

Feb 2023

What Worked For 27 People Who Recovered From Vaccine Injury And Long COVID



LO⁸ng
H¹aul
Wiki

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LongHaulWiki.com

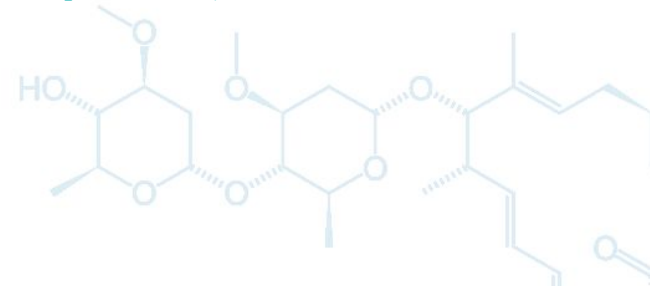
Highlights

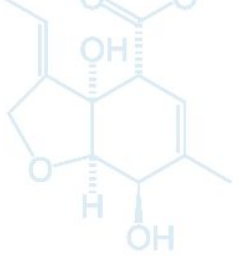


Recovered and mostly recovered patients rate treatments VERY differently than those who are not recovered.

Key treatments among the mostly recovered were:

- **Fasting for more than 2 days**
- **Ivermectin**
- **Black seed oil (from the *nigella sativa* plant)**
- **High ATA HBOT**
- **Statins (?)**
- **Plaquenil / hydroxychloroquine (?)**





Disclaimer: using experimental treatments to fix chronic health problems is not always a good idea! Practically all of the treatments discussed in this presentation have risk.



Data from the mostly recovered may be more reliable



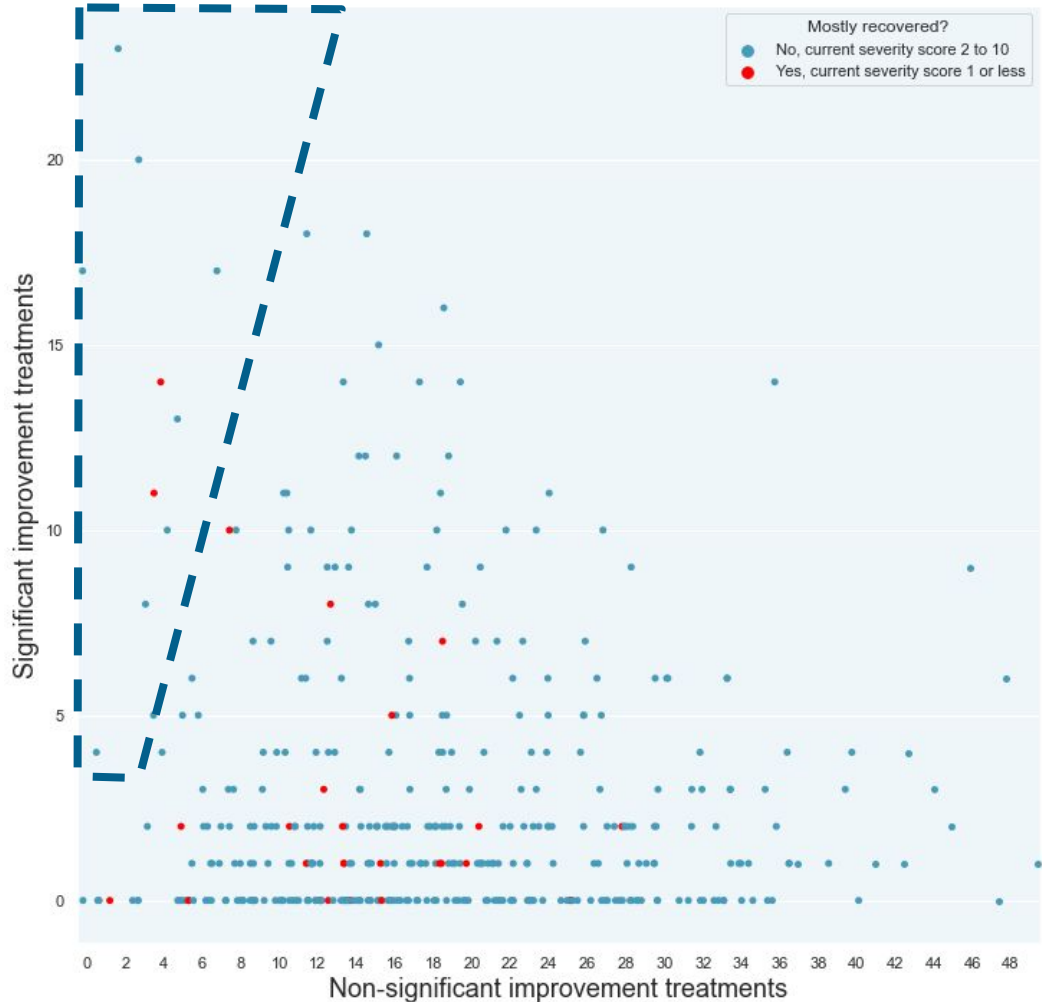
Somebody who has seen little actual improvement from treatment may still rate treatments as leading to “significant improvement”. Their perspective on the world is different than somebody who has gotten their life back. *Both perspectives are valid* but the mostly recovered perspective should be a better indicator of actual medical outcomes.

