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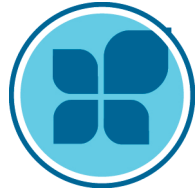
**Naturopathic Guidelines  
for Viral Respiratory Infection**

**Corona Virus (CoVid-2019)  
3-28-2020 Update**

**Eric Blake ND, MSOM, DAc.  
Clinic Director**

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# Corona Virus Naturopathic Guidelines (CoVid-2019)



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March 28, 2020 Update

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## Naturopathic Guidelines for Viral Respiratory Infection

### Corona Virus (CoVid-2019) 3-28-2020 Update

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## Part 1: Update of the Current Situation

A good deal has happened since our first Guidelines were released two weeks ago. This newsletter is an update including the status of our current clinic services and policies. There are three parts to this newsletter: Part 1 Overview, Part 2 Prevention, Part 3 Treatment.

*The clinic has uploaded these guidelines to make them widely available. We encourage you to 'like' and 'share' and spread the word. These guidelines are for information only, and while they inform our daily clinical practice and may save the life of you or a loved one, they should not be construed as individual medical advice.*

*Eric Blake ND, MSOM, Dipl. Ac.*

## Will the Clinic be open at this time?

Yes. We are open for clinical care. We are still delivering our normal care and we are still accepting new patients. We are essential health care providers continuing to deliver that care. We are a comprehensive care clinic - primary care, specialty care, and urgent care for our new and established patients. We are currently postponing elective procedures that require personal protective equipment (PPE) - procedures such as regenerative joint injections, vampire facials, etc.

Our clinic pharmacy is open and can ship medicines and nutrients. Bio-Thermal Therapy® treatments are being delivered and these can be used preventively to keep your immune system functioning optimally through this time.

*If you have new symptoms of a respiratory infection, even if you are a new patient to the clinic, please call in advance and let us know, the doctor will want to talk to you before you come to the clinic.*

The Board of Health is asking clinics like ours to stay open to provide our routine care *as a part of the management of this pandemic*. If we were to close the clinic the burden on the health care system goes up and not down. We are taking additional numerous precautions at this time to keep our patient and staff population well - including and even beyond those recommended by the Board of Health.

## Will CoVid 2019 testing be available and does this mean that cases will be in the clinic?

At this time, if you have symptoms of a new respiratory infection please contact the clinic right away. You will be scheduled to speak with a doctor on a telemedicine appointment as soon as one is available.

We will want to speak to you as soon as possible.

We are in allergy season and there are many different causes of respiratory symptoms, including the flu, allergies and sinus infections, etc. As a part of the telemedicine consult you will be evaluated and if needed testing will be coordinated along with a treatment plan. Because of the pandemic, the clinic will be using telemedicine consultations for initial evaluation of any patients who have new respiratory infection symptoms.

CoVid 2019 testing is available through the clinic. If needed, testing will be done at the curbside outside of the building. You will be directed where to park and the doctor will come down in appropriate personal protective equipment to collect the sample, deliver medicines etc. *We will be managing suspected and confirmed CoVid 2019 cases with telemedicine and home treatment at this time to avoid exposing other patients who are under active care.*

If you are in need of emergency care please contact emergency medicine services.

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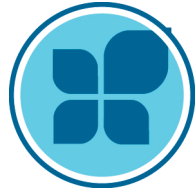
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## Why are we not treating confirmed Covid 2019 cases at the clinic at this time?

We serve a wide population of persons under active care. For now, with suspected or confirmed cases at this time in the pandemic we are working to create a firewall at the clinic to 'flatten the curve' and keep them isolated. That also allows us to provide essential services and preventive care. That is our current priority. If we do eventually need to treat suspected and confirmed patients clinically as this pandemic evolves we will make special accommodations to keep cases separated and we will alert you to this.

*Again, at this time we are not treating suspected or confirmed cases within the clinic walls.*

## What is the treatment being advised conventionally for Co-Vid 2019?

There are now active studies on pharmaceutical drugs for treatment at this time. These drugs include the tongue twisters Favipiravir, Remdesivir, Chloriquine, and Kaletra/Aluvia. These are very potent drugs some of which are not yet approved to treat anything and others carry a high risk of severe side effects including death. They are being used in severe patients in hospital settings and none have jumped to the forefront as a viable option yet. They are not to be used casually.

<https://www.cnet.com/how-to/coronavirus-medicine-the-vaccines-and-drugs-in-development-to-treat-covid-19/>

The only conventional guidelines for treatment are isolation and 'supportive care' unless and until symptoms become serious enough to require hospitalization for more intensive supportive care. Conventionally home 'supportive care' uses NSAIDs as fever suppressing medications. This is not biologically sound. Section 3 - fever and infection guidelines explains more.

French doctors were observing that ibuprofen (medications such as Advil, Motrin, etc) may worsen CoVid 2019 and are observing clinical worsening. We would anticipate that actually (see section 3). Instead French doctors are recommending Acetaminophen (Tylenol, Paracetamol, found in Dayquil, NyQuil, etc). However, we do not agree that anti-fever medications, whether aspirin, acetaminophen, or ibuprofen, etc. are the primary approach to be relied upon.

## Why do we not advocate the general use of NSAIDs during fevers from Viral infections?

We strongly advise to minimize or eliminate the use of NSAIDs with fever or during viral infection. In pandemic viral infection models *the use of anti-fever medications increases loss of life by 1%-5% for viral respiratory pandemics and increase the virus spread and transmission.* That means that they lead to increased infection spread and increase the loss of life by 1-5%. *They will raise the curve and not flatten it while worsening case outcomes.* Another recent study provides further evidence that use of acetaminophen in respiratory infection associated with decreased lung function and an increased risk of asthma and COPD. This is incredibly important information to understand. Dr. Starko, who discovered Reyes syndrome – a side effect of aspirin that causes swelling on the brain of children - concluded that Aspirin was likely a significant contributor to the loss of life in the Spanish Flu. <https://www.theguardian.com/world/2020/mar/14/anti-inflammatory-drugs-may-aggravate-coronavirus-infection>  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3906934/>  
<https://academic.oup.com/cid/article/49/9/1405/301441>  
<https://www.atsjournals.org/doi/full/10.1164/rccm.200409-1269OC?fbclid=IwAR2jtQBJ7QzudgOFzrPlogaZJEKtvOWlxxCU65bNkQF56cJoKEOtUWiGTM>

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## Does our immune system fight viral infections?

Yes, the human immune system fights viral infections in many ways. A critical part of that is the development of antibodies to fight the virus. This happens during a fever. Australian researchers have mapped out how that happens and there are experiments underway to use the antibodies from recovered patients in those who are severely ill. We applaud the understanding that the human immune system does this and we are encouraging the appropriate management of infections to improve infected persons' own antibody production. Our prevention and treatment guidelines work to improve the immune system functioning on many levels as well as having anti-viral effects.

## How do NSAIDs affect our immune system?

The use of NSAIDs (aspirin, acetaminophen, ibuprofen which exist in many over the counter and prescription preparations) to reduce fever reduces this antibody formation and that is part of why they are associated in research with worse outcomes in infections. The bottom line is that unfortunately there is not yet an approved treatment.

<https://www.statnews.com/2020/03/05/how-blood-plasma-from-recovered-patients-could-help-treat-coronavirus/>

<https://www.reuters.com/article/us-health-coronavirus-australia-research/australian-researchers-map-immune-response-to-coronavirus-idUSKBN2140KA>

## What about Bio-Thermal Therapy® and IV Vitamin C for CoVid2019?

Because of the longstanding usefulness of Bio-Thermal Therapy® treatments for improving immune function in viral respiratory infections, including the Spanish Flu of 1918, we strongly believe that clinical treatment and our bedside management would be even more effective for cases than home management. This along with IV Nutrient therapy such as the Vitamin C therapy in our Anti-Viral Immune Drip could be significantly helpful. It is likely that these treatments will become necessary especially because as you will see below there is not much offered conventionally until hospitalization is required.

