

# Complex Regional Pain Syndrome (CRPS) After COVID-19 mRNA Vaccination — A Disabling Illness

Four research papers reviewed

Theme: Science and Medicine

By <u>Dr. William Makis</u> Global Research, November 27, 2023 <u>COVID Intel</u> 26 November 2023

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July 4, 2023 – I took two COVID jabs while studying to be a Catholic priest. Now I'm in a wheelchair.

Julian Young was enrolled as a seminarian in the northeastern United States, that he received two doses of a COVID "vaccine," and that he is now under medical care for autoimmune disease.

"An autoimmune disease led to me leaving the seminary, and I believe my two COVID jabs are to blame."

Happy in my studies, I decided to do the 'safe' thing and get the jab

It was 2020 when I began my studies and, of course, at this time there was still widespread fear about COVID-19. The "vaccines" were about to be rolled out, and there was a lot of disagreement about whether or not the shots were safe. By the end of my spring semester 2021, like so many others, I unfortunately allowed fear to dictate my decision and decided to do the "safe" thing for my family and get the jab.

The ill effects of this poor decision weren't immediate, so at first it did not occur to me that there was any correlation, but over the course of the next several months I began to experience inflammation in my lower body that caused pain in my back, especially, making it hard to sit. I figured that I just needed to go to the chiropractor, which helped a little, but the inflammation persisted.

That winter I made the unfortunate decision to get "boosted," and that is when things really took a turn for the worse. Around that same time, I had injured my foot while running down some steps, and I began to feel inflammation around the site of the

injury. To my bafflement, I began experiencing soon after a mirror phenomenon of pain and inflammation in my other foot as well, although I had done nothing to injure it.

I figured that I just needed to see a doctor, and that my feet would heal soon, so I went to a podiatrist who put me in a boot for six weeks and told me I would get better. However, he could not explain why my other foot was experiencing the same pattern of pain. By the end of the six weeks, not only was I not better, but the pain in both of my feet had elevated to an extreme burning and tingling.

At this time I was in still at the seminary, and although I managed to finish the semester, it was very difficult to get around and also to focus on my studies while trying to figure out what was going on with my health.

By the summer of 2022, my health continued to get worse. The inflammation and burning spread up my body, leading me to be relegated to a wheelchair. I didn't have much success during the summer with doctors, so eventually I was forced to take a medical leave from my studies. It wasn't until some friends pointed out to me that I had been "vaccinated" soon before the decline of my health that I began to realize the likely connection.

Mercury toxicity, complex regional pain syndrome, POTS

It has been a year now since I first took my medical leave, and I have had to surrender my status as a seminarian on an indefinite basis. During the course of the past year, it was found that I have mercury toxicity, which of course is a rare thing to have, but not surprisingly — mercury has since been demonstrated to be in the COVID jabs along with other toxic heavy metals.

I was also diagnosed with complex regional pain syndrome (CRPS), a rare autoimmune disease rooted in dysfunction of the autonomic nervous system, which usually begins with a minor trauma (in my case the foot injury) to which the nervous system, being in a compromised state, has an over-reactive response. This causes the trauma to exacerbate into a full blown inflammatory disease, in many cases spreading to the entire body. This is what has already happened to me. People with CRPS say it feels like they are being burned alive, and I attest that this has unfortunately been my experience, especially during really bad flare-ups.

Additionally, although I am still being tested, one of my doctors strongly believes that I have postural orthostatic tachycardia syndrome (POTS), another debilitating autoimmune disease rooted in autonomic nervous system dysfunction. It affects one's heart and blood pressure. NBC News recently <u>did a story</u> on the spike of people being diagnosed with POTS after getting COVID. I have never had COVID, but I wouldn't put it past the jabs to have the same effect.

I have been to the ER so many times in the past year that I have lost count. I have seen so many specialists, and yet my life still consists of sitting in my house day after day in crippling pain praying that our Lord would restore me so that I can return to my studies and become His priest. Although I know God can bring good out of my suffering, it is a very heavy burden to me and my family. I have tried a lot of the detox protocols put out by doctors and researchers trying to help vaccine injured people, and although I have seen some improvements, my development has not been linear, for other aspects of my health have continued to decline, leaving me with a daily struggle to survive.

