

Dr. Haider's
**Long COVID &
Vaccine Injury
Protocol**

—

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Vaccine Injury / Long Haul Protocol

There are a lot of things included here, start with what you find easy and add things slowly. Baby steps are better than going all-in and becoming overwhelmed.

Dr. Haider's Complete Protocol Video (may be slightly outdated at times):

[Long Haul & Vaccine Injury - The Complete Protocol.mp4](#)



Disclaimer:

The following recommendations may change with time as newer information pours in and hence you are requested to keep updated or remain in touch with us at mygotodoc.com for the new updates to this document.

Symptoms and labs:

There can be a wide variety of symptoms comprising long covid syndrome in different people ranging from general symptoms like fatigue to more organ-specific symptoms such as shortness of breath and brain fog. Many different but intersecting underlying pathologies have been hypothesized and an effort is underway to categorize the symptoms based on underlying causes/mechanisms and treat them accordingly.

Nutritional deficits can play a major role in delaying healing and identifying and treating them should ideally be the first approach, as balancing all the ingredients of healing will let the body heal naturally.

Following is a set of labs that we recommend to all long-haul patients irrespective of the type of symptoms. Additional tests can be done based on the symptoms profile, which will be listed with the respective symptom cluster.

Lab results and symptoms MUST be interpreted by your PCP or you can contact us at mygotodoc.com for guidance on your treatment for your current condition. While self-medicating may offer some relief in the short term, over time it only exacerbates your problems. DO NOT self-medicate, please contact us.

Warning:

Some patients may experience a Herxheimer (AKA "Herx") reaction due to accumulated toxins leaving the body when starting one or more treatments, even significant dietary

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changes. A Herx reaction may cause fatigue, nausea, headache, muscle pain, vomiting, and/or diarrhea. This can feel very negative but should be taken as a positive sign that the treatment is working. If you experience a Herx reaction, consider stopping the triggering element of the protocol for 48 hours and then resuming again slowly.

Lifestyle Recommendations:

- **Mindset:**
 - Believe you will get better.
 - Imagine yourself completely healed and feel grateful during that visualization.
 - Intend healing while doing everything mentioned below
 - All patients are recommended to enroll in the <https://lightningprocess.com> 3 day live webinar. It's a research backed mind body technique that has been quickly and completely resolving patients chronic fatigue for 20 years and is now working very well and very fast (often hours to days) for Long Haul patients (has also worked for many other medical conditions like stroke (even delayed treatment), MS, migraines, back pain, sciatica, cancer, Parkinson's, Diabetes, depression, anxiety, bipolar, etc).
 - There are other structured mind body courses that people report work well like The Gupta Protocol and retrainingthebrain.com, but both take much longer to go through (weeks) and are not as targeted and focused and don't work nearly as fast as the Lightning Process.
- **Exercise**
 - Avoid cardiovascular exercise beyond Zone 2
 - Zone 2 exercise for 30-60 minutes, 2-4 times a week done over the course of months will improve mitochondrial function and fatigue. Zone 2 heart rate calculators are not accurate, the best way to know you are in zone 2 is that you can carry on a normal conversation for the entire workout though it feels moderately uncomfortable to do so and if someone were on the phone with you it would be obvious to them you were exercising.
 - Walk outside 10,000 - 20,000 steps a day if able.
 - Consider Soleus push-ups while seated during the day as evidence suggests this movement may help optimize metabolic health, dramatically lowering blood sugar, insulin, and lipid levels.
 - Test and track autonomic nervous system function with heart rate variability and orthostatic testing:
<https://www.polar.com/blog/heart-rate-variability-and-orthostatic-test-lets-talk-polar/>

https://support.polar.com/en/support/the_what_and_how_of_orthostatic_test

More important the more severe the Long Haul symptoms are, especially if any heart-related symptoms like chest pain, or skipped beats.

You can request cardiology workup tests to rule out myocarditis and risk of sudden collapse:

EKG, Echo, Stress Echo, Cardiac MRI with gadolinium contrast looking for evidence of myocarditis/scarring. Please reach out to us through your Push Health account.

- **Behavioral modification** - i.e. in general avoid anything which makes you worse - this could be certain activities, thoughts, foods, etc.
- **Rest**
 - Sleep enough and do whatever it takes to get good quality sleep, no caffeine after noon, if you always have poor sleep try stopping caffeine entirely. Good sleep hygiene usually means waking at the same time daily, getting 20-30 min sunshine before 10 am daily, avoiding eating within 4 hours of bed, keeping lights off after dark or only using red lights or wearing blue blocker sunglasses to avoid blue light, avoiding arguments and other stressful situations after dark, and avoiding using screens after dark, e.g. reading printed material instead. Sleeping on the right side helps activate the vagus nerve and calm you down for sleep this may be more comfortable without a pillow. Cold plunges in the morning can greatly improve sleep quality as well.
 - If you have a crash in energy in the afternoon then lie down for 15 minutes daily at that time.
- **Meditation, Meditative Movement, Breathing, Cold Exposure, Heat Therapies, Vagal Maneuvers/Stimulators, and the Stellate Ganglion Block all modulate and reset the overactive sympathetic nervous system**
 - Daily Meditation - Try the Headspace app, even if only for 5 minutes a day.
 - Meditative movements like yoga and chi kung
 - General guidelines for yoga and chi kung:
 - RELAX - progressively relax all muscles from your head down to your feet then take a deep breath, breathe out and relax twice as much
 - DON'T WORRY - about anything, including if its working, if your doing it wrong, if you look funny, etc
 - SMILE - from the heart. Before starting the exercises and prior to starting a new exercise
 - ENJOY YOURSELF
 - ENTER A MEDITATIVE STATE OF MIND

Chi Kung Exercises:

- Lifting the Sky: https://www.youtube.com/watch?v=T_WsOEWF7TU
- 12 nerve exercises: <https://www.youtube.com/watch?v=pQI5wYeeJ20>

