



ISCO3 Recommendation based on the preliminary results about the use of O₂/O₃ in the treatment /prevention of Novel Coronavirus Pneumonia (COVID-19).

Security alert: MAH volume > 100 mL // Risk of thrombus in COVID-19 + Patients

The up-date of these recommendations take into consideration the preliminary results listed in “ISCO3 follow-up of the original paper with outcomes”.

<p>ISCO3 Theoretical protocol for Intervention in case of Mild /Moderate /Severe COVID-19 + CRITICAL O₂/O₃ NON-considering</p>	<p>O₃SS 5 →3 µg/mL (bub.) 200 mL, Daily x 10 d</p> <p>Or MAH Blood vol. 100 mL. <i>Only in patients with normal d dimer values</i> O₂/O₃: Blood 1:1. Daily for 5 days + 3 weekly x 10/14 days. First week 30 µg/mL, last 45 µg/mL.</p>	<p>Consider glutathione 1.2 g or / and Vitamin C 1-3 g in 100 mL of saline. Two times a week for 4 weeks</p> <p>Prelim. Dada Indicate ↑ success of O₃SS See: Original papers with OUTCOMES for references</p>																								
<p>Intervention alternative when O₃SS or MAH are not available RIO3: 1 every 12 h for 14 days</p>	<table border="1" data-bbox="667 645 975 745"> <thead> <tr> <th>RIO3</th> <th>Conc.</th> <th>Vol.</th> <th>Dose (mg)</th> </tr> </thead> <tbody> <tr> <td>Day 1 / 2</td> <td>20</td> <td>100</td> <td>2</td> </tr> <tr> <td>Day 3 / 4</td> <td>25</td> <td>150</td> <td>3.75</td> </tr> <tr> <td>Day 5 / 6</td> <td>30</td> <td>150</td> <td>4.5</td> </tr> <tr> <td>Day 7 / 8</td> <td>35</td> <td>200</td> <td>7</td> </tr> <tr> <td>Day 8-14</td> <td>40</td> <td>200</td> <td>8</td> </tr> </tbody> </table> <p>+ MiAH 5 mL Blood + 5 mL O₃ 90 µg/mL, Once a week for 4 weeks.</p>	RIO3	Conc.	Vol.	Dose (mg)	Day 1 / 2	20	100	2	Day 3 / 4	25	150	3.75	Day 5 / 6	30	150	4.5	Day 7 / 8	35	200	7	Day 8-14	40	200	8	<p>Support: <i>Archiv of Medical Research</i> 2005. 36 (5):549-54 // <i>Virulence</i> 1(3), 2010: 215-217. // <i>Ozone: Science & Engineering</i> 2012.34: 451-458 // <i>Ozone: Science & Engineering</i>, 2016 38 (322-345).</p> <p>Oral Therapy: Probiotic plus supplementation proposed in Prevention protocol ↓</p>
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<p>ISCO3 Theoretical protocol for Prevention Medical doctor or occupational risk people</p>	<p>MiAH 5 mL Blood + session 1/2: 5 mL O₃ 25 µg/mL; session 3/4: 5 mL O₃ 30 µg/mL; session 5/6: 5 mL O₃ 30 µg/mL. Once a week.</p> <p>Or Rectal insufflation 3 times a week 40 µg/mL /100 mL</p> <p>Or O₃SS 2 µg/mL (bub.) 200 mL, Ones a week</p>	<p>Consider: glutathione 600 mg or / and Vit. C 1 g in 100 mL of saline i.v. once a week. Oral: Once a day: N-acetyl cysteine 600 mg for 30 days, plus Vit.D 2000 UI (o 50 µg). Twice a day Vit. C 500 mg. Melatonin 3/5 mg 30 min before sleep.</p>																								
<p>ISCO3 Theoretical protocol for Recovery</p>	<p>Rectal insufflation 2 times a week 30 µg/mL /100 mL, to complete 20 session, then 2 months off. Repeat treatment cycles until complete remission</p>	<p>Oral: Once a day: N-acetyl cysteine 600 mg 30 days off / 30 days on, plus Vit.D 2000 UI (o 50 µg). Twice a day Vit. C 300 mg, Zn 5 mg. Melatonin 3/5 mg 30 min before sleep.</p>																								
<p>Personal Protective Equipment Disinfection</p>	<p>O₃ concentration >15 µg/mL Contact time: >10 min Humidity: 99 %</p>	<p>Ref: <i>Antioxidants</i> 2020, 9, 1222; doi:10.3390/antiox9121222</p>																								