The Shanghai Government conducted clinical trials and now recommends IV Vitamin C in the treatment of CoVid-2019 because the outcomes were so much improved and many lives were saved. Naturopathic Physician and colleague Dr. Paul Anderson has published guidelines on clinical use of IV Vitamin C based on the Shanghai research. A New York hospital is starting to use Vitamin C as a part of care for CoVid cases, and others are in the process of following suit. We are delighted to see the use of Naturopathic Medicine at these hospitals as a front-line therapy.

Our IV therapy can provide these therapeutic levels of Vitamin C and we are well experienced in its' clinical use as an anti-viral treatment. We have used IV Vitamin C clinically for well over a decade - for example for viral respiratory infections and pneumonia, Epstein Barr (EBV) infection, as a part of our cancer treatment programs, and more.

*We are working on a provisional plan to be able to deliver care to CoVid cases at a different location in the building (a 'field clinic' dedicated solely for these patients and separated from the regular clinic). This is not yet needed, we are just looking ahead depending on the changing circumstances. We are hoping that our preparedness and prevention protocol that we are using with our patients will minimize and hopefully eliminate the need for more clinically intensive care for our current patients. However, we do not yet know and there may be a larger need to serve.*

<http://orthomolecular.org/resources/omns/v16n16.shtml>

<https://www.consultdranderson.com/wp-content/uploads/securepdfs/2020/03/Shanghai-Consensus-and-Guide-to-New-Corona-Virus-Infections-03-01-2020-JID.pdf>

[https://nypost.com/2020/03/24/new-york-hospitals-treating-coronavirus-patients-with-vitamin-c/?fbclid=IwAR12KaSBNnSd-](https://nypost.com/2020/03/24/new-york-hospitals-treating-coronavirus-patients-with-vitamin-c/?fbclid=IwAR12KaSBNnSd-9FIKtkjzTuP0Sow1uVz2jT4c4KuzVVBkiPIBfckPkcTUXE)

[9FIKtkjzTuP0Sow1uVz2jT4c4KuzVVBkiPIBfckPkcTUXE](https://nypost.com/2020/03/24/new-york-hospitals-treating-coronavirus-patients-with-vitamin-c/?fbclid=IwAR12KaSBNnSd-9FIKtkjzTuP0Sow1uVz2jT4c4KuzVVBkiPIBfckPkcTUXE)

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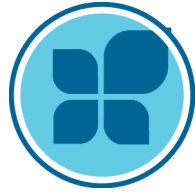
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## If antibodies help us fight the infection what about a vaccine?

Because our own antibodies are showing the best promise against this new version of an old virus, the hope of a vaccine is alluring. A new vaccine, if one can be created, if found to be safe, and if effective, it will take a significant amount of time to develop. Vaccines rapidly produced for the swine flu had significant side effects and eventually it was a debacle. A rush to create a vaccine should be tempered by safety studies. There was also a study just recently published in January 2020 that showed that a seasonal flu vaccine may *increase* the risk of developing corona virus infections by 36%. The reason is that the vaccine for the flu *interferes* with the immune response to other viral infection. Unintended consequences are difficult to anticipate.

These are the acknowledged limitations of vaccination. It cannot be expected to help control a newly emerging infection. The research on vaccination shows that its' primary purpose is to reduce the occurrence of cases of a disease in a population once that disease is already established, not in new diseases.

The overarching contribution to saving lives, and reducing cases, in infectious diseases, primarily comes from public health measures – sanitation, hygiene, and nutrition status - in both new and already existing diseases that vaccination is used for. Indeed, that is what we are relying on now. Vaccination, when introduced, *reduces the number of cases of the disease*, however it is usually introduced when the disease is already in a milder and less life-threatening form, and typically is introduced when the most significant loss of life has already occurred.

I was trained in a conventional medical anthropology program about this reality 30 years ago and research since the 1970s and up until recently has continued to confirm this reality.

<https://www.theguardian.com/world/2020/mar/25/coronavirus-vaccine-when-will-it-be-ready-trials-cure-immunisation>

<https://www.semanticscholar.org/paper/The-questionable-contribution-of-medical-measures-Mckinlay-Mckinlay/fa7737e295648d6fc5a1b2ad31a98a2341ffeb91>

<https://www.omicsonline.org/open-access/the-contribution-of-public-health-and-improved-social-conditions-to-increased-life-expectancy-an-analysis-of-public-awareness-2161-0711-4-311.php?aid=35861>

<https://www.disabledveterans.org/2020/03/11/flu-vaccine-increases-coronavirus-risk/>

<https://www.discovermagazine.com/health/the-public-health-legacy-of-the-1976-swine-flu-outbreak>

## How did the lack of testing and isolation affect our current situation?

For some time public health authorities believed that containment of the virus was a possibility. You may remember that it was considered newsworthy only a few weeks ago that a Harvard public health professor believed we were past the point of containment. However, this unrealistic perspective of containment, along with the lack of early widespread testing and isolation, coupled with asymptomatic transmission, led to a widespread occult seeding of the easily spread virus. The 5 to 14-day window to symptoms eventually caught up and the numbers began climbing rapidly. The reality is setting in that this pandemic CoVid 2019 will spread to perhaps more than 80% or more of the population this year.

<https://www.straitstimes.com/singapore/health/covid-19-beyond-containment-but-singapores-efforts-will-slow-the-spread-harvard-don>

<https://thehill.com/changing-america/well-being/prevention-cures/482794-officials-say-the-cdc-is-preparing-for>

## Will social distancing contain the Virus?

You may be hearing social distancing called 'flattening the curve' of the outbreak. This essentially means that we are slowing the *inevitable* social sharing of this new member of this ubiquitous family of nasal viruses. We almost all carry versions of the corona virus, just not this new one. So rather than an escalating rate of spread, it is slowed down, so a rapid curve upward is flattened and spread out over time. The goal of social distancing is not the elimination – the containment - of the disease. The goal is to slow the speed of the outbreak to reduce overwhelming the capacity of the health care system and protecting those at highest risk.

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*This is why we have been advocating our prevention and treatment guidelines to improve immune system responses to infection and to lessen the severity of diseases and to hasten recuperation. This is also part of our contribution to 'flattening the curve'. Please share this information.*

<https://www.npr.org/sections/health-shots/2020/03/13/815502262/flattening-a-pandemics-curve-why-staying-home-now-can-save-lives>

## **Social Distancing – Let's Call it Physical Distancing**

Social distancing can be difficult. Cabin fever, anxiety, lack of adequate exercise, getting along with friends and family, managing the stress of job status and potential loss. All of this is stressful.

So, let's agree to create as healthy an approach as we can to an extraordinary and unusual circumstance. Let's rename it Physical Distancing, not social. Socially we should connect – phone calls, facetimeing, *healthy* use of social media. Call on friends and family, connect with people you know or don't yet know well. Physically we need to be separate – but socially we have a lot of tools to connect.

Part of cabin fever is managing the change in regimen, the change in patterning to our daily life. We can easily 'lose it' if we lose our pattern. So, create a pattern, build a daily regimen. Wake up, make the bed, eat a breakfast, get dressed, brush the teeth, take a walk, work in an established work 'space', establish an exercise regimen, etc. Take time to emotionally process what is happening- whether that be through prayer, reflection, a physical method like yoga, or tai chi. This is not normal – it is extraordinary and it has not occurred for a century. We need to acknowledge this and embrace it to the best of our abilities to match the circumstances. We need our calm wits and we need one another – so let's stay socially connected in a healthy way while we physically take some time out.

## **What is the Corona Virus and what are the symptoms of an infection?**

The corona virus is part of a large family of viruses, and one family of the many viruses that can cause the common cold and other respiratory infections. Initial symptoms of infection are common to a number of respiratory infections:

- Fever (which may not be present in the very young or very old, or immunocompromised)
- Cough
- Sore throat
- Nasal congestion
- Generally feeling unwell
- Headache
- Muscle aches

## **Why is there so much concern if it is a common cold virus?**

CoVid-2019 is a version of the corona virus that was first identified in 2019 in Wuhan, China. This version of the corona virus is a new one and in certain groups of people (particularly older than 50 or those persons already having a chronic health condition and using certain medications such as ACE inhibitors) can lead to what are called lower respiratory infections that can be quite severe. Lower respiratory tract means the deeper lungs and such as pneumonia. There are fatalities and what the rate of loss of life is for those infected is not clearly known. However, the data that is coming in is showing that older persons are succumbing at a much higher rate, especially older men, and especially older men with underlying heart disease.



