

## The McCullough Protocol: A Sequence Multidrug Therapy for COVID-19

# "Early treatment with Omicron can be done almost exclusively with over-the-counter solutions" - Dr. Peter McCullough

We're having the largest surge of COVID 19 that we've ever seen, and it's basically like the common cold. It is so transient, nasal congestion, fever, and viral malaise. And then it's over with very little pulmonary involvement, very little risk of hospitalization, and death.

There should be far less than a one percent chance of hospitalization and death with appropriate and really fairly minimal early treatment. So as long as we stay on the positive side of early treatment. Early treatment with Omicron can be done almost exclusively with over-the-counter solutions.

There's going to be a lot of spinoffs of the drugs we've used for COVID 19 and other applications. So for example, we're using now for modifying a histamine blocker for its antiviral effects as well as antihistamine effects. I think that's an innovative approach. We're using colchicine, a prior drug, but we're using it for its systemic inflammatory effects, particularly pleural pericardial involvement of SARS-CoV-2.

#### **Ivermectin**

Ivermectin, I think, is one of the most interesting because ivermectin has three separate mechanisms of action, and it's the only agent that actually directly antagonizes the spike protein. It impacts favorably, blocking to some degree the nuclear entry of the virus into the nucleus of the human cell. And then also, it favorably changes a whole variety of enzymes within the cell family of enzymes called kinases that allow the cell to better survive the basic onslaught of SARS-CoV-2 infection.

So ivermectin is used in parasitic infections with incredible success, including river blindness. We use it for scabies. We can use it in a variety of parasitic infections. And so because cancer in cancer and cancer spread involves processes of the cell to cell communication and what's called horizontal transfer of genetic material from cell to cell. It is conceivable that we've stumbled onto some incredible revelations with respect to the use of these drugs.

As we sit here today, our CDC nail care system, which is quite accurate, anticipates that 95 percent of all the infections in the United States are Omicron and data by Abdullah. Our colleagues from South Africa suggest the mortality rate, even for sick patients who

get to the hospital with Omicron, is one percent. And with our early treatment approach and early recognition, I would anticipate if we manage this correctly that we'll get to mortality with COVID 19 with far less than one percent.

#### **Povidone-iodine**

So if the virus is up in the nose, it is reasonable to actually kill the virus in the nose. And the question is, how do you kill it? We now know it can be killed with pervading iodide. It's sold as a liquid in a bottle that we use to sterilize wounds. That bulk distribution of it is a 10 percent solution. We can actually dilute that one to 10. So conveniently, that's half a teaspoon in a shot glass of water, which is point five CCS. And that solution, which should be the consistency of dark tea, can be squirted or sprayed up in the nose, sniffed back and then spit out very important and bring it all the way back and then spit it out and then do it twice on either side.

That's an effective nasal wash that is tremendously valuable for people to understand that can be used for common colds that can be used for bacterial sinusitis. Iodine kills germs. That's the reason why we use it to sterilize the skin when we do surgeries and other procedures.

### Hydrogen peroxide

So hydrogen peroxide is more noxious. The current available over-the-counter hydrogen peroxide has to be diluted basically one two three. So that would be three-quarters of a teaspoon in 1.5 cc's of water, a shot glass and then that can also be squirted up or sniffed up. But if it burns, it means it's too strong. Many can't tolerate that, so it has to be used with a nebulizer. So if we nebulize hydrogen peroxide and we actually sniff it into the passages that can be done. So hydrogen peroxide, I think, is the second-best to provide an idea just because of the nature of what hydrogen peroxide is. It can also be improved upon if one can tolerate a little bit of iodine by adding a few drops of little girls item.

Turns out, though, that the virus, just like with hand sanitizers, is easily killed by many substances. The virus is also killed by a whole variety of other substances, including colloidal silver, sodium hypochlorite, potentially other spices, herbs, and spices. People have tried a whole variety of naturopathic remedies that actually seem to symptomatically work. But what we know from the published data is there are 12 Poveda and iodine studies and one of them is a large, high-quality, prospective randomized trial. In total, there are nearly 900 patients in clinical trials, and there's.

Absolutely no doubt early treatment dramatically reduces the risk of hospitalization and death by zapping the virus, killing the virus in the nasal passages. We reduce the

intensity and duration of symptoms. And by that mechanism, reduce the risk of hospitalization and death. We probably actually reduce the risk of invasiveness. There are actually fewer viruses that can invade the body. So how often do we recommend this stuff every four hours with acute illness? We can do it twice a day for prevention, and it's extraordinary. The impact of this is inexpensive. It's universally available, and the innovation came from the East came from Bangladesh and other countries around it. And the information emerged in 20 Top 11.

