Blaze Media / Op-ed

Horowitz: Now we know why the establishment has always opposed early treatment

DANIEL HOROWITZ | December 13, 2021

RapidEye/Getty Images

The shots don't work for many people, particularly the elderly. The establishment is blocking every other treatment option available. At this point, with so many people recovering even from late-stage COVID by taking ivermectin, which is infinitely safer than the shots, how could anyone ascribe anything other than very sinister motivations to those declaring war on its use?

The shills for Big Pharma and the "Great Reset" who don't want to see people survive this virus claim they don't have enough data on ivermectin, despite dozens of studies and simple reality showing that it works better than anything they have suggested. They demand massive randomized controlled trials, but then refuse to fund any such expensive study. They refuse to follow up on positive signals with off-patent therapeutics the same way they blithely ignore negative signals from the vaccines and refuse to follow up with investigative studies. Well, Brazilian researchers just published something better than a randomized controlled trial. They did a study of reality.

Everyone in the entire southern Brazilian city of Itajai was invited to participate in a preventive study of ivermectin for efficacy against severe COVID-19 symptoms. 133,051 (60.3%) volunteered to take ivermectin for two days every 15-day period between July and December 2020 at a low dose of 0.2mg per kilogram of body weight. 87,466 (39.7%) chose to enroll their information as the control group without taking the treatment. So no complaints can be made about a small sample size. The results? The hospitalization and mortality rate of the trial group was nearly half that of the control group!

However, the results are much
suggest. One of the complaints
randomized is that it's possible
individuals to sign up for the tr
conclusion of the trial results.
ivermectin group had nearly tw
which also included many mo
and pulmonary issues. Thus, the relative risk reduction in mortality rate

among those high-risk people taking ivermectin was actually much h 71% among those with type 2 diabetes and 67% among those with hypertension. The absolute risk reduction was also even greater among older people who are most at risk.

The overall effect on the city's population was remarkable. The COVID-19 hospitalization rate decreased from 6.8% before the program with preventive use of ivermectin, to just 1.8% after its beginning (73% reduction). The mortality rate also dropped by 59%, from 3.4% to 1.4%. Most astounding is where the city of Itajai ranked relative to others in the state of Santa Catarina:

"When compared to all other major cities in the State of Santa Catarina, where Itajaí is located, differences in COVID-19 mortality rate between before July 7, 2020 and between July 7, 2020 and December 21, 2020, Itajaí is ranked number one, and far from the second place," observed the Brazilian researchers in the study manuscript. "These results indicate that medical based optional prescription, citywide covered ivermectin can have a positive impact in the healthcare system."

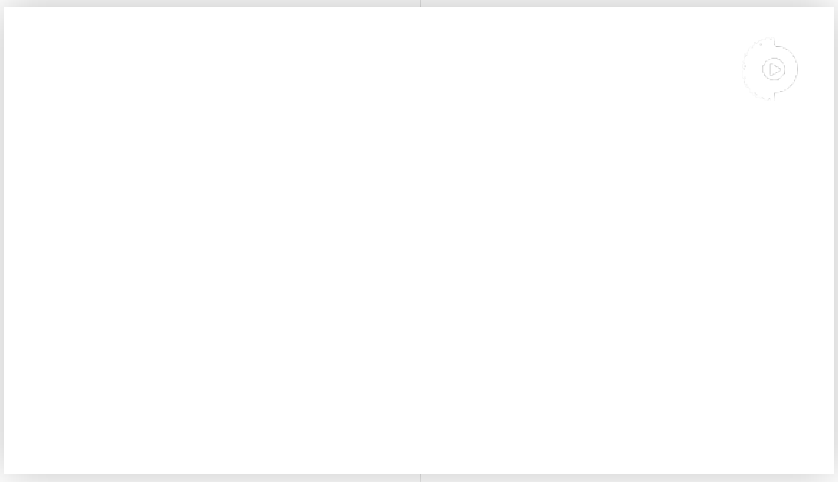
In many respects, this is more illuminating than a standard randomized controlled clinical trial. If we actually want to project what the world would look like if everyone would take ivermectin, this is a perfect case study of an entire city and its effect on the hospitals. Contrast these results to the vaccines, where we are seeing no correlation between outcomes and vaccination rates by geography trials purported to show an un mortality.

