

Secret Documents Reveal FDA's Attack on Ivermectin

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Global Research, October 25, 2021

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Region: [USA](#)

Theme: [Media Disinformation](#), [Science and Medicine](#)

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Mainstream media have incorrectly insinuated that ivermectin is purely a veterinary drug that could be dangerous to humans; CNN falsely stated that Joe Rogan took “horse dewormer”

Rogan recently interviewed CNN’s chief medical correspondent Dr. Sanjay Gupta, getting him to admit CNN lied

The FDA started the “horse dewormer” fallacy based on a Mississippi health department report that said 70% of poison control calls were related to veterinary ivermectin. It was actually 70% of ivermectin-related calls, six in all, four of which were about accidental use of ivermectin in livestock. Overall, these calls made up only 2% of all poison control calls

A total of 20 deaths have been linked to ivermectin since 1992. Compare that safety profile to Remdesivir, the primary drug used by hospitals across the U.S. against COVID-19. Since the spring of 2020, VigiAccess has received 7,491 adverse events in all attributed to the drug, including 560 deaths, 550 serious cardiac disorders and 475 acute kidney injuries

Nebraska Attorney General Doug Peterson has issued a legal opinion on the off-label use of ivermectin and hydroxychloroquine for COVID-19. According to this legal opinion, health care providers in Nebraska can legally prescribe these medications for off-label use for the treatment of COVID, provided they have informed consent from the patient. The only causes for disciplinary action are failure to obtain informed consent, deception and/or prescribing excessively high doses

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In early September 2021, Oklahoma’s KFOR news ran a falsified story about emergency rooms being overrun with patients who had overdosed on horse ivermectin.¹ Other mainstream media followed suit — all incorrectly referring to ivermectin as a dangerous

veterinary drug.

In the real world, ivermectin is a human drug that has been safely used by 3.7 billion people since the early 1990s.² In 2016, three scientists received the Nobel Prize in physiology or medicine for their discovery of ivermectin against parasitic infections in humans.³ It's also on the World Health Organization's list of essential medicines.⁴

There's absolutely no reason whatsoever to disparage ivermectin as a "horse dewormer" that only a loony person would consider taking. Yet that's what mainstream media have done, virtually without exception.

When comedian and podcast host **Joe Rogan** revealed⁵ he'd treated his bout of COVID-19 with ivermectin and other remedies — fully recovering within three days — NPR reported Rogan had taken "ivermectin, a deworming veterinary drug that is formulated for use in cows and horses," adding that "the Food and Drug Administration is urging people to stop ingesting" the medication, saying animal doses of the drug can cause nausea, vomiting and in some cases severe hepatitis.⁶

Sanjay Gupta Admits CNN Lied

CNN, among many others, also reported on Rogan's use of "horse dewormer." In mid-October 2021, Rogan interviewed CNN medical correspondent **Dr. Sanjay Gupta**, grilling him on why CNN would outright lie about his use of ivermectin.

"It's a lie on a news network," Rogan said, "and it's a lie that they're conscious of. It's not a mistake. They're unfavorably framing it as a veterinary medicine ...

Don't you think a lie like that is dangerous ... when they know they're lying? They know I took medicine [for humans] ... Dude, they lied. They said I was taking horse dewormer. It was prescribed to me by a doctor, along with a bunch of other medications."

Gupta finally relents and agrees that ivermectin should not be called horse dewormer. When asked, "Does it bother you that the news network you work for out and out lied about me taking horse dewormer?" Gupta replied, "They shouldn't have said that."

When asked why they would lie about such an important medical issue, Gupta replied "I don't know." Gupta also admits he never asked why they did it, even though he's their top medical correspondent.

FDA Attacks Ivermectin

While CNN and mainstream media are certainly at fault for spreading disinformation here, they got the idea from a supposedly reputable source — the FDA. In an August 21, 2021, tweet,⁷ the FDA linked to an agency article warning against the use of ivermectin, saying "You are not a horse. You are not a cow. Seriously, y'all. Stop it."

This blatantly misleading post seeded the lie that then spread across mainstream media. In an article posted on RESCUE with Michael Capuzzo substack, two independent investigative health journalists, Mary Beth Pfeiffer and Linda Bonvie, detail how the FDA's anti-ivermectin

campaign began:⁸

“Within two days, 23.7 million people had seen that Pulitzer-worthy bit of Twitter talk. Hundreds of thousands more got the message on Facebook, LinkedIn, and from the Today Show’s 3 million-follower Instagram account.

