Dr. David McDonald April 2 Presentation (Pathologist in Idaho) destroys the entire COVID scam and gives a 100% easy, effective, cheap over the counter cure which is scientifically proven.

https://www.facebook.com/davepmcdonald/videos/3901279419930605
28:14 min video

The slide text and notes below are as accurate as possible as provided by PADRAK.com on 4/4/21.

The slide numbers are shown with the time of appearance on the video.
Paragraphs beginning with the slide number contain the text given on the slide.
Paragraphs after that are his comments made verbally.
Also verbal comments during the slides are given here in parentheses.

---

Slide 1 (1:54)
“for I have sworn upon the alter of god eternal hostility against every form of tyranny over the mind of man” – Thomas Jefferson

2 (1:59)
Plot showing the number of new COVID cases per day in Idaho – from March 2020 to March 21 - after September 2020 first rising up to a peak in December and then declining with time – that part looking like a bell shaped curve

Are we now in a pandemic? No. That is over.
We are now in an endemic.
We are now seeing at most only 1 to 2% new cases per day.

3 (2:34)
Tidbits
Corona viruses are seasonal and usually follow a 6-9 month life cycle
Statistically we are at endemic levels in Idaho, NOT PANDEMIC
Average Covid 19 age of death 78.6 yo.
Average annual US age of death historically 78.6 yo. (in North America)
Highest risk factors, advanced age, obesity, low vitamin D
(90% of deaths in Idaho have been over 70 years of age)
The virus is fragile and is inactivated by sunlight and ventilation (masking outside is insanity)

4 (4:05)
The Biggest Lost Public Health Message – Vitamin (pro hormone D
There is no such thing as “flu and cold season” - Only low vitamin D season!!!

5 (4:23)
Vitamin D facts
Every cell in our body has a vitamin D receptor in the nucleus
Approx. 2,000 genes in our body (5% of our genome) are controlled by vitamin D
Vitamin D is the master key to our immune health!
If one has a D level of 50ng/ml (range 20--100) then one cannot develop a “cytokine storm” (that which kills in covid)

We Have an International Vitamin D deficiency Pandemic!

6 (4:54)
Vitamin D deficiency Pandemic
70% of the world is vitamin D deficient
70-80% of All Americans are vitamin D deficient
82-88% of nursing home patients, 83% of African Americans, 70% of Latinos,
               72% of Native Americans, 47% of Caucasians are D DEFICIENT!!!!
80%+ of all hospitalized patients and 96% of ICU patients are D Deficient!!!!
D deficiency is immune suppression/dysregulation

And therefore - you are easily susceptible to colds, flu, covid, etc...

The best protection mask of all is a healthy immune system!

7 (6:01)
D facts
D is synthesized by UVB rays from the sun through our skin
Sunscreen blocks D synthesis.
Above or below the 35th parallel (latitude) WE CANNOT naturally make D
  for 4-5 months of fall and winter
There is no such things as cold and flu season, only low vitamin D season!
Vitamin D3 orally is CRITICAL for every Idahoan and world citizen
  from October through March (and the rest of the year for indoor workers)

8 (6:31)
A map showing the 35th parallel, that goes approx. from Los Angeles to ABQ to bottom of TN to middle of VA –
Well almost – his slide actually shows the 37th parallel line, which is a bit further North, running from San Jose to the top of OK to the top of VA.

9 (6:38)
NO IDAHOAN CAN NATIRALLY SYNTHESIZE D FROM OCTOBER THROUGH MARCH!
If you do not supplement with vitamin from October through March - in Idaho - you are immune suppressed!

Shows a picture of a naked man in a puffy ballerina skirt dancing on snow...
Most insurance companies in Idaho and many northern states will not pay for a D blood test. (Denmark and Sweden supply their populations with D - they know that it is important!) 80% of Americans are also Magnesium deficient (due to our depleted soils). Magnesium is a critical cofactor for D function. Zinc is also a critical antiviral. 79% of Americans re Zinc deficient. (What you eat matters - it affects your health!) Obesity drastically decreases bioavailable D (into your circulation system). D is fat soluble. 67% of Americans are obese. Normal D levels decrease colon, breast, thyroid, and other cancer rates, depression, and suicide rates.

Vitamin D is NOT just a vitamin – it is a growth hormone and affects thousands of genes in your body!

You can take control of your health and do something about it!

There is only a 3 hour window each day, for about 20 to 30 minutes, to absorb vitamin D from the sun!

The darker your skin, the harder it is to get your vitamin D! This is why we see more virus cases with dark skinned people!

The more north that you live, the harder it is to get your vitamin D!

There is a cool app called D Minder, that will show you when to synthesize your vitamin D (That is D Minder Pro in the Apple store)

Our esteemed Dr. Fauci said - in an interview in November 2020 “I take 8,000 - 9,000 iu of vitamin D per day in the winter” and yet, inexplicable, this is not a public health emphasis

Why is this not on the TV News???

What Should be the Public Health Message Be? (every year not just for Covid)
1 - Vitamin D
2 - Vitamin D
3 - Vitamin D
4 - Decrease social obesity
   Cut sugar, processed foods, carbohydrates, etc.
   Obesity is an inflammatory condition and predisposes and causes countless diseases.

14 (11:41)
Is there a treatment for outpatient Covid?
Current CDC and NIH outpatient therapy recommendation is
   “Go home and isolate, and if you can’t breathe or your lips turn blue then go to the hospital”
THIS IS THERAPEUTIC NIHLISM (apathy)
In what other diseases do we do this? None. This is absurd.
   (and the earlier that you treat, the less complications there will be later on)
If there is a therapy for a disease a vaccine cannot be approved. True!
The NIH co-holds the patient with Moderna on their “vaccine”.
Complete federal conflict of interest!!!!
   (They don’t want a therapy to work, because then they will lose their vaccine!)

