

COVID UPDATE

Topics:

Resource and Medical Information sites,

Treatment Protocols, and

Spike Detox Protocols,

Recent Studies

Please click on links in this document for relevant source information and reference. The table of contents provides a quick navigation by clicking on the sub title

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PATENTS

Patents provide background and context for what we know about the corona virus.

[Reiner Fuellmich summarizes findings to date – Pandemic Timeline](#)

[Untitled document.pdf - Google Drive](#)

[*AAA_DR DAVID MARTIN Interview Transcript TESTIMONY German ACU.pdf](#)

[Patents Prove SARS-CoV-2 Is A Manufactured Virus \(citizensjournal.us\)](#)

[Dr. Reiner Fuellmich – Dr. David Martin Interview – “Fauci Created SARS in Lab” – No Novel CV – US Patents 1999 – 2002 – Bluecat Media](#)

Canine coronavirus S gene Patent # 6,372,224

<https://patents.justia.com/patent/6372224>

Filed: Jan 28, 2000

Date of Patent: Apr 16, 2002

Assignee: Pfizer Inc. (New York, NY)

Inventors: Timothy J. Miller (Lincoln, NE), Sharon Klepfer (Broomall, PA), Albert Paul Reed (Exton, PA), Elaine V. Jones (Wynnewood, PA)

Primary Examiner: Laurie Scheiner

Attorney, Agent or Law Firms: Peter C. Richardson, Paul H. Ginsburg, E. Victor Donahue

Application Number: 09/494,151

David Martin

What is more problematic and what is actually the most egregious problem is that Anthony Fauci and NIAID found the malleability of corona virus (cv) to be a potential candidate for HIV vaccines.

And so SARS is actually not a natural progression of a genetic modification of cv. As a matter of fact, very specifically in 1999 Fauci funded research at the University of North Carolina Chappel Hill specifically to create ... from a patent application filed on April 19th 2002, where the NIAID built an infectious replication defective coronavirus that was specifically targeted for human lung epithelium.

MASKS

Dr. S. Petty Chemical Engineer, PPE Expert in > 400 cases,

Short 12-15 min topics: [Search results for: Petty Podcast \(rumble.com\)](#)

Episodes: 5, 6, 11-14, 17, 18, 20, 21, 23-25

--43 min interview [Covid Revealed – Episode 8B - Bonus Video \(Stephen Petty\) \(rumble.com\)](#)

WESTERVILLE Oh: [Dr Becky \(Oakstone Academy\) and Stephen Petty \(Exposure Expert\) Part 1 \(rumble.com\)](#)

--Dr Becky, Head of School at Oakstone Academy, Westerville OH where they stayed open during the shutdown, no masks, and never had a case of transmission among their 200 staff and 650 students.

--Please consider watching COVID Revealed: Jeff Hays Films LLC; Sept 30, 2021 – 1 hr. on Engineering Controls and Why Masks Cannot and Do Not Work – they did an excellent job with this interview:

https://urldefense.proofpoint.com/v2/url?u=https-3A_rumble.com_vrfoox-2Dcovid-2Drevealed-2Depisode-2D8b-2Dbonus-2Dvideo-2Dstephen-2Dpetty.html&d=DwIFAg&c=euGZstcaTDIlvimEN8b7jXrwqOf-v5A_CdpgnVfiiMM&r=Nunf125vkbIW0RJs_gsUPISxeUNkX6ZNQBFQumDhWF4&m=-kzek4bOTTIyAoUZtwO5tWqO_pgTwb3-L0bN2BG9sHw&s=ulnN4XETPB15WbnEIRr8SArSFA5CVQ-rJ2_uxp0JAuw&e=

FRONTLINE COVID CRITICAL CARE (FLCCC)

Most recent weekly videos

[New Variants, ACTIV-6 Trial and I-RECOVER Update - FLCCC | Front Line COVID-19 Critical Care Alliance \(covid19criticalcare.com\)](#)

[Missed Our Conference? Get It On Demand - FLCCC | Front Line COVID-19 Critical Care Alliance \(covid19criticalcare.com\)](#)

[FLCCC Educational Conference Archives - FLCCC | Front Line COVID-19 Critical Care Alliance \(covid19criticalcare.com\)](#)

[I-PREVENT-COVID-Protection-Protocol.pdf \(covid19criticalcare.com\)](#)

The I-PREVENT protocol must be part of an overall strategy that includes common sense public health actions such as good hand hygiene, avoiding crowded public gatherings, adequate ventilation, and other measures. The following protocol can be used for both chronic and post-exposure prevention.

