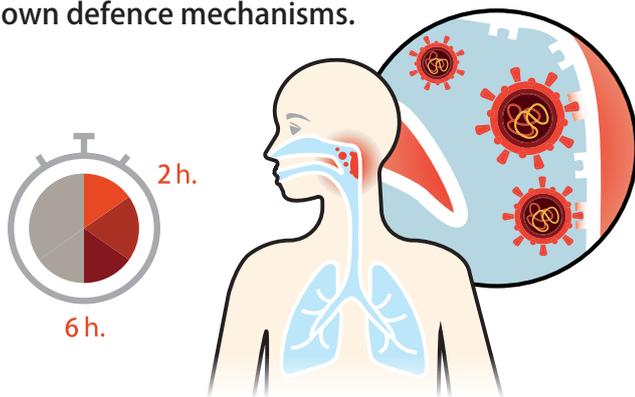


Next-level Covid-19 preventative treatment – vaccination plus gargling offers protection for all

Your guide to how a virus-reducing gargling treatment at set intervals can stop the explosive replication of the virus within the body, prevent illness or keep symptoms mild, and serve as a key complement to the vaccination strategy

The 'CORONASTOP 21' initiative represents a sound and effective strategy for curbing the level of infection and thereby offering greater infection protection for all: even those who have already been vaccinated benefit in terms of transmission risks and breakthrough infections. This method focuses on inhibiting virus replication in the throat and supporting the body's own defence mechanisms.



1. Strategic approach

Danger: viral docking in the throat

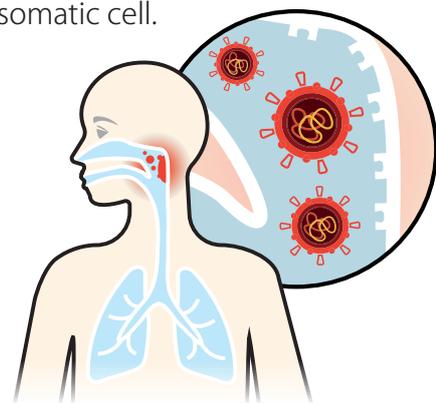
If you breathe in droplets of adsorbed viruses through your nose and mouth, these first come into contact with secretions and mucous located in the mucous membranes of the nose or throat. As mucosal and nasal secretions are directed to the throat by the ciliated epithelium in the nose, any viruses breathed in through the nose are also transported to the throat.

The virus then attempts to breach the mucous membrane barrier via the cells in the nose and throat, penetrating through to the mucous membrane in the throat – which does not feature any ciliated epithelium. Once there, it can reproduce and replicate on a massive scale.

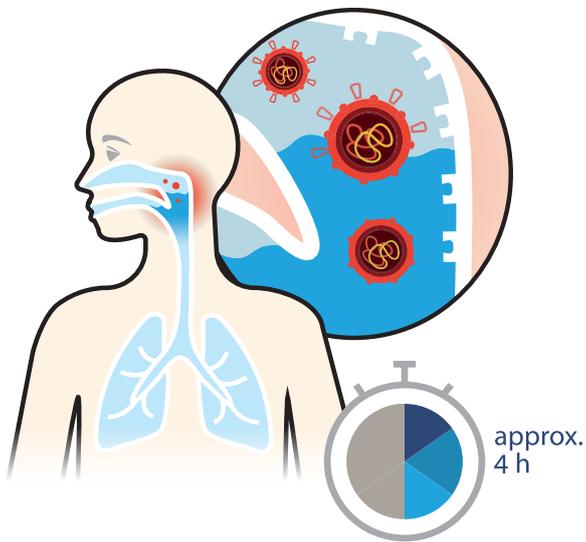
This docking process is currently believed to take approx. 2–6 hours. The number of viruses that reach the bronchi, and especially the lungs, simply by being breathed in is relatively low. Only when the viruses exit the cells in the mucous membranes of the nose and throat is there a danger of the bronchial system and the lungs potentially being flooded by mass virus replication.

