

Did Nikola Tesla Discover a Treatment for COVID-19 Over a Hundred Years Ago?

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If you do a Google search on the question raised in the title of this piece, you may come up with discouraging leads. There is a story on the Science History Institute website entitled “A Killer of A Cure,”¹ which declares that “For more than a century ozone therapy has been a source of false hope for the sick and ill-gotten gains for the crooked.” Recently, a Texas wellness company was barred from promoting “ozone therapy” as treatment for coronavirus following a lawsuit by the U.S. Justice Department alleging that the claim is false and could lead to harmful health consequences.² And then there is the FDA definition of medical ozone: “Ozone is a toxic gas with no known useful medical application in specific, adjunctive, or preventive therapy. In order for ozone to be effective as a germicide, it must be present in a concentration far greater than that which can be safely tolerated by man and animals.”³

When Marc Seifer, the internationally best-selling author of the biography *Wizard: The Life and Times of Nikola Tesla*, sent me copies of letters he was writing to media outlets and health officials like Anthony Fauci, head of the National Institute of Allergy and Infectious Diseases (NIAID), urging them to look at ozone therapy as a possible treatment for COVID-19, I did the aforementioned initial search. After that, I would have steered clear of this topic, had it not been that this was coming from Marc Seifer. He is a prodigious scholar, author of over a dozen books, a professor, the host of a History Channel series on Tesla, and a handwriting expert who consults with various agencies. He has a forthcoming book that will be published this year, *Tesla: Wizard at War*, about Tesla’s secret military technology. Seifer’s a guy one listens to.

Seifer is adamant that ozone therapy should be utilized for this crisis. He calls it “the best path to cure this COVID-19 pandemic.” Based on hard-earned experience, it’s a long way before I’d call anything a “cure.” But could ozone therapy prove to have efficacy in the fight against COVID-19?

Seifer’s path to considering ozone therapy all started in 1984 when he was invited to speak at the First International Tesla Conference in Colorado Springs. There he heard Dr. George Freibott, whose talk was on ozone therapy. Freibott stated that he had injected a combination of oxygen and ozone into the bloodstream of a man suffering with cancer who had multiple tumors. Freibott related that the tumors were shed in this procedure. He noted a scientific study that found ozone could retard the growth of tumors in cancer. Seifer found a report on this study in *Science*.⁴ Seifer said, “I had confirmation from a reputable source and included both of those pieces of information in my 1996 book on Nikola

Tesla, *Wizard*. In 1896 Tesla patented an ozone generator, patent #568,177.⁵ In the early 1900s he started manufacturing ozone generators for medical use. As early as 1890, Tesla also invented the first electrotherapy machines and later in life he suggested that electric currents through the body might benefit cancer patients.”

Seifer says he kept this in the back of his mind in case some medical situation arose where this information might prove valuable. Decades later, in 2020, as the novel COVID coronavirus spread, Marc Seifer decided to research medical use of ozone therapy. He spoke to Dr. Gerard Sunnen, who has a company that sells industrial and medical ozone equipment. Sunnen declared in a recent article for the *Townsend Letter*⁶:

Recently, there has been renewed interest in the potential of ozone for viral inactivation *in vivo*. It has long been established that ozone effectively works against the viability of bacteria, viruses, fungi, and parasites in aqueous media. This has prompted the creation of water purification processing plants in now hundreds of major municipalities worldwide (e.g., Los Angeles, Paris, Moscow). Ozone’s unique physicochemical and biological properties and its environmentally-friendly features have since been applied to a panoply of industrial uses such as the packaging of pharmaceuticals, the treatment of homes and buildings (sick building syndrome), the treatment of indoor air in operating theaters and nursing homes, and the disinfection of large-scale air conditioning systems in hospitals.

The industrial ozone treatment of air is one way in which ozone could be used to fight the novel virus. Longevity Research, who recently supplied ozone generators to Sierra Leone during an Ebola outbreak, is considered one of the leaders in the field. They have supplied ozone generators to such institutions as NASA, MIT and Caltech. The use of ozone for medical reasons has also emerged during this new pandemic.

Reports began emerging in April 2020 from Italian and Spanish hospitals that ozone autohemotherapy was being used to treat COVID-19, with “excellent” results. Reporter Rhian King in *The Ibizan*, a newspaper from the Spanish island of Ibiza, wrote that the Nuestra Señora del Rosario Polyclinica in Ibiza reported “spectacular” rapid improvement in “many” COVID-19 patients who had been on the verge of being intubated, to the point of their not requiring

oxygen.⁷ These improvements were evident after only two or three treatments of ozone therapy. The hospital has registered a clinical trial but urges other hospitals to begin using ozone therapy immediately.

