

## 'Long Vax' Finally Enters Lexicon

Analysis by [Dr. Joseph Mercola](#)

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### STORY AT-A-GLANCE

- › Dr. Pierre Kory and Dr. Paul Marik are trying to get the word out that long vax is not only real but has disabled many Americans who were at the peak of health prior to getting a COVID jab
- › At Kory's long COVID clinic, 70% of the patients actually have long vax and reported their symptoms began "minutes, hours, days or several weeks" after receiving a COVID-19 shot
- › Long vax symptoms are nearly identical to those of long COVID – the difference being that the long vax patients tend to be sicker, with more frequent small fiber neuropathy and dysautonomia
- › A study by Yale scientists detailed long vax, which they called chronic post-vaccination syndrome, in 241 people
- › Top reported symptoms include exercise intolerance, excessive fatigue, numbness, brain fog and neuropathy

An estimated 6.4% of U.S. adults have experienced symptoms of long COVID, a term used to describe a complex disorder that persists for three or more months after contracting COVID-19.<sup>1</sup> While long COVID has been extensively covered in the media, millions more suffer from long vax – a condition with nearly identical symptoms to long COVID, but often even more severe.

New York pulmonologist Dr. Pierre Kory and Dr. Paul Marik, a critical care doctor formerly with Sentara Norfolk General Hospital in East Virginia, are part of the Front Line COVID-19 Critical Care Working Group (FLCCC). They're trying to get the word out that long vax is not only real but has disabled many Americans who were at the peak of health prior to getting a COVID jab.<sup>2</sup>

## **At Long COVID Clinic, 70% of Patients Have Long Vax**

Kory opened a tele-health practice that specializes in treating COVID disease, including long COVID. Kory says:<sup>3</sup>

*"Long COVID, although a new name, is not a new disease. It meets the diagnostic criteria for a decades-old condition called myalgic encephalitis/chronic fatigue syndrome (ME/CFS).*

*The three symptom 'pillars' which lead to the diagnosis are fatigue, post-exertional malaise (PEM), and 'brain fog' (i.e. cognitive deficits ranging from word finding difficulties, short term memory loss, inability to focus/comprehend, and more rarely confusion or disorientation).*

*Although this triad is present in nearly every patient I see (rarely brain fog is missing), the patients also present with a 'side menu' of problems which can include sensory neuropathies, dysautonomia/POTS, motor neuropathies, abdominal issues, musculoskeletal complaints, and cranial symptoms (i.e tinnitus, vertigo, headaches, vision, hearing loss, smell loss, taste loss).*

*Many of my patients are debilitated and meet criteria for disability, despite the majority reporting being in the peak of health and functioning prior to the pandemic."*

Yet, Kory and colleagues quickly noticed that most of their patients reported their symptoms began "minutes, hours, days or several weeks"<sup>4</sup> after receiving a COVID-19 shot. While many had also had COVID-19, only a small number tied their symptoms to the viral infection.

While the team initially called the condition post-COVID vaccine injury syndrome, they changed the diagnosis to "long vax" because the symptoms were so close to long COVID – the difference being that the long vax patients tended to be sicker, with more frequent small fiber neuropathy and dysautonomia, Kory said.<sup>5</sup>

## **Research Details Neuropathic Symptoms Following COVID-19 Jabs**

Scientific studies detailing long vax symptoms continue to emerge. In one study from early in the pandemic, more than two-thirds of those reporting long COVID symptoms had negative antibody tests, suggesting at least some of them didn't even have COVID-19.<sup>6</sup> Meanwhile, many COVID jab recipients report long COVID-like symptoms.

As reported by Science magazine in 2022, "In rare cases, coronavirus vaccines may cause long COVID-like symptoms,"<sup>7</sup> which can include (but is not limited to) brain fog, memory problems, headaches, blurred vision, loss of smell, nerve pain, heart rate fluctuations, dramatic blood pressure swings and muscle weakness. The feeling of "internal electric shocks" are also reported.

Also in 2022, a preprint study from the U.S. National Institutes of Health reported new neuropathic symptoms that began in 23 adults within one month of receiving a COVID-19 shot.<sup>8</sup> All of the patients felt severe tingling or numbness in their faces or limbs, and 61% also experienced dizziness when standing up, intolerance to heat and heart palpitations.

When 12 of the patients had their nerve function tested, seven had less sweating in their hands and feet than normal, while six had a condition where their heart beats too fast when they stand up.<sup>9</sup>

The researchers also took skin samples from the lower legs of 16 patients. Among them, 31% showed signs that the small nerves in the skin were not as dense as they should be, which can indicate nerve damage. Another 13% were on the border of being considered damaged, and 19% had swollen nerve fibers. When five of the samples were

evaluated more closely, signs of an immune reaction in the blood vessels were detected.<sup>10</sup>

Further, while electrical tests on the nerves were normal for most participants, 52% showed clear signs of damage to the small nerves that can be felt but not easily seen. The study shows that after getting the COVID-19 shot, a range of symptoms related to nerve damage is possible, which might be caused by an immune system reaction.