Using the weak point of the virus

The virus has a significant weakness: at this stage, the spike protein that gives the virus its special crown-like appearance and serves to dock onto the receptors of a host cell is in a metastable state. This means the virus is vulnerable while it performs the conformity-related changes that are necessary for the virus membrane to fuse with the cell membrane and therefore be drawn into the somatic cell.



One option would be to kill the pathogens in the throat. However, virucidal methods would place intense strain on the mucous membranes and impair the local immune system. A far more sensible approach would be to pursue a virus-reducing method that significantly suppresses the docking process.



2. Method

Virus-reducing gargling at set intervals

A suitable virus-reducing method involves systematic gargling at set intervals with a solution containing 1.5% H₂O₂ and alcohol.

This would largely inhibit the docking process and reduce the viral load in the nose and throat area. It would also support the body's own defence mechanisms and stop these from being overwhelmed – thus preventing the explosive replication of the virus.

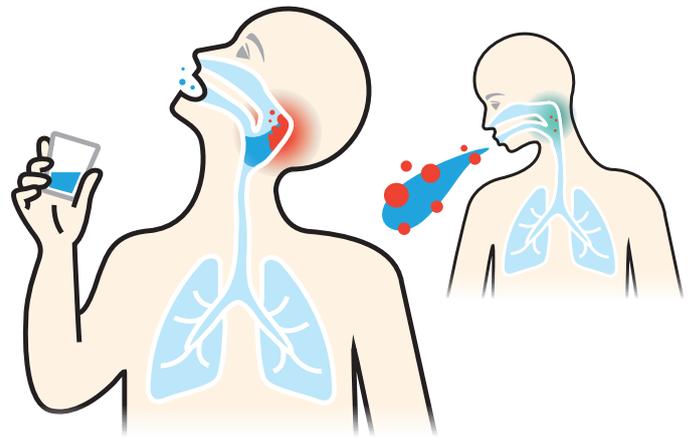
This is based on **two key effects**:

- The solution is gentle on the mucous membranes and bacterial flora, which means the local immune system is not impaired.
- The solution is effective for several hours, ensuring that replicated and released viruses can be sustainably curbed.

Preventative and therapeutic

The continuous preventative application of a virus-reducing gargling solution should proceed on a daily basis at intervals of 4 to 6 hours. For patients with the virus, the solution should be applied in the same manner as supportive therapy until they have recovered.

Application can also occur in specific cases as a post-exposure method following contact with people who may be infected. The recommended minimum application period in such situations is 1 week.



3. Application

Preventative application

2 times a day (at intervals of approx. 4–6 hours, especially after contact with others), gargle 10 ml of the solution (approx. 3–4 teaspoons) for approx. 30 seconds after eating. Following application, simply spit out and do not rinse.

Application following potential exposure

Same as preventative application, gargling 3–4 times a day continuously for a minimum of 1 week.

Application to support treatment in event of illness

Same as preventative application, gargling 3–4 times a day until recovery.

Additional application (medicinal charcoal)

For extra protection, you can gargle medicinal charcoal before bedtime to ensure that any subsequent viruses potentially exiting the nasal cavity are bound in the throat.

Formulation and supply

Glycerinum:	15.0000 g
Dexpanthenol:	25.0000 g
Hydrogen peroxide (3%):	250.0000 g
Ethanol (96 %):	36.4550 g
Oleum menthae pip:	0.5000 g
Solutio sorbitoli (70 %):	37.5000 g
Aqua pur:	ad 500.0000 g
Total quantity:	500.0000 g

(Can be stored for approx. 3–6 months in a cool, dark place)

Using this formulation, any registered chemist will be able to produce the gargling solution for sale on site.



4. Significance

Prevention

The consistent and continuous application of a virus-reducing gargling solution does more than simply help healthy people take preventative measures to protect themselves against a severe coronavirus infection. Thanks to this method, infected people who are asymptomatic would also represent a reduced source of infection in relative terms. In the context of this application, neither the defensive system of the mucous membranes nor the non-specific cellular immune defences would be overloaded – which mirrors the response observed in asymptomatic patients to date.

