Energy Alterations in Patients with Pulmonary Artery Thrombosis After COVID-19 Treatment

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Abstract

Introduction: There are some studies in the literature reporting cases of pulmonary thrombosis after treatment of acute phase of SARS-CoV-2 infection.

Purpose: The purpose of this study is to show that patients that have pulmonary thrombosis has in the background prior to COVID-19, energy deficiency in the five internal massive organs, responsible for the production of energy necessary to keep the Blood flowing normally inside the Blood vessels. The treatment used nowadays to treat patient with SARS-CoV-2 infection can reduce even more this energy and can cause Blood stagnation inside the blood vessels in any part of the body, in this case, in the pulmonary vessels.

Methods: Through one case report of 36 years-old female patient with history of SARS-CoV-2 infection on February 2nd 2021. In the beginning of her symptoms, she presented only runny nose and flu-like symptoms. She evolves to body pain and headache and in the third day, she tested positive to SARS-CoV-2. It was prescribed Ivermectin and Azithromycin and she stayed 14 days isolated at home. On 16th day since the first manifestation, she returned to work and began to feel left chest pain. She did many exams to see if the Heart was compromised but nothing was found. There was only alteration in the pulmonary artery pressure and after it was diagnosed pulmonary thrombosis after performing Angio tomography. She started to use Rivaroxaban (Xarelto) and after this treatment, she improved and the symptoms disappeared but she is still using the medication until today. She went to my clinic in January 2022 to treat anxiety and she told me about all history of SARS-CoV-2 infection and complications. I performed to measurement of her internal massive organs through a crystal-pendulum using radiesthesia procedure.

Results: what I found was a complete lack of energy inside the five internal massive organs (Liver, Heart, Spleen, Lungs, Kidney) responsible for the production of Yin, Yang, Qi and Blood to keep the blood flowing inside the blood vessels.

Conclusion: The conclusion of this study is that patients with pulmonary artery thrombosis post COVID-19 symptoms can have energy deficiency inside the five internal massive organs and the use of highly concentrated medications to treat this condition and many other clinical conditions can worse more this reduction in energy and cause stagnation of Blood inside the blood vessels and cause in this case, pulmonary thrombosis.

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Introduction

There are some publications that I found in the literature, reporting cases that evolves to pulmonary artery thrombosis after the acute phase of SARS-CoV-2 infection [1]. This complication seems more common in patients in intensive care unit and the cases of patients with pulmonary thrombosis reported in the studies had pneumonia of moderate severity [1]. There are some studies showing the pulmonary biopsy of patients that died from COVID-19 pulmonary pneumonia that showed that there are Blood stagnation in the pulmonary artery causing the radiological appearance of ground glass opacity [2]. This study will be written according to Hippocrates thoughts that said “it is more important to treat the patient and not the disease that the patient is presenting” [3].

Purpose
To demonstrate that patients with pulmonary artery thrombosis after COVID-19 treatment has energy alterations inside the five internal massive organs, according to traditional Chinese medicine and depending on the type of medication used in this treatment, the energy of this patient can reduce even more and cause Blood stagnation and cause pulmonary artery thrombosis.

Methods
To write this article, I used theories of pulmonary thrombosis in Western medicine and also thoughts from traditional Chinese medicine, that exists for more than 5000 years. I used also articles indexed in PubMed regarding pulmonary artery thrombosis in
Western and in traditional Chinese medicine and the consent of one patient that had this problem after COVID-19 treatment to report her case in this article.

Case Report

Through one case report of 38 years-old female patient that began with symptoms of runny nose and flu-like symptoms on February 2nd 2021. She evolves to body pain and headache when she did the SARS-CoV-2 nasal detection of PCR, that came positive to SARS-CoV-2 infection. She went to the hospital and the doctor prescribed Ivermectin and Azithromycin and she stayed at home for 14 days isolated. After 16 days after the first clinical manifestation, she returned to work and began to feel left chest pain after the first week of work. She was not feeling dyspnea symptoms at that moment and the pain could worsen after cough. She went twelve times in the emergency room of the hospital because she began to feel sick. Her laboratory exams were normal with exception of her blood pressure that was increasing.

