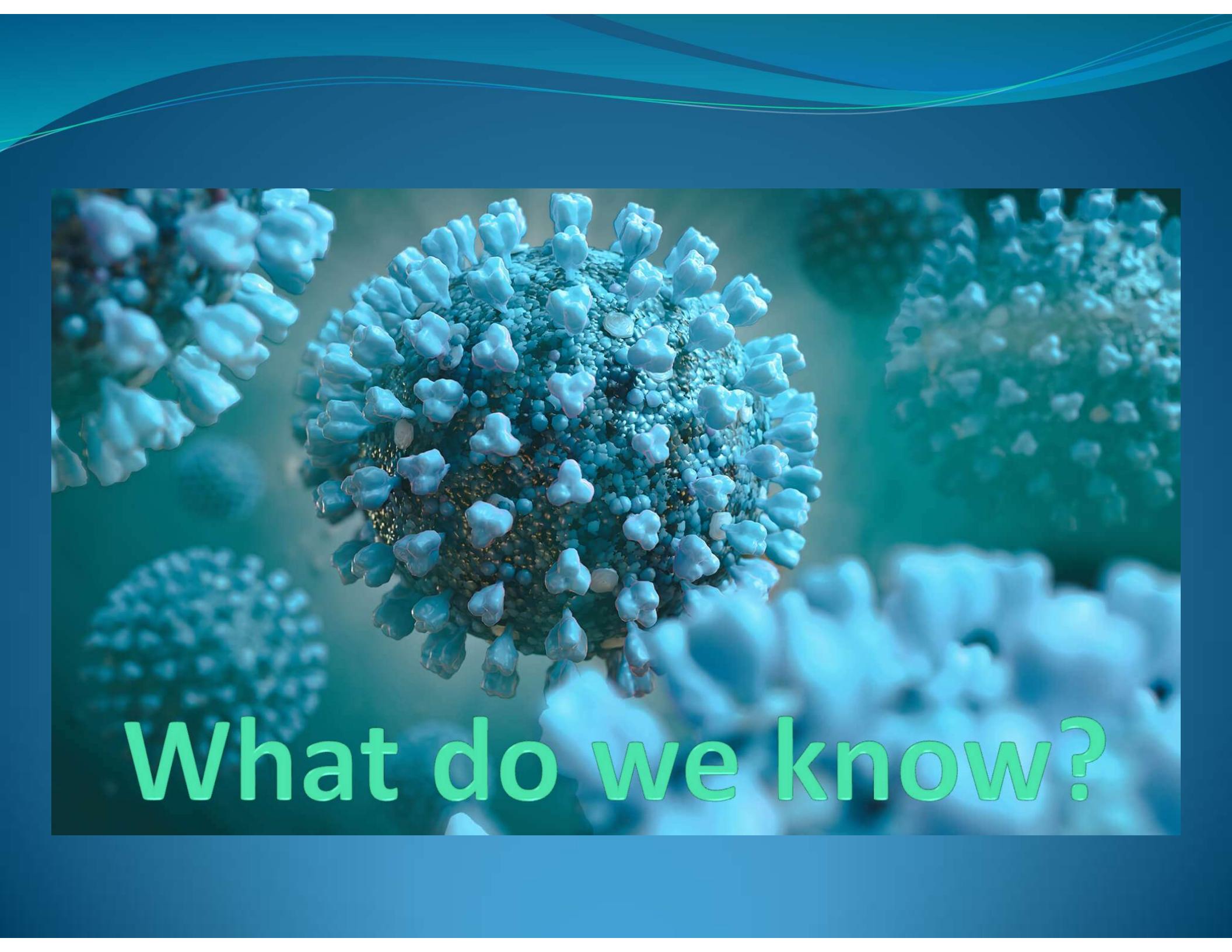


# COVID-19 proposed solutions & natural treatments

December 5, 2021  
Rajko Bisevac, ND, ABAAH, FAARFM  
Andjela Subotic, ND  
[purelifehealth@yahoo.com](mailto:purelifehealth@yahoo.com)

# DISCLAIMER

The information, including but not limited to, text, graphics, images and other material contained within this presentation is provided for educational and informational purposes only. The information presented is not intended to diagnose, prescribe or treat any health condition and is not medical advice. You must not rely on this information as an alternative to medical advice from your physician or other professional healthcare provider. You should never delay seeking medical advice, disregard medical advice, or discontinue medical treatment because of information presented here.



**What do we know?**

**TIME CORONAVIRUS  
BRIEF**

All you need to know about COVID-19 sent daily.

[SIGN UP HERE](#)

HEALTH • COVID-19

# Tough Measures to Stem the Coronavirus Outbreak Could Be in Place for 18 Months, Scientists Say

UK POOL

**THE  
CORONAVIRUS  
BRIEF**

All you need to know about COVID-19 sent daily.

[SIGN UP HERE](#)

TIME

# Assumptions vs Facts

- ▶ Imperial College London info
- ▶ 18 months... or until vaccine is available.
- ▶ 3 departments in this college...
- ▶ Vaccine initiative, all 3 heavily into vaccines
- ▶ NY Times revealed unclassified information...  
not for public, but they reported on it.
- ▶ USA government took it as facts.



## Assumptions

In the absence of facts, planning assumptions represent information deemed true. They are necessary to facilitate planning development efforts. Assumptions set a baseline for planning purposes and do not take the place of specific activities or decision points that will occur during a COVID-19 outbreak. The following planning assumptions assisted in the development of an operational environment for this plan.

1. Universal susceptibility and exposure will significantly degrade the timelines and efficiency of response efforts.
2. A pandemic will last 18 months or longer and could include multiple waves of illness.
3. The spread and severity of COVID-19 will be difficult to forecast and characterize.

# PanCAP Adapted U.S. Government COVID-19 Response Plan

March 13, 2020



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# Assumptions vs Facts

- ▶ “In the absence of facts, planning assumptions represent information deemed true.”
- ▶ “These planning assumptions assisted in the development of an operational environment for this plan... 18 months”

# Section 1: The Current State

- ▶ U.S. \$4 trillion losses
- ▶ Globally \$12 trillion (July 2020)
- ▶ JAMA, Oct. 2020, The COVID-19 Pandemic and the \$16 Trillion Virus
- ▶ The world is in a tantrum
- ▶ Panic, almost war-like state
- ▶ Hoarding
- ▶ U.S. Billionaires Got 62 percent Richer During Pandemic. (Aug.2021)

- ▶ 16 trillion-dollar question:
- ▶ Do we need this panic?

# RETROSPECT

- Is it smart how we handled the crisis?
- Was there better method to do it?
- Can we change approach now?
- Do we have a choice?
- Do we have to blindly obey and trust to what government says?
- Informed Consent... you need to know all sides of the story to make decision.
- This country was founded on principle of FREEDOM TO CHOOSE.

# “Vaccine” Therapies

# What is a Vaccine?

Definition: A preparation of a weakened or killed pathogen, such as a bacterium or virus, or of a portion of the pathogen's structure that upon administration to an individual stimulates antibody production or cellular immunity against the pathogen but is incapable of causing severe infection.

vaccine. (n.d.) *The American Heritage® Medical Dictionary*. (2007). Retrieved December 2 2021 from <https://medical-dictionary.thefreedictionary.com/vaccine>

- The current “vaccines” do not qualify under the traditional definition.

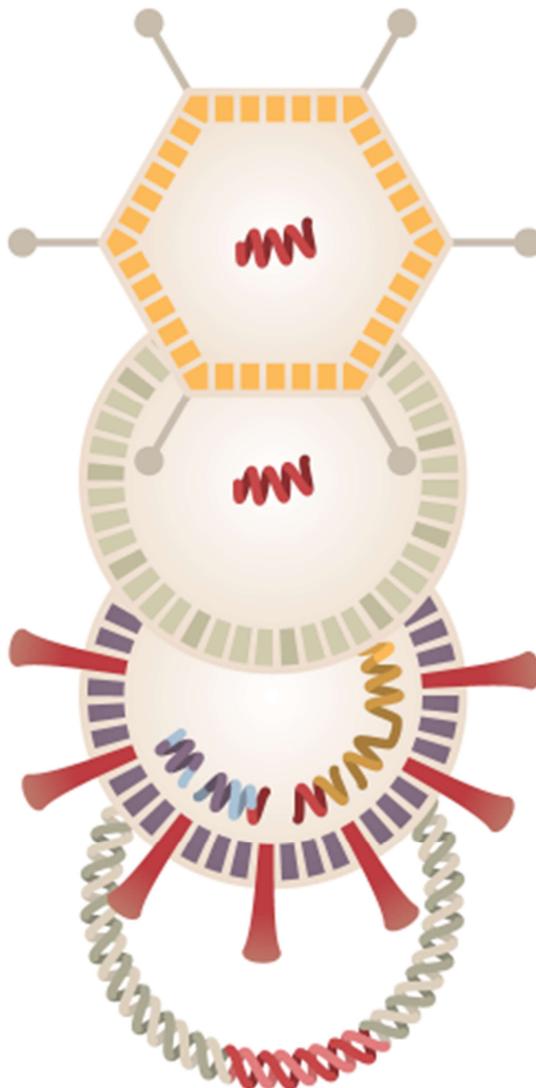
# Leading “Vaccines”

## Leading vaccines

Developer	How It Works	Phase	Status
 Pfizer-BioNTech	mRNA	 	Approved in U.S., other countries. Emergency use in many countries.
 Moderna	mRNA		Approved in Canada, Switzerland. Emergency use in many countries.
 Oxford-AstraZeneca	ChAdOx1	 	Approved in Brazil. Emergency use in many countries.
 Johnson & Johnson	Ad26		Approved in Canada. Emergency use in many countries.
 Gamaleya	Ad26, Ad5		Emergency use in many countries.
 CanSino	Ad5		Approved in China. Emergency use in other countries.
 Vector Institute	Protein		Approved in Turkmenistan. Early use in Russia.
 Novavax	Protein		Emergency use in Indonesia, Philippines.
 Sinopharm	Inactivated		Approved in China, U.A.E., Bahrain. Emergency use in many countries.
 Sinovac	Inactivated		Approved in China. Emergency use in many countries.
 Sinopharm-Wuhan	Inactivated		Approved in China. Limited use in U.A.E.
 Bharat Biotech	Inactivated		Emergency use in India, other countries.

# The Vaccine Testing Process

The development cycle of a vaccine, from lab to clinic.



**PRECLINICAL TESTING** : Scientists test a new vaccine on cells and then give it to **animals** such as mice or monkeys to see if it produces an immune response.

**PHASE 1 SAFETY TRIALS** : Scientists give the vaccine to a **small number of people** to test safety and dosage, as well as to confirm that it stimulates the immune system.

**PHASE 2 EXPANDED TRIALS** : Scientists give the vaccine to **hundreds of people** split into groups, such as children and the elderly, to see if the vaccine acts differently in them. These trials further test the vaccine's safety.

**PHASE 3 EFFICACY TRIALS** : Scientists give the vaccine to **thousands of people** and wait to see how many become **infected**, compared with volunteers who received a placebo. These trials can determine if the vaccine **protects** against the coronavirus, measuring what's known as the **efficacy rate**. Phase 3 trials are also large enough to reveal evidence of relatively rare side effects.

**EARLY OR LIMITED APPROVAL** : Many countries have given emergency authorization based on **preliminary evidence** that they are safe and effective. China, Russia and other countries have begun administering vaccines before detailed Phase 3 trial data has been made public. Experts have warned of serious risks from jumping ahead of these results.

**APPROVAL** : Regulators review the complete trial results and plans for a vaccine's manufacturing, and decide whether to give it full approval.

**COMBINED PHASES** : One way to accelerate vaccine development is to combine phases. Some vaccines are now in Phase 1/2 trials, for example, which this tracker would count as both Phase 1 and Phase 2.

# Preclinical animal testing skipped

- “Due to the urgent need for a vaccine in a surging pandemic, Pfizer and Moderna were given approval to simultaneously test their vaccines on animals while they were conducting Phase 1 trials on humans.” (Associated Press)
- There is potential for “pathogenic priming” by a vaccine. Also referred as “immune enhancement” or “**antibody-dependent enhancement**” (ADE), this is where a vaccinated person, after later being exposed to the same virus, has the risk of exhibiting an extremely exaggerated and sometimes deadly immune reaction.
- In ADE, instead of antibodies preventing entry into the cell, the antibodies, stimulated by a vaccine, amplify the infection rather than prevent its damage. It may only be seen after months or years of use in populations around the world.

# Trials

- Vaccine trials are not designed in such a way that every and any reaction must be reported. In fact, some adverse events were not studied at all.

