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What To Do in Case of Post-/Long-COVID Syndrome

Naturopathic Treatment Options

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We speak of Post-COVID syndrome when the symptoms or consequential damage persist four weeks after the initial infection, which is actually over after two to three weeks. All symptoms that persist for more than eight weeks are called Long-COVID.

The coronavirus can probably remain in the body for up to 270 days and the affected patients can have to deal with secondary diseases for up to two years. The symptoms can continue, recur as new and/or fluctuate. However, it has been shown that a not inconsiderable proportion of patients have to struggle with medical and psychological long term and later consequences. In some cases, an "endless COVID" is even being discussed. Viral infections can lead to the development of post-viral symptoms such as pronounced fatigue, muscle pain and neurocognitive problems, some of which last long beyond the stage of acute illness. In some patients, the symptoms can even continue for months, become chronic and lead to considerable restrictions.

Many of the symptoms probably represent inflammatory processes, as a result of a "wrong" confrontation of the immune system with the SARS-CoV-2 virus at the ACE-2 receptors resulting in a "cytokine storm" and/or autoantibody formation with agonistically active autoantibodies at G-protein coupled receptors (GPCRs) and/or MCAS (mast cell activation syndrome). For this reason, cortisone, NSAIDs, low-dose antidepressants, leukotriene antagonists (e.g. Montelukast), statins and sartans (AT1 antagonists) for anti-inflammation and H1/H2 blockers are primarily used as antihistamines on the medical side.

Post-COVID: Common symptoms at a glance

- Persistent fatigue (post-viral fatigue)
- Reduced load-bearing capacity [*resilience*]
- Attention and concentration disorders
- Pain in muscles and joints
- Headaches
- Cardiac problems
- Smell and taste disorders
- Breathing difficulties (fibrotic development)

Post-COVID: Common Symptoms

In the case of infections with SARS-CoV-2, it is remarkable that persistent post-viral fatigue – similar to chronic fatigue syndrome (CFS) – also occurs in mild courses and younger patients. CFS and Post-COVID fatigue are not to be equated with a simple state of exhaustion, because even minor demands are perceived as excessive demands and are accompanied by a chronic feeling of fatigue and a significant reduction in performance.

The most common Post-COVID symptoms are persistent fatigue, reduced resilience, pain in muscles and joints, smell and taste disorders, and attention and concentration disorders.

It can also be a cyclical disease, with symptoms that run through different organ systems and fluctuate in severity, which would also better explain the diagnostic "vagueness" in Post-COVID.

Possible Naturopathic Therapy

1. Reduction of extracellular toxic viral load (pathogen toxicosis)

Nosodes are often highly diluted pathogens or their toxins, which have a special affinity for the pathogens, the respective toxins or certain organs. Nosodes are used in the treatment and aftercare of chronic infections as so-called reaction agents when toxic therapy blockages are present in order to improve the body's own excretion and defense processes.

A therapeutic use of single and complex nosodes (e.g. Metabiarex N, Spenglersan Kolloid T) takes place in the case of toxic loads of bacterial and viral origin as well as vaccine damage. The best way to support the elimination is to therapeutically support the most important drainage organs liver, kidneys and lymph in parallel to detoxification. Of course, it is important to always drink enough fluids (e.g. 30 ml/kg body weight).

2. Regulation of the acid-base balance

In the context of chronification of Post-COVID Syndrome due to the residual toxic viral load in the connective tissue, an extra- and intracellular acidosis occurs. Patients are affected by a reverse effect of the sodium-potassium pump, resulting in intracellular potassium deficiency and sodium-flooding of the cell. This changes the homeostasis of the connective tissue, which results in the formation of free radicals (e.g. ROS, NOS) and the occupation of pain receptors by protons in the connective tissue. This promotes inflammatory and pain processes.

Therefore, it has been proven to rely on sodium-free and potassium-containing alkaline agents in therapy (e.g. Regulator Köhler Kps.). The parallel use of antioxidants may prove successful.

"As a result of the residual toxic load [...] immune derailments lead to persistent inflammatory processes in various organ areas."

3. Anti-inflammatory therapy against inflammation

Again, as a result of the residual toxic load of the connective tissue, as well as probably due to the so-called "viral reservoir" in various organs, immune derailments lead to persistent inflammatory processes in various organ areas. In addition, autoimmune-like reactions are also observed, which often leads to inflammation. Therefore, it is necessary to treat with naturopathic anti-inflammatory therapy (e.g. with curcumin, frankincense, enzymes, Omega-3 fatty acids, Pycnogenol®).

In parallel, it may also be necessary to work immunomodulatorily (e.g. with beta-D-glucans, zinc) due to the immune derailment. Especially when agonistically active autoantibodies (GPCRs) have formed, which can affect AT1-, beta-2 and M2 receptors.

