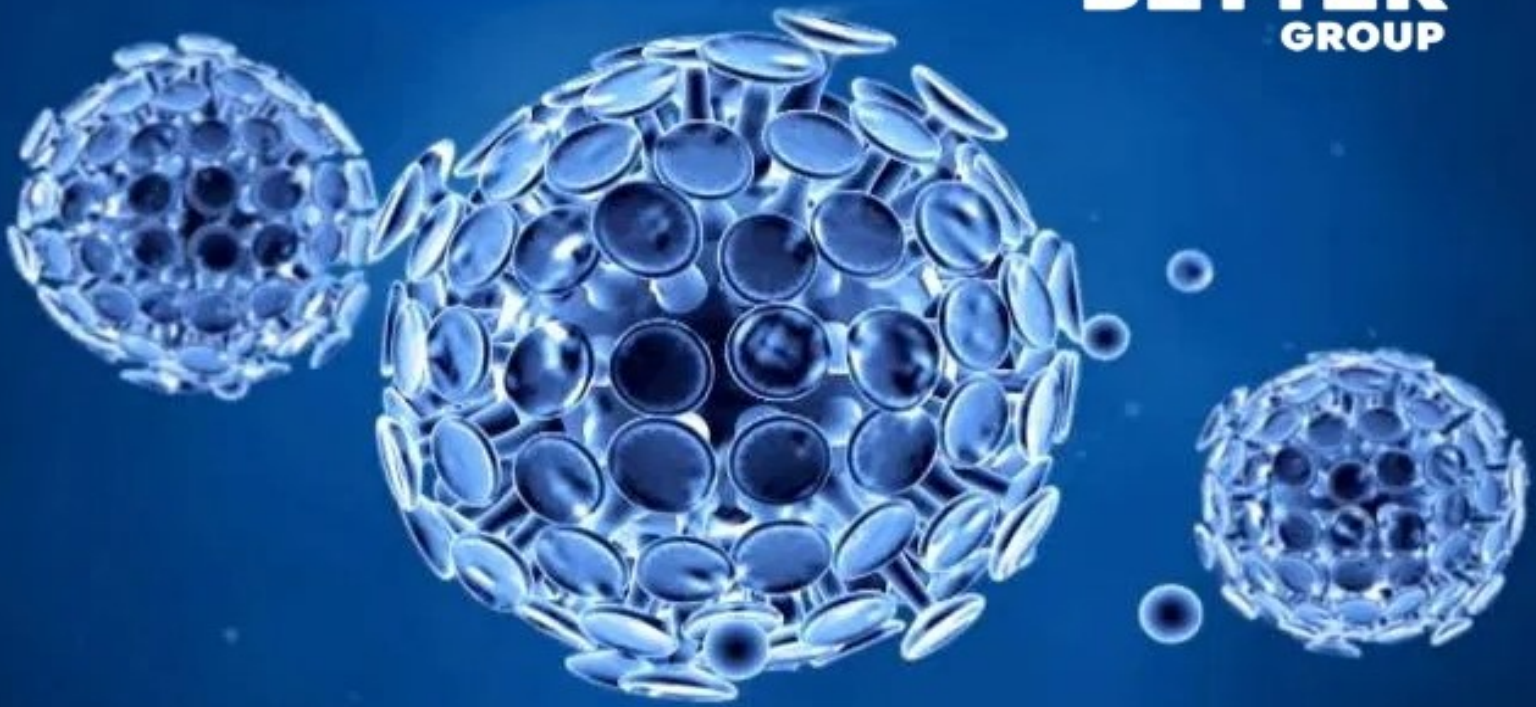


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Coronavirus

*What you need to know
and what you can do*

NOW

to protect yourself and your family.

Andrew W Saul, Damien Downing, Thomas Levy MD & others.

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Contents

- 5.** Vitamin C and its application to the treatment of nCoV Coronavirus
- 9.** Coronavirus Patients in China to be Treated with High-Dose Vitamin C
- 11.** Early Large Dose Intravenous Vitamin C is the Treatment of Choice for 2019-nCov Pneumonia
- 16.** Three Intravenous Vitamin C Research Studies Approved for Treating COVID-19
- 18.** Tons of Vitamin C to Wuhan
- 20.** Vitamin C and COVID-19 Coronavirus
- 21.** News Media Attacks Vitamin C Treatment of COVID-19 Coronavirus

VITAMIN C AND ITS APPLICATION TO THE TREATMENT OF nCoV CORONAVIRUS

How Vitamin C Reduces Severity and Deaths from Serious Viral Respiratory Diseases
by Andrew W. Saul, Editor

(OMNS February 10, 2020)

Most deaths from coronavirus are caused by pneumonia. Vitamin C has been known, for over 80 years, to greatly benefit pneumonia patients.