# mRNA “vaccines”

*Vaccines that deliver one or more of the coronavirus's own genes into our cells to provoke an immune response.*

PHASE 2   PHASE 3   COMBINED PHASES

APPROVED IN U.S., ELSEWHERE

EMERGENCY USE IN OTHER COUNTRIES



VACCINE NAME: Comirnaty (also known as tozinameran or BNT162b2)

EFFICACY: 91%

DOSE: 2 doses, 3 weeks apart

TYPE: Muscle injection

STORAGE: Freezer storage only at -13°F to 5°F (-25°C to -15°C)

PHASE 3

APPROVED IN SWITZERLAND

EMERGENCY USE IN U.S., ELSEWHERE

**moderna**



National Institutes of Health  
*Turning Discovery Into Health*

\*This is the FIRST “vaccine” EVER by Moderna.

VACCINE NAME: mRNA-1273 or Spikevax

EFFICACY: Preventing Covid-19 illness: 93.2%. Preventing severe disease: 98.2%.

DOSE: 2 doses, 4 weeks apart

TYPE: Muscle injection

STORAGE: 30 days with refrigeration, 6 months at -4°F (-20°C)

PHASE 2

PHASE 3

COMBINED PHASES

APPROVED IN U.S., ELSEWHERE

EMERGENCY USE IN OTHER COUNTRIES



- **December 11, 2020** – FDA issues emergency use authorization in those 16 years of age and older.
- **March 13, 2021** – Combined Phase 2/3 study data collected. The study followed participants 16 years of age and older for 4 months following the second dose. There were 25,651 total participants with roughly half given Comirnaty, and the other half given a placebo.

<https://www.fda.gov/media/151707/download>

PHASE 2

PHASE 3

COMBINED PHASES

APPROVED IN U.S., ELSEWHERE

EMERGENCY USE IN OTHER COUNTRIES



- **May 10, 2021** – FDA grants emergency use authorization to include ages 12-15.
- **August 23, 2021** – **FDA approves Comirnaty** (Pfizer-BioNTech) for those 16 years and older.
- **September 22, 2021** – FDA authorizes 3<sup>rd</sup> (booster) dose.
- **October 29, 2021** – FDA expands emergency use authorization for children 5 – 11 years of age.

# Federal Judge Rejects Claim That Pfizer EUA and Comirnaty Vaccines Are ‘Interchangeable.’ Mandating EUA Vaccines Is Illegal!

December 1, 2021 by brjadmin

By Michael Nevradakis, Ph.D.

A federal district court judge rejected a claim that the COVID-19 vaccine being administered in the military is interchangeable with Pfizer’s fully licensed Comirnaty vaccine.

A federal district court judge has rejected a claim that the COVID-19 vaccine being administered in the military is interchangeable with Pfizer’s Comirnaty vaccine, which in August was **tully licensed** by the U.S. Food and Drug Administration (FDA).

Pfizer states: “Comirnaty has the same formulation as the FDA-authorized Pfizer-BioNTech COVID-19 vaccine and can be used interchangeably to provide the COVID-19 vaccination series without presenting any safety or effectiveness concerns. The products are legally distinct with certain differences that do not impact safety or effectiveness.”

In an **order** issued Nov. 12 in **Doe et al. v. Austin**, U.S. Federal District Judge Allen Winsor of the U.S. District Court for the Northern District of Florida denied a **preliminary injunction** requested by 16 service members against the U.S. Military’s COVID **vaccine mandate**. A hearing is **scheduled** for Sept. 14, 2022.

<https://brjm.org/2021/12/federal-judge-rejects-claim-pfizer-comirnaty-same/>

<https://www.fda.gov/vaccines-blood-biologics/qa-comirnaty-covid-19-vaccine-mrna>

# How mRNA “vaccines” work:

## mRNA vaccine

SARS-CoV-2 virus



Spike protein

mRNA is made with  
instructions to make  
viral proteins

mRNA packaged in  
lipid nanoparticles



Vaccine  
delivered  
as injection

mRNA released  
into cell

Host cell

mRNA used  
to make viral  
proteins

Immune response

\*Scientists sequenced the genetic material of SARS-CoV-2 and created a synthetic copy of the mRNA.

# Will mRNA from “vaccines” permanently alter the body’s DNA?

- mRNA is a temporary molecule that quickly becomes destroyed in the cell

HOWEVER

- RNA can be “reverse transcribed” into DNA
- Enzymes called “reverse transcriptases” can convert RNA into DNA
- This happens with retroviruses such as HIV and Hepatitis B
- Some viruses become hard-wired into our DNA  
(called endogenous retroviruses)
- Data exists to support that there are plausible molecular pathways for this to occur with the mRNA “vaccines”.

# Will mRNA from “vaccines” permanently alter the body’s DNA?

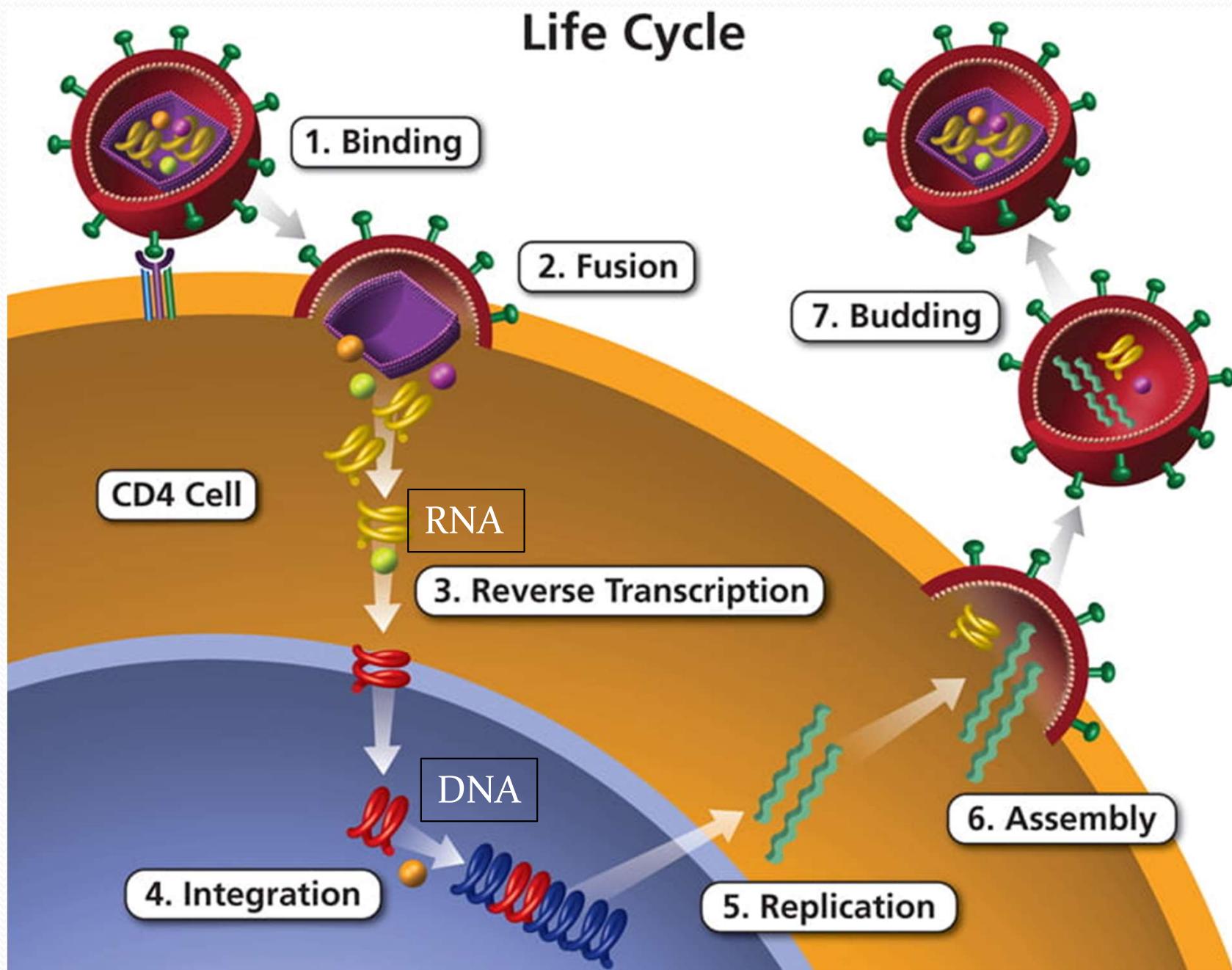
- A study by MIT and Harvard scientists demonstrates that segments of the RNA from the coronavirus itself can become a permanent fixture in human DNA.
- There exists a viable cellular pathway whereby snippets of SARS-CoV-2 viral RNA could become integrated into our genomic DNA after natural infection
- The modified genomic DNA is transcriptionally active meaning DNA is being converted back into RNA.
- The study noted that a number of people tested positive for Covid-19 long after the infection was gone, even though they were not re-infected.

<https://pubmed.ncbi.nlm.nih.gov/33330870/>

# Will mRNA from “vaccines” permanently alter the body’s DNA?

- The RNA in “vaccines” is different than the viral RNA, because it is artificially engineered
- “Vaccine” RNA is engineered to be efficient in translating into protein, thereby staying in the cell for a longer period of time
- This increases the probability that it will be integrated into our DNA
- This also increases the probability that negative effects from the “vaccine” are more pronounced than natural infection

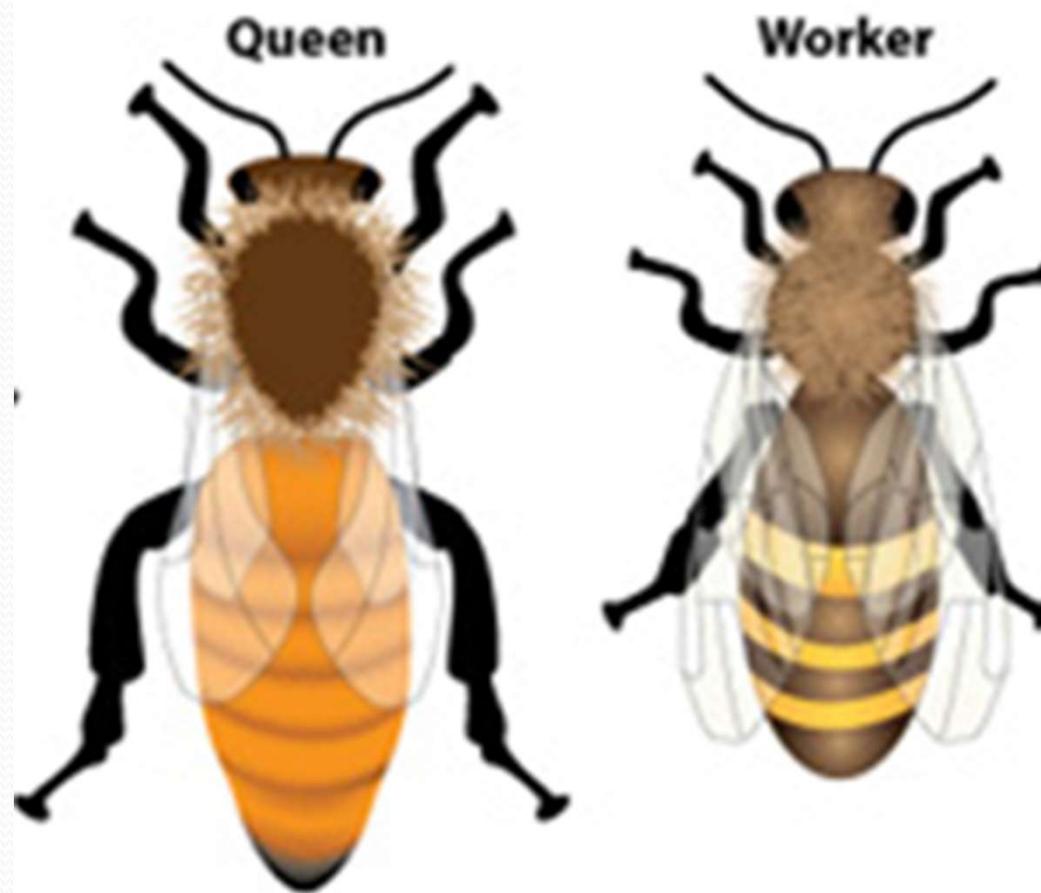
# HIV example of Reverse Transcription



Dr. Alexandra Henrion-Caude, French geneticist  
Director of Research, French Institute of Health and  
Medical Research, Unit of Genetics and Epigenetics:

- We “cannot anticipate” what may happen with mRNA from “vaccines”, because there are many interactions between proteins and various RNA types in the cell
- Take honeybees as an example:
- The queen bee is long and thin, while the worker bees are quite short. Also, their behavior is very different.
- YET, their DNA is the SAME. The only difference between them is their epigenetic settings. Epigenetic modifications can define how genetic information is expressed and used by cells.

