

Male, Age 42

Location: Northern Ireland

Occupation: Accountant

## "Long Covid" Recovery

### Initial infection

Day 1: Burning pain on the tip of middle finger (left hand). A loss of taste & smell

Day 2: Vertigo, headache, slight dry cough, slight fever, shooting arm pain (bilaterally), bloating, sharp abdominal pain and a foot rash.

## Onset of Acupuncture: 4 months post Covid-19

M/C: Insomnia & Tachicardia

Visual Obs:

Pale, Gaunt, appears clammy, darkness under eyes, red flat rash on the upper & bloated abdomen.

Swollen gland left side on SCM (throat/neck), leg/arm tremors during treatment - even though patient was awake - he didn't realise he was moving so much.

Pain: Describes nerve pain in both arms - radiating from GB21 area (PC/SJ channels). Pain is reactive to heat (sunshine) but feels generally cold. Throat/neck pain (swollen gland).

Previous Medical History: Lower back pain comes and goes, Knee operation 2017. IBS since 2010. Generally very well.

3 weeks ago prior to first acupuncture appointment abnormal blood tests - Kidneys, Thyroid (Hyper). Arrhythmia.

Much later 5 months post infection an MRI confirmed - Mild brain inflammation.

## Onset of Acupuncture: 4 months post Covid-19

M/C: Insomnia & Tachicardia

Family: Sister has ME & Dad CAD (Heart)

Meds: Gabapentin (nerve pain), Multi Vitamin, Isotonic drinks, GP removed sleeping tablet.

Sleep: In a 24 hour period. Patient gets 2-4 hours sleep. Patient can fall asleep but will not stay asleep.

He naps at any opportunity day or night (30 mins per nap roughly). Sweats at night.

Energy: Extreme fatigue, low energy. Brain fog.

Diet: Patient following a low histamine diet.

Digestion: Loose stools, bloated abdomen. Significant weight loss. No appetite.

Urine: Cloudy

Mood: Depression & Anxiety



Tongue:

Blood stasis, Qi Stagnation with heat, Heart & Spleen pathology, Spleen Qi Sinking, Damp cold.

A little yellow in the centre.

The tip of the tongue looks like an inverted heart. Possibly body fluid (essence) deficiency or blood deficiency or heat in the heart.

Pulse: Deep & Weak - It was very hard to find the pulse. Surprising as I was expecting a more fast pulse initially.



Diagnosis: Zheng Qi deficiency. Damp cold invading Spleen/stomach, Damp Cold Bi Syndrome affecting arms (PC/TH), fluid deficiency & stagnation, Qi stagnation with heat and Phlegm, Qi & Blood deficiency & stagnation, Yin Xu. Underlying Heart, Spleen, & Kidney Xu.

This could also be classed as a Shao yang pattern (with massive amounts of stagnation, represents the lingering pathogen - half yang/yin stage) and some might even see as affecting the Shao Yin or Jue Yin level (as it gone so deep we are even seeing brain inflammation and tremors and lots of cold and hot symptoms).

Treatment Aim: Clear pathogen (as a priority) - first half of treatment sessions were spent strongly clearing by bleeding & Gua Sha (upper neck and back) & supporting Zheng Qi. While the remaining sessions focused primarily on nourishing & tonifying with certain points still being bled in every session (LU11 & SP1 Jing Well/Ghost points).

Points: EV (Confluent) Dispersing PC6/SP4 LU7/KD6 SJ5/GB41 (ShaoYang), Bleeding Jing Well, Ear Apex, LI11, ST8, Gua Sha to open the Wei level, St25 (electro - calms the cytokine storm)

Treatment plan: Acupuncture twice a week for 12 sessions. Reassess after 6. Referred to the Jade Screen Project. Herbs started 2nd week into acupuncture treatments. Excellent patient compliance. Wet diet. Online Qi Gong/Tai Chi

Patient's symptoms fluctuated quite a lot during the first 5 sessions. Sleep improved after 5 sessions. Sleep would improve steadily. Heart rate returned to normal after 6 sessions. Digestion improved after 7 sessions. Patient slowly gained weight. Brain fog reduced. The rash finally disappeared and didn't come back. Patient very happy with progress. Still attends clinic every 2 weeks.

