

Has the Media Colluded with the Deep State to Prevent COVID Treatments?

There has been a lot of misinformation around COVID-19. One would think all Americans and the media would be working to find the best possible solutions. Unfortunately that does not appear to be where humanity stands today, and **once again we are asking Economic Patriots to take action!**

It has become obvious that the media, social media, and certain health authorities have colluded to control the health narrative. If you say anything contrary to that narrative, you will be derided, ridiculed, and even silenced. Economic War Room had a video on YouTube banned because it dared to suggest that a potential treatment for COVID-19 was being studied. Even the President has been attacked for suggesting that we should look at a possible treatment.



The vitriolic response to hydroxychloroquine and oleandrin and anything outside a big-Pharma response seems insane, even “anti-science” according to a respected Yale professor of epidemiology. But if you look behind the pushback on promising treatments, you realize that there are two powerful forces at work.

- The first is **corrosive politics**, wanting President Trump to look bad at any cost.
- The second is **greed**, wherein there are hundreds of billions of dollars allocated to vaccine makers to develop a “cure,” treatment or preventative.

This is a high-stakes game and your liberty, our economy, our nation’s health, and your future are at stake.

Your Mission: To recognize the corrosive Economic War waged against our nation's health and economy. Also, to see how we can take action together to expose the Orwellian anti-science approach and make certain that viable treatments are properly evaluated.

For Yourself:

1. To learn how to sift through the double-speak and find the truth.
2. To understand the political narrative and how to counter it.

Take Action with Others:

3. To expose the truth to your circle of influence.
4. To sign a petition demanding that health authorities rely on science and not manipulation.

Ep. 3-109 (OSINT) Open Sourced Intelligence Briefing. This includes quotes and summaries of conversations in the Economic War Room with Kevin Freeman and Andrew Whitney. Andrew is Vice Chairman of Phoenix Biotechnology. He joins Kevin Freeman in the Economic War Room to share Phoenix Biotechnology's progress and what needs to happen now!

A Case Study of Weaponization?

The Narrative behind potential COVID-19 Treatments

"Orange Man Bad" so Don't Look Behind the Curtain



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A. The Background:

There is a long history and background to this potential COVID solution. How it became politicized.

- Mike Lindell (MyPillow) is obviously a successful businessman. He was respected as well until he endorsed President Trump.
- Lindell went with HUD Secretary Ben Carson (who is a world-renowned brain surgeon and a member of the COVID task force) and Andrew Whitney (vice Chairman of Phoenix Biotechnology) to meet with President Trump and share what they believed to be promising results on a potential treatment for COVID (Oleandrin branded as Serrativir).
- The potential treatment has been studied for decades and recently tested by prestigious labs including Fort Detrick, UTMB, and MD Anderson.
- President Trump listened, asked questions, and said that we should look into it.
- All of that is completely appropriate.

B. The Hit – Anderson Cooper, Axios, and Others Attack.

Anderson Cooper “Hit” on Mike Lindell is just one example of the media hysteria.

- [Axios](#) ran a very negative story that was picked up by major news outlets around the world.
- [Anderson Cooper](#) invited MyPillow founder and philanthropist Mike Lindell for an interview. It turned out to be a huge effort to discredit and attack him.
- Oleandrin was misreported as “dangerous” and “snake oil” without any basis in fact or reasoning.
- The goal was to make President Trump look bad and to discredit what may be a very promising treatment for a dangerous disease.

C. The Pattern – If this looks familiar, it is because it has happened before.

A pattern has emerged with Oleandrin following what has happened with Hydroxychloroquine and other promising treatments.

- Hydroxychloroquine has been under attack since it was first suggested as a possible treatment.
- Despite plenty of scientific support, politicians and the media have attacked its use.
- A flawed study was produced by Lancet to ridicule the use of hydroxychloroquine but was so flawed that it had to be retracted.
- Many physicians report tremendous success with hydroxychloroquine but have themselves been attacked.
- Politicians have sought to ban the use of hydroxychloroquine.
- The media has relentlessly attacked hydroxychloroquine.
- Social media has silenced almost every voice in favor of hydroxychloroquine.
- A massive disinformation campaign has been unleashed to obscure the success of this inexpensive, well-documented drug that is readily available and used successfully around the world for decades.
- We had a YouTube BANNED because we dared mention the hope for a treatment.

1. A Look At What Should Be Happening to Advance Promising Therapies for COVID-19.

- Scientists should explore potential treatments and cures based on science.
- Promising treatments should be promoted and supported.
- The media should report without bias.
- Our health should not be politicized.
- Oleandrin should have been reported as promising based on its potential.

2. What are they afraid of?

Andrew Whitney, Vice Chairman of Phoenix Biotechnology Provides more Information on Oleandrin and The Three Main Lines of The Media Attack.

A. What is Oleandrin?

Oleandrin is an active compound extracted from *Nerium oleander*, a naturally occurring American plant. PBI's research to date suggests that the extract **prevents key viruses from correctly forming their protective "envelope"**, rendering the virus progeny non-infective; the virus is then unable to overwhelm the host and its ability to spread itself is severely impaired. In this way, **oleandrin** may help "flatten the curve" and curtail the pandemic. Due to its efficacy against the viral envelope, it is considered a *platform solution* with wide-spectrum applicability to address **multiple viral pathogens** and **their mutations**.

Oleandrin has been studied extensively for decades in prestigious labs and clinical trials for cancer.


1. [Click here](#) for a summary of many of the studies performed to date.
2. Studies have been conducted since the 1930s in regard to heart issues, as an antibacterial, and for pain relief. More recent studies have been conducted regarding cancer treatment and as an anti-viral ([LINK](#)).

B. According to Andrew, There are Three Main Lines of the Media Attack:

1. **That there was somehow an "end run" around normal protocols to get to the President for a political approval.** According to Andrew, this is completely false.
 - a. Phoenix Biotechnology has been following protocol since April with the FDA.
 - b. The meeting was at the suggestion of Dr. Ben Carson who is a world-renowned brain surgeon and on the COVID task force.
 - c. All they are asking is for the opportunity to be properly reviewed based on prior studies and for a fair review if further study is required.
2. **That Oleandrin is dangerous, being derived from a poisonous plant.**
 - a. Many medicines are made from poisonous materials but refined and properly dosed.
 - b. Many foods and spices (such as nutmeg) can be poisonous at extremely large doses.

- c. According to Andrew, the dosage is 1/16th the amount that would be considered dangerous to humans. To be at risk, he suggests, would require the equivalent of drinking a pint of oil (since the oleandrin is carried in oil), something no human could do. Using another analogy, it may be safe to drive at 70 mph on a Highway but certainly not safe (or possible) to drive 16x faster (1,120 mph).
- d. According to Andrew, the safety profile in the cancer clinical trials has been outstanding.
- e. The safety key is that it must be properly processed and dosed. That is true for virtually all medicines and supplements.

3. That there's no proof for this, it's just "snake oil."

- a. This ignores the very legitimate studies that have taken place since the 1930s.
- b. There are multiple clinical trials for various indications that demonstrate potential efficacy.
- c. In vitro lab studies and animal studies have demonstrated effectiveness against COVID, Ebola, and other envelope viruses.
- d. Even among the most critical reviews have been suggestions that this should be studied further.
- e.  There is a peer-reviewed study presented for publication but the once interested publisher has now become wary due to the publicity and politicization. **ALERT**
- f. There is tremendous anecdotal evidence to suggest efficacy against COVID including a non-randomized clinical trial underway.
- g. The suggested mechanism of action is scientifically rational.

You can **hear the actual media interviews given and compare** them to the articles that were written. This will give you a good understanding of how everything was twisted to create a false media narrative. [f.](#)

3. Why we must not accept the media narrative and demand proper science be explored.

- People are dying. In just the past two months according to CDC data, the number of dead Americans exceeds the capacity of Madison Square Garden.
- The economy is hurting. We've seen businesses ravaged and mass unemployment from the many countermeasures attempted to stop COVID-19.
- In the nine months since this began, we have not delivered a single approved drug, treatment, cure, remedy, or other therapeutic or vaccine despite virtually unlimited resources provided to do so.
- The medical advice given has been conflicting from the start. Don't quarantine. Do quarantine. Don't wear masks. You must wear masks. It is airborne. It's not airborne.
- Oleandrin has shown tremendous promise and can be provided abundantly and at very low cost compared to other suggested treatments. Is it wrong for a Cabinet Secretary and experienced medical doctor to share that information with the President? If not, why all the fuss?
- According to Ben Carson, Oleandrin should be considered for proper FDA Clinical Trials. It should not be dismissed based on falsehood.

"If you ate 16 times the normal serving of nutmeg or tried to drive 16 times the speed limit, it would not go well for you." –Andrew Whitney

Why should you care?

- Your health may be at stake. We should explore every promising treatment, not just those slated to make billions of dollars for big companies.
- Our front-line physicians have been silenced or sidelined.
- We cannot allow a handful of big companies to so completely control the narrative for their personal profit.
- Our economy is at stake. Last quarter American GDP fell at almost a 33% rate.
- This pandemic has devastated small business and resulted in massive Federal deficits.
- Your liberty is at stake. If you can be lied to and deceived over something this important, what else will they try? We must make our voice heard demanding honesty and integrity from our government and media.



In the **Economic War Room®**, we encourage Americans to be the “small ships that make the difference.” You cannot solely rely on the government or the president to solve America’s problems. You have to make a difference. It is up to you to help take our country back and create a voice for economic liberty. [The small ships are based on Churchill’s Operation Dynamo that rescued the British Expeditionary Forces in the Miracle of Dunkirk].

Action Steps: What Investors can do to support their values.

1. Stay updated on COVID developments but do not immediately accept the media narrative.
2. Maintain access to alternative information sources such as Economic War Room and Blaze TV.
3. Check out the Phoenix Biotechnology website for additional and updated information on Oleandrin: <http://www.phoenixbiotechnology.com/index.php>.
4. [Share this Episode](#) and our earlier interview with Andrew Whitney as widely as possible. [CLICK HERE TO WATCH](#).
5. Consider signing the following petition to make your voice heard: <https://petitions.whitehouse.gov/petition/medicine-must-be-depoliticized>. Also share it widely because we need 100,000 signatures in 30 days to make it effective.

We have 30 days to get 99,999 signatures in order for your petition to be reviewed by the White House. Until your petition has 150 signatures, it will only be available from the following URL and will not be publicly viewable on the Open Petitions section of We the People:

<https://petitions.whitehouse.gov/petition/medicine-must-be-depoliticized>

Here are a few tips to help you promote your petition and get to 99,999 signatures:

1. **Email:** Email your petition to your friends, family and others who care about this issue. Below is a sample email you can forward to your friends right now.
2. **Facebook:** Post your petition to your Facebook wall to let folks know about it. Here’s a sample message you can cut and paste into your Facebook status:

I just started a petition on the White House petitions site, We the People. Will you sign it? <https://petitions.whitehouse.gov/petition/medicine-must-be-depoliticized>

3. **Twitter:** Tweet about your petition. Here's a sample tweet you can use:

I just started a petition on the White House Petitions site, We the People. Will you sign it? <https://petitions.whitehouse.gov/petition/medicine-must-be-depoliticized>

Hit forward and then delete the text above to let your friends know about your petition!

