



# COVID-19 AND SARS-COV-2

The Science and Clinical Application of  
Conventional and Complementary Treatments

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# Solving the Mystery of COVID-19

## Holistic Medical Nutrition Therapy

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### CONTENTS

Introduction	231
Unfolding the Mystery: Out of the Box Observation	232
Unfolding the Mystery: Analyzing the Observations	234
Prediction Number 1	234
Prediction Number 2	234
Implementing the Food as Medicine: The Three-Step Flu Diet	235
Day 1 (Liquid)	235
Day 2 (Fluid)	235
Day 3 (Solid)	235
Step Three	236
Conclusion	236
References	236

### INTRODUCTION

The author and his team have had the rare privilege of treating and curing more than 5000 patients, indeed, this was at the peak of the pandemic between June 5, 2020, and July 14, 2020. This was possible with the help of a network of more than 200 influenza experts spread all across the country (and also a few outside the country).

The author and his team of experts achieved a cure with zero medication and zero percent mortality, with more than 80% of patients resolving their symptoms in 72 hours following a three-day flu diet (details of which are given in the chapters that follow) and 75% of patients (among those who went for a second RT-PCR test for SARS-CoV-2) testing negative for SARS-CoV-2.

These results may be baffling and may look manipulated and over-exaggerated for common people as well as conventional doctors with a mindset of treating influenza/Covid-19 patients with the medicine protocol set by WHO, where they are used to 3-4% mortality with an average hospital discharge rate of 14 days, but for the author and his team, the mystery was something else.

Out of the 5000 plus patients with classical influenza-like illness (ILI) symptoms as defined by the CDC, about 1000 patients came to the author and his team with a SARS-CoV-2 positive test



reported through RT-PCR, and the rest arrived without going for an RT-PCR test for Covid-19. This means, out of 5000 ILI patients, 1000 were Covid-19 patients and 4000 were non-Covid-19 ILI patients.

If we go by the guidelines of issuing death certificates released by ICMR (Indian Council of Medical Research), if any person dies with the classical symptoms of ILI, then the cause of death should be mentioned as Covid-19 even if the RT-PCR test for SARS-CoV-2 is negative before or after death. This means that ICMR believes that 100% of ILI patients have a single causative agent and that should be SARS-CoV-2, although this theory of ICMR does not have any evidence in the medical literature (NCDIR-ICMR, 2020). Going by the guidelines of "How to Report in Death Certificates" by ICMR, technically, I should say that in the last 40 days, we have cured 5000+ Covid-19 patients. However, the causative agent of the symptoms of flu or ILI can be among more than 200 identified viruses and could be other pathogens including bacteria, fungi, and even non-parasite causes including side effects of drugs and so on.

The mystery for the author and his team while treating these 5000 plus patients was that they could not find any particular symptoms among the ILI patients with a Covid-19 positive status that were unique to them (1000 patients with a positive RT-PCR report) and which could be distinguishable from the rest of the 4000 patients (surely many out of them might have a different causative agent than SARS-CoV-2).

## UNFOLDING THE MYSTERY: OUT OF THE BOX OBSERVATION

Symptomatically, Covid-19 patients are identical to other ILI patients with no unique signs or patterns of recovery. To unfold the mystery rather than solve the puzzle called Covid-19, the author and his team wish to take the readers to the first week of January 2020 (around January 4–7) with the headline in most of the newspapers across the world "Cause of Wuhan's mysterious pneumonia cases still unknown, Chinese officials say" (Belluz, 2020), which even the WHO acknowledged on January 5, 2020, on their website (WHO, 2020a).

As per the WHO, on January 3, 2020 (WHO, 2020a), 44 patients with pneumonia of unknown etiology were reported by the national authorities of China.

Knowing that each year more than 2.5 million (Dadonaite, 2018) people die of pneumonia and around 450 million people suffer from pneumonia or ILI, the intriguing question is how the health authorities distinguished those reported 44 patients as pneumonia with unknown etiology. Let's have a look at the following facts:

1. In more than 60% of the cases of ILI, no virus could be detected (Yu et al., 2018).
2. In more than 20% of the cases of pneumonia, no causative agent could be detected (Ali et al., 2016)

All across the world, including our neighborhood, for every ten patients with ILI (symptomatically), at least six will not be detected with any virus known for ILI.

For every ten patients with pneumonia, at least two will not be detected with any known causative agent.

Meaning that more than 60% of patients with ILI can be called ILI patients with unknown etiology (cause), and 20% of pneumonia patients with unknown etiology can be called mysterious pneumonia.

