



Bioweapon on demand: the Disease X doctrine and the laboratory in the Alps



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How a WHO network of laboratories, simulations and pharmaceutical deals could turn Switzerland into the silent control center of the next crisis

What if the next global crisis has long been planned? Not as a coincidence, but as a scenario with a script - tested, simulated, perfected. For decades, biological and chemical experiments have been carried out on the population under the guise of prevention - sometimes secretly, sometimes semi-openly, always supposedly for our protection. The doctrine behind the concept of "Disease X" is not a medical one, but a geopolitical one: it allows for a constant state of emergency on demand.

While old programs such as the subway tests of the 1960s are now considered historical scandals, their modern successors have long since become reality - disguised as "Preparedness", "Public Health Exercise" or "BioHub". And at the heart of this new network is a small, highly specialized laboratory in neutral Switzerland: Spiez Laboratory.

What used to be "top secret" is now ESG-compliant, WHO-compatible - and part of a global infrastructure that can switch from simulation to emergency at any time. But who can guarantee that we won't end up as an experimental set-up again this time?

The world as a test laboratory

1. 1966: Bioweapon test in the New York subway

On June 6, 1966, a US Army team destroyed several light bulbs filled with [Bacillus globigii](#) (today: *Bacillus subtilis*) in the New York subway. The aim was to simulate the spread in a metropolitan public transportation system. Around 87 trillion bacteria were released - without the knowledge or consent of the population. People were degraded to test subjects, in a real environment, with real risk.

2. 1949-1969: The USA's secret biological weapons testing program

In total, the US Army carried out over [239 such tests](#). These included releases over San Francisco, in schools, hospitals and on highways. These tests violate the Nuremberg Code and prove that the Cold War was not only waged abroad, but also on the backs of the US population.

3. 2001: The anthrax false flag after 9/11

A few days after the attacks of September 11, 2001, letters laced with anthrax spores were sent to media companies such as NBC and senators such as Tom Daschle. The USA was in shock. The public was terrified: an Islamist act of bio-terrorism was suspected. But the truth was more grotesque than any theory.

The trail did not lead to Afghanistan, but to a US military laboratory: Fort Detrick, Maryland. The suspect was a US bio-researcher with access to top secret stocks. [The case was never solved in a court of law.](#)

And now for the perfidious economic component: Before the letters even became public knowledge, the US government had already bought up millions of doses of the anthrax antidote Cipro (ciprofloxacin). Manufacturer: Bayer AG. The share price skyrocketed.

A gigantic business based on fear. A case of profit through panic. It later emerged that high-ranking members of the government had been [informed of the threat at an early stage](#) - and may have profited from the upheaval on the pharmaceutical market.

4. Pentagon-supported simulations & tests in subway systems (2016-2018)

During these years, the Department of Homeland Security (DHS) and the Defense Threat Reduction Agency (DTRA) conducted tests in metro systems in Boston, Washington D.C. and other US cities. Non-pathogenic particles, fluorescent tracers or chemical surrogates were blown into the air to simulate the spread of a bioterrorist attack. Officially declared harmless - but *Bacillus subtilis* was once also considered harmless. What is declared to be a scientific "test" is in fact a [feasibility study for reality](#).

5 Great Britain: Secret releases and simulations

According to a report in the Guardian in 2002, the British government carried out hundreds of tests up until 1979. After that, they switched to "open source surveillance" and simulations without real releases, e.g. in the London Underground. Today, many of these programs run under the catchphrase "CBRN preparedness" - chemical, biological, radiological and nuclear preparedness. The public usually only learns about these surveillance maneuvers through investigative leaks.

<https://www.theguardian.com/politics/2002/apr/21/uk.medicalscience> and <https://www.dhs.gov/archive/news/2010/08/24/air-flow-testing-t>

6. Canada: Subway test in Toronto (2016)

In the Toronto metro area, substances were sprayed under the supervision of the Public Health Agency of Canada to analyze air currents. These were also officially "safe particles". The public was not involved, only informed. A test run embedded in the new normal: all in the name of safety.

<https://www.publicsafety.gc.ca/cnt/ntcs/trms-en.aspx> and https://www.toronto.ca/wp-content/uploads/2019/11/99d2-TSAQ-HIA-Final-Report-November-25_2019.pdf

7. Exercise Cygnus (UK, 2016)

A [flu pandemic is simulated](#). The result: total failure of the British healthcare system. The report was kept under lock and key before the Covid pandemic. Only later did it become public that the government knew it was completely unprepared. Instead of coming to terms, there was silence. Cygnus became a shadow that moved under the radar until reality caught up with it.

8. Exercise Pacific Eclipse (2019)

A scenario with a bioattack by a manipulated virus shortly before the real Covid outbreak. Conducted with international partners. Real laboratory work, transportation and emergency chains were rehearsed - in real time, but without a real release. A [dry run for an emergency](#) that was only weeks away.