‘That was great!’ declared FDA Acting Commissioner Janet Woodcock in an email to her media team. ‘Even I saw it!’ For the FDA, the ‘not-a-horse’ tweet was ‘a unique viral moment,’ a senior FDA official wrote to Woodcock, ‘in a time of incredible misinformation’ ...

When CNN retweeted ‘not-a-horse,’ FDA was gleeful. ‘The numbers are racking up and I laughed out loud,’ wrote FDA Associate Commissioner Erica Jefferson in one email ... There was one problem, however. The tweet was a direct outgrowth of wrong data — call it misinformation — put out the day before by the Mississippi health department.

The FDA did not vet the data, according to our review of emails obtained under the Freedom of Information Act and questions to FDA officials. Instead, it saw Mississippi, as one email said, as ‘an opportunity to remind the public of our own warnings for ivermectin.’”

The now infamous tweet was born out of a single sentence in a Mississippi poison control health alert, which stated that “At least 70% of the recent calls have been related to ingestion of livestock or animal formulations of ivermectin purchased at livestock supply centers.” The problem? That wasn’t accurate either.

Much Ado About Nothing

As it turns out, the real percentage of recent calls to poison control related to veterinary ivermectin was 2%, not 70%. In an October 5, 2021, correction, the Mississippi health department clarified that it wasn’t 70% of all poison control calls that involved veterinary ivermectin, it was 70% of all ivermectin-related calls.⁹

In absolute numbers, there were six such calls, and four of those calls actually related to livestock accidentally receiving the drug. Investigation by Pfeiffer and Bonvie also revealed that between July 31 and August 22, 2021, 40%, 10 of 24 ivermectin-related calls to the Mississippi poison control center were mere requests for information, which is a common occurrence.

“Without question, people should not take drugs made for animals, given issues of dosing and medical oversight, to name just two. That much is clear,” Pfeiffer and Bonvie write.¹⁰

“But in hopping on the Mississippi bandwagon, the FDA ... turned ivermectin, which doctors and health ministers in several countries say has saved many from covid-19, into a drug to be feared, human form or not.

This highly effective bait-and-switch began last March with a webpage, to which the FDA tweet linked, that conflates the two ivermectins. On one hand, the FDA tells of receiving ‘multiple reports of patients who have required medical attention’ after taking the animal product.

On the other, it describes the fate awaiting people who take large amounts of any ivermectin, ending a long list with ‘dizziness, ataxia, seizures, coma and even death.’

The medical literature,¹¹ nonetheless, shows ivermectin to be an extremely safe medicine ... Last March, a safety review¹² of ivermectin by a renowned French toxicologist could not find a single accidental overdose death in the medical literature in more than 300 safety studies of the drug over decades.

The study was performed for MedinCell, a French pharmaceutical company ... Since 1992, twenty deaths have been linked to inexpensive, off-patent ivermectin, according to a World Health Organization drug tracker called VigAccess ...

So how big was the surge that FDA described as ‘multiple’? Four, an agency spokesperson said just after the page went up. Three people were hospitalized, but it wasn’t clear if that was for COVID itself.

When pressed for details, FDA cited privacy issues, and said in an email, ‘Some of these cases were lost to follow up.’ This is how government gets away with some whoppers, and with the media’s help.”

Ivermectin Is Safe; Remdesivir, Not so Much

According to VigAccess, the World Health Organization’s drug tracker, a total of 20 deaths have been linked to ivermectin since 1992.¹³ Compare that safety profile to remdesivir, the primary drug used by hospitals across the U.S. against COVID-19.

Since the spring of 2020, VigAccess has received 7,491 adverse events in all attributed to remdesivir, including 560 deaths, 550 serious cardiac disorders and 475 acute kidney injuries.¹⁴

The question is why remdesivir is being used at all, with the World Health Organization recommending¹⁵ against it and a new Lancet study¹⁶ finding “no clinical benefit.” Could it be that Fauci is involved with the fraud? Pfeiffer and Bonvie write.^{17,18}

“The other question is why ivermectin is not. The FDA tweet arrived just as ivermectin prescriptions were soaring, up twenty-four-fold in August from before the pandemic.