Everything works?!



The **red** dots on the right show people who are mostly (or fully) recovered.

Those in the **dark blue** area reported that almost every treatment led to ‘significant improvement’. Data from those patients may not necessarily reflect treatment outcomes; these surveyees likely have a different perspective on the world.



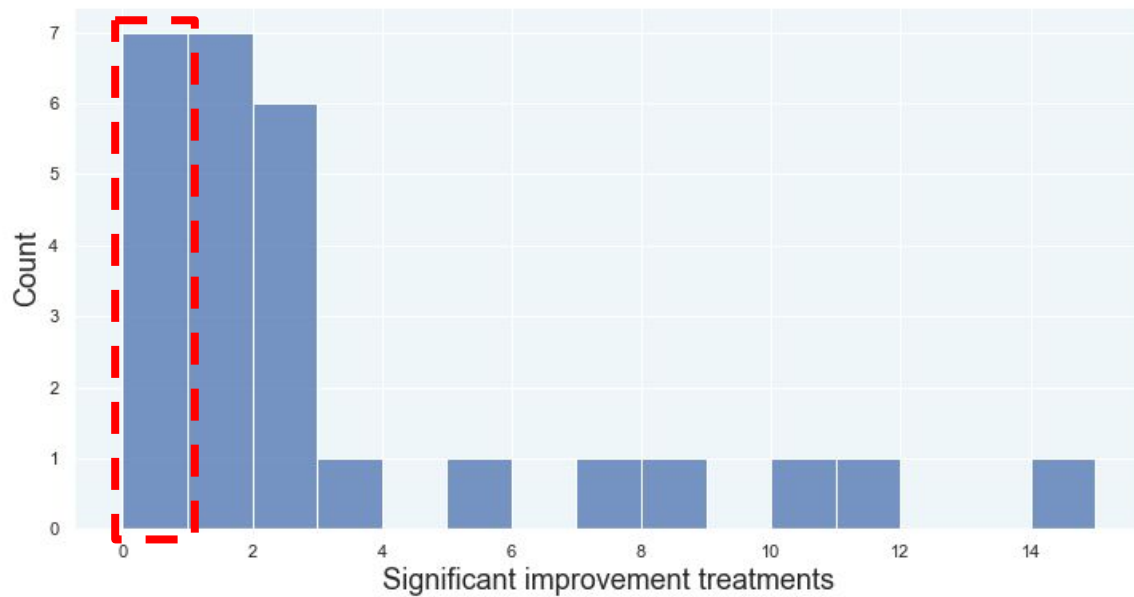
Some people did not identify *any* great treatments



7 surveyees did not report that any of the >100 treatments on the survey resulted in significant improvement.

About half identified 1 or 2 treatments that helped a lot.

Many reported that there wasn't a single magic treatment.





The raw data

(detailed analysis in the section following this)



Raw counts

Treatment or intervention	# of people reporting significant improvement from this treatment
Avoiding exercise	6
Multi-day fasting	4
Ivermectin	4
Aspirin	4
Magnesium	4
Nigella sativa oil	3
Melatonin	3
Quercetin	3
Light exercise	3
24-48 hour fasting	2
Brain retraining	2
Statins	2
Acupuncture	2
Gluten-free diet	2
Probiotics prebiotics	2
Zinc	2
Vitamin C	2

Exactly 1 person reported significant improvement from these treatments:

Wahls protocol	Beta blockers
COVID monoclonals	Other NSAID
Ambien	Claritin
Macrolides	Pepcid
Clopidogrel	Prayer
Hydroxyzine	Pacing strategies
Cymbalta	Multivitamin
HBOT >1.5 ATA	Tylenol
Plaquenil	NAC
Colchicine	Meditation
LDN	Advil
Anti inflammatory diet	B vitamins
CBT	Vitamin D
ALA	

Adjusting for popularity



Popular treatments will show up more often in the previous list because more people tried that treatment.

To adjust for this, the number of successes have been divided by the number of patients who tried the treatment. High numbers are highlighted in **green** and **light green**. (Those are the better treatments.) Those highlighted in **grey** are more likely to underperform or do nothing.

	Count	% of surveyees (with recovery data) who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Multi-day fasting	4	5.3	19
24-48 hour fasting	2	10.7	4.8
Nigella sativa oil	3	16.3	4.7
Ivermectin	4	23.7	4.3
HBOT >1.5 ATA	1	7.9	3.2
Plaquenil	1	6.9	3.7
Macrolides	1	4.8	5.3
Statins	2	14.2	3.6
Ambien	1	3.8	6.7
Hydroxyzine	1	4.8	5.3
LDN	1	15.8	1.6
Claritin	1	28.2	0.9
Pepcid	1	27.7	0.9
Avoiding exercise	6	61.3	2.5
Light exercise	3	64.1	1.2
Pacing strategies	1	38.7	0.7
Aspirin	4	44	2.3
Other NSAID	1	26.7	1
Tylenol	1	41	0.6
Advil	1	47.3	0.5

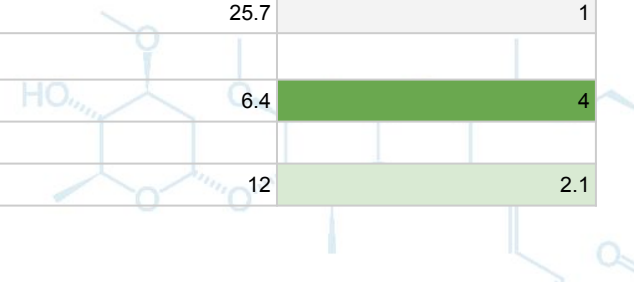
Adjusted for popularity (continued)



The chart on the right shows other treatments, adjusted for popularity.