- **Breathing exercises:**
 - Wim Hof's incredible 10-minute guided breathing exercise: <https://www.youtube.com/watch?v=tybOi4hjZFQ>
 - 4 breaths, 4 times a day of 4,7,8 breathing: <https://www.youtube.com/watch?v=p8fYPC-k2k>
 - If Shortness of breath is present and after 1 week of the recommended breath work above you are not getting better, it is recommended to start Buteyko Breathing.
- Daily 1-2 minutes cold exposure, eg freezing cold shower, or even better an ice bath
- Daily 20-40 minute sauna at 180F or higher or hot bath (some people with MCAS or histamine-related problems will not tolerate this, if it worsens symptoms avoid it)
- **Vagal nerve stimulation**
 - Vagal maneuvers: <https://my.clevelandclinic.org/health/treatments/22227-vagal-maneuvers>
 - Vagal nerve stimulator (\$50 device) and Stellate Ganglion Block (\$500 - \$1000 outpatient procedure): see free ebook at reliefbeginshere.com
- **Photobiomodulation:** Regular sun exposure leads to powerful antiinflammatory effects, beneficial effects on mitochondrial and vascular health, raises neurotransmitters and prolongs overall cellular survival. A recent large prospective study showed that avoiding sun exposure is a risk factor for all-cause mortality. In this study, the mortality rate amongst sun avoiders was approximately two times higher compared with the highest sun exposure group. Aim for daily 20-30 minutes of sun exposure without intervening glass and without sunscreen before 10am for the best effect on sleep and between 10 am and noon for the most potent effect on vitamin D levels. Some may need to work up to this. Avoid even slight sunburn.
- **Food:** to improve digestive health: eat slowly and eat less by eating small bites, chewing them fully, swallowing before reaching for the next bite and stopping before you are completely full.
- Some form of a strict elimination diet depending on the person you might choose the lion diet (basically carnivore without chicken, eggs and cheese), ie red meat, salt, water, and ideally bone broth and organ meat/supplements (very helpful for things like hair and nails and to speed up results) OR vegan/pescatarian (dairy and eggs are often problematic initially) OR the Autoimmune Paleo diet (AIP), especially if symptoms or labs suggest autoimmunity or if there is a history of preexisting autoimmune disease or significant GI symptoms, but may consider as a trial for any hard-to-treat Long Haul symptoms as autoimmunity is likely to present in most cases and symptoms can be highly variable.
- Also **add these supplements to water:** magnesium, potassium and trace mineral drops, eg, Remag and Remyte along with Zeta Aid for potassium, starting at low doses

and increasing as tolerated. **Can also use an electrolyte powder like Fast Lyte Fasting Electrolytes, which provides all the above in one.**

Also, especially if you have post exertional malaise, you can consider taking 1 scoop of Thorne Research brand pure creatine powder and perhaps increasing from that dose if needed after a couple weeks. You must drink a lot of water to adequately process this if you do it. At least 8 x 8 ounces a day.

If histamine reactions remain after a month then look for unaged fresh meat that doesn't have histamine built up in it. Heres a video explainer:
<https://www.youtube.com/watch?v=jlcqNDDG4aA&t=1s>

Consider avoiding high histamine foods, especially if MCAS or allergy symptoms, but even as a trial for other symptoms which may be histamine related. Also avoiding nightshades and high lectin foods as well.

- Once symptoms resolve it's best to continue the diet for 6 to 9 months to completely heal, but after as little as a month of overshoot you could try to slowly reintroducing food groups one at a time. Best to work with a health coach or follow a structured reintroduction protocol.
- **Fasting intermittently:** Fasting is a trigger for autophagy which helps your body remove remnants of the inflammatory spike protein and recycle the old cells harboring it. Try to eat within a 1-8 hour window daily (i.e. 1-2 meals a day). Ideal eating windows are earlier in the day, because the deepest levels of autophagy are triggered 14 hours after the last meal, and central nervous system autophagy is only triggered during sleep, so it's best for your sleeping hours to coincide with the deepest levels of autophagy that happen 14 hours after your last meal. For example, if you stop eating by 2 pm every day, then 14 hours later at 4 am you will enter the deepest levels of autophagy and if you wake at 6 am you will spend 2 hours doing a deep cleaning of your neurons.
- **Grounding:** You can use grounding mats, bedsheets, pillows for grounding. Get grounded bedsheets/pillow case and voltmeter, get grounding mat for workstation or couch, etc. Example:
<https://groundlux.com/products/groundlux-organic-fitted-grounding-sheet>
And can also buy a multimeter to double check grounding set up is working:
<https://www.urbanhippee.com.au/shop/earthing-sheet-multi-meter/>
- **Optionally:** try a longer fast for 24-36 hours once a week. Optionally add a 12-16 hour dry fast in the middle of the 24-36 hour fast meaning avoid water for 12-16 hours and then for the rest of the time simply avoid food.
- Detox: if not anemic then blood donation every 2 months. Regardless of anemia or iron levels consider every 2 weeks plasma donation. This removes all toxins from the

body. There are also oral detox protocols like this one: **fulvic acid and humic acid (organic matter from the soil), Chlorella, zeolite, along with sauerkraut juice, activated charcoal, bentonite clay. These supplements specifically help remove toxins: curcumin, garlic, vitamin C, methyl tetrahydrofolate, methylcobalamin (B12), N-acetyl cysteine, glutathione (liposomal for absorption), taurine, and Epsom salt baths, sauerkraut.**

Once you feel significantly better you can start a deep detox, if you do this too soon it can make you very sick. Before doing the following you should be having regular bowel movements, good urination, eating healthy and be in relatively stable good health:

<https://docs.google.com/document/d/1cbSslaOmbWOUzQF4F5fugs7rSDd5RK92TYvNeTn0Ufo/edit>

- **Chlorine dioxide titration** hyper-oxygenates blood and tissues by creating extra oxygen via a chemical reaction inside the body, it also boosts the immune system to address persistent COVID infection, EBV, other viruses, Lyme, dysbiosis, parasites, etc (google and the censors have done a real number on this one, so any information you find will be pharma company disinformation).

Chlorine dioxide is as harmless as table salt and has been extensively used by hikers and municipal water supplies to clean drinking water for many decades.

Avoid reading up on it via Google search because every single page is just misinformation like “don’t drink bleach!” (A long list of things can be described as bleach including lemon juice and sunlight, and chlorine dioxide is not the same bleach used on clothing).

There are a couple of ways of making chlorine dioxide, the easiest way is using the various 2-part kits on Amazon, they consist of 2 bottles that are mixed together to create “activated chlorine dioxide”. One bottle has sodium chlorite and the other has a low concentration of weak hydrochloric acid or citric acid. You mix equal parts of both bottles in a glass (usually 1-3 drops of each), wait 30 seconds for the mixture to “activate” and then add some water and then drink it. You usually begin with 1 drop of each in 4-8 ounces of water and work your way up to 3 drops of each and drink them in water every hour up to 8 times a day for a few weeks as described further below. If you don’t feel good you lower the dose. If you don’t feel anything you raise the dose, if you feel great you stay on the same dose.

