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JESUS CHRIST IS COMING

REVELATIONS TIME OF THE END

THE SOUND DOCTRINE

**COVID 19: BAN ON
EFFECTIVE REMEDIES**

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Jesus Christ is the True God And Eternal Life

***But you, Daniel, shut up the words, and seal the book until the time of the end; many shall run to and fro, and knowledge shall increase.
Daniel 12:4***

Go your way, Daniel, for the words are closed up and sealed till the time of the end. Many shall be purified, made white, and refined, but the wicked shall do wickedly; and none of the wicked shall understand, but the wise shall understand.

Daniel 12:9-10

**Before you begin reading this Teaching,
Take a few minutes and meditate on the following question:**

Where will you spend your Eternity?

In Heaven?

Or

In Hell?

**Hell is Real, and it is Eternal.
Think about it!**

Enjoy your Reading! May God reveal Himself to you!

Warnings

This Book is free of charge and can in no way constitute a source of business.

You are free to copy this Book for your preaching, or for distribution, or also for your Evangelism on Social Media, provided that its content is not modified or altered in any way, and that the website mcreveil.org is cited as the source.

Woe to you, greedy agents of satan who will try to market these teachings and testimonies!

Woe to you, sons of satan who like to publish these teachings and testimonies on Social Media while hiding the address of the website www.mcreveil.org, or falsifying their contents!

Know that you can escape the justice system of men, but you certainly will not escape the judgment of God.

You snakes! You brood of vipers! How will you escape being condemned to Hell? Matthew 23:33.

Nota Bene

This Book is regularly updated. We recommend that you download the latest version from www.mcreveil.org.

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COVID 19: BAN ON EFFECTIVE REMEDIES

(Updated on 01 01 2024)

1- Introduction

Dear brothers and friends, as we told you in a recent teaching entitled "**The Covid-19 Lie Exposed**," God is stirring up the courage of many doctors, researchers, and men, human and conscious, to expose the great lie of the century called the Covid-19 Pandemic. As you will read below, these honest and conscious men and women are fighting as hard as they can to dismantle and expose this gross fabrication of the agents of Hell who run this world. They all confirm what the British speaker David Icke has been saying lately in a very interesting article that we made available to you a few months ago entitled "**David Icke: The Covid-19 Conspiracy**". Those of you who have not yet read it can find it on the website www.mcreveil.org in the Health section.

The text below is a transcript of the video (available on mcreveil.org) of a documentary film by **Alexandre Chavouet**, entitled "**MAL-TRAITÉS: Covid-19, Comment Les Malades ont été Privés de Remèdes Efficaces**" (**POORLY TREATED: Covid-19, How Sick People Have Been Deprived of Effective Remedies**). These professional and competent Men, denounce openly, how the scoundrels who run France, with the complicity of their companions in other countries, have **voluntarily and consciously** fought against medicines that could cure the sick, to impose on doctors, poisons that would kill the sick in large numbers.

These professionals who have chosen to put their lives and their profession at risk to expose this organised crime against humanity are **Dr. Jean-Jacques Erbstein**: General practitioner; **Prof. Didier Raoult**: Professor of microbiology, Director of the IHU in Marseille; **Prof. Christian Perronne**: Head of the Infectious Diseases Department at the Raymond-Poincaré University Hospital in Garches; **Dr. Éric Ménat**: General practitioner, specialist in nutrition and phytotherapy; **Me. Fabrice Di Vizio**: Lawyer specialised in private practitioners; **Dr. Éric Chabrière**: Biologist, in charge of the development of the IHU Méditerranée Infection; **Pr. Michael Holick**: Endocrinologist, specialist in Vitamin D, professor of medicine - Bodson University; **Dr. Claude Lagarde**: Doctor of Pharmacy, biologist, expert in micronutrition; **Pr. Vincenzo Castronovo**: Micro-nutritional and Functional Preventive Medicine, University of Liège, Belgium; **Dr. Dominique Baudoux**: Doctor of Pharmacy, Director of the International College of Aromatherapy; **Prof. Cédric Annweiler**: Head of Gerontology Department, University Hospital of Angers (Maine et Loire); **Dr. Pierre Kory**: Pneumologist, Director of the Intensive Care Unit. All of them recognise that **Covid-19, which has been set up as a pandemic, is a farce**.

This documentary film confirms the other revelations that we have made available to you concerning the abuses of conventional medicine, as well as the satanic plan of the reptilians who rule this world. You will find all these revelations on the website www.mcreveil.org, in the Health section.

[Start of the Documentary]

2- Lying about Hydroxychloroquine

Narrator: March 2020. We are in the East of France, in the middle of the first Covid-19 epidemic. The region's health professionals are experiencing a real nightmare. Jean-Jacques Erbstein, a general practitioner and author of the book **"Je ne pouvais pas les laisser mourir"**, (I couldn't let them die), has been on the front line.

Dr. Jean-Jacques Erbstein: I started to see people dying and our waiting rooms became trenches. We saw the epidemic rising, and we saw our first patients die. I saw my first patients die, in strict accordance with the government's doxa, which later became, somewhat ironically and somewhat cynically, the 4D rule: **Doliprane-Dodo-Home-Death**. We can't start letting people die without lifting a finger. After all, we are general practitioners. I've been in practice for 25 years, and my patients have trusted me for 25 years. I can't say to them *"Stay at home and wait for it to pass"*.

One afternoon I saw a 40 year old patient who had the symptoms of Covid. So I did the reflex *"Stay home, if it doesn't get better, you call me..."* She seized me on Messenger saying *"I'm not well."* It was midnight. I said, *"What the hell's going on?"* *"Look, I'm having trouble breathing."* I asked her to count her respiratory rate which was above 30. There I said, yes that's not good. It's above 25 to dial the 15. *"So dial the 15 immediately and you let me know."* So, she called 15 and the return from 15 was *"Stay home."*

I think at that point the ICU was on the verge of imploding. So I said, *"Stay at home, okay. You take the advice. You call me if anything really goes wrong but I'll come and see you tomorrow."* And the next day I went to see her, I prescribed the theoretical management that we had thought of. There were four things. There was Azithromycin, an anticoagulant because we were beginning to know that there were clots that could form, a drug to help her breathe, and then Zinc because Zinc has antiviral properties. 48 hours later, nothing. No more symptoms. You think, *"Well, something's going on."* I had to treat 80 patients and the conclusion was simple: **zero hospitalisation and zero death**. And my friend Denis Gastaldi must be at more than 100. Finally, we were three general practitioners, we had almost 200 patients treated with Azithromycin with results that were really encouraging. And we no longer have a death or hospitalization.

Narrator: Dr. Erbstein and his colleagues decide to publish an article in the Est Républicain, a regional newspaper, in order to share their promising observations with the public.

Dr. Jean-Jacques Erbstein: There was an emergency, an absolute emergency. People were falling as if at Gravelotte, they were dying a little bit. We realised that we might have a solution, not the solution, but a solution that was in front of us. So we were very careful. And that's when the problems came. The paper came out on Easter Sunday. On Easter Monday, it was picked up by Le Parisien. On Tuesday morning at 8am, the President of the Council of the Order called, saying: *"What are you doing here?"* And the President of the Council of the Order tells me: *"Now do what you want, but you stop all communication."*

Narrator: Despite the lives saved, Dr. Erbstein finds himself accused by the Council of the Order of not having taken into account governmental instructions. On June 9, 2020, despite the encouraging results and the observed effectiveness of his protocol based on Azithromycin and Zinc, the DGS, Direction Générale de la Santé (General Medical Council) wrote a letter to all doctors in France.

Dr. Jean-Jacques Erbstein: When the DGS bans, advises against prescribing Azithromycin, not only do prescribers like us not understand, but what is terrible is that the general public does not understand. Because the general public, who have been successfully treated with Azithromycin, say *"But wait, what are they doing to us here?"*

Narrator: Yet this decision is nothing compared to what happened with Hydroxychloroquine, another molecule that is going to be at the heart of the biggest controversy. And for some, the biggest scientific scandal of the 21st century.

Prof. Didier Raoult: How do you explain this completely crazy, completely delirious war against Hydroxychloroquine?

Narrator: Did we or did we not let people die by denying them life-saving solutions? Many in the medical world are convinced of this. Especially since, as you will discover, several natural treatments have shown excellent results against Covid-19, without ever finding the slightest support from the media or the health authorities. For what reasons and in whose interest?

Prof. Christian Perronne: When there is a pandemic, from the pharmaceutical industry's point of view, we say that there is always money to be made, because billions of people in the world may be affected. If a drug is found and can be patented for that, it can generate hundreds of billions of dollars in revenue. Unfortunately, when there is a pandemic, there are people who think, *"I have to save the patient urgently,"* and others who think, *"I have to put a lot of money in my wallet."*

Narrator: Professor Perronne is well aware of the excesses of pharmaceutical companies. He has chaired commissions at the French Medicines Agency and at the High Council for Public Health. At the World Health Organisation, he was Vice-Chairman of the group of experts on vaccine policy in Europe. Prof. Perronne has thus held the most prestigious positions in infectious diseases. But he has always defended the patients against the single medical thought. Already in 2017, he denounced the Lyme disease scandal.

Archive - Excerpt from a TV Newspaper:

(Prof. Perronne on Lyme disease): *[Prof. Christian Perronne: In France today, there are hundreds of thousands of people in great suffering, who are rejected by the medical system, who are paralysed. On a European scale, there are millions. And meanwhile, the authorities say: Everything is fine. So it's a real health scandal.]*

Narrator: In 2020, he published ***"Y a-t-il une erreur qu'ILS n'ont pas commise?"*** (*Is there a mistake THEY didn't make*) to denounce the influence of the pharmaceutical industry in its attempt to demonise Hydroxychloroquine,

marketed in France under the name Plaquénil, an old and cheap treatment which showed early on a promising efficacy against the coronavirus.

