

11/13/21

Dr. Pierre Kory: 'COVID-19 Is Highly Treatable'

Analysis by [Dr. Joseph Mercola](#)

Prevention & Early Outpatient Protocol: <https://covid19criticalcare.com/wp-content/uploads/2020/11/FLCCC-Alliance-I-MASKplus-Protocol-ENGLISH.pdf>

Hospital Treatment Protocol: <https://covid19criticalcare.com/wp-content/uploads/2021/01/FLCCC-Alliance-MATHplus-Protocol-ENGLISH.pdf>

Complete Guide to COVID Care: <https://covid19criticalcare.com/wp-content/uploads/2020/12/FLCCC-Protocols-%E2%80%93-A-Guide-to-the-Management-of-COVID-19.pdf>

STORY AT-A-GLANCE

- New York pulmonologist Dr. Pierre Kory, an unapologetic champion of evidence-based medicine, has had remarkable success treating patients with ivermectin and other therapies during the pandemic
- His efforts to get the word out on this treatment protocol as part of the Front Line COVID-19 Critical Care Working Group (FLCCC) have largely been stifled by censorship, ridicule and colleagues — brainwashed by the official narrative — unwilling to accept the science
- Kory is driven to share what he's learned with as many people as possible because he believes that everyone should feel empowered to stay healthy; there are dozens of treatment options available for viral infections, about 90% of which are repurposed, cost pennies and are readily available
- Kory wants everyone to know that COVID-19 is a highly treatable disease, and if you're infected, the earlier you begin treatment, the better
- FLCCC's I-MASK+ protocol can be downloaded in full, giving you step-by-step instructions on how to prevent and treat the early symptoms of COVID-19

New York pulmonologist Dr. Pierre Kory, an unapologetic champion of evidence-based medicine, has had remarkable success treating patients with ivermectin and other therapies during the pandemic. His efforts to get the word out on this treatment protocol as part of the Front Line COVID-19 Critical Care Working Group (FLCCC) have largely been stifled by censorship, ridicule and colleagues — brainwashed by the official narrative — unwilling to accept the science.

Kory spoke with Dr. Chris Martenson, host of the Peak Prosperity podcast, about his incredible experiences over the last nearly two years.¹ On December 8, 2020, Kory testified to the Senate Committee on Homeland Security and Governmental Affairs, which held a hearing on “Early Outpatient Treatment: An Essential Part of a COVID-19 Solution.”

He called on the NIH, CDC and FDA to review the expansive data on ivermectin to prevent COVID-19, keep those with early symptoms from progressing and help critically ill patients recover.^{2,3} As he told Martenson, due to their promising results, he believed early on that “the pandemic has been solved,” until he realized that those in power weren't open to hearing what he had to say.

Despite his impassioned pleas and astonishing science to back them up, the treatment not only was ignored by the Senate committee but promptly eviscerated.⁴ Now, he feels his colleagues in the health care field are living in one of two worlds — by either not following the data or putting patients first because they’re afraid of losing their job or status, or by risking everything to put patients first. He’s become estranged from many colleagues who he says “don’t get it.”

There Is Treatment Available for Viruses

Kory’s eyes have been opened to the reality that many people only hear or believe what public health officials tell them, whether it’s because they’re overworked and don’t have time to delve into the real data or because they’re following with blind trust. Many of Kory’s colleagues have gone along with those they believe to be authoritative experts, even when their guidance defies logic and commonsense. Kory’s trust in the “experts,” however, started to erode the more that he learned.

One of Kory’s role models is Dr. Paul Marik, a critical care doctor at Sentara Norfolk General Hospital in East Virginia, who is renowned for his work in creating the “Marik Cocktail,” which significantly reduces death rates from sepsis using inexpensive, safe, generic medications.⁵

Marik was one of a small group of critical care physicians who formed FLCCC, which developed a highly effective COVID-19 treatment protocol known as MATH+.⁶ Marik is so in tune with science that if he reads a new study and has questions, he’ll contact the first author on the paper to get direct answers.

