COVID
911

The Terry Herholdt Protocol
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Introduction to Terry Herholdt

“My research was initially based on practical applications of different forms and dosages of IVM through the past 30 odd years, in my cattle, horses, eland and warthogs. For many years I helped my husband run a 600 strong cattle feedlot, so I learned all about ivermectin products and the incredible effect on animals that came in and were doing poorly.

I used it alone and in combination and monitored body condition plus faeces/parasites if any. Over the past 38 years I had gathered a vast amount of knowledge in veterinary and medical fields, applying the One Health Initiative to my approach.

Then I started experimenting on myself. I had End Stage Chronic NeuroLyme disease. As I started treating myself and getting better, so my Lyme friends joined in. We created a group of intelligent, like-minded women, and discussed our results with each other. Each new case study was then searched on the internet using the chronic illness name and ivermectin. Every single time I would find scientific papers written on the subject, somewhere in the world.

I then started a team of people who would try to get a triple combination, revolutionary, global anti parasitic in the market, and registered a provisional patent. My team consisted of a top Swiss/German regulatory lady, a well-known clinical researcher, an advocate, a marketing manager and myself. We were blocked at each step.

When Covid came, I approached government. Numerous meetings about the use of Ivermectin came to nothing. By that stage I was already treating Covid patients with Ivermectin from April 2020.

Since 22 December 2020, I have devoted my time and knowledge to keeping our people safe, even during my own Covid, which I contracted on purpose, so as to be able to experience the disease first hand, and test my protocol. I’ve worked 16-18 hours a day on my phone, talking to sick people, advising them, sourcing vet meds, explaining which was safe and which was not.

I would love to publish my own papers one day. There is so much that I discovered in the past 5 years. Always enquiring, never afraid of the boundaries. And every time people just got better!”
Introduction to Ivermectin

Ivermectin was discovered in 1975 and came into medical use in 1981. It is on the World Health Organization's List of Essential Medicines. Ivermectin is FDA-approved as an antiparasitic agent.

This medication is used to treat certain parasitic roundworm infections. Curing parasitic infections helps to improve your quality of life. In people with weakened defence (immune) systems, curing roundworm infections can reduce the risk of developing a severe or life-threatening infection. Ivermectin belongs to a class of drugs known as antihelmintics. It works by paralyzing and killing parasites.

Ivermectin Facts:

Ivermectin was discovered in 1975 by Campbell and Ōmura and came into medical use in 1981.

It’s a human medication used to treat many types of parasitic infestations, such as head lice, scabies, river blindness, and others.

In veterinary medicine, it is used to prevent and treat heartworm in dogs, tick infestations and roundworm infections in livestock and game animals.

Ivermectin is proven to be one of the safest drugs in the world and over 3.7 billion people have taken it since it was discovered.

In 2015, Campbell and Ōmura won half of the 2015 Nobel Prize in Physiology or Medicine. It was awarded jointly to the discovery of Ivermectin after it profoundly improved the state of human health in 3rd-World countries.

Ivermectin is on the World Health Organization's List of Essential Medicines

In March 2020, the Front Line COVID-19 Critical Care Alliance (FLCCC) was created and led by Professor Paul E. Marik to continuously review the rapidly emerging basic science, translational, and clinical data to develop a treatment protocol for Covid-19.
In August 2020 the US National Institute of Health (NIH) placed Ivermectin on its list of non-recommended treatments for Covid-19 other than for scientific study. Ivermectin was the only repurposed drug to be placed on the unrecommended list.

Between August 2020 and January 2021, over 30 studies on Ivermectin have been released – all showing incredibly high efficacy for the treatment of all stages AND prevention of Covid-19.

In December 2020, Dr Pierre Kory of the FLCCC testified before the US senate to stress that Ivermectin is working. He asked for their assistance in speaking with the NIH to check their data analytics and to reconsider their non-recommendatory stance on Ivermectin. Dr Kory’s testimony can be viewed on the homepage of the FLCCC website. He repeatedly calls the effects miraculous.

The FLCCC in their review of Ivermectin state that it inhibits Covid-19 replication and binding to host tissue.

The FLCCC in their review of the Ivermectin data state that it prevents transmission and development of Covid-19 disease in those exposed to infected patients.

Ivermectin hastens recovery and prevents deterioration in patients with mild to moderate disease treated early after symptoms.


History

The avermectin family of compounds was discovered by Satoshi Ōmura of Kitasato University and William Campbell of Merck.

In 1970, Ōmura isolated unusual Streptomyces bacteria from the soil near a golf course along the south east coast of Honshu, Japan.

Ōmura sent the bacteria to William Campbell, who showed that the bacterial culture could cure mice infected with the roundworm Heligmosomoides polygyrus.