Same DNA;  
Different epigenetic environment



# Dr. Alexandra Henrion-Caude, French geneticist

- The vaccine manufacturers have “overlooked” this fact in every presentation of how their mRNA “vaccines” will act once inside the cell
- “Maybe it will not have direct genomic consequences, but because inheritance is not only your genome but also the modification around the genome (epigenetic setting), it is biased to only report about the genome.”
- Our understanding of the family of RNA molecules in the cell is far beyond the “archaic...simplistic...biased” model being presented by the vaccine manufacturers
- “There is no artificial intelligence tool that can anticipate the variety of molecules [“vaccine” mRNA] can encounter.”

# Adenovirus vector (DNA) “vaccines”

PHASE 3 EMERGENCY USE IN U.S., ELSEWHERE

VACCINE NAME: Ad26.COV2.S

EFFICACY: 72% in United States, 68% in Brazil and 64% in South Africa



PHASE 2 PHASE 3 COMBINED PHASES

APPROVED IN BRAZIL EMERGENCY USE IN E.U., ELSEWHERE



VACCINE NAME: Vaxzevria (also known as AZD1222, or Covishield in India)

EFFICACY: 74% against symptomatic Covid19; 100% against severe or critical

PHASE 3 EMERGENCY USE IN RUSSIA, ELSEWHERE



VACCINE NAME: Sputnik V (also known as Gam-Covid-Vac)

EFFICACY: 91.6%

PHASE 3

APPROVED IN CHINA

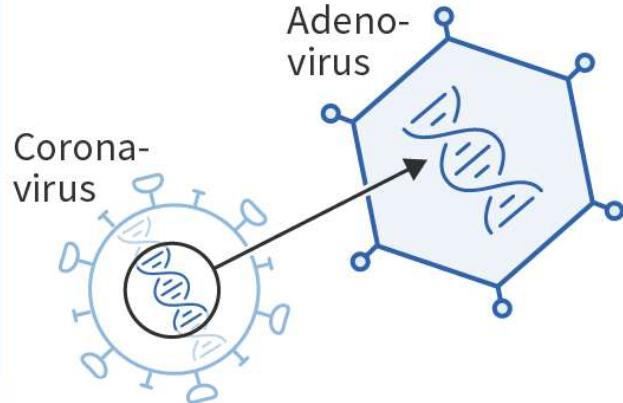
EMERGENCY USE IN OTHER COUNTRIES



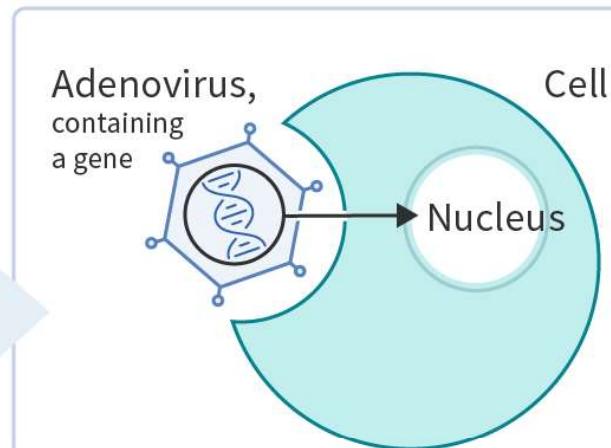
VACCINE NAME: Convidecia (also known as Ad5-nCoV)

EFFICACY: 65.28%

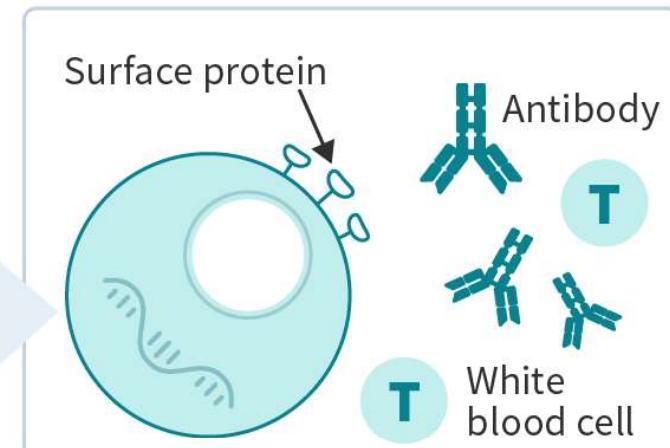
# How Adenovirus or vector “vaccines” work:



A coronavirus contains a gene that directs cells to produce the coronavirus surface protein (spike protein). In the vaccine, this gene has been turned into a part of the genome of a harmless carrier virus.



The carrier virus takes the gene into a cell at the injection site.  
The carrier virus for the coronavirus vaccine is an adenovirus. It cannot reproduce inside the body.



The cell starts producing surface protein on its surface according to the instruction of the gene. The body recognises the protein doesn't belong there and starts to fight it off.

DEVELOPMENT

INTRODUCTION

IMMUNE RESPONSE

# Protein subunit “vaccine”

PHASE 3



VACCINE NAME: NVX-CoV2373

EFFICACY: 89.7%

DOSE: 2 doses, 3 weeks apart

TYPE: Muscle injection

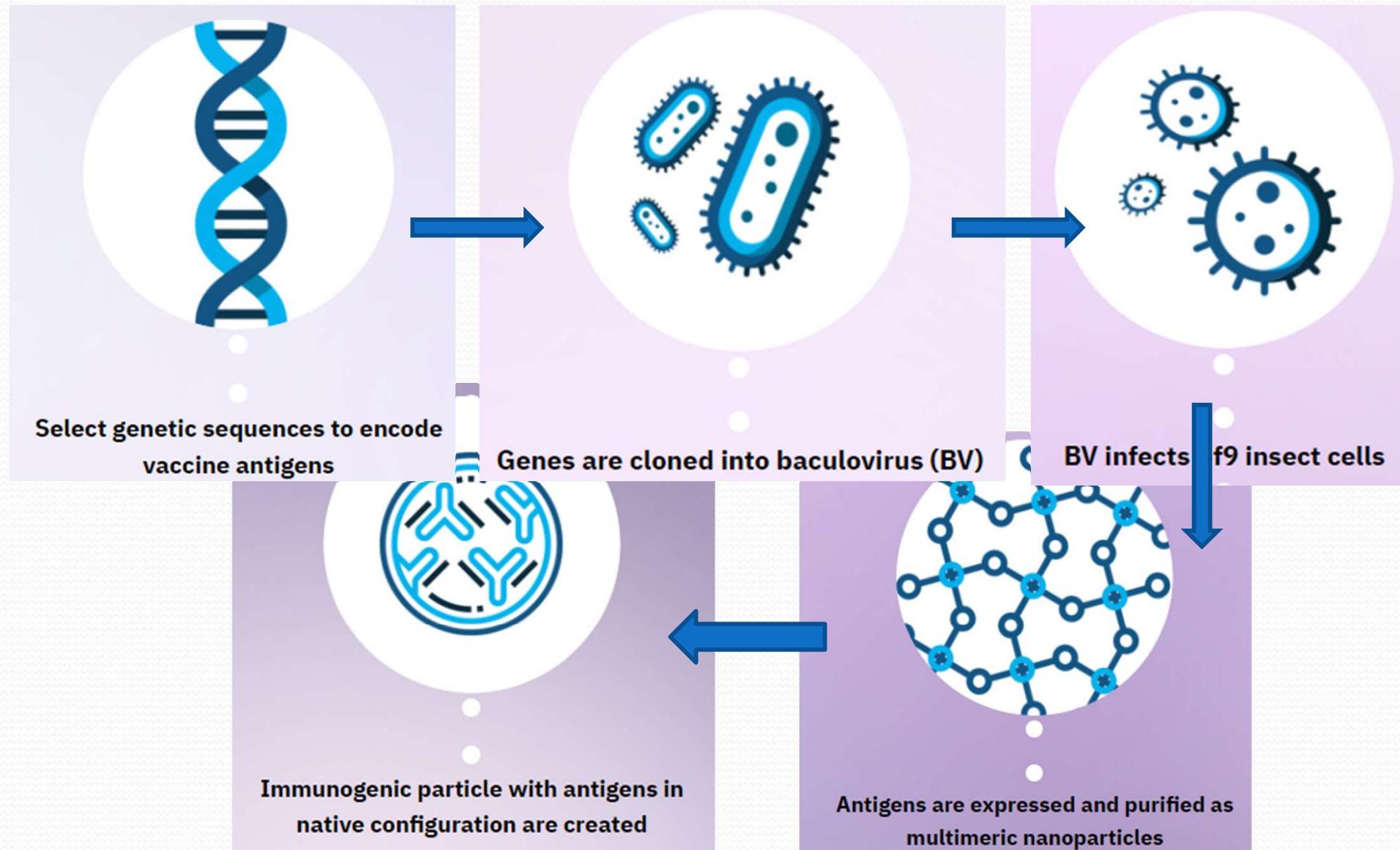
STORAGE: Stable in refrigerator

VACCINE NAME: NVX-CoV2373

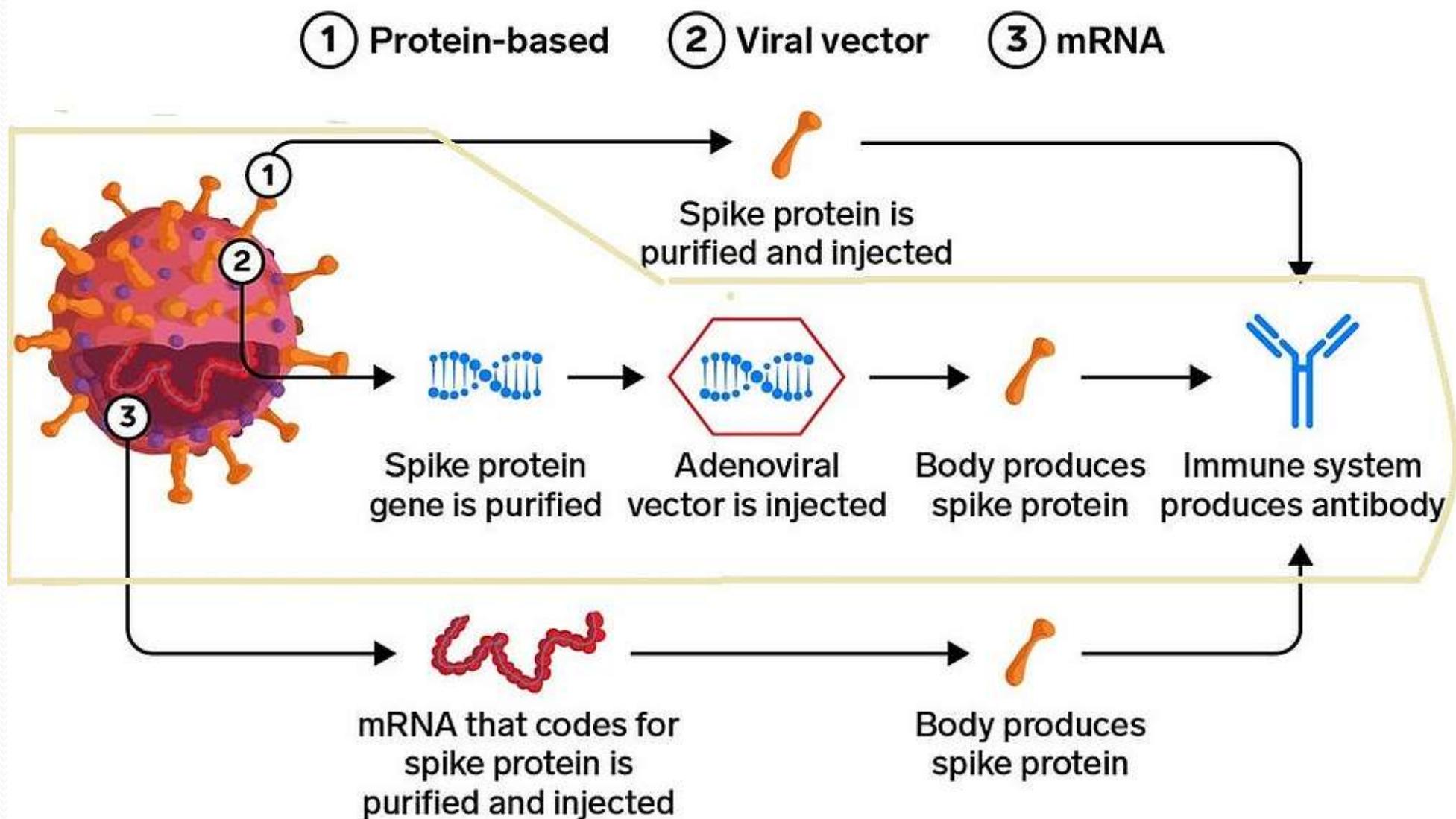
EFFICACY: 89.7%

# Protein based “vaccine”

<https://www.novavax.com/our-unique-technology#recombinant-nanoparticle-vaccine-technology>



# Summary of 3 Technologies



# When a vaccinated person subsequently gets infected, 3 scenarios can occur:

1. Mild illness
2. “Breakthrough illness” - Traditionally, this term has been reserved for vaccinated people who get more severely ill, requiring hospitalization or experiencing untoward outcomes, such as disease complications (e.g., pneumonia) or death. In this case, the vaccine may not have worked at all or it did not induce high enough levels of immunity to effectively stop an infection.