Right off the bat, the MATH+ protocol led to high survival rates. Out of more than 100 hospitalized COVID-19 patients treated with the MATH+ protocol by mid-April 2020, only two died. Both were in their 80s and had advanced chronic medical conditions.⁷

After several tweaks and updates, the prophylaxis and early outpatient treatment protocol is now known as I-MASK+⁸ while the hospital treatment has been renamed I-MATH+,⁹ due to the addition of ivermectin.

Kory is now a public face of FLCCC, and he’s forged a global network of colleagues who are willing to adapt to new information in any way they can to help patients. One of Kory’s biggest revelations involved the treatment of viruses — specifically, the fact that there are dozens of treatment options available, about 90% of which are repurposed, cost pennies and are readily available:¹⁰

“I went into this pandemic believing what I’ve been taught my whole career, which is that there is no specific antiviral therapy ... I mean, you get a cold, you just rest ... and now here I am 18 months later — oh my gosh — there are literally two dozen compounds and now we

have trial evidence showing pretty profound large magnitude benefits, either in the duration of symptoms, the duration of viral transmission, hospitalization and death.

We have a number of molecules that actually reduce mortality in what's turned out to be a deadly viral disease. This isn't the common cold, we're clear on that.

I went from, there's nothing to do for a virus to now, anytime I have a cold going forward, or any of my children, or any other virus that comes at us, we already have a whole armory of stuff that we can employ. And that data for those — which are best, which should be employed — is only going to increase.”

Giving Patients Agency Over Their Own Health

Marteson said that, since learning about accessible treatment options, “I feel like I have agency in my own health that I didn't have before.”¹¹ Kory mentions natural options like curcumin and nigella sativa, or black cumin, which he would have laughed off years ago, but now realizes they have multiple mechanisms by which they fight viruses:¹²

“Reading about something like curcumin or nigella sativa, which if someone told me a year ago to take something like nigella sativa — black cumin seed — it would save your life in a viral disease, I would have literally burst out laughing ... but when you look, there's literally 10 years of lots of little trials and studies that have evaluated and defined multiple mechanisms of black cumin seed — immunomodulatory, anti-inflammatory, antiviral.

So you have all of these building blocks, and then you have this trial from Pakistan — large randomized controlled trial with really large magnitude benefits — of literally nigella sativa and honey. And then you find out about honey. Honey also has pleiotropic properties.”

Kory is driven to share what he's learned with as many people as possible, because he believes that everyone should feel empowered to stay healthy, similar to what I have long advised — to take control of your health. He told Marteson:¹³

“It's so satisfying because now we have agency, and so many people have agency by learning this knowledge of things that are readily available, cheap, don't need a prescription, that you can actually treat yourself with very safe compounds. Not only is that agency so satisfying, but boy does it seem critical for the future. Is this going to be the last viral pandemic?”

His index case with ivermectin — the first person with COVID-19 whom he treated with the drug — is also etched in his memory. The patient — a “slightly older, slightly overweight” woman — was two weeks into COVID-19 and still having fevers and night sweats, so still quite sick. He treated her with ivermectin and she woke up in the morning feeling great:¹⁴

“Literally I saw what could only be described as a phenomenal response to a medication. So when we talk about data that we use, I’m sorry but I was sold right there on the first dose. First patient, first dose. And then I had repeated experiences.”

COVID-19 Is Highly Treatable

Fear has dominated the pandemic, but both Martenson and Kory say there’s no need to walk around in fear. As a lung and ICU expert, Kory is a master at treating acute illnesses which, he says, “is all about trajectories.” “When we make rounds on patients, we see them every day, we’re following their course ... in an ICU, I have to be very knowledgeable about their minute-to-minute, or sometimes hour-to-hour trajectory,” he said.¹⁵

He teaches medicine also, and he teaches his trainees to study trajectories in their patients. When the trajectory worsens, especially in critical illness, therapies must be instituted but, he says, when “I see a trajectory on the improvement, I always say just stand back. They’re getting better, they’re going to continue to get better ...”¹⁶

In the case of his index patient with ivermectin, she was on a steady trajectory, but it rapidly improved upon administration of ivermectin — a pattern he sees regularly with the drug. The ability to get a sense of this pattern recognition is what makes the difference between an expert and nonexpert in critical care medicine, Kory says.