This is one of the representative kits available (get one in a glass bottle and make sure the chlorine dioxide percentage is 22-28%, some are 2% and will not work for this purpose)::

https://www.amazon.com/gp/product/B0CKSWNMQD/ref=ppx_yo_dt_b_search_asin_title?ie=UTF8&psc=1

It's best to read up on chlorine dioxide yourself, but you can also just begin on page 61 of this document which explains in more detail how to take chlorine dioxide:

https://drive.google.com/file/d/1X8ALH-DqDNb0E9Lk4ft3zbZJUloTlz_P/view

So you begin with the startup procedure, then continue with "protocol 1000" for 3-6 weeks and then taper down to a maintenance dose for at least 3 weeks. All of these are tolerated and may need to be slowed down and extended depending on your reaction. Basically if you start to feel sick then you slow down and decrease the dosing until you feel better. If you feel nothing you keep increasing dosing gradually until you hit the max dose, if you feel great you maintain the dosing and either keep increasing if you haven't reached max yet, or start decreasing if you've completed the max dose already, then as you decrease slowly to maintenance you may stop lowering the dose if you feel worse again.

Things that Neutralize the Potency of Chlorine Dioxide and should be taken 2 hours before or 1 hour after a dose:

- Nuts, Fruits
- Vegetables that are high in antioxidants
- Juice with added vitamin-C or ascorbic acid • Alcohol, coffee & certain teas
- Any other foods high in antioxidants
- Orange juice (and other strong citrus juices) • Mineral supplements
- Vitamin supplements
- Time-Release Supplements
- Coconut Juice, Dairy Products, Chocolate (Cacao) • Hydrogen Gas and Water (Medicinal)

Some uncensored chlorine dioxide testimonials:

<https://chlorinedioxidetruth.weebly.com>

Supplements and Herbs

Core Supplements: There are about 30 recommended supplements, but that's overwhelming for most people so we've created some custom combos and consolidated the most important ones that everyone needs to take here:

1. From Mygotostack (*Supplements exclusively designed by Dr Haider*):
 - a. [DETOX \[spike buster\]](#) - on an empty stomach, contains the most potent spike detox supplements including fulvic and humic acids which bind and remove all toxins including graphene oxide, EGCG which detaches spike from where it is bound up in the body, nattokinase, bromelain and serrapeptase, which destroy spike and lead to its excretion in urine.
 - b. [Immunity \[vitamins\]](#) with food include Vit D, C, Zinc, quercetin, K2 and bromelain to boost immunity, for antiviral effects, and anti-spike activity.
 - c. [Immunity \[herbals\]](#) includes curcumin, nigella sativa and dandelion taken with food to remove spike and stimulate immunity
 - d. [RELAX \[ashwagandha\]](#) with food stimulates immunity and relaxes the nervous system by inhibiting glutamate which is usually elevated by spike diseases
 - e. [AUTOPHAGY \[resveratrol\]](#) with food will stimulate cellular removal of spike
 - f. [IMMUNITY \[protease inhibitors\]](#) with food will kill persistent live virus, whether COVID or other reactivated viruses.
 - g. TRANQUILITY [mulungu max] -try this in cases of anxiety and insomnia.
2. [Check our discounted Fullscripts store](#) for these:
 - a. Magnesium: A starting dose of 100 to 200 mg daily is suggested, increasing as tolerated up to 300 mg to 400 mg daily, however some people find they feel optimal with much higher doses up to ridiculous sounding numbers like 7,000 mg, because only 15% or so is elemental magnesium. Such high doses are hard to get orally so you would have to take a combination of capsules, liquid added to drinking water, topical sprays/oils, bath salts, etc. There are at least 11 different types of magnesium that can be taken in supplement form with varying bioavailability. Generally, organic salts of Mg like Mg citrate or Mg glycinate have a higher solubility than inorganic salts like Mg oxide and have greater bioavailability. Magnesium malate is good for energy, magnesium, magnesoul glycinate and magnesium acetylene taurate are better for sleep. Magbesium citrate helps with constipation but can also cause diarrhea. Magnesium chloride is fine for topical use. Magnesium Threonate is the only form that reliably enters the brain and may be beneficial for neurological symptoms. Take with food.
 - b. Potassium citrate 5-10 meQ daily, or you can get the proprietary blend of food grade Potassium compounds that you can buy here <https://zetaaid.com/products/zeta-aid-crystals>. A potassium supplement

that helps balance sodium intake which is generally high, but also corrects the zeta potential of red blood cells so they are less sticky and prone to clotting, which is triggered by the spike protein.

You can get both Magnesium and potassium in high doses from **Fast Lyte Fasting Electrolyte powder, but it is worth trying the Zeta aid crystals as the specific proprietary mix of potassium is said by people I trust to be more beneficial.**

3. Other important supplements not available in Fullscript:
 - a. 500 mg 2-3 times a day of pine needle 12:1 extract powder in hot water. The best source is:
<https://superfoodsaustralia.com.au/products/siberian-pine-needles?variant=41118746771654>

Liposomal* Brain Detox Cream By Hakim Shabaz Ahmed

Everyone with spike disease likely has neuroinflammation, which in part drives all of the manifestations of spike disease because the nervous system coordinates everything else in the body. So even if symptoms don't seem to originate in the nervous system they are likely influenced by neurological dysfunction.

Liposomal Brain Detox Cream

The full supplement list:

- a. **High dose Vit C:** Intravenous Vitamin C: 40 to 50 g/week, together with moderate dose oral Vitamin C 1000 mg (1 gram) 2-3 times daily.

Oral Vitamin C is an important nutrient for the microbiome. Total oral daily doses of 8-12 g and even higher have been well-tolerated, however, chronic high doses have been associated with the development of kidney stones, so the duration of therapy should be limited. Wean IV Vitamin C as tolerated. One method of titrating oral dosing involves taking 5 - 10 Grams every hour until diarrhea occurs then taking 80% of that total dose daily until diarrhea occurs again, then again reducing that dose to 80% daily until diarrhea develops, etc -'until you are stable on a dose that doesn't cause diarrhea.
- b. Nattokinase 100-200mg (2000-4000 FU) can split into 1-3 times a day (may need to avoid if soy allergy since the source food natto is a soy product), available in the combo: [DETOX \[spike buster\]](#)
- c. Serrapeptase: (250000 units) per day can split into 1-3 doses per day. Available in the combo: [DETOX \[spike buster\]](#)
- d. Lumbrokinase is more powerful than both nattokinase and serrapeptase: usual dosing range is 20 - 40mg (300,000 - 600,000 Lumbrokinase Units)- Take one capsule 1 - 3X daily