Dear friends,

I wanted to let you know about a new petition I created on We the People, a new feature on [WhiteHouse.gov](https://whitehouse.gov), and ask for your support. Will you add your name to mine? If this petition gets 99,999 signatures by September 23, 2020, the White House will review it and respond!

We the People allows anyone to create and sign petitions asking the White House to take action on a range of issues. If a petition gets enough support, the White House will issue an official response.

You can view and sign the petition here:

<https://petitions.whitehouse.gov/petition/medicine-must-be-depoliticized>

Here's some more information about this petition:

Medicine Must Be Depoliticized

There has been a concerted political, social media, and traditional media effort to control the narrative on medicine and the treatment of COVID-19. This has to stop! Physicians should not be attacked for advocating legitimate treatments of this horrible disease. Social media outlets should not be allowed to silence legitimate debate on the subject. The American people have a right to know and understand the truth. And the FDA should give fair considerations to any potential legitimate treatment. Congress should act to protect our basic rights as citizens.



ECONOMIC BATTLE PLAN™

THE ECONOMIC WAR ON COVID-19 TREATMENTS 3.109

CLEARED FOR RELEASE 10/15/2020 (ECONOMIC BATTLE PLAN™ POINTS: 100)

6. Learn more about how to weaponize your money. Let's keep America exceptional with our giving, spending, and investing. Nominate your financial advisor for Economic War Room training by [CLICKING HERE](#).
7. Call your financial advisor and make the point that you want them to help you weaponize your money to save America.
8. HELP ALL AMERICANS WAKE UP to the weaponization of money and be part of saving America. **Send this battle plan to friends and your financial advisor and ask them to sign up for our weekly battle plan updates at www.economicwarroom.com. Be sure to catch the data and footnotes below for more documentation. We want you to have access to key information to make intelligent decisions.**

We need more Economic Patriots on the team! Consider what you can do now to help strengthen America or even help someone in need. Keep in touch with your congressional representatives. Choose from the list or set your own goals:

- ✓ Get others to sign up on our website (<https://www.economicwarroom.com>) and review our free weekly Economic Battle Plans™. Each of these will address critical solutions to the threats highlighted in this briefing.
- ✓ At our [Economic War Room®](#) website, sign up to TheBlaze for our complete weekly shows. Please use our code (**ECON**) from that link for a discount and FREE trial.
- ✓ Follow, like, comment, and share on [FB](#) and [Twitter](#). Look for short video segments on [FB](#) and make sure those are shared. We recognize these tools may be compromised at times, but if they are not filtered, they are the major platforms available to reach out to the public. [Know that alternatives to the social platforms listed above are under EWR consideration.]
- ✓ Check out XOTV (<https://xotv.me/channels/233-economic-war-room>), a new free speech video platform that Economic War Room is proud to partner with. Access is FREE but consider making a donation to EWR on that website to help with Economic War Room's research and production costs.



ECONOMIC BATTLE PLAN™

THE ECONOMIC WAR ON COVID-19 TREATMENTS 3.109

CLEARED FOR RELEASE 10/15/2020 (ECONOMIC BATTLE PLAN™ POINTS: 100)

- ✓ You are welcome to share this battle plan and our short video segments with friends on [FB](#) or [YouTube](#). We set up the Economic War Room® to be your resource for information, preparation, and mobilization.
- ✓ Do this now! Have a financial action plan based on multiple geopolitical scenarios developed now. Advanced preparation is key. Trying to figure what to do when an economic event happens is usually too late.
- ✓ Talk with your financial advisor as it relates to your savings/investments. Ensure your advisor understand the potential impact economic/geo-political scenarios could have on your portfolio. LOOK FOR ECONOMIC WAR ROOM'S ADVISOR AND INVESTOR ONLINE TRAINING COURSES COMING SOON.

Shareable Quote:

“People are dying. In just the past two months according to CDC data, the number of dead Americans exceeds the capacity of Madison Square Garden. So why not explore a promising inexpensive natural treatment?”

—Andrew Whitney,
Vice Chariman - Phoenix Biotechnology

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The EWR Collection Deck – From Kevin Freeman

(List of resources and external links for more information)

Quick Access Links

[About Phoenix Biotechnology and Oleandrin](#)

[The War Against Hydroxychloroquine and Other Promising Treatments](#)

[The Vaccine Push](#)

[The Hit Job on Oleandrin \(sample of the negative media reports\)](#)

[Social Media Silencing the Debate](#)

[Full AXIOS Interview Transcript](#)

[] - Must Read/Watch

Where to Access Economic War Room

On BlazeTV <https://get.blazetv.com/economic-war-room/>

Our Website <https://www.economicwarroom.com/>

Our Facebook page <https://www.facebook.com/economicwarroom/>

Our Twitter page <https://twitter.com/economicwarroom>

Our YouTube page <https://www.youtube.com/economicwarroomwithkevinfreeman>

Our XOTV Channel <https://xotv.me/channels/233-economic-war-room>

Link to all Battle Plans <https://www.economicwarroom.com/battleplans>

About Phoenix Biotechnology and Oleandrin

[] Phoenix Biotechnology, Inc.

<http://www.phoenixbiotechnology.com/index.php#>

<http://www.phoenixbiotechnology.com/company.php>

http://www.phoenixbiotechnology.com/management_team.php

http://www.phoenixbiotechnology.com/scientific_advisory_board.php

http://www.phoenixbiotechnology.com/Oleandrin_FAQs.php

<http://www.phoenixbiotechnology.com/PBIAnswerToCovid19.php>

http://www.phoenixbiotechnology.com/Summary_Research_Safety.php

<http://www.phoenixbiotechnology.com/Toxicity.php>

Why The Vehement Opposition To Testing A Possible Cure For COVID-19?

<http://andmagazine.com/talk/2020/08/21/why-the-vehement-opposition-to-testing-a-possible-cure-for-covid-19/>

Drug oleandrin may be an effective new way to treat HTLV-1 virus, study shows

<https://medicalxpress.com/news/2019-12-drug-oleandrin-effective-htlv-virus.html>

Biopharma firm strikes back on criticism of oleander to treat COVID

<https://www.naturalproductsinsider.com/regulatory/biopharma-firm-asserts-oleanderpossible-covid-19-treatmentis-safe>

[] Does military's secret biodefense lab hold a key to future coronavirus treatment?

<https://justthenews.com/politics-policy/coronavirus/does-militarys-secret-biodefense-lab-hold-key-future-coronavirus>

Prophylactic and Therapeutic Inhibition of In Vitro SARS-CoV-2 Replication by Oleandrin

<https://www.biorxiv.org/content/10.1101/2020.07.15.203489v1>

[] Poster Presentation

<http://www.phoenixbiotechnology.com/documents/PBI%20Alzheimer%20Research%202020.pdf>

Oleandrin induces apoptosis via activating endoplasmic reticulum stress in T breast cancer cells

<http://www.phoenixbiotechnology.com/documents/oleandrin%20and%20breast%20cancer%202020.pdf>

The Botanical Glycoside Oleandrin Inhibits Human T-cell Leukemia Virus Type-1 Infectivity and Env-Dependent Virological Synapse Formation

<https://www.longdom.org/open-access/the-botanical-glycoside-oleandrin-inhibits-human-tcell-leukemia-virus-type1-infectivity-and-envdependent-virological-synapse-forma-44367.html>

Oleandrin: A Novel Skin Cancer Chemopreventive Agent

<https://grantome.com/grant/NIH/R03-CA099909-02>

[] Oleandrin: A cardiac glycosides with potent cytotoxicity

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3841991/>

Oleandrin <https://www.mskcc.org/cancer-care/integrative-medicine/herbs/oleandrin>

Oleandrin-mediated inhibition of human tumor cell proliferation

<https://mct.aacrjournals.org/content/8/8/2319>

[] Inhibition of oleandrin on the proliferation and invasion of osteosarcoma cells in vitro by suppressing Wnt/ -catenin signaling pathway

<https://jeccr.biomedcentral.com/articles/10.1186/s13046-015-0232-8>

A first-in-human phase I trial of PBI-05204 (oleandrin), an inhibitor of Akt, FGF-2, NF-Kb, and p70S6K in advanced solid tumor patients

https://ascopubs.org/doi/abs/10.1200/jco.2009.27.15_suppl.3537

[] Mike Lindell and Andrew Whitney on Newsmax

<https://www.youtube.com/watch?v=Zy2clZnxDcl&feature=youtu.be>

[] Mike Lindell and Andrew Whitney discuss Oleandrin on Diamond and Silk

<https://youtu.be/fA4Q6aJmq0Q>

The War Against Hydroxychloroquine and Other Promising Treatments

[1] Hydroxychloroquine defenders paying high price

<https://freepressers.com/articles/extreme-measures-taken-against-defenders-of-hydroxychloroquine>

[1] Mark Levin segment on hydroxychloroquine with Yale Professor

<https://www.facebook.com/watch/?v=1011176572675014&extid=FzNFxxYhls3e38r6>

How a False COVID-19 Narrative Was Created & Sustained for Six Months

<http://tapnewswire.com/2020/08/how-a-false-covid-19-narrative-was-created-sustained-for-six-months/>

Use N-acetylcysteine? The FDA is trying to make it illegal because it could help treat COVID-19

<https://www.naturalnews.com/2020-08-21-fda-trying-make-n-acetylcysteine-illegal-could-help-treat-covid19.html#>

[1] China Recommends Use of Chloroquine Against Covid-19

<https://riotimesonline.com/brazil-news/miscellaneous/covid-19/china-recommends-use-of-chloroquine-against-covid-19/>

Hydroxychloroquine and Azithromycin as a treatment of COVID-19: preliminary results of an open-label non-randomized clinical trial

<https://www.medrxiv.org/content/10.1101/2020.03.16.20037135v1>

Michigan hospital tries to treat patients with hydroxychloroquine, but FDA says no

<https://www.wnd.com/2020/08/michigan-hospital-tries-treat-patients-hydroxychloroquine-fda-says-no/>

[1] Watch here as the panel of 'Boots-on-the-Ground' Doctors and Professionals talk to the Media about not fearing COVID

https://www.facebook.com/watch/live/?extid=VE85H5htadMb2l6K&v=1639776369536397&ref=watch_permalink

[1] Why we're still arguing about hydroxychloroquine

<https://www.washingtonexaminer.com/opinion/why-were-still-arguing-about-hydroxychloroquine>

Hydroxychloroquine: Evidence suggests it is relatively safe

<https://www.washingtonexaminer.com/news/hydroxychloroquine-evidence-suggests-it-is-relatively-safe>

An Effective COVID Treatment the Media Continues to Besmirch

<https://www.washingtonexaminer.com/news/hydroxychloroquine-evidence-suggests-it-is-relatively-safe>

Hydroxychloroquine—The Political Drug

https://theepochtimes.com/hydroxychloroquine-the-political-drug_3448894.html

The Democrats' Jihad Against Hydroxychloroquine

<https://townhall.com/columnists/larryoconnor/2020/07/31/dems-to-covid-patients-avoid-hydroxychloroquine-smoke-pot-n2573512>

