



Written by [Dennis Behreandt](#) on October 7, 2020

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Blood on Their Hands

Progressives have waged a war against hydroxychloroquine for months, despite the fact that both medical experience and scientific examination show that the drug saves lives.

Texas Republican congressman Louis Gohmert tested positive for COVID 19 on July 29. According to the *Washington Examiner*, the then-66-year-old congressman self-quarantined in Texas while he “suffered several days of mild symptoms, including fatigue.”

Progressives, who claim to be always concerned for the well-being of others, were delighted by Congressman Gohmert’s bad luck. Speaking to Chris Salcedo of Newsmax, Gohmert recalled: “I know there were people, from some of the comments I got, they were hoping I would just die.”

The hateful hordes of the progressive Left must be sorely disappointed, as Gohmert recovered from the infection. And he credits hydroxychloroquine-based therapy with his rapid recovery. “I got the hydroxychloroquine, azithromycin, the z-pak, and zinc, and vitamins, steroid nebulizer, and I’m telling you, it made a huge difference, a huge difference,” Gohmert told Salcedo. “So, I’m doing so much better than I would have expected,” he concluded.

For months, despite testimony from doctors experiencing success in treating patients with hydroxychloroquine (HCQ), the mainstream media and government bureaucrats the world over have waged an aggressive campaign to disparage the drug and ban its use.

That war now seems over, even if progressives haven’t gotten the message. There are too many doctors attesting to success with the treatment and too many studies showing that the treatment has promise for HCQ to be dismissed outright.

That doesn’t mean that the bans on the use of the drug have been rolled back. Quite the contrary, progressive despots continue to bar its use whenever and wherever they can. Apparently, the progressive despots continue to be willing to sacrifice the health and lives of their fellow citizens in pursuit of their political goals.

To put this bluntly, in the progressive ethic of ends justifying means, lives are being put at risk in pursuit of inscrutable political gain.

In opposing, and continuing to oppose, useful treatments for disease, progressive politicians and their enablers in the mainstream media quite literally have blood on their hands.



Success: Despite intense mainstream attacks on hydroxychloroquine as a therapeutic for COVID-19, several studies have found the drug to have potential as a treatment, and many doctors have experienced positive outcomes in patients treated with the drug. (Photo: AP Images)



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HCQ Works

That the drug combination of HCQ and azithromycin plus zinc offers a useful treatment option has become increasingly difficult to dismiss. Many studies and individual doctors have found that the drug, alone or in combination, has saved lives or reduced the severity of COVID-19.

One example: Researchers in Saudi Arabia posted the results of their observational study to the medRxiv preprint server on September 13. They found: “Early intervention with HCQ-based therapy in patients with mild to moderate symptoms at presentation is associated with lower adverse clinical outcomes among COVID-19 patients, including hospital admissions, ICU admission, and/or death.”

Another example: A study published on September 14 in the peer-reviewed journal *Clinical and Translational Science* concluded: “We found a reduced in-hospital mortality in patients treated with a combination of hydroxychloroquine and azithromycin after adjustment for comorbidities.”

One more: A study published in the new October 2020 issue of the peer-reviewed *International Journal of Antimicrobial Agents* offered this outcome: “In conclusion, in this large nationwide observational study of patients hospitalised with COVID-19, HCQ monotherapy administered at a dosage of 2400 mg over 5 days was independently associated with a significant decrease in mortality compared with patients not treated with HCQ.”

Doctors, too, attest to the positive results that can be obtained using HCQ treatments for COVID-19.

One of the doctors having incredible success saving patients with HCQ triple therapy including zinc and azithromycin is Dr. Brian Tyson of All Valley Urgent Care in El Centro, California.



Used there more than here: According to news organization BloombergQuint, India’s Dr. Harsh Vardhan, who is also chair of the World Health Organization’s executive board, noted that India uses hydroxychloroquine for mild but high-risk and moderate COVID-19 cases. (Photo: AP Images)

Speaking with San Diego’s KUSI news, Dr. Tyson described his experience with COVID-19. “We’re the only level one urgent care out here in El Centro, California,” he said. “We’ve seen over 15,000 patients that we’ve tested. We have a positive rate of about 1,650 cases that we’ve treated. And our mortality rate, surprisingly, is zero.”

Dr. Tyson then elaborated on his experience using HCQ-based treatment with his COVID patients.



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“We see all ages at the urgent care,” he continued. “We’ve seen as low as eleven months, we’ve seen pregnant women — which we have not used the hydroxychloroquine on, just to clarify that — as well as the very old, up to age 88. We’ve classified, and we’ve been keeping our statistics for the entire pandemic. We classify them into mild and asymptomatic patients, moderate patients and then severe patients. When we look at the severity of the patients, the severe cases we looked at chest x-ray, we looked at the positive nasal swab as well as our serology, pulse oximetry, and all of our patients went through a full evaluation by practitioners. And once they had that evaluation we decided whether or not the triple therapy would be prescribed for them and under all of those cases, every single one of those patients that has been treated has recovered.”

Another doctor who has experienced significant success with HCQ treatment for COVID-19 is Texan Dr. Ivette Lozano. Speaking to Laura Ingraham of Fox News, Dr. Lozano described her experience with HCQ.

