How to Win Over Covid-19

Fundraising campaign by Lorenz Borsche

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Created By

Lorenz Borsche
Campaign Owner
Heidelberg, DE
Send a message
https://borsche.de/page/ll_lB.html
Hello to all donators of the "How to win over C-19 campaign"

First of all: thank you all for being good hearted people, willing to support a good cause. Secondly: I’m awfully sorry to state that there is doubts shed over the whole case.

I’m prepared and willing to repay your donation. Decide that, when having read the whole mail and don’t hesitate to ask for an instant refund.

I hope the PP account does display to which PP adress I have to send it to from my *private* account (the funds already having been tranferred accordingly). If not, I’d have to ask you for help. In any case, don’t mind I’d be financially in trouble doing that - I’m not :-)

I saw a few fundings done without having received a paralell email saying "XY has made a donation of Z" with an emailadress I could answer to (of the latter, 16 are in bcc here, namely you :-), but only a mail with a name, I cannot check and the donation done. Thus I will publish this email on the GGF site within a few hours asking those people to identify themselves with the data I need to repay to them. 20/8/2020, LB

Indonesian mystery

The study of Prabowo Raharusun has been withdrawn, none of the co authors seems to be reachable anymore, as
even the statistician, I had extensive contact with, does not answer to my mails anymore since the 23rd of June, when she was set out to fly to the Philippines for a new job.

We cannot get a real, resilient verification for the life and death of Prabowo Raharusun, beside tons of mails, which would be very hard to be fabricated, as well as the very, very different mails from his statistician etc. If this all was bogus, as some people in Australia and Indonesia do believe and publish, than that was made big style with an immense effort and a meticulous accuracy that is unparalleled to anything I have seen in my life (after 1/2 mio mails and maybe 100,000 postings in different fora and chatrooms, as well as a case of real hard boiled fraud, carried out with the help of IT, I had to clear up in month long investigations and data research).

Two things are very irritating:

- the attackers from AU and Indonesia (an IT expert in AU and med researchers in Indonesia, having producing a very, very thin paper, not on PBs C-19 study, but on spreading of the results as well as the existence of the person himself, 765 words all in all) both made the same very unbelievable mistake when trying to find PB or get a verification to his existence: they did not write to the hospital given as correspondence adress in the study nor phoned it up or the like.

- the indo researchers argued with clearly false figures wrt the C-19 death toll in Indonesia

In the end they produced a letter from the hospital, looking officially and stating that the hospital did not have an employee of that name and they never had confirmed his death by email. Not to make a long story even longer, even that statement does not prove anything, unfortunately.

The graveplate might have been photoshopped, etc., etc. etc.

The question here is: if these people are attacking the study rightfully, why do they make themselves untrustworthy with (both parties) NOT just writing a snail mail letter to the hospital, which would have been easy even from AU, or looking it up in the indonesian governmental database (which the researchers themselves praised to contain any indonesian MD and couldn’t find him there), thus would have easily been able to phone them, but did that only AFTER they already published their paper, telling us, they didn’t find him, thus he didn’t exist, thus the study is bogus? The same things goes for their using death toll rates too low by a factor of at least 8
(confirmed by the BBC and shere plauibility when looking at the worldometer data, which do not fit reality in some countries, when comparing test rates to infections to death toll to excess mortality), only to argue that there were too many C-19 deaths in PBs study as to be true.

But all of that that doesn't prove the study true nor the author having been a real person.

The other very irritating fact now is, that the source of the data, which always was a little mysterious, now seems to be cleared up. And it does show, and many have seen those data in an half-open database yet, that there are abnormalities in these data, no one with only a little knowledge of how life data do have to look like, no one would produce such data. It has even been discussed in the D-group. The abnormalities of course were not to be seen, when the data were shown compressed and reduced in the tables in the study.

The irritating thing is, that PB showed not much knowledge of maths or stats, only on medicine. Even the young statistician, doing some runs for me, cannot have seen it, as if all was a fake, they should have hide those data from my eyes. If I would have had any doubts, I may have looked closer, as even after data reduction, there is traces left, always. Hard to find, if you are not looking out for them, but faint traces, there are. I found them only the day before yesterday.

Whoever produced this open database set of records did place huge signs in them not to be overseen: “these data are strange”. Unfortunately I was the least to receive this dataset I had asked many people for for weeks, thus only yesterday night, rather early this morning I could analyze them and verify that the records of the PB study do stem from this open database with mysterious sources.