## Yale Scientists Detail Long Vax Symptoms

A study by Yale scientists, including Dr. Harlan Krumholz of Yale School of Medicine in New Haven, Connecticut, also shed light on long vax, which they described as chronic post-vaccination syndrome, or PVS.<sup>11</sup> In a study of 241 people who reported PVS after an mRNA COVID-19 shot, the median time from the jab to the onset of symptoms was three days, with symptoms continuing for 595 days. The five most common symptoms included:<sup>12</sup>

- Exercise intolerance (71%)
- Excessive fatigue (69%)
- Numbness (63%)
- Brain fog (63%)
- Neuropathy (63%)

In the week before the survey was completed, patients reported a range of additional symptoms highlighting the mental toll the condition takes. The symptoms required a median of 20 interventions for treatment and included:<sup>13</sup>

Feeling unease (93%)

Fearfulness (82%)

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Overwhelmed by worries (81%)

Feelings of helplessness (80%)

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Anxiety (76%)

Depression (76%)

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Hopelessness (72%)

Worthlessness (49%)

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"In this study," the researchers explained, "individuals who reported PVS after COVID-19 vaccination had low health status, high symptom burden, and high psychosocial stress despite trying many treatments. There is a need for continued investigation to understand and treat this condition."<sup>14</sup>

Even a 2021 study reported a series of patients who experienced new autoimmune conditions – or flare-ups of existing autoimmune disease – following mRNA COVID-19 shots,<sup>15</sup> highlighting the importance of careful research into the ongoing health risks.

## **Will Long Vax Be Censored?**

It's hopeful that scientific on long vax is reaching medical journals and getting some media coverage.<sup>16</sup> But Kory and Marik are concerned it could reach a similar fate as other COVID shot coverage during the pandemic.

"The concern is that our findings, Krumholz's study, and any reports of adverse events from COVID-19 vaccination, will be subject to the same institutional censorship we saw throughout the pandemic. Suppressing this information risks creating an even bigger disaster," they told The Hill,<sup>17</sup> referring to a potential epidemic of autoimmune diseases that could occur as a result.

"America's health agencies need to snap into action to help study this problem so we can better understand and treat these conditions. Unfortunately, there doesn't seem to be much hope of this happening," Kory and Marik wrote. "The National Institutes of Health is fixated on studying the effect of Paxlovid, an antiviral COVID treatment, to treat long COVID and long vax, despite it having no proven effect on autoimmune disease."<sup>18</sup>

Further, Kory explains that while major medical centers and hospitals across the U.S. have opened long COVID clinics, the treatments they offer are largely ineffective, and they often gas-lit long vax patients who tried to get help:<sup>19</sup>

*"[F]or most of 2022 into 2023, those centers consistently gas-lit the Long Vax patients who presented to those clinics. Gaslighting of medical injuries is the well-described inability for physicians to recognize or accept when their own treatments (i.e the mRNA vaccines) cause harm ...*

*The stories my patients would tell me of the care they received included what I would describe as abuse or insults from the treating physicians when the patients tried to convince them that the vaccines were the cause. These stories still make my blood boil and have estranged many of my patients from 'the system.' I believe the gaslighting responses have lessened somewhat but I don't really know how much.*

*What angered me even further is that the health agencies only directed funding at long COVID and the medical literature and media only referred to sufferers as having long COVID. The contribution of the gene therapy vaccines are consistently ignored."*

## **Is Long Vax Behind the Explosion of Disability Claims?**

Kory believes that long vax, and to a lesser extent long COVID, are behind the explosion of disability claims that have occurred since COVID-19 shots rolled out.<sup>20</sup>

Data compiled by former BlackRock analyst and fund manager Edward Dowd revealed a sobering glimpse into the true carnage that occurred at the hands of the COVID-19 shot campaign,<sup>21</sup> and its results are striking. It revealed the following estimated human and economic costs:<sup>22</sup>

### **Human cost:**

- 26.6 million injuries
- 1.36 million disabilities
- 300,000 excess deaths

## Economic cost:

- Total: \$147.8 billion
- Injuries: \$89.9 billion
- Disabilities: \$52.2 billion
- Excess deaths: \$5.6 billion

What's more, this data is from the employed population, aged 16 to 64 – a typically healthy crowd. To put this into perspective, John Leake writes on *Courageous Discourse*, "Note that this death count in one year is 5.2 times the number of men killed in ten years of combat in Vietnam."<sup>23</sup>

## Help for Long Vax Symptoms

As long vax and its symptoms become increasingly recognized, it will hopefully lead to increased access to effective treatments. If you're experiencing symptoms, it's important to find a holistic health care practitioner who's familiar with long vax and how to treat it. You can also access FLCCC's I-RECOVER<sup>24</sup> guide,<sup>25</sup> which offers step-by-step instructions on how to treat reactions from COVID-19 injections.<sup>26</sup>

I also summarized [strategies to optimize mitochondrial health](#) if you're suffering from long COVID or long vax, with a focus on boosting mitochondrial health. To allow your body to heal you'll want to minimize EMF exposure as much as possible. Your diet also matters, as the cristae of the inner membrane of the mitochondria contains a fat called cardiolipin, the function of which is dependent on the type of fat you get from your diet.

The type of dietary fat that promotes healthy cardiolipin is omega-3 fat, and the type that destroys it is omega-6, especially [linoleic acid \(LA\)](#), which is highly susceptible to oxidation. So, to optimize your mitochondrial function, you want to avoid LA as much as possible and increase your intake of omega-3s.

Primary sources of LA include seed oils used in cooking, processed foods and restaurant foods made with seed oils, condiments, seeds and nuts, most olive oils and

avocado oils (due to the high prevalence of adulteration with cheaper seed oils). Animal foods raised on grains, such as conventional chicken and pork, are also high in LA.

Another major culprit that destroys mitochondrial function is excess iron – and almost everyone has too much iron. You can learn more about the [health risks of excess iron](#) in my interview with Christy Sutton, D.C. The most effective way to lower your iron is to donate blood two to four times a year.

Copper is also important for energy metabolism, detoxification and mitochondrial function, and copper deficiency is common. Other strategies include sun exposure and near-infrared light therapy, NAD+ optimizers and methylene blue, which can be a valuable rescue remedy. By improving your mitochondrial function and restoring the energy supply to your cells, you'll significantly increase your odds of reversing the problems caused by the jab or the virus.

## Sources and References

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