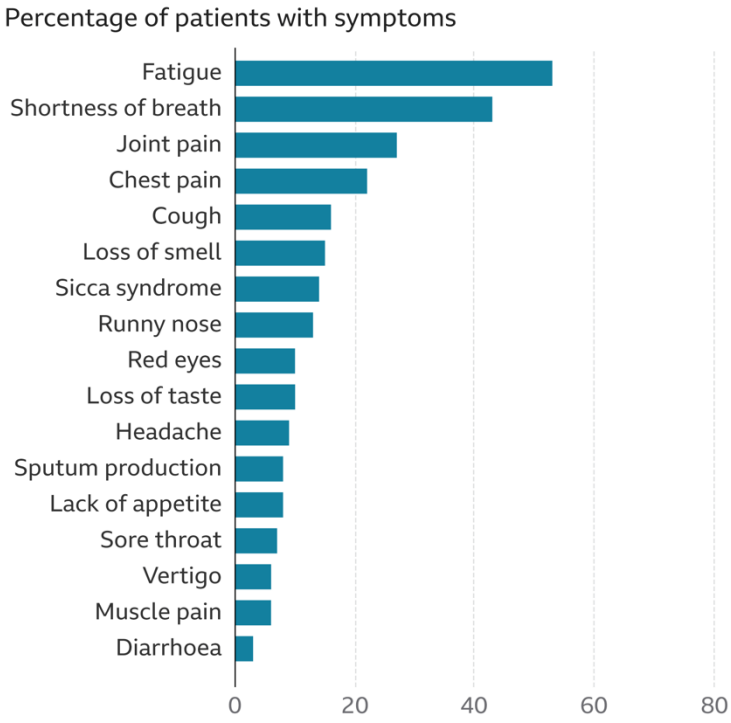
Long COVID Symptoms Protocol

Long COVID is a condition characterized by persistent and continuous health issues caused by COVID-19 after the patient has recovered from the initial infections. Up to 15% of those who survive their infections has been reported to have symptoms like fatigue, shortness of breath, joint pain, chest pain, loss of smell and/or taste, as well as constipation or diarrhea and abdominal pain. Long COVID has been reported to last for months to more than a year. These symptoms can happen to anyone who has had COVID-19, even if the illness was mild, or if they had no initial symptoms. Besides these symptoms, patients who suffered severe illness with COVID-19 can experience multiorgan effects including nervous system, lung, heart, digestive tract and musculoskeletal system.



Nervous System Dysfunction

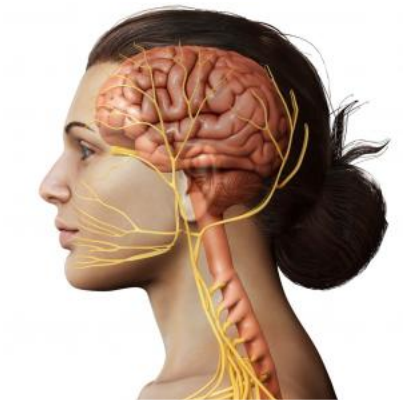
Chronic viral infections of the nervous system can be caused by many different types of viruses including the Ebstein Bar Virus (EBV), enterovirus, herpes virus, and SARS-CoV-2 (COVID-19). The symptoms of a chronic nervous system infection caused by these viruses can vary and include chronic fatigue, fibromyalgia, muscle weakness and tightness, feeling of body coldness, numbness or pain, anxiety, depression, and loss of smell or taste. Studies have shown that SARS-CoV-2 causes potentially damaging neurological problems in about one in seven people infected.[3]

