

Pfizer's New Drug – And Pharmacists Can Prescribe It!

**Pamela A. Popper, President
Wellness Forum Health**

While medical boards all over the country are investigating and often suspending or revoking the licenses of doctors who prescribe off-label drugs for COVID or speak out about COVID vaccines, pharmacists have gradually gained the right to practice medicine. For example, pharmacists can override doctors' decisions by refusing to fill prescriptions written by doctors for drugs to treat COVID, and in many states they have been mandated to notify the medical board when a doctor prescribes drugs like ivermectin or HCQ. This reporting then triggers disciplinary action.

Now, the FDA has specifically authorized pharmacists to screen patients and to prescribe Paxlovid, a recently approved drug made by Pfizer for the treatment of COVID-19.¹

The insanity of this is hard to express. Ivermectin and HCQ have been demonstrated to be safe and effective for many uses and for decades. They are inexpensive and in some places are available over the counter. According to many government and health officials, doctors should not prescribe these.

On the other hand, pharmacists can and should prescribe Paxlovid, a new, experimental drug approved for use under an Emergency Use Authorization. There are no long-term safety studies supporting its use, and the drug is miserably ineffective. In fact, it makes patients worse. Mr. Fauci himself admitted that after taking Paxlovid, his symptoms returned and were worse than before. Here is what he told reporters:

"I turned positive about two weeks ago, with very minimal symptoms. When they increased, given my age, I went on Paxlovid for five days."

After five days on the drug, he tested negative. He had three consecutive days of negative tests. On the fourth day he tested positive again.

He continued, "It was sort of what people are referring to as a Paxlovid rebound. "Over the next day or so I started to feel really poorly, much worse than in the first go around."²

Even worse, studies show that people can pass COVID to others during a rebound. This led the CDC to issue new guidance concerning Paxlovid. According to this guidance, patients with rebound symptoms should isolate for five full days and should wear a mask for 10 days after the rebound.³

What's not to like about a drug that causes the return of worsening COVID symptoms and promotes spread of COVID to others! And it can be obtained easily from your local drugstore.

But use caution: this drug is not only counter-productive, it's outright dangerous. Paxlovid contains both Nirmatrelvir and Ritonavir (Norvir).⁴ Ritonavir is prescribed to AIDS patients and carries a black box warning stating that "potentially serious and/or life-threatening adverse events" can result from taking Ritonavir in combination with several commonly prescribed drugs. These include antiarrhythmic drugs like amiodarone; antifungal drugs, Colchicine (prescribed for gout), antipsychotics, St. John's Wort, statin drugs like Lovastatin and simvastatin, and sedatives like midazolam (Versad) and triazolam (Halcion).⁵ Side effects of Ritonavir include diarrhea, nausea, vomiting, heartburn, stomach pain, loss of appetite, headache, dizziness, tiredness, weakness, changes in taste, tingling/numbness in hands or feet or mouth, and changes in the shape or location of body fat (especially in the arms, legs, face, neck, breasts, and waist. Some of the more serious side effects include persistent muscle aches or weakness, joint pain, vision changes, signs of infection, signs of hyperthyroidism, and signs of Guillain-Barre Syndrome.⁶

Of course, pharmacists are well-versed on drugs, side effects, and interactions, and can ask patients about the drugs that they are taking. But that sounds a lot like practicing medicine, an important point. Pharmacists are not doctors. Their role has historically been to fill prescriptions, and to help patients understand how to take the drugs or the side effects of drugs prescribed by doctors.

So to summarize: doctors can be disciplined and even put out of practice for prescribing drugs to patients with whom they have a doctor/patient relationship, while pharmacists are now allowed to practice medicine. Additionally, pharmacists have the power to evaluate decisions made by doctors and if they do not like these decisions, they can notify medical boards and help to start an investigation that might end the careers of those doctors. Welcome to COVIDland!

Note: One of our major initiatives is defending doctors who are being investigated or disciplined by medical boards. To support our efforts, visit www.makeamericansfreeagain.com.

¹ US allows pharmacists to prescribe Pfizer's COVID-19 pill. *News4Jax* July 6 2022

² Brenda Goodman, Virginia Langmaid. Fauci says his COVID rebounded after Paxlovid. *CNN Health* June 30 2022

³ CDC Health Advisory. COVID-19 Rebound After Paxlovid Treatment. May 24 2022.

https://emergency.cdc.gov/han/2022/pdf/CDC_HAN_467.pdf

⁴ <https://www.covid19treatmentguidelines.nih.gov/therapies/antiviral-therapy/ritonavir-boosted-nirmatrelvir--paxlovid-/>

⁵ https://www.accessdata.fda.gov/drugsatfda_docs/label/2017/209512lbl.pdf

⁶ <https://www.rxlist.com/norvir-side-effects-drug-center.htm>