[Chronic prevention](#) is especially recommended for healthcare workers, those over 60 years old with comorbidities, people who are morbidly obese, and residents of long-term care facilities. Follow [post-exposure prevention](#) if a household member is COVID-positive or if you have had prolonged exposure to COVID but have not developed symptoms. At the onset of any flu-like symptoms, please refer to the [I-CARE Early Treatment Protocol](#).

[I-CARE-Protocol-Sept-6v2-1.pdf \(covid19criticalcare.com\)](#)

A Guide to Early Treatment of COVID-19

It is critical to recognize that infection with SARS-CoV-2, the virus that causes COVID-19, progresses through a number of stages and phases. Treatment is therefore highly stage-specific. COVID-19 is a clinical diagnosis; a confirmed antigen or PCR test is not required. Treatment should be initiated immediately after the onset of flu-like symptoms. The multiple therapies and drugs in this protocol have different mechanisms of action and work synergistically during various phases of the disease.

[I-RECOVER: Long COVID Treatment - FLCCC | Front Line COVID-19 Critical Care Alliance \(covid19criticalcare.com\)](https://www.covid19criticalcare.com)

An Approach to Treating Long COVID

Up to 80% of patients experience prolonged illness after COVID-19, characterized by prolonged malaise, headaches, generalized fatigue, sleep difficulties, hair loss, smell disorder, decreased appetite, painful joints, dyspnea, chest pain and cognitive dysfunction. Long COVID may persist for months after acute infection, and it is likely that patients who did not receive adequate treatment during the symptomatic phase are much more likely to develop long COVID. Treatment should be individualized to clinical signs and symptoms.

[I-RECOVER: Post-Vaccine Treatment - FLCCC | Front Line COVID-19 Critical Care Alliance \(covid19criticalcare.com\)](https://www.covid19criticalcare.com)

Management of Post-Vaccine Syndrome

Major public health authorities do not recognize post-COVID-vaccine injuries and no specific ICD classification code exists for this disease. However, while no official definition exists, a temporal correlation between receiving a COVID-19 vaccine and the beginning or worsening of a patient's clinical manifestations is sufficient to diagnose a COVID-19 vaccine-induced injury, when symptoms are otherwise unexplained by concurrent causes.

Since there are no published reports detailing how to manage vaccine-injured patients, our treatment approach is based on the postulated pathogenetic mechanism, clinical observation, and patient anecdotes. Treatment must be individualized according to each patient's presenting symptoms and disease syndromes. Chances are, not all patients will respond equally to the same intervention; a particular intervention may be life-saving for one patient and completely ineffective for another.

Early treatment is essential; the response to treatment will most likely be attenuated when treatment is delayed.

[Nutritional Therapeutics and COVID-19 - FLCCC | Front Line COVID-19 Critical Care Alliance \(covid19criticalcare.com\)](https://www.covid19criticalcare.com)

[Vitamins and Nutraceuticals During Pregnancy - FLCCC | Front Line COVID-19 Critical Care Alliance \(covid19criticalcare.com\)](https://www.covid19criticalcare.com)

[Spike Protein Detox Guide — World Council for Health](#)

Top ten spike protein detox essentials:

- Vitamin D
- Vitamin C
- NAC (N-acetylcysteine)
- Ivermectin
- Nigella seed
- Quercetin
- Zinc
- Magnesium
- Curcumin
- Milk thistle extract

A practical approach to keeping healthy after your Covid-19 jab

[A practical approach to keeping healthy after your Covid-19 jab | World Council for Health](#)