[] HCO-touting doctor says she has been fired after appearing in viral video touting the drug as a COVID-19 treatment

<https://www.theblaze.com/news/hydroxychloroquine-touting-doctor-fired>

[] 'What I discovered was absolutely shocking': Doctor reveals the REAL reason for anti-hydroxychloroquine hype

<https://www.theblaze.com/glenn-radio/why-is-hydroxychloroquine-controversial>

Yale epidemiologist: Dr. Fauci running 'misinformation campaign' against hydroxychloroquine

<https://justthenews.com/politics-policy/coronavirus/yale-epidemiologist-accuses-fauci-running-disinformation-campaign>

[] Yale professor says hydroxychloroquine could save 100,000 lives – but it's being stifled by a 'propaganda war'

<https://www.theblaze.com/news/yale-professor-hydroxychloroquine-100-000-lives>

Hydroxychloroquine: The One Chart You Need To See

<https://www.zerohedge.com/political/hydroxychloroquine-one-chart-you-need-see>

Doctor: Journal's retracted study of 'Trump drug' was 'political hit job'

<https://www.wnd.com/2020/06/doctor-journals-retracted-study-trump-drug-political-hit-job/>

News Alert | Authors retract influential study linking hydroxychloroquine to mortality risk for coronavirus patients

<https://www.washingtonexaminer.com/news/influential-hydroxychloroquine-study-retracted>

The Vaccine Push

[] Virginia Plans Mandatory COVID-19 Vaccinations For All Residents

<https://www.zerohedge.com/geopolitical/virginia-plans-mandatory-covid-19-vaccinations-all-residents>

Follow the money: Where's the scrutiny of Dr. Fauci and Bill Gates?

<https://freepressers.com/articles/follow-the-money-where-s-the-scrutiny-of-dr-fauci-and-bill-gates>

Governments help create victory for science in coronavirus vaccine hunt

<https://finance.yahoo.com/news/governments-take-center-stage-in-creating-victory-for-science-in-coronavirus-vaccine-hunt-120542868.html>

'No religious exemptions': New push for mandatory COVID vaccinations

<https://www.wnd.com/2020/08/no-religious-exemptions-new-push-mandatory-covid-vaccinations/>

Coronavirus vaccine should be MANDATORY, says PM of major country

<https://www.wnd.com/2020/08/coronavirus-vaccine-mandatory-says-australia-pm/>

An 'unprecedented' effort to find a coronavirus vaccine has over 100 horses in the race

<https://finance.yahoo.com/news/here-are-the-top-candidates-in-an-unprecedented-race-for-a-coronavirus-vaccine-122159616.html>

[] '60 Minutes' Exposes 1976 Swine Flu Hoax & Mass Vaccine Injuries That Followed

<https://needtoknow.news/2020/05/60-minutes-exposes-1976-swine-flu-hoax-mass-vaccine-injuries-that-followed/>

'This is not how you do science': Cambridge biotech Moderna's potential COVID-19 vaccine stirs hope – and criticism

<https://www.bostonglobe.com/2020/05/19/business/hope-covid-19-vaccine-attracts-investors-cambridge-biotech/>

[] Pressure Is Mounting on Regulators as Covid-19 Drug Efforts Race Ahead

<https://www.barrons.com/articles/race-for-covid-19-drugs-accelerates-but-there-are-risks-51588350741>

Dr. Anthony Fauci says chance of coronavirus vaccine being highly effective is 'not great'

<https://www.cnbc.com/2020/08/07/coronavirus-vaccine-dr-fauci-says-chances-of-it-being-highly-effective-is-not-great.html>

The Hit Job on Oleandrin (sample of the negative media reports)

What is oleandrin, the compound touted as a possible COVID-19 treatment?

<https://cen.acs.org/biological-chemistry/natural-products/oleandrin-compound-touted-possible-COVID/98/web/2020/08>

Drug Pitched to Trump for Covid-19 Comes From a Deadly Plant

<https://www.nytimes.com/2020/08/20/health/covid-oleandrin-trump-mypillow.html>

Trump says "we'll look at" treating COVID with untested, toxic plant

https://news.yahoo.com/trump-says-well-look-treating-230826779.html?ncid=twitter_yahoonewst_sjwumolbpf4

Dangerous Oleander Extract Not a COVID-19 Cure

<https://www.medpagetoday.com/publichealthpolicy/publichealth/88126>

[] Don't Take 'Dangerous' Oleandrin for COVID-19 Experts Warn, After Trump Says 'We'll Look at It'

<https://www.newsweek.com/dont-take-dangerous-oleandrin-covid-19-experts-warn-1526453>

Doctors rebuff unproven and potentially dangerous oleander chemical falsely touted as COVID-19 'cure'

<https://abcnews.go.com/Health/doctors-rebuff-unproven-potentially-dangerous-oleander-chemical-falsely/story?id=72428650>

[] Donald Trump 'wants FDA to approve oleander plant extract as a drug to cure Covid-19' after it was promoted by Ben Carson and MyPillow founder – despite no proof that it works

<https://www.dailymail.co.uk/news/article-8634557/Donald-Trump-wants-FDA-approve-oleander-plant-extract-drug-cure-Covid-19.html>

MyPillow Creator Touts Use Of Oleandrin To Trump As Therapeutic For COVID-19

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Social Media Silencing the Debate

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Donald Trump Jr. gets punished for retweeting 'coronavirus cure'

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Full AXIOS Interview Transcript

8/15/2020

Jonathan: ... taken to the highest levels through Mike Lindell and Ben Carson. And I- I spoke at length to Mike Lindell and I captured his, um, view in the story. So it's not one-sided in that sense, but I obviously wanted to give you, um, an opportunity to explain. I- I think- I think it might be some productive, [00:00:30] wh- why don't I just read you the two most critical sort of, uh, the two, I guess, biggest criticisms in the piece, and then maybe you could speak to each of them. Does that make sense? Does that work for you?

Andrew Whitney: Yeah, it does. We- we can, um, we can actually go through your whole, your whole piece. I'd like to have the opportunity to do that.

Jonathan: Okay.

Andrew Whitney: Um, but then, but, you know, before, before we get going on all of this, Jonathan, what I would like to say is-

Jonathan: Yeah.

Andrew Whitney: ... that, you know, my motivation here, um, and I know Mike is the same, I mean, it's- [00:01:00] it's been a blessing having him involved, um, in the company.

Jonathan: Uh-huh (affirmative).

Andrew Whitney: It's very, very simple. You know, we're not here to collect luxury yachts or anything like that. We just wanna, we wanna help people, and we have something that we know works. And so, you sit there and you go, "Well, we've got something remarkable here, um, that we know works, and we want to make that available." That's the entire motivation. And you, when you know something works this well, um, at least I can't, um, just sit back casually and allow [00:01:30] due process to take its course. Not when, if you look at CDC's data for the last couple of months, more people have died, well, enough people have died to- to overflow Madison Square Gardens.

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Jonathan: Yeah.

Andrew Whitney: So I can't sit around just waiting, um, when you're in position.

Jonathan: And you're convinced, and you're convinced that this does cure COVID-19?

Andrew Whitney: 100%.

Jonathan: Wow.

Andrew Whitney: That's the problem. That's why I can't sit back [00:02:00] and just let this play out, Jonathan. I kid you not. Seen it with my own eyes.

Jonathan: Wow. Um...

Andrew Whitney: Now, there are all sorts of lawyers who would tell me I can't say things like that, um, because, you know, you need to have years of studies and you need to have this, that and the other, and so forth. But, you know, as- as an American, um, you know, with a right of free expression, I'm telling you, I've seen it with my own eyes. So. You know.

Jonathan: Wow.

Andrew Whitney: [00:02:30] Yep.

Jonathan: Um, okay. Well, do you want to go through... why don't we go through my email, um, point by point, then?

Andrew Whitney: Sure.

Jonathan: Um, uh, and you can, um, respond where you think, you know, is, um, uh, appropriate.

Andrew Whitney: Cool.

Jonathan: So, um, I guess the first, uh, assertion, factual assertion in the story is, um, " [00:03:00] A biotech executive who recently met with President Trump has been aggressively pressuring the Food and Drug Administration to approve for sale an extract from the oleander plant, which he claims can cure COVID-19 in two days." Is there anything factually in

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there that you would dispute?

Andrew Whitney: So, um, I- I wouldn't, um, can you, can you just read the first part of that statement again?

Jonathan: Yeah. Yeah.

Andrew Whitney: An executive...

Jonathan: "A bio- a biotech executive who recently [00:03:30] met with President Trump, has been aggressively pressuring the Food and Drug Administration to approve-"

Andrew Whitney: Okay.

Jonathan: Yeah?

Andrew Whitney: Okay. So I would- I would say enthusiastically, or, um, yeah, passionately, (laughing) passionately, because I think aggressively, it's, you know, I'm-

Jonathan: All right. Fine. Fine. All right. All right.

Andrew Whitney: ... I'm not a small guy. I'm not a small guy.

Jonathan: All right. All right.

Andrew Whitney: People could misinterpret that. I'm a nice chap.

Jonathan: I will get, I will delete the word aggressively. How about that?

Andrew Whitney: Thank you sir. I appreciate it.

Jonathan: Okay. (laughs)

Andrew Whitney: No, it's just, it, remember the motivation here, Jonathan. I just-

Jonathan: I understand. I understand.

Andrew Whitney: ... it's just, [00:04:00] if you'd seen what I've seen, you would be probably even- even worse than me. So, um, you know-

Jonathan: I- I- you- you have, the word aggressively has been deleted-

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Andrew Whitney: (laughs) Thank you.

Jonathan: ... um, even- even though that, even though that's how it's been characterized here, I will delete it. Um, "A biotech executive who recently met with President Trump has been pressuring the Food and Drug Administration to approve for sale an extract from the oleander plant, which he claims can cure COVID-19 in two days."

Andrew Whitney: Okay, [00:04:30] so two things. Um, first of all. I've never asked anybody to approve it to sell. All we've asked for, begged for, is the opportunity to test it. That's all we've asked for. And-

Jonathan: Oh, but, I was told you had, I was told that you'd asked them to- to, um, put it on the market as a dietary supplement.

Andrew Whitney: ... we- we would love to be able to do that. But before we can do that, we have to jump through umpteen hurdles. So before we can even dream of selling this to anybody, um, we have to go through process after process. [00:05:00] And, um, and the key thing right now, that we want more than anything, and we really underscore this point, is the ability to just undertake a hospital test. Because I don't know if you know, but, um, the- the rules and regs are extremely tight, uh, and constrain your ability to actually, um, go ahead with the hospital tests, um, to- to see if something works.

