

The Root-cause Approach to PASC/Long COVID



Kristi Morlan-Hughes, ND, IFMCP, FMCHC

Disclosure

- Functional Naturopathic Medicine at DocereVita
- Medical Educator and Content Curator Calroy Health Sciences
- Science Advisory Board Member and Medical Education at NutriDyn, NutriDyn EU, Ananda Professionals, & KBMO Diagnostics
- Advisory Board and Faculty Functional Medicine Coaching Academy
- Steering Committee and Presenter The Nutrition Collective

Expert Clinical Working Group



Kristine Burke, MD



Patrick Hanaway, MD



**Laurie Hofmann,
MPH**



Kara Parker, MD



Michael Stone, MD, MS



Kristi Hughes, ND



Monique Class, ARNP



Tom Guilliams, PhD

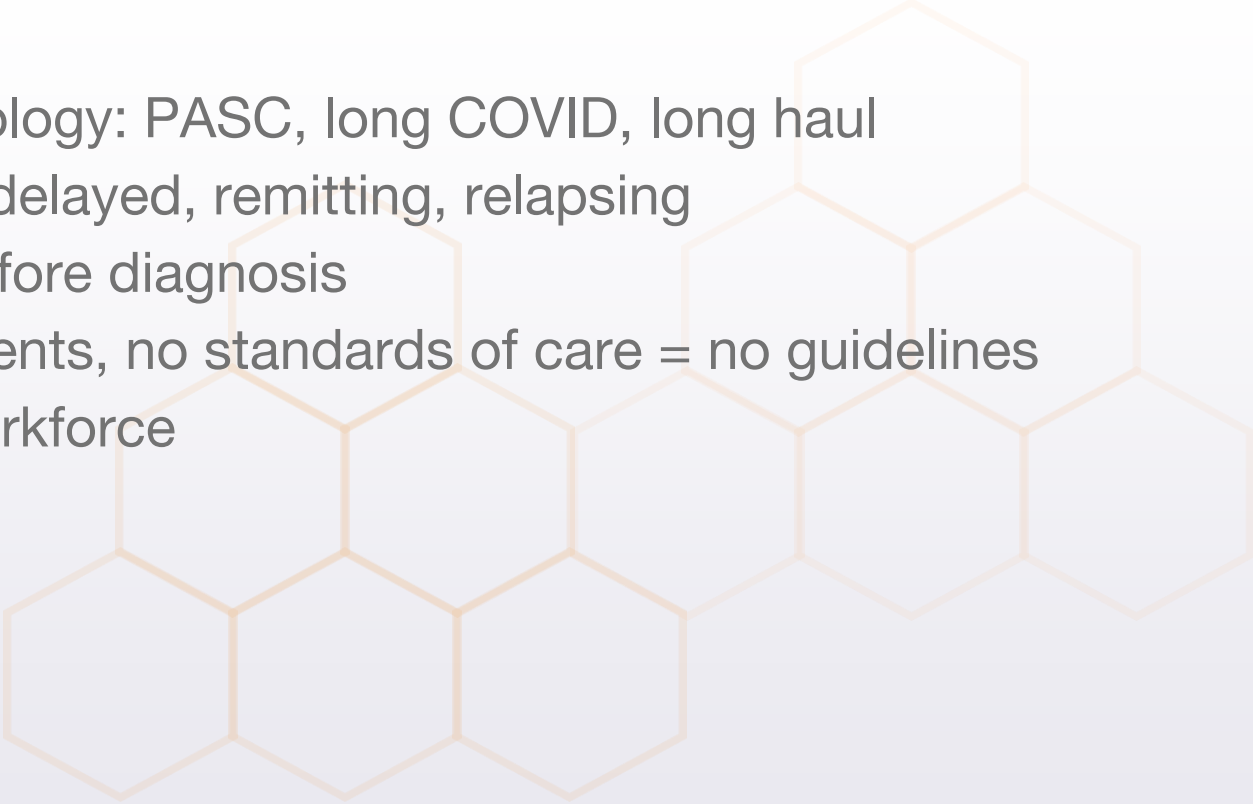


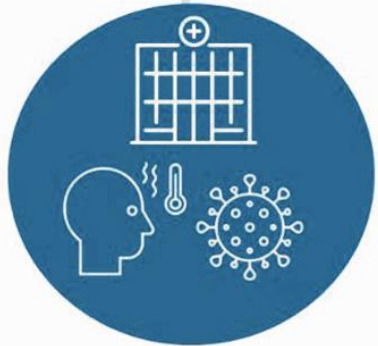
Bob Sheeler, MD



Heather Tick, MD

Current Landscape

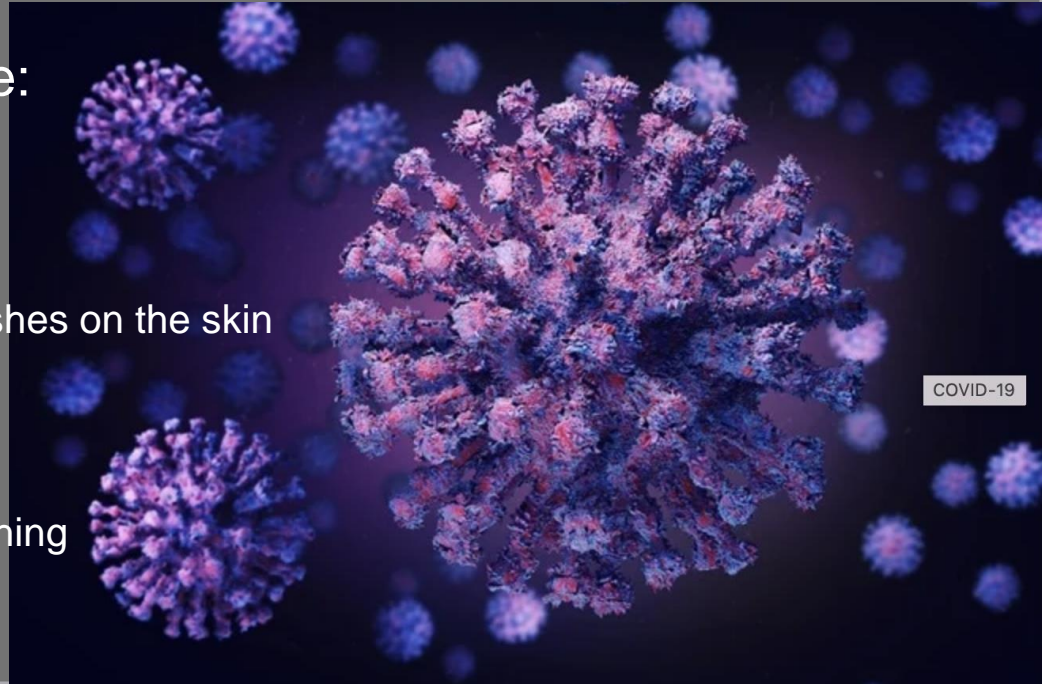
- Confusing terminology: PASC, long COVID, long haul
 - 200+ symptoms: delayed, remitting, relapsing
 - Long lag times before diagnosis
 - No proven treatments, no standards of care = no guidelines and no trained workforce
- 



ACUTE INFECTION

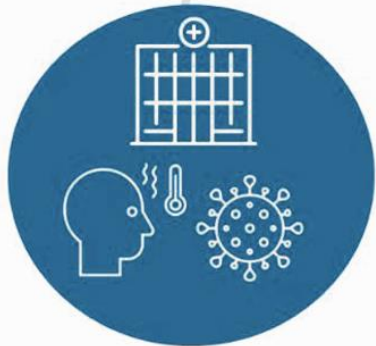
Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)

- According to WHO, the 3 main symptoms of COVID-19 are:
 - Fever - a high temperature $>37.8^{\circ}\text{C}/100^{\circ}\text{F}$
 - Tiredness
 - Dry cough
- Less common symptoms include:
 - Headache
 - Diarrhea
 - Loss of taste or smell
 - Sore throat
 - Discoloration of toes or fingers, or rashes on the skin
 - Aches and pains
 - Conjunctivitis
- Serious symptoms are:
 - Shortness of breath or difficulty breathing
 - Chest pain or pressure
 - Loss of movement or speech



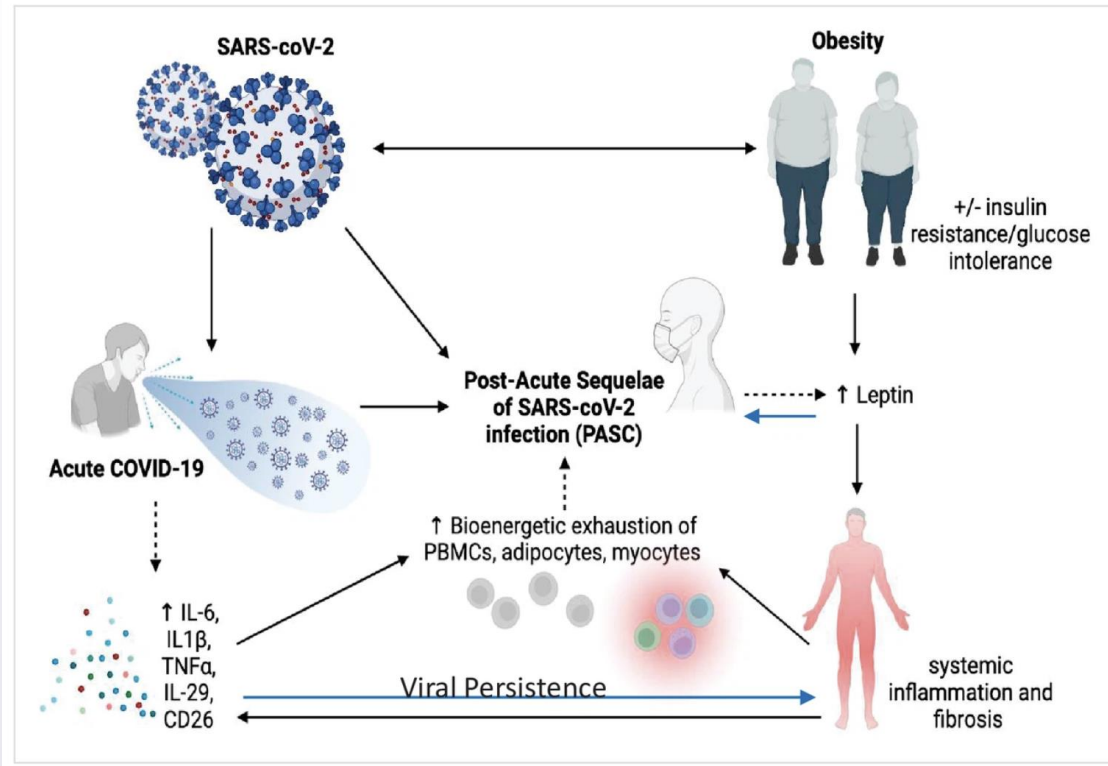


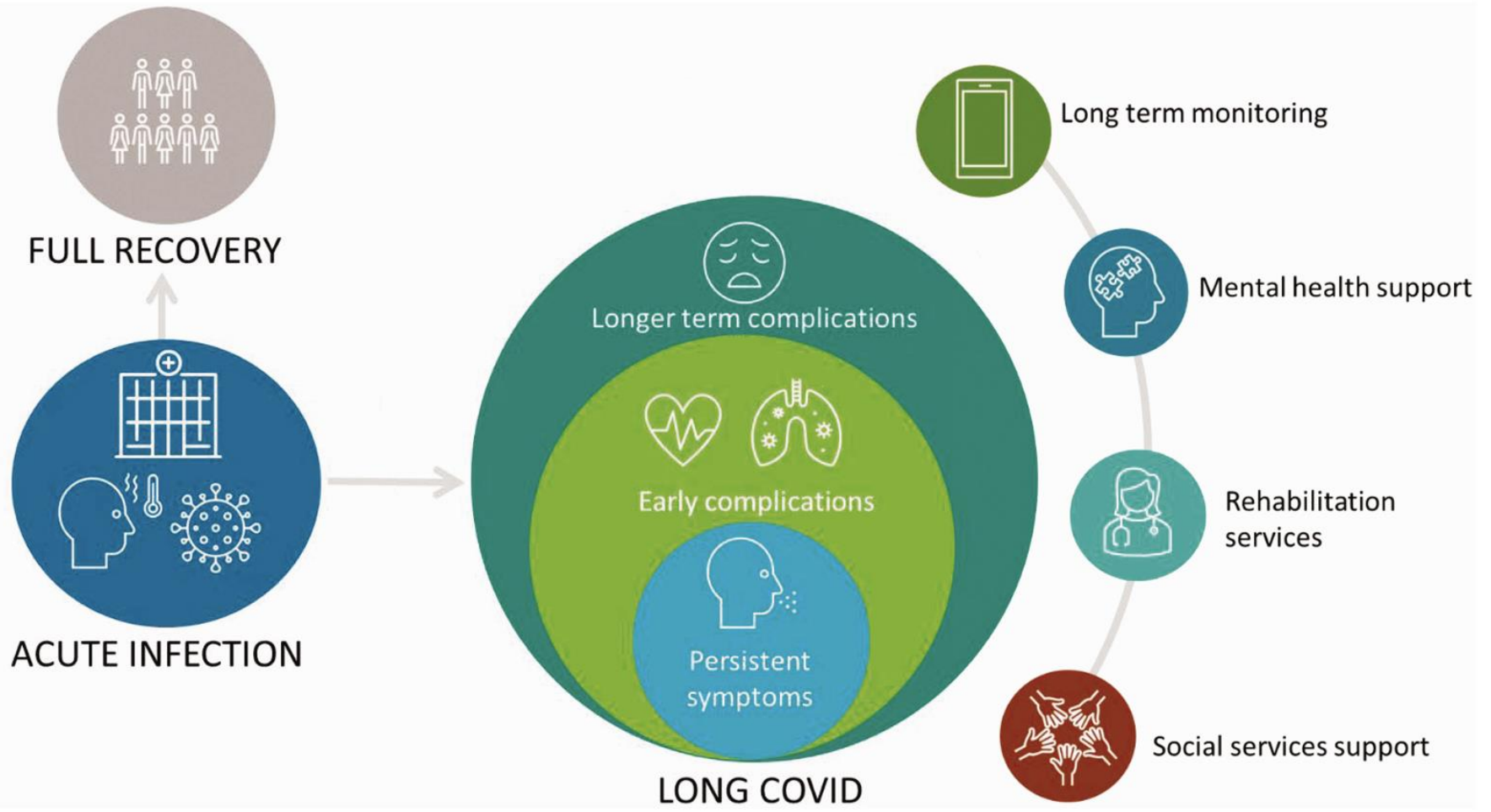
FULL RECOVERY



ACUTE INFECTION

Metabolic Issues Impacting Acute COVID Infection & PASC



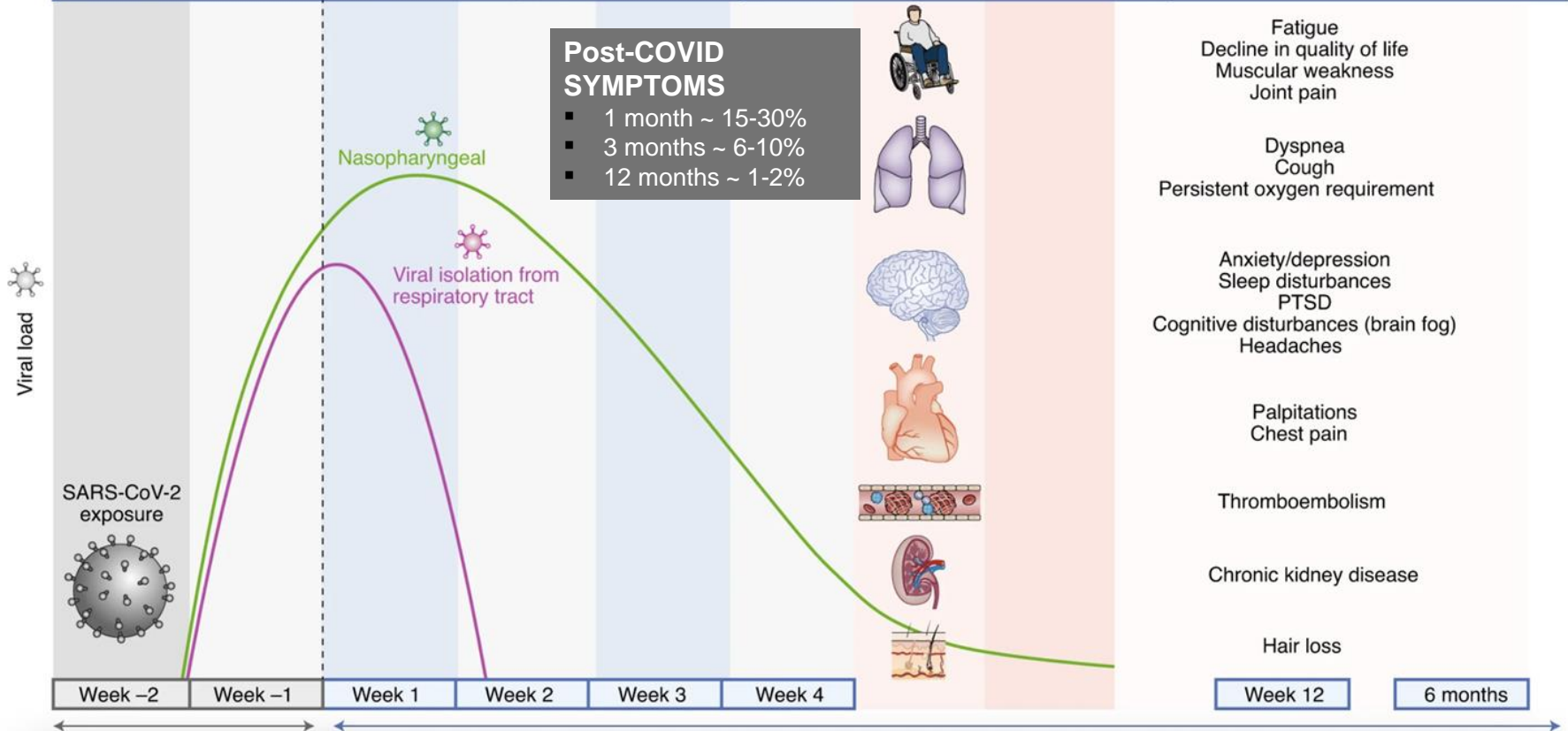


Aiyegbusi OL, Hughes SE, Turner G, et al. Symptoms, complications and management of long COVID: a review. *Journal of the Royal Society of Medicine*. 2021;114(9):428-442. doi:[10.1177/014107682111032850](https://doi.org/10.1177/014107682111032850)

Acute COVID-19	Post-acute COVID-19
----------------	---------------------

Subacute/ongoing COVID-19	Chronic/post-COVID-19
---------------------------	-----------------------

Detection unlikely	PCR positive	PCR negative
--------------------	--------------	--------------



Immune Foundations

Acute COVID Infection Care

Post-acute Sequelae COVID (PASC)

Long-haul COVID

LONG COVID PREVALENCE ¹

- Greater than 80% of Americans have had acute COVID
- Most Long COVID cases occur in people with mild acute illness
- 1/3 of people with Long COVID have **no identified pre-existing conditions**
- Reinfection contributes additional risk of Long COVID

- 15-30% people have persistent symptoms @ 1 month
- 6-10% people have persistent symptoms @ 3 months
- 1-2% people have persistent symptoms @ 12 months

Long COVID Incidence Estimate

- ~ 30 million people with Post-COVID @ 1 month
- ~ 10 million people with Post-COVID @ 3 months
- ~ 2 -4 million people with Post-COVID @ 12 months

Medscape Physician Survey (2023)

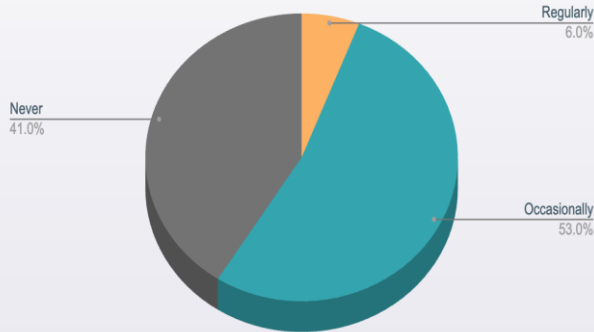
Key Findings

Long COVID does not appear to be self-resolving, in the sense of spontaneous recovery or recovery in the absence of a cure or a treatment that has been validated. It further raises the importance of finding treatment because this is not going to go away.