Pr. Christian Perronne: It is the greatest hoax, unfortunately sinister, in medicine. We had plenty of studies showing that it worked. There is a kind of international coalition, both of Big Pharma, of the Presidents of learned societies who receive a lot of money from the pharmaceutical industry, of a whole bunch of groups of experts who were full of conflicts of interest. They spent their time bashing Hydroxychloroquine. And for me, it's an absolutely huge scandal.

Narrator: Unfortunately, history is regularly punctuated by numerous health scandals which confirm that the pharmaceutical industry is primarily concerned with financial profitability, without regard for public health, often with the complicity of health agencies and their experts in conflicts of interest.

Vioxx, an anti-inflammatory drug prescribed for pain related to joint diseases, is believed to have caused 160,000 heart attacks and strokes and 40,000 deaths in the US alone. Despite the facts, health authorities kept Vioxx on the market until it was withdrawn in 2004. Vioxx is said to have earned its laboratory 12.5 billion dollars.

The Mediator scandal has also helped to reveal the excesses and greed of the pharmaceutical industry. Between 1976 and 2010, the Servier laboratory marketed this appetite suppressant, whose side effects, although known by the laboratory, cost the lives of thousands of patients. The Medicines Agency turned a blind eye and this scandal led it to change its name. From AFSSAPS, it became ANSM.

During the H1N1 flu epidemic in 2009, France spent more than €100 million on Tamiflu, an ineffective and toxic drug that was banned in Japan after it was suspected of causing the deaths of children and adolescents.

New treatments, vaccines, ... For the pharmaceutical industry, the Coronavirus represents an unprecedented commercial opportunity. While laboratories such as Abbvie and Gilead are trying to position their drugs on the Coronavirus market, one man wants to upset Big Pharma's commercial plans. His name: Didier Raoult. Considered one of the world's leading specialists in infectious diseases, Prof. Didier Raoult heads the IHU Méditerranée Infections in Marseille, a centre that is 100% independent of the pharmaceutical industry and has a worldwide reputation in the field of infectious diseases.

At the beginning of 2020, Prof. Didier Raoult and his team of researchers were examining recent data from Chinese scientists that highlighted the effectiveness of a Hydroxychloroquine-based treatment, studies that were noisily contested by certain French experts.

Pr. Didier Raoult: That people who have never treated a Coronavirus infection should have an opinion on people who have 20 trials underway, and for whom the elements were sufficient for the government and all the Chinese experts who know the Coronavirus (not only on paper, it's their job), to take an official position by saying, "*Now we must treat Coronavirus infections with Chloroquine*", it's unconscionable to say, "*Listen to the Chinese, we don't care.*"

Pr. Christian Perronne: Then came the first study by Didier Raoult, who had contacts in China, who knew all this and who started to do a study, ... At the beginning, it was on 24 patients, a small number of patients. This study already showed that something was happening. Because it was contested, "*24 patients is nothing at all.*" Then he put in 80, then 1500, then 3500, and then people continued to say "*but what Raoult is doing is nonsense.*"

Narrator: While Professor Raoult's Hydroxychloroquine treatment seems to be working for Covid-19 patients, the French health authorities and many experts are strangely reluctant.

Excerpt from a TV Newspaper:

[Christian Estrogi: In France we are lucky to have the best French scientist recognised on the international scene. The greatest researcher. Well, I'm not saying, and he's not saying it either; besides, you did an interview with him a few days ago in which he answered with great modesty, that this is the solution, that there is an absolute remedy for this.]

Narrator: In France, while the use of Hydroxychloroquine is divisive and controversial, many countries abroad are using it successfully.

Prof. Christian Perronne: Very quickly, the Italian government reacted perfectly. So did the Italian experts. They told all the general practitioners in Italy to give Hydroxychloroquine. And we saw the lethality drop. In Portugal, from the beginning, they told the doctors to give Chloroquine. The lethality was very low, less than 5%. In Greece, it was wonderful, they have a very low case fatality but they gave Chloroquine to everybody. And if you go outside Europe, look at Morocco, it's 2% case fatality, they treated everybody with Hydroxychloroquine, Azithromycin.

Narrator: And yet, despite this promising data, the Minister of Health Olivier Véran made an announcement that would be a bombshell for all French doctors. On 27 March 2020, the government is banning city doctors from prescribing Hydroxychloroquine.

Excerpt from a TV Newspaper:

[Olivier Véran: The High Council excludes any prescription in the general population or for non-severe forms at this stage, in the absence, it says, of any evidence. Let's trust our researchers.]

Pr. Christian Perronne: When Hydroxychloroquine was banned, I was deeply shocked because scientific publications showed that it worked, the experience of all doctors showed that it worked, town doctors had started to use it, it worked, and the decree was issued as a matter of urgency after an opinion from the High Council for Public Health. I was President of the Commission for Transmissible Diseases. I know how it works. There are rules of procedure, there is a conflict of interest charter, nothing has been respected. There was no meeting of the Commission, it was a group of experts where there were members of the Council, or not, who met. It was validated by the President without any meeting, any vote, any declaration of conflicts of interest. So, already, the opinion of the High Council of Public Health was totally illegal and the Minister relied on it to pass an emergency decree which was an absolute scandal in France, because people

were left to die, general practitioners who had mobilised to save people were forbidden to treat people. ***France is the only country in the world to have forbidden doctors to use Hydroxychloroquine, which was for me a state scandal.***

Dr. Jean-Jacques Erbstein: As a matter of form, I find it scandalous. It is not appropriate to prevent a doctor from prescribing a treatment, unless there is evidence that it is harmful. This is the first time that a doctor has been prevented from prescribing. But not just any doctor, general practitioners. Because in the hospital, everyone has run away from Hydroxychloroquine. It's only us, the general practitioners, who have been completely muzzled.

Dr. Éric Ménat: This is a very serious scandal in terms of our health and our health system. First of all, we did worse than that. Patients have even been advised not to see their doctor. To think that we have people whose job it is to take care of the sick every day, some of whom have been doctors for 30 years, and all of a sudden they say to their patients: *"Don't go to your doctor."* And then we are told that we have done ten years of studies but we are not able to determine whether a patient can or cannot take Hydroxychloroquine. We've been doing it for 30 years, it's so unbelievable. And that's what I've been fighting against the most, is this decree, which is total nonsense. 90% of the doctors with whom I've been able to talk about this subject have the same opinion as me because they are mostly general practitioners, so they really feel excluded from the system.

Pr. Christian Perronne: The opinion of doctors was not taken into account because general practitioners, they saw it clearly, at the beginning they did not give Hydroxychloroquine, they sent a lot of people to the hospital in intensive care, and when they started to prescribe, they did not send anyone to the hospital. They saw it! This experience and this wish of the patients were not respected. This is a very serious attack on the practice of medicine.

Prof. Didier Raoult: I do not agree with the idea that the State should take over tasks that are part of routine care, if you like, in place of doctors, and forbid them to do a certain number of things that are commonplace. And to put it quite officially, I am surprised that the Order of Physicians has accepted such a thing. If I had been President of the Order of Physicians, I would have resigned immediately.

Narrator: To justify the ban on prescribing Hydroxychloroquine, the authorities, with the support of the media, argue that it could be dangerous for patients.

Extracts from TV news:

[TV C News: *Among the treatments implicated is Plaquenil, the Hydroxychloroquine-based drug, which, when coupled with an antibiotic, can increase the risk of a heart attack.*

TV LCI: *Beware of chloroquine. It is the Agency of the Medicines which thus launched an alarm this night.*

TV LCI: *The drug that is the subject of much hope today can be deadly. It remains a dangerous product if it is misused].*

Prof. Didier Raoult: Honestly, if one day we start thinking about the history of Hydroxychloroquine, which is the most fantastic story I have heard in medicine in my life, it is a drug that's been around for 80 years, that's been prescribed to maybe a third of the world's population, that in France is sold at 36 million pills/year. And all of a sudden, all the authorities start saying that it's a terrible, criminal thing, that we're all going to die of cardiac arrhythmia because we're taking this thing. I have never heard of anything as fantastic as that, it is unheard of.

Narrator: Before the Coronavirus crisis, Hydroxychloroquine or Plaquenil had an excellent reputation. It was high on the World Health Organization's list of essential medicines. But it is also, as Prof. Raoult reminds us, a drug that has been known for a long time, as it is a derivative of Chloroquine used since the 1950s by hundreds of millions of people in the world to prevent malaria. Hydroxychloroquine has been given for decades to people who are known to be frail, such as pregnant women, children and the elderly. The drug is so safe that it was on sale over the counter until January 2020, when the Minister of Health, Agnès Buzyn, decided to withdraw its accessibility without any explanation.

Dr. Jean-Jacques Erbstein: There has already been one curious thing. It was in mid-January, when Agnès Buzyn asked that Hydroxychloroquine, which was sold over the counter, become subject to medical prescription. That was a bit strange...

Narrator: Then, in March 2020, Hydroxychloroquine became a very dangerous drug overnight.

Pr. Christian Perronne: While Hydroxychloroquine has publications that show that it works, that it is not expensive, the Medicines Agency has not stopped saying that it was toxic, that it caused heart problems, whereas the heart problem came from Covid and not at all from Hydroxychloroquine. Now it's recognised.

Dr. Éric Ménat: I think that this story about the side effects or dangerousness of Hydroxychloroquine is the best medical and scientific joke that has been invented since January 2020, since the beginning of this pandemic. I have been using Hydroxychloroquine for 15-20 years, and particularly for ten years in infectious diseases. I've never had an accident but that's not a statistic. So I went and really looked for what studies were available. And among the many studies I could find, I saw a work of the HAS, the High Authority of Health of 2009, it's not so old, which had re-examined and re-evaluated Hydroxychloroquine, as an over-the-counter drug. They studied it for six months. 100,000 prescriptions, 65% of those prescriptions were from general practitioners. So that proves that everybody was prescribing it very widely. And the conclusion is: the drug is still just as effective and just as safe. And not only was the MA (*marketing authorisation*) restored, but also the authorisation to sell Hydroxychloroquine without a prescription, i.e. over the counter, in 2009. You can imagine that such a study carried out by the High Authority for Health, not so long ago, therefore with modern means, if there had been the slightest danger from Hydroxychloroquine, we would have seen it. You should know that Hydroxychloroquine has been prescribed for diseases like Lupus and Polyarthritis

for years. It's not ten days. For Coronavirus, it was a 10-day treatment. Really, we were laughed at.