Low-risk immunisation

In the case of infected patients presenting symptoms, this method would reduce the viral load so substantially as to prevent the development of severe symptoms or severe illness almost entirely. The immune system would remain functional and be able to fight the reduced viral load. This method would therefore enable the 'soft' immunisation of those affected without the risk of critical illness! Whether used as a preventative measure or as part of post-infection treatment, all of society would benefit considerably from the systematic and comprehensive application of this strategy.

Protection against mutations and breakthrough infections

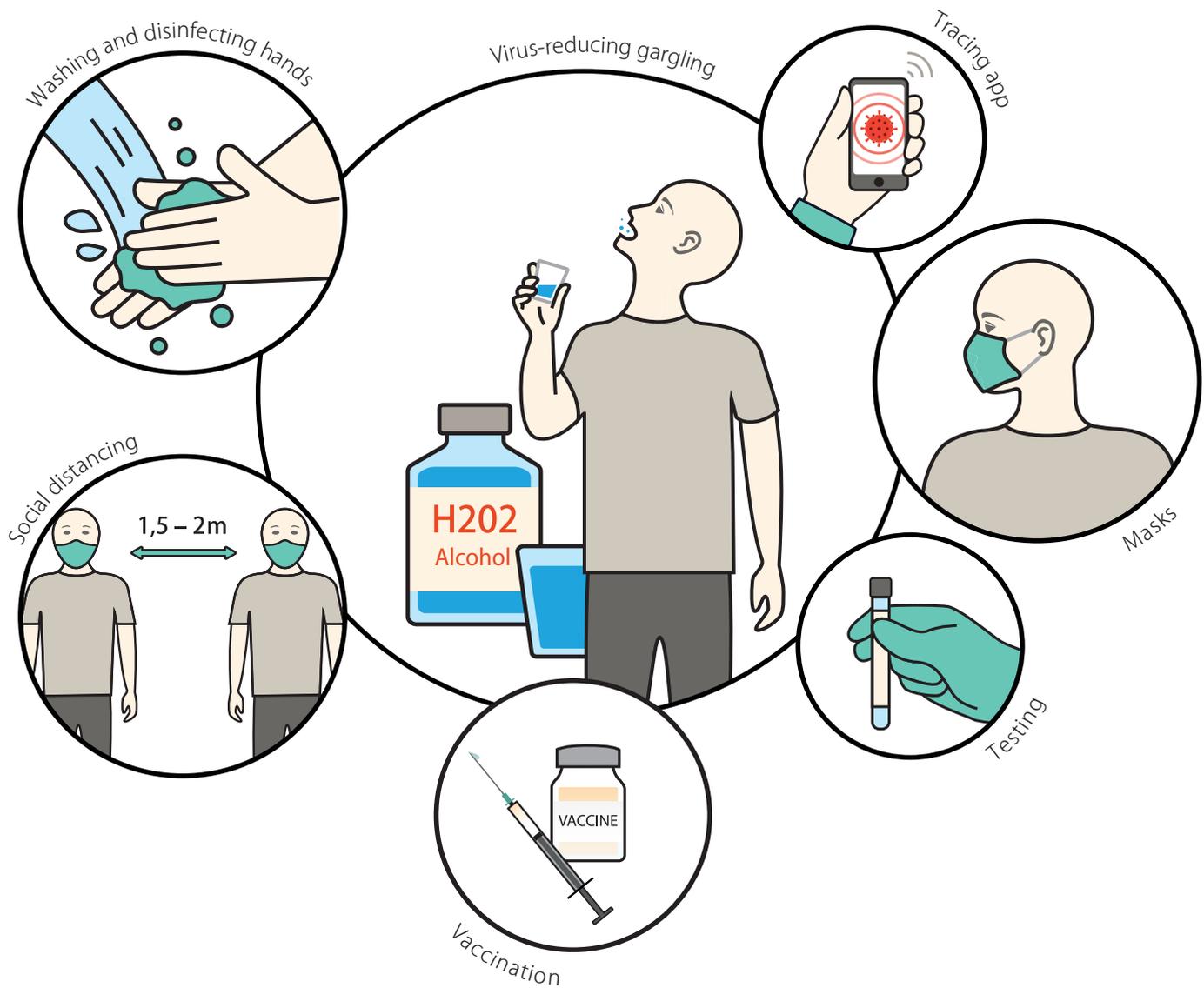
Given the heightened risk of infection posed by mutations, this strategy is particularly ideal for anyone looking to enjoy greater protection and above

