



Over 400 million people around the world have been affected by Long COVID.

That's more than the population of the United States and Canada.

Combined.

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And despite the staggering scale, we still don't have a single approved treatment.

Not one.

What's also alarming:

Many doctors are misdiagnosing it.
Millions don't even know they have it.
Worse still, the condition is often
dismissed entirely. Even by physicians.



At Equanimitas Health Foundation,
we want to change that.



We are not just
acknowledging the
reality of Long COVID,
we are building the
scientific, clinical, and
social foundation
necessary to solve it.



Our breakthrough research:

Uncovered biological signatures of Long COVID related to the nervous system. This not only helps to diagnose the disease but also helps prove that Long COVID is real.

Data-driven discoveries enabled us to develop a unifying theory that explains how Long COVID can present differently, in different people

More importantly, our theory has led to actionable treatments, validated through clinical trials.



This is just the beginning.
Our next steps are bold and focused.



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- 01 Fund targeted, high-impact research, that aligns with our scientific model.
 - 02 Lay the groundwork to tackle other misunderstood and underfunded chronic illnesses. Ones often labeled as “psychosomatic.”
 - 03 Collaborate with academic institutions, medical professionals, researchers, and others to deepen our understanding of chronic illness and psychosomatic therapies.
 - 04 Partner with nonprofits, private foundations, and others to fund clinical trials and research.
 - 05 De-stigmatize alternative therapies, including the use of Ketamine, to treat the mind and body.
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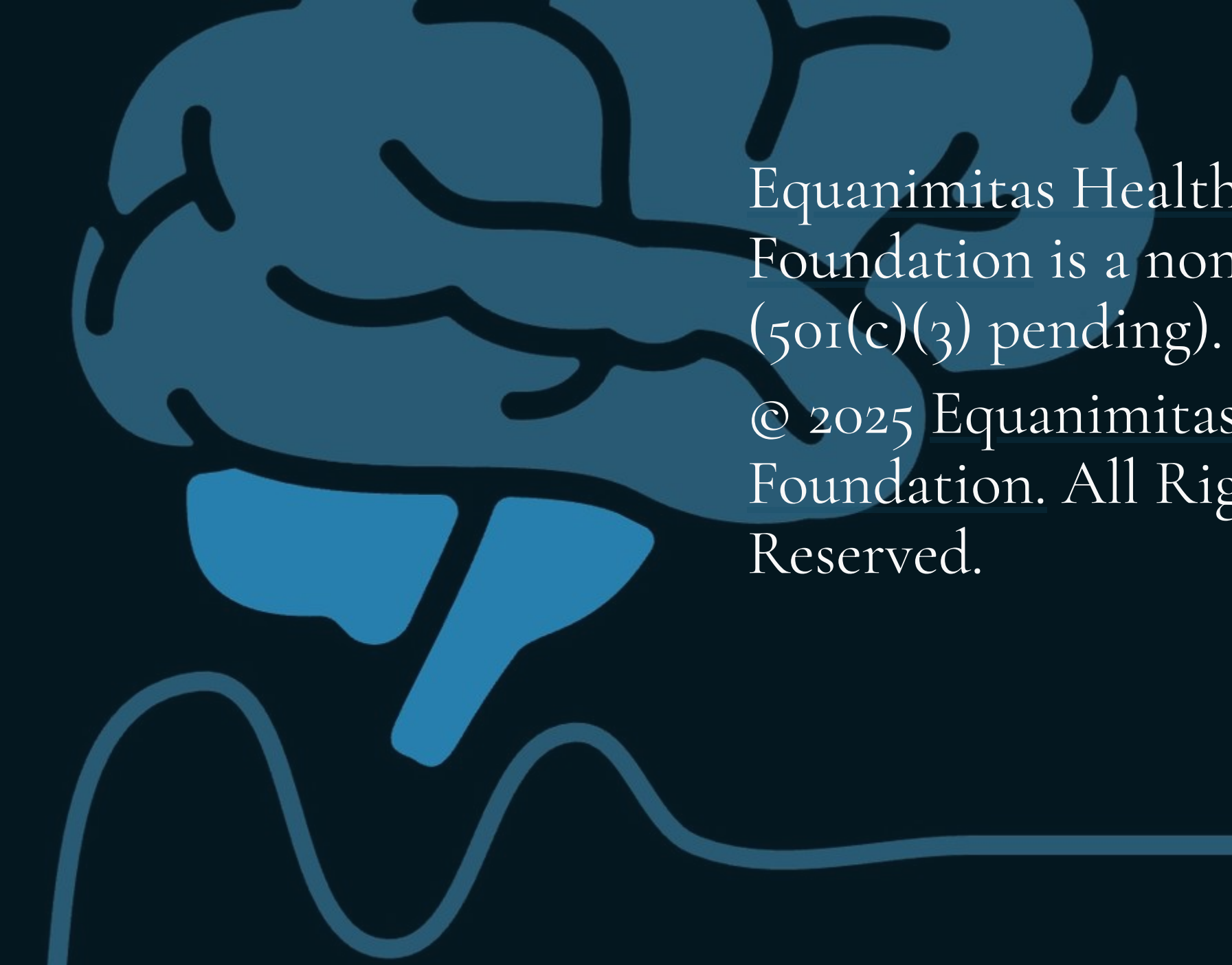
We are here to:

Connect the dots between cutting-edge research and realworld clinical outcomes.

Build bridges between biology and belief, between what we know and what we discover.

Listen to patients, to learn from them, and to let their voices drive our direction.





Equanimitas Health
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(501(c)(3) pending).

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