In 1936 Gander and Niederberger found that vitamin C lowered fever and reduced pain in pneumonia patients. [\[1\]](#)

Also in 1936, Hochwald independently reported similar results. He gave 500 mg of vitamin C every ninety minutes. [\[2\]](#)

McCormick gave 1000 mg vitamin C intravenously, followed by 500 mg orally every hour. He repeated the injection at least once. On the fourth day, his patient felt so well that he voluntarily resumed work, with no adverse effects. [\[3\]](#)

In 1944 Slotkin and Fletcher reported on the prophylactic and therapeutic value of vitamin C in bronchopneumonia, lung abscess, and purulent bronchitis. "Vitamin C has greatly alleviated this condition and promptly restored normal pulmonary function." [\[4\]](#)

Slotkin further reported that "Vitamin C has been used routinely by the general surgeons in the Millard Fillmore Hospital, Buffalo, as a prophylactic against pneumonia, with complete disappearance of this complication." [\[5\]](#)

According to the US Centers for Disease Control, there are about 80,000 dead from annual influenzas, escalating to pneumonia, in the USA. Coronavirus is a very serious contagious disease. But contagion to a virus largely depends on the susceptibility of the host. It is well established that low vitamin C levels increase susceptibility to viruses. [\[6\]](#)

Vitamin C lowers mortality

It is one thing to be sick from a virus and another thing entirely to die from a viral-instigated disease. It must be emphasized that a mere 200 mg of vitamin C/day resulted in an 80% decrease in deaths among severely ill, hospitalized respiratory disease patients. [\[7\]](#)

A single, cheap, big-box discount store vitamin C tablet will provide more than twice the amount used in the study above.

And yes, with vitamin C, more is better.

Frederick R. Klenner and Robert F. Cathcart successfully treated influenza and pneumonia with very high doses of vitamin C. Klenner published on his results beginning in the 1940s; [8] Cathcart beginning in the 1970s. [9] They used both oral and intravenous administration.

"Vitamin C is effective in reducing duration of severe pneumonia in children less than five years of age. Oxygen saturation was improved in less than one day." [10]

A recent placebo controlled study concluded that ***"vitamin C should be included in treatment protocol of children with pneumonia so that mortality and morbidity can be reduced."*** In this study, the majority of the children were infants under one year of age. By body weight, the modest 200 mg dose given, to tiny babies, would actually be the equivalent of 2,000-3,000 mg/day for an adult. [10]

Although many will rightly maintain that the dose should be high, even a low supplemental amount of vitamin C saves lives. This is very important for those with low incomes and few treatment options.

We're talking about twenty cents' worth of vitamin C a day to save lives now.

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All of Dr. Klenner's papers are listed and summarized in: *Clinical Guide to the Use of Vitamin C* (ed. Lendon H. Smith, MD, Life Sciences Press, Tacoma, WA, 1988. This book is posted for free access at http://www.seanet.com/~alexs/ascorbate/198x/smith-lh-clinical_guide_1988.htm

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Recommendations for further reading:

[A coronavirus pandemic can be stopped with the immediate widespread use of high doses of vitamin C](#). Preventing and treating severe respiratory infections with large amounts of vitamin C

is well established. There has been a lack of media coverage of this therapeutic approach against viruses in general, and coronavirus in particular. (A [Chinese language edition](#) is also freely available.)

The [nutritional treatment of coronavirus is presented, with dosage specifics](#), in this protocol endorsed by physicians on the editorial board of the *Orthomolecular Medicine News Service*.

Exactly [how to administer intravenous vitamin C](#) to a hospitalized patient with a viral illness, by Atsuo Yanagisawa, MD, Japanese College of Intravenous Therapy. (Here is the [IV vitamin C protocol in Chinese](#)).

[Instructions on how to take high oral doses of vitamin C during illness, by Robert F. Cathcart III, MD](#). This paper contains the doctor's answers to many questions about the therapeutic use of vitamin C.

Coronavirus Patients in China to be Treated with High-Dose Vitamin C

by Andrew W. Saul, Editor

(OMNS February 13, 2020)

Breaking news: China is conducting a clinical trial of 24,000 mg/day of intravenous vitamin C to treat patients with coronavirus and severe respiratory complications. Participants will receive IV vitamin C for 7 days straight at Zhongnan Hospital of Wuhan University. Honor and thanks are due to Zhiyong Peng, MD, for making this happen. He is chief physician and professor at the hospital, which is close to ground zero for coronavirus. This important study was filed and announced yesterday and details may be confirmed at <https://clinicaltrials.gov/ct2/show/NCT04264533>

At Zhongnan Hospital in Wuhan, China, 24,000 mg of vitamin C will be administered to coronavirus patients, intravenously, each day for 7 days.