Narrator: Has there been some kind of conspiracy against Chloroquine, an old generic drug that makes no money for the pharmaceutical industry? What happened with the *Lancet* scandal may give us the answer. On 22 May 2020, Hydroxychloroquine will become the target of a study published in *The Lancet*, one of the world's most prestigious scientific journals.

Extracts from TV news:

[TV5 Monde: *The British medical journal has published a large study. 15,000 patients were given four different combinations of these two molecules, alone or combined with an antibiotic. And the conclusions are very clear.*

Mandeep Mehra: *We asked a question: Is there any benefit to using any of these treatments in hospitalized patients with Covid-19? The answer is a No. A pretty conclusive No. There is not a shred of evidence that there is.*

TV C News: *Study concludes Chloroquine and Hydroxychloroquine should not be used outside clinical trials].*

Narrator: In the aftermath of the publication, immediate decisions are taken at the highest level to shoot down Hydroxychloroquine and torpedo ongoing studies. The WHO suspends treatment with Hydroxychloroquine in its large international Solidarity clinical trial. In France, the 16 clinical trials testing Hydroxychloroquine are suspended at the request of the French Drug Safety Agency. The Minister of Health, Olivier Véran, banned the use of Hydroxychloroquine in hospitals, even though its use was already very restricted. But all these hasty measures are in fact based on a fraudulent study. On 4 June, *The Lancet* reversed itself and stated in a press release that it was withdrawing the study.

Extracts from TV News and Press Articles:

[TV C News: *The Lancet is doing an about-face. In a statement released Thursday evening, three of the four authors of a recent study on Hydroxychloroquine question its validity.*

The Lancet press release: *We can no longer vouch for the veracity of primary data sources.*

TV C News: *The prestigious British scientific journal has also issued a profound apology].*

Dr. Éric Ménat: The *Lancet* study, which caused a scandal at one point and which was withdrawn very quickly, was very disturbing for us. So, for me, it was not a surprise, because I had already seen other studies in other fields that were totally bogus. This one was worse than the others because it was so crude that it was easy to see straight away. And besides, we were very shocked that a Minister of Health, a doctor, a specialist, used to reading studies all day long when he was in hospital, would take this study at face value immediately and take a political and legal decision with a decree triggered exclusively by this study, which was a totally bogus study.

Narrator: Olivier Véran's hasty decisions are all the more surprising as everyone in the scientific community knows that studies can be manipulated by the pharmaceutical industry.

Prof. Christian Perronne: And the editor of the *Lancet* himself made a pamphlet in 2016, to say, *"In my journal it's not right at all, it's infiltrated by the industry. We publish articles that are completely wrong."*

Excerpts from a TV Newspaper:

[BFM TV: The boss of The Lancet, Horton, said: Now, we will no longer be able to publish clinical research data because pharmaceutical companies are now so financially strong that they are able to have such methodologies to make us accept papers which, apparently, are methodologically perfect, but which basically say whatever they want to say about them. This is very serious].

Narrator: The Lancet scandal is staggering. But there is another huge scandal, this time Franco-French, which is splashing the Hydroxychloroquine studies. At the end of March, France launched a major study called Discovery to identify drugs that work against Covid.

Excerpt from a TV Newspaper:

[Emmanuel Macron: We have the Discovery protocol, which we believe in a lot, and which is very important, which is a European protocol. As you know, there are several branches, there is one on the famous Hydroxychloroquine and Azithromycin, there is also one on Remdesivir and several other treatment protocols. We will have results on May 14th].

Narrator: Finally, after months of expectations, partial results came out in September, and they are startling. In Discovery, the group of patients who received Hydroxychloroquine had 31% fewer deaths than the group who did not receive the drugs. The study also showed a 17% reduction in the severity of symptoms, which is very encouraging for this drug. However, it should be noted that these results are not statistically significant because the number of patients is not large enough. This means that more patients should be included to confirm this good result. But this is not what the French study leaders decided. On the contrary, in mid-June, they decided to stop the study, making the results, which were nevertheless favourable to Hydroxychloroquine, statistically questionable. And exactly the same thing happened at the Angers University Hospital where Hydroxychloroquine was tested against Placebo. The Hycovid study was stopped abruptly, while Hydroxychloroquine was showing a 46% reduction in mortality. Again, the result is not statistically significant, due to the lack of a sufficient number of patients. But with such a positive signal, a halving of mortality, there was every reason to continue the study rather than stop it mid-stream.

Prof. Didier Raoult: I would like investigative journalists to question the people in charge of these trials, to say to them: How come you stopped them? What is the scientific rationale for stopping a treatment that has been started, that is official, that you stop prematurely when you only have part of what you had planned to do and the preliminary results are in favour of Hydroxychloroquine. That's an interesting question.

Narrator: This case is all the more disturbing because by comparison, another drug has been treated very differently. It is Remdesivir. A drug costing 2000 euros per dose, manufactured by the Gilead laboratory. In September 2020, Prof. Yazdanpanah, Discovery's main architect, was heard by the Senate.

Excerpt from a TV Newspaper:

[Prof. Yazdanpanah: As far as Remdesivir is concerned, we don't have any evidence on the efficacy of this treatment at the moment. There have been four international clinical trials on Remdesivir for us. There are none that really show us that this treatment is effective, so we feel that we need to continue to evaluate these treatments...]

Narrator: So despite the accumulation of unfavourable studies, Prof. Yazdanpanah wants to continue the Discovery trial on Remdesivir, while the Hydroxychloroquine trial was stopped at a time when it appeared to reduce mortality by 31%. So why such a double standard? Could this drug, Remdesivir, be a key to explaining the Hydroxychloroquine scandal? This is the lead clearly mentioned by Professor Raoult, who was heard by the Senate in June 2020.

Prof. Didier Raoult: I recommend that you do a real investigation of Gilead and Remdesivir. If you look at the structure of Gilead, you will understand that it is something that works with very few products, very few staff and considerable influence.

Narrator: What happened in the weeks following this hearing will definitely prove Professor Raoult right. In July, to everyone's surprise, Remdesivir was granted a temporary marketing authorisation by the European Union and France. This was more than surprising because there was no proof of its effectiveness and there were clear signs of its toxicity on the kidneys and liver.

Dr. Éric Ménat: It causes potentially serious kidney failure in people. I remind you that those who are really sick are often frail, elderly people, their kidneys are already tired, and in addition the disease, the virus, attacks the kidney because you know that apart from the lungs, it attacks the heart and the kidney. So we are faced with a virus that attacks the kidney in people who already have a fragile kidney, and we give them a drug that causes kidney failure. Is this reasonable?

Dr. Jean-Jacques Erbstein: Remdesivir is already an expensive, heavy, hospital-based treatment, full of side effects.

Dr. Éric Ménat: It is an expensive, injectable drug, reserved for hospitals. It is an antiviral. So it can only work in the first phase of the disease. When you are hospitalised and you start to be in intensive care or at least under oxygen, and you start to suffer from respiratory insufficiency, it's over, it doesn't work any more. You have to give it much earlier, like Hydroxychloroquine. Except that we don't have it in town because it's a hospital drug. So it's doubly absurd, because we're putting forward a drug that is exclusively for hospital use, for patients who need to be treated before they get to the hospital. On the other hand, you have Hydroxychloroquine. Hydroxychloroquine has been known for 30 years. We know all its side effects, we have no unknowns about this molecule, and it costs 4 euros. You are the Minister of Health, which one do you decide to try? The one you don't know, which costs between 2000 and 4000 euros? Or the one you know perfectly well and that costs 4 euros? This is what I think of Remdesivir.

Me. Fabrice Di Vizio: When the ANSM granted Remdesivir a provisional marketing authorisation, i.e. a TAU, well, two days later, the High Council of

Public Health, at the end of these debates, which are public, and we have the transcripts, said that it was ineffective, expensive, and that no proof of clinical effectiveness had been provided. So how could the ANSM grant authorisation with the text saying: *"A strong presumption of efficacy"*, when the experts, two days later, said that it was notoriously ineffective...

Pr. Christian Perronne: And in record time, in a fortnight, it was authorised by the American Medicines Agency, in record time by the European Medicines Agency, in record time by the French Medicines Agency, they have a marketing authorisation. But this is a huge scandal!

Narrator: This huge scandal becomes even bigger in the autumn. On 8 October 2020, the European Commission signs a contract with Gilead to buy 500,000 doses of Remdesivir. At more than 2,000 euros per treatment, this is a contract worth more than one billion euros for a drug that has never been proven to be effective. Even worse, a few days after this mega-contract, the WHO published the results of its major Solidarity trial. The conclusions are clear and definitive: Remdesivir does not save a single life and does not accelerate the recovery of patients. These definitive conclusions did not prevent the European Union from signing a one billion euro contract for this drug. And in the wake of this contract, Remdesivir is widely distributed in French hospitals.

Prof. Didier Raoult: Just after everyone agreed that Remdesivir was useless, we received a letter from the Ministry of Health, from the Director General of Health, saying, *"Now you can use Remdesivir whenever you want. It's free, we have as much as you want. So you can give infusions for ten days with a product that is useless and that we have bought. But you're not allowed to use Hydroxychloroquine which is a drug that two billion people have taken in their lives and which has not given any side effects, except basically eye problems when you take it for more than a year."* So if you like, there is a basic problem here.

Narrator: It's particularly shocking because at the same time the French Medicines Agency has refused to authorise Hydroxychloroquine in France again.

Me. Fabrice Di Vizio: The Agence du Médicament refused Professor Raoult a temporary recommendation for the use of Chloroquine, saying: *"Listen, we can't Professor, because you understand, firstly it doesn't work, secondly it's dangerous, it's even very dangerous Chloroquine."* Except that this same Medicines Agency had, two months earlier, three months earlier, in July, granted a temporary authorisation for use to Remdesivir, which was notoriously ineffective, and I'll come to that, and indeed, especially dangerous. What's behind it? All public health scandals start like this.