Well, we have a rather strange set of circumstances. First of all, I should say, it's important to have [00:05:30] a set of standards and procedures, because you can't just have anybody whip up some fanciful combination of, you know, arsenic in their basement and, uh, and decide to start running tests on that. Clearly we all understand that. Um, however, um, you know, we're a little bit unusual, um, in the sense that we already have a lot of very compelling data about this compound because it's already been tested for other things. And, um, and therefore, all we're asking for [00:06:00] is the opportunity to run hospital tests against, um, COVID-19. That's all we've asked for. We haven't ask for the opportunity to run out there and sell it in Walgreens, um-

Jonathan: Oh, no, no, but- but- but wait. I- I- I was told that you had said to administration officials that this could be sold tomorrow as a dietary supplement, and there's no need for anymore tests. You could just sell

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it as a dietary supplement tomorrow. Are you saying you never said that?

Andrew Whitney: ... but when I tell you, when I tell you about the data we already have, you'll understand perhaps [00:06:30] where that mark, where that remark has come from. Um, the reality is, that there's already been extensive safety- safety testing on this. And if they added it to something called the dietary list-

Jonathan: Uh-huh (affirmative).

Andrew Whitney: ... we could be out there selling it tomorrow. Um, but before we could do that, they've got to add it to the dietary list. Now, it's kind of interesting, though, CBD is not on the dietary list, and they haven't done anything about that in the last almost decade. Um, everybody's out there selling that willy-nilly. So the FDA [00:07:00] seems to have a selective enforcement approach on things. Um, but again, we've tried to go through process, and, um-

Jonathan: Right.

Andrew Whitney: ... and- and play by the rules.

Jonathan: But it's fair to say, but, therefore it is fair to say approved for sale, because, um, uh, you have asked them to add it to the dietary list, which would mean that you could sell it as a supplement.

Andrew Whitney: That- that would be terrific if they would.

Jonathan: Okay. So that's a fair, that's a fair statement, then.

Andrew Whitney: But, the other thing we've asked for is the opportunity to be able [00:07:30] to do hospital tests-

Jonathan: Okay.

Andrew Whitney: ... and that's on the drug approval side-

Jonathan: Okay. Yeah.

Andrew Whitney: ... and that's something called an IND.

Jonathan: I understand.

Andrew Whitney: So you need, you need an IND number. And in order to do a test at one of half a dozen hospitals who would test with us tomorrow, because they know about this, um, we need an IND number. We haven't been able to get one.

Jonathan: Got it. Be- because the problem with the dietary side is you can't actually market it as a COVID cure.

Andrew Whitney: That's actually [00:08:00] not the problem.

Jonathan: No?

Andrew Whitney: Um, I mean, as a dietary supplement, it's true that you can't, um, you can't make any statements about treatment, cure or remedy.

Jonathan: Right.

Andrew Whitney: That kind of thing. That's why if you look at, um, if you look at stuff like essential oils, or you look at products like, um, Airborne, or, uh, what's that other one? Emergen-C, the vitamin C product. You never see them making claims about what they can actually do for you. Um, that's because they're precluded from doing that as dietary supplements. [00:08:30] That's- that's part of the deal. It's not regulated by the FDA, but the quid pro quo is you can't make any claims about a treatment, a drug, or a cure. So, um, so that, if you like, is the downside to, um, to having something that's a "dietary supplement or nutraceutical."

Jonathan: Okay. Um, so, uh, well, this is the next part. Let me just, let me just go through this methodically with you. "Senior administration [00:09:00] officials familiar with the internal conversations have expressed alarm about the way this botanical extract oleandrin, pushed by Andrew Whitney of Phoenix Biotechnology, is being promoted at the highest levels of the Trump administration. Oleandrin has not been tested in animals or humans for its efficacy against the coronavirus, but has shown some evidence of inhibiting the virus in a non- [00:09:30] peer-reviewed laboratory study." Is there anything in that that you would dispute factually?



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Andrew Whitney: Yes.

Jonathan: Well, obviously, you can't because it's them characterizing it. But the second part, um-

Andrew Whitney: Yeah.

Jonathan: ... I think is a fair description, no?

Andrew Whitney: No. No, that's actually quite inaccurate. Um-

Jonathan: What's it, what- what part's inaccurate? It hasn't been tested in animals or humans for efficacy against the vir- coronavirus. That's true.

Andrew Whitney: ... so, so no, no, no. It is actually not. Um, first of all, um, there [00:10:00] is a peer-reviewed study now-

Jonathan: Oh, really?

Andrew Whitney: ... um, from Uni- University of Texas Medical Branch. So that comes up in your article.

Jonathan: Galveston is not peer-reviewed. The Galveston thing's not peer-reviewed.

Andrew Whitney: Yes it is.

Jonathan: The one that's... uh, the July, 2020, one that's on line?

Andrew Whitney: Mm-hmm (affirmative).

Jonathan: That's not peer-reviewed.

Andrew Whitney: It has been peer-reviewed.

Jonathan: Okay. Well, it just doesn't appear to be online. I mean...

Andrew Whitney: Uh, I think it is. I'll find the link and send it to you.

Jonathan: No. I- okay. I mean, I- [00:10:30] I looked at it, um, very closely.

Andrew Whitney: No, I- I know it went through the peer review pop- process, because I know the- the comments that came back and the, uh, the amend-

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ments were made. Um, it is a peer-reviewed study. It was published as a pre-print.

Jonathan: Okay. Well, just to be on the safe side, I'll del- I'll just say, "In a laboratory study."

Andrew Whitney: Wh- what are you going to say about laboratory study?

Jonathan: No, no, no. I'll delete the words non-peer-reviewed to be on the safe side.

Andrew Whitney: Yeah.

Jonathan: So I- I- I'll say, "Oleandrin [00:11:00] has not been tested in animals or humans for its efficacy against COVID-19, but has shown some evidence of inhibiting the virus in a laboratory study."

Andrew Whitney: Well, that's also incorrect, because it has been tested in humans.

Jonathan: Where?

Andrew Whitney: It hasn't been test- it hasn't been- it hasn't been tested in-

Jonathan: Not- not- not for efficacy, not for efficacy against COVID-19.

Andrew Whitney: Yes it has.

Jonathan: Where- where's that study? I haven't seen it. There's no clear-

Andrew Whitney: It hasn't, it hasn't been published yet.

Jonathan: ... [00:11:30] okay. Well, do you want me to put that? "Whitney says it has been tested in humans, but the study hasn't been published yet"?

Andrew Whitney: Sure.

Jonathan: Okay. When will that be? Who- who- who did the test?

Andrew Whitney: Um, the FDA's been given all of that information you're looking for.

Jonathan: Okay.

Andrew Whitney: So that's another point that you need to amend in your article,



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[00:12:00] when you say the FDA hasn't been shown any data. Also, while we're on the topic-

Jonathan: Okay.

Andrew Whitney: ... there have been a whole host of human safety tests carried out on oleandrin, and all of which are published. And there've also been animal tests on oleandrin, all of which are published. Um, so, if there's any safety-

Jonathan: No, no, that's why, just to be clear, I'm not- I'm not suggesting anything about it not being safe. I'm saying it hasn't been tested in animals or humans for its efficacy against COVID-19, because I'm not finding anything public. And you're saying-

Andrew Whitney: Right.

Jonathan: ... [00:12:30] what I'm saying, amending it, is to say, "Whitney said oleandrin has been tested on humans for COVID-19 for its efficacy against COVID-19, um, but he says the study has not been published yet."

Andrew Whitney: Yeah. A number of people have taken it with extraordinary results.

Jonathan: Yeah, Lindell said that to me on the record.

Andrew Whitney: And what we-

Jonathan: He said that to me on the record.

Andrew Whitney: Yeah. Yeah. Yeah.

Jonathan: Um, okay. Um, all right. So I [00:13:00] have amended that graph, um, to- to now say, "Oleandrin has not been tested in animals or humans for its efficacy against co- uh, there are no," I'll say, "There are no published, uh, there are no public data to show that oleandrin has been tested in animals or humans for its efficacy against COVID-19, but the extract has shown some evidence of inhibiting the virus [00:13:30] in a laboratory study. Whitney told Axios that oleandrin has been tested, uh, on humans for its efficacy against COVID-19, but he said the study has not been published yet. Um, Secretary of Housing, uh, uh, Ben Carson has been advocating inside the administration on behalf

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of Whitney's products." That's obviously true. "And so has the pillow merchant Mike Lindell, the CEO of My Pillow, [00:14:00] who is a major advertiser on Fox News and a personal friend of both Carson and President Trump. Lindell helped Whitney get an Oval Office meeting with Trump in July to discuss oleandrin as a potential COVID-19 cure." Is there anything in that that you would dispute?

Andrew Whitney: I don't know whether I would characterize Dr. Ben Carson's input as advocacy on our behalf. I think that comes with pretty negative connotations these days. But he has, I mean, he's a person with tremendous [00:14:30] expertise in this field, um, as- as one of the leading surgeons in the country. Um, the ex head of pediatric neurosurgery-

Jonathan: Well, I'll say... Fine, I'll say, I'll say speaking enthusiastically about the product inside the administration. How about that?

Andrew Whitney: Yeah. Yeah, and- and I- I think that's- that's reasonable. I mean, he, we- we were, you know, tremendously glad to have, um, the opportunity to talk to him about it, because, like everybody else in the administration, he's received an absolute pleth- plethora of- of options and propositions. And, um, [00:15:00] and I feel- I feel- I feel badly for the guys in the administration. They're all doing their best to try and find a solution, and they must be inundated, Jonathan. But, um, you know, they have to somehow sort the wheat from the chaff, and the workable from the not-workable. And, um, you know, somehow we managed to sort of, you know, come through, and I- I think it's because of, you know, the data that Dr. Carson has seen, um, and others have seen, um, that convinced them. And they've done their own due diligence on this. So, [00:15:30] yeah.

Jonathan: Okay. Um, "A senior administration official familiar with the internal conversations about oleandrin told Axios, 'The involvement of the secretary of HUD and mypillow.com in pushing a dubious product at the highest levels should give Americans no comfort at night about their health and safety during a raging pandemic.'"

That's the, that's the most harsh and critical quote in the, in the entire story. Um, and then I said, "Asked why Carson, [00:16:00] the head of Housing and Urban Renewal was promoting an unproven botanical extract to cure COVID-19, a HUD spokesperson emailed a statement to Axios. 'Secretary Carson is a member of the coronavirus task force.

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He has been directly involved with the administration's response to this disease from the very beginning. The task force is looking at a plethora of therapeutics to fight COVID-19. To suggest that Secretary Carson, who is a world-renowned expert in the medical field shouldn't be involved is not only absurd, but unhelpful [00:16:30] in our collective fights to eradicate the pandemic.' A senior official familiar with Carson's involvement pushed back to say that, 'While Carson is a world-renowned expert in pediatric neurosurgery, he is not a world-renowned expert on anti-viral drugs or infectious diseases.'"

Andrew Whitney: (laughing) It- it's, um, there's some pretty harsh statements in there.

Jonathan: There are.

Andrew Whitney: I don't where to st- I don't know where to start on that last... I mean, the bottom line is, Jonathan, um-

Jonathan: Well, [00:17:00] see, here's the thing. Wouldn't- wouldn't you- wouldn't you rather I gave you actual visibility of it rather than just, you know, side-swiping you? I mean, I'm- I'm-

Andrew Whitney: Oh, absolutely.