The World Council for Health recognizes that some people become unwell after the Covid-19 vaccination. **This guide describes the types of illnesses associated with injection and how doctors are managing them.**

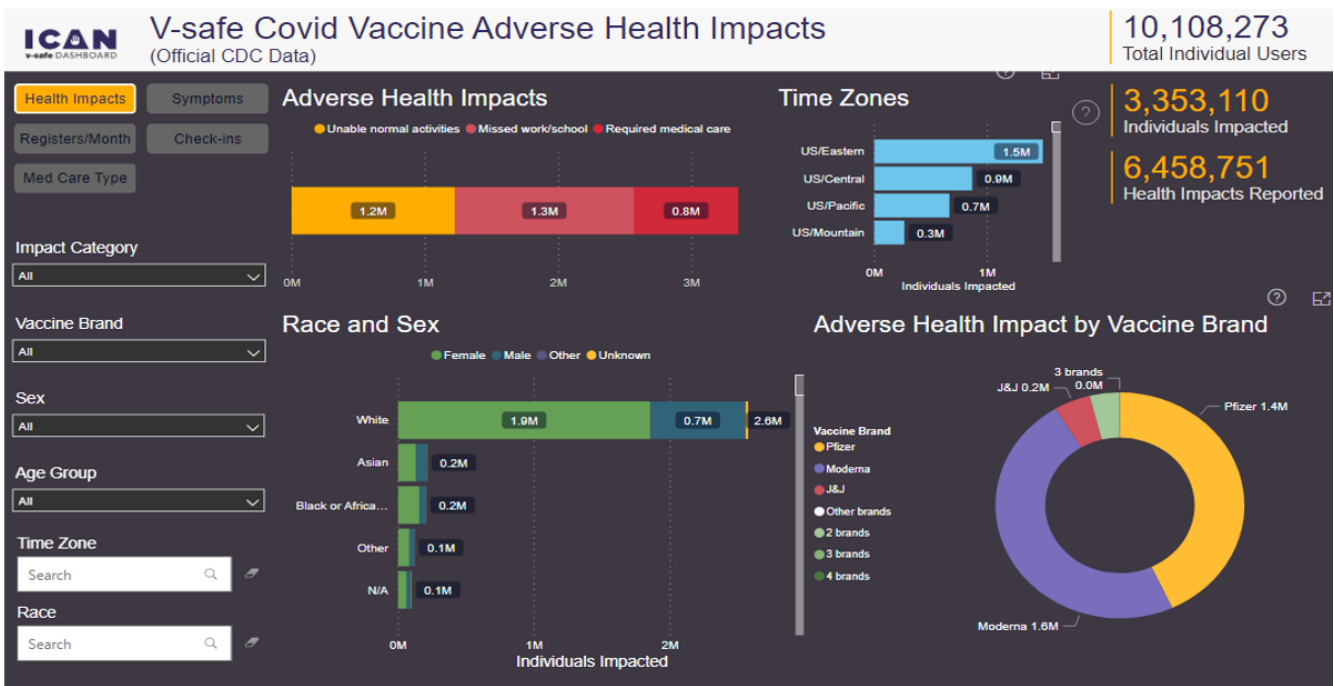
- [Spike Protein Detox Guide — World Council for Health](#)

This is an evolving guide with emerging information on how to clear viral and vaccine-induced spike proteins from the body.

The lists of herbal and other medicines and supplements have been compiled in a collaboration between international doctors, scientists, and holistic medical practitioners.

RESOURCES of INFORMATION

V-SAFE Phone App, CDC Data <https://icandecide.org/>



<https://icandecide.org/>

The CDC created [v-safe](#), a smartphone-based program, to collect health assessments after Covid-19 vaccination. Approximately 10 million people signed-up and submitted health reports after Covid-19 vaccination.

ICAN's legal team [sued](#) the CDC [twice](#) leading to a court [order](#) requiring release of the data. ICAN has taken the CDC's official raw data and created a dashboard interface which allows users to graphically view the 144+ million health entries obtained by ICAN.

