Coping With the Aftermath of Viral Infection

Understanding “Long-Haul” Covid

As if the initial infection wasn’t enough to have the world worried about COVID-19, there is now concern over the long-term effects of the disease. While the majority of patients recover unscathed from their Covid illness, a significant portion are reporting a wide array of Covid “aftershocks.”

Long-Haul Covid or Long Covid refers to the lingering symptoms or other complications that many people experience months after being infected with the Coronavirus. And, it’s not just the respiratory system that is being affected. The CDC has created a list of symptoms associated with Long Covid.¹ As time passes, we may find that more symptoms get added to this list. Dr. Anthony Fauci acknowledged this new crisis, stating that it “is really quite real and quite extensive.”

The most commonly reported symptoms

- Fatigue
- Shortness of breath
- Cough
- Joint pain
- Chest pain

Other reported symptoms

- Difficulty with thinking and concentration (sometimes referred to as “brain fog”)
- Depression
- Muscle pain
- Headache
- Intermittent fever
- Fast-beating or pounding heart (also known as heart palpitations)

Less common but more severe complications that have been reported

- Cardiovascular: inflammation of the heart muscle
- Respiratory: Lung function abnormalities
- Renal: acute kidney injury
- Dermatologic: rash, hair loss
- Neurological: smell and taste problems, sleep issues, difficulty with concentration, memory problems
- Psychiatric: depression, anxiety, changes in mood

¹ Source: CDC

Continued on page 2
At this point, we don’t know what percentage of those infected with the Coronavirus will experience long-term symptoms. Given the sheer number of infections, even if it is a small fraction, thousands upon thousands of people may continue to suffer long after the acute stage.

Because the disease is so new, there are more questions among medical providers than there are answers. This is true for the practitioners here at Riordan Clinic as well. However, our extensive experience with other complex chronic illnesses (i.e. Epstein Barr, Lyme Disease, and others) may provide clues for successful Long-Haul Covid patient outcomes. As we begin seeing more of these patients, we can develop structured protocols for treatment.

HERE’S WHAT WE DO KNOW - CHASING AND TREATING SYMPTOMS IS NOT ENOUGH.

We must also look at systemic weaknesses and other factors that prevent full recovery. As always, our approach is to eliminate any barriers to healing while also treating the condition at hand. Luckily we have many tools at our disposal that enable us to do this.

LAB TESTING
Lab testing helps us gain valuable information about how the body is functioning. Particularly during times of illness or infection, optimal (not just “normal”) levels of nutrients are crucial. Vitamin D is a great example. Deficiency in vitamin D has been shown to increase susceptibility to infection. ²

IV VITAMIN C
Vitamin C is a very potent antioxidant and plays a vital role in immune defense. When deficient in this vitamin, the body is more susceptible to infection. ³ Additionally, infections quickly deplete the body of vitamin C due to inflammation and greater metabolic requirements. In cases such as Long-Haul Covid, oral supplementation may not be enough to replenish depleted stores.

Enter, IVC.

Intravenous Vitamin C enables the delivery of much larger doses, and it bypasses the digestive system for greater absorption and utilization.
ULTRAVIOLET BLOOD IRRADIATION

Ultraviolet Blood Irradiation, or UBI for short, has been referred to as the “cure that time forgot.” It involves drawing a small amount of blood and processing it through a device that exposes it to controlled ultraviolet rays. Healthy cells remain unharmed, but most of the UV energy is absorbed by viral and bacterial cells. The diseased cells are killed and as a result, become antigenic. The treated blood is then returned to the body intravenously and creates a powerful immune response.

We have been using UBI at Riordan Clinic for several years for cases of chronic infection, inflammation, fibromyalgia, and autoimmune disorders.

CHELATION

Chelation is a method of removing heavy metals from the body. Heavy metal toxicity, which can be a result of environmental exposure or ingestion, can have adverse effects on the immune response and interfere with enzyme function throughout the body, reducing a person’s ability to fight infection.

MEDICATION (WHEN NEEDED)

Although we aim to treat disease with the most natural means possible, we also recognize that allopathic medicine has a time and place. There is promising research on certain medications for the prevention and treatment of Covid-19. When appropriate, medication may be used as part of a treatment plan.

Long-haul covid may look different for different people, and we are just beginning to understand the long-term implications of this illness. Based on the vast array of symptoms, it’s clear that it is more than just a respiratory disease.

The main point we want to drive home is this:

Do not ignore lingering (or new) symptoms that arise following a Covid-19 infection.

Seek treatment, uncover underlying barriers to your healing, and focus on getting well. We believe that the Riordan Approach will offer a more comprehensive pathway to resolution for Long Covid patients, and we are happy to help.

References:
When Acute Infection Triggers Chronic Illness

I wanted to present this brief case-history of what I believe is my first Long Covid patient to give our Health Hunters readers a glimpse of what may become a huge wave of chronic, complex illness (CCI) in the wake of the pandemic.

