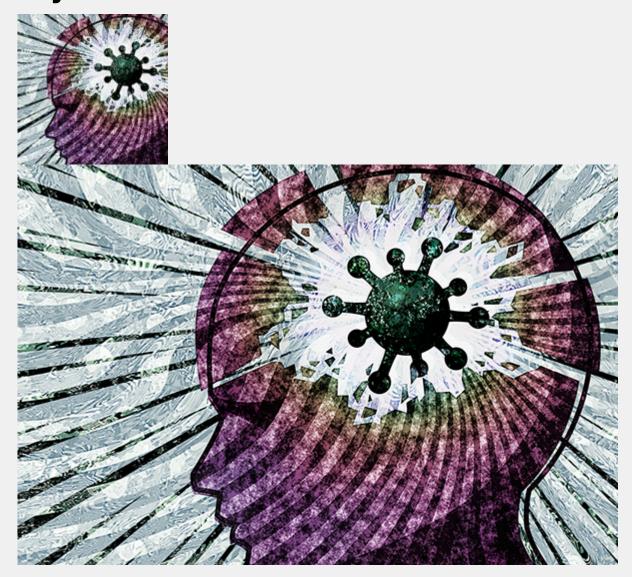
Maybe it's time to talk LESS about COVID



This New Year, I've made a resolution to talk less about Covid. It's taken center stage for nearly two years. In the early months of the pandemic, I broke precedent and issued breathless pandemic dispatches via my podcasts seven days a week; we interviewed countless experts who offered their latest predictions and protective measures.

So why am I talking about it in this week's newsletter column? Well, consider this a sort of *cri de couer*.

It's because the narratives about Covid are collapsing, and we're rapidly acquiring a collective sense that we've been taken for a ride. Millions who dutifully vaccinated, boosted, masked and isolated are coming down sick this month, and they're saying to themselves: "So this is what I've spent the better part of the last couple of years obsessing about? Big whoop! I felt lousy for a few days, but what's all the hoopla about?" Even some of my older, unvaccinated patients have weathered it pretty well.

Covid as a *brand* is losing its mojo. Politicians, medical authorities, and the media have exploited a tragic natural phenomenon and driven it deep into the consciousness of everyday Americans. For the past 22 months, we've woken up every single morning and our first thought was "It's Groundhog Day—a plague is raging." It's never far

from our thoughts.

It's ironic that one of the proposed off-the-shelf therapeutics for Covid is Luvox, a medication developed for obsessive-compulsive disorder!

As Covid spread, elites found their moment. Drab public health authorities and epidemiologists—never the life of the party—stepped into the breach to issue dire predictions. They were suddenly feted on talk shows and quoted in newspapers. Having terrified us, they then schooled us on how they could deliver us from annihilation. They presided over the natural peregrinations of the pandemic as if they had control, an illusion which the current emergence of Omicron has dispelled.

Politicians, who always have an inflated perception of how they shape the course of events, began issuing edicts. After all, they reasoned, moments like these are what government is for—to serve and protect in times of crisis. We were glued to our TVs awaiting their latest dispatches, reminiscent of FDR's reassuring fireside chats.

They also leveraged the pandemic for political advantage, but few escaped its caprices. Trump lost his presidency in part because of the perception that he wasn't doing enough to stem the contagion. Biden promised to "crush Covid", but polls are now showing that he, too, is succumbing to the whims of the virus.

Then there was the media. When has the media *not* exhibited a negative bias? "If it bleeds, it leads." Just watch the local news on an average day, and experience a cavalcade of disasters and hideous murders. Every tropical depression forming in the mid-Atlantic is a dagger pointed at the heart of the Eastern Seaboard—until it doesn't materialize.

Social media amplified the obsession. In times of stress, people vent. Anger and frustration cloud rational thought and undermine impulse control. People who've never met argued online over masks, vaccines and lockdown measures. They had little else to do because they were sidelined from normal activities. Spending every waking hour immersed in Covid speculation gave them the illusion of control.

