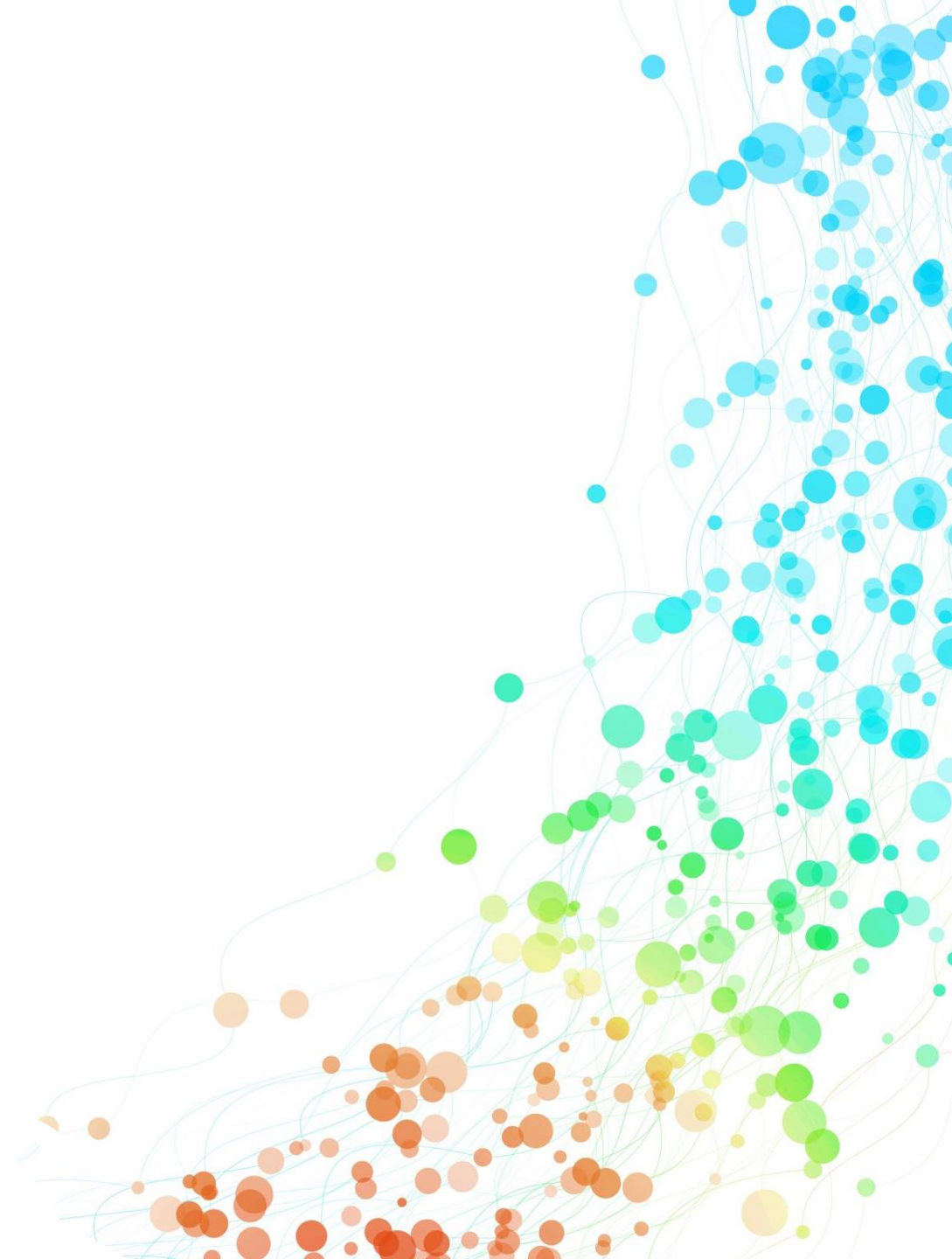


# Case Presentation: MCAS, Long Covid, exacerbation by spike

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UK



Mast cells are found in *all* tissues

In an individual with dysfunctional mast cells cytokines are released inappropriately and cause many symptoms, but often with completely normal tests and investigations.

Incidence is estimated at 17-20% of the population. Affects women more than men.

Proven role of MCAS in the hyperinflammation of C19 severe infections, Long covid and spikeopathy.



## Therapeutic Interventions

Optimization of nutrition, improvement of BMI, BS control, low histamine diet/organic/fresh/no processed food

Establish a healthy Microbiome : Bifidobacterium and lactobacillus, SCF producers

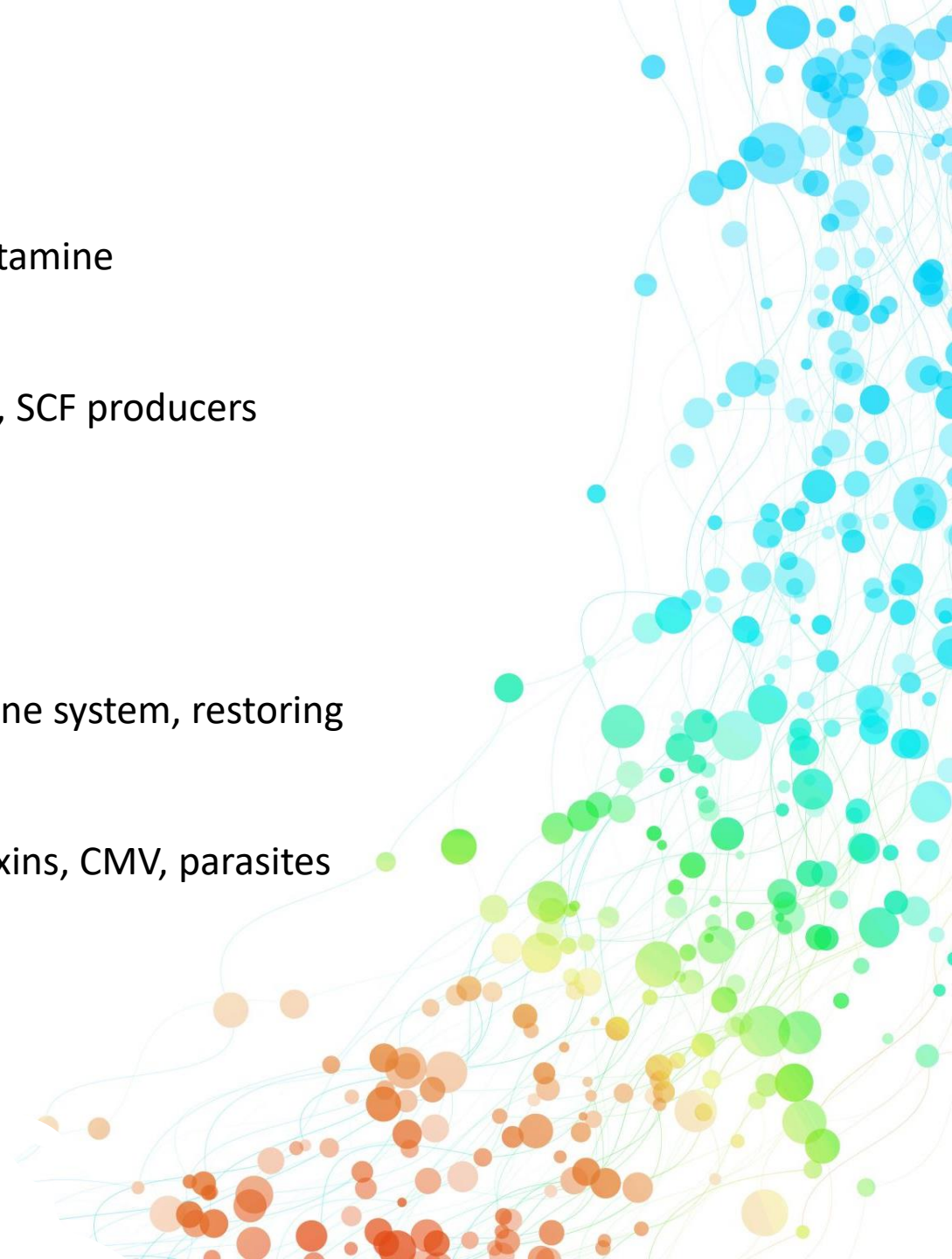
Inhibit spike protein cleavage and any further binding