She did not have any shortness of breath, when she got in the emergency room of the hospital, her saturation was good, only her blood pressure was altered (150x130 mmHg). The doctor in the hospital only gave her sublingual Clonazepam and asked her to go home. The last time she went to the emergency room, the doctor asked her to search for a cardiologist because all the laboratory exams were normal, including the electrocardiogram.

One day after, she went to a cardiologist clinic and the doctor gave her a pill under her tongue and asked her if the pain had not improved. She said that the pain had improved and the doctor told her that she had angina. The physician asked her to go to the hospital two days after, to do the exercise test. After the test, two days after, he said that her exercise test was normal and asked her to return to his office only in three months. So, she was still feeling pain in the chest and decided to go to another doctor to evaluate better her clinical case.

She searched for another cardiologist doctor who said that she did not have heart problem because all her exams were normal but the physician asked for all the exams again and found only one alteration in the echocardiogram (a high pulmonary pressure) and asked her to go to a pneumologist that asked a Lung angiotomography.

The patient said that it took a long time to book this exam because the clinics were closed due to the COVID-19 pandemic and when she went to the pneumologist clinic to evaluate the result, he was not attending (due the pandemic). So, she decided to return to the second cardiologist that told her that she was suffering from pulmonary artery thrombosis and prescribed rivaroxaban (in the beginning the dose was 10 mg every twelve hours for 16 days and after, she needs to use this medication 20 mg once a day until today).

After the intake of all these medications, she went back to her pneumologist and the doctor asked again for the angio-tomography, that resulted in normal condition. After all these incidences, she went to my clinic because her friend was treating with me and she decided to do some acupuncture sessions for her “anxiety”. I measured her internal five massive organs energy (Heart, Spleen, Lungs, Kidney and Liver) and the results I will tell you in the next section.

Results

The measurement of the energy of the five internal massive organs using a crystal-pendulum demonstrated that all her internal massive organs or chakras’ energy centers were no energy (and was the cause for the manifestation of anxiety, COVID-19 infection and for the pulmonary artery thrombosis). All these reasoning will be explained in the discussion section. Her treatment consisted in Chinese dietary counseling, auricular acupuncture with apex ear bloodletting and systemic acupuncture (with the intention to balance the energy of Yin, Yang, Qi and Blood and take out Heat retention).

It was used highly diluted medications (according to the theory Constitutional Homeopathy of the Five Elements Based on Traditional Chinese Medicine and crystal-based medications) to replenish the energy of the five internal massive organs that were responsible for the production of Yin, Yang, Qi and Blood and the consequences of this energy disturbances leading to stagnation of Blood will be showed in the discussion section of this article.

The medications used in her treatment was 5 homeopathies (Sulphur, Calcarea carbonica, Silicea, Natrum muriaticum, Phosphorus) used as single dose, one medication per day for five days in a month. It was beginning the medications at 30 CH and the medications can be used for three months and after I prescribe the same medications in a higher potency of 200 CH and could use for more three months. After I changed again the potency of the medications to 1000 CH and after 3 months, I prescribe again in 10.000 CH and after three months, I prescribe in 50.000 CH and these medications in this last potency should be used for each 4 or 8 weeks (depending on the symptoms presented by the patient).

The patient is orientated to prepare the single dose of homeopathy medications at home (taking twenty drops of each medication that the patient needs to use and diluting it in 20 ml of water in a glass cup, without using any kind of metal such as spoon). This process used in this patient was to treat the cause of all her problems and the level of treatment done by each doctor will be showed in the discussion section.

Discussion

This subject will be discussed according to Hippocrates (c. 460 bce - c. 375 bce) oath, that said that “it is important to consider other ancient medical traditions prior to the knowledge we have nowadays”. For this reason, I will discuss this theme using traditional Chinese medicine’s reasoning, together with Western medicine’s thoughts [3]. To understand in the deepest level what could be the cause of manifestation of pulmonary artery thrombosis after COVID-19 infection treatment, it is important to us to know that the population that we have nowadays is not from the same population that we had in the past 8, 10 or 20 or more [4].