Here, the author and his team wish to emphasize that symptomatically, the COVID-19 patients do not show any unique characteristics or signs or patterns that are distinguishable from other



ILI/pneumonia patients. In addition, it is not possible to rule out all the known causes of pneumonia as there are thousands of causative agents which may lead to pneumonia. Diagnostically, the best tool available to science is the PCR test (which is known as the gold standard), but with high false positives, which means that when PCR tests are conducted for more than 200 viruses known to humans to be the causative agent of ILI/pneumonia, statistically (on average), it will show positive for at least two of the 200 viruses, even in the absence of any of the 200 viruses, since the specificity of the PCR test, by design, cannot be more than 99%, which translates to showing two viruses as a causative agent, even if none of them may be present.

There are virtually no means to know whether the positive test is a TRUE positive or a FALSE positive.

Conclusively, the positive result (even though it is false positive) could be accepted as a causative agent of the ILI for a particular patient.

Hence, the question is "what was the basis of deciding that the causative agent of pneumonia among the 44 patients is of unknown etiology?" I tried to refer to the WHO website at the link but the matter does not exist (Figure 15.1).

Since the WHO and the Chinese health authorities have not given any data or evidence or study of proof, how can they rule out the possibility of all known causes of pneumonia? And how did they conclude that SARS-CoV-2 may be the causative agent of pneumonia among those 44 patients? Even if it is the causative agent, it may not be a new virus to humans, it rather may be one of the causative agents of pneumonia among those 20% of patients for whom the causative agent could not be detected earlier.

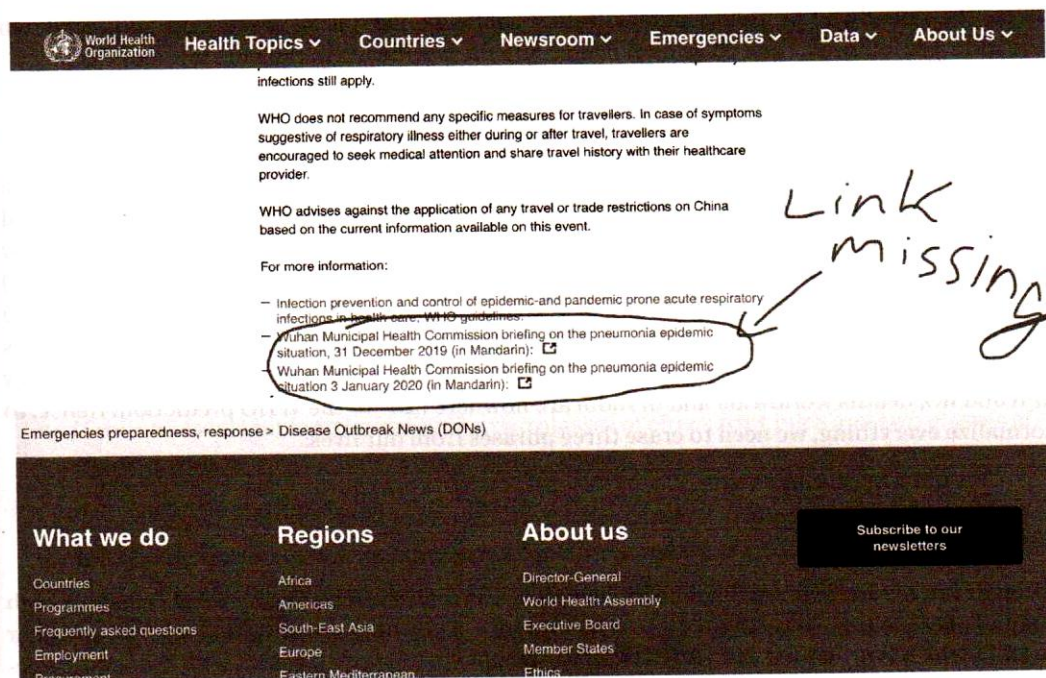


Figure 15.1 A screenshot representing missing links.

In simple language, SARS-CoV-2 may have been causing ILI/pneumonia for a long time, but it is only now that we have devised a method to detect the virus.

## UNFOLDING THE MYSTERY: ANALYZING THE OBSERVATIONS

Based on my experience of treating more than 5000 patients, and with the previous evidence, we can conclude that SARS-CoV-2 is not a new virus, with no unique illnesses/symptoms, especially when the WHO or China have not given any evidence to prove it to be a new virus.

Hence, announcing a pandemic is technically wrong, as, by definition, a pandemic means a worldwide spread of a new disease. If we talk of India, the Epidemic Act 1897, as implemented by the Government of India, is unconstitutional and unwarranted since, by the WHO definition, epidemic means the occurrence of an illness clearly in excess of normal expectancy. For India, the average number of deaths due to pneumonia is 1.5 lakh per year. Deaths due to Covid-19 by July 13, 2020, were 22,000 which may not be true Covid deaths, rather deaths with SARS-CoV-2 due to experimental medical procedures and co-morbid conditions (as explained in the later chapters).