It is for this reason that I am seeking the help of the LifeSiteNews community so that I may receive the proper treatment to regain my health and resume my vocation. To this end I reached out to LifeSite for help in raising awareness of my story. I was happy when they agreed to help me promote a LifeFunder for my cause as well – it was truly an answer to prayer.

For both of the autoimmune conditions that I suffer with, the allopathic (that is, mainstream) medicine world says there is no cure. Removing the mercury from my body is a step towards health, but my doctor says there is no guarantee that my autonomic nervous system would return to normal function afterwards: my body would still have to be "reset" somehow.

Thank you for taking the time to read my story. I hope you will prayerfully consider <u>lending your support</u> so that I may continue my journey to priesthood.

May God bless you.

In Christ through Mary,

Julian Young

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Complex Regional Pain Syndrome after COVID-19 Vaccine. Papers Reviewed

- <u>2023 May (Hamada et al)</u> Complex regional pain syndrome type II following severe acute respiratory syndrome coronavirus 2 vaccination: a case report
- <u>2023 Jan (Horisawa et al)</u> Complex regional pain syndrome after mRNA-based COVID-19 vaccination
- <u>2023 Mar (Frikha et al)</u> Complex regional pain syndrome of the knee after COVID-19 vaccine in an adult patient
- <u>2022 Oct (Cho et al)</u> Post-COVID-19 vaccination arm pain diagnosed as complex regional pain syndrome: A case report

2023 May (Hamada et al) – Complex regional pain syndrome type II following severe acute respiratory syndrome coronavirus 2 vaccination: a case report

- 17F year old Japanese girl had COVID-19 mRNA Vaccine
- Next day she developed difficulty raising the left upper limb and hand edema on the side of the injection
- 2 days after, she developed pain and edema of left hand
- 12 days later she presented at hospital due to pain, and she could not move her left thumb. She was treated with ultrasound guided brachial plexus nerve block
- she was diagnosed with CRPS Type II.
- She had a total of 3 nerve blocks done.
- 35 days after, she developed cold allodynia of the left hand (pain when touching something cold)
- 50 days after her pain resolved but pain would return whenever she touched something cold
- 111 days later she had worsening pain and a stellate ganglion block was

### performed. She was not followed after.

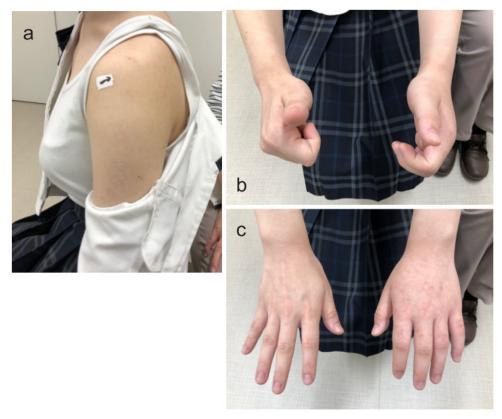
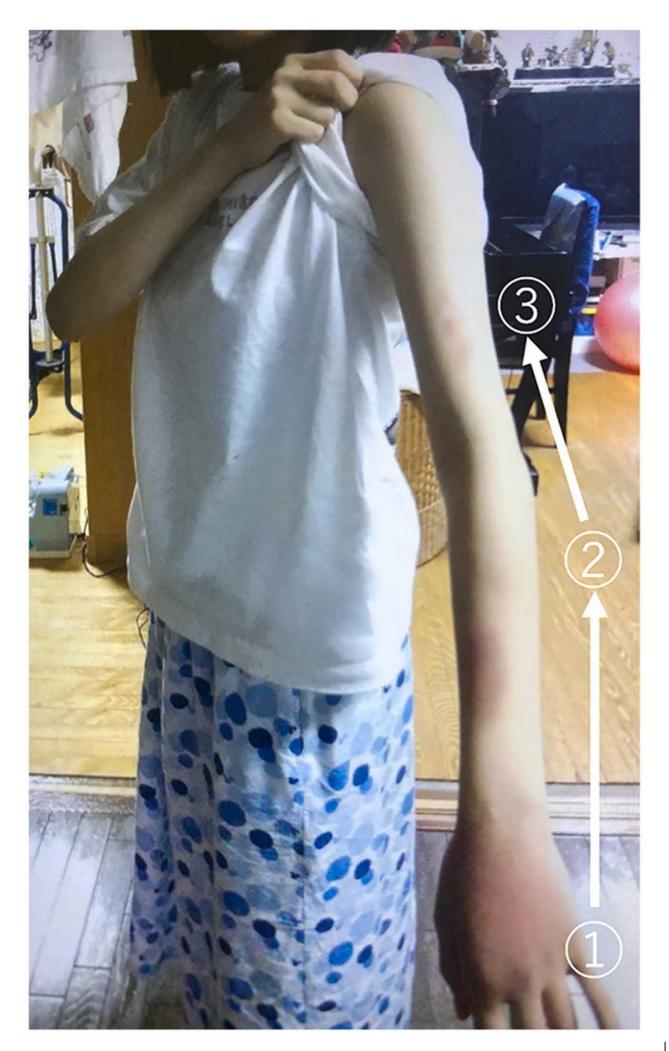


