

Dear Reader: Thank you very much for downloading this free book about how the Corona Virus could be beaten by a number of pharmaceuticals. This is one of a number of books I wrote on the subject.. I finished the book titled Remdesivir: A Ray of Hope at address: <https://letsGOPublish.com/covid/remdes.pdf> in June 2020. I hope you enjoy the book as it should fill in some of the gaps from the nightmare we all faced back then. Remdesivir never really caught on like Ivermectin.

**Most of my books had previously been published on Amazon.**

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# REMDESIVIR

## A Ray of Hope!

Brian W. Kelly



# REMDESIVIR: A Ray of Hope!

Gilead's Remdesivir offered a ton of hope for Americans and those across the world.

My brother Joseph has a great saying when nobody is listening to his suggestions. After a short while, he raises his hand and says, "Talk to the Hand." He goes into a disinterested mode and often gets a positive rise out of his adversary. I wish my brother were an American official right now. He was once a top manager in the VA and he understands people. Unfortunately, he learned in his time on the job that many of our adversaries have no shame.

So what to do? In this book we tell you about how to ignore any negative pleadings and instead stay positive while following the guidelines with clinical trials. Think about how nice it will be when the yoke upon America and its economy is lifted. Read this book to get a good perspective on what is happening and how we will be successful.



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**BRIAN W. KELLY**

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Editor, Brian P. Kelly  
Author Brian W. Kelly

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# *Dedication*

*I dedicate this book to all of the great health care workers and first responders. I am talking about the great heroes from doctors, nurses, lab technicians, bus drivers, truck drivers, cafeteria workers and you know who else. God bless you and thank you for your great assistance during the problem. We all appreciate your great work and your bravery in fighting for a good life.*

*Thank You All!*





# Acknowledgments

*I appreciate all the help that I have received in putting this book together as well as all of my other 300 plus other published books.*

*My printed acknowledgments had become so large that book readers "complained" about going through too many pages to get to page one of the text.*

*And, so to permit me more flexibility, I put my acknowledgment list online, and it continues to grow. Believe it or not, it once cost about a dollar more to print each book.*

*Thank you and God bless you all for your help.*

*Please check out [www.letsGOPublish.com](http://www.letsGOPublish.com) to read the latest version of my heartfelt acknowledgments updated for this book. FYI, Wily Ky Eyely loves this book and recommends it to all.*

*Click the bottom of the Main menu on the web site!*

*Thank you all!*



# Preface:

Rarely does a book title explain exactly what a book is about. This book is the exception. This book does not explain in detail the rationale, but it offers some great perspectives from experts in the field.

The essence of this book is the expert's recommendation for the best way to restart the economy.

## **Why did Brian W. Kelly write this book?**

Brian W. Kelly wrote this book because he cares about the United States and the other countries affected by what is happening today in the US. I am publishing this book because I care.

I hope you enjoy this book and I hope that it inspires you to take the individual actions necessary to help yourself during this crisis. I am convinced that if you follow the guidance we can all emerge better than ever.

Government should be a helpful tool in solving this deep moral and potentially existential dilemma for our country. Don't always believe everything you hear but stay tuned in as the next words may be the solution.

I wish you the best.

Brian P. Kelly, Publisher  
Wilkes-Barre, Pennsylvania



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# About the Author



Brian W. Kelly retired as an Assistant Professor in the Business Information Technology (BIT) program at Marywood University, where he also served as the IBM i and Midrange Systems Technical Advisor to the IT Faculty. Kelly designed, developed, and taught many college and professional courses. He continues as a contributing technical editor to a number of IT industry magazines, including "The Four Hundred" and "Four Hundred Guru," published by IT Jungle.

Kelly is a former IBM Senior Systems Engineer and IBM Mid Atlantic Area Specialist. His specialty was designing applications for customers as well as implementing advanced IBM operating systems and software facilities on their machines.

He has an active information technology consultancy. He is the author of 225 books and numerous technical articles. Kelly has been a frequent speaker at COMMON, IBM conferences, and other technical conferences.

Brian was a candidate for US Congress from Pennsylvania in 2010 and he brings a lot of experience to his writing endeavors.

Brian Kelly knows that the Pandemic crisis can be solved in time when the right therapeutic is adopted and a vaccine is tested as the solution. Hopefully in the short term officials will be prompted to open up the country.





# Chapter 1 Remdesivir: A Ray of Hope!



VP Pence at Briefing

## Gilead's Remdesivir

Gilead has initiated two Phase 3 clinical studies to evaluate the safety and efficacy of remdesivir in adults diagnosed with COVID-19 following the U.S. Food and Drug Administration's (FDA) rapid review and acceptance of Gilead's investigational new drug (IND) filing. These randomized, open-label, multicenter studies began enrolling patients in March 2020 and will enroll a total of approximately 1,000 patients in

the initial phase of the studies, in countries with high prevalence of COVID-19.

Some results are in but are inconclusive at this point. Both Hydrochloroquine and Remdesivir are promising.

On April 16, President Trump addressed the nation at 6:00 PM to unveil the nation's new plan to reopen the country. I think it is complicated but with the Executive Branch working hard to make it happen, I'd say it has a good chance. I have my one citizen-centric plan that I think is much easier. It begins after the summary of the phased plan for the nation.

## **What is in the WH plan?**

The administration's 18-page guidance document details three phases to reopen state economies, with each phase lasting, at minimum, 14 days. The guidelines in full can be seen here:

<https://www.whitehouse.gov/openingamerica/>

You can get a printout of the complete guidelines in your local paper if you do not have an Internet account.