Narrator: This refusal to authorise Hydroxychloroquine is all the more shocking because at the end of October, the scientific evidence is now overwhelmingly in favour of this treatment. Out of 136 studies conducted on this drug, three-quarters conclude that it is effective against Covid-19. And when Hydroxychloroquine is given early enough, as recommended by Prof. Raoult, it shows efficacy in 100% of published studies. This is why so many countries use and recommend this drug worldwide. In the autumn of 2020, three of the world's

leading medical nations are officially recommending Hydroxychloroquine: China, which has included chloroquine in its official list of drugs for Covid; Russia, which recommends Hydroxychloroquine for early treatment; and India, which also recommends it for both prevention and treatment of Covid-19.

Prof. Christian Perronne: If we look at the countries where the lethality was the highest, it was the richest and supposedly most economically advanced countries, such as France, Great Britain and Belgium. And we see that these are the countries that are most influenced by the pharmaceutical industry. This is dramatic, whereas the so-called poorer countries, which did not have the means, managed extremely well with cheap drugs such as Hydroxychloroquine.

Narrator: In the face of all this evidence, the refusal of the Medicines Agency to authorise Hydroxychloroquine is difficult to understand.

Me. Fabrice Di Vizio: What indecency on the part of the ANSM to come and say that Chloroquine does not have a simple presumption of effectiveness, whereas Remdesivir had a strong presumption of effectiveness. ***We are in the midst of a state lie, the Paris Prosecutor's Office should open a judicial inquiry to find out why Chloroquine has been so decried since the beginning, and why Remdesivir, whose effectiveness has been recognised as null,*** has been authorised. What is behind this? We are taking the matter to the Public Prosecutor's Office because we think, we fear that we are indeed at the heart of a scandal.

Narrator: In fact, to impose Remedivir, Gilead brought out the heavy artillery behind the scenes. And it did so right from the start of the epidemic. During his hearing in the Senate in June 2020, Professor Raoult was already denouncing unorthodox methods.

Prof. Didier Raoult: I remind you that when I first started talking about Chloroquine, someone threatened me several times, anonymously. I filed a complaint and I ended up finding out that he was the one who had received the most money from Gilead in the last six years. So if you like, I have personal experience of things that don't seem right. Maybe it's a coincidence, but it's not sure because he told me that he forbade me to talk about Chloroquine. I have the emails, I have made an official complaint to the police, we know who it is.

Narrator: What the professor reveals is not an isolated case, because most French infectious disease experts have links of interest with the Gilead laboratory. The newspaper *Sciences et Avenir* has calculated the exact number: 85% of the most renowned French infectious disease specialists have received money from Gilead Sciences. In total, Gilead has paid 18.5 million euros to health professionals in France since 2013. Behind the scenes, the financial stakes are immense, as the evolution of Gilead's share price is directly linked to the question of the efficacy or otherwise of Hydroxychloroquine, and therefore partly to Prof. Raoult's statements.

Dr. Éric Chabrière: Gilead is a company that is listed at about 100 billion dollars. We can see on this graph, which is the stock market price, that its share price rose quite dramatically with the start of the pandemic. This has given an increase in the valuation of this company of about 30 billion dollars and we can

see that this increase is very fluctuating. So it's quite normal, in fact, that with each new piece of information, such as the beginning of tests, of clinical trials that show that Remdesivir is promising, that this stock goes up. But what is quite astonishing is that we can see that the falls in this share price seem to be explained by the promotion of the IHU, Hydroxychloroquine, therefore a competing treatment to Remdesivir. And we can see that these fluctuations are still significant and represent fluctuations of about 10 billion dollars in a few days.

Narrator: With billions at stake in the stock market economy, Gilead relies on its many experts with whom it has links of interest.

Excerpt from a TV Newspaper:

[TV5 monde: Hydroxychloroquine that Prof. Raoult defends, you don't, you stick to your guns?

Karine Lacombe: *I think the issue is now settled].*

Narrator: This is the case in particular of Professor Karine Lacombe, who has taken a stand on all the television platforms against Hydroxychloroquine. Karine Lacombe has received more than 200,000 euros from pharmaceutical laboratories, including 28,000 from Gilead. From the start, even before the results of the Discovery, she announced the ineffectiveness of Hydroxychloroquine.

Excerpt from a TV Newspaper:

[Karine Lacombe: Thanks to Didier Raoult, and we thank him for that, we set up the necessary tests much more quickly than expected, and we will show that Chloroquine does not work, but that others do.]

Dr. Éric Chabrière: All these experts that we saw continuously on the news channels never declared their links of interest, nor their conflicts. Normally, they should have withdrawn, but the media did not even do this work to explain to viewers what the links were between the people who claimed to be experts.

Dr. Éric Ménat: But is it possible today to have an expert who does not work for a laboratory, since the laboratories systematically have the best known experts work for them? There has been a lot of criticism of experts who have received money from laboratories, from Gilead among others. Did this really influence them? I don't know. I won't allow myself to put forward any accusations, but we need a counter-power. But today, we saw with this Coronavirus crisis that the counter-power did not exist. We saw that everyone was going in the direction of the richest. Everyone was going in the direction of the drug that would bring in the most money, and that's what's disturbing. So we say: Who should we trust?

Narrator: Gilead's influence is also at the highest level. Even our decision makers have been deceived. As a leading infectious disease specialist told *Marianne* newspaper: *"Gilead has reached such a level of power that it can count on certain leading professors to act as unofficial lobbyists (...) which is why Remdesivir ended up at the top of the chart without any proof of its effectiveness."*

Excerpt from a TV Newspaper:

[Journalist Sonia Mabrouk: *Mr. Minister of Health, the Government obviously owes the truth to the French on the management of the crisis. Do you rule out any suspicion of collusion between the interests of the Gilead laboratory and members of the scientific council?*

Olivier Véran: *I do not like ad nominam accusations. I consider that the members of the Scientific Council have been doing a free action for several months now in our country...*

Journalist Sonia Mabrouk: *Are you sure?*

Olivier Véran: *... have been important...*

Journalist Sonia Mabrouk: *That there is no suspicion of conflict of interest?*

Olivier Véran: *I am sure that they were not paid by the government or by anyone else to carry out their scientific work.*

Journalist Sonia Mabrouk: *That is not the question. Do they have financial links with laboratories?*

Olivier Véran: *If you quote the Gilead laboratory for example. When I was an MP, you can see that when there was a treatment for Hepatitis C that had emerged, ...*

Journalist Sonia Mabrouk: *But that is not my question!*

Olivier Véran: *... I myself had contacted the laboratories to say that the price was excessive.*

Journalist Sonia Mabrouk: *I hear you. My question, I repeat, concerns the members of the Scientific Council who managed this health crisis. Can you tell us this morning that you are sure that there is no link with these people and Gilead laboratories?*

Olivier Véran: *I can tell you, Sonia Mabrouk, that there was no hidden or direct intention on the part of any member of the Scientific Council to push us to prescribe any treatment whatsoever.*

Journalist Sonia Mabrouk: *Including Remdesivir?*

Olivier Véran: *Including Remdesivir. I have not had any recommendation from the Scientific Council on Remdesivir].*

Narrator: The journalist Sonia Mabrouk was right to be insistent. Most of the experts who advised the President of the Republic had links of interest with Gilead. This is particularly true of Professor Yazdanpanah, the pope of the Discovery study. This researcher sat on the Gilead bench at least 10 times between 2013 and 2015. In front of the MPs, Prof. Raoult did not hide his surprise when he discovered the intimacy of the head of the Discovery study with the director of Gilead.

Prof. Didier Raoult: I was surprised to see that the director of Gilead, in front of the President of the Republic and in front of the Minister, treated as a mate the person in charge of therapeutic trials in France for Covid-19. I am not used to being treated that way by the directors of the pharmaceutical industry. If he did, then I would not treat him as a mate. I won't do it.

Narrator: Bruno Hoen, Discovery's other leading expert, was a member of the French working group that spoke out in favour of Remdesivir on 5 March 2020. Bruno Hoen received no less than 52,000 euros from Gilead in benefits, remuneration, and expertise contracts. Even the President of the Scientific

Council Jean-François Delfraissy once took part in Gilead's Board in 2013. Even more worrying, Christian Chidiac, President of the Commission that advised the President of the Republic on treatments for the Coronavirus, has sat on Gilead's bench several times. According to Prof. Raoult, it was this man who influenced the Prime Minister to prevent hospital doctors from freely prescribing Hydroxychloroquine to Covid-19 patients.

Pr. Christian Perronne: What is becoming clear to the public is that, with regard to hydroxychloroquine, all the schemes of the pharmaceutical industry to promote very expensive drugs and to occupy the markets are being revealed in broad daylight.

Narrator: Indeed, while Hydroxychloroquine was being demonised, other effective molecules were simply ignored. This is the case with old drugs that are no longer under patent, such as Colchicine, Ivermectin and Fluvoxamine. All three have been shown to be effective against Covid-19 in placebo-controlled studies, yet the authorities and the media remain silent. It is as if there is no room in our medical system for molecules that no longer make money for the laboratories.

Prof. Didier Raoult: If you say now, when we are spending hundreds and hundreds of millions to find new molecules, that *"You know, you just need to recycle old molecules that are generic and cost nothing"*, you are sawing off a whole branch of science that has developed over the last 20 years, and so you have greater difficulties in finding people who look at this favourably. All this clashes with an economic model, not just with interests, how to develop a molecule that is no longer profitable is not done in our world.

3- Vitamin D: Essential to our body

Narrator: The victims of this economic model are not only the old generic drugs. There are also and above all natural molecules such as vitamins, minerals or medicinal plants which can be extraordinarily effective without the slightest undesirable effect. This is particularly true of Vitamin D, considered by many scientists to be the vitamin of the decade. Inexpensive, easy to take, and with no side effects, Vitamin D is at the heart of more than forty scientific studies, concluding with such spectacular results in the fight against Covid that it may not be believed. As you will discover, Vitamin D, as a preventive measure, can reduce the number of Coronavirus infections by half. But that's not all. Vitamin D treatment could have saved the lives of thousands of hospital patients.

