

## Letter to Editor

# Case Report of Successful Lung Therapy in COVID-19

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As in many countries COVID-19 infection levels are high, consecutively many patients develop the severe form of the disease whilst the capacity of clinics is limited. SARS-CoV-2 is acting unfortunately on different levels, once infected there is no single drug able to prevent the ongoing disease. I would like to share my personal experience because it might help to prevent lung damage with simple and available remedies.

March 2020, aged 52 years, I got infected two times, the 11th and the 17th, by a double exposition to SARS-CoV-2 during several hours. The onset of a severe clinical form of the disease followed. No PCR-test was possible at that time.

The 19th of March the symptoms started. They disappeared at about the 29th, but the 30th March retrosternal pain began associated to a beginning pulmonary dysfunction, accompanied by serious neurologic troubles. I suffocated while breathing normally and therefore a hypoxemia was more than possible. Hypoxia means reactive oxygen (ROS) and reactive oxygen nitrogen species (RNOS) occur. In the meantime their interference in COVID-19 has been proven.

In the Center of Oxygen, Research and Development, where I worked during my PhD studies on hypoxia, ROS and RNOS, my fellow researchers and colleagues examined the antioxidant properties of vitamin C, E, selenium, curcumin and resveratrol. Reseveratrol is found in highest levels in red wine like Pinot Noir. With the beginning of the pulmonary dysfunction I started the intake of several nutrients present at home as I was not sure medical doctors in a clinic would accept my hypothesis.

The pulmonary function decreased in a spectacular way during three days and stabilized then. A week later the improvement started.

The therapy was threefold: Increasing blood oxygen saturation, sustaining enzymes such as the glutathione peroxidase and intake of antioxidants.

In order to charge the blood physically with more oxygen the respiration pattern was voluntary increased several times a day. This means, first determination of the basal respiration frequency. Increasing this frequency with ten to fifteen more breath takes per minute during three minutes. Returning to the basal frequency.

Theophylline is known to improve the acute mountain sickness, another form of hypoxemia (known to lead to loss of smell and taste). Black tea was part of the diet.

On one hand the hypothesis worked out, on the other hand it did not.

It did not work out, because in the morning hours of the 25th April 2020 one of three heart beats missed and the blood pressure regulation got completely dysregulated.

The cardiac issues needed medical care.

It did work out, because the lungs did not develop the COVID-specific lesions as observable in the two joined images resulting from a contrasted thoracic CT scan the 29th May 2020.



The 25th of April the access for the cardiac problems to the emergency unit of a local hospital has been declined due to a blood oxygen level of 96%, and 5th of May the same at another local hospital (97% oxygen blood saturation). A supplementary blood analysis at the 5th of May did not show any particularities other than a slight lymphocytosis, slightly increased basophiles, a neutropenia and an insufficient vitamin D level. The level of SARS-CoV-2 antibodies was negative.

The remaining effects of the SARS-CoV-2 infection are the heart issues and a slight tinnitus of the left ear. SARS-CoV-2 specific T-cells are not yet examined. Another blood sample of the 10th December presents high levels of Gamma-globulins, indicating the presence of non-specific antibodies. EBV has been excluded.

Taken together, it could be interesting to add antioxidants to the therapy of COVID-19 in order to prevent lung damage, especially when no other medical care is possible.

Please find below a list of nutrients:

Supplementation of nutrients:

Vitamin B1:	1,1 mg
Riboflavin:	2,8 mg
Niacin:	16 mg
Pantothenic acid:	6 mg
Vitamin B 6:	1,4 mg
Biotin:	50 µg
Folic acid:	200 µg
Vitamin B 12:	12,5 µg
Vitamin C:	1800 mg
Vitamin D:	10 µg
Vitamin E:	12 mg
Calcium:	400 mg
Iron:	10 mg
Zinc:	5 mg
Selenium:	55 µg
Iodine:	100 µg

## Diet

Darjeeling/Earl Grey: 600 ml

Pinot Noir (Aigle Noir, Gérard Bertrand, Pays d'Oc, 2019): 350 ml

Herbal infusion (1,75 g : 55% curcumin, 14% cinnamon, apple, 7% ginger, cardamom, 3% stevia leaves, fennel, nutmeg, cocoa shell 2%, black pepper, cloves)

Dark chocolate (85%): 25 to 50 g

In undetermined amounts: peanuts, olive oil, almonds, curcumin, fatty fish.

## References

1. Pritom Chowdhury, Anoop Kumar Barooah (2020) Tea Bioactive Modulate Innate Immunity: In Perception to COVID-19 Pandemic. Review; *Front Immunol* 11: 590716. [[crossref](#)]
2. PT Goud, D Bai, HM Abu-Soud (2021) A Multiple-Hit Hypothesis Involving Reactive Oxygen Species and Myeloperoxidase Explains Clinical Deterioration and Fatality in COVID-19. Review. *Int J Biol Sci* 17: 62-72. [[crossref](#)]
3. M Iddir, A Brito, G Dingo, SS Fernandez Del Campo, H Samouda , et al. (2020) Strengthening the Immune System and Reducing Inflammation and Oxidative Stress through Diet and Nutrition: Considerations during the COVID-19 Crisis. Review. *Nutrients* 12: 1562. [[crossref](#)]
4. L Loffredo, F Violi (2020) COVID-19 and cardiovascular injury: A role for oxidative stress and antioxidant treatment? *Int J Cardiol* 312: 136. [[crossref](#)]
5. Montserrat M, E de Gregorio, C de Dios, V Roca-Agujetas, B Cucarull, et al. (2020) Mitochondrial Glutathione: Recent Insights and Role in Disease. Review. *Antioxidants* 9: 909. [[crossref](#)]
6. M Mrityunjaya, V Pavithra, R Neelam, P Janhavi, PM Halami, et al. (2020) Immune-Boosting, Antioxidant and Anti-inflammatory Food Supplements Targeting Pathogenesis of COVID-19. *Front Immunol* 11: 570122. [[crossref](#)]
7. BB Muhoberac (2020) What Can Cellular Redox, Iron, and Reactive Oxygen Species Suggest About the Mechanisms and Potential Therapy of COVID-19? *Front Cell Infect Microbiol* 10: 569709. [[crossref](#)]
8. J Saleh, C Peyssonnaud, KK Singh, M Edeas (2020) Mitochondria and microbiota dysfunction in COVID-19 pathogenesis. *Mitochondrion* 54: 1-7. [[crossref](#)]
9. F Silvagno, A Vernone, GP Pescarmona (2020) The Role of Glutathione in Protecting against the Severe Inflammatory Response Triggered by COVID-19. *Antioxidants (Basel)* 9: 624. [[crossref](#)]
10. J Wu (2020) Tackle the free radicals damage in COVID-19. *Nitric Oxide* 102: 39-41. [[crossref](#)]

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