The plans include some recommendations across all three phases including good personal hygiene and employers developing policies to ensure social distancing, testing and contact tracing.

Phase one includes much of the current lockdown measures such as avoiding non-essential travel and not gathering in groups. But it says large venues such as restaurants, places of worship and sports venues "can operate under strict physical distancing protocols".

If there is no evidence of a resurgence of the coronavirus, phase two allows non-essential travel to resume. The guidance says schools can reopen and bars can operate "with diminished standing-room occupancy".

Under phase three, states which are still seeing a downward trend of symptoms and cases can allow "public interactions" with physical distancing and the unrestricted staffing of worksites. Visits to care homes and hospitals can resume and bars can increase their standing room capacity.

Some regions could begin returning to normal after a month-long evaluation period, at the earliest, according to the document.

In places where there are more infections or where rates begin to rise, it could take longer.

The coordinator of the White House coronavirus task force, Dr Deborah Birx, told Thursday's briefing that as states worked through the three phases, they could allow for more and more employees to return to work in increments.

Phase three would be the "new normal", she said, and would still include suggestions that vulnerable people should avoid crowded spaces.

After the 2020 nightmare that seemed to never end, the last thing Americans needed was 50 Governors extending the goal line. Yet that is what our officials have done. Perhaps Congress should give up their paychecks for the duration.

My brother Joseph has a great saying when nobody is listening to his suggestions. After a short while, he raises his hand and says, Talk to the Hand. He goes into a disinterested mode and often gets a positive rise out of his adversary. I wish my brother were an American official right now. He was once a top manager in the VA and he understands people. Unfortunately, he learned in his time on the job that many of our adversaries have no shame.

So what to do? In this book we tell you about how to ignore any negative pleadings and instead stay positive while following the guidelines. Think about how nice it will be when the yoke upon America and its economy is lifted. As you read this book, you'll get a good perspective on what is happening and how to improve it.



## Chapter 2 Most States Adhere to Guidelines



The President announced that any state can start reopening while acknowledging the decision is theirs. The guidelines released by the president effectively mean that any restoration of American society will take place on a patchwork basis. There can be as many as fifty patches—one for each state. States also have the latitude to direct counties in their state to follow different guidelines rather than big and small counties having to operate the same.

It helps to understand that the task force produced guidelines. Most states it is expected, will adhere to the guidelines but strict adherence is not mandated.

Trump has been talking about a reopening America for several weeks. He telegraphed his desire to restart the economy several weeks ago and April 16 was the date the guidelines were released.

In internal documents, federal health officials warn that the bar to do so safely may be too high. We wonder if Trump is in charge sometimes as these Federal health officials have a lot of power to warn leaders on the “White House’s coronavirus task force” of their concerns. This week all members of the task force and a special group tasked with creating guidelines for the reopening of America, completed their guidelines.

They noted that reopening the nation will require a massive capacity to test, track and treat people for the ongoing threat of the novel coronavirus.





President Trump suggested early in the week of April 16 that “It’s going to be very, very soon,” President Trump said at a press conference Tuesday, “sooner than the end of the month.” On April 16, he announced his plan in which the states call the shots. The plan is generalized in Chapter 1 and there is also a link to the 18 page plan in Chapter 1.




# Chapter 3 Eventually, Things Will Improve



The sign of the future with anti-viral success

## Introduction

After about six weeks of formal shutdowns in the many of the states across the nation, the president announced his plan to restart life in America on April 16. Having lived through the social distancing and the lack of fun in America for all this time, families have actually had it up to here  with restrictions. With 22,000,000 unemployed as of yesterday, the economy is not poised to come back soon and those interested in America surviving have been urging to get things started sooner rather than later.

And, so, I take no issue with the Presidents guidelines. However, I like mine and the experts' guidelines better. Mine are based on the feeling that I get from some people six feet away as I walk the neighborhood.

They include thoughts about the autocrats running the making life much more miserable for the people than they must be. For example, in Pennsylvania the Liquor Stores are even shut down and most people are coming to the end of their one month backup supply. I have heard during these walks by some unhappy travelers that it might be even better to get the virus and have the threat and the dictatorship end as most people do survive the illness. I am not recommending this but governors can and should make this time as bearable for the people as possible. They are not making any friends that is one thing that is for sure.

Should we stay closed and separated? On April 10, four days before I began this chapter, the New York Times Magazine wrote a piece about restarting America. After a read of their article one would not necessarily conclude that we should ever restart when government is being so helpful to the people right now.

Here is how they began their article:

“The politics of the coronavirus have made it seem indecent to talk about the future. As President Trump has flirted with reopening America quickly — saying in late March that he’d like to see “packed churches” on Easter and returning to the theme days ago with “we cannot let this continue” — public-health experts have felt compelled to call out the dangers. Many Americans have responded by rejecting as monstrous the whole idea of any trade-off between saving lives and saving the economy. And in the near term, it’s true that those two goals align: For the sake of both, it’s imperative to keep businesses shuttered and people in their homes as much as possible.

In the longer run, though, it’s important to acknowledge that a trade-off will emerge — and become more urgent in the coming months, as the economy slides deeper into recession. The staggering toll of unemployment has reached more than 22 million in just the last four weeks. There will be difficult compromises between doing everything possible to save lives from COVID-19 and preventing other life-threatening, or -altering, harms.