# When a vaccinated person subsequently gets infected, 3 scenarios can occur:

3. ADE - In this scenario, the antibodies that the vaccine generated actually help the virus infect greater numbers of cells than it would have on its own. In this situation, the antibodies bind to the virus and help it more easily get into cells than it would on its own. The result is often more severe illness than if the person had not been vaccinated. ADE can occur after disease and has on occasion been identified following vaccination. Evidence of ADE has not emerged for COVID-19 vaccines even though concerns have been raised.

# Why were previous coronavirus vaccine attempts abandoned?

- “Failure of SARS and MERS vaccines in animal trials involved pathogenesis consistent with an immunological priming that could involve autoimmunity in lung tissues due to previous exposure to the SARS and MERS spike protein.”

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7142689/>

**ADE demonstrated in studies on SARS-CoV-1 (which is 78% identical to SARS-CoV-2) on:**

Humans: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4018502/>

Ferrets: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC525089/>

Primates:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6478436/>

Current trials are not designed to find ADE.

- The quickest vaccine ever developed previously was for mumps. It took 4 years.
- The Pfizer-BioNTech Covid-19 vaccine was developed and cleared for emergency use in only **8 months!!**
- Experimental mRNA gene technologies have never before been approved for widespread use in healthy populations.

CDC data Dec. 2020:

2.8% of vaccinated experienced “Health impact events” such that they were “unable to perform normal daily activities, unable to work, required care from doctor”

	Dec 14	Dec 15	Dec 16	Dec 17	Dec 18*
Registrants with recorded 1 <sup>st</sup> dose	679	6,090	27,823	67,963	112,807
Health Impact Events**	3	50	373	1,476	3,150
Pregnancies at time of vaccination	5	29	103	286	514

\*Dec 18, 5:30 pm EST

\*\*unable to perform normal daily activities, unable to work, required care from doctor or health care professional

# Pregnant Women

- Pregnant women were excluded from clinical trials, so we have no safety data regarding this group.
- The question remains whether the “vaccines” will affect the syncytiotrophoblast (the outer layer of the placenta), which are essential for the formation of the placenta. Spike proteins contain syncytin-homologous proteins. The question arises whether vaccines may train the female body to attack syncytin-1 thereby sterilizing the female. Syncytin-1 is also present in sperm.
- Infection with COVID seems to affect the syncytiotrophoblast.
- We don’t know if/how it will affect pregnant women, babies, or breastmilk.

- “Effectiveness” refers to a reduction in severe disease, hospitalization and death.
- The “vaccines” do not prevent infection.
- The “vaccines” do not prevent transmission.
- It is not known how well they protect against other variants.
- Evidence suggests effectiveness waning such that boosters will be required.

# SOLUTIONS



# EARLY TREATMENT – IMMUNE SYSTEM COVID-19 DO WE DEVELOP IMMUNITY?

- ▶ **Li QinGyuan**, director of pneumonia prevention and treatment at China Japan Friendship Hospital in Beijing, those who have been infected with Covid-19 develop a protective antibody.
- ▶ **Dr Stephen Gluckman**, an infectious diseases physician at Penn Medicine, the medical director of Penn Global Medicine – “having the disease once results in immunity in most individuals – as is seen with other coronaviruses.”
- ▶ As seen with other coronaviruses, having COVID once results in long-term immunity in most people.

# VITAMIN D

## COVID-19 Severity by Vitamin D Level (N=212)

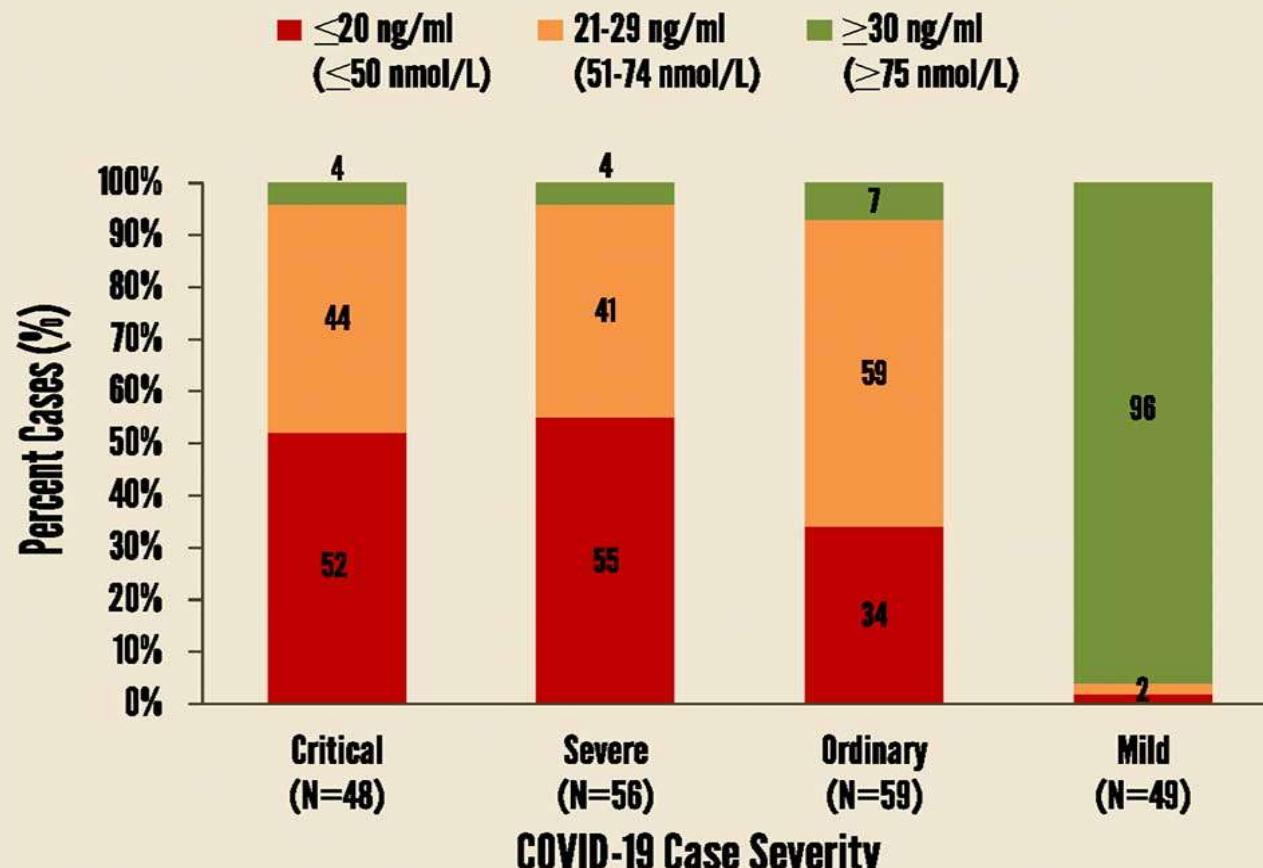
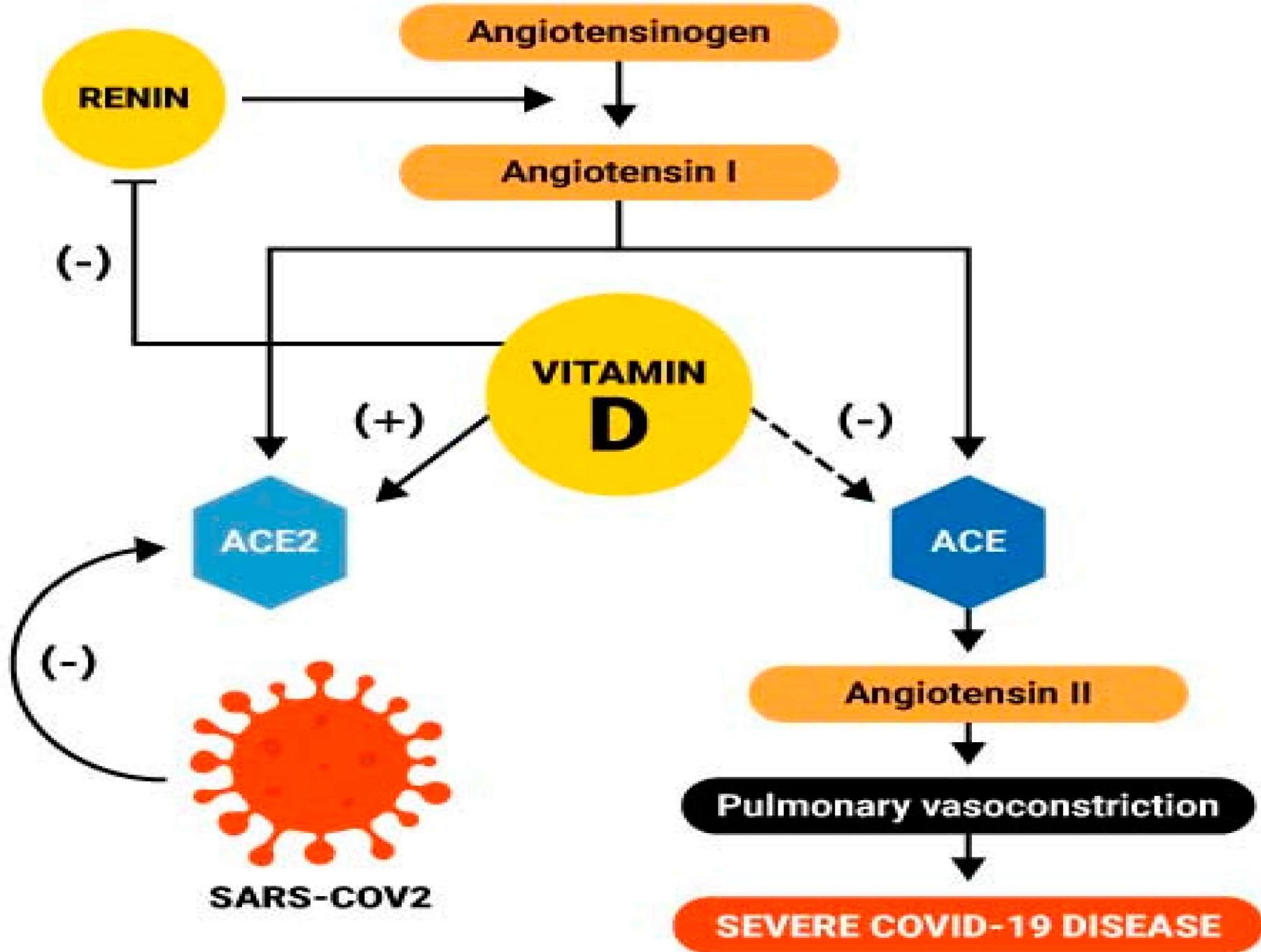


Chart Date 4/21/2020  
© 2020 GrassrootsHealth  
Alipio MM, SSRN, 2020.



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Moving Research into Practice  
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# What do we know?

- SARS-CoV-2 binds to ACE<sub>2</sub> receptors
- Vitamin D increases expression of ACE<sub>2</sub> receptors, maintains immune system homeostasis, and prevents development of autoimmune processes
- Vitamin D induces ACE<sub>2</sub> expression, which limits the formation of angiotensin II via ACE and reduces lung injury

[Front Public Health](#). 2021; 9: 624559.

Published online 2021 Mar 5. doi: [10.3389/fpubh.2021.624559](https://doi.org/10.3389/fpubh.2021.624559)

PMCID: PMC7973108

PMID: [33748066](#)

## **The Impact of Vitamin D Level on COVID-19 Infection: Systematic Review and Meta-Analysis**

- **Conclusions:** In conclusion, low serum 25(OH) Vitamin-D level was significantly associated with a higher risk of COVID-19 infection. The limited currently available data suggest that sufficient Vitamin D level in serum is associated with a significantly decreased risk of COVID-19 infection.

# An observational and Mendelian randomisation study on vitamin D and COVID-19 risk in UK Biobank

Xue Li, Jos van Geffen, Michiel van Weele, Xiaomeng Zhang, Yazhou He, Xiangrui Meng, Maria Timofeeva, Harry Campbell, Malcolm Dunlop, Lina Zgaga✉ & Evropi Theodoratou✉

*Scientific Reports* 11, Article number: 18262 (2021) | [Cite this article](#)

- New research from Trinity College Dublin and University of Edinburgh has examined the association between vitamin D and COVID-19, and found that ambient ultraviolet B (UVB) radiation (which is key for vitamin D production in the skin) at an individual's place of residence in the weeks before COVID-19 infection, was strongly protective against severe disease and death.

