



Written by [Selwyn Duke](#) on January 11, 2022

“I Know for a FACT HCQ and Ivermectin Work to Treat COVID!”

Forget the “novel virus.” The quest for “novel” COVID drugs and the profits they bring have been the real problem all along. So said Dr. Pierre Kory, the Wisconsin intensive care physician and lung specialist who reportedly [treated](#) hundreds of congressmen for coronavirus with a medication that’s apparently not good enough (or too good?) for the rest of us: ivermectin.

Kory [made his comments](#) this past weekend on Maria Bartiromo’s show *Sunday Morning Futures*, on which he appeared with Senator Ron Johnson (R-Wis.). After he remarked on how a medical establishment corrupted by money has denied Americans simple, inexpensive, life-saving medical care, host Bartiromo exclaimed, “That is disgusting! I know for a *fact* that hydroxychloroquine and ivermectin work to treat COVID!”

To this, Kory nodded in obvious agreement.

It’s shocking to many, but two years into the China virus “pandemic” there still is no official treatment protocol for COVID-19. In fact, when this subject arose a while back with a friend — who, like too many, suffered heart inflammation after taking a SARS-CoV-2 “vaccine” — he said definitively, “There is no treatment for COVID.” I informed him otherwise, though he said nothing and I don’t know if he believed me. He was likely repeating what he’d heard in the media and/or from his doctor.

So what’s the truth? Is there treatment for China virus disease?

In reality, Kory is hardly alone in treating, and curing, people sick with the pathogen. Just consider internist [Dr. Syed Haider](#), who has gotten media exposure of late for his success in this regard. Haider “has treated more than 4,000 COVID-19-positive patients so far during the pandemic,” according to Udumbara, [writing](#) last week. “Just five ended up going to a hospital, and none have died.” The site continued:

The doctor said his preferred treatments include many off-label medications along with vitamins and supplements.

“Vitamin D is really important, ivermectin is important, fluvoxamine[;] hydroxychloroquine also works[;] it’s just a lot of people have been convinced that it doesn’t at this point, and are scared off of trying it,” Haider told NTD’s “Capitol Report.” “But I prefer ivermectin, fluvoxamine, Vitamin D, Vitamin C, quercetin, zinc.”



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... Haider has also recommended flax seed oil.

“One really easy thing that anyone can do is just follow the directions on a bottle of hydrogen peroxide, you can get this at the store, can dilute it down to 1 percent[,] swish[-]swish it through your nose, or swish it through your mouth and drip it into your nose or use a neti pot to rinse out your nose. And it’s not uncomfortable[;] it shouldn’t be burning[;] if it’s burning, you would want to dilute it a little bit more, and that kills the virus on contact,” he said [see video below].

Note that renowned COVID doctor Peter McCullough, M.D., also recently recommended a nose rinse while interviewed on the *Joe Rogan Experience*. Its purpose is to reduce the nasal-passage viral load. In reality, wise doctors willing to buck the medical establishment have long been effectively treating China virus patients. Another example is New York-based family practitioner [Dr. Vladimir Zelenko](#), whose “[Zelenko Protocol](#)” COVID treatment (similar to what Haider outlined) has been widely circulated and embraced.

There are also organizations of such physicians, such as [America’s Frontline Doctors](#) and the [Front Line COVID-19 Critical Care Alliance](#) (FLCCC).

The skeptical may now ask, however, “If these treatment protocols are so effective, why haven’t I heard about them?”

Dr. Kory partially explained this on *Sunday Morning Futures*, [telling](#) host Bartiromo:

The tragedy, Maria, is that this entire pandemic we have not had an early treatment recommended by the government, because they’ve been waiting for the approvals of the novel patented drugs. And the two that just got approval — *one study!* One and done with these pharmaceutical companies. And meanwhile, you have these generic drugs that have dozens of studies and trials and they don’t get approved. It is absolutely absurd.

And these drugs that just got approved, one doesn’t work; India just canceled their order for it [Merck’s [molnupiravir](#)] because they know it doesn’t work, and the other one is highly toxic. And so the absurdity and the tragedy and damage on the American people by a broken system. We need to fix this where people are dying because they are denied highly effective, cheap, widely available drugs that do not present as obscene profits to the pharmaceutical companies [see video below; relevant portion begins at 0:40].

Writing last month, commentator Thomas Lifson [added further perspective](#). After mentioning, like Bartiromo, that “we now effectively know that early (off-label) use of the anti-parasite/anti-malarial drugs hydroxychloroquine [HCQ] and ivermectin [IVM] can have a significant effect on reducing COVID mortality,” he also cited Big Pharma’s profit-induced malpractice.

“Running a double-blind study requires oodles of money — the kind of money that only a new, patented drug-maker could afford, in hopes of selling a high-priced remedy to millions of consumers,” he wrote. “Repurposing off-patent drugs like HCQ and IVM does not yield the kind of profits that would be necessary to pay back the cost of double-blind studies — so they don’t exist.”

“Okay, but why, then, won’t my doctor at least prescribe what’s necessary for COVID?” some may now ask.



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Because doing so can destroy a physician's career, as Dr. Ted Noel, M.D., whom I've spoken to, [explained last September in an eye-opening, must-read article.](#)

While *The New American* isn't prescribing anything — as we must say in our litigious country, proceed at your own risk — I personally can echo Bartiromo, Lifson, and many others in stating that I *know* IVM and HCQ work *when used in conjunction with other protocol-included therapeutics*. As I've mentioned in the past, two senior citizens close to me — one with significant comorbidities — developed serious COVID symptoms, took IVM and experienced *immediate* improvement. One said she never saw a medication work so fast (in five minutes, literally).

Of course, your doctor may not relate to you any of the above realities. In this case, while the choice is yours, it may be time to find a new doctor.





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