When can the US ethically bring people back to work and school and begin to resume the usual rhythms of American life? The times brought five people together in a video-conference and asked them point blank, what would it take to reopen America. Of course there is the current battle of who has the authority—the President or the fifty Governors. But, assuming that one will be solved, there is a lot of disagreement on when we should open. For eight governors, in fact, who have not issued stay-at home orders, the opening question is moot. They have not shut down.

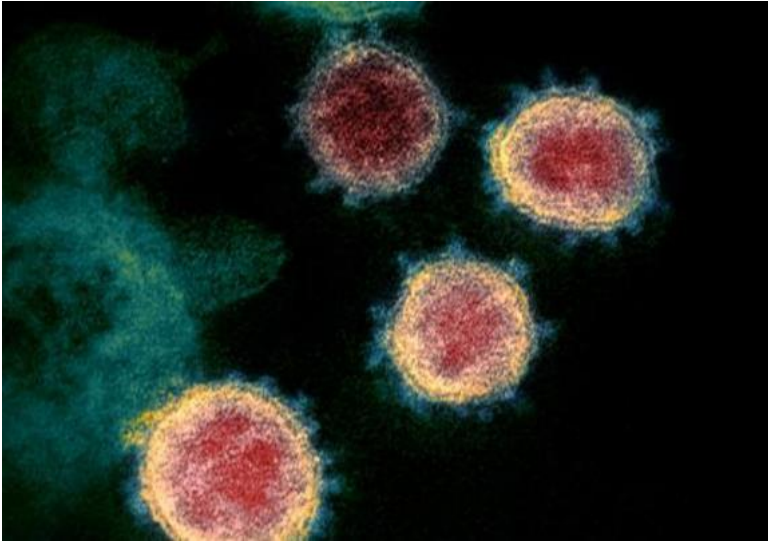
If you want to see what the Times says about the subject, feel free to go to <https://www.nytimes.com/2020/04/10/magazine/coronavirus-economy-debate.html>. The panelists in their piece do not reflect my views on the subject.. Bioethicist Ezekiel Emanuel adopted the “Whole Lives” program for Obamacare. The “Death Panels” were part of his work in which if you were under ten or above fifty years old, Emanuel would serve you your health-care last.

Zeke would not be on my panel. He is not pro-American in my opinion. His take is to keep America shut down until there is a vaccine, which he believes will be here in perhaps

eighteen months. By then folks, if we stayed shut down with enhanced social distancing as in Michigan, China would own America. Therefore, I am not interested at all in the Emanuel Plan.

What if you knew that the number of deaths from the flu this year were more than four times the number of deaths from the coronavirus. Would you be as worried. Would you think this is much ado about nothing? It is by the way more than four times that of COVID-19.

In the U.S. alone, the flu this year (also called influenza) has caused an estimated 38 million illnesses, 390,000 hospitalizations and up to 62,000 deaths this season. Think about that. It's like that every year and we do not close down the country. COVID-19 has caused about 32,000 deaths in the US this year because we have no vaccine and the experts won't accept the best therapeutic as our gold standard—hydroxychloroquine. Many doctors swear that the # of deaths would be significantly less if hydroxychloroquine were adopted as both a prophylaxis and as a possible cure.



President Donald Trump is a realist about public-health policies that could harm the economy and the American public. At this point of the pandemic, he sees the risk of economic collapse as a major potential cause for loss of life in the future—and not because of the flu or a virus. Trump has attracted crucial allies among Republican leaders overseeing the movement of millions of Americans. People are sick of staying at home waiting for their businesses to be destroyed. They want to fight back rather than go down without a ship.

Florida Governor Ron DeSantis for a long time resisted enacting orders that would restrict



people to their homes. His philosophy was unlike what other large states such as New York and California have done. Instead, his office has advised that people older than 65 should stay inside. DeSantis too gave in on April 1. When he announced the curtailment of businesses, he said the decision corresponded with the “national pause” effectively recommended by the White House. Governors of both parties made clear they will move at their own pace.,

Mississippi Governor Tate Reeves also balked, saying the state isn't China and the US has a Constitution. Alabama Governor Kay Ivey has said she has no plans for a state shelter-in-place order, so the City of Birmingham with a Dem Mayor approved its own Tuesday. Democrats at the city and state and national level sure do hate citizens having freedom.

Other Republicans, like Ohio's Mike DeWine, have been leading the charge to slow the virus despite the consequences. Economists suggest that social distancing could limit infections and prevent as many as 600,000 additional U.S. deaths. Most think DeWine is all wet. That has set off fierce criticism of those following the lead of Trump, who has repeatedly questioned the need, given the economic costs.

Democrats are more interested in opposing Trump than helping America. If they can get away with doing nothing, that will be their approach. Democrats don't like business and they liken the shutdown to how things would be in a socialist country—so why change things by going back to work when that is exactly what Democrats do not want.

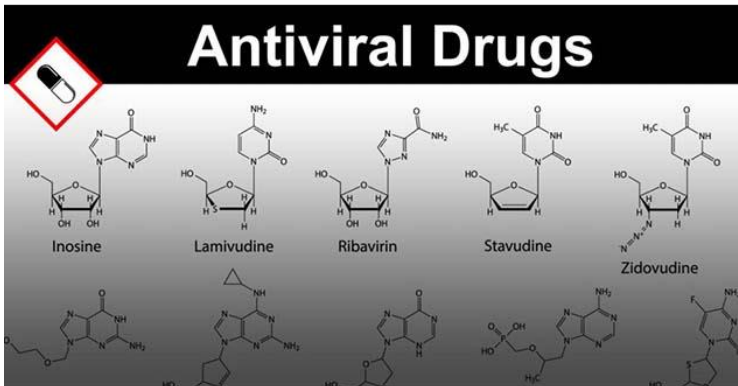
The billionaires on Wall Street are playing the hedge funds and other financial instruments and they are making tons of money while the rest of the country is hurting. Regular Americans believe that Wall Street is for Republicans but it is not so. The progressive liberal billionaires on the Street do not want the people to come back to work. They are making their billions without the people working.