In the article wrote by me (2021) entitled Is the Population in the World the Same as in the Past? I am saying that the population in the world changed their internal energy, becoming weaker if we compare the population that we had in the past, before 2015. In the article I wrote (2021) entitled Energy Alterations and Chakras’ Energy Deficiencies and Propensity to SARS-CoV-2 Infection, I am describing one research that I did in my clinic in Brazil, where I analyzed 1000 patients’ chakras’ energy centers from 2015 and April 2020, before the COVID-19 pandemic and what I found in this study was that 90% of all my patients were in the lowest level of energy in the five internal massive organs (Liver, Heart Spleen, Lungs and Kidney). These organs are responsible for the production of internal energy to have an adequate flow of Blood inside the blood vessels, as I am showing this relationship in the Figure 1 [4, 5].
To you to understand better what I want to say is that, before the COVID-19 pandemic, the population that I was attending in Brazil did not have enough energy to do anything and for this reason, I realize that the majority of diseases nowadays, comes from these energies’ deficiencies, as I am showing in several articles published in the last two years, involving emotional and also physical disorders [6-8].

In the case of all these patients that are weak in energy inside the internal massive organs, they also have propensity to acquire COVID-19, because when the patient has SARS-CoV-2 infection, this is only the “tip of the iceberg”. All the problem are under the waterline because I consider that patient that are having COVID-19 are only patients that have low internal massive organs energy to protect themselves from the external pathogenic factor entrance inside the body, due to low Zheng-Qi (that is the energy responsible for the protection of our body to become sick due to external pathogenic factor invasion), as I am showing in the article I (2021) wrote entitled Is SARS-CoV-2 Strong or Our Body Is Weak? [9].

These factors, according to traditional Chinese medicine, are Wind, Cold, Heat, Dryness and Humidity and also, SARS-CoV-2 is considered an invasion of the external pathogenic factor, as demonstrated in the article I wrote (2021) entitled Energy Alterations and Chakras’ Energy Deficiencies and Propensity to SARS-CoV-2 Infection [5].

In another article I wrote (2021) entitled Chakras’ Energies Deficiencies as the Cause of Dyspnea Post COVID-19 Treatment, I am showing that patients with symptoms of dyspnea post COVID-19 treatment was caused by the use of highly concentrated medications used to treat the acute SARS-CoV-2 infection, because all these patients have low energy pattern inside the five internal massive organs and the use of any kinds of these medications, could induce reduction in this vital energy, that is already very low, prior to this pandemic and can manifest as dyspnea symptoms (as one of the possible manifestations. In traditional Chinese medicine, different symptoms can come from the same energy imbalances and the same disease can come from different energy imbalances) [10].

In another article that I wrote (2021) entitled Chakras’ Energy Deficiencies as the Cause of Fatigue Post SARS-CoV-2 Infection Patients Treatment, I am demonstrating through three cases reports that the patients had extreme fatigue symptoms days after the acute phase of the SARS-CoV-2 infection, due to the use of highly concentrated medications to treat this condition and improved their fatigue after receiving treatment to replenishing the internal massive organs energy, using highly diluted medications [11].

In another article I wrote (2021) entitled What Is Behind All the Pulmonary Thromboembolism That We Need to Know?, I am showing one patient that had history of pulmonary thromboembolism and had past history of being treating for hypertension, stroke, aortic aneurism and all these pathologies has in common, energy deficiencies in the back ground that was not treated yet, because Western medicine usually treats the leaf level of the tree (the symptoms) but traditional Chinese medicine treats the root (because they understand that all manifestation in the leaf level is only reflection of energy imbalances in the root of the tree, as I am showing in the Figure 2 [12].
All these reasoning began in 2006, when I attended one specific patient of 70 years-old, that was complaining leg pain for the past 6 months with no improvement of his condition only using anti-inflammatory medications. He searched for another kind of treatment and went to my clinic. His Chinese medicine’s diagnosis was Kidney Yang deficiency (feels colder in the lower limbs) and he started his treatment using Chinese dietary counseling, auricular acupuncture with apex ear bloodletting and systemic acupuncture. He performed 10 acupuncture sessions twice a week and after this, he returned to be reevaluated. He said that he improved very much from his leg pain condition but also, he improved from his intra-ocular pressure, that was always above 40 mmHg in the last 40 years, with no improvement using only eye drops. For the first time of his life, his intra-ocular pressure reduced from 40 to 17 mmHg [14].