Ziyad Al-Aly

Clinical Epidemiologist
Washington University, St Louis

Reported LC Treatment Success that Benefited Patients, n=432



STAT Health Tech, 9/20/2023 https://www.statnews.com/2023/09/20/do-long-covid-odds-increase-with-second-infection/?utm_campaign=breaking_news&utm_medium=email&_hsmi=275130536&_hsenc=p2ANqtz-_Fz5sQzp45OzS1UyaREko82SfD8HXId2tVTahbKLPYeT_lzbsU0EZCjEYEIU-qBJptPUPhyCM_6OqMlbAfcKQeCUgpWQ&utm_content=275130536&utm_source=hs_email



Patient Case

KH

Dr. Kara Parker, MD
Faculty, Department of Family Medicine
Director of Group Medical Visits
Hennepin Healthcare Whittier Clinic

YOUR 2020 PANDEMIC STORY

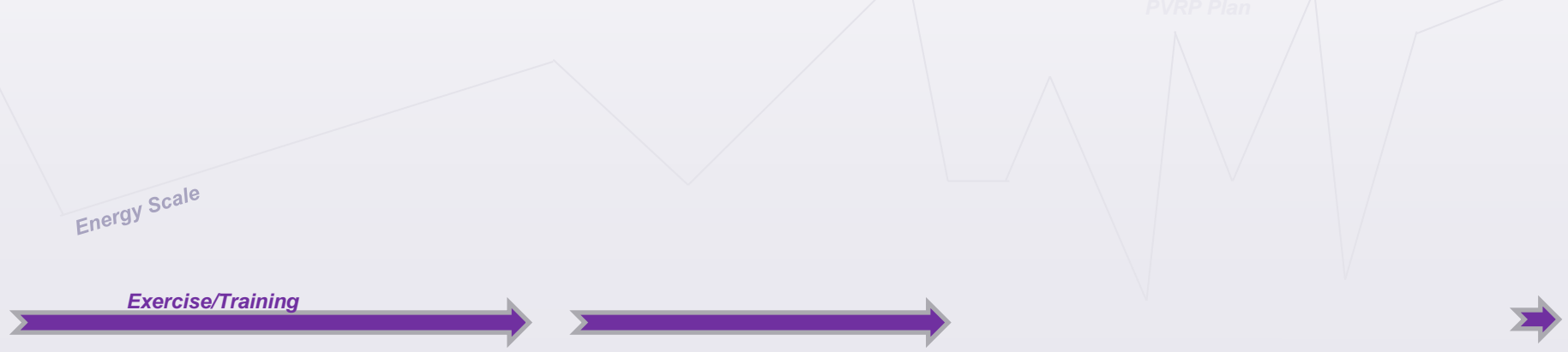
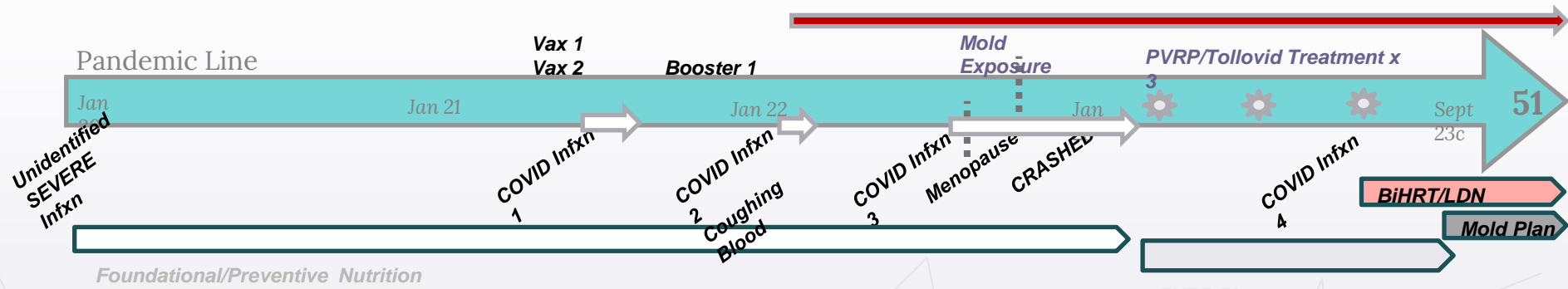
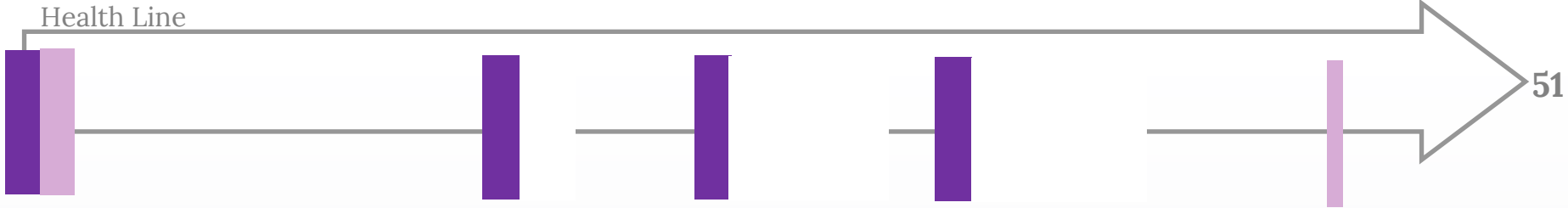
Life Line with Significant Events

HEALTH Timeline

- Epigenetics/Genetics/Genomics
- Family History & Tribal Lore/Ancestral Work
- Childhood Growth & Development
- Adverse Childhood Experiences
- Socio-economic Factors
- Nourishment/Foundational Nutrition
- Microbiome
- Allergies/Sensitivities
- Inflammation
- Infection
- Auto-immun-ing
- Toxicity/BioToxins/Mold
- Metabolic Imbalances
- Stress/Trauma

TRIGGERS?
Reactivation?
Intensifications?
Exacerbations?

2020 ~ Pandemic Health Experience



LONG COVID IN THE POST-PANDEMIC ERA

ASSESSING PROGRESSION AND
PERSONALIZING TREATMENT USING
A ROOT-CAUSE APPROACH

ACE2-Driven Tissue Damage AND/OR Inflammation/ Immune Dysregulation

ACE2 TISSUE DAMAGE

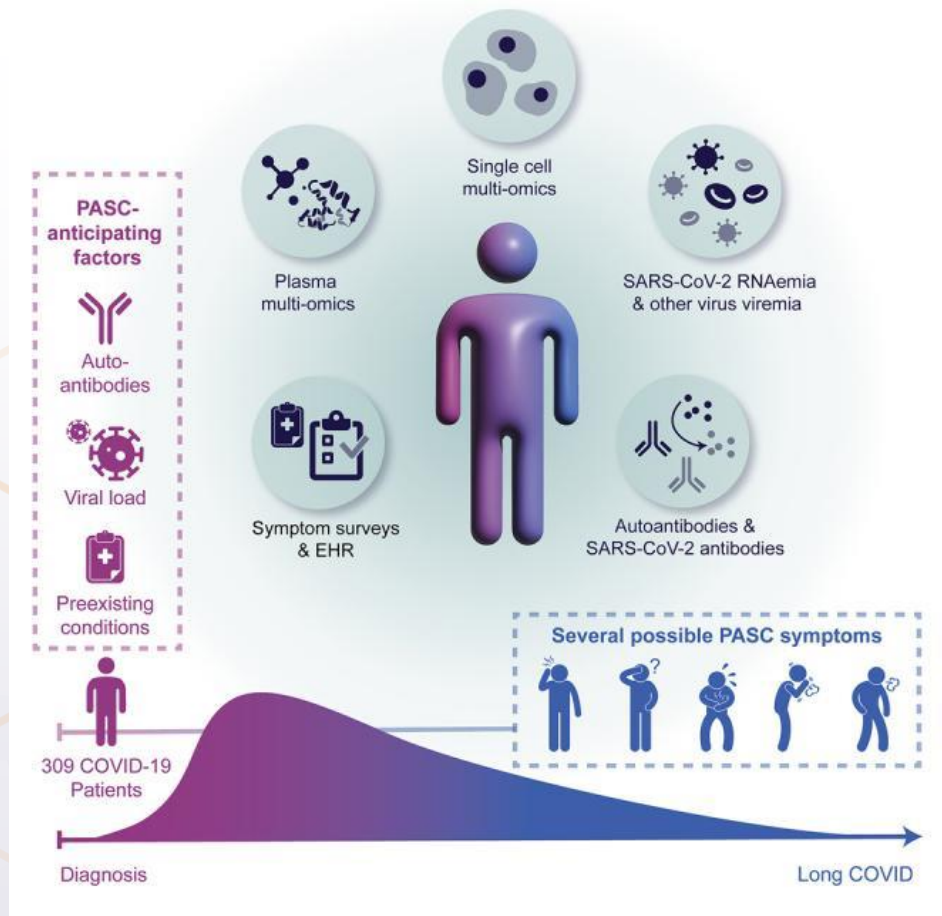
- Tissue Damage
 - Cardiac
 - Pulmonary
 - Endothelitis
 - Brain/Neural tissue
 - GI Tract
- Secondary dysfunction
 - Clotting/ Coagulation
 - Vagus nerve/ Brainstem
 - Cognitive & Mood Disorders

IMMUNE DYSREGULATION

- Infection
 - Persistent SARS-CoV-2 virus/ fragments
 - EBV Reactivation
 - Reactivation of Neurotrophic Pathogens
- Chronic Inflammation
 - T-cell Dysregulation
 - MicroGlial Activation
 - Mast Cell Activation
 - Gut/ Microbiome Dysbiosis
 - Mitochondrial Dysfunction

Multiple early factors anticipate post-acute COVID-19 sequelae

Su, Y, Yuan, D, et. al. (2022). Multiple early factors anticipate post-acute COVID-19 sequelae. Cell, 185(5).
<https://doi.org/10.1016/j.cell.2022.01.014>



YOUR 2020 PANDEMIC STORY

Life Line with Significant Events

HEALTH Timeline

- Epigenetics/Genetics/Genomics
- Family History & Tribal Lore/Ancestral Work
- Childhood Growth & Development
- Adverse Childhood Experiences
- Socio-economic Factors
- Nourishment/Foundational Nutrition
- Microbiome
- Allergies/Sensitivities
- Inflammation
- Infection
- Auto-immun-ing
- Toxicity/BioToxins/Mold
- Metabolic Imbalances
- Stress/Trauma

TRIGGERS?
Reactivation?
Intensifications?
Exacerbations?

2020 ~ Pandemic Health Experience

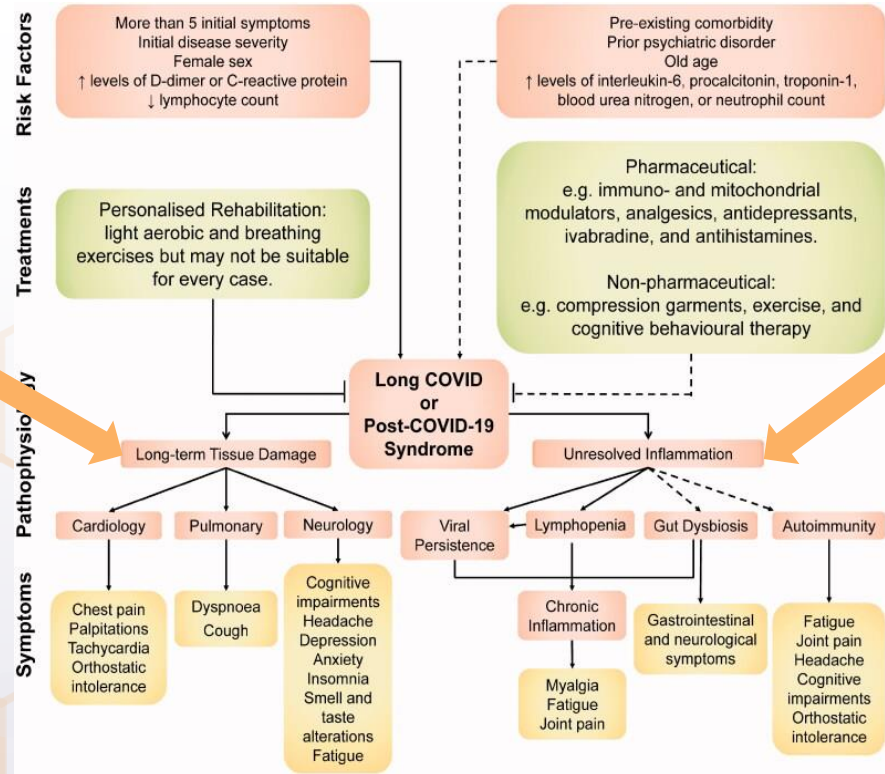
Antecedents for Long-haul COVID/PASC

- **Epigenetics/Genetics/Genomics**
- Family History & Tribal Lore/Ancestral Work
- Childhood Growth & Development
- Adverse Childhood Experiences
- Socio-economic Factors
- Nourishment/Foundational Nutrition
- **Microbiome**
- Medical History Containing
 - **Allergies/Sensitivities**
 - Inflammation
 - Auto-immun-ing
 - **Toxicity**
 - **BioToxins/Mold**
 - Metabolic Imbalances
 - Stress/Trauma
- Infection
 - **Tick-borne Disease/Lyme Dz**
 - **EBV**
 - **CMV**
 - Bartonella/Babesia
 - Mycoplasma
 - Parovirus
 - HPV/HSV/HH6/HH7
 - Strep
 - SIBO
 - Parasites

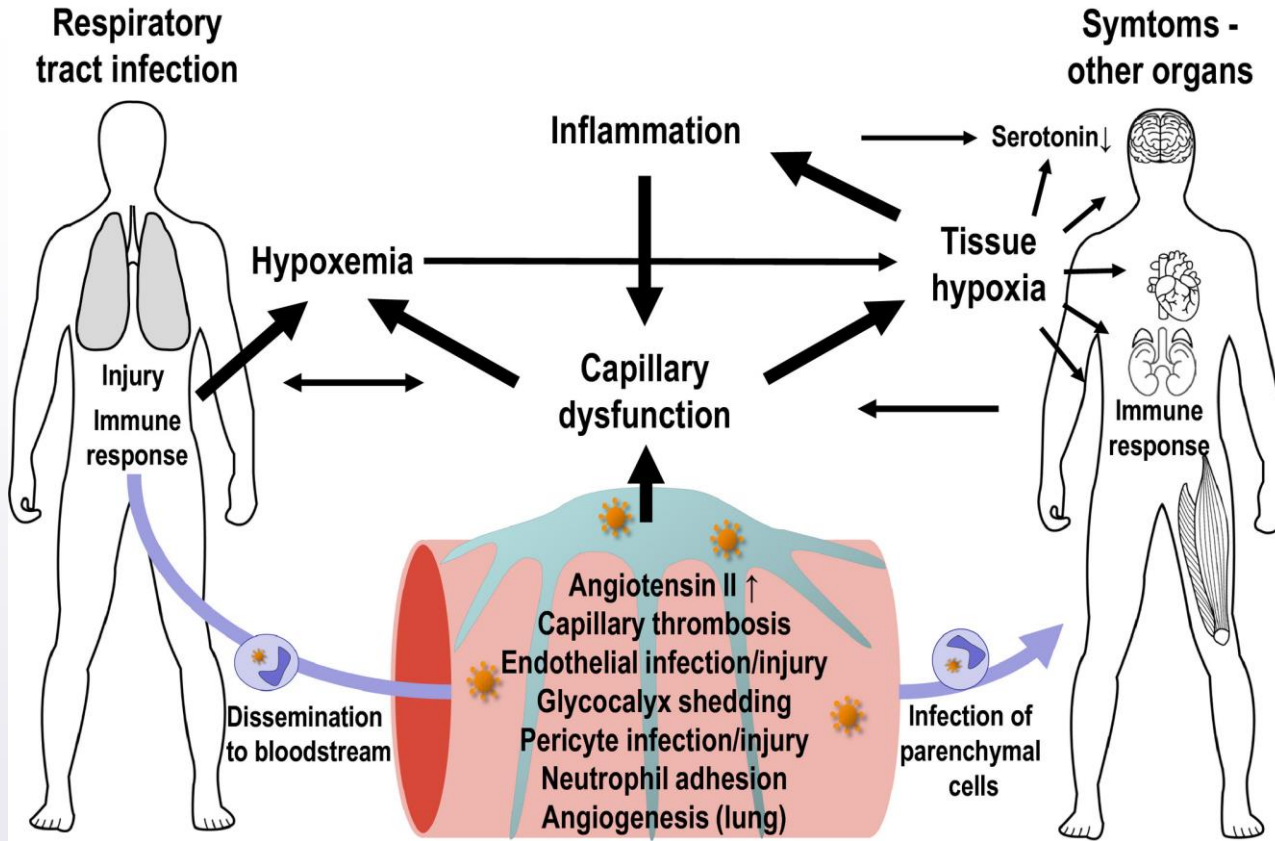


Long COVID or post-COVID-19 syndrome: putative pathophysiology, risk factors, and treatments

Yong, SS (2021). Long COVID or post-COVID-19 syndrome: putative pathophysiology, risk factors, and treatments. *Infectious Diseases*, 53(10), 737–754. <https://doi.org/10.1080/23744235.2021.1924397>



An overview of the symptoms, putative pathophysiology, associated risk factors, and potential treatments involved in long COVID. Note: Dashed lines represent areas where evidence is relatively lacking compared to non-dashed lines. (Color online only).



SARS CoV-2 related microvascular damage and symptoms during and after COVID-19: Consequences of capillary transit-time changes, tissue hypoxia and inflammation

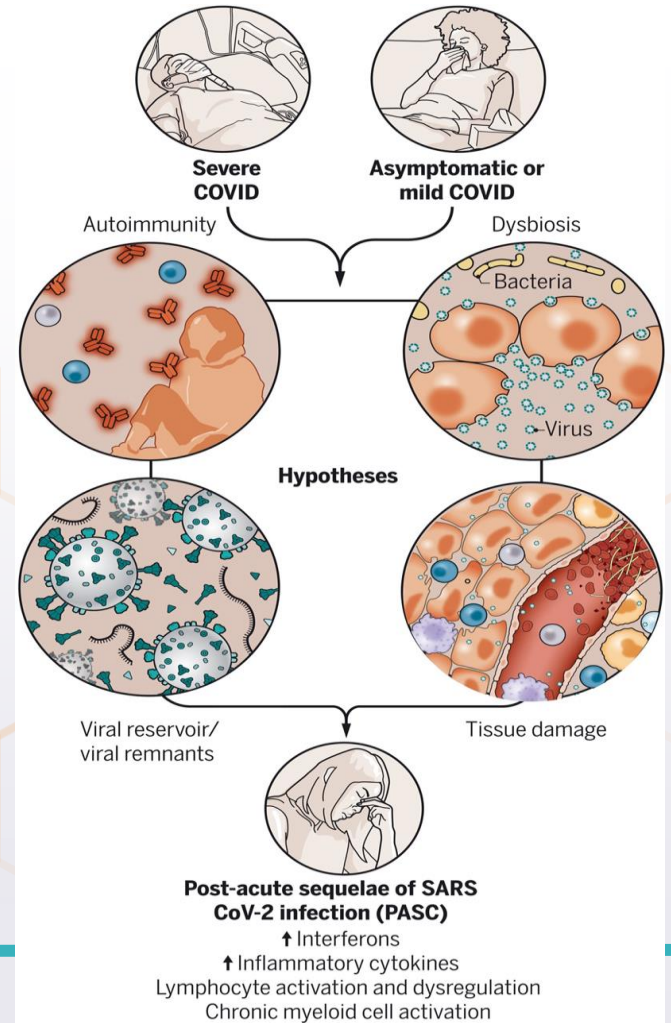
Distinguishing features of Long COVID identified through immune profiling

Klein, JB, Wood, JR, Iwasaki, A, et al. (2022). Distinguishing features of Long COVID identified through immune profiling. medRxiv (Cold Spring Harbor Laboratory).
<https://doi.org/10.1101/2022.08.09.22278592>

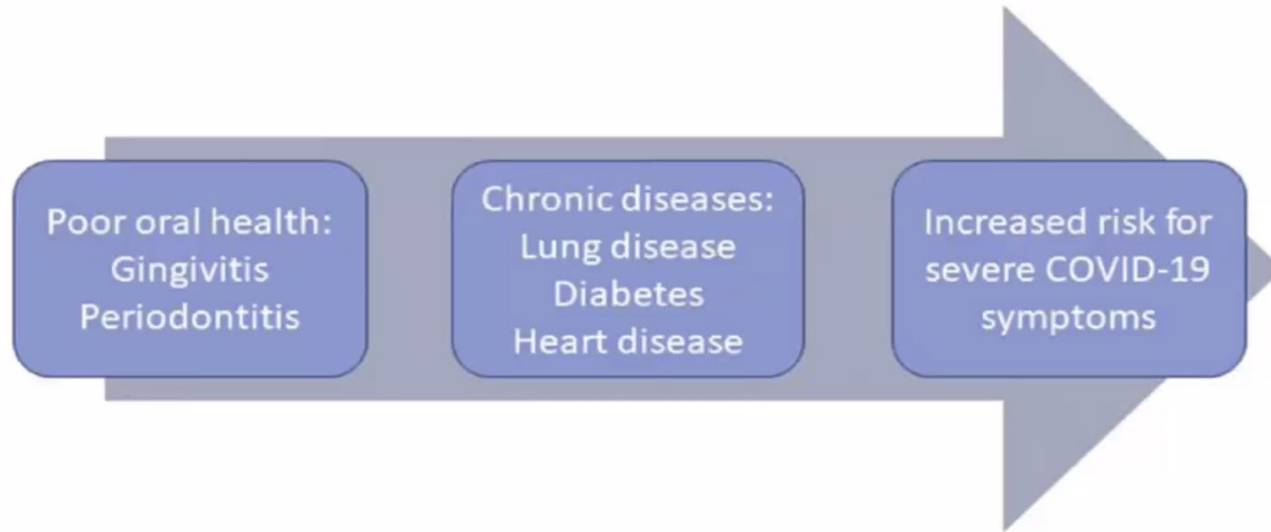
A fraction of COVID-19 patients with either severe or mild COVID-19 develop a variety of new, recurring, or ongoing symptoms and clinical findings 4 or more weeks after infection.

Analyses of immune responses in people with PASC reveal key inflammatory cytokines and cellular activation phenotypes that are significantly elevated over nonPASC convalescent controls.