To fight a dangerous virus for which there is no existing medical treatment, you must rely on your own immune system. It is well established, in every nutrition textbook ever written, that you need vitamin C to make your immune system work well, or to even work at all. Inadequate vitamin C intake is a worldwide problem that can be immediately and economically fixed. With even modest amounts of supplemental vitamin C, deaths will decrease. In one study, a mere 200 mg of vitamin C/day resulted in an **80% decrease in deaths among severely ill, hospitalized respiratory disease patients**. [Hunt C et al. *Int J Vitam Nutr Res* 1994;64:212-19.] <http://orthomolecular.org/resources/omns/v16n09.shtml>

Another recent study used this same low 200 mg dose for infants and children under five years of age, with severe pneumonia. The authors concluded that **"Vitamin C is effective in reducing duration of severe pneumonia in children less than five years of age. Oxygen saturation was improved in less than one day."** [Khan IM et al. *J Rawalpindi Med Coll (JRMCI)*; 2014;18(1):55-57 <http://www.journalrmc.com/volumes/1405749894.pdf>]

A lack of vitamin C has been long known, literally for decades, to increase susceptibility to viruses. <http://orthomolecular.org/resources/omns/v16n06.shtml> It is one thing to be sick from a virus and another thing entirely to die from a viral-instigated disease. The greatest danger with coronavirus is escalation to pneumonia. For this, much higher doses of vitamin C are indicated, preferably by IV.

How to administer high-dose intravenous vitamin C in hospital, Chinese language edition, is now posted for free access at http://www.doctoryourself.com/Coronavirus_Chinese_IV_C_Protocol.pdf This information is

now being publicized all over Asia. Just because it is not on the American news channels doesn't mean it's not happening. It is. This is real news. The fake news is the media's neglect in not reporting it. And here is the protocol in English, to make reporting all the easier: <http://orthomolecular.org/resources/omns/v16n07.shtml>

(OMNS Editor-in-Chief Andrew W. Saul is a member of the Medical and Scientific Advisory Board to the International Intravenous Vitamin C China Epidemic Medical Support Team. Its director is Richard Z. Cheng, MD, PhD; associate director is Hong Zhang, PhD. Other team members that American readers will recognize include Jeanne Drisko, MD (Professor, University of Kansas Medical School); Thomas Levy, MD, JD; and Atsuo Yanagisawa, MD, PhD. (Professor, Kyorin University, Tokyo).

Intravenous Vitamin C Protocol in

English: <http://orthomolecular.org/resources/omns/v16n07.shtml>

IVC Protocol in

Chinese: http://www.doctoryourself.com/Coronavirus_Chinese_IV_C_Protocol.pdf

Early Large Dose Intravenous Vitamin C is the Treatment of Choice for 2019-nCov Pneumonia

Richard Z Cheng, MD, PhD; Hanping Shi, MD, PhD; Atsuo Yanagisawa, MD, PhD; Thomas Levy, MD, JD; Andrew Saul, PhD.

(OMNS February 16, 2020)

The 2019-nCov (coronavirus) epidemic originated in Wuhan, China and is now spreading to many other continents and countries, causing a public fear. Worst of all, there is no vaccine or specific antiviral drugs for 2019-nCov available. This adds to the public fear and gloomy outlook. A quick, rapidly deployable and accessible, effective and also safe treatment is urgently needed to not only save those patients, to curtail the spread of the epidemic, but also very important in the psychological assurance to people worldwide, and to the Chinese in particular. Acute organ failure, especially pulmonary failure (**acute respiratory distress syndrome, ARDS**) is the key mechanism for 2019-nCov's fatality. Significantly increased oxidative stress due to the rapid release of free radicals and cytokines etc. is the hallmark of ARDS which leads to cellular injury, organ failure and death. Early use of large dose antioxidants, especially **vitamin C (VC)**, therefore, plays a key role in the management of these patients. We call upon all those in the leadership, and those providing direct assistance patients, to bravely and rapidly apply large dose **intravenous vitamin C (IVC)** to help those patients and to stop this epidemic.

2019-nCov is a rapidly developing epidemic with a high morbidity and mortality.

Wang et al reports 26% ICU admission rate and a 4.3% mortality rate in their 138 confirmed cases [\[1\]](#). Chen et al report that out of 99 confirmed 2019-nCov patients, 17 (17%) patients developed ARDS and, among them, 11 (11%) patients worsened in a short period of time and died of multiple organ failure.