Reports from two hospitals in Bergamo, Italy spoke of positive results of patients upon whom ozone therapy was used. At the Santa Maria della Misericordia University Hospital, Udine, 36 COVID-19 patients who had developed pneumonia and severe respiratory difficulty were treated with ozone autohemotherapy (200 ml of blood interacted with ozone for 10 minutes and reintroduced; repeated three or at most

four times), and all but one had accelerated recoveries and did not need to be intubated.⁸ On the basis of these results, the Central Friuli University Health Centre is applying to the Italian Medicines Agency and the Spallanzani Ethics Committee of Rome for permission to begin a randomized controlled study of 200 patients.

Elsewhere, at Haihe Hospital, China, ozone therapy showed “positive results” on COVID-19 patients at various stages of progression of the pathology, following approval from the ethics committee of Tianjin University and Haihe Hospital. A detailed case report was published for the first of

— OZONE THERAPY TIMELINE —

Marc J. Seifer, Ph.D. 6/12/20

1840 - Ozone was discovered by German chemist Christian Friedrich Schönbein (see 1865).

1857 - Werner von Siemens attempted to destroy bacteria with an induction tube that produced ozone.

1865 - The molecular formula O_3 was discovered by Swiss chemist and medical physicist Jacques-Louis Soret. O_3 is unstable and degrades into ordinary oxygen or O_2 shortly after it is created.

1873 - Cornelius Benjamin Fox, a British medical doctor, began to use ozone as a way to disinfect microorganisms.

1880 - John Harvey Kellogg published his book on Diphtheria and mentioned the work of C.B. Fox. This opened the door for using ozone as a medical disinfectant.

1896 - New York inventor Nikola Tesla constructed an efficient ozone generator, Patent #568,177, using other Tesla patents which generated high frequency phenomena.

1906 - Nikola Tesla started the Tesla Ozone Company to produce ozone generators for medical purposes.

1911 - Professor Noble Eberhart from the Physiology Department, Loyola University in Chicago, published a treatise on high frequency phenomena and ozone production to disinfect sewage and through therapeutic inhalation to treat many illnesses such as pneumonia, diabetes, gout, whooping cough, asthma and syphilis.

1913 - By this time it became well known that ultraviolet light would generate ozone. The ozone layer surrounding the Earth, which is generated every day by UV rays from the Sun, was discovered by French physicists Charles Fabry and Henri Buisson. According to Dr. George Freibott, since ozone is a disinfectant, this process cleanses the Earth's upper atmosphere daily.

1915 - During World War I, ozone generators were used to disinfect wounds of German soldiers, including gangrene.

1936 - French Dr. P. Aubourg was the first to publish a paper on the use of insufflation of a combination of oxygen and ozone infused rectally in the treatment of colitis.

1937 - The dentist E.A. Fisch began to use ozone as an antibacterial disinfectant in the oral cavity and help in healing in gum disease, whereby ozone could be administered by water, gas or through oil. Ozone therapy is now routinely used in dental offices throughout the modern world.

1940 - Ozone is used to purify swimming pools and to disinfect contaminated spaces.

1943 - German prisoners of war on Ellis Island revealed the secrets of ozone therapy to Dr. Robert Mayer, who then went on to use this therapy for the next four decades.

1948 - Dr. William Turska of Oregon began to inject ozone intravenously.

1953 - The German Dr. Hans Wolff published a book on medical ozone and at this time a new therapy began to emerge whereby blood was extracted from the patient and treated with oxygen and ozone and then reintroduced into the patient to cure a variety of diseases. This technique is known as MAH or Major Autohemotherapy.

1966 - Nobel Prize winner, German physician Dr. Otto Warburg, recounting 20+ years of his research explained that cancer was linked to a low oxygen state. Therefore, by introducing oxygen and ozone into the bloodstream, this would enhance a healthy environment that would thwart the development of tumor growth.

1979 - Dr. George Freibott claimed to have cured AIDS with ozone therapy.

