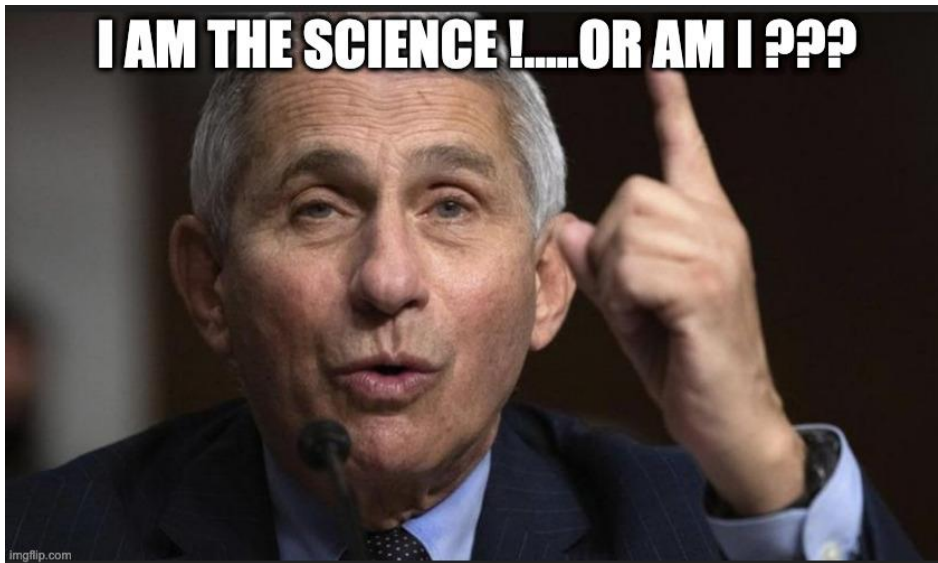


Are we following “The Science???”



(<https://youtu.be/z-tfZr8Iv0s?t=323>)

Most people are trusting the health regulators and authorities. And why not? We are not virologists nor epidemiologists. We have our trusted media personalities reporting on the matter. Surely, they would point out problems with the health advice we are given? We do have a basic understanding of science and how it works. So let's compare our understanding of science to “The Science.”

As an intelligent, savvy, and scientific thinker, let's do a thought experiment.

Humour me here 😊

It is March of 2020. There is a new virus. Some health professionals are claiming great success with an early treatment that lowers risk of hospitalization and death.

You are a public health authority - what would you do??

Of course you would test the hypothesis that the protocol is effective.

Assuming that you genuinely want to save lives, how would you conduct the testing?

Here is the protocol recommended by the physician/s:

“The following two drugs in combination is effective to reduce hospitalization and death. One drug helps activate the other. I use them as early as possible during the course for the disease. No more than a few days after symptom onset. This is because the combination is antiviral.

The disease has 2 phases. The viral replication stage, and the inflammatory stage. The first stage lasts no more than a week. The second stage lasts the rest of the disease.

Here is my recommended treatment, which must be given early, in the first stage:

50 mg zinc daily ¹

200 mg of “Druggyoxycol” twice a day for 5 days (name changed for anonymity)

I am showing an 85% reduction in death.” ²

Now tell me your test design.

Seriously write it down.....

In your test protocols, how much of each drug should be given and when?

Did you put in additional parameters, seeing what would happen if the dosages were higher or lower, or just test the protocol as suggested by the physician?

Have your protocol written???

Ok great.

As a good scientist, we know what you didn't do.

You didn't give the drug LATE

You didn't only test the protocol WITHOUT zinc.

And you didn't give a dose of "druggoxycol" fit for a GORILLA.

But that is precisely what the W.H.O **SOLIDARITY** trial did (ended July 4, 2020). (yes - The World Health Organization)

Instead of 400 mg/day for 5 days, they gave 2400mg on day 1 and 800mg a day for 10 days. And they gave it late. And WITHOUT zinc. ³

What happened (which is no surprise to any good scientist) was an increase in mortality. What would someone expect giving the wrong protocol, at the wrong time, at a dangerous dose?? (For reference, acetaminophen, the most common painkiller used, has a maximum recommended therapeutic dose of 4 grams in a 24 hour period, but 8 grams in a day causes liver damage.) ⁴

Naturally, any reliable news-media organization would call out the irresponsible and shoddy science and the national regulators would have the paper retracted and proper studies commissioned.

That is what happened, right????

After all, if it was a MISTAKE, it would be corrected.

Sadly, the reaction shows it was not a mistake.

Here is how it got reported in mainstream news: (Pay attention to the "narrative frame" – i.e., how they portray the information to lead the reader to frame the information.)