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Symptoms of more severe disease may include:

- Difficulty breathing
- Mild pneumonia
- Severe pneumonia (the severe pneumonia caused by COVID-19 is now named severe acute respiratory infection (SARI))
- Acute Respiratory Distress Syndrome (ARDS)  
In severe cases this can unfortunately lead to sepsis and septic shock and even death.

## Why does there seem to be so much confusion in the news about what to do?

Part of the challenge of understanding the potential severity of this new version of this age-old virus is that it takes time and cases to put it all together. There is an evolving understanding of spread and communicability. Some of the challenges of understanding this new virus is that many of those exposed may never get ill or have symptoms and the symptoms that do occur initially look like any other common cold or respiratory infection. The more severe symptoms can develop 2-3 weeks later. One early challenge was the limited availability of testing.

## Who was not being tested for CoVid 2019?

In reality common cold viruses such as the corona virus spread widely through the population. As noted previously, many persons will not have symptoms and most will have mild symptoms. Those symptoms that they do have would be indistinguishable from other respiratory infections. These persons, the majority of those exposed and infected, will never be tested and thus not reported.

Therefore, in all likelihood, because we are testing limited numbers of persons, and these are the most ill, this may likely lead to an overestimation of the virulence of the disease under normal health care service access. The rapid spread overwhelming service access will increase bad outcomes. Launching widespread testing 'after the horses have left the stable' will magnify the number of cases and confuse estimation of the disease severity.

This may be confusing but the following article is encouraging perhaps. It is about a Nobel prize winning Stanford Bio-Physicist who predicted the trajectory of the China outbreak accurately. The bottom line is encouraging- he predicts a rapid recovery from the CoVid pandemic. An oxford group of researchers also believes their model shows a lower virulence. However – we don't really know yet unfortunately. Only widespread rapid testing will clear the fog.

<https://www.kiro7.com/news/trending/coronavirus-nobel-laureate-says-us-will-have-quicker-covid-19-recovery/AWJN4WAM6VC7NPTBZLDC3JWG00U/>  
<https://nymag.com/intelligencer/2020/03/oxford-study-coronavirus-may-have-infected-half-of-u-k.html>

## What is a sensible and logical approach to preventing coronavirus and its' complications?

Because of the confusion of testing and case reporting and the social isolation to slow the inevitable spread to protect our most vulnerable, there can be an overestimation of virulence and danger. This would be false evidence appearing to be real. And False Evidence Appearing Real will promote fear, confusion, and anxiety. Chronic anxiety and fear increase stress hormones, increases inflammation, and suppresses the immune response. Therefore, let's commit to positive, proactive, and beneficial approaches that will help us through the coming season. And let's hope that Stanford physicist is correct.

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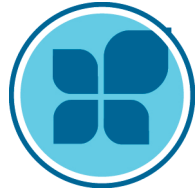
## Are we still in the flu season?

We are approaching the end of the flu season, typically that is April. Currently there are also cases in Portland of whooping cough. And the likelihood that respiratory infections are caused by the flu or the many other types of viruses or bacteria that we are commonly exposed to is just as high that it is corona virus. That is why it can be stressful and concerning when respiratory symptoms happen. Contact us when you first have symptoms.

It is essential that we do not miss the forest for the trees and that we incorporate overlapping approaches to protect ourselves. Because corona virus does not offer and clearly differentiating symptoms early in the process and we are already in a respiratory infection season *we are recommending a more vigilant response to acute onset of symptoms.*

Our fever, flu and infection guidelines from the Fall still hold for flu prevention and thankfully provide overlap for protection against coronavirus. So, if you a patient and already following our guidelines and advice from the Fall you are ahead of the curve. Because of the direction that things have turned with the spread of coronavirus the guidelines below are updated to reflect this.

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## PART 2 PREVENTION

### Current Naturopathic Guidelines for Prevention of Respiratory Infections during the CoVid-19 Crisis

#### What can we do that is safe, effective, natural, and reliable?

The focus on immunity from a naturopathic perspective focuses on a healthy soil or terrain. Just as a seed cannot grow on pavement but only in its cracks, naturopathic health begins with strengthening and hardening ourselves against infection and minimizing those cracks.

Good sleep, proper hygiene, good nutrition, low amounts of sugar, regular exercise, stress management, use of sauna and steam baths, are always to be considered beneficial.

#### Lifestyle and Routines

- **Wash hands frequently**, especially before eating or touching your face. Washing hands with warm soap and water for at least 30 seconds is the best option. One study found that washing hands even with plain running water without soap was more effective than ethanol-based hand disinfectants at killing the Influenza A virus.
- **Avoid touching your eyes, nose, and mouth.**
- **Stay home – especially when sick except to see the doctor.**
- **Cover your cough with your elbow or tissues.**
- **Nasal Irrigation, Neti Pot, etc:** Regular routine nasal irrigation can help to clear nasal secretions and clear viruses before they have time to nest. This is because after exposure to a virus, for example the influenza virus, it tries to invade and multiply in your nasal passages for at least 1-2 days before you develop any symptoms. Nasal irrigation can wash away viral particles before they have the opportunity to take hold, and thereby prevent many infections from happening in the first place.
- **Load up on foods and spices with antiviral properties.** These include coconut oil, raw garlic, oregano, ginger, kimchi and other fermented foods, walnut, pomegranate, green tea, apple cider vinegar, and medicinal mushrooms (shiitake, maitake, reishi, cordyceps, turkeytail).
- **Gargle with Listerine®** - really. Listerine® was originally developed as a cleaner for doctors' offices. The essential oils have potent antiviral activity, including against the flu and other viruses that have an 'envelope' around them. Coronavirus has an envelope around it and those are the viruses that Listerine® shows benefit against. 30 seconds exposure reduced influenza and other enveloped viruses by 95-100%.
- **Eat lots of colorful fruits and vegetables.** Fruits and vegetables contain quercetin which has antiviral properties, including against coronavirus.
- **Stay well-hydrated.** This means water. Not soda or sugary drinks. Divide your body weight (in pounds) in half and drink that number in ounces.
- **Ending hot showers with a cool spray** – first briefly, then slowly for a longer period lasting up to 2 minutes, with cooler water as one tolerates it, reduced colds and flus in one study by 50%. It took 6 weeks for beneficial effects to be seen. 1990 German study, details in Naturopathic Physical Medicine, 2009 Chaitow and Blake
- **Avoid simple sugars and processed/junk food.** Did you know that your blood shows lab evidence of a lowered immune system within 30 minutes of eating simple sugars (like glucose, refined sugar, and fructose), and causes a 50% reduction in your white blood cells' abilities to kill germs. White blood cells are our "army" cells that fight off

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germs. This effect is most noticeable 2 hours after ingestion, but is still present 5 hours later. Keeping blood sugar levels healthy has been shown to improve immune system activity.

- **Get fresh air and moderate daily exercise.** Moderate exercise can boost the production of macrophages, the kind of white blood cells that “eat” bacteria and viruses.
- **Get adequate sleep.** An increase in sleep actually increases the number of your white blood cells. On the other hand, loss of sleep even for a few hours at night, increases inflammation in our body which makes us more susceptible to catching the flu and having more severe symptoms.
- **Work to reduce and manage stress.** Emotional stress creates physiological stress in our bodies that lowers our immune defenses and makes us more vulnerable to illness. Stress has been shown to lower our white blood cells’ abilities to kill germs, and actually creates more inflammation that may make us feel even sicker.

<https://www.consumerreports.org/flu/hand-washing-vs-hand-sanitizer-better-for-flu-protection/>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2778074/>

<https://www.sciencedirect.com/science/article/pii/S1079210405801246>

<https://journal.com.ph/news/world/breaking-news-can-querctin-help-us-avoid-threat-coronavirus-infection>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4808895/?fbclid=IwAR0hJ8WZ4IFp9x5AC0j0maJwuqV67XEEN-UfsXy38CKkE8o7QM70vCYvoLY>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3850896/>

## Naturopathic Medicines and Nutrients

We also have natural medicines and nutrients that research shows can have a significant benefit for prevention and treatment of respiratory infections including the family of rhinoviruses including influenza and coronaviruses. We usually use a lower dose for prevention and then increasing for exposures and for symptoms. We are encouraging a more vigilant response to respiratory infections in general.

