



Written by [Bob Adelman](#) on May 18, 2022

## Pending Missouri Bill Protects Doctors From Sanctions for Prescribing Ivermectin or Hydroxychloroquine

When Missouri Governor Mike Parson signs [HB 2149](#) into law as he is expected to, doctors prescribing ivermectin or hydroxychloroquine for their patients won't be subject to sanctions, penalties, or loss of their medical licenses.

Overwhelmingly passed by a 130-4 vote in the House last week, the bill's language is crystal clear:

The act of lawfully dispensing, prescribing, administering, or otherwise distributing ivermectin tablets or hydroxychloroquine sulfate tablets for human use shall not be grounds for denial, suspension, revocation, or other disciplinary action by [any state medical] board.



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The bill also prohibits pharmacists from questioning or otherwise interfering with the dispensing of these prescriptions to their patients:

A pharmacist shall not contact the prescribing physician or the patient to dispute the efficacy of ivermectin tablets or hydroxychloroquine sulfate tablets for human use unless the physician or patient inquires of the pharmacist about [their] efficacy....

It's about time. As Nebraska Attorney General Doug Peterson noted when his state passed a similar law late last year:

Ivermectin has been used in humans since the 1980s.... In 2015 its discoverers won the Nobel Prize in Medicine for their work in uncovering it and bringing it to market.... By 2017, ivermectin had demonstrated antiviral activity against several RNA viruses.... Before the pandemic, scholarly literature had also recognized ivermectin's anti-inflammatory capacity.... For more than three decades, ivermectin has also shown itself to be very safe....

The same goes for hydroxychloroquine:

In 2004, long before the Covid-19 pandemic began, a lab study revealed that chloroquine is an effective inhibitor of the replication of the severe acute respiratory syndrome coronavirus (SARS-CoV) in vitro and thus that it should be considered for immediate use in the prevention and treatment of SARS-CoV infections.... It is widely recognized in the medical



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community that hydroxychloroquine is generally safe, so safe in fact that it may be prescribed to pregnant women and children of all ages.

Peterson's opinion is backed up by no fewer than 304 footnotes, with more than 275 of them referring to medical studies, articles from medical journals, statements from the U.S. Food and Drug Administration (FDA), and other medical authorities.

In many states, however, the potential for sanctions has intimidated physicians into shying away from such remedies, despite such evidence of their effectiveness. Henry F. Smith, Jr., M.D., practices medicine in such a state, and posed the following scenario:

Now let's imagine [a] patient calls in. This patient ... has a dry cough, scratchy throat, muscle aches, and a low-grade fever. This patient had a COVID test kit at home and tested positive.

The physician wants to prescribe a medication with no risk of bacterial resistance and a very benign side-effect profile.

He's read lots of literature to suggest it will be helpful. There are a significant number of double-blind studies showing it to be effective in the treatment of SARS Co-V2. It has been used in multiple countries with excellent results.

Except, in this case, the physician will find it impossible to prescribe that medication. It will be impossible because that medication is Ivermectin. And somehow it has been removed from the market.

Why? Smith follows the money:

[Pfizer's Paxlovid and Merck's Molnupivir] have exactly one company-sponsored study each to vouch for their efficacy. Merck's drug, by its own testing, is only 39% effective in reducing severe disease and/or death. There are no long-term safety data for either medication.

Yet both have received emergency use authorization and have suddenly popped up on government-approved treatment protocols....

As I look towards the end of my career, I've seen a lot of profit-oriented behavior by pharmaceutical companies.

I think of the me-too drugs, molecules that are only slightly different than their now off-patent predecessors aggressively marketed to physicians.

I've seen pharmaceutical reps actually reimburse physicians for a certain number of prescriptions written for their medications.

I've seen manipulation of the rules regarding inhaled medications to maintain their patents long after they would have expired.

But this banning of treatments proven to be efficacious is beyond anything Smith has seen in his decades of medical practice:



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But if they actively suppressed the adoption of useful medications during a pandemic, then this is beyond the pale. It would suggest a total collapse of any morality or sense of responsibility within the pharmaceutical industry and their partners in the regulatory agencies.

The money flowing to drug companies is nearly incomprehensibly large. According to Morningstar, Pfizer collected nearly \$40 billion in sales of its Covid-19 vaccine in 2021, while Merck reported gross sales in 2021 from all sources of nearly \$50 billion, 17% over the year before. Merck's profit rose from \$4.5 billion in 2020 to \$12.3 billion in 2021, an astounding 273% jump in just one year.

While Big Pharma was raking in obscene profits, even more obscene were the deaths directly attributable to the lack of the two remedies.

As Smith noted:

Let's do some mathematics. As of this writing [February], there are roughly 890,000 deaths recorded in the United States related to COVID-19.

I think most people understand that a lot of these deaths are not due to the virus but from other comorbid conditions. The CDC has long stated that the number of deaths from COVID where there was no comorbid condition (in other words, healthy people who died from COVID) is roughly 7% of the total (65,000).

In several meta-analyses, Ivermectin was shown to be roughly 65% effective at preventing serious disease and/or death. So, in the best-case scenario for them, our public health organizations, by suppressing Ivermectin, may be responsible for roughly 40,000 deaths.

Once Missouri Governor Mike Parson signs HB 2149 into law he puts an end to the holocaust in the Show Me State. Missouri will then join more than two dozen other states in the union allowing medical freedom from sanctions for practicing medicine according to the Hippocratic oath: "*Primum non nocere*": First, do no harm.





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