Data may be unreliable because only 1 or 2 people reported success on those treatments.

	Count	% of surveyees (with recovery data) who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Brain retraining	2	13.5	3.8
Acupuncture	2	30	1.7
CBT	1	20.4	1.2
Prayer	1	30.3	0.8
Meditation	1	46.1	0.6
Wahls protocol	1	2.5	10
Anti inflammatory diet	1	17.3	1.5
Glutenfree diet	2	41	1.2
Probiotics prebiotics	2	49.1	1
Monoclonals	1	3.3	7.7
Clopidogrel	1	5.3	4.8
Beta blockers	1	25.7	1
Cymbalta	1	6.4	4
Colchicine	1	12	2.1



Adjusted for popularity (continued)



Raw data for supplements.

	Count	% of surveyees (with recovery data) who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Melatonin	3	44.8	1.7
Magnesium	4	71.2	1.4
Quercetin	3	53.2	1.4
Zinc	2	63.6	0.8
Vitamin C	2	70.2	0.7
ALA	1	21.1	1.2
Multivitamin	1	40.5	0.6
NAC	1	39.7	0.6
B vitamins	1	69.7	0.4
Vitamin D	1	78.9	0.3

Understanding the adjusted numbers



The numbers in the right-most column **are likely much lower than the treatment's actual response rate.**

1. Only **5.2% (20/386)** were mostly recovered AND rated one or more treatments highly.
2. It is likely that surveyees responded very well to a treatment *without* being mostly recovered. Those people are NOT counted.

The response rate of the best treatments is likely better than 3-5%.

	Count	% of surveyees (with recovery data) who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Brain retraining	2	13.5	3.8
Acupuncture	2	30	1.7
CBT	1	20.4	1.2
Prayer	1	30.3	0.8
Meditation	1	46.1	0.6
Wahls protocol	1	2.5	10
Anti inflammatory diet	1	17.3	1.5
Glutenfree diet	2	41	1.2
Probiotics prebiotics	2	49.1	1
Monoclonals	1	3.3	7.7
Clopidogrel	1	5.3	4.8
Beta blockers	1	25.7	1
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Colchicine	1	12	2.1



The data analyzed

Fasting was a leading outperformer



The more extreme forms of fasting have a higher chance of a bad outcome (see the **Risk score** column in the bottom right). However, they were the only forms of fasting rated highly by the mostly recovered.

‘Multiday fasting’ refers to dry or wet fasting for more than 48 hours.

Only **4 of 21 people (19%)** who tried multiday fasting were able to mostly recover.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Multiday fasting	4	5.3	19
24-48 hour fasting	2	10.7	4.8

Fasting only

	Treatments with more than 0 data points	Score	Risk score	# of data points (out of 463 surveyees)
1	[Multiday fasting]	1.04	-0.33	27
2	[24-48 hour fasting]	0.79	-0.31	52
3	[Intermittent fasting]	0.71	-0.07	161
4	[OMAD]	0.58	-0.23	79
5	[Multiday juice fasting]	0.50	-0.50	10

Antimicrobials also outperformed



- Nigella sativa = black seed oil
- Macrolides = antibiotics like azithromycin, erythromycin, clarithromycin, etc.

Ivermectin and black seed oil stand out, with multiple people reporting success with those treatments.

Both **black seed oil** and **antibiotics** outperform less if their sibling treatments (black seed oil in seed or capsule form, other antibiotics) are considered.

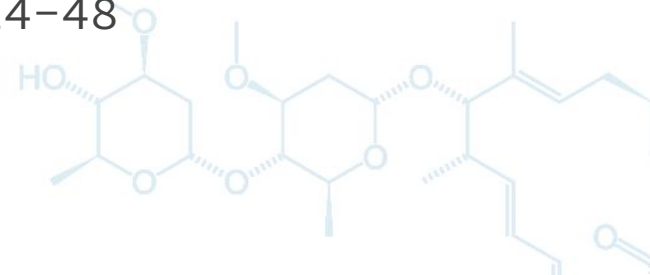
	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Nigella sativa oil	3	16.3	4.7
Ivermectin	4	23.7	4.3
HBOT >1.5			
ATA	1	7.9	3.2
Plaquenil	1	6.9	3.7
Macrolides	1	4.8	5.3

*For an explanation about these drugs' antimicrobial properties, please see [this video on experimental treatment for long haul](#).