Jonathan: Yeah. Yeah.

Andrew Whitney: There- there's a big, there's a big difference between what you sent me and what you just read, so I'm only going off the notes I've got. So...

Jonathan: Sure.

Andrew Whitney: You know. Um, so-

Jonathan: So, no, the only difference, the only difference is, um, these are quotes that I've just gotten today, to be clear.

Andrew Whitney: Right, right.

Jonathan: Yeah.

Andrew Whitney: Yeah, yeah. No, no, I don't, I don't feel like you're trying to be gauche, Jonathan. You're being very, very, very even-handed, and I did take the option to make a couple of phone calls, and, um, and you have a

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terrific [00:17:30] reputation. So, I- I had no reticence about taking this phone call. So, um, the, um, the, I mean, here- here's a question I would pose to you. Um, if this is such a ridiculous proposition, and it's just a silly plant, and we're all barking mad, why's everyone so worried about it? Why's everybody bending themselves into the shape of a pretzel to try and stop this going anywhere? There's a question for you.

Jonathan: I mean, I [00:18:00] don't know that that's what's happening. You- do- I mean, so you think this is more than people just cautious about putting something out there and calling it a cure? Um, you think this is something more insidious? Is that what you're suggesting?

Andrew Whitney: I would say, give us the opportunity to test, and let the, let the science and the results determine the outcome. [00:18:30] That would be my- my suggestion here.

Jonathan: Yeah. Okay.

Andrew Whitney: Let science and the results speak for themselves, because I've seen the results. So I'm perfectly comfortable making that statement. And as for suggesting that, uh, Dr. Carson's knowledge or relevancy areas is somehow kind of, you know, less [00:19:00] so because he's not an antiviral expert, I mean, that just seems petty to me. That seems like petty bickering. I think the- the man's a tre- tremendous mind on all these related matters, and, um, and his opinion, yeah, well, put it this way. I- I- I find his opinion tremendously valuable.

Jonathan: Okay. Um, "The story of how an experimental botanical extract found it's way to the Oval Office echoes a larger dynamic inside the administration that has [00:19:30] troubled some top health officials. Outside operators, often without rigorous vet- vetting, push unproven products to Trump, knowing their sales pitches might catch the President's imagination. Trump will then urge his Food and Drug Commissioner Stephen Hahn to look at or speed up approval of the experimental product."

"This happened months ago with Trump's, with the malarial drug hydroxychloroquine. In March, Trump personally lobbied [00:20:00] Hahn to authorize the drug's emergency use to treat patients suffering from COVID-19. The FDA authorized its emergency use. But after three months, the FDA withdrew the authorization after a large random-

ized clinical trial of hydroxychloroquine found no benefit for treating COVID-19. The FDA also warned the public about the risk of heart-rhythm problems observed in COVID-19 patients treated with the drug.”

“An important difference between hydroxychloroquine and oleandrin is that hydroxychloroquine has been used by hundreds of thousands [00:20:30] of people since the 1950s, so its effects on humans... sorry... its effects on humans with autoimmune disease are well known. Therefore, it was relatively simple to test, to test hydroxychloroquine in people with COVID-19 to see if it would have any effect. But oleandrin is neither authorized nor approved, and has only been tested in small and early phase human studies for cancer.”

Andrew Whitney: So, um, that’s an interesting statement, because, of course, on the one hand [00:21:00] you’re saying, um, hydrochloriquine is safe because it’s been tested and used a lot. Um, but then, on the other hand, um, you’re commenting on the fact that its emergency use authorization got pulled-

Jonathan: Yeah.

Andrew Whitney: ... presumably because it wasn’t safe or effective.

Jonathan: No, no. It was easier for them to, it is that they felt more comfortable, um, providing the authorization because it had been used so widely.

Andrew Whitney: Yeah. And you know, you know how you [00:21:30] get an emergency use authorization, right? You actually have to do a study in some patients with the problem that you’re treating. So if you take, let’s talk about Gilead’s remdesivir, for example. I believe they, um, they did a study on 42 people, and they got an emergency use authorization. So, um, you know, that’s not something that’s been around for donkey’s years treating people with malaria all over the- over the world, but they had a process. They, um, they- they ran an IND. Um, they had, I believe, 42 subjects [00:22:00] in there, clinical indications only. And they qualified for an emergency use authorization. So how’s that any different from another novel compound coming along?

Jonathan: Um, do you want that to be your response?



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Andrew Whitney: Well, it's a question.

Jonathan: Yeah.

Andrew Whitney: Um, make it, make of it what you will.

Jonathan: Yeah.

Andrew Whitney: But all I'm saying is, if you're going to say, um, well, chloroquine was, uh, hydroxychloroquine was easy to give a, an EUA to because it's been around forever and we know about it-

Jonathan: [00:22:30] Right.

Andrew Whitney: ... but new things aren't, well, then, how can you justify giving one to remdesivir? Um, but if you're going to say, "Well, you get an EUA because you follow the rules, you go through the process, you do a test, the results are quite remarkable, and then you're gonna, given an EUA," then we'd like the opportunity to do the same thing. And we believe we have data to support the validity of that request.

Jonathan: Um, well, what I might do, so, because it sounds like, eh, eh, it sounds like that is an unfair, [00:23:00] um, distinction, given remdesivir, I might just delete that important difference between hydroxy and oleandrin, because I don't think it's a fair point to make. So I'm gonna delete, um, the- the- the paragraph saying that they felt it's easier because it's larger, whatever. I don't think, I don't think that's a fair, um, hit on you guys. So I'm gonna delete that.

Andrew Whitney: Appreciate it.

Jonathan: Um, okay. "Whitney could pursue multiple paths to getting [00:23:30] his unproven drug to market."

Andrew Whitney: Could I just give you something else, as well?

Jonathan: Yeah.

Andrew Whitney: The whole point about the President, I mean, essentially, I mean, I'm- I'm not trying to put words in your mouth here, Jonathan, and- and perhaps I'm mis- misinterpreting it, but it sounds a little bit like somebody adjunct to you is- is- is decrying the President's approach of- of-

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eh- trying new, innovative, flexible solutions and opportunities. I mean, the way I look at what he's doing is the guy's a- trying to find a solution to things, and he's being a bit, he- he's got a different process than [00:24:00] has been used before. But then, we're not in normal circumstances, are we?

But if you're going to be in a extra-normal circumstance, an extraordinary circumstance, like a pandemic, which is killing thousands of people, um, and, um, jacking the economy, wrecking families, businesses, communities, and this sort of thing, you've got to be willing to try some new things, um, and to get out of your standard process constraints. So the way I characterize what he's doing, is he's actually trying a few options. He's [00:24:30] looking to the free market for solutions, and, you know, we happen to be one of them. And again, if you'd seen the data, you'd agree with me.

Jonathan: That's a good, um, I- I'm, well, I'm- I'm recording, too, and I'm gonna get that quote in. Um, "Whitney could pursue multiple paths to getting his unproven drug to market. The first path is as a COVID-19 drug, which would involve a rigorous process including clinical trials. But to hedge his bets, Whitney [00:25:00] could also push the FDA to allow ole-andrin to be sold off the shelf as a dietary supplement, a move that could be done immediately, Whitney has told administration officials."

Andrew Whitney: On that, the- the whole dietary supplement business, is still subject to the FDA putting it on what's called the dietary list.

Jonathan: Yeah, the dietary list, yep.

Andrew Whitney: So that's like the approved list of Lego bricks-

Jonathan: Yeah. Yeah.

Andrew Whitney: ... that you can build something from.

Jonathan: Yeah.

Andrew Whitney: So we still have to get on that, Jonathan.

Jonathan: Yeah.

Andrew Whitney: And that's a process of sending in your stuff, [00:25:30] and-



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Jonathan: Yeah.

Andrew Whitney: ... and, you know, there- there are only a couple of grounds that they could reject that application on. One would be safety. Um, the other one would be on some sort of procedural basis. But again, what one would like to think that, you know, everybody here's as keen as we are to sort of try to address this problem, uh, and get people healthy. Um, we've already proven the stuff is safe in humans. It's already gone through FDA phase one and two. So, I mean, if- if the FDA-

Jonathan: I mean, is it fair for me to say, is it fair for me to say, "Whitney is pursuing multiple paths" rather than could?

Andrew Whitney: Yes.

Jonathan: Yeah. And- and, [00:26:00] um, yeah, no, I understand the dietary list, um, situation. Um-

Andrew Whitney: And we actually, you know, we- we- we stuck the, um, the- the dietary, uh, list application in, um, you know, before we made the- the drug application. Um, because we just thought, well, this should be quick and easy. Should be straightforward. We've already done FDA phase one and two, um, clinical safety for humans. So how hard can it be? Um, the FDA's own standard. So we thought it should be straightforward.

Jonathan: So let me- let me read this again. "Whitney [00:26:30] said he is pursuing multiple paths to getting oleandrin"... I'll just change it from his unproven drug. I'll say, "ol- getting oleandrin to market. The first, the first path is as a COVID-19 drug which would involve a rigorous process including clinical trials. But to hedge his bets, Whitney said he is also pushing the FDA to allow oleandrin to be sold off the shelf as a dietary supplement, a move that [00:27:00] could be done immediately, Whitney has told administration officials." Is that okay?

Andrew Whitney: Yes.

Jonathan: Okay. "Whitney has claimed to administration officials that oleandrin cures COVID-19 in two days, according to a source familiar with his private comments. The source said Whitney claims he has, 'plenty of people who I have given this to in Texas and around the country, and they've had positive COVID tests, taken this drug, and two days later

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they have a negative COVID [00:27:30] test, and they have a full recovery.' A senior official-

Andrew Whitney: That...

Jonathan: Sorry?

Andrew Whitney: That's not accurate.

Jonathan: That's not accurate?

Andrew Whitney: No. I don't know who's given you that quote, but that's not accurate.

Jonathan: What's, um, have you, what about the two days thing? Is that accurate?

Andrew Whitney: The- the- the two days, it- it- it very much depends on your circumstances, first off.

Jonathan: Okay.

Andrew Whitney: Um, but before you can even get into that, you've got to talk about, you know, what is cure? What's the definition of a cure? And at the moment, because the testing regime is all over the place, [00:28:00] um, it's- it's- you- you- it's not as simple as just saying, okay, positive on a PCR test on a Monday, negative on the Friday, cured. Um, because it's so difficult to get accurate testing done. So one of the things that's been a, um, you know, one of the- the primary benchmarks has been clinical symptoms. And clinical signs. Um, so for example, when remdesivir got their, um, their EUA it was based on clinical improvement, you know, did symptoms improve? [00:28:30] Um, you know, it wasn't based on, well, you know, we've done a- a PCR that shows you're clear.

Jonathan: Oh, I see.

Andrew Whitney: So- so it's- it's, the whole business of cured, not cured-

Jonathan: I see.

Andrew Whitney: ... um, so what- what- what we tend to focus on is, um, on clinical improvement. Have the symptoms gone away? Do people feel better?