“Every patient that I’ve treated — serious, moderate — has had resolution of symptoms within 24 hours. They are improved within 5 hours. The fevers are gone within two days. The lung restriction, which is the most important, resolves within about 4 to 5 hours — you see dramatic improvement.”

Dr. Lozano operates the Lozano Medical Clinic, an urgent care center, in Dallas, Texas. Her academic and medical credentials are formidable. Her biography notes that she “followed a traditional Premed curriculum at Southern Methodist University ... graduating in three years with a major in Chemistry and minors in Biology and Psychology.” She then “attended Texas Tech University Health Science Center School of Medicine.”

Limiting Access

Federal and state regulators have sought to reduce access to HCQ despite the evidence and experience of doctors that attest to its utility in fighting COVID.

In Texas, for example, the state pharmacy board issued a rule that no prescriptions for the drug could be dispensed without the prescribing doctor justifying the prescription by providing the pharmacist with a patient diagnosis. The rule, in effect, made it possible for pharmacists to overrule doctors.

This made it difficult for healthcare providers such as Dr. Lozano to prescribe the drug for patients who badly needed it.

In May, Dr. Lozano described for Laura Ingraham the roadblocks she ran into.

“When I wrote a prescription [I] had the pharmacist call me and let me know that he could not fill that without me disclosing the diagnosis of the patient,” she recounted. “And so we had a little scuffle on the phone and I told him I couldn’t do that because of HIPAA laws and he was insistent that the laws had been changed and the pharmacy board had passed a mandate that that drug could not be dispensed unless it was accompanied by a diagnosis.”



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Dr. Ivette Lozano on HCQ effectiveness: “Every patient that I’ve treated — serious, moderate — has had resolution of symptoms within 24 hours. They are improved within 5 hours. The fevers are gone within two days. The lung restriction, which is the most important, resolves within about 4 to 5 hours — you see dramatic improvement.” (Photo: www.lozanomedicalclinic.com)

This kind of stonewalling apparently happened more than once. Dr. Lozano continued describing efforts pharmacists were making to restrict her access to the drug. “It’s been an extremely difficult situation,” Lozano told Ingraham. “Yesterday I wrote five prescriptions for hydroxychloroquine and I sent them to a pharmacy that I use and have used for the last 20 years. And I actually got a phone call from the pharmacist letting me know that she was not going to refill another prescription for me for hydroxychloroquine. And so I told her that she couldn’t do that, that these patients were sick and that if I wrote the prescription she needed to fill these. And she told me that she was not going to fill another prescription for me. And so I said I need your name and I’m going to call the pharmacy board and she said, ‘I have the right to deny to fill this prescription for you.’”

Another state where HCQ has been hard to get is Minnesota. On March 27, governor Tim Walz issued an executive order that blocked access to the drug. That order was rescinded on August 12. Effectively, the governor’s order in that state increased the probability that people who could have been saved by hydroxychloroquine might have died. But even after the order was lifted, HCQ remained hard to get, according to Dr. Scott Jensen, a medical doctor who is also a Minnesota state senator.

Jensen, who has been investigated repeatedly by the Minnesota Board of Medical Practice because of his outspoken opposition to mainstream coronavirus propaganda, said in a video on August 14 that pharmacies in his state indicated that they would not fill HCQ prescriptions.

“I got on the phone and called pharmacists and said, ‘If I write this hydroxychloroquine, will you fill it.’ And I was told, ‘no.’ And I said, ‘You’ve been filling my scripts for decades and decades and now you say ‘no.’ Why? And it was clear that they were fearful, but what they said was, ‘Well, it might set a precedent. The board might not like it. Maybe we’ll run out.’”

This kind of culture of fear, combined with regulatory restrictions, needlessly and immorally puts



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patients' lives at risk.

Do Any Lives Matter?

Of course, during the summer of 2020, it has been made clear to anyone even paying brief attention to affairs in our towns and cities that progressives, generally the very same progressives who so zealously promote lockdowns and restrict access to life-saving medicine, don't actually care about the well-being of American citizens. They have stood by, giving silent assent to rioting terrorists as their own cities were burned to the ground, as property was vandalized and destroyed, as stores were looted and as innocent citizens have had their lives turned upside down. The ends they seek — total state control, expulsion of Donald Trump from the presidency, etc. — have in their minds justified a wide slate of crime.

Among these crimes, perhaps the most dire, is the potential death toll related to restriction of life-saving HCQ treatments.

Yale epidemiologist Harvey Risch made this point in comments this summer.

In July, on her show on Fox News, Laura Ingraham asked Risch about the potential impact of HCQ.

"Do you think thousands of lives could be saved going forward if they released that hydroxy stockpile and even gave it as a prophylactic like India has done and other countries have done for frontline workers, if they wanted it?" Ingraham asked.

"I think 75,000 to 100,000 lives will be saved if that happens," Risch responded.

Or, as El Centro, California's Dr. Brian Tyson put it, what do we have to lose? "I always say, if I'm wrong, people are still going to die," Tyson told San Diego's KUSI news. "But if I'm right, we're going to save thousands of lives. And that's, I think, the most important thing."



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