

Introducing

I-RECOVERSM

POST-VACCINE TREATMENT

**An Approach to the Management
of Vaccine-Injured Patients**

FLCCC
ALLIANCE

A collaborative, comprehensive effort



Based on the expertise of world-renowned doctors
and the direct testimonials of dozens of patients

Why is this needed?

Based on Pfizer data, at least 1 to 1.5% of vaccinated patients develop serious adverse events following vaccination

In the United States alone:

As of May 16, 2022

815,385 adverse events
over 5,300 cases of myocarditis
151,796 serious adverse events
14,613 deaths

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A humanitarian disaster

Patients exhibit extensive symptom burden and suffering

They have been shunned and denied access to care

Limited data to inform a treatment approach

Treatment must be individualized according to symptoms
and disease syndromes

Early treatment is essential

Start on primary treatment protocol, individualized to patient

Response to primary treatment protocol should dictate addition or subtraction of additional therapeutics

Second line therapies should start if poor response or in patients with severe incapacitating disease

Patients with post-vaccine syndrome must not receive further COVID-19 vaccines of any type

Baseline Testing

Patients are often subjected to an extensive battery of unnecessary diagnostic tests

Many of these tests confuse the situation and lead to inappropriate interventions

We recommend a number of simple, basic screening tests that should be repeated, as clinically indicated, every 4 to 6 months

Remember the dictum: Only do a test if the result will change your treatment plan

Note that tests are often "normal" despite debilitating symptoms; more accurate biomarkers have yet to be identified

First line therapies

- Intermittent daily fasting
- Ivermectin
- Low dose naltrexone
- Melatonin
- Aspirin
- Vitamin C (oral)
- Vitamin D, K2
- Quercetin
- Nigella Sativa
- Pro-/pre-biotics
- Magnesium
- Omega-3 fatty acids

Second and third line therapies

- Hydroxychloroquine
- IV Vitamin C
- Fluvoxamine
- "Mitochondrial energy optimizer"
- N-acetyl cysteine (NAC)
- Sulforaphane (broccoli extract)
- Low dose corticosteroid
- Behavioral modification, mindfulness therapy and psychological support
- Tai Chi
- Hyperbaric oxygen therapy

Other potential treatments

(requiring further evaluation)

- Plasmapheresis
- Pentoxifylline
- Maraviroc
- Valproic acid
- Sildenafil
- VEDICINALS® 9
- C60 or C60 fullerenes
- Cold Hydrotherapy