

## neverhadaboss.com updates on the insane world of money and power Here's What's Happening To Our Good Docs

For those of you who don't know about it, here's a story. The US has some renowned doctors, unaffiliated with Pharma, who spend their whole lives caring for patients, and were willing to risk their own lives at the beginning of the coronavirus epidemic when doctors and nurses seemed to be at great risk. One of them is ICU doctor, Paul Marik.

Marik is a standout US ICU doctor. Covid patients under his care purportedly did twice as well as the average for ICU staff. As he became aware that, by some measures, excess mortality had risen by 5000%, all-cause mortality by 1100%, myocarditis in young men, up 2,800%, along with strange rumblings of long, rubbery blood lesions, synthetic fibers that do not dissolve, clotting strings, caused by mRNA, being pulled from patient tissue, Marik's 'vaccine' skepticism solidified, becoming a focus for him.

Skeptical of prescribed treatments, remdesivir (renal complications), ventilators (angels of death), and put-off by a 20% bonus to hospitals making such prescriptions, Marik kept to established off-patent drugs such as ivermectin/hydroxy-chloroquine—with great success. For his work at saving coronavirus patients, he was first disallowed the use of off-patent treatments, including Vitamin C (hold that thought), and having lost hospital privileges, forced to watch his patients die. When Marik left his ICU, rates of death in Covid patients more than doubled—from 9% to 21%. Marik, earlier regarded as a savior, was now accused by peers of misinformation and 'domestic terrorism'.

Why is it interesting that they forbade Marik the use of 'utterly common', ascorbic acid—Vitamin C? Earlier, dealing with septic shock patients (sepsis), Marik became aware that past a certain point, the prognosis was certain death. Then he chanced upon a European paper's finding that Vitamin C, the most powerful anti-oxide and anti-inflammatory, if used early, could play a role in saving these patients. As a last-ditch effort, he connected each of his patients to a Vitamin C bag and went home for the night.

Morning brought astonishment. Some patients were up, walking about, and none were in danger of dying. When he proposed an immediate study with a control group, his nurses said 'flat-out-no', because patients left out of the protocol—would surely die.

As result of the therapy, Marik became a hero, credited with a cure for 'sepsis'. Globally, 50 million experience sepsis each year: 10 million are Americans of whom 250,000 die. With Marik's protocol effective for most patients, the future looked good.

Then came the health agencies, ready to do what they were set up to do-conduct

tests on the new treatment—'so as to save lives'. But these are agencies partially funded by Pharma. From whom our 'naive doc' expected justice from the 'findings'.

Why did Marik's protocol work? Along the evolutionary pathway, 2 species lost the ability to make Vitamin C, guinea pigs and humans. Every other species, when confronted with 'shock' makes Vitamin C. Could this inability to manufacture 'ascorbic acid' be the cause behind 'septic shock' infection? Could Vitamin C save millions of lives?

While Marik was busy saving lives, the health regulators conducted their tests, at the conclusion of which, Marik was invited to Brussels to hear 'findings', and respond to them. There he met Dr. Pierre Kory, another 'front-line' doctor for the coronavirus epidemic. The conference began with an admonition: that mRNA is an emotional subject and for everyone to keep calm during the proceedings—a hint for what was coming.

Is it any surprise that 'health agency' studies found Vitamin C to cause no difference in the rate of survival in patients studied? Since so many afflicted with 'septic shock' do not survive, if that study was structured to fail, would that fall under 'murder for profit'?

Marik was not given the results of the study until 12 hours before the conference began. Here's how the study was purportedly structured to fail. Patients in 'sepsis' have a narrow opportunity timeline to be helped. Think of it as being bitten by a venomous snake, and when you get to the hospital, you are informed of a new protocol where they wait 12/18 hours before giving you the anti-venom. That's what they did with this study: it was 12/18 hours after diagnosis until the 1st administering of the Vitamin C.

Would delaying treatment for a cobra bite, with the patient dead after 18 hours—conclude that anti-venom does not work? Once the Brussels audience quieted, the spokesperson assured them that further studies would be conducted—and they were. There have been 5 double-blind studies since Brussels, using the same time lapse of 12/18 hours. Were they set up to fail? And Paul Marik was not allowed to communicate with any participating in the studies because he might alter the results—'telepathically'.

What do we draw from this? Neurotics build houses in the sky—psychotics live in them? Any who would 'murder for profit' (and we know quite a few), are psychotic. ICAN attorneys (the HighWire), have just won another lawsuit against Pharma. After 'stonewalling' the sharing of 'vaccine safety' data with the American public (since May of 2021), agencies now had to release data findings: 7.7% of 'vaccine' recipients needed multiple doctor visits for 'adverse reactions'—translating to 20 million Americans. How does that jive with the propaganda that 'adverse reactions' were few—and mild?

They cite 'privacy concerns'—which is ludicrous: 'V/Safe' data is 'just check the box', not personal information, available a year and 1/2 ago, but not released to the public. Instead, they pushed through 'vaccines for toddlers' knowing about serious concerns. The health agencies refuse to release autopsy reports of deaths linked to mRNA, again to protect individual privacy. These 'kings of redact' need only black-out the names.

Positioning underreported VAERS numbers next to a Harvard study that finds VAERS to be underreported by 50 /100 times, suggests 105,000 deaths from 'mRNA'.

What to take from this: inexpensive treatment needed by the 'vaccine injured' is being held back. And, the information those patients need, they will not get from their doctors. And, if, for any reason, you need to be hospitalized—get a 'patient advocate'.

A world in which Biden is sane and Putin is a madman, with Zelensky beyond reproach, while Joe normalizes nuclear war—that's some fodder for a next article.

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