

# Huge Uptick in Ivermectin Use Is Causing Profit-driven Big Pharma to Sell Patented Copycat Pills

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*I am confident in predicting that as more and more bad news about the ineffectiveness and dangerous side effects of COVID vaccines become increasingly known to more of the public, the big drug companies will increasingly switch from vaccines to prescription antiviral medicines.*

The unrelenting opposition to using ivermectin to treat and prevent COVID-19 is stronger than ever. This has resulted from a gigantic increase in demand for IVM by much of the public. Despite big media tirades against IVM, the truth about its effectiveness (together with failure of COVID vaccines) has reached the public through many articles on alternative news websites and truth-tellers on countless podcasts. Its success has forced Big Pharma to create expensive copies of it.

Monthly IVM prescriptions [increased](#) 72 percent from 39,864 in 2019 to 68,428 in 2021 (through May). Just when COVID vaccination started to be pushed in January 2021 prescriptions hit a high of 97,192. A number of medical specialties greatly increased off-label use of IVM for fighting COVID in this period: anesthesiology, 1,319%; pulmonology, 1,167%; cardiology, 741%, for example. Strong support by physicians for IVM to cure and prevent COVID.

And in my book [Pandemic Blunder](#) I made the case with data that using cheap, safe and effective generics like IVM and hydroxychloroquine would prevent 80% or more of COVID deaths. Esteemed physician Peter McCollough later said 85%. For the U.S., that means some 600,000 lives could have been saved, and globally over 4 million lives. Meanwhile, hundreds of thousands of people worldwide have also died from COVID vaccines, the failed solution to the pandemic.

Merck, a maker of IVM, is getting much positive press coverage for its forthcoming prescription oral antiviral (molnupiravir). It is designed to replace IVM, which they cannot make big money from. The FDA will soon give it emergency use authorization because of the emerging clarity that COVID vaccines do NOT work effectively or safely.

That the Washington Post says that what Merck has created is the “first covid-fighting pill” illustrates how awful big media has been in ignoring the proven benefits of the IVM and HCQ generics. And in ignoring the many failures of COVID vaccines. In its October 2 front page story on the new Merck pill, it did not even mention IVM or present any data showing IVM as proven even more effective than the new expensive drug tested on only hundreds of people for a short period. In contrast, IVM has been used successfully on hundreds of thousands of people to treat and prevent COVID.

Speaking as someone who is using IVM as a prophylactic, here is what I have seen in recent times. Though getting a prescription for it is very difficult and stressful it can be done through a number of websites. But then the battle just begins. Many pharmacies, especially big chain ones, will not fill IVM prescriptions if there is any evidence that it is being used to fight COVID. And then you will likely discover, as I did, that virtually no pharmacy (typically small community ones) that will fill such prescriptions has any IVM. That’s right. There is a national shortage of IVM because of huge demand in recent months and because U.S. makers have not escalated production.

Probably, millions of vaccine resisters are using IVM, especially those resisting booster shots.

Can you still get it? Yes, and even without a prescription. It will have to come from India, with many makers of IVM. It can take many weeks to get it. But the cost is a tiny fraction of what U.S. pharmacies have been charging when they did have it in stock. Rather than \$4 or \$5 for a 3 mg pill, you can buy 12 mg pills for way under \$1 a pill.

But there is more to the IVM story.

There is absolutely no doubt whatsoever that there is massive medical science data showing absolute reliable data that IVM is safe and effective for both treating and preventing COVID. This is what should be a bold large headline in newspapers if we had honest big media: IVM SAFE AND EFFECTIVE ALTERNATIVE TO COVID VACCINES.

But instead, there is a constant barrage of articles and statements from government agencies asserting IVM should not be used to fight COVID. They argue it is unsafe and ineffective. Both are lies aimed solely at protecting the mass vaccination effort and the profits of big drug companies. And now protecting the new Big Pharma market for antiviral pills.

FDA has [issued](#) very strong warnings against using IVM for COVID. Nothing it has said follows the true science and mountains of data supporting safe and effective IVM use. Like other IVM opponents, it has conflated personal IVM use with the use of IVM products designed for animals.

This is even more infuriating. Merck, despite being a maker of IVM discredited its use for COVID by [irresponsibly stating](#), “We do not believe that the data available support the safety and efficacy of ivermectin beyond the doses and populations indicated in the regulatory agency-approved prescribing information.”

Clearly, Merck, Pfizer and other vaccine makers are developing their own oral antivirals to [directly compete](#) with the cheap and effective IVM. These antivirals, unlike cheap generic IVM, would be patented so expensive pills could be sold worldwide. They will find some

ingenious ways to copy IVM but make enough changes to get patents.

