

# SPECIAL SERIES: HOW TO PREVENT, TREAT AND DEFEAT COVID-19 WITHOUT BEING VACCINATED

*“...There are 14 therapies that are in the world today that we can use to fight against the COVID virus.”*

*Honorable Minister Louis Farrakhan, The Criterion –July 4, 2020*



The Honorable Minister Louis Farrakhan

Dear Reader:

In reviewing *“The Criterion,”* we must remember that the Honorable Minister Louis Farrakhan leveled not one, but two counts of genocidal acts against the corporate-controlled U.S. Government. The first was the development of a so-called ‘vaccine’ for Covid-19. The second was the conscious and deliberate suppression of highly effective, safe and affordable treatments and therapies for the virus. One of the 14 therapies he was referring to in the excerpt above is a medicine called *Ivermectin*.

Covid-19 is a highly contagious disease that can kill a person under certain circumstances; primarily where the person has what health experts call “pre-conditions” or “co-morbidities.” In other words, health problems that can, in and of themselves, take a person’s life; health problems that have compromised the person’s immune system to the point that it cannot effectively defeat the virus. These conditions include diabetes, obesity, heart and respiratory problems, advanced age and kidney disease.

It is important to understand that Covid-19, in and of itself, is a treatable disease with an overall death rate of less than 1% of those infected. It does not legally qualify or morally justify the extreme intervention of vaccinating an entire population. The FDA is currently in violation of federal law by allowing these “vaccines” to be injected into the human population. Worse than being unnecessary, the “vaccines” being administered have already shown themselves to be harmful, and in thousands of cases, deadly.

The only reason for preventing the American public from access to safe and effective treatments is to protect the genocidal, highly profitable, vaccine program.

In this series, we will profile some of the major treatments for COVID-19 that have proven effective in the 18 months since the virus was made known to the public. We will provide information as to what they are, what they have been shown to do and, to the extent possible, where and how they can be obtained.

Today, we profile *Ivermectin*, an inexpensive, anti-parasitic drug that has been safely used in humans for decades (4 billion doses administered). ***It is on the World Health Organization’s list of essential medications and is already FDA approved.*** It stands out as a powerful weapon in the prevention and treatment of COVID-19 infection. It works both in the initial phase of the illness where an antiviral is needed; it also works in the dangerous “hyper-inflammatory phase” of the disease. The spike protein, which is the key SARS-CoV2 entry into the human cell is “trimeric”: it has three parts. Ivermectin blocks all three parts.

Mexico City, Mexico has a population of 22 million. When their cases spiked last December, the city’s Ministry of Health created an ivermectin-based home treatment kit. It was given to persons who tested positive for COVID from an antigen test and had at least mild symptoms. Beginning December 29, 2020, researchers tracked 200,000 people. There was a reduction in hospitalization between 52% and 76% for those who took ivermectin. Covid case data from John Hopkins University just 2 days ago shows the entire country of Mexico, with a population of 127.6 million people, has had 2.57 million cases with 2.03 million recoveries! That’s around 99%. The total number of deaths is 234,000, most of which were prior to January 31, 2021. Deaths in Mexico City dropped sharply only a few weeks after ivermectin treatments began. Government findings were corroborated by Dr. Juan Chamie-Quintero, senior analyst at Colombian University. He also conducted a study in Peru, where the government approved ivermectin as a treatment for the virus in May, 2020. Deaths plummeted by 59% in 30 days, and dropped 75% after 45 days in those over the age of 60.

In closing this introductory section, note these words from the American Journal of Therapeutics, after analyzing a number of controlled treatment trials:

***“the many examples of ivermectin distribution campaigns leading to rapid population-wide decreases in morbidity and mortality indicate that an oral agent effective in phases of COVID-19 has been identified.”***

Ava Muhammad

Student National Spokesperson for

The Honorable Minister Louis Farrakhan



Juan Jose Chamie

Juan Chamie Discusses COVID in India and Mexico  
May 28. Photo: Youtube

American Journal  
of Therapeutics

# 'Vaccine' Deaths & Serious Injuries

The Vaccine Adverse Events Reporting System (VAERS) contains 438,440 reports of suffering and deaths caused by the COVID-19 vaccine. Even with this extraordinary number, a Harvard study concluded that only ONE IN ONE HUNDRED negative medical reactions are ever reported.

