

## Long COVID 19 & Homoeopathy

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### Abstract

Since the late 2019, the COVID 19 has had a series of illnesses in patients who had an attack of infection. These symptoms exist in patients even long after the recovery phase. These are called the long COVID syndromes. The current article examines the contribution of Homoeopathy to deal with these long COVID issues. The article traces the syndrome in its major forms & its implications on other aspects of the body. Thereafter, it deals with the subject of the changing face of the pattern of symptoms through the dimension of how, why, when, where and whom of these patterns. Following that the burden of the long COVID is explained through the social & economic impacts that it has exerted while perpetuating poverty. Taking cue from one of the elaborate & established books in the Homoeopathic world, it deals with what Homoeopathy had offered, is offering & the potential to offer in the future to deal with this long COVID pandemic.

**Keywords:** Homoeopathy, Long COVID, Long Haulers, Post COVID Syndrome.

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### INTRODUCTION [8, 13]

In the past, in the 20<sup>th</sup> century, Homoeopathy had been used successfully for ARIs (Acute Respiratory Infections) like influenza, whooping cough, flu. One such use in the epidemic was during the Spanish flu in 1918-20. In the 21<sup>st</sup> century, with COVID 19 affecting the respiratory system in a great way, Homoeopathy has not only dealt the respiratory symptoms but also the whole issue of COVID 19. The major issue is that the treatment of long COVID through Homoeopathy has not been reflected on a large scale. This is the only therapeutic system that can deal with these arrays of long COVID economically, effectively & without side effects. The long term effects of Homoeopathy on the human body will just add another feather while addressing better absorption & assimilation of the food consumed that are distributed to the households through the Public Distribution System. Thus the poor households will be food secured while the rich households will be nutrition secured.

#### About Long COVID [1, 2]

Long COVID is the collective term to denote persistence of symptoms in those who have recovered

from SARS-COV-2 infection. The symptoms include fatigue, cough, chest tightness, palpitations, myalgia & difficulty to focus & the term long haulers was used by Watson & Young.

These symptoms could be related to organ damage, post viral syndrome, post critical care syndrome where the clinical care is evaluated using patho-physiology. In people without history of COVID but showing symptoms like long COVID, serology will confirm the diagnosis.

#### Cluster of Symptoms of COVID 19 [3-5]

In case of a breakthrough infection, vaccinated people are substantially less likely to develop 'Long COVID' syndrome that can last for months after recovery from an initial infection. Individuals most likely to develop long COVID are older people, women & especially those who experience five or more symptoms. The nature & order of symptoms that included fatigue, headache, and shortness of breath & loss of smell did not matter.

The COVID 19 study group in UK identified six clusters of symptoms. This are-

1. 'Flu like with no fever'- headache, loss of smell, muscle pain, cough, sore throat, chest pain.
2. 'Flu like with fever'- headache, loss of smell, cough, sore throat, hoarseness, fever, loss of appetite.
3. 'Gastrointestinal'- headache, loss of smell, loss of appetite, diarrhoea, sore throat, chest pain, no cough.
4. 'Severe level one fatigue'- headache, loss of smell, cough, fever, hoarseness, chest pain, fatigue.
5. 'Severe level two confusion'- headache, loss of smell, loss of appetite, cough, fever, hoarseness, sore throat, chest pain, fatigue, confusion, muscle pain.
6. 'Severe level three, abdominal & respiratory-headache, loss of smell, loss of appetite, cough, fever, hoarseness, sore throat, chest pain, fatigue, confusion, muscle pain, shortness of breath, diarrhoea, abdominal pain.

People with 4,5,6 group of symptoms were found to be older, frailer, overweight, have pre existing conditions as diabetes & lung disease than those with the other three groups.

#### **Other manifestations [6]**

Cutaneous manifestations, hair disorders & nail abnormalities occur in COVID 19 patients after the initial phase of infection. All these also come under the domain of Long COVID. Maculopapular rash & urticaria are the commonest skin manifestations. Increased hair shedding with a female predominance are also common hair related problems. Patients with moderate, severe & critical infections experience significantly more hair shedding than those with asymptomatic & mild diseases. Nail problems like Chromonychia & brittle nails are also common in patients with long COVID.

#### **Burden of Long COVID in India [13, 15]**

COVID 19 has already burdened India largely in 2020. It is estimated that number of poor people with income less than ₹ 150 per day or less increased from 6 crores to 13.4 crores. In comparison to 2019, the number of poor people increased in India by 7.5 crores by early 2021. Further, the economic recession in 2020 shrunk the middle class by 3.2 crores in numbers. The middle class shrank from 9.9 to 6.6 crores. This was because of the first two waves that included the VOC Delta. The transmissible rate of Omicron is five times more than the Delta strain. Hence, the huge burden can be gauged if third wave in the form of Omicron emerges in India. Further, the cases of Long COVID has pushed people to abject poverty because of loss of income & ever increasing house hold level expenditure on treatment.

#### **Long COVID to stay longer in India [16]**

Epidemiologists have drawn analogy with Influenza epidemic & COVID 19. The epidemiology of

influenza type A virus & COVID 19 shows that the 1957 pandemic due to H2N2 emerged when H1N1 of 1918 pandemic was still in circulation as endemic or seasonal. In 1968, H3N2 replaced H2N2 as pandemic & the 2009 pandemic was due to H1N1pdm09 that borrowed genes from swine influenza & since then both H3N2 & H1N1pdm09 are in circulation globally as endemic or seasonal.

Similarly Omicron with antigenic shift & compromised cross reactivity may not displace Delta variant. Omicron being more transmissible in 2022, both Delta & Omicron might co-circulate & that will require vaccines against all variants of SARS CoV-2, Omicron & its future variants, if any.

