeper into the lungs. After a few days, most people, even if you swab them will not find the virus. The protesters say, "I would give it to people right at the beginning." It is extremely hard to know if these are people that would have been cured anyway. There was tremendous pressure ... petitions and impassioned op-eds, articles and posts going around on the internet by people that believe so strongly that it works and other people that say, "Well, wait minute, science is science and you don't just give something because one person said it works". That is where it stands now. The clinical trials are underway, but there is nothing that prevents a French doctor

from giving it if he wants to. You cannot get it without a prescription. They made sure that every pharmacy keeps a stock for the people that are using this treatment for other illnesses like lupus or rheumatoid arthritis. Regardless, the pharmacy must always have enough for those who have those ailments. Now, what I have seen happening in the United States is that it has become even more ideological. I fear that President Trump has grabbed onto this straw and decided that this is the way he is going to get out. He does not like confinement. You know how he talks: "This country was not made to be shut down. I want things up and running." He is turning it into a miracle drug when it is not tried and tested. Now he is saying that the Federal stockpile is for Federal use, whatever that means, and not for the states. These pills he wants to distribute everywhere and indiscriminately used as a magical solution. When you are not an expert, all you can do is look at every bit of testimony from all kinds of specialists. The only thing that can settle this are clinical trials. There have been cases like AIDS, where some were sure that a certain drug was the thing, and then they found that it made people worse. The anecdotal study of hydroxychloroquine in France was picked up in the United States and blown up into something way beyond what they could prove. There is no proof vet. That is where we stand. In a few weeks, they may have the results of the first clinical trials.

**Rod Bryant:** We hope there is a silver bullet out there that can take care of this problem. I do know that they have had some success locally. However, those were anecdotal, that it worked for these individuals, but we do not know how it would affect others.

**Nidra Poller:** But they do not know because they do not know how the illness would have developed otherwise, without the treatment. And for some people it could make them worse. And they will not know either. **Rod Bryant:** That is the concern if you are going to use this. Unless the drug itself is that safe that you can use it with no consequences, then I do not have an issue with it. But I am not a physician. If someone wanted to send you an email or communicate with you, how would they do that?

Nidra Poller: I can give you an address: <u>authorpol@gmail.com</u>

**Rod Bryant:** Okay, thank you so much, really appreciate you taking your time.

**Nidra Poller:** I would be happy to hear from people.

**Rod Bryant:** Yes, and look, we are incredibly grateful that you could join us in the middle of this pandemic.

Nidra Poller: That's right. You can find me.

Rod Bryant: Is your husband home safe?

Nidra Poller: Yes, he is here, luckily.

Rod Bryant: Fantastic.

Nidra Poller: He came back a few days before I got the COVID.

**Rod Bryant:** We are glad that you are well, and you are better.

**Nidra Poller:** He did not catch it from me, so I assume he is asymptomatic. We are going at the first opportunity to offer our antibodies.

**Rod Bryant**: Glad, you can do that. You have been listening to Beyond the Matrix here on Israel News Talk radio. We really appreciate all of you guys coming out and hanging out with us. And thank you for listening to us on Netiv online under BTM. So, until this time next week, we will say, "Shalom. Shalom." <u>Listen</u> to the *Israel News Talk Radio – Beyond the Matrix* interview with Nidra Poller.

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