

# MATOVÍČ VEREJNOSTI ZATAJIL, ŽE PLOŠNÉ TESTOVANIE KTORÉ ON PRETLÁČA AJ CEZ HROMADY MŔTVOL, BOLA ZAHRANIČNÁ KLINICKÁ ŠTÚDIA, BRITSKÝ EXPERIMENT NA SLOVÁKOCH - NA OBJEDNÁVKU BRUSELU. MATOVÍČ JE PRACHSPROSTÝ VLASTIZRADCA A NAKA BY MALA POD ŤARCHOU USVEDČUJÚCICH DÔKAZOV OKAMŽITE KONAŤ!

- CZ24 News | 20. ledna 2021



SLOVENSKO: Matovič verejnosti zatajil, že plošné testovanie bola zahraničná klinická štúdia, britský experiment na Slovákoch na objednávku Bruselu.

Tento výskum bol financovaný zo zdrojov nadácie Bill & Melinda Gates Foundation, ďalej z prostriedkov z programu Európskej únie pre výskum a inovácie, zdrojov britského Ministerstva zdravotníctva V. Británie a ďalších sponzorov.

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## The effectiveness of population-wide, rapid antigen test based screening in reducing SARS-CoV-2 infection prevalence in Slovakia

Martin Pavelka, Kevin Van-Zandvoort, Sam Abbott, Katharine Sherratt, Marek Majdan, CMMID COVID-19 working group, Inštitút Zdravotných Analýz, Pavol Jarčuška, Marek Krajčí, Stefan Flasche, Sebastian Funk  
doi: <https://doi.org/10.1101/2020.12.02.20240648>

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Abstract

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### Abstract

Non-pharmaceutical interventions have been extensively used worldwide to limit the transmission of SARS-CoV-2, but they also place an enormous social and economic burden on populations. We report the results of recent mass testing for SARS-CoV-2 in Slovakia where rapid antigen tests were used to screen the whole population and to isolate infectious cases together with their household members. Prevalence of detected infections decreased by 58% (95% CI: 57-58%) within one week in the 45 counties that were subject to two rounds of mass testing. Adjusting for geographical clustering and differences in attendance rates and the epidemiological situation at the time of the first

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the epidemiological situation at the time of the first round, this changed to 61% (95% CI: 50-70%). Adjusting for an estimated growth rate in infections of 4.4% (1.1-6.9%) per day in the week preceding the mass testing campaign and the corresponding expected growth in infection prevalence, the estimated decrease in prevalence compared to a scenario of unmitigated growth was 70% (67-73%). Using a microsimulation model we find that this decrease can not be explained solely by infection control measures that were introduced in the weeks preceding the intervention, but requires the additional impact of isolation as well as quarantine of household members of those testing positive during the mass testing campaign.

#### Competing Interest Statement

The authors have declared no competing interest.

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#### Author Declarations

I confirm all relevant ethical guidelines have been followed, and any necessary IRB and/or ethics committee approvals have been obtained.

Yes

The details of the IRB/oversight body that provided approval or exemption for the research described are given below:

Only publicly available data was used and therefore no exemption necessary.

All necessary patient/participant consent has been obtained and the appropriate institutional forms have been archived.

Yes

I understand that all clinical trials and any other prospective interventional studies must be registered with an ICMJE-approved registry, such as ClinicalTrials.gov. I confirm that any such study reported in the manuscript has been registered and the trial registration ID is provided (note: if posting a prospective study registered retrospectively, please provide a statement in the trial ID field explaining why the study was not registered in advance).

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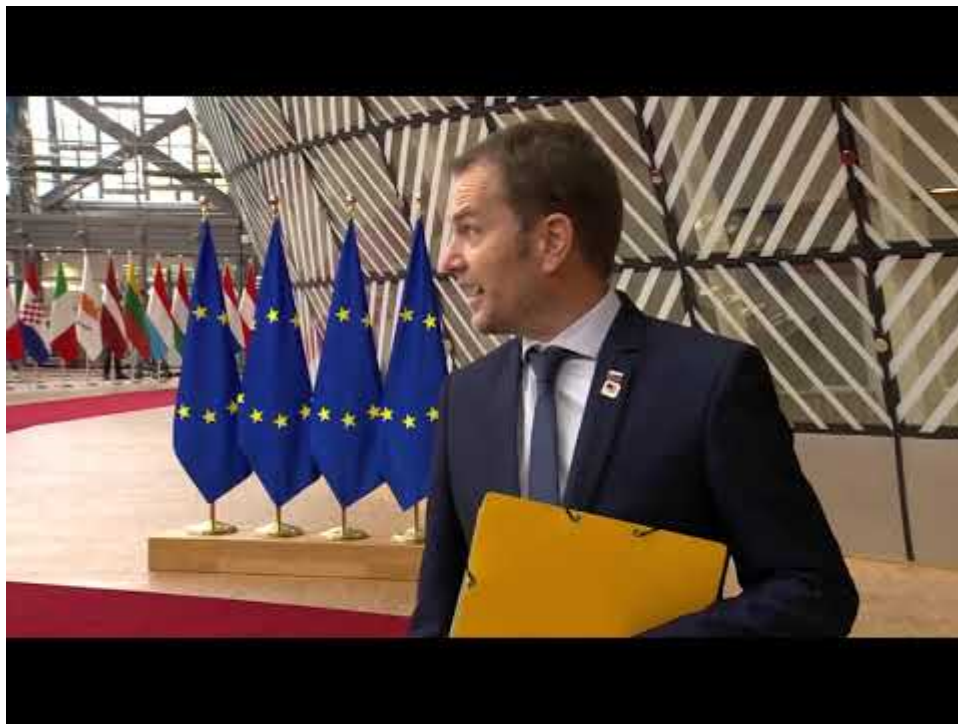
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