Figure 1 Injection site, radial nerve palsy and color change in the left hand a: Injection site. The arrow is the injection site. b: Radial nerve palsy. c: Color change in the left hand.

2023 Jan (Horisawa et al) – Complex regional pain syndrome after mRNA-based COVID-19 vaccination

- 17F Japanese girl had 2nd Pfizer COVID-19 mRNA Vaccine on her left upper arm
- 2 days later, a bruise appeared on the back of her hand and spread to the entire left hand, which became swollen and caused severe pain
- 5 days later the bruise moved to the upper arm and even slightest touch caused severe pain.
- 2 weeks later, bruise began to disappear but pain and swelling persisted.
- 6 weeks later, the patient visited a pain clinic, where <u>CRPS</u> was diagnosed, and a <u>stellate ganglion block</u> was performed.
- 2 months after 2nd jab, numbness and involuntary flexion of the right hand and fingers began to appear.
- 3 months: Though pain and swelling in the left hand decreased three months later, and the patient was able to move the hand, the distal interphalangeal of the left hand remained in a flexed position.
- 4 months: four months later, <u>involuntary movements</u> with pain in the <u>index</u> <u>finger</u> of the right hand appeared
- 7 months: She was referred to our department for surgical treatment of this movement disorder seven months after the second inoculation. On examination, there was no swelling of the left hand, and the patient had difficulty extending the distal <u>interphalangeal joints</u> of the fingers, but the range of motion at other joints was restricted
- Conclusion: highly likely that CRPS was caused by injection trauma in our case.





2023 Mar (Frikha et al) - Complex regional pain syndrome of the knee after COVID-19 vaccine in an adult patient

- 28M Tunisian man had 2nd Pfizer COVID-19 mRNA Vaccine
- 2 weeks later he started having painful swelling of his right knee which persisted for the following 12 months.
- the pain and disability were so bad, they affected his daily activities and his work was badly compromised
- he reported a pain of 9 out of 10.
- On exam, he had mild non-pitting edema with tactile allodynia, extreme restriction of knee joint on active and passive movement and major atrophy of the right muscles
- Diagnosis: CRPS of the right knee
- No treatments worked for the pain, and he was treated with extensive and regular physiotherapy, including muscle strengthening and functional training.
- He had slow partial improvement
- Theory: causative mechanism of CRPS may be immune hyperactivity to a vaccine constituent supporting an immune-mediated mechanism as the CRPS affected the lower extremity.