In this column, and as a public service, The Final Call will present some of the data from the reports for all of those who are still considering taking this killer "vaccine."

Through July 7, 2021

## 9,048 Deaths

### 26,818

HOSPITALIZATIONS

### 56,970

URGENT CARE

### 7,823

LIFE THREATENING

### 2,152

ANAPHYLAXIS

### 2,486

BELL'S PALSY

### 3,324

HEART ATTACKS

### 985

MISCARRIAGES

### 19,105

SEVERE ALLERGIC REACTION

### 2,226

THROMBOCYTOPENIA/LOW PLATELET

### 7,463

DISABLED

### 80,269

OFFICE VISITS

TO BE CONTINUED...

**IMPORTANT:** If you or a loved one has suffered an adverse reaction to the COVID-19 "vaccine," contact your doctor immediately and then report it to the CDC's Vaccine Adverse Events Reporting System (VAERS):

<https://www.openvaers.com/covid-data>

# Treating Covid-19 patients with Ivermectin: An interview with Safiyya S. Shabazz, M.D.

by **Charlene Muhammad**  
National Correspondent  
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*Dr. Safiyya S. Shabazz is the owner and Medical Director of Fountain Medical Associates in Philadelphia. In May, 2020, during an online group chat for physicians, she learned that the anti-parasitic drug ivermectin was demonstrating effectiveness in treating Covid-19. She began using it at times in her treatment of patients. Initially, Dr. Shabazz noted, since most people recovered from the disease and illness on their own, she wasn't sure the ivermectin was actually making a difference. However, since it was safe and had the potential to keep her patients off ventilators, she continued to use it. In an interview on July 7, Dr. Shabazz shared her experience with ivermectin over the past year.*

**Charlene Muhammad (CM):** What have you experienced, to date, using Ivermectin in your practice?

**Dr. Safiyya Shabazz (SS):** I would offer it to patients and let them know that at the time just a single dose was recommended and I thought the medication was safe. It may or may not work. Otherwise, I just had the vitamins that I would offer people. I experienced amongst my patients no problems or side effects. It's true that most people will recover (from the virus), but it was sporadic at times. Starting in October, 2020, in my area, we started to experience this surge of cases that really took us through the end of February, 2021. During that period of time, I treated, along with nurse practitioner Valeria Muhammad, a couple of hundred (200) patients with ivermectin, and the experience was positive. No one complained of side effects. Most of my patients recovered without the lingering symptoms that you hear about. And since the beginning of the pandemic, even with just the vitamins, none of my patients passed away. We had a couple of hospitalizations. But overall, my experience has been very positive with the medication (ivermectin). I've had patients who were very thankful because they may have had several people in their household who had the infection but I was only caring for one of the people in the home; they felt badly that their relatives were not being treated and were not recovering as quickly. So, my personal experience has been positive, with the medication.

I've started to receive calls from all over the state of Pennsylvania, really mostly Caucasian people, who saw my name on a list of people who are willing to prescribe the medication, and they call from all over for it. I've used it less frequently for prevention. I think that it is an option, an alternative. I feel more confident that it can make a difference in treating people who actually have Covid or for after they've been exposed to prevent them from catching the infections. But yes. I've used it and I feel positively about it.

*Dr. Shabazz next spoke to the overt suppression of ivermectin that she has encountered*

**SS:** ... there are many doctors who refuse to prescribe it. It is prescription only. ... I have never in my life experienced

pharmacies refusing to fill medications. There are pharmacists who refuse to fill it. We were contacted by CVS Pharmacy and told that they had a corporate mandate that they will not fill the prescription, which I thought was outlandish considering there is no safety concern that I'm aware of. They fill (prescriptions for) narcotics every day that kill people. They know they kill people, and they'll fill those all day long, but they refuse to fill the ivermectin.