## Naturopathic Medicine Cabinet Stocking List for Prevention

I will review these preparations below and the literature and the why and how much. I recommend having all on hand and they will last a good deal of time. Having them on hand allows rapid dose escalation as treatment *at the first sign of symptoms in efforts to help fight infections to stop them in their tracks.*

In general, a daily dose is best for prevention, an additional dose if around someone ill. At the first sign of symptoms repeating the dose several times through the day (every 2 hours for the first two days then 4 times daily is typical) while *following the supportive guidelines in section 3.*

### Core Medicines:

#### Bovine Colostrum

1 capsule for adults, ½ for children

#### PCHH Antiviral Herbal Combination Drops

½ tspn (about 2 dropperful) , ½ dose for children

#### Immune Nutrients –

Immunoplus – 2 tablets or Congaplex – 3 capsules for adults, Congaplex Chewable 3 tablets for kiddos

**Vitamin D drops** -See dosage below<sup>i</sup>

### Important Medicines to have on hand:

Sinus Chi

Bamboo Chi

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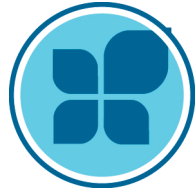
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Vitamin A drops  
PCHH Nasal Spray  
Homeoprophylaxis Preparations  
NAC – N Acetyl Cysteine  
PCHH Lung Tea with Eupatorium  
Cornoa Virus Nosode 30c and 200c  
Arsenicum Album 30c

## Core Medicines

These four medicines form the core of immune support during this season.

1) Let's start with **Bovine Colostrum**. Bovine colostrum is a milky fluid that comes from the breasts of cows the first few days after giving birth, before true milk appears. It contains proteins, carbohydrates, fats, vitamins, minerals, and specific kinds of proteins called antibodies that fight disease-causing agents such as bacteria and viruses. Colostrum is produced by nursing human moms too – and is one of the ways that newborns are protected against infections. Antibody levels in bovine colostrum can be 100 times higher than levels in regular cow's milk.

<https://www.webmd.com/vitamins/ai/ingredientmono-785/bovine-colostrum>

**Colostrum from cows' milk (Bovine Colostrum) was shown to be at least 3 times more effective than the influenza vaccination in a high-risk heart disease population.** The dosage recommended is 1 capsule daily for 2 months, wait a month and repeat, or take ongoing. In this pandemic we recommend ongoing.

<http://journals.sagepub.com/doi/abs/10.1177/1076029606295957>

**Bovine Colostrum** helps to protect children from diarrhea and recurrent respiratory infections in adult males. This is important because the coronavirus is affecting older males more severely.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5402550/>

<https://www.ncbi.nlm.nih.gov/pubmed/12923655>

This overall benefit has been confirmed in a larger met-analysis of adults- meaning more studies are showing benefit for reducing respiratory infections.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4960812/>

**Colostrum also protected against coronavirus infection in cows.** There are several studies showing that colostrum levels and their immune globulins are protective against community spread and infections. Whether this translates to humans specifically for coronavirus is unknown, but the evidence for other benefits including flu prevention suggest it may be.

<https://www.sciencedirect.com/topics/veterinary-science-and-veterinary-medicine/bovine-coronavirus>

<https://www.ncbi.nlm.nih.gov/pubmed/9453122>

2) **PCHH Anti-Viral Combination Drops**- our combination formula contains *Elderberry, Echinacea, Licorice, Lemon Balm, Milk Thistle, a special Lomatium extract, and Aswaganda.*

**Elderberry** has anti-viral activity against a number of viruses. Research has shown that elderberry is clinically effective as a flu treatment and reduces symptoms by four days (as compared to 1 day for Tamiflu). It is non-

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toxic and delicious. 15 ml four times daily was the treatment. We recommend a dose each day during the flu season and ramping up to 4 or more times daily at the first sign of symptoms.

<https://www.ncbi.nlm.nih.gov/pubmed/15080016>

**Echinacea** has potent immune stimulating and antiviral properties including against influenza (including Tamiflu resistant strains) and coronaviruses (including the highly dangerous SARS and MERS strains). Echinacea works very well topically for direct antiviral contact, as was its traditional use, so oral administration is likely very useful for reducing the population in the mouth.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4058675/>

<https://www.hindawi.com/journals/bmri/2012/769896/>

**Licorice** has broad and effective anti-viral effects. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4629407/>

**Lemon Balm**- has effective antiviral benefit against herpes virus and influenza. Both of these are viruses that have an envelope around them. Like Listerine® lemon balm seems to have a good effect against enveloped viruses.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4908999/>

<https://www.ncbi.nlm.nih.gov/pubmed/18693101>

**Milk Thistle** has anti-influenza and other anti-viral effects. In this study it was almost twice as effective as Tamiflu against the flu virus. <https://www.ncbi.nlm.nih.gov/pubmed/21377857>

**Lomatium** has a long history for use in infections both bacterial, viral, and fungal in nature.

<https://www.phytomed.co.nz/site/phytomed/Lomatium%20Herb%20Profile.pdf>

Finally **Ashwagandha** is an Indian herb that has antiviral properties and helps support the hormonal system (adrenal glands) during infections. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3278839/>

### 3) Immune Nutrients

**Immuno-Plus and Congaplex** both contain immune supporting nutrients to fight infections. Including Zinc and Thymus extracts as well as other food and nutrient concentrates that support immune function. The Thymus gland is very important for producing antibodies to fight infections. It shrinks as we age. Thymus extracts have long been used for respiratory infections.

<https://www.ncbi.nlm.nih.gov/pubmed/3643647>

<https://www.ncbi.nlm.nih.gov/pubmed/17063641>

The prestigious Cochrane Database Review looked at numerous studies on zinc supplementation in children. The studies showed that it reduced pneumonia incidence significantly. This is important because it is the complications of the flu such as pneumonia that are associated with negative outcomes and loss of life.

[http://www.cochrane.org/CD005978/ARI\\_zinc-supplementation-prevention-pneumonia-children-aged-two-59-months](http://www.cochrane.org/CD005978/ARI_zinc-supplementation-prevention-pneumonia-children-aged-two-59-months)

### 4) Optimize Vitamin D

People who had low levels of Vitamin D were 40% more likely to have a respiratory infection than those with a normal level. Vitamin D is easily tested with a simple blood test. <https://www.ncbi.nlm.nih.gov/pubmed/19237723>

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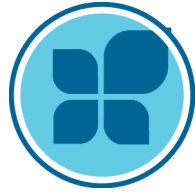
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Current recommendations for Vitamin D supplementation are likely exceedingly low. In Finland studies intervention showed that Type 1 Diabetes rates, which had been climbing, stabilized after significant increases in Vitamin D intake. Based on their research Infants less than 1 should have 1000IU daily, Toddlers and children 3000iu daily, and Teenagers and Adults more than 8000 iu daily. **If you are a patient using the drops from the clinic that is equivalent to 4 drops a week for infants, 10 drops a week for children, and 4 drops DAILY for teenagers and adults.**

<https://www.jpmp.org/journal/view.php?number=1915>

## Important Medicines

These medicines are no less effective than the core medicines. However, they have more specific use and may be prescribed by your doctor at the first sign of symptoms. They are safe and can also be used preventively as well. Natural medicine is so wonderful in this way.

**Sinus Chi** is a chinese medicine formula that contains herbs that help to fight sinus infections. Two of the ingredients – Astragalus and Scutellaria- have shown benefit against other coronaviruses and influenza. It also helps to reduce allergic reactions. A dose is 1 in infants increasing up to 4 in adults. Repeated several times daily for acute symptoms.

<https://www.ncbi.nlm.nih.gov/pubmed/29170045>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3705751/>

**Bamboo Chi** is a special bamboo extract that is useful in deeper respiratory infections, such as pneumonia. Because the coronavirus and influenza can lead to pneumonia. This is helpful to have on hand early in infections of the respiratory tract. A dose is 1 in infants increasing up to 4 in adults. Repeated several times daily for acute symptoms.