<https://www.nature.com/articles/s41598-021-97679-5>

<https://scitechdaily.com/more-evidence-that-vitamin-d-protects-against-severe-covid-19-disease-and-death/>

# Immune system support

- **Vitamin D<sub>3</sub>** - Receptors for vitamin D are found on the surface B cells, T cells, and white blood cells. These cells are capable of synthesizing the active vitamin D metabolite. Vitamin D can modulate both the TH<sub>1</sub> and the TH<sub>2</sub> arms of the immune system.
- **Zinc** - This mineral is a co-factor for up to 300 enzyme systems. It has been shown to be clinically effective in protecting against coronavirus infections. “Some 90% of the population consume diets deficient in zinc,” according to Denham Harmond M.D., Ph.D. considered to be the Father of the Free - Radical Theory of Aging.
- **Vitamin C** - This is one of the most powerful and important nutrients for humans. It is a water-soluble, chain-breaking antioxidant that interacts with glutathione and alpha-lipoic acid, and regenerates Vitamin E, leading to increased activity of **macrophages**, the white blood cells that remove pathogens from your system.

# Immune system support

- **Quercetin** - This is a plant-based antioxidant that works to drive zinc into the cell. It has a similar mechanism of action as HCQ to improve immune system functioning.  
<https://pubs.acs.org/doi/full/10.1021/jf5014633>
- **N-acetyl-L-cysteine** - NAC has antioxidant, anti-inflammatory and immune-modulating characteristics that may prove beneficial in the treatment and prevention of SARS-CoV-2.  
<https://pubmed.ncbi.nlm.nih.gov/33177829/>

# Zelenko Protocol

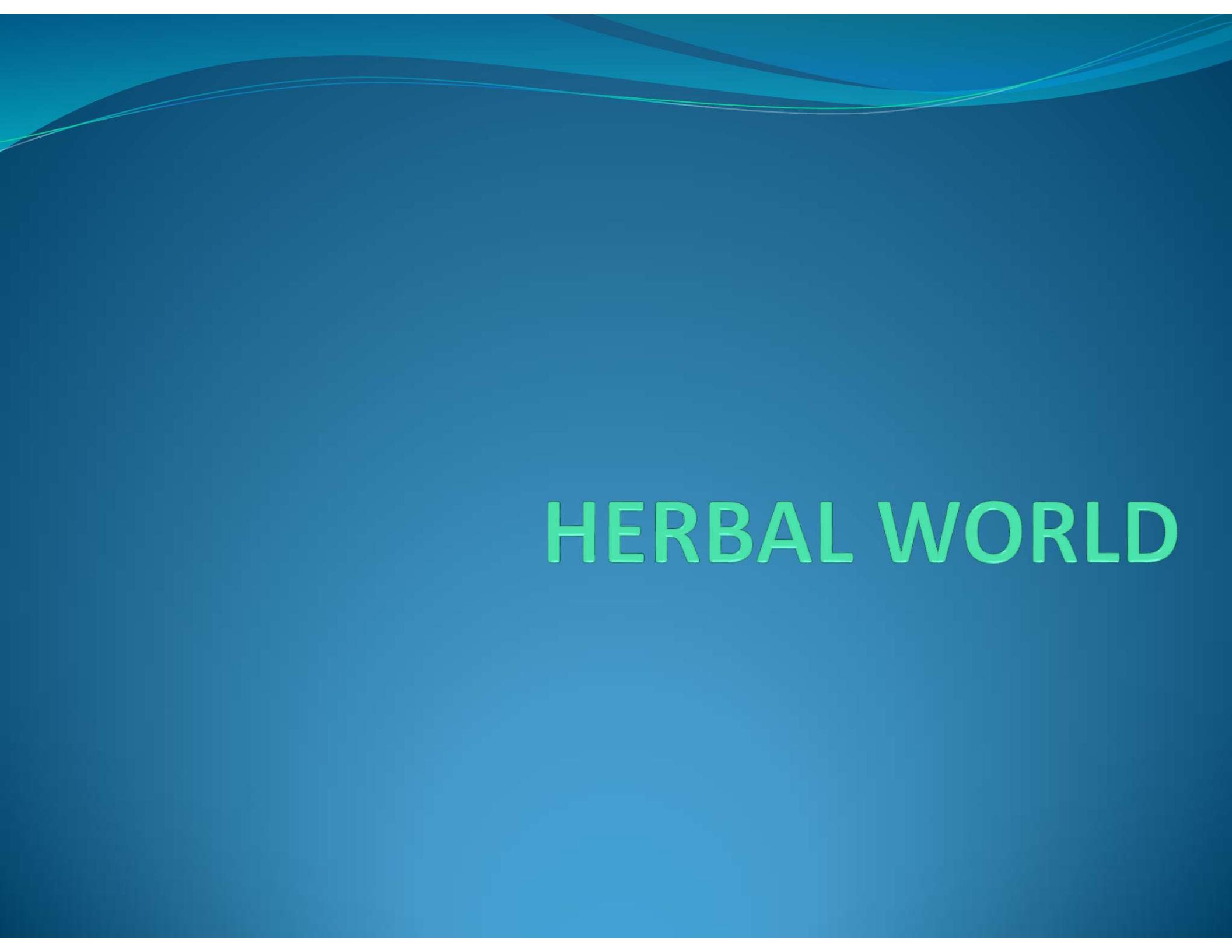
- See full treatment list here: <https://vladimirzelenkomd.com/treatment-protocol/>
- **Low risk patients**
- Supportive care with fluids, fever control, and rest
- Elemental Zinc 50mg 1 time a day for 7 days
- Vitamin C 1000mg 1 time a day for 7 days
- Vitamin D<sub>3</sub> 5000iu 1 time a day for 7 days
- **Optional over the counter options**
- Quercetin 500mg 2 times a day for 7 days or
- Epigallocatechin-gallate (EGCG) 400mg 1 time a day for 7 days
- **Moderate / High risk patients Include:**
- Azithromycin 500mg 1 time a day for 5 days or
- Doxycycline 100mg 2 times a day for 7 days
- Hydroxychloroquine (HCQ) 200mg 2 times a day for 5-7 days
- and/or
- Ivermectin 0.4-0.5mg/kg/day for 5-7 days

# Front Line Doctors

- See full treatment list here: <https://covid19criticalcare.com/covid-19-protocols/i-mask-plus-protocol/>
- **Prevention Protocol**
- **Immune Fortifying/Supportive Therapy**
- **Vitamin D<sub>3</sub>** 1,000-3,000 IU/day
- **Vitamin C** 500-1,000 mg 2x daily
- **Quercetin** 250 mg/day
- **Zinc** 30-40 mg/day (elemental zinc)
- **Melatonin** 6 mg before bedtime (causes drowsiness)
- **Early Treatment Protocol - includes above in addition to:**
- **Iodine** nasal spray/drops – povidone-iodine 1% solution - 4-5 drops in each nostril every 4 hrs
- **Aspirin** 325 mg daily unless contraindicated
- **Curcumin** 500 mg 2x daily
- **Black cumin seed** 80 mg/kg daily

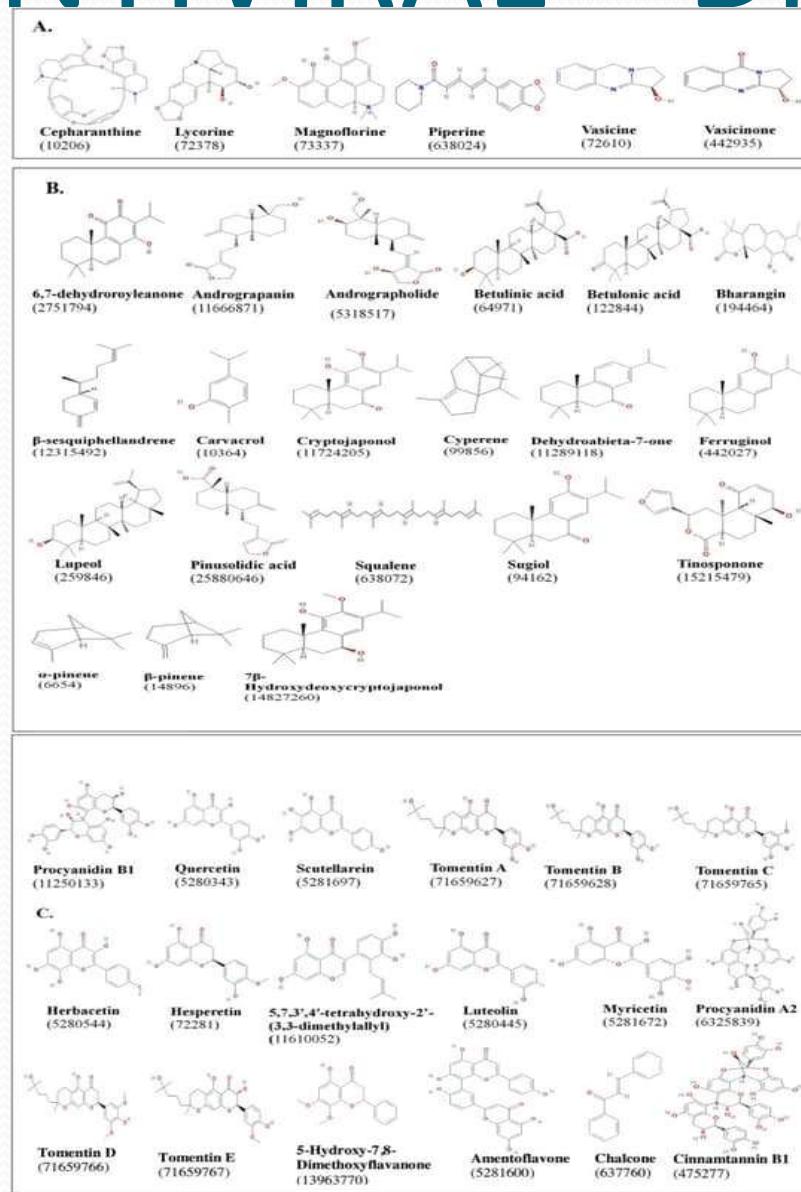
# AFRICA - MYSTERY

- “Most African countries missed a target to vaccinate 10 % of their people.” Sept 30.2021.
- “African continent has accounted for just 4.1% of the total of 4.3 million deaths due to COVID-19. Earlier on in the pandemic, scientists had predicted a COVID-19 catastrophe in Africa, which is much more severe than what has actually been observed across the continent.”
- Africa vaccinated less than 10% yes had only 4.1% of the problems!

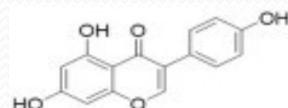


HERBAL WORLD

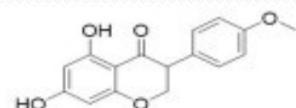
# HERBAL ANTIVIRAL – Dr. Shiva



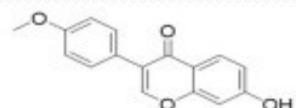
# HERBAL ANTIVIRAL (18) – Frontiers in Pharmacology Oct. 2020