This patient illustrates a phenomenon that I have witnessed for the three decades of my medical practice at Riordan Clinic and something I touched on in the previous article: treating the symptoms of chronic, complex illness with medications alone rarely corrects the underlying causes of the illness.

Throughout my years, I have seen many acute infections trigger long-term chronic illnesses (think Epstein Barr, Lyme disease, persistent shingles). It appears that Covid-19 may be doing the same thing. My intention is not to scare you, but rather raise your awareness of potential complications of this disease. My hope is that if you have been infected with the Coronavirus, you will take proactive steps toward rebuilding your health so that you don’t have to deal with the long-term effects.

PATIENT GENERAL INFORMATION
This patient is a 32-year-old African American female. She is a married, mother of four healthy children that were all delivered via C-section. She had no prior illnesses.

ACUTE PHASE
In February of 2020, the patient developed a high fever, night sweats, severe headache, and dizziness. Other symptoms included tightness and heaviness in the chest. She reported that it felt like her lungs were swelling, and she began to have trouble breathing.

An X-ray of her chest showed no pneumonia, but her shortness of breath persisted. She remained acutely ill but stayed at home for two weeks. Covid testing was not available at that time.

CHRONIC PHASE
Gradually the patient’s fever and night sweats disappeared. While she never lost her sense of smell, her sense of taste was greatly decreased. Severe fatigue, generalized weakness, global pain, and pain in the chest wall set in. She became so tired that she was unable to care for her four children, and they were sent to live with extended family until she recovers.

Several bodily systems were affected, and many new symptoms developed which I will summarize below.

PATIENT GENERAL INFORMATION
This patient is a 32-year-old African American female. She is a married, mother of four healthy children that were all delivered via C-section. She had no prior illnesses.

ACUTE PHASE
In February of 2020, the patient developed a high fever, night sweats, severe headache, and dizziness. Other symptoms included tightness and heaviness in the chest. She reported that it felt like her lungs were swelling, and she began to have trouble breathing.

SLEEP DISTURBANCES
The patient hasn’t slept well since her initial infection 11 months ago. She says that she cannot lay flat without feeling short of breath. She has to prop herself up with a bundle of pillows to prevent the sense of choking while she tries to sleep.

RESPIRATORY SYMPTOMS
To this day the patient says she cannot catch her breath and it is very disconcerting for her. She does not experience any coughing or fever, but any activity or effort is accompanied by a worsening of her shortness of breath. She said that her O2 saturation (measured at home with a pulse oximeter) goes up and down with a low of 89%. Her sinuses are chronically congested.

CARDIOVASCULAR SYMPTOMS
The patient developed hypertension, which seems to come and go. She has been taking a beta-blocker off and on to control it, but the medicine makes her more fatigued.
BRAIN AND MOOD CHANGES
The patient said that thinking and remembering things has become frustratingly difficult. She has frequent dizziness that now worsens her chronic state of severe anxiety. Her anxiety is becoming further complicated with a deepening state of depression. She takes a small dose of Lexapro at bedtime for the depression. Other anxiety medications have not helped her much.

GUT IMBALANCE
The patient’s digestion has been severely affected. She is chronically bloated and suffers acid reflux. She says that anything she eats “wants to come back up.” Her physician ordered an endoscopy that revealed H. Pylori.

She was prescribed doxycycline, omeprazole, and metronidazole but stopped taking them after ten days because they were worsening her extreme fatigue. Her appetite has gradually improved, but she still struggles with constipation.

LAB FINDINGS
During a recent hospitalization in her hometown, an array of blood tests and radiologic tests were done. No specific diagnosis was made from these tests. Subsequent Covid swabs came back negative and a Covid antibody test was not performed. Her B12 level was very low, but was not treated. Vitamin D levels were very low and she was given 1000 IU of D3.

Riordan Clinic Evaluation and Initial Treatments
The patient underwent evaluation with the Real Health Discovery profile and Covid antibody lab tests. Results are pending at the time of this writing. She was on campus for three days of treatments outlined below.

DAY ONE
Patient was treated with Ultraviolet Blood Irradiation followed by an IVC push. She was also given B12 via intramuscular injection. We recommended she begin taking oral Vitamin D3/K2 daily.

DAY TWO
The B12 injection was repeated and a higher dose of vitamin C was administered intravenously followed by a glutathione push.

DAY THREE
The B12 injection was repeated again. A second treatment of Ultraviolet Blood Irradiation was administered followed by another IVC with added magnesium.

Preliminary oral supplement recommendations
- Vitality C powder
- D3/K2
- Probiotic complete
- Sodium bicarbonate

Prescription Medication
A ten day regimen of Ivermectin was prescribed.

As mentioned we are still waiting for lab test results and the patient’s follow-up visit. We will be sharing the remainder of this story as it unfolds.