<https://onlinelibrary.wiley.com/doi/full/10.1111/j.1541-4337.2011.00147.x>

<https://www.intechopen.com/books/pharmacognosy-medicinal-plants/medicinal-properties-of-bamboos>

**Vitamin A drops** - Vitamin A is very important for immune function of the lining of the respiratory system. We recommend 10 drops once a week for prevention and daily for up to 10 days for acute symptoms. Not to be used in pregnancy. <https://www.ncbi.nlm.nih.gov/pubmed/8801180>

**PCHH Nasal Spray** - our nasal spray contains Silver Nano Particles, DMSO, and the essential oils of thyme, eucalyptus, peppermint, and lavender. These essential oils have antiviral, antifungal, and anti-bacterial effects. By putting them in a nasal spray with DMSO, the DMSO acts as a carrying agent to bring the medicines into the tissues rather than just coating them, it also reduces inflammation of the tissues. The silver nano particles have anti-viral, anti fungal, and anti-microbial effects as well. It is not simply 'colloidal silver' which can be dangerous.

2 sprays in each nostril and inhale deeply, once daily for prevention and several times daily for treatment. A useful tool when flying.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6612361/>

<https://www.ncbi.nlm.nih.gov/pubmed/22024958>

<https://www.sciencedirect.com/topics/pharmacology-toxicology-and-pharmaceutical-science/dimethyl-sulfoxide>

## Corona Vaccine

There is currently no corona vaccine and there may be problems with its' development.

<https://journals.plos.org/plosone/article?id=10.1371%2Fjournal.pone.0035421&fbclid=IwAR2uGSe8kP-ceHlnwMqM-H-MvUksEdg80MS5lCrAlGvne00B08blScOn-M>

## Are there alternatives to vaccination?

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There is a system of immunization from homeopathy called Homeoprophylaxis. This is done by prescribing a particular homeopathic medicine during epidemics in advance of symptoms. Utilizing similar principles from oral vaccination, a dead virus or bacteria is diluted sequentially many times. The dilution is considered safe and does not contain whole or living virus or bacteria. This medicine is called a nosode.

## Has Homeoprophylaxis been studied?

Yes. It has been studied around the world in real life situations on large numbers of people – from 600 to 50,000, and even 9.8 million people in various epidemic diseases in the US, Cuba, India, Brazil, Argentina, South Africa, Africa. The 9.8 million people was in Cuba during the Swine Flu epidemic.

In these studies, diseases Influenza, Swine Flu, pneumonia, leptospirosis, dengue fever, polio, chikingunya fever, meningitis, and more were prevented. Additionally, there is extensive international literature accumulated from homeopathic clinics over the last 200 years. In all of those diseases it was found to be effective.

**There is no available CoVid 2019 Homeoprophylaxis at this time. If one becomes available we will stock this in our pharmacy. The pharmacy does have Corona Virus Nosode, this is a general Corona Virus nosode, however. We are not claiming that it is a vaccine and prescribe it according to traditional homeopathic prophylaxis method.**

**The ability to have access to a safe non-toxic medicine early on in an epidemic is an advantage.**

**In India the Ministry of AYUSH which oversees homeopathy as one of the 5 branches of regulated medicine in India (which also includes a branch for Naturopathy)**

**has advised Arsencium Album 30c to be taken once weekly for prevention in areas with outbreaks.**

<https://immunizationalternatives.com/clinical-research/> <http://www.homeopathycenter.org/news/homeoprophylaxis-human-records-studies-and-trials>  
<http://www.homeopathycenter.org/news/homeoprophylaxis-human-records-studies-and-trials>

## PCHH Lung Tea with Eupatorium

Our lung tea has a number of herbs that help with respiratory infections. We have added eupatorium to the formula because this herb has been described in the literature as having corona virus antiviral activity.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5541272/>

**NAC (N – Acetyl Cysteine)** one 600mg capsule twice daily reduced flu symptom formation to 1 in 4 persons compared to 3 out of 4 persons taking placebo. **It is also an excellent natural medicine to thin mucous secretions. NAC improves glutathione levels and glutathione is an important anti-oxidant in the lungs.**

<https://www.ncbi.nlm.nih.gov/pubmed/9230243>

<http://www.rcjournal.com/contents/09.07/09.07.1176.pdf>

<https://www.ncbi.nlm.nih.gov/pubmed/8013597>

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## PART 3 SUPPORTIVE TREATMENT

### INFECTION GUIDELINES AND FEVER INSTRUCTIONS

*These are general guidelines; the doctor will communicate specific instructions for your condition.*

*These should not be considered individual medical advice.*

*Please discuss these interventions with your Naturopathic Physician or other health care provider.*

*This especially pertains to the treatment guidelines in Part 3. These guidelines laid the foundation for the most effective and life- saving clinical interventions during the Spanish Flu Epidemic. They are based on the physiology of our immune system and that has not changed since then. They are naturopathic guidelines on the proper use of rest, fresh air, physical treatments including hydrotherapy, and diet during infections.*

*it is my sincerely held belief that following them will help to lessen cases, reduce infection complications, improve infection outcomes and save lives. It is also my sincerely held belief that neglecting these guidelines as a foundation of care will result in more and worse infections and a greater loss of life.*

*The clinic has uploaded these guidelines to make them widely available. We encourage you to 'like' and 'share' and spread the word. These guidelines are for information only, and while they inform our daily clinical practice and may save the life of you or a loved one, they should not be construed as individual medical advice.*

*Reproduction of these guidelines should credit the source.*

### WE ALL WANT THE BEST OUTCOMES

When the unfortunate stories on the news are shared that discuss the loss of life from influenza, coronavirus, or any other infection we all feel a heavy heart. No one wants to lose a single life. Especially hard are the young children and our hearts go out to those families and we pray for them. No one has a crystal ball, we make the best choices we can, and we must maintain our rights to make that choice.

*"Give me a fever and I can cure any disease" -Hippocrates.*

*The 'Father of Modern Medicine' who in actuality practiced Naturopathically*

### Established Clinic Patients

We are encouraging early and complete treatment of respiratory symptoms this season. At this time, if you have symptoms of a new respiratory infection please contact the clinic right away. You will be scheduled to speak with a doctor on a telemedicine appointment as soon as one is available. We will want to speak to you as soon as possible.

We are in allergy season and there are many different causes of respiratory symptoms, including the flu, allergies and sinus infections, etc. As a part of the telemedicine consult you will be evaluated and if needed testing will be coordinated along with a treatment plan. *Because of the pandemic, the clinic will be using telemedicine consultations for initial evaluation of patients with new respiratory infection symptoms.*

CoVid 2019 testing is available through the clinic. If needed, testing will be done at the curbside outside of the building.

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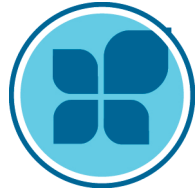
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You will be directed where to park and the doctor will come down in appropriate personal protective equipment to collect the sample, deliver medicines etc.

Usually we have patients present to the clinic as early as possible for an Urgent Care evaluation and a treatment of Bio-Thermal Therapy<sup>®</sup>. This affords time for physical evaluation and if necessary rapid in office testing for strep, urine tests, or influenza A&B testing that provides results in minutes. Other tests such as blood count can be taken and orders for any imaging can be made.

The clinic is designed for urgent care to optimize same day visits for these treatments. This keeps care accessible, affordable, and flexible and in accordance with our clinical purpose to help as many people as we can. If you are cleared to come to the clinic for treatment we will have surgical masks available in the waiting room, please use one if you have a respiratory infection symptoms.

The individualized clinical treatments will improve immune function, increase circulating white blood cells, *will direct medications into the tissue affected*, and we use specific electrotherapy currents and wavelengths that specifically help to fight infections – viral, bacterial, or fungal. We have extensive experience with all manner of infection: strep throat, bronchitis, influenza, pneumonia, cellulitis, osteomyelitis, ear infections, infections of the eye, the skin, bladder and kidney infections, etc.