Elimination of spike from the body

Healing the damage caused: Restoration of homeostasis and immune system, restoring mitochondrial function

Treat reactivated infections if present- EBV, Lymes disease, mycotoxins, CMV, parasites

Treatment for childhood trauma/ Neuroplastic retraining



## Case study–Katherine

55 yrs old seen Feb 7<sup>th</sup> 2023

LMP at 48 yrs

HRT started at April 2022

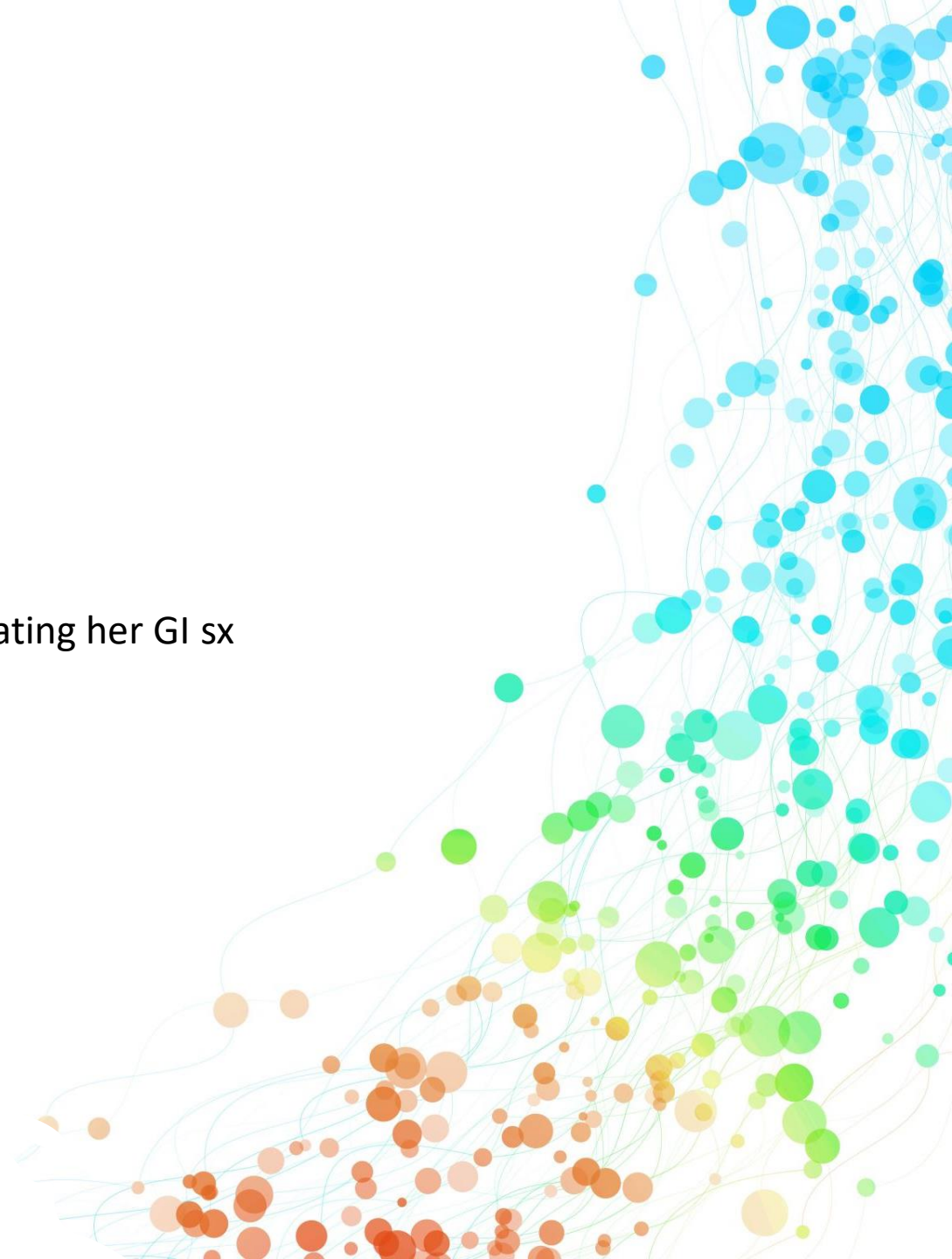
Stopped July 2022 when saw gastroenterologist who was investigating her GI sx