Neurological disorders from COVID-19 are one of the most common complications among long COVID symptoms. SARS-CoV-2 is known to infect the peripheral nervous system or CNS and cause damage to the nervous system. Such damage may be caused by cytokine secretions, or direct invasion of the olfactory epithelium. Although a number of viruses including influenza also gain entry through the olfactory bulb, olfactory or gustatory dysfunction is particularly common in patients infected with SARS-CoV-2. Loss of smell without the stuffy nose is a unique symptom of COVID-19 infection. In most cases, the smell loss lasts only a few weeks, some patients may take very long time to recover from it, and more than 12% of people with COVID-19, olfactory dysfunction persists in the form of ongoing reduction in the ability to smell (hyposmia) or changes in how a person perceives the same smell (parosmia).[4]

A significant portion of COVID-19 patients are suffering from prolonged post-COVID-19 fatigue syndrome which may be linked to the post-COVID central nervous system dysfunction. SARS-CoV-2 may function as a physiologically severe stressor, which could be targeting a stress-integrator within the brain particularly in the hypothalamic paraventricular nucleus (PVN).[5] Inflammatory mediators that are released at the site of COVID-19 infection would be transmitted as stress-signals via humoral and neural pathways. In genetically susceptible people, such stress signal might be too strong and exceed their intrinsic stress-threshold and therefore overwhelm this stress-center causing ongoing dysfunction of the hypothalamic PVN's complex neurological circuitry.[5] In such a compromised state, the hypothalamic PVN might become hyper-sensitive to a wide range of life's ongoing physiological stressors. This could result in the post-exertional malaise episodes and more severe relapses, in common with chronic fatigue syndrome. When a certain stress-tolerance-level is exceeded, the hypothalamic PVN can become an epicenter for microglia-induced activation and neuroinflammation, affecting the hypothalamus and its proximal limbic system, which would account for the range of reported chronic fatigue symptoms.[5]

Another very common symptom of COVID as well as post-COVID infections is chronic pain that is caused by direct invasion of the nervous system or through post-viral immune reactions. The chronic pain most commonly includes headache, joint pain, and muscle pain. Although neuropathic pain has been reported in some of hospitalized patients with COVID-19, but its prevalence is probably underestimated because it is well established that chronic neuropathic pain may also develop in months after injury to the nervous system.[6]

SARS-CoV-2 can also have effects on the vagus nerve. The vagus nerve runs from the brain into the torso, heart, lungs, intestines, and several muscles, including those involved in swallowing. It has a role in heart rate, speech, the gag reflex, the transfer of food from the mouth to stomach, transporting food through the intestines, perspiration, and other bodily functions. SARS-COV-2 mediated vagus nerve dysfunction could be responsible for many of the symptoms of long COVID, including persistent voice problems, difficulty swallowing, dizziness, abnormally high heart rate, low blood pressure, and digestive issues.



Brain and Vagus Nerve

Wellness Recommendation

The wellness recommendation for nervous system dysfunction includes Linguicin, Brown, and LC Balancer. Linguicin helps nurture the Qi and Blood in the meridian as well as clears Evil Qi from the meridian. The herbal ingredients work synergistically to help clear chronic viral infections in the nervous system as well as reduce the resulting inflammation. Cinnamomi cortex, an herb utilized in Linguicin, has been shown to inhibit viral growth and reduce virus yield.[10] Brown and LC Balancer help to aid the body in expelling any excess toxins or irritants through improving liver and kidney function. Patients can experience symptom improvement within 1-3 days. 4-6 weeks of treatment is required to have a significant improvement.

Immune System Dysregulation and Rheumatic Autoimmunity

There is growing evidence that COVID-19 can lead to a dysregulation of the immune system with the development of autoimmune phenomena. The consequence of this immune dysregulation ranges from the production of autoantibodies to the onset of rheumatic autoimmune disease. The immune system becomes overwhelmed from fighting off the virus while concurrently fighting the autoimmune condition.

It was reported that rheumatic like symptoms such as joint pain, swelling and stiffness as well as fatigue persist months after the COVID-19 infections. The newly brought on autoimmune conditions can lead to heart, lung, and GI symptoms. The main diseases reported were vasculitis and arthritis.[1] Idiopathic inflammatory myopathies, systemic lupus erythematosus, and sarcoidosis were also reported in a limited number of patients, as well as isolated cases of systemic sclerosis and adult-onset Still's disease.[1] These findings highlight the potential spectrum of systemic and rheumatic autoimmune diseases that could be precipitated by SARS-CoV-2 infection.