- e. Regular NAC work up to 50mg/kg/day taken in 3-4 divided doses or [Augmented NAC](#) from vitahealthapothecary.com: 1 capsule twice daily. Take on an empty stomach.
- f. Shilajit: 1/4 pea size of the tarry black supplement daily.
- g. Nicotinamide mononucleotide: 500-1000 mg per day
- h. Spermidine: 7.5 mg twice daily
- i. Resveratrol (500mg twice daily). Available from mygotostack: [AUTOPHAGY \[resveratrol\]](#)
- j. Monolaurin 1000 mg 3x a day (immune booster/antiviral)
- k. Sodium Butyrate 1000 mg morning and evening (supports microbiome)
- l. Curcumin, Nigella Sativa & Dandelion (we have an encapsulated powered herb combo for these: <https://mygotostack.com/products/immunity-herbals>, though traditional black seed oil from blessedseed.com may be more potent)
If taking the ingredients separately, please see the dosages below:
Curcumin: 500mg/day
Dandelion extract: 400 mg/day
Nigella sativa; 200-500 mg encapsulated oil twice daily
- m. Vitamin C (500mg twice daily), Vit D 5,000-10,000 IU daily, Vit K2 (100-200 mcg daily), Zinc (50mg daily - also supplement copper 4-8 mg daily to prevent deficiency), Quercetin (250-500mg daily) Bromelain 90 mg daily (we have a combo supplement for these: <https://mygotostack.com/products/mygotostack-immunity>). Re Vitamin D: The majority of those with long COVID continue to have Vitamin D deficiency. For correct dosing of D3, check labs for: 25 OH D, PTH, and calcium (present in the CMP) labs will be required to determine adequate personal Vitamin D levels. Aim for normal range calcium, and normal range vitamin D with PTH less than 30. If PTH is above 30 then increase the dosing of D3 until PTH is less than 30. However when supplementing D, you also need to supplement A, E and K to avoid developing deficiencies of those.
- n. 5,000-10,000 IU of vitamin A daily in bioavailable retinol form.
- o. 20 IU of vitamin E as bioavailable alpha-tocopherol daily
- p. Pure creatine powder start with 1 scoop daily and drink 8 x 8 ounces of water a day minimum
- q. Omega 3 fatty acids: FLCCC recommendations are to take either: Vascepa (prescription), or work up to DHA/EPA up to 4 g per day (Rosita naturals brand preferred for its high quality and freshness). **However be aware that high doses of Omega 3s for prolonged periods can have negative effects. I am now of the opinion that it's safest to just get omega 3 from fatty fish rather than in oil extract form since in the fish it is within a matrix of other substances that prevent it from being oxidized and damaged.** Short term there is a strong antiinflammatory effect, but longer term there can be a pro inflammatory effect. Fish oil studies that extended beyond a year showed significant negative effects on heart health as explained here: <https://chriskresser.com/when-it-comes-to-fish-oil-more-is-not-better/> The safest approach is to simply eat fatty fish 2-3 times a week and **if you want a more potent supplement then buy the full canned cod liver, which is sold online (the tradeoff to oil in a glass bottle is that the cans are lined with plastic).** If you decide to supplement with fish oil, doing so with the highest quality brand like Rosita that is

least likely to be oxidized and damaged, and even then would think of it as primarily a source of fat soluble vitamins, not high dose omega 3s.

- r. NAC (n-acetylcysteine): 600-1500 mg/day (can increase up to 50mg/kg/day) (an also try “ Augmented NAC” for which dosing is 200mg twice daily and it is not increased beyond that):
https://vitahealthapothecary.com/products/quantum-nac?_pos=1&_sid=2bf4369eb&_ss=1
- s. Melatonin: For sleep people usually take 1-5 mg, but for long COVID/Vax injury we usually start at a minimum of 10 mg, and an even better range is 0.25-0.5mg/kg taken 30-60 min before sleep at night (immediate release preferred because it better mimics natural release pattern of melatonin into bloodstream). It may cause vivid dreams. **AVOID taking these high doses with SSRIS like Fluvoxamine/fluoxetine.** There are also very high dose protocols up to 2mg/kg body weight daily which may be necessary. You can also try intranasal melatonin in which case the standard doses are much lower because it is delivered straight to the brain, you would start with the standard dosing in an over the counter intranasal product and then titrate up as needed and tolerated.

DO NOT take high dose Melatonin and Fluvoxamine/Fluoxetine together

- t. Selenium: 200 mcg daily

-----Above this line are the most important supplements to start with -----

- u. Copper: 2 capsules of MitoSynergy Mitoactivator Extra Strength daily
- v. Get 3 mg of manganese per day
- w. Molybdenum: 500 micrograms per week or 45-150 micrograms per day
- x. Soil based probiotic.
- y. L-Arginine 1-2 grams twice daily
- z. Mitochondrial energy optimizer with pyrroloquinoline quinone (e.g., Life Extension Energy Optimizer or ATP 360®).
- aa. Artemisinin 200-300mg/day, is a powerful anti-inflammatory, antioxidant herb that also helps regenerate nerve cells, heal the blood brain barrier and fix leaky gut. But it can lead to lower hemoglobin and RBC levels if taken chronically so it would be recommended to monitor blood counts and stop if they were trending down. Also decreases GABA levels so should supplement with GABA 200-2000mg at night when taking this. Aim for a dose of GABA that leads to a subtle relaxed feeling within 20 minutes.

Detox from pesticides/heavy metals: pesticides increase susceptibility to spike injury.

1. 1-3 tablespoons of sauerkraut, and fulvic acid, humic acid and chlorella with meals.
2. Bentonite clay on empty stomach 1 hour away from food and medication/supplements.

Over-the-Counter and Prescription Medications

- | | |
|---------------------------|--------------------|
| a. Ivermectin | h. Claritin/Zyrtec |
| b. Low dose naltrexone | i. Plavix |
| c. Propranolol | j. Heparin/Eliquis |
| d. Pravastatin | k. Maraviroc |
| e. Prednisone | l. Ubrelyv |
| f. Fluvoxamine/Fluoxetine | m. Aspirin |
| g. Pepcid | n. Spironolactone |
| | o. Dutasteride |

Warning: which medications and for how long will depend on how each patient responds to the protocol. Each patient is different, please contact us to provide you with comprehensive and custom assistance.

Protocol Steps

General rules for all over-the-counter and prescription medications:

- If you have intolerable side effects stop taking them and wait for the side effects to wear off before trying a new prescription.
- If you feel better on a medication continue taking it and don't stop it until you feel ready to start tapering off your treatments (eg your symptoms have resolved)
- If symptoms have improved on a medication don't suddenly stop it, rather taper off it when you are ready by cutting the dose in half for 1-2 weeks then in half again for another 1-2 weeks then stopping if tolerated. If while tapering you start worsening you should stop tapering and go back up to the last effective dose before you started the taper.

