

Ivermectin's Mechanism of Action Against SARS-CoV-2 Described

SHAME on the hospital systems that systematically denied patients (and their begging families) this FDA-approved, Nobel prize winning, wonder drug.

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By JOHN LEAKE



Satoshi Ōmura, discoverer of Streptomyces avermectinius, winner of the Nobel Prize in Medicine 2015.

Researching our book—*The Courage to Face COVID-19: Preventing Hospitalization and Death While Battling the Bio-Pharmaceutical Complex*—was often a distressing and maddening experience. The systematic lying about hydroxychloroquine to suppress its use in the outpatient setting was infuriating. However, for me, the most upsetting stories were about people who died in hospital after being systematically denied ivermectin. The sheer brutality of hospital chiefs and their attorneys, who fought tooth and nail against the administration of ivermectin to dying patients, must surely be the most morally repugnant story in modern medical history.

As we document in our book, Drs. Pierre Kory, Paul Marik, and Tess Lawrie were on the front line of fighting for ivermectin in the hospital setting. Drs. Jean-Jacques and Juliana Cepelowicz Rajter published their **seminal (ICON) study** in the October 12, 2020 edition of the *CHEST* journal of pulmonary medicine. The investigative journalists, Michael Capuzzo and Mary Beth Pfeiffer, did a splendid job of covering this story in real time. All of the above are heroic figures of great intellectual and moral discernment to whom we should all be grateful.

Many patients who were fortunate enough to prevail in court and receive ivermectin enjoyed an astonishing improvement of their condition within 24 hours of receiving their first dose—a recovery that struck family members as miraculous.

In listening to their stories, I often asked myself: “How on earth could this substance (macrocyclic lactone)—derived from a bacteria (*Streptomyces avermectinius*) found in a soil sample on a golf course in Japan—possibly work such miracles?” Truly these testimonies struck me as the most wondrous stories I’d ever heard, and I occasionally asked myself if the recoveries observed were a fluke or the result of some other unknown factors.

To be sure, we already knew from in vitro and from **prior studies** that ivermectin had demonstrated potent anti-viral activity, but the precise cause of action was unknown. Now, thanks to **a study recently published by a research team at MEPHI, Aix-Marseille Université**, we have a highly plausible description of ivermectin’s mechanism of action against the SARS-CoV-2 spike protein.

In order to understand this mechanism, the reader must first understand that the SARS-CoV-2 Spike Protein Induces Hemagglutination—i.e., a reaction that causes clumping of red blood cells. A glycoprotein on the viral surface, namely **hemagglutinin**, interacts with red blood cells, leading to the clumping of red blood cells and the formation of a lattice.

As the Aix-Marseille team documents in their study: **IVERMECTIN blocked HEMAGGLUTINATION when added to RED BLOOD CELLS prior to spike protein and reversed HEMAGGLUTINATION when added afterward.**

By reversing the clumping of red blood cells, ivermectin enabled the dying patient’s proper respiratory function to return, thereby generating his or her astonishing recovery.

If the Aix-Marsaille team’s findings are correct—and we have no reason to doubt that they are—they provide the final validation and vindication of the dying patients and their families who literally begged for the wonder drug.

SHAME on the hospital administrators and their thuggish attorneys who denied the countless dying wishes. SHAME on the federal health officials who propagated the LIE that Ivermectin was merely a “horse de-wormer.” SHAME on the useful idiot media pundits such as CNN broadcasters and Late-Night Comedy hosts who flooded the zone with this foul lie.

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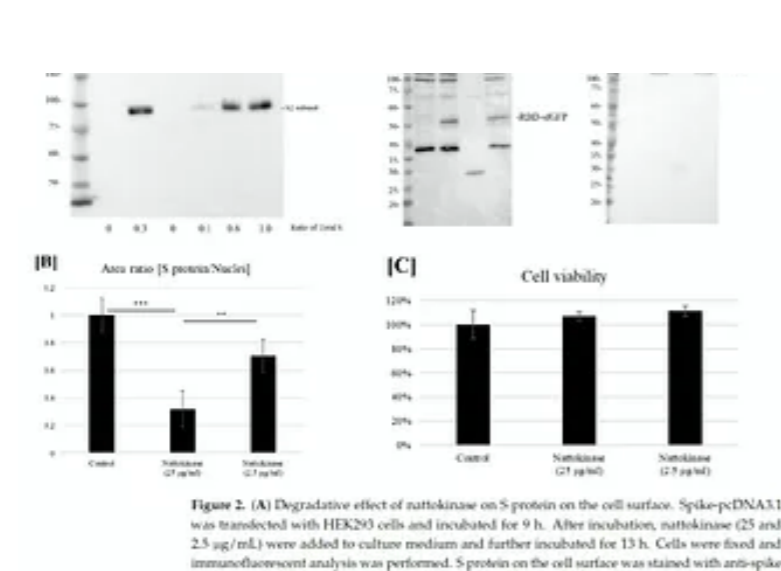
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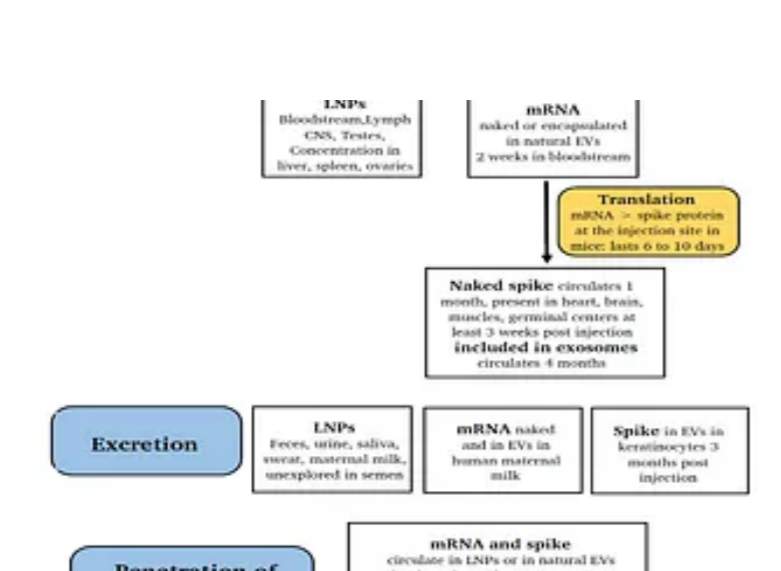
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