Higher doses tended to perform better



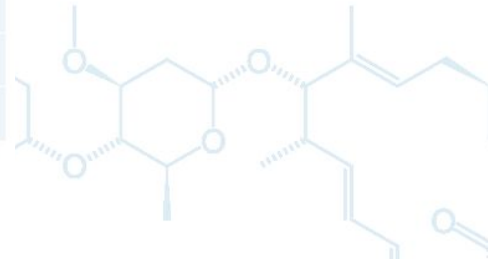
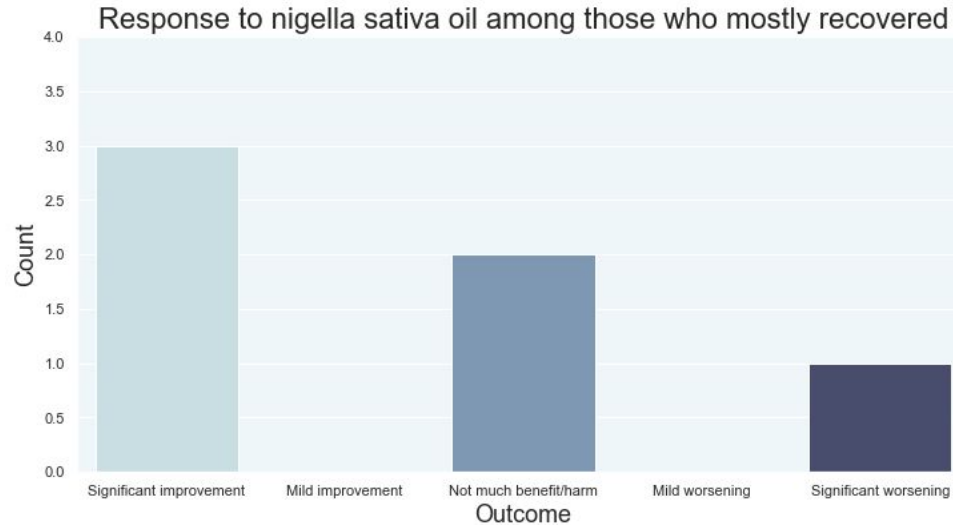
- Black seed oil in *oil form* (e.g. oil poured out of a bottle) was likely used at higher doses than the capsule and seed forms.
- Higher pressure HBOT above 1.5ATA outperformed cheaper, lower pressure HBOT.
- Multi-day fasting is more extreme than fasting for shorter periods of time (24-48 hours, one-meal-a-day, intermittent fasting).



Different paths to recovery



While 3 people rated black seed oil highly, 1 person had the complete opposite experience with it.



Are antimicrobials safe and effective?



All antimicrobials surveyed had some risk of overall worsening (see the **Risk score** column).

Antibiotics were one of the riskiest treatments on the survey- please be careful! They were also one of the worst-rated treatments.