So we have some, I think, some universe of ours to conclude. I would like to say that, one; no matter where they are, they can have a COVID 19 readiness kit - a COVID 19 survival kit at this point in time. COVID 19 should not be a surprise. We're two years into this and doctors are still getting calls. Doctor, I'm surprised I got COVID, so I know everyone's going to get COVID. It looks like we're going to get COVID more than once now with Omicron, even the recovered and vaccinated, everyone is going to get COVID.

So if we just plan that everyone's going to get this illness, it's mild. It's a mild respiratory illness. What we have in our home toolkit, we would have provided iodine as our nasal virus, hydrotherapy and a bottle of it's going to last forever because we use such a dilute solution that's not tolerated. We would have hydrogen peroxide next.

#### **Zinc**

Zinc, 50 mg elemental zinc is an inhibitor of the polymerase. Many adults are zinc deficient. Almost everybody is zinc deficient. So that needs to be their vitamin D 5,000 IU prevention. And that analysis shows that we achieve a vitamin D level in the blood of fifty or greater. There's almost a zero percent mortality with COVID 19's extraordinary relationship and then with the Q chip. And now we use 20000 international units a day of vitamin C. Not much data on prevention, but clearly an active treatment is three thousand milligrams a day.

## **Quercetin**

Quercetin is a polyphenol supplement, five hundred milligrams a day prevention 500 mg a day, twice a day for treatment. That's number five. One last thing to add over-the-counter Pepcid or famotidine for Moradian is a histamine blocker. It works to impair viral replication through another pathway it uses called the temp two receptors, and then it reduces inflammation and histamine release. So six things basically in a shoebox can give great, great hope to people that they will get through the Omicron variant without having to make any panicked calls, any panic hospitalizations.

The medical community can be relieved. We have actually been relieved of our reliance on hydroxychloroquine and ivermectin. By and large severe cases, we can use a

monoclonal antibody or such a rhythm that there will be patients who we could use a or ivermectin. We have the new Pfizer drug coming in a combination of economies like three inhibitors, and we're return of our older producers and we have the Merck drug coming in Molnupiravir. So in a sense, the crisis is over. Omicron coming in is going to be manageable at home. Over-the-counter remedies are the featured approach.

"The second pillar of COVID treatment, which is early home treatment, is the one that has been largely neglected. And that's what we are emphasizing." - Dr. Jane Orient

There are several phases of the disease. One is when the virus is proliferating, then there's the inflammatory phase, and then there's the thrombotic phase when blood clots are likely to occur. And so you want to stop things while the virus is replicating, but after that, there are things that you can do to cut down on the inflammation or to prevent blood clots.

#### Vitamin D3

But early on, hydroxychloroquine has been shown to be quite effective in many studies, especially if used early, and then there's a nutraceutical bundle that everybody should probably take all the time, including Vitamin D3, almost everybody is probably deficient in Vitamin D3, which greatly increases your risk of a bad outcome with this. And then a zinc sulfate, which helps to get the treatment inside the cell. I'm sorry, the zinc sulfate needs to get into the cell and the quercetin and also Hydroxychloroquine helps to penetrate the cell so that it can prevent the virus from replicating when it gets into the cell.

## **Hydroxychloroquine**

Hydroxychloroquine has quite a long half life, maybe 20 days or more. So it could be that once you get your level built up, taking a dose once a week or even once every 2 weeks might give you significant protection. And we used to put it in travel kits for people who are going to malaria areas, maybe less so now since the malaria parasite is more likely to be resistant to it in many areas. So people just got it in their malaria kits. They took it every week for a long time, whenever they were in a high risk area.

The four pillars of treatment: The Contagion control, early treatment, then In-hospital treatment and Vaccination. The second pillar, which is early home treatment, is the one that has been largely neglected here. And that's what we are emphasizing. The 3 stages of the disease are, first, when the virus is replicating. And then when you're

having all types of inflammatory symptoms, and then finally the blood clotting, which is probably the way that most people die.

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# "The best approach, in my professional opinion, is to prepare the immune system for battle". - Dr. Henry Ealy

The best approach, in my professional opinion, is to prepare the immune system for battle. To prepare your immune system to be effective, efficient, and really work on your behalf. And to do that, your immune system is going to need some key immunological nutrients. The first one that the immune system's gonna need is Vitamin D. And Vitamin D is really all about coordinating the immune response and stimulating what are called "antimicrobial peptides," "cytokines," and "immune cell proliferation." I wouldn't be surprised if it's involved in the production of interferon as well.

### Vitamin E

Vitamin E is an antioxidant that's gonna really protect your healthy cells. It's gonna enhance your B cells and your T cells to be as effective as they can be in response to any infection. This is how we start understanding by looking at the mechanism of action of what these nutrients do for immune cells. It helps us understand how they become immune-priming nutrients, meaning that your immune system is now primed and ready to handle infections, any kind, especially infections that are new to the entire system, as a SARS-CoV-2 would be for many people.

