

A Major Breakthrough in Treating Viral Infectious Diseases

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Commentary

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DESCRIPTION

There is still an absence of effective treatments for viral infectious diseases, especially acute viral infectious diseases in humans and animals. These pathogens have and will continue to pose a significant global threat with the potential to cause tremendous morbidity and mortality ^[1]. Urgently needed are effective antivirals to combat the increasing number of emerging and re-emerging viruses in the future ^[2]. Feng and his team recently reported an exciting result using an herbal remedy to treat deadly viral infections in humans and animals ^[3-7]. The herbal remedy is derived from an ancient traditional Chinese medicine called Ma recipe. Marecipe AV is a modified version of Ma recipe designed for more effective treatment of viral infections.

Clinically, it has been observed that Marecipe AV may exhibit a therapeutic effect on viral hepatitis, HPV infection, herpes zoster, influenza and COVID-19. To assess the therapeutic effect of Marecipe AV on viral infectious diseases, numerous experimental treatments have been conducted for various life-threatening viral infections in animal models. The results demonstrate that Marecipe AV therapeutics possess a highly potent therapeutic effect, capable of saving the lives of animals on the brink of death from lethal viral infections and enabling them to fully recover in a remarkably short period of time. This opens up a promising way to defeat viral infectious diseases.

1. In a trial of Marecipe AV for the treatment of African swine fever, the mortality rates in infected pigs treated with Marecipe AV was 0%, while the mortality rate for untreated pigs was 100%.
2. In a trial evaluating Marecipe AV therapeutics for avian influenza, the mortality rates of infected ducks were 0.86% in the treatment group and 99.83% in the untreated group when the intervention was administered in the early stages of the disease.
3. In trial of Marecipe AV therapeutics for canine parvovirus, the mortality rates were 0% and 87.5% for infected dogs treated with Marecipe AV and untreated control, respectively. In a trial of Marecipe AV therapeutics for canine distemper combined with canine parvovirus, the mortality rates were 15.25% for infected dogs treated with Marecipe AV and 96.84% for the untreated control, respectively.
4. All surviving infected animals exhibited rapid and complete recovery in all experiments. Notably, most parvovirus-infected dogs fully recovered within 3 to 5 days after the initial treatment with Marecipe AV. Additionally, rapid recovery has been observed in cases of severe COVID-19 that were treated.
5. The clinical observations of Marecipe AV therapeutics for COVID-19 showed that the mean duration of fever was 14.51 hours for treated individuals, compared to 96 hours for untreated individuals. The incidence of COVID-19-related fever among individuals exposed to SARS-CoV-2 was 0% in the Marecipe AV prophylactic treatment group and 98% in the untreated control group. The median time to sustained clinical symptom resolution for two consecutive days was also significantly shorter in the Marecipe AV-treated group than in the untreated group (48.00 hours vs. 216.00 hours). Among high-risk COVID-19 patients who were untreated with Marecipe AV, the hospitalization rate was 68.18%, and the mortality rate was 36.36%. In contrast, patients treated with Marecipe AV exhibited hospitalization and mortality rates of 0%.
6. Clinical observations of Marecipe AV therapeutics for the treatment of hepatitis B and C indicated that HBV DNA and HCV RNA levels fell below the detection limit after 2 months of treatment in all patients. Furthermore, these biomarkers remained undetectable throughout the 3 to 9-month follow-up period (with a median follow-up of 6 months' post-treatment).

DISCUSSION

Considering that there has yet to be a successful treatment for viral infectious diseases, particularly acute and fatal ones, strong evidence of efficacy is vital for assessing herb-based Marecipe AV therapeutics.