Campbell isolated the active compounds from the bacterial culture, naming them "avermectins" and the bacterium Streptomyces avermitilis for the compounds' ability to clear mice of worms (in Latin: a 'without', vermis 'worms').
Of the various avermectins, Campbell's group found the compound "avermectin B1" to be the most potent when taken orally.

They synthesized modified forms of avermectin B1 to improve its pharmaceutical properties, eventually choosing a mixture of at least 80% 22,23-dihydroavermectin B1a and up to 20% 22,23-dihydroavermectin B1b, a combination they called "ivermectin".

**Side Effects**

A very serious allergic reaction to this drug is rare. However, seek immediate medical attention if you notice any symptoms of a serious allergic reaction, including:

- Neck/back pain
- Swelling face/arms/hands/feet
- Chest pain
- Fast heartbeat
- Confusion
- Seizures
- Loss of consciousness
- Rash
- Itching/swelling (especially of the face/tongue/throat)
- Severe dizziness
- Trouble breathing

Common ivermectin side effects may include:

- Headache
- Muscle aches
- Dizziness
- Nausea
- Diarrhea
- Mild skin rash
Interactions & Contra-indications

Drug interactions can be confirmed on this site:

https://www.drugs.com/drug_interactions.html

There are no known drug interactions with ivermectin EXCEPT anti-rejection drugs for kidney/liver transplants.

The role of Ivermectin in the treatment of Covid-19

Ivermectin is an inhibitor of the COVID-19 causative virus (SARS-CoV-2).

A single treatment is able to affect a 5000-fold reduction in viral load after 48-hours in vitro.

1. Ivermectin inhibits the replication of many viruses, including SARS-CoV-2, influenza, and others
2. Ivermectin has potent anti-inflammatory properties with multiple mechanisms of inhibition
3. Ivermectin diminishes viral load and protects against organ damage in animal models
4. Ivermectin prevents transmission of COVID-19 when taken either pre- or post-exposure
5. Ivermectin hastens recovery and decreases hospitalization and mortality in patients with COVID-19
6. Ivermectin leads to far lower case-fatality rates in regions with widespread use

Rubbing versus Drinking

Applying Ivermectin TRANSDERMALLY via the skin into the fat cells, is five times more effective than oral usage. It reaches double the levels in the serum, compared to the same dosage taken orally.

Once in the fat cells, it is released systemically and 'side effects' are minimum. It bypasses the kidneys and liver, and goes straight to the lungs.

In the case of a five-day treatment for COVID POSITIVES, the daily dose then becomes an accumulative dose in the system which is far more effective.

By drinking the Ivermectin, it enters your gut and is metabolised via kidneys and liver. It may also cause discomfort and diarrhoea.

It is absorbed quickly and secreted quickly in faeces. It is NOT recommended orally for preventative use, as it has a half-life of approximately 18 hours.

Rubbing injectable ivermectin into the skin IS NOT THE SAME AS USING TOPICAL OINTMENT.
Injectables are designed, with carriers of small molecular size, to be absorbed at different rates from the fat cells based on the half life expectancy, hence the treatment will be long acting.

Ivermectin is LIPOPHYLIC. It binds with fat cells, where it is made 5 TIMES more readily available to the system.

Rubbing the 1% injectable into the skin is akin to injecting it UNDER the skin. Just less invasive. It is readily absorbable and reaches the fat layer, where it binds to the fat molecule and is slowly released into the system.

There are different ways of using veterinary ivermectin. Always stay within the original formulation guidelines for dosage.

The carriers have been specifically designed to give maximum performance, based on the recommended guidelines. Therefore:

1. Horse paste wormers and Sheep drenches must be ingested, based on weight guidelines.
   a. Horse paste wormers are marked off in 100kg marks with a mid-line for 50kgs.
   b. One would use them to the nearest higher 50kgs.
   c. Therefore, a 60kg person would use a 100kg dose.
   d. They contain a small % of Praziquantel, which is 100% safe. This is used in far greater amounts in humans to treat Bilharzia.
   e. This combination not only treats/prevents Covid, but is also a very effective, broad spectrum, anti-parasitic for humans.
   f. Sheep drenches are carried in a slightly oily base and are taken at 1ml/4kg human body weight.

2. 1% injectables are formulated to be injected directly under an animal’s thick skin, and absorbed quickly into the fat cells, where it is released slowly, into the system, and is five times more effective than oral dosing.
   a. Injecting it under human skin is invasive and causes severe irritation. However, used transdermally via skin not hardened by sun exposure, like tops of legs, arms and tummies, it is absorbed within minutes and deposited into the fat cells, from where it is released slowly as intended, due to formulation.
   b. If it is ingested, it is absorbed fast and secreted via faeces, within 18 hours average.
   c. I would recommend using a double dose, once, sublingually (under the tongue) in very sick covid patients, then reverting to transdermal use, which is ideal for ventilated patients.