4. Naturopathic accompanying and follow-up therapies

Naturopathic follow-up and/or accompanying therapies refer to the alleviation of the actual symptoms of Post-COVID Syndrome, which then appear as a result of the inflammation and the residual toxic viral load (e.g. fatigue, concentration disorders, muscle weakness, smell and taste disorders, circulatory disorders).

Therapy Examples for the Most Common Post-COVID Symptoms

Persistent fatigue (post-viral fatigue syndrome)

In this case, fatigue is more than "just" overtiredness, but:

- Inexplicable exhaustion,
- Disproportionate deterioration after exposure,
- Insomnia
- Lack of motivation and
- Concentration ability.

The fact that SARS-CoV-2 can make the blood-brain barrier more permeable leads to an infection of the central nervous system (CNS) as a result. At the same time, peripheral proinflammatory cytokines are elevated, which additionally damage the CNS.

As a result, central neuroinflammation and neurodegeneration occurs with psychiatric, psychological, and cognitive limitations.

Persistent fatigue is one of the most common Post-COVID symptoms.

As an additional consequence of the immunological "over" reactions, hypometabolism occurs in the cerebellum, as well as in the frontal lobe, with negative effects on sleep, emotional state and incentive [*motivation*]. In addition, SARS-CoV-2 leads to inflammation of the muscles, resulting in pronounced muscle weakness.

For this reason, Slovak scientists have tested the hypothesis that SARS-CoV-2 restricts mitochondrial energy production in the form of ATP and thus also endogenous CoQ10 biosynthesis and is thus partly responsible for the development of muscle weakness in the context of Post-COVID due to reduced ATP formation⁽¹⁾. To do this, they examined ten patients after an acute COVID-19 infection and 15 healthy people. They isolated blood platelets from the test subjects, which are considered an easily accessible source of mitochondria. It was found that in patients after an acute COVID-19 infection, the respiratory chain function, oxidative phosphorylation and endogenous CoQ10 concentration were reduced. This subsequently leads to reduced ATP formation and thus to a reduced form of energy supply, which in turn can promote muscle weakness later on.

Thus, CoQ10 as well as carnitine supplementation and rehabilitation with appropriate physiotherapies would improve mitochondrial health and promote the recovery of patients! Thus, both the mitochondrial function of blood platelets and their CoQ10 content could absolutely serve as a valuable biomarker in Post-COVID diagnostics. Unfortunately, even slight overexertion can suddenly worsen the existing fatigue!

"Basic therapy" (approx. 6-8 weeks)

Detoxification and drainage

Detoxification (example):

- Metabiarex N Tr. 100.0 (metafackler); Dosage: 3 x daily 30 drops
 - In daily alternation with: Metavirulent Tr. 100.0 (metafackler); Dosage: 3 x daily 30 drops
- or
- Spenglersan Kolloid T (Meckel Spenglersan); Dosage: 3 x daily 5-10 sprays in the mouth
 - Alternating daily with: Spenglersan Kolloid G (Meckel Spenglersan); Dosage: 3 x daily 5-10 sprays in the mouth

Parallel detoxification (example):

- Metaheptachol Tr. (metafackler)
- Metasolitharis Tr. (metafackler)
- Lymphdiaral Tr. (Pascoe) 50.0
- M.f.s. dent. tales dosage 3 x daily 30 drops

Parallel regulation of the acid-base balance (example):

- Regulator Köhler Kps.(Köhler Pharma); Dosage: 2 caps in the evening.

Only parallel treatment of inflammation or inflammation and procoagulation (example):

- Curcusol Köhler Kps. (Köhler Pharma); Dosage: 1 x daily 2 caps.
- or
- Therazym Tbl. (Köhler Pharma); Dosage: 3 x daily 1 Tbl.

Accompanying or follow-up therapy

Against tiredness and exhaustion:

- Rosenwurz sanitas Kps. (sanitas); Dosage: 1 x daily 1 cap.
 - Ashwagandha biolife sanitas Kps. (sanitas); Dosage: 1 x daily 1 cap.
- or one of these remedies:
- Phytocortal N Tr. (Steierl); Dosage: 3 x daily 50 drops
 - Gemmokomplex Nerven plus Dr. Koll (Dr. Koll Biopharm); Dosage: 2 x daily 30 drops

In case of parallel sleep disorders:

- Alluna Schlaf Tbl. (Repha); Dosage: 1 hour before going to bed in the evening 1-2 tablets.
- Trias Kps. (Köhler Pharma); Dosage: shortly before bedtime 1 cap.

Difficulty breathing, shortness of breath, cough, possibly pulmonary fibrosis

These are the second most common Post-COVID symptoms. It is not uncommon for dyspnea to develop. In most cases, however, there is no permanent damage to the lung tissue as a result.

