

Breakspear Medical Bulletin

Breakspear Hospital, Issue 22

Autumn/Early winter 2009

Notes on the Sherwood Technique

Dr Daniel Goyal

Dr Daniel Goyal recently spent time at the Sherwood Clinic in London. Dr Paul Sherwood developed the Sherwood Technique, which is a unique treatment best known for the successful treatment of non-specific back pain.



Dr Sherwood's technique is based on the principle that there are many benefits to a well-aligned and efficient physical body.

about how exactly the physical body is connected to the biochemical processes and what we

can do to improve them.

Dr Sherwood's technique is based on the principle that there are many benefits to a well-aligned and efficient physical body. His method uses manipulation, mobilisation, massage, and electrotherapies such as a muscle stimulator, ultrasound and Power Assisted Micro-Manipulation (PAM or TAMARS) to treat a variety of diseases stemming from problems with both the spine and lymphatic system.

(Continued on page 11)

For some time it has been recognised that there is a connection between the physical body and one's biochemical health. The way our muscles contract, the range of movement in our joints, and the presence or absence of tissue fluid can all have an impact on our biochemical processes, which are vital to sustain life.

There is a wide range of theories

Dr Peter Julu talks about aerotoxic syndrome on BBC

In September 2009, BBC Radio 4's Today programme interviewed Dr Peter Julu, Specialist Autonomic Neurophysiologist and Consultant Physician at Breakspear Hospital, regarding the toxic air that is circulated within cockpits and cabins.



that they were poisoned by contaminated air used to pressurise cabins. He has collaborated with scientists from around the world

to test pilots suffering from what has been termed "aerotoxic syndrome".

Dr Julu stated that his tests on British, American, German, Dutch and Australian pilots suffering from memory loss and other symptoms leave no doubt

Following the interview, several newspapers, including the Telegraph and Daily Mail, ran stories on this hot topic, quoting Dr Julu's research and comments.



Inside:

On the market: a new health status test, OrganoGold™	2
Ask Dr Jean Monro	3
New thoughts on anti-phospholipid syndrome (APS)	4
New thoughts on asthma and chemical hypersensitivity	5
Outdoor swimming pools increase risk of asthma and allergies	5
Research on effects of aircraft cabin air on pilots' health	6
Investigations and treatment for aerotoxic syndrome	7
New thoughts on brain dysfunction in multiple chemical sensitivity	7
Health improvements documented with hunter-gatherer diet	8
Diet for reducing incidence of kidney stones	8
Notes on low-dose naltrexone	9
Trial conducted on the benefits of milk immunotherapy	9
Did you know...?	10
Separate baby vaccines now available	12
Bulletin board	12



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On the market: a new health status test, OrganoGold™

A new urine test, called OrganoGold™, has been introduced by Great Plains Laboratory Inc and promises to be “the most in-depth analysis of health status available”.

The OrganoGold™ includes 5 different profiles that evaluate metabolic health.

The 5 cornerstones of metabolic health are:

1. Environmental pollutants profile
2. Mitochondrial dysfunction profile
3. Genetic disease profile
4. Nutritional & metabolic profile
5. Microbial profile



Within the environmental pollutants profile, 75 different toxic chemicals are screened, including organophosphate pesticides, benzene, pyrethrin insecticides and trichloroethylene. Exposure to these chemicals has been associated with autism, autoimmune disorders, Parkinson's disease, Alzheimer's disease and many other conditions.

Mitochondria are the “powerhouse” cells that convert the energy of food into the energy that powers most cell functions. The OrganoGold™ mitochondrial dysfunction profile tests for highly specific markers for mitochondrial disorders and deletions of mitochondrial DNA.

The genetic disease profile measures specific markers of various genetic diseases that are difficult to diagnose, especially in milder forms. Disorders such as branched chain amino acid metabolism may be detected.

The nutritional and metabolic profile in this new test includes markers for a number of conditions.

OrganoGold™ has 96 markers, some of which screen for an additional 75 toxic chemicals in urine.

Included in this profile are markers to indicate problems such as immune inflammation occurring during

infection and in autoimmunity, and inorganic phosphate, which is a marker for bone metabolism, as well as markers which are indicative of multiple vitamin deficiencies, neurotransmitter metabolism and disorders of amino acid distribution.

The microbial profile has been found to be reliable in detecting the overgrowth of yeast and bacteria species that are commonly missed by conventional culture methods. Markers for both beneficial and harmful bacteria are measured.

This test is not currently available at Breakspear Hospital, however, we do expect to be able to offer it in 2010. For more information on this new urine test, visit

www.greatplainslaboratory.com.

Breakspear Medical Bulletin

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Breakspear Medical Bulletin is a private publication that we aim to produce quarterly. It is for the promotion of environmental medicine awareness, Breakspear Hospital and Breakspear Medical Group Ltd. This newsletter is not intended as advice on specific cases but as a forum of information researched and stored at Breakspear Hospital. We urge readers to discuss the articles in this bulletin with their health-care practitioners. Unauthorised reproduction of this newsletter, or quotation except for comment or review, is illegal and punishable by law.