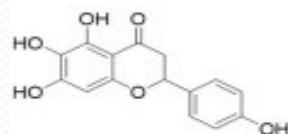
Genistein



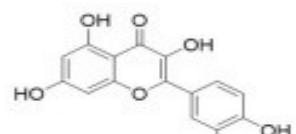
Biochanin A



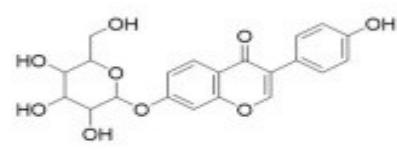
Formononetin



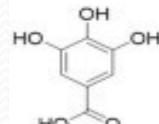
Scutellarein



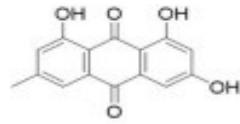
Quercetin



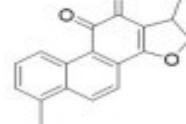
Daidzin



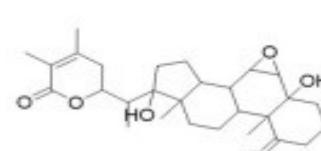
Gallic acid



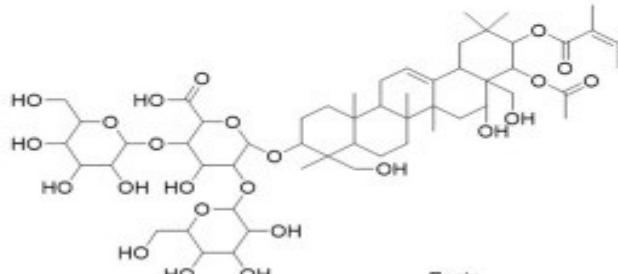
Emodin



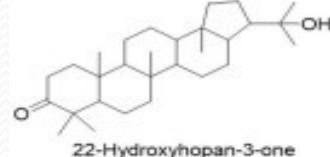
Dihydrotanshinone



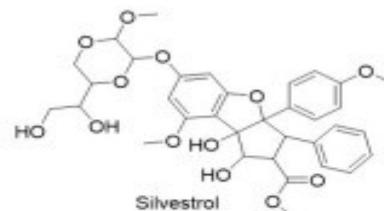
Withanolide



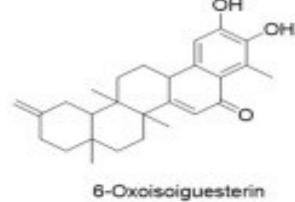
Escin



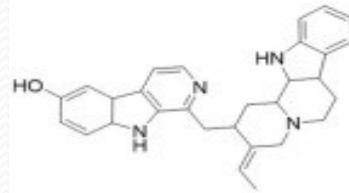
22-Hydroxyhopan-3-one



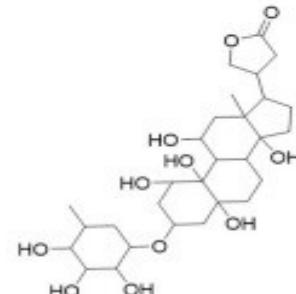
Silvestrol



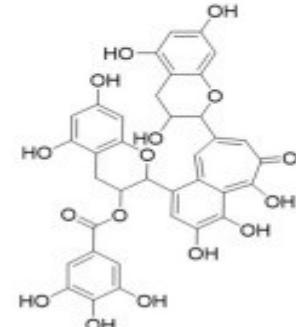
6-Oxoisoquesterin



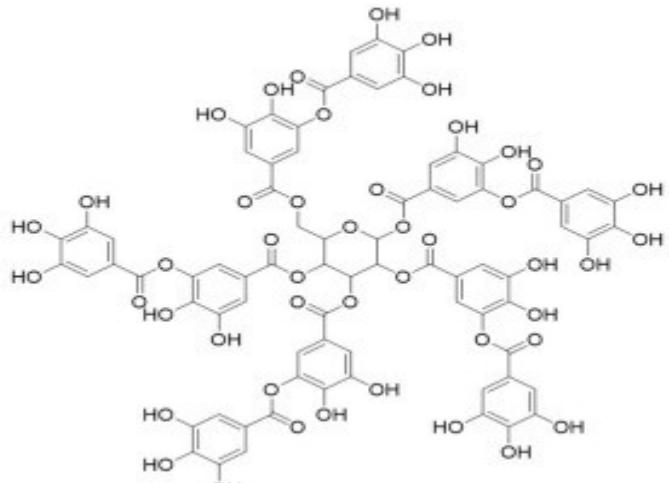
10-Hydroxyusambarensine



Ouabain



Theaflavin-3-gallate



Tannic acid

# **BRIDGE... TRADITIONAL/FUNCTIONAL**

- ▶ Hydroxychloroquine Rx
- ▶ Azythromycin Rx
- ▶ Zinc
  
- ▶ All three seem to work and have surprising mechanism how they work.

# Cinchona Bark (quinine) – Goldmine #1

- ▶ Used for increasing appetite; promoting the release of digestive juices; and treating bloating, fullness, and other stomach problems.
- ▶ Blood vessel disorders including hemorrhoids, varicose veins, and leg cramps.
- ▶ Mild influenza, swine flu, the common cold, malaria, and fever.
- ▶ Cancer, mouth and throat diseases, enlarged spleen, and muscle cramps.
- ▶ Used in eye lotions to numb pain, kill germs, and as an astringent.
- ▶ Applied to the skin for hemorrhoids, ulcers, stimulating hair growth, and managing varicose veins.

# Cinchona Bark (quinidine)

- ▶ Quinidine is the stereoisomer of quinine used in cardiac medicine.
- ▶ The blood and cardiac disorders that have traditionally been treated with cinchona bark are anemia, varicose veins and arrhythmia (since 1749). In the case of arrhythmia, there is extensive laboratory and clinical evidence to support these claims, and some prescription medicines for arrhythmia are in fact derived from cinchona.
- ▶ In 2010 quinidine was successfully synthesized in the laboratory.

# Cinchona Bark Uses

- ▶ Anti-malarial
- ▶ Indian researchers found that cinchona bark was effective in treating these common bacteria: *Staphylococcus aureus*, *Bacillus cereus*, and *E. coli* but not *Streptococcus*  $\beta$  hemolytic and *Pseudomonas aeruginosa*.
- ▶ Cinchona was also effective in killing the yeast *Candida albicans*.
- ▶ Cinchona bark has been used in traditional herbal medicine to treat muscle spasms. There are a few reports of the successful use of cinchona in treating painful leg cramps and spasms, with only tinnitus as a side effect.
- ▶ Quinine can be used to treat babesiosis. However, the treatment should be in combination with antibiotics, because quinine has a bit more potential side effects.

# VIRUSES – MODUS OPERANDI

- ▶ **Targeting the Endocytic Pathway and Autophagy Process as a Novel Therapeutic Strategy in COVID-19**
- ▶ <https://www.ijbs.com/v16p1724.htm> (International Journal of Biological Sciences, 2020)
- ▶ Key element in viral infection is the process of viral entry into the host cells. In the last two decades, there is increasing understanding on the importance of the endocytic pathway and the autophagy process in viral entry and replication. As a result, **the endocytic pathway including endosome and lysosome has become important targets for development of therapeutic strategies in combating diseases caused by CoVs**

## Endocytic pathway

CoV

Chlorpromazine

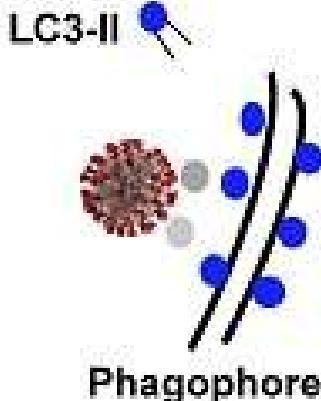
Early endosome

CQ

DMV

CoVs RNA release

Lysosome



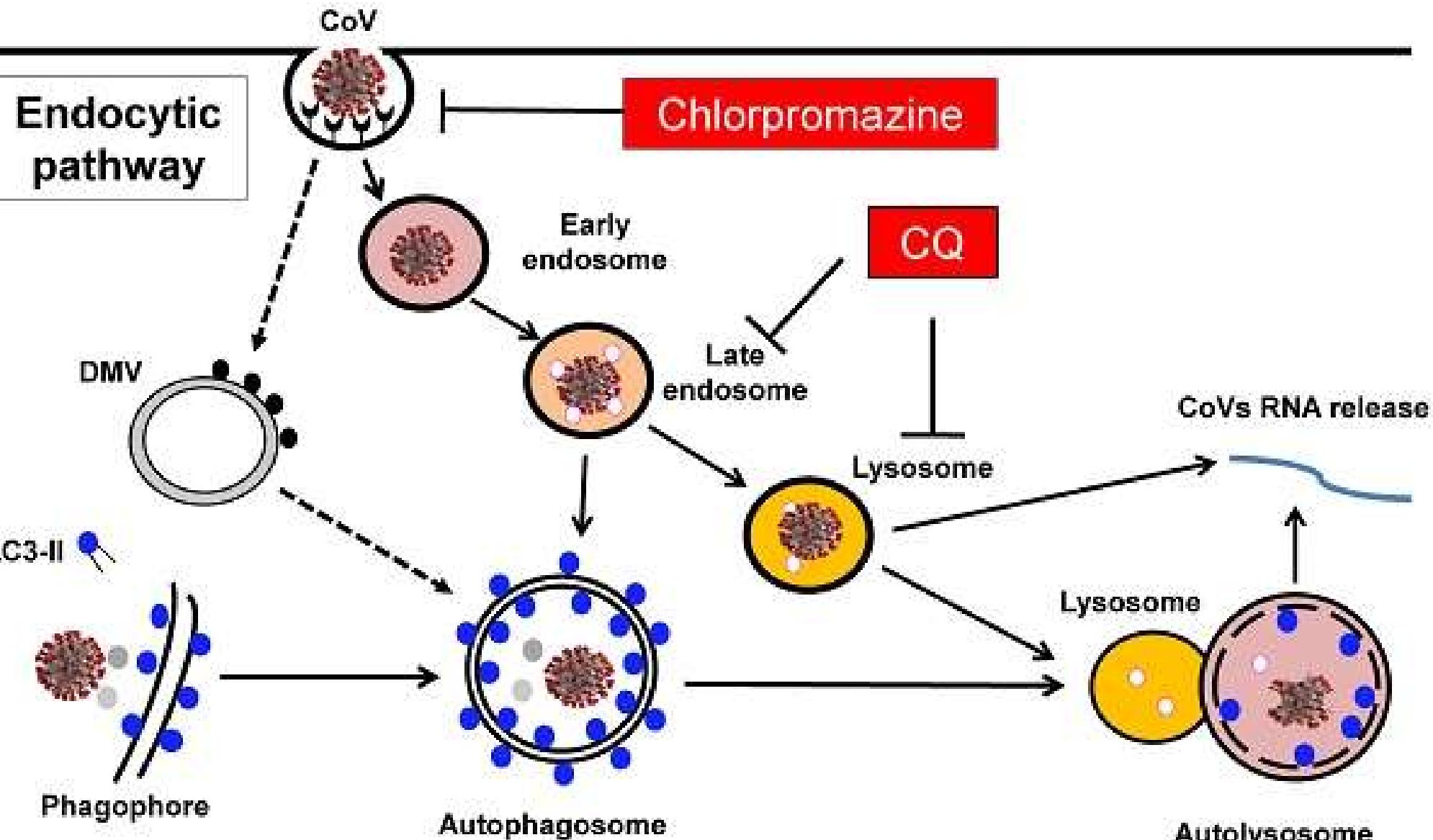
Autophagosome

## Autophagy

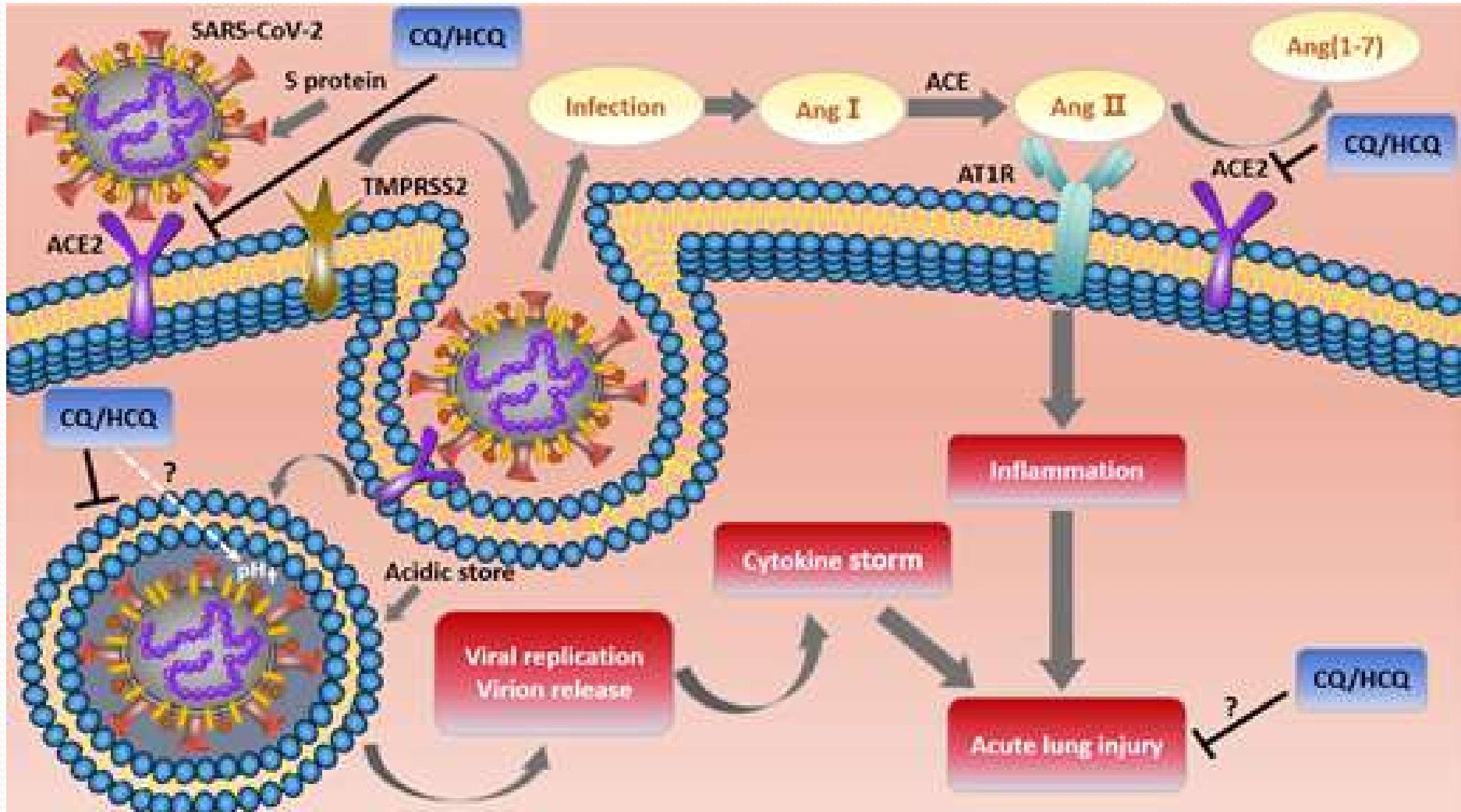
Late endosome

Lysosome

Autolysosome



# How does HCQ / CQ work?



<https://academic.oup.com/function/article/1/2/zqaa012/5876834>)

# ENDOSOMES

- ▶ Endosomes play key roles in the cellular infection cycles of many viruses. Initially implicated in **virus entry**, recent research has demonstrated that endosomes can also be required at other stages in **viral replication**.
- ▶ Endosomes can provide platforms for viral nucleic acid replication and **virus assembly**, or play roles in modulating anti-viral immune responses.
- ▶ **Viruses exploit various attributes of endosomes such as the low luminal pH**, unique trafficking properties, cellular location and composition. In turn, viruses have become remarkable tools for analyzing endosome function.

