

My name is Carol Hill. I am a retired physician.

I am concerned that Dr. Dobbs is using misleading communication to dissuade the use of ivermectin (an FDA approved drug) for the treatment of Covid-19 in order to promote his preferred use of Covid vaccines—any Covid vaccine (which is not FDA approved). Although there are 3 different vaccines available, there is no report to identify which is optimal for any particular patient. All of the available vaccines have limitations in that they do not prevent the patient from getting Covid-19 nor do they prevent an infected patient from spreading the virus. Whatever the reason for his preference, because of his scorn for the use of Ivermectin, physicians and pharmacies alike are reluctant to prescribe or distribute it -- even fearing loss of licensure -- to the possible detriment of some patients.

On August 20, 2021, Dr. Dobbs was seen on 16 WAPT Jackson News, "Mississippi Health Officer Dr. Thomas Dobbs is warning against using medicine used to treat animals as a prevention for COVID-19". He warned that "ivermectin at high doses can be toxic and even deadly" He discusses how "normally when we've used ivermectin for like intestinal parasites or for scabies, it's a one-time dose. Right. One day. That's it. And you are done. This is not every day sort of medicine sort of thing. There are potential toxicities. Some people are trying to use it as a preventative which I think is really crazy."

Don't use animal medicine as a COVID-19 preventative - YouTube

An article published September 3, 2021, "Dr. Thomas Dobbs said Ivermectin, a drug that some tout as a cure for COVID-19, has developed a "weird cult following," despite the fact that the science shows it doesn't work."

Dobbs: Ivermectin has developed a 'weird cult following' ([wdam.com](https://www.wdam.com))

The problem with Dr. Dobb's statements is that they are not consistent with government publications:

- "A 5-day course of ivermectin was found to be safe and effective in treating adult patients with mild COVID-19. Larger trials will be needed to confirm these preliminary findings." A five-day course of ivermectin for the treatment of COVID-19 may reduce the duration of illness - PubMed ([nih.gov](https://pubmed.ncbi.nlm.nih.gov))
- Updated July 8, 2021, three drugs are approved or under evaluation for treatment of Covid-19. They are Remdesivir, Ivermectin, and Nitazoxanide. <https://www.covid19treatmentguidelines.nih.gov/tables/table-2e/>
- "In 28 days of follow-up, significant protection of ivermectin preventing the infection from SARS-CoV-2 was observed: 1.8% compared to those who did not take it (6.6%; p-value = 0.006), with a risk reduction of 74% (HR 0.26, 95% CI [0.10,0.71]). Conclusions: These results suggest that compassionate use of weekly ivermectin could be an option as a preventive method in healthcare workers and as an adjunct to immunizations, while further well-designed randomized controlled trials are developed to facilitate scientific consensus." <https://pubmed.ncbi.nlm.nih.gov/34513523/>

Multiple reports from other countries that have chosen to avoid mass vaccination either because of financial limitations or vaccine side effects, have shown Ivermectin to be efficacious in prevention and treatment of Covid-19.

- “A 97% decline in Delhi cases with Ivermectin is decisive - period.” Ivermectin obliterates 97 percent of Delhi cases | National | thedesertreview.com
- “The chairman of the Tokyo Medical Association, Haruo Ozaki, held a press conference this week announcing that the anti- parasite medicine Ivermectin seems to be effective at stopping COVID-19 and publicly recommending that all doctors in Japan immediately begin using Ivermectin to treat COVID.” <https://dreddymd.com/2021/08/29/japanese-medical-association-tells-doctors-to-prescribe-ivermectin-for-covid/>

Dr. Dobbs advocates for the Covid-19 vaccines. On 7/28/2021, Dr Dobbs said, "Too many Mississippians are hesitant about the vaccine or still in the “wait and see” mode. Some hesitancy is based on normal caution, but too much is driven by outright nonsense. Falsehoods and bizarre conspiracy theories have squeezed out the truth in many circumstances. Another factor is the strong sense of individual freedom in Mississippi, and we respect that."