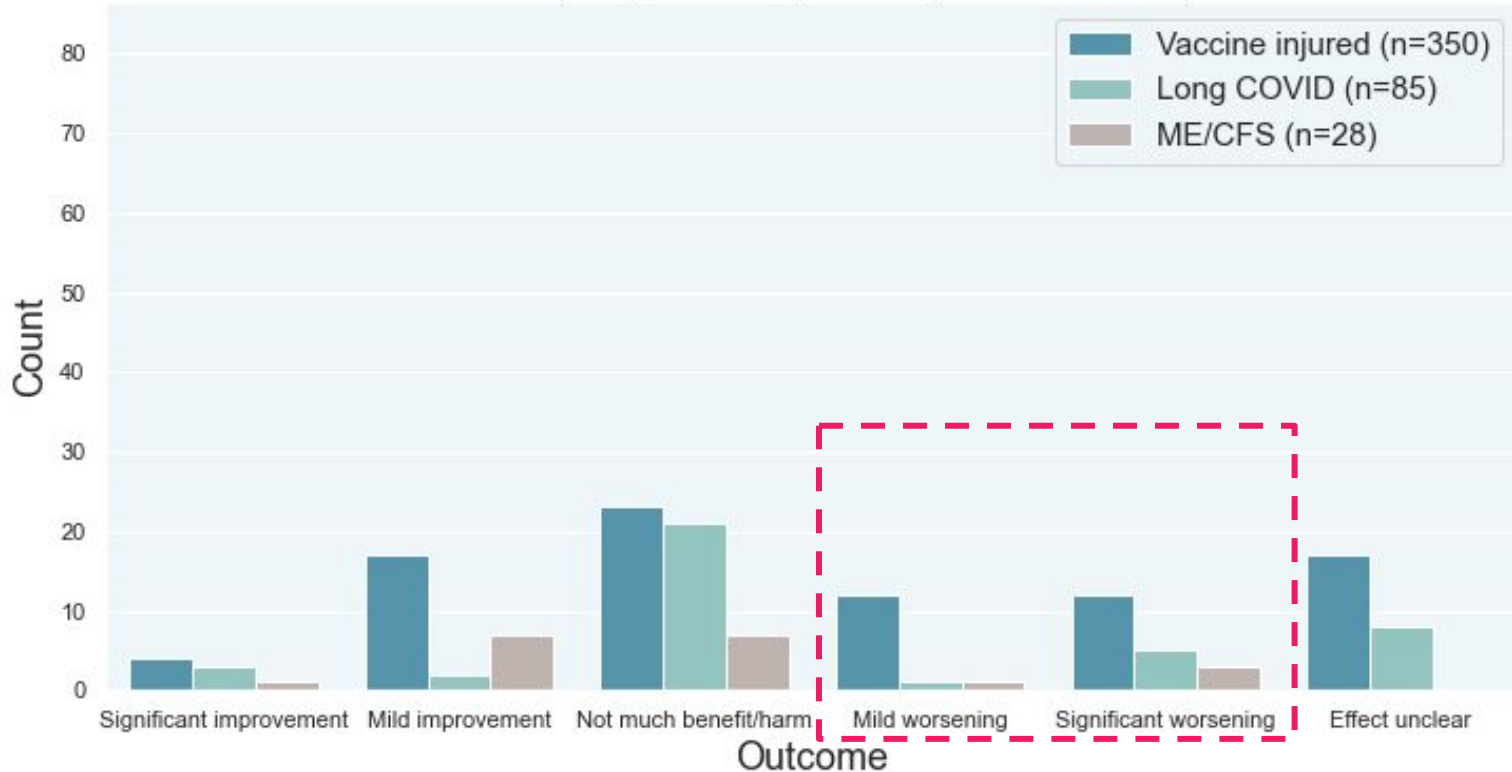
Anti-microbials

Chronic Lyme treatments such as HBOT, methylene blue, IV ozone, and monolaurin are included. Amphotericin, Canesten, Econazole, etc. are anti-fungals.

	Treatments with more than 0 data points	Score	Risk score	# of data points (out of 463 surveyees)
1	[Methylene blue]	1.43	0.00	7
2	[HBOT > 1.5 ATA]	1.35	-0.32	34
3	[Monoclonals]	1.06	-0.12	17
4	[Ivermectin]	0.86	-0.14	111
5	[Plaquenil]	0.83	-0.23	35
6	[Molnupiravir]	0.75	0.00	4
7	[Paxlovid]	0.64	-0.43	14
8	[HBOT <= 1.5 ATA]	0.61	-0.29	41
9	[Nigella sativa oil]	0.58	-0.10	78
10	[Nigella sativa capsules]	0.54	-0.03	61
11	[Aciclovir, Famciclovir, Valtrex, Valcyte]	0.51	-0.10	51
12	[Alinia]	0.50	0.00	2
13	[IV ozone]	0.45	-0.21	33
14	[Amphotericin, Canesten, Econazole, Fluconazol...]	0.41	-0.24	34
15	[Monolaurin]	0.29	-0.14	21
16	[Nigella sativa seed]	0.27	0.00	15
17	[Tetracyclines, Flox antibiotics, Penicillins,...]	-0.17	-0.51	144

Many reported worsening from antibiotics

Antibiotics, e.g. tetracyclines, macrolides, etc.



Statins

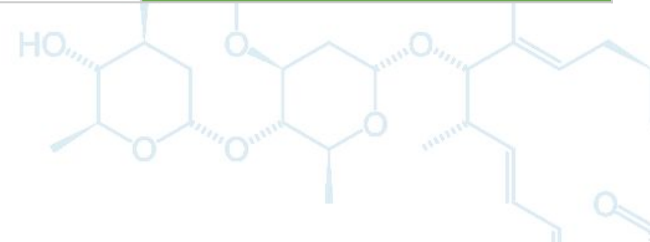


2 people reported that statins helped significantly.

One theory is that statins help your body clear S1 spike protein. However, that theory would not explain why so few people (2/56) recovered on statins.

A naturally-occurring [statin](#) (red yeast rice) exists for patients looking for a ‘natural’ option.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Statins	2	14.2	3.6



Mast Cell Activation Syndrome treatments



Ambien (zolpidem) is a imidazopyridine drug sometimes used for sleep issues or as a mast cell stabilizer.

Benzodiazepines are another popular mast cell stabilizer, but none of the recovered reported that it led to significant improvement.

Hydroxyzine, **Claritin** (loratidine), and **Pepcid** (famotidine) are antihistamines. If grouped with the other antihistamines like Zyrtec/Cetirizine (not shown), antihistamines do not seem to outperform.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Ambien	1	3.8	6.7
Hydroxyzine	1	4.8	5.3
LDN*	1	15.8	1.6
Claritin	1	28.2	0.9
Pepcid	1	27.7	0.9

*LDN = low-dose naltrexone.

Exercise and avoiding exercise/overexertion



Pacing strategies (e.g. spoon theory) all involve limiting exertion so that you do not trigger post-exertional malaise. While pacing was the highest-rated treatment on the survey, they do not seem to help people recover.