[ACCESS NOW](#)

Important notes: (1) These data are limited to the around 10 million v-safe users. (2) These data are limited to only **pre-populated** fields checked by v-safe users (for example, selecting from a list of pre-populated symptoms). (3) The information captured in free-form fields has not yet been produced and ICAN is still litigating to obtain that information.



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

1. CDC

[Coronavirus Disease 2019 \(COVID-19\) | CDC](#)

Side Effects

[Overview of COVID-19 Vaccines | CDC](#)

- [Side effects](#) that happen within 7 days of getting vaccinated are common but are mostly mild. Sometimes they may affect a person's ability to do daily activities.
- Side effects throughout the body (such as fever, chills, tiredness, and headache) are more common after the second dose of a Pfizer-BioNTech, Moderna, or Novavax COVID-19 vaccine.

Pfizer Documents

[reissue_5.3.6-postmarketing-experience.pdf \(phmpt.org\)](#)

[Pfizer Documents Analysis Archives - DailyClout](#) **EXCELLENT ANALYSIS**

Two large data sets in the [Pfizer confidential document collection](#), released pursuant to a court order, report consistent sex differences in the absolute number and percentage of Adverse Events (AEs) and Adverse Events of Special Interest (AESI). This report will examine primary source documents that collect Adverse Events at two points in time – February 28, 2021, the end of first two and a half months [following widespread inoculation with Pfizer’s COVID-19 vaccine](#), and then at a second time ending on March 15, 2022.

SEE THE 8 PAGES OF ADVERSE EVENTS 30-38

“According to the product information supplied by the European Medicines Agency, two of the main components of Pfizer’s Comirnaty vaccine are ALC-0315 and ALC-0159. Echelon, the manufacturer of these nanoparticles, **specifies that they are ‘for research only and not for human use’**. Administering a vaccine – particularly to children – which contains unauthorised (sic) excipients is illegal, dangerous and unethical.

[Pfizer Documents Analysis Archives - DailyClout](#)

Example of Daily Clout Topic

[Report 38: Women Have Two and a Half Times Higher Risk of Adverse Events Than Men. Risk to Female Reproductive Functions Is Higher Still. - DailyClout](#)

August 20, 2022 • by Dr. Robert W. Chandler, MD, MBA

The Pfizer documents demonstrate a strong signal that women have far more adverse events than males, particularly when considering reproductive organs and function. Primary source material from Pfizer shows a strong, sex-linked Adverse Event (AE) difference. Two major data collections, Reissue of Pfizer’s [“5.3.6 Cumulative Analysis of Post-Authorization Adverse Event Reports of PF-07302048 \(BNT162B2\) Received](#)

[Through 28-FEB-2021”](#) and [“APPENDIX 2.1 Cumulative Number of Case Reports \(Serious and Non-Serious, Medically Confirmed and Non Medically-Confirmed\) from Post-Marketing Data Sources, Overall, by Sex, Country, Age Groups and in Special Populations and Summary Tabulation by Preferred Term and MedDRA System Organ Class,”](#) show substantially greater numbers of Adverse Events in women contrasted with men. This signal is particularly strong for the reproductive organs and their functions. Women have approximately three times the risk of Adverse Events than do males, and the specific risk to the reproductive organs and their functions is even stronger.

[Report 41: 2021 CDC and FDA Misinformation - Retroactive Editing, Erroneous Spontaneous Abortion Rate Calculation, Obfuscation in the New England Journal of Medicine - DailyClout](#)

Pregnancy: 274 cases; spontaneous abortion (23), outcome pending (5), premature birth with neonatal death, spontaneous abortion with intrauterine death (2 each), spontaneous abortion with neonatal death, and normal outcome (1 each). **No outcome was provided for 238 pregnancies**

Overall Conclusion: This cumulative case review does not raise new safety issues

FERTILITY and LIVE BIRTHS

Decline of live births in Europe 91 pages

[Live births decline in Europe \(initiative-corona.info\)](http://initiative-corona.info)