*At this time we will be managing suspected and confirmed CoVid 2019 cases with telemedicine and home treatment at this time to avoid exposing other patients who are under active care.*

## What is a Fever?

Fever is an elevation of the body temperature. Fever or a ‘febrile state’ is diagnosed when an oral temperature is 1°F or .5°C above a *person’s normal body temperature*. However, in general a fever is present at 99.0°F or 37.5°C orally. It is a *symptom of an infection and a response by the body to fight it*.

<https://en.wikipedia.org/wiki/Fever>

## Why do we get a fever with infections?

Our immune system has many levels of protections to keep us healthy. For example, the skin is a physical barrier against infection and mucous in our respiratory tract is helpful to trap infectious organisms, and there are many other types of safeguards built into our bodies. Some of those safeguards, when triggered, stimulate the body to create a fever.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2367118/>

## What safeguards cause the body to make Fever symptoms?

There are several important safeguard pathways that stimulate the body to create a fever. These include specific types of white blood cells of the immune system that circulate through the body and act as roaming guards. When these cells identify an invader that can cause infection they send a chemical message (called IL-6) to a part of the brain that is called the hypothalamus.

<https://www.ncbi.nlm.nih.gov/pubmed/25429137>

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## What does the hypothalamus part of the brain do?

The hypothalamus is an important part of the brain. It regulates many things - hormones, sleep, emotions, blood pressure, it directs our pituitary 'the master hormonal gland', and more. The hypothalamus also controls the temperature regulation of the body. When it gets the message that an infection needs attention the hypothalamus raises the body temperature. The hypothalamus also can also direct the body to become febrile on its' own when it is stimulated by infectious organisms that may get past the guards. This is an example of having overlapping back-up systems in our body.

<https://www.endocrineweb.com/endocrinology/overview-hypothalamus>

## How does the hypothalamus part of the brain make a fever happen?

The hypothalamus controls many parts of the body. When the hypothalamus gets the message from its' guards or from its' own identification of an infectious agent it resets the body temperature thermostat. In other words' it raises the temperature that the body will be running at – very much like raising the thermostat in a house will then cause the furnace to turn on and heat the house.

Once it raises the temperature 'set point' the hypothalamus sets into motion two large processes. The first thing is the hypothalamus induces heat conservation. Just like we will close the windows in the house to avoid losing heat the hypothalamus closes the pores of the skin to trap heat in the body. That we may experience as the chills that precede our actual temperature rise. The second thing the hypothalamus does is increase the production of heat in the body by increasing metabolic activity, just like your furnace will turn on when you raise the temperature set point. This combination of events – conservation of heat loss along with production of heat - leads to the rise of the body temperature in infections that we experience as a fever.

<https://en.wikipedia.org/wiki/Fever>

## Why does our brain raise our temperature when it senses an infection?

The process of fever creation in infections is not an accident. It is an intentional protective reaction of the brain to coordinate the whole body and its' various systems as a part of our immune system fight against infection.

<https://www.infectioncontrolday.com/infections/fever-plays-vital-role-immune-response>

## How long will a fever last in an infection?

The fever will continue until what stimulated the reaction is resolved. When that happens the hypothalamus 'opens the windows' and 'resets the furnace to a normal temperature.' The hypothalamus causes blood vessels in the skin to dilate which brings the body heat to the surface and it also directs the sweat glands to open which lead to sweating. This signifies the 'crisis' of the fever, or the fever 'breaking', and it predicts the anticipated reduction of oral temperature (Guyton & Hall 2006).

## Fever- what is it good for?

It is fundamentally important to remember that a fever is a protective mechanism of the body to fight infection. Bacteria and viruses cannot replicate at higher temperatures and cells of the immune system are activated by higher temperatures. Mild fever is associated with better prognosis in both viral and bacterial infections (Kluger 1986). Redness and swelling are examples of local fever.

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## If a fever has benefits why should we stop it?

The prescription of anti-fever drugs in an effort to reduce fever is based on the *assumption that fever is bad and that reduction of fever will be of benefit*. The assumptions that fever is bad or that reducing fever has benefit has never had any scientific, clinical, or basic science research evidence to back it up. Actually, the opposite has been found and should be expected when one understands the purpose of a fever.

Anti-fever medications have never been shown to reduce the likelihood of febrile seizures. Dr. Mackowiak of the Veterans Administration in Hospital outlined in a research review about these problems with anti-fever medications clearly in the prestigious Current Opinion of Infectious Disease in 2002. His conclusion ultimately was that *"Unfortunately, insufficient experimental data are available to validate any rationale" for their use in infection*. Bottom line is we should not look to 'stop' or 'suppress' a normal fever process in an infection. It is done out of fear of the fever. And fear can be False Evidence Appearing Real. We should harness the fever.

<http://www.ufrgs.br/fisiologiacelular/site/arqs/ENSINO/artigos%20em%20PDF/Fever%20-%20beneficial%20and%20deterimental%20effects%20of%20antipyretics.pdf>

## Why has there been so much concern about the flu and other viral epidemics?

The flu has become a fearful annual infection since the pandemic of 1917-1918. There have been about 7 of these pandemics in the last 120 years. A pandemic is determined by the large number of persons affected around the world and the high loss of life. However, research is showing that the large losses may be due to the nature of the *treatment* and management once infections occur and the methods of *prevention* centered around the vaccine may be misguided.

## What was the track record of Conventional Medical treatment in the Spanish Flu?

The death rate in the 1917-1918 Spanish Influenza epidemic under *regular medical care* was high. Current regular medical care management is such that the flu and pneumonia are still the leading causes of infectious disease death.

The high mortality rates of the Influenza pandemic of 1918-1919 have been attributed to a 'cytokine storm' – a 'chemical over reaction of our own immune system' over reacting and overwhelming the body. Estimates are that in the world there were 500 million infected persons with an imprecise estimate of 50 to 100 million deaths. This puts the case fatality rate at 10 to 20 percent. However, in some locations the case fatality rate was even higher. In Cook County Hospital in Illinois the fatality rate for all admissions was 39.8%. The rapid severity of the disease and the pathology has been attributed to the cytokine storm theory.

The drug Aspirin, acetylsalicylic acid, was derived from the herb Spiraea Ulmaria, commonly known as meadowsweet. This drug had a patent that expired in the US in 1917 and became widely available just as the flu pandemic was to begin. Dr. Karen Starko in 2009 reviewed the literature on the case fatality rate in the 1918-1919 influenza pandemic. Her conclusion was that the use of aspirin was likely the cause of death in a significant portion of the fatalities. Her conclusion was that the severity of the viral pathology was worsened by the dosages prescribed (8-31.2gm/day) that are now known to be toxic doses associated. Aspirin is a blood thinner and overdose, such as the amounts used during the Spanish flu, can lead to hemorrhage. It also impairs clearance of mucous from the respiratory tract. Beyond the direct contribution to mortality as iatrogenic illness, in the context of the previous research here additional morbidity and mortality from this prescription would be most likely.

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## What was the track record of Naturopathic Treatment in the Spanish Flu?

In 1918 Naturopathic Physicians (ND) Osteopathic Physicians (DO), Chiropractic Doctors (DC), and Homeopathic MDs, worked in a similar comprehensive natural fashion in their management. While the mortality rate of the conventional MD's surpassed 20% the loss of life under DC's and DO's 2-3%, and the Homeopathic MDs and Naturopathic Physicians less than 1%.

The reports from the Naturopaths on their loss of cases indicates that they were seen *after* the patient had already tried regular medical care. In Chicago at the Lindlahr Hospital for example they treated 300 cases in patient naturopathically and 1200 outpatient cases. They saved every life. The nearby Cook County Hospital mortality was almost 40%. A key element of treatment by Naturopathic Physicians was what they did do and what they did not do. They did not suppress the fever with anti-fever medications.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4711683/>

<https://www.ncbi.nlm.nih.gov/books/NBK22148/>

[https://en.wikipedia.org/wiki/History\\_of\\_aspirin](https://en.wikipedia.org/wiki/History_of_aspirin)

<https://academic.oup.com/cid/article/49/9/1405/301441>

## Why avoid using anti-fever medications?

Anti-fever drugs are those such as Tylenol, acetaminophen, paracetamol, aspirin, ibuprofen and those other medicines like Nyquil, Dayquil, and numerous others that contain them. This is frequently the first intervention over the counter and in hospitals and doctors' offices. Research has shown **do not shorten infections and even worse that they can prolong infections**. More troubling is that they can **prolong the time of it being spread** (Geisman 2002). Importantly anti-fever drugs are associated with a **higher loss of life** in infections than when not using them (Vaughn 1980).

