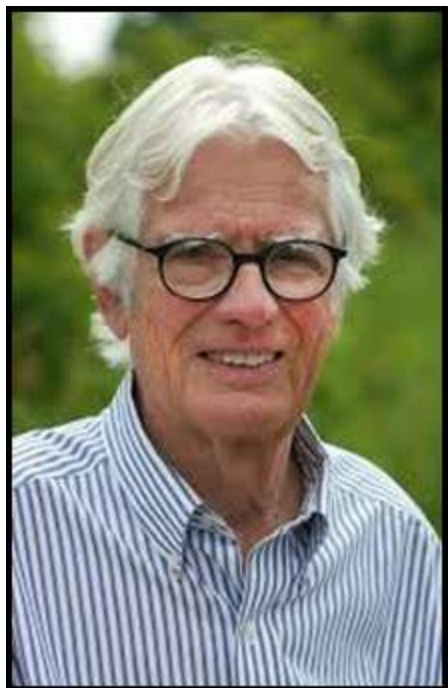


[Opinion](#)

Dr. Gifford-Jones: More research is killing COVID-19 victims



Dr. Gifford-Jones

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Aristotle, the Greek philosopher, wrote “There is a stupid corner in the brain of every wise man.” The best current example is the appalling lack of action by the Chinese government to fight COVID-19 with high doses of vitamin c—both as a clinical treatment for those who are infected and as a preventative measure to help halt the virus.

I applaud the doctor in a Wuhan hospital who announced the start of a randomized, triple-blind clinical trial to assess the effectiveness of 12-24 grams/day of intravenous vitamin C (IVC). But the results won’t be known for months. Meantime, people die needlessly.

Why do Chinese health authorities not know that we’ve already got enough research? Why does the World Health Organization (WHO), with its vast resources and expertise, dither on this issue? Vitamin C is cheap, harmless, and widely available—any pharmacy can make an IVC solution. IVC has been proven effective in reducing mortality from viral infections. Not to provide it to COVID-19 patients is akin to medical murder.

Proof is well documented by the late Dr. Lendon H. Smith in the Clinical Guide to the Use of Vitamin C, which outlines the research of Dr. Frederick R. Klenner. This pioneer painstakingly recorded his experience with vitamin C while successfully treating a variety of viral and bacterial diseases with IVC.

In addition to outlining the doses required to cure diseases, the Guide notes, “The patient should get a large dose of vitamin C in all pathological conditions while the doctor ponders the diagnosis.” And: “Unless our white blood cells, that fight infections, are saturated with vitamin C, they are like soldiers without bullets.”

The Guide explains that humans do not make vitamin C due to a genetic mishap that occurred eons ago. Moreover, stress of any kind quickly eats up vitamin C. But animals, such as dogs, normally produce up to 5,000 milligrams (mg) of vitamin C daily. If injured or an infection occurs, production increases to 100,000 mg daily.

Yet we humans are told by health authorities we need only 90 mg daily. So, I'd tell my doctor, "Don't believe that." If I ever face a stressful operation or have an accident where wound healing is vital, or if I incur an infection that can kill me, I want large doses of IVC!" I'd insist on this loudly, knowing most physicians are unaware of the benefits of large doses of IVC.

Dr. Lendon, a pediatrician, was criticized by his colleagues for using high doses of vitamin C for several pediatric problems. But since that time other doctors have documented cases that show the benefit of big C.

To add further evidence about IVC, I recently asked international members of the Orthomolecular News Service for their opinions on the best way to treat COVID-19 infection. These renowned professors and researchers reported that the use of IVC results in clinical improvement within two to three hours. And it would be their first recommendation in treating COVID-19.

The Chinese study is using the best methodologies. This will ensure irrefutable credibility among skeptics and critics. But I have no doubt about the outcome. It will show IVC is effective — like all the past studies of high dose vitamin C in fighting viral infections.

Dr. Frederick Klenner was not a charlatan. Nor were other professors who studied vitamin C. There is no financial reward for promoting false information about a remedy that is virtually free to manufacture and supply. The same cannot be said for many other "cures."

Waiting for the results of this study before treating patients with IVC is contributing to needless deaths. If such a delay happened to a member of my family, I would label it neglect and murder. And I would win in a court of law.

Dr. Ken Walker (Gifford-Jones) is a graduate of the University of Toronto and The Harvard Medical School. He trained in general surgery at the Strong Memorial Hospital, University of Rochester, Montreal General Hospital, McGill University and in gynecology at Harvard. He has also been a general practitioner, ship's surgeon and hotel doctor.

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