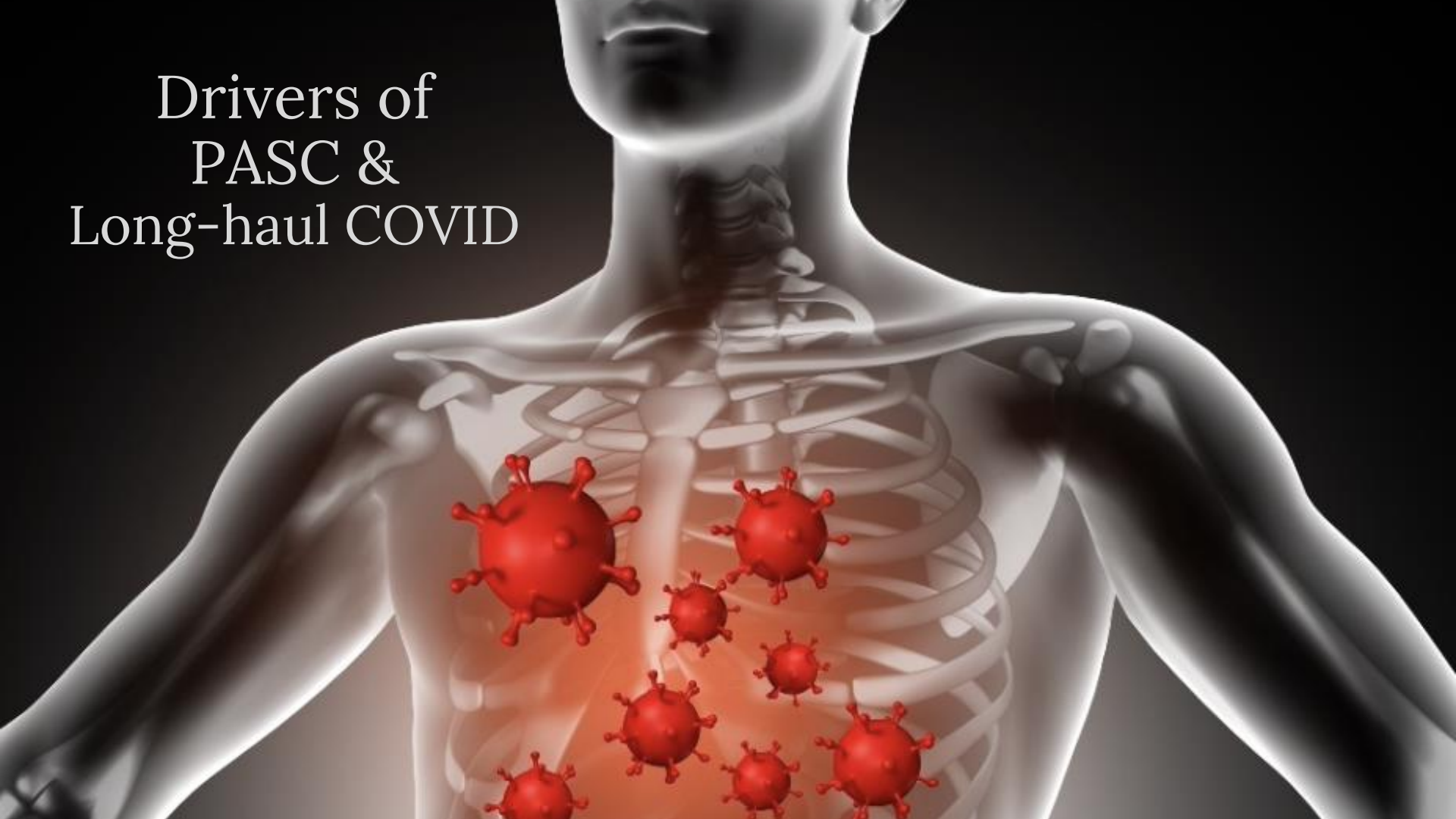
Further studies are needed to identify the drivers of PASC pathophysiology.
Illustration: V. Altounian/Science



Potential links between oral health and severity of COVID-19 complications



Drivers of PASC & Long-haul COVID



Long COVID: major findings, mechanisms and recommendations

Davis, HE, McCorkell, L, Vogel, JM et al. Long COVID: major findings, mechanisms and recommendations. Nat Rev Microbiol 21, 133–146 (2023). <https://doi.org/10.1038/s41579-022-00846-2>

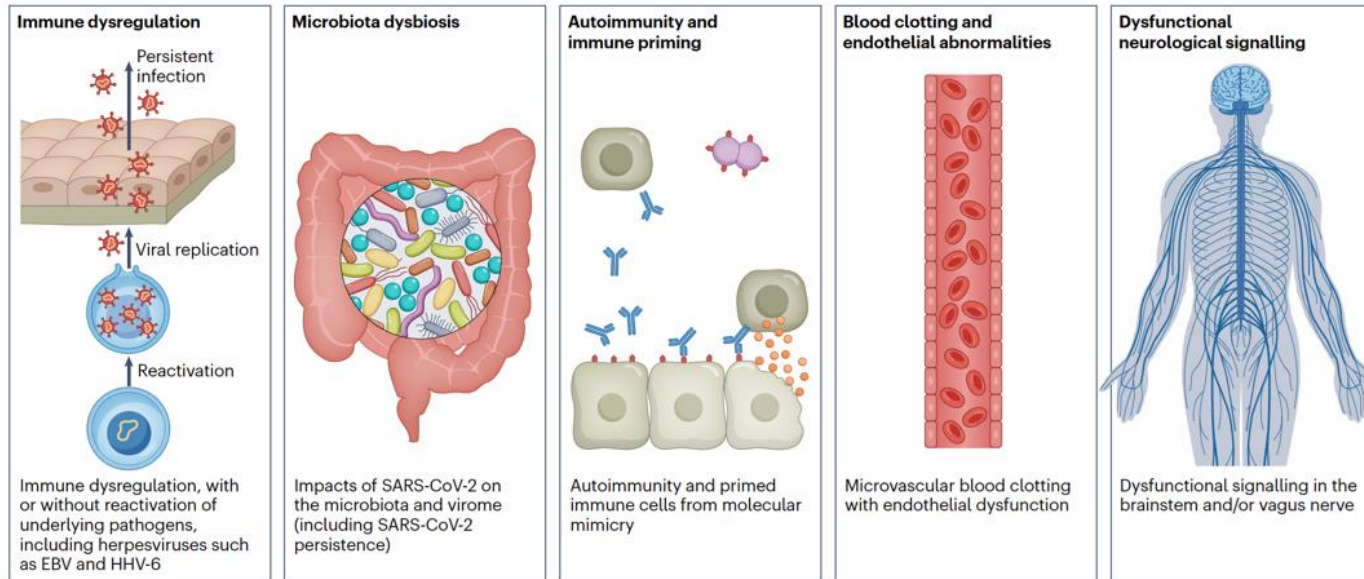
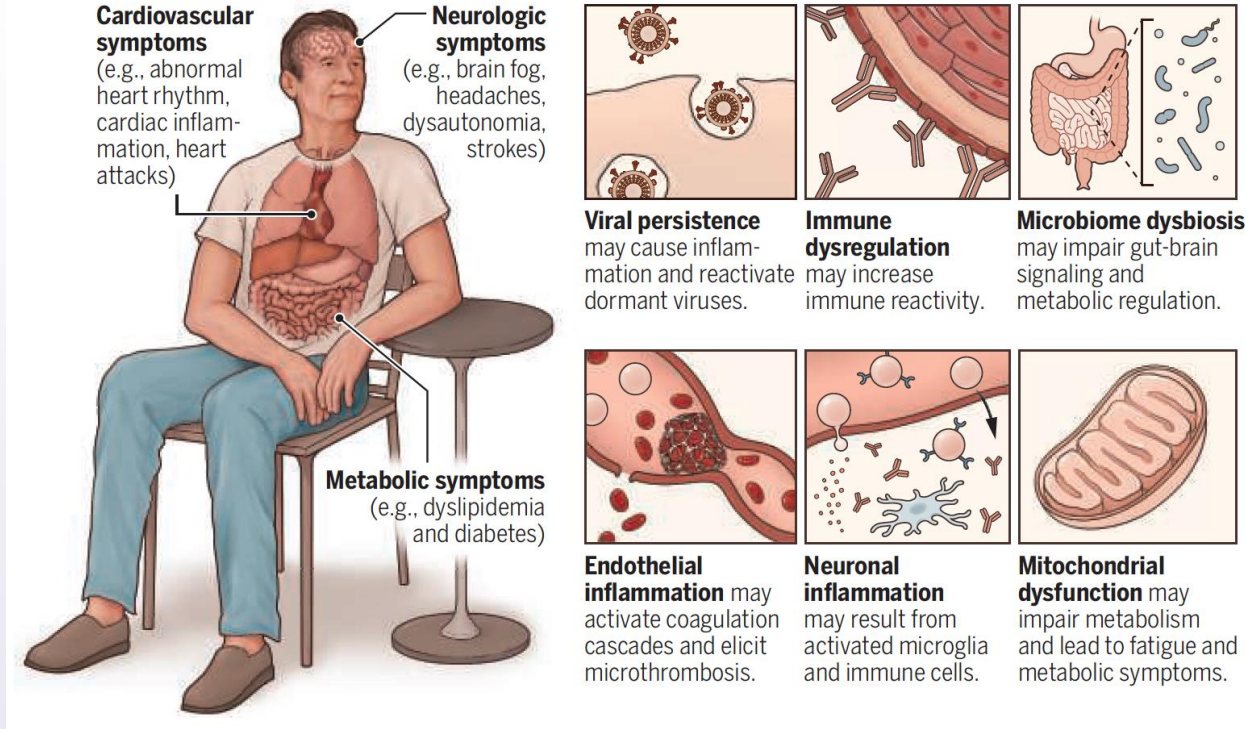


Fig. 3 | Hypothesized mechanisms of long COVID pathogenesis. There are several hypothesized mechanisms for long COVID pathogenesis, including immune dysregulation, microbiota disruption, autoimmunity, clotting

and endothelial abnormality, and dysfunctional neurological signalling. EBV, Epstein–Barr virus; HHV-6, human herpesvirus 6; SARS-CoV-2, severe acute respiratory syndrome coronavirus 2.

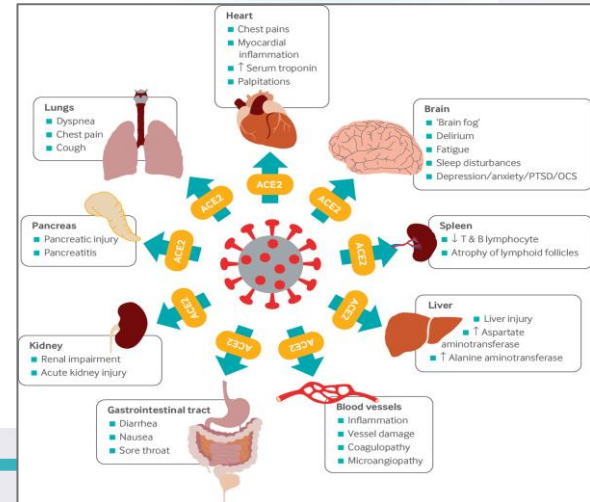
Many forms of Long Covid

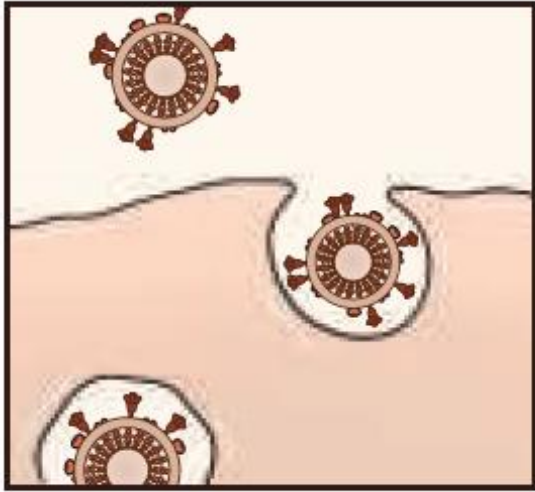
Long Covid is a multisystemic disease with sequelae that affect almost all organ systems. Various putative mechanisms that underlie these sequelae are not mutually exclusive and may explain the myriad health effects seen in Long Covid. Therapeutics that target these pathways, such as antivirals, anti-inflammatory agents, microbiome restoration, and anticoagulant drugs, may ameliorate symptoms.



Viral Persistence

ACE-2 Mediated Tissue Damage



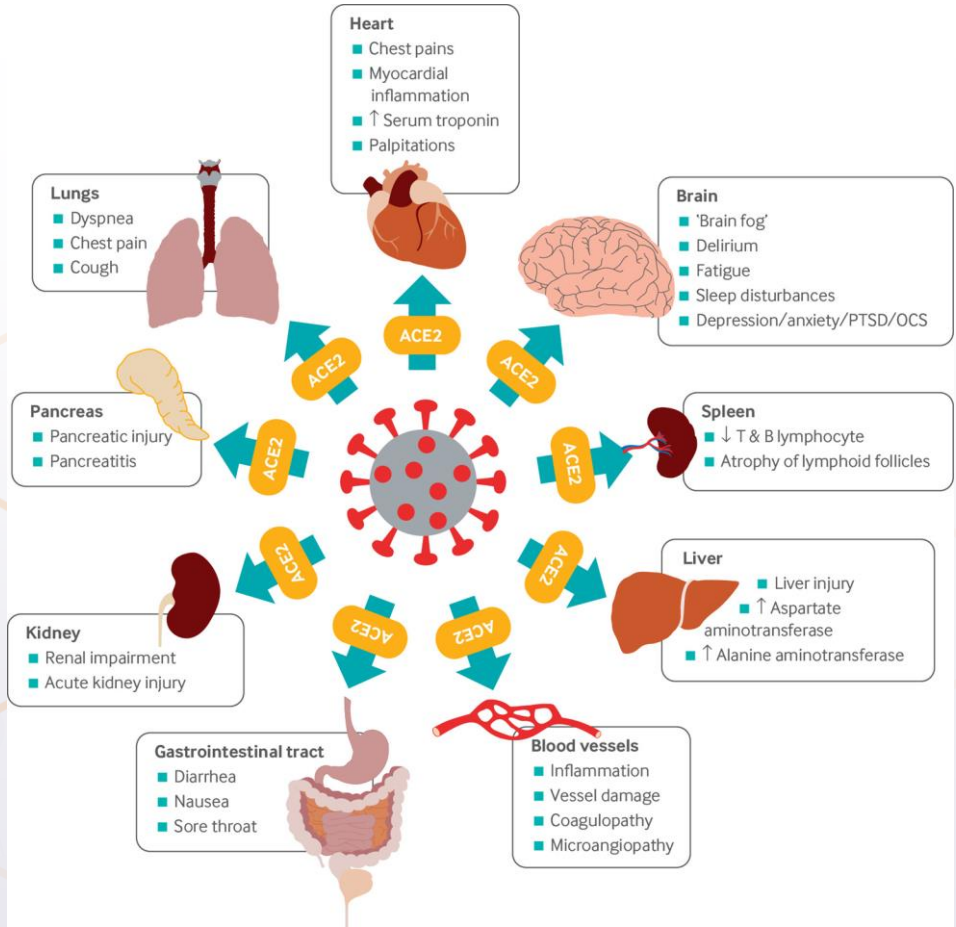


Viral persistence
may cause inflammation
and reactivate
dormant viruses.



Long Covid: mechanisms, risk factors, and management

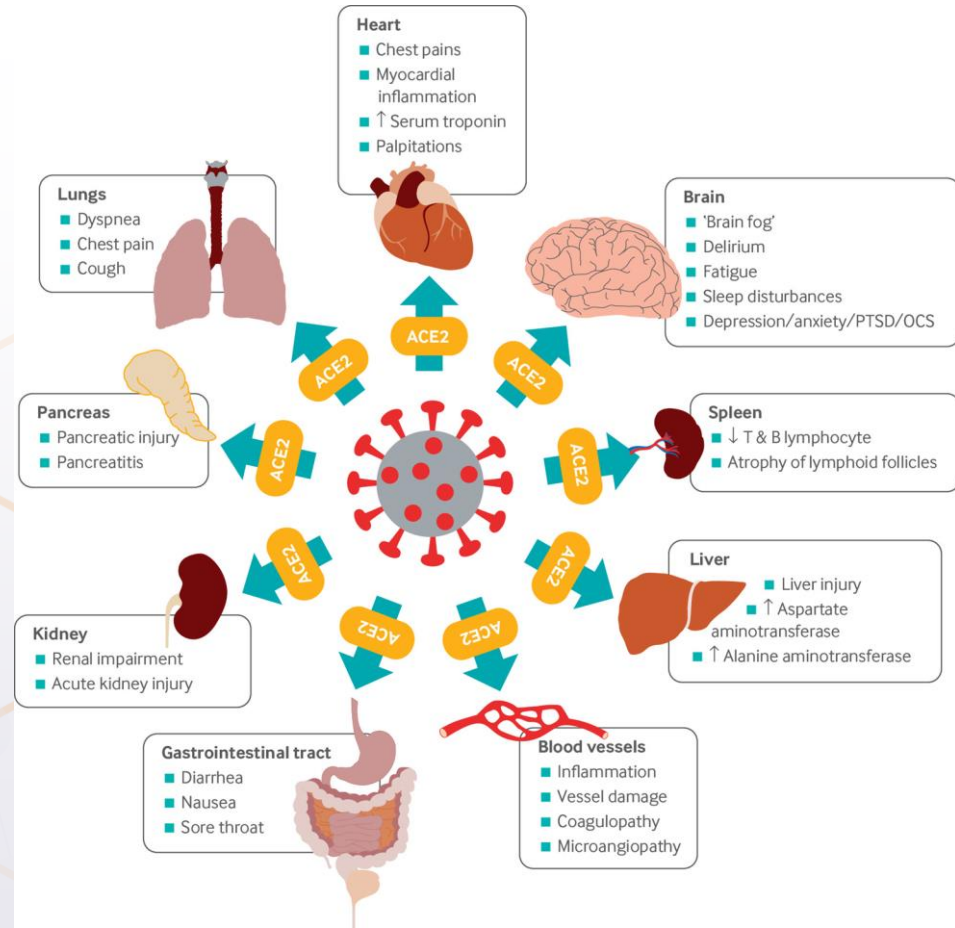
Crook, H, Raza, S, Nowell, J, Young, MK, Edison, P (2021). Long covid—mechanisms, risk factors, and management. *BMJ*, n1648. <https://doi.org/10.1136/bmj.n1648>

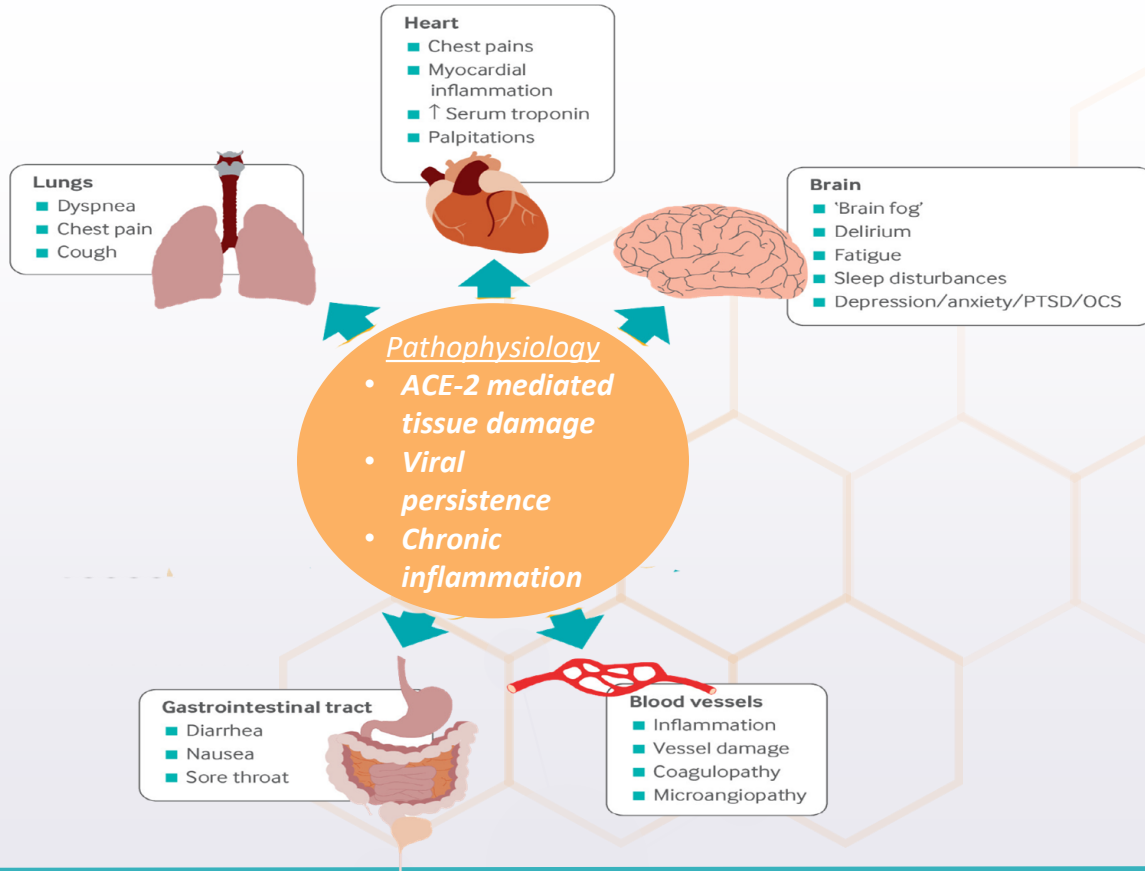


Multi-organ complications of covid-19 and long covid.

The SARS-CoV-2 virus gains entry into the cells of multiple organs via the ACE2 receptor.

Once these cells have been invaded, the virus can cause a multitude of damage ultimately leading to numerous persistent symptoms.

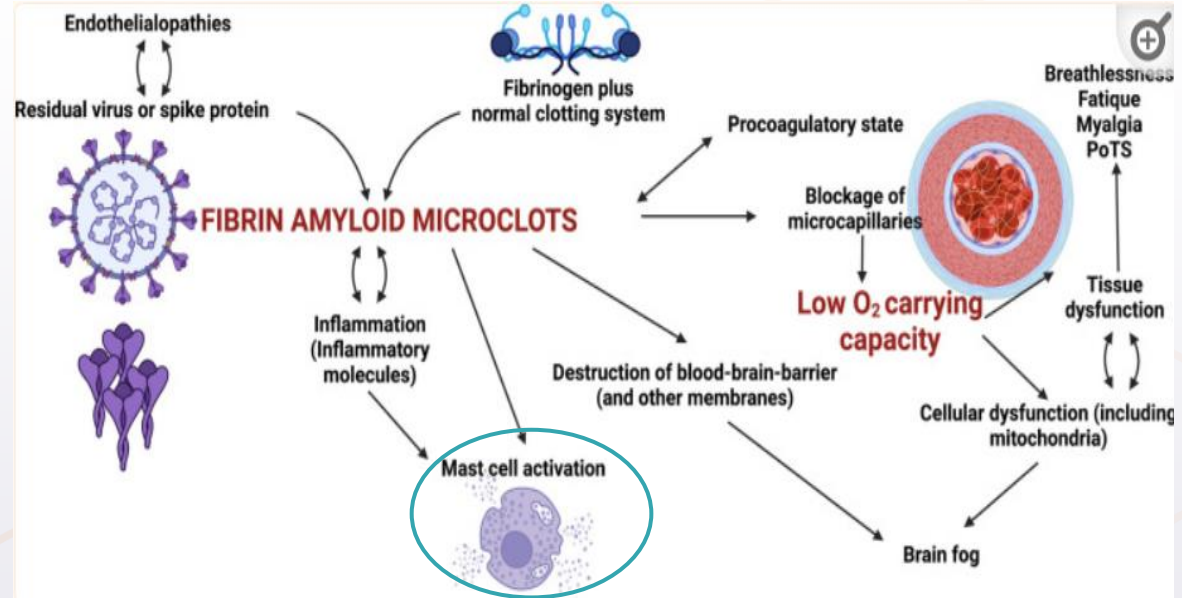




Long-lasting effects

These microclots are:

- Pro-inflammatory
- Entrap molecules, including those that would break them down
- Can block capillaries, resulting in hypoxia
- May be triggered by persistent viral load and/or spike protein remnants



Kell, DB, Laubscher, GJ, & Pretorius, E. (2022). A central role for amyloid fibrin microclots in long COVID/PASC: origins and therapeutic implications. *Biochemical Journal*, 479(4), 537–559. <https://doi.org/10.1042/bcj20220016>

