

NZDSOS

NEW ZEALAND DOCTORS SPEAKING OUT WITH SCIENCE

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Ivermectin and Treatment Suppression in the Spotlight

Despite continued attempts to discredit Ivermectin as an early treatment for Covid-19, studies continue to confirm its effectiveness. A January 2022 study from Brazil looked at prophylactic (preventative) use of low doses of Ivermectin (0.2mg/kg for two days per fortnight) and showed significant reductions in cases of Covid-19, as well as reductions in hospitalisations and deaths from Covid-19.

<https://www.cureus.com/articles/82162-ivermectin-prophylaxis-used-for-covid-19-a-citywide-prospective-observational-study-of-223128-subjects-using-propensity-score-matching>

In the video below, Dr John Campbell analyses this recent study from Brazil.

https://www.youtube.com/watch?v=Gz4adJXLHgA&ab_channel=Dr.JohnCampbell

New information revealing the backstory about the discreditation of Ivermectin as a Covid treatment has also come to light recently. What happens behind the scenes is both fascinating and frightening.

The short version is that the accumulated **evidence in favour of Ivermectin** for both prevention and treatment of Covid 19 was **substantial and unequivocal** by early 2021. Experts examining the scientific evidence were in agreement that this was the case, and were planning to collaborate to attest to this when nefarious intentions intervened.

Due to funding (presumably with strings attached) to Liverpool University, the evidence, and its significance and importance, got manipulated such that the UK Therapeutics Taskforce felt able to say that there was insufficient evidence demonstrating effectiveness of Ivermectin and that more studies were needed. Consequently, it was not approved for use in the UK or in New Zealand.

It is worth taking the time to study the longer version to see who influences what your family doctor tells you. Most NZ doctors themselves are unaware of the vested interests that influenced the advice they gave their patients about Covid-19.

For the back story about how Ivermectin (a **cheap, safe, Nobel prize winning medicine** on the **WHO's list of Essential Medicines**) came to be suppressed as a treatment see this short documentary:

<https://www.oraclefilms.com/alettertoandrewhill>

You can watch the longer interview with Dr Tess Lawrie at this link

<https://thehighwire.com/videos/former-w-h-o-consultant-exposes-takedown-of-ivermectin/>

For an even deeper dive into who was behind the altered narrative and why, have a look at this link and others on the page:

https://philharper.substack.com/p/the-very-unusual-paper-part-1?utm_source=url&s=r

Or watch Phil Harper's interview with Dr Pierre Kory at this link:

<https://rumble.com/vwf4bl-pierre-kory-corruption-in-the-pharmaceutical-industry.html>

A worldwide disinformation campaign was waged in Sept 2021 by the mainstream media, with news stories from around the world reporting that Ivermectin was a veterinary medicine, a horse dewormer, a dangerous drug and that people were mistakenly thinking it might be useful and were overdosing on it, clogging up hospital emergency departments. That is now what most people, including doctors, think about Ivermectin.

The reason for suppression of this effective treatment, and others, is that Emergency Use Authorisation of mRNA vaccines in the USA (and thus the rest of the world) could not be obtained if there were effective treatments. If there effective treatments existed, there was no emergency and the vaccines would have to go through the full clinical trial process that exists to keep people safe.

It is highly likely that **the Pfizer contract** with New Zealand states that effective treatments for Covid 19 must be suppressed by the Government and medical establishment. Unfortunately, this document remains secret and confidential, and the New Zealand public have never had the opportunity to see what the Government signed on our behalf.

One of the interesting phenomena to come out of this 'pandemic' has been the removal of medical decision making from doctors advocating for their individual patients. This doctor-patient relationship has been replaced by Government or Ministry of Health decrees about what can and can't be **said** and what can and what can't be **prescribed** by doctors. This has not happened previously and is something that all New Zealanders should be aware of.

Prior to 2020, doctors in New Zealand were **free to discuss** with their patients whatever they felt may be relevant. They could discuss the risks and benefits of medication or treatments, and could explore what other options may be available. They were obliged to discuss the unknowns or uncertainties of particular treatments.

This changed with the "Guidance" from the MCNZ sent to doctors on 29 April 2021. From that point on doctors were told what they could and couldn't say to their patients regarding Covid-19. They had to follow the Ministry of Health advice, the consensus statements, the single source of truth or face sanctions. There was no place for ill-defined 'anti-vaccination messages'.

Prior to 2020 doctors in New Zealand were also **free to prescribe** off-label medication if they thought it was in the best interests of their patient and if the patient had been fully informed that the medication was being prescribed off-label. This is the use of an approved medication for a condition other than the one it was initially approved for in New Zealand. It is a common practice e.g. quetiapine (which is an anti-psychotic medication) is frequently prescribed for anxiety and insomnia including in teenagers.

What happened with hydroxychloroquine shows a process similar to that with Ivermectin, a process to discredit the effectiveness of a cheap, relatively safe, effective drug.

Early in 2020, doctors overseas had reported some success with the use of hydroxychloroquine for Covid 19, and it was a drug that had been prescribed for many decades and had a good history of safety. It was even available over the counter in some countries, such was its safety and usefulness. Instead of advising NZ doctors that this medication might be useful, Pharmac issued a notification that it had updated its advice about hydroxychloroquine and added restrictions to its funded use. The ability for doctors to use it off-label was now fraught with sanctions and threats.

Two studies that quickly followed, one in the Lancet in May 2020 (later proved fraudulent and retracted), the other in the NEJM in May 2020 (also later retracted because the raw data could not be verified or provided), were provided as evidence for the non-effectiveness of hydroxychloroquine for Covid 19 infection.

<https://www.thelancet.com/action/showPdf?pii=S0140-6736%2820%2931180-6>

https://www.nejm.org/doi/full/10.1056/NEJMoa2007621?query=recirc_curatedRelated_article

The Ministry of Health and College of GPs issued statements about the use of these medications implying swift and decisive action against any doctor who dared to prescribe them.

It is not only prescription medications that have been targeted with attempts to discredit them or remove them. Nutrients such as vitamin C, vitamin D, zinc, N-acetyl cysteine and herbal supplements such as Artemisia have also faced ridicule and/or sanctions.

An important question now arises: What sort of doctor do you want to see - one who is obeying orders (of the pharmaceutical companies) or one who has your best interests at heart?