Dr. Safiyya S. Shabazz

And the reason I was given is, it does not work, which has never been a reason why a medication was refused. I've never had a pharmacy refuse to fill a medication that I've prescribed before. I've had pharmacies call back to make sure that I got the dosage right so I don't harm someone, but I have never had a pharmacy refuse any medication. It doesn't matter what I was prescribing,

**'I have never in my life experienced pharmacies refusing to fill medications. There are pharmacists who refuse to fill it. We were contacted by CVS Pharmacy and told that they had a corporate mandate that they will not fill the prescription, which I thought was outlandish considering there is no safety concern that I'm aware of. They fill (prescriptions for) narcotics every day that kill people. They know they kill people, and they'll fill those all day long, but they refuse to fill the ivermectin.'**

—Dr. Safiyya Shabazz

oxycodone, morphine, whatever, they'll fill it. But they have outright refused at many of the larger pharmacies, which I believe is a direct result of one, politicization, but also, I suspect there are financial interests in not building the evidence that would make it clear that this very inexpensive, readily available, safe medication should be part of the arsenal that is offered to people.

Like I said, every intervention is like a layer of swiss cheese. It's not completely foolproof, but if you can layer up several different interventions, together, then I believe you can make a difference, and it should be offered as part of the toolbox of options. My patients have done well. Very few of them have the long-haul syndrome so I'm going to continue doing it, unless I am unable to, which hopefully it doesn't come to that.

**CM:** Thank you. Are any of your colleagues using it as well, and having the same results?

**SS:** I work basically alone in that I have a private practice and my nurse practitioner, Valeria Muhammad. But because there's still a non-recommendation from the NIH (National Institutes of Health) or CDC (Centers for Disease Control) regarding it not being effective and shouldn't be used, I think that many people are more algorithm-based or they may say evidence-based, but there is evidence that it works. I don't know if the type of evidence that people are saying they would want to see (large randomized controlled trials) before they use it will ever be generated. It's a very inexpensive medication, and the focus really has been more on newer, likely much more expensive options, and I think that that is a big part of the pushback against its use. The risk is very low with using it. Even if it was marginally effective, I don't know why you would discourage people from using it unless there is a safety concern, and I'm not aware of any safety concerns.

**CM:** Thank you.

# Government and media hiding 'miracle drug' proven to help Covid-19 victims and may help vaccine victims

by Dr. Ridgely Abdul Mu'min Muhammad  
NEWS ANALYSIS

What if I told you that there is a drug to fight Covid-19 that is highly safe, widely available, has a low cost and has had extraordinary success on this particular virus? What if I told you that this drug, although first developed to fight other diseases, was touted as a possible "miracle drug" against Covid-19 back in April of 2020? What if I told you that this drug was on Minister Farrakhan's 7/4/20 "The Criterion" list of 14 therapies and treatments for Covid-19? What if I told you that its discoverers were awarded the Nobel Prize in medicine, and it is already included on the WHO's World's List of Essential Medicines? What if I told you that this drug has already been approved for humans by the FDA? Is this a modern repeat of the Tuskegee Experiment where we were not treated with known cures for a disease? What if I told you that not only this drug can help those attacked by the Covid-19 virus, but could be a lifeline for those who now regret taking these deadly "vaccines?" Wouldn't you be interested?

But governmental agencies and mass media are hiding it from the public. They are more interested in helping the drug companies get richer, not you getting better.

A soil-dwelling bacterium was discovered in the soil of Japan in 1974 called ivermectin which destroys roundworm parasites that cause river blindness in millions of people in tropical areas. Drugs produced from ivermectin were patented and made by Merck & Co, Inc, and its discoverer, Dr. William C. Campbell, was awarded the 2015 Nobel Prize in physiology and medicine.

Ivermectin is no longer patented by Merck and now 95% of this drug is being produced by other pharmaceutical companies. Now along comes Covid-19 and Merck is downplaying the effectiveness of this drug that is now out of patent, as they try to get emergency use authorization (EUA) for their new patented drug against Covid-19.

On the other hand, doctors who knew what ivermectin could do, began to "repurpose" it and use it on their Covid-19 patients with astonishing results. Then an April 3, 2020 article stated that, "A new study has shown that an anti-parasitic drug already available around the world can kill the virus within 48 hours. Scientists found that a single dose of the drug, Ivermectin, could stop the SARS-CoV-2 virus growing in cell culture."

