

*Following is an article by George Parry, a former federal and state prosecutor. He blogs at knowledgeisgood.net and may be reached by email at kignet@outlook.com. George is a personal acquaintance of mine, and I recommend subscribing to his blog. His articles are frequently published in **The American Spectator**, which I also recommend. Here is an interesting article as it appeared at knowledgeisgood.net, and was also published by **The American Spectator**. This is one more interesting COVID-19 follow-up article by Mr. Parry.*

Knowledge is Good

In Memoriam: Vladimir Zelenko, M.D.

July 19, 2022 Posted by [George Parry](#)



Yesterday The American Spectator published my article regarding the untimely death of Dr. Vladimir Zelenko, a hero of the COVID-19 pandemic. As you will see, the article endorses the efficacy of hydroxychloroquine in the treatment of COVID-19.

When I submitted the first iteration of the piece, the editors requested that I supplement it with references to the clinical data and scientific studies that support the use of hydroxychloroquine to treat COVID-19. Given the controversial nature of the subject, this was certainly a reasonable request.

So I pulled out my COVID-19 research file and supplemented away. This resulted in doubling the length of the piece to 2600 words that only the most determined reader will wade through. This is not what is known in the trade as click bait calculated to draw as many sets of eyes as possible. In fact, it's so long that I predicted most readers would glance at it and take a pass. From a circulation/advertising sales standpoint, you could consider it a losing proposition. Nevertheless, the AmSpec editors published the article for which I am grateful.

Here's the article. Hope you enjoy it.

In Memoriam: Vladimir Zelenko, M.D. – The American Spectator | USA News and Politics [George Parry](#)

On June 30, 2022, Dr. Vladimir (Zev) Zelenko died at age 48 after a prolonged battle with sarcoma of the pulmonary artery. With his passing, we lost a great man of faith, intelligence, compassion, and courage. He was a board-certified family practitioner who provided medical care to approximately 75 percent of the adult members of Kiryas Joel, a close-knit upstate New York community of 35,000 Orthodox Jews.

In early 2020, as COVID-19 spread rapidly throughout the United States, an estimated 20,000 members of Kiryas Joel became infected. Dr. Zelenko, who humbly described himself as a simple country doctor, was faced with an urgent health care crisis.

Recall that, at the time, the government-led medical establishment had authoritatively decreed that the COVID-19 standard of care was to hospitalize, intubate, and connect critically ill patients to a ventilator which would, it was believed, sustain breathing until recovery. But ventilators and medical personnel who could competently use them were in short supply. Moreover, even when patients were properly intubated and ventilated, it soon became apparent that prolonged use of the ventilator caused serious injury to their lungs and did little to save their lives. It seemed that, once on a ventilator, a patient was doomed.

Zelenko quickly recognized that an alternate form of treatment was required. He searched and analyzed medical data from China, South Korea, and France regarding the use of hydroxychloroquine and zinc sulfate to treat COVID-19. As he later said, he found the results to be “somewhat successful” but “not too impressive.” Similarly, as for the use of hydroxychloroquine with azithromycin in treating New York City ICU COVID-19 patients, he found the success rate to be “mild to moderate.”

It was then that Zelenko came up with the solution to the problem. As he analyzed the studies, he determined that the hydroxychloroquine and zinc sulfate as well as the hydroxychloroquine and azithromycin had been administered to patients who were already hospitalized and suffering from COVID-19-induced acute respiratory distress syndrome. By then, their lungs had been irreparably compromised and the chance of recovery greatly reduced.

Zelenko reasoned that the key to successful treatment was to administer hydroxychloroquine, zinc sulfate, and azithromycin **before** the disease had progressed to the point where the patient required hospitalization. He then began administering hydroxychloroquine, zinc sulfate, and azithromycin on an outpatient basis as soon as possible after an “at risk” patient was diagnosed with COVID-19 but before the disease had seriously damaged the lungs. By his definition, a patient was “at risk” if he or she was age 60 or older or, regardless of age, had shortness of breath, was immunocompromised, or had a chronic medical condition.

Zelenko’s outpatient treatment protocol consisted of a five-day course of hydroxychloroquine, zinc sulfate, and azithromycin. This was based on his understanding that hydroxychloroquine would not only attack the COVID-19 virus but also serve as a “canal” by which the zinc sulfate could enter cells and impede the replication of the virus. He included azithromycin to prevent secondary bacterial infections.