“The longer you’re in medicine, the better you get at that and you can see which medicines are working.” In this case, ivermectin is one that quickly stood out from the rest. Especially if you’re an expert at trajectories, patterns and diseases, as Kory is, “you can figure things out much quicker than a massive, multicentered, double-blinded, randomized controlled trial.”¹⁷

If there were one thing that Kory could share, it’s that he wants everyone to know that COVID-19 is a highly treatable disease:¹⁸

“I want everybody to know how treatable this is ... I’m not that worried about it for me, my friends, my family, my colleagues. I’m not worried about it for those who follow the FLCCC and our protocols because we know that they’re effective.

And I just hope that umbrella of reassurance and protection, which is to say there are effective treatments which will save your life and prevent the need for hospitalization, I just hope that number grows. But me personally, I’m not that bothered by COVID. As you know, I actually got COVID. It was a relatively mild case and so I also have natural immunity in my camp.”

Early treatment, however, is essential. One of his friends became ill with COVID-19 and made the mistake of thinking he had a cold. He didn’t contact Kory until he’d been sick for seven or eight days and by that time, he said, “I had to pull out all the stops for him. I really

had to use every tool in my arsenal to keep him out of the hospital.” So if you have COVID-19, the sooner you implement the treatment protocol, the better.

There’s a War Against Truth

The successful treatment of COVID-19 using ivermectin and other therapies is being actively suppressed. Few, for instance, have heard about the astonishing success in Uttar Pradesh, India, which embraced large-scale prophylactic and therapeutic use of ivermectin for COVID-19 patients, close contacts of patients and health care workers.¹⁹

They’ve since had a COVID-19 positivity rate of almost zero, marking a major public health achievement that Kory believes should be a model for the world. Even the World Health Organization praised Uttar Pradesh for their excellent public health measures, which included sending people out to villages to conduct rapid COVID-19 tests and, if positive, treat patients and close contacts with ivermectin.

WHO, however, did not mention ivermectin as part of Uttar Pradesh’s success story.²⁰ Kory now calls the FLCCC an “army,” because “they’re actively fighting a war”:²¹

“They’re challenging the pharmacists. They’re talking to their doctors. They’re writing to pharmacy boards ... I don’t think war is an overstatement here. There’s a war on truth. There’s a war on free discourse and sharing of opinions. One of the catastrophic things is the way they branded misinformation on the level of a felony. Someone who has an opinion that differs from the agency’s is automatically medical misinformation.

It’s treated as though it’s a scourge of society that needs to be extinguished. I think people are fighting back against that. It’s nice to hear the army and the tribe is growing and most important is, I think we’re helping people. We’re arming people with agency and the ability to navigate a pretty confusing world.”

FLCCC’s I-MASK+ protocol can be downloaded in full,²² giving you step-by-step instructions on how to prevent and treat the early symptoms of COVID-19. FLCCC also has protocols for at-home prevention and early treatment, called I-MASS, which involves ivermectin, vitamin D3, a multivitamin and a digital thermometer to watch your body temperature in the prevention phase and ivermectin, melatonin, aspirin and antiseptic mouthwash for early at-home treatment.

Household or close contacts of COVID-19 patients may take ivermectin (18 milligrams, then repeat the dose in 48 hours) for post-exposure prevention.²³ FLCCC also has a management protocol — I-RECOVER²⁴ — for long-haul COVID-19 syndrome. The protocols are translated into 23 different languages to provide widespread, free access to this lifesaving information, including how to get ivermectin.²⁵

FLCCC remains hopeful that ivermectin will be formally adopted into national or international COVID-19 treatment guidelines in the near future.