We must remind ourselves that the basis of lockdown and social distancing with the announcement of a pandemic and the implementation of the Epidemic Act was a prediction by the WHO in March 2020 (WHO, 2020a, b).

### Prediction Number 1

**Prediction for the world.** If no lockdown or social distancing or other preventive measures are taken, then nearly 40 million people will die worldwide. Even if all prevention and lockdown measures are followed, then 20 million people will die worldwide in the next few months.

### Prediction Number 2

**Prediction for India.** If no lockdown or social distancing or other preventive measures are taken, then up to 6,096,359 people will die, and if all the WHO guidelines of lockdown or social distancing are followed, then about 2,375,803 people will die due to Covid-19 in the next few months. Now, with a serology survey by ICMR, it was established that the case fatality rate (CFR) of Covid-19 was 0.08% (Online, 2020; WHO, 2020a, b), which is lower than seasonal flu, and the rate of transmission (RO) is 1.15, which is less than the common cold, meaning that Covid-19 is neither deadly nor infectious as has been predicted and projected. Fortunately, with a very low CFR and RO, deaths worldwide and in India are nowhere near to the WHO prediction. Hence, to normalize everything, we need to erase three phrases from our lives:

- It is not a mysterious virus
- No epidemic
- No pandemic

Through the media, you are made to believe that it is a mysterious deadly virus causing a high number of casualties, but with no supportive evidence. As by now, we know that it is just a regular flu (ILI), which is presented as COVID-19, so we decided to treat our patients with the same three-step flu diet that we used successfully to cure our flu patients since 2016.



## IMPLEMENTING THE FOOD AS MEDICINE: THE THREE-STEP FLU DIET

The three-step flu diet works and is based on the evidence from more than 167 research papers from the last 100 years.

The following is the three-step flu diet.

### Day 1 (Liquid)

Consume citrus fruit juice and coconut water in the quantities specified below:

- Your body weight (kg)/10, glasses of fresh citrus fruit juice + body weight (kg)/10 glasses of coconut water.
- Let us say your body weight is 60 kg so  $60/10 = \text{six}$  glasses of citrus fruit juice and six glasses of coconut water.

Do not consume packed juice, instead, have fresh juice and take it without sieving. Take the juice and coconut water alternately every hour, sip by sip, spending at least 15 minutes on each glass. This will keep the temperature under control. Vitamin C in citrus fruit juice supports immunity and helps in getting rid of the virus.

Coconut water helps hydration. It is the best mineral water in the world made by God.

### Day 2 (Fluid)

Consume citrus fruit juice and coconut water in the quantities specified below:

- Your body weight (kg)/20, glasses of citrus fruit juice + body weight (kg)/20 glasses of coconut water + your body weight (kg)  $\times 5$  g of cucumber and tomatoes.
- Let us say your body weight is 60 kg so  $60/20 = \text{three}$  glasses of citrus fruit juice and three glasses of coconut water, as well as  $60 \times 5 = 300$  g of cucumber and tomatoes.

You will be surprised to see that by the end of day 2, you start feeling better and your temperature is under control. You will have regained some strength.

### Day 3 (Solid)

For breakfast, consume the following:

- Your body weight (kg)/30 glasses of citrus fruit juice + body weight (kg)/30 glasses of coconut water.
- If your body weight is 60 kg so  $60/30 = \text{two}$  glasses of citrus fruit juice and two glasses of coconut water.

For lunch, consume the following:

- Your body weight (kg)  $\times 5$  g of cucumber and tomatoes.
- If your body weight is 60 kg, so  $60 \times 5 = 300$  g of cucumber and tomatoes.

By evening, you will be surprised to find yourself fit. You can have normal home-cooked food with less oil and salt, leaving animal protein for dinner.

If you follow this simple diet, you will be back to work on the fourth day.

## Step Three

Usually, people try to manage the flu with medicines, and sometimes, there are chances for the virus to move down from the upper respiratory tract to the lower respiratory tract. As a result, breathing difficulty occurs and if checked with an oximeter, the oxygen level will be  $\leq 90\%$ . In such situations, the doctor will advise a ventilator because the lungs are full of water. What you have to do in such a situation is avoid going to the hospital because you will be put on a mechanical ventilator. You have to make your own ventilator at home. This is called prone ventilation (Guerin, 2014).

## CONCLUSION

It should be noted that by July 14, 2020, we cured more than 5000 flu/Covid-19 patients with more than 200 experts, and at the time of submitting this chapter, the total count of patients went to more than 50,000 with around 650 experts, while maintaining zero mortality.

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