On December 8, 2020, Dr. Pierre Kory testified to the Senate Homeland Security committee on "Focus on Early Treatment of COVID-19" that "Ivermectin is highly safe, widely available, and low cost." He further testified: "Nearly all studies are demonstrating the therapeutic potency and safety of ivermectin in preventing transmission and progression of illness in nearly all who take the drug"

As of May 16, 2021, 55 studies of patients in clinical trials have shown that ivermectin was effective in fighting Covid-19, 96% of the time in all of the trials and 100% in 36 of those trials. Yet the government still refused to endorse the drug. Why?

If this information about efficacy and safety of ivermectin ever got to the suffering and frightened public, those companies pandering their Covid-19 so-called vaccines under the EUA of the Food and Drug Administration would have a big problem. A criteria for continued authorization includes that there can be "... no adequate, approved, and available alternatives." The FDA is effectively blocking therapies to help Big Pharma sell newly patented drugs to make huge profits at the expense of the health and safety of the American people.

Dr. Deborah Birsx, White House Coronavirus Response Coordinator under Donald

Trump, admitted to CNN, "There were about 100,000 deaths that came from that original surge. All of the rest of them, in my mind, could have been mitigated or decreased substantially." Incredibly, this top physician and scientist was saying that 517,000 of the alleged 617,000 deaths attributed to the "virus" were unnecessary (and maybe criminal)! Was she considering that ivermectin could have reduced those extra deaths?



Dr. Pierre Kory, associate professor of medicine at St. Luke's Aurora Medical Center, testifies during the Senate Homeland Security and Governmental Affairs Committee hearing titled "Early Outpatient Treatment: An Essential Part of a COVID-19 Solution, Part II," in Dirksen Building on Dec. 8, 2020. Photo: Tom Williams/CQ Roll Call via AP Images

The effectiveness of ivermectin on Covid-19 is well documented among researchers and practicing doctors. The only remaining research question was what is the mechanism by which this "miracle drug" does its work? Then on June 9, 2021 comes a bombshell: "Breakthrough: Ivermectin inhibits the SARS-CoV-2 spike protein from binding to ACE2 receptors in human tissue." The article goes on to describe that ivermectin effectively inhibits viral attachment and replication. It can target the spike protein at the point where it enters the cell and blocks it from attaching to the human cell membrane.

To understand the importance of ivermectin's ability to block the SARS-Cov-2 spike protein from attaching to the human cell, let's us bring to the witness stand an article published on April 30, 2021, in "Circulation Research", which shows how the spike protein damages the vascular system and not just the lungs:

"A lot of people think of it as a respiratory disease, but it's really a vascular disease," says Assistant Research Professor Uri Manor, who is co-senior author of the study. "That could explain why some people have strokes, and why some people have issues in other parts of the body. The commonality between them is that they all have vascular underpinnings.

This article further states that researchers showed that the spike protein attached itself to the cells and disrupted the molecular signals that control the ability of the cell to generate energy causing cells to starve to death. Previous studies have shown a similar effect when cells were exposed to the SARS-CoV-2 virus, but this is the first study to show that the damage occurs when cells are exposed to the "spike protein on its own."

In a telephone interview with Dr. Velva Boyles, a physician-scientist trained in microbiology and gene regulation, she described how ivermectin may be able to protect a person against spike proteins, even those produced by the so-called "vaccines": "If the virus spike protein never attaches, then the virus cannot enter the cell. And the vaccine—if they get ivermectin and this protein tries to attach to the brain cell or the heart cell or the vessel, it *should* (I don't have the data), based upon its current record,

"Ivermectin should be a protecting agent from the attachment of the spike protein to other parts of the body. **The evidence accumulated over a half century with ivermectin shows its protective ability against infections from viral particles.**"

So since the spike protein has now been shown to be the most damaging part of the Covid-19 virus, why would vaccines be produced to make your body produce spike proteins? And since it has recently been discovered that ivermectin specifically attacks the spike protein, your government should be making it available to protect people against Covid-19. The government should promote Ivermectin to give hope to those who took the shots and now have "buyer's remorse" and feel trapped into suffering from adverse effects of those shots.

