PRESS RELEASE

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Starts-------

Expert scientists welcome the news of UK Government-funded research into ivermectin for Covid-19 but question its merit.

A just-published, peer-reviewed study already <u>clearly shows</u> that ivermectin prevents and treats Covid-19 and has the potential to save and improve countless lives in the UK and worldwide right now.

The strength of evidence for ivermectin has this week been supercharged by the publication of a gold standard review of 24 randomised trials conducted in 15 countries among more than 3400 people worldwide, proving infections fall and deaths are dramatically reduced when ivermectin is administered. Published in the American Journal of Therapeutics, the most rigorous statistical standards were applied by world-leading researchers, biostatistician Mr Andrew Bryant and medical doctor and researcher Dr. Tess Lawrie.

Responding to the news of the UK trial Dr. Lawrie is exasperated: "Contrary to mainstream media reports, the evidence is that ivermectin has already been clearly proven to work against covid. In fact, there is more evidence on ivermectin than on any other treatment option for Covid, and far more safety data than any of the novel therapies."

"More placebo-controlled clinical trials of ivermectin are unethical and are definitely not needed. We know ivermectin saves lives. The investigators of the PRINCIPLE trial also know this, as we informed them months ago. We remain open to assisting them in understanding the available evidence."

"We trust that the MHRA will facilitate rapid approval of this low cost, effective and safe generic medicine, and that ivermectin will be made widely available, so that Covid is beaten, the economy can recover, and the faith of the British public is restored."

Ivermectin is a Nobel prize-winning medication, originally developed in the 1980s to treat parasitic infections. With its impeccable safety record, over 40 years and 4 billion doses, it has been so successful that it is listed by the World Health Organization (WHO) as one of its 'essential' medicines. Ivermectin's potent anti-viral properties work powerfully against Covid-19 by blocking spike proteins, inhibiting SARS-CoV-2 replication, and reducing inflammation. Ivermectin also works against variants of the virus and is showing promise against long-covid.

Dr Lawrie, founder of Bath-based Evidence Based Medical Consultancy, which analyses medical data for governments and NGOs, including WHO themselves, is determined overcome these barriers. "Our report is built on rock solid evidence from internationally respected medical professionals, and it proves that ivermectin is a solution to the covid health emergency. It is ready and waiting to save and improve millions of lives. Governments can no longer ignore it. It is everyone's right to have access to this safe and effective treatment."

Joining together with many other concerned doctors and medical professionals earlier in the year, Dr Lawrie helped establish the not-for-profit BIRD Group (British Ivermectin Recommendation Development) to specifically research and assess ivermectin and alleviate suffering. It has a fast-growing supporter base of affiliates and thousands of individuals.

Dr Lawrie is a most unlikely campaigner. "All my life I have been a doctor, dedicated to improving people's health above all else. In taking the Hippocratic oath I swore to protect patients and I find that, now, I also need to become a campaigner to ensure that the truth about ivermectin is heard and lives are saved. We should follow the science. The evidence is clear; ivermectin works".

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ADDITIONAL NOTES:

A meta-analysis pools data from a number of randomised trials to estimate an overall effect thus reducing the impact of statistical anomalies. Meta-analysis is regarded as the gold standard for medical evidence.

Despite the large body of evidence showing that ivermectin works against covid-19, the message of its efficacy and safety does not seem to be reaching key decision makers, including the WHO. This is raising concerns within the medical community and beyond. For example, earlier in June, the Indian Bar Association lodged a legal complaint alleging that the WHO is responsible for disinformation on ivermectin.

For more information:

There is a lot more to say about ivermectin and how it has been handled by government and we welcome contact from all media, **especially investigative journalists.**

Please email media@bird-group.org for more information or to arrange an interview with the authors.

Also please find more information at https://bird-group.org/meta-analysis-paper/

View the published report at the American Journal of Therapeutics website here

Report Details:

TITLE
 "Ivermectin for prevention and treatment of COVID-19 infection: a systematic review, meta-analysis and trial sequential analysis to inform clinical guidelines"

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More information about the authors below.

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ABSTRACT
Background: Re-purposed medicines may have a role against the SARS-CoV-2 virus. The antiparasitic ivermectin, with anti-viral and anti-inflammatory properties, has now been tested in numerous clinical trials.

Areas of uncertainty: We assessed the efficacy of ivermectin treatment in reducing mortality, in secondary outcomes, and in chemo-prophylaxis, among people with, or at high risk of, covid-19 infection.

Data sources: We searched bibliographic databases up to April 25 2021. Two review authors sifted for studies, extracted data and assessed risk of bias. Meta-analyses were conducted and certainty of the evidence was assessed using the GRADE approach and additionally in trial sequential analyses for mortality. Twenty-four RCTs involving 3406 participants met review inclusion.

Therapeutic Advances: Meta-analysis of 15 trials found ivermectin reduced risk of death compared with no ivermectin (average Risk Ratio 0.38, 95% confidence interval (CI) 0.19 to 0.73; n=2438; I2=49%; moderate-certainty evidence). This result was confirmed in a trial sequential analysis (TSA) using the same DerSimonian-Laird method that underpinned the unadjusted analysis. This was also robust against a TSA using the Biggerstaff-Tweedie method. Low-certainty evidence found ivermectin prophylaxis reduced covid-19 infection by an average 86% (95% CI 79% to 91%). Secondary outcomes provided less certain

evidence. Low certainty evidence suggested that that there may be no benefit with ivermectin for 'need for mechanical ventilation', whereas effect estimates for 'improvement' and 'deterioration' clearly favoured ivermectin use. Severe adverse events were rare among treatment trials and evidence of no difference was assessed as low certainty. Evidence on other secondary outcomes was very low certainty.

Conclusions: Moderate-certainty evidence finds that large reductions in covid-19 deaths are possible using ivermectin. Employing ivermectin early in the clinical course may reduce numbers progressing to severe disease. The apparent safety and low cost suggest that ivermectin is likely to have a significant impact 27 on the SARS-CoV-2 pandemic globally.

About BIRD

British Ivermectin Recommendation Development was created by concerned doctors and medical professionals earlier in the year, Dr Lawrie helped establish the not-for-profit BIRD Group to specifically research and assess ivermectin and alleviate suffering. It has a fast-growing supporter base of international affiliates and thousands of individuals. More information

About the Authors

Mr. Andrew Bryant

Population Health Sciences Institute, Newcastle University, Newcastle upon Tyne, UK
Mr. Bryant (MSc) is a Biostatistician with experience in clinical trials and systematic review methodology based at Newcastle University, UK. He has published a vast number of systematic reviews and final study reports. His expertise in systematic reviews broadens the expertise in the Biostatistics Research Group in Population Health Sciences Institute at Newcastle University. He is also statistical editor for the Cochrane Gynaecological and Neurological Cancer Review Group. Alongside his latest Covid related research, he is completing his PhD doctorate on primary surgery for advanced ovarian cancer. He has an array of impressive academic metrics, including his peer-reviewed work being cited well in excess of 4000 times. He has complete equipoise and has never declared any conflicts of interest in any of his academic research.

Dr. Tess Lawrie

<u>Evidence-Based Medicine Consultancy Ltd.</u>

Tess is the Director of E-BMC Ltd, and EbMCsquared, a community interest research company. She is committed to improving the quality of healthcare through rigorous research. Her range of research expertise, based on research experience in both developing and developed countries, uniquely positions her to evaluate and design research for a variety of healthcare settings. Tess is a frequent member of technical teams responsible for developing international guidelines. Her peer-reviewed publications have received in excess of 3000 citations and her ResearchGate score is among the top 5% of ResearchGate members.

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