

## Measures that actually work

What is the proper course of action against infections, then? How about supporting your immune system - which is what has to deal with any kind of virus or bacteria, anyway? Here are some relevant quotes from the excellent book "The Wheel of Health":

These areas of infection due to the same cause were very varied in character and situation. One rat would have something wrong with its ear, another with its stomach, another with its bladder, and so on.

Actually, 44 percent of the 92 rats had something wrong with their urinary organs; 24 percent with their ears and noses; 38 percent with their eyes; 21 percent with their stomachs and intestines; and 9 percent with their lungs.

If a source of Vitamin A, such as butter, cod liver oil or egg yolk formed a part of the diet, infective lesions were never seen in rats, the addition of these substances to the deficient diets, generally resulted in rapid improvement and ultimate cure.

So, rats fed shitty diets get infections - but the ones given a good diet **don't** and can in fact **rapidly cure themselves** - proving the WHO **completely wrong**. Of course, these infections were unspecified, but there's no reason to think COVID-19 would somehow be exempt. The great thing about the immune system is that **it's universal** and can kill every single bacteria and virus in existence - including [the mighty COVID-19 \(archive\)](#) or even [salmonella \(archive\)](#). If this wasn't the case - and we required a specific drug or a vaccine for every new pathogen that might appear (and this happens [all the time \(archive\)](#)) - anyone who didn't get those medical remedies **would just die**. We have survived on this Earth for millions of years, and for a lot of that time, there was no handwash, antibiotics, masks or stuff like that. Yet we're still here today, because **our immune system is very effective** at its job. However, civilization is full of toxic assaults that can weaken it - such as [refined sugar \(archive\)](#), [industrial seed oils \(archive\)](#), [pesticides \(archive\)](#), [EMFs \(archive\)](#) and [psychological stress \(archive\)](#). So how can we protect ourselves?

- The aforementioned Vitamin A works in rats, but how about humans? Sure enough - measles outcomes [are better \(archive\)](#) when it's not deficient:

Children with low levels were more likely to have fever at a temperature of 40 degrees C or higher (68% vs 44%), to have fever for 7 days or more (54% vs 23%), and to be hospitalized (55% vs 30%). Children with low vitamin A levels had lower measles-specific antibody levels.

- Tuberculosis is [more common \(archive\)](#) in patients with low vitamin A:

Overall, the mean plasma retinol concentration was  $1.74 \pm 1.09 \mu\text{mol/L}$  in TB patients and  $2.8 \pm 0.97 \mu\text{mol/L}$  in healthy controls (Table 2). Comparison between TB patients and healthy controls showed a statistically significant difference ( $p < 0.0001$ ).

- This is expected when you realize that Vitamin A [activates certain kinds of immune cells \(archive\)](#):

The recognition that RA induces gut imprinting, together with our finding that it enhances A-Treg conversion (**A-Treg = T regulatory cells - addition mine**), differentiation, and expansion, indicates that RA production in vivo may drive both the imprinting and A-Treg development in the face of overt inflammation.

- As usual, don't be conned by the fake limits set by the so-called medical authorities, because healthy wild-living populations have [eaten much more of it \(archive\)](#) and lived to tell the tale:

The US Recommended Daily Allowance of vitamin A is currently 5,000 IU per day (and may possibly be lowered to 2500 IU per day). From the work of Weston Price, we can assume that the amount in indigenous diets was about 50,000 IU per day

- Vitamin D [activates macrophages \(archive\)](#) (virus killing cells):

When immune cells called macrophages encounter a pathogen and become activated, the vitamin D pathway is turned on, leading to the induction of the cathelicidin antimicrobial peptide if serum levels of vitamin D are sufficient

- This is supported by [studies on gene expression \(archive\)](#): subjects treated with vitamin D supplementation had immune-related differential gene expression in alveolar macrophages.

- The higher your Vitamin D levels, the [lesser your risk of infection \(archive\)](#): Each 10 nmol/l increase in 25(OH)D was associated with a 7 % lower risk of infection (95 % CI 3, 11 %) after adjustment for adiposity, lifestyle and socio-economic factors.

- You're much more likely to [get rid of Helicobacter Pylori infection \(archive\)](#) when you're not deficient in Vitamin D:

- Vitamin D [resolves influenza \(archive\)](#):

In those patients who do have influenza, we have treated them with the vitamin D hammer, as coined by my colleague. This is a 1-time 50 000 IU dose of vitamin D3 or 10 000 IU 3 times daily for 2 to 3 days. The results are dramatic, with complete resolution of symptoms in 48 to 72 hours.