I am prepared to accept that the whole case may not only be in doubt but may have been set up being a swindle.

To interprete it most positively would mean: whoever did it, did it for the forthcoming of Vit D supplementation to help the health of the populace, would have hoped that study to be replicated quickly (which is easier than I thought, as all over the world, blood samples exist being frozen in, which could be re-analyzed for D level easily), but the deafeing silence on this kept on and keeps on.

Researchers all over the world do examine almost every little bit, can tell us, why and how heart cells are attacked by C-19, why even our brain may be attacked, if Remdesivir helps or Chloroquine or Artesemia, but the easiest thing, re analyse C-19 frozen blood samples about
their D-Level is not done. D-promoters are attacked falsely by the Pharma Industry (look at Dr. Mercola's website), eBooks with D and C-19 in the title are rejected by amazon and kobo (David Grimes), anyone hinting D might help, but even NOT giving supplementation recommendations is accused doing so and harming people, to go out in the sun is told us to be enough (which it is not as we all know) and - best of all - this all would only help to make the producers of nutritional supplements rich. That is so absurd when in Germany the market of Vit D is a small 40 Mio €, and CureVac is now worth 100 billions $ at the stock market, and Big Pharma made billions with e.g. statines with statistically not even significant life extension of those being treated vs placebo, that you can only assume that there is heavy headwind on anyone even only hinting Vit D might help.

The other, negative interpretation would be: it was all setup to make money, PB never existed, but was invented by at least three people working closely together, communicating with lots of people all over the world, knowing, that those people would communicate also with each other, and never ever glitching or displaying the faintest hint by e.g. very small, but contradicting details. Very hard to keep up such a scheme, when you have to respond to unforeseeable questions in tons of emails every day.

Not really likely but of course possible. Two questions arise: If that was set up for making money first hand by a real mastermind, he must have hoped, that the very small group of D-activists (maybe 30 all over the world) would not only take notice, but would try to get in contact and THEN would also donate for whatever reason. That's a big bet, as setting this all up is quite a task. Second: being a mastermind, resting the "study" on data having been taken from that big open database and thus copying the abnormalities, he should have known, that one day this must come up. Those data cannot have been fabricated with only the slightest knowledge of stats, as these errors have been highlighted and obviously been discussed in the D-group in April (I only took notice of the study in May and then had no knowledge of that open database). These facts do not easily go together well.

If that was set up, doing a little swindle in the best effort to make the world replicate the study in the hope that then no one would mind if the first study was bogus, and if all of a sudden, donations were made and happily accepted, this still was fraudulent of course, and might explain the errors made by analysing the big data not taking notice of their abnormalities, due to minor
knowledge of stats, and would explain just that: the knowledge of stats being those of statistical amateurs. But no one, even with this minor knowledge would fabricate such records, and they can’t be explained by stemming from different ethnic groups, different labs, whatever. NO WAY! And I hold any bet against a “natural” explanation.

Some people engaged in this case also are helping me to try to clear up that mystery. It’ll take some more days, I’m sure. But do not hesitate to ask me for repaying your personal funds right away, I’m prepared to handle it. If you can wait until the mystery is solved, all the better, as fiddling with PP is a task of its own ;-) 

Sorry to have no better news.

All the best to all of you, take care and stay healthy,
Lorenz Borsche, 20/8/2020

For documentation reasons: here the old version of “How to win over C-19” - to be altered as soon as we know better

The late Dr. P. Raharusun, MD/GP, one of the bravest fighters against C-19 unfortunately didn't live to see that with his important study on C-19- patients he delivered the strongest prove, that we can defeat C-19. We all are in his debt and bound to continue his work by supporting the research and the team.

![Correlation Covid-19 death rate / Vitamin D-level](image)

This campaign is about research to generate even stronger evidence and medical recommendations on large scale prevention of Covid-19 outbreaks via adequate supplementation. And it should support further research on the work of the late Dr. Prawodo Raharusu, who gave
his life for the fight against this Pandemic, working longest hours, always thinking of his patients and team first, who sadly passed away at the age of 57 on May 13th 2020.