These were legal prescriptions written by doctors who, presumably, had read the studies, learned from experience, and decided for themselves. Indeed, 20 percent of prescriptions are written off-label,¹⁹ namely for other than an approved use.

The effort to vilify ivermectin broadly has helped curb the legal supply of a safe drug. That’s what drove people to livestock medicine in the first place.”

State AG Calls Out Medical Establishment for Misinformation

In better news, in early October 2021, the Nebraska Department of Health asked Nebraska Attorney General Doug Peterson to issue a legal opinion on the off-label use of ivermectin and hydroxychloroquine for COVID-19.

October 15, 2021, Peterson issued a legal opinion^{20,21} stating health care providers can legally prescribe these medications for off-label use for the treatment of COVID, provided they have informed consent from the patient.²² The only causes for disciplinary action are failure to obtain informed consent, deception and/or prescribing excessively high doses.

Peterson concluded that, based on the available evidence, hydroxychloroquine and ivermectin “might work for some people.”

He highlighted studies demonstrating the safety and benefits of these drugs against COVID-19, as well as the shocking scientific fraud that led to worldwide shunning of hydroxychloroquine, and the cherry-picking and exclusion of data in studies that are critical of ivermectin. He also pointed out how illogical it is to discourage early treatment.

“Allowing physicians to consider these early treatments will free them to evaluate additional tools that could save lives, keep patients out of the hospital, and provide relief for our already strained healthcare system,” Peterson wrote.^{23,24}

Peterson also called out the FDA and Dr. Anthony Fauci on their hypocrisy, detailing how the FDA and National Institutes of Health seeded confusion by issuing contradictory guidance. The NIH has taken a neutral position to ivermectin, which Peterson “clearly signaled that physicians should use their discretion in deciding whether to treat COVID-19 patients with ivermectin.”

Without reviewing the available data, which had long since been available and accumulating, it is unclear what basis the FDA had for denouncing ivermectin as a treatment or prophylaxis for COVID-19. ~ Doug Peterson, Nebraska Attorney General

NIH officials, however, have ignored the agency’s official position. At the end of August 2021, Fauci “went on CNN and announced that ‘there is no clinical evidence’ that ivermectin works for the prevention or treatment of COVID-19,” and that ‘there is no evidence whatsoever’ that it works,” Peterson writes, adding:

“Yet this definitive claim directly contradicts the NIH’s recognition that ‘several randomized trials ... published in peer-reviewed journals’ have reported data indicating that ivermectin is effective as a COVID-19 treatment.”

AG Blames FDA for Seeding Confusion

Peterson goes on to review the FDA’s behavior with respect to ivermectin:

“The FDA has similarly charted a course of confusion. In March 2021, the FDA posted a webpage entitled ‘Why You Should Not Use Ivermectin to Great or Prevent COVID-19.’

Although the FDA’s concern was stories of some people using the animal form of ivermectin or excessive doses of the human form, the title broadly condemned any use of ivermectin in connection with COVID-19.

Yet there was no basis for its sweeping condemnation. Indeed, the FDA itself acknowledged on that very webpage (and continued to do so until the page changed on September 3, 2021) that the agency had not even ‘reviewed data to support use of ivermectin in COVID-19 patients to treat or prevent COVID-19.’

But without reviewing the available data, which had long since been available and accumulating, it is unclear what basis the FDA had for denouncing ivermectin as a treatment or prophylaxis for COVID-19.”

Peterson also highlights the fact that while the FDA claims ivermectin “is not an antiviral (a drug for treating viruses),” on another FDA webpage they list a study in Antiviral Research that “identified ivermectin as a medicine ‘previously shown to have broad-spectrum antiviral activity.’”

“It is telling that the FDA deleted the line about ivermectin not being ‘anti-viral’ when it amended the first webpage on September 3, 2021,” Peterson writes.

He also points out that while the FDA now claims off-label use of drugs “can be very dangerous,” and that this is why they don’t recommend ivermectin for COVID, doctors routinely use drugs off-label, and ivermectin has a well-established safety record.

So, “it is inconsistent for the FDA to imply that ivermectin is dangerous when used to treat COVID-19 while the agency continues to approve remdesivir despite its spottier safety record,” Peterson writes.