The immune system is tightly regulated. Within it, immune cells known as B and T lymphocytes are normally able to distinguish between itself versus external targets. When the system becomes confused, B and T cells may start to target our own bodies, called autoimmunity. Viral infections can sometimes trigger this confusion, resulting in autoimmune diseases. Molecular mimicry occurs when the part of the virus and the B or T cells looks similar to a normal protein in the body.[2] The B or T cell then sees both the viral and the self-protein as something to attack and eliminate.[2] Viral infections can also cause organ damage and cell death directly. When the cells die and burst, they release self-proteins. These would normally stay hidden and wouldn't trigger an immune reaction. Bystander activation occurs when B and T cells accidentally get in contact with self-proteins, confusing the immune system, which otherwise is trained to ignore self-proteins.[2]

It's unclear whether patients were already predisposed to these diseases, or the infection unmasked an autoimmune process that had already begun. Or perhaps the infection triggered completely new autoimmunity. The triggers may even vary for different people. COVID-19 may also trigger new autoimmune responses and, potentially, new autoimmune diseases. This has already occurred with a condition called multi-system inflammatory syndrome in children (MIS-C).

Wellness Recommendation

The wellness recommendation for immune system dysfunction and autoinmmunity includes Brown, Java, and LC Balancer. These products are on a rotating schedule starting with Brown and LC Balancer for the first two weeks followed by Java and LC Balancer for the next two weeks. Brown helps nurture the liver, improve liver function and structure to restore liver functionality in regulating the clearance of activated T cells. It is common for patients to suffer from spleen damp along with a liver deficiency, especially when addressing autoimmune conditions. Java improves lymphatic circulation which will help circulate the build-up of T cells and neutrophils out of the affected area. LC Balancer helps improve kidney structure and increase microcirculation to bring in nutrients to the damaged areas. Patients can experience symptom reduction within 4 weeks of the protocol and 8-12 weeks treatment is recommended for sustained results.

Reactivation of Epstein–Barr virus (EBV) and Other Types of Viruses

A portion of long COVID symptoms like chronic fatigue, brain fog and rashes may be the result of COVID-19 inflammation-induced EBV reactivation. Research data has shown that among the patients who have developed long COVID symptoms, 67% of them were tested positive for EBV reactivation 21–90 days after testing positive for COVID-19.[7] Such reactivation may occur soon after or concurrently with COVID-19 infection. Many long COVID symptoms may not be a direct result of the SARS-CoV-2 virus but may be the result of COVID-19 inflammation-induced EBV reactivation including after initially asymptomatic infections. The SARS-CoV-2 virus may stimulate sequalae involving other infectious agents such as EBV that contribute to many long COVID symptoms.[7]

Reactivation of latent herpes simplex virus (HSV) is also prevalent in COVID-19 patients. One study included 80 patients with mild-to-moderate COVID-19 infection who did not require hospitalization or steroid therapy showed that one or more HSV infections were observed in 28 patients (35%) with COVID-19 infections.[8] It was proposed that COVID-19 infection can trigger reactivation of the latent HSV by upregulating the expression of lytic genes and supporting the antegrade progression of the activated viruses toward the epithelial tissues.[8] COVID-19-related immune dysregulation, psychological stress, fever, and direct neuronal effects play a role in the activation of different cellular processes that result in increased HSV lytic gene expression and reactivation of the virus.