Conclusion

- The first half of 2022 was marked by a significant decline in births ranging from 1.3% in France to 19% in Romania.
- In 15 countries this decline exceeded 4%, in 7 countries it exceeded 10%.
- A significant negative correlation between birth rates decline and vaccination frequency is found in 13 of 18 countries. In Finland, Switzerland, the Netherlands, Latvia, Austria, Germany, and Lithuania, as well as for Europe as a whole, the correlation analysis even yielded p-values of 0.005 or less.
- No correlation was found between the decline in birth rates and the incidence of Covid-19 infections or hospitalizations assigned to Covid-19.
- Adverse reactions related to the female reproductive organs and study findings related to male fertility point to a causal interpretation of the association of birth declines and the Covid-19 vaccinations.
- Observations of fertility centres for corresponding signs should be collected.
- With reference to the Bradford-Hill criteria, a relationship temporality between the decline in births and the course of the initial vaccination campaign (doses 1 and 2) nine months earlier could be demonstrated. There was a very high analogy between the European countries. The uniformly observed decline in the number of births with a temporal connection to the start of the vaccination campaign is thus not an isolated national phenomenon. Some countries are still withholding their data. Norway has sent data for the second quarters, but is currently withholding data for the first quarters.
- Given the considerable individual and social relevance of the link between vaccination campaigns and declining birth rates, the immediate suspension of Covid-19 vaccination for all persons of childbearing and reproductive age should be called for.

LOCKDOWNS and Social distancing

[Targeted Social Distancing Designs for Pandemic Influenza - Volume 12, Number 11—November 2006 - Emerging Infectious Diseases journal - CDC](#)

XXX

[A-Literature-Review-and-Meta-Analysis-of-the-Effects-of-Lockdowns-on-COVID-19-Mortality.pdf \(jhu.edu\)](#)

SAE, No. 200/January 2022

Studies in Applied Economics

A LITERATURE REVIEW AND META-ANALYSIS OF THE EFFECTS OF LOCKDOWNS ON COVID-19 MORTALITY

Jonas Herby, Lars Jonung, and Steve H. Hanke

Adopting a systematic search and title-based screening, we identified 1,048 studies published by July 1st, 2020, which potentially look at the effect of lockdowns on mortality rates.

our meta-analysis fails to confirm that lockdowns have had a large, significant effect on mortality rates. Studies examining the relationship between lockdown strictness (based on the OxCGRT stringency index) find that the average lockdown in Europe and the United States only reduced COVID-19 mortality by 0.2% compared to a COVID-19 policy based solely on recommendations.

Dr. Petty

!5 year olds 2006 Intel science fair project. Paper used to produce report on 6ft.

[Targeted Social Distancing Designs for Pandemic Influenza - Volume 12, Number 11—November 2006 - Emerging Infectious Diseases journal - CDC](#)