Increased oxidative stress, an underlying "cytokine storm," leads to ARDS which is the key pathology of high mortality of these pandemic viral infections. Cytokine storm-induced ARDS is the key pathology leading to death of these patients [\[2\]](#). Intravenous vitamin C effectively counters oxidative stress.

Cytokine storm

Coronaviruses and influenza are among the pandemic viruses that can cause lethal lung injuries and death from ARDS [\[3\]](#). Viral infections cause a "cytokine storm" that can activate lung capillary endothelial cells leading to neutrophil infiltration and increased oxidative stress (reactive oxygen and nitrogen species) that further damages lung barrier function [\[3\]](#). ARDS, which is characterized by severe hypoxemia, is usually accompanied by uncontrolled inflammation, oxidative injury, and the damage to the alveolar-capillary barrier [\[4\]](#). The

increased oxidative stress is a major insult in pulmonary injury such as acute lung injury (ALI) and acute respiratory distress syndrome (ARDS), two clinical manifestations of acute respiratory failure with substantially high morbidity and mortality [\[5,6\]](#).

In a report of 29 patients confirmed of 2019-nCov pneumonia patients, 27 (93%) showed increased hsCRP, a marker of inflammation (and oxidative stress) [\[7\]](#). Transcription factor nuclear factor erythroid 2-related factor 2 (Nrf2) is a major regulator of antioxidant response element- (ARE-) driven cytoprotective protein expression. The activation of Nrf2 signaling plays an essential role in preventing cells and tissues from injury induced by oxidative stress. Vitamin C is an essential element of the antioxidant system in cellular response [\[8\]](#).

Part of vitamin C's biological effects in critical care management are well reviewed in a recent article by Nabzdyk and Bittner from Mass Gen Hospital of Harvard Medical School on World's Journal of Critical Care Medicine [\[9\]](#):

Antioxidant, radical oxygen scavenger protecting cells from oxidative Steroid- and catecholamine synthesis, cofactor in catecholamine, vasopressin and steroid synthesis, improves hemodynamics, may accelerate resolution of shock
Immune cell function. Increases neutrophil phagocytosis and chemotaxis, affects macrophage migration, enhances T and NK cell proliferation, modulates their function, may increase antibody formation.
Endothelial cell function. Decreases endothelium ICAM expression and leukocyte adhesion, improves endothelial barrier function, improves microcirculation
Carnitine production, modulates fatty acid metabolism, may improve microcirculation and cardiac function
Wound healing, cofactor of collagen synthesis, mitogen for fibroblasts

Antioxidants, especially large dose IV vitamin C (IVC) in the management of ARDS.

It's clear that increased oxidative stress plays a major role in the pathogenesis of ARDS and death. Cytokine storm is observed in both viral and bacterial infections [\[3\]](#). Cytokine storm leads to increased oxidative stress, ARDS and death seems to be a common and non-specific pathway. This is important in clinical management. Since the prevention and management targeting increased oxidative stress with large dose of antioxidants seems a logical step and can be applied to these deadly pandemics, without the lengthy waiting for pathogen-specific vaccines and drugs, as is the case of the current 2019-nCov epidemic.

As a matter of fact, large dose intravenous vitamin C (IVC) has been used clinically successfully in viral ARDS and also in influenza [\[10\]](#). Fowler et al described a 26-year-old woman developed viral ARDS (rhinovirus and enterovirus-D68) [\[3\]](#). She was admitted to ICU. After failure to routine standard management, she was placed on ECMO on day 3. High dose IVC (200mg/kg body/24 hour, divided in 4 doses, one every 6 hours) was also started on ECMO day 1. Her lungs

showed significant improvement on day 2 of high dose IVC infusion on X-ray imaging. She continued to improve on ECMO and IVC and ECMO was discontinued on ECMO day 7 and the patient recovered and was discharged from the hospital on hospital day 12, without the need of supplemental oxygen. One month later, X-ray of her lungs showed complete recovery. Gonzalez et al (including one of the authors, Thomas Levy) reported recently a severe case of influenza successfully treated with high dose IVC [\[10\]](#). 25-year-old MG developed flu-like symptoms which was rapidly deteriorating to the degree that, about 2 weeks later, the patient barely had the energy to use the toilet. He was placed on high dose IVC (50,000 mg of vitamin C in 1000 ml Ringer's solution, infused over 90 minutes). The patient immediately reported significant improvement the next day. On day 4 of IVC infusion he reported to feel normal. He continued oral VC (2,000 mg twice daily) [\[10\]](#). Another story has been widely circulating on the social media that large dose IVC reportedly was used in 2009 to save a New Zealand farmer, Alan Smith (Primal Panacea). One of us (Thomas Levy) was consulted upon in this case [\[11\]](#) [\[12\]](#). Hemila et al reported that vitamin C shortens ICU stay in their 2019 meta-analysis of 18 clinical studies with a total of 2004 ICU patients on the journal Nutrients [\[13\]](#). In this report, 17,000 mg/day IVC shortened the ICU stay by 44%. Marik et al reported their use of IVC in 47 sepsis ICU cases. They found a significant reduction in mortality rate in the IVC group of patients [\[14\]](#).