Professor Michael Holick is one of the world's leading experts on Vitamin D. He is a professor of medicine, physiology, biophysics and nuclear medicine. He is the author of several studies on the action of Vitamin D against the Coronavirus. Professor Holick has invited us to share with us the startling results of his research, and the recent discoveries around Vitamin D.

Prof. Michael Holick: Our knowledge about Vitamin D has been turned upside down in the last decade. While its role is crucial for bone health and calcium metabolism, it is also crucial for many other biological functions, including reducing the risk of diseases such as common cancers, serious autoimmune diseases such as multiple sclerosis, rheumatoid arthritis, type I diabetes, but

also infectious diseases including, in our view, the Covid-19 pandemic, but also the risk of cardiovascular disease, Alzheimer's disease, depression and the list goes on.

Many studies have described how Vitamin D affects the immune system. We have found that a single dose of Vitamin D can affect 291 genes that regulate immune function, cell death and a range of biological processes. One of our studies showed incredible results: giving a person 600 units of Vitamin D a day regulated 150 to 200 genes in the immune system. But with 4000 units per day, this figure rose to about 300 to 400 genes and to over 1000 with ten thousand units per day. It is this major role in health and general well-being that explains the interest in it worldwide.

Narrator: In early 2020, when the epidemic hits the world, Professor Holick is convinced that Vitamin D could have an impact against the Coronavirus.

Prof. Michael Holick: When it all started last February, I was in Argentina on a fishing trip and caught the last flight home. I immediately wrote to my hospital, and others, saying that this pandemic could certainly be fought by increasing the population's intake of Vitamin D. Numerous studies, including data from the US National Health Survey, have shown that improved Vitamin D levels reduce the risk of upper respiratory tract infections, including influenza, and several cold viruses, such as Adenovirus, and Coronavirus.

We know the very important role of Vitamin D for the proper functioning of the immune system, which is the regulation of cytokine activity. One of the main complications of Covid-19 is the so-called cytokine storm, which causes many complications and deaths related to this infection. It is therefore not surprising that improving vitamin D levels can help combat this viral disease.

Narrator: Professor Holick is not the only one who immediately understands the exceptional value of Vitamin D in the fight against Covid.

Dr. Éric Ménat: Vitamin D is absolutely essential, it reduces, it has been proven, winter infections. You will have less frequent and less severe influenza. You will have fewer colds. You will even have less cancer! There was a very good Canadian study that showed that there were half as many breast cancers in women who had a sufficient level of Vitamin D, compared to those who were Vitamin D deficient. Here again, why weren't the French told: *"Go to your doctor, have your Vitamin D measured!"*

Dr. Claude Lagarde: It is a basic food supplement. If there was only one, it would be this one.

Dr. Jean-Jacques Erbstein: It is a vitamin that is manufactured and metabolised by the sun. So the sun is important. And for this vitamin to have a positive effect on your body, you should spend a quarter of an hour every day, half naked, in the sun.

Prof. Vincenzo Castronovo: When you don't have enough Vitamin D, the immune system will overreact, and we know that this overreaction will cause much more damage in the case of Covid-19 than the virus would have done.

And a lung that's attacked too much and is the object of too much battle will no longer be functional, and that's how the patient will die of asphyxiation.

Dr. Dominique Baudoux: The problem with Covid is one of inflammation. And when we look at the anti-inflammatory capacities of Vitamin D, we should systematically find it on all our breakfast tables!

Dr. Éric Ménat: And even if it doesn't work against the Coronavirus, we will have improved the health of the French, we will have improved their bones, we will have improved their immunity, we will have reduced the risk of cancer. So why didn't you propose it, instead of telling people *"Go home, close the windows, close the shutters and pray that you don't get sick"*?

Narrator: In France, on 22 May 2020, the Medical Academy published a communiqué in which the academics stated that Vitamin D should be given to Covid patients to alleviate the inflammatory storm and its consequences. This is extremely important information, but no media or health authority will relay it. Professor Holick then decided to carry out several full-scale studies to concretely evaluate the action of Vitamin D on the Coronavirus, at different stages of the disease.

Prof. Michael Holick: We did a study in the US of 191,000 patients with Covid-19. And we showed that vitamin D deficiency increases the risk of getting this disease by 54%, regardless of your ethnicity, age or where you live in the US.

Narrator: Professor Holick's results are exceptional. They are published on 17 September 2020 in the medical journal *Plos One*. But there's more. Not only does Vitamin D reduce infections by half, it also drastically reduces the severity of the disease.

Prof. Michael Holick: At the same time, we did another study to see whether or not patients who were hospitalised with severe infections had an increased risk of complications and death from Vitamin D deficiency. And we found that over the age of 40, people with vitamin D deficiency had a 50% higher risk of death, and they developed many more complications from the disease.

Narrator: Professor Holick does talk about a halving of deaths with good levels of vitamin D, which is an outstanding result. It may seem hard to believe, but these figures have been confirmed by over 40 international studies.

Prof. Michael Holick: If you look at the people who have and have not taken Vitamin D and who have been infected, and you look at the impact of Vitamin D in reducing the risk of complications or death, and the published scientific data, it could reduce severe forms of infection and the risk of death by 40 to 50%. I think we're talking about potentially hundreds or thousands of people who could have avoided hospitalisation, had shorter hospital stays, and above all avoided the ultimate complication, which is death. So we conclude that it is a powerful shield against the risk of contracting this serious infectious disease.

Narrator: A Spanish randomised study confirms Professor Holick's conclusion. Researchers divided 76 patients into two groups. Two-thirds received high doses of a vitamin D3 analogue; one-third received a simple placebo. In the Placebo

group, half of the patients went into intensive care; only 2% in the Vitamin D group. Better still, while 8% of the Placebo group died, there were no deaths in the Vitamin D group. Today, it is estimated that 40% of the world's population is deficient in Vitamin D, 80% in France. Among those most affected are the elderly.

Excerpt from a TV Newspaper:

[Several studies in France and around the world prove that Vitamin D reduces the risk of infections and death. This was observed in an EHPAD, hit by the virus during the first wave. Vitamin D protected the patients].

Prof. Cédric Annweiler: It was actually observed that residents who had been supplemented with Vitamin D recently, in the last 30 days before the infection, had a survival that was 90% higher than residents who had received Vitamin D supplementation earlier.

Prof. Michael Holick: I think nursing homes should be aware of this and routinely give Vitamin D to their residents. We know that they are likely to be at risk of Vitamin D deficiency and that they are at very high risk of getting this infection and dying from it. In the United States, I recommended immediate administration of 50,000 units of Vitamin D.

Narrator: Professor Holick's message has still not been heard. Only England has finally decided, in the autumn of 2020, to provide free Vitamin D supplementation to two million elderly and vulnerable people, in the hope of reducing their risk of developing a severe form of Covid-19. In France, as in other countries, the silence of the authorities is deafening.

Prof. Michael Holick: When people say that Vitamin D can help fight this disease, it raises questions. Doctors know about the link between Vitamin D, rickets and bone health, and perhaps even osteoporosis in women. But they rarely think outside the box. They don't know that there is an impressive literature showing that Vitamin D receptors are present in the immune system, and that they are not there for nothing. But there is little interest in the subject. It's not being exploited by drug manufacturers, by health professionals or by public health officials, who are supposed to be concerned with the welfare of the population. So I really hope that our studies, and the ones that are being published, will finally get some attention.

4- Zinc: Essential trace element for immunity

Narrator: Vitamin D is not the only strangely forgotten remedy for Covid-19. In order to defend ourselves effectively against this disease, our bodies also need trace elements. One of the most important of these is Zinc. Zinc is essential for the proper functioning of the immune system and has been shown to have an undeniable effect in stopping the viral process of the Coronavirus.

Dr. Jean-Jacques Erbstein: It is a trace element which is fundamental. It is involved in 200 chemical reactions in the body, boosting hormones, boosting enzymes, Zinc is a very important thing.

Prof. Vincenzo Castronovo: Zinc is an essential metal for cells to divide normally. So if there is no Zinc, the cells cannot divide, we cannot renew the

cells. So Zinc is essential for healing, it is essential for the regeneration of the intestine, it is essential for the immune response. Zinc has been considered the most essential nutrient for the immune system, and its deficiency worldwide is responsible for several hundred thousand deaths.

Dr. Éric Ménat: Moreover, we have studies that show that Zinc works on the Coronavirus. If you give a certain amount of Zinc in the acute phase, you have a better defence against the virus. But obviously you're not going to wait until you're infected to take Zinc. But you have dozens of studies on the value of Zinc as an immune booster to reduce the risk of viral infection. So not only does it reduce the risk of infection, it reduces the severity of infections. Why didn't they tell the French: *"Take Zinc, go see your doctor and see if you need Zinc."* We can even measure Zinc in the blood. It's a pity we didn't do that. But it's not worth anything to anybody.

Narrator: So can Zinc be considered as a possible treatment for the Coronavirus? Pharmacist Claude Lagarde was one of the first in France to be convinced. In March 2020, when France was in the first week of its first lockdown, Dr. Claude Lagarde sent a publication produced by his laboratory to a network of several thousand doctors to make them aware of the relevance of this trace element in the treatment of Covid-19.

Dr. Claude Lagarde: We were the first to talk about Zinc. Afterwards, everyone talked about it, everyone talks about it. But I didn't invent Zinc, it was already known. We have known for 50 years that it is active against viral diseases.

Dr. Jean-Jacques Erbstein: Some old doctors called us and said *"But everyone knows that before, children were prescribed trace elements, Zinc and Copper when there were viral infections"*.