General Steps:

1. Start with 2-4 weeks of supplements and over-the-counter meds like low-dose aspirin and if there are allergic symptoms or mast cell activation syndrome (MCAS) then also use over-counter Pepcid and Zyrtec - take these both twice a day for at least 2 weeks, and continue afterward.
2. If not better after 2 weeks add Ivermectin and Mygotostack IMMUNITY [protease inhibitors].

Ivermectin: Take 1 capsule (0.2mg/kg) by mouth daily for 5 days. Keep increasing 1 capsule every 5 days until you are taking 10 capsules per day, if there are no side effects and symptoms improve keep taking 10 capsules per day for 3 months before gradually tapering down to 1 capsule every 5 days.

IMPORTANT:

While increasing the dose:

- If you increase the dose and side effects appear taper to previous dose and stay on it for 1 month, if there is no improvement in your symptoms after a month, try increasing the dose in 1 capsule, if side effects are back lower to previous dose again and stay on it for 2 more months. If you increase the dose and there are no side effects continue increasing the dose.
- If you increase the dose and symptoms improve, stay on that dose for 3 months. No need to go up to 10 doses per day if your symptoms improve at a lower dose.
- Check your comprehensive metabolic panel (CMP) every month while in treatment.

While tapering:

- If you taper the dose and symptoms come back, increase the dose to previous dose and stay on it for 3 more months then try tapering down.

Mygotostack IMMUNITY [protease inhibitors]: Take 3 capsules 4 times a day for at least 15 days. <https://mygotostack.com/products/immunity-protease-inhibitors>. In the case of ongoing viral replication, these powerful herbal protease inhibitors block the protease enzyme required by SARS-Cov-2 to multiply.

3. Also patients with significant anxiety due to long COVID who do not have contraindications.

Propranolol: Take 10 mg three times a day as long as there are no contraindications.

Based on the doctor's criteria the dose can gradually increase in 10 mg increments every 2 weeks if it's showing improvement, to a max dose of 80 mg 4 times a day. The patient needs to check their Heart Rate and Blood Pressure every 2 weeks.

4. If not better start taking Low Dose Naltrexone 3 weeks after starting Ivermectin.

Low Dose Naltrexone: Take 1 mg daily for 15 days, then 2 mg daily for 15 days, then 3 mg daily for 15 days, then 4.5 mg daily ongoing.

For patients with typical MCAS, meaning the usual covid symptoms plus any of the following symptoms:

- Hives and/or rash
- Swelling of skin or joint
- Edema

- Bloating
- Itching, prickling, and burning sensation
- Reddening of the skin
- Reddening of the eyes
- Watering of the eyes
- Eczema
- Hay fever
- Dermatographism
- Tightening of throat
- Difficulty in swallowing

If you felt better after starting Pepcid/Zyrtec initially, then after trying ivermectin and LDN, add DAO enzyme supplement (available over the counter <https://a.co/d/bqLRVGX>) for 2 weeks

If not better after 2 weeks start Singulair 10 mg/day for 2 weeks

If not better after 2 weeks start Ketotifen 0.2 mg/ml: take 0.5mg (2.5 ml) orally twice a day for 5 days then 1 mg (5 ml) twice a day for 30 days

If not better after 2 weeks, start Cromolyn sodium 20 MG/ML Oral Solution [Gastrocrom]: Take 200 mg up to 4 times/day - 30 minutes before each meal and at bedtime. If control of symptoms is not seen within 2 to 3 weeks, the dose may be increased to a maximum of 40 mg/kg/day (directions for oral solution: Open the ampule and squeeze the contents into a glass of water; stir well).

After going through the above steps, if still not improved go on to next step below.

5. If not better in 2 weeks add pravastatin.

Pravastatin: Take 1 tablet daily

6. If not better in 2 weeks, add prednisone.

Prednisone: Take by mouth 3 tabs for 21 days, then taper to 2 tabs for 3 days and then 1 tab for 5 days.

7. If not better in 2 weeks, add Truvada

Truvada: Take by mouth 1 tablet daily between 4 and 6 pm for 9 days.

If symptoms improve after the first 9 days, continue Truvada for 3 months.

8. If trial of truvada is not successful, add namenda:

1.25 mg at night and increase by 1.25 mg every 2-3 days until reaching 5 mg, if it worsens sleep can change to daytime dosing

Note: If the symptoms go away on Namenda, sometimes they end up coming back and if that happens, stop Namenda. Usually the symptoms will go away again in 1-2 days and after that won't have to resume Namenda in most cases.

9. If not better after 9 days, add fluvoxamine.

Fluvoxamine: Take by mouth 12.5 mg per day for 3 days, then 25mg per day for 3 days, then 25mg twice a day for 3 days, then 50mg twice a day for at least 2 weeks or longer

10. If not better in 2 weeks, **STOP nattokinase/lumbrokinase/serrapeptase**, *continue aspirin 81 mg daily*, and **add Plavix**.

Plavix: 75 mg taken once daily for 30 days

11. If not better in 2 weeks and no signs of bleeding add either Eliquis or heparin. *Continue all meds for 4 weeks total.*

Preferably subcutaneous heparin 6000 units superficial subcutaneous injection (into fat) 4 times a day, since it binds spike protein. Alternatively 1-2 times daily long-acting low molecular weight heparin injection such as 1.5 mg/kg lovenox once daily, or 1 mg/kg lovenox twice daily.

Eliquis is 5 mg oral twice daily.

IMPORTANT: While on aspirin/plavix or aspirin/plavix/heparin/eliquis get weekly or biweekly CBCs to monitor hemoglobin and stop if any bleeding occurs.

12. If not better in 2 weeks add maraviroc or Ubrelyv for 4 weeks. In order to prescribe, you must have a CBC/CMP done within the previous 4 weeks.

13. If not better after a month, add Spironolactone for 2 weeks.

Spironolactone 50-100mg twice a day

14. If not better in 2 weeks add Dutasteride.

Dutasteride 1mg daily.

15. **For patients who still have tinnitus** - add oxytocin nasal spray. Studies have shown that long-term treatment with high-dose oxytocin may reduce the frequency and severity of tinnitus. Dose: Apply one puff/4 IU oxytocin in each nostril two times a day. After 2 weeks if not better go to step 4 below.

16. If not better contact us to discuss other potential prescription medications like valproic acid, sildenafil, and pentoxifylline.