Dietary antioxidants (vitamin C and sulforaphane) were shown to reduce oxidative-stress-induced acute inflammatory lung injury in patients receiving mechanical ventilation [\[15\]](#). Other antioxidants (curcumin) have also been shown to have promising anti-inflammatory potential in pneumonia [\[16\]](#).

High dose IVC has been clinically used for several decades and a recent NIH expert panel document states clearly that high dose IVC (1.5 g/kg body weight) is safe and without major side effects [\[17\]](#).

Summary

2019-nCov pneumonia is a rapidly developing disease with high morbidity and mortality rate. The key pathogenesis is the acute lung injury causing ARDS and death. Coronaviruses, influenza viruses and many other pandemic viral infections are usually associated with an increase oxidative stress leading to oxidative cellular damage resulting in multi-organ failure. Antioxidants administration therefore has a central role in the management of these conditions, in addition to the standard conventional supportive therapies. Preliminary clinical studies and case reports show that early administration of high dose IVC can improve clinical conditions of patients in ICU, ARDS and flu. It needs to be pointed that pandemics like 2019-nCov will happen in the future. Specific vaccines and antiviral drugs R&D take long time to develop and are not available for the current nCov epidemic and won't be ready when the next pandemic strikes. IVC and other antioxidants are universal agents for ARDS that can be rapidly applied clinically. Given that high dose IVC is safe, can be effective, we call on the involved leadership and healthcare professionals to look into high dose IVC without further delay. More clinical studies of the IVC and oral VC (such as liposomal-encapsulated VC) are needed to

develop standard protocols for the current use and future uses are urgently needed. We hope when the next pandemic strikes, we won't be so helpless and we'll be ready.

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Three Intravenous Vitamin C Research Studies Approved for Treating COVID-19

by Andrew W. Saul, Editor

(OMNS February 21, 2020)

Intravenous vitamin C is already being employed in China against COVID-19 coronavirus. I am receiving regular updates because I am part of the Medical and Scientific Advisory Board to the International Intravenous Vitamin C China Epidemic Medical Support Team. Its director is Richard Z. Cheng, MD, PhD; associate director is Hong Zhang, PhD. Among other team members are Qi Chen, PhD (Associate Professor, Kansas University Medical School); Jeanne Drisko, MD (Professor, University of Kansas Medical School); Thomas E. Levy, MD, JD; and Atsuo Yanagisawa, MD, PhD. (Professor, Kyorin University, Tokyo). To read the treatment protocol information in English: <http://orthomolecular.org/resources/omns/v16n07.shtml> (Protocol in Chinese at http://www.doctoryourself.com/Coronavirus_Chinese_IV_C_Protocol.pdf)

Direct report from China

OMNS Chinese edition editor Dr. Richard Cheng is reporting from China about the first approved study of 12,000 to 24,000 mg/day of vitamin C by IV. The doctor also specifically calls for immediate use of vitamin C for prevention of coronavirus (COVID-19). <https://www.youtube.com/watch?v=TC0S09KDG7U>

A second clinical trial of intravenous vitamin C was announced in China on Feb. 13th. In this second study, says Dr. Cheng, *"They plan to give 6,000 mg/day and 12,000 mg/day per day for moderate and severe cases. We are also communicating with other hospitals about starting more intravenous vitamin C clinical studies. We would like to see oral vitamin C included in these studies, as the oral forms can be applied to more patients and at home."* Additional information at <http://orthomolecular.org/resources/omns/v16n11.shtml>

And on Feb 21, 2020, announcement has been made of a third research trial now approved for intravenous vitamin C for COVID-19. <https://www.youtube.com/watch?v=VMDX0RSDp1k&feature=youtu.be>

Dr. Cheng, who is a US board-certified specialist in anti-aging medicine, adds: *"Vitamin C is very promising for prevention, and especially important to treat dying patients when there is no better treatment. Over 2,000 people have died of the COIV-19 outbreak and yet I have not seen or heard large dose intravenous vitamin C being used in any of the cases. The current sole focus on vaccine and specific antiviral drugs for epidemics is misplaced."*

He adds that: *"Early and sufficiently large doses of intravenous vitamin C are critical. Vitamin C is not only a prototypical antioxidant, but also involved in virus killing and prevention of viral replication. The significance of large dose intravenous vitamin C is not just at antiviral level. It is acute respiratory distress syndrome (ARDS) that kills most people from coronaviral pandemics (SARS, MERS and now NCP). ARDS is a common final pathway leading to death.*

"We therefore call for a worldwide discussion and debate on this topic."