"Basic therapy" (approx. 6-8 weeks)

Detoxification and elimination:

as described above

Parallel regulation of the acid-base balance (example):

as described above

Parallel treatment of inflammation:

- Soledum Kps. (M.C.M. Klosterfrau); Dosage: 3 x daily 2 caps.
or one of these remedies:
- Ribes nigrum Dr. Koll Tr. (Dr. Koll Biopharm) + Rosa canina Dr. Koll Tr. (Dr. Koll Biopharm); Dosage: 2 x daily 30 drops
- Angocin Antiinfekt Tbl. (Repha); Dosage: 3 x daily 4-5 Tbl.

Parallel treatment of procoagulation:

- Therazym Tbl. (Köhler Pharma); Dosage: 3 x daily 1 Tbl.

Accompanying or follow-up therapy

In case of a persistent cough

- Bronchicum Tr. 50.0 (M.C.M. Klosterfrau); Dosage: 3 x daily 30 drops

For dry cough:

- Verbascum comp. Lsg. Weleda 50.0 (Weleda); Dosage: 3 x daily 10-20 drops
or
- Pulmosan Tr. (Steierl); Dosage: 3 x daily 30 drops

Reduction of the viral load in the lung epithelial cells:

- Spermidine Köhler Kps. (Köhler Pharma); Dosage: 1 x daily 1 cap.

Antifibrotic therapy:

- Dr. Koll Complex Schneeball + Haselnuss (Dr. Koll Biopharm); Dosage: 2 x daily 30 drops

Concentration and memory disorders (brain-fog)

These are the third most common Post-COVID symptoms and are often compared to chemo-fog ("feeling foggy" as a result of chemotherapy, resulting from hepatic encephalopathy caused by chemotherapy). People who come from an intensive care unit are probably more often affected.

"Basic therapy" (approx. 6-8 weeks)

as described above

Accompanying or follow-up therapy

Against concentration disorders/cognitive disorders:

- Nergon Köhler Kps.(Köhler Pharma); Dosage: 2 x daily 1 cap.
- AOCT Kps. (Bad-Apotheke Bad Rothenfelde); Dosage: 2 x daily 1 cap.
- Rekonvit Köhler Kps. (Köhler Pharma); Dosage: 3 x daily 1 cap.

Cardiovascular problems, arrhythmias, myocarditis

Studies showed inflammation of the heart muscle and increased troponin levels in two out of three recovered COVID-19 patients. Numerous ACE-2 receptors on the heart cause infections with inflammatory reactions. There is damage to the muscle fibrils, with the result of endothelial damage and an increased risk of thrombosis and orthostatic problems.

"Basic therapy" (approx. 6-8 weeks)

as described above

Accompanying or follow-up therapy

Against arrhythmias:

- Trophicard Köhler NE Tbl. (Köhler Pharma); Dosage: 3-4 tbl. daily
- Bomacorin 450mg Tbl. (Hevert); Dosage: 2 x daily 1 Tbl.

Thrombosis prevention:

- Nodys Kps. (Köhler Pharma); Dosage: 2 x daily 2 caps.
or one of these remedies:
- Syntrival Tbl. (Wörwag); Dosage: 1 x daily 1 Tbl.
- Vitazell Omega Kps. (Köhler Pharma): Dosage: daily. 2 caps

Loss of smell and taste

As a result of the infection, inflammation and damage to the olfactory center in the area of the root of the nose and inflammation of the taste buds on the tongue occur. This leads to a loss of smell and taste.

"Basic therapy" (approx. 6-8 weeks)

as described above

Accompanying or follow-up therapy

Against the loss of smell and taste:

- Unizink 50 Tbl. (Köhler Pharma); Dosage: daily 2 Tbl.
- Schüssler Salt No. 8 Sodium chloratum D6 Tbl. (Pflüger); Dosage: 3 x daily 2 Tbl.
- Supplement No. 21 Zincum chloratum D6 Tbl. (Pflüger); Dosage: 3 x daily 2 Tbl.

Possible Other Post-Covid Symptoms and Treatment Options:

- Hyperthyroidism (Hewethyreon Tabl.)
- Muscle and joint pain (Weihrauch Köhler Kps.)
- Headaches (Biodolor Tr. Pflüger)
- Nerve disorders (neuropathies) (Calcium EAP Kps. Köhler)
- Depression and anxiety disorders (St. John's Wort or Kava kava)
- Elevated liver values (Legalon 156 caps./Pangea caps.)
- MIS-C (Multisystem Inflammatory Syndrome) in Adolescents
- COVID-Zeh (Therazym Tbl.)
- Visual disturbances due to retinal damage (e.g. Vitazell Video Caps.)

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