Embraced by CDC at request of the Bush White House

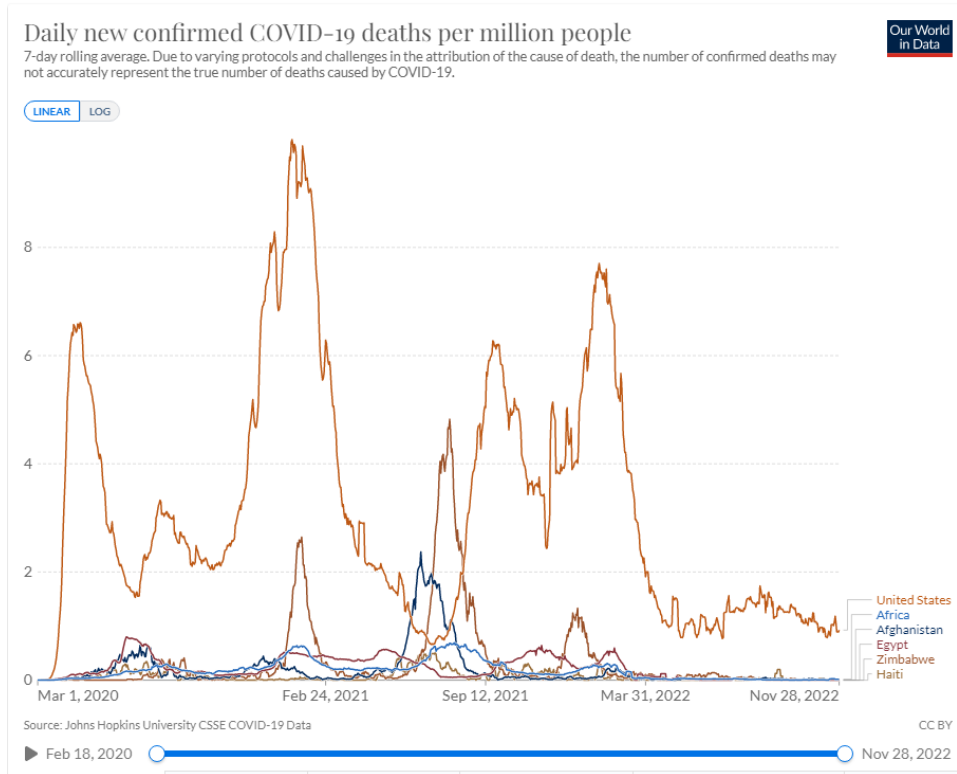
Targeted Social Distancing Designs for Pandemic Influenza

Robert J. Glass*✉, Laura M. Glass†, Walter E. Beyeler*, and H. Jason Min*

Author affiliations: *Sandia National Laboratories, Albuquerque, New Mexico, USA; †Albuquerque Public High School,

Based on that finding, her program showed that in a hypothetical town of 10,000 people, 5,000 would be infected during a pandemic if no measures were taken, but only 500 would be infected if the schools were closed.

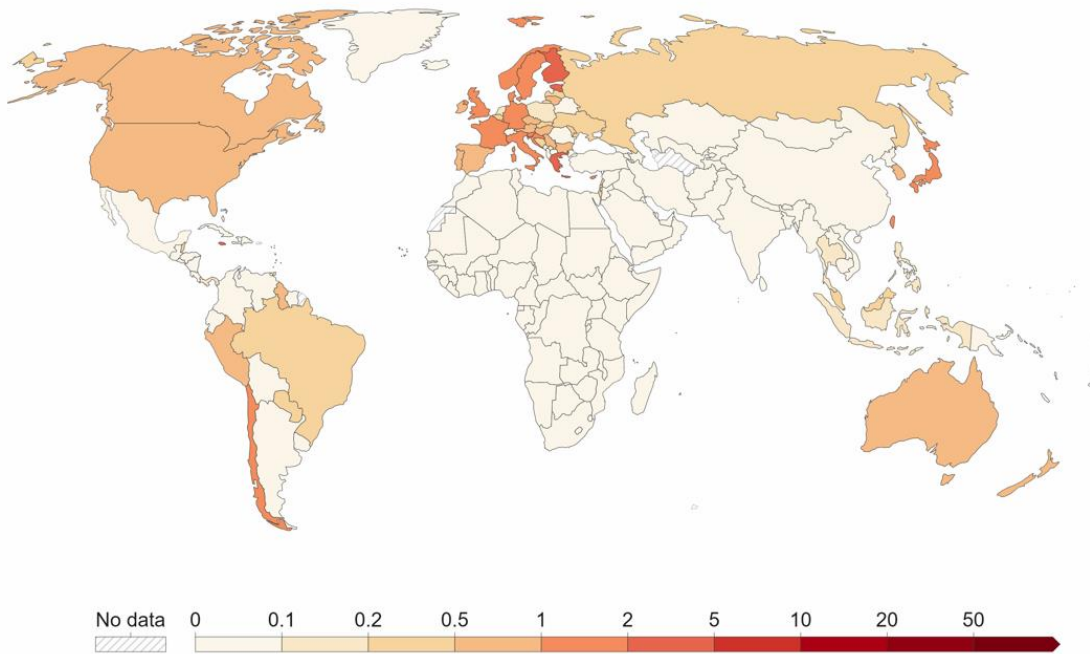
Coronavirus (COVID-19) Deaths - Our World in Data



Daily new confirmed COVID-19 deaths per million people, Nov 26, 2022



7-day rolling average. Due to varying protocols and challenges in the attribution of the cause of death, the number of confirmed deaths may not accurately represent the true number of deaths caused by COVID-19.