all take responsible action – even (and especially) if they are vaccinated or have recently recovered! This represents a way to counteract the increasing number of breakthrough infections and the risk of transmission by the vaccinated. For people who cannot or do not wish to receive the vaccine, this strategy at least offers an effective means of support observed in asymptomatic patients to date.

5. Benefits

Overview of key benefits

- Gargling H₂O₂/alcohol at set intervals is a practical and scientifically sound means of preventing infection
- Inhibits docking and replication of the virus in the throat – a vital hotspot
- Provides gentle virucidal effect and sustainable virus-reducing results
- Significantly reduces the risk of infection with Covid-19, even for the vaccinated (breakthrough infections)
- Also effective against mutations and reduces risk of transmission by the vaccinated or in asymptomatic cases
- Reduces application risks relating to masks
- Easy application
- Suitable for all aged 3 and over
- Very well tolerated



6. Objective/action plan

Implementation of the strategy

- Reducing the risk and rate of infection
- Relieving the strain on the healthcare system
- Safeguarding economic productivity
- Potentially keeping shops, catering establishments and cultural attractions open
- Increasing quality of life
- Communicating, discussing and promoting the concept in relevant areas (science, research, politics, healthcare, media, etc.)
- Recognition as a recommended preventative measure for the general public within official infection protection regulations
- Recommendation as a preventative application in primary care provided by general practitioners and specialists, as well as for vulnerable social groups in particular
- Recommendation as a preventative/adjunctive method in primary care provided by general practitioners and specialists and also within healthcare and elderly care institutions, as a means of reducing the viral load following a positive SARS-CoV-2 test, at the onset of illness or in advanced cases
- Recognition as an additional official preventative/adjunctive measure within the hygiene concept of healthcare and elderly care institutions

7. Author



Dr Achim Neumayr

- Specialist for general medicine, natural medicine, sports medicine, aviation medicine and occupational medicine
- Lecturer in sports medicine/sports biology at the University of Augsburg
- Aeromedical expert at the EASA
- Radiation protection commissioner for the state of Bavaria

Key fields of activity/specialisations

- Development of procedures for boosting psychophysical performance
- Structural and molecular biology/development of innovative microbiological products
- Adjuvant tumour therapy
- Patent development for nanotechnical hydrate cellulose, patent granted in the EU, Canada and the USA
- Patent development for biological insecticides to combat the Anopheles genus of mosquito (patent pending)
- Patent development for bacterial/biological seawater desalination (patent pending)

8. Non-profit initiative

There are no commercial interests relating to the 'Gurgeln21 initiative – Covid-19 anti-docking strategy for the throat'. This is solely a non-profit initiative intended as a community effort to help fight the Covid-19 pandemic.

9. Contact

Our support for the 'Gurgeln21 initiative – Covid-19 anti-docking strategy for the throat' and its initiator Dr Achim Neumayr is not based on any commercial interests, merely a desire to assist society in the fight against the Covid-19 pandemic. Our involvement within this initiative is limited to design, press work and public relations. The initiator is responsible for all specialist content, which he has based on his years of practical experience and scientific research.

As part of our role, we process the responses received in relation to this specialist content as well as general enquiries. We then forward these to the author after checking.

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Please note

Please do not send your enquiries or responses directly to the author, as his practice is not equipped to handle communications of this nature. In order to ensure that work can continue as normal, any enquiries sent directly to this practice will go unanswered.

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