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To: Sundhedsministeriet, Sundhedsstyrelsen og Statens Serum Institut

cc: Arbejdsgruppen for Tg v/FVST, Folketingets Sundhedsudvalg

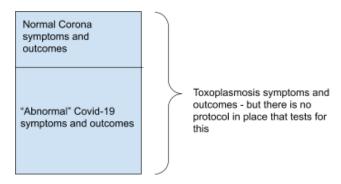
cc: Whom it may concern.

## Note IV: Further Evidence that Covid-19 provokes the onset of acute toxoplasmosis. Toxoplasma has always been grossly underreported. Resistance among authorities towards examining the correlation.

As documented earlier (here, here and here) there is a strong correlation between Covid-19 and toxoplasmosis as there are obvious and scientifically documented overlaps in symptoms, outcomes, treatments, and age distribution - rendering Covid-19 and Toxoplasmosis closely correlated. Yet there is no protocol in place anywhere in the world that tests Covid-19 patients for toxoplasmosis.

Further evidence has emerged in May and June, adding weight to the strong correlation between Covid-19 and Toxoplasma infection, e.g toxoplasma induced microvascular dysfunction/damage, toxoplasma induced hypoxia and the fact that the latest drug Dexamethasone is effective towards toxoplasmosis too.

A. Every normal and "abnormal" Corona/Covid-19 symptom reported, is virtually always mirrored in known symptoms in acute toxoplasmosis.



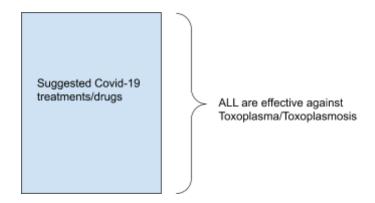
It is well known that "viruses kill bacteria", and at least that there are many interactions between different pathogens, eg "Infection against infection: parasite antagonism against parasites, viruses and bacteria".

Some 95% of the lethal Covid-19 cases are related to "secondary infections" - and obviously a number of these have a high probability of being caused by acute toxoplasmosis.

B. Tg is extremely underreported and poorly understood among health workers. Since it was declared "latent & benign" some 50 years ago, it has been virtually eliminated from the curriculum. Only few doctors know the multiple symptoms of acute- or latent toxoplasmosis, and even fewer have even diagnosed it. It is remarkable that 100% of patients that were checked/positive for lung-cancer also had acute toxoplasmosis (i.e parasites in the bloodstream) - but with no diagnosis.

"Toxoplasmosis has the highest human incidence amongst the parasitic zoonoses. However, toxoplasmosis is considered to be an under-detected and underreported disease in the European Union"

- C. Every single suggested treatment/drug etc. for Covid-19, is mirrored in being effective against Toxoplasma too. This also goes for the latest discovery regarding Dexamethasone being effective in Covid-treatment:
  - a. (Covid) "WHO welcomes preliminary results about dexamethasone use in treating critically ill COVID-19 patients"
  - b. (Toxoplasma) "Conclusion. IVCD (i.e dexamethasone) is an effective route of treatment for active toxoplasmic retinochoroiditis..." and "A large study is ongoing to find the right dosage of dexamethasone: "Cerebral toxoplasmosis is the most common opportunistic infection in HIV patients resulting in up to 50% of mortality with proper treatment and 80% without it."



- D. Also, it has emerged that CD4 and CD8 T-cells play critical roles in both pathologies and therefore easily can interrelate/interfere both ways, e.g.
  - a. (Covid): Collectively, CD4+ T-cells from severe COVID-19 patients are hyperactivated and FOXP3-mediated negative feedback mechanisms are impaired in the lung, while activated CD4+ T-cells continue to promote further viral infection through the production of Furin. Therefore, our study proposes a new model of T-cell hyperactivation and paralysis that drives pulmonary damage, systemic CRS and organ failure in severe COVID-19 patients.
  - b. (Toxoplasma): Although CD8 T cells play an important effector role in controlling the chronic (Tg) infection, their maintenance is dependent on the critical help provided by CD4 T cells. In a recent study, we demonstrated that reactivation of the infection in chronically infected host is a consequence of CD8 T dysfunction caused by CD4 T cell exhaustion.

The danish health authority at SSI acknowledges the general correlation between Toxoplasma and Covid-19, but has in May 2020 <u>declined to examine it further</u> with the argument that there is "no scientific evidence", which we have to dispute.

We argue that there is much evidence connecting the two diseases, and that the totality of this evidence warrants a thorough examination of the hypothesis that Covic-19 is a Toxoplasma antagonist - and we have offered all the knowledge and information we have to support this.

The Toxoplasma parasites psychological hallmark is to "manage fear" - and if anything is driving the current developments, it is fear.

We strongly recommend that the danish health authorities take this proposition seriously, and not only recognizes the correlations but also implements toxoplasma testing Covid-19 patients and of tissue- and blood samples. We believe that active, acute toxoplasmosis will be identified in +50% of the cases.

We will, of course, share all documents and findings with anyone inclined to help elucidate the possible Covid-19/Toxoplasma correlation.

All citations above are form peer-reviewed scientific articles from recognized journals.