In addition to the EBV and HSV, reactivation of other viruses such as cytomegalovirus (CMV) reactivation is also reported to relevant for patients with long COVID who still have symptoms 3 months after they were infected. CMV is a very common virus that affects more than half of adults over the age of 40. Although CMV is usually harmless and typically does not cause any symptoms, it can affect individuals with weakened immune systems. Upon activation of the CMV induced by the COVID-19 infection, the immune system becomes busy keeping CMV at bay, which leads to an expansion of the T cells pool that is directed towards CMV. At cost, the naive T cell pool decreases and makes it more difficult for older CMV positive individuals to generate an adaptive immune response to combat new infections, such as the novel SARS-CoV-2 virus.[9] An active CMV infection will lead to immunosuppression via direct inhibitory effects on antigen presentation, NK, B and T cells responses, via sophisticated viral immune evasion strategies.[9] As a consequence, CMV associated immune senescence and immunosuppression in the elderly may increase their risk of dying from influenza, and other infectious diseases, like COVID-19.[9]

Wellness Recommendation

The recommendation includes Woad, Bitter, Brown, Qi Booster, and LC Balancer. Woad helps enhance the humoral immunity that includes antibodies, complement proteins, and certain antimicrobial peptides in the extracellular fluids to kill the virion that is circulating in the blood or in the extracellular space and prevent the virus from entering into the host cell. It also helps clear Heat and toxins resulting from the viral infections. Infections from pathogens such as viruses can cause severe stress to the body and can cause reduced blood flow from the hepatic artery to the liver. The liver has a strong innate immunity and reduced blood flow can substantially weaken the liver's innate immune function. This compromises enrichment of innate immune cells such as macrophages and natural killer T cells. Brown, LC Balancer, Qi Booster, and Bitter helps to enhance the liver's innate immune function and improve the immune system's ability to clear acute infections as well as reduce pro-inflammatory cytokines in the blood.

The recommendation also includes formulas described in the following chart below that address the locally infected cells together with Brown, LC Balancer, and Xcel. Patients can experience symptom improvement within 1-3 days. 4-6 weeks of treatment are required to have a significant improvement.

If there is also an autoimmune component, rotating Brown and Java every two weeks is also recommended.

Virus Location	Product
All viruses in acute phase	Woad
All viruses in acute phase	Bitter, Brown, Qi Booster, LC Balancer
Nervous System	Linguicin
Liver in acute phase	Woad-R
Liver/Blood	Pleurum
Kidneys / Urinary Tract	Pleurum-K, Vine
Bladder / Renal Pelvis	Bean
Lymphatic system	Indigo, Indigo-2
GI Tract	Musk
Heart	Amber
Respiratory in acute phase	CL
Respiratory	Perilla
Throat / Nasal	Perilla-R
Respiratory	Jade
Blood Vessels	Sophia
Brain	Almond
Brain	Gold
Skin	Saponin
Skin	Jade-R
Bone	Pueria
Bone Marrow	Fenugreek
Microcapillary	Pterin
Muscles	Dandelion

Organ Damage Caused by COVID-19

Although COVID-19 is seen as a disease that primarily affects the lungs, it can also damage many other organs, including the heart, liver, kidneys and the digestive tract. Organ damage may lead to health complications that linger after COVID-19 illness. In some people, lasting health effects may include long-term breathing problems, heart complications, chronic kidney impairment, stroke and Guillain-Barre syndrome — a condition that causes temporary paralysis. Some adults and children experience multisystem inflammatory syndrome after they have had COVID-19. In this condition, some organs and tissues become severely inflamed.

1) Lung Fibrosis and Interstitial Lung Disease

COVID-19 is a respiratory disease that especially reaches into the airways and air sacs. While the vast majority have mild or moderate infections, about 10% will develop severe COVID-19 pneumonia and 5% will develop acute respiratory distress syndrome (ARDS).[12] The majority will stabilize or improve over time. However, some patients will progress to advanced lung fibrosis or post-COVID interstitial lung disease.