Archived article here <https://archive.ph/hFMJg> *Bloomberg: Hydroxychloroquine Halted in WHO-Sponsored Covid-19 Trials*

Hydroxychloroquine Halted in WHO-Sponsored Covid-19 Trials

By

Thomas Mulier

June 17, 2020, 4:36 PM UTC Updated on June 18, 2020, 9:47 AM UTC

- Anti-malaria drug fails to show ability to reduce Covid deaths
- Independent committee made decision to suspend trial arm

Tests of hydroxychloroquine, an anti-malaria drug touted by U.S. President Donald Trump, were halted in a World Health Organization trial of potential Covid-19 treatments.

The hydroxychloroquine arm of the WHO's Solidarity trial was stopped after advisers concluded that the drug shows no benefit compared to the standard of care in reducing deaths, Ana Maria Henao-Restrepo, a WHO medical officer, said Wednesday at a briefing in Geneva.

Trump has touted the antimalarial as a treatment for the coronavirus since the early weeks of the global outbreak, calling it a "game-changer," but its prospects have faded. U.S. Food and Drug Administration on Monday revoked emergency-use authorization for hydroxychloroquine and chloroquine, a related antimalarial drug, after determining they were unlikely to treat the virus and could have dangerous side effects.

The WHO's Solidarity trial is one of several worldwide that pits a few drugs against each other to identify those that are most effective against Covid. The tests are designed so that ineffective drugs can be weeded out and promising new ones can be added.

Well, maybe it's just the WHO that is corrupt and/or incompetent. This is just a one-off mistake with bad science and bad reporting, right?

Well, let's look at the UK **RECOVERY** trial for the Oxford University Centre for Evidence-Based Medicine. What did they do?

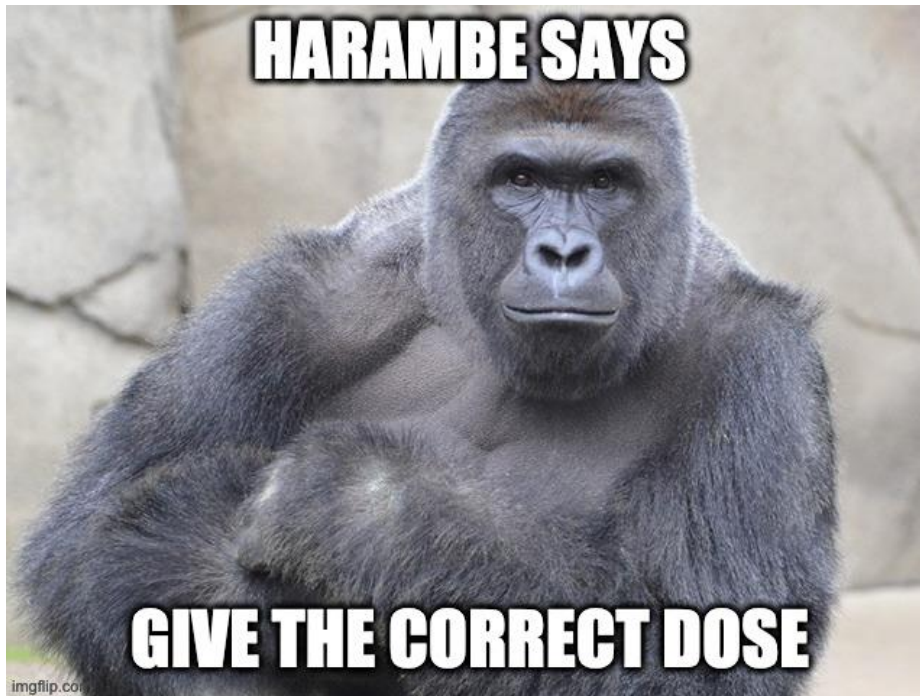
Surely, they tested the correct protocol and it was reported on fairly?????

To do so, the test should administer the medication EARLY, with correct dosing.

Easy!

So.....here was the **RECOVERY** trial procedure:

Trial subjects were taken from HOSPITALIZED patients (7+ days after symptom onset and therefore way too late to test the hypothesis)
They were given 2000mg in the first 12 hours of treatment. Then an additional 400gm every 12 hours for 9 days.



Wait, what????

That is guaranteed to be toxic. Particularly since “Druggyoxycol” (Actually Hydroxychloroquine) has a long half-life and therefore builds up in the body over time with multiple, frequent administrations.

So, the protocol was given VERY LATE, at TOXIC doses, and without the co-ingredient of zinc???? Yes.

How was this sham of a study reported?

Outrage about scientific misconduct and calls for a good study, since lives are on the line?????

Sadly, no.....(Again – notice the framing of the article, and the “guilt by association.” Can you detect the propagandist rhetoric? Another drug was “touted” by the same administration the same month (April 2020) and did not receive this framing by the media. On patent, ineffective Remdisivir was 3000\$ a treatment and has high toxicity. Nevertheless, Remdisivir was approved for use for COVID after a small trial that showed it did NOT work.)