Lab Testing

Optimizing various lab values can be very helpful and we can order these for you and help interpret them:

BASIC LABS:

- Microclot testing
- Plasma zinc
- Serum copper
- Iron panel (serum iron, UIBC, TIBC, iron saturation %)
- Ferritin
- Transferrin
- CBC With Differential
- CMP
- Magnesium
- Troponin
- NT Pro BNP
- PTH
- Vitamin B12
- Folate
- Serum vitamin A
- 25(OH)D - aim for normal range with PTH maximally suppressed (usually 20 - 30) and normal calcium on CMP
- 1,25 Dihydroxy OH D (calcitriol)
- Plasma Selenium
- Urine pH
- Quest Diagnostics Calcium, Total, RBCs
- Parathyroid hormone (PTH)
- Lactate(plasma)
- Early morning cortisol—some patients develop autoimmune adrenal failure)
- TSH—to exclude thyroid disease
- Homocysteine level (normal 5-10 $\mu\text{mol/l}$)
- HbA1C—Vaccine-injured patients are at an increased risk of developing diabetes
- Troponin and pro-BNP to exclude cardiac disease.
- Lactic Acid, Plasma
- 12 ANA panel
- Labcorp's semi quantitative SARS COV-2 IgG antibody level (the antibody level is the cheapest and best secondary indicator that someone has spike protein in their body)
- Glyphosate levels(done by specialty labs)

Secondary labs:

- Microbiome testing
- omega 6:3 ratio
- Plasma amino acids (a standalone plasma amino acid panel is sufficient, but this is often combined into other panels, such as the Genova ION or the Genova NutrEval)
- LabCorp's ANA Profile 12
- Percentage CD4+
- Absolute CD4+
- Percentage CD8+
- Absolute CD8+
- CD4:CD8 ratio
- EBV panel(IgG, IgM, Early D antigen and EBV PCR Quant)

If microclot testing not available can consider these:

- Alpha 2 antiplasmin (elevated in microclotting)
- Von Willebrand Factor (may be elevated in microclotting)
- D-Dimer - is usually **not** elevated in the setting of Long Haul microclotting. Elevations indicate clot breakdown is happening, so a high D-dimer may actually be a positive sign for some that healing has started as a marker of clotting activation. Those with a markedly elevated D-dimer should probably undergo screening for an inherited thrombophilia (eg: <https://www.uptodate.com/contents/screening-for-inherited-thrombophilia-in-asymptomatic-adults>).
- Prothrombin time
- Angiotensin II.

In special circumstances:

- CMV, Herpes simplex, HHV6, and mycoplasma serology/PCR—to exclude viral/bacterial reactivation (In patients who respond poorly to therapy, it may be helpful to check for Lyme (Bb), Bartonella and Babesia tick-borne diseases—e.g., <https://igenex.com> and <https://www.mdlab.com>).
- In patients with allergic features and those who experienced an acute reaction to the vaccine, the following tests may be helpful:
 - Eosinophil count; IgE levels, RAST testing, and/or skin testing.
 - Serum tryptase, serum histamine, and/or 24-h urine N-methylhistamine should be considered in MCAS.
- In patients who present with deep venous thrombosis (DVT) and/or pulmonary embolism soon after vaccination screening for inherited thrombophilia is suggested.
 - Limited screening autoantibodies. Lupus anticoagulant (if positive B2 microglobulin etc.) and ANA.
 - Vaccine-injured patients, particularly those with autonomic dysfunction/SFN frequently have an extensive array of autoantibodies

directed against G-protein coupled cell surface receptors, ACE-2, neurons, myelin, and other self-epitopes.

ADVANCED LABS

To identify neuroinflammation, endothelialitis, VAIDS, mitochondriopathy, Free radical burden, Autoimmunity, MCAS.

Following labs are available at Labcorp and there are some others that are available at specialty labs (some of the below labs are mentioned above as well)

NSE (neuron specific enolase) level.
 α 1-Antitrypsin
Oxidized Low-density Lipoprotein
Methylmalonic acid
Beta-2 Glycoprotein 1 Antibodies IgA, IgG, IgM
Lupus Anticoagulant Profile (Esoterix)
LDH isoenzymes
T- and B-Lymphocyte and Natural Killer Cell Profile
TSH
Thyroid peroxidase(TPO) antibodies
Thyrotropin Receptor Antibody, Serum
TSH Receptor Antibody (TRAb/TBII)
ENA
Antineutrophil Cytoplasmic Antibodies (ANCA)
Mitochondrial (M2) Antibody
Cortisol, AM
homocysteine
Methylmalonic Acid
Vitamin B12
Folate
Hemoglobin (Hb) A1c
hsCRP

Other advanced testing recommended before considering maraviroc:
Cytokine panel at covidlonghaulers.com

Warning: To reduce variability and lab interferences, I recommend cutting out any biotin supplements with doses greater than 300 micrograms for four days before any labwork; not taking any supplements on the evening prior; and on the morning of, fasting from both food and supplements.

Disclaimer: Lab results and symptoms MUST be interpreted by your PCP or you can contact us at mygotodoc.com for guidance on your treatment for your current condition. While self-medicating may offer some relief in the short-term, over time it only exacerbates your problems. DO NOT self-medicate, please contact us.

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Promising Potential Therapies

Non-invasive brain stimulation (NIBS)

Using transcranial direct current stimulation or transcranial magnetic stimulation. NIBS is painless, extremely safe, and easy to administer. NIBS is offered by many Physical Medicine and Rehabilitation Centers. Patients may also purchase an FDA-approved device for home use.

Ozone therapy

Ozone therapy has been reported to help. Ozone therapy can be applied topically using ozonated oils from <https://shop.puro3.com/> ones have different strengths as mentioned on the website, It is recommended to start with a lower strength oil (from low strength to high strength in terms of ozonation: Coconut (14) -- Castor (35) -- Jojoba (39) -- Avocado (90) -- Olive (92) -- Sunflower (153) -- Hemp (192)) and then gradually work up to a stronger one. They can be applied to any area of the skin that does not become irritated and in places that have discomfort. They have a topical effect and also a systemic effect after absorption. And should be applied 4 times a day.

Iodine Nebulization

IF you have significant shortness of breath cough wheezing THEN consider nebulized iodine if you can be sure to get the right dilutions. Start off slowly. If no change in symptoms after a few days then stop. If symptoms improve then continue as needed to minimize symptoms.

Nebulizer solution:

5 mL Sodium chloride (standard saline solution)

1-2 drops Lugol's 2% Iodine (food-grade)

If not using premixed saline then:

Standard Saline Solution Preparation:

1. Fill a glass jar with 8 ounces of distilled water. It's crucial that you only use distilled water and not regular tap water.
2. Add 1/2 teaspoon of pure salt to the jar. It can be Real Salt, Celtic Salt, or Himalayan Salt.