Naturopathic clinical principles have been confirmed by research that has shown that *fevers are associated with better outcome in viral and bacterial infections* (Kluger 1986). Therefore – *we harmonize our treatment to ease the discomfort of fever in ways that assist the goals of the fever – which in itself is an attempt by the body to heal. This is the secret to the effective and successful Naturopathic approach to infections.*

## Why do we not advocate the general use of NSAIDs during fevers from Viral infections?

To be straight to the point, Dr. Mackowiack of the Veterans Administration has been studying fever management for decades and he has this to say:

“Underlying the prescription of (NSAIDs) is the assumption that fever is detrimental and that reduction of fever will have benefit; however, neither assumption has been demonstrated.” (Mackowiak 2000). In other words' there is no scientific rationale or evidence that they have benefit and there is *enough scientific evidence to calculate their negative impact on the number of lives lost. In other words they lead to more fatalities when they are used.*

We strongly advise to minimize or eliminate the use of NSAIDs with fever or during viral infection. In pandemic viral infection models *the use of anti-fever medications increases loss of life by 1%-5% for viral respiratory pandemics and increase the virus spread and transmission*. That means that they lead to increased infection spread and increase the loss of life by 1-5%. *They will raise the curve and not flatten it while worsening case outcomes*. Another recent study provides further evidence that use of acetaminophen in respiratory infection associated with decreased lung function and an increased risk of asthma and COPD. This is incredibly important information to understand.

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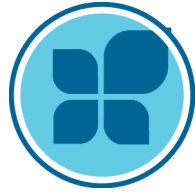
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“Patients might survive (when using fever suppressor), but it’s IN SPITE of the treatment, not because of it”

- Harold Dick ND, in clinical practice from 1955-1990.

Based on the known and accepted physiology of fever, the basic and clinic scientific evidence of NSAID use in infectious fever, it is clear that the use of NSAIDs in fever management with viral respiratory infections be used judiciously and minimally. It is imperative that a rational approach to fever in the clinical setting particularly as it relates to respiratory viral infections, be implemented.

**“Success sometimes depend not just on what the doctor does,  
but *what he does not do.*” - Hippocrates**

We know that part of the high loss of life from the Spanish Flu epidemic from 1917-1918 was due to the prescription of aspirin and not the flu itself. I have been lecturing on this topic for almost 20 years. The renowned Dr. Karen Starko published a detailed evaluation of the data in 2009 in the Oxford Academic. Dr. Karen Starko is known around the world for leading the discovery that aspirin could be toxic to infants and lead to Reyes Syndrome.

Aspirin was a new wonder drug against fevers and had recently become generic after Bayer lost a lawsuit to claim it as an exclusive patented drug. It gained widespread international distribution just before the academic. The starting dosages at the time we know now are the lowest level of toxic dosages – and induce pulmonary edema, hyperventilation, and death. Her conclusion was that “a significant proportion of the deaths (during the epidemic) may be attributable to aspirin.” <http://cid.oxfordjournals.org/content/49/9/1405.full>

Naturopathic doctors at the time did not use aspirin to suppress the fever as the fever was seen to be beneficial and instead used hydrotherapy to comfort the patient, control the fever and harness it, and to help fight the infection. One of Hippocrates great quotes is “Success sometimes depends not just on what the doctor does, but what he does not do.”

## **Why didn’t Naturopathic doctors use aspirin for fevers?**

Naturopathic physicians, including Hippocrates, have long clinically observed the benefit of fever in infections. Modern research above has validated these observations resoundingly as noted above. Fever is considered a part of the curative response of the body. The role of hydrotherapy is not to artificially stop it with ice packs or drugs. The role of Naturopathic Hydrotherapy and Bio-Thermal Therapy<sup>®</sup> is to *harness* the fever to more rapidly resolve the infection.

Additionally, naturopathic doctors of that era, and many today, believed that infections, particularly the childhood fevers such as measles, mumps, rubella etc., were a part of a larger cycle of immune development. In other words, that by going through these infections the immune system was strengthened and chronic diseases such as cancer, paralysis, mental degeneration, arthritis, etc. would be prevented and reduced. This belief – that the childhood fevers in particular have a larger benefit when handled correctly- has also been confirmed by modern scientific research.

***Febrile childhood infections such as measles, mumps, rubella, etc. protect against all non-breast cancers.***

A Swiss study found that adults are significantly protected against non-breast cancers — genital, prostate, gastrointestinal, skin, lung, ear-nose-throat, and others — if they contracted measles (odds ratio, OR = 0.45), rubella (OR = 0.38) or chickenpox (OR = 0.62) earlier in life, and all febrile childhood diseases were associated with lower rates of

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non-breast cancer later in life. Albonico HU, et al. Med Hypotheses. 1998. Febrile infectious childhood diseases in the history of cancer patients and matched controls.

**Mumps infection provides protection against ovarian cancer.** Cancer Causes & Control August 2010, Volume 21, Issue 8, pp 1193–1201

**Measles, Mumps, Rubella, Chickenpox, and Pertussis, at an earlier age prevent Multiple Sclerosis.** Neuroepidemiology. 1998;17(3):154-60. Multiple sclerosis and infectious childhood diseases

**Childhood febrile infections reduce the likelihood of cancer and spontaneous remissions of cancer are associated with fever inducing infections** Neuroimmunomodulation. 2001;9(2):55-64. Fever, cancer incidence and spontaneous remissions.

***Chicken pox early in life reduces the likelihood of brain cancers (specifically glioma) later in life.***

History of chickenpox in glioma risk: a report from the glioma international case–control study (GICC)  
Amirian et al 2016

***Having measles is protective against Non-Hodgkin's Lymphoma***

Leuk Res. 2006 Aug;30(8):917-22. Epub 2006 Jan 6. Montella, et al Do childhood diseases affect NHL and HL risk? A case-control study from northern and southern Italy.

***Measles is protective against allergies and eczema***

Shaheen SO, Aaby P, Hall AJ, Barker DJ, Heyes CB, Shiell AW, Goudiaby A. Measles and atopy in Guinea-Bissau. Lancet. 1996 Jun 29;347:1792-6.

Rosenlund H, Bergström A, Alm JS, Swartz J, Scheynius A, van Hage M, Johansen K, Brunekreef B, von Mutius E, Ege MJ, Riedler J, Braun-Fahrlander C, Waser M, Pershagen G; PARSIFAL Study Group. Allergic disease and atopic sensitization in children in relation to measles vaccination and measles infection. Pediatrics. 2009 Mar;123(3):771-8.

***Childhood exposure and infection with measles and mumps reduced cardiovascular disease later in life.***

Kubota Y, Iso H, Tamakoshi A, JACC Study Group. Association of measles and mumps with cardiovascular disease. The Japan Collaborative Cohort (JACC) study. Atherosclerosis. 2015 August;241(2):682-6.

Because of the effective clinical approaches outlined below infections were routinely benign for naturopathic physicians whereas in the hands of conventional doctors using ice packs, anti-fever medications, stuffing patients with food, etc. (in other words non-biological and unscientific approaches) complications were more frequent.

***The following first 5 steps of the Naturopathic infection guidelines below were the consistent principal interventions of the Naturopathic Physicians in the 1918 Flu epidemic that by themselves showed significant life-saving benefit.***

***Do not disregard them – they are the essential basis of rational biological fever and infection management.***

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## Fever and Infection Basic Naturopathic Guidelines

1 **Rest** as much as possible. Stay home. This will allow the body to focus on fighting the infection, it will also help prevent spreading the illness to others.