Hydroxychloroquine does NOT treat Covid-19: Biggest study into the Donald Trump-backed anti-malaria drug is ended with 'immediate effect' after researchers found it made no difference

- Oxford University scientists pulled the drug from the RECOVERY trial today
- Results showed it had no benefit on NHS patients hospitalised with the virus
- Scientists running the trial has urged doctors around the world to stop using it

5

So, here we have two major studies, orchestrated to fail, not testing the hypothesis at all, and followed by media headlines that fail to point out the clear malfeasance that took place.

Is there more? Sadly yes.

On May 22, 2020, The Lancet published “*Hydroxychloroquine or Chloroquine With or Without A Macrolide For Treatment of COVID-19: a Multinational Registry Analysis*”

As James Watson wrote about the study:

“This is a retrospective study using data from 600+ hospitals in the US and elsewhere with over 96,000 patients, of whom about 15,000 received hydroxychloroquine/chloroquine (HCQ/CQ) with or without an antibiotic. The big finding is that when controlling for age, sex, race, co-morbidities and disease severity, the mortality is double in the HCQ/CQ groups (16-24% versus 9% in controls). This is a huge effect size! Not many drugs are that good at killing people.”

Sounds like the nail in the coffin for the protocol. Even if the **RECOVERY** Trial and the **WHO SOLIDARITY** trial were a sham, this is the end, right? One must understand – The Lancet is was one of the most reputable medical journals in the world. And the paper passed peer review. And widespread headlines followed: e.g.,

<https://edition.cnn.com/2020/05/22/health/hydroxychloroquine-coronavirus-lancet-study/index.html>

Well, it turns out the study was a complete fraud. 100% made-up bullshit. Published and passed peer review in one of the most prestigious journals, and widely referenced in the media around the world. reported on.

The retraction received much less fanfare – and little or no circulation.

See how CNN reported the retraction on June 4 of 2020 here:

https://edition.cnn.com/world/live-news/coronavirus-pandemic-06-04-20-intl/h_d2a306e828238d4f8ca4eb9c1e65894b

Can't see it? Look harder. You have to scroll down a bit.....

But you can see the retracted study with the scarlet red still on it at the Lancet website. Despite the retraction, this study is [still cited](#) a year later.

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RETRACTED: Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis

Prof Mandeep R Mehra, MD • Sapan S Desai, MD • Prof Frank Ruschitzka, MD • Amit N Patel, MD

Published: May 22, 2020 • DOI: [https://doi.org/10.1016/S0140-6736\(20\)31180-6](https://doi.org/10.1016/S0140-6736(20)31180-6) • Check for updates

Summary **Summary** [Recom](#)

Introduction **Background**

Methods

Results

Discussion

<https://www.thelancet.com/journals/lancet/home> generally safe when used for approved indications such as

Most people are “headline readers” and don't know any of this happened. The mainstream media networks have lied about this, both by omission and commission. But who are they to trust? Clearly the WHO, and major government health regulators are NOT in the business of actually saving lives.

But wait – does hydroxychloroquine actually work?

Well, it doesn't really matter. The above studies have made sure HCQ won't be used for early treatment.

But if a rational person had to guess, the bet would probably be yes.

Why? Because the above studies took effort, time, and money. And you don't spend a lot of effort, time, and money to lie about something that doesn't work. You would just run a real study.

It is not the studies that show HCQ works that are the best evidence. Sure, some such studies exist. But they are on the smaller side (unlike the thousands of patients in the above "disinformational" studies). It is the lie itself that shows the most.

Sorry to say, but when it comes to protecting your health, you are on your own. If the government were looking after your health, they would have funded a decent study. Probably just like the one you wrote down at the beginning of this post.

And what about other early treatments like Ivermectin? We haven't even started talking about the government-funded large randomized proper Ivermectin given early at the correct dose. After all, governments would save hundreds of thousands of lives if it did work. Let's look at those now.

Wait.....What????? There are no such studies???? . We have known about prominent doctors saying it saves lives since before August of 2020. ([Article](#)) . Surely any ethical health regulator interested in saving lives would have sponsored a good study last year???

And that is Exactly The Point.....

References:

- ¹ Ionophores <https://www.ncbi.nlm.nih.gov/labs/pmc/articles/PMC4182877/>
- ² Protocol <https://www.preprints.org/manuscript/202007.0025/v1>
- ³ Study <https://www.medrxiv.org/content/10.1101/2020.10.15.20209817v1>
- ⁴ Acetaminophen <https://www.ncbi.nlm.nih.gov/books/NBK441917/>
- ⁵ <https://www.dailymail.co.uk/news/article-8392293/Hydroxychloroquine-does-NOT-treat-coronavirus-biggest-study-drug-finds.html>