

Ivermectin – attempting an update

by Sabine Vuilleumier, M.D.

In April 2020, Australian scientists found that ivermectin, a drug on the “World Health Organisation” (WHO) essential medicines list, virtually halts the replication of Sars-CoV-2 coronaviruses in a test tube within 48 hours.¹ – In mainstream media, one hears nothing of the positive research results published since then in the prophylactic and therapeutic use of ivermectin in combination with other beneficial drugs for Covid-19.

There are increasing voices that the Omicron virus variant is very likely to be “the beginning of the end” of the pandemic. People in all countries of the world are breathing a sigh of relief and seeing the silver lining of a return to normality on the horizon. But at the same time, there are warnings of new “possibly” more dangerous variants – the fear level is kept high.

Emergency plan to be drawn up

The daily newspaper BLICK of the Ringier Group, known for its closeness to the national government, wrote on 9 January 2022 that the Swiss Confederation was working on an “emergency plan”. It was preparing itself against virus variants that would circumvent the vaccination protection and had commissioned the external company *Ecoplan* with a budget of 150 000 francs. The emergency plan, “with which appropriate measures can be taken quickly in an emergency”, should be ready in spring.²

Worldwide largest study on the prophylactic use of ivermectin

On 20 January 2022, Pierre Kory, President of the FLCCC Alliance (see box), presented the evalu-

“Let doctors be doctors!” (FLCCC Alliance)
In the USA, critical care specialists and researchers of the non-profit organisation *Front Line Covid-19 Critical Care (FLCCC) Alliance* in Washington DC are fighting for the freedom of doctors to treat their patients as they see fit based on their experience and knowledge – until now a matter of course! Weekly they inform about new findings on their website in the “FLCCC Weekly update”.³ They emphasise that neither the government nor large health organisations or others are allowed to interfere in the “sacred patient-doctor relationship”.

ation of the world’s largest study on ivermectin as prophylaxis against Covid-19:

In the city of Itajai in the Brazilian state of Santa Catarina, all residents were informed about the possibility of participating in a prospective observational study. 113 845 people decided to take ivermectin prophylactically. They took the drug every fortnight on two consecutive days at 0.2 mg/kg body weight each; 45 716 refused to take it. In the observation period from July to December 2020 – vaccinations were not yet available at that time – 3.7% of the evaluated subjects in the first group became infected, and 6.6% in the second. The number of hospitalisations was reduced by 67% in the first group compared to the second, and the death rate by 68%.⁴

According to this study, a strategy to “fight the Corona virus” without at least testing ivermectin in combination with other low-cost drugs becomes implausible. Doctors in practice urgently need treatment options so that they do not have to have their practice assistant tell the patient who has tested positive, “stay at home and if your symptoms worsen, call an ambu-



Doctors and scientists from the “FLCCC Alliance” have weekly discussions on new findings for Covid-19 with other experts. (Bild covid19criticalcare.com)

lance ...”– as has often happened in the past two years.

Increase in positive reports and information

Ivermectin has not yet found its way into the strategies of European countries to protect the health of the population. WHO, *Food and Drug Administration* (FDA), *European Medicines Agency* (EMA) and the *Swiss Agency for Therapeutic Products Swissmedic* are against its use in the treatment of Covid patients.

And this despite the fact that the positive reports and information are constantly increasing. More and more people are therefore ordering ivermectin over the Internet from abroad, despite the risks involved. Swissmedic saw it fit to publish the following inappropriate warning on 2 November 2021: “It is being disseminated, particularly via online channels, that the deworming agent ivermectin can reliably prevent or cure Covid-19 disease. Currently, Swissmedic has no scientific evidence on this.” – This can hardly be Swissmedic’s last word on ivermectin ...

On 24/25 April 2021, the online conference “The First International Ivermectin for Covid Conference” took place. A global team of experts presented study results “on the repurposing of this safe drug that can transform global pandemic response efforts.” (“... on repurposing this safe drug that has the ability to transform global efforts to fight the pandemic”).⁵ – What could we read about it in our media?

Swiss Policy Research – a research and information project on geopolitical propaganda in national and international media – has analysed the debate on ivermectin with its contradictory study results and concludes at the end of 2021: “even if ivermectin were only 10% effective in preventing deaths, one million people could have been saved to this day!”⁶

Comprehensive information for prophylaxis and treatment

The doctors of the *FLCCC Alliance* strongly advocate the use of ivermectin in prophylaxis and treatment. Worldwide research findings⁷ also prompted them to include ivermectin in their treatment protocols as early as October 2020. These protocols – published in various languages on their homepage – are continuously adapted to new developments.⁸

In addition to information on ivermectin and other medications, the FLCCC Alliance recom-

mendations also include information on the use of agents that contribute to a general strengthening of the immune system. Like countless other health professionals who are concerned about protecting the health of individuals, they provide information on their homepage about the dosage of vitamin D3, vitamin C, zinc, flavonoids such as quercetin and other substances.

However, they always emphasise that their information does not replace personal medical advice in individual cases.

“Irregular actions and disinformation campaign”

The question of why ivermectin was not included in a favourable drug combination in the fight against the pandemic is becoming increasingly urgent.

On 31 March 2021, the WHO issued a recommendation against its use in Covid patients. The FLCCC Alliance doctors and researchers investigated in detail the basis for this negative recommendation. On 12 May 2021, they published the revealing “FLCCC Alliance statement on the irregular actions of health authorities and the widespread disinformation campaign against ivermectin”.