1984 - At the First International Tesla Conference, Dr. George Freibott stated that he had injected ozone into the bloodstream of a cancer patient riddled with tumors, which were shed in the process. This claim found confirmation in a report from four years earlier in *Science* in the article “Ozone Selectively Inhibits Growth of Human Cancer,” by Frederick Sweet, Ming-Shian Kao and Song-Chiau Lee, August 22, 1980.

2001 - Chemistry professor for Scripps Institute, Paul Wentworth, Ph.D., discovered that our immune system produces ozone to disable viruses and other pathogens by punching holes in their outer membranes.

2020 - The COVID-19 pandemic began in December 2019 in Wuhan, China and quickly spread throughout the world. An April 2, 2020, PR Newswire reported that MAH ozone therapy was successful in treating COVID-19 patients in Italy, whereby Professor Luigi Valdenassi, toxicologist from the University of Pavia stated that “almost all of these patients experienced improvement... [with] oxygen ozone therapy.” This finding was verified in Ibiza, Spain 18 days later in a report from *The Ibizan* by Rhian King. “Many patients who were about to be...connected to mechanical ventilation have, thanks to ozone therapy, not only avoided it, but improved to the point of not requiring oxygen with just a few treatment sessions... ‘The results have been spectacular,’ says Dr. Alberto Hernandez, Assistant Physician for Anesthesia.”

these patients.⁹

Italian physician Marianno Franzini, President of the Scientific Society of Oxygen-Ozone Therapy (SIOOT) International, reported to a medical advocacy organization, Texas Right To Know, in a tele-meeting on April 1¹⁰:

On 24 March 2020, I received a letter from the ISS, Istituto Superiore di Sanità (Higher Institute of Health), stating, “since the proposal seems to be shared and supported by clinical centers experienced in the treatment of viral pneumonia, it was considered appropriate that the treatment could be carried out under the responsibility of the physician after obtaining the patient’s consent.”

Medical ozone helps improve oxygenation and proved effective for SARS in 2002. Currently there are 17 hospitals using SIOOT oxygen ozone therapy to treat people affected by COVID-19. From preliminary reports from autopsies of those who died from COVID-19, it appears that the virus immediately attacks the microcirculation system causing widespread thrombosis. Several hospitals are using Major AutoHemo Therapy (MAHT), a protocol that extracts the patient’s blood, bubbles oxygen ozone through the blood in a saline or heparin bag, and is infused back into the patient. Patients showed clinical improvement in one to two days of receiving one infusion, one time a day. The earlier you treat the person the better the results you have.

Franzini noted, “After practicing oxygen ozone therapy, the doctors found the following evidence: a general improvement in clinical conditions, normalization of body temperature, a reduction in C Reactive Protein (PRC), normalization of heart rate, an improvement in saturation and reduction in oxygen support, normalization of renal function (creatinine).”

Prof. Luigi Valdenassi, a toxicologist at the University of Pavia, was also involved in the tele-meeting. He explained:

I want to specify almost all these patients experience improvement in hypoxemia in a short period that stabilizes their breathing and the creatinine becomes normalized, which is important for function of the kidneys. Oxygen ozone therapy could contribute to the prevention of intubation and acute renal failure, both complications of COVID-19, resulting in the need for ventilator support via a breathing tube and dialysis requiring intensive care unit support.

Exploring the use of ozone, one discovers that there are many companies around the world, like the aforementioned Longevity Research, doing industrial treatment for air and surfaces of such institutions as hospitals, nursing homes, factories and water treatment. Ozone is already in use and effective for killing germs and bacteria in “sick” buildings and hospitals. The combined use of these industrial ozone systems and medical ozone could offer more tools against pandemics. We were fortunate to speak to someone whose background and work is analyzing and creating those systems.

Industrial and Private Ozone Systems

Electrochemist Michael McKubre, who for years headed up research into LENR at Stanford Research International (SRI) in Menlo Park, California, directed us to a colleague of his, Dirk Haselhoff, whose company Ozone Technologies Ltd.¹¹ is a leading designer and builder of ozone systems for private and public industries, wineries, water refineries, food production, factories and many other businesses calling for such implementation. They are located in Napier, New Zealand.

Haselhoff is an interesting person to talk to about ozone systems that treat air and water systems and their possible application to a virus outbreak. He believes that companies such as his and the use of medical treatment ozone are complementary approaches to fight COVID-19. Both doctors and ozone professionals such as Haselhoff follow each other’s work avidly and believe the different uses of ozone could all help with the coronavirus crisis in a “Both” way instead of “Either/Or.”