Doctor Call Times
Have questions about the treatments and information covered in this issue? Our providers are here to help during Dr. Call Times. Join one of the Free 30 minute conference calls.

Mondays @ 1pm CST
Mike Shaw, PA-C - Wichita Office

Thursdays @ 4:30pm CST
Dustin Moffitt, ND - Hays Office

Dial 1.646.558.8656* and enter meeting ID: 979 119 910
Or join the video call learn more at riordanclinic.org/doctor-call-times
Debunking a myth: Naturopathic Oncology doesn’t aim to replace or challenge conventional cancer treatment. Most often, it serves as additional support. Naturopathic Oncologists use their knowledge of naturopathic medicine and apply it to the field of cancer care. Often, patients are usually undergoing traditional cancer treatments such as chemotherapy and radiation in tandem with many naturopathic methods which will be discussed in the lecture. The result is an integrated and comprehensive approach to cancer care.

Dr. Lucas Tims, a board-certified Naturopathic Oncologist, will discuss the differences between the various approaches to cancer treatment and care, including how they work synergistically for a greater outcome.

This lecture is open to the public and will be streamed live via the Riordan Clinic YouTube channel. Visit riordanclinic.org/events for more information and to RSVP.
Light Medicine - The “Forgotten” Benefits of Ultraviolet Blood Irradiation

Ultraviolet blood irradiation was used with tremendous success in the 1930’s and 1940’s to treat a variety of diseases. However, once antibiotics gained traction UBI fell by the wayside. It may be time to re-visit the “cure that time forgot.”

What is Ultraviolet Blood Irradiation?

Put simply, Ultraviolet Blood Irradiation (UBI for short) involves drawing a small sample of a patient's blood and placing it in a chamber that exposes it to therapeutic UV wavelengths. The exposed blood is then reintroduced into the patient's body to elicit an immune system response.

This method was developed in the 1920’s by Emmett Knott. The first treatment on a human was performed in 1928 on a patient with near-fatal sepsis. The patient responded well to the treatment and made a full recovery. There were several reports of successful treatments for a wide range of conditions in the decades that followed, including sepsis, tuberculosis, viral pneumonia, asthma, osteoarthritis, acne vulgaris, peritonitis, and viral hepatitis, to name a few.

How Does Ultraviolet Blood Irradiation Work?

With exposure to UV light, bacteria and viruses in the blood sample absorb five times as much photonic energy as red and white blood cells. This exposure either alters or destroys the infecting agents creating a safe, autogenous “vaccination.”

When the blood is reintroduced into the body, it further activates and directs the immune system to the specific infections the body is attempting to overcome. The net result is the induction of a secondary kill of these infecting agents throughout the entire body. Treating only 35 cc of blood with UBI induces a beneficial systemic response.

UBI at Riordan Clinic

Riordan Clinic has been using Ultraviolet Blood Irradiation as a treatment modality for several years. Our method also includes Ozone as a “first kill” of the infectious agent before treating the patient’s blood sample with the UV light. The ozone treatment uses about 95% Oxygen (O2) and 5% Ozone (O3) that acts as a safe but powerful disinfectant.

The number of treatments needed is determined by variables such as the health of the patient’s immune system, length of time the patient has been ill, and the severity of the disease being treated. UBI can be used clinically as both a SPECIFIC (i.e. psoriasis, lymph cancer) and NON-SPECIFIC (chronic infections, chronic fatigue, auto-immune diseases, etc.) immune-modulating therapy, as noted in several published studies.
The goal of healthy aging involves moving from reactively responding to disease when it is expensive and difficult to treat, to **proactively** using strategies that prolong the healthspan of a person’s life. When implemented and maintained, these strategies help decrease illness and increase wellness throughout our final years.

With an understanding of the processes that support healthy aging at the cellular and molecular level, we can design age-appropriate lifestyle and micronutrient protocols that limit the risk of developing age-related disease while promoting lifelong healthy functioning. By improving one’s healthspan, we may also increase their lifespan.

Join Dr. Dustin Moffitt, Naturopathic Doctor and aging expert, as he explores three areas of healthy aging: Prevention & Real Health, Maintaining Wellness, and Addressing Root Causes.

**WATCH ONLINE**
YOUTUBE.COM/USER/HEALTHHUNTER1
**Prevention & Real Health**
**MARCH 9TH**
@ 10:30 AM CST

**Maintaining Wellness**
**APRIL 6TH**
@ 10:30 AM CST

**Addressing Root Causes**

All lectures will be live streamed on YouTube. Register at riordanclinic.org/healthspan

---

**Speaker: Dr. Dustin Moffitt**
*Medical Director at the Riordan Clinic Hays Clinic*

Dr. Moffitt specializes in regenerative injection techniques, pain management, sports rehabilitation, chronic illness, functional medicine, and weight loss.