

Rediscovered – Vitamin C Benefits Concealed for 70 Years

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STORY AT-A-GLANCE

- › Vitamin C has always been vital to immune function, but research data also show it plays an important role in the treatment of several health conditions, including cancer. Since it cannot be patented, it's likely a threat to Big Pharma and Western medicine's disease model of care
- › From a historical perspective, vitamin C benefits associated with cancer, polio, multiple sclerosis and other damaging diseases have been suppressed, likely since it is effective, cheap and can't be patented, which means you can't make money prescribing or manufacturing it
- › Humans cannot make vitamin C, so it must be consumed. Large dose vitamin C is the foundation of Dr. Frederick Klenner's cure for polio and Dr. Paul Marik's treatment for sepsis. It's also integral to the successful treatment protocols developed by the FLCCC Alliance for COVID, of which Marik is a founding member
- › Dr. Alpha Fowler performed Phase 1 trials of vitamin C in sepsis using Marik's protocol. Phase 2 was the Vitamin C, Thiamine and Steroids in Sepsis (VICTUS) study that demonstrated an outcome difference, but the journal demanded the research be published as a negative result

Vitamin C was first isolated in 1928 and the chemical structure was identified in 1933.¹ It wasn't until the early 1970s that Dr. Linus Pauling recommended that the optimum daily intake of vitamin C was 2,000 milligrams (mg) and everyone should consume at least 200 mg to 250 mg per day.²

However, as "modern" medicine and the pharmaceutical industry ramped up the health care machine, vitamin C quickly fell out of favor as it is inexpensive, easy to administer and has very few side effects. In other words, as effective as vitamin C is in prevention and treatment, you can't make money prescribing or manufacturing it.

It's important to note that most mammals can make vitamin C in the body,³ but humans and guinea pigs must get it from their diet. Vitamin C is an essential factor in many enzyme reactions and several studies have shown that it's associated with a lower risk of cardiovascular conditions such as stroke, high blood pressure and coronary heart disease.

Vitamin C has always been vital to immune function, but research data also show that it plays an important role in the treatment of several health conditions, including cancer. Research suggests that IV vitamin C could extend survival,⁴ even in people with pancreatic⁵ and ovarian cancers,⁶ which are among the deadliest types of tumor growth.

Throughout the early years of the COVID pandemic, researchers and doctors who used vitamin C to help treat the infection were ridiculed and "modern" medicine organizations tried to sideline them. In the following three years, information about vitamin C continued to be shared but many suffered at the hands of Big Pharma.

Vitamin C – A Historical Perspective

Since vitamin C cannot be patented, it's a significant threat to the pharmaceutical industry and Western medicine's disease model of care. An Australian independent journalist, Just Call Me Jack from Totality of Evidence, published a deep-dive history of vitamin C,⁷ how it's been used and suppressed.

He intends to identify and capture significant data points throughout history that have led up to the COVID-19 pandemic and document what has happened since, including to "discover incremental changes through time, which on their own may seem laudable or benign, but watch them morph and put them together and the Totality of Evidence reveals a picture of ever-increasing centralized control and influence."⁸

Vitamin C has played a role in this influence.⁹ In 2002, Dr. Thomas E. Levy published the book "Vitamin C, Infectious Diseases, and Toxins: Curing the Incurable." By 2011, research and publications identifying ways in which vitamin C might be used were reaching the media. Dr. Suzanne Humphries published a special report on the treatment of whooping cough and Orthomolecular Medical News proposed intravenous vitamin C as a cancer therapy.

Vitamin C and Sepsis

In November 2013, "Clinical Guide to the Use of Vitamin C" was revised and republished. The book recorded the clinical experiences of Dr. Frederick R. Klenner, who used vitamin C in the treatment of polio, which I discuss below. In 2014, Alpha Fowler from Virginia Commonwealth University and his team published Phase 1 safety trials for the IV administration of vitamin C in patients with sepsis.