To dissolve, stir the mixture.

Acute COVID: Nebulize and breathe in for 7 minutes every hour until symptoms resolve

Long Haul: Nebulize and breath in for 7 minutes 4 times a day or as needed.

Inhaled Melatonin

We recommend inhaled melatonin which goes straight into the bloodstream because oral melatonin absorption is erratic and diminished after passing through the liver. Inhaled melatonin dose for acute COVID is 1.3 mg per night (10 puffs), instead of 10 mg per night when taken orally. and dose for long haul is 1-10 puffs per night (0.13mg-1.3mg) - increase from 1 puff gradually up to 10 as tolerated.

Stellate Ganglion Blocks (SGB)

The nerves are not damaged resulting in long covid like symptoms. It's the signal the brain is receiving from the nerves that are messed up.

The body is stuck in fight or flight mode. The sympathetic nervous system is in over-drive because it thinks your body is in danger...the rancid smells & tastes are its way of trying to warn you to stay away. The nerves aren't damaged but it's the signal to the brain that's affected.

The parasympathetic nervous system & sympathetic nervous system are to be balanced to work properly but they aren't because the sympathetic is in over-drive. The SGB blocks the sympathetic & basically re-starts it so the parasympathetic can kick in & the 2 are now balanced as they should be. When they are balanced the brain receives the correct signals.

The body creates cytokines (which causes more inflammation & is normal) when it's in fight or flight...but when we're done with covid, our systematic nervous system isn't re-setting on its own, so we continue to create cytokines. That inflammation is part of what prevents the brain from receiving the correct signals from the nerves. Wiping out the fight or flight mode, and re-setting the sympathetic nervous system is the key and that's what SGB does.

TENS (transcutaneous electrical nerve stimulation)

According to Dr. Robert Graysman, in 66% of people with long covid, the vagus nerve has been found to be involved. With imaging, it was shown thickened. The parasympathetic tone has been found to be lower than in those without long covid. Part of the autonomic dysfunction can be treated by stimulating the vagus nerve through the area surrounding the external ear opening called the meatus. This stimulation can be accomplished using an inexpensive TENS unit like the TENS 7000. We like this unit because it has adjustable pulse width and frequency, but any unit that has these features will work.

Some starting TENS parameters:

- Normal or continuous mode, do not use burst or EMS or any other mode, please.

- Use the left ear. The left ear spares the heart, so it's the safer ear to use. If you keep the intensity low, it's likely safe to use the right ear as well.
- Frequency 25Hz (range 20-30 Hz)
- Pulse width 150 (range 100-250 microseconds)
- Intensity on TENS 7000: between 1-2 which amounts to about 6mA
- Once a day for 14 days, if no recovery, can change to the right ear, but lower intensity due to risk of bradycardia.

For more information please go to reliefbeginshere.com, and download Dr Gorysman's ebook for free.

Hyperbaric oxygen therapy (HBOT)

HBOT has potent anti-inflammatory properties, decreasing pro-inflammatory cytokines while increasing IL-10. Furthermore, HBOT polarizes macrophages toward the M2 phenotype and improves mitochondrial function. Surprisingly, it is the increased pressure, rather than the increase in the concentration of dissolved oxygen, that appears to mediate these effects.

Low Magnitude Mechanical Stimulation (LMMS or Whole-Body Vibration)

Low-magnitude (0.3-0.4G), high-frequency (32-40 Hz) mechanical stimulation has been demonstrated to increase bone density as well as indices of general well-being in patients with a variety of medical disorders. This therapy is offered by Physical Medicine and Rehabilitation Centers, or a device may be purchased for home use (<https://www.juvent.com/health/>) similarly with noninvasive brain stimulation (NIBS).

Patients with elevated homocysteine levels

Such patients may benefit from treatment with 800 ug of 5-methyl tetrahydrofolate (5-MTHF), the most biologically active form of folic acid. Supplementation with folic acid alone will paradoxically increase homocysteine levels, particularly in patients with MTHFR polymorphism. In addition, B complex vitamins containing B2 (riboflavin) and Vitamin B6, magnesium, and Vitamin D should be added.

Plasmapheresis

Improves systemic cytokine levels, coagulopathy, and immune responsiveness in patients with severe COVID with a potential mortality benefit. However, is a limited and expensive resource that is not without complications. The durability of clinical response needs to be determined. While a therapeutic option for the severely neurologically impaired patient following vaccination, additional data is required before this modality can be widely recommended.

HELP apheresis (usually \$1500 per treatment) and triple anticoagulation

One is called Lifeworks Wellness Center, website: www.cancerdoctor.com

mygotodoc.com

Email: support@cancerdoctor.com

The other is run by Asher Milgrom, website: www.amaskincare.com

Email: a.milgrom@amaskincare.com

Guanfacine

Oral dosing:

Initial: 0.5 mg once daily at bedtime; may titrate every 7 days in 0.5 mg/day increments to 0.5 mg twice daily, then 0.5 mg three times daily, then 0.5 mg four times daily; then 0.5 mg morning and afternoon, and 1 mg evening and bedtime. (could vary the timings of when the 0.5 and when the 1 mg are given if pt felt it necessary)

The maximum daily dose is 3 mg total dose per day.

General side effects can be significant:

Immediate release:

>10%:

Gastrointestinal: Constipation (2% to 15%), xerostomia (10% to 54%)

Nervous system: Dizziness (12% to 15%), drowsiness (5% to 39%) (table 1), headache (3% to 13%) (table 2)

1% to 10%:

Genitourinary: Impotence (3% to 7%)

Nervous system: Asthenia (2% to 7%), fatigue (5% to 10%)

Postmarketing adverse events (all formulations):

Cardiovascular: acute myocardial infarction (heart attack), cardiac fibrillation, chest pain, edema, heart block, heart failure, hypertensive encephalopathy (with abrupt discontinuation), palpitations, rebound hypertension (with abrupt discontinuation) (Martinez-Raga 2013)

You will need to have close monitoring of blood pressure and heart rate and track alertness levels before and after starting, also before and after any dose changes.

Valproic acid

Depakote: 250mg 2-3 times daily.

Valproic acid has anti-inflammatory effects and polarizes macrophages towards an M2 phenotype. Histone deacetylase (HDAC) inhibitors are being studied for neural regeneration. In addition, valproic acid has important anticoagulant and anti-platelet effects and is an inducer of heat shock proteins. Valproic acid may be helpful for neurological symptoms. Treatment should be limited to less than 6-9 months due to the concern for the loss of brain volume particularly in those patients with cognitive dysfunction. In a cerebral

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ischemia/hypoxia model, resveratrol markedly enhanced the neuroprotective effects of valproic acid. Furthermore, resveratrol has been reported to reverse the toxicity of valproic acid. These data suggest that resveratrol (in a dose of 500 mg–1000 mg twice daily) should be recommended in patients prescribed valproic acid.