His protocol proved to be enormously effective and word of its success quickly spread. As he reported in his [March 23, 2020, letter](#) addressed to inquiring “medical professionals around the world,” Zelenko and his team had treated approximately 350 patients in Kiryas Joel and another 150 patients in other areas of New York with this regimen. Of this group, there had

been “ZERO deaths, ZERO hospitalizations, and ZERO intubations.” There were no negative side effects other than approximately 10 percent of patients experiencing temporary nausea and diarrhea.

His “urgent recommendation” was to initiate the treatment protocol in the outpatient setting as soon as possible following the onset of symptoms to prevent acute respiratory distress syndrome and the need for hospitalization.

Six days later, Zelenko appeared on Rudy Giuliani’s televised podcast “Common Sense.” By then, the number of treated patients stood at 699. [In the podcast](#), Zelenko stated that by using his “cocktail” of hydroxychloroquine, zinc sulfate, and azithromycin in an outpatient setting as soon as possible, none of his patients had died, been intubated, or treated in an ICU. Three patients had been hospitalized with pneumonia without intubation or ICU care and were doing well.

Zelenko said that, compared to the seasonal flu, COVID-19 was three times more contagious and, for those with risk factors, 10 times more deadly. He correctly predicted that — despite the societal and economic lockdown that was underway — by the end of 2020, one-half of all Americans would have had COVID-19. He said, however, that otherwise healthy COVID-19 patients who were 60 years or younger would be “fine” since their immune systems would be strong enough to deal with the infection. But he treated immediately with the “cocktail” any of his COVID-19 patients who were 60 or older, had shortness of breath or a chronic medical condition or who were immunocompromised,

He stressed that the key to effective treatment was to administer the cocktail as soon as COVID-19 was confirmed and before the virus damaged the lungs.

Zelenko noted that “many doctors” were using his “cocktail” and having similarly positive patient outcomes. As for the financial and societal impact of his regimen, he stated:

If you scale this nationally, the economy will rebound much quicker. The country will open again. And let me tell you a very important point. **This treatment costs about \$20.** That’s very important because you can scale that nationally. If every treatment costs \$20,000, that’s not so good.

All I’m doing is repurposing old, available drugs which we **know their safety profiles**, and using them in a unique combination in an outpatient setting.

As Zelenko said, many other physicians — in the United States and throughout the world — had used his protocol and achieved equally positive results. As will be shown below, this was no idle boast.

So there it was. A quick, safe, highly effective, and low-cost treatment for COVID-19 that promised to save the nation and the world from skyrocketing hospitalizations; the need for expensive and unproven experimental drugs and vaccines; and the unprecedented, oppressive, and ultimately useless lockdown of society with its concomitant ruination of the economy, businesses, jobs, and livelihoods.

So how did the federal government and the medical establishment respond to this achievement? Did they adopt and apply the Zelenko Protocol en masse? Was he praised and hailed as a hero and savior of the Republic?

Far from it.

After learning of the Zelenko Protocol, President Donald Trump during one of his daily televised COVID-19 briefings expressed hope that hydroxychloroquine could provide a way to quickly and safely deal with the pandemic.

But, as soon as Trump uttered these words, the assembled representatives of the media asked Dr. Anthony Fauci, the president's chief medical advisor, if he would take hydroxychloroquine. And that was when Fauci shivved Trump and set off the campaign to discredit hydroxychloroquine and, by extension, the Zelenko Protocol. Fauci authoritatively intoned that he would not take hydroxychloroquine unless it was administered as part of a controlled clinical study. The subtext of his remark was that taking hydroxychloroquine without the safeguards of a clinical trial could be dangerous.

This led to the corporate media hysterically condemning hydroxychloroquine as a deadly toxin even though it had been prescribed millions of times over decades as an antimalarial and treatment for lupus and rheumatoid arthritis and had a better safety profile than aspirin. Nevertheless, the talking heads at CNN, MSNBC, and elsewhere insisted that Trump's expressed hopefulness about hydroxychloroquine was shameless hucksterism and that the drug was so deadly that only a lunatic would ingest it.

