

FOR ORAL & WRITTEN TESTIMONY

1/25/2022

I am a PROPONENT of Revisor Number: 22rs2702

Chairman Hilderbrand and Senate Public Health and Welfare Committee Members:

It's an honor to speak to you on behalf of my patients. I am Dr. Gayln Perry and have thirty plus years of medical experience having been boarded in five areas including Internal Medicine, Pediatrics, adult Pulmonary and Critical Care Medicine, and Sleep Medicine. I've cared for all age groups, patients with complex chronic illness as well as patients in the ICU all while working in an academic setting. I am here to bear witness that the very foundation of medicine is crumbling because we have been forced to turn our backs on the sick, betraying the basic tenet of medicine to treat early to avoid progression of disease which is one of the primary reasons our hospital are full and large numbers of people have died. Patients have been betrayed when they were the most vulnerable, left scared and bewildered. Public trust has been lost. Early treatment can be very effective. Dr's Brian Tyson and George Fareed, have treated over 7000 patients in California and have lost no one when early treatment has been used.

I have cared for family and friends with Covid, one receiving chemotherapy who became febrile on a Friday and whose PCP and oncologist offered nothing, yet within 24 hours she was afebrile after I prescribed early treatment. I was then taken out of commission to care for them when my boss forbade me from using Ivermectin. He claimed it was toxic which is the farthest thing from the truth. Jacques Descotes, MD, Pharm D, PhD provided an independent *Expert Review Report on the Medical Safety of Ivermectin*: reviewing over 500 articles concluding that hundreds of millions of human subjects treated provided a large body of data to conclude that the "safety profile (of Ivermectin) is excellent so the assertion regarding human toxicity cannot be claimed to be a serious cause for concern." In the Journal of Clinical Pharmacology doses up to ten times the highest FDA approved dose is shown to be safe.

With my hands tied to provide care, I resorted to triaging sick patients who called me for help and I would send them to like-minded colleagues. My patient's included a couple in their seventies who were severely ill who, once they recovered, then called me about their sick elderly friends seeking care - on and on. My employer had refused to respect my expertise and judgement, falsely accused me of using a toxic drug and tied my hands to care for sick family and friends despite the daily use of off label FDA approved drugs in my own practice some of which have the risk of respiratory depression and death if mishandled. I chose to resign from my job because I took an oath many years ago, I couldn't ignore. I now know over forty physicians, and the numbers are growing daily, that want to provide early

treatment without reprisal. Do you want 40 plus Kansas' doctors taken off the front lines of care? How many more Kansan's will die on our watch?

This is a worldwide problem. In September of 2021, in Rome, the Global Covid Summit created a declaration that now has 17,000 verified signatures from medical doctors and medically related scientists reasserting loyalty to the Hippocratic Oath. They recognized the profession of medicine is at a crossroad due to the unprecedented assault on our ability to care for our patients expressing a resolve that the physician – patient relationship must be restored. I will never refuse to treat you regardless of your lifestyle decisions or your vaccination status. Medicine for me is not a job, or a profession it is a calling and I am called to care for the sick utilizing my best clinical judgement based on over three decades of experience. Will you let me fulfill this sacred call and do what I do best – take care of sick patients?

Sincerely,

Gayln Perry, MD
Overland Park, Johnson, Kansas
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References cited:

1. *Expert Review Report on the Medical Safety of Ivermectin*: an independent, evaluative judgement of original scientific publications and literature reviews, care reports and any other sources available (over 500 articles and web sources) to provide a fair assessment of Ivermectin's medical safety profile. March 2021.
Jacques Descotes, MD, Pharm D, PhD
Professor Emeritus Claude Bernard University of Lyon
Fellow, US Academy of Toxicological Sciences
Eurotox Registered Toxicologist
2. Safety, Tolerability, and Pharmacokinetics of Escalating High Doses of Ivermectin in Healthy Adult Subjects. *Journal of Clinical Pharmacology*, Vol 42, Issue 10, 1122-1133.
3. Brian Tyron, MD and George Fareed, MD; *Overcoming the COVID-19 Darkness: How Two Doctors Successfully Treated 7000 Patients*. January 24, 2022, ASIN: B09MTRCYVR

Additional references:

1. Safety of high- dose Ivermectin: a systematic review and meta-analysis. Journal of Antimicrobial Chemotherapy 2020, 75:827-834.
2. Continuous high-dose ivermectin appears to be safe in patients with acute myelogenous leukemia and could inform clinical repurposing for Covid-19 infection. Leukemia and Lymphoma 2020, Vol 61, No. 10 2536- 2537
3. NIH National Library of Medicine: Over 25 years of Clinical Experience with Ivermectin: An Overview of Safety for an Increasing number of Indications. Kircik, Del Rosso, et al; J Drugs Dermatology, March 2016 PMID: 26954318