“The truth is – the vaccines, especially Pfizer and Moderna, are extremely safe and highly effective.”

“Pfizer and Moderna are more effective but require two doses. Although rare, some serious side effects such as cerebral blood clots and Guillain-Barre syndrome are associated with Johnson and Johnson but not Pfizer or Moderna.”

"If you are fully vaccinated against coronavirus, how likely are you to get coronavirus? If you should get it, would it be a milder case?"

Dr. Dobbs implies here that if vaccinated, a patient has a low chance of getting infected. The facts seem to show just the opposite:

“At the country-level, there appears to be no discernable relationship between percentage of population fully vaccinated and new COVID-19 cases in the last 7 days (Fig. 1). In fact, the trend line suggests a marginally positive association such that countries with higher percentage of population fully vaccinated have higher COVID-19 cases per 1 million people. Notably, Israel with over 60% of their population fully vaccinated had the highest COVID-19 cases per 1 million people in the last 7 days. The lack of a meaningful association between percentage population fully vaccinated and new COVID-19 cases is further exemplified, for instance, by comparison of Iceland and Portugal. Both countries have over 75% of their population fully vaccinated and have more COVID-19 cases per 1 million people than countries such as Vietnam and South Africa that have around 10% of their population fully vaccinated.”

Increases in COVID-19 are unrelated to levels of vaccination across 68 countries and 2947 counties in the United States | Springer Link.

He then goes on to minimize the VAERS:

"The Vaccine Adverse Events Reporting System is used to see if we see something from a vaccine that is more common than expected. All of the things reported to VAERS are not from the vaccine. In fact, only a minuscule amount are. Of course, people have medical issues randomly at time periods after vaccination. Using this system, we have been able to find the very rare occurrence of cerebral blood clots and Guillain-Barre from Johnson and Johnson."

A conversation with Dr. Dobbs on COVID-19, vaccinations | The Northside Sun
Dr. Dobbs statement that "things reported to VAERS" are not from the vaccine is just not substantiated. As seen in the most recent report, deaths reportedly due to vaccines is significantly higher in the past year than in all previous years since the founding of the system in 1990. To say that only a miniscule amount of the issues is due to the Covid vaccines appears completely unfounded.

The statement, "Of all the post-vaccine deaths investigated in Mississippi, zero were caused by the vaccine" seems ludicrous since there are a reported 17,619 deaths and studies have shown that VAERS has only 1 - 10% of actual cases reported. Are we to believe that NONE of them occurred in Mississippi?

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

Surely, we aren't to believe that those who submitted the reports of deaths, hospitalizations, urgent care and doctor office visits, anaphylaxis and Bell's palsy were all just mistaken as seen in the Covid Vaccine Data report.

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

Recently Senator Ron Johnson held a senate hearing regarding the vaccines and the silencing of any reports of adverse events caused by them. I would urge you to watch Senator Johnson's opening statement as well as the subsequent testimonies. He is not a doctor; he is an accountant and a businessman, but his understanding of the vaccines and the government overreach as well as the complete silencing of facts is impressive.

The information is all hiding in plain sight. Why has Dr. Dobbs chosen to ignore it?

<https://rumble.com/vokrf7-sen.-johnson-expert-panel-on-federal-vaccine-mandates.html>

What will become of those who are injured? "As the Biden administration puts the final touches on an emergency COVID-19 vaccine mandate for companies with 100 or more employees, a crucial piece seems to be missing for the unlucky few who experience serious side effects: meaningful legal recourse." 'Few' is a relative term unless it happens to you or your loved one.

COVID vaccine injury claims mount, but recourse is lacking for those harmed | Reuters

One has to wonder what is the motivation to minimize the adverse effects of the vaccines while overstating the adverse effects of the well-established ivermectin.