What will these "merchants of death" will come up with next? We must find a way to get ivermectin to the people to effectively treat this pestilence. More than ever, we need to come together and make our plans to separate from this unraveling country before the "merchants of death" kill even more of us. The Honorable Minister Louis Farrakhan has warned us, "Separation or Death".



Dr. Velva Boles



Ambassador Cuesta



Bill Martinez



Obi Egbuna Jr.



Reverend Joan Campbell

# Cuba keeps fighting Covid-19 and unjust U.S. embargo

A year ago, the Honorable Minister Louis Farrakhan called for an end to the unjust U.S. embargo against Cuba and urged the United States to look into and accept the island nation's effective treatments and potential answers to the Covid-19 crisis. But after over 606,00 U.S. deaths, the embargo remains in place despite global condemnation and Cuba's continued work to stem the coronavirus pandemic.

"We want what Cuba is developing against Covid-19. We want alpha interferon to be [available] if that is what is good against Covid. ... We are looking into other therapies, but we definitely will not accept your (U.S.-made) vaccine," said Minister Farrakhan, speaking July 4, 2020, from his home in Michigan, where he delivered a major and divinely inspired message, "The Criterion."

Ambassador Pedro L. Pedrosa Cuesta, Cuba's permanent representative to United Nations, in a virtual July 7 press conference said Min. Farrakhan's call for ending the U.S. embargo was quite relevant and support for ending the embargo is growing in the United States and internationally. The Cuban diplomat denounced U.S. and Israel's continued support for the embargo. Last month, for the 29th consecutive year, 184 countries voted in favor of a UN resolution to end the economic, commercial and financial embargo imposed on Cuba by the U.S. America and Israel voted to keep the blockade.

The courageous people of Cuba are fighting two viruses, Covid-19 and U.S.-imposed sanctions, but will continue to fight America's cruel, criminal and genocidal policy, vowed Amb. Cuesta. He provided updates on Cuba's arsenal of five homegrown Covid-19 vaccines under devel-

opment, Soberana, Soberana 02, Soberana Plus, Abdala and Mambisa. Soberana roughly translates in English as sovereignty. According to Amb. Cuesta: Abdala has been 92.28 percent effective against Covid-19 with three doses. Soberana 02 and Abdala are at stage 3 of clinical trials. Soberana Plus is now being used in clinical trials and, through July 4, 2021, more than 6 million doses had been administered. Soberana Plus is the only vaccine in the world developed to improve the immune system of people who have been sick, said Amb. Cuesta.

Cuba is also conducting an intervention study and other clinical trials, including one with children 3 years and older, to demonstrate the efficacy of its vaccines. No safety steps have been bypassed and all protocols have been respected and fulfilled, stressed Amb. Cuesta. Cuba has also signed agreements with several countries who are awaiting the vaccines. Trials are being conducted in Venezuela, Iran, and parts of the Caribbean, explained Amb. Cuesta. Some nations in Latin America and Mexico have also expressed interest, he said.

During the pandemic, between April and December 2020, the blockade caused Cuba to lose over \$9 billion, dealing a blow to infrastructure, renewable energy upgrades, financial stability, quality of life, and confidence of foreign investors, shared Ambassador Cuesta. The embargo has caused a shortage of essential consumer products, among them supplies for food preservation and drug manufacturing. Cuba must now pay 50 percent to 65 percent more for items over normal prices, the ambassador continued.

Despite these obstacles and limitations, Cuba has been recognized internationally and remains committed to providing and sharing its medical achievements with other countries,

including the U.S., pledged Amb. Cuesta.

Cuba offered to help to battle devastating conditions after Hurricane Katrina pummeled the state of Louisiana and New Orleans in August 2005, but the U.S. rejected the help, he noted.

Cuba has sent 57 Medical Brigades to support the fight against the pandemic in 40 countries and territories, continued Amb. Cuesta.

