

An overview of the MATH+, I-MASK+ and I-RECOVER Protocols

A Guide to the Management of COVID-19

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This is our recommended approach to COVID-19 based on the best (and most recent) literature. This is a highly dynamic topic; therefore, we will be updating the guideline as new information emerges. Please check on the FLCCC Alliance website for updated versions of this protocol. www.flccc.net



Intravenous **M**ethylprednisolone
High Dose Intravenous **A**scorbic Acid (Vitamin C)
Thiamine (Vitamin B1)
Low Molecular Weight **H**eparin
+
IVERMECTIN - Statin - Zinc - Vitamin D - Famotidine - Melatonin



Disclaimer: The information in this document is provided as guidance to physicians World-Wide on the prevention and treatment of COVID-19. Our guidance should only be used by medical professionals in formulating their approach to COVID-19. Patients should always consult with their physician before starting any medical treatment.

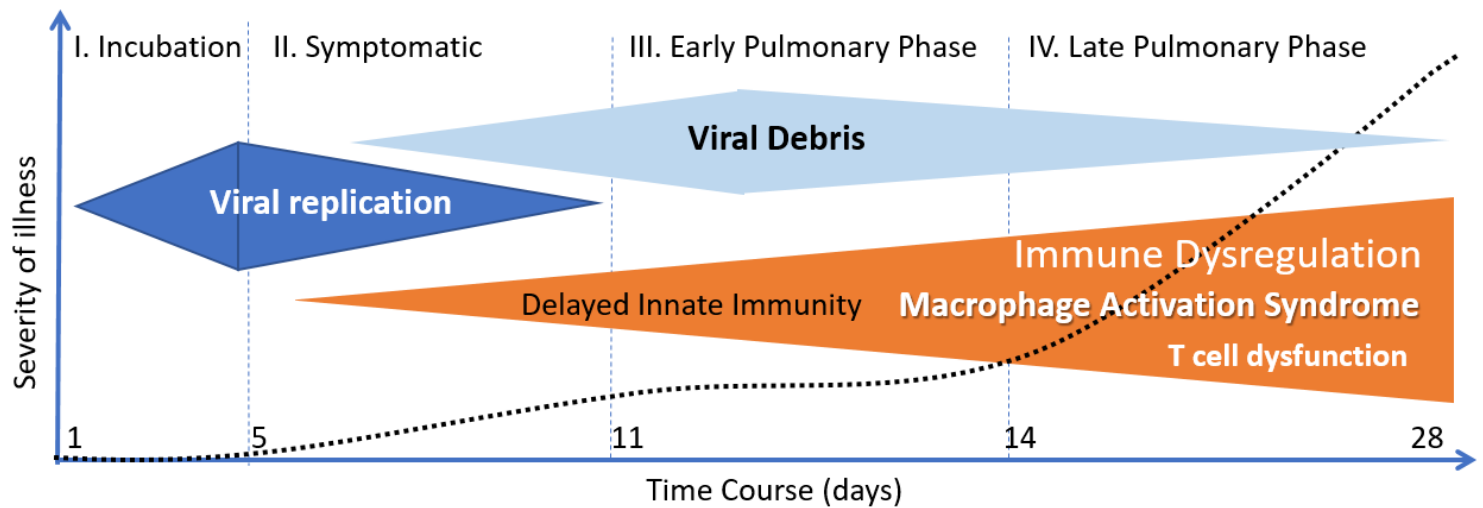
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Figure 1. The course of COVID-19 and General Approach to treatment



	Time Course (days)			
Ground-glass infiltrates	+		++	
Clinical Symptoms	Fever, malaise, cough, headache, diarrhea		SOB – Mild hypoxia ≤4 L/min N/C & aSat < 94%	
Treatment approach	Antiviral Rx		Anti-inflammatory Rx	
Potential therapies	Monoclonal Antibodies		Methylprednisolone 40 mg q 12 inc. to 80 - 250 mg if reqd.	
	ASA + Gargle		Enoxaparin 1mg/kg q 12 Enoxaparin 60mg/day	
	IVERMECTIN 0.2 -0.4 mg/kg x 2-5 doses		IVERMECTIN 0.4-0.6 mg/kg for 5 doses	
	Melatonin + Vitamin D + Vitamin C +Flavanoid + Zinc + Omega 3's + Statin + Fluvoxamine			

THIS IS A STEROID RESPONSIVE DISEASE:

HOWEVER, TIMING IS CRITICAL-

Not too early Not too late.