Haselhoff provided us with some clarity about what the U.S. FDA labeled “a toxic gas with no known useful medical application in specific, adjunctive, or preventive therapy.”

“There probably isn’t a casino in Las Vegas that isn’t using ozone to clean its air,” Haselhoff told us. Cigarette smoking is legal in Las Vegas casinos and there are ozone air systems, such as the ones Haselhoff’s company builds, in use all over Las Vegas.

Haselhoff noted that Ozone Technologies found a significantly reduced rate of infections and illnesses of people who worked in their factory because of the ozone. He said, “It wasn’t only in my offices. It’s also in factories using ozone in the aqueous phase where ozone is liberated into the air when used within the factory. We also use it in direct air applications for microbial and odor control.”

How does Haselhoff quantify the claim of less illness in ozone workplaces? Haselhoff explained:

This isn’t a scientific process; it’s based on the number of people in the business and the number of sick days they take off. In one case 15 years of data pre-ozone and 10 years of data after ozone being installed. The literature also backs up the claims. Ozone in the factory air reduces micro infections in product. This is based on pre-ozone and post-ozone levels. A winery checked microbial levels for one month pre-ozone and then monitored micro levels for the next three months. Sampling points were made from the roof, walls, tanks, inside and outside, floors, drains, etc. In the first two weeks, there was little change; however, over the next two months, the microbial levels reduced significantly to 5% of the pre-ozone use levels. This same winery stopped aqueous ozone for one year and then rushed to get it reinstated for the next season because of product quality issues. We have many applications where this is clearly very effective. The literature and evidence is not up for debate. Ozone at a given application rate has a greater level of efficacy based on the size of the microorganism. The smaller the organism, the more effective ozone becomes in general terms. Ozone is the most effective usable disinfectant known to man. The WHO states that ozone at 0.05 ppm is equivalent to 1.00 ppm chlorine

dioxide for water treatment. This provides a good comparison between disinfectants. Ozone is 20 times more effective than chlorine dioxide.

I asked Haselhoff if they kept data or did any formal studies. He said, "Yes, but none that would stand up to the rigor of a formal review process for medical use. We must self-fund all our research work, and the theft of IP is a major problem as IP protection only works for companies that can afford the legal costs. We invest heavily in R&D and have very valuable IP that we can't bring to market because as soon as it's marketed, it gets copied, and these companies do a cheap job and sell the sizzle that we developed, undercut our price. The technology fails, and we lose."

Ozone Technologies appears to be treating the air as described here, but there also seems to be a benefit when a factory is utilizing the technology for other purposes. Haselhoff explained, "We have hundreds of installations from Antarctica to Kazakhstan where we treat air, water and just about anything you can think of. Often the ozone off-gas from one process results in many additional benefits. For example, aqueous ozone for fish process washing resulted in elimination of listeria in the factory ventilation system and on surfaces, and the Occupational H&S nurse reported to us a significant reduction in sick leave being taken by staff for colds and flu."

Haselhoff qualifies that in the U.S., laws prohibiting medical claims about ozone therapy make use of ozone difficult. Some of the practitioners Marc Seifer and I spoke to worked in specialties where ozone therapy could be used as preventative medical therapy for certain conditions (see "Thirty Years of Medical Use" below).

Haselhoff indicated that it would not be complicated to set up similar ozone systems in hospitals and medical facilities. He thinks ozone would be very helpful in hospital ventilating systems where they were treating COVID-19.

Haselhoff is not as sure about ozone blood treatment:

COVID-19 isn't likely in the blood, per se. Ozonated blood, however, is known to help activate the immune system, and this may prove of benefit in this respect. Ozone in the air we breathe before or when we are first infected with COVID-19 is likely going to reduce the seriousness of the infection just by reducing the viral load, giving more time for our own immune system to activate. If we can buy time for our own immune system to activate by reducing COVID-19 infection in the airways and lungs of patients and caregivers and/or in the air or on surfaces, we could see a significant reduction in the severity, fewer deaths and fewer people needing to be intubated. Ozone is known to reduce most similar viral airborne infections by 1 log in fifteen minutes and 4 log in one hour. We can't state that this would occur for COVID-19, as the work hasn't been undertaken as yet. However, there is good evidence that COVID-19 will be inactivated by ozone at levels below the USFDA ozone limits. Ozone is known to severely impact any double bond and damage viral RNA at low application rates, *i.e.* at less than the eight-hour working threshold.