And, um, you know, and because there's a range of different symptoms. Some people get the fever. Some people get the, um, you know, the diarrhea. Other people get the productive cough. Some people get a mix of all [00:29:00] of those. Um, generally speaking, you know, the, what you have to do is just say, "Well, let's look at clinical symptoms." If they've all gone, then, and you're feeling great, then one could argue, you know, you're- you're in a good position. Now, um, so the definition of cure is something you have to look at. And you can't just bandy the word cure around. Um, you won't find any of the other companies bandying that word around, either. Again, if you look at Gilead, they talk about, you know, shorten your hospital stay from [00:29:30] 14 to 11 days. They're not saying, "Cure you in 11 days."

Jonathan: Right. Right, right, right.

Andrew Whitney: Um. So- so it's a, it's a, it's a difficult word to use when the testing regime isn't there yet, um, on a lot of this. But we have, we have some very interesting data points, um, that are pertinent to this conversation. One of the things I want to say to you, though, is it very much depends on how long you've had it. If somebody's literally just got it and just tested positive, they start feeling lousy, they've tested positive, [00:30:00] um, if they were to encounter this product, um, they would be in great shape very quickly. If somebody has been self-isolating in a basement for two months, you know, just miserable and not able to beat it, it's going to take 'em a little while longer. But, we've seen both. So, and then you can speculate as to well, why is that? Um, and I'm, I'll be getting off topic for your, for your interview, here, Jonathan.

Jonathan: Right. Right.

Andrew Whitney: But for example, if you, [00:30:30] if you've only just encountered a virus, um, then, you know, the number of copies, you know, are- aren't yet at a point where your system's completely overwhelmed, and it hasn't per- permeated every extremity, so you've got less of a clean-up job to do. Um, but if you catch suh- you know, if- if somebody's, eh, been- been struggling away with this, and, you know, these are the people who, um, you- you read about their symptoms, the, you know, they- they say they felt like they'd beaten it, and three weeks later it came back. Um, again, [00:31:00] it's- it's because, you know, viral particles are very small, and they can tuck themselves away in some fairly dark and distant corners, and the first opportunities they get to

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start really multiplying again, you know, you're- you're hit with another wave of symptoms. So, um, it kind of depends on your circumstances. Um, but, um, but we've seen a, you know, a variety of- of- of situations, and it's very effective.

Jonathan: How- how about this? Um, earlier at the start of the conversation I said to you, um, "Do you believe that oleandrin [00:31:30] cures COVID-19?" And I'll have to go back to the quote, but it was something to the effect that you said, "100%." And then you said, you know, um, "I've seen it with my own eyes." You know, blah, blah, blah, blah. "There are all sorts of laws that tell me I can't say things like that, but it's America with a right of free expression," you know, whatever the end of the quote was. And then I could add to it, um, "Whitney also said that by cure, he means the symptoms go away quickly in- [00:32:00] in," so say almost every instance? Or every instance?

Andrew Whitney: I mean, that's a, it's a tricky one, isn't it? 'Cause it depends-

Jonathan: Yes.

Andrew Whitney: ... on the nature of the- the person, um, and their circumstances. But I would say, um, let's say in the vast majority of cases.

Jonathan: In the vast majority of cases. Okay. Uh, all right. Um...

Andrew Whitney: This whole two days thing... I- I believe where that comes from, somebody has seen [00:32:30] the UTMB paper, um, University of Texas Medical Branch Galveston, as you know, is the world's reference center for emerging and novel viruses. Uh, they were the first to sequence COVID-19 in the United States. I mean, they're- they're a practice leader and one of the leading academic institutions in the country. Um, they- they've tested thousands of compounds. Um, you know, they- they did a lot of the work on- on remdesivir trials, for example. Um, you know, they know what they're talking about. Um, how a, you- [00:33:00] you would find our paper interesting reading, because, um, the compound-

Jonathan: Oh, no. I read the, I read the- I read the [Gotsam 00:33:06] paper. Yeah, yeah. I read it.

Andrew Whitney: ... right. So you- so you've- you've seen the massive reduction in viral

infectivity in just 24 hours.

Jonathan: Yeah, yeah. In infective tests. Yeah, yeah. Yeah. Yeah.

Andrew Whitney: Yeah. Yeah, so, um, that plays out in practice. So, um, it's a remarkable thing, and um, yeah. So.

Jonathan: Um, so the next one, [00:33:30] it sounds like you want to dispute this one. "A senior official said Whitney has so far provided no human clinical evidence to give the administration confidence about his claim."

Andrew Whitney: Actually, we have provided that.

Jonathan: Uh, "Actually we have provided that," Whitney said. Uh, do you want to characterize it?

Andrew Whitney: At this stage, it's probably, [00:34:00] it's probably best left at that.

Jonathan: Okay. Uh...

Andrew Whitney: The- the data is compelling.

Jonathan: "At this stage, it's probably best left at that. The data is compelling." Okay. Um, " [00:34:30] Hahn appears to have been resisting Whitney's," I've- I've changed some... if- if the language is somewhat different from the email, it's because I've been working on it throughout the day. "Hahn appears to have been resisting Whitney's efforts, at least so far. In a sign that has reassured some administration officials worried about the oleandrin campaign, Whitney has privately complained that the FDA has been dragging its feet" Is [00:35:00] that fair?

Andrew Whitney: Um, I think, I think that Commissioner Hahn has done a very professional job. He has heard what we had to say. Uh, we can't ask any more of the man. He's probably inundated with, um, with people trying to provide what they perceive to be helpful solutions and propositions. Um, so I think he's been immensely professional, and, um, and anyone who's heard me talk about, um, the FDA commissioner [00:35:30] will- will verify that. So, um, so I don't think it's- it's, um, I- I certainly haven't, um, I wouldn't want to char- I wouldn't want to characterize it as a scenario in which, you know, we're being all aggressive and he's having to resist our, you know, our barrage, that sort of thing, um, at all. It's, we've made some representations and said, "Look. We think this works.

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Here's some data." Um, he's been very professional in his handling of that, I believe. So.

Jonathan: What about this sentence? What about this one? "Whitney [00:36:00] has invoked his meeting with the President to apply further pressure on the administration to approve or authorize oleandrin."

Andrew Whitney: Well, before we get into that, the- the sort of privately complaining about the FDA dragging its feet. On that I would just say, "The process is too slow." Um, whether or not we want to characterize it as deliberate foot-dragging is another issue entirely. Um, my point would be, you know, Madison Square Garden overflowing with dead people in the last two months, according [00:36:30] to CDC stats. Um, you know, avoidable, as far as I'm concerned, given the efficacy of this product. So, to me, you know, it ought to be given a fair hearing, and we ought to be given an opportunity to test this. Call my bluff. That's all. So, um, your next statement?

Jonathan: "Whitney has invoked his meeting with the President to apply further pressure on the administration to approve or authorize oleandrin."

Andrew Whitney: I think that's wholly unfair.

Jonathan: [00:37:00] Why's that unfair?

Andrew Whitney: Well, I mean, I don't, I don't expect one-

Jonathan: Have you- have you ever- have you ever said something to the effect of, you know, "The President wants this done. Let's get it done"?

Andrew Whitney: ... I don't discuss my conversations with the White House, but I'm not going to be out there bullying someone or brow beating them with something like this. I mean, that would just be silly. If the, if the president or- or somebody else wanted this done, then one would assume it would get done. Um, so I'm not going to stand there jumping up and down about it.

Jonathan: What, so what would you want [00:37:30] to say in response to that?

Andrew Whitney: Um...

Jonathan: Because several people have told me that. That you've said the Pres-

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ident, you know, has made it very clear, you know, in the meeting, that he wants this thing moving. What's going on?

Andrew Whitney: If I was the President, I would want a solution to this situation. And if, um, if our solution is perceived as an effective one, or potentially effective one, I would want to see it tested.

Jonathan: [00:38:00] Um, "Oleandrin isn't avail-" touching on the science. "Oleandrin is an extract from the oleander plant. Researchers have suggested that it could be useful to treat cancer because of the way it affects cells, and that it could enhance the effects of other cancer therapies. A July, 2020, study, uh, from the University [00:38:30] of Texas at Galveston shows in a laboratory setting that oleandrin can inhibit the coronavirus in monkey kidney cells at very high doses. This study, while intriguing, has not been peer-reviewed, and one of the authors of the study, Robert Newman, is chairman of Phoenix Biotechnology's board of directors, the company developing oleandrin."

Uh, I'm pretty sure, because I ran this by, um, a couple of, um, experts in antivirals, [00:39:00] and they looked at the study and they said it hadn't been peer-reviewed. Can you, if it has, can you show me? Because it doesn't appear to be.

Andrew Whitney: Sure. Yeah. No, no, it definitely has. Absolutely, 100%, categorically. Um, so I can, I can, um, send you a link to that, or, uh, or- or, I don't know, what do you want me to do? Um, email it to you or something?

Jonathan: Yeah, send me a link. Yeah.

Andrew Whitney: Okay. Fine. We can do that. Um, in terms of this whole point about, uh, monkey kidney cells at very high doses-

Jonathan: Uh-huh (affirmative).

Andrew Whitney: ... um, I take [00:39:30] issue with that. I would just cut it off at monkey kidney cells.

Jonathan: Why?

Andrew Whitney: Well, because it doesn't require very high doses at all. In fact, the dosing was so low when we put our provisional IND in, the FDA wrote back and said, "How on earth do you," he, well, he put it, didn't quite put it

like that, but they said, "We can't understand how anything at such a low dose could have, could possibly be effective," is actually what they wrote in their response to us.

Jonathan: Oh really? Okay. All right. I'll- I'll delete- I'll delete-

Andrew Whitney: Um, they'll, we're- we're sitting- we're sitting there going, "Well, we already know it is," [00:40:00] so carry on.

Jonathan: ... right. All right. I'll- I just deleted at very high doses. So I'll just end that with monkey kidney cells.

Andrew Whitney: Yeah. I mean, it's- it's, um, so, um, it definitely has been peer-reviewed, so I'm going to send you that.

Jonathan: Yeah.

Andrew Whitney: Um, Robert Newman is not chairman of Phoenix Biotechnology. He's, um, one of the scientific advisors to the company.

Jonathan: Um...

Andrew Whitney: Um, so, um, so I don't know where you got that from. Um, and, what else do I want to cover on here? Um, so look, on your point about cancer, treat-

Jonathan: On your website changed. [00:40:30] When I looked at it yesterday, it had Robert, um, on the board of directors. And now he's no longer there.

Andrew Whitney: ... um, I don't know, actually, when the website changed. You know what it's like in these companies-

Jonathan: Well, yesterday it had, yesterday it had him at the top of the board of directors, and now he's no longer there.

Andrew Whitney: ... I will, uh, I will inquire to the company and find out what's, uh, what's going on there then, because, um, I know that, um, you know, he's been, uh, our chief scientific officer for [00:41:00] some time. But, um, you know, I don't know, uh, if he's changed his role in the company recently. So I'll find out, let you know.



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Jonathan: Okay. Um...

Andrew Whitney: He's certainly, he's certainly not the chairman. That- that much I can tell you.