2022 Oct (Cho et al) – Post-COVID-19 vaccination arm pain diagnosed as complex regional pain syndrome: A case report

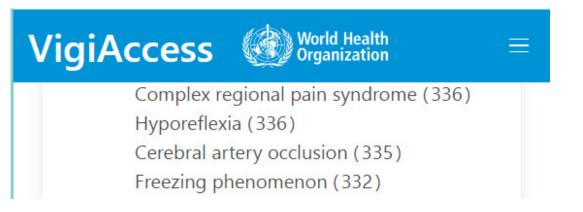
- The patient presented with acute-onset severe arm pain and swelling following vaccine administration
- Based on the clinical, electrodiagnostic, and radionuclide three-phase bone scan findings, the patient was diagnosed with postvaccination CRPS.
- COVID-19 vaccine possibly elicited an immune-mediated inflammatory response to the injected antigen in the patient, who was predisposed to CRPS due to inflammatory immunity.
- The COVID-19 vaccine elicited an immune-mediated inflammatory response to the injected antigen, resulting in CRPS following COVID-19 vaccination.

## My Take...

Complex Regional Pain Syndrome can be one of the most painful health conditions known to man.

The Frikha paper suggests that this COVID-19 Vaccine Injury is not a local traumatic injury of the arm that was injected, but rather an auto-immune attack on the body, since it attacked the knee.

There are currently 336 cases reported to WHO VigiAccess, so it's not that rare. Multiply by an under-reporting factor of 100x and consider that many of these people are permanently disabled.



This is another COVID-19 mRNA Vaccine Injury of the Immune System to be aware of, and there seems to be no satisfactory cure or treatment.

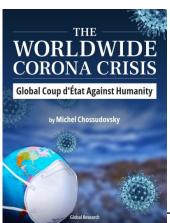
It affects young people some of whom are permanently disabled after mRNA vaccination.

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Featured image is from COVID Intel



The Worldwide Corona Crisis, Global Coup d'Etat Against

Humanity

by Michel Chossudovsky

Michel Chossudovsky reviews in detail how this insidious project "destroys people's lives". He provides a comprehensive analysis of everything you need to know about the "pandemic" — from the medical dimensions to the economic and social repercussions, political underpinnings, and mental and psychological impacts.

"My objective as an author is to inform people worldwide and refute the official narrative which has been used as a justification to destabilize the economic and social fabric of entire countries, followed by the imposition of the "deadly" COVID-19 "vaccine". This crisis affects humanity in its entirety: almost 8 billion people. We stand in solidarity with our fellow human beings and our children worldwide. Truth is a powerful instrument."

### Reviews

This is an in-depth resource of great interest if it is the wider perspective you are motivated to understand a little better, the author is very knowledgeable about geopolitics and this comes out in the way Covid is contextualized. —Dr. Mike Yeadon

In this war against humanity in which we find ourselves, in this singular, irregular and massive assault against liberty and the goodness of people, Chossudovsky's book is a rock upon which to sustain our fight. -Dr. Emanuel Garcia

In fifteen concise science-based chapters, Michel traces the false covid pandemic, explaining how a PCR test, producing up to 97% proven false positives, combined with a relentless 24/7 fear campaign, was able to create a worldwide panic-laden "plandemic"; that this plandemic would never have been possible without the infamous DNA-modifying Polymerase Chain Reaction test – which to this day is being pushed on a majority of innocent people who have no clue. His conclusions are evidenced by renown scientists. —Peter Koenig

Professor Chossudovsky exposes the truth that "there is no causal relationship between the virus and economic variables." In other words, it was not COVID-19 but, rather, the deliberate implementation of the illogical, scientifically baseless lockdowns that caused the shutdown of the global economy. –David Skripac

A reading of Chossudovsky's book provides a comprehensive lesson in how there is a global coup d'état under way called "The Great Reset" that if not resisted and defeated by freedom loving people everywhere will result in a dystopian future not yet imagined. Pass on this free gift from Professor Chossudovsky before it's too late. You will not find so much valuable information and analysis in one place. –Edward Curtin

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