

## A Flaw in the Medical Model Cripples Coronavirus Guidance

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Dr Chan Kam Ping was on the front line with the SARS virus in Hongkong and South Asia. Published by BMJ, he observes that SARS victims *“usually stay in a cold environment for a reasonable time after being infected, eg. in medical ward, hotel, aeroplane cabins, air-conditioned offices.”* He recommends that we: *“1. Put on more clothes to make body really warm, 2. maintain room temperature at least above 23C, and 3. do exercise for 30 minutes daily, make sure you really sweat(1).”*



Dr Chan’s medical observations and conclusions are of profound importance, because COV19 and SARS are similar and because The CDC and The WHO have been telling us how to avoid contracting COV19, but not advising how to strengthen and prepare our bodies to win the battle.

Before Florence Nightingale introduced hand washing to nurses, doctors viewed hand washing as unimportant. **The medical presumption that core temperature is the only important thermal variable to monitor in a patient may be a critical medical blind spot which is needlessly increasing the risk to flu patients.** To the medical doctor, peripheral temperature is temperature under the tongue or on the eardrum, which approximates core body temperature. However, at room temperature of 20C(68F), while the core remains at 37C(98.6F), the upper legs can be 28C(82F) and feet, 22C(72F). When a virus is multiplying in the body, tissue temperature, not core temperature determines replication rate.([2source](#)).

A study from Yale University found that virus thrives in the nose when it’s colder than our core body temperature because our antiviral immune response is severely diminished as the nose gets colder(3ces). Lung temperature is also strongly influenced by air temperature and humidity. To maintain constant core temperature in cold rooms, the body first reduces blood flow to the extremities then cuts blood flow to the lungs, increasing infection. Putting on an extra sweater or a blanket causes the extremities to stay warm and causes blood flow to the lungs to increase along with temperature. Thus, a blanket can make the difference between a little coughing and life-threatening pneumonia. Dr Chen was right. Adding blankets and clothing and maintaining warmer room temperature really can reduce the growth rate of virus.

**Hospital staff can learn to monitor peripheral temperature of all patients with a quick touch of an arm or leg and adding a blanket as needed. This may make a huge difference in rate of recovery of COV19 victims.**

### What should I do?

We support the CDC recommendations, paired with our findings.

[Click here for Dr. Chan’s full Report](#)

[Click here to read CHI Institute’s Full Analysis](#)

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## **About CHI Institute**

The CHI Institute was founded in 1988 and was developed by Richard Lee to empower society to welcome struggles, overcome health challenges, and embrace the human experience. The company produces a range of self-care devices. The company is based in Reno, NV. For more information, visit <http://www.chi.us/>.

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