It is understood that the talking points are parroted from federal government officials.

But they have been wrong throughout this pandemic (don't wear a mask as they do no good; 14 days to slow the spread; wear a mask; wear two masks; the virus was not produced in the Wuhan lab, etc.) With the plethora of information that contradicts the

official stance on the vaccines, one is led to question why the government officials have been so steadfast in their support. Perhaps we find an answer if we look at history. The following article published in January, 2005, states, "Patients who took part in clinical trials at the US National Institutes of Health (NIH) had no idea that scientists at the institutes received \$8.9m

(£4.8m; €6.8m) in royalty payments and might benefit financially for the use of their discoveries by pharmaceutical companies and device makers, reports from Associated Press allege. This information was not made public until the press agency obtained the information after filing a request under the Freedom of Information Act."

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC545012/>

One would expect a state health officer like Dr. Dobbs to review all of the data and draw his own conclusions--or at least express that there are alternative opinions since we are dealing with a totally unknown virus and a completely new type of vaccine.

To say "mRNA vaccine science is not new or worrisome. Scientists have been developing these types of vaccines for over 10 years." leaves out the information that one of the doctors who was intimately involved in development of the technology which led to the mRNA vaccines has called for an immediate halt to the vaccine programs.

"Dr. Robert Malone, M.D., M.S., a distinguished physician who discovered RNA transfection and invented mRNA vaccines, was on Steve Bannon's War Room Wednesday with some alarming news-- new data indicates that people who have taken the Pfizer and Moderna vaccines are at greater risk of getting Covid than someone who is not vaccinated."

"Dr. Malone has warned of this risk for several months. What are we to do? Malone says that instead of relying on the flawed vaccines, Doctors should use drugs for treating Covid that have proved effective, such as Ivermectin (more about that following the video), is neutralizing Covid" Inventor of mRNA Vaccine: Some Covid Vaccines Make the Virus More Dangerous (thegatewaypundit.com)

Again, the question is, 'why has Dr Dobbs chosen to relay the available information in the way that he has?'

I don't know. But it is disingenuous and with the billions of dollars involved, one has to consider that the motivations might be more than Mississippi health.

• <https://www.cnn.com/2021/11/02/pfizer-raises-covid-vaccine-sales-forecast-to-36-billion-.html>

• <https://www.cnn.com/2021/05/21/business/covid-vaccine-billionaires/index.html>

On August 24, 2021, Dr. Bechara Choucair, the White House Vaccination Coordinator, spent the day in Jackson, MS, talking to public health officials. "He said the federal government plans to continue working with the state..."

White House Vaccination Coordinator visits Jackson to talk with public health leaders (msn.com)

How is that “work” occurring? Have Mississippi health officials succumbed to federal financial coercion at the expense of Mississippi health choices? Certainly, that appears to be the method being used against federal contractors.

We need answers. Soon. Each day more workers are coerced and threatened to take the Covid-19 vaccine. Now it is our children who are targeted.

↔ Don't use animal medicine as a COVID-19 preventative - YouTube

↔ Dobbs: Ivermectin has developed a ‘weird cult following’ (wdam.com)

↔ A five-day course of ivermectin for the treatment of COVID-19 may reduce the duration of illness - PubMed (nih.gov)

↔ <https://www.covid19treatmentguidelines.nih.gov/tables/table-2e/>

↔ <https://pubmed.ncbi.nlm.nih.gov/34513523/>

↔ Ivermectin obliterates 97 percent of Delhi cases | National | thedesertreview.com

↔ <https://dreddymd.com/2021/08/29/japanese-medical-association-tells-doctors-to-prescribe-ivermectin-for-covid/>

↔ Increases in COVID-19 are unrelated to levels of vaccination across 68 countries and 2947 counties in the United States | SpringerLink

↔ A conversation with Dr. Dobbs on COVID-19, vaccinations | The Northside Sun

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