The goal was to move to Phase 2 trials and when Dr. Paul Marik, former chief of pulmonary and critical care medicine at Sentara Norfolk General Hospital in East Virginia, was asked if he wanted to participate, he declined since vitamin C had already become his standard of care after the Phase 1 trial was published.¹⁰ Marik further developed the treatment protocol, adding thiamine and steroids, which was published in the journal Chest in 2017.¹¹

Some physicians joined Marik in using the [early sepsis protocol](#) while others dragged their heels, waiting for larger clinical trials despite knowing the treatment doesn't have significant side effects or make patients sicker.

In a 2018 review¹² of the protocol, the writers noted the reception for the treatment was mixed, which means your ability to receive this potentially life-saving treatment depends on the hospital where you end up. One of the anticipated larger studies was the Vitamin C, Thiamine and Steroids in Sepsis (VICTUS) study sponsored by Emory University and published in JAMA.¹³

Initially, the researchers, including Fowler, hoped for 2,000 participants but finalized the study with 501. In a presentation at the Fralin Biomedical Research Institute, Fowler describes the positive effects of vitamin C on sepsis.¹⁴

However, the VICTUS paper came to a negative conclusion – that the treatment "did not significantly increase ventilator- and vasopressor-free days within 30 days"¹⁵ – because he was told he to make it negative. In this video¹⁶ of the presentation, you can see Fowler's reaction to the negative conclusion he and the team were asked to make.

He notes that \$1 billion spent on clinical trials had not produced anything that enhanced survival, but in the VICTUS trial they "have shown an outcome difference." Fowler goes on to say:¹⁷

"I got an email from them [JAMA] yesterday and I shared this with Leslie today. They have asked us to state that this trial is negative and that we do not recommend it as a therapy. I am going to put a caveat into that 'until a large phase 3 trial is done.'"

In 2022, Marik's paper in the journal *Chest* came under attack in a series of unsubstantiated allegations of fraud from Australian doctor Kyle Sheldrick.¹⁸ The journal then launched a thorough review of the study and in April 2023, stated there were no methodological errors. Marik and the FLCCC followed up with a defamation suit against Sheldrick and, as a result, Sheldrick had to publicly acknowledge regret for questioning Marik's integrity.

Polio, Multiple Sclerosis and Vitamin C

One of the important threads that winds its way through polio and COVID history is vitamin C. During the polio epidemic of 1948 to 1955, many people avoided crowds and public gatherings¹⁹ in much the same way as during the COVID pandemic, without mandates to do so. In a biography on Klenner, Andrew Saul, assistant editor for the *Journal of Orthomolecular Medicine*, discussed some of the pioneering work by Klenner during the polio epidemic.²⁰

Klenner began with vitamin C treatments for patients with viral pneumonia, the details of which he presented in 1948 in the *Journal of Southern Medicine and Surgery*. Before the polio vaccine was released, Klenner treated polio patients with high doses of vitamin C administered intramuscularly.

In 1949, Klenner summarized his work with polio at the annual session of the American Medical Association. He was from Reidsville, North Carolina, and had no national credentials, research grants or experimental laboratory, but declared in front of this group of authorities that "When proper amounts are used, it [vitamin C] will destroy all virus organisms."

Although Klenner found the most effective route was intravenous, he had determined that intramuscular injections were satisfactory at a dose of 25,000 to 30,000 mg for an adult delivered at 350 mg per kilogram of body weight every two hours. He operated under the premise that the sicker the patient, the higher the dose should be.

He treated 60 cases of polio with the administration of massive doses of vitamin C and cured everyone. None of his patients were paralyzed and all were well within three days.

Levy discussed the remarkable case of a 5-year-old girl who already had lower limb paralysis for four days by the time Klenner treated her. She only received massive doses of vitamin C and massage. By day 19, the girl had a complete return of sensation and motor function and no long-term impairment. Yet, this simple, effective and inexpensive treatment was not well-published, and Klenner did not receive any acknowledgment for his results.

Saul also describes the vitamin-based cure for multiple sclerosis that Klenner went on to develop. Following the doctor's death in 1984, his son was implicated in the murders of five people, a tragedy that became the subject of a 1988 book and a 1994 made-for-TV movie. Yet, true to how the media treats the pharmaceutical industry, it was the son's crimes that were reported far more than the father's cures.²¹

Polio and COVID Narratives Follow a Similar Journey

Just Call Me Jack²² details the history of the polio vaccine, which is alarmingly similar to the release of the COVID-19 shot. By 1952, the public's fear of polio was at a peak, and all were focused on the hope of a vaccine. April 12, 1955, the Salk inactivated polio vaccine was declared "safe and effective" and on the same day, the U.S. licensed it for use. Earlier that year – just like COVID –the diagnostic criteria for polio was changed too. Just Call Me Jack asks: Sound familiar?