The rubbing in of 1% injectable is highly effective and the Ivermectin molecule is small enough to be taken up transdermally with the correct carriers. Ivermectin pour-on products are successfully used on cattle and
game animals, easily penetrating their thick hide. By swallowing the injectable, you will only get a % of absorption based on each individual gut condition.

HUNDREDS OF THOUSANDS of covid cases have responded positively to transdermal application, here in South Africa and South America.

The use of Desloratadine or Loratadine - H1 antihistamines

Desloratadine or Loratadine antihistamine MUST be used when using Ivermectin.

The use of Desloratadine or Loratadine amplifies the mode of action of Ivermectin. It is not to combat an allergic reaction but as a receptor disruptor for micro parasites, which may be present within the parasites, destroyed by Ivermectin.

SARS-CoV-2 spike proteins are bound at the ACE2 receptors on the cell surface, by Loratadine and Desloratadine. This prevents them from entering the cell, where the virus replicates. Desloratadine is more effective, having long-acting properties.


Approved Ivermectin 1% injectables - used via skin

- Cevamec
- Ecomectin
- Ivermax
- Ivomec
- Ivotan
- Noromectin
- Virbamec
Protocol

PREVENTION:

3 days of Ivermectin, then every 7 days.
Either day 1, day 3, day 5 and then every 7 days, or 3 consecutive days, then every 7 days.
ALWAYS take 1 x Dazit antihistamine or Desloratadine antihistamine when using Ivermectin.

TREATMENT:

MILD SYMPTOMS:
First dose under tongue immediately upon any symptoms of sinus, colds or flu. Hold there for as long as possible, then swallow. It will help clear these illnesses even if you don’t have Covid.

Approximately 12 hours later, rub your next dose into your chest, tummy, inner thighs and upper arms.

24 hours later, for next 3 days, repeat transdermal treatment.

ALWAYS take 1 x Dazit antihistamine or Desloratadine antihistamine when using Ivermectin.

MODERATE TO SEVERE SYMPTOMS:
Double dose under tongue immediately
Double dose rubbed into skin 12 hours later
Single dose rubbed into skin every 24 hours after that, for 3 days (moderate symptoms)
OR;
Double dose rubbed into skin every 24 hours after that, for 3 days (severe symptoms)

DOSAGE:

Under 50kg  1.0ml
Under 75kg  1.5ml
Under 100kg 2.0ml
Under 125kg 2.5ml
Under 150kg 3.0ml
Under 175kg 3.5ml
Under 200kg 4.0ml

CHILDREN:
Children older than 2 years from 15kg - 50kg = 0.1ml/5kg body weight
(Weigh divided by 5 multiplied by 0.1)
Extra support meds:
1. Symbicort 160 inhaler - Two clicks twice a day for adults (Prescription required)
2. Cell Food oxygen drops - 24 drops in water in the morning (alternatively Absolute Oxygen tablets or Lung Support)
3. Expigen cough syrup thins the mucous
4. Vit C - 7000mg for first 3 days of treatment, then revert to 1000mg per day
5. Vit D3 - 5000ui - 10 000iu depending on severity of disease - daily
6. Zinc - 100mg daily
7. Disprin Extra Strength - 2 tablets twice daily for those not on blood thinners
8. Panado for those on blood thinners
9. Colloidal and Nano Silver for nebulizing

Saturation Levels (SATS):
90% or less - arrange to nebulize with Rx from doctor, or Ivermectin (dosage below) or silver (dosage below)
85% or less - arrange home oxygen
80% or less - hospital admission or supervised home care (nebulize 2-hourly with nano/colloidal silver or Rx)

IF HOSPITALIZATION IS NOT POSSIBLE, ARRANGE FOR PARAMEDICS TO ATTEND THE URGENT CASE

Ivermectin Nebulizer:
4.25ml of sterile or Pre-Boiled water plus 0.75ml Ivermectin 1% (without additives.
Put into nebulizer and use full 5ml before bedtime, or as needed once daily.
Silver Nebulizer - Start with 20ml undiluted Nano or Colloidal Silver in nebulizer for one hour, then use 5ml every 4-6 hours as needed.

DO NOT USE CORTISONE OR PREDNISONE BEFORE USING IVERMECTIN FOR AT LEAST 48 hours.

Covid Golden Rule...
TREAT HARD, TREAT FAST

Please remember that ALL medicine come with associated risks and remind the cases you work with of this. Taking any medication is done so at each person’s own risk.
The Covid-19 pandemic has touched the whole world. Fear has increased exponentially in all of us. No-one fears getting a flu, but most are scared of dying because of a flu. Unfortunately, Covid-19 kills, but it doesn’t have to.

Ivermectin is a safe, effective and affordable drug in the fight against Covid-19.

When someone requests Ivermectin, please keep in mind that in most cases you will have to emotionally support these people through their journey to recovery. If you are not able to do that, please rather refer them to someone within the Ivermectin circles, who will be able to do so.