News of vitamin C research for COVID-19 is being actively suppressed

Anyone saying that vitamin therapy can stop coronavirus is already being labeled as "promoting false information" and promulgating "fake news." Even the sharing of verifiable news, and direct quotes from credentialed medical professionals, is being restricted or blocked on social media. You can see sequential examples of this phenomenon at my Facebook page <https://www.facebook.com/themegavitaminman> .

Indeed, the World Health Organization (WHO) has, literally, met with Google and Facebook and other media giants to stop the spread of what they declare to be wrong information. https://www.cnn.com/amp/2020/02/14/facebook-google-amazon-met-with-who-to-talk-coronavirus-misinformation.html?_twitter_impression=true

Physician-directed, hospital-based administration of intravenous vitamin C has been marginalized or discredited. Scientific debate over COVID-19 appears to not be allowed.

Ironically, Facebook, blocking any significant users' sharing of the news of approved vitamin therapy research, is itself blocked in China by the Chinese government. As for the internet, yes, China has it. And yes, it is censored. But, significantly, the Chinese government has not blocked this real news on how intravenous vitamin C will save lives in the COVID-19 epidemic. Here is the protocol as published in Chinese: <http://orthomolecular.org/resources/omns/v16n11-chi.shtml>

Medical orthodoxy obsessively focuses on searching for a vaccine and/or drug for coronavirus COVID-19). While they are looking for what would be fabulously profitable approaches, we have with vitamin C an existing, plausible, clinically demonstrated method to treat what coronavirus patients die from: severe acute respiratory syndrome, or pneumonia.

And it is available right now.

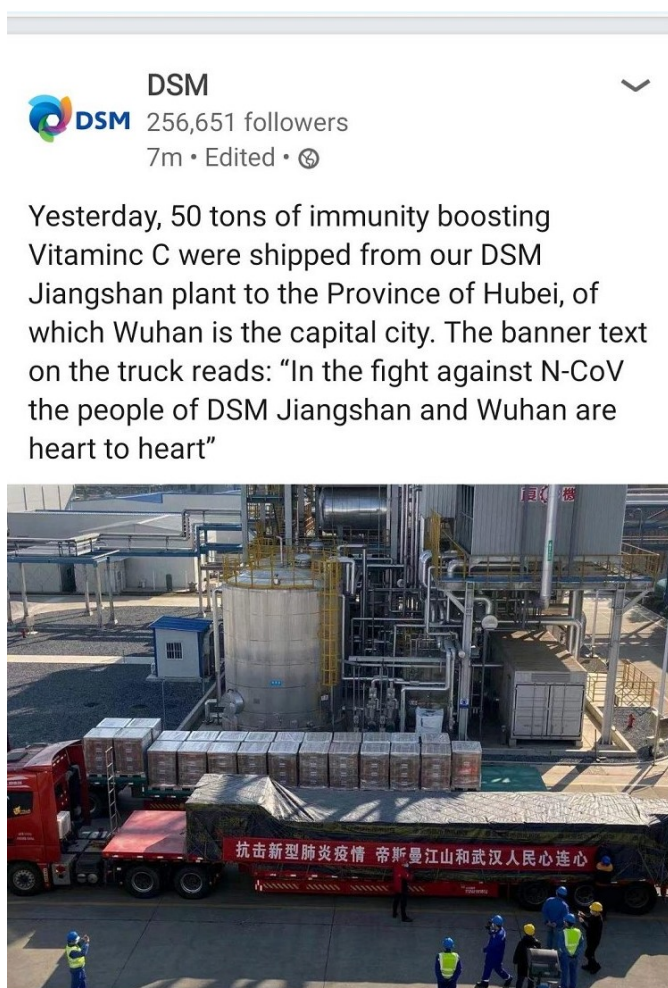
TONS OF VITAMIN C TO WUHAN

China Using Vitamin C Against COVID

by Andrew W. Saul, Editor-in-Chief
Orthomolecular Medicine News Service

(OMNS February 23, 2020)

We can all agree that 50 tons of vitamin C pretty much qualifies as a megadose. We can also likely agree that trucking 50 tons of vitamin C, straight into Wuhan, full in the face of the



OVID-19 epidemic, qualifies as news. The news media are not reporting this, or any other, significantly positive megavitamin news.

