

## POSSIBLE PANDEMIC PROPHYLAXIS

Suggested Adult **Possible PANDEMIC PROPHYLAXIS or Pre/Post vaccination Prophylaxis** - for your and your Physician's consideration. Don't wait till PCR positive- too late- take now small amounts: Spike Protein from Vax or Covid-mutating getting into body via gut?

**Must consider Blackseed, Elderberry, NAC, VitaD3 & Multivitamin+Minerals as most important** with other meds highly recommended for consideration as below especially if getting vaccinated or around vaccinated, traveling. It's a recurrent pandemic; longterm low dose prophylaxis may be needed for years to come. Blackseed and Elderberry in small doses are felt to be an absolute must throughout this pandemic and the next variants; ask your physician or just take in small amounts.

A1. (HNS) [Honey&Nigella Sativa \(Honey&BlackCumin/HBC\)](#) or [Blackseed Oil](#) 1 tsp/day (mix 1 tsp Black Cumin powder or [Black Cumin seeds](#) or Blackseed oil mixed with 2 tsp honey/day) Blackseed oil is strong. Use sparingly. Very important to take.

*if symptomatic increase HNS/HBC BC1tsp+H2tsp mixture every 8hrs* (80mg/kg/day seeds in 3 divided doses [DrBeen video](#)-. Thimoquinone natural alternative to HCQ? **Add HNS/HBC or Blackseed oil to yogurt** may decrease diarrhea from new Covid? Don't take too much or may damage liver or cause loose stool. Do not need much if not sick. Use sparingly to last for Next Covid and next covid. Plant seeds? Grow it? [King Tut used it](#). The [Prophet Mohammed](#) used it.

1. [Vitamin D3](#) at least 2000 IU/day (Diabetics 5000 IU/day) – Vita D correlated with 1918 Flu pandemic survival then check levels may need more to achieve optimal levels.

2. [Vitamin C](#) 1000 mg/day-Antiviral Properties may need more if sick.

3. [NAC \(N-Acetylcysteine\)](#) 600 mg /day at least... *if symptomatic increase to 4x/day*- May block GP41 attachment to GGL Tcell & NKcell receptor **MUST consider taking daily NAC** – so important the FDA is trying to make it prescription only- get NAC while it's over the counter...but no longer on Amazon? Hurry! May need NAC for years!

4. [Zinc 11-40mg\\*](#) or a Multivitamin with [Zinc](#) and [Selenium](#)- [blocks RNA viral replication via RNA polymerase](#)- [Dr Been video](#)

5. [Zinc ionophores](#) one or more of the following: - Gets the Zinc into the Cells or young males risk sterility

A) [Elderberry](#) syrup 2tsp several times a week or gummies or pills-

Elderberry very important start now and consider planting elderberry bushes for next covid and next covid.

B) [Green Tea](#) once a day or several times a week

C) [Quercetin 50-100mg/day](#) -not enough alone...especially if Black/Brown skin

D) [Pomegranate peel](#) as Ace2 blocker

6. [Turmeric Curcumin](#) one pill/day pills or mix spice in food with Black Pepper to activate [turmeric](#)- TmpRSS2 inhibitors

7. [Pepcid \(Famotidine\)](#)- 20mg once a day small amounts.

8. [Melatonin](#) 5mg (before sleep- less than 5mg may be better e.g. 2.5mg or less)

9. [Bromhexine tablets](#) or syrup if available outside the USA?

10. [Aspirin 81mg/day](#) optional and if *symptomatic increase Aspirin to 325mg/day*

11. [Zinc- Carnosine](#) - carnosine only found in meat- avoid beef from Africa imported into USA

12. [Iodine](#) - drop or two of iodine in some liquid- Lugol's or other form use sparingly-

12. [Fennel seeds / Pine Needle Tea /Star Anise = Shikimic Acid](#) may be helpful

12. [Garlic or Garlic Oil](#) & onions

12. [Olive Leaf Extract](#) has shown benefit

13. **If mild or moderate lung symptoms:** [Nebulized dilute Hydrogen Peroxide](#)/drop of Lugol's iodine as per the [Brownstein Protocol](#)? Or drop of Lugol's Iodine in food daily as

preventive? [FTC says cannot claim it prevents or treats Coronavirus.](#) It is just for your consideration: tell the FDA if you think it helped.