Already, Merck has begun production of its new pill to be taken twice daily for five days. Even more significant: The U.S. government has made an advance purchase of 1.7 million treatment courses for \$1.2 billion! That is over \$700 per treatment. So much more profitable than making IVM. Forget the billions of dollars spent on vaccines that are injuring and killing many people.

I am confident in predicting that as more and more bad news about the ineffectiveness and dangerous side effects of COVID vaccines become increasingly known to more of the public, the big drug companies will increasingly switch from vaccines to prescription antiviral medicines. This is what smart corporate business strategic planning is all about. With Merck, it has already started. And FDA, CDC and NIH will go along with this strategic switch.

This will preserve a trillion-dollar market for pharmaceutical companies. How the government and public health establishment weasel word their switch from COVID vaccines to antiviral pills will be a marvelous magical trick to watch. Do you think that they will admit that millions of people worldwide have lost their health and lives from vaccine use? Of course not. Expensive antiviral pills will simply be sold as a better solution.

Be clear about the science explaining why IVM and HCQ have worked. They both (along with zinc) interfere at the earliest stage of COVID infection with viral replication. Stops infection in its tracks. They work as prophylactics for the same reason. If you keep a modest amount of IVM and HCQ in your body (and take zinc, vitamins C and D, and quercetin), any virus that enters your body can be stopped before major viral replication. The new prescription medicines coming from Merck and other Big Pharma are designed to serve the same function as the cheap generics.

This is the big truth coming to fruition: All the emerging information on COVID vaccine ineffectiveness and dangerous and often lethal side effects is forcing a major strategic shift to antivirals.

Congressman Louie Gohmert has recently [made](#) a number of solid observations about IVM:

[Almost 4 billion doses](#) of ivermectin have been prescribed for humans, not horses, over the past 40 years. In fact, the [CDC recommends](#) all refugees coming to the U.S. from the Middle East, Asia, North Africa, Latin America, and the Caribbean receive this so-called dangerous horse medicine as a preemptive therapy. Ivermectin is considered by the World Health Organization (WHO) to be an “essential medicine.” The Department of Homeland Security’s “quick reference” tool on COVID-19 [mentioned](#) how this life-saving drug reduced viral shedding duration in a clinical trial.

To date, there are at least 63 trials and 31 randomized controlled trials showing benefits to the use of ivermectin to fight COVID-19 prophylactically as well as for early and late-stage treatment. Ivermectin has been [shown to inhibit](#) the replication of many viruses, including SARS-CoV-2. It has strong anti-inflammatory properties and prevents transmission of COVID-19 when taken either before or after exposure to the virus.

Ivermectin also speeds up recovery and decreases hospitalization and mortality in COVID-19 patients. It has been FDA approved for decades and has very few and mild side effects. It has an average of 160 adverse events reported every year, which

indicates ivermectin has a better safety record than several vitamins. In short, there is no humane, logical reason why it should not be widely used to fight against the China Virus should a patient and doctor decide it is appropriate to try in that patient's case.

And that small number of adverse events pales in comparison to hundreds of thousands for COVID vaccines.

A new, comprehensive report noted that 63 studies have confirmed the effectiveness of IVM in treating COVID-19. There's a great [website](#) to see positive IVM data.

And consider what former Director of Intellectual Property at Gilead Pharmaceuticals, Brian Remy, [said](#) about the necessity of implementing ivermectin. "It is simple — use what works and is most effective — period. Ivermectin used in combination with other therapeutics is a no-brainer and should be the standard of care for COVID-19. Not only would this be good for business and help avoid the criticism and bad PR, and potential civil/criminal liability for censorship, scientific misconduct, etc. for misrepresentation of Ivermectin and other generics, but most importantly it would save countless lives and end the pandemic for good." Amen.

Want even more positive facts? Consider the India experience. In India's deadly second pandemic surge, ivermectin obliterated their crisis. Within weeks after adopting IVM cases were down 90%. Those states with more aggressive IVM use were down more dramatically. Daily cases in Goa, Uttarakhand, Uttar Pradesh, and Delhi were down 95%, 98%, 99%, 99%, respectively.

And appreciate this: Dr. Kory and the FLCCC [published a narrative review](#) in May 2021, showing the massive effectiveness of IVM against COVID-19 in reducing death and cases. They concluded that it must be adopted globally immediately. Yet big media without respect for public health waged war against IVM. Now it is going crazy in support of the expensive Merck antiviral pill.

To sum up: The IVM story is far from over. We now have a pandemic of the vaccinated. From all over the world the fractions of people said to have died from COVID who were fully vaccinated are very high, often 80%. Many people with breakthrough COVID infections die. Blame those deaths on the vaccines. Big media suppresses all the negative information on the vaccines and all the positive information on IVM. This double whammy is pure evil. It is designed to pave the way for the new, expensive generation of antiviral pills once the medical and public health establishments backtrack from their vaccine advocacy and coercion.

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