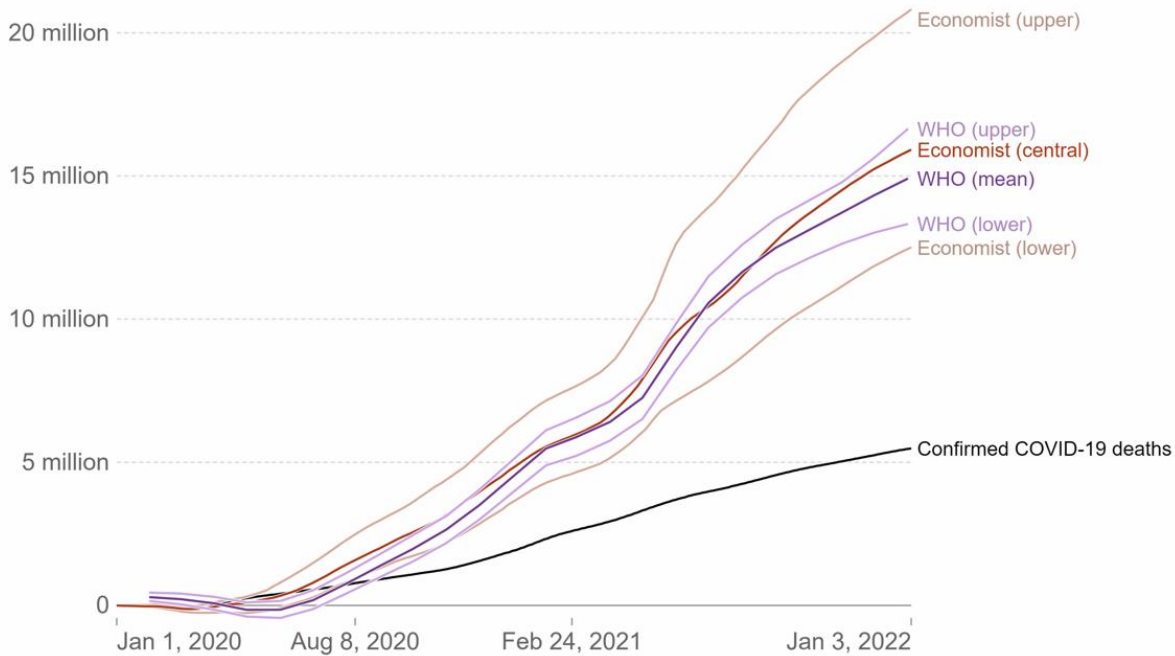
Source: Johns Hopkins University CSSE COVID-19 Data

CC BY

Estimated cumulative excess deaths, from The Economist and the WHO, World



Cumulative difference between the number of reported or estimated deaths in 2020–2021 and the projected number of deaths for the same period based on previous years. Estimates differ because the models differ in the data and methods used.



Source: The Economist (2022), WHO (2022)

OurWorldInData.org/coronavirus • CC BY

BIRTH RATES

<https://pubmed.ncbi.nlm.nih.gov/30550366>

[Decrease in American birth rates makes it imperative for the United ...](#)

Due to the expected increase in infertility and **decrease in** the national live **birth rate**, the US should set a plan to fund infertility treatment and lead a policy for single embryo transfer. This will offset the **decrease in** the national **birth rates** and **decrease** expenditure on perinatal and neonatal complications resulting from multiple **births**.