Now, I've mentioned before that the immune system **is universal** - so it doesn't matter what kind of pathogen you've got, it will still mount a defense. This, though, will not satisfy the fearmongers or their unfortunate victims who've been brainwashed into thinking nCov is magic fairy dust. Here - then - is evidence that Vitamin D is directly involved in fighting against COVID-19:

- The higher your Vitamin D levels, the [milder your symptoms \(archive\)](#) of the so-called COVID-19 disease:
- [Lower chance of a positive COVID-19 test \(archive\)](#) with more Vitamin D (less virus in your body?):
- [Higher chance of dying from COVID-19 \(archive\)](#) with a Vitamin D deficiency (plus worse disease progression):

Mean serum 25(OH) vitamin D level was significantly lower among deceased patients compared with the surviving patients ( $10.4 \pm 6.4$  vs.  $19.3 \pm 11.2$  ng/mL, respectively, P

Mean serum 25(OH) vitamin D level was significantly lower in patients with severe-critical COVID-19 compared to that of patients with moderate COVID-19 ( $10.1 \pm 6.2$  vs.  $26.3 \pm 8.4$  ng/mL, respectively, p

Okay, I think that's enough. Vitamin D also [helps against chronic diseases \(archive\)](#) - and we know that that the so-called COVID-19 disease only really happens with co-morbidities. Anyway, how much do you need to take? Remember that the natural source of Vitamin D **is the sun** (food does not contain relevant amounts) - so if you get enough of that, you don't need to supplement (unless

it's the winter). However, these days, many people spend most of their time at home or in an office, etc. and [are vitamin D deficient \(archive\)](#) as a result:

With the use of such definitions, it has been estimated that 1 billion people worldwide have vitamin D deficiency or insufficiency. 7-12,15-22 According to several studies, 40 to 100% of U.S. and European elderly men and women still living in the community (not in nursing homes) are deficient in vitamin D

The optimal amount of Vitamin D in blood is at least 54 ng / ml - this is what's required to prevent all the diseases listed in this chart:

This is corroborated by indigenous people having an average Vitamin D level of [46 ng / ml \(archive\)](#). And yet, the so-called health authorities don't consider deficiency [until below 20 ng / ml \(archive\)](#):

Vitamin D has major role in calcium and bone metabolism. Normal values are 75-100 nmol/L (30-40 ng/ml). Vitamin D deficiency is defined if serum hydroxyvitamin D levels are less than 50nmol/L (20 ng/ml), insufficiency as 50-75 nmol/L (20-30 ng/ml).

This **murderous recommendation** tells you that the healthy level is less than what's required to prevent cancers, diabetes and fractures. This is also what's considered "deficiency" in studies - so the real amount of people with levels below adequate is much higher than reported. So [how much do we take \(archive\)](#) to reach the optimal level?

If you have even mild Vitamin D Deficiency, it is likely that you will need to be taking approximately 50,000 IU's per week (**about 7000 per day - addition mine**) for 4 to 12 weeks. If you have SEVERE deficiency, then you may need to be taking Vitamin D Supplements as high as 50,000 IU's per DAY for a month or even two months until getting a repeat Vitamin D Serum Level.

And yet, the so-called medical authorities recommend [only 400 IU \(archive\)](#) per day, which is simply a mockery:

You should take 10 micrograms (400 IU) of vitamin D a day between October and early March to keep your bones and muscles healthy.

They also claim that anymore than 4000 IU is toxic:

Do not take more than 100 micrograms (4,000 IU) of vitamin D a day as it could be harmful.

This is despite the fact that studies [routinely use even higher amounts \(archive\)](#) without ill effect. In fact, if you explore the above list, you will see that benefits start to appear usually from at least 2000 IU per day and up to 20000 (or higher in single doses). 400 is an amount that would maybe do something **for a mouse, certainly not a human**. There's really [no danger of poisoning yourself \(archive\)](#) with Vitamin D:

[...] I have not seen one single case of it ("**it**" = **Vitamin D poisoning - my addition**) in over 10 years of being a nurse in intensive care units and emergency rooms in major cities.