Dr. Claude Lagarde: We immediately saw that the people who fell, who were ill, were potential Zinc deficient. Because Zinc acts at several levels in this infection, and in viral infections in general. It is capable of blocking viral replication, and this is very important. This has been published for 50 years. No one has officially mentioned it. Then, it acts in immunity. It also has a major interest, because it will probably play a role in the penetration of the virus into the cell. It can block the penetration of the virus at this level. As soon as the virus has entered the body, it will create small wounds in the lung. It enters the lung through the respiratory tract, it will create small cracks, wounds, and if we have enough Zinc in our proximal cells, we will heal, we will stop the process, because we block viral replication, and it ends.

Prof. Vincenzo Castronovo: Zinc has been shown to interfere with the division of the virus. So for me, Zinc should be a major part of the prevention strategy of Covid treatment. In several treatment regimens that integrated Azithromycin and Hydroxychloroquine, Zinc was put back in, which is actually the key element.

Prof. Didier Raoult: We know that certain things that had been underestimated, such as Zinc for example, play a role in severity. People with a severe pathology have zinc levels that are much lower than others, in addition to other data that had been written in the literature.

Prof. Vincenzo Castronovo: I remember a doctor in New York who had 250 patients, and he gave them Hydroxychloroquine and Zinc, and no one died. It's interesting to know that Hydroxychloroquine makes the Zinc enter the cell, and once the Zinc enters the cell, and we have high levels, the virus can no longer divide, and so it dies.

Narrator: Around the world, other observations confirm that Zinc could be a key component of Hydroxychloroquine protocols.

Pr. Christian Perronne: The big study that was published by the doctors in New York, showed that in addition to the Raoult Protocol with Hydroxychloroquine and Azithromycin, they added Zinc. So they had excellent results.

Narrator: Dr Cardillo in Los Angeles made the same point when he appeared on ABC to confirm that Hydroxychloroquine treatment only works best with Zinc.

Excerpt from a TV Newspaper:

[Dr. Anthony Cardillo: The analysis of the Hydroxychloroquine treatment is that it only works when you combine it with Zinc. The Hydroxychloroquine opens the way for the Zinc to enter the cell and then block the replication of the virus.

Presenter: You prescribe Zinc, and it is effective for Covid-19 patients.

Dr. Anthony Cardillo: Every patient I prescribed it to was basically very sick and within 8 to 12 hours they were symptom free].

Prof. Vincenzo Castronovo: Recently, a study, and this was reported at a congress, showed that patients with low Zinc levels who were hospitalized were 2.5 times more likely to die than those with normal Zinc levels. We don't talk about that. Have you heard of Zinc? No.

Narrator: In prevention, the effectiveness of Zinc is just as proven, especially for the most fragile people, and this is done with the general indifference of the health authorities who seem to ignore the benefits of this fundamental trace element.

Dr. Claude Lagarde: We also know, through epidemiological studies, that in EHPAD, in retirement homes, elderly people are 50% deficient in Zinc, one out of two is deficient in Zinc, because they eat perhaps a little less well, they assimilate less well at the intestinal level. That's a lot. So we could give it to them systematically and we would have less medical and drug needs to treat all these elderly people who are followed by doctors regularly. It's very easy to give Zinc even almost free of charge in retirement homes. We don't talk about it. I don't know why, they prefer to sell very expensive chemical drugs. Because maybe today's scientists are the younger generation and did not experience the publications on Zinc 30 years ago. Everything is published, everything exists! It is incredible! Unbelievable that the scientific committees do not know about Zinc.

Dr. Éric Ménat: The major hospital specialists, and therefore in part the experts who managed this crisis, have absolutely no such culture. The only prevention of infectious diseases that they know is through vaccines. Because for them, this is the only way that has proven to be effective, but this is false. We have studies on the rest, but they are not powerful enough, or they are not about a specific drug. So they don't want to prescribe it.

5- Vitamin C: Immune stimulant

Narrator: Another natural molecule has had impressive effects in treating patients severely affected by the Coronavirus: Vitamin C. Vitamin C injections have been shown in scientific studies to be very effective against respiratory infections and on patients suffering from sepsis. You will understand why more and more doctors are convinced that patients hospitalized for the Coronavirus should receive immediate injections of Vitamin C.

Dr. Dominique Baudoux: My grandfather, a pharmacist, knew only two medicines: Vitamin C and Aspirin, to treat any viral pathology. Vitamin C should be put back in the spotlight.

Dr. Éric Ménat: Vitamin C is an element that has been known for perhaps a century as an immune stimulant, 1 gram, 2 grams of Vitamin C, we already know that it has an action on our immunity. And Vitamin C, it has an advantage: you can never have an excess, you can never have a side effect because you have taken too much Vitamin C. Because it's a vitamin that's called water-soluble. So if you take too much of it, it will go back into the urine, it's not serious, you don't risk anything. But while it is in the body, it acts. And so high doses of vitamin C could be effective.

Prof. Vincenzo Castronovo: I have a patient who is completely anti-oxidant. Vitamin C will put out the fires very quickly. It is a powerful antioxidant. It protects everything that is the water phase of the body, so the inside of the cells. So this Vitamin C is a barrier and a major protector of the cells against the attacks of oxidants and the white blood cells also need it not to explode when they arrive on the battlefield.

Dr. Claude Lagarde: In some diseases, Vitamin C needs to be taken in high doses. It is not very easy to take high doses by mouth, and for a long time now, we have been thinking about the possibility of injecting vitamin C, which will boost the organism.

Narrator: In the face of the Coronavirus, high-dose Vitamin C injections could have saved the lives of many severely affected people. But this cheap and safe treatment has not received any media attention. Dr. Pierre Kory is a specialist in critical care medicine in the United States. He is part of a group of five experts all gathered around Prof. Marik, one of the pioneers of the use of Vitamin C injections. Dr. Kory welcomed us to his home in Madison, Wisconsin, to tell us how he discovered this treatment and to share with us the incredible results of Vitamin C injections on patients admitted to intensive care for the Coronavirus, all this while the health authorities remained indifferent.

Dr. Pierre Kory: The work I have done with Vitamin C, or what I call ascorbic acid, is based on the discovery that my friend and colleague, Dr. Paul Marik, made. Previously published studies had shown that high doses of intravenous ascorbic acid would be very beneficial in treating patients with septic shock. He tried it on two extremely sick patients who came to his hospital and he described that their physiological condition improved very suddenly and abruptly. So he was very interested in that, and he conducted a study in which he treated the next fifty or so patients that he had seen, who were suffering from severe

infections, and he noticed every time that these patients got better overnight. So he published his experience with these 50 patients and compared it with the 50 patients he had treated before them, without using intravenous Vitamin C. And what he showed was a dramatic decrease in mortality. A lot of patients were surviving, with much less organ failure, they didn't have kidney failure, they didn't need dialysis. I had never heard of a drug that could improve the survival rate of patients so significantly.

Narrator: Impressed by Dr. Marik's results, Pierre Kory decides to apply his protocol.

Dr. Pierre Kory: I tried this on a patient who had just arrived in my intensive care unit. He was extremely sick. He was a patient who had no immune system. Because he was having a bone marrow transplant, he had finished all his chemotherapy. He had no white blood cells left, and his condition was deteriorating rapidly. What I saw with this man was that within two or three hours his condition stabilised, and within about six hours his kidneys started working again, his blood pressure normalised, his mental state improved, he was able to speak more clearly. When I went home that night, I couldn't stop thinking about him, and how powerful his responses to the treatments were. And when I got to work the next morning, he was having breakfast with his wife and we were getting ready to take him out of intensive care and back to the floor where he normally was. And since then I've done a lot of work in this area. I've done my own study, and I would say that what my study adds to the existing literature, what I've found by using this approach in my own ICU, is that the effects of intravenous Vitamin C and the responses it produces, are entirely dependent on the timing of its administration. It should be given very quickly after the arrival of septic shock, preferably in the emergency department or very early in the intensive care unit.

Narrator: Based on the spectacular results obtained with Vitamin C on patients suffering from septic shock, Dr. Paul Marik and Dr. Pierre Kory are going to apply their protocol to patients with Covid-19. The results confirm their predictions.

Dr. Pierre Kory: Since we know, and this is the belief I share with my colleagues, that Vitamin C works in septic shock or sepsis, should we infer that it can also work in Covid or Covid-related breathing difficulties? Yes, absolutely. At the stage I'm at now, we already have a randomised controlled trial and a retrospective trial that both show very beneficial effects of high dose Vitamin C in Covid-related respiratory failure. So I don't understand the decision not to use this treatment. It is safe, inexpensive. There is a lot of data showing that it works very well on lung injury, like pneumonia or acute respiratory distress syndrome. So we should use it.

Narrator: The effectiveness of Vitamin C injections is being seen around the world. Yet, incredible as it may seem, some doctors snub this powerful therapeutic tool.

Dr. Pierre Kory: According to one article, it was estimated that between 15 and 20% of doctors in intensive care were using it. Why aren't more of them? That's a question I've been thinking about a lot, and I think there are maybe three

reasons for that. Firstly, it's a vitamin, and in relation to vitamins, for a long time in professional allopathic medicine there has been a huge bias against vitamins. So as a doctor, promoting vitamins is considered unscientific and unseemly. Secondly, there is a misunderstanding about the nature of the treatment. It's not just giving a few Vitamin C tablets to patients. And thirdly, there is this obsession with doing randomised controlled trials to provide definitive evidence. And what really kills me is that these trials exist and show that intravenous Vitamin C has had beneficial effects on survival rates. And yet doctors still don't use it because the trial is too small, because a bigger trial is needed, etc. This bias has a huge influence on how scientific data is interpreted.

6- Fear and stress: Harmful to our immune system

Narrator: If Zinc, Vitamin C and Vitamin D have been shown to be real treatments for Coronavirus patients, they are also, like other essential micronutrients, incredibly effective in prevention to improve our immune defences. Because the more solid our ground is, the less dangerous the virus is.

