

# Dr. Fauci Versus Frontline Doctors and Science: “Pandemic Malpractice”

By [Joel S. Hirschhorn](#)

Global Research, November 09, 2020

[The Unz Review](#) 6 November 2020

Region: [USA](#)

Theme: [Science and Medicine](#)

*Americans suffer and die unnecessarily in this pandemic. Frontline doctors are ready and willing to use an effective at home/outpatient remedy. But they are being blocked because their medical freedom has been squashed. **Dr. Anthony Fauci** has ensured that the government only addressed the COVID-19 pandemic through contagion control and hospital treatment. Missing is what other nations have pursued: early home/outpatient treatment to keep people with symptoms and/or a positive test result out of hospital. Which is why they have much lower death rates.*

Collusion between Fauci and media block information and access to a **hydroxychloroquine** cocktail proven safe and effective by some courageous doctors offering home treatment. Countering his very positive image created by leftist media, this article digs deep into who Fauci really is and what he has done. Rather than following science and pursuing a complete public health strategy, he has seriously harmed Americans. He alone, it will be shown, accounts for at least half of deaths in the US.

1. The fight for HCQ based on good science is being defeated by Fauci controlled government and media bias against HCQ. He has killed medical freedom. Fauci biggest blunder, actually malpractice, is his emphasis on contagion control and hospitalized victims of the virus. He has stubbornly refused to acknowledge a mountain of evidence proving [home, outpatient actions by doctors](#) keeps people well and out of hospital. Here are examples of important data.

In those countries with wide early use of HCQ the death rate is [71 percent lower](#) than in those nations, like the US, where its use has been limited by government. Close to 600,000 people have been saved worldwide. The data imply a saving of over 150,000 US lives, a figure that will increase as the number of deaths, sadly, keeps increasing without using home/outpatient use of HCQ.

Recently **Dr. Harvey Risch** [said](#): “Many or most of the 220,000 deaths in the United States to date could have been prevented by widespread HCQ use that the FDA blocked. It is the FDA that is responsible for these deaths, not the president.” But Fauci is the power behind the throne, dictating FDA actions.

Frontline doctor **Brian Tyson** [said](#) that he has cured over 1,900 patients, and has said that between 75 and 80 percent of the over 200,000 deaths thus far could have been prevented by using HCQ!

A [White Paper](#) by **Dr. Simone Gold** concluded: “What we do know is that 70,000-100,000 excess American lives have been lost due to lack of access to HCQ.” The best website to

help people get the proven early home care remedy is [America Front Line Doctors](#).

**Dr. Zev Zelenko** a pioneer in using a HCQ cocktail, including zinc, that cut hospitalizations by 84 percent, started a [petition](#) in October, naming Fauci and other government officials who blocked HCQ use in March, noting: “Over 160,000 people were hospitalized and died unnecessarily. Let’s make life saving treatment available and end the pandemic. Let’s bring these criminals to justice.” Will this petition work? Not likely.

Another [petition](#) effort by top Texas doctors in July together with a direct request to FDA to unblock access to HCQ failed. This was emphasized: “At a statistically significant level, early-use hydroxychloroquine alone was associated with a 51 % reduction in the mortality rate of COVID patients receiving an early five-day course of hydroxychloroquine.”

A [lawsuit](#) by the Association of American Physicians and Surgeons against the FDA aims at releasing the federal HCQ stockpile. It makes the point: “They care more about their power over the HCQ Stockpile than the lives being lost daily without access to it.” Also: “Foreign countries have kept their mortality rates far lower – sometimes 90% lower – than the United States’ rate, by encouraging use of HCQ.”

And this group has published the excellent “[A Guide to Home-Based COVID Treatment](#)” that embraces early use of a HCQ cocktail. It makes this key point: “Zinc is critical. It helps block the virus from multiplying. Hydroxychloroquine is the carrier taking zinc INTO the cells to do its job.” Another key point: “During the ten days that Defendants took to file their mostly non-substantive opposition brief, roughly another 10,000 Americans died without timely access to HCQ.” Other drugs that also can be used early include: ivermectin, bromhexine, favipirivir, bamlanivimab, antibiotics, and steroids.

For early use of HCQ, [155 studies](#) have shown a 64 percent reduction in negative virus impacts, hospitalizations or deaths. Early treatment studies are 100 percent effective.