Jonathan: Well, he was ob- yesterday he was on the website, um, on the board of directors as president, chair- and chairman. Um, at the top.

Andrew Whitney: I wasn't aware of that.

Jonathan: [00:41:30] Okay. Um...

Andrew Whitney: Also, um, as I look here... researchers.... treat cancer... um, yeah. There are actually over, there are more than 50 peer-reviewed publications that, uh, that, uh, document the efficacy of oleandrin in cancer therapies. If you have a look on PubMed.

Jonathan: Sorry. Say again.

Andrew Whitney: There- [00:42:00] there- there are more than 50 peer-reviewed publications that show the efficacy of, um, oh- oleandrin on cancer therapy. So if you go on PubMed and you- you put in oleander plus cancer, you know, oleander cancer, you'll see about 50 different papers will tumble out and document the efficacy of, uh, of oleander and oleandrin in, um, in cancer therapy. Just trying to give you a useful reference point.

Jonathan: [00:42:30] Yep. Um...

Andrew Whitney: Would you like me to send you a bunch of, um, human safety papers for oleandrin, um-

Jonathan: No, because I'm not suggesting at some that, nowhere in the story do I- do I say it's unsafe.

Andrew Whitney: Right.

Jonathan: Um, so I don't to defend it's safety. I'm not- I'm not, um, I'm not saying anywhere that it's unsafe. Um, at nowhere in the story does it suggest that. Um, uh, uh, [00:43:00] I mean, it just, like, it looks to me like this- this Newman thing, I mean, I emailed you all this stuff. He was on the website on the board yesterday, last night, when I was looking at

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it, and now he's not there. Like, it's kind of weird. It, like, kind of looks like you took him off the board on the website today, just to-

Andrew Whitney: He might have resigned from the board. I don't know. I don't know. It's here. I'm going to clarify that point [00:43:30] and find out.

Jonathan: Yeah.

Andrew Whitney: Um, I know we're doing a bit of a reorganization at the moment because we've got, we've got a lot of stuff going on, Jonathan.

Jonathan: Right.

Andrew Whitney: This company's been around for 25 years-

Jonathan: Right.

Andrew Whitney: ... and we have, um, you know, there- there's been-

Jonathan: Uh, you know what? You know what, Andrew? Don't, no, I think it's unfair, I'm being unfair to you. I think- I think I misread, I think he, I think it was just chairman of the scientific advisory board. I think it was just this section, and I'm- I'm misremembering. No, I'm sorry.

Andrew Whitney: All right.

Jonathan: I'm sorry to accuse you like that. I think- I- I think, that, [00:44:00] um, uh, I'm sorry. I- I think I just, 'cause the photo positioning is the same. I'm misremembering. I'm sorry about that.

Andrew Whitney: That's all right.

Jonathan: Um...

Andrew Whitney: No, no, that's fine. For a while there you were getting me concerned. I thought-

Jonathan: No, no, no, no.

Andrew Whitney: ... what have we screwed up now?

Jonathan: No, no, no. Um, no, no, no, no, no.



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Andrew Whitney: The company's- the company's been around for 25 years.

Jonathan: Yeah, I know.

Andrew Whitney: Robert's done fantastic work on the science side-

Jonathan: Yeah, yeah.

Andrew Whitney: ... with the company. Fantastic work. And, um-

Jonathan: Um, him, him and his, bio- bi- Phoenix Biotechnologies Scientific Advisory [00:44:30] Board. Yeah.

Andrew Whitney: ... there you go.

Jonathan: Sorry. I'm sorry.

Andrew Whitney: Yeah. That makes sense.

Jonathan: No, no. That's- that's totally fair.

Andrew Whitney: Yeah. Yeah.

Jonathan: Um, I'm sorry to, um, uh, to suggest that. Okay. "Professor Sharon Lewis, the director of the Peter Doherty Institute for Infection Immunity at the University of Melbourne is an international authority on- on antiviral drugs and has a laboratory working on COVID-19. Asked about oleandrin's potential efficacy as a COVID-19 treatment, [00:45:00] Lewis told Axios, 'Oleandrin looks to have antiviral activity at high doses in a test-tube model. You'd certainly want to see more work done on this before even contemplating a human trial.'"

Obviously that's a, you know, that's her view. Um, you've given your view. Um, but, that's what she-

Andrew Whitney: Yeah, and to be, to, and to be fair to her, she hasn't seen the amount of work we have done with UTMB and others.

Jonathan: Right.

Andrew Whitney: So, um, you know, it- it's, um, but I mean, so I think that's a completely [00:45:30] fair statement if you haven't seen the data we've got.

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Jonathan: Okay.

Andrew Whitney: So, um, yeah.

Jonathan: Okay. Um, "In an attempt to speed up the approval of his botanical treatment, Whitney has deployed a tried and tested strategy for advocacy in the Trump era. He has deployed a powerful conservative media conduit who is beloved by the President and some of his closest confidantes, Mike Lindell. Trump had publicly touted his friend- friendship with Lindell, who is also a Trump 2020 campaign [00:46:00] surrogate. In an interview with Axios on Saturday, Lindell spoke passionately in support of oleandrin, and said he was such a believer in the botanical, that he now has a financial stake in Phoenix Biotechnology, and wants to ensure every American has access to this COVID-19 'cure'."

"Lindell said he first became aware of oleandrin when he got a phone call on Easter Sunday from Whitney. 'When I spoke at the Rose Garden, there [00:46:30] were people all over the country reaching out to me saying they had different sanitizers and cures,' Lindell said. 'I became like a magnet for the people for ideas and different things. This guy called me on Easter Sunday, Andrew Whitney, and he said, 'We have a great cure for the virus, and it's from a plant extract,' Lindell added. 'So then I reached out to my friend, Secretary Carson. He looked at this. Things that I don't know how to look at, and he said, 'Mike, this is the real deal.' He said, 'Wow'."

"I asked Lindell in what form he has personally taken oleandrin [00:47:00] because the FDA has not yet approved its use either as a COVID-19 drug or as a dietary supplement. 'It's just a liquid, like an extract, like a CBD oil. It's like an eye dropper, and you put it under your tongue,' Lindell said. 'I just got my own because I got involved with the company, so I've got some. Nobody sold one bottle. I wanted some. If I'm getting involved, I want my friends and family, instead of going in hospital and dying, it's saving their lives. Of all the people, at [00:47:30] least 50 that I know of myself, every one of them lived and every one of them got fine fast.' Lindell said he has been using oleandrin as a prophylactic. 'I never get sick. I've never caught the virus. And many of my friends and family that knew I had it have tried it. It's just been amazing. They've all had symptoms and all of a sudden the next day they're fine. That's why I went all in. I got involved, then, with the company. I said, 'Wow, I'm a believer.'"

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Um, "Told about the alarm [00:48:00] inside the administration about how he and Carson were pushing oleandrin at the highest levels, Lindell said, 'This is the most amazing miracle thing I've ever seen in my life, so I went all-in. If you want, if you want to know what I think, I think it's being suppressed because somebody doesn't want this out there because it works, and I don't know why. Um, why wouldn't the guy that's on the task force, Carson, uh, bring the cure to the President if it's getting stopped at other places?' Lindell [00:48:30] said. 'I don't understand why they would say something like that. Basically, they'd be calling me a liar. You can't call me a liar when I've used it firsthand and have so many friends and so, and so have my friends and family.' Lindell said, 'The FDA should approve oleandrin immediately and to be sold as a dietary supplement. You can give this out as a supplement tomorrow.'"

"Lindell said that in July's Oval Office meeting, President Trump, 'was just getting briefed on it, and he basically said, the FDA should be approving it.' In the Oval Office meeting were [00:49:00] Trump, Carson, Lindell, Whitney, and briefly the White House chief of staff, Mark Meadows. Uh, and at least one lawyer, according to Lindell. 'FDA Commissioner Hahn was not in the room,' said Lindell. 'There were two other people in the room, and one of them was not Steve Hahn, because I've picked- seen a picture of Steve Hahn before. It wasn't him.'"

Anything in that section? I mean, it's all Lindell, so, um, I don't see-

Andrew Whitney: It was all there.

Jonathan: Yeah.

Andrew Whitney: Um, we- I've [00:49:30] reached out to Mike Lindell because he's- he's one of the greatest businessman in the United States and he loves this country and everybody in it, regardless of political affiliations. He just wants everybody to be healthy and happy, and, uh, and he's a wonderful businessman. So I thought, what a, what a great, what a great ally he could be, um, and he's a great exponent of commercial business. So, um, I also knew, because I've read about him, the fact that he basically sort of dropped everything and lept into the fray to try and crank out [00:50:00] more masks and things when we were being basically, um, strung out by the Chinese supply chain. So, um, so I thought, "Well, there's a guy with the right motivation. He's clearly not doing it for the money, because he's- he's already very successful. He's

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doing it because he wants to help the country and the people in it.”

And that’s certainly fits with our motivation, Jonathan, at the end of the day. It’s like I said to you at the outset, we have- we have one goal, and one goal alone. You know, we have something that we know works. We want people to have it. It’s that simple. And, um, you know, I’m- [00:50:30] I’m not above asking, pushing enthusiastically. Um, you know, I’m happy to beg. I just want people to have access to this, because we think it’s terrific... The other thing, I mean, just while you’re typing, uh, Jonathan-

Jonathan: Yeah.

Andrew Whitney: ... you- you characterize it as sort of my drug, [00:51:00] and my this and my that. You know, it- it’s a, it’s taken a whole team, a whole company to put this thing together. I’m just a business guy, all right? So it- it’s my job to- to make it function on the level of business. But we- we’ve got a terrific team of really dedicated people who worked for years on this. Um, you know, our company knows more about this compound than anyone else on earth because of 25 years of re- search. So it’s certainly not something that we- we pulled out of our sleeve in a, in a heartbeat. And it certainly wasn’t, you know, you- I- I wouldn’t [00:51:30] want to characterize it as just trying to, you know, all- all about me. Far from it.

Jonathan: Okay. Um, let me read this part. “Whitney also worked another fruitful angle in conservative media. The first example I could find of a media outlet pushing the potential of oleandrin as a treatment for COVID-19 was an April 23 article on John Solomon’s website, Just the News. In his article, Solomon described oleandrin as, ‘a rising star in the bio- medical world,’ and quoted [00:52:00] Dr. John Dye of the United States Armed Medical Research Institute of Infectious Diseases, say- ing his lab, his laboratory planned to test what effects oleandrin would have on tissue cult- tissue culture assays for COVID-19.”

“Caree Vander Linden, a spokesperson for the United States Army Medical Research Institute of Infectious Diseases emailed a state- ment to Axios. ‘In May, 2020, USAMRIID performed some preliminary [00:52:30] testing of oleandrin against SARS-CoV-2, and our results were inconclusive. Additionally, USAMRIID was contacted by University of Texas Medical Branch at Galveston indicating that they were also

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testing it,' Vander Linden added. 'Given our inconclusive results and having other high-priority therapeutics to assess, we did not continue with this line of research.'"