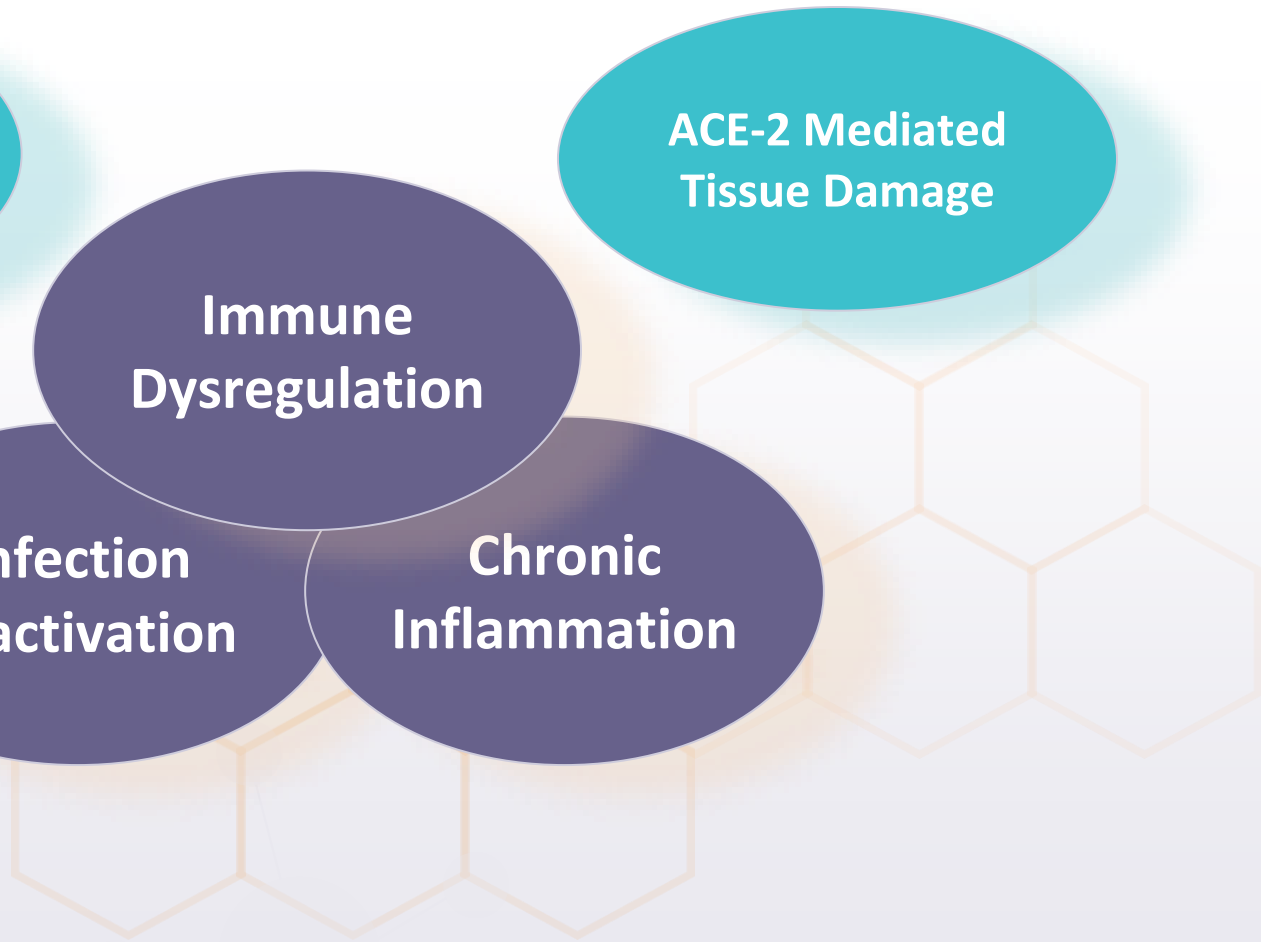
**Viral Infection
Persistence**

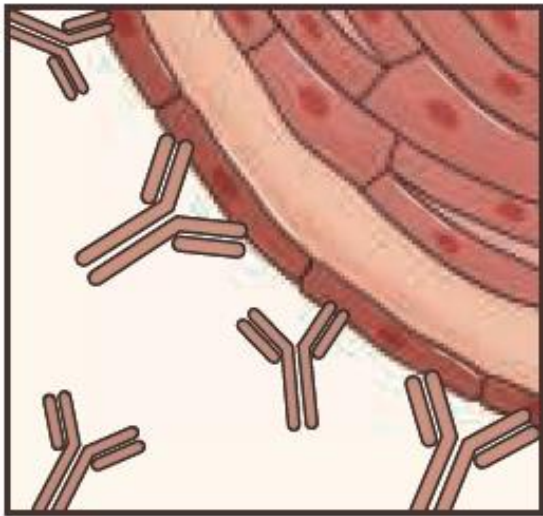
**ACE-2 Mediated
Tissue Damage**

**Immune
Dysregulation**

**Infection
Reactivation**

**Chronic
Inflammation**





**Immune
dysregulation**
may increase
immune reactivity.



Chronic Inflammation

Scutellaria baicalensis "Chinese Skullcap"

Herbal anti-inflammatory combination product with Curcumin, Boswellia, Cat's Claw, Bromelain, Devil's Claw

Omega-3 Fatty Acids

EPA + DHA combination @ 2gm/ day

Vitamin D3 + K2

Vitamin D3 dosing based on serum levels

Quercetin

Anti-Oxidants

Anti-inflammatory actions:

- Decreases activation of the NLRP3 Inflammasome.
- Crosses the blood brain barrier to address brain inflammation
- Prevents organ injury by modulation of host innate immune response

Omega-3 Fatty Acids

- Promotes anti-inflammatory prostaglandin pathways

Vitamin D

- Plays an important role in the modulation of the inflammation system by regulating the production of inflammatory cytokines

Quercetin:

- Immunomodulatory and may improve T-Reg function
- Demonstrated anti-viral activity against both RNA and DNA viruses

Shi S et al. Oral Chinese Herbal Medicine on Immune Responses During Coronavirus Disease 2019: A Systematic Review and Meta-Analysis. Front Med (Lausanne). 2022 Jan 21;8:685734. doi: 10.3389/fmed.2021.685734.

**Viral Infection
Persistence**

**ACE-2 Mediated
Tissue Damage**

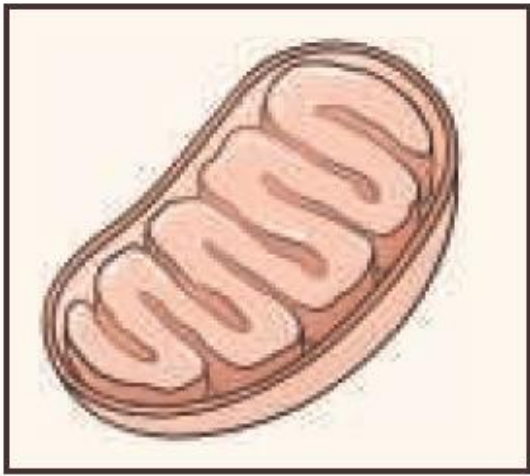
**Immune
Dysregulation**

**Mitochondrial
Dysfunction**

**Infection
Reactivation**

**Chronic
Inflammation**

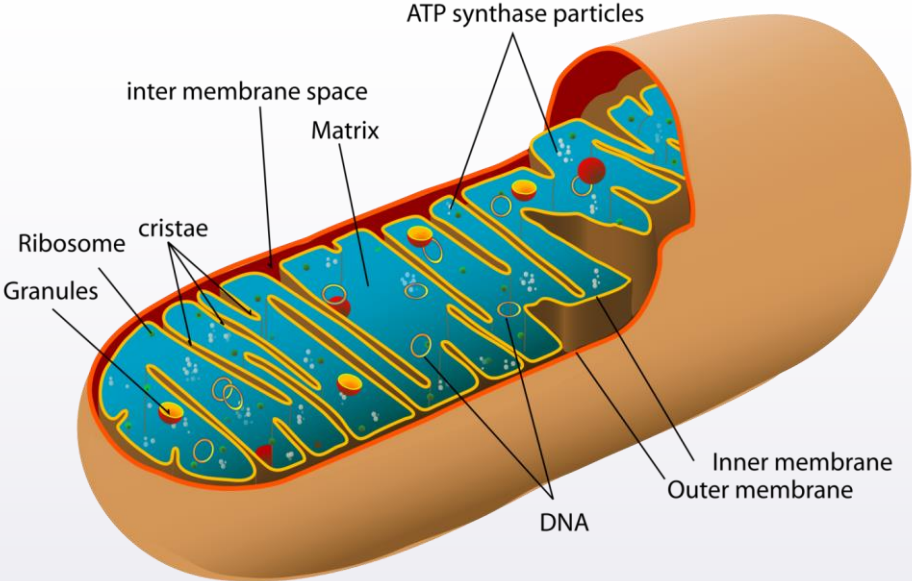
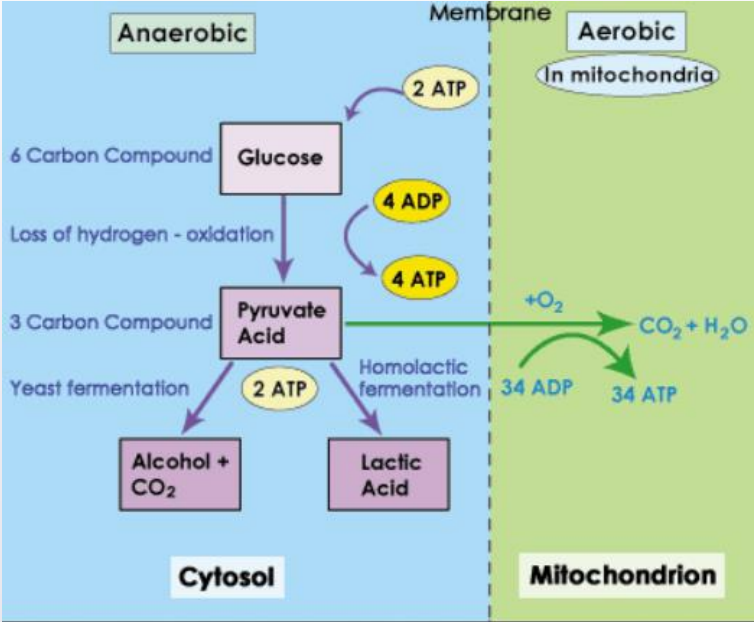
**Gut Microbiome
Dysbiosis**



Mitochondrial dysfunction may impair metabolism and lead to fatigue and metabolic symptoms.



Cellular Energy and Mitochondrial Function



SUPPORTING MITOCHONDRIA FUNCTION

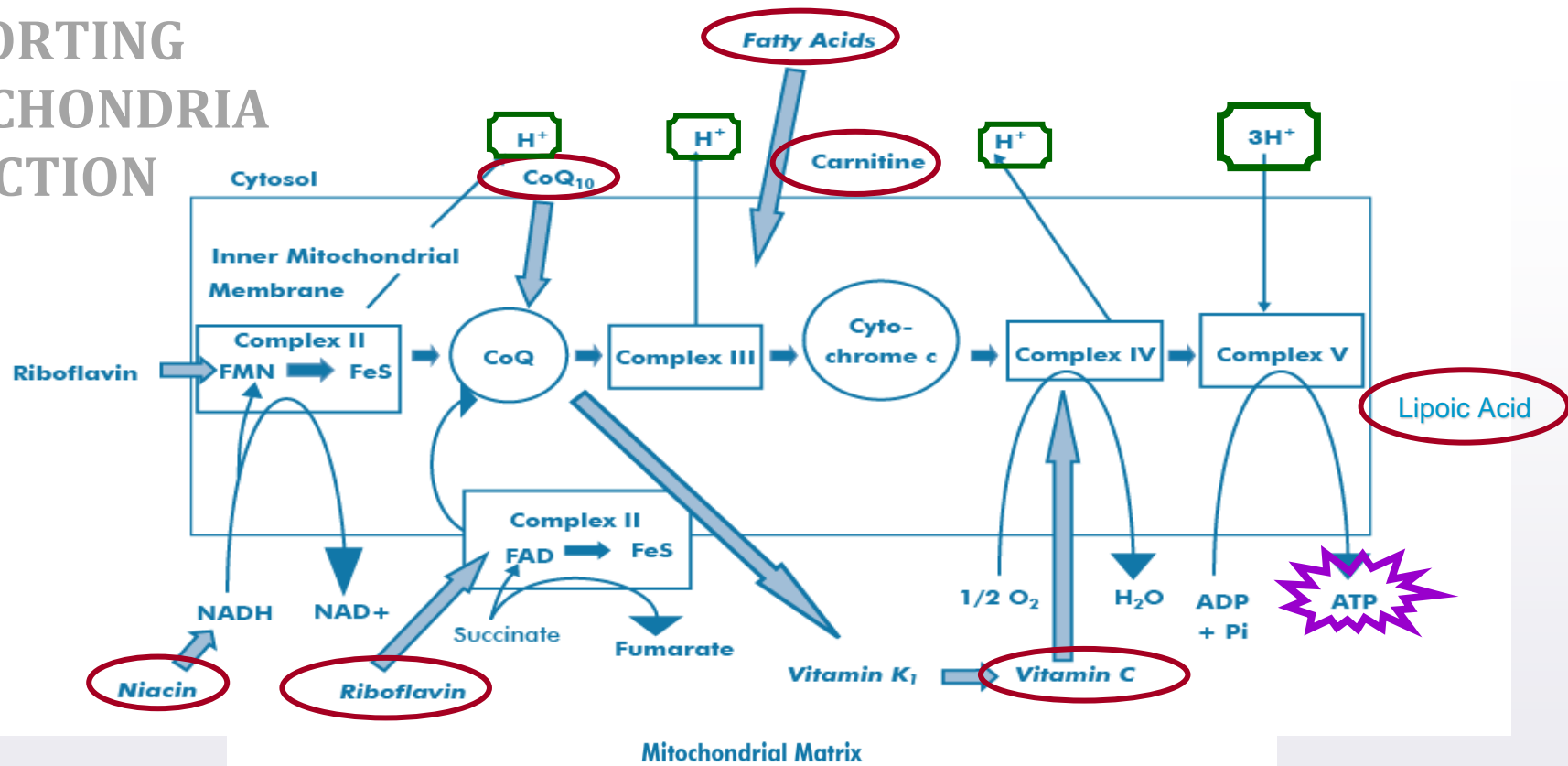
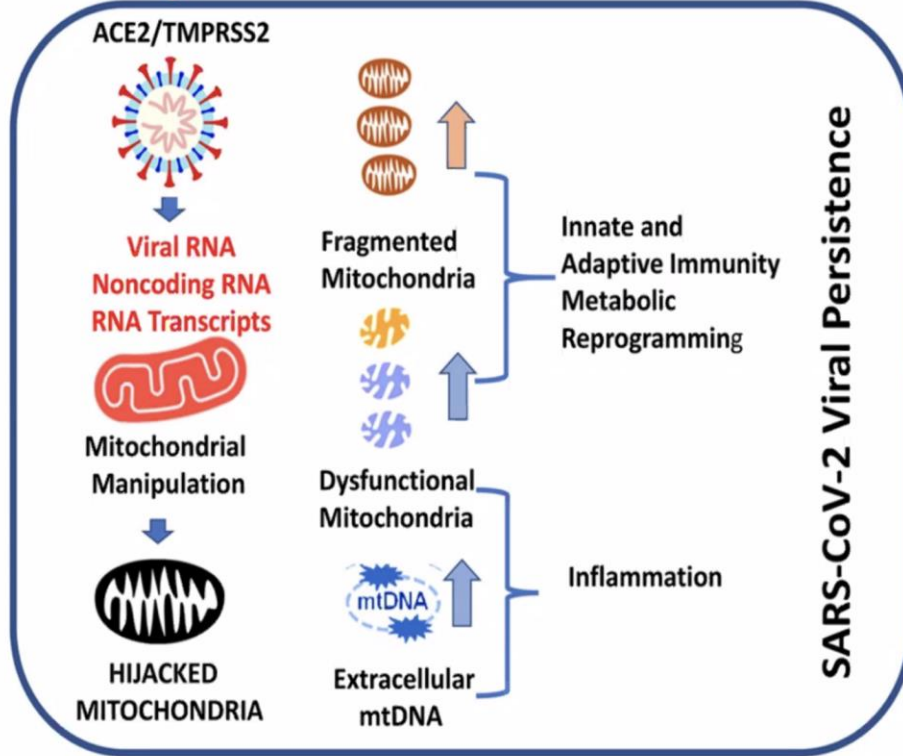


FIG. Mitochondrial Respiratory Chain. Protons (H^+) are pumped from the mitochondrial matrix to the intermembrane space through complexes I, III, and IV. Complex V utilizes the proton gradient as a source of energy to produce ATP. Coenzyme Q_{10} transfers electrons from complexes I and II to complex III. Riboflavin is a precursor of flavin mononucleotide (FMN) and flavin adenine dinucleotide (FAD). The amide form of niacin, (nicotinamide) is a precursor for nicotinamide adenine dinucleotide (NAD). Vitamin K_3 in combination with vitamin C serve as electron acceptors to bypass a deficiency in complex III. Carnitine function to transfer long chain fatty acids across the mitochondrial membrane.



SARS-CoV-2



Covid-19 Pathogenesis

- **Viral binding to mitochondrial ETC →**
 - **Dysfunction & Fatigue**
 - **Chronic Inflammation**
 - **Immune Dysregulation**

Singh, KK, Chaubey, G, Chen, JY, & Suravajhala, P. (2020). Decoding SARS-CoV-2 hijacking of host mitochondria in COVID-19 pathogenesis. *American Journal of Physiology-cell Physiology*, 319(2), C258–C267. <https://doi.org/10.1152/ajpcell.00224.2020>

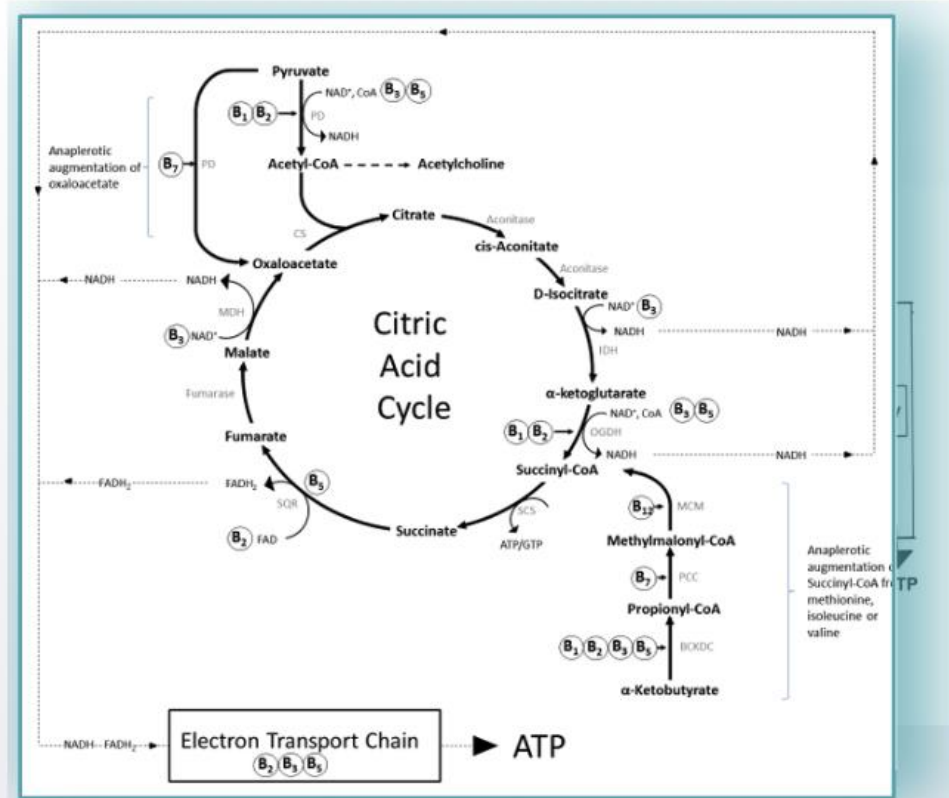
Mitochondrial Dysfunction

B-Vitamin & Mineral Complex
Vitamin and Mineral Co-factors for Kreb's Cycle and Electron Transport Chain (ETC)

Anti-Oxidant Support
Plant-based + ALA + Tocopherols

Co-Q10
Co-Factor in Electron Transport Chain

Magnesium [chelate]
Essential nutrient for mitochondrial function



Singh, KK et al.. Decoding SARS-CoV-2 hijacking of host mitochondria in COVID-19 pathogenesis. American Journal of Physiology-cell Physiology. 2020. 319(2), C258-C267. <https://doi.org/10.1152/ajpcell.00224.2020>

Kennedy DO. B Vitamins and the Brain: Mechanisms, Dose and Efficacy--A Review. Nutrients. 2016;8(2):68. doi: 10.3390/nu8020068. PMID: 26828517.