Studies has found that patients recovering from COVID-19 can have persistent symptoms and CT abnormalities of variable severity. At 3 months after acute infection, a subset of patients will have CT abnormalities that include ground-glass opacity (GGO) and subpleural bands with concomitant pulmonary function abnormalities.[11] At 6 months after acute infection, some patients have persistent CT changes to include the resolution of GGOs seen in

the early recovery phase and the persistence or development of changes suggestive of fibrosis, such as reticulation with or without parenchymal distortion.[11] The etiology of lung disease after COVID-19 may be a sequela of prolonged mechanical ventilation, COVID-19–induced acute respiratory distress syndrome (ARDS), or direct injury from the virus.

This is because any infection, bacterial or viral, has the potential to cause airway epithelial injury and apoptosis and both have the capacity to modulate the host response to injury leading to the development of pulmonary fibrosis. A number of predictors have been putatively identified and they included advanced age, severe illness, prolonged ICU/hospital stay and mechanical ventilation, a history of smoking, and chronic alcoholism.

Wellness Recommendation

The wellness recommendation includes Soup A, Soup B, and LC Balancer. Soup A helps to complete the lung injury repair process and terminate the vicious cycle of repairing, more damage, and fibrosis formation by increasing the metabolic activities of healthy lung tissue regeneration, known as Lung Yin nurturing in TCM. Soup A helps increase the biosynthesis of proteins, DNA, and mRNA, etc. as well as the supply of building blocks including amino acids, carbohydrates, and other cofactors necessary to speed up healthy new tissue growth of the alveoli and bronchioles. Soup B helps remove nodules and dissolve the lung scarring and fibrotic tissues by triggering the necessary catabolic processes and enhancing the body's endogenous enzymatic activities toward scar removal. LC Balancer improves microcirculation to help nutrient supply and waste removal from the lung tissue.

If there is also an autoimmune component, rotating Brown/LC Balancer and Java/LC Balancer every two weeks is also recommended.

If there is still a viral component after testing negative for COVID-19, Perilla is recommended to help clear chronic viral infections from the lungs.

2) Post-COVID-19 Heart Syndrome

SARS-CoV-2 infection may be associated with the long-term extrapulmonary organ manifestations with cardiac involvement being one of the most prevalent. Besides lung inflammation, myocardial injury is a typical COVID-19-related phenomenon, present in 20–30% of patients and contributing to 40% of deaths.[13] However, myocardial injury in the course of COVID-19 may be even more prevalent. The silent but progressive myocardial injury in the course of COVID-19 might contribute to the development of heart failure and other cardiovascular complications following viral recovery. One study involving 100 COVID-19 convalescents showed that at 2 to 3 months following the acute phase of the disease, persistent cardiac involvement was observed in 78% patients and ongoing myocardial inflammation in 60% patients, which was independent of the severity and overall course of the acute disease and the time from the original diagnosis.[13] Moreover, increased troponin concentration, an indicator of heart damage, was demonstrated in 76 (76%) of patients without any clinically overt signs and symptoms of myocardial dysfunction.[13]

In another study including 139 healthcare workers with confirmed past SARS-CoV-2 infection, myocarditis was observed in 37% of the participants at a median of 10 weeks after infection.[13] Importantly, only half of the participants had symptoms of COVID-19, demonstrating that cardiac sequelae might be associated with an altered or delayed immune response, and that even asymptomatic patients and/or patients not aware of the infection may suffer from serious cardiovascular complication in the longer perspective.

Wellness Recommendation

Myocarditis: The wellness recommendation includes CV, B-2, Qi Booster, Myogen and Myonin. Myogen nurtures heart Yang and helps clear cold damp in the heart, and remove the accumulated metabolic wastes in the heart. Used in combination with CV, B-2 and Qi Booster, it helps clear the myocardium and endocardium inflammation, improve the strength of the heart and resume the normal heartbeats. Myonin nurtures heart Yin and clears heart Heat to help reduce heart inflammation caused by viral infections and repairs myocardium damage.

If patients also have heart viral reactivation, Amber is recommended. If patients also have an arrhythmia, PaceKeeping is also recommended. PaceKeeping nurtures Heart Qi and helps stabilize heart rhythm. If patients also have heart autonomic dysfunction with symptoms of excessive sweating, anxiety attack, insomnia, heart murmur, and cardiac neurosis, Myogenin is also recommended to nurture heart Qi and Yin and stabilize heart nervous system.