Migraine since age 50 yrs

C19 infection in 2020 and in June 2022

3 C19 inoculations-very unwell since

Unwell since early 2021 post inoculations

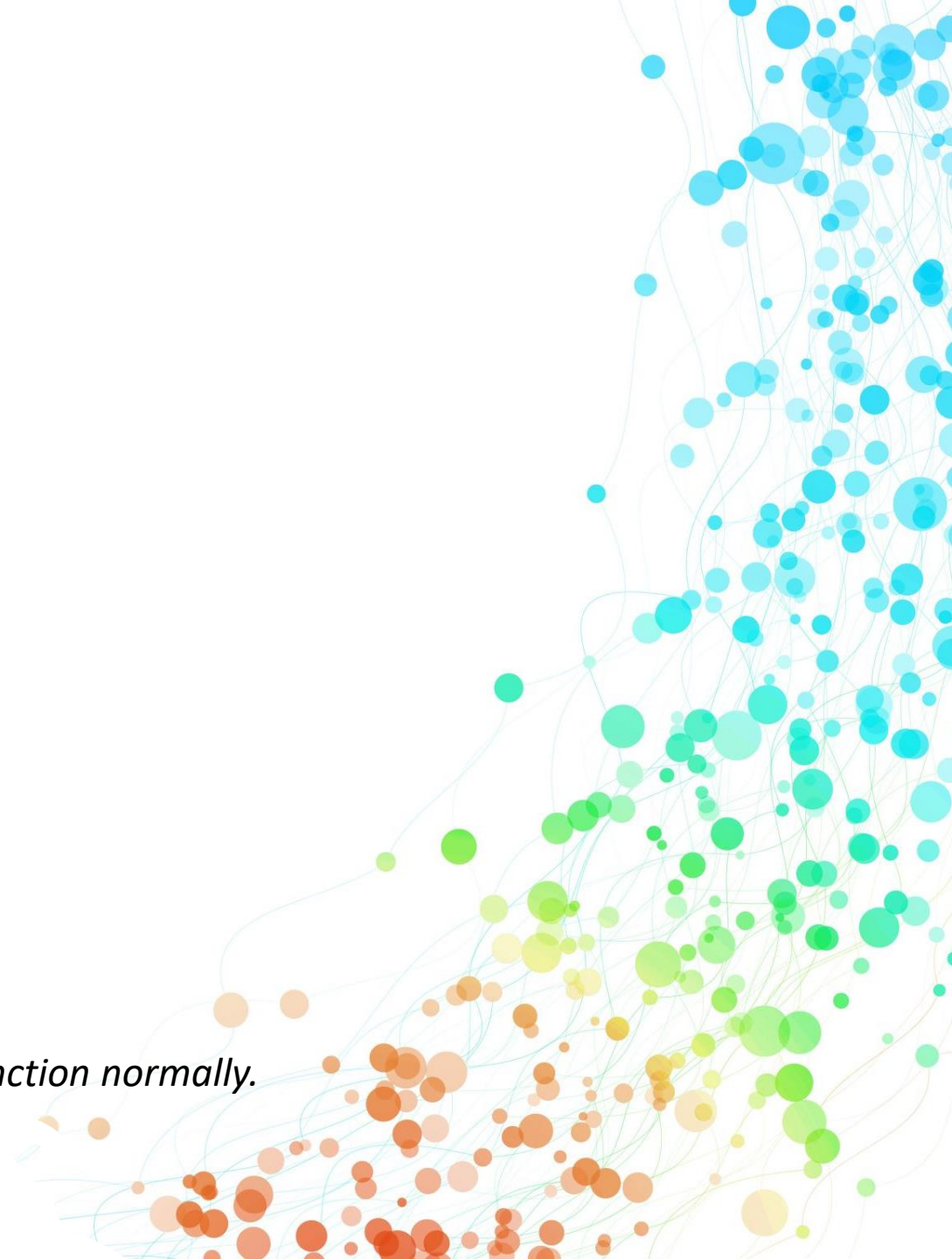




## Symptoms

- chest pains,
- pain in her neck, ears, and throat,
- lost 1 stone in weight with severe diarrhoea
- Other symptoms included brain fog,
- muscle twitches,
- aches,
- mucus in her throat,
- earache,
- exhausting diarrhoea,
- runny nose,
- poor sleep,
- tingling,
- haematuria x1,
- numbness on the right-hand side of her body,
- pain in her feet and hands especially on the right,
- hot sweats,

*She felt absolutely wretched for the last 2 years and was unable to function normally.*



## Past Medical History

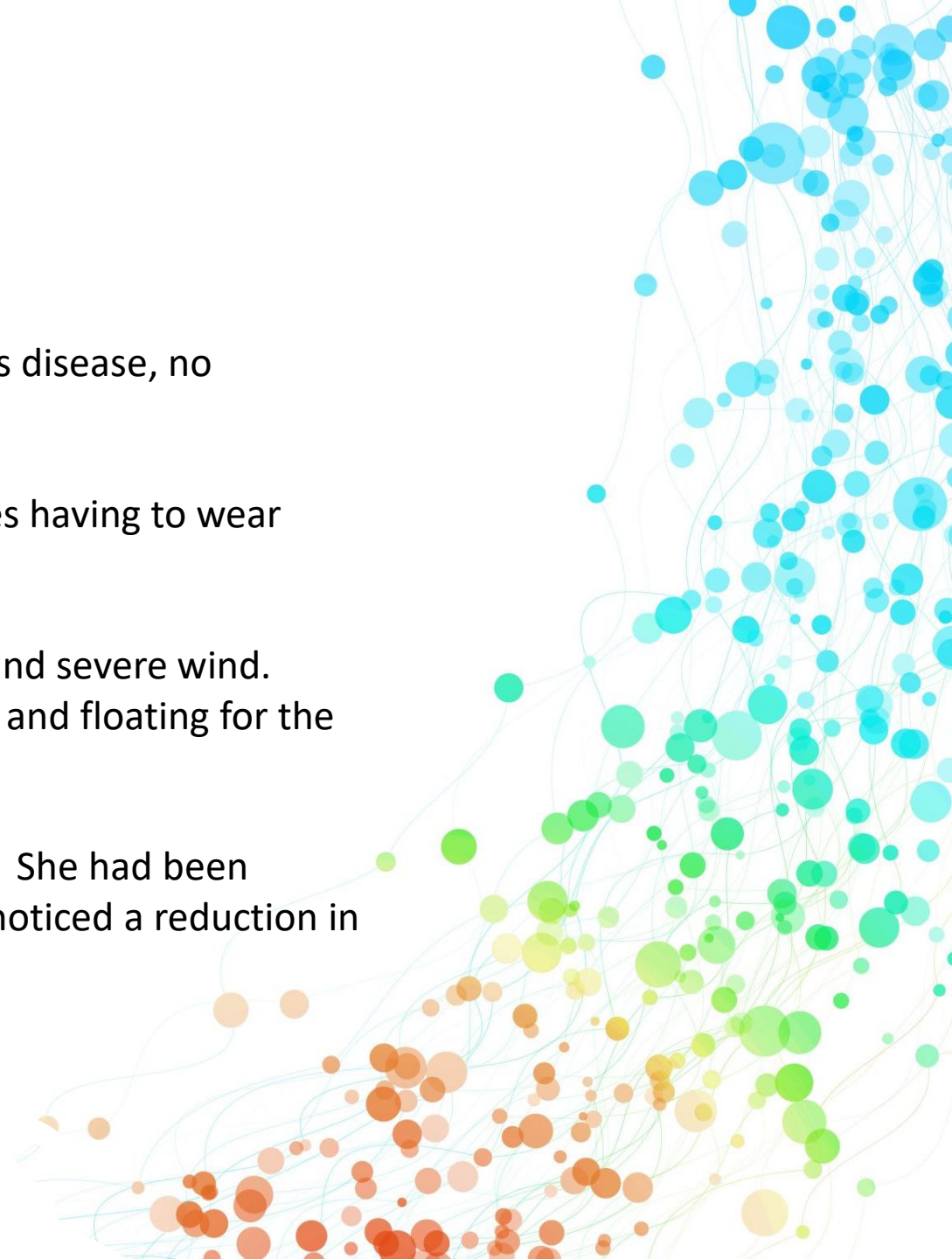
Frequent tonsillitis under the age of 12.

She has not been exposed to mould, Epstein-Barr virus or Lyme's disease, no childhood trauma.

She is very sensitive to smells and dislikes bright lights and noises having to wear sunglasses during the day.