BigPharma had its heyday as it introduced vaccines and powerful medications, all of which were shown to have severe limitations as Covid sidestepped them with Omicron. An already vaccine-skeptical public was asked to put aside their doubts: "This time, we've got it right!" Despite an abysmal prior track record vs. respiratory viruses, we suspended our disbelief.

Everyone had an agenda. Mostly, it was about positioning themselves at the center of the discourse: "Listen to me, I've got an answer!" I even abetted that, promoting my views about natural measures to stave off severe Covid. The stories were true and accurate, and possibly the most constructive of all Covid mitigation strategies, in light of the emerging realization that other conventional measures are proving insufficient.

But I wonder if I didn't inadvertently amplify the hysteria. People fret: "Am I sleeping enough? Am I too fat? Am I exercising sufficiently? Am I taking the right supplements?" It made it sound like there was a merit system conferring perfect resistance to a virus that turned out to be an equal opportunity predator. Would you turn out to be among the healthy "elect" whose virtuous lifestyles rendered them bullet-proof? Many who are sniffling and coughing their way through January are asking themselves why they weren't invulnerable.

A recent focus of some of my podcasts has been Long Covid. It's estimated that somewhere between 10 and 50 per cent of patients who recover from Covid experience a

bewildering array of chronic symptoms. It's a real phenomenon, and some of my patients are recovering slowly with help from innovative modalities. It's a medical challenge.

For those, like myself, who are confident that they're young enough or in sufficiently good health to survive Covid, Long Covid has been an additional source of dread. Some researchers report that, although it's more likely to occur in hospitalized survivors of Covid, Long Covid can afflict even those with mild infections, seemingly at random and without regard to traditional "comorbidities" like age, obesity or frailty. Scary!

But a recent study suggests that hyperawareness of Long Covid has had an unintended effect. In a French survey of over 26,000 patients claiming Long Covid, it was revealed that half had no evidence of a prior infection. Even allowing for the imprecision of antibody testing, it suggests that many people who feel lousy—for whatever reason—may falsely attribute this to the "elephant in the room"—Covid.

Some will recall the late Dr. John Sarno who I interviewed on my radio show during his heyday in the 90s. Dr. Sarno was a rehabilitation physician who gained fame for his book Healing Back Pain. He was adamantly opposed to back surgery, claiming it almost never provided lasting relief. I once asked him if he preferred natural modalities like acupuncture, chiropractic, physical therapy, massage, or anti-inflammatory supplements.

I was a little taken aback when he emphatically said "No". He explained that he was against *any* intervention that fueled preoccupation with back pain. These activities, he claimed, reinforced the pain circuits that keep patients in an illness mode. X-rays, MRIs, doctors' visits all conspire to remind sufferers that something is irrevocably wrong.

I was skeptical at first, but then I referred some of my back pain patients to Dr. Sarno. At that time, he was conducting group sessions with patients, interspersed with individual visits. Essentially, he would *talk* to them.

One patient who had tried every modality for chronic debilitating back pain came back to me to report on his experience with Sarno. To this day, I remember the broad smile on his face as he announced to me that his back pain was "gone". "Completely gone?" I replied. "Yes, completely," he said. "What did you do?" "Nothing. We just talked. He got me to stop focusing on my back pain."

Masking, frequent testing, vaccine mandates, and lockdowns are ubiquitous reminders that we're in the grips of a deadly contagion. Covid, unlike some cases of back pain, is decidedly not psychosomatic; it kills people and leaves many debilitated. But we could use a dose of Dr. Sarno's advice in coping with the pall of worry that the pandemic has engendered, to loosen its grip on our psyches, and to free us to address the many clear and present scourges that continue to threaten the health of Americans: heart disease, cancer, diabetes, neurodegenerative disease, psychiatric disorders, and autoimmunity.

As Omicron carves a swath through America, amping up natural immunity among vaccinated and unvaccinated alike, maybe it's time to talk LESS about Covid.