

The COVID Pandemic Is Solvable Now, Says Physician Workgroup Headed by David Hanscom, M.D.

Seeking to bring greater attention to a paper published in a special COVID edition of SciMedicine Journal, the workgroup wishes to facilitate a nationwide systematic approach to eliminating the cytokine storm that makes COVID-19 so deadly.

NEWS PROVIDED BY

David Hanscom →

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OAKLAND, Calif., Aug. 26, 2020 /PRNewswire/ -- According to a workgroup composed of physicians/ psychologists, and researchers, medicine has the capacity to halt the COVID-19 pandemic now, as long as every aspect of it is systematically and simultaneously addressed.

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David Hanscom

The group of eight has outlined its approach in a recent paper published in *SciMedicine Journal*, an open-access journal. Its mission is "making research freely available to the public supports a greater global exchange of knowledge." The paper entitled "Polyvagal and Global Cytokine Theory of Safety and Threat Covid-19 – Plan B" can be found [here](#).

"We are asking that this protocol be viewed as a foundation for designing clinical trials," he says. "There is much work to be done regarding dosing and timing." Most of the treatments are already medically proven with minimal or no risk."

"With the crushing workload, it's a challenge to get physicians' attention and consider a different approach," acknowledges Hanscom, the paper's lead author.

The group originally came together to create cross-discipline discussions around better solutions for chronic pain. Hanscom explains the commonality between chronic pain and COVID by saying, "Every chronic disease state has an inflammatory component that causes progressive tissue destruction and creates physical symptoms. It is similar to the COVID problem, only the COVID-19 scenario occurs much faster."

Some of the protocol's highlights include optimizing the body's defenses with nutrition, vitamins, trace elements, sleep, and exercise; using the body's own resources by recruiting the autonomic nervous system to counteract elevated pro-inflammatory cytokines; then using progressive pharmacological interventions beginning with minimal risk meds. It is the only approach that considers the timing of treatments in light of the fight, flight, freeze, or faint phases of the body's response to threats.

About the Workgroup

David A. Hanscom, M.D., is a retired orthopedic spine surgeon who treated hundreds of patients suffering from chronic pain through concepts presented in his book, *Back in Control: A Surgeon's Roadmap Out of Chronic Pain*.

Stephen Porges, Ph.D., is a distinguished university scientist at the Kinsey Institute, Indiana University Bloomington and professor in the department of psychiatry at the University of North Carolina in Chapel Hill. He proposed the Polyvagal Theory in the 1990s.

David R Clawson, M.D., is a physiatrist who is affiliated with the Swedish Medical Center, Seattle, Wash. It is his remarkable capacity to combine clinical care and basic science research with the deep insights provided by Stephen Porges that has formed the core of this work.

Ray Bunnage is a database and visualization developer at the University of Washington Medicine in Seattle, with expertise in neuroscience.

C. Sue Carter, Ph.D., is director of the Kinsey Institute, Indiana University in Bloomington. She is world-renowned for her work with oxytocin and vasopressin. She is married to Stephen Porges.

Les Aria, Ph.D., is a pain psychologist at Kaiser Northern California in Sacramento. His approach to treating patients is based on The Polyvagal Theory and helping patients feel safe through stimulating the parasympathetic nervous system.

Steve Lederman, M.D., is a recently retired cardiologist with expertise in nutrition's role in inflammation.

James Taylor, M.D., an anesthesiologist and pain physician, is the director of Integrated Pain Solutions in North Carolina, where cannabinoids are one of his core treatment modalities.

Contact: Dr. David Hanscom, (206) 890-1892; 246136@email4pr.com

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