

Hospitalizations, Mortality Cut in Half after Brazilian City Offered Ivermectin to Everyone Pre-Vaccine

By [Zero Hedge](#)

Global Research, December 14, 2021

[Zero Hedge](#) 13 December 2021

Region: [Latin America & Caribbean](#)

Theme: [Science and Medicine](#)

All Global Research articles can be read in 51 languages by activating the “Translate Website” drop down menu on the top banner of our home page (Desktop version).

To receive Global Research’s Daily Newsletter (selected articles), [click here](#).

Visit and follow us on Instagram at [@crg_globalresearch](#).

Early on in the pandemic, before the vaccines were available, the Southern Brazilian city of Itajai offered Ivermectin as a prophylaxis against the disease.

Between July and December of 2020, roughly 220,000 people were offered a dose of 0.2mg/kg/day (roughly 18mg for a 200lb person) as an optional treatment for 2 days, once every two weeks.

133,051 people took them up on it, while 87,466 did not.

After analyzing the data, a team of researchers spanning several Brazilian institutes, the University of Toronto, and Columbia’s EAFIT concluded in a December [pre-print](#) study that hospitalization and mortality rates were cut in half over the seven month period among the Ivermectin group.

This is even more impressive when you learn the IVM users were older on average, with 30% >50 yo versus 20% for non-IVM users. The mortality reduction is even higher looking at different age groups. 85% for 31-49 yo and 59% for >50 yo. pic.twitter.com/K6D5naybCS

— Simon Vallée (@sival84) [December 11, 2021](#)

The authors adjusted for relevant confounding variables, including age, sex, medical history, previous diseases, and other conditions.

The analysis contradicts an October report by [Business Insider](#) which claims, based on a Brazilian ICU doctor’s *anecdotal evidence*, that the experiment was a failure.

Study limitations:

The authors note, “Being a retrospective observational analysis, it is uncertain whether results would be reproducible in a randomized, placebo-controlled, double-blind clinical trial, but likely, since groups of ivermectin users and non-users had similar demographic characteristics, and rates were adjusted for the relevant confounding variables.”

We’re sure the ‘fact checkers’ are already hard at work trying to debunk the pre-print, however they may also want to take a look at ivmmeta.com – a real-time meta analysis of 70 studies which found that Ivermectin works as a prophylaxis 83% of the time. In peer-reviewed studies, it was found effective 70% of the time as an early treatment, and just 39% of the time as a late treatment.

As we noted during the whole ‘horse paste’ controversy:

Ivermectin

This widely prescribed anti-parasitic which is *also* used in horses has shown meaningful efficacy worldwide in the treatment of mild and moderate cases of Covid-19, plus as a prophylactic. India’s Uttar Pradesh province, with a population of over 200 million, says that widespread early use of Ivermectin ‘helped keep positivity [and] deaths low.’



Separately, there have been several studies funded by the Indian government, primarily conducted through their largest govt. public medical university (AIIMS).

- Role of ivermectin in the prevention of SARS-CoV-2 infection among healthcare workers in India: A matched case-control study ([source](#))

Conclusion: Two-dose ivermectin prophylaxis at a dose of 300 µg/kg with a gap of 72 hours was associated with a **73% reduction of SARS-CoV-2 infection among healthcare workers for the following month.**