Mitochondrial Dysfunction

B-Vitamin & Mineral Complex

Vitamin and Mineral Co-factors for Kreb's Cycle and Electron Transport Chain (ETC)

Anti-Oxidant Support

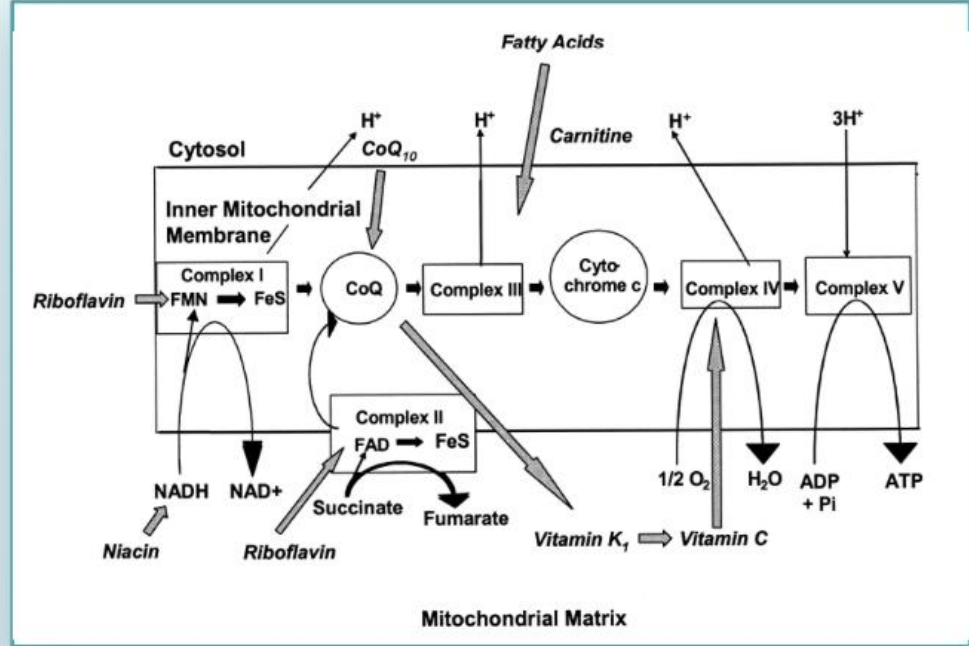
Plant-based + ALA + Tocopherols

Co-Q10

Co-Factor in Electron Transport Chain

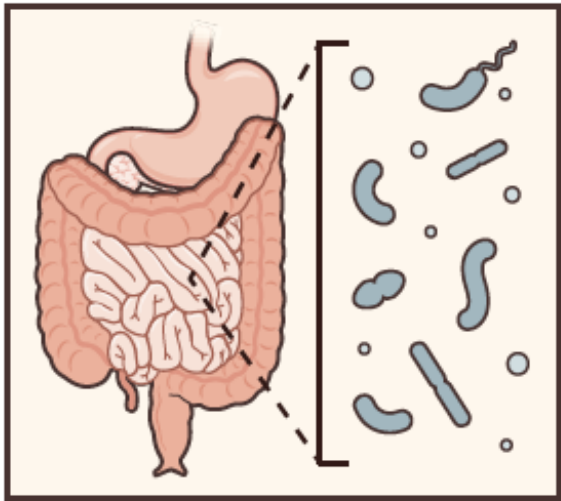
Magnesium [chelate]

Essential nutrient for mitochondrial function



Singh, KK et al.. Decoding SARS-CoV-2 hijacking of host mitochondria in COVID-19 pathogenesis. American Journal of Physiology-cell Physiology. 2020. 319(2), C258–C267. <https://doi.org/10.1152/ajpcell.00224.2020>

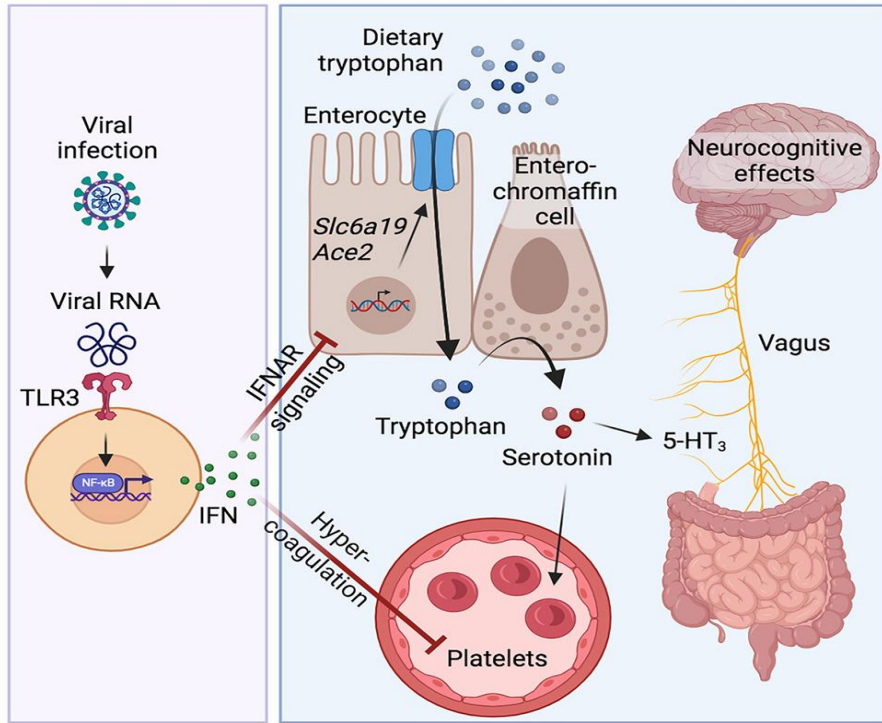
Kennedy DO. B Vitamins and the Brain: Mechanisms, Dose and Efficacy--A Review. Nutrients. 2016;8(2):68. doi: 10.3390/nu8020068. PMID: 26828517.



Microbiome dysbiosis
may impair gut-brain
signaling and
metabolic regulation.



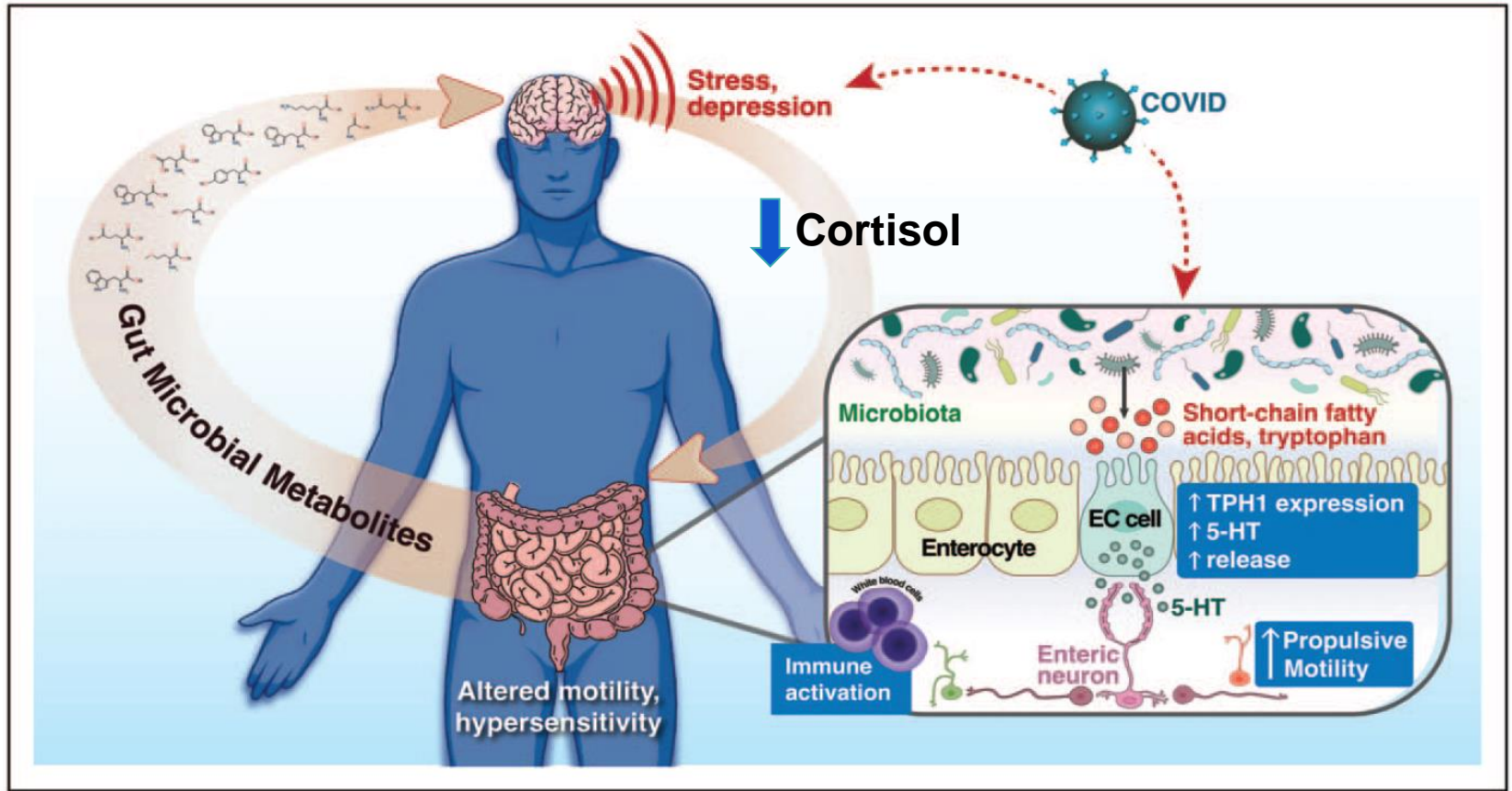
Serotonin reduction in post-acute sequelae of viral infection



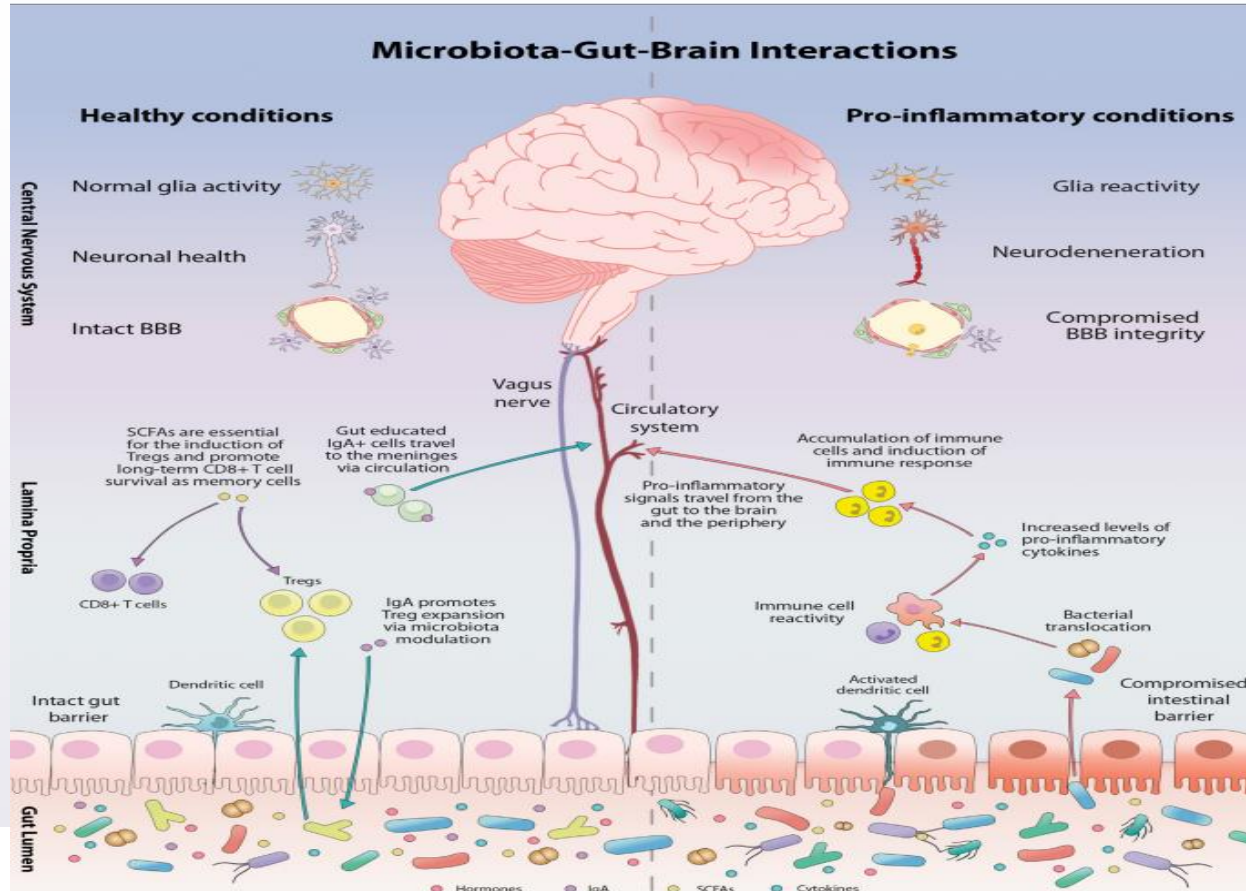
Highlights

- Long COVID is associated with reduced circulating serotonin levels
- Serotonin depletion is driven by viral RNA-induced type I interferons (IFNs)
- IFNs reduce serotonin through diminished tryptophan uptake and hypercoagulability
- Peripheral serotonin deficiency impairs cognition via reduced vagal signaling

Wong, AC, et al (2023). Serotonin reduction in post-acute sequelae of viral infection. *Cell*.
<https://doi.org/10.1016/j.cell.2023.09.013>



Microbiota-immune-brain interactions: A lifespan perspective



Gut/ Microbiome Dysbiosis

PROBIOTIC

Spore-Based Organism (SBO)

Modifying the community 'milieu'

PREBIOTIC

Spore-Based Organism (SBO)

Promoting growth of the person's beneficial commensal microbiome

Spore-Based Probiotic

- Probiotic blend of 5 *Bacillus* spores that have been shown to maintain healthy gut barrier and immune function
- Aims to RECONDITION the gut instead of reseeding with probiotic strains that cannot survive digestion or colonize the gut.

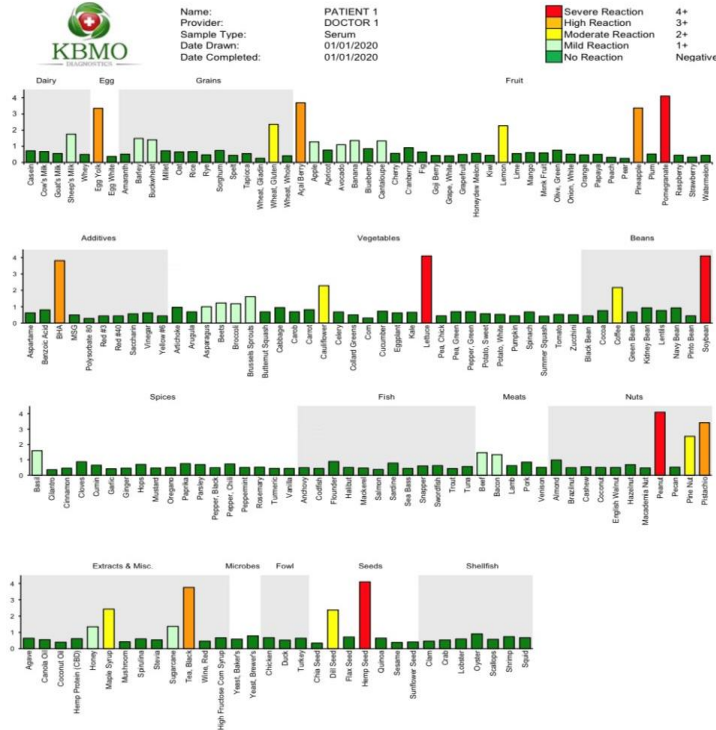
PreBiotic

- Contains non-digestible oligosaccharides that can increase microbial diversity and selectively feed beneficial bacteria like *Akkermansia muciniphila*, *Faecalibacterium prausnitzii*, and *Bifidobacteria*

Zhang D et al. Gut microbiota dysbiosis correlates with Long COVID-19 at one-year after discharge. *J Korean Med Sci.* 2023 Apr 17;38(15):e120. doi: 10.3346/jkms.2023.38.e120. PMID: 37069814

Zhang L et al. Gut microbiota-derived synbiotic formula (SIM01) as a novel adjuvant therapy for COVID-19: An open-label pilot study. *J Gastroenterol Hepatol.* 2022 May;37(5):823-831. doi: 10.1111/jgh.15796.PMID: 35170078

Gut Barrier Panel includes Candida, Zonulin and Occludin



Rev: 27

Page 2



KBMO
 Name: PATIENT 1
 Provider: DOCTOR 1
 Sample Type: Serum
 Date Drawn: 01/01/2020
 Date Completed: 01/01/2020

Gut Barrier Panel
 KBMO has created a unique Gut Barrier Panel which in recognition that leaky gut occurs across a spectrum we have included the following gatekeeper markers: Candida, Zonulin and Occludin. For each marker, we measure IgG 1-4/IC3d in addition to IgA 1 and 2.

Gut Barrier Panel		
	IgG1-4+C3d	IgA1-2
Candida	Negative	Negative
Zonulin	Positive	Positive
Occludin	Positive	Positive

Candida:
 we measure and use any candida overgrowth in the stomach/dysbiosis as a precursor to leaky gut occurrence

Zonulin:
 Is a marker of intestinal permeability, otherwise known as leaky gut. If a patient has elevated Zonulin levels, the normal regulation of the tight junctions is compromised. This Zonulin marker is unique to KBMO please follow the link for more information:
<http://kbmodiagnostics.com/zonulin-test/>

Occludin:
 is a marker of tight junction stabilization and optimal barrier function. Elevated occludin indicates that the tight junctions are breaking down.

GB Panel Interpretation:
 If any of the 6 markers are positive, we recommend to consult your provider with regards a gut healing protocol.

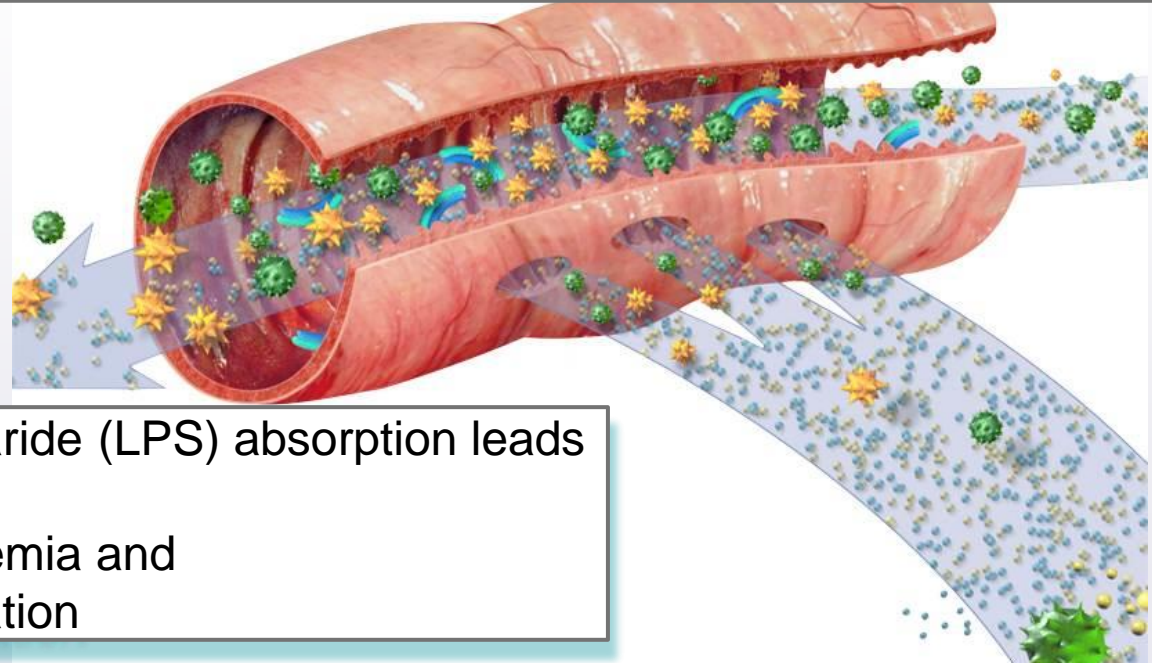
FIT: Gut Barrier Panel (GBPanel)

Gut Barrier Panel		
	IgG1-4-C3d	IgA1-2
Candida	Positive	Positive
Zonulin	Negative	Positive
Occludin	Negative	Negative
LPS	Positive	Negative

FIT 132 + FIT 176 INCLUDE THE GB Panel

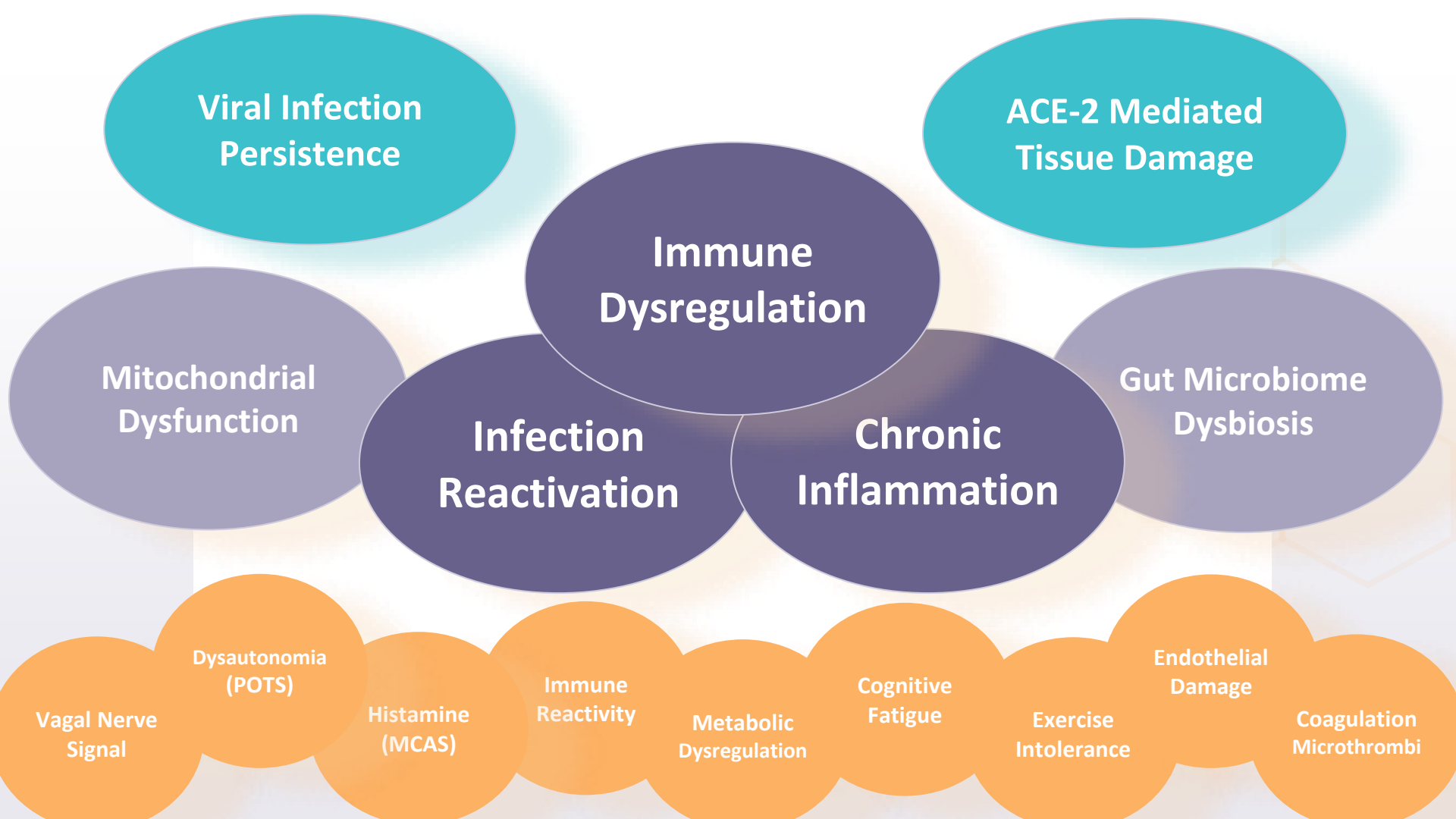


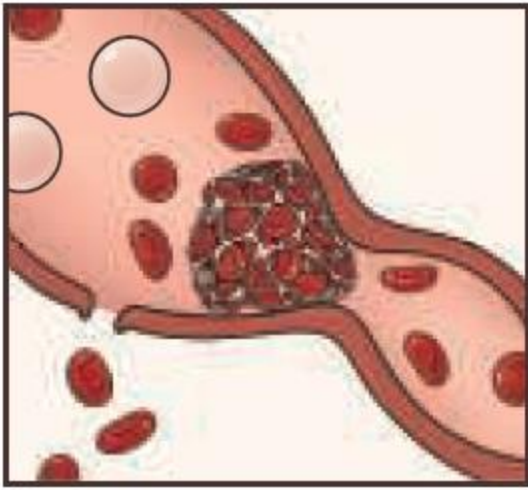
1. LPS is a potent endotoxin and a major inducer of the inflammatory response.
2. LPS is a main component of the cell wall of the gram-negative bacteria that colonize the intestines.
3. Trillions of bacteria occupy the GI tract, providing a huge reservoir of LPS endotoxin.
4. Normally only a very small amount of LPS is absorbed, but a high fat diet can lead to increased LPS absorption and endotoxemia.
5. LPS can even be incorporated into chylomicrons and absorbed into the blood as part of normal fat absorption.