<https://www.prb.org/resources/why-is-the-u-s-birth-rate-declining>

[Why Is the U.S. Birth Rate Declining? | PRB](#)

May 6, 2021 Why Is the U.S. **Birth Rate** Declining? In 2020, the U.S. TFR dropped to 1.64, the lowest level ever recorded. Date American women averaged more than seven children each until the early decades of the 19th century. After 1900, average fertility declined gradually, interrupted only by the baby boom following World War II.

<https://worldfreedomalliance.org/au/news/whats-causing-a-67-reduction-in-australian-birth-rates>

[What's causing a 67% reduction in Australian birth rates?](#)

4 days ago Australian Bureau of Statistics (ABS) figures show a shocking 67% reduction in the monthly **birth rates** from between July and December 2021. The Government claims I've got my facts wrong but the data is published on the ABS website for all to see. Guess what significant event lines up with roughly nine months prior to [...]

<https://igorchudov.substack.com/p/dramatic-decrease-in-births-in-germany>

[Dramatic Decline in Births in Germany - by Igor Chudov - Substack](#)

Jun 25, 2022 So the German govt is a bit liberal with the truth here. North Dakota — Same Stuff, Different Place Our reader Biswrest pointed out a most unlikely counterpart to Germany — North Dakota. Look what happened there. Per Provisional Data Reports for 2021-2022: UK: 10% Decline Taiwan: 23% Decline Per taiwan government household report. Switzerland

<https://theconversation.com/its-a-national-crisis-uks-birth-rate-is-falling-dramatically-121399>

['It's a national crisis': UK's birth rate is falling dramatically](#)

And the decline in **birthrate** in the UK is as serious a matter in 2019 as it was a century ago. The UK is an increasingly aged nation and that is only set to become more so. There are 26.6m people...

MONEY

[paxlovid-fraud-rebound Infect Mercola NOV 2022 pdf.pdf](#)

Remdesivir, for example, costs between \$2,340 and \$3,120 depending on your insurance.

Ivermectin, meanwhile — which has been very effective against COVID and shown to outperform at least 10 other drugs, including Paxlovid — costs between \$48 and \$94 for 20 pills depending on your location. The average cost is said to be about \$58 per treatment.

Paxlovid costs \$529 per five-day course of treatment, and

molnupiravir is around \$700. While not quite as expensive as remdesivir, both are still nearly 10 times costlier than ivermectin, which is more effective. Imagine the billions of dollars we could have saved were it not for our health agencies being so compromised by industry.

[Gilead Sciences Sets US Price for COVID-19 Drug at \\$2340 to \\$3120 Based on Insurance \(ajmc.com\)](#)

Cornell University, January 20, 2022

WellRx, Ivermectin

Drugs.com Ivermectin

Pfizer itself doesn't view COVID rebound after Paxlovid treatment as a failure; they see it as a successful venture because the more courses needed, the more money they make.

As reported by the Kaiser Family Foundation (KFF) in early July 2022:⁴¹

"During a recent investor call, a Pfizer official could spin the recent reports that the virus can hide from Paxlovid into good news, predicting that, as with the vaccine, patients may need multiple courses.

Immunocompromised patients 'may carry this virus for a very, very long time,' Dr. Mikael Dolsten [chief scientist and President of Worldwide Research and Development at Pfizer⁴²] said in the investor call. 'And we see that area as a real new opportunity growth area for Paxlovid to do very well, where you may need to take multiple courses.'"

Asymptomatic Paxlovid Users Can Still Spread Infection

The CDC and Pfizer have suggested that sometimes COVID-19 naturally comes back after a person tests negative, implying that COVID-19 rebound is spontaneous and not necessarily linked to Paxlovid. However, research by Dr. Michael Charness of the Veterans Administration Medical Center in Boston refutes this notion.

When Charness and colleagues analyzed 1,000 cases of COVID-19 diagnosed among members of the National Basketball Association — none of whom took Paxlovid — no cases of COVID-19 rebound were found. They also found that people who take Paxlovid can still transmit COVID-19 to others, even if they're asymptomatic. Charness told CNN:

"People who experience rebound are at risk of transmitting to other people, even though they're outside what people accept as the usual window for being able to transmit."