Induced hyperthermia and Cold Hydrotherapy

The role of sauna bathing and cold therapy (cold showers, cold baths) in patients with long COVID and vaccine injury is unknown. Regular sauna bathing has been proven to reduce all-cause and cardiovascular mortality, prolong life span, improve exercise performance, and improve the outcome of patients with neuropsychiatric disease. Induced hyperthermia increases the expression of heat shock proteins, which activates autophagy. In addition, heat therapy increases the expression of cell stress pathways, has antioxidant and anti-inflammatory effects, and improves mitochondrial function.

Cardio Miracle™ and L-arginine/L-citrulline supplements

Cardio Miracle is a supplement with over 50 ingredients formulated to increase nitric oxide (NO) production. The supplement contains L-arginine, L-citrulline, Beetroot (high in dietary nitrates), L-Ornithine, CoQ10, as well as a blend of fruit and vegetable phytonutrients.

www.cardiomiracle.com

Sildenafil with or without L-arginine-L-Citrulline

Doses titrated up from 25 to 100 mg 2-3 times daily with L-arginine/L-citrulline powder twice daily.

Sildenafil doses were titrated up from 25 to 100 mg 2-3 times daily with L-arginine/L-citrulline 5000 mg powder twice daily. May be helpful for brain fog as well as microvascular disease with clotting and poor perfusion. Note that curcumin, resveratrol, EGCG and valproic acid all potentiate phosphodiesterase 5 (PDE5) inhibitors.

Pentoxifylline (PTX)

PTX ER, 400 mg three times daily.

Should be considered in those patients with severe microcirculatory disturbances. PTX is a non-selective phosphodiesterase drug that has anti-inflammatory and antioxidant effects. In addition, PTX improves red blood cell deformability and reduces blood viscosity, so can mitigate the hyper-viscosity and RBCs hyper-aggregation, which is linked with the development of coagulopathy in the vaccine-injured.

Maraviroc

Dose: 300 mg orally twice daily.

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If 6 to 8 weeks have elapsed and significant symptoms persist despite the above therapies, this drug can be considered. Note Maraviroc can be expensive and has a risk of significant side effects and drug interactions. Maraviroc is a C-C chemokine receptor type 5 (CCR5) antagonist. While many long COVID and post-vaccine patients have been treated with Maraviroc, the role of this drug requires further evaluation.

Sulforaphane (broccoli sprout powder)

Dose 500 mcg – 1g twice daily.

While sulforaphane has many potential benefits in patients with COVID, long COVID, and post-vaccine syndrome, there is limited clinical data to support this intervention.

Dandelion (Taraxacum officinale)

Recommended at a lower dose in the main protocol, but can be tried in higher doses as well: 4-10 g three times daily (20-30mg/ml in hot water).

The root, flower, and leaves of dandelion contain an array of phytochemicals that have anti-inflammatory, antioxidant, hypolipidemic, antimicrobial, and anticoagulant properties. It is widely reported that dandelion is effective for 'detoxifying' spike protein.

VEDICINALS® 9

This unique phytopharmaceutical-based therapeutic suspension consists of nine bioactive compounds with antiviral, anti-inflammatory, immune-modulatory, antipyretic, and analgesic properties. The compounds include Baicalin, Quercetin, Luteolin, Rutin, Hesperidin, Curcumin, Epigallocatechin Gallate, Piperine, and Glycyrrhizin. A number of these compounds are included in our protocol and the additional benefit of this 9 phytopharmaceutical combination over more widely available flavonoid combinations is unknown.

C60 or C60 fullerenes

C60, short for Carbon 60, is composed of 60 carbon atoms forming something that looks like a hollow soccer ball. Considered a "free radical sponge" and the single most powerful antioxidant ever discovered, its discoverers were awarded the Nobel Prize for Chemistry in 1996.

Intravenous immunoglobulin (IVIG) treatment

The role of IVIG in the treatment of vaccine injury is unclear. The response to IVIG in the general population of vaccine-injured patients is mixed, with very few showing long-term improvements. Many patients who report an initial improvement will relapse in 2 to 3 weeks. Other patients report no benefit, while some appear worsened. Due to the presence of non-neutralizing anti-SARS-CoV-2 antibodies and anti-ACE-2 antibodies, etc., the real

possibility exists that IVIG will cause antibody-dependent immune enhancement (ADE) with a severe exacerbation of symptoms. IVIG is, however, recommended in specific autoimmune syndromes, which include Guillain Barré Syndrome, transverse myelitis, and immune thrombocytopenia. These patients should concomitantly be treated with the core immune-modulating therapies.

As a rule, immunosuppressive therapy should be avoided, as these drugs may exacerbate the immune dysfunction in vaccine-injured patients and prevent the restoration of immune homeostasis. A trial of immunosuppressive therapy may be indicated in patients with an established autoimmune syndrome who have failed other therapeutic interventions.

Emotional Freedom Technique (EFT)

Also known as Self Tapping or Emotional Acupuncture, is a form of counseling intervention that stimulates acupressure points by pressuring, tapping, or rubbing these points while focusing on situations that represent personal fear or trauma. EFT is found to be an “evidence-based” practice for anxiety, depression, phobias, and posttraumatic stress disorder (PTSD).

For more information [▶ What is EFT Tapping, How Does it Work and How Do You Tap?](#)

Dynamic Neural Retraining System

The Dynamic Neural Retraining System™ is a drug-free, self-directed program that uses the principles of neuroplasticity to help reverse limbic system impairment in the brain, and to regulate a maladapted stress response involved with many chronic illnesses such as Long Covid, Chronic Fatigue Syndrome, Multiple Chemical Sensitivity, Fibromyalgia, Chronic Lyme Disease, Food Sensitivities, Anxiety, Chronic Pain, Postural Orthostatic Tachycardia Syndrome, and many other conditions. For more information <https://retrainingthebrain.com/>

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PLEASE REMEMBER

Disclaimer: Lab results and symptoms MUST be interpreted by your PCP or you can contact us at mygotodoc.com for guidance on your treatment for your current condition. While self-medicating may offer some relief in the short term, over time it only exacerbates your problems. DO NOT self-medicate, please contact us.

Dr. Haider's Complete Protocol Video (may be somewhat outdated at times):

[Long Haul & Vaccine Injury - The Complete Protocol.mp4](#)

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