## Vitamin C

Vitamin C is another antioxidant. When you think of antioxidants, you think of stopping damage before it starts. I think that's really the key way to understand the effectiveness of antioxidants. Antioxidants that we get in vitamin form are gonna be very effective. Antioxidants that we get in the plant world, like some of the polyphenols and some of the anthocyanins that we find throughout the plant world.

One other thing that's interesting in the plant world is that the antioxidants that we get from the plant world are part of the plant's immune system and what the antioxidants are doing is helping to prevent infection in that plant. It's so interesting that our bodies can utilize those same antioxidants in the same capacity. It's like the plants were developed for us. We grew up together and they're a part of our existence, that they're such an essential part of our existence, of a healthy existence. So, Vitamin C is also gonna protect healthy cells, including the activated immune cells. It's also going to be specifically antiviral. Now, we don't know if it's antiviral. I haven't seen anything

published showing it's antiviral specific to SARS-CoV-2, but we do know it's been antiviral to other viruses in the past.

Now, it increases systemic interferon response. Jonathan, you know how you might get sick and your body starts to get really achy and stuff like that? That's your body producing interferon and interferon is a key substance for your body to produce because what interferon does is it helps block viral replication systemically.

The reason the body has that as a key first initial step is that your body, in using interferon, even though it makes you feel a little achy and you can't get comfortable sometimes when you're laying down and not feeling well, what your body is doing is buying time for your more specific immune cells like the intrinsic cells and B cells and T cells and natural killer cells and all these wonderful specifically and very effective cells, it's buying time for them to study the virus, study the infection, and learn how to kill it. So, your body has all of these different levels of immunological response. Some of them are systemic, some of them are very specific, but it's all this incredibly well-coordinated response that we need to enhance.

What primes it to work? You got it, nutrients. People who have an abundance of nutrients in their body are going to be less likely to experience severe symptomatology, need hospitalization, and have worse outcomes. People who are deficient in these things, people who are deficient in Vitamin D, Vitamin E, Vitamin C, Vitamin A, which we'll come to next, are gonna be more likely to have a much more arduous experience when they encounter and are affected by a new pathogen.

### Vitamin A

Now, what's also interesting is that the Vitamin C is gonna help increase the circulating number of antibodies, so it's gonna make the immune system more effective. Now, we get into Vitamin A. Vitamin A is gonna be all about coordinating the cellular-immune response and promoting immune cell proliferation. It helps immune cells divide and things like that and it's going to enhance the mucosal integrity of the system.

And then we hear about zinc. Zinc has these wonderful, wonderful attributes. One of the things that it's gonna do is it's gonna increase binding capacity and it's gonna optimize the immune cells to be more effective at killing, all right, the exact thing we want. What it's also gonna do is when it gets into the cell, zinc, when it gets into the cell, it's going to help the cell produce an enzyme that, again, now at a cellular level blocks viral replication. Just like we have interferon that's blocking viral replication throughout the entire system, your cells have defense systems as well. One of the defense systems

that your cell has is an enzyme that it's going to help block viral replication. Well, that is a zinc-dependent enzyme, so the trick is getting zinc into the cell.

Americans by and large are deficient in Vitamin A to the tune of 35 to 45% of Americans are deficient in Vitamin A. 37 to 46% of Americans are deficient in Vitamin C. 65 to 95% of Americans are deficient in Vitamin D. 60 to 84% of Americans are deficient in Vitamin E. And 11 to 15% are deficient in zinc.

What is this telling us? Americans are deficient in key immunological nutrients. This is why it's so important to prime the immune system 'cause most people's immune systems are nutrient deficient, placing them at very high risk for prolonged recovery times, long haul, very serious adverse events from the infection symptomatology, and fatality.

So, let's see what the peer-reviewed research has shown on this. I'm just gonna pull out a couple of things here. Vitamin D, 3 studies tested the blood levels for Vitamin D and this was a takeaway. Taking an initial loading dose of 20,000 IUs of Vitamin D for 2 weeks can help to raise the level to an adequate level to lower the risk of infection. Well, where are they coming up from this? A Philippine study showed that with a deficient Vitamin D status where you're under your 50 nanomoles per liter, 50 nanograms per milliliter, the probability of becoming severe or critical with COVID was 72.8%, against just 7.2% with people who had adequate amounts of Vitamin D.

Indonesian studies show the same thing. With the deficient Vitamin D status, the mortality rate was 98.8% against just 4.1% with adequate Vitamin D. This has been out there. We've known this virtually from the beginning, folks. This study, oral Vitamin D and a modest amount of 1000 IUs every day, oral dose, magnesium and a little bit of B12. What happened? A significant reduction in the proportion of patients with clinical deterioration requiring oxygen support and/or intensive care support. This is how a little bit of nutrients can go a long way for reducing symptomatology and reducing the necessity for hospitalization, especially intrusive hospitalization, such as intensive care, ICU or ventilation.