This suggests clearly that the virus will not go away sooner and the list of needed vaccines will get longer in future. As the virus stays on, cases will also stay longer & continue to be clubbed as long COVID cases.

It is here that homoeopathy being individualistic based therapeutic system will come handy not only at the national level but also at the global level.

#### **Homoeopathic approach- Current situation [12, 14, 17]**

The long COVID comes under the domain of respiratory, cardiovascular, nervous & musculoskeletal systems. The Essential Drug List (EDL) of Homoeopathy mentions the disorders of these systems under many disorders for which a list of 233 medicines besides the 12 biochemics, ointments & drops. The preferred potencies of the 233 medicines are only color coded with a color index. There is no clarity for which the medicine is to be given. It is highly vague & broad as it is a guideline only.

Another document in the public domain is the 7<sup>th</sup> training module of ASHAs where a few homoeopathic medicines are mentioned against their therapeutic uses for the dissemination of the information by ASHAs at the community level. The drug kit supplied to ASHA by the states does not have homoeopathic medicines.

Besides this, the ministry of AYUSH had suggested 'Arsenic Album' as the medicine for COVID 19 back in January 2020. Thereafter, the virus has undergone so many changes along with the preventive & curative approaches in modern medicine but as of today, the January 2020 press release remains the only directive to the public.

#### **Homoeopathic treatment protocol [9-15]**

There is no treatment for long COVID patients in modern medicine. All the new anti-virals are with side effects. Homoeopathy has well proved &

established medicines which are already more than two centuries old.

The current article does not try to repeat the *Materia Medica* related to multi systems affected therapeutics as long COVID affects multi systems of the body. Instead, it approaches Homoeopathy through the eyes of the evolving methodical approach or the cluster approach as mentioned above. Similarly, it also deals with therapeutics for other manifestations.

As the long COVID is pervasive in multi system of the human body, prescriptions need to be tailored made for each of the six clusters described above. All the prescriptions for all cases are to be in repeated doses at least for a month.

For the first cluster, prescribe ‘Thyroidinum’ in potencies as this medicine is contraindicated in febrile cases & this cluster has no fever.

For the second cluster, prescribe ‘Actetanilidum’ in potencies as this cluster is febrile. For the third cluster, prescribe ‘Dysentery Compound’ in potencies as this cluster is primarily GI related. This bowel nosode is related to ‘Arsenic Album’, the medicine advised by AYUSH ministry.

For the fourth cluster, prescribe ‘Amyl Nitrosus’ in potencies as it will deal with the chest pain & reduce the fatigue.

For the fifth cluster, prescribe ‘Acid Phos’ in potencies since it will deal with brain fog, confusion & fatigue as well.

For the sixth cluster, prescribe ‘Dysentery Compound’ for GI, ‘Grindelia S’ in mother tincture for respiratory & ‘Acid Phos’ for the brain fog & confusion.

We all should also prescribe Prednisolone in potency for all cases as it will not allow the inflammation to proceed in the body.

For the common symptoms in all the clusters like headache & loss of smell, prescribe ‘Usnea Barbata’ in mother tincture & ‘Arundo’ in potencies for loss of smell.

For all the clusters, prescribes ‘Mustard’, the Bach Flower remedy in 30<sup>th</sup> potency as it will deal with the mental health while addressing depression in all the long COVID cases. They are most likely to be depressed because of the longer duration of the morbidity.

For other manifestations like hair fall, prescribe ‘Thallium’ in potencies for all cases. In skin rashes & urticaria, prescribe ‘Astacus Fluvialis’ in

potencies for all cases. For brittle nails, prescribe ‘Bovista’ in potencies for all cases. For chromonychia, prescribe ‘Magnetis Polus Australis’ in potencies for all cases.

‘Syphilinum’ in potencies can be prescribed weekly for all cases as all these cases have ‘syphilitic’ miasm in the background.

Taking cue from the clinical experiences of the lead author, the above prescriptions are based on ‘Nosodes, Sarcodes & Key-note’ method of prescription in homoeopathy. These medicines will also prevent the population from spreading the disease as well as reduce morbidity & mortality.

These medicines are immune boosters, excellent modulators & pave the way for the body to respond to treatment positively. The importance of the issue of underlying inflammation is critical as co-morbid patients are more prone to repeated infections.

## CONCLUSION [11]

Many Homoeopaths may not agree to the concept mentioned above. The point is that targeted & treatment protocol homoeopathic approaches have to be followed in dealing with issues of public health. This approach aims to reduce mortality & morbidity & homoeopathy will lag behind if it does not address mortality. The homoeopathic fraternity has to adhere to the emerging challenges of viral diseases to allow homoeopathy to come to the limelight. Conventional homoeopathy is OK in private practice & in educational institutions but when you want to address masses; homoeopathy has to complement the existing treatment protocol guidelines that are in use. This long COVID phenomenon is here to stay. The long COVID will be severe if the cases take emergency use drugs as these are to exacerbate the cases only. Homoeopathy has a big role to play to prepare the masses especially the children & the old to deal with multi factorial health problems while strengthening their various systems. Adhering to the new approach through a standardized treatment protocol will only strengthen homoeopathic system of therapeutics in the long run thereby enabling it to deal with emerging challenges in future.

These Corona viruses won’t go from our lives as suggested by epidemiologists. They will continue to mutate & new variants will continue to emerge. It is not possible for the man kind to wait for vaccines for each variant. No vaccine can be a panacea for the emerging variants. It is here that the cost effectiveness & clinical effectiveness of Homoeopathy will come handy for the public & private health systems while dealing with masses.

## DECLARATION

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## Conflict of interest

There is no conflict of interest regarding this article.

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