**If Scratchy Throat:**

**Gargle with dilute Hydrogen Peroxide & Water** and spit (mix 1 part Hydrogen peroxide and 2 parts water- gargle and spit.

**Lugol's Iodine-** or some form of iodine 2-3 drops into dilute Hydrogen Peroxide and Water Gargle

**If Diarrhea:**

**Probiotics** and consider daily probiotic if sick get probiotic with colostrum if especially if unprotected by NAC when got Covid-20

**Yogurt** mix with Honey/Black Cumin small amounts of HNS or HBC daily which may help protect microbiome.

**Physicians-please consider adding prescription medications if before PCR positive:**

1) **Hydroxychloroquine (HCQ) 200mg once every other week**-as possible prophylaxis and ***if symptomatic increase HCQ 200mg twice per day*** until symptoms go away (Prior to PCR testing) usually max 5 days then back to one pill every two weeks in Dark Winter (Rx for #30 pills take one pill a month in summer)- long acting Zinc Ionophore with half-life of 22 days

2) **Ivermectin 3mg one pill per month-as possible prophylaxis**

***If symptomatic Ivermectin 6-12 mg one day*** if turn IGG positive to kill intranuclear Covid and may prevent long haulers Covid-AIDS. (May repeat Ivermectin X2-3days if extreme or persistent symptoms)- may allow body to kill intranuclear covid

**If significant lung symptoms: Consider adding**

3) **Doxycycline 100mg/12hrs or Azithromycin (zpack)**- for lung symptoms disrupts Chlamydia superinfection ultra Low Dose [Doxycycline may prevent prion disease?](#) How much 100mg per week?

If persistent or difficult symptoms, consider: Additional antibiotics such as Metronidazole, Levoquine etc.

4) **Medrol dose pack** or Prednisone Steroid Taper-oral steroids improves breathing and may be more beneficial than inhaled steroids? Tell the FDA? Decadron should be considered for more severe cases.

5) **Cyproheptadine 4mg twice daily for 14 days**

Additional Considerations:

6) **Singular aka Montelukast** [blocks TMRSS2 pathway](#) may be [critical in addition to HCQ-block the TMRSS2 entry pathway of newer Covid and may need early : similar pathway of Turmeric/Blackpepper](#)

7) **Fenofibrate** Cholesterol lowering medication may downgrade SarsCov2 to common cold ...[More evidence Singular decreases hospitalization deterioration](#)

8) **Colchicine** – in moderation

9) **Naltrexone** that has shown to stop decrease sarscov2 spike protein replication... consider a local Dosage starts at 1.5 mg for 3-5 nights, then 3mg. Up to 4.5 mg if tolerated, or back down to 3mg.? consult your physician.

**If PCR Positive or significant symptoms:**

10) Consider [Cimetidine](#) [Androgen blocker such as for women and men Cimetidine](#) 400mg once or twice a day which may help decrease Spike binding to ovaries? And consider add [Dutasteride](#) .5mg/day in men?

If headaches consider

1) **Indocin (Indomethacin)**- anti-inflammatory morning ay help stop Covid headaches.

**Regeneron Antibody treatment immediately** as out-patient early If PCR positive reduces hospitalization or death by 70% in non-hospitalized patients,

**If symptomatic and considering hospital admission must have legal plan in position.** At this time Attorney is likely necessary and **Attorney Ralph Lorigo** contact information **is found here Lorigo.com** and perhaps others may help. Here is one contact but we make no endorsement and have no financial ties....who else is available? Consider risks and benefits of and perhaps avoiding Remdesivir that has caused significant liver and kidney damage in Ebola studies.

**If hospitalized at least try to get the patient the following:**

**HCQ 200mg daily and or IVM .2mg/kg for six days**

**Prednisone 40mg daily or Decadron 6-10mg twice a day**

**NAC N-Acetylcysteine 600mg three or four times a day for 10 days then 600mg per day**

**Cyproheptaine 4mg twice a day for 14 days**

**Cimetidine 400mg twice a day for 14 days**

**Singular 10mg each day for 14 days**

**Azithromycin 250mg per day for 10 days**

**Fenofibrate 160mg a day for 14 days**

**Dutasteride .5mg daily in men**

**Vita D3 at least 10k IU per day**

**Multivitamin bag**

**Baby aspirin**

**Melatonin 20mg daily**

**For Longhaulers headaches and Hospitalized and Covid-AIDS (or if PCR test is persistently positive):** and/or issues of low T-Cells or suspected infertility not relived by Blackseed Oil and the above over the counter medications:

**Consider anti-HIV medications and/or protease inhibitors with your physician-** There is a GP41 on the spike protein which may causes damage to Tcells if the virus is allowed to replicate unchecked. Treat early and consider intermittent short pulse treatment for longer term.