Another study, 10,000 IUs a day of Vitamin D3 for a few weeks rapidly raised Vitamin D concentrations. And then you can lower it down to 5,000 IUs. So loading doses, they're talking about loading doses here. And this is a great strategy, something we've been using in medicine for years. Getting the bloodstream built up with nutrients. Another great study here by Castillo and company, of the 50 patients treated with Vitamin D3, zero deaths occurred. All 50 patients were eventually discharged without complications. How cool is that, right? Another one, Vitamin D by Marcos and company. Vitamin D

deficiency is associated with higher infection rates, increased incidence of sepsis, and increased mortality risk among critically ill populations. This is all specific for COVID-19, folks.

Another great one. This is one of my favorite studies on Vitamin D. A total of 191,799 patients were included in this study. This was a study where they measured the serologic levels of Vitamin D in the bloodstream. Of the SARS-CoV-2 positivity rate was higher in the 39,190 patients with deficient levels of Vitamin D, that's 25(OH)D, that's Vitamin D. So people who are below 20 nanograms per milliliter, they were higher in terms of contracting the virus than the 27,870 patients with adequate levels.

So people between 30 and 34 nanograms per milliliter. And the 12,331 patients with a value of 55 or higher. So what they're showing here in this one is that you are twice as likely to contract the SARS-CoV-2 virus if your Vitamin D levels are below 20 nanograms per milliliter than if you are at 55 nanograms per milliliters.

So this starts to establish a benchmark. And here's their conclusion. SARS-CoV-2 positivity is strongly and inversely associated with circulating Vitamin D levels. A relationship that persists across all latitudes - it doesn't matter where you live; races and ethnicities - doesn't matter what your cultural heritage is; both sexes - doesn't matter your gender; and all age ranges - doesn't matter how old you are. The more Vitamin D you have, if you get yourself above 50, 55 nanograms per milliliter, you are gonna be half as likely to be infected. And because of that, it's going to reduce the potential for severe symptomatology and reduce the necessity for hospitalization. How much?

This is a study that is in pre-print, just came out a couple of days ago. This study shows that they did a regression analysis which suggested a theoretical point of zero mortality at approximately 50 nanograms per milliliter. So these folks assessed the literature and found that, if people are above 50 nanograms per milliliter in Vitamin D3, it's virtually a zero mortality rate. That's how important Vitamin D is. Their conclusions, despite ongoing vaccinations, recommend raising serum Vitamin D levels to above 50 nanograms per milliliter to prevent or mitigate new outbreaks. Simple stuff. Little bit of nutrition goes a long way.

And then we talked about this Vitamin C study, what was going on in the Wuhan epicenter with Dr. Cheng and Dr. Richard Anderson, who wrote on it. He wasn't in the epicenter. But this is the study that showed 50 cases, moderate to severe COVID. Everybody recovered, everybody recovered faster using intravenous Vitamin C. Zinc, these patients were found to have higher rates of complications, acute respiratory distress, corticosteroid therapy, prolonged hospital stay, and increased mortality.

#### **Glutathione**

These are people who are deficient in zinc. So, what are they saying in their conclusions? A significant number of COVID-19 patients were zinc deficient. These zinc deficient patients developed more complications, and the deficiency was associated with prolonged hospital stay and increased mortality. Same thing has been found with deficiencies of glutathione, which is an important antioxidant that helps combat free radicals. It's found in cruciferous vegetables, spinach, carrots, and avocados. Same thing has been found with deficiencies of Vitamin D. So imagine putting all of those nutrients together, instead of looking at them in individual ways. Now you're putting yourself in a position where you can prime your immune system to be very, very effective.

This is the Brownstein study that was done in Detroit, Michigan, a suburb of it. Great study here. 107 patients were involved in the study. They used early treatment, given to 99% of patients in the first 4 days of symptom onset. So as soon as they had symptoms, they started treating immediately like we should always do. Vitamin A at 100,000 IUs, Vitamin C at 1,000 milligrams per hour during waking time. So they're giving, really, if a person's up for 12 hours, they're giving up to 12,000 milligrams of Vitamin C. Vitamin D, 50,000 IUs daily, so very aggressive dose of Vitamin D, love it. And iodine 25 milligrams daily. So small little touches of iodine. Also giving some solution of hydrogen peroxide and saline for people to breathe in. And what did they find after using this? First improvement on average was at 2.5 days.

Everyone was mostly better by 4.5 days and completely better by 7 days. What they noticed in this, and this was published in July of 2020, is that 100% improvement in all 100% patients treated. They had a 100% success rate, simply using targeted therapeutic levels of key immunological nutrients. 107 out of 107 recovered.