

Postcovid-19 War era, no Drugs-No side effects, (re)Consider Discovery of a Novel mind Provoking Alternatives

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Received date: December 21, 2024; Accepted date: January 08, 2025; Published date: March 03, 2025

Citation: Bahram A. Badlou, (2025), Postcovid-19 War era, no drugs-No side effects, (re)Consider Discovery of a Novel mind Provoking Alternatives, *J. Pharmaceutics and Pharmacology Research*, 8(2); DOI:10.31579/2688-7517/225

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Abstract

In these POSTCOVID-19 WAR periods, it could be speculatively said that many unknown synthetic drugs and vaccines (D&Vs) are used by more than a billion people, including their relatives, creating a supply-demand for more than 100 billion (un)known D&Vs manufactured, annually. Consequently, this kind of supply-demand have caused /created hypothetical business and speculative market that are worth more than hundreds of billions of euros, remarkably

Key words: human; drugs; vaccines; discovery public health; hypothesis

Abbreviations:

Drugs and Vaccines (D&Vs); increasing production/consumption ratio (IPCR); Antigens, Immunogens, Allergens (AIAs); Vaccine-Induced Damage (VID), Ageing-Related Diseases (ARD); Oxidation- Related Degenerative Diseases (ORDD); No-Drugs / No-Side Effects (NOD-NOSE); Inflammatory-Associated Diseases (IADs); Complete Manageable Systems Biologics' Approaches (CMSBA); neurodegenerative diseases (NDDs); neuromuscular diseases (NMDs); cardiovascular diseases (CVDs); Health and Disease(H&D)

Summary:

In these POSTCOVID-19 WAR periods, it could be speculatively said that many unknown synthetic drugs and vaccines (D&Vs) are used by more than a billion people, including their relatives, creating a supply-demand for more than 100 billion (un)known D&Vs manufactured, annually. Consequently, this kind of supply-demand have caused /created hypothetical business and speculative market that are worth more than hundreds of billions of euros, remarkably.

Moreover, the D&Vs' side effects inclusive collateral damages are causing chronic patients to suffer randomly from (un)known clinical indications, accelerated disease progression, excessive mortality rates, and (in)direct pharmacotoxicologicdamage, (un)intentionally. Besides, increasing production/consumption ratio (IPCR) of different D&Vs, cost random societies, hundreds of billions of euros, eventually.

The aim of this paper is to highlight more over potential novel alternatives and approaches to tackle unnecessary (ab)use of synthetic unknown D&Vs, from 2025.

What is known? From the day that D&Vs are manufactured and used, the side effects and collateral damages were created and registered. (1-4) Though, the IPCR in the last 4-5 years created an atmosphere/ situation/ circumstance that IPCR balancing is eventually needed, to prevent unnecessary excessive mortality rates. Although, more Antigens, Immunogens,

Allergens (AIAs) manufacturing had directly caused (un)intentionally increased excessive mortality rates (1) by unknown D&Vs' side effects, abuse or bias-based prescriptions of General Practitioners (GPs) causing Pharmaco-Toxicologic accelerated mortal consequences. [1,2] On the other hand, more than 65 up to 650 million longCOVID patients are suffering from the side effects of Vaccine-Induced Damage (VID), who were not protected completely yet, however. [3] Nearly 108,000 people in the US died from drug-involved overdoses in 2022, including illicit and prescription drugs (CDC WONDER database, <https://wonder.cdc.gov/>). However, some synthetic D&Vs have had positive effects, and saved many lives in the last millennium, indicating that D&Vs are like a knife cutting both ways. On one hand, they protect subjects; on the other hand, they can harm them via pharmacotoxicologic side effects and collateral damage.

The sincere and thought-provoking question remains, "Is it possible to live without (ab)using synthetic D&V by 2025?"

Let's discuss it in more detail and get an update over, what are the main problems of living with(out) synthetic unknown D&Vs, from next year. One can speculate that without D&Vs everybody should act /use/ think about alternatives i.e., biological food, food supplements, herbal medicine, acupuncture, sport, physiotherapies, etc. Besides, it is essential that affected subjects' body respond to these kinds of alternatives, compared to classical D&Vs. In this POST COVID- 19 periods that more than 300 sort COVID-19 variants and mutants are circulating around, either causing mild- or severe diseases, it is important to (re)consider potential risks among any aerosol AIAs interaction and creating new End-Epi- or Pandemic attacks, soon or later.

What is unknown? All aspects of science-based versus Economic-based angles, after (ab)using synthetic unknown D&Vs, in the last 4-5 years that is not elucidated completely yet (December 2024). Simultaneously, another question raises whether with(out) (ab)using certain unknown synthetic D&Vs in the last 4-5 years, would be possible to live diseases-free, from next year? and if yes how?

Interesting aspect to highlight is, how subjects could be treated without using synthetic unknown D&Vs, and more exciting aspects would be the Economic-based savings on the one hand, and on the other hand Science-based discoveries that would restore Science and Scientists' respect and public's trusts, soon or later. Besides, medical scientifically saving life of people could prevent unknown/ unimaginable collateral damages, as well.

From the day that synthetic unknown modern D&Vs are manufactured and (ab)used in the 21 st Century, nobody can predict which D&Vs can have / or not have 100% either preventive or curative effects, on certain subjects (animals or human). Besides, because of significant bioavailability and genomic differences between subjects, (re)considering their appropriate and timely immunologic (re)responses, it became (almost) impossible to predict that any random subject could get benefit from an unknown injected synthetic unknown D&Vs that never or limited validated.

