



Written by [Selwyn Duke](#) on January 3, 2022

Slamming Ben Carson for Touting Ivermectin and HCQ for COVID, Mediaite MISREPRESENTS Research

So intense is the media's hate affair with COVID-19 treatments ivermectin (IVM) and hydroxychloroquine (HCQ) that it will actually peddle untruths to discredit them. The latest example is a Mediaite attack on renowned doctor Ben Carson for stating the medications "are effective treatments for Covid-19," a proposition for which there's "an utter lack of evidence," the site wrote.

In fact, Mediaite cited a research paper in an attempt to discredit Carson's assertions, claiming the study didn't mention IVM and HCQ as possibly having a mitigatory effect on COVID. Yet in reality, the paper actually *did* thus cite the two medications.



Dr. Ben Carson (AP Images)

What's more and contrary to Mediaite's "utter lack" claim, the researchers *did say* that evidence for the drugs' effectiveness existed.

Here's what Mediaite [wrote](#) last week:

Former Trump cabinet official Dr. Ben Carson claimed on Thursday night that hydroxychloroquine and ivermectin are effective treatments for Covid-19 despite an utter lack of evidence. The segment on Fox News was just another instance of unproven drugs being pushed as remedies for the virus.

... Hannity guest host Pete Hegseth asked Carson why the Biden administration is focusing so much on the vaccines.

... "It's very sad because the rest of the world looks to the United States for leadership," said Carson. "And we're not providing it."

Carson mentioned Nigeria, which he noted is experiencing low mortality rates from Covid-19.

"Look around the world," said Carson. "Nigeria, for instance. The mortality rate in Nigeria from Covid 14 per million. In this country, it's 2,200 per million."

Carson said the discrepancy is because Nigerians take antimalarial drugs such as hydroxychloroquine.

Mediaite then continued, "But a paper published over the summer attempted to explain Nigeria's low Covid mortality rate. It offered three explanations, none of which involved hydroxychloroquine." Yet the site's last line is wrong on both counts.

Mediaite is Media-lite (on Facts)



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First, Mediaite didn't link to the actual research paper but to an [article about it](#). Yet even that article listed *five explanations*, not *just three*. Apparently, Mediaite writer Michael Luciano didn't read his source material with even a modicum of care.

What's more, published in the journal *Global Health: Science and Practice* (GHSP), the [actual paper](#) offered 10 explanations: six main and four secondary ones. And among the latter was "Drugs Against Parasitic Infections" — with the researchers mentioning IVM and HCQ by name.

"[I]vermectin ... has been widely used across SSA [Sub-Saharan Africa] since the 1990s," the paper, entitled "The Conundrum of Low COVID-19 Mortality Burden in sub-Saharan Africa: Myth or Reality?" [stated](#). "A study conducted by Caly et al. found ivermectin to be an inhibitor of the SARS-CoV-2 virus in vitro."

To be fair, the researchers did state that "at present, there is still only limited evidence to support it [the IVM/HCQ-COVID link]." Of course, though, "limited evidence" is not at all the "utter lack of evidence" Mediaite claimed.

As to this, however, there's a funny thing about evidence:

It doesn't tend to spontaneously manifest itself when you don't look for it.

And American Thinker editor in chief and ex-Ivy League professor Dr. Thomas Lifson noted last month that no one has really sought evidence on IVM and HCQ. He explained why, too.

"Running a double-blind study requires oodles of money — the kind of money that only a new, patented drug-maker could afford, in hopes of selling a high-priced remedy to millions of consumers," he [writes](#). "Repurposing off-patent drugs like HCQ and IVM does not yield the kind of profits that would be necessary to pay back the cost of double-blind studies — so they don't exist."

Apropos to this, in "the first half of the year [2021], Pfizer Inc. PFE, 1.99% and Moderna Inc. MRNA, -3.35% reported collective sales of \$17.2 billion for their vaccines, but both are expected to report higher third-quarter totals in the coming week, a collective \$18 billion," [reported](#) MarketWatch in November.

Is it any wonder, then, that Big Pharma — and politicians, some of whom may get donations from it — are pushing the mRNA-therapy agents (MTAs, a.k.a. "vaccines") and not what might be simple remedies?

Ironically, the GHSP paper in general refutes the mainstream media's SARS-CoV-2 narrative. Among the researchers' points as to why China virus mortality is lower in Africa are (quotations are the researchers'; my commentary is in italics):

- The continent's population is relatively young, and most China virus "deaths occur in those aged 65 or older." *Given this, why have we been targeting the young and healthy with MTAs of [questionable efficacy](#) and [safety](#)?*
- Africa's relative absence of retirement homes. The researchers remind us that 81 percent of first-wave COVID "deaths in Canada occurred in [such] facilities." *If we'd focused on helping the vulnerable and not squandered resources on the naturally resistant, many of these lives could have been saved.*
- Africans' "prior exposure to circulating coronaviruses," which could have induced antibody creation and reduced "the severity of Covid-19 illness." *Yet our authorities still dismiss natural immunity.*



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- At the pandemic's onset, there was the "suspension of flights from China, and closure of borders in 40 African nations." *When President Trump suggested similar measures, he was impugned as racist.*

The GHSP paper, which is *peer reviewed*, also strongly cautioned against re-instituting lockdowns, warning that they involve serious health consequences.

As for the aforementioned Lifson, he's quite definitive. Despite "the lack of so-called 'gold standard' double-blind studies," he wrote, "we now effectively know that early (off-label) use of ... hydroxychloroquine and ivermectin can have a significant effect on reducing COVID mortality — especially when used in conjunction with other substances like azithromycin, zinc, and Vitamin D."

Moreover, I personally know two vulnerable senior citizens, one with serious comorbidities, who developed advanced and frightening COVID symptoms but enjoyed immediate improvement and, ultimately, recovery upon taking IVM.

As for Mediaite, which should print a retraction, it and the media-lite in general preach about how we need to "follow the science." Yet they sometimes can't even follow a simply-written scientific paper they may cite as authoritative.



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