And, so, the Wall Street types business leaders on the phone call with Trump on April 15, urged the President to dramatically increase coronavirus testing no matter how long the country has to shut down. During this first call to discuss reopening country, Wall Street big shot Democrats sided with DeWine and told the president more testing is needed to convince the public to return to work

We will discuss that and other factors of reopening the country in the next several chapters.



# Chapter 4 Can Anti-Virals Help?



What do you do when you don't know?  
 Hopefully when asked, you will admit that you do not know. Unfortunately, the media in the US uses a different standard. They want to know what Trump thinks about the answer to the question. If Trump says X, the media, without any research of their own know the answer intrinsically with no further study. They know that it is not X, and so it is Y, if there are just two options.

Using media logic, several weeks after I heard Dr. Oz and some pretty credentialed epidemiologists and cardiologists touting hydroxychloroquine and even chloroquine as a game changer in the fight for a cure and a

preventative (prophylaxis) for the coronavirus, I was very encouraged.

I began to study all I could (without being a doctor) to see if there was more than anecdotal evidence for the claim. Let me say that I learned that most doctors use the drug to treat themselves so they do not get infected and though that is not science, it is great news.

Moreover, in a recent global survey, Hydroxychloroquine was rated 'most effective therapy' by doctors for coronavirus. Yes, this drug, known for treating malaria is being used extensively by U.S. doctors mostly for high-risk COVID-19 patients.

The FDA has authorized emergency use of the malaria medicines for severely ill coronavirus patients who are already in the hospital. Emergency use is a lower bar than full-on approval. FDA full approval requires piles of clinical data about a drug's effectiveness and safety. Those answers are still in the works, and the FDA has acknowledged that even if the drugs are effective, doctors don't know the best dosing yet to treat the virus. However, the doctors have figured that out already by using it themselves. Moreover, they use it for more than just emergency use for COVID-19.

Chloroquine has been safely used since 1944 (about 65 years) as an antimalarial drug. Here is its full set of FDA approved uses

- (1) For the treatment of uncomplicated malaria due to *P. falciparum*, *P. malariae*, *P. ovale*, and *P. vivax*.
- (2) Chronic discoid lupus erythematosus and systemic lupus erythematosus in adults and
- (3) Treatment of acute and chronic rheumatoid arthritis in adults.

The FDA recently posted information regarding worldwide shortages of hydroxychloroquine and chloroquine to its drug shortages webpage due to a significant surge in demand, notably as a result of US President Donald Trump's pronouncement that the drug could be a 'game changer' in the fight against COVID-19. This shortage is not good news and must be addressed quickly with the same dispatch as the N95 masks.

Trump already ordered a stockpile of 30 million doses but he needs to ramp up production to fulfill the need for using the drug as a prophylaxis and as a cure for COVID-19 when

America reopens. The American population is in excess of 330,000,000.

## **Physicians use Hydroxychloroquine worldwide**

Valerie Richardson of The Washington Times reported a week ago on Thursday, April 2, 2020 that an international poll of more than 6,000 doctors released Thursday found that the antimalarial drug hydroxychloroquine was the most highly rated treatment for the novel coronavirus. For me that means I want it if I am sick with the virus or as a prophylaxis.

The survey was conducted by Sermo, a global health care polling company, of 6,227 physicians in 30 countries. They found that 37% of those treating COVID-19 patients rated hydroxychloroquine as the “most effective therapy” from a list of 15 options. These are doctors.

Of the physicians surveyed, 3,308 said they had either ordered a COVID-19 test or been involved in caring for a coronavirus patient, and 2,171 of those responded to the question asking which medications were most effective. Only when the scientific community accepts



information such as this and offers real opinions about the positive aspects of its efficacy will this treatment get the full respect that it deserves from the world. Then, many real lives will be saved.

The activist press is against hydroxychloroquine after finding out that from the daily briefings that President Donald Trump authorized Peter Navarro to find thirty million or more doses from around the world from countries who had chosen not to export the medicine. Navarro found them and brought them to the stockpile. If Trump is for anything, the activist press is against it for no other reason.

President Donald Trump has expressed his interest in the merits of the anti-malarial drug hydroxychloroquine as a coronavirus game changing cure and as a prophylaxis. I learned about it from two doctors on the Laura Ingraham show and the evidence is compelling

Drs. Ramin Oskoui, cardiologist and CEO of Foxhall cardiology, and Stephen Smith, founder of the Smith Center for Infectious Diseases and Urban Health, told their story to Laura Ingraham on Fox News. The activist opposition press refute all of the evidence presented because they fear a cure for the coronavirus would assure

a victory for Trump in the November elections. It is amazing that this activist opposition media does not care what happens to America as long as they can discredit the President.

