

HISTORY OF THE PATIENT

- The patient is 65 y.o. Caucasian female.
- Professor in Pharmacology, currently is working very part time as a scientist in Cosmetic Fields.
- Co-MORBIDITIES: Hypertension mild;
- History of Stomach ulcer; Osteoarthritis;
- Major Depressive disorder in remission;
- No history of surgery or hospitalization.
- She started to feel unwell soon after the 2nd
- VACCINATION in February 2021.
- SYMPTOMS: migraine type of HA, dyspnea(SOB), fatigue, dysautonomia, increased depressive symptoms, anxiety.
- In April 2022 she was diagnosed with COVID-19: high fever, HA, weakness.

TESTS

- Blood test: increased LDL; High antibody IgG;
- MRI of the brain: no abnormalities;
- ECG normal (multiple tests);
- ECO cardio: no abnormalities;
- Endoscopy/5 biopsies: no abnormalities;
- Pulmonary function test: normal

Treatments

- NEUROLOGIST: Botox for Migraine HA every 3 mo, Modafinil 100mg po QAM;
- PSYCHIATRIST: Cymbalta 60 mg po QD, Zolpidem 10 mg PRN at bed time; Clonazepam 0,5 mg PRN for anxiety,
- supportive psychotherapy.
- CARDIOLOGIST: Toprol ER 25 mg QAM, Losartan 25 mg QAM, Atorvastatin 10 mg QHS; Aspirin 81 mg;
- GI doctor: Famotidine 20 mg for 3 weeks;
- PMD: PAXLOVID - 5 days course after reinfection in 2022.
- HYPERBARIC OXYGENATION -5 sessions for 90min.
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- SUPPLEMENTS: NAC 600mg, Resveratrol 1200,
- Vit.D-3 -25mcg, Zinc, Serrazime 66.7/40.000,
- Magnesium 420mg, TRU NIAGEN, Prebiotics,
- Probiotics (TUNDREX), Gut Alive (for digestion),
- Ashwagandha



CURRENT STATUS OF THE PATIENT

- The patient stated that she lost at least 80 % of her functional capacity from the beginning of illness. Currently, she is feeling better in overall, but still feeling disabled in a way –
- 60% of loss functional capacity.