In their book "Dissolving Illusions," Dr. Suzanne Humphries and Roman Bystrianyk detail a history of medical interventions that have claimed to lengthen lifespan and prevent masses of deaths. The book demonstrates how these interventions were not responsible and an Amazon summary of the book asks the question: What else is being ignored and misinterpreted today?²³ Polio is one of the diseases and subsequent vaccines included in the book.

Before 1954, patients with short-term paralysis were diagnosed with polio but this criterion changed in 1955 when the vaccine was released. Instead, patients who had no residual paralysis after 60 days did not have polio. Just Call Me Jack quotes the book, writing "Thus, simply by changes in diagnostic criteria, the number of paralytic cases was predetermined to decrease in 1955-1997 whether or not any vaccine was used."

In other words, how a case was defined instantly changed both the incidence of the disease and the efficacy of the polio vaccine. April 2, 1999, the CDC's Morbidity and Mortality Weekly Report, entitled "10 Great Public Health Achievements," said:²⁴

"During 1951–1954, an average of 16,316 paralytic polio cases and 1879 deaths from polio were reported each year. Polio incidence declined sharply following the introduction of vaccine to <1000 cases in 1962 and remained below 100 cases after that year."

The question you must ask yourself is whether the decline in polio was a result of the vaccine or because the criteria for diagnosing polio had changed? The Totality of Evidence reports that less than one month after the oral vaccine was introduced, the lab suspended production because children who were vaccinated were infected with poliomyelitis,²⁵ a concern that continues to this day.²⁶

Statistics from American Polio Surveillance Reports demonstrated that in 1957, two years after the vaccine had been released, nearly half the cases of paralytic polio in children were happening in vaccinated children, which led to the decision that the children needed more vaccines.²⁷

It is not difficult to see the similarities between the release of the COVID-19 vaccine, after which the number of deaths from COVID in the U.S. spiked, and the polio vaccine.

While public health officials initially told the public that the COVID clinical trials indicated the vaccine would prevent them from getting infected, prevent them from spreading the infection and that only one vaccine was required, those recommendations quickly changed when the genetic experiment was released to a far wider cohort than the one in which it was initially tested.

In other words, the shot was released to the world and the public health experts suddenly had much more disturbing data.

Vitamin C, Inflammation and Oxidative Stress

The antiviral capacity of vitamin C was successfully paired with quercetin during the SARS-CoV-2 pandemic and included in the initial MATH+ protocol released in April 2020. I reported that in the early months of COVID-19, the [FLCCC Alliance](#) recommended a combination of vitamin C, quercetin, zinc, melatonin and vitamin D3 for prophylaxis.

To date, the preventive protocol for COVID, flu and RSV includes antimicrobial mouthwash, vitamin D, vitamin C, zinc and melatonin. June 19, 2020, Marik published the paper,²⁸ "Quercetin and Vitamin C: An Experimental, Synergistic Therapy for the Prevention and Treatment of SARS-CoV-2 Related Disease (COVID-19)" in the journal *Frontiers in Immunology*, noting:

"Ascorbic acid [vitamin C] ... plays a role in stress response and has shown promising results when administered to the critically ill. Quercetin is a well-known flavonoid whose antiviral properties have been investigated in numerous studies.

There is evidence that vitamin C and quercetin co-administration exerts a synergistic antiviral action due to overlapping antiviral and immunomodulatory properties and the capacity of ascorbate to recycle quercetin, increasing its efficacy. Safe, cheap interventions which have a sound biological rationale should be prioritized for experimental use in the current context of a global health pandemic."

However, as many have noted during the COVID pandemic, the use of "Safe, cheap interventions which have a sound biological rationale" has not been prioritized, but rather has been vilified. Much of the benefit from vitamin C is how it helps to mediate inflammation and oxidative stress.

