

Exhibit 6

DECLARATION OF MARY TALLEY BOWDEN, MD

1. My name is Mary Talley Bowden. I am over the age of 18 and am competent to make this declaration. The facts set forth in this declaration are based on my personal knowledge and are submitted solely in my own capacity.
2. I reside and practice medicine in Texas. I am licensed to practice medicine in Texas.
3. The attached curriculum vitae is true and accurate.
4. I graduated *summa cum laude* from the Medical College of Georgia in 1998. I completed residency in Otolaryngology - Head and Neck Surgery at the Stanford University Medical Center in 2003. I am certified by the American Board of Otolaryngology, and by the American Board of Internal Medicine in Sleep Medicine.
5. I began recommending ivermectin to treat COVID-19 in early 2020 and found the therapy effective. I have treated more than 3,900 patients for COVID-19, most of them with ivermectin, with over a 99.97% success rate. No patient who has seen me for early treatment subsequently required hospitalization. The only patient who did not recover was already in the late stages of the disease and needed a ventilator before coming to me for treatment.
6. Ivermectin is a famously safe drug that has been used worldwide for decades.
7. I had privileges at Houston Methodist Hospital from 1/28/2021 to 11/15/2021 but voluntarily resigned after the hospital announced my suspension on Twitter. The hospital suspended my privileges for tweeting about using ivermectin to treat patients with COVID-19.
8. I am the owner of BreatheMD, where I continue to treat COVID-19 patients.
9. I am also a clinical advisor at the Front Line COVID-19 Critical Care Alliance.
10. Statements by the FDA about using ivermectin to treat COVID-19 have interfered with my ability to exercise professional medical judgment in practicing medicine. The healthcare community feels extreme pressure to comply with FDA directives.
11. It doesn't matter whether FDA statements are technically binding or legally enforceable. Everyone wants guidance during a crisis, and one of the functions of government is to lead the country towards safety during that time. The FDA holds itself out as the authoritative source for the appropriate use of drugs, and so it's entirely natural for everyone to have their eyes on the FDA and take what the agency says as fact.

12. The off-label prescription of drugs is common and well-established medical practice. Doctors must be able to exercise their professional medical judgment in the context of each specific patient, including by prescribing drugs off-label, to effectively practice medicine.
13. By mounting a concerted campaign against ivermectin, portraying the drug as exclusively horse medication, and telling the public to "Stop it" when it comes to taking ivermectin for COVID-19, the FDA has severely inhibited my ability to exercise professional medical judgment and treat my patients effectively.
14. Other doctors have referred patients to me specifically to prescribe ivermectin to treat COVID-19.
15. Pharmacists have refused to fill ivermectin prescriptions for my patients to treat COVID-19 because the FDA has determined the drug should not be used for that purpose. Pharmacists have also refused to fill ivermectin prescriptions for my patients because it is not FDA approved for the treatment of COVID-19, approaching those off-label prescriptions in a manner categorically different from other off-label treatments.
16. Patients have delayed seeking treatment from me because of the FDA's actions regarding ivermectin, only to reverse course when other treatments don't work. Another patient similarly hesitated to follow my recommended course of treatment using ivermectin, even after filling the prescription, because the FDA said not to, again only to reverse course when other treatments didn't work. These delays can be devastating since early treatment of COVID-19 is key.
17. I declare under penalty of perjury that the foregoing is true and correct.

Executed on: June 2, 2022



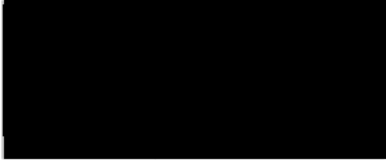
Mary Talley Bowden, MD

Revised May 28, 2022

CURRICULUM VITAE

Mary Talley Bowden, MD

Breathe MD



Education

1990- 1994 The University of North Carolina, Chapel Hill, North Carolina, Honors program B.A. Psychology, *Magna Cum Laude*

1994-1998 Medical College of Georgia, Augusta, Georgia M.D., *Summa Cum Laude*

1998-1999 The University of Texas Medical Branch, Galveston, Texas Internship, Department of General Surgery

1999-2000 The University of Texas Medical Branch, Galveston, Texas PGY-2, Department of Otolaryngology

2000-2003 Stanford University Medical Center, Palo Alto, California PGY 3- 5, Department of Otolaryngology

Professional

2021-pres Owner, Breathe Sleep & Wellness

2019-pres Owner, BreatheMD

2018-pres Owner, How I Got My Start

2010-2012 Director, North Houston Sleep Lab

2003-2010 Associate, Memorial Northwest Otolaryngology Head and Neck Surgery Associates

Board Certification

2003 American Board of Otolaryngology

2004 American Board of Internal Medicine - Sleep Medicine

Professional Societies

Clinical Advisor, FLCCC

Houston Free Market Medical Association - Co-Leader

Houston Exceptional Women's Network _____

Alpha Omega Alpha Medical Society

Psi Chi, national honor society for excellence in the field of psychology

Publications

Bowden, MT, ed. *Otolaryngology Board Review: Pearls of Wisdom, 3rd ed.* McGraw-Hill, New York 2012.

Bowden, MT, ed. *Otolaryngology and Facial Plastic Surgery Board Review: Pearls of Wisdom, 2nd ed.* McGraw-Hill, New York, 2005.

Bowden MT, ed. *Otolaryngology Pearls of Wisdom.* Boston Medical Publishing, Boston, 2003. Bowden MT, Kezirian EJ, Utley D, Goode RL. Outcomes of hyoid suspension for the treatment

of obstructive sleep apnea. Arch Otolaryngol Head Neck Surg. 2005 May; 131(5): 440-5.

Bowden MT, Church CA, Chiu AG, Vaughan WC. Informed consent in functional endoscopic sinus surgery: the patient's perspective. Otolaryngol Head Neck Surg. 2004 Jul; 131(1): 126-132.

Dorn MT, Wetherington RW, Williams MR. Pathologic quiz case 1. Acinic cell carcinoma of the deep lobe of the parotid gland involving the right parapharyngeal space. *Archives of Otolaryngology - Head & Neck Surgery.* 125(6):694, 696-7, 1999 Jun.