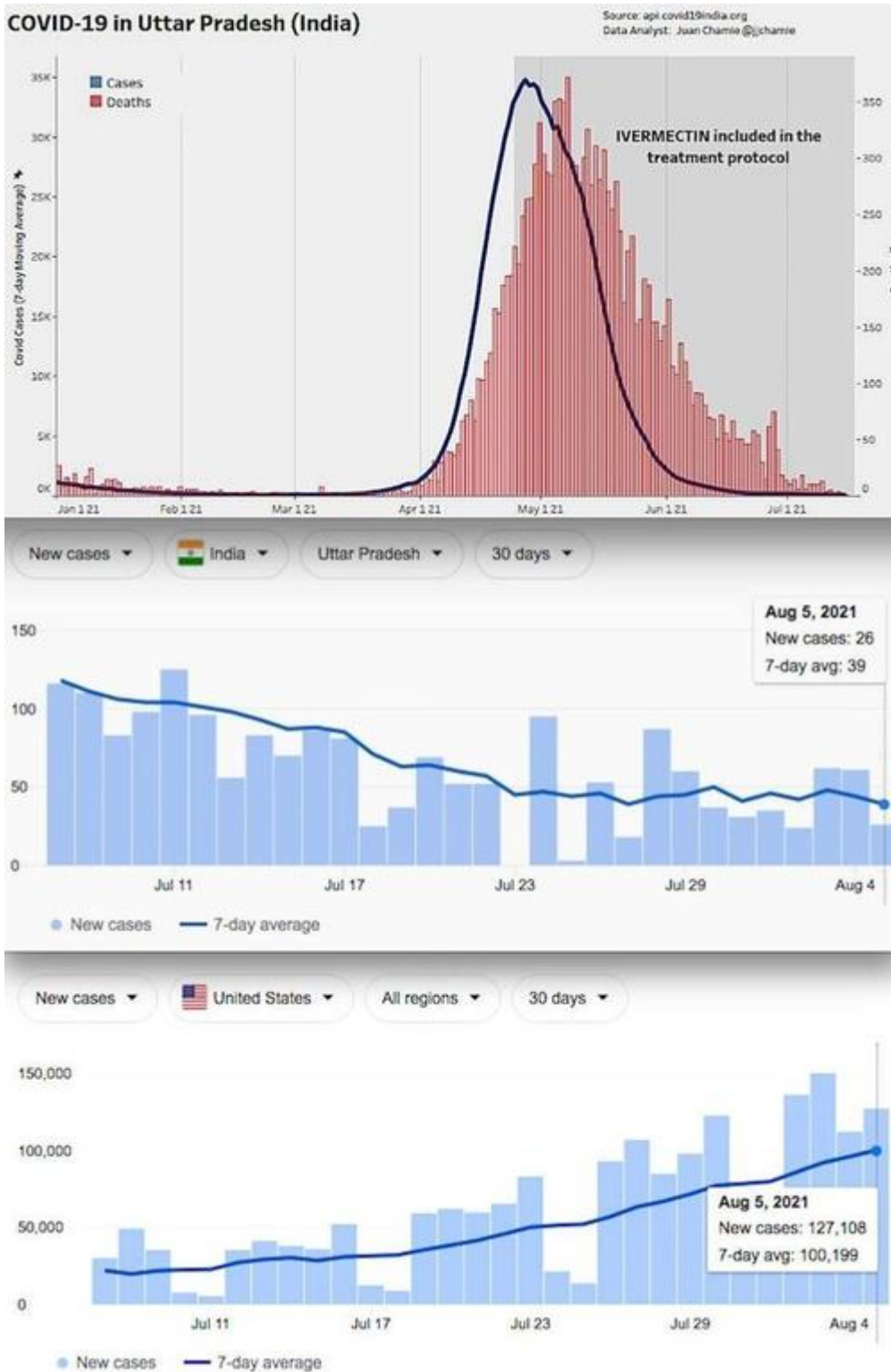
- Ivermectin as a potential treatment for mild to moderate COVID-19 – A double blind randomized placebo-controlled trial ([source](#))

Conclusion: There was no difference in the primary outcome i.e. negative RT-PCR status on day 6 of admission with the use of ivermectin. However, a **significantly higher proportion of patients were discharged alive from the hospital when they received ivermectin.**

- Clinical Research Report Ivermectin in combination with doxycycline for treating

COVID-19 symptoms: a randomized trial ([source](#), double-blind randomized, peer-reviewed)

Discussion: In the present study, patients with **mild or moderate COVID-19 infection** treated with ivermectin in combination with doxycycline **generally recovered 2 days earlier than those treated with placebo**. The proportion of patients responding within 7 days of treatment was significantly higher in the treatment group than in the placebo group. The proportions of patients who remained symptomatic after 12 days of illness and who experienced disease progression were significantly lower in the treatment group than in the placebo group.



Here are more human studies from other countries on the 'horse dewormer':
 Peru:

- Sharp Reductions in COVID-19 Case Fatalities and Excess Deaths in Peru in Close Time Conjunction, State-By-State, with Ivermectin Treatments ([source](#), peer-reviewed, **University of Toronto**, Universidad EAFIT)

For the 24 states with early IVM treatment (and Lima), **excess deaths dropped 59% (25%) at +30 days and 75% (25%) at +45 days after day of peak deaths**. Case fatalities likewise dropped sharply in all states but Lima

Spain:

- The effect of early treatment with ivermectin on viral load, symptoms and humoral response in patients with non-severe COVID-19: A pilot, double-blind, placebo-controlled, randomized clinical trial ([source](#), **University of Barcelona**, peer-reviewed)

Findings: Patients in the ivermectin group recovered earlier from hyposmia/anosmia (76 vs 158 patient-days; $p < 0.001$).