Loving the photo, but needing authentication, I consulted my physician correspondent in China, Richard Cheng, MD. He confirmed it, saying: "This was reported in the Chinese media about 2 weeks ago." Another translator has also independently verified the accuracy of the translation.

DSM, by the way, simply stands for Dutch State Mines, the Netherlands-based parent of DSM Jiangshan Pharmaceutical Co., Ltd. The Chinese division has been recognized as a "China Enterprise with Outstanding Contribution to Social Responsibility." https://www.dsm.com/countrysites/locations/jiangshan/en_us/home.html There is another DSM factory in Scotland, which also manufactures vitamin C.

We are so used to being lied to that the truth is like a diamond in a five-and-dime store: you can't believe it is real because it is mixed in with the fakes. News of nutrition-centered treatment of COVID-19 has been branded "fake news" and "false information." I say that what is "false" and "fake" is the deliberate omission of any news of health-saving, life-saving measures already underway to help the people of China and the rest of our planet. .

All through this document is more verified but still unreported news of high-dose intravenous vitamin C against COVID-19 in China.

Summary

- 1) Three repeatedly confirmed vitamin C for COVID-19 research studies are going on in China now. <http://orthomolecular.org/resources/omns/v16n12.shtml>
- 2) Confirmation has also been obtained that 50 tons (yes, tons) of vitamin C has been donated by a major C manufacturer and trucked to Wuhan.
- 3) The concerned public is receiving only "be-scared-until-we-vaccinate-you" news.
- 4) Sharing information on COVID-19 vitamin therapy research has now been systematically blocked by Facebook and other social media giants.
- 5) The news media are not reporting on any of this. Therefore, I ask that you take it upon yourselves to do so and share all this with everyone you can.

Vitamin C and COVID-19 Coronavirus

by Damien Downing, MBBS, MRSB and Gert Schuitemaker, PhD

(OMNS February 28, 2020)

There is only one existing treatment for the new coronavirus: vitamin C.

Vitamin C supports your immune system.

Vitamin C helps to kill the virus and reduces the symptoms of infection.

It's not a COVID "cure," but nothing is.

It might just save your life, though, and will definitely reduce the severity of the infection.

If someone tells you it's not proven, consider two things:

1. Nothing is proven to work against COVID-19, because it is a new virus.
2. Vitamin C has worked against every single virus including influenzas, pneumonia, and even poliomyelitis.

What to do

If you do nothing else, start taking vitamin C right away; at least 3 grams a day, spread right across the day. That's a 1,000 milligram capsule every 8 hours, or a level teaspoon of powder dissolved in a pint or so of water, drank all through the day.

If you're smart and motivated, do all the other things recommended in our previous release [Vitamin C Protects Against Coronavirus](http://orthomolecular.org/resources/omns/v16n04.shtml) (<http://orthomolecular.org/resources/omns/v16n04.shtml>)

When and if you catch a bug that might be COVID-19, simply increase your vitamin C intake: a rounded teaspoon (that's 4 to 5 grams) in water (which helps to keep you hydrated) every 3 or 4 hours. And keep on taking it.

Do you consult a doctor? Do you self-isolate? Yes and yes. Of course you do; that's your duty to others.

Vitamin C and the other measures are what you do for yourself.

The links in this document provide a large number of references to back up our above statements.

News Media Attacks Vitamin C Treatment of COVID-19 Coronavirus

Yet Ascorbate is a Proven, Powerful Antiviral
by Andrew W. Saul, Editor-in-Chief

(OMNS Mar 1, 2020)

First of all, the naysayers are too late. Vitamin C is already being used to prevent and treat COVID-19 in China and in Korea. And it is working.

Here is a verified official statement from China's Xi'an Jiaotong University Second Hospital:

"On the afternoon of February 20, 2020, another 4 patients with severe coronavirus pneumonia recovered from the C10 West Ward of Tongji Hospital. In the past 8 patients have been discharged from hospital. . . [H]igh-dose vitamin C achieved good results in clinical applications. We believe that for patients with severe neonatal pneumonia, and for critically ill patients, vitamin C treatment should be initiated as soon as possible after admission. Numerous studies have shown that the dose of vitamin C has a lot to do with the effect of treatment. High-dose vitamin C can not only improve antiviral levels, but more importantly, can prevent and treat acute lung injury (ALI) and acute respiratory distress (ARDS)."