But Fauci gets away with not refuting specific data. And has prevented the federal stockpile of HCQ being used by frontline doctors. In a recent Fauci [article](#) this statement undercuts his persistent claim that only randomized clinical trials can prove HCQ safe and effective, a view that has been [thoroughly debunked](#): “Observational studies have substantial limitations but can be instructive.” Many of these support HCQ use.

The eminent **Dr. Peter McCullough** [got it right](#):

“HCQ was singled out as a political football early in spring. ... [Fauci’s] opposition has become a rallying cry of the left-leaning mainstream media’s ‘Hydroxy Hysteria.’ The politicization of HCQ is an ongoing tragedy.”

He got COVID-19 and used HCQ as part of his treatment protocol.

NIH officially [says](#) that it “does not recommend any specific antiviral or immunomodulatory therapy for the treatment of COVID-19” for non-hospitalized patients. This puts physicians in a terrible position who want to use what works. Moreover, over 40 state medical and pharmacy licensing boards and governors prohibit doctors from prescribing HCQ and patients from obtaining it.

Americans must understand that home/outpatient care is the missing, key element in the government’s management of the COVID-19 pandemic. They must shift their trust to

frontline doctors who have a weapon against the virus as the latest activity of America's Frontline Doctors [proclaimed](#).

The Economic Standard deeply [examined](#) HCQ and concluded:

“By systematically misrepresenting HCQ’s efficacy and safety for political ends, its opponents have deprived many tens of thousands of Americans of a potentially life-saving treatment and risk even more in the months and years to come. Members of the news media, public health community, and regulatory agencies must stop politicizing the use of this medicine...The burden of proof has been met. HCQ should be more widely recommended, prescribed and promoted to treat COVID-19 right now.

The main point regarding all these data and conclusions is that there is substantial evidence on the side of using HCQ and that the media-hyped meme that Fauci is a trusted expert is nonsense. In his [essay](#) “How Expert Worship Is Ruining Science” Pasha Kamyshev made this astute observation: “The debate over HCQ has both sides thinking the other is killing people. One side happens to be right. History will not judge those who were wrong on this very kindly.” To be crystal clear: Fauci is wrong. But as long as he prevails more people die unnecessarily every day.



2. In his emphasis on contagion control, Fauci continually promotes public fear, anxiety and loss of freedoms by promoting masks and lockdowns. Though necessary to some extent, it has failed in getting even close to ending the pandemic. An [insightful analysis](#) says it all in its headline: “Italy Did Everything Fauci Recommends. Now, They Have Near Record-Breaking Virus Numbers.” The New England Journal of Medicine received attention when it [said](#) in May: “wearing a mask outside health care facilities offers little, if any, protection from infection...universal masking alone is not a panacea ...masks serve symbolic roles.” Also in May, as to wearing masks, Fauci [said](#): “I think we should be recommending it.” But in October as soon as candidate Biden talked about a national mandate for masks, Fauci [said](#) it would be a “great idea” to have a national mask mandate. Moreover, Fauci also said that constitutional states’ rights helped explain why the pandemic was not being overcome.

3. **He is close to big drug companies** who want to make billions of dollars selling medicines, vaccines and treatments. Example: His pushing the expensive drug remdesivir for hospitalized patients only while ignoring home/outpatient care using inexpensive generic medicines. It can make billions of dollars for Gilead. The government [spent](#) at least \$70.5 million of taxpayer money on its development. He got the drug approved before usual phase 3 testing was completed, and paid for the clinical trial. Significantly, the NIH advisory panel that reviewed remdesivir for the FDA had, among 54 scientific panel members 18 with

financial ties to pharma companies

A recent [study](#) by WHO produced negative findings for this drug. Science Magazine did a thorough [examination](#) of remdesivir. Consistent with all of its findings is this: “The bottom line from the trials so far is there simply isn’t enough evidence that remdesivir works, says Jason Pogue, president of the Society of Infectious Diseases Pharmacists.”

A detailed [examination](#) of remdesivir concluded: “When you consider that Fauci, by virtue of being NIAID’s director, has a vested interest in the development of remdesivir, and that it was he who declared the results to be ‘highly significant,’ it certainly suggests that he, too, should be declaring a conflict of interest in remdesivir’s fate.” It is now fully approved for hospital use despite much [evidence](#) against it.

4. Fauci the fearmonger rarely provides relevant specific facts, numbers and details. He is a master of generalities and hedging language. He routinely emphasizes the number of rising cases but not the number of declining death rates as many people get cured naturally, and better hospital treatments curb deaths. Judy Mikovits who worked at NIH for many years [warned](#):, what Fauci “is saying is absolute propaganda.”