Consider Use of **Lamivudine 150mg** twice a day for at least 3 days...then intermittently

Consider Use of **Zidovudine 300mg** twice a day for at least 3 days...then intermittently

But has history of liver damage so use sparingly?

**Valcyclovir 1 gram** twice a day for at least 3 days or other antiherpetic medication may be helpful.

**Tenofovir 300mg** twice weekly until symptoms resolve then intermittently

The exact length of time needed until clearing symptoms and return of Tcell counts may vary.

Pulse dose of a few days a month may be helpful. Discuss with your physician... .

**Ask your physician to consider following CD-4 CD-8 or T cell levels.**

**Consider Anti-RetroViral therapy types and the risk of COVID-19 diagnosis and decreasing severe outcomes-**

[Four studies documented the risk of COVID-19 diagnosis and severity by ARV therapy. In a study by del Almo and colleagues, after stratification by NRTI regimen, persons receiving tenofovir disoproxil fumarate/emtricitabine \(TDF/FTC\) had the lowest risk for COVID-19 diagnosis \(16.9 per 10,000\), hospitalization \(10.5 per 10,000\), ICU admission \(0 per 10,000\) and death \(0 per 10,000\)<sup>35</sup>. However, in the adjusted multivariable logistic regression model, Vizcarra and colleagues found that higher use of tenofovir before the COVID-19 pandemic was associated with nearly fourfold greater risk for the diagnosis of COVID-19 \(OR 3.7 \[95% CI 1.6–8.7\]\)<sup>29</sup>. Furthermore, Haerter and colleagues did not find clear evidence for a protective effect of tenofovir and boosted darunavir-based ARV therapy<sup>16</sup>. In addition, the results from a France study did not support a protective role of tenofovir against COVID-19<sup>32</sup>. All 5 patients reported in the study by Blanco received boosted-protease inhibitor ARV therapy, with the rationale that HIV protease inhibitors might have activity against the coronavirus protease. By the reporting of their study findings, no patient had died<sup>17</sup>.](#)

**N-Acetylcystine NAC** may be essential to prevent depletion of Tcells perhaps by the spike protein in either the Viral or mRNA spike protein design. (See above)

Check Oxygen Saturation with Pulse Oximeter- if the above does not help or if low saturation may need hospitalization. Below 93 can be bad if elderly or have heart conditions.

If you received the Flu shot especially if it was made from Dog Kidney cells eg Flucelvax you may be more susceptible now to get any Coronavirus including Covid-19.  
<https://www.sciencedirect.com/science/article/pii/S0264410X19313647?via%3Dihub>

If you received the Flu shot even the Hydroxychloroquine/chloroquine+Zinc may not protect completely and may need larger doses of the above as soon as symptoms occur and prior to testing PCR positive. Don't wait, take zinc ionophore and perhaps Ivermectin at first signs. Ask your physician.

The proof will be in testing for Tcell immunity (IgA NKcells); the CDC is not testing for Tcell immunity which would indicate successful antibodies to Covid-19 and no need for a "vaccine" rather than continued HCQ to battle future mutations until the pandemic is over.

<https://www.bbc.com/future/article/20200716-the-people-with-hidden-protection-from-covid-19>

Why?