Increased lipopolysaccharide (LPS) absorption leads to:

- increased endotoxemia and
- increased inflammation





Endothelial inflammation may activate coagulation cascades and elicit microthrombosis.





Long-lasting effects

- “Pulmonary vascular microthrombosis and macrothrombosis have been observed in 20–30% of patients with COVID-19 (refs. [63](#),[64](#),[65](#),[66](#),[67](#)), which is higher than in other critically ill patient populations (1–10%)[68](#),[69](#).”
- “In addition, the severity of endothelial injury and widespread thrombosis with microangiopathy seen on lung autopsy is greater than that seen in ARDS from influenza^{[70](#),[71](#)}.”

Review Article | [Published: 22 March 2021](#)

Post-acute COVID-19 syndrome

[Ani Nalbandian](#), [Kartik Sehgal](#) , ... [Elaine Y. Wan](#)  [+ Show authors](#)

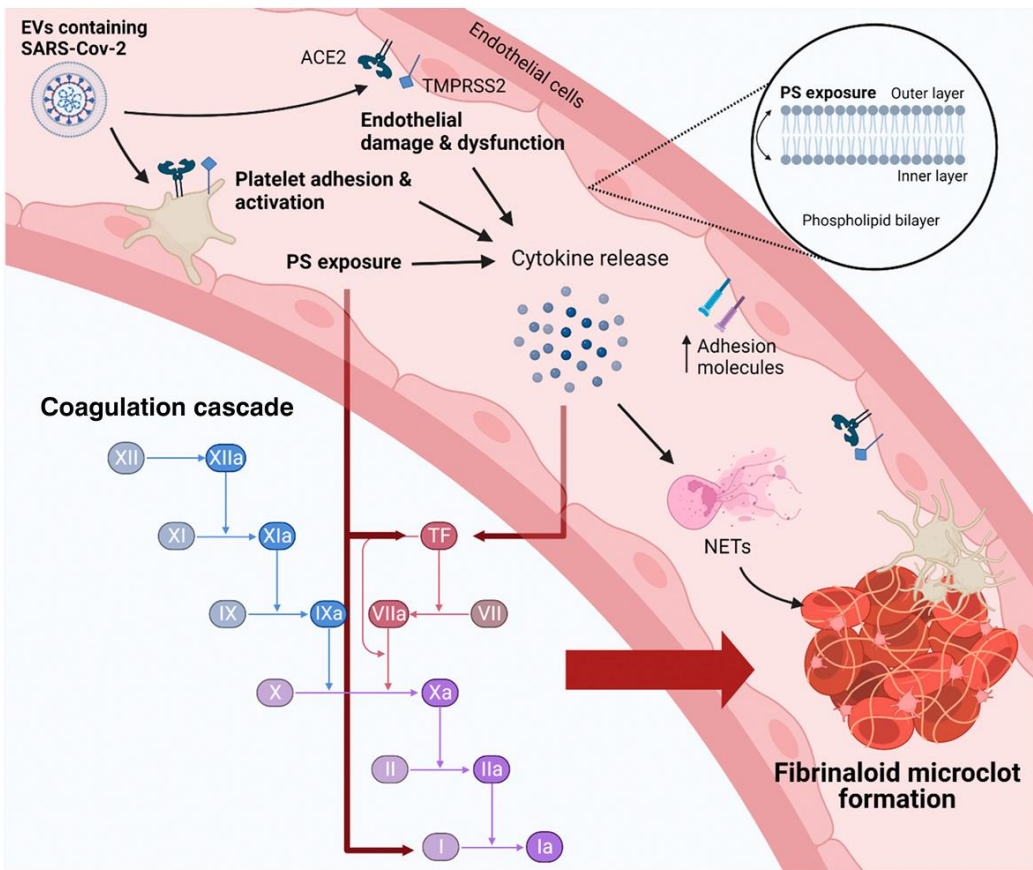
[Nature Medicine](#) **27**, 601–615 (2021) | [Cite this article](#)

675k Accesses | **919** Citations | **4179** Altmetric | [Metrics](#)

Abstract

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is the pathogen responsible for the coronavirus disease 2019 (COVID-19) pandemic, which has resulted in global healthcare crises and strained health resources. As the population of patients recovering from COVID-19 grows, it is paramount to establish an understanding of the healthcare issues surrounding them. COVID-19 is now recognized as a multi-organ disease with a broad

Nalbandian, A, Sehgal, K, Gupta, A, . . . Wan, E. (2021). Post-acute COVID-19 syndrome. *Nature Medicine*, 27(4), 601–615. <https://doi.org/10.1038/s41591-021-01283-z>



These mechanisms culminate in the long term persistence of the disorder characterized by a thrombotic endothelitis, endothelial inflammation, hyperactivated platelets, and fibrinolytic microclots. –representing a unifying pathway for the various symptoms of LongCOVID.

Turner, S, Khan, MA, Putrino, D, Woodcock, A, Kell, DB, & Pretorius, E. (2023). Long COVID: pathophysiological factors and abnormalities of coagulation. Trends in Endocrinology and Metabolism, 34(6), 321–344. <https://doi.org/10.1016/j.tem.2023.03.002>

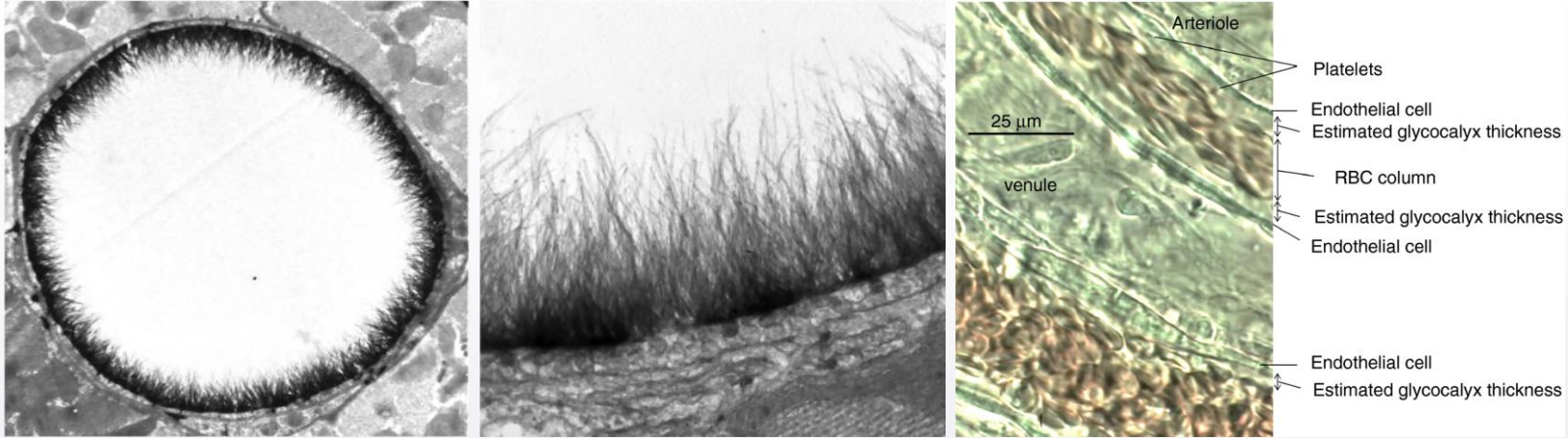
Figure 7. Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) may bind to endothelial cells via the angiotensin converting enzyme 2 (ACE2)/transmembrane protease serine 2 (TMPRSS2) receptors to promote endothelial damage and dysfunction, thereby promoting the activation of the coagulation cascade and formation of fibrinolytic microclots: in Long COVID, SARS-CoV-2 may hide in extracellular vesicles

Messages



IMPROVED RESOLUTION
REVEALS AN INVISIBLE
BARRIER

The Endothelial Glycocalyx (EGX): Sentinel and Protector

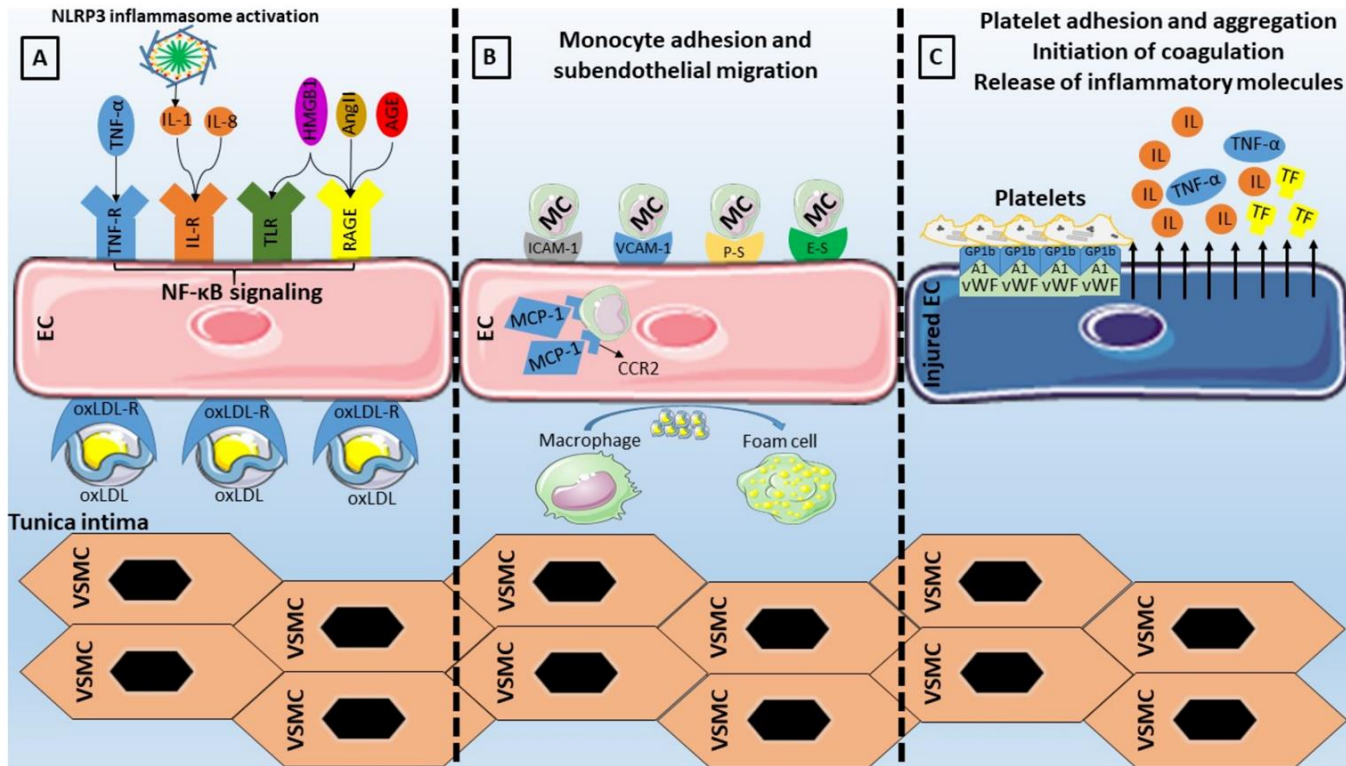


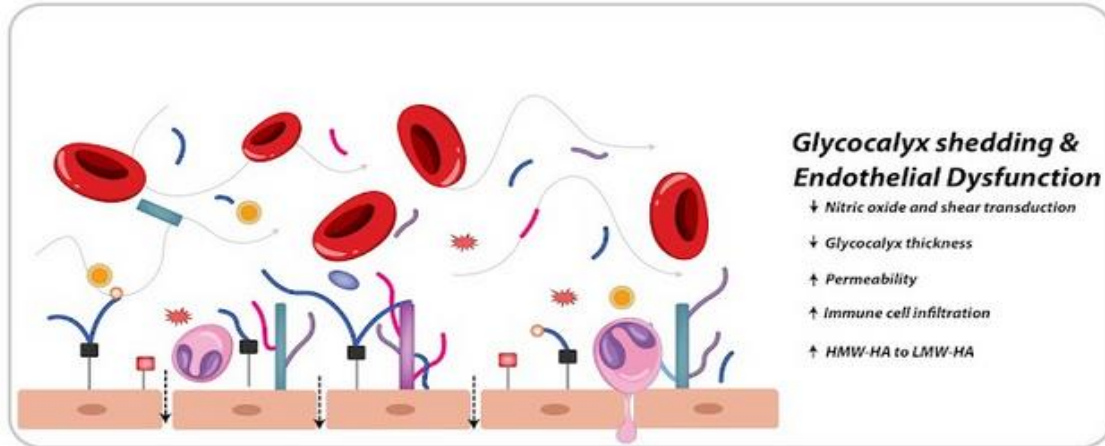
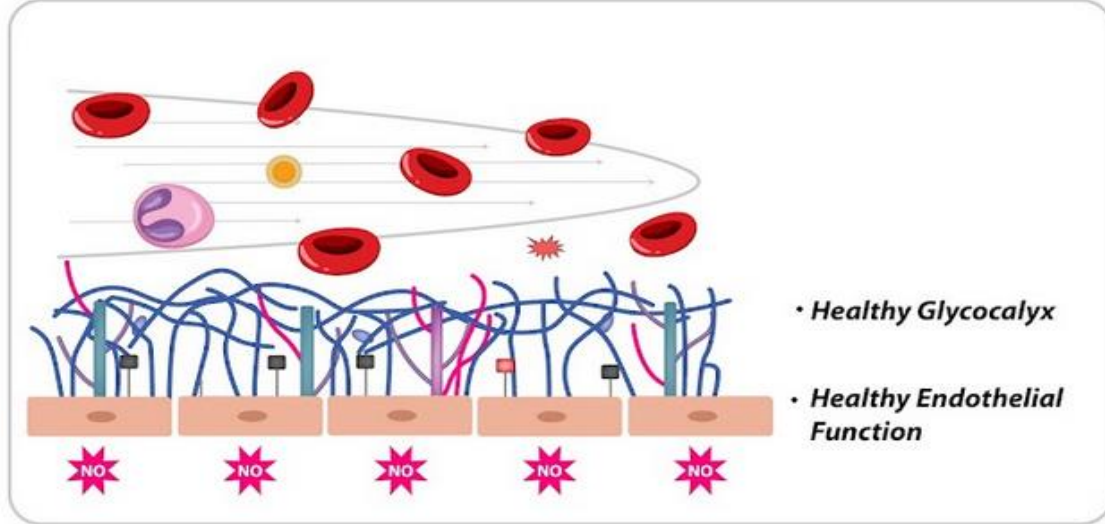
Where Endothelial Dysfunction Starts

A microscopically thin gel-like layer of glycoproteins, proteoglycans, and GAGs (glycosaminoglycans) coating the luminal side of the vascular endothelium

EGX damage **precedes** endothelial damage

Inflammation damages the vasculature

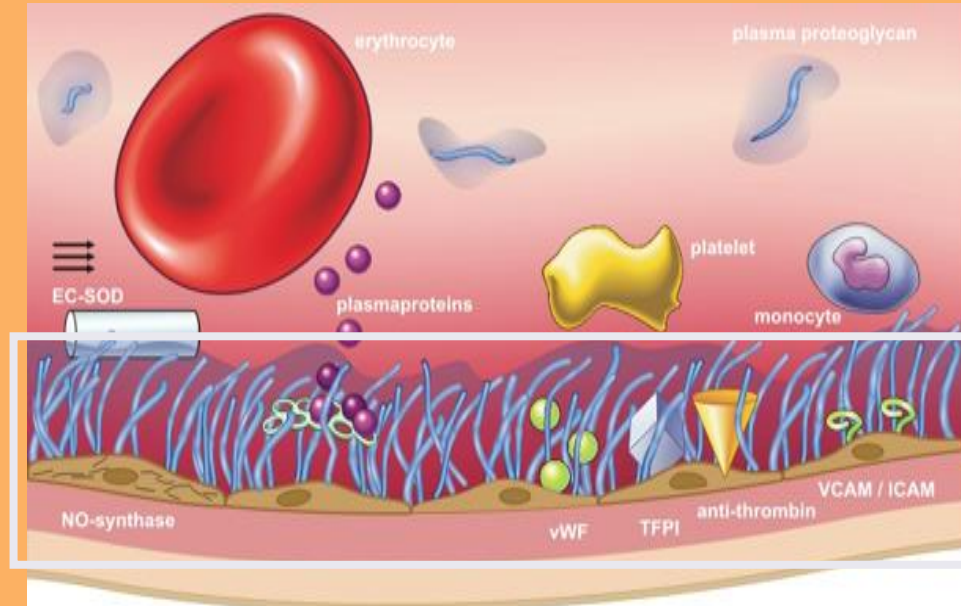




What does it do?

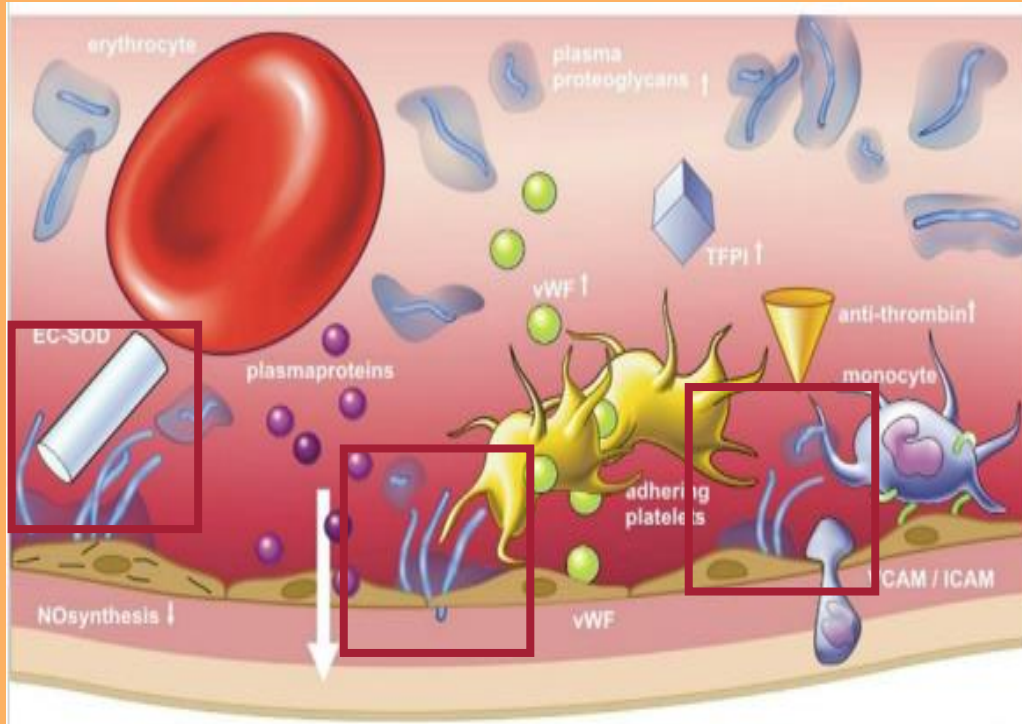
- Intelligent gatekeeper – the vascular system’s “bouncer”
- Storage and docking for antioxidants
- Protective barrier to keep blood flowing smoothly
- Responds to increased blood flow by triggering nitric oxide release
- Maintains vascular homeostasis
- Regulates vascular permeability and fluid balance

Endothelial Glycocalyx

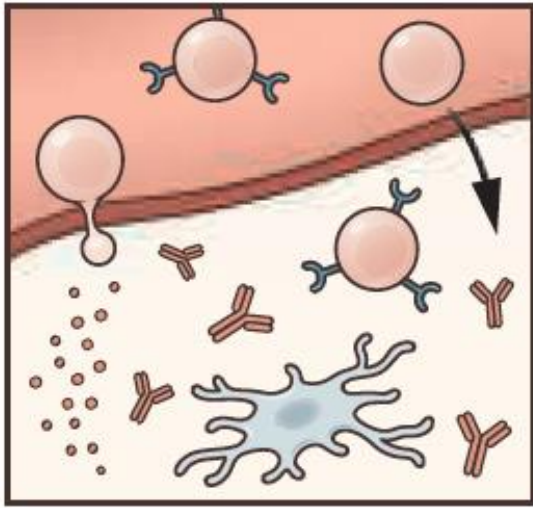


- Regulates permeability as a selective sieving barrier
- Helps regulate surface inflammatory response
- Arterial anti-adhesive
- Harbors coagulation regulatory factors
- Houses extracellular SOD – potent anti-inflammatory antioxidant enzyme
- Triggers production of nitric oxide (NO) through classical, enzymatic eNOS pathways

Compromised Glycocalyx



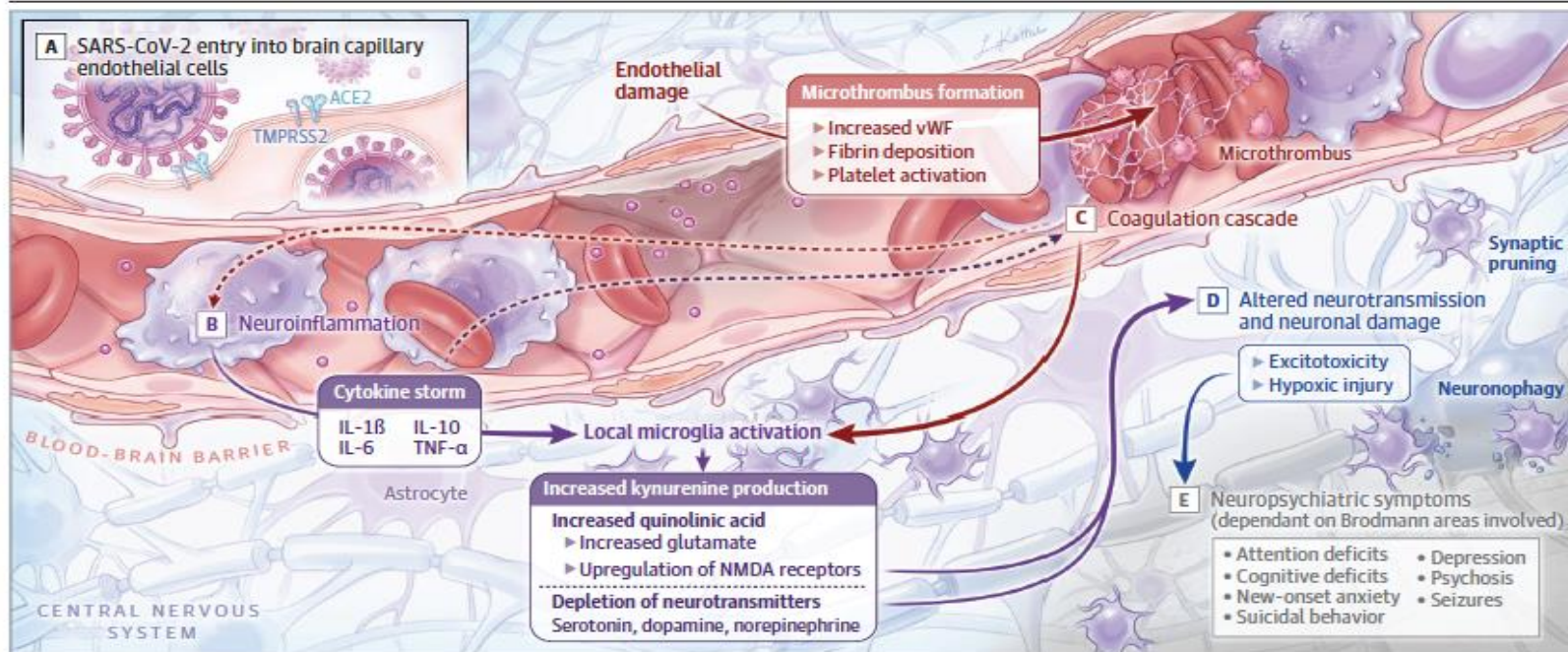
- Reduced NO availability
- Increased oxidative stress
- Increased leakage of macromolecules
- Increased platelet adherence
- Increased thrombin generation
- Increased leukocyte adhesion & diapedesis



**Neuronal
inflammation**
may result from
activated microglia
and immune cells.



Figure. Brain Vascular Injury, Neurotransmitter System Dysfunction, Thrombotic Events, Neuronal Damage, and Neuropsychiatric Symptoms



A, SARS-CoV-2 invades endothelial cells via transmembrane angiotensin-converting enzyme 2 (ACE2) receptor, enabled by transmembrane protease, serine 2 (TMPRSS2). **B**, Cytokine elevation and microglia activation result in increased kynurenine, quinolinic acid, and glutamate, and neurotransmitter depletion. **C**, Coagulation cascade and elevation of von Willebrand factor (vWF)

lead to thrombotic events. **D**, Altered neurotransmission, excitotoxicity by increased glutamate, and hypoxic injury contribute to neuronal dysfunction and loss. **E**, Neuropsychiatric symptoms differ depending on the Brodmann area involved. IL indicates interleukin; NMDA, *N*-methyl-*D*-aspartate; TNF, tumor necrosis factor.