[Update 9th July 2020] The last days have seen a hard fight with a certain Robin Whittle from Australia, who - free of any knowledge or understanding of cultural variances - thought he could prove that Dr. Prabowo Raharusun never existed, but was thought up by others to create a huge scientific scam. Whittle in his obsessive curiosity to discover a supposedly big academic scam didn’t even try to do the easiest: to contact the in the study of Dr. Raharusun noted correspondence adress, a hospital in Kalimantan Tengah. Upon request the hospital of course confirmed the existence of the late Dr. Raharusun, and above is shown his tombstone. Whittle now is discredited of course, having bismethered the honour of a dead man without any reason at all. [End of Update]

You may have heard or not heard that a correlation between low vitamin D blood levels and high lethality is being discussed in relation to Covid-19. In our highly technical world, we sometimes - understandably - tend to neglect rather simple approaches. Just think cod liver oil against ricket

Researchers in Asian countries such as Indonesia, India and the Philippines have taken up the vitamin D thesis and are presenting impressive results. We are in personal contact with several research groups there. Their studies suggest that a causal correlation between vitamin D levels and mortality in Covid-19 patients is likely (see the graph above). Lorenz and Bernd wrote extensively on this subject, e.g. in Does Vitamin D ( & C) help with Covid-19? and 7 Cent or lockdown — Graphics and studies on C-19. See as well the letter to our chancellor Dr. Merkel.

The significance of vitamin D for the immune system is medically beyond question. It is also undisputed that the vitamin D level is clearly too low in large parts of the population and especially in the older risk groups. 30% of the population in Germany have a vitamin D deficiency at <10ng/ml in the winter.

Fatal courses of Covid-19 disease are often associated with pneumonia followed by an exuberant immune system (cytokine storm) and sepsis. Vitamin D can act as an immunomodulator and act as a retardant. Raising the vitamin D level of the population to a healthy level greater than 40 ng/ml could produce good results in about 6 weeks bei sehr niedrigen Kosten erzielen (6-7 cents/day).

Until a vaccine is available, vitamin D supplementation
could be a preventive measure that should be discussed to reduce the lethality of Covid-19. The available studies (see literature) also suggest that vitamin D shock treatment may protect patients already infected and hospitalised with Covid-19 from lethal sepsis.

Many thanks and best wishes from Tübingen and Heidelberg for your support, spreading the message and saving lives.

The Struggle

Donation calls are not mine. Usually. Everybody’s already doing something and nobody talks about it and I myself put considerable time and money into the subject. But since I already got some emails on our Covid-19 Telepolis article where people asked how to help, Bernd Glauner and I have set up a donation page which we will manage together and thus consider family and team.

Covid-19 research under the current circumstances asks a considerable toll. Sadly, the "late" Dr. Prabowo Raharusun, author of the largest study reviewed by us, to whom we owe the data for the impressive graph above, passed away on May 13, 2020, only 57 years old, and thus much too early.

If there were a Nobel Prize posthumously, Dr. Raharusun would have more than deserved it, not because he discovered something fundamentally new – the findings on vitamin D are not new, but are largely ignored – but because he took all his courage and the money he didn’t have and delivered perhaps the most important study this year, under circumstances that are completely unthinkable here. For this he deserves the greatest recognition of all. He is a hero of everyday life and his attitude should be an admonishing example even for highly decorated scientists. He will forever have a place in my heart. And certainly in that of Bernd and Mark Alipio, whose study was the beginning and who, fortunately, is now quoted everywhere.

Our Goal

The donations will go to the team for research to generate even stronger evidence and medical recommendations on large scale prevention of Covid-19 outbreaks via adequate supplementation. In the best spirit of our hero of everyday life Dr. Prawodo Raharusun, who gave his life by fighting so hard against the Corona pandemic, and alas, in doing so, didn’t look after himself.
Planned spending is (equal parts or: where it’s needed most, decided by Mark Alipio and El James Glicio):

Mark Alipio, who started it all with his study

El James Glicio, MD/GP in New Dehli, who tries to supplement the elderly

The researchers will use the money to either supplement their patients with Vitamin D (very expensive down there) or setup new studies on this.

Due to muslim tradition, we are not allowed to ask for donations for the family - if you might have missed that. Different countries, different culture.

Documentation of Transactions

GGF documents all deposit transactions. The transfer of the funds to Indonesia or Philippines I shall document as comment.

I will share the access with Dr. Bernd Glauner (4-eye-principle) and we will arrange the forwarding to the target region via PayPal or Xoom.

Lorenz Borsche, Heidelberg, 22nd of May, 2020 (updated 9th of July 2020)