If patients develop scars or fibrotic tissue in the heart muscle or arteries and symptoms persist, additional formulas to address heart scarring and fibrosis include Anginen and King. Anginen removes Heart Blood Stasis and helps dissolve scarring and fibrotic tissue in the cardiac muscle and coronary arteries. King formula nurtures Heart Blood and helps repair damage to the neurological system of the heart and stabilize the electrical transductions. If patients have developed coronary arteriosclerosis with scarring in the coronary artery, CV-2 is also recommended. If patients have developed coronary stenosis with hardening of the coronary artery, Myogen Plus is also recommended. Patients can notice symptom improvement within 1 week. It is recommended to have 1-3 months of treatment for sustained results.

Patients can experience symptom improvement in 3 days. For mild and moderate cases, 4-6 weeks of the protocol is required for significant improvement and sustained results. For severe cases, after the initial 4-6 weeks of protocol, it is recommended to have an additional 2-3 months of protocol with Myogen, Myogenin and PaceKeeping in combination with other formulas depending on the individual's condition. Other heart formulas include Kardinin, M-2, M-F, Alpinia-H, Dragon-R, Millennium.

Pericarditis: The wellness recommendation includes Pericardum, Myogen in combination with CV, B-2 and Qi Booster is recommended to help clear the inflammation and remove toxic irritants in the pericardium. If patients also have an arrhythmia, PaceKeeping is also recommended. Patients can experience symptom improvement in 1 week. 4-6 weeks of protocol is recommended.

If patients develop scars or fibrotic tissue in the pericardial sac and symptoms persist, additional formulas to address pericardial scarring fibrosis and degeneration include Cardion and Cardiogen. Cardion removes pericardial Blood Stasis and helps dissolve scarring and fibrotic tissue in the pericardial sac. Cardiogen helps clear pericardial phlegm and reverse pericardial degeneration and helps regain the elasticity. Patients can notice symptom improvement within 1 week. It is recommended to have 1-3 months of treatment for sustained results.

Cause of Heart Inflammation	Product Recommendation
Myocarditis, Endocarditis, and Pericarditis	**Myogen, B-2, Qi Booster, CV** Optional: PaceKeeping
Chronic Viral Infection	Amber
Repair Heart Neurological System Damage	King
Dissolve Heart Scarring and Fibrotic Tissue	Anginen
Coronary Arteriosclerosis/Coronary Artery Scarring	CV-2
Coronary Stenosis/Coronary Artery Hardening	Myogen Plus
Heart Autonomic Dysfunction/Cardiac Neurosis	Myogenin
Aortic/Heart Chamber Ulcers	Alpinia-H
Tachycardia/Fast Heart Beat	Millennium
Mycobacterial Infection	Kardinin, Anginen
Gram-Negative Bacterial Infection	M-2
Fungal Infection	M-F
Acute viral infection	Myonin, Myogen, PaceKeeping
Poor lymphatic Drainage	Dragon-R
Pericardium Effusion	Pericardum, Xcel Plus
Pericardium Scarring	Cardion
Pericardium Degeneration, Loss of Elasticity	Cargiogen

3) Gastrointestinal Symptoms

COVID-19 frequently presents with acute gastrointestinal (GI) symptoms. Up to one-third of COVID-19 patients present with gastrointestinal complaints. Patients with severe COVID-19 are at a particularly high risk for developing gastrointestinal complications. Some of these complications include acute liver injury and elevated transaminases, acute cholecystitis, acute pancreatitis, ileus and feeding intolerance, acute colonic pseudo-obstruction, and mesenteric ischemia.[15] Mesenteric ischemia is decreased or blocked blood flow to your large or small intestine and it is the most serious gastrointestinal complication reported in critically ill COVID-19 patients. It can be chronic, due to plaque buildup over time, or acute, due to a blood clot.[15]