Fauci is brilliant at using soft language to deliver a hard blow. Recently, he [told](#) a conference of infectious disease experts that the covid pandemic is worse in the US because of a failure to avoid crowds. First, at least 20 countries have a higher death rate per number of confirmed cases. Second, Americans have more serious underlying health problems, such as obesity. heart problems, and diabetes, often with poor access to health care.

At another conference Fauci [emphasized](#) that it is “absolutely essential” to have full transparency, subtly criticizing President Trump for saying that early in the pandemic he did not want to panic everyone. Yet early on Fauci said wearing masks was not necessary. Later he said he was originally afraid of making it difficult for frontline health providers obtaining masks. So, his lack of transparency was okay.

5. As a globalist he has not condemned China for intentionally creating the global pandemic or the World Health Organization for its many failures. Fauci has had a long relationship with both China and the WHO. With an annual budget of near \$6 billion he has [funneled money](#) to help create the China Wuhan lab that produced COVID-19 (\$7.4 million). Early in the pandemic he [praised](#) China’s response efforts that WHO championed and China’s transparency, but this did not hold up under scrutiny. As a federal civil servant, he has not always put his country ahead of the interests of China and the WHO.

6. Fauci is a self-serving narcissist, now a household name. He uses every opportunity to keep his name ubiquitous. This is how he maintains power. He opines on all aspects of life, like advising Americans to not celebrate Thanksgiving with family. The highest paid federal employee - \$417,608 versus \$400,000 for the president - also makes big money, legally, in other ways. Ken McCarthy [revealed](#): “The Albany Medical Center gave him half a million dollars for ‘science innovation.’ Now, it just happens that Albany Medical Center lives on NIH grants.”

7. He poses as a public health official, but does not fully acknowledge all the negative impacts of actions he advocates. Particularly, he ignores many negative health impacts from contagion controls, especially lockdowns that seriously harm American society and economy. Neither is Fauci an epidemiologist. Trained as a physician, he is a super-

bureaucrat who has largely supplanted CDC, the Surgeon General and FDA. A new [investigation](#) revealed his power to control whether any vaccine gets approved or not. It noted “Dr. Anthony Fauci will see data from government-funded vaccine trials before the FDA does.”

8. He is the epitome of a deep state operative. Though on the White House pandemic task force he subversively undermines efforts by frontline doctors and the president. On an extensive interview on [CBS 60 Minutes](#) he complained about having constraints from the White House on media appearances. On 60 Minutes! He has opined against White House events being unsafe. But he did not condemn the many leftist [black lives matter] street protests and riots in many cities with huge numbers of people without masks in close proximity to each other.

Fauci [opined](#) recently that President Trump resuming in-person rallies is “asking for trouble.” But a recent [analysis](#) found that “there is no verifiable evidence to show that Trump rallies have meaningfully increased the spread of Covid-19.” [Emma Colton](#) put Fauci on the spot by getting him to refuse to criticize a large women’s march as a virus spreading event, in contrast to his widely spread comment criticizing a rather small White House event.

At a recent conference Dr. Fauci [said](#) that the first COVID-19 vaccines will aim to reduce symptoms but not necessarily prevent infection. This undermines President Trump’s emphasis on vaccine use as well as public interest in using a vaccine.

Fauci recently [said](#): “it will be easily be the end of 2021 and perhaps even into the next year before we start having some semblances of normality.” This undermines the positive stance of President Trump and cannot possibly make the public feel good.

9. With his huge annual budget of nearly \$6 billion, he dispenses about \$4 billion a year to outside people and groups. Many physicians and epidemiologists have widely divergent professional opinions. But they fear talking about Fauci and losing financial support. Several frontline doctors sent a [detailed letter](#) in August with many serious questions, but Fauci did not respond. One of those doctors observed “rigorous questioning of Dr. Fauci with challenges from his peers has never has occurred. Dr. Fauci’s opinions remain not only unchallenged, but those with opposing views are censored.”

10. Don’t be fooled by his grandfather demeanor. Recognize that he is a subversive collaborator with the leftist media campaign against President Trump. Worse, as a physician he has failed his oath to first do no harm. Daily, the mainstream media treat Fauci as a deity, but there have been some critics with wise observations, mostly in conservative media. These views counter the propaganda of the mainstream media.

Jim Hoft [said](#): “From the beginning of this pandemic Fauci has been completely misguided and inaccurate in his predictions and treatment of the Chinese COVID-19 virus.”