We can safely breathe in very much higher gas-

phase ozone without any significant impacts other than, say, COVID-19 based on only a few breaths. The literature is very clear on this also.

Haselhoff believes that the economics of medical systems is a factor: "Big Pharma is our biggest obstacle, as ozone replaces many drugs and that has a significant impact on their bottom line. Ozone treatment is very cheap by comparison."

Does Ozone Technologies have any market for health equipment? Haselhoff said they won't get involved "until there are a set of standards that must be complied with and ozone has gained USFDA approval or from some other equivalent approved organization." He said, "Our reputation is too important to us, and we can't risk our brand. Ozone clearly has a place in medicine." He noted that they have great results in dairy applications but have limited this to a single site for seven years. Haselhoff stated, "The results are outstanding when ozone is applied properly."

Haselhoff is convinced of the benefit of medical ozone use. He stated:

There are thousands of medical doctors around the world now using medical ozone as a medical treatment. The Chinese have also installed ozone systems in many hospitals.

The current literature is clear that ozone is effective on all viruses and on all pathogens. The references from the hospitals in China are a great starting place. The FDA states that ozone is toxic. Of course, everything is toxic; even dihydrogen oxide kills thousands of people every year. That is water of course, otherwise known as H₂O. The FDA and U.S. Environmental Protection Agency (EPA) give ozone GRAS (Generally Regarded As Safe) status. Funny that they state that it's very toxic also. Typical of the U.S. double standards. It's all about the money even when it's likely the best solution the world has currently for COVID-19.

I have my low-level ozone machine available and running at home and at work all the time because I know that it will help.

As ozone treatment has such a low rate of negative side effects, there should be no reason not to trial ozone treatment *in all its forms*. The impact of ozone on RNA of viruses is well documented, and viruses are very susceptible to ozone, especially other coronaviruses like SARS and MERS. There is no reason not to treat the air with ozone at the legal levels as set down by the EPA. There is the option to breathe in *controlled levels of ozone* for a single breath or two at much higher levels and still have no significant impact on one's health.

Thirty Years of Medical Ozone Use

Marc Seifer and I spoke to Howard Robins, a podiatrist in New York who has been practicing ozone therapy for preventative and support medical reasons for foot and ankle

symptoms. Interestingly, that has led patients with a wide variety of medical conditions to come to him, from neurological diseases, diabetes and recently a number of cases that turned out to be COVID-19. (Robins points out that in the case of an Academy Award winning actress who came to see him in March, she was not diagnosed with COVID-19 until later, when she was improved.)

Robins has been doing ozone therapy for 30 years. He said, "It is my 25th year doing DIV [direct intravenous]. I've done 305,000 treatments and I haven't killed anyone in New York State yet; the State would love to put me out of business because I'm not doing traditional medicine." In his practice, he only uses ozone therapy for the foot and ankle. Interestingly, COVID-19 can have an affect on the feet, including what is called "Covid toes," and can cause skin rashes.

Through the non-profit Society for Advancement of Bio-Oxidative Therapy,¹² Robins and others are offering online ozone therapy training for medical professionals. He noted, "Doctors and dentists in our ozone group want to get the training. Not for COVID initially but now they want to have it to treat their family, friends, whatever. There are videos showing how to do it. We talk about the science. We talk about the methods. We go over safety and criticisms, what to do to treat people, basically. You have to take a test at the end to get a certificate for taking the course. Doctors can do that online, and I can be there on Skype, Zoom or Facetime to guide them through it. I can work with anyone anywhere."

Robins believes treating COVID-19 patients with active infections would best be served by *daily* ozone treatments, which only take a few minutes. He noted, "Ozone is medicine. When do you take a medicine once or twice a week to get rid of something? Usually you take the medicine daily. Often several times a day. When you are sick with something you won't necessarily get rid of it with three or four treatments a week; you need daily treatments, particularly with infections that are very difficult to get rid of, like this is."

Robins pointed out that in a scenario where hospital ERs are overwhelmed with COVID-19 patients, ozone therapy could offer advantages in the nimbleness of the treatment. "If you want to treat 300 people fast and easy it is going to take four to six minutes to do. You can treat dozens of people per hour," he said.

Robins said that the ozone autohemotherapy method used in Italy for COVID-19 is a method he does not use anymore. He explained, "There you take out blood and infuse it with ozone and put it back in. I did 45,000 of those between 1990 and 1995. Apparently, it is getting rid of the COVID virus. This is a weaker way of doing the therapy than the method that I use, but it is working. I won't argue with success. It's working. I'm happy for any method of ozone therapy to be used and I can train people in any method."