[...] there is "no evidence of adverse effects from taking 10,000 IU of Vitamin D a day".

cases of vitamin D toxicity with hypercalcemia, for which the 25(OH)D concentration and vitamin D dose are known, all involve intake of (greater than or equal to) 40,000 IU/d

Even in the above case, only hypercalcemia is used as proof of toxicity (not any actual negative symptom), and it's a possibility that something else was impairing calcium metabolism (e.g lack of another mineral or vitamin). Extremely high Vitamin D amounts given to children appear to be harmless aside from the aforementioned temporary high blood calcium levels:

In fact, in East Germany between the 1940's and 1960's, children would ROUTINELY get 6 doses of 600,000 IU's of Vitamin D between birth and 18 months old.

A study called Intermittent High Dose Vitamin D During Infancy questioning this practice's safety noted that, while many of the children developed transient high levels of blood calcium levels, "...all the infants appeared healthy and repeated inquiries... have failed to identify clinical vitamin d toxicity as a result of the prophylactic program...".

The only cases of poisoning I've been able to find were the result of someone else's fuckup - such as supplements having [a thousand times the listed amount \(archive\)](#) of the vitamin, or a doctor making a [mistake in prescription \(archive\)](#) so that the patient took 30 times the amount she should have. Even with [serious overdoses \(archive\)](#) due to oversights, there's often no long-term effects - "No renal, cardiac, or neurologic complications were noted.". In short, there's no reason to worry about Vitamin D toxicity unlike what the so-called medical authorities claim. Wow, this took long - now let's move on to the other immune supporters:

- Selenium [almost doubles the activity \(archive\)](#) of anti-infective cells, even if you're not deficient:

Thus supplementation of healthy volunteers with a "selenium replete" status with 200 µg/d Se for 8 wk increased the ability of human peripheral blood lymphocytes to respond to stimulation with alloantigen (48). The supplementation regimen resulted in 118% increase in cytotoxic lymphocyte-mediated tumor cytotoxicity and 82.3% increase in natural killer cell activity as compared to baseline values.

- Selenium deficient mice [are susceptible \(archive\)](#) to normally harmless viruses:

An amyocarditic strain of coxsackievirus B3, CVB3/0, converted to virulence when it was inoculated into Se-deficient mice. This conversion was accompanied by changes in the genetic structure of the virus so that its genome closely resembled that of other known virulent CVB3 strains.

More recent research has shown that a mild strain of influenza virus, influenza A/Bangkok/1/79, also exhibits increased virulence when given to Se-deficient mice. This increased virulence is accompanied by multiple changes in the viral genome in a segment previously thought to be relatively stable.

- Selenium [decreases HIV viral load \(archive\)](#) (yes, there is a treatment for HIV unlike what some fearmongers claim):

- Vitamin E deficiency [deactivates the immune system \(archive\)](#):

Natural Killer (NK) cell activity was examined in a 16-month-old Japanese boy with Shwachman syndrome associated with severe vitamin E deficiency. As evaluated by 51Cr-release assay from K562 cells, NK cell activity was constantly decreased. After 8 weeks of oral alpha-tocopherol (alpha-Toc) supplementation (100 mg/day), NK cell activity had normalised. When alpha-Toc supplementation was interrupted for 16 weeks. NK cell activity again decreased.

- Vitamin C [turns precursor cells \(archive\)](#) into actual immune cells:

Ascorbic acid was essential for the developmental progression of mouse bone marrow-derived progenitor cells to functional T-lymphocytes in vitro and also played a role in vivo.

- Vitamin C is [involved in production \(archive\)](#) of anti-viral proteins:

As we expected, the levels of IFN- $\alpha$  and - $\beta$  in BAL fluid and plasma from vitamin C-insufficient Gulo (-/-) mice were quite lower than those in wild type and vitamin C-sufficient Gulo (-/-) mice (Fig. 3A and B). This result proves that vitamin C is an essential factor for the production of anti-viral immune response during the early phase of virus infection through the production of type I IFNs.

- Sepsis patients are [deficient in Vitamin C \(archive\)](#):

The patients with septic shock had lower vitamin C concentrations and higher C-reactive protein concentrations than the non-septic patients (P

This is despite receiving allegedly adequate amounts (might it be because **they are not actually enough**, and the authorities have **lied again?**):

These low vitamin C levels were apparent despite receiving recommended intakes via enteral and/or parenteral nutritional therapy (mean 125 mg/d).