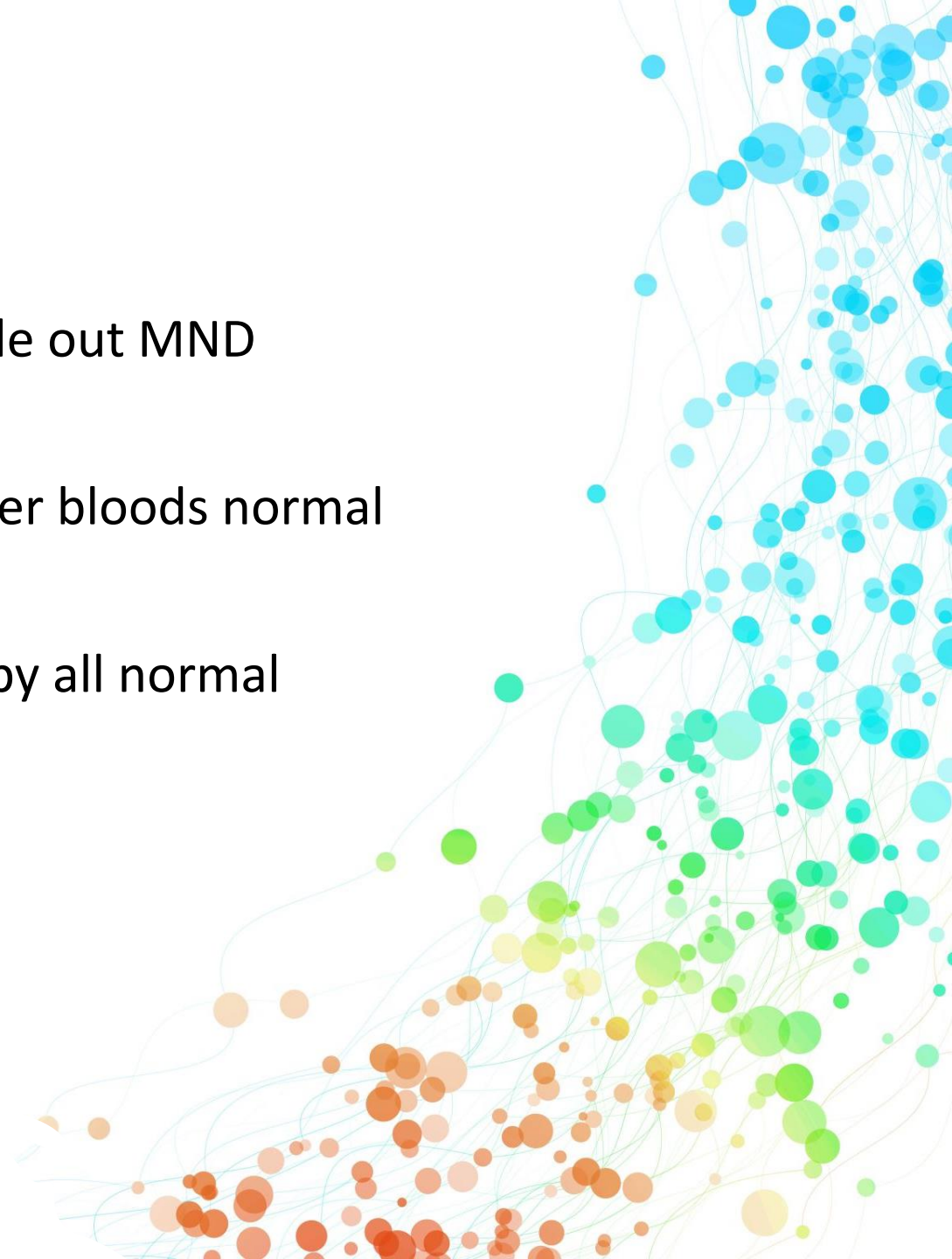
She has had IBS since her late teens with loose stools, bloating and severe wind. More recently upper gastric wind and her stools have been pale and floating for the last 12 months

This improved slightly more recently on the low-histamine diet. She had been following a low-histamine diet for the last two months and has noticed a reduction in the diarrhoea and a better colour of the stool.



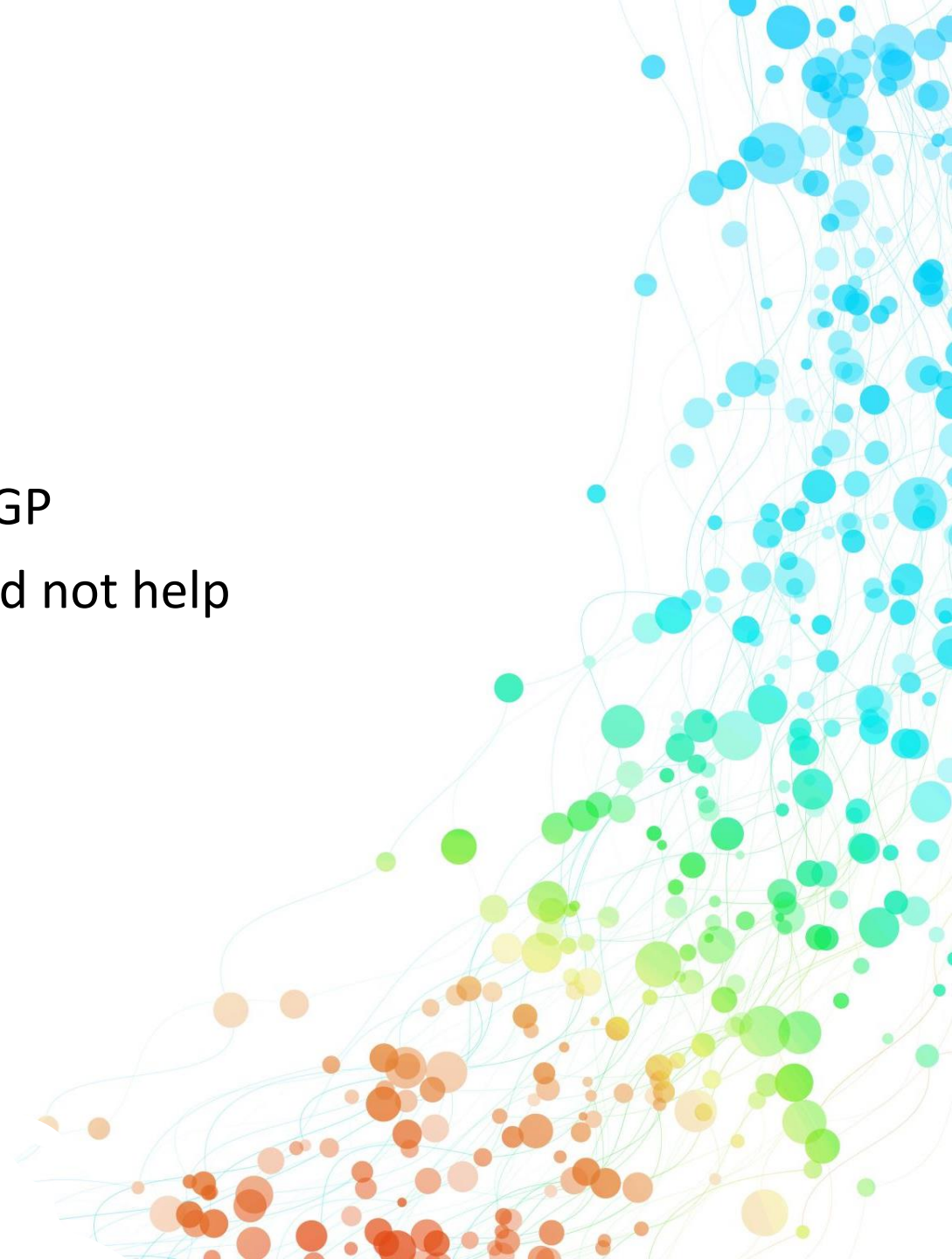
## Tests

- Neurological examination to rule out MND
- Low Ferritin (historically low) all other bloods normal
- CT scan, gastroscopy, colonoscopy all normal