Robins provided a general overview of the medical ozone treatment he uses: "Using a medical ozone generator, oxygen goes into the generator from a medical grade oxygen tank. It passes through a tube like a neon light bulb, pass electricity through the neon lightbulb, like a thunderstorm, and out comes oxygen and ozone gas. Based on the ratio of the oxygen and the amount of electricity being put through the tube, that controls the amount of ozone and oxygen gas that will fill your syringe. That is how it is created. Then you stick the needle into a vein after putting a tourniquet on, take the tourniquet off, push the gas in slowly. That is IV ozone."

Robins differentiates his method from DIV, calling it Howard Robins DIV or HR DIV. He uses the smallest butterfly needle available, 27 gauge, the one used on newborn infants. Robins does this because he wants to make the least impact on the vein that will be accepting the mixture of gases. He stated numerous times, "Safety is my number one goal."

Robins described his method as "a little more complex, because of the concentration we use, the amount of gas, the speed we push it in." He said, "There are a bunch of little details such as the position the person is sitting and laying in. I have all sorts of little details I've used to make it safer as well as more effective. And how to adjust it for each patient if they have any kind of reaction, to make it more comfortable for them."

Seifer and I wondered what reactions patients could have to DIV ozone therapy. Robins explained, "Anytime you do IV work you can irritate veins. Ozone is a dry excited gas and you can irritate veins with it, so you have to know how to prepare the patient to prevent that from happening, and what to do if it happens." In all of his years of practice, Robins has had two patients who were allergic to ozone and had to stop treatment, and seven patients who developed temporary rashes. He said of the rash cases, "They may have been purging something from their bodies but I erred on the side of safety and stopped treating them."

When asked if he and the Society have considered applying for medical study funding for ozone therapy, Robins noted, "A study is very involved. You need approval from a facility then they need an Independent Review Board to oversee it. There are all sorts of things involved and it's expensive. We are not asking for that." However, he is actively involved in using ozone therapy for treatment of Lyme disease, in a grant-funded study at a major medical research facility. He has delivered an ozone machine to the group, and work will resume once the pandemic allows. Robins said, "Lyme disease is the worst infectious disease we are faced with as a true pandemic. It's all over the world. People die every day from complications of Lyme disease, often undiagnosed or misdiagnosed. We have an effective treatment for it. They are spending millions for research for an accurate test because the testing for it is terrible, absolutely terrible. So once that gets published we can start training doctors to treat Lyme with ozone." He believes that once doctors see that ozone therapy works for Lyme disease, "they'll use it for other things too and they will publish case studies."

Robins stated that getting a compassionate trial done in a hospital or medical facility, such as has been done in Europe, is something he would like to see for COVID-19.

"The key is that a compassionate trial just means you have sick people in a hospital, you go in and treat them and see what happens," Robins explained. "You don't have to worry about a review board or anything else because there is a precedent. They have used Hydroxychloroquine and Zithromax and other things in compassionate trials. One hospital in Louisiana has used hyperbaric oxygen chambers and got good results because that creates similar products in the blood like ozone does. At Brooklyn's Maimonides Medical Center they tried injecting oxygen into the blood; this has been done for half a century in Europe and the benefits have been published. They found it is working well. There is your placebo for a study with ozone. Just use plain oxygen. I don't think you can do a double-blind study. I

think you can do a single-blind study because if a doctor accidentally smelled gas after he pulled the needle out and whiffs the gas he would know if it's oxygen or ozone...If oxygen would work as well as ozone, believe me, I'd be as big a fan of using oxygen from now on."

Robins stated, as many people working with ozone do, that it is hard to get a compassionate trial started for something outside the box, unlike say, "pharmaceuticals that have already been approved for us." Robins noted, "There is a Linus Pauling quote I like from an interview with him I did years ago on the radio: 'Whenever your colleagues are not up on something, you'll find they're down on it.' That holds up in every profession. We were talking about the use of IV Vitamin C to treat cancer, which he was trying to promote in his later years. It has an effective use against cancer. So a two-time Nobel Prize winner was being put down by his colleagues because he was trying to promote something they knew nothing about."

