

ASCORBIC ACID (AA/VIT C)

2021

Dosage Recommendations* for SARS-CoV-2 & Variants

(suitable for post-full/partial-vax infection, 1st-time, or reinfection)



NO to MILD Symptoms

ADULTS

- take initial dose of 3 grams[#], followed by 1 to 2 grams every hour. You can repeat this cycle every 8 hours until symptoms subside
- once symptom free, take 1 to 2 grams every hour – total of 8 to 12 grams daily
- make sure you take a higher level of AA than before you were infected

CHILDREN (UNDER 12)

- take initial dose of 1 gram, followed by 0.5 gram every hour. You can repeat this cycle every 8 hours until symptoms subside
- once symptom free, take 0.5 gram every hour – total of 0.5 gram per 10 lb. body weight plus 1 gram daily, to be taken in divided doses, e.g., a 60 lb. child will be taking 4 grams in total daily, divided ideally into 8 doses, upon recovery
- infants and children under 5 years old can be given 0.5 grams per 10 lb. body weight plus 200 milligrams for each additional year of age, e.g., a 2-year-old child weighing 20 lbs. will be taking 1.4 grams total daily, divided into small even doses throughout the day
- if the child has been taking AA before infection, make sure that he/she is given a higher level of AA after infection than before if the child suffered symptoms during infection – and higher daily dose should be given after recovery from infection



SEVERE Symptoms

ADULTS

- take initial dose of 3 to 5 grams, depending on severity
 - ⇒ subsequent doses: 2 grams every 30 minutes
 - ⇒ if fever, breathing distress, myalgia does not improve in 3 to 4 hours, repeat this cycle with 3 to 5 grams, followed by 2 grams every 30 minutes. Repeat this cycle every 12 hours
 - ⇒ if conditions do not improve after 12 hours, increase the initial dose up to 10 grams followed by 3 to 5 grams every 30 minutes
- once your condition improves and stabilizes, go back to 2 grams every hour (instead of 30 minutes)

CHILDREN (UNDER 12)

- take initial dose of 1 to 2 grams, depending on severity
 - ⇒ subsequent doses: 0.5 grams every 30 minutes
 - ⇒ if fever, breathing distress, myalgia does not improve in 3 to 4 hours, repeat this cycle with 1 to 2 grams, followed by 0.5 grams every 30 minutes. Repeat this cycle every 12 hours
 - ⇒ if conditions do not improve after 12 hours, increase the initial dose up to 3 to 4 grams followed by 1 gram every 30 minutes
- once your condition improves and stabilizes, go back to 0.5 grams every hour (instead of 30 minutes)

*If symptoms like shortness of breath return upon reduction of AA, take a hammer dose immediately: 3-5 g for adults, 2-3 g for children. Continue to use hammer doses until breathing and oxygen saturation return to normal. Tolerance for AA during critical illness may be extremely high (over 100 g reported**).*



“Maintenance Dosage Guideline”

Pandemic era AA maintenance dose depends on individual health and risk exposure. In general, recommended dosage:

Children under 12: should be given 500 mg/ 10 lbs body weight, not to exceed 500 mg/hr.

Teenagers (12-16): require 6-10 g, not to exceed 1 g/hr.

Adults (above 16): 8-12 g, not to exceed 1 g/hr.

*Have you had your AA
and MEL today?*

- Doris Loh

***SHOULD NOT be regarded as MEDICAL ADVICE**

1 gram (g) = 1000 milligrams (mg)

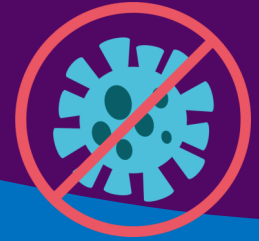
**Cathart RF. The Method of Determining Proper Doses of Vitamin C for the Treatment of Disease by Titrating to Bowel Tolerance. *Australas Nurses J.* 1980 Mar;9(4):9-13.
<http://orthomolecular.org/library/jom/1981/pdf/1981-v10n02-p125.pdf>

MELATONIN (MEL)

2021

Dosage Recommendations* for SARS-CoV-2 & Variants

(suitable for post-full/partial-vax infection, 1st-time/reinfection, or long-haulers)



MAINTENANCE DOSAGES

ADULTS (for never-infected or fully-vaccinated)

During the pandemic maintenance dosages between 1.0 to 5.0 mg[#], depending on age, health, and night time light exposure, may be required. Individuals in excellent health or those with mitochondrial issues may require lower doses between 0.1 to 0.5 mg. MEL should be taken after 8:30 pm, preferably 10-15 mins before sleep.

