My Medical Problem



by Carl Nelson

When I began calling about searching for a supplier of ivermectin in the latter stages of the Covid hysteria, one of my stops was my personal physician. When I called, I got the receptionist who said, "You mean the horse dewormer?" "No," was the answer.

I chose, (wisely I believe) not to belabor either the receptionist nor my doctor with a contradictory view. I still needed a physician for other matters and the other prescription drugs only he could provide. I eventually found a credible ivermectin provider online, who sent my script to a compounding pharmacy in Tennessee which in turn posted me the ivermectin tablets. The cost was certainly quite a bit greater than it might have been had my personal physician been willing to write me the script. But then, even if he had, I might not currently have a physician, as he probably would have gotten himself relieved of his hospital privileges. I've

made it a point since not to broach with him either the matter of ivermectin nor Covid 'vaccination', and perhaps he has also made it a point not to broach the matter with me — which brings me to the point of this essay.

Rather like patches, stretches even, of open water which reveal themselves with the spring ice thaw when the river and lake ice break up, so too, is the relationship with my personal physician revealing large gaps as our surrounding cultural insanity heats up. There are areas in which I still depend upon his expertise, guidance and medical gatekeeper position — and other areas where I'm finding myself pretty much at sea. But the stickler within the whole situation is that I am loath to discuss this with him, and for the following reasons.

I just received a letter the other day informing me that my physician has recently joined a health corporation with some of the benefits which would accrue to me. appointment, I noticed he was looking a little 'worn'. I'd a 9 am appointment which took place an hour later. I told him the practice looked busy. He gave me the semper fi smile. my mind he looked like Lucile Ball on the chocolate candy conveyor belt production line. I imagine they have him running on the clock throughout the day. My wife complained to one of her referral doctors about how rude and unhelpful her office helpers were. The doctor sympathized but said there was nothing she could do. They worked for the hospital corporation and not her. It seems she and her husband had spent years building a good practice, but that running an independent practice had eventually become untenable. Provider billings, regulations and office management matters had ballooned so much in the intervening years that they simply had no time left for the actual practice of medicine. So they had sold the practice to the local hospital corporation and now they worked for them. They made money but they now were no longer the sole medical decision makers. The

corporation decided the protocols and also their assistants. They would soon be retiring from the profession altogether. I imagine my personal physician is in the same situation, but well short of any retirement escape.

Following the Covid debacle I no longer trust a hospital nor their corporate entity to be acting in my best interests, and nor, really, can I completely trust the physicians who work It's been documented that these entities refused inexpensive treatment with proven medications (ivermectin, for example) in lieu of treatments with drugs such as remdesivir, with serious side effects. Patients might come in for a unrelated problem, be tested repeatedly for Covid until a positive result was had, then kept in the hospital and given treatments which worsened their condition, isolated and prevented them from leaving, until finally venitilation and death — for which the hospital would receive thousands of dollars in staggered recompense with a final payout. also no longer trust the CDC, the FDA, nor (don't make me laugh) the WHO - all of whom have been shown to peddle lies and deceits throughout the pandemic. Nor can I trust the legacy press nor the social media nor search engines to give me the factual information I need. And first, and last, I cannot trust the pharmaceutical industry. I believe what President Trump says when he emphasizes that they are not coming for him. They are coming for us, and he is just in the way.

In 1975 I received my MD degree from the University of Washington, but quit medicine at that point. I would return questions about my leaving with the joke: "I have probably saved more lives by quitting medicine than most doctors have by continuing." I had no idea that this might turn prophetic.

I'm currently reading "Turtles All the Way Down/ Vaccine Science and Myth" by authors unnamed. This is probably the first serious non-fiction book I have read in which the authors' identities are redacted. Such is the climate of

scientific discussion which nowadays prevails. I'm now up to pg. 147 of "Turtles All the Way Down / Vaccination Science and Myth". And it seems Occam's Razor applies: the Covid corruption of science and the public sphere were simply an extension of the usual way of oversight of business in the vaccination game, seemingly since its origins. Hence, the book's title: the vaccination grift is a pleasant confection supported by fantasy scientific findings all of the way down. It is shocking reading. "...vaccine trials are designed and performed in such a way as to ensure that the true extent of adverse events is hidden from the public. There is not a single vaccine in the US routine childhood vaccination program whose true rate of adverse events is known."

It would take a Pollyanna to think that this pharmaceutical tiger had changed its spots when dealing with vaccinations and drugs. Currently I stopped taking my current medication, Crestor, which is a statin for treating "high cholesterol and triglyceride levels. This may reduce the risk of heart attack, stroke, and related health conditions." Indeed, it apparently had returned my cholesterol and lipid profile within the green. But other sources indicate that it may also cause increased risk of strokes and heart attacks in certain demographics. (Note the clever wording "may reduce the risk" in the effects statement.) Whether this drug actually does what is intended is not addressed, but you will definitely die with good lab values. My genetic inheritance indicates a good probability of living into my 90s. At this point I trust my body's health plan better than the pharmaceutical industry's. (As an added note, there is some evidence that beyond the profile cholesterol levels may play a part in combating cancer.)

My problem is how to handle this problem with my doctor. He is going to notice my changed lab values at my next check-up. It's not that easy to find a physician back here. You literally have to apply for the position of patient. How will

he feel about a patient who rejects his advice? Will a discussion be useful? Because, more to the point, how will his corporate bosses feel about a patient who will not follow their protocols? And how will the pharmacological and regulatory entities feel about a patient as such who rejects their medications?

Like difficulties are arising with referrals, also, as I increasingly need to look after my own health care in lieu of the default level of trust I once relied on. On the other hand, I don't have their experience, so how much should I rely on my own research? An honest conversation would seem to be something that's due.

I suppose I'll have to give it a try.