AG Puts Professional Associations Under the Microscope

Peterson also questioned the stance of professional associations such as The American Medical Association, American Pharmacists Association and American Society of Health-System Pharmacists, which in September 2021 issuing a joint statement²⁵ opposing the use of ivermectin to prevent or treat COVID outside of clinical trials.

Their statement, Peterson points out, relied on the FDA’s and CDC’s “suspect positions,” and a statement by Merck, in which they opposed the use of the drug due to a “concerning lack of safety data in the majority of studies.”

“But Merck, of all sources, knows that ivermectin is exceedingly safe, so the absence of safety data in recent studies should not be concerning to the company,” Peterson writes, adding:

“Why would ivermectin’s original patent holder go out of its way to question this medicine by creating the impression that it might not be safe? There are at least two plausible reasons.

First, ivermectin is no longer under patent, so Merck does not profit from it anymore. That likely explains why Merck declined to ‘conduct clinical trials’ on ivermectin and COVID-19 when given the chance.

Second, Merck has a significant financial interest in the medical profession rejecting ivermectin as an early treatment for COVID-19. [T]he U.S. government has agreed to pay [Merck] about \$1.2 billion for 1.7 million courses of its experimental COVID-19 treatment [molnupiravir], if it is proven to work in an ongoing large trial and authorized by U.S. regulators.

Thus, if low-cost ivermectin works better than, or even the same as molnupiravir, that could cost Merck billions of dollars.”

Another excellent article²⁶ detailing the FDA's questionable actions, and Merck's incentives to disparage their old drug, ivermectin, was published by the American Institute for Economic Research.

"While we can all be happy that Merck has developed a new therapeutic that can keep us safe from the ravages of Covid-19, we should realize that the FDA's rules give companies an incentive to focus on newer drugs while ignoring older ones," David Henderson, a senior fellow with AIERS, writes.²⁷

"Ivermectin may or may not be a miracle drug for Covid-19. The FDA doesn't want us to learn the truth. The FDA spreads lies and alarms Americans while preventing drug companies from providing us with scientific explorations of existing, promising, generic drugs."

Early Treatment Is Crucial

There's no doubt that many have died unnecessarily due to our health authorities' incomprehensible decision to discourage all prevention and early treatment of COVID-19. As noted by many doctors, early treatment is absolutely crucial for preventing hospitalization, death and long-term side effects of the infection.

There are several proven protocols to choose from at this point, including the following. Whichever treatment protocol you use, make sure you begin treatment as soon as possible, ideally at first onset of symptoms.

- The Zelenko protocol²⁸
- The MATH+ protocols²⁹
- Nebulized hydrogen peroxide, as detailed in Dr. David Brownstein's case paper³⁰ and Dr. Thomas Levy's free e-book, "[Rapid Virus Recovery](#)"

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Notes

¹ [KFOR September 1, 2021](#)

² [Newswise December 4, 2020](#)

³ [Nobelprize.org October 5, 2015](#)

⁴ [WHO Essential Medicines August 2015](#)

⁵ [YouTube Joe Rogan September 7, 2021](#)

⁶ [NPR September 1, 2021](#)

⁷ [FDA Twitter August 21, 2021](#)

^{8, 9, 10, 13, 17} [Rescue.substack.com](#)

^{11, 12} [Expert Review Report: Medical Safety of Ivermectin](#)

¹⁴ [Nebraska AG Opinion October 14, 2021, page 11](#)

¹⁵ [WHO November 20, 2020](#)

¹⁶ [The Lancet September 14, 2021](#)

¹⁸ [Pharmaceutical Fraud August 9, 2021](#)

¹⁹ [Congressional Research Service Off-Label Use of Prescription Drugs February 23, 2021](#)

^{20, 24} [Nebraska AG Opinion October 14, 2021](#)

²¹ [The Defender October 18, 2021](#)

^{22, 23} [KETV7 Omaha October 15, 2021](#)

²⁵ [AMA.org September 1, 2021](#)

^{26, 27} [AIER October 18, 2021](#)

²⁸ [Zelenko protocol](#)

²⁹ [Covid19criticalcare.com](#)

³⁰ [Science, Public Health Policy and The Law July 2020; 1: 4-22 \(PDF\)](#)

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