9. Event 201 (October 2019)

Shortly before Covid-19, the Gates Foundation, WEF and Johns Hopkins organized a simulation game on a global coronavirus pandemic. The [parallels to reality are striking](#): lockdowns, vaccination campaigns, censorship of "disinformation".

10. Exercise Polaris (WHO, 2025)

A [WHO scenario of a global health emergency](#) with a focus on bioreaction and emergency

coordination. Again with real-time data, participation of laboratories, logistics and communication structures - but without real release. Still.

11. Disease X (since 2018)

The WHO officially uses the term "Disease X" as a hypothetical, unknown disease with high lethality and transmissibility. It does not exist, but it is enough to release budgets, legitimize emergency legislation and force global pharmaceutical partnerships. Disease X is the perfect placeholder for any kind of global mobilization. It's not a virus, it's a concept. And this concept is ingenious: it doesn't need a real risk, just the possibility. It is the weapon of uncertainty in the arsenal of biopolitics.

A phantom that can pop up in any media interview to stir up panic. It's a rhetorical stepping stone for actors like Bill Gates, who has already used Disease X several times in interviews to emphasize the urgency of new vaccination platforms.

The problem: if a term can mean anything, it can also justify anything. Today Disease X, tomorrow "Pathogen Z", the day after tomorrow the microbiome as a target.

<https://publichealth.jhu.edu/2024/what-is-disease-x> und
<https://www.thinkglobalhealth.org/article/preparing-disease-x>

12 AMR, Basilea and the microbiome as a target

The Swiss [biopharmaceutical company Basilea Pharmaceuticals](#) has explicitly focused on the topic of antimicrobial resistance (AMR) in its latest ESG strategy. The [ESG document from August 2024](#), which is labeled as progressive, emphasizes that Basilea is targeting high-risk pathogens and working with global incentives such as orphan drug status and QIDP (Qualified Infectious Disease Product).

Doch genau hier sollte man hellhörig werden: Denn AMR ist nicht nur ein reales medizinisches Problem – es ist auch die perfekte Vorlage für eine neue globale Gesundheitsagenda.

When will the next wave of fear come?

Whoever thinks this is the start of the next wave of fear communication is a rogue. The physician and author Dr. Heiko Schöning already warned of an orchestrated campaign entitled "[Attack on the microbiome](#)" at the end of 2023. In his book of the same name, he documents evidence that a new pharmaceutical "corrective" against the human microbiome is being prepared under the guise of AMR and bio-research.

And as if on cue, Bill Gates appears [before the cameras of the BILD](#) newspaper in spring 2024 and suddenly talks about the relevance of the microbiome for the next pandemic prevention. Coincidence? Or the starting signal for the next global health crisis with the AMR seal of approval?

If - hypothetically speaking - the Swiss army or the Department of Defense (DDPS) were to purchase drugs against AMR in the future, especially from companies such as Basilea, then it would be appropriate to ring the alarm bells. Because what looks like a defensive act of

protection could just as well be the start of a new orchestrated pharmaceutical offensive. A business model planned in advance. Simulation as reality. Disease X as a door opener. The microbiome as the next target.

What has changed since 1966?

In the past, real bacteria were released without the public's consent. Today, announcements are made in local media, usually inconspicuously. The real threat has been replaced by "surrogates", DNA tracers or fluorescent particles. Military secrecy has become a dual-use scenario with the involvement of civil protection. Transparency often remains a promise without fulfillment. The population is no longer the target - it is the testing ground.

Conclusion and open questions

What began as a secret military project is now a publicly orchestrated interplay of fear narratives, simulation games and global emergency mechanisms. But when pathogens circulate through global systems and test simulations become the norm, who can guarantee that the population of test countries will not become part of the plan?

If the Spiez laboratory is now acting in a central WHO role, storing, analyzing and distributing pathogens and even helping to develop response plans - how long will it be before a "Disease X" test run takes place over Swiss soil? Not just in the laboratory, but in the real environment? As a "simulation", of course.

The obvious question may be asked:

What if Spiez can / must not only store, but also release?

And what if the test area is ... us?

Why?

- **"Storing" is a fact:** the Spiez laboratory is part of the WHO BioHub system. It collects, analyzes and stores pathogens with pandemic potential - officially for "preparation".
- **"Release" is possible** - as part of a so-called live simulation (CBRN exercises) in which real environmental conditions are tested. Of course, only with supposedly harmless substances. Today. And tomorrow?
- The phrase **"must release"** represents the real possibility that **Spiez will be involved in a WHO emergency mechanism** in which it no longer makes sovereign decisions itself, but instead fulfills an "international obligation".
- **Switzerland has already cooperated militarily and logistically in the 2020 pandemic** - without consulting Parliament or the population.

Perhaps the most dangerous disease is not Disease X - but our blind faith in "good intentions" in the laboratory.