## Medication-Feb 2023

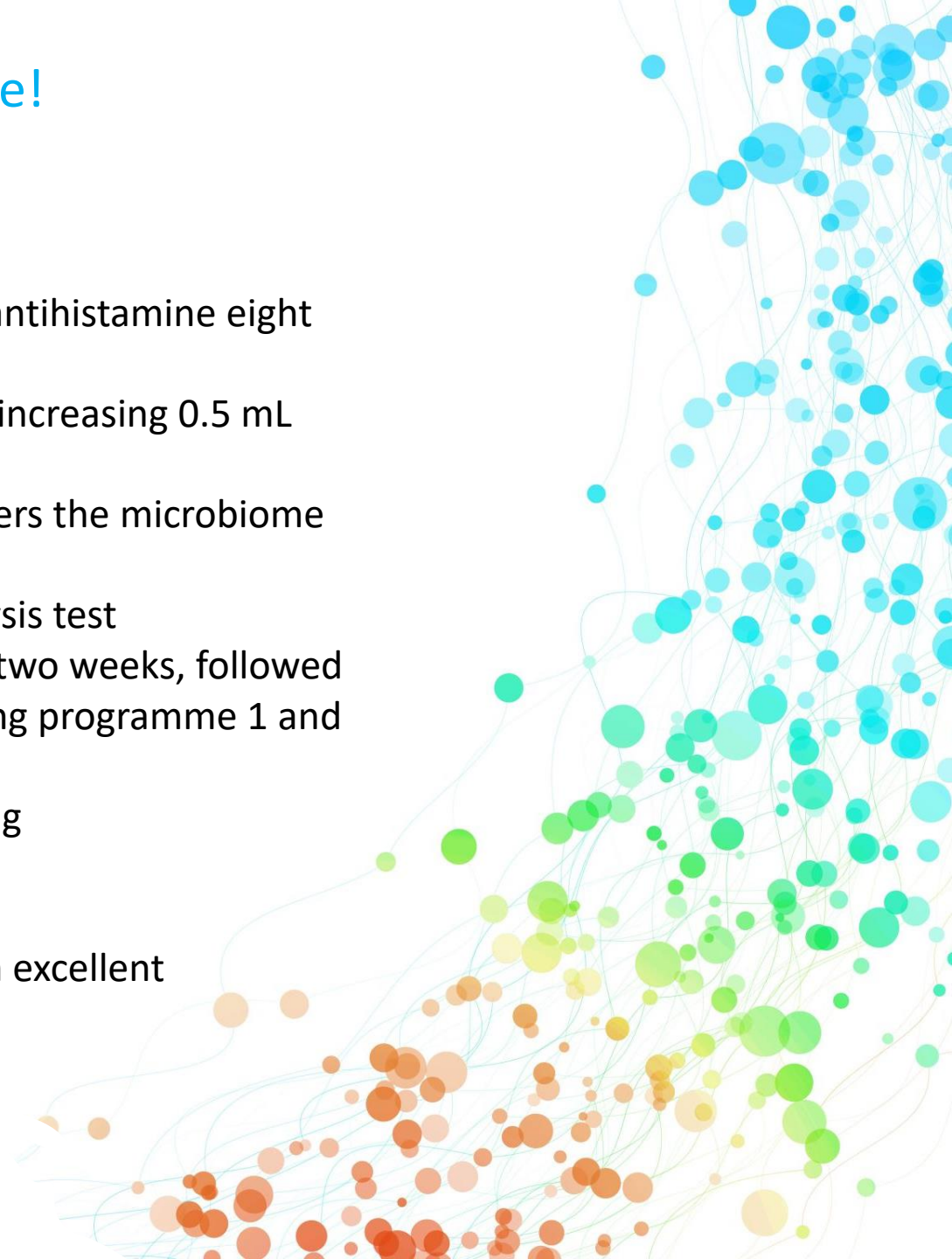
1. Omeprazole from her GP
2. Fexofenadine which she felt did not help





## Therapeutic Management-add one thing at a time!

1. *To try* Piriton one tablet at night to help her sleep
2. *To try* Loratadine 10 mg twice a day so that she is taking an antihistamine eight hourly
3. Ketotifen syrup to start with 0.5 mL at night every few days, increasing 0.5 mL until she is on 5 mL/1mg.
4. Azithromycin 250 mg one daily for six days as COVID-19 enters the microbiome and has bacteriophage ability.
5. Invivo Healthcare and **GI EcologiX** microbiome and gut analysis test
6. **ARC Microcurrent device** so that she uses programme 1 for two weeks, followed by programme 2 for two weeks, and then alternate days using programme 1 and programme 2. This boosts ATP production 3-5 fold
7. Toxaprevent two tablets to be taken 20 minutes before eating
8. NAC 600mg daily
9. High-dose Vitamin D 10,000 units a day
10. High-dose Vitamin C 4.5 to 5 g daily slow release as this is an excellent antihistamine
11. a good quality multivitamin mineral tablet.



## Consultation 2 on 15.5.23

improvements in most of her symptoms:

Sleep

weight has increased by five pounds to 8st 5lb.

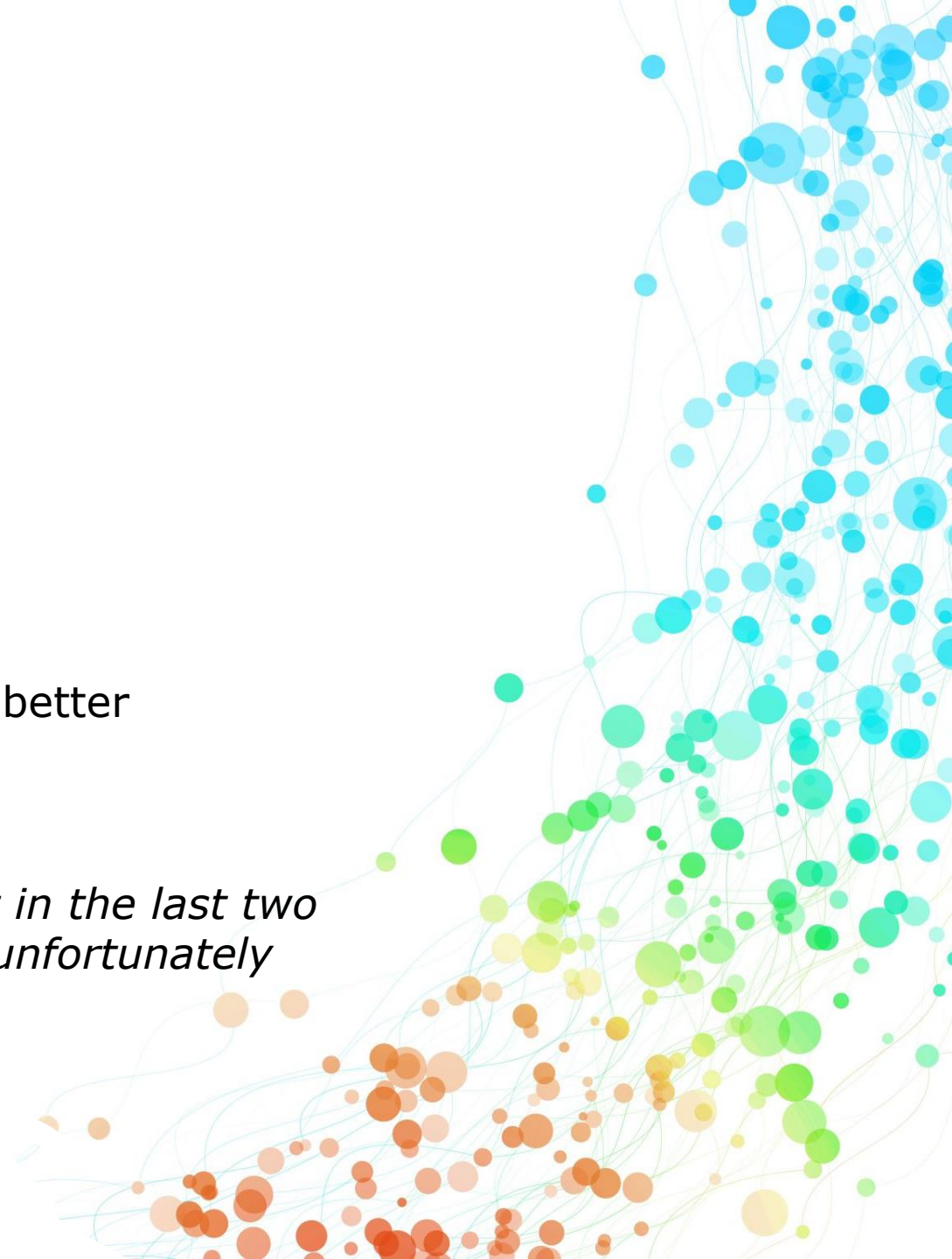
migraine have stopped

muscle twitching had improved by 90%.

aches and pains in her hands and feet were also 90% better

some improvement with her wind and acid reflux.