The studies provide strong evidence of Marecipe AV's efficacy in treating viral diseases. They utilized animal models of lethal viral infections, with mortality serving as the endpoint for efficacy evaluation. Since the death of infected animals in life-threatening viral infections is not modifiable, there is minimal opportunity for experimental procedural error or bias when mortality is used as an endpoint. This research approach, using death as the endpoint, ensures the reliability of the results regarding drug efficacy. In fatal viral infections in animals, such as canine distemper, canine parvovirus, African swine fever and highly pathogenic avian influenza, death is the inevitable outcome, and no treatment can alter this result. Remarkably, Marecipe AV therapy significantly improved mortality outcomes in the experimental animals in all trials. The reduction in mortality from 100% to 0% in infected animals, along with the replication of these results across five different fatal viral infectious diseases, provides compelling evidence of the efficacy of Marecipe AV therapy. Furthermore, the results indicated that the treatment not only saved the lives of dogs infected with parvovirus in 100% of cases but also facilitated full recovery in the infected dogs within three to five days. In addition, this surprisingly rapid recovery was also observed in Marecipe treated patients who were critically

ill with COVID-19. The evidence is clear and compelling, showing that Marecipe AV is an exceptionally effective treatment for viral infectious diseases in animals.

Marecipe AV therapeutics offers significant advantages compared to current mainstream therapies for human viral diseases. Nirmatrelvir-ritonavir, the only approved oral therapy for COVID-19, was evaluated by the reviewer as having "weak to no benefit" because it failed to show a significant difference in the primary endpoint of time to sustained alleviation in the standard-risk patients (EPIC-SR) study [8]. In contrast, the clinical course of COVID-19 in all treated patients ended within 48 hours following the initial intervention with Marecipe AV. The time to sustained recovery was significantly shorter in the Marecipe AV group compared to the untreated group (48 hours vs. 216 hours). Compared to existing mainstream treatments, Marecipe AV therapeutics for hepatitis B demonstrate significant advantages in terms of the negative conversion rate of serum biomarkers, the time required for serum biomarkers to become negative following treatment and serum biomarkers return to a positive status after treatment cessation. In an unpublished study on Feline Acquired Immunodeficiency Syndrome (FAIDS) involving a limited number of treated cases, the infected cats exhibited a complete recovery of symptoms and laboratory parameters, returning from severe abnormalities to the normal range after 20 days of Marecipe AV treatment. These results show that Ma Recipe AV therapeutics have equally curative-grade effects for both acute and chronic viral infections in humans.

Marecipe AV therapeutics have shown benefits against more than a dozen viral infectious diseases in humans and animals, including feline panleukopenia, feline calicivirus associated with chronic stomatitis in cats, Feline Acquired Immunodeficiency Syndrome, influenza (FAIDS), herpes zoster, postherpetic neuralgia, COVID-19 and human papillomavirus infection. These findings suggest that Ma Recipe AV may serve as a "broad-spectrum antiviral agent." Ma Recipe AV therapeutics could potentially be used to combat emerging and re-emerging deadly viral infectious diseases in the future, as well as to treat multiple viral infections in humans and animals.

It is important to note that none of the data in these studies were obtained from well-supervised and rigorously designed clinical trials; some of the data were derived from clinical observations. Consequently, no definitive conclusions should be drawn from this data. The standardized clinical trials are necessary to establish their efficacy. The mechanism by which Marecipe AV exerts its therapeutic effects on various diseases caused by different types of viruses remains unclear. While Ma Recipe AV has demonstrated *in vivo* efficacy against viral hepatitis, influenza and COVID-19, the extract has also shown strong inhibition of Hepatitis B, rabies virus and influenza virus *in vitro*; however, it has exhibited almost no inhibitory effect on SARS-CoV-2 *in vitro*.

CONCLUSION

This groundbreaking study provides several compelling lines of evidence that Marecipe AV herbal remedies is an effective treatment for a variety of viral infections in both humans and animals. These findings represent a major breakthrough in the treatment of viral infectious diseases to date and provide truly promising approaches to ultimately defeat these diseases. Therefore, it is likely that Ma Recipe AV exerts its therapeutic effects through mechanisms other than simply acting directly on the virus. Marecipe AV therapeutics has few toxic side effects and no serious side effects have been observed over more than ten years of clinical use.

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