After this case, I started to participate in many conferences worldwide to demonstrate the importance to treat the root of all problems, that are the energy imbalances and not just treating the symptoms [14].

In 2015, I participated in another Acupuncture Research Conference that was held in 2015, in Harvard Medical School, in Boston, USA, and in this conference, I showed through one study that: if we treat the energy imbalances of the patient, we can treat all the patients’ conditions at the same time, even the doctor does not know that the patient was suffering from that condition [14].

In this article, I am demonstrating through this case report, that the medications that the patient received to treat the acute phase of SARS-CoV-2 infection, caused or reduced even more the vital energy (as you can see in the Arndt Schultz Law, created in 1888, in the Figure 5), that was low before the onset of the pandemic and when she received the medication to treat the infection (in the leaf level), this medication caused a drop in the vital energy, leading to a Blood stagnation inside the Blood vessels, causing in this case, pulmonary artery thrombosis [12].

Figure 5: Arndt Schultz Law

You can see that the majority of the complications after treatment of patients with SARS-CoV-2 infection was caused by this drop in the vital energy, caused by the type of medication used to treat this infection, as I am showing in many other articles I wrote (2021) such as *Chakras’ Energies Deficiencies as the Main Cause of Myocardial Infarction without Arterial Obstruction* [8].

According to traditional Chinese medicine, many diseases came from the same root (the same energy imbalances can cause many different diseases in the leaf level) and the same diseases can come from different energy imbalances also, as I am showing in the article I wrote (2021) entitled *Energy Alterations and Chakras’ Energy Deficiencies and Propensity to SARS-CoV-2 Infection* [5].

In this case presented by the patient, she did not have any abnormality prior to this infection but probably she had energy deficiency in the five internal massive organs, because the energy imbalances do not cause laboratory alterations in the first three phases and only after years of energy imbalances, the patient can have alterations in the laboratory exams, as I am showing in the Table 1 [7, 8].

Table 1: Progression from health to disease

<table>
<thead>
<tr>
<th>Progression from Health to Disease</th>
<th>Organ</th>
<th>Exams</th>
<th>Energy Reserve</th>
<th>Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>Slowing down of organ functions</td>
<td>Normal</td>
<td>Energy Reserves-normal</td>
<td>Without clinical symptoms</td>
</tr>
<tr>
<td>Phase 2</td>
<td>Slowing down of organ functions</td>
<td>Normal</td>
<td>Consumption of internal Energy Reserves</td>
<td>With symptoms in other organ</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Slowing down of organ functions</td>
<td>Normal</td>
<td>Consumption of external Energy Reserves</td>
<td>With symptoms in same organ</td>
</tr>
<tr>
<td>Phase 4</td>
<td>Reversible cellular lesion</td>
<td>Little alternation</td>
<td>Consumption of blood Reserves</td>
<td>Curable disease</td>
</tr>
<tr>
<td>Phase 5</td>
<td>Irreversible cellular lesion</td>
<td>Excessive alteration</td>
<td>Metabolic exhaustion</td>
<td>Incurable disease</td>
</tr>
</tbody>
</table>

In the case of this patient reported in this article, she could have the same energy alteration as I am showing in the research that I did in Brazil (from 2015 to 2020). In this study, 90% of the patients studied have energy deficiencies in the five internal massive organs, showed through the energy measurement of the chakras’ energy centers (that corresponds to the internal five massive organs - Liver, Heart, Spleen, Lung and Kidney - according to traditional Chinese medicine) showed in the Table 2 [5].
From this study, we can see that the majority of the population that I am attending in Brazil, do not have energy inside the five internal massive organs, including babies, children, adolescents, young adults and older patients and independent on the type of diagnosis, they all are in the same energy condition, that are energy deficiency inside the five internal massive organs, as I am showing in the article *Are We Vaccinating Immunocompetent or Immunocompromised People for COVID-19?* [15].

So, in this article, I am showing that this patient suffered from stagnation of Blood inside the pulmonary artery due to the type of medication that she received to treat this infection (highly concentrated medication) and caused a drop in the vital energy in all organs and caused a Blood stagnation and thrombosis in the pulmonary artery [8, 12].