15 (13:30)
Current treatments
   (6 months ago WHO said that -)
Remdesivir (DOES NOT(13:28) add survival benefit to anybody - virus has already replicated)
   Cancelled by the WHO Solidarity trial 6 months ago. $3,000 per dose.
   Still used by hospitals with no evidence of benefit.
Convalescent plasma - only works outpatient early, in 1-3 days, with no benefit once hospitalized
Monoclonal antibodies only work early when virus is replicating first 1-3 days
Steroids in hospital at the right point in the disease does add survival benefit

16 (14:35)
Enter an Effective Prevention and Treatment: IVERMECTIN!
   (It works against viruses too! We found last August that it kills 99.9% of Coronavirus in petri dish studies!)
History NIH recommends against it in August 2020,
   however many other countries started using it (a lot of trials~!)
Antiparasitic, however, also a phenomenal vital prophylaxis, early treatment
hospital disease immune modifier treatment and a post Covid “long hauler” treatment
Super safe medication, 4 billion people have taken it since the 1980s,
   WHO list of essential medications, Nobel Prize

Only 1 or 2 people died taking it from genetic disorders. Super super safe!
Given at 40 to 50 times recommended does, with no adverse effects!
Now being used in all of the hospitals in Houston, with great results!
Is the FDA approving it yet? No!
If added to the mix, decreases the death rate by 75%, or by 85% if given early!
How much does it cost? TWO CENTS!
In the US, maybe $2 to $5 per dose. You can get a full course treatment for under $30.

17 (18:14)
IVERMECTIN
Decrease disease acquisition by 88-100% in world trials
Decreases viral replications and shedding time by half (Israel placebo controlled trials)
Decreases disease course and severity by 80-90%
Decreases death rate by 75% (that would have been 375,000 less American deaths)
   86% decreased death when given early
Cost? 2 cents per pill, US $2-$5
NIH February 2020: “Neither for nor against”

Lots of studies proving that this covers all of the variants of the virus.
There is a great website at the FLCCC ALLIANCE website at FLCCC.net, or https://covid19criticalcare.com/
   Front Line COVID-19 Critical Care Alliance
   Prevention & Treatment Protocols for COVID-19
Every person (in a group of 42 studied that I studied) with covid that I have treated with this has been better in 12 to 48 hours!
I know it works

18 (19:46)
IVERMECTIN
Only medication that shows benefit in 100% of world trials.
   Statistical chances of no benefit are 1 in 4 trillion.
Multiple mechanisms of action (long medical lecture), antiviral and beneficial immune modulation actions.
Can cover all current “variants” of SARS Cov2 - unlike the “vaccines”

What the US is doing right now does not fall under the definition of a “vaccine”
They shifted some of the verbiage in the Federal Register last October so that they could approve these “vaccines”
Trials with mammals show problems after these “vaccine” shots in 6 to 9 to 12 months later.
So these are NOT APPROVED “vaccines”!

50% of health professionals are not getting these vaccine shots - because they do not trust the vaccines!
There is no long term proven safety!

These shots do not fall under the subjects of providing immunity and preventing transmission.

19 (21:52)
"Vaccines" - Experimental Biologic Gene Therapy Immune Modulatory Injection
Studies done by the makers not verified by independent research
Authorized NOT APPROVED, why are we treating it as such?
   NIH approved world data for Pfizer but hypocritically will not accept world data for Ivermectin
Decreases disease severity and hospitalization, or viral acquisition or transmission
   (why mask and social distance if they work?)
NO proven long term safety
Technically Moderna and Pfizer are medical devices and not vaccines
mRNA therapies have a dubious history of long term problems!
   Never before used on large groups of humans

Mammals given the vaccine, when later exposed to a variant of the virus, had their immune system go haywire! 100% of the time!

20 (22:45)
Shows a graph comparing the number of new covid cases vs time
   With one curve for N Dakota (with masks and restrictions) and one for S Dakota (with no restrictions)
   and the curves are almost exactly the same.

You can draw your own conclusions if these restrictions do anything!
I can tell you they do not!

Conclusions (23:00)

1 - Vitamin D is critical for everyone every fall and winter for the next 100 years
2 - There is an outpatient early effective prevention and treatment for covid, IVERMECTIN
3 - It’s your body and your choice - and in my opinion these vaccines are unproven and their long term safety is not there
4 - We are now in the endemic and not a pandemic.

Thank you.

Q & A (23:40)

Is IVERMECTIN effective against other viruses?
Yes it is! Including the West Nile virus!

Do the mRNA “vaccines” affect women’s reproduction systems?
Yes, and the long term data is not really available yet!
However I have a friend whose wife was 7 months pregnant who took a shot and then had a miscarriage - right after the injection.

What is a “cytokine storm”?
That is when your white blood cells cannot effectively communicate and this causes an out of balance condition.
Are there particles in the vaccines that can affect us?
The vaccines contain antifreeze to keep from freezing at low temperatures, and this can affect lots of people, as 70% of us are allergic to this (polyethylene glycol 2000).

Where will we be able to get these products from?
Some doctors are now prescribing IVERMECTIN.
If your doctor does not want to provide you with what you want –
Then there are a lot of doctors on line that will prescribe Rx for you! Such as - https://myfreedoctor.com/