# VIRAL PATHWAYS MECHANISM

- ▶ Since the analogs have interesting biochemical properties, these drugs are found to be effective against a wide variety of viral infections.
- ▶ Shown to inhibit **acidification of endosome** during the events of replication and infection.
- ▶ **Immunomodulatory** effects of analogs have been beneficial to patients with severe **inflammatory complications** of several viral diseases.
- ▶ One of the successful targeting strategies is the **inhibition of HIV replication** by the analogs in vitro which are being tested in several clinical trials. This review focuses on the potentialities of chloroquine analogs for the treatment of **endosomal low pH dependent emerging viral diseases.**

# What do other doctors say?

Dr. Simone Gold, MD - Prophylactic HCQ protocol:

- Hydroxychloroquine 400 mg. twice a day on the first day + elemental zinc 50 mg. daily then
- Hydroxychloroquine 400 mg. weekly + zinc 50 mg. daily

Dr. Teryn Clark, MD - Wellness protocol:

- Quercetin 500 mg twice daily
- Zinc 50 mg daily
- Vitamin D 2000 IU daily
- Melatonin 3-6mg nightly

<https://www.americasfrontlinedoctors.com/treatment-protocols/>



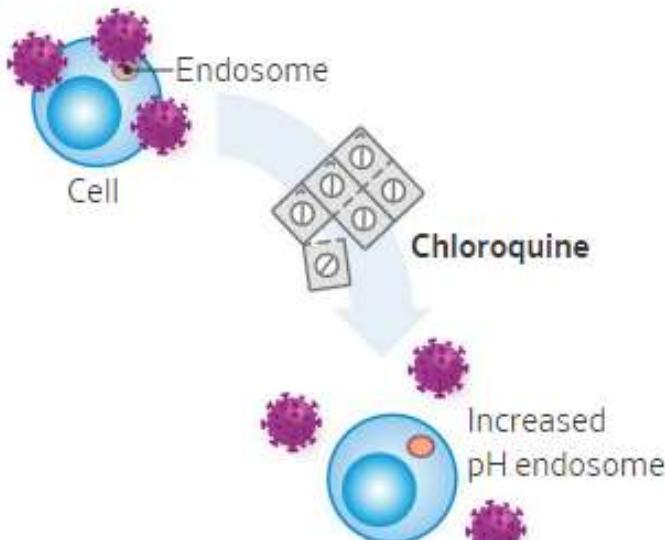
Dr. Dietrich Klinghardt, MD, PhD also suggests the above lists and:

Vitamin D, Propolis spray, Calendula, Liquorice, Skullcap, Rosemary, Andrographis, Artemisinin, Dandelion

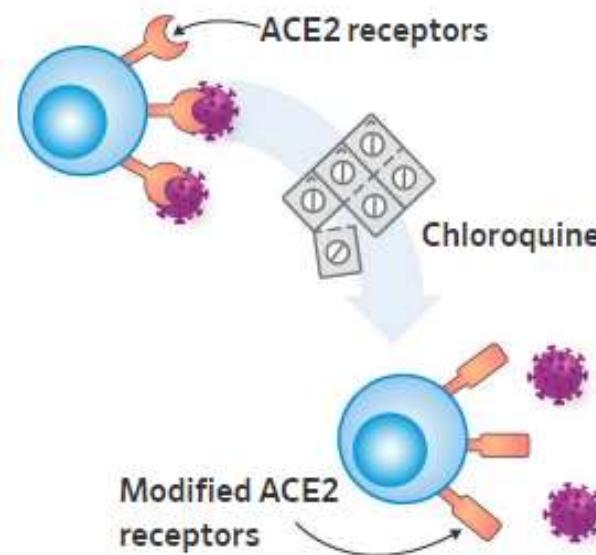
<https://klinghardtinstitute.com/wp-content/uploads/2020/03/Dr-Klinghardt-Corona-2020-UK-19th-March-2020.pdf>

# How does chloroquine work?

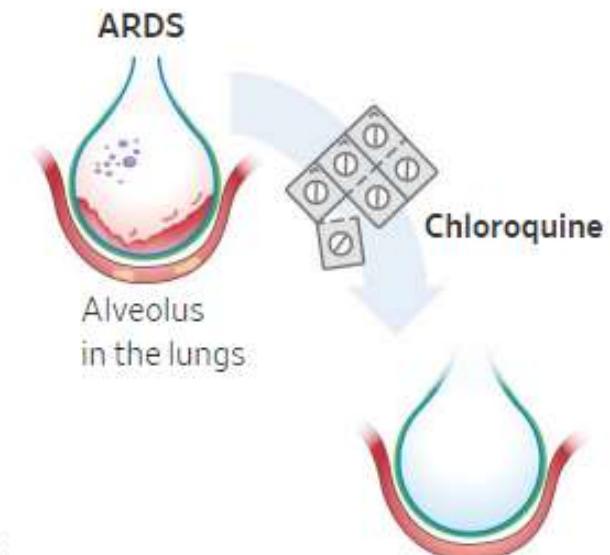
- 1 The drugs make it harder for the virus to fuse with the host cell.



- 2 The drugs keep the virus from binding with cell receptors that connect with the coronavirus.

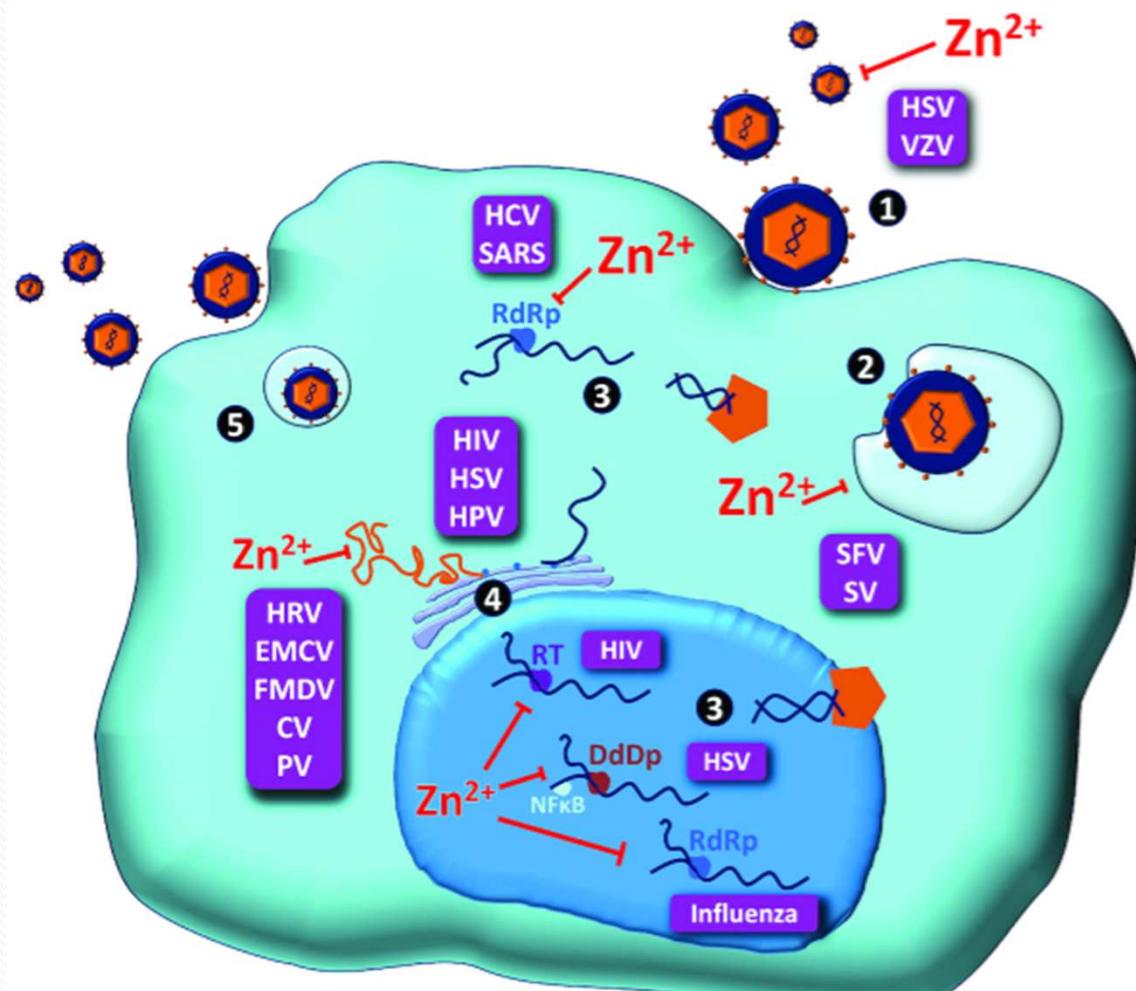


- 3 The drugs, which are immunosuppressants, may reduce the fluid that builds up in lungs, a condition known as ARDS.



Source: British Pharmacological Society; Matthew Might, University of Alabama at Birmingham

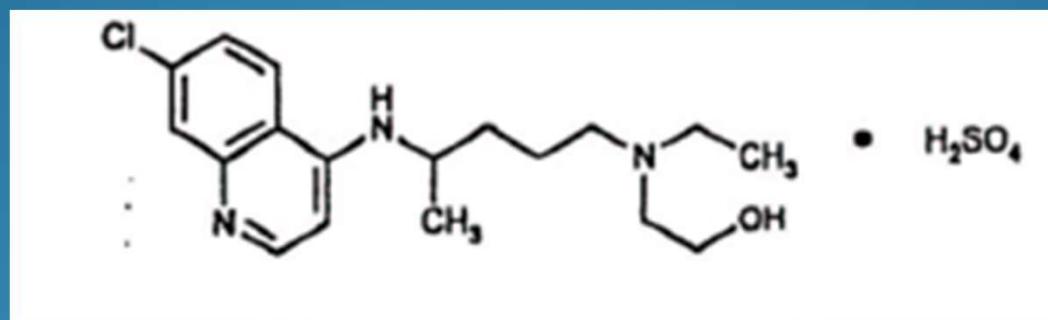
# HCQ / CQ acts as a zinc ionophore



# Chloroquine is a Zinc ionophore

- “Free zinc ions are more concentrated in the lysosomes after addition of chloroquine, which is consistent with previous reports showing that **chloroquine inhibits lysosome function**. The combination of chloroquine with **zinc enhanced chloroquine's cytotoxicity** and induced apoptosis in A2780 cells. Thus chloroquine is a zinc ionophore.”
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4182877/>
- The main **function of lysosomes** is to help with cell metabolism by ingesting and dissolving unwanted parts of the cell, cell debris, or foreign substances that have entered the cell.
- A **zinc ionophore** is a chemical which carries zinc ions through the cell membrane. Elemental zinc cannot pass through the cell membrane on its own. Once zinc is inside the cell, it can inhibit the RNA polymerase activity of coronaviruses, i.e. it blocks viral replication.

# Data on HCQ/CQ



# S. Korea and China used chloroquine

- March 13, 2020
- “Recent guidelines from South Korea and China report that chloroquine is an effective antiviral therapeutic treatment against Coronavirus disease 2019. The use of chloroquine (in tablet form) is showing favorable outcomes in humans infected with Coronavirus, including faster recovery times and a shorter hospital stay.”