### **Democrat Representative cured by hydroxychloroquine**

Despite the opinion of the lying press, nonetheless, former coronavirus patients like actor Daniel Dae Kim and Michigan Democrat State Representative Karen Whitsett swear by it. However, even after receiving emergency FDA approval, the anti-malarial drug hydroxychloroquine still has an image problem on the political left after being touted by President Trump. When the left found Trump favored the drug, that was enough for them to be against it—unless of course they get the virus.

Democratic State Representative Karen Whitsett from Michigan has been telling anybody who will listen about her good news. She says that the controversial drug hydroxychloroquine stopped her coronavirus symptoms "within a couple hours."

The FDA issued the emergency-use authorization late Sunday for chloroquine and its next-generation version, hydroxychloroquine, as treatments for the novel coronavirus, fueling

the political back-and-forth that erupted March 19 when Mr. Trump called hydroxychloroquine a potential “game changer.”



# Chapter 5 Stories about Chloroquine



There is enough evidence for me that the drug is safe and effective as a cure and as a prophylaxis that I wrote two articles for my local paper. I was called the other day telling me that the first was about to be printed in the Citizens Voice.

With all of the fuss for the first month of the shutdown with hospitals and EMTs having mask shortages and doctors and nurses having to go to work without the proper PPE's (personal protective equipment, I penned this article

Here is the first Short Letter in italics that I sent to the editor.

*Date: Wed, 25 Mar 2020 19:11:59 -0400*

*From: "Brian W. Kelly"*

*Subject: What if we no longer needed N95 masks?*

*I have no medical credentials to be considered but I offer this anyway.. My favorite poem by Emily Dickinson starts with I'm nobody, who are you? I know who I am.*

*In my whole career with IBM I was a problem solver. Problems that we did not know about yesterday, we had to solve today. When I get a problem in my head and possible solutions, I did not stop until my solution was proven wrong and I had to move on to possible solution #2, or 3, or whatever.*

*I am intrigued by the studied capabilities of hydroxychloroquine, an effective malaria drug to fight COVID-19. It is in clinical tests in NY since Tuesday but I hear nothing about it. In the French study that has been popularized by Dr. Oz, we know that the French have cured all members of their small study. It took one person a few days longer to show relaxed symptoms. But that person too was cured. Hydroxychloroquine is also seen as a great prophylaxis (preventative). It is used so that those heading to malaria infested countries do not contract*

*malaria.*

*It is said anecdotally that it does the same for the coronavirus. In other words, it can prevent one from contracting the virus.*

*What if it works? Does anybody know? It seems like nobody at this point cares about its preventative abilities.*

*Think of it?*

*Until the major innovations in making N95 masks for hospital workers were developed, there was and there still may be a mask shortage.*

*What if hydroxychloroquine were such an effective prophylaxis for the virus that anybody who took the proper preventative dosage became immune from getting the virus?*

*What if?*

*How are problems solved but first with a thesis?*

*What if?*

*The N95 mask shortage would no longer matter if a simple pill or injection could prevent the virus from affecting hospital and other EMT workers.*

*Should we know more about this?*

*We could concentrate on respirators and testing!*

--- End of letter ---

After a week, I added to the facts in the letter and sent another letter.

## **2<sup>nd</sup> letter to the editor about hydroxychloroquine**

*Date: Wed, 8 Apr 2020 07:11:34 -0400*

*From: "Brian W. Kelly"*

*Subject: Save lives with this new therapeutic remedy*

*Doctors themselves are taking chloroquine and hydroxychloroquine as a cure and as a prophylactic. The people should know about this.*

*Additionally, with the significant # of health care workers and EMS who have caught the virus in their work it would also help in keeping them safe.*

*Evidence that these drugs serve as an effective prophylactic is widespread. For 65 years, chloroquine has been used in Africa and various*



*countries to fight malaria. Where the drug is used regularly, there are no cases of covid-19.*

*Additionally on a recent talk show two doctors discussed*

*Hydroxychloroquine, Azithromycin and zinc, in a dose they said costs about \$20.00 can be used as a therapeutic cure for those moderately and even severely infected. The sooner one takes the medicine however, the better. Additionally, these doctors treat Lupus patients and Rheumatoid Arthritis Patients with the hydroxychloroquine and have been doing so for years without any patient going to the hospital because of the medicine.*

*The drug is safe. Additionally, the one doctor treats 2000 patients for Lupus and none have contracted COVID-19. He cited another study of 14,500 Lupus patients and none have COVID. This attests to its prophylaxis capabilities.*

*Locally on the Frank Andrews show yesterday, Louis called in to tell his story of contracting covid-19. He said he thought he would have no issue because he was young and strong and in good health but after ten days, he had not improved and began having breathing difficulties. After a few days he called 911 and was admitted to treat the coronavirus covid-19.*

*He was given breathing assistance with a ventilator and he thought he might not make it. Then, he was given Hydroxychloroquine, zinc, and Azithromycin. After a day or so, he was taken off breathing assist and put on oxygen, then a reduced oxygen flow and after a few days he was discharged free of the virus. On death's door to on the way home. That is not anecdotal if you are Louis, that is very real.*

*A state Democrat representative from Michigan said she heard Donald Trump talking about the possibilities of the drug on TV in one of the updates. She had the virus and was getting worse. She asked her doctor if she could be put on the drug and he did so. In four hours, she told the audience she had no symptoms. Her Doctor was on the air with her.*

