



Pfizer Developing COVID Pill Co-administered With HIV Medication

One of the few things that seems to remain more or less “normal” in the post-COVID America is the law of supply and demand. Hypnotized by the doomsday predictions spread by corporate media and the establishment’s top medical talking heads such as Dr. Anthony Fauci and CDC Director Dr. Rochelle Walensky, some Americans, even fully vaccinated ones, may feel they need something to protect themselves from COVID *even more*. Because, apparently, much-touted vaccines do not fully protect one from catching the nasty virus or passing it to others. Big Pharma — yet again — is here to save the day!



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On Monday, Pfizer [announced](#) it has started mid-to-late-stage trials of an oral drug created to prevent COVID in those over the age of 18 and who’ve been exposed to the virus.

Mikael Dolsten, Pfizer’s chief scientific officer, said the drug would be “complementing vaccines,” and if the trials are successful, it “could help stop the virus early.” Dolsten stated:

Given the continued emergence and evolution of SARS-CoV-2 variants and their immense impact, we continue to work diligently to develop and study new ways that our investigational oral antiviral candidate could potentially lower the impact of COVID-19, not only on patients’ lives, but also the lives of their families and household members.

According to the company, the first stage of trials showed the drug called PF-07321332 co-administered with antiviral drug ritonavir is “safe and well tolerated.”

At the next stage, the company wants to see how effectively the duo prevents healthy people from catching COVID and developing the symptoms through two weeks from being in contact with an infected person, and further estimate its safety. Pfizer will be enrolling 2,660 healthy adult participants who live in the same household as an individual with a confirmed symptomatic SARS-CoV-2 infection. The participants will be randomly assigned to receive PF-07321332/ritonavir or a placebo orally twice daily for five to 10 days.

Pfizer further explained that the drug is specifically designed to block the activity of an enzyme that the coronavirus needs in order to replicate.

Curiously enough, the ritonavir that Pfizer is planning to use in conjunction with PF-07321332 is a medication widely used to treat the Human Immunodeficiency Virus (HIV) that causes Acquired Immunodeficiency Syndrome (AIDS).

The question arises, why would a pharmaceutical giant use this type of medicine to prevent COVID?

**COVID and HIV**

In January 2020, a group of Indian doctors published [a paper](#) titled “Uncanny similarity of unique inserts in the 2019-nCoV spike protein to HIV-1 gp120 and Gag.” In that paper, the authors demonstrated that the novel coronavirus SARS-CoV-2, which causes COVID-19, has a couple of unique protein inserts never seen in coronaviruses before. The research into the origin of these inserts showed that they fully aligned with short segments of the Human Immunodeficiency Virus-1 (HIV-1, which is the most common form of HIV) proteins. Both of the viruses are said to be “unrelated,” and such an unusual combination was completely novel and required a “further investigation.”

The HIV inserts found in SARS-CoV-2 were described as those responsible for the interaction of the virus with a negatively charged host surface, which is “a key feature for the host-virus interaction,” per the paper. Meaning, the HIV insertions may enhance SARS-CoV-2’s ability to penetrate human cells and infect them.

The paper was dubbed “misinformation” full of “false claims.” [Reuters](#), for example, claimed that Chinese scientists found similar “insertions” in other viruses in nature, and therefore they were not HIV-specific.

However, in March 2020, French mathematician Jean-Claude Perez, with the advice of Professor Luc Montagnier, a recipient of Nobel Prize for his discovery of HIV, published [a paper](#) titled “Wuhan COVID-19 synthetic origin and evolution” showing an “unmistakable presence” of fragments of HIV-1, HIV-2, and Simian Immunodeficiency Virus (SIV) in a genome of SARS-CoV-2.

Both Perez and Montagnier co-authored [a study](#) that showed 16 fragments of the HIV1, HIV2, and SIV retroviruses inserted into a contiguous part of the genome of SARS-CoV-2, which correlated with the findings of the Indian researchers.

The findings of the prominent scientists were swiftly dismissed by the mainstream media and smeared as a wild “conspiracy theory.”

Yet Pfizer, which has become a household name for its production and distribution of a [highly profitable](#) experimental gene therapeutic, aka COVID vaccine, is looking into an anti-HIV drug to counter COVID.

Speaking on CNBC’s [Squawk Box](#) on Tuesday, Pfizer CEO Albert Bourla said that if the federal regulators would work as fast as Pfizer, the pill could be available by the end of the year.

In addition to a convenient pill, the company is working on an injectable post-exposure COVID therapeutic.

Competition

Pfizer is not the only drug manufacturer working on a pill to prevent COVID. Merck & Co., Inc. and Swiss company Roche are also in the race.

Merck, which has partnered with Ridgeback Biotherapeutics, [announced](#) earlier this month that it has begun late-stage trials of its drug called molnupiravir.

[Roche](#) shared the news in June that its AT-527 oral drug produced positive interim results from a global Phase 2 study in hospitalized patients with mild-to-moderate COVID-19. The pill is being jointly developed with Massachusetts-based company Atea Pharmaceuticals, Inc.

To date, the only approved antiviral treatment for COVID in America is Gilead Science Inc’s intravenous drug remdesivir.



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