Robins tells us he is not a conspiracy theorist, but he was struck by a dearth of news about ozone therapy in the media in the U.S. "They were telling us day by day what was happening in Italy. So why aren't they putting out what is going on in Italy with ozone being successfully used for COVID in 17 hospitals? What about what it is going on in Spain? The Spanish use of ozone is in the Italian news media, but not in the U.S. media."

Marc Seifer noted that he proposed ozone therapy in an online forum and some of the responses included: Hasn't the FDA outlawed it? Isn't ozone therapy dangerous? Robins is disappointed but not surprised. He said, "The FDA has not outlawed it. Even though they know it exists, their opinion is that it is a dangerous gas and there is no known medical use. That is their basic statement. When did they write that? Forty years ago? Does our FDA not know Pubmed exists and that they have listed numerous positive reports on the potential benefits of ozone therapy? Consider that so many other drugs come on the market with negative side effects, including death, and yet are allowed to be sold because they have medical benefits."

Seifer indicated that a recent paper by Hernandez *et al.*¹³ touts Vitamin C, a potent antioxidant, as a relevant COVID-19 therapy due to its potential benefits when administered intravenously. The authors note the relevancy of ozone as well, stating that "it has been extensively studied and used for many years and its effectiveness has been demonstrated so far in multiples studies."¹³

Howard Robins reminded us that treatments such as ozone therapy could become increasingly essential in a world of pandemics, with viruses that don't respond to antibiotics, and are antibiotic resistant. Ozone therapy, in use all over the world and not patentable, is outside the mainstream. If the reported effects of modulating the immune system, enhancing circulation, oxygen delivery and consumption as well as destroying microorganisms including bacteria and viruses are true, Nikola Tesla's discovery could prove to be more valuable than ever.

References

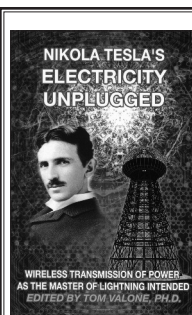
1. Jacewicz, N. 2017. "A Killer of a Cure," April 10, www.sciencehistory.org/distillations/a-killer-of-a-cure
2. [touting-ozone-therapy-COVID-19-treatment](http://www.justice.gov/opa/pr/court-prohibits-dallas-health-center-

</div>
<div data-bbox=)

3. www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcr/CFRSearch.cfm?fr=801.415
4. Sweet, F. *et al.* 1980. "Ozone Selectively Inhibits Growth of Human Cancer Cells," *Science*, 209, 4459, 931-933, <https://science.sciencemag.org/content/209/4459/931>
5. "Apparatus for Producing Ozone," U.S. Patent 568177A, <https://patents.google.com/patent/US568177A/en>
6. Sunnen, G. 2020. "COVID-19, MERS, SARS and Other Emerging Coronaviruses: Theoretical Considerations and a Proposal for Critical Care Parenteral Blood Ozonation," *Townsend Letter*, <https://www.townsendletter.com/article/online-COVID-19-mers-sars-critical-care-blood-ozonation/>
7. King, R. 2020. "Ozone Therapy Proving Successful in COVID-19 Patients," *The Ibizan*, April 8, <https://theibizan.com/ozone-therapy-proving-successful-in-COVID-19-patients/>
8. www.inews24.it/2020/04/07/ozonoterapia-coronavirus-udine-cura-funziona/
9. Wu, J. *et al.* 2020. "Case Report: Recovery of One ICU-Acquired COVID-19 Patient via Ozonated Autohemotherapy," SSRN, April 8, <https://bit.ly/30ZAKLb>; See also: a) Zheng, Z. and Dong, M. 2020. "Letter: A Preliminary Evaluation on the Efficacy of Ozone Therapy in the Treatment of COVID-19," *Journal of Medical Virology*, May 21, <https://onlinelibrary.wiley.com/doi/epdf/10.1002/jmv.26040> ; b) April 10, 2020. "The Medical College of the Tianjin University Confirms the Efficacy of the Oxygen-Ozone Therapy as Potential Treatment Against Covid19," <https://bit.ly/2Z9H6eR>
10. <https://www.ptcommunity.com/wire/texas-right-know-calls-us-consider-COVID-19-ozone-therapy-after-it-shows-promise-italy>
11. <http://www.ozonenz.com>
12. <https://ozonewithoutborders.ngo>
13. Hernandez, A. *et al.* 2020. "Two Known Therapies Could Be Useful as Adjuvant Therapy in Critical Patients Infected by COVID-19," <https://pubmed.ncbi.nlm.nih.gov/32303365/>

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