The people are scared and will need your support and reassurance, some more than others.

FAQ

**Question:** Where can the drug be bought?

**Answer:** Veterinary grade Ivermectin is not registered in South Africa for human consumption and is only for sale as an anti-parasitic drug for livestock farming at agricultural co-operatives and veterinarians.

**Question:** Which Ivermectin animal products are safe for human consumption?

**Answer:** Drugs containing only 1% Ivermectin as active ingredient are safe - NB! stay away from drugs that contain other active drugs or have a 3.15% ivermectin content - usually indicated by "Super", "Gold", or Platinum on the packaging.

**Question:** How expensive are Ivermectin drugs?

**Answer:** Prices vary widely depending on the trader's profit margin. Larger packages (up to as much as 1 Litre) work out cheaper per dose than smaller packages (as little as 20ml) - you look at between R1 and R2 up to as much as R5 per 2ml adult dose.

**Question:** The packaging says "injectable", some people say it is drunk / swallowed - what is the best way to take it?

**Answer:** DO NOT try to inject it! It is formulated to spread through the fat layer under the skin. The drug is not absorbed as effectively via the gut. The best application is by rubbing it on the skin of the upper arms and upper legs and tummy.
**Question:** What is the recommended dose?

**Answer:** Please refer to the section “Protocol”. Simplified you can use it as follow:

- Children over 25kg: 0.5ml
- Children up to 50kg: 1.0ml
- Adults 51kg - 100kg: 2.0ml
- Adults 101 - 125kg: 2.5ml
- Adults 126kg - 150kg: 3.0ml
- Adults 151kg - 200kg: 4.0ml

**Question:** How often should it be administered preventively and as treatment respectively?

**Answer:** Preventative: Rub in weekly and take relevant antihistamine with it. When you already have symptoms: Rub in daily for 5 consecutive days with relevant antihistamine.

**Question:** Why should antihistamines be taken with Ivermectin?

**Answer:** Use one of the following drugs each time you use ivermectin: Dazit, Loratadine, Desloratadine or Allergex NON-DROWSY. It is not to prevent an allergic reaction, but is recommended for the control of micro parasites that in large numbers are released into the body when their host parasites are destroyed by the Ivermectin mode of action.

**Question:** Is there a danger of using Ivermectin with other drugs?

**Answer:** A slight effect may be observed in people using Warfarin due to Ivermectin's own blood regulating properties. The only contra-indication is the use of anti-rejection medication following a kidney/liver transplant.

**Question:** Is it safe to use Ivermectin during pregnancy?

**Answer:** No adverse effects have been observed in pregnant women elsewhere in Africa, South America or India, where Ivermectin has been used safely for decades. Pregnant women can use it conservatively if they observe covid symptoms for 3 consecutive days in the 2nd and 3rd trimester.
Question: Is Ivermectin safe and are there any contraindications for use?

Answer: Numerous studies report low rates of adverse events, with the majority mild, transient, and largely attributed to the body’s inflammatory response to the death of parasites and include itching, rash, swollen lymph nodes, joint pains, fever and headache. In a study which combined results from trials including over 50,000 patients, serious events occurred in less than 1% and largely associated with administration in Loa Loa infected patients. Further, according to the pharmaceutical reference standard Lexicomp, the only medications contraindicated for use with Ivermectin are the concurrent administration of anti-tuberculosis and cholera vaccines, while the anticoagulant warfarin, would require close monitoring. Another special caution is that immunosuppressed or organ transplant patients who are on calcineurin inhibitors such as tacrolimus or cyclosporine or the immunosuppressant sirolimus should have close monitoring of drug levels when on Ivermectin given that interactions exist which can affect these levels. A longer list of drug interactions can be found on the database of www.drugs.com/ivermectin.html, with nearly all interactions leading to a possibility of either increased or decreased blood levels of Ivermectin. Studies showing tolerance and lack of adverse effects in human subjects who are given escalating, high doses of Ivermectin, toxicity is unlikely. However, reduced efficacy due to decreased levels may be a concern. Finally, Ivermectin has been used safely in pregnant women, children, and infants.

Question: Can Ivermectin be given to patients with acute or chronic liver disease?

Answer: In regards to liver disease, Ivermectin is well tolerated, given that there is only a single case of liver injury reported one month after use that rapidly recovered. Ivermectin has not been associated with acute liver failure or chronic liver injury. Further, no dose adjustments are required in patients with liver disease. Ivermectin is merely metabolised by the liver.
Additional Reading

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3043740/


Resources

https://www.webmd.com/drugs/2/drug-1122/ivermectin-oral/details

https://en.wikipedia.org/wiki/Ivermectin

https://www.drugs.com/drug_interactions.html

https://covid19criticalcare.com/

**END**