Here is a report from Korea:

"At my hospital in Daegu, South Korea, all inpatients and all staff members have been using vitamin C orally since last week. Some people this week had a mild fever, headaches and coughs, and those who had symptoms got 30,000 mg intravenous vitamin C. Some people got better after about two days, and most had symptoms go away after one injection." (Hyoungjoo Shin, M.D.)

There are at least three high-dose intravenous vitamin C studies underway in China. Literally by the truckload, tons of vitamin C has been sent into Wuhan.

Here is a report from a physician in China:

"We need to broadcast a message worldwide very quickly: Vitamin C (small or large dose) does no harm to people and is the one of the few, if not the only, agent that has a chance to prevent us from getting, and can treat, COVID-19 infection. When can we, medical doctors and scientists, put patients' lives first?" (Richard Z. Cheng, MD, PhD, International Vitamin C China Epidemic Medical Support Team Leader)

News media attacks on vitamin C are centered on false allegations of dangers with megadoses. This tactic lets the media ignore the truth that even LOW doses of vitamin C reduce symptoms and death rates. Do not let the media spin this issue. Advocates of vitamin C are medical doctors, not spin doctors. They are experienced, credentialed clinicians who have read the science, a small sample of which follows:

Even small supplemental amounts of vitamin C can keep severely ill patients from dying.
[Hunt C et al. *Int J Vitam Nutr Res* 1994;64:212-19.]

Infants with viral pneumonia treated with vitamin C had reduced mortality.
[Ren Shiguang et al. *Hebei Medicine* 1978;4:1-3]

Moderate doses of vitamin C shortened ICU stay by 97% in a subgroup of 1,766 patients
[Hemilä H, Chalker E. *Nutrients*. 2019 Mar 27;11:4.]

200 mg of vitamin C reduced duration of severe pneumonia in children. Oxygen saturation was improved in less than one day.
[Khan IM et al. *J Rawalpindi Med Coll (JPMC)*; 2014;18(1):55-57]

The *Orthomolecular Medicine News Service*, and its editorial board of nearly four dozen physicians, academics and health professionals (listed below) feel it is necessary to report on what the advertiser-supported, corporate-controlled commercial media refuses to acknowledge: ***even small amounts of vitamin C dramatically decrease severity of symptoms, and increase survival rates, among severely ill viral patients.*** Large doses work better. Intravenous large doses work better still.

OMNS has been relentlessly reporting on this for weeks.

The greatest danger with COVID-19 coronavirus is illness progression to SARS (Severe Acute Respiratory Syndrome) and pneumonia. Physicians have successfully used vitamin C against viral pneumonia since the 1940s. That's the point made in a 10-minute video that was abruptly removed from YouTube, supposedly for being a violation of their "community standards": <https://www.brighteon.com/646ad120-775a-4464-a0d1-609be7a0a9dc>

OMNS favors a community of people of all nations dedicated to immediately employing all existing, science-based measures to stop a dreaded disease for which there is no conventional cure. Vitamin C is available now. It is not new. And it is not "unproven." Vitamin C has been used as an antiviral since the 1930s. (1) It has been used in very high injected doses since the 1940s. (2) In the decades since, vitamin C has been used for influenza, SARS and viral pneumonia. (3)

"Vitamin C can truthfully be designated as the antitoxic and antiviral vitamin."
(Claus W. Jungeblut, M.D., Professor, Columbia University College of Physicians and Surgeons)

All OMNS releases are duly referenced to the research literature. Yet if you post what you are reading now on Facebook, it is likely to be blocked or labeled "false information." Since when is reviewing the medical literature "fake news"?

It is our editorial viewpoint that ***withholding vitamin C treatment information from the public withholds it from the patient.***

We accuse the media of negligence. They can correct this any time.

Until they do, we will do it for them.

References

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(2) <http://orthomolecular.org/resources/omns/v16n09.shtml> and <http://www.orthomolecular.org/resources/omns/v09n16.shtml> Frederick Robert Klenner's papers are listed and summarized in *Clinical Guide to the Use of Vitamin C* (ed. Lendon H. Smith, MD, Life Sciences Press, Tacoma, WA, 1988. This book is posted for free access at http://www.seanet.com/~alexs/ascorbate/198x/smith-lh-clinical_guide_1988.htm
(3) Cathcart RF. (1981) Vitamin C, titrating to bowel tolerance, anascorbemia, and acute induced scurvy. Med Hypotheses. 7:1359-76. <http://www.doctoryourself.com/titration.html>
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Additional Dr. Cathcart papers are posted at http://www.doctoryourself.com/biblio_cathcart.html

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