Ozone in Personal Protective Equipment Disinfection

Bernardino Clavo, Elizabeth Córdoba-Lanús, Francisco Rodríguez-Esparragón, Sara E. Cazorla-Rivero, Omar García-Pérez, José E. Piñero, Jesús Villar, Ángeles Blanco, Cristina Torres-Ascensión, José L. Martín-Barrasa, Jesús M. González-Martin, Pedro Serrano-Aguilar and Jacob Lorenzo-Morales. Effects of Ozone Treatment on Personal Protective Equipment Contaminated with SARS-CoV-2. *Antioxidants* 2020, 9, 1222; doi:10.3390/antiox9121222

Angeles Blanco, Francisco de Borja Ojembarrena, Bernardino Clavo, Carlos Negro. Ozone potential to fight against SAR-COV-2 pandemic: facts and research needs. 2021 Jan 2;1-15. *Environ Sci Pollut Res Int* doi: 10.1007/s11356-020-12036-9.

Ozone in Environments Disinfection

F De Caro, G Moccia, A Borrelli, A Anneschiario, G Cioffi, A Campanella, O Motta, V Caputo, G Boccia, and M Capunzo. SARS-CoV-2: Sanitize a hospital Eur J Public Health. 2020 Sep; 30(Suppl 5): ckaa166.716. doi: 10.1093/eurpub/ckaa166.716

Zucker, Ines; Lester, Yaal; Alter, Joel; Werbner, Michal; Yecheskel, Yinon; Gal-Tanam, Meital; Dessau, Moshe. Pseudoviruses for the assessment of coronavirus disinfection by ozone. *Environ Chem Lett*; 1-7, 2021 Jan 13.

Giuseppina Moccia, Francesco De Caro, Concetta Pironti, Giovanni Boccia, Mario Capunzo, Anna Borrelli, Oriana Motta. Development and Improvement of an Effective Method for Air and Surfaces Disinfection with Ozone Gas as a Decontaminating Agent. *Medicina (Kaunas)*. 2020 Oct 30;56(11):578. doi: 10.3390/medicina56110578.

Cristiano, Luigi. Could ozone be an effective disinfection measure against the novel coronavirus (SARS-CoV-2)? *J Prev Med Hyg*; 61(3): E301-E303, 2020 Sep.

Reference:

Bocci V. et al. (2010) Ozonation of human HIV-infected plasmas for producing a global vaccine: How HIV-patients may help fight the HIV pandemic. *Virulence* 1(3) 215-217.

Hernández Rosales et al. (2005) Ozone therapy effects on biomarkers and lung function in asthma. *Archiv of Medical Research* 36 (5):549-54

Jeffrey I Mechanick et al. Clinical Nutrition Research and the COVID-19 Pandemic: A Scoping Review of the ASPEN COVID-19 Nutrition Taskforce JPEN J Parenter Enteral Nutr. 2020 Oct 23. doi: 10.1002/jpen.2036. Online ahead of print.

Mawsouf M.N et al. Ozone Therapy in Patients with Viral Hepatitis C. Ten Years of Experience (2012). *Ozone: Science & Engineering* 34: 451-458

Viebahn-Hänsler et al. (2016). Ozone in Medicine: Clinical Evaluation and Evidence Classification of the Systemic Ozone Applications, Major Autohemotherapy and Rectal Insufflation, According to the Requirements for Evidence-Based Medicin. *Ozone: Science & Engineering*, 38 (322-345).

Please, refer any up-date / side effect by E.mail: info@isco3.org