*however, some of these improvements have been lost in the last two weeks when she started playing tennis and yoga and unfortunately injured her right knee-similar to ME. She now has a meniscal tear.*



## Stool Analysis results:

### Health markers:

- Beta defensin-N
- **Secretory IgA-low**
- Calprotectin-N
- Bile acids-N
- Pancreatic elastase-N
- FIT-N
- Zonulin-N

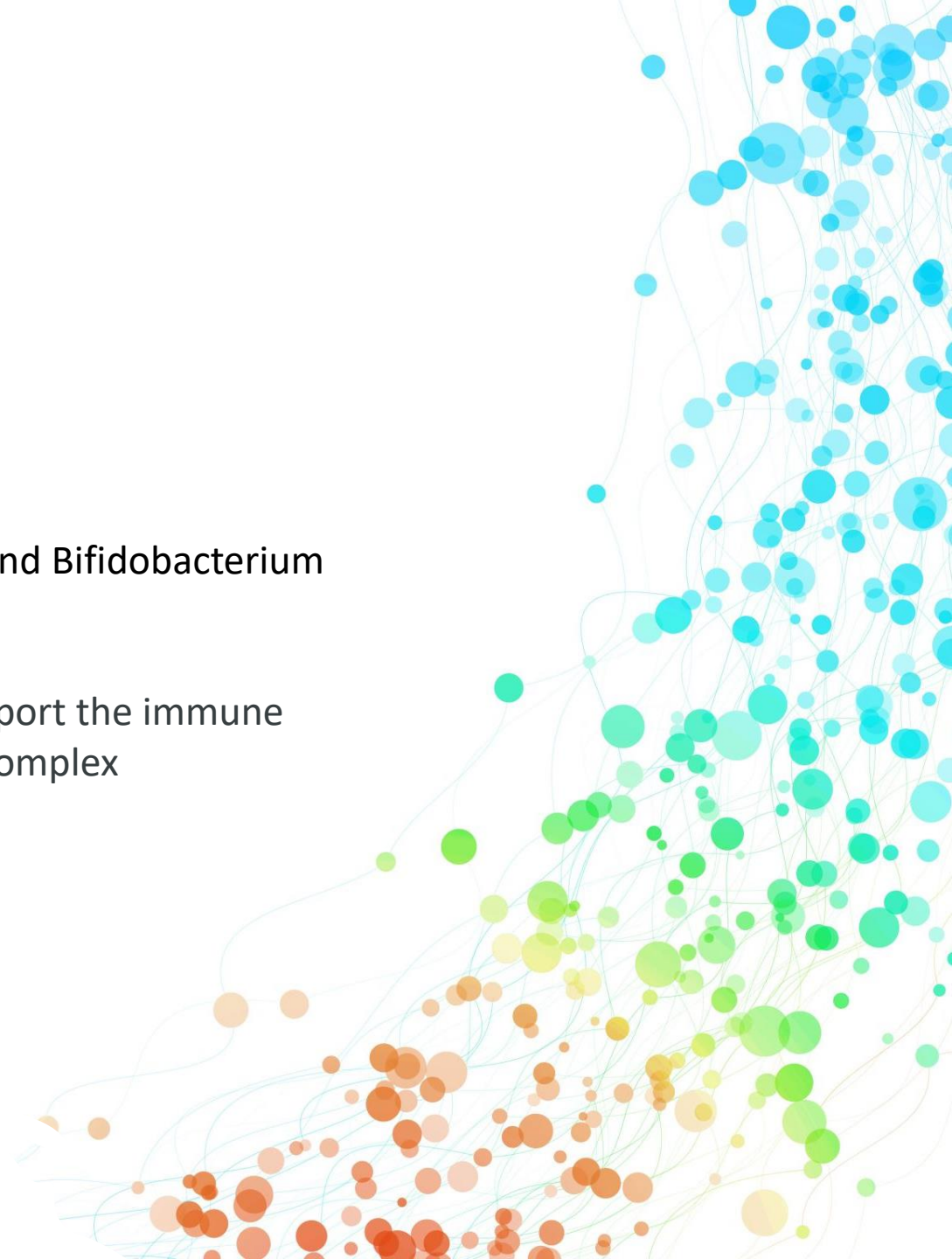




## Stool Analysis results

Microbiome indicative of **low butyrate production**,  
Some indicative of inflammation

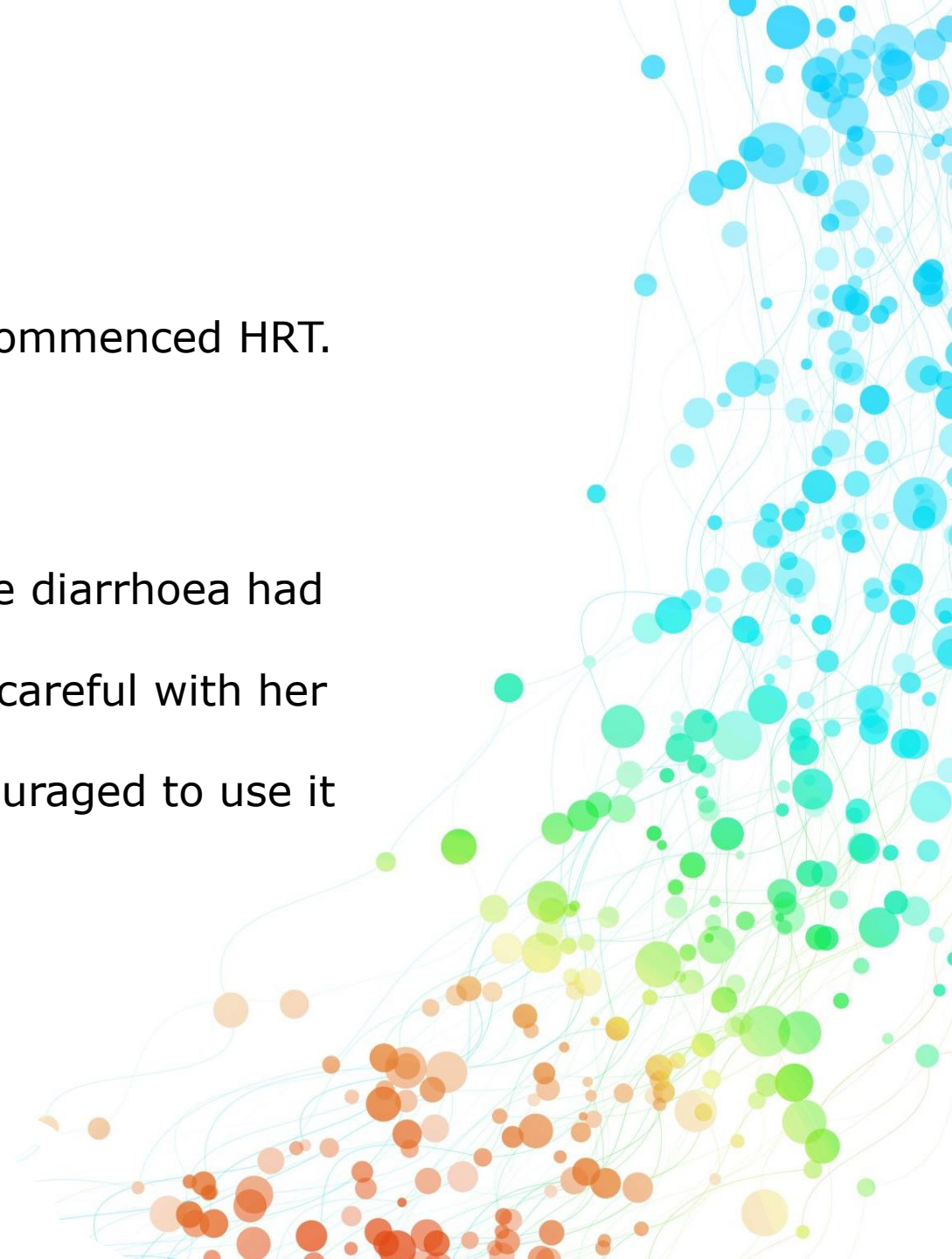
- Gentle approach to:
- Increase butyrate-producing bacteria
- Membrane barrier support: bacteria-probiotic with Lactobacillus and Bifidobacterium species
- PHGG: water-soluble prebiotic fibre to support microbial diversity
- Beta-Immune: the essential vitamins and minerals required to support the immune system, alongside an immune-supportive fermented beta glucan complex