*I am thinking about when the US goes back to work. All of the serology testing for antibodies to see who is immune we know will take forever. America recently brought in 329,000,000 doses of hydroxychloroquine into its stockpile and we are making more. The threat of death is reduced substantially by this drug. When we go back to work, if doctors and the government advocate a prophylaxis of hydroxychloroquine or a cure in case of infection, all of America can go back to*

*work with minimal risk. Don't you think the people in your circulation area of northeastern PA should know about this. Please.*

*Hospital workers, EMS/EMT workers, Police, Fire, warehouse workers, cashiers, manufacturing workers, etc. -- everybody can be safe rather than sorry.*

-- End of 2<sup>nd</sup> email --

My two favorite antiviral drugs

1. Hydroxychloroquine
2. Remdesivir

An existing, easy-to-produce medicine that proved effective at treating or preventing SARS-CoV-2 infection would provide the fastest relief for patients and doctors. As noted, the early hope is on hydroxychloroquine and chloroquine, and many hospitals, including the University of California, San Francisco, and the University of Washington, include them in their treatment guidelines. This anti-viral is approved for uses but not as a general treatment for COVID-19. My opinion is that it should have full FDA approval but I am not a doctor. According to the reports, it has saved lives.

1. Hydroxychloroquine, aka **Plaquenil**

Some doctors are combining hydroxychloroquine with azithromycin, an antibiotic. Much of the published evidence comes from a very small French study and reports from China. Larger, more rigorous clinical trials are starting, but they will take time. Favipiravir, a flu drug shown in Japan, appeared beneficial in another small study. These medicines, especially the malaria drugs, which are being mass-produced, will be used by doctors on the front lines, but we will have to wait for evidence of whether they are benefitting patients and how much.

## 2. Remdesivir

Timeline: First data could come in April.

Remdesivir, an antiviral medicine that failed as an Ebola treatment, was initially developed to work against a different coronavirus. There's some evidence that it benefits Covid-19 patients. Its maker, Gilead, has been working with researchers and governments around the world to get clinical trials up and running.

The company has said to expect results in April. Six large studies are in progress, with the first, in severely ill patients in China. It was due to finish

as early as April 3, according to a government website.

A study in patients with milder disease will also finish in April, with two more due in May. In the meantime, Gilead has made the drug available to hundreds of patients on a compassionate use basis.

However, it recently said that, due to overwhelming demand, it would suspend access to the drug for all but pregnant women and children as it works to create a more systematic way of giving it out without interfering with clinical trials. This new system should be in place soon. Remdesivir must be given intravenously.

University of Minnesota tests all-in for hydroxychloroquine

Each day, other than supply, it looks better for hydroxychloroquine. It is getting lots of attention by lots of epidemiologists and the University of Minnesota.

At least three clinical trials for hydroxychloroquine are trying to establish whether the decades-old malaria medication can prevent COVID-19 infections in frontline

health-care workers as hospitals across the country scramble to secure enough gowns and masks for their employees.

This includes two clinical trials at the University of Minnesota testing hydroxychloroquine in health care workers reporting pre- and post-exposure to the novel coronavirus. A third trial, funded by a government agency, wants to know if the drug can prevent infections in 15,000 health care workers. See my letter to the editor earlier in this section.

There is growing concern that the current strain on the health care system and its workers isn't sustainable given the high rates of exposure faced by clinicians working in frontline emergency rooms, intensive care units, and newly established COVID-19 units. At the same time, clinicians are being asked to wear one mask per shift or reuse them at some hospitals.

The COVID-19 pandemic has sickened more than 1 million people worldwide, including over 600,000 in the U.S. Over 32,000 people have died in the US. In the U.S., more and more clinicians are contracting the virus, and some are dying.

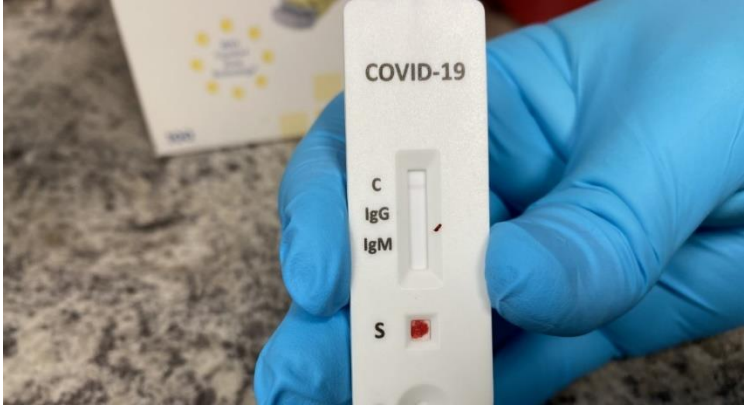
“The lack of workplace and patient safety right now is catastrophic,” Rebecca Givan, an associate professor of labor studies and employment relations at Rutgers University, said in an email.

“Hospitals need to be honest with their workers, and do everything in their power to keep workers safe so that they can continue to provide desperately needed patient care without jeopardizing their own health or that of their families.” Hydroxychloroquine can save their employee’s lives.





# Chapter 6 Serological Testing for Antibodies



A week ago when Trump announced that Peter Navarro had procured over 29 million doses of hydroxychloroquine for the storehouse, the drug began to surge out of the storehouses and into pharmacies across the country. Now, just like there is a shortage of COVID-10 testing and serological testing supplies and the ability to get readouts, there will soon be a shortage of this powerful anti-viral drug and so the stockpile needs to be replaced. It is my opinion that hydroxychloroquine is vital to the success of an American economic restart.