Also, another key issue is dosage. FLCCC recommends 0.4-0.6mgs per kilogram of weight, which is 2-3 times the dose used in the trial. Obviously, this was a preventive trial only used for two straight days, but then rather than taking it every week, there was a 15-day gap before the next dose. One has to wonder what the results would be if each one in the trial group ramped up the dosage to 0.4mg every day for five days once they contracted the virus, or at least took the 0.2mg preventive dose twice *every week*.

Even the most effective drugs need a minimum dose. Ivermectin has demonstrated a strong dose-response relationship in terms of viral clearance; higher doses have not only been required, but have demonstrated clinical efficacy. While critics claim the dose is too high, cancer trials had patients taking ivermectin at a much higher dose for months without any problems.

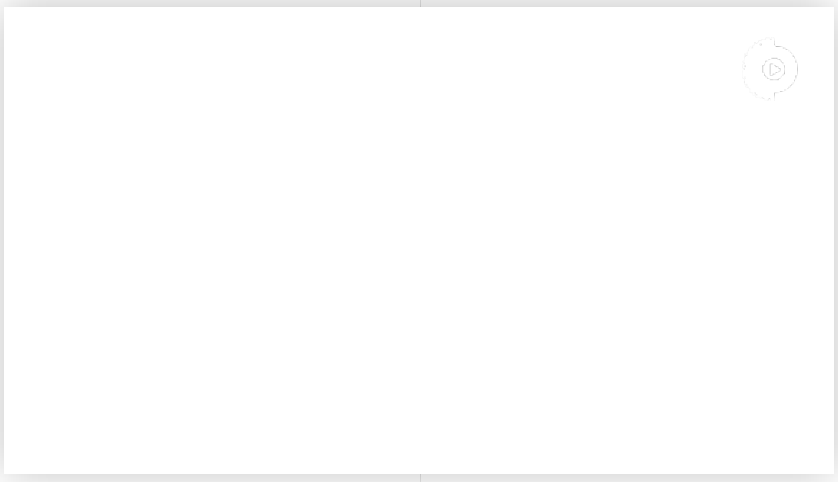
Moreover, like any other virus,
because the virus has multiple
primary doctor treated patient
drugs, along with the appropri
patients at the early stage of di
Betadine nasal rinse, hydroxy
proven therapeutics from day
much money, marketing, and

antibodies as it did the unsafe and ineffective shots.



In a recent presentation, Pr. Million from IHU Marseille has presented their first numbers of Covid mortality by age group in 2021.\n\nHe has highlighted the improved 2021 mortality where patients did not get HCQ+AZ, which he attributed to the discreet introduction of Ivermectin.pic.twitter.com/EOg1JObQKr

— Covid19Crusher (@Covid19Crusher) 1639383575



Well, we already see from doctors in the U.S. who have applied this approach, and their reduction in mortality is near 100%. And all the drugs they use range from safer than over-the-counter medications (in the case of ivermectin) to much safer than anything being administered by the hospital systems, such as remdesivir, baricitinib and tofacitinib.

One thing is certain: Ivermectin is much safer than anything the medical establishment is using, and there definitely is a degree of efficacy. So why would it face such visceral opposition? Had the medical establishment merely talked down its efficacy to a degree, I would probably believe it. But now that they are treating this Nobel Prize-winning drug as if it's heroin, it actually would appear that it's super effective. During a pandemic, the FDA is now using resources to collaborate with the post office to hold packages of ivermectin from being delivered.