Dr. Éric Ménat: I have always liked Béchamp's formula "*The microbe is nothing, the field is everything.*" There is no more beautiful example than Covid-19 to illustrate this sentence. Because you realise that the same virus will give nothing in some people; no symptoms, people get infected without any symptoms and they don't know, and others die. It's the same virus. So you can't say that the severity is linked to the virus. It's not possible because if the severity was linked to the virus, everyone would have a severe disease, more or less, of course. Here, it goes from nothing to death for the same virus. So it's really a question of the terrain. "*The microbe is nothing, the terrain is everything.*" And so, if we stimulated this immunity in our patients, wouldn't they have a chance of being less ill? But at no time did we say to the French, "*Stimulate your immunity.*"

Narrator: The lack of preventive advice is all the more deleterious as the confinements and the anxiety-provoking communication from the authorities have impacted on the morale of the population.

Dr. Éric Ménat: What makes me most angry today about this pandemic is the fear that has been introduced in most of our fellow citizens.

Excerpt from a TV Newspaper:

[**French politician:** *More than ever, the Covid-19 pandemic is active and deadly*].

Dr. Éric Ménat: We have played with this fear, we have maintained it and it is dramatic on many levels. We all know that stress causes the immune system to collapse. Those who suffer from herpes know this: One big stress, the herpes pimple comes out. Why does a herpes outbreak happen? Because the immune system has dropped. This is known to everyone, there is no doubt about it.

Dr. Dominique Baudoux: Our natural defences, which need to be boosted because we are faced with a virus, are on the contrary weakened by, I would say, the sinister, catastrophic, panic, which can be found on all the TV channels, in all the media that are only looking to create sensationalism.

Dr. Jean-Jacques Erbstein: We saw him, the one I call the "*official cruncher of the DGS*", Professor Salomon, who came every day to recite these figures, and it was frightening the way he threw them around.

Dr. Éric Ménat: When we are given the number of deaths, why not say: "*These people who are dying, they had been hospitalised for a month and a half; these people who are dying, they are of such and such an age, they have such and such comorbidities, they are very obese or they have...*". By maintaining fear in the population, I think that we have actually increased the health risks, rather than the opposite.

Dr. Claude Lagarde: Stress is a psychological aggression, a fear, or it is chronic because we think about this virus problem every day and stress sets in motion mechanisms of response to aggressions which tend to deficiency us in certain micronutrients, in certain molecules of life. So stress contributes to our deficiency in Magnesium, Zinc, and other mineral substances essentially. It deficiencies us because it hyper-consumes certain nutrients. So if we don't get the equivalent every day in our diet, stress will gradually deplete us of certain reserves.

Narrator: Stress, isolation, lack of sunlight, the population's immunity, already weakened, has not been able to benefit from sound advice from the health authorities on simple preventive measures that would have allowed it to optimise its natural defences.

Dr. Éric Ménat: Professor Toussaint has said it very clearly in several of his speeches: forbidding people to go out and forbidding them to do sports is a scientific aberration, because it reduces their immunity, whereas sports increase immunity.

Excerpt from a TV Newspaper:

[**BFM TV:** *There are many examples, but one that struck me the most was the little 93-year-old woman in Biarritz, who wanted to swim to treat her neuropathy, a really painful disease of the legs, and who was prevented by, I think, four policemen, from going swimming. So this is a huge absurdity. And it's counterproductive, because sport obviously strengthens the immune system*].

7- Let your food be your first medicine

Narrator: Britain was not exemplary in dealing with the first outbreak either, but when Prime Minister Boris Johnson was admitted to intensive care after being struck by Covid-19, he understood the importance of prevention. In July 2020, he intervened publicly to recommend that the British lose weight as part of a plan to tackle obesity: "*Losing weight is very clearly one of the best ways to reduce the risks associated with Coronavirus.*" Radical measures have been taken at the highest level to raise awareness of the deleterious consequences of processed food in the UK, such as banning supermarkets from promoting items considered to be junk food or banning TV ads for sugar-rich products before 9pm. In France, not a word.

Dr. Jean-Jacques Erbstein: Sugar is a disaster. Stop eating sugar. Sugar is everywhere. And in 70% of cases, you eat sugar, you don't even realise it. It's a terrible thing for your immunity, for your skin, for all that kind of thing.

Dr. Claude Lagarde: Today on the planet, it is sugar that kills the most people, far ahead of any other disease, including viruses. Excess sugar intoxicates you over several years. You end up with diabetes and high blood pressure. Sugar is consumed too much, far too much.

Dr. Vincenzo Castronovo: Now, it has been shown that if we enumerate the number of deaths per day as we do for the Sars-Cov2 victims, then people would be absolutely panicked to have a can of coca, because we know that, and this was said in a serious study published by Stanford University, the department of epidemiology, that sugar kills one person per second in the world. One person per second in the world. That's several thousand a day, and we don't talk about that. So you should know that, particularly at the level of the European communities, the sugar industry spends 3 billion dollars a year on lobbying, so that decisions are not taken against the industries that use sugar, particularly for labelling. When we tell you this, you have understood everything.

Narrator: In the face of the Coronavirus, a healthy diet can make all the difference. This is what Dr. Aseem Malhotra said in the journal European Scientist: ***"The general public should be told immediately to cut down on sugar, processed carbohydrates, and junk food, and start eating raw foods, rich in vegetables, fruits, nuts, seeds, with lots of protein, legumes, fish, meat, eggs, to improve their health in a few weeks and help protect them from the new Coronavirus."***

Dr. Claude Lagarde: Why are people not advised to take precautions, to give them dietary advice to prevent disorders and pathologies? I think it's simply because in medical school, future doctors are not taught about health. They are taught to make good diagnoses, often conceding expensive explorations: X-rays, laboratory analyses, scans, etc. And we arrive at diagnoses, but with a diagnosis, we have a treatment. So the doctor thinks that his role is to diagnose and treat. But he should be the first person to deal with prevention.

Narrator: 400 years ago, Hippocrates, the father of medicine, said, ***"Let your diet be your first medicine."*** Since then, biology and technology have come along and observed that every cog in the immune system works with particular nutrients that our food is supposed to provide. So, armed with the right ammunition, our immune system has the ideal arsenal to fight a multitude of threats, such as bacteria, fungi, parasites or even viruses.

Dr. Éric Ménat: Since the intestine contains 60% of our immune cells, you can understand that food plays a major role in our immunity.

Narrator: But nowadays, food is often too high in calories and too low in essential nutrients, even when the diet is balanced. That's why more and more health professionals are looking to micronutrition as a particularly effective preventive solution against viruses.

Dr. Claude Lagarde: Our organism is a real chemical factory that produces hormones, antibodies, quantities of molecules, tissues, muscles, organs. Everything is done by internal chemistry, what we call biochemistry. And this biochemistry requires substances that we absolutely must eat, so proteins, amino acids, polyunsaturated fatty acids, vitamins - all the vitamins - trace elements, which are catalysts. Without them, the billions of chemical reactions in the body cannot be carried out properly. Micronutrition is a way of restoring the proper functioning of the body, it is to provide trace nutrients because "micronutrients", to correct its deficiencies.

Dr. Vincenzo Castronovo: Most of my patients have severe deficiencies of Omega 3, deficiencies of Selenium, Vitamin D. I remember this patient with pancreatic cancer who came to see me because he was desperate because in fact when they tell you that you have only three months to live, you either accept and go and make your will, or you try to see if there is no alternative. And this patient, who was told "you are inoperable", still wanted to do something. His nutritional assessment was catastrophic, and he was corrected. He was able to have chemotherapy, the tumour regressed, we were able to operate on him, and he is in complete remission. And so the approach is very effective, when you address the patient as a single person and you look at all the nutrients and you correct in a personalised way. And when you do that, you have remarkable results. The situation of retirement homes, or as you call them in France EHPAD, is quite revealing and caricatural of the situation in society. The elderly, on average over 80-year-old, were the first victims and remain the first victims of this Sars-Cov2 Covid-19 virus infection, which is indicative of their detestable and completely deficient micronutritional state. We have effective means of correcting the level of Vitamin D, the level of Zinc, the level of antioxidants, and that's what's a bit disturbing. Why, when this is known, is it not proposed to patients?

8- Phytotherapy and Aromatherapy (Treatments based on plant extracts)

Narrator: This silence also applies to the many other natural solutions available to us. This is particularly true of treatments based on plant extracts and natural active ingredients, more commonly known as phytotherapy.

Dr. Vincenzo Castronovo: Most of the medicines were inspired from plants. The problem is that plants are not venal, have not benefited from their inventions. So what does Big Pharma do? It takes the molecule, it modifies it, it makes it unique, it patents it and it can sell it at the highest price, because it is protected.

Dr. Christian Perronne: Phytotherapy, it's a wonderful strategy that I discovered through patients, I didn't learn it in medical school, of course. The Chinese government, when there was Covid, was smart. They saw that they were a bit overwhelmed at the beginning, and of course they found Hydroxychloroquine along the way, but they called on traditional Chinese medicine. And what did the Chinese doctors give? A lot of Artemisia. It worked. Afterwards, it was exported to Africa, and it worked remarkably well. The President of Madagascar and other countries were laughed at for giving

Artemisia everywhere in the schools. There was hardly any Covid and there were hardly any deaths.

Dr. Éric Ménat: There are others: Scutellaria. Scutellaria has proven its effectiveness on the Coronavirus itself. Its effectiveness, I mean in prevention. Alone, it does not cure the disease, but in prevention, we have a reduction in Coronavirus infections thanks to Scutellaria.

Dr. Vincenzo Castronovo: Many plant extracts are of interest because they are molecules that will limit inflammation.

Narrator: Shunned, even discredited by a large part of the medical and scientific world, herbal medicine fully deserves to regain its credibility. On 19 September 2020, the WHO approved a protocol for clinical trials of herbal treatments for Covid-19. The scientific debates on Artemisia, Margousiers or Vernonie could thus regain their rightful place.

Dr. Éric Ménat: Besides phytotherapy, you have aromatherapy. You have probably the greatest antiviral that nature has created, which is Ravintsara. This essential oil, which comes from Madagascar, is extraordinarily powerful and there are clear publications on this. It is a powerful antiviral that affects many viruses, let's say the Coronavirus family, and it is an immunostimulant.

