Hydroxychloroquine has been saving lives all around the world for 6 months with success rates above 99%, and the Zelenko Protocol has been adopted by entire nation-states, for treatment of COVID-19. Countries that adopted widespread early treatment with HCQ, on average have a 74.8% lower death rate than countries like Mexico and the U.S. that have limited early treatment with HCQ. https://www.covid-19forum.org/index.php?topic=243.0

Even Asia's largest slum met with amazing HCQ success, as treatment and as prophylaxis, with a population density 6 times greater than New York City and a COVID death rate at 1/20 that of the U.S. <a href="https://www.covid-19forum.org/index.php?topic=102.0">https://www.covid-19forum.org/index.php?topic=102.0</a>

So a drug that has a 65-year history of safety, that is sold over-the-counter in many countries (as it was in France for over 50 years) and is taken daily over the course of many years by millions of Americans for Lupus and rheumatoid arthritis in the identical dosage that the Zelenko Protocol prescribes over just 5 days - that the AAPS suggests is safer than aspirin, Tylenol or Benadryl, that enjoys a 99+% success rate in treating even elderly and high-risk patients in the EARLY OUTpatient setting when administered immediately upon presentation of symptoms or clinical suspicion of COVID-19, for which the entire 5-day Zelenko Protocol uses \$14 worth of pills - gets the Emergency Use Authorization taken away from it.

So that a very marginally successful experimental new drug that is delivered **intravenously** in the hospital *IN*patient setting - that already failed in treatment for ebola, that has been implicated in damaging the liver and kidneys, that costs around \$3,200 per course of treatment, for which the American taxpayers have already shelled out tens millions of dollars paying the manufacturer to develop it who nonetheless gets to set the price and make all the profits from it, **that studies by Fauci's own NIH concluded on its efficacy that the "difference in mortality was not statistically significant"** - could receive the Emergency Use Authorization instead of hydroxychloroquine.

So can Fauci's "go home and isolate" recommendation for COVID-19 be seen for what it is, since it has been tantamount to a death sentence for so many elderly and high-risk patients that took Fauci's advice and wound up being hospitalized after just days without treatment and then plunged into a cytokine storm and put on \$3,000 Remdesivir as they lay there dying, rather than having immediately sought and received OUTpatient treatment upon presentation of symptoms or even clinical suspicion of COVID-19 with the \$14 Zelenko Protocol of HCQ+zinc+Azithromycin toward a 99+% chance of survival? Would a doctor tell a patient with a cancerous tumor to "go home and isolate" until it got big enough to block an airway?

https://www.covid-19forum.org/index.php?topic=114.0

Do terms like wrongful death, negligent homicide and manslaughter come to mind? Considering the overwhelming majority of deaths were among the sick, elderly and the least able among us, perhaps even Pol Pot styled genocide comes to mind since he exterminated Cambodian citizens simply for being old, sick or disabled. So what about Cuomo's New York City policies?

Indeed so conspicuous and egregious has this injustice against the American people been that some refer to this madness as "crimes against humanity" and "mass murder".

https://www.covid-19forum.org/index.php?topic=18.0

More from Yale professor of epidemiology Dr. Harvey Risch:

https://www.covid-19forum.org/index.php?topic=254.0

https://www.covid-19forum.org/index.php?topic=169.0

https://www.covid-19forum.org/index.php?topic=52.0