## An effective treatment for coronavirus (COVID-19)

- Presented by: James M. Todaro, MD (Columbia MD, jtodaro2@gmail.com) and Gregory J. Rigano, Esq. (Grigano1@jhu.edu)
- In consultation with researchers from Stanford University School of Medicine, UAB School of Medicine and the National Academy of Sciences.
- [https://docs.google.com/document/d/e/2PACX-1vSjPNh\\_WX6FXUIE3OaA3ScsW7yIH3-SpZyYzElNQUNuJvDmD9eFzM29mVXeaYRY-rjGv52wkrZNa7tb/pub](https://docs.google.com/document/d/e/2PACX-1vSjPNh_WX6FXUIE3OaA3ScsW7yIH3-SpZyYzElNQUNuJvDmD9eFzM29mVXeaYRY-rjGv52wkrZNa7tb/pub)

## Clinical study of HCQ + Azithromycin

- International Journal of Antimicrobial Agents
- June 30, 2020
- “Our survey shows that hydroxychloroquine treatment is significantly associated with viral load reduction/disappearance in COVID-19 patients and its effect is reinforced by azithromycin.”
- 100% of patients that received a combination of HCQ and Azithromycin tested negative and were virologically cured within 6 days of treatment.
- Azithromycin added to HCQ was significantly more efficient for virus elimination
- <https://www.sciencedirect.com/science/article/abs/pii/S0924857920300996?via%3Dihub>

# Hydroxychloroquine

European Journal of Clinical Microbiology & Infectious Disease, June 2020:

- “In a preliminary clinical study, we observed that the combination of hydroxychloroquine and azithromycin was effective against SARS-CoV-2 by shortening the duration of viral load in Covid-19 patients.”

<https://pubmed.ncbi.nlm.nih.gov/32342252/>

The Lancet, Nov. 5, 2020:

- “Hydroxychloroquine has been shown to inhibit entry of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) into epithelial cells in vitro.”

<https://www.thelancet.com/journals/lanrhe/article/PIIS2665-9913%2820%2930378-7/fulltext>

# Problems with most HCQ studies:

- Huge, toxic doses given
- No Zinc is given
- The combination is given to patients too late, i.e. after the cytokine storm has begun
- Issues with data collection

# HCQ + Azithromycin + Zinc:

## Outcomes in hospitalized Covid-19 patients

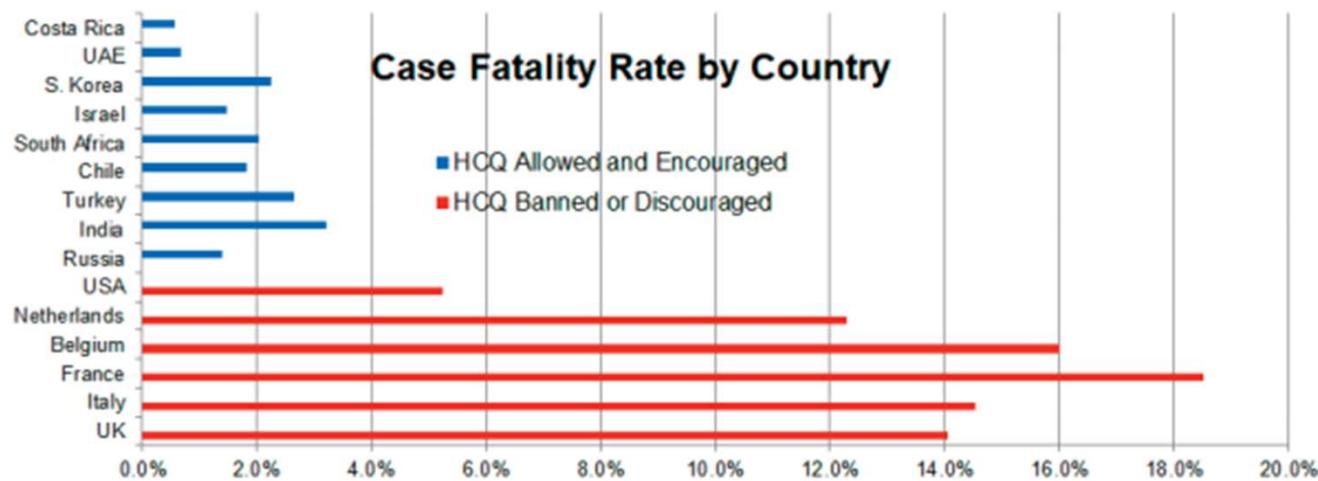
- May 8, 2020
- “Zinc sulfate increased the frequency of patients being discharged home, and decreased the need for ventilation, admission to the ICU, and mortality or transfer to hospice for patients who were never admitted to the ICU.”
- NYU Grossman School of Medicine

<https://www.medrxiv.org/content/10.1101/2020.05.02.20080036v1.full.pdf>

This further confirms the theory that the combination of HCQ and Zn has an antiviral effect. Antiviral medications work by **blocking the replication of viruses**. Once the cytokine storm begins, and the virus has reached its peak in an individual, antiviral medications are useless.

# HCQ

- Countries where HCQ is widely available, which are typically third world countries that have malaria or citizens who travel to malaria-endemic regions, have 1-10% of the death rates of first world nations where HCQ is severely restricted.
- HCQ availability correlates with COVID-19 death rates. We see this across the world and amongst USA states.
- A typical headline from the Washington Post April 6, 2020 was that Africa was going to be decimated by this virus. “Coronavirus presents a crisis for Africa” and per the UN: “Pandemic crisis may kill up to 3.3 million Africans.” (It is 1-2% of that.)
- Contrary to expert predictions and media headlines, the lowest death rates from COVID-19 are in the poorest countries with no masking, no social distancing, limited medical care, no ICUs ... but with easy access to hydroxychloroquine/chloroquine.



There is a dramatic difference in saving lives in countries allowing early and prophylactic use of hydroxychloroquine compared with the United States:

<b>Country</b>	<b>HCQ Policy</b>	<b>Mortality rate per COVID-19 case</b>	<b>COVID-19 deaths per 1M population</b>
U.K.	HCQ is discouraged and mostly unavailable	14%	628
Italy	HCQ's value was not known for the many initial casualties	14.5%	573
France	HCQ is officially disfavored	18.5%	454
U.S.A.	FDA interferes with access to HCQ	5.2%	370
Russia	HCQ is encouraged	1.4%	56
India	HCQ is used prophylactically	3.2%	10
Turkey	HCQ is used as early treatment	2.6%	59
Israel	HCQ is encouraged	1.5%	33
South Korea	HCQ is encouraged	2.3%	5

<https://aapsonline.org/judicial/aaps-v-fda-hcq-6-22-2020.pdf>

# Observational Study on 255 Mechanically Ventilated Covid Patients at the Beginning of the USA Pandemic, May 31, 2021

- The study showed that hydroxychloroquine, combined with zinc, increased the survival rate of severely ill Covid-19 patients by **200 percent**.
- Doses used = 80 mg/kg of HCQ with > 1 gm AZM

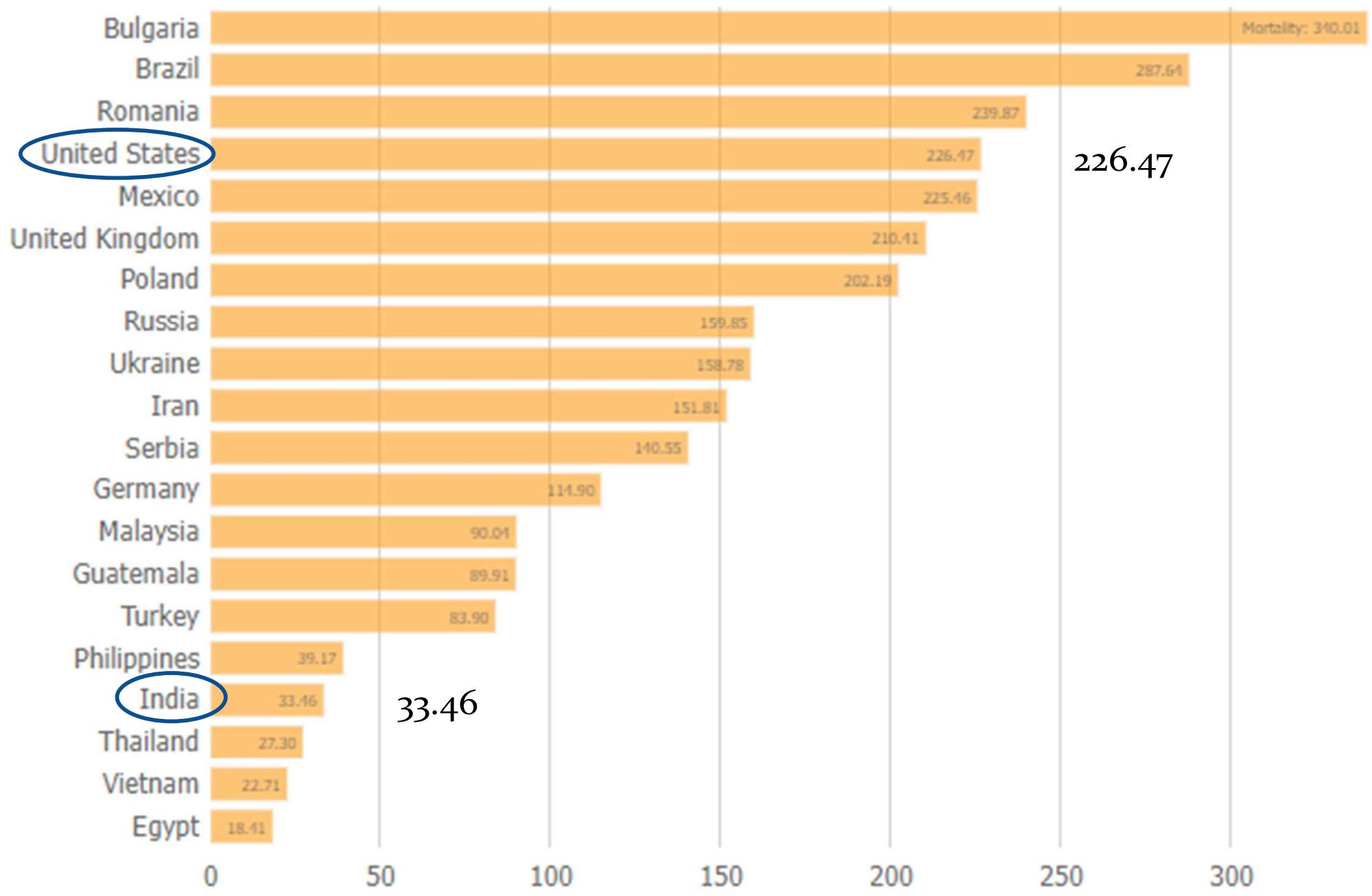
# Cases/Deaths USA vs India

#	Country, Other	Total Cases	New Cases	Total Deaths	New Deaths	Total Recovered	New Recovered	Active Cases
	World	246,704,702	+446,912	5,003,590	+7,268	223,478,936	+331,439	18,222,176
1	<a href="#">USA</a>	46,755,750	+64,786	765,539	+1,404	36,621,867	+55,919	9,368,344
2	<a href="#">India</a>	34,259,690	+14,160	457,772	+551	33,632,999	+13,057	168,919
38	<a href="#">China</a>	97,002	+64	4,636		91,665	+22	701

- USA population: **333,602,569**
- India population: **1,398,320,026** (6:02pm 10/29/21)
- China population: **1,439,323,776**

## Observed case-fatality ratio

## Deaths per 100,000 population



# PROTEOLYTIC ENZYMES – Goldmine #2

Fight viruses in 3 ways:

1. The overproduction of fibrin from chronic inflammation caused by environmental toxins and highly processed foods can, over time, block blood flow and trap red blood cells, preventing oxygen from reaching tissues and waste from being removed. **Proteolytic enzymes dissolve excess fibrin** and are the body's only defense against fibrin. The body's own production of proteolytic enzymes drastically decreases after age 27. DOI: 10.3390/biom3040923
2. **Proteolytic enzymes help to control inflammatory processes** by lowering elevated inflammatory markers and boost many components of the immune system to fight infections.  
<http://dx.doi.org/10.4236/aer.2015.31001>
3. The outer protein coating on a virus, the capsid, protects the virus and helps it to attach to a host cell and multiply. Viruses also have protein spikes that extend from their outer layer to help the virus infect new cells. **Proteolytic enzymes have a cleaving effect on the capsid as well as the protein spike** thus able to break them down. DOI: 10.36478/jeasci.2018.3125.3130

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7501082/>

# ULTIMATE PROTOCOL

- **Vitamin D:** Bio-D-Mulsion, Bio-D-Mulsion Forte, Bio-DK Caps, Bio-DK-Mulsion
- **Proteolytic Enzymes:** Intenzyme Forte, Bromelain Plus CLA, Bromelain Plus
- **QUININE, HCQ**
- **Vitamin C:** Bio-C Plus, Bio-C Plus 1000
- **Zinc:** Zn-Zyme, Zn-Zyme Forte, Aqueous Zinc
- **Quercetin:** Bio-FCTS
- **EGCG:** EGCG-200mg
- **Melatonin:** Melatonin-B6/Mg, Alpha-Theta Ultra PM
- **Curcumin:** CurcumRx, KappArest
- **Dysbiocide – anti-dysbiotic**
- **FC-Cidal –** herbal antimicrobial, antiviral formula
- **Immune Support Packs –** comprehensive support for natural immune response