The FDA is working with the post office to hold packages containing ivermectin. The FDA could better use its resources to, I don\u2019t know, publicly release the docs submitted by Pfizer to license its mandated liability-free V earlier than 75 years from now! http://bit.ly /3oMU53S\u00a0pic.twitter.com/O2d1zgTjAB

— Aaron Siri (@Aaron Siri) 1639353779

Last week, the World Tribune published an article revealing informa
that indicates the WHO likely knew ivermectin was effective for mont
blocked its use, all for Big Pharma. Dr. Andrew Hill, a senior visiting research fellow in pharmacology at Liverpool University, adviser to the Gates Foundation, and researcher for the WHO, was tasked with conducting an ivermectin trial for the WHO. Based on his preliminary findings, Hill testified enthusiastically about the use of ivermectin before the NIH COVID-19 Treatment Guidelines Panel on Jan. 6, 2021. But then he suddenly changed course and published a study dinging the drug's efficacy against COVID.

According to the Tribune, Dr. Tess Lawrie, director of the Evidence-based Medicine Consultancy in Bath, England, who was also involved in the ivermectin research, recorded a Zoom call she had with Hill and revealed a remarkable exchange between the two of them.

> *In a remarkable exchange, Hill admitted his manipulated study would likely delay the uptake of ivermectin in the UK and United States, but said he hoped his doing so would only set the lifesaving drug's acceptance back by about "six weeks," after which he was willing to give his support for its use. […]*
>
> *Four days before publication, Hill's sponsor Unitaid gave the University of Liverpool, Hill's employer $40 million. Unitaid, it turns out, was also an aut*
>
> *In the call, Lawrie berate*
> *properly put together," an*
> *Hill appears not to have d*
>
> *Instead, when pressed he*
> *unacknowledged author*

> *"Unitaid has a say in the conclusions of the paper. Yeah," he told Lawrie.*

The exact exchange on the Zoom call, according to the Tribune, went as follows:

> *Lawrie: I really, really wish, and you've explained quite clearly to me, in both what you've been saying and in your body language that you're not entirely comfortable with your conclusions, and that you're in a tricky position because of whatever influence people are having on you, and including the people who have paid you and who have basically written that conclusion for you.*
>
> *Hill: You've just got to understand I'm in a difficult position. I'm trying to steer a middle ground and it's extremely hard.*

Now, imagine the difficult position that millions of people found themselves in when they were denied access to this treatment early, and many more, even on a ventilator. Imagine how many other promising treatments we know about (and possibly ones we don't) because research was squelched in order to deny the public a cheap and effective way around the false choice the establishment has created – either confront the bio-weapon virus without treatment or take their bio-weapon injection as the panacea?

It's not too late for red-state go
mistake by barring all punitive
FDA-approved drugs off label a
those prescriptions. Hospitals
administer the drug when they
paraphrase John Kerry about t
the last man to die for a lie?

Most recent

AOC inaccurately claims that she represents 'as many or more people than Joe Manchin'

27m

Mariah Carey says Mary mother of Jesus is 'Queen of Christmas'

52m

California man dies after paramedics refused to enter care facility, citing COVID restrictions

1h

ALL ARTICLES

Recommended

Woman says she was virtually 'groped' in Facebook's VR metaverse, investigation launched

19h

Joe Biden will issue 'stark warning' to unvaccinated Americans in national address on Omicron variant

19
December

Tech company develops microchip implanted in the body that stores a COVID-19 vaccine passport so it's 'always accessible'

23h

Dem senator claims he didn't know event he attended was linked to Communist Party — but video suggests otherwise

19
December

Another progressive city sorely regrets its 'defund the police' efforts — even the council member who proposed the effort admits things are not going as planned

8h

'Devastating for the planet': White House, liberals meltdown after Joe Manchin officially kills Biden's social spending agenda

19
December

Dr. Fauci predicts face mask requirements on airplanes will never go away: 'We should be doing it'

19
December

NIH Director Francis Collins told Anthony Fauci there needs to be a 'quick and devastating' takedown of anti-lockdown declaration by 'fringe' Harvard, Stanford, Oxford epidemiologists: Emails

18
December

ALL ARTICLES