Bengladesh:

- A Comparative Study on Ivermectin-Doxycycline and Hydroxychloroquine--Azithromycin Therapy on COVID-19 Patients ([source](#) - peer reviewed, though not govt funded)

Conclusion: According to our study, the Ivermectin-Doxycycline combination therapy has better symptomatic relief, shortened recovery duration, fewer adverse effects, and superior patient compliance compared to the Hydroxychloroquine-Azithromycin combination. Based on this study's outcomes, **the Ivermectin-Doxycycline combination is a superior choice for treating patients with mild to moderate COVID-19 disease.**

- A five-day course of ivermectin for the treatment of COVID-19 may reduce the duration of illness ([source](#), peer-reviewed double blind randomized, though small sample size)

Discussion: A 5-day course of ivermectin resulted in an earlier clearance of the virus compared to placebo ($p = 0.005$), thus indicating that early intervention with this agent may limit viral replication within the host. In the 5-day ivermectin group, there was a significant drop in CRP and LDH by day 7, which are indicators of disease severity.

Why does Ivermectin, a 'horse dewormer' work? For starters, it's a protease inhibitor. Interestingly, Pfizer's 2x/day Covid-19 prophylactic they're trialing right now is [also a protease inhibitor](#).

PFIZER INITIATES PHASE 1 STUDY OF NOVEL ORAL ANTIVIRAL THERAPEUTIC AGENT AGAINST SARS-COV-2

Tuesday, March 23, 2021 - 11:00am

- *In-vitro* studies conducted to date show that the clinical candidate PF-07321332 is a potent **protease inhibitor** with potent anti-viral activity against SARS-CoV-2
- This is the first orally administered coronavirus-specific investigational protease inhibitor to be evaluated in clinical studies, and follows Pfizer's intravenously administered investigational *protease inhibitor*, which is currently being evaluated in a Phase 1b multi-dose study in hospitalized clinical trial participants with COVID-19

NEW YORK--
doses in a PI
COVID-19. Th
demonstrat
as well as p
"Tackling the
and the cont
Dolsten, MD
therapy that
antiviral can
complement
Protease inh
pathogens s
generally as
The Phase 1
tolerability a
Initiation of
to inhibit res
Chemical So
Pfizer is also
clinical trial
About Pfizer

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7996102/>

Future Virol, 2021 Mar ; 10:2217/doi:10.2217/fv.2020-0342
Published online 2021 Mar 25. doi: 10.2217/fv.2020-0342

PMCID: PMC7996102

Exploring the binding efficacy of ivermectin against the key proteins of SARS-CoV-2 pathogenesis: an *in silico* approach

Abhijyan Choudhury,^{1,2} Nabhan C. Das,^{1,2} Rishik Patra,^{1,2} Manojit Bhattacharya,² Pratik Ghosh,³ Bidhan C. Patra,³ and Suprabhat Mukherjee^{1,2}

• Author information • Article notes • Copyright and License information • Disclaimer

Associated Data

• Supplementary Materials

Abstract

Aim: COVID-19 is currently the biggest threat to mankind. Recently, ivermectin (a US FDA-approved antiparasitic drug) has been explored as an anti-SARS-CoV-2 agent. Herein, we have studied the possible mechanism of action of ivermectin using *in silico* approaches. **Materials & methods:** Interaction of ivermectin against the key proteins involved in SARS-CoV-2 pathogenesis were investigated through molecular docking and molecular dynamic simulation. **Results:** Ivermectin was found as a blocker of viral **replicase, protease and human TMPRSS2**, which could be the biophysical basis behind its antiviral efficiency. The antiviral action and ADMET profile of ivermectin was on par with the currently used anticonvulsant drugs such as hydroxychloroquine and remdesivir. **Conclusion:** Our study enlightens the candidature of ivermectin as an effective drug for treating COVID-19.

Keywords: ivermectin, molecular docking, protease, replicase, SARS-CoV-2, spike glycoprotein

of single ascending
he virus that causes
ator¹, has
reatment of COVID-19
SARS-CoV-2 is mutating
endemic," said Mikael
s a potential oral
r's intravenous
ent paradigm that
at treating other viral
teases are not
ting the safety,
designed specifically
the Spring American
rial in hospitalized

Perhaps the most damning evidence in favor of Ivermectin is the medical establishment's position that it's essentially snake oil, despite the fact that it's had a glowing safety profile for decades, *until now*.

*

Note to readers: Please click the share buttons above or below. Follow us on Instagram, @crg_globalresearch. Forward this article to your email lists. Crosspost on your blog site, internet forums, etc.

The original source of this article is [Zero Hedge](#)
Copyright © [Zero Hedge](#), [Zero Hedge](#), 2021

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

[Become a Member of Global Research](#)

Articles by: [Zero Hedge](#)

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
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