Table 1. Pharmacological therapy for COVID by stage of illness: What has worked and what has failed*

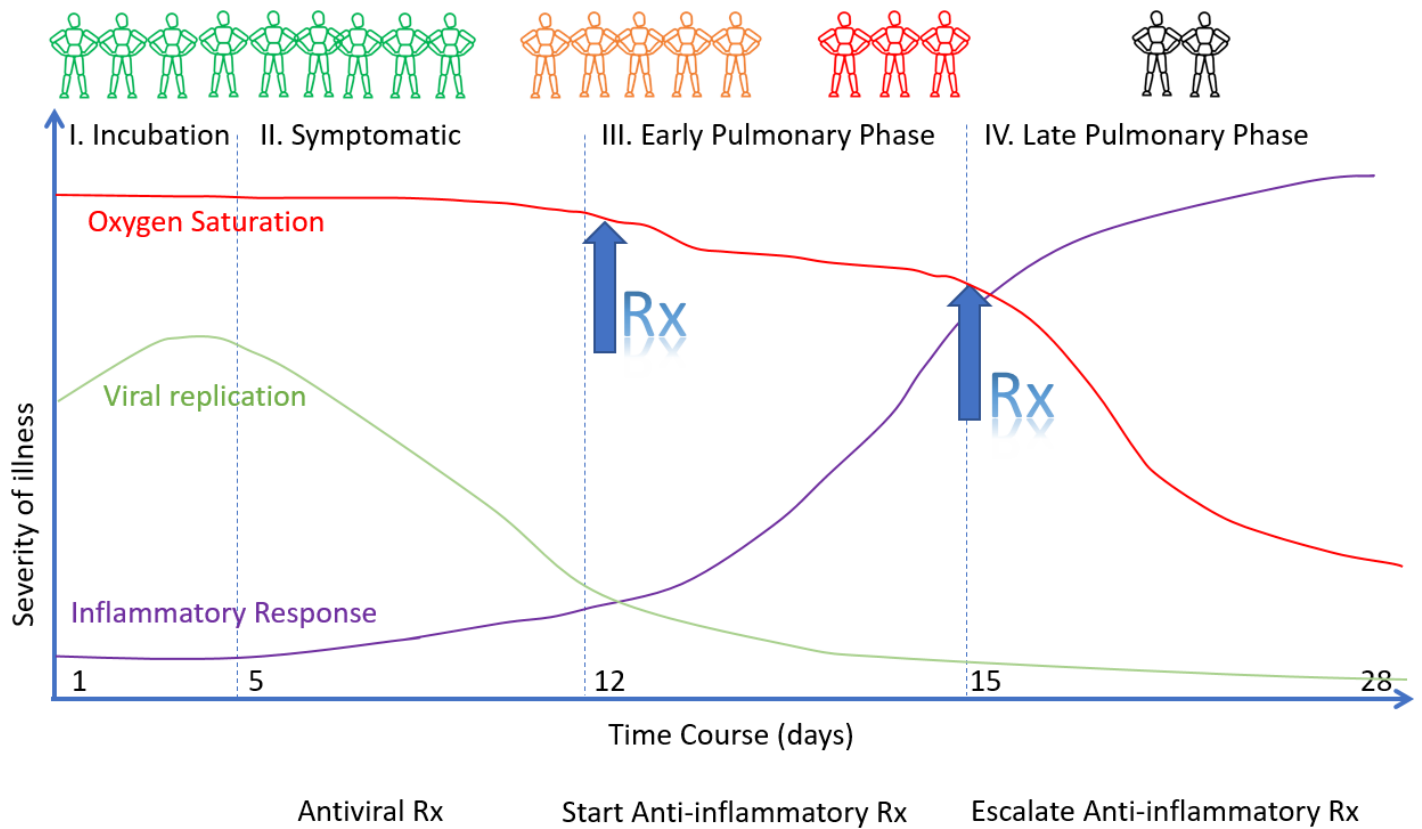
	Pre-exposure/ Post-Exposure/Incubation	Symptomatic Phase	Pulmonary/ inflammatory phase
Anti-androgen Rx	?? Benefit	BENEFIT	BENEFIT
Ivermectin	BENEFIT	BENEFIT	BENEFIT
Corticosteroids	n/a	Trend to harm	BENEFIT
LMWH	n/a	n/a	BENEFIT
Monoclonal Abs	BENEFIT	Marginal Benefit	Harm
Hydroxychloroquine	?? Benefit	Unclear benefit	?Trend to harm
Remdesivir	n/a	No Benefit	Reduced time to recovery? No mortality benefit
Lopivinar-Ritonavir	n/a	No benefit	No benefit
Interferon α/β	Inhaled ? Benefit	No benefit	Harm
Tocilizumab	n/a	n/a	Unclear Benefit
Convalescent Serum	n/a	No benefit	No Benefit
Colchicine	n/a	Unclear benefit	No Benefit

*Based on randomized controlled trials (see supporting information below)
 ?? based on observational data

Randomized Controlled Trials



Figure 2. Timing of the initiation of anti-inflammatory therapy



Note: Viral Replication in Figures 2 and 3 are typical for the original Wuhan SARS-CoV-2 virus. SARS-CoV-2 delta and gamma (P1) variants may present prolonged duration of viral replication. Furthermore, the time course from incubation to symptom onset and to the pulmonary phase may be shortened.