But the condemnation of hydroxychloroquine didn't end there. As Zelenko noted, the drug was inexpensive. Which, of course, meant that the widespread use of the Zelenko Protocol could short circuit the pharmaceutical industry's anticipated financial bonanza from developing and marketing new, experimental, and expensive COVID-19 treatments and vaccines with unknown safety profiles.

So it was that the pharmaceutical industry joined the media in condemning the use of hydroxychloroquine to treat COVID-19. There followed industry-sponsored clinical studies of hydroxychloroquine that found it to be ineffective in the treatment of COVID-19. But none of these studies tested the effectiveness of using Zelenko's regimen of hydroxychloroquine, zinc sulfate, and azithromycin as soon as COVID-19 symptoms appeared and before the patient developed acute respiratory distress syndrome.

Instead, the clinical studies tested the use of hydroxychloroquine alone on hospitalized patients who were long past the early stages of COVID-19. None of these clinical tests showed a material benefit from the use of hydroxychloroquine. The "science" had purportedly proven that Trump was a prevaricating snake oil salesman and that the ruinous lockdown of society and destruction of the economy would have to continue until the pharmaceutical companies came to the rescue with their expensive experimental drugs and vaccines.

Simultaneously, blue states such as New York and Michigan prohibited pharmacists from dispensing hydroxychloroquine for the treatment of COVID-19. Anyone who did so risked losing their pharmacy license. Similarly, physicians who prescribed hydroxychloroquine to treat COVID-19 were condemned by the medical establishment and risked losing their licenses.

All of this produced the intended result of prohibiting medical practitioners from making widespread use of the Zelenko Protocol. Had they been allowed to do so, we might well have been spared financial and societal ruination at the hands of the medical tyrants who guided and decreed the societal lockdown that failed to halt the spread of COVID-19 even as it ruined the economy and destroyed millions of jobs, livelihoods, and businesses.

But to anyone who had been paying attention to the [excellent patient outcomes](#) and [findings by well-qualified treating physicians](#) that overwhelmingly demonstrated the efficacy of using hydroxychloroquine alone or in combination with azithromycin to successfully and safely treat COVID-19, the rejection and suppression of the Zelenko Protocol made no sense. [Reports](#) by physicians across America and around the world substantiated the overwhelmingly positive patient outcomes achieved by the use of hydroxychloroquine in the early stages of COVID-19 as well as the drug's well-established [safety profile](#).

For example, consider the successful treatments of COVID-19 outpatients achieved by [Dr. Stephen Smith](#) and his colleagues at the [Smith Center for Infectious Diseases](#) in East Orange, New Jersey. Smith is a 1989 graduate of the Yale University School of Medicine who did postdoctoral training at, among other medical establishments, the National Institute of Allergy and Infectious Diseases (NIAID) in Bethesda, Maryland, which was then and remains under the directorship of Dr. Anthony Fauci. From 1992 to 1995, Smith was a Medical Staff Fellow in Infectious Diseases at the NIAID. From 1995 to 1996 he was a "Post-Doc" in the Molecular Virology Section, Laboratory of Molecular Microbiology, at the NIAID.

Appearing on the [Laura Ingraham Show](#), Smith stated that he and his colleagues were successfully treating COVID-19 patients with hydroxychloroquine and azithromycin. None of their patients who had been so treated had to be intubated and put on a ventilator. He pronounced the combination of hydroxychloroquine and azithromycin to be an "absolute game changer" and added that "this regimen works." He concluded by declaring, "I think this is the beginning of the end of the pandemic. I'm very serious."

But beyond this and similar anecdotal reports by treating physicians, patient studies by researchers affiliated with the [Stanford University Medical School](#) and clinical trials in France under the auspices of the world-renowned medical researcher, Dr. Didier Raoult, produced similar results.

On April 9, 2020, Dr. Raoult's team [published its abstract](#) of a "cohort study" of 1,061 patients which found that **early treatment** of COVID-19 with hydroxychloroquine and azithromycin yielded a "good clinical outcome and virological cure ... in 973 patients within 10 days

(91.7%).” The abstract also indicated that “no cardiac toxicity” was noted and concluded the following:

The HCQ [hydroxychloroquine]-AZ combination, when started immediately after diagnosis, is a safe and efficient treatment for COVID-19, with a mortality rate of 0.5%, in elderly patients. It avoids worsening and clears virus persistence and contagiousity in most cases.