"Solomon has deep ties into [00:53:00] Trump world. A frequent on Sean Hannity's Fox News show, Solomon is also close to Giuliani, Rudy Giuliani, and President Trump has waxed lyrical about Solomon, saying he deserves a Pulitzer Prize for his coverage of the Russia investigation. Bottom line, a story from Solomon carries extra weight in the Oval Office."

Is there anything in that that you would, uh, push back on, dispute, challenge, et cetera?

Andrew Whitney: We've actually done, um, some very [00:53:30] interesting work with USAMRIID over the years, um, including on Ebola and Marburg viruses. Um, where, again, the compound was, uh, it was very effective. So that's one of the reasons we had the relationship with USAMRIID to begin with. Um, the, uh, the only reason they didn't continue that work, by the way, was because the DOD just didn't have the budget to allocate to it at the time. Um, but, you know, we know there's significant potential to, um, [00:54:00] to develop some products around that going forward. So, um, uh, USAMRIID has certainly kept the door open for us. Um, it is open to doing additional work, um, and we, uh, we- we certainly want to take them up on that. But we've been enjoying so much success with the work we have been doing, that, um, you know, it's- it's one of those things that we haven't gotten around to yet. But, um, I'd certainly like us to do that, because USAMRIID is a first class outfit.

Jonathan: Um, "Carson has also been helpful, and it's not the first time [00:54:30] he has advocated experimental products to the FDA during his tenure as HUD secretary. A source familiar with Carson's interactions with the Food and Drug Administration said the oleandrin," uh, sorry... "said the secretary of housing," uh... I'm sorry. Let me just.... uh, find, but this is repetitive. Um, sorry... "said that, earlier in," uh, sorry... the secretary... "A source familiar with Carson's interactions with the Food and Drug Administrator said that earlier in [00:55:00] the Trump Administration, long before, uh, the COVID-19 pandemic, Carson called the FDA to promote an experimental stem- stem cell product. Uh, the quickest way"... Uh, see, I'm going to have to delete this part, uh... but

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I'll put these two paragraphs... "The quickest way to get his product to [00:55:30] market to sell, as doctors have, won't allow Whitney to make any bold medical claims about curing or treating COVID-19 to get a dietary ingredient on the market, one first has to notify the FDA, then there's a 75-day hold period after"... I think we've covered all that. I'm going to delete- delete those two paragraphs.

Um, and then, this, eh, and then this is the bottom line, some- fr- from, uh, this is- this is the criticism, that the crystallization, we, I was telling you before, of- of the critique inside the government [00:56:00] is this. "Scientists around the world are in a race for cures, treatments, and vaccines for COVID-19. Government regulators are investigating hundreds of products. When a biotech executive like Whitney can take his case directly to the President, and recruit other top administration officials and Trump friends to lobby the head of a regulatory agency, it casts doubt over the scientific rigor of the drug-development process."

Andrew Whitney: Um, so a couple of comments I would make in response [00:56:30] to that. Um, it, first of all, again, what matters most is getting to the right answer. So if we can get to a solution by any means possible, I think you would agree, that's the desired outcome. Would- would you agree with that, Jon? Just getting to the answer.

Jonathan: Well, I mean, yes. But I also think that there needs to be a process, to get like a proper vigorous process to get to that step.

Andrew Whitney: Okay, but that, but that process, that process, um, you know... I mean, [00:57:00] has it- has it been eight months, nine months now, since everybody knew about this virus? How many vaccines, therapeutics, treatments, have emerged from that process?

Jonathan: Well-

Andrew Whitney: I mean, any, how many FDA-approved treatments have emerged from that process? We can give you-

Jonathan: ... yeah. We've got a- a mediocre therapeutic in remdesivir, and we've got none, obviously, no- no vaccines.

Andrew Whitney: ... right. That- that's- so- so zero is the answer. If you look on the FDA's website, zero approved [00:57:30] treatments, because remdisiver's

still on an EUA. Um, it's not actually an approved drug, I believe. Well, anyway, if you look on the FDA's website, you'll see there are currently no approved treatments, therapeutics, drugs, vaccines, whatever you want to call them. So, um, that's not to say, to suggest, that everybody's being lazy over there. Um, but the bottom line is, the process has not delivered. Um, I'm not sure I would characterize it as woefully inadequate, but what I would say is (laughing) that- the- the- that the- [00:58:00] what, we-

Jonathan: I'm sorry. That's just reminds me, it's like, "I'm not saying you used to beat your wife, but, uh..." (laughing)

Andrew Whitney: ... I never suggested you beat your wife, Jonathan. I never suggested you beat your wife. Um, this is, uh, and- and, yeah, but no. But what- what I'm saying is this, is if you, the- the process, because it's not just the FDA, it's the whole of HHS, it's the entire Big Pharma industry. It's actually everyone in the world has been throwing, I mean, literally, they've got unlimited power [00:58:30] and unlimited resources for the last, what do we want to call it, eight, nine months? It de- depends on when you started the clock. I mean, you know, some of us knew about this thing, um, you know, coming out of China last, you know, last December there were rumblings.

Um, so, it's been a long time, and there's absolutely nothing yet that's approved. So, all I would say, is, you know, if I was in charge of this thing right now, I would be open to suggestions coming in from anywhere. And as long as there was a [00:59:00] modicum of support for it. And I'm sorry, but UTMB is one of the most respectable institutions in this country, and they've done great lab work on this. Those results stand on their own. Dr. Ben Carson, you can say what you like about him being the former head of pediatric neurosurgery at Johns Hopkins, in other words, the top of the top of the top, um, and that, you know, he hasn't been a virologist his whole life, but the man is no slouch. Um, so, you take a couple of days of points like that, that alone warrants serious [00:59:30] consideration of this. This isn't whipped up in a bucket in someone's back garden, you know. There- there- there's- there's support for this.

So, given the circumstances that we are in an unprecedented situation, where- where families, communities, businesses in this country are getting torched by this virus, is there not some latitude to try

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some different stuff? You know, to try a couple of different approaches. That's all it is. And I think people are just [01:00:00] so desperate to politicize this thing. Um, but if everyone just steps back for a minute and says, "Well, look. Let's just judge this on the results. You know, have we got anything?" "Not yet, no." "Well, when are we going to get something?" "We don't know." Okay. Well, if you can't answer any of those questions in the positive, then why are we, why are we so excited about the fact that some guys have shown up with something, that funny old thing, seems to actually have, at the very minimum, a decent level of, [01:00:30] of, um, of credibility to it? Um, why are we attempting to rubbish that as some nutty botanical, um, that's been unfairly foisted on the bureaucracy?

I don't think we should look at it like that. I think we should look at it as a, as another potential solution that could be a win for everyone. Because, you know, clearly the FDA's trying to do a good job. The President's trying to do his best to resolve the problem in this country. People like Ben Carson just going, "Look. How can I help? This isn't even my- my primary day job, but if I can help, I'm gonna pitch in and help." [01:01:00] So can we focus on the solution and the goal, and less on the politics of it all? I would hope so. Um, you know, that's certainly all my devotion here.

Jonathan:

Um, well, listen, I am going to make sure that your, um, points... I mean, I can't, um, as you know, there's space limitations, but I'm going to make sure that you are, uh, expansively quoted, um, uh, in the piece, um, and that you get your points in. And, [01:01:30] um, uh, you have full visibility. I literally just went through the piece with you, um, point by point. So, um, you know, whatever, uh, you can say about it, you may not like the final piece, but, uh, but there- there won't be any surprises in it, I'll- I'll tell you that.

Andrew Whitney:

Well, listen, Jonathan. I mean, I- I think you've been immensely fair. Um, you might yet decide to take to me with a hatchet once my back is turned. But, um, but no, I- [01:02:00] I've- I've- I think this has been a pleasant exchange and-

Jonathan:

No, no, I mean, the hatchet is here. No, no, no, I- I'm showing you the hatchet. The hatchet is here. I mean- I mean- I've read, I mean, as you know, this- this is not a, this is not a nice, you know, particularly, you know, there's criticism in there. It's not, this is not a pop story in any

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sh- way, shape or form. It's actually, uh, you know, I would say, more weighted on the, I mean, you just, we just went through it together. I don't think you would describe this as a- a positive or promotional story at all.

Andrew Whitney: Sure.

Jonathan: Um, but I- but I have given you full- full [01:02:30] visibility of it, is what I'm telling you. Yeah.

Andrew Whitney: Well, you have. It- it's- it's- it's super refreshing, and, um, um, you know, per the Solomon piece, you're the only guy that called us. Nobody has called us yet. We don't have a PR agency. We don't have a lobbyist. We don't have any of that stuff. We just, uh, we're just a small company that's got something that we know works.

So, um, you better believe every day I leap out of bed and I'm going to do my best, because the stories I could tell you, Jonathan. I will be happy to, in a subsequent interview. I mean, they'll bring a tear to your eye. And [01:03:00] it's- it's every time we get one of those, it's like right, we're on the right track. We're doing the right thing. Um, and, um, yeah. It- it's, um, it's, you know. And then- and then there will be other stories where we can't get it through to somebody who's begged us for it. We can't. Because the doctors can't. Their hands are tied. And, um, and then, that person is no more. And I, it's just tragic, because when you know the- the record of efficacy that we've got, um, which you [01:03:30] would find alarming, um, you know, it is absolutely heart-breaking to come across these situations.

And we just want to help. That's all. Um, and- and, you know, call my bluff. Give us a test. Let us do a test. What- what are you afraid of? Anybody? You know, it- it- it's, um, we already know it's safe in humans. We can produce countless studies. We've already passed FDA phase one and two. We've got zero toxicity studies from UTMB. [01:04:00] Um, you know, there- there's no downside to this, so why wouldn't you let us test it in a hospital?

Jonathan: Have they explained why?

Andrew Whitney: Nope. We just keep getting asked for more bits of paper and, um, uh, and around we go. And- and we've done our very best to follow the

process, and I know they're busy. I know there's a lot going on. But, um, you know, they've, [01:04:30] you know, there- there are compelling reasons to, um, to put a lot more thrust behind this. You know, Ben Carson has got better things to do- to do than- than mess around up a blind alley on things like this. So you got to ask yourself, I mean, he's an immensely intelligent individual. So, um, so there's no salesmanship involved. You don't pull the eyes ov-, or you pull the wool over the eyes of a guy like Dr. Ben Carson. Um, you know, it- it's, um, [01:05:00] it's, um, he knows what's here.

Jonathan: Uh, well, listen, I- I appreciate you taking the time to talk to me. And, um, and, uh, I hope, at the very least, that you think, um, that, uh, the final piece is fair, and that you're recorded- your point of view is represented in it.

Andrew Whitney: I'm- I'm looking forward to seeing it, Jonathan. I thank you for the time and the opportunity to discuss it. And, um, you know, if we're still speaking to each other after it comes out, then I'll- I'll happily talk [01:05:30] to you again about it, you know.

Jonathan: Um, well, TBD, don't- don't you- you know, you- you- you might be, uh, you know, I might have to get personal security, uh, after you read it. All right. Okay. Take care.

Andrew Whitney: (laughing) Thanks Jonathan. Bye-bye.

Jonathan: See you.

Andrew Whitney: Bye.