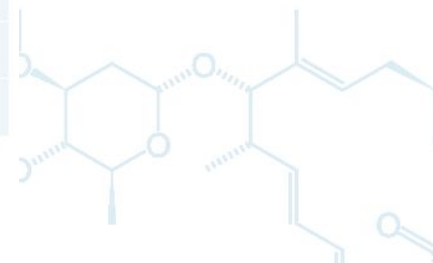
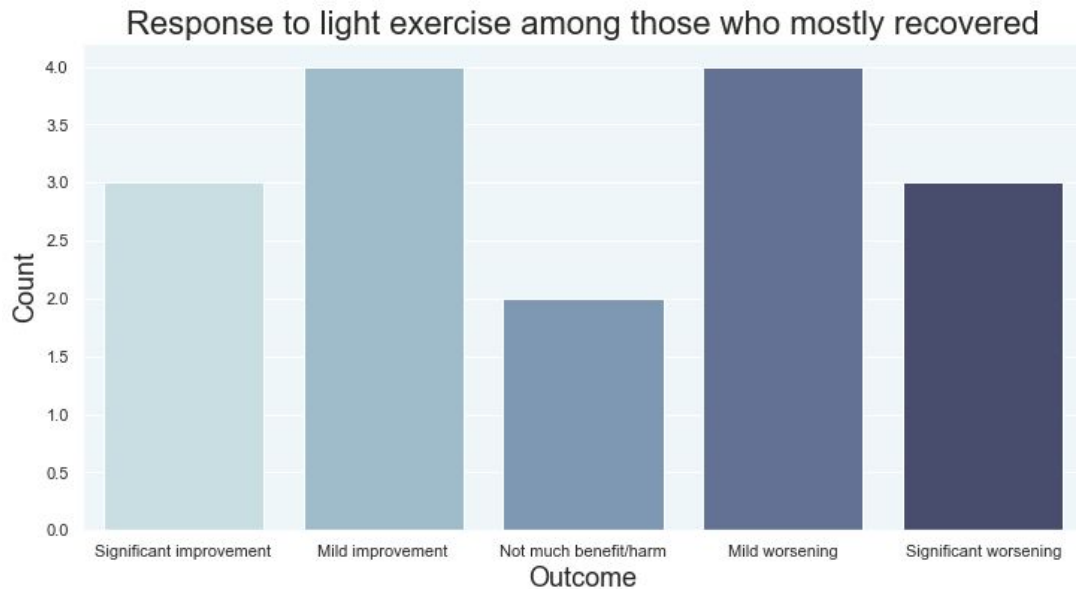
The mostly recovered had **conflicting** opinions about avoiding exercise versus light exercise. Surveyees were more likely to rate exercise highly if they were mostly recovered.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Avoiding exercise	6	61.3	2.5
Light exercise	3	64.1	1.2
Pacing strategies	1	38.7	0.7

Conflicting opinions about light exercise



Experiences with light exercise were all over the map.



Supplements



Melatonin, magnesium, and quercetin were among the higher-performing supplements.

Only **3/176 (1.7%)** of those who tried melatonin reported being mostly recovered *and* reported a significant improvement.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Melatonin	3	44.8	1.7
Magnesium	4	71.2	1.4
Quercetin	3	53.2	1.4
Zinc	2	63.6	0.8
Vitamin C	2	70.2	0.7
ALA	1	21.1	1.2
Multivitamin	1	40.5	0.6
NAC	1	39.7	0.6
B vitamins	1	69.7	0.4
Vitamin D	1	78.9	0.3

Conventional medicine rarely led to significant improvement

Treatment or intervention	# of people reporting significant improvement from this treatment
Avoiding exercise	6
Multi-day fasting	4
Ivermectin	4
Aspirin	4
Magnesium	4
Nigella sativa oil	3
Melatonin	3
Quercetin	3
Light exercise	3
24-48 hour fasting	2
Brain retraining	2
Statins	2
Acupuncture	2
Gluten-free diet	2
Probiotics prebiotics	2
Zinc	2
Vitamin C	2

SSRIs, psych meds, gabapentin, corticosteroids, etc. were not rated highly by those who mostly recovered.

Exactly 1 person reported significant improvement from these treatments:

Wahls protocol	Beta blockers
COVID monoclonals	Other NSAID
Ambien	Claritin
Macrolides	Pepcid
Clopidogrel	Prayer
Hydroxyzine	Pacing strategies
Cymbalta	Multivitamin
HBOT >1.5 ATA	Tylenol
Plaquenil	NAC
Colchicine	Meditation
LDN	Advil
Anti inflammatory diet	B vitamins
CBT	Vitamin D
ALA	



Less useful data

The image features a central blue horizontal band with the text "Less useful data" in white. Above and below this band are images of cherry blossoms. The top image shows a blurred, out-of-focus view of pink and white blossoms against a light blue sky. The bottom image shows a sharp, close-up view of the same blossoms, highlighting their delicate petals and stamens.

Mental treatments + acupuncture



Unfortunately the survey did not ask about the type of brain retraining (e.g. DNRS, ?Wim Hof breathing?, Gupta, etc.). However, it's possible that brain retraining is an effective therapy.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Brain retraining	2	13.5	3.8
Acupuncture	2	30	1.7
CBT	1	20.4	1.2
Prayer	1	30.3	0.8
Meditation	1	46.1	0.6

Tylenol (not a NSAID) and NSAIDs



These are popular drugs. It is not clear if they help or not.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Aspirin	4	44	2.3
Other NSAID	1	26.7	1
Tylenol	1	41	0.6
Advil	1	47.3	0.5

Diet, probiotics / prebiotics



Few people tried less popular diets such as Wahls Protocol, carnivore, vegan, plant-based, keto, AIP, etc. A single success for any of those diets can push its 'adjusted for popularity' score very high.

The low histamine diet was just as popular as gluten-free but did not make an appearance.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Wahls protocol	1	2.5	10
Anti inflammatory diet	1	17.3	1.5
Glutenfree diet	2	41	1.2
Probiotics prebiotics	2	49.1	1



One hit wonders

Only one person rated each treatment highly



Monoclonal antibodies for COVID-19



At one point in time, some people in the support groups believed that monoclonal antibodies for COVID might help because they would bind to spike protein.