The angiotensin-converting enzyme 2 (ACE2) receptor is highly expressed throughout the gastrointestinal tract. Thus, SARS-CoV-2 may enter gastrointestinal cells via ACE2 receptors to cause direct damage to the gastrointestinal organs. When COVID-19 attacks the cells in the lining of the gastrointestinal tract, it may break down these linings and cause the onset of gastrointestinal issues like gastritis, peptic ulcers and gut diseases with symptoms of abdominal pain which persist even after recovery from COVID-19. This damage can also affect the microcapillaries of the intestine which leads to blood accumulation and leaking into the intestines. Studies has shown that 40% of patients from COVID survivor groups without pre-existing GI symptoms reported new GI symptoms after 106 days after discharge following hospitalization for COVID-19.[14] The most common GI symptoms were abdominal pain, constipation, diarrhea, and vomiting.

Wellness Recommendation

The wellness recommendation includes Park and Formula B. Park helps to clear blood accumulation and stasis in the GI tract. This helps to reduce inflammation and clear stagnation to relieve symptoms of abdominal pain. Formula B nurtures the spleen and descends stomach Qi. It helps open the pyloric sphincter to aid in digestion and enhance muscle contractions. Formula B can help improve intestinal contractions and resolve constipation. Patients can experience symptom improvement in 1-3 days. 1-2 weeks of treatment is required to have significant improvement.

If there is also an autoimmune component, rotating Brown/LC Balancer and Java/LC Balancer every two weeks is also recommended.

If there is still a viral component after testing negative for COVID-19, Musk is recommended to help clear chronic viral infections from the GI tract.

4) Liver and Kidney damage:

Hyper-inflammatory response due to SARS-CoV-2 adversely affect several internal organs. Besides lung injury, which is the main outcome of SARS-CoV-2 infection, it has been reported to adversely impact other organs including the liver and kidneys. SARS-CoV-2 can have a direct adverse impact on liver as well as kidneys due to systemic inflammatory response or drug toxicity, leading to elevated levels of liver injury markers and acute kidney injury. Clinical outcomes of SARS-CoV-2 infection could be worse in patients suffering from pre-existing liver and kidney disease.

There have been several studies to demonstrate adverse effects of SARS-CoV-2 virus on the liver, and its impairment post SARS-CoV-2 infection is also an emerging concern. Previous studies of SARS coronavirus have shown that up to 60% of patients had a liver impairment showing viral nucleic acid and damage in a liver biopsy.[16] Because the liver is one of the potential entry targets for SARS-CoV-2, the liver damage caused due to infection can be attributed to several factors including direct damage by penetrating virus, inflammatory or immune response, increased risk of thrombosis and liver lesions. Elevated levels of liver injury markers such as alanine aminotransferase (ALT), aspartate aminotransferase (AST), gamma-glutamyl transferase and total bilirubin levels have been reported in patients of SARS-CoV-2.[16]

Individuals with no underlying kidney problems also show signs of kidney damage after getting infected with SARS-CoV-2. Renal injury by SARS-CoV-2 can also be attributed to multiple factors such as direct injury due to virus

infection or due to systemic effects including host immune clearance and immune response, endothelium-mediated vasculitis, thrombus formation, glucose and lipid metabolism disorder and hypoxia.[16]

Wellness Recommendation

For liver damage, the recommendation includes Cirrhonin, LC Balancer, Levera and Brown. Brown and LC Balancer enhance the livers blood flow from the hepatic artery to improve overall liver health and tissue repair and increases production of glutathione to clear ROS. Many herbal ingredients in both Brown and LC balancer have been shown to normalize liver enzyme levels and protect against liver injury. Levera helps reduce liver inflammation. Cirrhonin helps breaks down the fibrotic tissue caused by severe liver damage. Patients can see symptom improvement in one to two weeks and three months of the protocol is recommended for significant improvement with sustained results. If patients also have viral reactivation in the liver, Pleurum is recommended.