Besides, another unknown aspect is the side effects of final concentration of certain biological D&Vs that never exactly could be measured after injected in a random body, with huge differences, either bioavailability or (ir)responsiveness aspects, and/or background history concerning personal medicine usage monthly, which could affect rapid/slow (ir)responsiveness of subjects, to any (un)known D&Vs, logically.

The concept of No-Drugs / No-Side Effects (NOD-NOSE) was very interesting concept for me and from 30 years ago, I started to follow studies over all kinds of alternatives, which they were busy with studies to discover all model systems about NOD-NOSE concept. First example of using alternatives instead of (ab)using unknown D&Vs was studies to protect human/animals' isolated heart, during prolonged storage and transportation from donor to recipients, in Hospitals. It was a very novel idea that in 1999 introduced to me, which they called it as "the calcium paradox model system", in which by removing only calcium ions from the solution (cardioplegic preservative), any isolated (animal and human) heart could be preserved, however. (11) Indicating that without using any D&Vs, Basic Scientists were trying to produce an extra tool.

Now a days, it is possible to protect donors' cardiovascular cells and tissues, during isolation, prolonged storage and transplantation to the recipients in Hospitals, without (ab)using any unknown D&Vs.

Second example of using alternatives instead of D&Vs, to protect human cells and tissue was in 1999-2002 introduced to me, a Basic Research study over all kinds of synthetic and biological antioxidants and polyphenols, which potentially can preserve whole body, skin cells, human tissues and associated cells, however. I collaborated to isolate herbal products, and prepared biological extracts, more than 47 herbal and biological solutions, which potentially could protect, prevent certain Ageing-Related Diseases (ARD) and/or replace Oxidation-Related

Degenerative Diseases (ORDD), initiating regeneration processes by stopping propagation of ARDs and ORDDs processes. (2-9) Termination of ARDs and/or ORDDs is since 2002 not difficult anymore, and GP's and Diet specialists don't need any other medications, causing unnecessary side effects. Now in 2025, for example became the Omega-3 very useful food supplement to prevent- protect- cure certain ARDs and ORDDs.

Third example of working without (ab)using any unknown D&Vs to achieve certain Healthy goals, was studies that between 2002- up to 2006 introduced to me. [5] By transient metabolic suppression of human isolated platelets concentrates (PCs), by a kind of starvation and metabolic arrest of mitochondria, whole metabolism of ARD and ORDDs could be decreased, reversibly.

Afterall, in 2007, I succeeded to discover novel model system to preserve PCs for more than 14- 18 days, pretransfusion. [6] Human PCs are very useful as an alternative Biological Medicine and their medicinal usage as ultimate restoring solution for cell and tissue restoring & therapies, is already established in the last 80 years. [4-11] Forth example of alternative studies that were avoided D&Vs to protect, was since 2015, introduced to me, which after all so-called complex patented SONAPS technologies (partially still patents are Author's right sensitive). In these clinical Pro-Diagnostics and subsequently clinical approaches, which they were Science-based model systems created by using a combination of Chinese and France-invented acupuncture, with(out) Persian's invented color therapies, with(out) Dutch invented Antioxidant's additives. Amazingly, based on primary diagnostics, consecutive clinical cure could be adjusted to subjects' condition (personalized Medicine) and every time a combination adapted to patients' situation, with(out) adjustments of certain diet regiments. Based on patients' history and ongoing disease progressions that might induce sudden side effects, and/or causing unexpected Inflammatory- Associated Diseases (IADs), in the last 4-5 years, POST COVID-19 periods. In the last 6-7 years our clinical research team succeeded to implement these model systems, toward a Complete Manageable Systems-Biologic's Approaches (CMSBA).

Now in 2025 our research and development team possess different ready-to-use Pro- Diagnostics tools, and subsequently appropriate preventive and curative tools, to prevent/ cure/ restore neurodegenerative diseases (NDDs), neuromuscular diseases (NMDs), cardiovascular diseases (CVDs), and reversed Diabetes Mellitus (DM) without using (almost) no and/or very limited medications, as well. In the near future, might we achieve our ultimate goal to decrease synthetic unknown D&Vs (ab)use to almost 0-5% max. After 2019, when we succeeded to implement different kinds of CMSBA as some of them published as "Case Reports" we are convinced that all abovementioned CMSBAs could be used based on patients' Health and Disease(H&D) analysis, and monitoring appropriate progression toward total cure, whenever needed. [13-15]

NOW our research team is capable to safe life with using D&Vs in the most scenarios. Different case reports since 2020 are indicating that our clinical teams can prevent/ restore/ cure/ Medicare/ Medicaid more than 80-90 percent of patients, without (ab)using any unknown D&Vs –either person-dependently (personalized Medicine) or independently. If we succeed to expand it our CMSBA to whole world, we assume we can both safe lives, and save money, an estimation between 900-9000 billion euros, annually. Moreover, another 10-20 percent who need D&Vs, however; we are working on certain complementary CMSBA model system(s) that maybe well maybe not being successful in the near future, because of our know-how limitation up to 2024.

The take home message is that in the near future soon, might we can help to decrease (ab)use of unknown D&Vs. Besides, by using alternative tools instead of unknown D&Vs, all kinds of collateral damages could be decreased/ prevented among people. On the other hand, preventing accelerated –excessive mortality rates toward

prolonged survival chance create hope and novel science-based tools, soon or later.

Conflict of Interest: No conflict of interest.

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DOI:10.31579/2688-7517/225

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