Brent Smith [asked](#) the right question: “How does Dr. Anthony Fauci still have a job? He’s part of the Inside-the-Beltway Deep State and has attempted to undermine the president since he was elevated to the position of Doctor COVID Know-it-All.”

Thomas Lifson made this wise [observation](#): “The suppression of the use of hydroxychloroquine in combination with zinc to treat COVID-19 amounts to the biggest



public health scandal since the Tuskegee Study.”

Stacey Lennox correctly [noted](#):

“Every possible outpatient treatment from HCQ to inhaled corticosteroids have been suppressed or ignored by the NIH and FDA and Dr. Fauci specifically. This dismissal of early outpatient treatment is unconscionable as is the suppression and silencing of clinicians who have observational data to share from caring for actual patients.”

On the FDA stopping HCQ use, Dr. Kristin Held, president of the American Association of Physicians and Surgeons, [said](#) it

“contributed to increased COVID cases and death.... Who bears responsibility for such evil? ...Dr. Fauci failed us. We were not prepared, and preparedness was his charge. He can no longer be trusted.”

But all these truth-telling efforts have, so far, failed to budge Fauci, FDA and NIH into a new position unblocking HCQ use for early home/outpatient use. Evidence of this failure is that on November 1 just ahead of the presidential election the [Washington Post](#) had a full-page story with the headline “Fauci offers blunt assessment of what lies ahead in U.S.” In it Fauci praised Biden’s approach over Trump’s, again revealing Fauci’s leftist commitment.

The next day the [Washington Post](#) had another full-page story on the White House bypassing FDA to distribute HCQ from the national stockpile. Only at the end of the story is there some limited attention to doctors using HCQ for treating COVID-19 patients, including 400,000 prescriptions for HCQ from May through August. At the same time another [Washington Post](#) story on the possible firing of Fauci after the presidential election does not justify it on the basis of his failure to save lives. All three articles miss the critical point. Missing from the official government-Fauci strategy is early home/outpatient treatment, as used successfully in some nations. This is being defeated by politics, not science. Would firing Fauci open the door for this missing approach?

A letter to the editor sent to the Post by three eminent doctors made this important observation: “Now Fauci is the architect of 200,000 needless deaths from COVID-19, while he pushed the approval of the now-discredited remdesivir by larding his review panels with inordinate members having economic ties to its manufacturer. There are clinically-established medications to treat COVID-19 immediately when it becomes symptomatic: hydroxychloroquine, ivermectin, bromhexine, faviprivir, bamlanivimab, antibiotics, steroids, zinc, vitamins, on-and-on. But Fauci did not direct NIH randomized trials of early use of these medications. Instead he gambled away millions of lives on a strategy of late-stage hospitalization with remdesivir and the rest of us sheltering in place in fear, waiting to be saved by a COVID-19 vaccine of unknown effectiveness.”

Need more proof that the pro-HCQ battle is being lost? The day before the first Post story a medical publication had an [article](#) by a senior doctor with impeccable credentials making the point that studies on HCQ “conclusively demonstrated the drug’s lack of efficacy.”

In sum, Americans, including politicians, stop trusting Fauci if saving lives and preventing hospitalizations are paramount. Understand that he has cut medical freedom, preventing doctors from using their best judgment to keep patients healthy and out of hospital. Follow the science. Stop following Fauci. Stay with this question: How many more will die

unnecessarily due to not getting the available, proven treatment? Do not remain stuck on stupid.

\*

Note to readers: please click the share buttons above or below. Forward this article to your email lists. Crosspost on your blog site, internet forums. etc.

***Dr. Hirschhorn** has long worked on health issues, including being a full professor at the University of Wisconsin, Madison, directing a research program between the colleges of engineering and medicine; also, a senior official at the Congressional Office of Technology Assessment and the National Governors Association. He has authored a number of books and hundreds of articles and has served as an executive volunteer at a major hospital for over ten years. He is active with a network of physicians and epidemiologists advocating early home/outpatient care to keep Americans out of hospital and is a member of the American Association of Physicians and Surgeons.*

*Featured image is from Wikimedia Commons*

The original source of this article is [The Unz Review](#)  
Copyright © [Joel S. Hirschhorn](#), [The Unz Review](#), 2020

---

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [Joel S. Hirschhorn](#)

**Disclaimer:** The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: [publications@globalresearch.ca](mailto:publications@globalresearch.ca)  
[www.globalresearch.ca](http://www.globalresearch.ca) contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: [publications@globalresearch.ca](mailto:publications@globalresearch.ca)