Their conclusions are clear: “disturbingly, after detailed analysis of the recent WHO ivermectin recommendation, we have been unable to find any credible scientific justification for the numerous irregular, arbitrary and inconsistent behaviours documented (above). Furthermore, after consulting with numerous physicians, guideline reviewers, legal experts and experienced PHA [public health agencies] scientists, we have identified two major socio-political-economic forces that are the main obstacle to the inclusion of ivermectin in public health policies in large parts of the world. These forces are:

1. the modern structure and function of what we call ‘Big Science’; and
2. the presence of an active ‘political-economic disinformation campaign’.”⁹

The explanations of the terms “Big Science” and “political-economic disinformation campaign” are very revealing, but can only be hinted at here. They bring to the fore the problems of modern medical research with its ever closer interconnectedness between “Big Pharma”, “Big PHA’s”, “Big Journals” (medical journals), “Big Media” and “Big Social Media”.

Vaccinations

Without taking into account what was already known at the time about the prophylactic and therapeutic potential of ivermectin, the mRNA vaccines from *BionTech/Pfizer* and *Moderna* were given *temporary* approval in December 2020 as the most promising strategy to combat the *Sars-CoV-2* virus (also in Switzerland). Later, the vector vaccine from *Janssen* was added.

On 19 January 2022, 90.64% of people over 65 and 77.32% of people over 12 in Switzerland were fully vaccinated. – A favourable drug combination therapy for prophylaxis and early treatment was not considered.

With the mRNA vaccines, the body is stimulated by the injection of a section of the genetic material of the virus to produce part of the virus itself and then to form a defence against it. This provides extensive protection against a severe course of Covid-19.

Since it later turned out that the antibodies formed are already at a low level again after about four months, booster vaccinations are currently being carried out with the same vaccines; more than half of the vaccinated persons have already received a third vaccination, known as “booster”. According to a recent WHO communication, this strategy has proven to be “probably neither appropriate nor sustainable” (see below).

New vaccines searched-for

The hitherto preferred strategy of vaccination and booster shots with mRNA vaccines is coming under increasing pressure. It is becoming increasingly clear that vaccination as the only mainstay is insufficient. The vaccines used so far do not meet the requirements for effective, long-lasting protection against infection.

On 11 January 2022, the *World Health Organization* published the following statement: “[...] a vaccination strategy based on repeated booster doses of the original vaccine composition is unlikely to be appropriate or sustainable.”

The WHO calls for “new vaccines that protect the vaccinated against infection and against transmission of the virus.” This corresponds to the definition of a vaccination officially valid until 2 September 2021. It goes on to write that this would allow serious public health and social measures to be scaled back. In addition, the new vaccines should provide broad, strong and long-lasting immunity to reduce the need for booster vaccinations.¹⁰

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Safety of Ivermectin

Standard doses of ivermectin (0.2 mg/kg x 1–2 days) have a nearly unparalleled safety profile historically among medicines as evidenced by the following findings:

- **WHO Guidelines for Scabies:** “the majority of side effects are minor and transient”
- **Prof Jacques Descotes, Toxicologist, Expert on Safety of Ivermectin:** “severe adverse events are unequivocally and exceedingly rare”
- **LiverTox Database:** Not considered toxic to the liver
- **Nephrotox Database:** Not considered toxic to the kidney
- **PneumoTox:** Not considered toxic to the lungs

*The safety of ivermectin has been proven.
(Bild covid19criticalcare.com)*

It is known that, in addition to the mRNA vaccines used so far, various inactivated vaccines have already been developed and are being used worldwide against Covid-19. They mostly consist of killed pathogens that trigger an immune reaction of the body. Representatives of this type of vaccine are those against diphtheria, hepatitis B, polio, whooping cough and tetanus. They have been known for decades and have earned the trust of many people with their good tolerability, good protection against the disease and long-lasting effectiveness.

Conclusion

A Swiss “emergency plan” to provide the greatest possible protection for the population – as apparently commissioned by Federal Councilor *Alain Berset*, *Federal Office of Public Health* (FOPH) – must include the possibility of vaccination with an inactivated vaccine. Likewise, ivermectin in a drug combination for prophylaxis and therapy must be seriously examined.

These measures can make a decisive contribution to bridging the social divides and economic fault lines that have developed over the past two years. Infection rates, illnesses and the transmission of the virus can be contained by the above measures, and longer-term protection can be built up. People can return to a normal life with normal interpersonal relationships and go back to work.

¹ <https://swiss-standpoint.ch/news-detailansicht-de-gesellschaft/ivermectin-ein-vielversprechendes-medikament-in-der-behandlung-von-covid-19.html>

² <https://www.blick.ch/schweiz/bag-engagiert-externe-firma-fuer-notfallplan-bund-ruestet-sich-gegen-neue-virus-varianten-id17130171.html>

³ <https://covid19criticalcare.com/flccc-weekly-updates/>

⁴ <https://flccc.substack.com/p/large-peer-reviewed-research-study>

⁵ <https://bird-group.org/conference-programme/>

⁶ <https://swprs.org/the-ivermectin-debate/>

⁷ <https://ivmmeta.com>

⁸ https://covid19criticalcare.com/wp-content/uploads/2020/12/FLCCC_Alliance-I-MASKplus-Protocol-DEUTSCH.pdf

⁹ [https://covid19criticalcare.com/videos-and-press/flccc-](https://covid19criticalcare.com/videos-and-press/flccc-releases/flccc-alliance-statement-on-the-irregular-acti-)

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¹⁰ [https://www.who.int/news/item/11-01-2022-interim-sta-
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