FOR SARS-CoV-2 INFECTIONS

ADULTS

Day 1: upon first onset of symptoms, increase night time dosage to at least **10 mg**. Immediately commence oral ascorbic acid protocols described in Revised 2021 Guidelines for AA/VIT C. If symptoms do not subside or improve in 24 hours, maintain AA dosage per 2021 guidelines and increase melatonin dosage as follows:

Day 2: Total 24-hour dose is **30 mg**. **20 mg** taken at night; remainder **10 mg** is divided into 5 doses during day time, **2 mg** each dose. Maintain Day 2 dose if there is improvement. If condition deteriorates within 24 hours, proceed to Day 3 dosage.

Day 3: Total 24-hour dose is **75 mg**. **50 mg** taken at night; remainder **25 mg** is divided into 5 doses during day time, **5 mg** each dose. Maintain Day 3 dose if there is improvement. If condition deteriorates within 24 hours, proceed to Day 4 dosage.

Day 4: Total 24-hour dose is **110 mg**. **80 mg** taken at night (can be divided into 2 doses); remainder **30 mg** is divided into 6 doses during day time, **5 mg** each dose. Maintain this dose until signs of recovery, then reduce dosage every 3 days in reverse order. Stay at Day 2 dosage until you are totally clear of all symptoms (see Recovery Section below).

RECOVERY: Severe or vaccinated infections require Day 2 dosage x 14 days, followed by Day 1 x 8-10 weeks. Mild infections require Day 1 dosage x 30 days.

Longhaulers should remain on Day 2 doses until symptoms resolve, and increase to Day 3 if symptoms persist beyond 14 days. Remain on Day 3 for 14 days after resolution/stabilization of symptoms, then reduce to Day 2 doses for 30 days before decreasing to Day 1 doses for another 30 days. Remain on Maintenance Dose for at least 6 months upon completion of the Day 1 x 30 period. If health returns to baseline, then you may lower maintenance dose if desired.

CHILDREN

None required for under 8 years old unless with poor health/sleep and/or poor light hygiene and excess EMF exposure. 150 mcg to 0.5 mg can be supplemented after 8 pm, preferably 10-15 mins before sleep.

Have you had your AA and MEL today?

- Doris Loh

CHILDREN (0 to 7 years old)

During first 6 months, infants rely on breastmilk for melatonin. Increase mother's intake to supply melatonin to infants still breastfeeding. For all infection protocols for young children below the age of 8, follow same guidelines for children ages 8 to 16, but substitute dosage as follows:

Day 1: Total Melatonin = **0.2 mg**/10 lbs body weight

Day 2: Total Melatonin = **1.0 mg**/10 lbs body weight

Day 3: Total Melatonin = **2.0 mg**/10 lbs body weight

Day 4: Total Melatonin = **4.0 mg**/10 lbs body weight

CHILDREN (8 to 16 years old)

Day 1: upon first onset of symptoms, increase night time dosage to at least **3 mg**. Immediately commence oral ascorbic acid protocols described in Revised 2021 Guidelines for AA/VIT C. If symptoms do not subside or improve in 24 hours, maintain AA dosage per 2021 guidelines and increase melatonin dosage as follows:

Day 2: Total 24-hour dose is **10 mg**. **8 mg** taken at night; remainder **2 mg** is divided into 2 doses during day time, **1 mg** each dose. Maintain Day 2 dose if there is improvement. If condition deteriorates within 24 hours, proceed to Day 3 dosage.

Day 3: Total 24-hour dose is **20 mg**. **14 mg** taken at night; remainder **6 mg** is divided into 3 doses during day time, **2 mg** each dose. Maintain Day 3 dose if there is improvement. If condition deteriorates within 24 hours, proceed to Day 4 dosage.

Day 4: Total 24-hour dose is **40 mg**. **28 mg** taken at night (can be divided into 2 doses); remainder **12 mg** is divided into 6 doses during day time, **2 mg** each dose. Maintain this dose until signs of recovery, then reduce dosage every 3 days in reverse order. Stay at Day 2 dosage until you are totally clear of all symptoms (see Recovery Section).

***SHOULD NOT be regarded as MEDICAL ADVICE**

[#] mg = milligrams