For kidney damage, the recommendation includes Glomerucin, LC Balancer, and Xcel. Glomerucin helps clear the damp heat and toxins from the kidneys. It helps reduce the inflammation of the kidneys filtration units, called glomeruli as well as clear the infection. LC Balancer helps restore glomerular structure and improve microcirculation by nurturing kidney Yin. Xcel improves kidney and adrenal gland function to restore kidney filtration and the balancing of minerals by enhancing kidney Yang. 2-3 months of the protocol is recommended for significant improvement of the kidney's structure and function measured by the GFR, creatinine and BUN levels in the blood. If patients also have viral reactivation in the kidney and/or bladder, Vine, Pleurum-K and/or Bean are recommended.

Selected Case Studies

Case 1: Lung Fibrosis Improvement After COVID-19 Infection

Jack Kucheran, DC, CN, Calgary, Canada

A male patient was suffering from lung fibrosis after contracting COVID-19 in September of 2021. He experienced symptoms of shortness of breath with exertion and muscle weakness. The patient's lung function was around 30%, O2 in the uppers 90's, and used oxygen therapy when needed (1-3 L depending on the activity). His PCP started him on Prednisone, Antibiotics, Pantoprazole, and a Beta Blocker.

He reached out to the Wei Institute for help with his symptoms. The patient was placed on a protocol of Soup A, Soup B, and LC Balancer to address his lung structure and fibrosis.

On his first follow up at the beginning of November, 1 month after being on the protocol, he stated that he was no longer using oxygen therapy and that he was seeing improvements with his breathing. The patient continued to improve and at the beginning of December his wife stated that he was doing very well and could not tell he was sick. His lung capacity at the start of the protocol was 1300 and is now at 2200.

At the beginning of January, 3 months after being on the protocol, the patient was doing exceedingly well. His CT scan showed an 80-90% improvement in his lung damage and he has almost completely recovered his physical form and breathing at a normal level (around 3200 on the spirometer). Both the patient and his wife are very happy with the results and grateful that they have regained their lives.

Case 2: Resolution of Chronic Fatigue and Neuroinflammation Post COVID

Laura Christensen Lac, IA

I was sick with COVID Omicron the week of Jan 17, 2022. Not a bad illness, but I was very fatigued since then. This week I began having symptoms of neuroinflammation. It really surprised me and I did not recognize what it was till a friend told me - I was too out of it to realize. My symptom was that I was overwhelmed by noise and light, and especially if patients talked to me during their treatments I was overwhelmed and could not tolerate it. Wednesday afternoon I barely made it through my 10 patients and I was really concerned about how I'd finish the week, given that I had 10 patients Thursday and Friday.

Yesterday I took my first dose of Linguicin. About an hour later I was back to my old self, telling jokes, having a ton of energy, being really enthusiastic and up. My mind was clear and I was able to finish the day in great shape.

Unfortunately, I left the bottle at work and did not have any to take early this morning, but I just took my second dose and I'm waiting for patients to begin showing up. I am so glad that I found this tool… I did not know how well this stuff works. Till I tried it myself. I'm sold.

Case 3: Two Week Turnaround of Long COVID Symptoms with Linguicin
Dr. Jon Porman, DC, AZ

A 69-year-old female patient suffered from COVID-19 in April of 2020 and Omicron in December of 2020. After recovering from the initial infections, she was still experiencing symptoms such as heart palpitation, joint pain and aches, loss of taste and smell, brain fog, fatigue, and headaches. She's had three COVID vaccines so far.

In February of 2022, the practitioner started the patient on Linguicin from Wei Labs to help address these long COVID symptoms.

After just two weeks of utilizing Linguicin, she's had a marked improvement in every symptom except loss of taste and smell. She is continuing using the formula for the next 2 to 3 months to fully clear the inflammation and regain her taste and smell. She is very happy with the quick turnaround in many of her other symptoms and is looking forward to regaining her taste so she can enjoy the food on her European vacation.

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