Inflammation Example: The EGX and the Blood-Brain-Barrier (BBB)

- Selectively permeable
- Key role in coagulation
- Moderates inflammatory response

Received: 27 August 2020 | Revised: 3 November 2020 | Accepted: 22 November 2020

DOI: 10.1111/cns.13560

REVIEW ARTICLE

CNS Neuroscience & Therapeutics **WILEY**

Endothelial glycocalyx as an important factor in composition of blood-brain barrier

Fangfang Zhao¹ | Liyuan Zhong¹ | Yumin Luo^{1,2,3} 

¹Institute of Cerebrovascular Disease Research and Department of Neurology, Xuanwu Hospital of Capital Medical University, Beijing, China

²Beijing Key Laboratory of Translational Medicine for Cerebrovascular Diseases, Beijing Geriatric Medical Research Center, Beijing, China

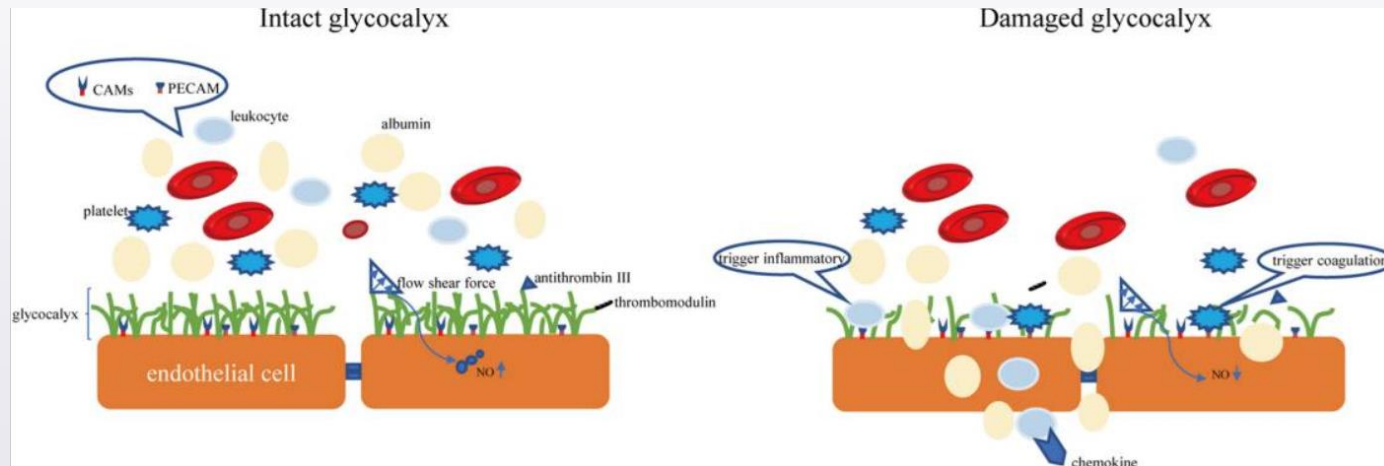
³Beijing Institute for Brain Disorders, Capital

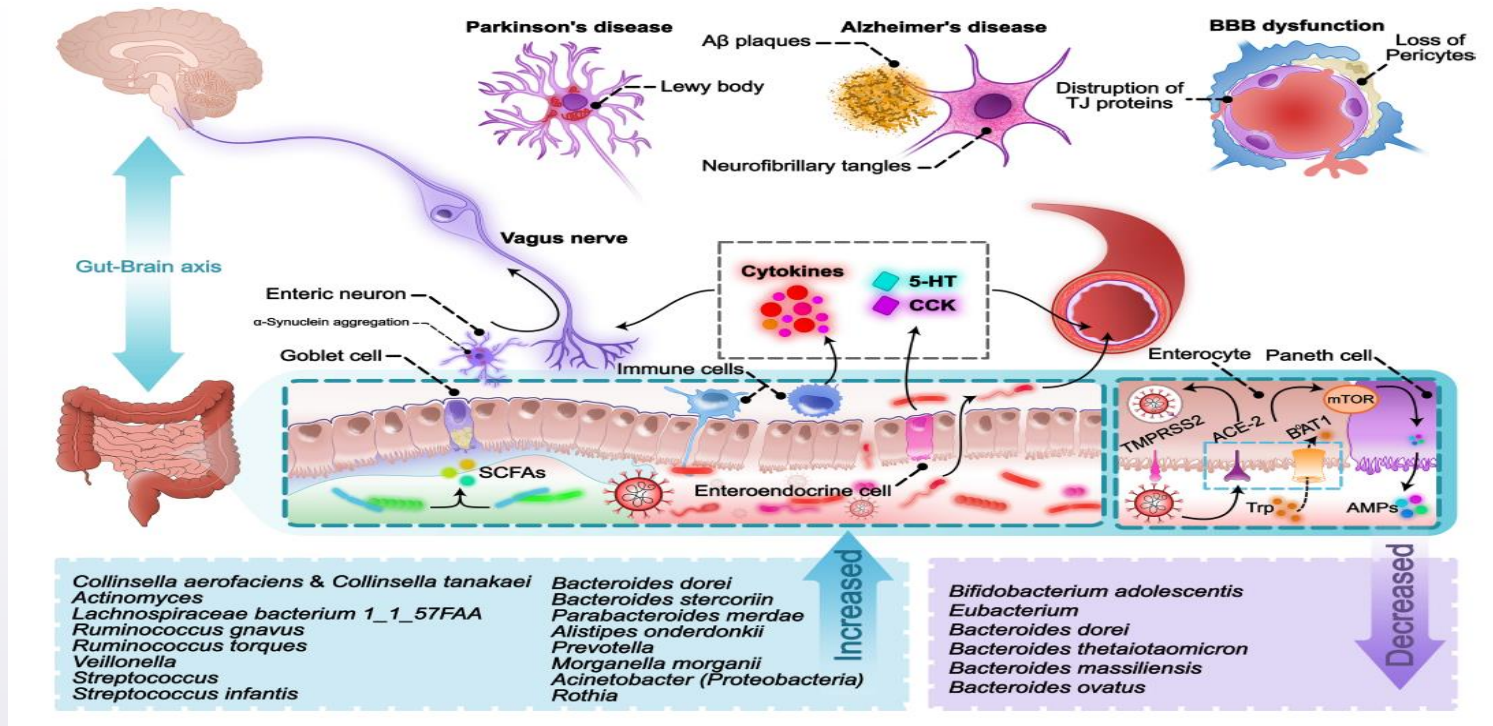
Abstract

The blood-brain barrier is a dynamic and complex neurovascular unit that protects neurons from somatic circulatory factors as well as regulates the internal environmental stability of the central nervous system. Endothelial glycocalyx is a critical component of an extended neurovascular unit that influences the structure of the blood-brain barrier and plays various physiological functions, including an impor-

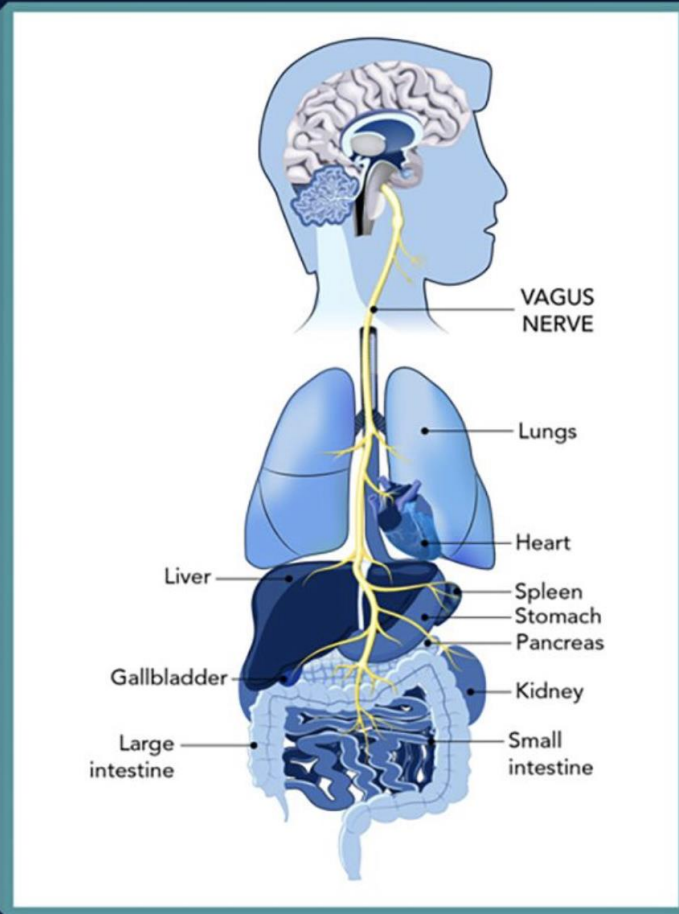
Example system: The EGX and the Blood-Brain-Barrier (BBB)

“Damage to the fragile glycocalyx can lead to increased permeability of the BBB, tissue edema, glial cell activation, up-regulation of inflammatory chemokines expression, and ultimately brain tissue damage.”





Vakili K, et al. The contribution of gut-brain axis to development of neurological symptoms in COVID-19 recovered patients: A hypothesis and review of literature. *Front Cell Infect Microbiol.* 2022 Dec 22;12:983089. doi: 10.3389/fcimb.2022.983089. PMID: 36619768; PMCID: PMC9815719.



The gut-brain axis (GBA) is a **bidirectional** link between the central nervous system (CNS) and the enteric nervous system (ENS) of the body. It involves direct and indirect pathways between cognitive and emotional centres in the brain with peripheral intestinal functions. In addition, the GBA involves complex crosstalk between the endocrine (hypothalamic-pituitary-adrenal axis), immune (cytokine and chemokines) and the autonomic nervous system (ANS).

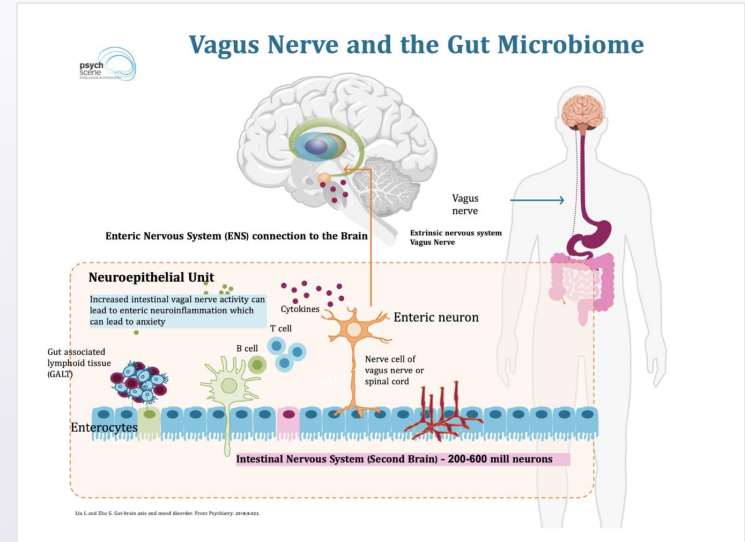
The GBA primarily combines the sympathetic and parasympathetic arms of the autonomic nervous system (ANS), which drives both afferent and efferent neural signals between the gut and the brain, respectively. The HPA axis meanwhile coordinates adaptive responses against stress, including activation of memory and emotional centres in the brain's limbic system.

The control exerted by the gut microbiota on the brain include:

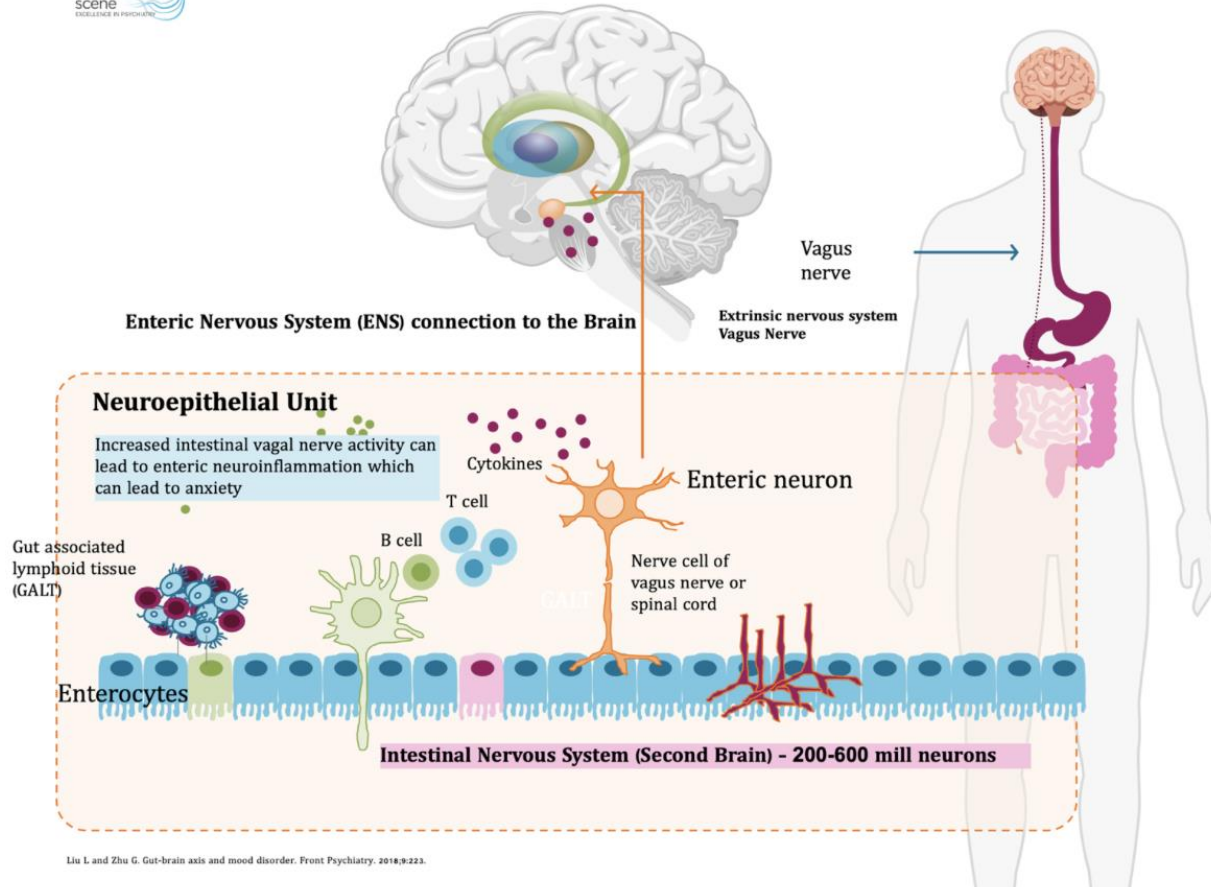
- 1) production, expression, and turnover of neurotransmitters such as GABA and BDNF
- 2) protection of tight junctions in the GI tract
- 3) enteric sensory function
- 4) bacterial metabolites which alter brain function

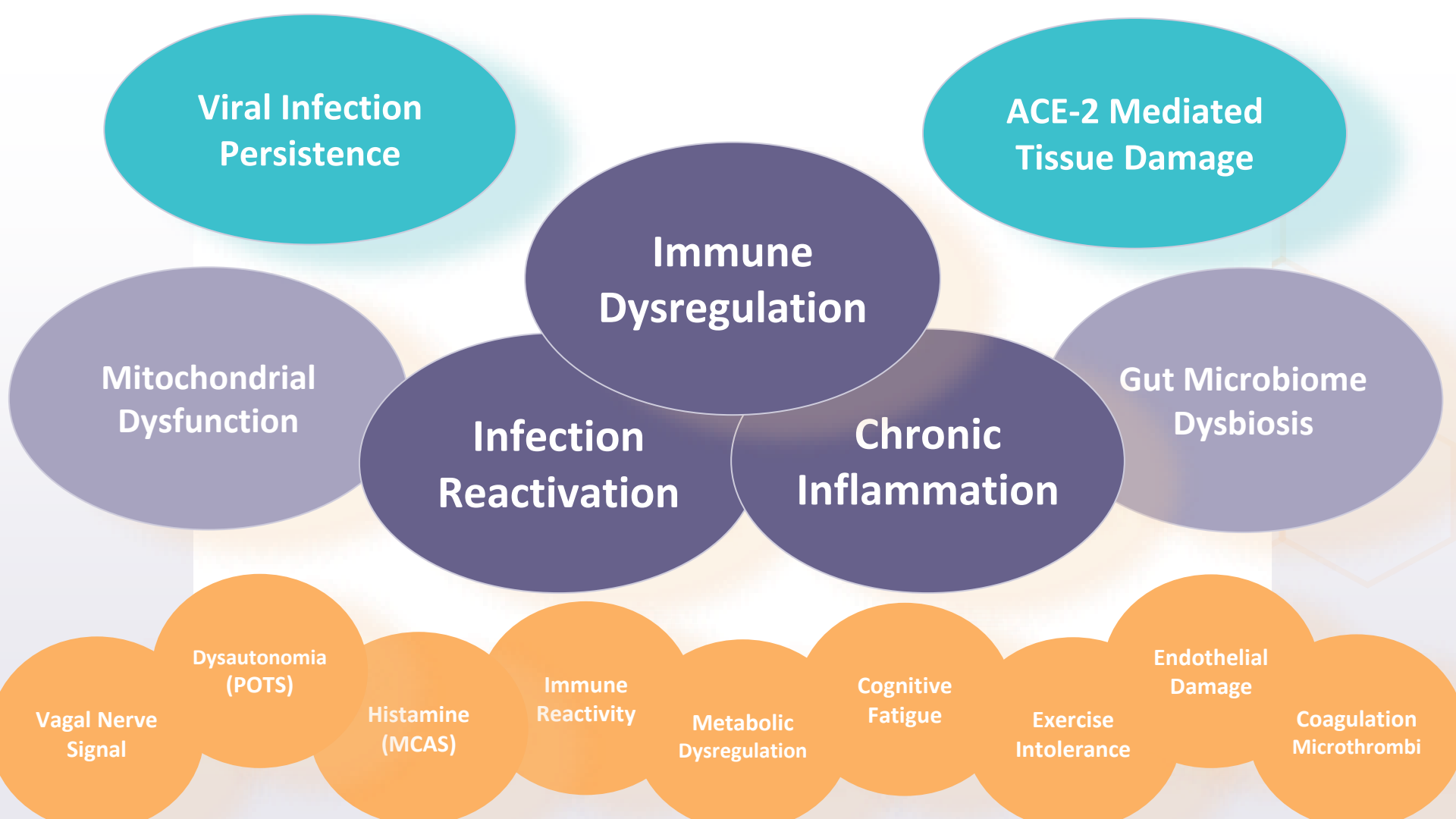
The brain in turn controls:

- 1) Mucus and biofilm production
- 2) GI tract motility
- 3) intestinal permeability
- 4) immune function



Vagus Nerve and the Gut Microbiome





PROGRAM AND PROTOCOL OVERVIEW



KEY LIFESTYLE INTERVENTIONS OVERVIEW

- Food, Nutrition + Supplements
- Restorative Sleep
- Movement & Exercise
- Stress Modification
- Social Connection





RESOURCES

www.ovationlab.com/Resources



POST VIRAL RECOVERY PROGRAM

Resources for Providers and Patients



Presented by



Research and Program Development Sponsor



UPCOMING EVENTS

A ROOT-CAUSE APPROACH TO LONG COVID IN THE POST-PANDEMIC ERA



ANDHEALTH OVATIONLAB


Wednesday, September 27th
7 pm ET/4 pm PT

WORKSHOP REPLAYS

POST VIRAL RECOVERY IN THE COVID ERA
WORKSHOP NO. 1



POST VIRAL RECOVERY A 90-DAY PROGRAM AND PROTOCOL
WORKSHOP NO. 2




POST VIRAL RECOVERY LIFESTYLE INTERVENTIONS, CASE STUDIES & LEARNINGS
WORKSHOP NO. 3




PRACTITIONER RESOURCES AND TOOLS

FULLSCRIPT RESOURCES

- [Protocol Application with Fullscript](#) 
- If you do not have an active Fullscript account, please use [this link](#) to create your no-cost account.
- If you would like to prescribe the **specialty products only**, please use [this link](#).
- If you would like to prescribe the **full protocol** or make modifications to it, please use [this link](#).
- [Dispensary & individual patient discounts](#)