## Persisting Symptoms

- Hormonal symptoms of hot flushes etc. - not yet recommenced HRT.
  - She still had a constantly runny nose,
  - intermittent rash on her abdomen
  - brain fog.
- 
- using the recommended supplements for her gut, the diarrhoea had stopped
  - she had reduced abdominal pain as long as she was careful with her diet.
  - She found the ARC micro current device useful. Encouraged to use it as much as possible.



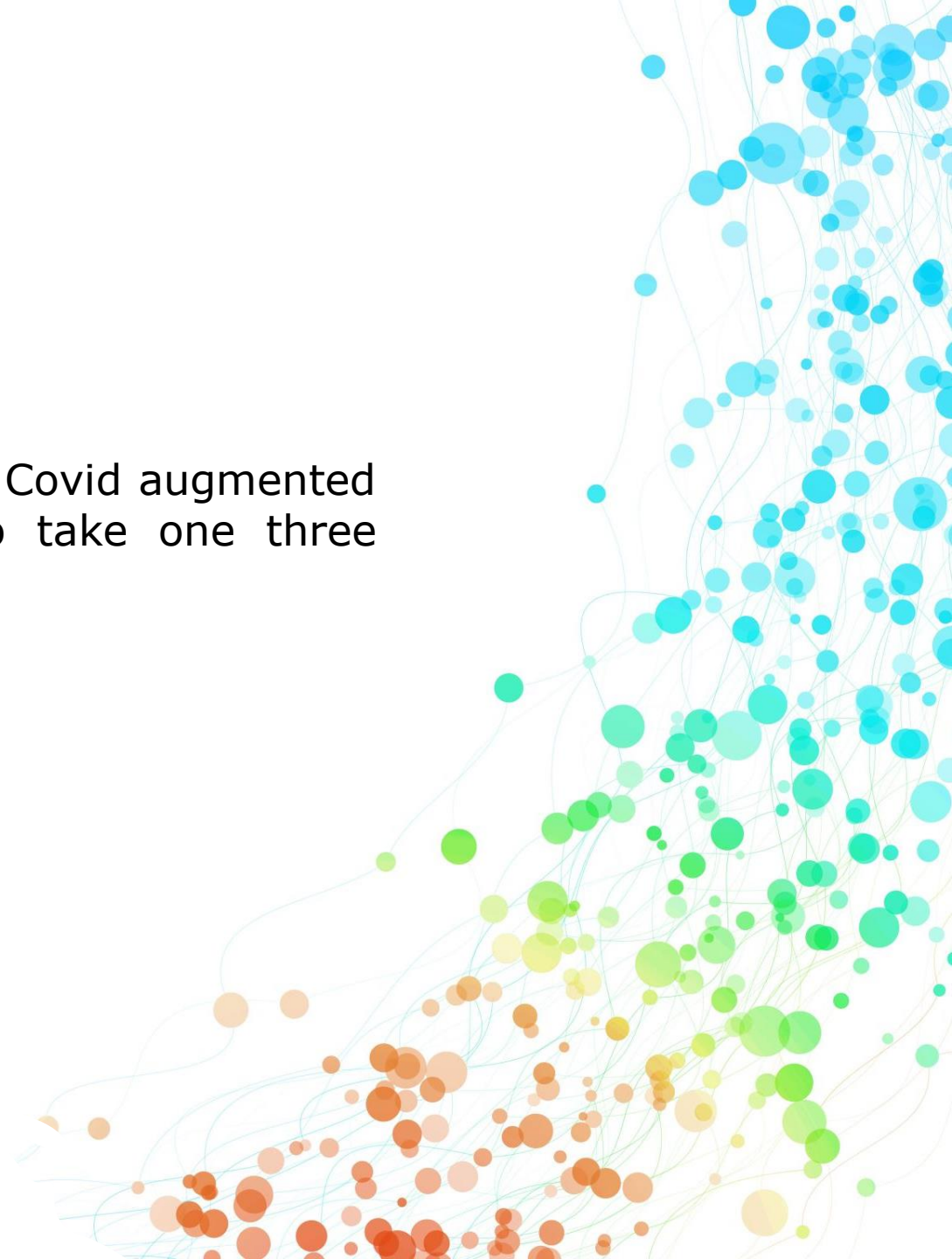
## Medication 15.5.23

1. Ketotifen 8ml in the evening.
2. Loratadine 10mg bd-Type 1 antihistamine
3. Nizatadine 150mg bd-Type 2 antihistamine
4. As she has three vaccinations and two episodes of Covid augmented NAC ([www.zerospike.org/EN](http://www.zerospike.org/EN)) was introduced. To take one three times a day for three months and then one daily.

*Denatures 99.8% of extracellular spike protein.*

### 3. HRT:

- Oestrogel 1-2 squirts daily
- Utrogestan 100mg every night.



Review 07.08.23

Very much better!