Narrator: Ravintsara is indeed an emblematic essential oil in aromatherapy. Its effectiveness against viruses is well known to the general public. As proof, it was out of stock for several weeks in France during the epidemic.

Dr. Dominique Baudoux: The field of predilection of essential oils is infectiology; therefore any pathology which will have generated or which will be marked by an infection, whether the infection is bacterial, fungal, parasitic or viral.

Narrator: The secret of an essential oil's effectiveness lies in the fact that it is made up of innumerable molecules, thus increasing its range of action and its effectiveness against intruders. This specificity makes aromatherapy a very promising discipline to solve one of the major health challenges of the coming years: Antibiotic resistance. According to the WHO, by 2030 antibiotics will no longer be effective against many bacteria, with catastrophic consequences for our health.

Dr. Dominique Baudoux: Worldwide, more than 500,000 deaths are linked to this phenomenon of antibiotic resistance. It is an incredible challenge for the pharmaceutical world, which has not managed over the last fifteen years to create a new innovative antibiotic that could have destroyed the microbe. There is no current answer. Yes, there is, of course. By mixing an essential oil with an antibiotic, the antibiotic becomes effective again on the microbe that was previously resistant to it, because the essential oil has been opening doors in the biofilm in which the microbe felt it was taking refuge, as if surrounded by a rampart. And that's what the essential oil offers. Now, the essential oil chosen, has itself an antibacterial activity that allows it not to be just a door opener to the antibiotic.

Narrator: The mechanisms of action of essential oils are numerous, making them particularly useful weapons against new threats like the Coronavirus.

Dr. Dominique Baudoux: Each class of molecules in essential oils can have a different activity on the virus. For example, we will destroy the envelope of the virus, and the virus will inevitably die. We can attack its DNA, its RNA, and thus necessarily cause the death of the virus. We can also prevent the virus from adhering to the cell wall to penetrate the cell and create the pathology.

Narrator: Yet, despite all these proven actions against microbes and viruses, aromatherapy is regularly discredited in the media, particularly during the Coronavirus epidemic. Why such a discredit when, as early as 2008, it was known that an essential oil, laurel, had an in vitro activity against the Sars-Cov virus, responsible for the SARS epidemic in 2003? Why did we not immediately test essential oils against Sars-Cov2?

Dr. Dominique Baudoux: We are facing scepticism from a medical world that cannot believe that these essential oils have any therapeutic value.

Dr. Éric Ménat: If you cannot patent a molecule, you will never do studies on it. That's why there are no studies on phytotherapy, that's why there are no studies on homeopathy, that's why Hydroxychloroquine has not been put forward.

Dr. Dominique Baudoux: If we talk about Hydroxychloroquine, if we talk about Colchicine, if we talk about other natural or synthetic molecules such as Vitamin C, this does not make shareholders in the pharmaceutical industry live. And the pharmaceutical industry needs something new. And innovation is expensive.

9- Lessons learned

Narrator: The Covid-19 epidemic has revealed the flaws in our health system. The economic model of the pharmaceutical industry based on new molecules sold at a high price has revealed its limits, its dangers, but also its excesses. Our health, our most precious asset, is at the mercy of an ecosystem where the health of shareholders prevails over that of the population. This pandemic crisis is an unprecedented opportunity for us individually to take our health back into our own hands and for us collectively to unite to change the paradigm, so that natural solutions regain their credentials. So that the well-being and health of the patient is at the centre of all priorities.

Dr. Christian Perronne: In order to reform the health system, we really need to separate the world of money and the world of doctors, and clean up all the evaluation agencies, with real evaluations of the cost of the conflicts of interest of each. That would be a good basis for starting again.

Dr. Dominique Baudoux: Health is the basis of happiness and I am willing to bet on future generations of pharmacists and doctors who, with a return to healthy eating and healthy living, will be willing to treat themselves healthily.

Dr. Claude Lagarde: I think we need common sense in life, and medicine is an art and not a science. We are all different and this is where the traditional doctor, who has experience, is fundamental.

Dr. Vincenzo Castronovo: What are the origins of health? It's having a well-functioning digestive tract, having a good microbiota, providing our immune system with the right molecules in proportion and quality, which allows it to act efficiently. Because when this immune system is normal and is fed correctly, it is a remarkably efficient system.

Dr. Dominique Baudoux: We are in integrative medicine. We do not want to have our only truth. We have our truth, just as others have their truth, and together, by associating ourselves, we will be so much stronger, so much better for the health of the patient.

Dr. Éric Ménat: In conclusion, I really want to insist on this notion of diversity. I really believe that decision-makers, experts, the general public and my colleagues must understand that nothing is richer than our diversity, and that a one-track mind has no place in medicine. And I really believe in my heart that a one-track mind is death, diversity is life. So I really want us all to choose life together.

[End of the Documentary]

10- Conclusion

As you have just read, the so-called Covid-19 Pandemic is a big lie organised and maintained by the satanists who run the world, headed by the little demon from Hell who runs France. That is why he came into this world, and that is why he was elected. He came from the satanic world with the mission to accelerate the establishment of the reign of the one the Bible calls the antichrist. So you understand why **France is at the same time the country that created this Covid-19**, (you have seen the proof after reading the teaching entitled "**Vaccine Covid-19: Project of a Planetary Genocide**"), the most zealous and agitated country in the implementation of the recognition of Covid-19 as a pandemic, and also the most brutal and barbaric country in the repression against all those who would dare not observe to the letter the idiotic and totally stupid restriction measures that this demon and his gang impose on the populations.

Containment, barrier measures and masks are of no use to humans. Uncorrupted scientists have demonstrated this. To learn more, please read the Teaching entitled "**Masks and Barrier Measures are Useless**" which can be found at www.mcreveil.org in the Health menu. All the abominable measures taken to supposedly fight a pandemic that does not exist, have been taken to destroy man, on all levels: spiritually, economically, health-wise, socially, and in the family. We will develop this subject in another teaching.

The French antichrist had announced at the beginning of this supposed pandemic that France was at war. Some people took this for a simple word, when in reality he was revealing a secret that only the informed could understand. And since then, the French army, gendarmerie and police have been mobilised as if France were really at war. War against whom? Against all those who will show common sense, and who will find it absurd to submit to lucifer's plan to control the world. The army, the gendarmerie and the police are deployed for the sole purpose of intimidation and savage repression of the people. This is the war that this little

Luciferian solemnly announced at the beginning of their fictitious pandemic; a war against the people.

As you have just read, he has banned any medicine that could easily and quickly cure all the patients of this flu pompously called Covid-19 and set up as a pandemic, and has imposed on doctors poisons that will kill innocent people by the thousands. The aim is, on the one hand, to offer satan numerous human sacrifices to establish his power and his reign, and on the other hand, to make the reign of terror triumph, with the imposition of satanic measures such as confinement, the wearing of masks, barrier gestures, and other social distancing, in order to arrive at the crowning glory, which is the satanic Vaccine that will turn all humans into zombies.

As you have just learned in this documentary, this son of the devil is at war with all honest and serious doctors and researchers whose only desire is to cure the sick. He has succeeded in infecting the rest of the world's leaders with his evil plan, and they are obliged to follow him like sheep, even though they do not really understand what is going on.

As far as the Coronavirus as a disease is concerned, remember that it is in no way different from other influenzas; it is curable, that is to say, curable. President **Andry Rajoelina** of Madagascar has shown you this; Professor **Didier Raoult** of Marseille in France has shown you this; many other serious African and Western doctors and researchers have shown you this; African Naturopaths have shown you this. Do not let yourself be intimidated by these agents of Hell who are setting up, before your eyes, the world government of Lucifer, which the Bible calls the reign of the antichrist.

One of the main goals of the vampires who created this Covid-19 was the total destruction of Africa. These demons were convinced that the African population was to be decimated by **this virus manufactured in France by the Pasteur Institute**. Their predictions for the number of deaths in Africa were in the tens of millions. But their confusion is total, as you can see. These snakes can't figure out what exactly is going on. They don't understand why their plan, which had an almost 100% chance of success, has failed. We will tell you about this in another teaching. We will even tell you why they have tried to change the word Covid-19 from a masculine word to a feminine word in the meantime. They are now asking people not to say "**LE**" Covid-19, but rather "**LA**" Covid-19. Do not follow this madness; the reason is elsewhere.

In the face of the Coronavirus, as in the face of other diseases from which the population suffers, good food hygiene is the solution. This point has been well developed in a teaching that we have entitled "**Sickness and Nutrition**", which you can find on the site www.mcreveil.org, in the Health section. So do not fall into the trap of taking that poison called the Covid-19 Vaccine. If you take it, you will bind yourself forever.

In the next few days, we will do another teaching showing you in an elaborate way, the spiritual implications of this satanic vaccine. And if you are one of those who do not believe in God, remember that all serious scientists, who have

nothing to do with God or religion, tell you that no vaccine has ever been made in such a short time, like this deception that the demons have manufactured in a few weeks, without any test on animals as it is often the case. All these serious and honest researchers and doctors are therefore unanimous on the fact that this vaccine is extremely dangerous, and hides an agenda that they ignore. It is this hidden agenda that we will discuss in a teaching on the spiritual implications of this vaccine. The Bible spoke of this hundreds of years ago. In the meantime, remember this final piece of advice: ***If you value your life, or your salvation, or both, do not accept this satanic vaccine called the Covid-19 Vaccine.***

Grace to all who love our Lord Jesus Christ with an undying love!

Invitation

Dear brothers and sisters,

If you have run away from fake churches and would like to know what to do, here are the two options available to you:

1- See if around you there are some other children of God who fear God and desire to live according to the Sound Doctrine. If you find any, feel free to join them.

2- If you do not find one and wish to join us, our doors are open to you. The only thing we will ask you to do is to first read all the Teachings that the Lord has given us, and which are on our website www.mcreveil.org, to reassure yourself that they are in conformity with the Bible. If you find them in accordance with the Bible, and are ready to submit to Jesus Christ, and live by the demands of His word, we will gladly welcome you.

The grace of the Lord Jesus be with you!