There is much more evidence if you care to look around. I think the overall trend is clear - the human immune system **depends on nutrients**. Lack of them kills it while replenishing them reactivates it. And we need **all of them** because they do different jobs. However, unlike with drugs - we do not need to know what exactly every nutrient does. Our bodies are so smart, you just need to provide the required nutrition and the body will know what to do with it. Science has spent lots of human effort and resources to try and find specific virus or bacteria cures. They are - of course - **chasing their own tails** if they don't take nutrition into account. There's no need to know the [specifics of COVID-19 replication \(archive\)](#) and such - because as I said before, **the immune system is universal** and - if well supported - will destroy all pathogens while we are none the wiser. Of course, modern medicine loves this "scientific" attitude because they can then develop drugs to block specific enzymes etc. and earn a lot of money while the people's health remains poor. It's all a big scam.

### Sources for the relevant nutrients

Food [is the best \(archive\)](#) - more absorbable and with no potential for toxicity. Supplements only as a last resort.

- Vitamin A - eggs or liver. Though carotenes are useful too, they **do not serve the same function** as preformed retinol from animal sources. Calling them Vitamin A is [a fraud concocted by vegans \(archive\)](#) to pretend their diet is more healthy than it actually is. Keep in mind that animals make Vitamin A from the carotenes in their diets, so naturally / organically raised ones will have much more of it.
- Vitamin C - all fruit and vegetables contain small amounts - you can juice them for easier ingestion. If you need more Vitamin C than what is provided this way, use acerola cherry powder.
- Vitamin D - sun (non-winter months) or supplements (D3 only). You **cannot get enough from food**, unfortunately.
- Vitamin E - all nuts and seeds (need to be raw)
- Selenium - brazil nuts; 2 per day provides the 200 mcg which gave benefits in studies

### Herbal medicine

Realistically, our immune system should deal with infections with just the basics covered. However, sometimes you need that extra boost, and herbs can provide it in a safe way (unlike medical drugs or vaccines). Keep in mind that for the longest time humanity has lived in the wild, being dependent on the plants growing there. Eating those would have given them a constant dose of thousands of bioactive phytochemicals of which some have anti-infective properties. So, just including a variety of plants in your diet is a great way to try to replicate the ancient environment to which we're adapted to. But some plants are particularly effective - and we call the usage of those **herbal medicine**:

- *Garlic*

Definitely the King of immune supporters that can apparently [kill any virus \(archive\)](#) - "Almost every virus tested has not been able to withstand allicin, the active ingredient produced when a fresh clove of garlic is crushed". Here's what the Encyclopedia of Herbal Medicine says about it:

Garlic has always been esteemed for its healing powers, and before the development of antibiotics it was a treatment for all manner of infections, from tuberculosis to typhoid.

Garlic is an excellent remedy for all types of chest infections. It is good for colds, flu, and ear infections

Renowned herbalist [Richard Schulze \(archive\)](#) (who ran a clinic for decades, curing all kinds of allegedly incurable diseases) heavily praises garlic:

I have seen it destroy all bacteria, virus, fungus, worms and parasites, everything inside, and outside too. Garlic is the most potent killer of bacteria, virus and fungus, in fact any antigen/pathogen, stronger than any other herb.

Garlic is totally selective in its bacteria destruction, only killing bacteria that's harmful to our body. What is amazing is that, at the same time, garlic actually enhances our friendly bacteria and improves our intestinal flora and digestion. Garlic destroys many types of bacteria including Streptococcus, Staphylococcus, Typhoid, Diphtheria, cholera, bacterial dysentery (Traveller's diarrhea), Tuberculosis, Tetanus, Rheumatic bacteria, and many others. But, that's not all, garlic is also an extremely potent anti-viral agent. Garlic has been tested against many viruses and is known to destroy on contact the viruses that cause Measles, Mumps, Mononucleosis (Epstein-Barr), Chicken pox, Herpes simplex #1 and #2, Herpes Zoster, Viral Hepatitis, scarlet fever, Rabies and others. But still, that's not all. Garlic's anti-fungal ability is second to none. In the laboratory, it has proven to be more potent than any known antifungal agent including Nystatin. Garlic will regulate the overgrowth of *Candida albicans* and positively kill ringworm.

