

Media Censored COVID-19 Early Treatment Options that Could Have Reduced Fatalities by 85%. Prominent Medical Doctor

Dr. Peter McCullough also explained that given an 80% level of herd immunity, broad vaccination has 'no scientific, clinical or safety rationale.'

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Global Research, April 12, 2021

[LifeSiteNews](#) 8 April 2021

Region: [USA](#)

Theme: [Intelligence](#), [Science and Medicine](#)

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An exceedingly well-qualified physician, who was censored by YouTube last year, addressed the Texas State Senate Health and Human Service Committee last month providing thorough information on successful treatments of COVID-19, the present high-level of herd immunity from the disease, the very limited potential of “[vaccines](#),” and the data that shows early treatment could have saved up to 85 percent of the “over 500,000 deaths in the United States.”

[Dr. Peter McCullough, MD](#) is an internist and cardiologist, along with being a professor of medicine at Texas A&M University Health Sciences Center. He is distinguished as the most published person in history in his field and an editor of two major medical journals.

McCullough explained that from the beginning of the pandemic, he refused to let his patients “languish at home with no treatment and then be hospitalized when it was too late,” which was the typical treatment protocol being discussed, promoted and offered across the west.



[Click here to watch the video.](#)

He thus “put together a team of doctors” to study “appropriately prescribed off-label use of conventional medicine” to treat the illness and they published their findings in the [American Journal of Medicine](#).

“The interesting thing was, (that while) there were 50,000 papers in the peer-reviewed literature on COVID, not a single one told the doctor how to treat it,” he said. “When does that happen? I was absolutely stunned! And when this paper was published ... it became ... the most cited paper in basically all of medicine at that time the world.”

With the help of his daughter, Dr. McCullough recorded a YouTube video incorporating four slides from the “peer-reviewed paper published in one of the best medical journals in the world” discussing early treatments for COVID-19. The video quickly “went absolutely viral. And within about a week YouTube said ‘you violated the terms of the community’” and they pulled it down.

Due to the “near total block on any information of treatment to patients,” Sen. Bob Johnson hosted a November [hearing](#) on this important topic where McCullough was the lead witness.

With such an [aggressive suppression](#) of information on early treatments, and the default policy in COVID-19 testing centers to not offer any such resources to those who test positive for the infection, McCullough said, “No wonder we have had 45,000 deaths in Texas. The average person in Texas thinks there’s no treatment!”

And the blackout of such vital information goes well beyond the blatant censorship of big tech companies. McCullough said,

“What has gone on has been beyond belief! How many of you have turned on a local news station, or a national cable news station, and ever gotten an update

on treatment at home? How many of you have ever gotten a single word about what to do when you get handed the diagnosis of COVID-19? That is a complete and total failure at every level!”

“Let’s take the White House: How come we didn’t have a panel of doctors assigned to put all their efforts to stop these hospitalizations? Why don’t we have doctors who actually treated patients get together in a group and every week give us an update? ... Why don’t we have any reports about how many patients were treated, and spared hospitalizations? ... This is a complete and total travesty to have a fatal disease, and not treat it,” he said.

“So what can be done right here, right now?” McCullough proposed to the legislators. “How about tomorrow, let’s have a law that says there’s not a single (test) result given out without a treatment guide, and without a hotline of how to get into research. Let’s put a staffer on this and find out all the research available in Texas, and let’s not have a single person go home with a test result with their fatal diagnosis, sitting at home going into two weeks of despair before they succumb to hospitalization and death. It is unimaginable in America that we can have such a complete and total blind spot.”

In reference to early treatments that have been widely [used outside the west with great success](#) (with around 1 percent to 10 percent of the death rates of the first world), McCullough turned his attention to broad media suppression of information once again asking, “When was the last time you turned on the news and ever got a window to the outside world? When did you ever get an update about how the rest of the world is handling COVID? Never. What’s happened in this pandemic is the world has closed in on us.

“There’s only one doctor whose face is on TV now. One. Not a panel. (As) doctors, we always work in groups, we always have different opinions. There’s not a single media doctor on TV who’s ever treated a COVID patient. Not a single one. There’s not a single person in the White House Task Force who has ever treated a patient,” he said.

“Why don’t we do something bold. Why don’t we put together a panel of doctors that have actually treated outpatients of COVID-19, and get them together for a meeting. And why don’t we exchange ideas, and why don’t we say how we can finish the pandemic strongly.”

“Isn’t it amazing?! Think about this. Think about the complete and total blind spot (regarding home treatments),” he said.

Herd immunity and vaccination

“The calculations in Texas on herd immunity ... right now with no vaccine effect (is) 80 percent,” McCullough said. “And more people are developing COVID today. They’re going to become immune (as well).”

“People who develop COVID have complete and durable immunity. And (that’s) a very important principle: complete and durable. You can’t beat natural immunity. You can’t vaccinate on top of it and make it better. There’s no scientific, clinical or safety rationale for ever vaccinating a COVID-recovered patient. There’s no rationale for ever testing a COVID-recovered patient,” he continued.

“My wife and I are COVID-recovered. Why do we go through the testing outside? There’s absolutely no rationale (for such testing).”

Given the high levels of [herd immunity](#), McCullough said any impact from broad vaccination in preventing COVID-19 can only be minimal at best.

“There’s plenty of COVID-recovered patients. Let them forgo the vaccine and let people who are clamoring for it get it. But at 80 percent herd immunity, in the vaccine trials fewer than one percent ... in the placebo actually get COVID. Fewer than one percent. The vaccine is going to have a one percent public health impact. That’s what the data says. It’s not going to save us, we’re already 80 percent herd immune,” he said.

“If we’re strategically targeted we can actually close out the pandemic very well with the vaccine,” the cardiologist stated. “But strategically targeted. (For) people under 50 who fundamentally have no health risks, there’s no scientific rationale for them to ever become vaccinated.”

Addressing the broad “misinformation” of asymptomatic transfer of COVID-19, which has supported the need for lockdowns due to the notion that the virus can be unintentionally spread by infectious, asymptomatic people, the medical professor said, “One of the mistakes I heard today as a rationale for vaccination is asymptomatic spread. And I want to be very clear about this: My opinion is there is a low degree, if any, of asymptomatic spread. Sick person gives it to sick person. The [Chinese have published a study](#) ... [of] 11 million people. They tried to find [evidence of] asymptomatic spread. You can’t find it. And that’s been, you know, one of important pieces of misinformation.”

Finally, McCullough highlighted the impact of suppressing information on effective and safe early treatments during this last year. Citing two “very large” studies, he said “when doctors treat patients early who are over age 50 with medical problems, with a sequence multi-drug approach ... there’s an *85 percent reduction in hospitalizations and death.*”

“We have over 500,000 deaths in the United States. The preventable fraction could have been as high as 85 percent (425,000) if our pandemic response would have been laser-focused on the problem: the sick patient right in front of us,” he concluded.

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Featured image: Dr. Peter McCullough, MD addresses the Texas State Senate Health and Human Service Committee. (Youtube Screenshot)

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