This note is from the Commissioner of Food and Drugs, Food and Drug Administration, Stephen M. Hahn M.D. It explains the tests for

antibodies which many believe will play a role in reopening America. Here is the commissioner's note:

Serological tests measure the amount of antibodies or proteins present in the blood when the body is responding to a specific infection, like COVID-19. In other words, the test detects the body's immune response to the infection caused by the virus rather than detecting the virus itself. In the early days of an infection when the body's immune response is still building, antibodies may not be detected. This limits the test's effectiveness for diagnosing COVID-19 and why it should not be used as the sole basis to diagnose COVID-19.

Serological tests can play a critical role in the fight against COVID-19 by helping healthcare professionals to identify individuals who have overcome an infection in the past and have developed an immune response. In the future, this may potentially be used to help determine, together with other clinical data, that such individuals are no longer susceptible to infection and can return to work. In addition, these test results can aid in determining who may donate a part of their blood called convalescent

plasma, which may serve as a possible treatment for those who are seriously ill from COVID-19. This is why Vice President Mike Pence called on the laboratory community to develop serological tests for COVID-19.

In March, the FDA issued a policy to allow developers of certain serological tests to begin to market or use their tests once they have performed the appropriate evaluation to determine that their tests are accurate and reliable. This includes allowing developers to market their tests without prior FDA review if certain conditions outlined in the guidance document are met. The FDA issued this policy to allow early patient access to certain serological tests with the understanding that the FDA has not reviewed and authorized them.

The FDA can also authorize tests for COVID-19 under an Emergency Use Authorization (EUA). To date, FDA has authorized one EUA for a serological test that is intended for use by clinical laboratories.

Since the FDA issued the policy, over 70 test developers have notified the agency that they have serological tests available for use.

However, some firms are falsely claiming that their serological tests are FDA approved or authorized, or falsely claiming that they can diagnose COVID-19. The FDA will take appropriate action against firms making false claims or marketing tests that are not accurate and reliable.

The FDA, an agency within the U.S. Department of Health and Human Services, protects the public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines and other biological products for human use, and medical devices. The agency also is responsible for the safety and security of our nation's food supply, cosmetics, dietary supplements, products that give off electronic radiation, and for regulating tobacco products.

One of the approaches to rebounding America has to do with seeing who has had the virus in the past so that they can gain a certification to prove that person cannot be infected again. If there were an adequate supply of the antibody tests, this would be difficult to implement on a good day.

The notion of having to prove you're OK to get your freedom to work and walk around certificate may not fly well in a free country. That can be an obstacle as the day gets closer that we open up the country. I think we need a simpler approach. Serology testing may make us feel that we are OK but proving it to an employer or anybody else is going to be problematic. There are after all, 330 million citizens in just America to worry about. There are 7.8 billion worldwide.

There was a headline today that certainly got my attention. It said:

## DON'T COUNT ON ANTIBODY TESTS

It offered that blood tests that measure a person's antibodies to the coronavirus could be a powerful tool to determine when it's safe to reopen the country. That is correct.

But after all the good news about the creation and development of such tests, concerns now exist about the accuracy and availability of the tests. Here is how the tests work:

Like the FDA Commissioner said: They detect whether a person has ever been exposed to the virus. But, there are many different tests than

the single FDA approved test. These tests are different from those used to diagnose the disease. There are those who believe the existence of all these tests could hamper plans to allow Americans back to work and school.

Entrepreneurial America has created more than 90 different antibody tests. They are all now on the market, but only one has been authorized by the Food and Drug Administration. Why is this? The others “may not be as accurate as we’d like,” agency FDA chief Stephen Hahn said recently as talk is ramping up about lifting the shutdown. Hahn’s FDA has not verified the other 90 tests as being effective. Surely John Q. Public is not qualified to make this determination.

Public health experts are now warning that just because a person has antibodies to the coronavirus does not necessarily mean that they are immune to the virus, according to David Lim ..... But the antibody testing push comes as President Donald Trump is laser-focused on reopening the economy and governors on both coasts work on plans for a regional restart.

Rhode Island Gov. Gina Raimondo said her administration is already conducting a “deep

“dive, industry by industry” for guidelines to a “new normal,”

My personal concern is that government can easily guess wrong on who can do what and when in any piecemeal approach to relieving the shutdown. Unlike Dr. Fauci, I advocate turning the switch so we do not have to designate a *grand determinator* at the federal or state level to determine what are the gauntlet points that must be accomplished for a person to be declared free of disease, and then what? ?

So, what do we do about new screening and training for businesses that reopen. What must employees do to qualify? Where do they go? Pennsylvania for example has no testing facilities as of today—no drive throughs. Governor Raimondo is one of six northeast governors working together in a new working group announced Monday. There is a lot of hope for this group but there are a lot of pitfalls. Who makes the decisions for the group if they are independent of the president.

“Everyone is very anxious to get out of the house, get back to work, get the economy moving. Everyone agrees with that,” said New York Gov. Andrew Cuomo. “What the art form is going to be here is doing that smartly, and

doing that productively, and doing that in a coordinated way.”



# Chapter 7 The Simplest Formula!



## Keep It Simple Stupid!

My perspective is to not put a whole load of *gotchas* and *have-tos* and , on the public or businesses to get going. I say” “Let it happen naturally. “The people such as myself and my wife are going to be cautious entering this new open world. Let it up to us make those decisions as to what, and how. The government should just say when! Turn on the light switch now!

