Only 2 months later at the beginning of November after the **massive application** (https://youtu.be/yT6CFFAuq14) where, according to the import data, more than 2,500 cubic meters of chlorine dioxide have been produced, a reduction in mortality is observed almost to zero and a **clear reduction in the infection curve** (https://madridmarket.es/estos-son-los-estudios-clinicos-realizados-con-el-dioxido-de-cloro-cds-que-los-organismos-sanitarios-internacionales-y-nacionales-olvidan-mencionar/) placing Bolivia in a unique place since the neighboring countries continue to have incremental curves.

The new law Naciona (https://www.msn.com/es-co/noticias/mundo/bolivia-autoriza-uso-de-dióxido-de-cloro-para-tratar-covid-19/ar-BB18UVuw) **l** allows universities certify and producing chlorine dioxide as CDS for therapeutic use.

The implementation has been possible thanks to the efforts of various medical groups, especially **COMUSAV** (https://comusav.com/) led by **Dra. P. Callisperis** (https://madridmarket.es/la-presidenta-de-comusav-bolivia-califica-de-irresponsable-a-la-omc-espanola-por-su-informe-sobre-el-dioxido-de-cloro/) & **Dra. Suxo** in Bolivia.

The **COMUSAV** (https://mediosyestrategias.com/en-mexico-documentan-un-100-de-recuperacion-de-pacientes-con-covid-19-tratados-con-dioxido-de-cloro/) (World Health and Life Coalition) brings together more than **4000 doctors** (https://madridmarket.es/3000-medicos-crean-la-comusav-para-defender-el-uso-del-dioxido-de-cloro-contra-el-coronavirus/) in 24 countries who are using the CDS with resounding success due to its effectiveness without harmful effects in the doses used.



Click here to see ClO2 against coronavirus (https://mega.nz/folder/QJhjzBIB#X7oroB6I69wOppf4a0uMHA)

Chlorine dioxide for Coronavirus: a revolutionary, simple and effective approach.

March 2020 DOI: 10.13140 / RG.2.2.23856.71680 License CC BY-NC-SA 4.0

Project: Toxicity study of chlorine dioxide in solution (CDS) ingested orally Andreas Ludwig Kalcker and Helena Valladares.

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Oxygen theory with selective oxidation of pathogens through ClO2.

For the last 100 years the pharmaceutical industry has focused primarily on the conception and use of toxic substances to create drugs for specific receptors, without ever looking at the target.

natural process of the body what is the oxidation of pathogens, as it can be observed in the macrophages of the immune system.

The new selective oxidation therapy, which at the same time provides molecular oxygen in the form of O2, opens up endless possibilities and a new technology that may be essential for the human future.

- (https://drive.google.com/file/d/1lQmur37cGlDya-FG6anhBgTjyXM8Xoaa/view?usp=sharing)

Chlorine dioxide (ClO2) has been used for more than 100 years to fight all kinds of bacteria, viruses and fungi. It acts as a disinfectant, since in its mode of action it turns out to be an oxidant.

[1 # BiologicalEfficacyList] (https://drive.google.com/file/d/1lQmur37cGlDya-FG6anhBgTjyXM8Xoaa/view?usp=sharing)

It is very similar to the way our own body works, for example in phagocytosis, where an oxidation process is used to eliminate all kinds of pathogens. Chlorine dioxide (ClO2) is a yellowish gas that, to date, is not considered by the conventional pharmacopoeia as an active ingredient, although it is used in a mandatory way to disinfect and preserve donated blood bags for transfusions.

[2 # Alcide studies on blood disinfection] (https://drive.google.com/file/d/1VuT-Y90_PH2W6YTRa27MIZlwJjJgxQdY/view?usp=sharing)

It is also used in most of the bottled waters suitable for consumption, since it does not leave toxic residues; In addition to being a gas that is very soluble in water and evaporates from 11°C.

The recent Covid-19 coronavirus pandemic calls for urgent solutions with alternative approaches. For this reason, chlorine dioxide (ClO 2) in aqueous solution at low doses promises to be an ideal, fast and effective solution for the elimination of this virus.

Too many times it happens that the solution is found in the simplest way.

The approach is as follows: on the one hand we know that viruses are absolutely sensitive to oxidation and on the other, if it works in human blood bags against viruses such as HIV and other pathogens, it can logically work in this case as well.

The SARS-COV-2 virus that causes the COVID-19 disease has generated a dramatic change in global activity since the end of 2019. This new disease reminds us of the ravages suffered by the pandemics experienced during the bubonic plague, cholera and the called influenza or Spanish flu. The virus has generated up to July 3, 2020, 10,710,005 cases and 517,877 confirmed deaths in the world.

Of the microorganisms of this genus of the Coronaviridae family, seven species are known that can infect humans and possess a single-stranded RNA genome with a length of between 26 and 32 kilo bases. SARS-CoV-2 emerged at the end of 2019 in the city of Wuhan in China and from there it spread to most countries in the world causing the first great pandemic of the 21st century. Initially it was considered a respiratory infection, which evolves into serious respiratory and systemic complications that can cause the death of patients.

After six months of evolution, it is known that the main complication is pneumonitis with the consequent syndrome of respiratory distress, endothelial damage, cytokine storm, disseminated intravascular coagulation, severe multisystemic failure and finally death.

It is assumed that it is transmitted mainly through the airway penetrating the mucosa, when saliva particles are projected out through coughing and sneezing. In recent months, research carried out in Italy has shown that its aerial spread is much greater than what was initially thought (Setti, Leonardo et al, Universitá di Bologna, 2020).

Current medicine does not have a really effective treatment or primary prevention to contain covid19. The proposed measures attempt to reduce transmission with social distancing, frequent hand washing and isolation at home, which reduces the speed of infection, although not actually the number of infected.

This causes a strong social, health and economic impact on a global level.

Every Physician is Authorized to use new or **unproven** preventive, diagnostic and therapeutic procedures according to the **HELSINKI WORLD MEDICAL ASSOCIATION STATEMENT** - Part No. 37 (This would also apply to chlorine dioxide).

According to the statement, only the doctor has the decision to apply the treatment and if the patient asks for it, he is authorized to use chlorine dioxide, whose use is already official in Bolivia against covid-19.

According to the human rights commission, any administration that prohibits it is responsible and any unsigned Warning does not have any legality under the law.

* In any case, the respective national legislation and, in particular, its provisions for use in case of national emergencies must be observed.