This was demonstrated in a 2022 study,²⁹ which sought to determine how vitamin C could help individuals with cystic fibrosis. The data showed that vitamin C supplementation in individuals with advanced inflammatory disease could help increase plasma vitamin E and lower the inflammatory response.

Vitamin C also plays a significant role in [holistic cancer treatment](#) as Dr. Nathan Goodyear and I discussed in a 2022 interview.³⁰ In this area, Western medicine also strove to suppress information since vitamin C is inexpensive and cannot be patented.

As I said, Linus Pauling originally demonstrated that intravenous vitamin C could improve cancer survival, but when Mayo Clinic physicians attempted to reproduce the results without using IV administration, they found no benefit.

Put Legal Strategies in Place Before You Get Sick

The history of vitamin C is replete with public health experts who count the benefits of vitamin C as preventive but continue to push Big Pharma solutions in the face of infection or disease, not the least of whom is former National Institute of Allergy and Infectious Diseases director, Dr. Anthony Fauci, who was interviewed in 2016 in the *Washingtonian*.³¹

When asked how do you avoid getting sick when you're around sick people all day, he replied: "I take vitamin C. It can enhance your body's defense against microbes. I take 1,000 milligrams a day. Many people also do not get enough vitamin D, which affects a lot of body functions, so that would be helpful, too."

During the COVID pandemic, Laura Bartlett and Greta Crawford founded an organization to help people address the forced treatments they were receiving when hospitalized. This same strategy, which must be in place before you are hospitalized, can be used to protect yourself against other medical hazards as well. Read more about how to include this in your health plan at "[How to Save Your Life and Those You Love When Hospitalized.](#)"

Sources and References

- ¹ [Annals of Nutrition and Metabolism, 2012;61\(3\)](#)
- ² [Linus Pauling Institute, Pauling Recommendation](#)
- ³ [Oregon State University, Vitamin C](#)
- ⁴ [PNAS, 1978;75\(9\)](#)
- ⁵ [Current Pharmaceutical and Biotechnology, 2015;16\(9\)](#)
- ⁶ [Science Daily, February 10, 2014](#)
- ^{7, 9} [Totality of Evidence, February 8, 2023](#)
- ⁸ [Totality of Evidence](#)
- ¹⁰ [YouTube, Intravenous Vitamin C: Pathway to a New Therapy to Save Lives, November 9, 2018 Min 1:02:00](#)
- ¹¹ [Chest, 2017; 151\(6\)](#)
- ¹² [Critical Care 2018;22:283 Section Ascorbic acid, corticosteroids, and thiamine for the treatment of sepsis in current practice last five lines](#)
- ¹³ [JAMA, February 23, 2021, Search 2000 \(no comma\) and 501](#)
- ^{14, 16} [YouTube, Intravenous Vitamin C: Pathway to a New Therapy to Save Lives, November 9, 2018 Min 1:04:20](#)
- ¹⁵ [JAMA, February 23, 2021, Abstract-conclusions and relevance](#)
- ¹⁷ [YouTube, Intravenous Vitamin C: Pathway to a New Therapy to Save Lives, November 9, 2018 Min 1:05:10](#)
- ¹⁸ [The FLCCC Alliance Community, June 4, 2023](#)
- ¹⁹ [Mayo Clinic, Polio](#)
- ^{20, 21} [Doctor Yourself, F.R. Klenner MD \(Archived\)](#)
- ^{22, 25} [Totality of Evidence, April 30, 2023](#)
- ²³ [Amazon, Dissolving Illusions: Disease, Vaccines and the Forgotten History, description](#)
- ²⁴ [Morbidity and Mortality Weekly Report, April 2, 1999, page 246](#)
- ²⁶ [Polio Global Eradication Initiative, Vaccine-Derived Poliovirus](#)

- ²⁷ Totality of Evidence, April 30, 2023, Section April 30, Post-vaccination 1957-1959 50% DTP
- ²⁸ Frontiers in Immunology, 2020;11
- ²⁹ Nutrients, 2022;14(18)
- ³⁰ BitChute, August 3, 2022
- ³¹ Washingtonian, January 15, 2016