We got into this mess because it was unexpected. Nobody knew the risks of droplets

or dirty hands or close contact. We have seen the case counts, and the deaths. Only a fool would act haphazardly if the switch were turned back on for the economy to start as of a certain date.

The governors' announcement came yesterday as the President asserted that he, not they, would decide when stay-at-home orders could be lifted. It also coincided with news from California Gov. Gavin Newsom, Oregon Gov. Kate Brown and Washington Gov. Jay Inslee that they are working on their own "shared approach" to restarting the West Coast economy and it does not depend on what the East Coast does.

Trump, as expected was asked about the governors' efforts during the Monday April 13th Task Force press briefing. Trump was emphatic: "a president's authority is *total*." He added, "And that's the way it's got to be... And the governors know that." Legal scholars say the federal government lacks the power to directly order states to reopen their economies but the Feds have a lot of discretion regarding interstate commerce, which quite frankly, can be anything—even inaction. The last thing America needs is a Constitutional fight before we can open America.

## The simplest formula should be the best

Today is April 17, 2020. If I were in charge of America, this would be the recommended approach:

It is based on the supposition that every living person has a desire to survive. These are the steps after the switch is turned on.

0. Businesses need to make the changes necessary to promote a safe workplace

1. All employees preparing to go back to work or already working or those people planning to not stay in 100% lockdown should first see their doctor or clinician first; discuss their plans; schedule a test, and if you do not have antibodies, get a prescription for the hydroxychloroquine prophylaxis.

2. States need to designate areas for serology and disease testing and medicine dispensing. I know that I would not know where to go if the tests were ready tomorrow.

Hydroxychloroquine prophylaxis needs to be made available as the prime prophylaxis and

curative solution. Patients should be able to get their dosages at:

- A. Doctors' Offices
- B. Clinics
- C. Private Urgent Care facilities
- D. Additional Facilities such as pharmacies and private areas staffed by PAs and / or nurses.
- E. Doctor / Med professional recommended prophylaxis should be taken by all workers who feel the need to wear masks.

3. Shutdown is lifted across the country on May 4 to May 11, 2020

4. Behavioral recommendations (not mandatory) are continued

Social distancing , hand washing etc. Avoid contact if not necessary. A new rule book of how to stay safe should be put together and made available

5. All businesses, entertainment, including restaurants, plays, movies, gymnasiums, swimming pools, parks, etc. may open. People need to voluntarily exercise caution like during the shutdown to avoid crowds if possible. If a

place is crowded, go someplace else. If you are sick, stay home

6. Mass transportation reopens. Transit workers take prophylaxis.

7. Face masks recommended until further notice but not mandatory

8. People should stay at home except when they decide to go out to movies or dinner, etc. No restrictions on visiting neighbors or family other than in hospitals and nursing homes.

9. Employees will be called back to work by employers. They have five days to report to work. Those fearful to return to work may request up to 30 days additional leave.

Unemployment compensation available for the thirty days for those called back to work – perhaps at half rate.

## Summary

Instead of the government determining what is best for the people, the people have already suffered, some for six weeks with the country in lockdown. The people are not dumb. We understand the risks by now. The people are

naturally cautious and authoritative restrictions will not make us more cautious.

Over time, we may choose to brave the outside world when we feel the time is right. Plus, we may opt to dine inside a restaurant with or without a prophylaxis such as hydroxychloroquine. The medicine would serve as a crutch so that we would not be infected. Use similar prophylaxis cautions to protect yourself from infection.

Remdesivir hopefully soon will be another alternative.

I would recommend taking the proper amount of a prophylaxis such as hydroxychloroquine to ward off the virus. This medicine may last about three weeks or perhaps longer. Renew the prophylaxis regimen as required. This would be more effective than the antibodies testing and the drug can be made more available than the test. The idea is that eventually the coronavirus will be gone.

If you think you have contracted the virus or are concerned about it, you should get tested wherever you can. If positive, ask the physician or attendant for a prescription for hydroxychloroquine with a packet of Zinc and

another prescription for Azythromycin. This “three pack” has been effective in curing the virus in some people. It can cure the virus but it is not 100% guaranteed.

Go home and quarantine for 14 days while taking the medicine at the recommended dosage (often 5 days) until the doctor says you no longer have the virus. If you do not improve, call your doctor. Like all medicine, nothing is 100% but hydroxychloroquine is one that I would be looking for if I get sick.

It should be part of the nation’s recommended solution for reopening.

By all means open the country so we have an economy ready to go when we as a country are finally ready to stop hibernating.





# Other Books by Brian W. Kelly:

(amazon.com, and Kindle)

**Great Moments in Kansas City Chiefs Football.** From the beginning to the Andy Reid Era  
**How the Philadelphia Eagles Lost Its Karma.** This is the one place that tells the story  
**Cancel All Student Debt Now!** Good for America, Good for the Economy.  
**Social Security Screw Job!!!** Scandal: Seniors Intentionally Screwed by US Government  
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**Air Force Football Championship Seasons From AF Championship to Coach Calhoun's latest team**  
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**Army Football Championship Seasons** Beginning of Football championships to Jeff Monken Era  
**Florida Gators Championship Seasons** Beginning of Football through championships to Dan Mullen era  
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**Great Players in Air Force Football:** Air Force's best players of all time  
**Great Coaches in Air Force Football:** From Coach 1 to Coach Troy Calhoun  
**Great Moments in Air Force Football:** From day 1 to today  
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**God Gave US Donald Trump?** Trump was sent from God as the people's answer  
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