- *Echinacea*

Garlic's brother (or maybe sister?) in arms, that instead of directly killing pathogens, increases the activity of your own immune system. Again [from Schulze \(archive\)](#):

It helps the body create more immune blood cells, actually increases T-cell counts, helps increase macrophage production and activity (eating ability), stimulates production of interferon and interleukin I, and it seems to protect cells from invasion.

Echinacea and Garlic are a dynamite duo and I highly suggest they be used together. I suggest anyone on Echinacea consume at least 3 cloves of garlic a day, also.

I had a woman come into my clinic who had an infected, swollen sore throat for 3 1/2 months and the doctors had given her every drug and antibiotic under the sun; nothing worked. Her immune system was shot. She used Echinacea tincture for 2 days and it was gone and never came back. I

have had patients with chronic infections for years get almost instant results using Echinacea only for a few days.

And from the Encyclopedia:

Clinical research into echinacea has confirmed that it increases the number of white blood cells and their strength of action, although its precise mode of action on immune function is not well understood. The polysaccharides inhibit the ability of viruses to take over cells, while the alkylamides are antibacterial and antifungal. Research supports the use of echinacea to prevent colds and respiratory infections resulting from air travel.

Echinacea is a key remedy in Western herbal medicine, and is used to treat many health problems, notably viral and fungal infections, and skin infections such as acne and boils. It makes an excellent gargle for throat infections, and is typically prescribed by herbalists wherever the immune system is underperforming.

You could say **Garlic is the sword and Echinacea the shield** in the fight against infectious diseases. But herbal medicine still has more to offer:

- *Eucalyptus*

This one is specific for respiratory infections (what COVID-19 is alleged to be). From the Encyclopedia again:

The herb is an antiseptic and is very helpful for colds, flu, and sore throats.

Eucalyptus is a strong expectorant, suitable for chest infections, including bronchitis and pneumonia.

The diluted essential oil, applied to the skin as a chest or sinus rub, has a warming and slightly anesthetic effect, helping to relieve respiratory infections. The same effect occurs when the infusion or tincture is used as a gargle.

- *Turmeric*

Calms down the immune system when it has become overactive. Weakens the damage from infections that have already got in. From the Encyclopedia:

Research has established that turmeric, and curcumin in particular, blocks several different inflammatory pathways, countering inflammation throughout the body.

Turmeric is largely taken as a supplement to prevent or treat cancer, dementia, and many autoimmune diseases.

It has also been shown to **act specifically against COVID-19!** So, we've had [a cure for COVID-19 \(archive\)](#) right under our noses that the authorities have of course completely ignored:

According to the paper,<sup>3</sup> "Potential Inhibitor of COVID-19 Main Protease (Mpro) From Several Medicinal Plant Compounds by Molecular Docking Study," posted March 13, 2020, on preprints.org, curcumin and demethoxycurcumin were two compounds (**found in turmeric - addition mine**) among several that were found to inhibit COVID-19 Mpro.

Studies have also shown curcumin has an inhibitory effect on virus-induced cytokine storms, which occur as a result of an overproduction of immune cells and pro-inflammatory cytokines. This too suggests it may be of particular use against COVID-19, considering the cytokine storm triggered in severe and critical COVID-19 infection is what ends up killing these patients.

- Various other herbs [do the same \(archive\)](#):

Chokeberry juice inactivated about 97% of SARS-CoV-2 after 5 min, while green tea and pomegranate juice inactivated about 80% of the virus.

Keep in mind this is a culture study, so not as good as an actual human study would be, but still - it's much better evidence than what the fearmongers have for their [useless measures](#). WHO, of course, has shat on herbal medicine as a treatment for COVID-19, preferring masks, lockdowns and vaccines which **don't work**. Should we laugh or cry?

“May have” when the amount of evidence is massive (versus **zero** for their useless measures). Ha ha ha. Anyway, since this isn't a report about herbal medicine, I think I'll finish this here. There are more antiviral herbs than the ones I mentioned, such as cinnamon, oregano, or lemon. For the purposes of the argument, I've also assumed that COVID-19 is actually an infectious disease - even though it's usually the co-morbidities that end up doing you in. There are herbs for chronic diseases as well, and the COVID-19 fearmongers - by ignoring or attacking these extremely effective remedies - have exposed themselves as **enemies of your health**. To learn more, read the Encyclopedia of Herbal Medicine, visit [Richard Schulze's webpage](#), or look up herbal remedies by action on sites such as [Herbpathy](#). Scientific studies can be found on e.g [GreenMedInfo](#).