On May 27, 2020, Raoult’s team published “[Early Diagnosis and Management of COVID-19 Patients: A Real-Life Cohort Study of 3,737 Patients, Marseille, France.](#)” That study also found that early use of the hydroxychloroquine and azithromycin combination produced overwhelmingly positive patient outcomes. The researchers concluded the following:

Treatment with HCQ [hydroxychloroquine]-AZ was associated with a decreased risk of transfer to the ICU or death (HR 0.19 0.12-0.29), decreased risk of hospitalization ≥ 10 days (odds ratios 95% CI 0.37 0.26-0.51) and shorter duration of viral shedding (time to negative PCR: HR 1.27 1.16-1.39). QTc prolongation [cardiac arrhythmia] (>60 ms) was observed in 25 patients (0.67%) leading to the cessation of treatment in 3 cases. No cases of torsade de pointe [abnormal heart rhythm] or sudden death were observed.... Early diagnosis, early isolation and **early treatment** with at least 3 days of HCQ[hydroxychloroquine]-AZ result in a significantly better clinical outcome and contagiousity in patients with COVID-19 than other treatments. (Emphasis added.)

Similarly, on May 27, 2020, the American Journal of Epidemiology published “[Early Outpatient Treatment of Symptomatic, High-Risk Covid-19 Patients that Should be Ramped-Up Immediately as Key to the Pandemic Crisis,](#)” by Dr. Harvey A. Risch of the Yale School of Public Health. Here, in relevant part, is the abstract:

Hydroxychloroquine+azithromycin has been widely misrepresented in both clinical reports and public media.... Early outpatient illness is very different than later hospitalized florid disease and the treatments differ. Evidence about use of hydroxychloroquine alone, or of hydroxychloroquine+azithromycin **in inpatients, is irrelevant** concerning efficacy of the pair in early high-risk outpatient disease. Five studies, including two controlled clinical trials, have demonstrated **significant major outpatient treatment efficacy.** **Hydroxychloroquine+azithromycin has been used as standard-of-care in more than 300,000 older adults with multicomorbidities, with estimated proportion diagnosed with cardiac arrhythmias attributable to the medications 47/100,000 users, of which estimated mortality is <20%, 9/100,000 users, compared to the 10,000 Americans now dying each week. These medications need to be widely available and promoted immediately for physicians to prescribe.** (Emphasis added.)

Despite all of this and [reports](#) from physicians around the world, few American physicians or pharmacists were willing to prescribe or dispense hydroxychloroquine at the risk of losing their professional licenses and condemnation by the government-led medical establishment. The massive financial and political interests behind the banning of

hydroxychloroquine prevailed and succeeded in denying a suffering public the benefit of Zelenko's inexpensive and highly effective cure.

When Zelenko passed, Kevin Jenkins, co-chair of the Zelenko Freedom Foundation, issued the following statement:

Dr. Zelenko was not just our hero, he was a man of God. Two years ago, he stepped into the fire to save humanity. The world is better off today because of his God Courage. Our prayers and love go out to Zev's friends and family. At the Zelenko Freedom Foundation, his dream for the world will never be forgotten. We will work tirelessly to further his legacy and encourage everyone who is worried about the growing menace of medical tyranny to stand with us and make a positive change.

Medical tyranny indeed. Many American physicians who tried to use the Zelenko Protocol or variants thereof lost their professional accreditation, employment and suffered severe financial sanctions. The alacrity and ease with which this nation's medical establishment, pharmaceutical industry and government punished those physicians and swept Zelenko and his life-saving protocol aside is a cautionary tale upon which we and future generations must reflect and heed.

COVID-19 is still with us, and the so-called monkeypox has arrived in America. More pandemics are most assuredly on the way. So what will be the fate of the future Zev Zelenkos who step forward to honor their Hippocratic oaths and challenge the medical tyranny that has taken over our lives? Will those future heroes also be hounded, derided, and punished by medical tyrants in pursuit of power and corporate profits? And what does that portend for the future of our nation?

George Parry is a former federal and state prosecutor. He blogs at knowledgeisgood.net and may be reached by email at kignet@outlook.com.