NUTRITIONAL SUPPLEMENT SELECTIONS

- [Supplement Selection](#) 
- [Fullscript Patient Protocol](#)

SAMPLE SURVEY INSTRUMENTS

- [LongCOVID Patient Intake Form](#)
 - [WHO Post COVID-19 CRF](#)
- [Timeline and Progression of Symptoms Table](#)
- [PROMIS29](#)
- [Post COVID Function Scale](#)
 - [The Post-COVID-19 Functional Status scale](#)

PATIENT CASES - Coming



PATIENT RESOURCES AND TOOLS

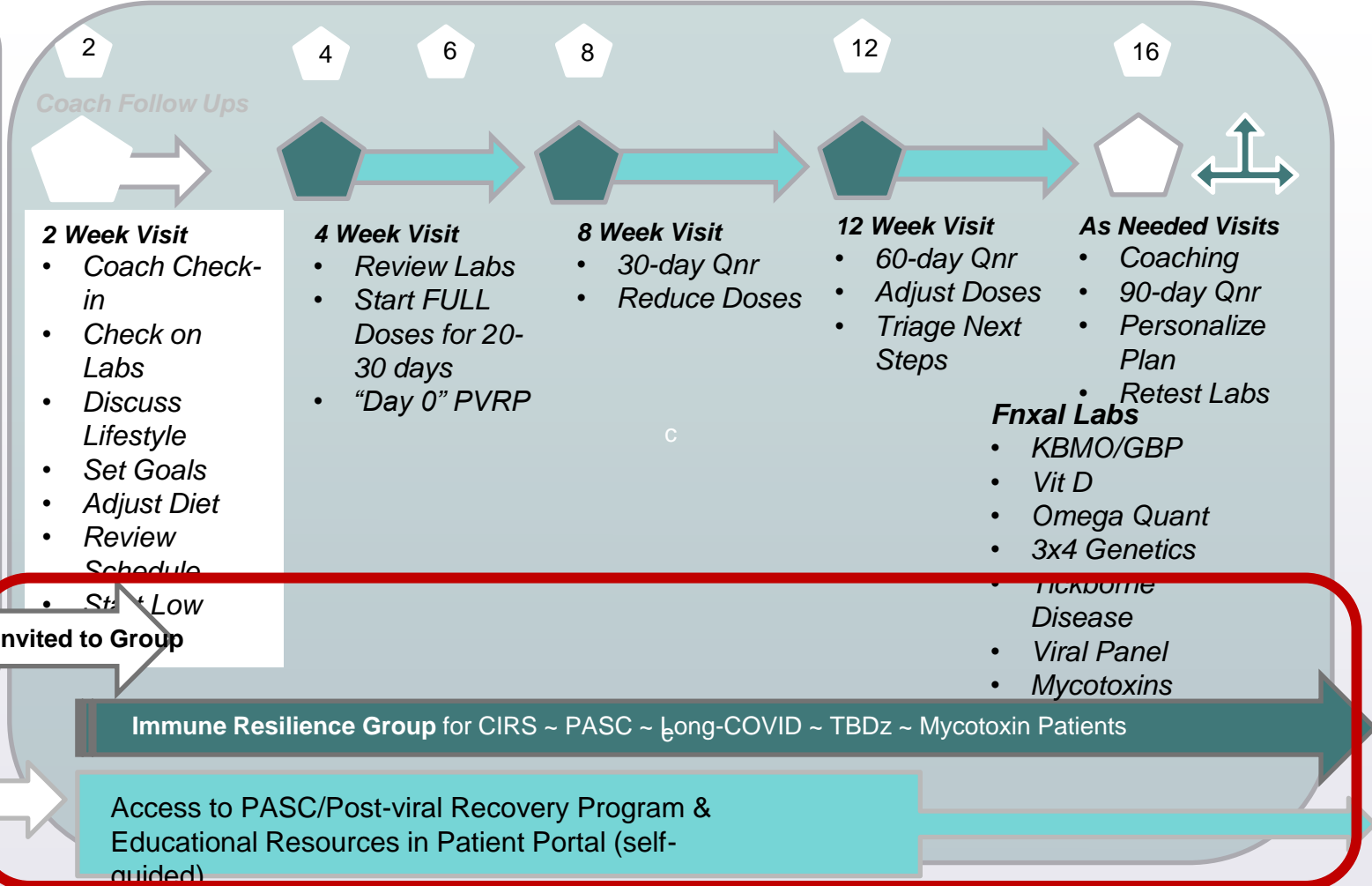
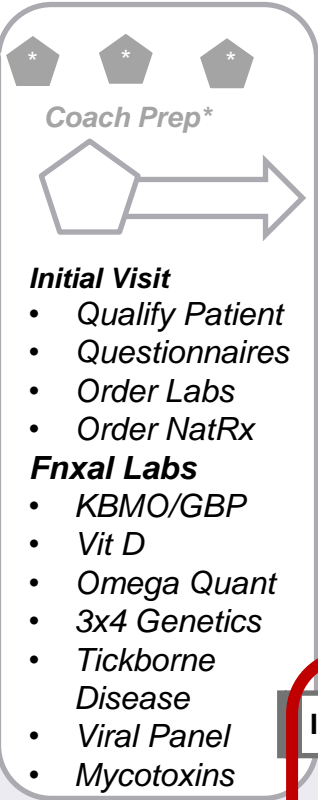
WHOLE30 PROGRAM RESOURCES

- [Program Rules](#) 📺
- [Plant-Based Whole30 Prep Pack](#)
- [Grocery Guide](#)
- [Shopping List](#)
- [Meal Planning](#)
- [Plant-Based Recipes](#)

LIFESTYLE INTERVENTION RESOURCES

- [How to Improve Sleep Hygiene](#)
- [Circadian Rhythms](#)
- [Stress Management](#)
- [Physical Activity and Stress](#)
- [Exercise Tolerance Assessment for Exercise Fitness & HR Recovery Instructions \(from Share Care\).](#)

- [WHO Support for Rehabilitation](#)
- [The Levine Protocol For Exercising With POTS - Better By The Beat](#)
- [Instructions for POTS Exercise Program—Children's Hospital of Philadelphia the Structure of the Training Calendars](#)
- [Coronavirus Recovery: Breathing Exercises | Johns Hopkins Medicine](#)
- [Bouncing Back From COVID-19](#)
- [5 At-Home Exercises for COVID-19 Recovery | Patient Care](#)





COVID-19

Life of the Long-hauler

Rest, Recovery, & Resilience for
PASC (Post-acute Sequelae Covid)

Life of the Long-hauler ~ Rest, Recovery, and Resilience for PASC

	Preventive Nutrition	Active Infection (SARS-CoV-2)	Post-acute Sequelae COVID	Long-haul COVID Syndrome
	<input type="checkbox"/> Fruits & Greens/Immune <input type="checkbox"/> GI Integrity <input type="checkbox"/> UltraBiotic Complete	<input type="checkbox"/> Fruits & Greens/Immune <input type="checkbox"/> GI Integrity <input type="checkbox"/> U/B Daily Multi-Strain	<input type="checkbox"/> GI Integrity <input type="checkbox"/> UltraBiotics Probiotic Pro <input type="checkbox"/> SporeProbiotic <input type="checkbox"/> UltraBiotic Defense	<input type="checkbox"/> GI Integrity <input type="checkbox"/> UltraBiotics Probiotic Pro <input type="checkbox"/> SporeProbiotic <input type="checkbox"/> UltraBiotic Defense
	<input type="checkbox"/> EPA/DHA 720 - 1000 <input type="checkbox"/> Omega Pure Complete <input type="checkbox"/> PRM Resolve	<input type="checkbox"/> EPA/DHA 720 - 1000 <input type="checkbox"/> Omega Pure Complete <input type="checkbox"/> PRM Resolve	<input type="checkbox"/> EPA/DHA 720 - 1000 <input type="checkbox"/> Omega Pure Complete <input type="checkbox"/> PRM Resolve	<input type="checkbox"/> EPA/DHA 720 - 1000 <input type="checkbox"/> Omega Pure Complete <input type="checkbox"/> PRM Resolve
	Foundational Nutrition <input type="checkbox"/> MVM/Mito Recharge <input type="checkbox"/> Nutri-ChelX/Glutathione <input type="checkbox"/> Immune Support <input type="checkbox"/> Vit D3 5000 w/K2 <input type="checkbox"/> Mag Calm Pro <input type="checkbox"/> Zinc Pro	Immune/Infection <input type="checkbox"/> Vitamin A <input type="checkbox"/> Vitamin C <input type="checkbox"/> Vit D3 5000 w/K2 <input type="checkbox"/> Glutathione <input type="checkbox"/> Immune Resilience <input type="checkbox"/> Zinc Pro <input type="checkbox"/> Mag Calm Pro Inflammation/Allergies <input type="checkbox"/> Inflam-eze Plus <input type="checkbox"/> Aller Pro/Quercitin Additional NatRxS <input type="checkbox"/> Tollovid <input type="checkbox"/> Arterosil	Oxidative Stress/Energy <input type="checkbox"/> Mito Recharge <input type="checkbox"/> CoQ10 <input type="checkbox"/> Glutathione Immune Resilience <input type="checkbox"/> Immune Support <input type="checkbox"/> Vit D3 5000 w/K2 <input type="checkbox"/> Mag Calm Pro <input type="checkbox"/> Zinc Pro <input type="checkbox"/> GI Defend Inflammation/Allergies <input type="checkbox"/> Dynamic Inflam-eze <input type="checkbox"/> Inflam-eze Plus <input type="checkbox"/> Aller Pro/Quercitin Additional NatRxS <input type="checkbox"/> Tollovid (90-day) <input type="checkbox"/> Arterosil	Microbiome <input type="checkbox"/> GI Defend <input type="checkbox"/> NutriCidin <input type="checkbox"/> Spectrum AR BioToxins/Mycotoxins <input type="checkbox"/> Lipo-flow <input type="checkbox"/> Detox Support <input type="checkbox"/> Glutathione <input type="checkbox"/> Sulforaphane Complex <input type="checkbox"/> Binder Pro Metabolic Balance <input type="checkbox"/> Gluco IR <input type="checkbox"/> Berberine Pro <input type="checkbox"/> CardioFlow Neuro-cognitive <input type="checkbox"/> Brain Support <input type="checkbox"/> Brain Restore <input type="checkbox"/> Neuro Balance

THANK

YOU



References

1. Su et al. [ISB]. Multiple early factors anticipate post-acute COVID-19 sequelae. *Cell*. 2022. Mar 3;185(5):881-895.e20. doi: 10.1016/j.cell.2022.01.014.
2. Yong, SJ [Malaysia]. Long COVID or post-COVID-19 syndrome: putative pathophysiology, risk factors, and mechanisms. *Infectious Diseases*. 2021. Oct;53(10):737-754. doi: 10.1080/23744235.2021.1924397.
3. Crook et al [UK]. LongCOVID – Mechanisms, risk factors, and management. *BMJ*. 2021 Jul 26;374:n1648. doi: 10.1136/bmj.n1648.
4. Peluso MJ, Deeks SP [UCSF]. Early clues regarding the pathogenesis of long-COVID. *Trends in Immunology*. 2022. Apr;43(4):268-270.doi: 10.1016/j.it.2022.02.008.
5. Proal AD, VanElzakker MB [PolyBio]. Long COVID or Post-acute Sequelae of COVID-19 (PASC): An Overview of Biological Factors That May Contribute to Persistent Symptoms. *Frontiers in Microbiology*. 2021. 12:698169. doi: 10.3389/fmicb.2021.698169
6. Merad M, Blish CA, Sallusto F, Iwasaki A. [Yale]. The Immunology and ImmunoPathology of COVID-19. *Science*. 2022. 375:1122-1127. doi: 10.1126/science.abm8108

References

7. Alzueta E, et al An international study of post-COVID sleep health. *Sleep Health*. 2022 Dec;8(6):684-690. doi: 10.1016/j.sleh.2022.06.011. Epub 2022 Sep 23. PMID: 36163137; PMCID: PMC9501615.
8. Burton A, Aughterson H, Fancourt D, Philip KEJ. Factors shaping the mental health and well-being of people experiencing persistent COVID-19 symptoms or 'long COVID': qualitative study. *BJPsych Open*. 2022 Mar 21;8(2):e72.
9. Coiro MJ, Asraf K, Tzischinsky O, Hadar-Shoval D, Tannous-Haddad L, Wolfson AR. Sleep quality and COVID-19-related stress in relation to mental health symptoms among Israeli and US adults. *Sleep Health*. 2021;7(2):127–33
10. Gupta R, Grover S, Basu A, Krishnan V, Tripathi A, Subramanyam A, et al. Changes in sleep pattern and sleep quality during COVID-19 lockdown. *Indian J Psychiatr*. 2020;62(4):370–378
11. <https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects/care-post-covid.html>

References

12. Jahrami HA, Alhaj OA, Humood AM, et al. Sleep disturbances during the COVID-19 pandemic: A systematic review, meta-analysis, and meta-regression. *Sleep Med Rev.* 2022;62:101591. doi:10.1016/j.smr.2022.101591
13. Jimeno-Almazán A, Pallarés JG, Buendía-Romero Á, Martínez-Cava A, Franco-López F, Sánchez-Alcaraz Martínez BJ, Bernal-Morel E, Courel-Ibáñez J. Post-COVID-19 Syndrome and the Potential Benefits of Exercise. *Int J Environ Res Public Health.* 2021 May 17;18(10):5329. doi: 10.3390/ijerph18105329. PMID: 34067776; PMCID: PMC8156194.
14. Kim H, Rebholz CM, Hegde S, LaFiura C, Raghavan M, Lloyd JF, et al. Plant-based diets, pescatarian diets and COVID-19 severity: a population-based case–control study in six countries. *BMJ Nutrition, Prevention & Health.* 2021 May 18;
15. Lamontagne S.J., Pizzagalli D.A., Olmstead M.C. Does inflammation link stress to poor COVID-19 outcome? *Stress Health.* 2021;37(3):401–414.
16. Medawar E, Huhn S, Villringer A, Veronica Witte A. The effects of plant-based diets on the body and the brain: a systematic review. *Transl Psychiatry.* 2019 Sep 12;9(1):226. doi: 10.1038/s41398-019-0552-0. PMID: 31515473; PMCID: PMC6742661.

References

17. R. Zion a, Kengthsagn Louis a, Rina Horii a b, Kari Leibowitz a, Lauren C. Heathcote c d, Alia J. Crum. Making sense of a pandemic: Mindsets influence emotions, behaviors, health, and wellbeing during the COVID-19 pandemic. *Social Science & Medicine*. Volume 301, May 2022, 114889
18. Sandrini L., Ieraci A., Amadio P., Zara M., Barbieri S.S. Impact of acute and chronic stress on thrombosis in healthy individuals and cardiovascular disease patients. *Int. J. Mol. Sci.* 2020;2
19. Schou TM, Joca S, Wegener G, Bay-Richter C. Psychiatric and neuropsychiatric sequelae of COVID-19 - A systematic review. *Brain Behav Immun.* 2021 Oct;97:328-348. doi: 10.1016/j.bbi.2021.07.018. Epub 2021 Jul 30.
20. Semyachkina-Glushkovskaya O, Mamedova A, Vinnik V, Klimova M, Saranceva E, Ageev V, Yu T, Zhu D, Penzel T, Kurths J. Brain Mechanisms of COVID-19-Sleep Disorders. *Int J Mol Sci.* 2021 Jun 28;22(13):6917. doi: 10.3390/ijms22136917. PMID: 34203143;

References

21. Storz MA. Lifestyle Adjustments in Long-COVID Management: Potential Benefits of Plant-Based Diets. *Curr Nutr Rep.* 2021 Dec;10(4):352-363. doi: 10.1007/s13668-021-00369-x. Epub 2021 Sep 10
22. Taquet M, et al. Neurological and psychiatric risk trajectories after SARS-CoV-2 infection: an analysis of 2-year retrospective cohort studies including 1 284 437 patients. *Lancet Psychiatry.* 2022;9:815–827. doi: 10.1016/S2215-0366(22)00260-7.
23. Wang S, Li Y, Wang S, Li Y, Yue Y, et al. Adherence to Healthy Lifestyle Prior to Infection and S, Li Y, Yue Y, et al. Adherence to Healthy Lifestyle Prior to Infection and Risk of Post-COVID-19 Condition. *JAMA Intern Med.* 2023;183(3):232–241.
24. Yavropoulou MP, Tsokos GC, Chrousos GP, Sfrikakis PP. Protracted stress-induced hypocortisolemia may account for the clinical and immune manifestations of Long COVID. *Clin Immunol.* 2022 Dec;245:109133.

References

25. Davis, HE, McCorkell, L, Vogel, JM et al. Long COVID: major findings, mechanisms and recommendations. *Nat Rev Microbiol* 21, 133–146 (2023). <https://doi.org/10.1038/s41579-022-00846-2>
26. Chen, B, Julg, B, Mohandas, S, & Bradfute, SB (2023). Viral persistence, reactivation, and mechanisms of long COVID. *eLife*, 12. <https://doi.org/10.7554/elife.86015>
27. Singh, KK, Chaubey, G, Chen, JY, & Suravajhala, P. (2020). Decoding SARS-CoV-2 hijacking of host mitochondria in COVID-19 pathogenesis. *American Journal of Physiology-cell Physiology*, 319(2), C258–C267. <https://doi.org/10.1152/ajpcell.00224.2020>
28. Sack, MN (2018). Mitochondrial fidelity and metabolic agility control immune cell fate and function. *Journal of Clinical Investigation*, 128(9), 3651–3661. <https://doi.org/10.1172/jci120845>
29. Turner, S, Khan, MA, Putrino, D, Woodcock, A, Kell, DB, & Pretorius, E. (2023). Long COVID: pathophysiological factors and abnormalities of coagulation. *Trends in Endocrinology and Metabolism*, 34(6), 321–344. <https://doi.org/10.1016/j.tem.2023.03.002>

References

30. Nalbandian, A, Sehgal, K, Gupta, A, . . . Wan, E. (2021). Post-acute COVID-19 syndrome. *Nature Medicine*, 27(4), 601–615. <https://doi.org/10.1038/s41591-021-01283-z>
31. Kell, DB, Laubscher, GJ, & Pretorius, E. (2022). A central role for amyloid fibrin microclots in long COVID/PASC: origins and therapeutic implications. *Biochemical Journal*, 479(4), 537–559. <https://doi.org/10.1042/bcj20220016>
32. Wong, AC, et al (2023). Serotonin reduction in post-acute sequelae of viral infection. *Cell*. <https://doi.org/10.1016/j.cell.2023.09.013>
33. Freedberg, DE, & Chang, L. (2022). Gastrointestinal symptoms in COVID-19: the long and the short of it. *Current Opinion in Gastroenterology*, 38(6), 555–561. <https://doi.org/10.1097/mog.0000000000000876>
34. Wang S, Li Y, Wang S, Li Y, Yue Y, et al. Adherence to Healthy Lifestyle Prior to Infection and S, Li Y, Yue Y, et al. Adherence to Healthy Lifestyle Prior to Infection and Risk of Post-COVID-19 Condition. *JAMA Intern Med*. 2023;183(3):232–241.

References

35. Kim H, Rebholz CM, Hegde S, LaFiura C, Raghavan M, Lloyd JF, et al. Plant-based diets, pescatarian diets and COVID-19 severity: a population-based case–control study in six countries. *BMJ Nutrition, Prevention & Health*. 2021 May 18;
36. Pena-Orbea, C, et al. (2023) Sleep Disturbance severity and correlation in post-acute dequela of COVID-19 (PASC) *Journal of Gneral Internal Medicine*
37. Feter N, et al. Physical activity and long COVID: findings from the Prospective Study About Mental and Physical Health in Adults cohort. *Public Health*. 2023 Jul;220:148-154. doi: 10.1016/j.puhe.2023.05.011. Epub 2023 Jun 13. PMID: 37320945; PMCID: PMC10263464.
38. Kohli et al. Thrombosis and Inflammation—A Dynamic Interplay and the Role of Glycosaminoglycans and Activated Protein C. *Frontiers in Cardiovascular Medicine*. 2022;9. doi:www.frontiersin.org/articles/10.3389/fcvm.2022.866751
39. Saltiel D. The effects of Rhamnan Sulfate from *Monstoma nitidum*: A vascular-focused literature review. *Alt Therapies*. 2023 May;29(4):24-26. PMID: 37164033

References

40. He J et al. Potential of coronavirus 3C-like protease inhibitors for the development of new anti-SARS-CoV-2 drugs: Insights from structures of protease and inhibitors. *Int J Antimicrob Agents*. 2020 Aug;56(2):106055. doi: 10.1016/j.ijantimicag.2020.106055.
41. Lee DYW, Li QY, Liu J, Efferth T. Traditional Chinese herbal medicine at the forefront battle against COVID-19: Clinical experience and scientific basis. *Phytomedicine*. 2021 Jan;80:153337. doi: 10.1016/j.phymed.2020.153337.
42. Shi S et al. Oral Chinese Herbal Medicine on Immune Responses During Coronavirus Disease 2019: A Systematic Review and Meta-Analysis. *Front Med (Lausanne)*. 2022 Jan 21;8:685734. doi: 10.3389/fmed.2021.685734.
43. Singh, KK et al.. Decoding SARS-CoV-2 hijacking of host mitochondria in COVID-19 pathogenesis. *American Journal of Physiology-cell Physiology*. 2020. 319(2), C258–C267. <https://doi.org/10.1152/ajpcell.00224.2020>
44. Kennedy DO. B Vitamins and the Brain: Mechanisms, Dose and Efficacy--A Review. *Nutrients*. 2016;8(2):68. doi: 10.3390/nu8020068. PMID: 26828517.

References

40. Zhang D et al. Gut microbiota dysbiosis correlates with Long COVID-19 at one-year after discharge. *J Korean Med Sci.* 2023 Apr 17;38(15):e120. doi: 10.3346/jkms.2023.38.e120. PMID: 37069814
41. Zhang L et al. Gut microbiota-derived synbiotic formula (SIM01) as a novel adjuvant therapy for COVID-19: An open-label pilot study. *J Gastroenterol Hepatol.* 2022 May;37(5):823-831. doi: 10.1111/jgh.15796.PMID: 35170078
42. Vakili K, et al. The contribution of gut-brain axis to development of neurological symptoms in COVID-19 recovered patients: A hypothesis and review of literature. *Front Cell Infect Microbiol.* 2022 Dec 22;12:983089. doi: 10.3389/fcimb.2022.983089. PMID: 36619768; PMCID: PMC9815719.
43. Boldrini M, Canoll PD, Klein RS. How COVID-19 Affects the Brain. *JAMA Psychiatry.* 2021 Jun 1;78(6):682-683. doi: 10.1001/jamapsychiatry.2021.0500. PMID: 33769431; PMCID: PMC9894299.