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# Information for Patients-FAO

## Coronavirus Covid-19 Treatment 5 Days

### The Zelenko Protocol

- HCQ 200mg Twice a day
- ZN 220mg Once a day
- AZM 500mg Once a day

### What is Hydroxychloroquine?

Hydroxychloroquine is a medicine that has been proven to be useful in the treatment of certain viruses and ailments such as malaria, lupus erythematosus and rheumatoid arthritis.

### Why does the regimen contain zinc?

Zinc has antiviral properties and when used with hydroxychloroquine, it forms a powerful defence against the coronavirus.


### Is it safe?

Hydroxychloroquine and Azithromycin are some of the most commonly prescribed medications in the world today. They have been around for decades. They are prescribed to tens of millions of people every month and have an excellent track record.

### I prefer homeopathic medicine. Should I wait and only take it if I REALLY need it?

**Absolutely not.** Waiting can result in severe injury or death. Treatment is most effective if taken at the early onset of primary symptoms.

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## **I just got tested for coronavirus but my physician has started me on the medication before seeing the final results. Why?**

Delaying treatment can reduce the efficacy of the medication. The benefit of commencing treatment early, even before test results are in, far supersedes the low risks of unnecessary treatment. Fatality from coronavirus is a very real risk.

## **By what rate does this medicine increase my chances of survival?**

These exact rates are currently being studied. Primary trials and studies have shown a 10 fold increase in survivability when compared to those who do not take the medication or, who commence medication after symptoms have worsened.

## **What are the side effects of the medication?**

The most common side effects are: headache, dizziness, diarrhea, stomach cramps, vomiting and heartburn.

## **What are some negative effects of coronavirus?**

Negative effects include thrombosis requiring leg amputations, kidney failure requiring dialysis, heart inflammation, strokes in younger patients, pulmonary embolisms, multi-system organ failure, immune complications, kawasaki disease in children, pneumonia, acute Respiratory Distress Syndrome and death.

## **Have any trials been done?**

Because the Coronavirus is a very new illness, trials are still in process. New trial results are concluding almost every week. Unfortunately most mainstream media outlets tend to omit information on successful trials. As the famous adage states, "Good news does not sell papers." The successful trials thankfully are all published online and can be accessed in medical journals.

## Is it approved by the FDA?

They are approved by the FDA for conventional treatment and for the treatment of coronavirus on an emergency basis.

The emergency designation can become permanent once sufficient trials are concluded.

## Are these drugs used around the world?

Many nations around the globe have instituted the early use of these drugs with positive results. Every week more countries are beginning to use it. Many nations have lowered their fatality rate after starting to use these drugs such as Italy, Turkey and South Korea.

## Have any trials been concluded?

Yes, a few trials of various sizes and drug combinations have been concluded thus far.

The results are divided into four groups.

1. Trials that test the drugs' effects on patients in **early stages** of the disease have shown **positive** outcomes.<sup>1</sup>
2. Trials that test the drugs' effects on patients in **advanced stages** of the disease have shown **poor outcomes**.<sup>2</sup>
3. Trials that test the drugs' effects on patients in early stages of the disease and do NOT include zinc have shown positive outcomes.<sup>1,3</sup>
4. Trials that test the drugs' effects on patients in **early stages** of the disease and do **include zinc** have shown **excellent** outcomes.<sup>4</sup>

## I read that a trial came out that showed that hydroxychloroquine didn't work. So why am I taking it?

Many new trial results will be released over the coming weeks and months. The actual results are made available to the public. It is important to research the following:

1. At which stage in the disease was the medication administered?

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<sup>1</sup> <https://doi.org/10.1016/j.tmaid.2020.101738>

<sup>2</sup> <https://www.medrxiv.org/content/10.1101/2020.04.16.20065920v2>

<sup>3</sup> <https://www.preprints.org/manuscript/202005.0057/v2>

<sup>4</sup> <https://www.researchgate.net/publication/341254876>

2. Did the medication include zinc?
3. How high of a dosage was prescribed?

Trials are showing that patients treated during late stage advancement of the disease show less efficacy.

Trials that show early treatment have more efficacy.

## **Why did the FDA put out a warning concerning it's side effects?**

The US Food and Drug Administration (FDA) has a mandate to caution the public of any risks that a food or drug might pose to the public, regardless of how minute.

The risks do not need to be proven in order to set off an FDA caution alert as the "FDA does not require that a causal relationship between a product and event be proven."

For example:

The FDA issued an alert for Tylenol in Aug. 2013 warning of potentially fatal skin reactions and another for Ibuprofen (Advil, Motrin) in July 2015 warning of heart attacks and strokes.

These medicines are not under any recall by the FDA because they are generally safe and widely used.

A product is recalled when a reasonable dangerous risk is shown. None of the drugs in the regimen are subject to a recall.

The FDA is well known to issue warning letters about common products in an overabundance of caution. They have issued thousands.

## **What triggered a caution notice by the FDA?**


Since proof is not needed in order to trigger an alert it is hard to ascertain for certain what information was provided to cause the alert by the FDA.

There is reason to believe it stemmed from research studies using unreasonably high doses.

Tragically some researchers in certain foreign countries decided to ingest their human test subjects with toxic levels of these drugs to record their reaction. Levels high enough that it could kill a human. Abnormal heart arrhythmias were detected in those subjects.

## **I have a history of heart complications. Should I still take this medicine?**

Yes. Especially early, because the chance of a heart complication becoming exacerbated on short use of this medication is extremely rare.



At the same time, new data is emerging that the **virus itself** can create serious heart complications. Nevertheless, always inform your physician of any heart issues.

## **What are my chances of getting a heart attack because of this medication?**

If taken as prescribed, almost nil. No substantiated proof has ever been submitted of someone dying from these medications when taken in safe doses.

## **Why did my local government put restrictions on pharmacies to fill prescriptions of these drugs?**

Initially some regions were afraid that people would hoard these medications in some form and they would be quickly depleted. Most regions and pharmacies have successfully increased their supplies.

## **Why is the drug referred to as unproven on the news if I heard it works on Covid-19?**

Until recently, these drugs have been medically proven to successfully treat many ailments but only anecdotally reported to treat covid-19.

To term “proof” in a court of law is different then the medical use of the term proof.

The medical scientific community does not accept anecdotal evidence as medical proof of a drug's effectiveness unless it is accompanied by a medical trial or study. This holds true regardless of the sheer size of doctors who report positively on it. The term anecdotal refers to a physician's findings outside of a trial or study.

## **Why are some doctors refusing to prescribe the regimen?**

Physicians are under tremendous pressure by their local medical board. They fear they may be sanctioned or lose their medical license if they do not follow “recommendations” set by that board.

Other physicians however may be more liberal on this front.

## **Help! My doctor won't prescribe the medication. What do I do?**

If your physician refuses to prescribe you the medication in your region or your pharmacy will not fill it, please try the following options:

- Seek a second or third opinion.
- Have someone travel to a region with less restrictive dispensing rules.

- Find a telemedicine option where the drugs are couriered to you.
- Call a doctor friend who might be able to assist you.

If all else fails, speak to your physician about taking a supplement called quercetin that might be helpful in place of hydroxychloroquine **when no other above option is feasible**. The recommended dose would be 500mg per day. It can also be used as a prophylactic as well.

## **I am not feeling 100% yet. Should I take the medicine for another five days?**

Talk to your health care provider.

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