The goal of possible pandemic early treatment or amelioration of symptoms or prophylaxis is to allow the US and world population to asymptotically as possible develop Tcell and NK cell primal immunity to Covid-19 and or Covid 20 and or any pathogen including other such as Coxiella Burnetii which may be a competing pathogen at this time and may have been weaponized, perhaps by intelligence agencies. Avoiding hospitalization and Chorionic Tcell and NK cell damage and other chronic sequelae is also the goal. Comparison of inpatient vs outpatient early treatment measures should be chronic damage and ability to work. Having Doxycycline and Azithromycin Zpack

The way we check for Tcell immunity is with direct testing- every vaccine company is doing it and now there is a commercially available test

<https://www.adaptivebiotech.com>

Because the virus and others can mutate we may need to be on long term low dose prophylaxis for this and the next threats that are coming in this Darkest Winter (CIA/MI6/Mossad groups) a safe vaccine may be helpful and we may have one of those in Inovio Pharmaceuticals currently being studied under a DOD contract and perhaps unnecessarily delayed to force mass use of more dangerous alternative vaccines such as those from Moderna and Pfizer requiring subzero transport and never before used MRNA technology vs Emergent BioSolutions Adenovirus vector vaccine that has caused myelitis in its testing and may have other issues. from the Medi

We have recently found Honey and Black Cumin stops or decreases Covid replication by various mechanisms if given in low dose early in treatment, best if taken prior to exposure to pathogens in times of pandemic. See Dr. Been video. We suggest one teaspoon per day or less for an adult with honey mixed in food. HNS may be ingested in two or 3 divided doses per day if sick, using a weight based protocol.

Hydroxychloroquine prevents Covid replication using 5 or more different mechanisms to stop replication of Coronaviruses and works in combination with Zinc if given early. People are chronically depleted of zinc because of Roundup (Monsanto) and extremely low zinc levels is manifests in loss of sense of smell and taste and later tinnitus or ringing in ears. We know that zinc is a positive ion with +2 charge and needs an ionophore to get the zinc into the cells.

Zinc ionophores are elderberry, quercetin, ECGC in Green Tea or Hydroxychloroquine with a long half-life of 22 days. The therapeutic window may be low so early and low dose hydroxychloroquine has been found beneficial.

However HCQ early adult outpatient use has become controversial not because of its use one 200mg pill every other week for prevention and two pills a day if sick (am and pm) usually for about 5 days and then back to one pill biweekly. Its use has become controversial because this inexpensive and safe medication (no Rheumatologists checks an EKG prior to administering 2pills per day for years)

The reason it has become controversial is because of false information “fake news” which is centered in 330 Independence SW Washington DC and is run by our Intelligence Agencies CIA and Mossad MI6 spread by Is “Fake News” actually Operation Mockingbird now turned on US Citizens via the Smith-Mundt modernization act of 2012/13 under the Obama administration?

<https://www.usagm.gov/who-we-are/oversight/legislation/smith-mundt-faqs/> Ask the CIA FBI MI6 Mossad & State Department & USAgency for Global Media  
[https://en.m.wikipedia.org/wiki/U.S.\\_Agency\\_for\\_Global\\_Media](https://en.m.wikipedia.org/wiki/U.S._Agency_for_Global_Media)

This means news originating form our and other intelligence networks can be broadcast to the united states.

An example of such “Fake News and Deception” is the BBC’s Jane Standley announcing the collapse of the Solomon Brothers building known as Building7 of the World Trade Centers on 9-11 of 2001. <https://youtu.be/f0HPqd8dPeE>

Is the reason Zinc + Hydroxychloroquine is not allowed is perhaps because it is the early antidote to this Financial bioterror weapon designed to kill and sterilize Black Americans and people of color while sparing certain peoples? <https://bmcmmedicine.biomedcentral.com/articles/10.1186/s12916-020-01673-z>

NAC- N-Acetylcysteine- seems to prevent the GP-41 spike protein from attaching to intestinal epithelium and new Covid-20 seems to cause more diarrhea/GI symptoms and is no longer prevented without NAC and the other meds above. Must take along with vita D3 C Zinc etc to prevent Darkest Winter illness. May also protect against kidney and liver damage if Disinformation is being run by domestic and international intelligence agencies to damage the USA and the world for financial gain and power. Disinformation involves our own CIA FBI MI6 5Eyes and Israeli Mossad Unit 8200 who oversees 5Eyes. Jefferey Epstein and his alternative Executor to JEpstein's Trust, Chief Scientific Officer Boris Nikolic, connects the Bill and Melinda Gates foundation and vaccines to Epstein. Kroll Associates operative Den Hollander, former Kroll operative in Russia killed Federal Judge Esther Salas son and wounded her husband. Judge Salas was assigned to the Jeffrey Epstein Deutch Bank scandal.