This could happen in another part of the body, as I am showing in the article *Energy Alterations in Patients with Deep Vein Thrombosis and What Do We Need to In Addition to the Use of Anticoagulant Medications?* in process of publication and another article also written by me (2021) entitled *Myocardial Infarction without Arterial Obstruction in Patient Post COVID-19 Treatment* [8].

The medications the patients are receiving to replenish the energy of the five internal massive organs are homeopathies medications according to the theory *Constitutional Homeopathy of the Five elements Based on Traditional Chinese Medicine* and crystal-based medications [16].

The medications used are shown in the Table 3.

Table 3: Medications used to replenish the energy of the internal five massive organs

<table>
<thead>
<tr>
<th>Chakras</th>
<th>Five Elements</th>
<th>Homeopathy Medications</th>
<th>Crystal-Based Medications</th>
</tr>
</thead>
<tbody>
<tr>
<td>1º Chakra</td>
<td>Wood/Liver</td>
<td>Phosphorus</td>
<td>Garnet</td>
</tr>
<tr>
<td>2º Chakra</td>
<td>Water/Kidney</td>
<td>Natrum Muriaticum</td>
<td>Orange calcite</td>
</tr>
<tr>
<td>3º Chakra</td>
<td>Fire/Heart</td>
<td>Sulphur</td>
<td>Rhodochrosite</td>
</tr>
<tr>
<td>4º Chakra</td>
<td>Metal/Lung</td>
<td>Silica</td>
<td>Emerald</td>
</tr>
<tr>
<td>5º Chakra</td>
<td>Earth/Spleen</td>
<td>Calcarea Carbonica</td>
<td>Blue Quartz</td>
</tr>
<tr>
<td>6º Chakra</td>
<td>Water/kidney</td>
<td>Tone 2º chakra</td>
<td>Sodalite</td>
</tr>
<tr>
<td>7º Chakra</td>
<td>Wood/Liver</td>
<td>Tone 1º chakra</td>
<td>Tiger eye</td>
</tr>
</tbody>
</table>

They are orientated to intake the medications for the entire life because the reduction of this energy is caused by the exposition to electromagnetic waves, that is polluting the space between the earth and sky, causing this harmful effect in our body, showed in the article *Energy Alterations and Chakras’ Energy Deficiencies and Propensity to SARS-CoV-2 Infection* [5].

All patients with history of SARS-CoV-2 infections are orientate to do this treatment because this infection is only the tip of the iceberg, showing that something is wrong to the patient, as I am demonstrating in the article *What have behind in all kinds of infections that we need to know?* [17]. So, in this article, I am showing the importance to reevaluate the type of medications that we are using in the treatment of this infection and in the treatment of all kinds of diseases nowadays, as I am showing in the article *Why is Homeopathy the Medication of Choice in the Treatment of All Kinds of Diseases Nowadays? And Why Homeopathy Is the Medication of Choice in The Prevention and Treatment of COVID-19 Infection?* [18, 19].

All tools used in the treatment of this patients (homeopathy and acupuncture) were considered medical specialty by the Federal Medical Council since 1980 and 1995 in Brazil [20]. To understand what is happening inside the patient that have history of thrombosis in the pulmonary artery after COVID-19 infection, we need to integrate Western and Chinese medicine (the first is the materialized energy) and the second is the non-materialized energy, showed in the Figure 6. [7, 13].

**Figure 6:** Yin and Yang of Western and Traditional Chinese medicine

**Conclusion**

The conclusion of this study is that patient with pulmonary artery thrombosis after COVID-19 treatment have energy deficiency inside the five internal massive organs prior to this infections...
(according to traditional Chinese medicine reasoning) and depending on the type of medication used in the treatment of this infection, the patient can drop the vital energy (that was low before the infection) and can cause Blood stagnation inside any Blood vessels, in this case presented in this article, the patient evolve to stagnation of Blood inside the pulmonary Blood vessel, leading to symptoms of pulmonary artery thrombosis. The treatment rebalancing and replenishing the internal massive organs energy using highly diluted medications (according to the theory Constitutional Homeopathy of the Five Elements Based on Traditional Chinese Medicine) and the use of crystal-based medications is of paramount importance to treat the cause of the disease formation and not just treating the symptoms, that was the pulmonary artery thrombosis symptoms.

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