One surveyee said that the following treatments helped significantly: ivermectin, COVID-19 monoclonals, LDN, ALA, melatonin, Wahls Protocol diet, and multi-day fasting.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Monoclonal antibodies (for COVID-19)	1	3.3	7.7

Prescription blood thinners and beta blockers



Clopidogrel (Plavix) is a prescription blood thinner and antiplatelet medication.

The surveyee said that most of the treatments he/she tried helped significantly: aspirin, **clopidogrel**, **beta blockers**, statins, Ambien, melatonin, probiotics/prebiotics, vitamin C, magnesium, anti-inflammatory diet, and light exercise.

Beta blockers are sometimes prescribed for POTS but this surveyee did not report having POTS.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Clopidogrel	1	5.3	4.8
Beta blockers	1	25.7	1

Cymbalta (SNRI)

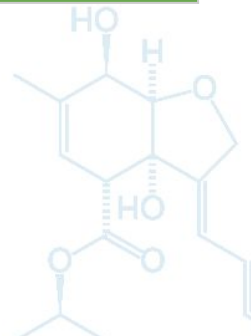


Cymbalta/duloxetine is a SNRI that is used as an antidepressant. It is also used off-label for pain.

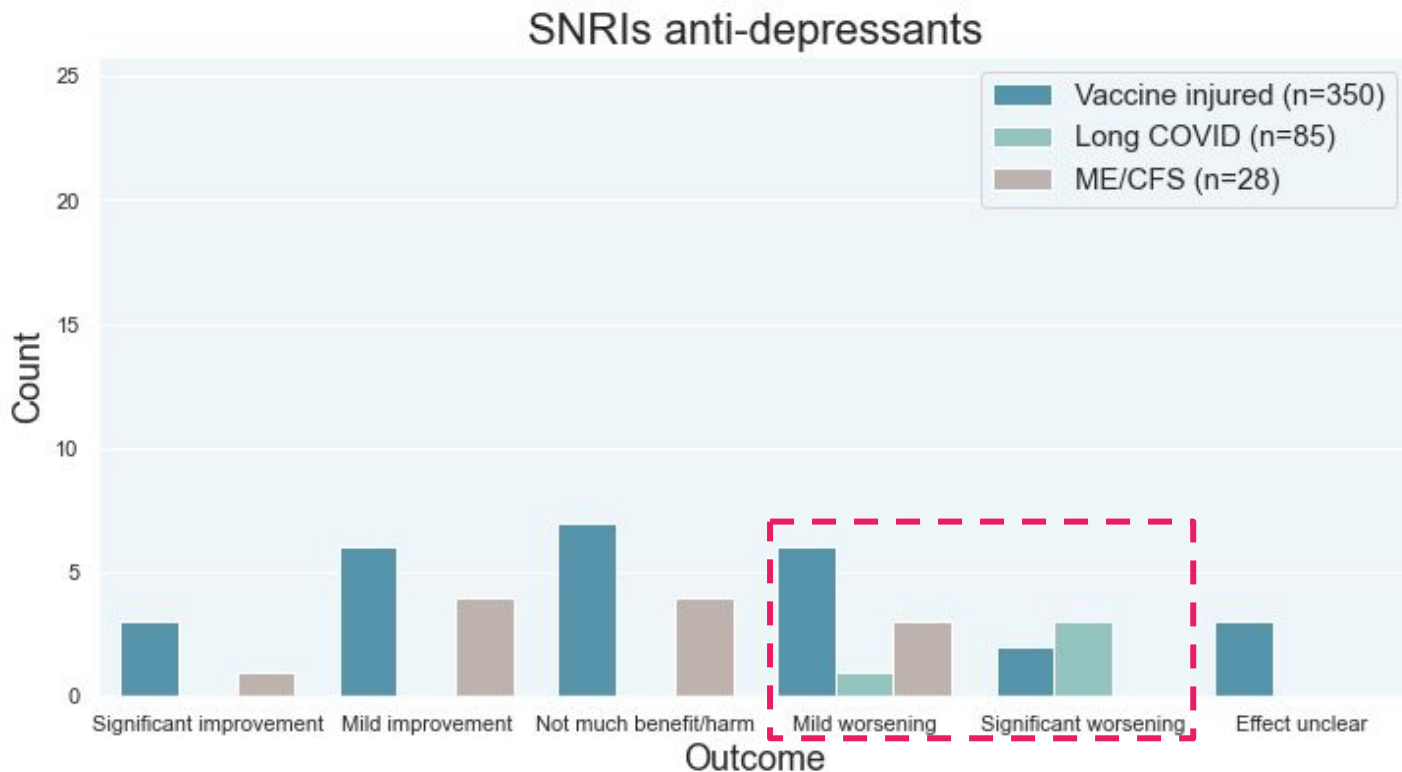
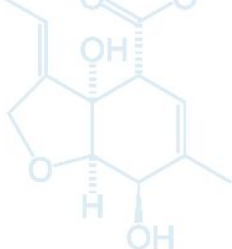
Warning: SNRIs have serious side effects (e.g. suicide, withdrawal) and were rated quite poorly on the Treatment Outcomes survey.

