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Useful and banned

One drug may help defeat coronavirus — and it cannot be prescribed in Australia



ANDREW BOLT

f all the coronavirus bans, the most lunatic is the one on a cheap drug that could save your life.

How many Australians might now die because Victorian doctors are banned from prescribing hydroxychloroquine, listed now as a "poison"? How many Australians might die because the Morrison government's National COVID-19

Clinical Evidence Taskforce tells doctors to "not use hydroxychloroquine for the treatment of COVID-19", claiming it doesn't work and could instead kill?

How gleefully the media Left jumped on that. As the Trumphating Sydney Morning Herald gloated: "US President Donald Trump called hydroxychloroquine a 'game changer' in March and said he had been taking it ...

"But since then, the tide of scientific opinion has turned against the drug."

That, I fear, explains this war against hydroxychloroquine, a



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popular antimalarial drug. Trump recommended it! We can't let this monster be right!

But let's check this Taskforce's call, because something smells.

It declares: "Evidence indicates that hydroxychloroquine is potentially harmful and no more effective than standard care in treating patients with COVID-19.

"Evidence informing this recommendation comes from nine randomised trials."

So I looked up those trials, of more than 70 studies this Task-

force could have considered. And, my God. Are these experts stupid?

Not one of those nine trials included real-world studies saying hydroxychloroquine worked, like a recent one by the US Henry Ford Health System, which claimed it cut the death rate by half.

More crucially, every single one failed to include a crucial element. Not one studied hydroxychloroquine in combination with zinc.

That's bizarre, because prominent advocates of hydroxychloroquine such as Harvey Risch, professor of epidemiology at the Yale School of Public Health, have argued that hydroxychloroquine — used with zinc and given to patients very early in their sickness, before their immune system overreacts — is "the key to defeating this virus".

Yes, hydroxychloroquine alone is said by some studies to help to stop coronavirus, by coating receptors, but it apparently works best with zinc.

A study from the Oklahoma University Health Sciences Center claims hydroxychloroquine is a "zinc ianophore" — a key that opens the virus and lets in the zinc, which stops the virus from replicating.

There is another interesting corroboration. Professor Thomas Borody, one of the genii who developed the world's first cure for peptic ulcers, is touting another low-cost "cure" for COVID-19 — invermectin, a treatment for head lice.

But Borody says invermectin, too, must be used with zinc.

Still, no Big Pharma company is going to earn billions from studying or promoting cheap generic drugs like hydroxychloroquine or invermectin.

At least the Taskforce did not rely on the Lancet study which claimed the records of 100,000 patients showed hydroxychloroquine was not just useless but could kill the sick.

In fact, those patient records were soon exposed as fake, in what Lancet's hoodwinked editor denounced as a "monumental fraud".

But the Taskforce did rely heavily on Britain's "Recovery" trial — the biggest of its nine studies — which

likewise claimed hydroxychloroquine had "no beneficial effect", and was actually more likely to kill patients.

No damn wonder!

That Recovery study did not merely omit zinc. It also gave its frail patients massive overdoses.

The recommended dose is between 200 and 400mg. This trial gave patients 2400mg of a drug that can cause heart trouble.

Yet this is one of the studies that the Morrison government's Taskforce claims shows why you can't take hydroxychloroquine, even if your doctor thinks it could save your life.



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