One way to advance the movement to end the U.S. embargo is to highlight the work of students who have graduated from the Latin American School of Medicine in Cuba, he argued. In an award-winning Final Call article, "We survived, now it's time to thrive: Perseverance and passion to become doctors in Cuba," published last year, Contributing Writer J.S. Adams wrote about the seven year-long process for Drs. Maryam and Ruqayyah Farrakhan. They are the latest among youth in the Nation of Islam to take advantage of the opportunity to receive free medical training in by Cuba. The training is open to Black, Latino and other students who commit to working in their underserved communities upon graduation. Dr. Maryam Farrakhan and Dr. Ruqayyah Farrakhan are granddaughters of Min. Farrakhan and graduated from the medical school.

The virtual press conference was organized by Obi Egbuna, Jr., of the Get Out of Cuba's Way Campaign and external relations officer for the Zimbabwe Cuba Friendship Association, and co-coordinated by Gail Walker, executive director of IFCO/Pastors for Peace and co-chair of the National Network on Cuba, and Bill Martinez of Martinez ATRS Consulting. Mr. Martinez moderated media questions with Marguerite Horberg, CEO of Hothouse, a cultural center in Chicago, which held a benefit concert for Cuba last year.

Ms. Walker shared joy of overwhelming support for ending the Cuba embargo expressed during a UN General Assembly vote June 23 but expressed deep sadness at the Biden administration's failure to join the anti-boycott nations. "Cuba reports that one of the vaccines, Abdala has a 92.28 percent efficacy rate. Ironically, while Cuba has managed to produce effective treatments for Covid, the small island nation has a shortage of syringes to help get shots in the arms of the Cuban population," said Ms. Walker.

A Syringes for Cuba campaign raised \$400,000 to purchase four million syringes and is raising an additional \$100,000 to purchase two million more, she said.

Rev. Joan Brown Campbell, former general secretary of the National Council of Churches of Christ in the USA, urged Americans to get to know Cuba, its gifts and talents. "Cuba is here, and we are here to be with them and to walk with this. And to walk with people there so that we can become reconnected in the strength that is failing at some times because the United States is unwilling to let people come to Cuba," said Rev. Campbell.

Mr. Egbuna ended the press conference with a scathing condemnation of Israel's and the United States' wicked agenda and announced next steps in the fight against the embargo. "Israel is no stranger to shaming themselves in the United Nations," he said. "When they stood up in the United Nation solo and voted against Tunisia's right to self-determination, they had no shame. When they stood up and were the only nation to oppose Algeria's right to self-determination, they had no shame. And when they took it upon themselves to support apartheid in what's called South Africa ... their (Israel's) support of apartheid in Zambia and Zimbabwe

and Mozambique and Angola, and in Namibia, who were colonized by the Germans, shows that Israel is consistent," argued Mr. Egbuna.

"... For those in the U.S.-born African community who have propagated the notion that the last four and a half years for our people was worse than our first 396, Joe Biden is here to challenge that narrative," said Mr. Egbuna. "Those of you who within his first 90 days, you gave him a passing grade, you were premature at best." President Biden supports blockading Cuba, renewing sanctions on Zimbabwe, which he co-sponsored, favors sanctions on Venezuela, and is planning regime change in Eritrea, the activist added.

Cuba must have a permanent press corps in the Diaspora, and plans are underway for a meeting with Prensa Latina, Cuba's official state news agency, by the end of 2021 to make that happen, said Mr. Egbuna.

The campaign first worked on pushing for the Henry Reed Medical Brigade to come to the United States. Now, it's calling for the creation of a resource pool to support the 4,000 Cuban medical personnel strategically positioned all over the African continent, said Mr. Egbuna.

"There is an inextricable link between Cuba and Africa," Amb. Cuesta said. "Wherever Africans are, we are seeing each other as sisters and brothers. If they are in Africa or in the U.S., there are a lot of reasons for us to continue engaging in our issues of interest for Africans and Cuba."

And, as the Minister said in his Criterion message: "Cuba is ours. The Blacks of Cuba (are) our direct relationship. The Brown in Cuba, the mixture of the Black and the Spanish, that's our family."

—Charlene Muhammad,  
National Correspondent