2 **Fresh Air**

The body requires 13% more oxygen for every degree of body temperature elevation (Beers and Berkow 1999). Ventilate the sick room. Get fresh air every hour or two while awake via an *open window*. A screen can be used to prevent a draft on the ill person.

*During the Spanish flu epidemic of 1918 it was common in regular medicine to not open windows and keep patients confined without fresh air, this was counterproductive. Do not make this mistake.*

3 **Diet**

The old saying is actually: “If you feed the cold, then you will have to starve the fever”.

During infections’ a simple diet of easily digested foods such as steamed vegetables, chicken soup, etc. are the rule. Avoid sugary foods, sweets, pastries, breads, heavy foods, or the hard to digest foods from your food intolerance report.

Refrain from solid foods with a temperature over 99.5°F— ingest only water, diluted fruit juices, lemonade sweetened with honey, herbal teas, etc. (unless diabetic, pregnant or breastfeeding [the child should continue to breastfeed]). This may be required for several days. *It is just as important to restrict the food as it is to properly break the fast. See below.*

It is very important to understand that feeding can be very counterproductive during a fever. The body produces chemicals (called interleukins) that halt digestion. Feeding solid foods will drive the fever higher because the foods do not digest under these conditions.

### Breaking the fast or food restriction:

When the temperature has come down from being elevated to below 99.5°F, begin to break the fast SLOWLY. This is very important. The body has not been producing digestive enzymes during the fever- remember the body shut down digestion and digestive enzymes are largely proteins. The body used these proteins to make immune chemicals. It also harvests proteins from muscles- which is why fevers ache so much. So the body needs to ‘warm up’ to eating again.

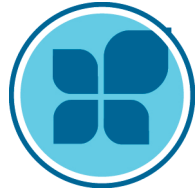
A reliable way is first by eating vegetable broth. The minerals in the vegetable broth will also help to improve rehydration.

Vegetable Broth Recipe— Carrot and Celery: 1/2 cup of each in 2 cups water.  
Simmer until brown, strain, and drink 1/2 cup every 30 minutes.

If fever returns again, discontinue solid foods as before and wait again for the fever to reduce to a level when digestion is activated.

If fever does not return after consuming the two cups, proceed to eat the carrots and celery. If the fever still does not return then continue on to solid foods, something like a piece of meat or fish for proteins to replenish those used during the fever. Continue to eat as directed by hunger

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It was common in regular medicine during the Spanish flu epidemic of 1917-1918 to stuff the patients and feed them strong meat broths during a fever 'to keep up the strength'. This was counterproductive and will increase negative outcomes. Do not make this mistake and overfeed an ill person.

#### 4 **Fluid Intake**

Hydration is important in infections. Use diluted fruit juices, lemonade, etc copiously and regularly.

*Dehydration is the biggest concern with a fever.* Unless pregnant or diabetic, ingest only water, diluted fruit juice, lemonade sweetened with honey, herbal teas, etc. This may be required for several days. Breastfeeding children should continue to breastfeed and should not be fasted. *Fluids were restricted in the Spanish Flu epidemic – do not make this mistake.*

#### 5 **Bio-Thermal Therapy® Treatment**

The Bio-Thermal Therapy® system of Naturopathic Physiotherapy (physical therapy) Treatment is a drugless clinical method of care. The components of the treatment system have been in continuous clinical development based on research and clinical experience from around the world. Our clinical lineage stretches back directly over 200 years. We use modern and state of the art equipment. Basic Hydrotherapy guidelines are below.

##### ***Hydrotherapy for safe fever management, hydration, and immune support:***

These treatments help to encourage radiation of the heat to maintain the fever at a safe and beneficial temperature. They improve the ability of the body to fight the infection and should be considered a valuable tool to fight infections. These methods have centuries of practical clinical use internationally in colds, flus, pneumonia, cholera, smallpox, polio, and other epidemics as a very effective method. **The system below is a modern simplification of the methods used their effectiveness and importance should not be discounted.**

The **Hydrotherapy** methods described below replace the anti-pyretic medications. However, they not only allow the fever to do its job, make patients more comfortable, while preventing complications or risks, they assist the fever by letting it run and 'drawing off the heat'.

**Apply the procedure indicated based upon the temperature. Wring the wet cotton towels from cold tap water – wrung very well to be only damp and not dripping. NOT ice cold. The cool towel is always covered by an insulating layer such as a wool or vellux blanket. This creates a dynamic relationship between the heat of the body and the cold towels. The heat of the body will warm the cool towel, drawing off the heat.**

**Leave the application on until it warms to the temperature of the body then remove. Renew the applications until the patient sleeps or rests well (typically leave on if sleeping until they wake) or until the temperature comes down to around 101F which is ideal for effective and safe fever. Cool compresses to the forehead and back of the neck in high fever can be very soothing and protect from overheating.**

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## **For Temperatures below 98.0°F with symptoms such as chills, headaches, aches or pains:**

### **5x4x20 treatment:**

Wring out 2 towels from hot water (100-120°F). These should be folded in half to create 4 layers and applied to the persons back – from hip to shoulders (the torso). The size of the towels should be appropriate to the size of the person to create 4 layers. Cover with a wool or vellux blanket. Leave these for 5 minutes.

Have another set of hot towels ready at the 5-minute mark. At 5 minutes replace the old towels with the new set. Repeat two more time.

Apply for 4 total rounds of 5 minutes each (20 minutes total) of heat. THEN apply a cool towel about the size of a washcloth to the abdomen – 2 layers well wrung from cool water. Cover.

This will RAISE the temperature typically .5-1°F and typically provides relief of aches, pains, and headaches. It also can be useful in the chill phase of a fever to help the body to reach it's therapeutic temperature early and help to divert an infection to a milder form.

**For Temperature 98.0-98.6°F In the absence of a fever during an infection:** Take a warm bath or shower for 5-10 minutes. Afterwards follow the directions for the Neptune's Girdle found below.

### **For fevers 98.6-99.5°F – Wet Sock Treatment:**

Use a pair of cotton socks (crew/tube/sports socks) and wring them out in cold tap water.

Put on the wet socks. Put on over the cotton socks a pair of thick wool socks. Relax for 20 minutes or until the wet socks are warmed to body temperature, then remove. This will gently bring the fever down about .5 F degree and is useful early on to abort an infectious process particularly of the ears, sinus and throat.

### **For fevers 99.6-101°F – Abdominal/Neptune's Girdle:**

Wring a thin bath or hand towel in cold water. Fold in half lengthwise so it is two layers thick and wrap around your torso, covering from chest to hip bone. Use a thick blanket of vellux or wool to wrap around tightly and compress the cold towel "girdle". Wear this for 10-20 minutes until it is warmed.

### **For fevers 101-104°F – Torso Pack**

Apply a thin cotton linen which has been wrung out in cold water from the armpits to the buttocks, such as a bed sheet or opened pillowcase. This may wrap once or twice around the body. Around the cool, wet sheet you will wrap them in a thick blanket of wool or vellux, making sure to seal the wet sheet from the air. This will help dissipate the fever and cool the core of the body. Leave this wet sheet on the body until warmed, then remove.

### **For Fevers 104°F or higher – Wet sheet wrap or Spanish Mantle**

Using a cotton sheet which has been wrung out in cold water, wrap around the person from shoulders to ankles. This may wrap once or twice around the body. Around the cool, wet sheet you will wrap them in a thick blanket of wool or vellux, making sure to seal the wet sheet from the air. This will help dissipate the fever and cool the core of the body. Leave this wet sheet on the body until dry or significantly warmed.

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## Natural Medicines

Please refer to section 2 for details on the medicines to have on hand in your medicine cabinet and how to use them. Clinically cared for patients will receive prescriptions and protocols for individual cases. Intravenous Fluids and Nutrients that support immune function, including high dose vitamin C, may be administered in the clinic.

Natural and pharmaceutical prescriptions can be legs of the stool to support the fight in an infection. However, the underlying biological response by the body *must be properly supported*. It is the seat that the legs of the stool are supporting. If we do not support the biology of the body as it fights the infection, we are working against the person who is ill. In other words, if a person is ill and we are not following the guidelines above – the person will have to fight harder to get better - and will get well, if they do, in spite of the treatment, not because of it.

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