The Cymbalta surveyee tried many treatments but only rated Cymbalta and statins highly.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Cymbalta	1	6.4	4
Statins	2	14.2	3.6



Many reported negative experiences from SNRIs



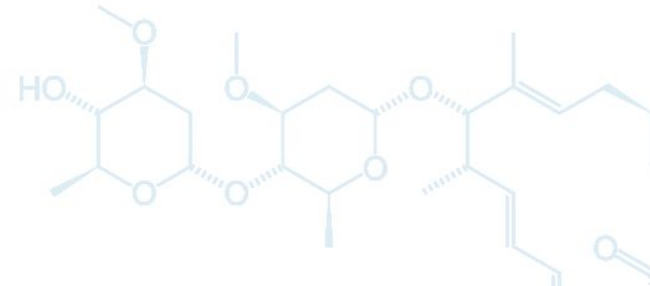
Colchicine



Colchicine is used as an anti-inflammatory agent for conditions such as pericarditis.

The surveyee said that 8 out of 21 treatments tried helped significantly: aspirin, Advil, other NSAIDs, colchicine, black seed oil, magnesium, avoiding exercise, and pacing strategies.

	Count	% who tried this	% (of those who tried this) who mostly recovered AND reported sig. improvement
Colchicine	1	12	2.1





Closing thoughts

The most promising treatments for recovery

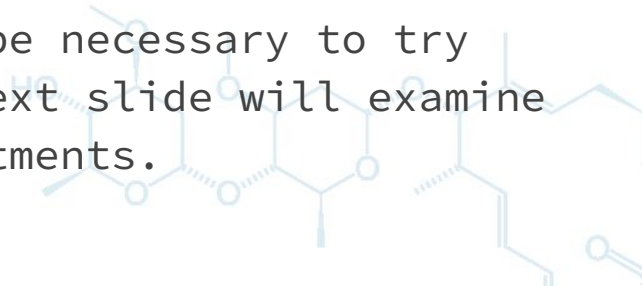


Only a few groups of treatments stood out:

1. Multi-day fasting.
2. Antimicrobials: ivermectin, black seed oil, HBOT, Plaquenil.
3. Statins. (?)

Please be careful as all of the treatments above are double-edged swords. Some people get worse on those treatments.

Because recovery is uncommon, it would likely be necessary to try other drugs (that may or may not work). The next slide will examine a common pattern among the most effective treatments.



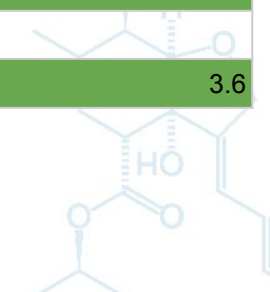
Antimicrobial action was a common theme



Among the 6 best treatments (excluding macrolides), 5 of them have antimicrobial properties.

1. **Nigella sativa**: Used as a food preservative. See Hassanien et al. (DOI:[10.1007/s13197-015-1785-4](https://doi.org/10.1007/s13197-015-1785-4)).
2. **Ivermectin** is an anti-parasitic.
3. Memar et al. (DOI:[10.1016/j.biopha.2018.10.142](https://doi.org/10.1016/j.biopha.2018.10.142)) review the antimicrobial mechanisms of **HBOT**: direct effects, enhancement of the immune system, and synergy with bactericidal agents. Used for Lyme.
4. **HCQ/Plaquenil** is an anti-parasitic.
5. Masadeh et al. (DOI:[10.1186/1476-0711-11-13](https://doi.org/10.1186/1476-0711-11-13)) measure the bactericidal effects of **statins**.

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HBOT >1.5 ATA	1	7.9	3.2
Plaquenil	1	6.9	3.7
Macrolides	1	4.8	5.3
Statins	2	14.2	3.6



Antimicrobial ideas



Try these first: ivermectin, hydroxychloroquine, HBOT, black seed oil.

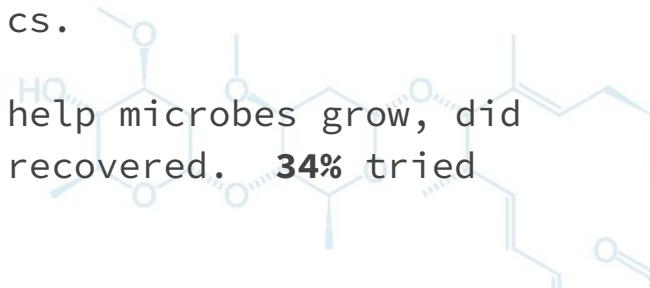
The least risky natural antimicrobials: oil of oregano, monolaurin, lavender supplements, cat's claw, lion's mane.

Other natural antimicrobials (riskier): Essential oils, artemisinin, chronic Lyme treatments.

Riskier or less understood antimicrobials: methylene blue, ?monoclonals for COVID-19?, antifungals such as fluconazole, Alinia/nitazoxanide, antivirals such as acyclovir and Valtrex.

On average, these cause more harm than good: antibiotics.

Corticosteroids, which suppress the immune system and help microbes grow, did not show significant improvement in *any* of the mostly recovered. **34%** tried them.





The path to recovery



I am **hopeful** that more people will recover. We continue to learn more about what the top treatments are. On top of that, the data suggests that most/all antimicrobial drugs have the potential to push the patient towards recovery (or away from it). That gives us a **promising toolbox** for the many cases that don't respond to treatment.