Wrongful blame of Russia and Iran for electrical shutdowns and disturbances including killing with electric self-driving vehicles may occur. Election issues in Philadelphia and other cities of swing states; our own intelligence agencies may falsely blame the Iranians and Russians unless we can stop "Election Chaos" and the bad intelligence factions.

and familiarize yourselves with the Tom Clancy Novel Rainbow 6 (Virus release at Olympics whose vaccine is more deadly than the disease).

Proposed PrEP for Covid-19 and 2?- the possibly more deadly strain yet to come.

During a Pandemic- especially throughout Darkest Winter if our food supply is disrupted by Dr. Robert Kadlec MD and the USDA, Please consider taking some of the following until the pandemic is over (likely over a year) :

Tcell immunity to Covid-19 represents successful early treatment/prevention of severe Covid-19. The development of IGM antibodies indicates the above Pre-pandemic protocol was insufficient an additional daily HCQ may be needed and other long acting therapies while the presence of IGG as an indicator of failure and need for Ivermectin to treat the assumed presence of intranuclear Covid-19.

The benefits of Ivermectin, with a half-life of 8-18 hrs, is clear for treating intranuclear or later stage by now we should all be aware that Ralph Baric from UNC Chapel Hill is the foremost expert and Researcher on Coronaviruses in the country has been clear in saying that zinc and an Ionophore will stop any coronavirus from replicating early and these therapies should be considered first line. **Since the half-life of Hydroxychloroquine of over 23 days this makes HCQ an ideal pre exposure treatment and**

**just one pill a month may provide significant benefit along with the above vitamins and minerals, prior to infection.**

1. Unfortunately waiting until PCR positive or if you even test nasal PCR positive then you have so much Covid in your body it is in most of your cells and pouring out of your nose. PCR of stool is an earlier indicator, but the virus may replicate for at least 16 days prior to turning PCR positive. Perhaps we should be decreasing the replication of the Covid-19 or any Coronavirus early. Ralph Baric, the foremost expert suggests using Zinc and Zinc ionophore like elderberry Green tea or hydroxychloroquine prior to exposure. **Mouse study shows much better to give Hydroxychloroquine (chloroquine phosphate) prior to infection to decrease viral load by more than Log 10 - <https://aac.asm.org/content/53/8/3416>**

Please consider recommending Zinc+ ionophore prophylaxis or begin early and throughout this “Pandemic” to protect for any Covid-19 mutations which may act faster and have a higher mortality rate, treatment prior to becoming PCR positive. Waiting may not be bad for a person in good health but in a Black American the binding of the ACE2 to testicles is much stronger and proliferation of Covid is more likely a problem. Treating after PCR positive may cause chronic testicular fibrosis and infertility, not being studied in the

USA. <https://www.sciencedirect.com/science/article/pii/S2214388220300448> ACE2 is present with relatively high expression in respiratory epithelial cells, alveolar cells type I and II, oral cavity, kidney, testis, and intestines [11]. Thus, human cells with ACE2 expression are probably targets of SARS-CoV-2 infection [Tell your son to take the hydroxychloroquine half a pill a month or risk infertility

“We also identified the presence of the virus in a man who underwent a testis biopsy for infertility but had a previous history of COVID-19. So the patient tested negative and was asymptomatic after having COVID-19 but still showed the presence of the virus inside the testes,” Ramasamy said in a statement.

“The average length of time from the first positive COVID-19 test to death was 11 days, with one case tested after the man’s death”

Read more here regarding Infertility caused by Covid-19:

<https://www.miamiherald.com/news/coronavirus/article247022937.html#storylink=cpy>

Ivermectin first line may be fine for a physicians but perhaps not for average patients. Most patients are being told to isolate for days prior to even being allowed to seek medical attention or test positive. Governors and the FDA restricting Hydroxychloroquine indicates they are co-conspirators on the prevention of the low dose outpatient HCQ prophylaxis and treatment. It is up to Physicians to oppose the FDA and Governors as well as pharmacy boards and prescribe low dose HCQ and other medications as we see fit to prevent chronic infertility and other issues which are not allowed to be studied at this time.

Oral ivermectin ok

Subcutaneous ivermectin has infertility effects-

1,000 talents