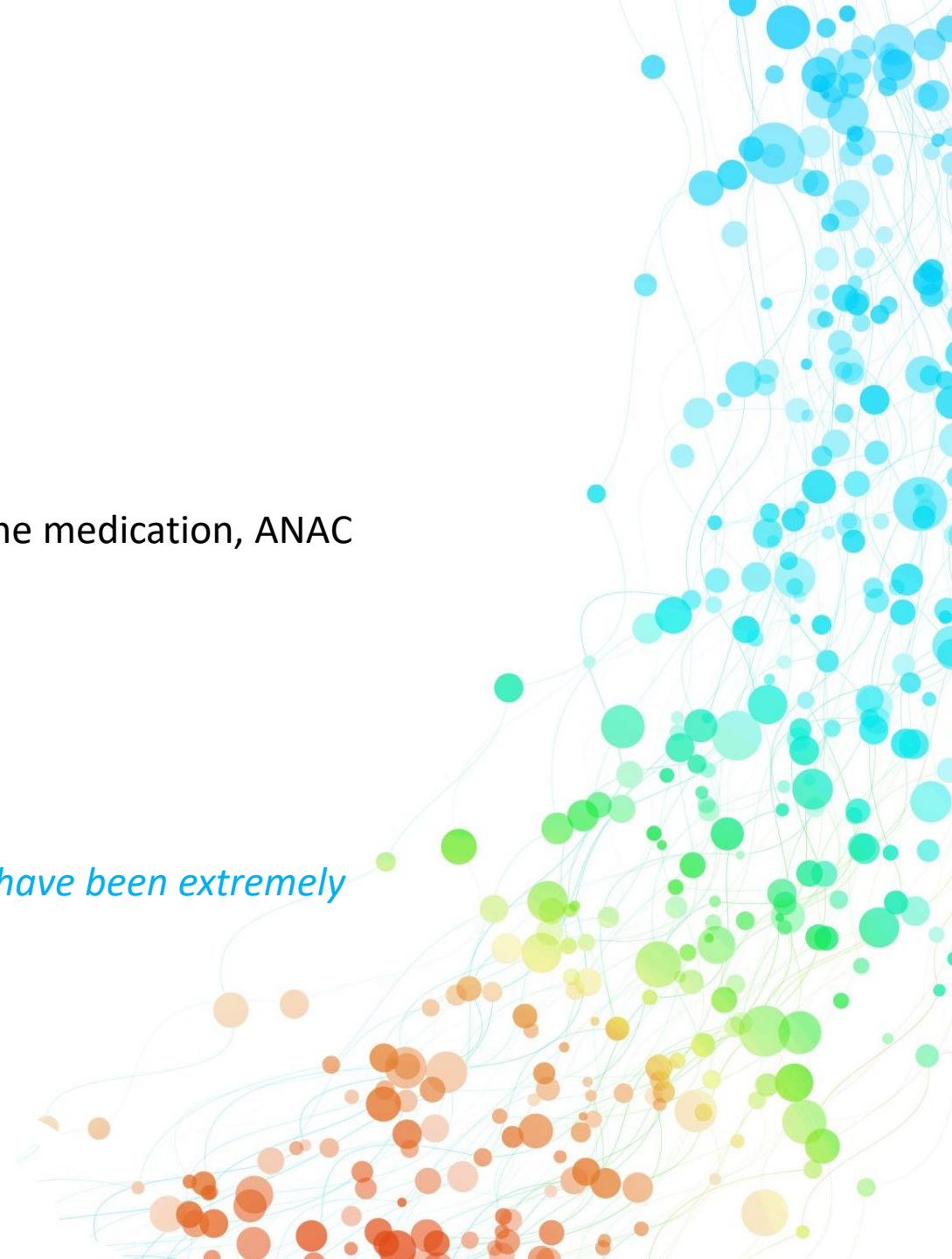
Now playing tennis, doing yoga, dog walks

90% of all symptoms have resolved on the low histamine diet and the medication, ANAC and arc device.

Weight now 8st 8LBs (from a low of 7stone 12 LBS)

Very few vesiculations now-see video

*Katherine reports that the ANAC, ketotifen, Nizatadine, and the Arc have been extremely helpful.*



Review 07.08.23

## Medication:

1. Nizatidine 150 mg twice daily for gastric reflux
2. Loratadine 10 mg twice daily
3. Ketotifen 8 mL at night.
4. Oestrogel ½ squirt daily
5. Utrogestan 100mg nocte





## Review 07.08.23

5. The augmented NAC for 3 months one tds now reduce to one daily

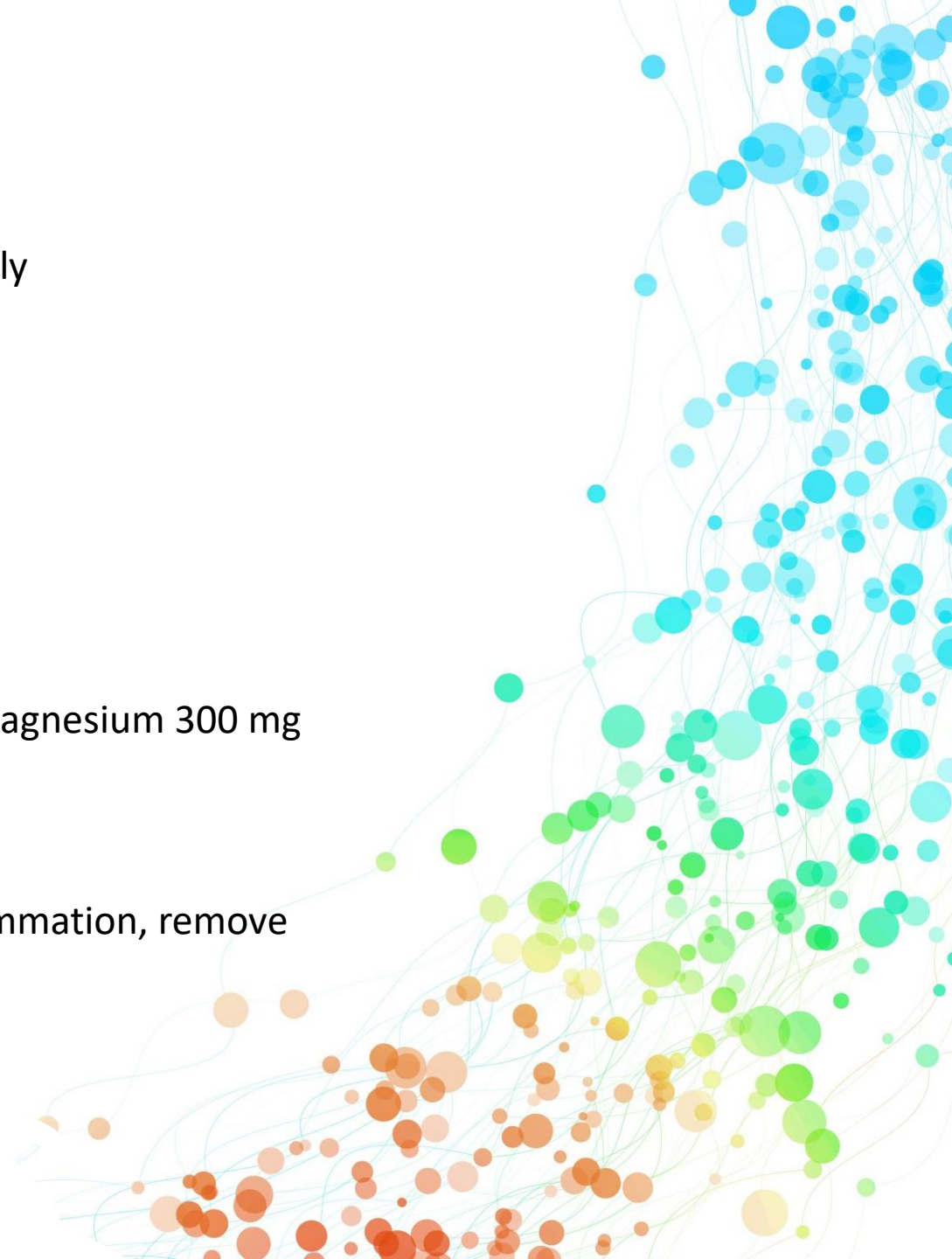
6. The ARC. Daily use programs 1 and 2 on alternate days

7. Ivermectin 12 mg. one daily with food

8. Continue with vitamins and minerals:

Vitamin C, vitamin D, the B vitamins, turmeric, Coenzyme Q10, hemp seed oil one dessert spoon daily, magnesium 300 mg in the evening, Lugol's iodine 15% three drops in the evening by mouth or rubbed into the skin.

9. Vedicinals 9 1 bottle a day for a course of 42 days to reduce inflammation, remove spike, block receptors to prevent uptake of the spike.



Thank you for listening and for your interest!

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