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Your thoughts on immunisations

The following figures are the results of our latest on-line survey:

- 27%** of respondents were sure that their vaccinations were all up to date.
- 36%** did not know if their vaccinations were current.
- 55%** check recommended vaccinations before travelling abroad.
- 73%** have concerns over bad reactions to vaccines.
- 46%** have experienced a bad reaction to a vaccination.
- 55%** mistrust information distributed about vaccinations.



Ask Dr Jean Monro



Can you give me advice about the influenza A(H1N1) vaccine? I understand that the first doses of pandemic vaccine for swine flu are now available.

For the protection of ourselves and everyone in our community, we should all be immunised against preventable diseases.

All immunisations carry some contraindications and special warnings because they are supposed to have a therapeutic effect by stimulating the immune system.

With regard to this new vaccine, I had been told that the H1N1 vaccine being produced in the United States was grown in green monkey cell culture and this greatly concerned me. I wrote to the Secretary of State for Health to obtain an assurance that there will be no contamination in the vaccine that is being produced for distribution in this country.

I explained in my letter that an article published in 2005¹ comments on polio vaccines that were prepared in green monkey cell culture and identifies a risk of contamination by simian (primate) vacuolating virus 40 (SV40). SV40 is a DNA virus that usually persists as a latent (dormant) infection but has also been linked to causing tumours and cancers in humans and primates.

There are further reports on simian immunodeficiency virus being the precursor of human immunodeficiency virus type 1 from the wild chimpanzees in the Cameroon.^{2,3}

I received a letter in response from the Department of Health Customer Service Centre that stated:

...the H1N1 vaccine will not be incorporated into the seasonal flu vaccine.

The H1N1 vaccine that is being manufactured by Baxter is made using Vero cells [which are green monkey cell line culture]. Vero is a well-characterised continuous cell bank that has been repeatedly examined over the years for virus contamination and none has been found. There is no reason to suspect that the H1N1 vaccines will be contaminated.

In addition to concerns about the growth media of the H1N1 vaccine, we have checked the datasheets for the different varieties of H1N1 immunisations on offer. (The datasheets are the pages of product information contained in each vaccine's packaging.) The datasheets from GlaxoSmithKline (GSK) state that their H1N1 vaccines contain thiomersal, which is a mercury derivative.

Thiomersal is contained in many commonly available vaccines because it is used a preservative. However, mercury is highly toxic and has been linked to the increasing rates of autism, multiple sclerosis and attention deficit disorder.

I believe when one is deciding upon immunisation, one should take into account the ingredients and growth media as well as considering the protection of ourselves, our family and our community.

Editor's note This vaccine is only available through the NHS at this time; Breakspear Hospital will not be stocking this vaccine. For more information, contact your GP or visit the NHS website: <http://www.nhs.uk/conditions/pandemic-flu/pages/vaccine.aspx>

1. Cutrone R, et al. Some oral poliovirus vaccines were contaminated with infectious SV40 after 1961. *Cancer Res.* 2005;65:10273-9.
2. Van Heuverswyn F, et al. Genetic diversity and phylogeographic clustering of SIVcpzPtt in wild chimpanzees in Cameroon. *Virology.* 2007;368:155-71.
3. Takehisa J, et al. Origin and biology of simian immunodeficiency virus in wild-living western gorillas. *J Virol.* 2009;83:1635-48.

Swedish study on mercury

In 1987, an expert committee instructed by the Swedish Socialstrelsen (Department of Health) to review the safety of dental amalgams, which contain mercury, concluded that from a toxicological point of view, mercury is too toxic for use as a dental filling and dentists should use other materials as soon as they are available. The committee advised that as a first step, amalgam work on women who are pregnant should cease because of the danger of damage to the brain of the foetus. Since then, dental mercury use has been banned in Norway, Sweden and Denmark.



New thoughts on antiphospholipid syndrome (APS)

...and new research that links APS to chronic fatigue syndrome (CFS)

Dr Christabelle Yeoh

Antiphospholipid syndrome (APS) is an autoimmune disorder (also now known as Hughes syndrome) first described in 1983 by Professor Graham Hughes.

The clinical problems that were initially associated with APS were: thrombosis (blood clotting), recurrent miscarriage, neurological disease and the presence of antiphospholipid antibodies (now also known as anticardiolipin antibodies), which are antibodies often directed against an important component at the centre of the body's energy production.

As time went on, APS became increasingly identified in patients with a wider range of symptoms and so the understanding of the underlying problems broadened.

Initially, this condition was mainly linked to acute severe thrombotic events, such as pulmonary embolism (blockage of the main artery of the lung), deep vein thrombosis (DVT), and blood clots in the brain and heart. It is now accepted that many more minor thrombotic episodes occurring in the venous and arterial circulation can affect multiple organ systems and give rise to additional symptoms.

Through laboratory tests, it is now better understood how the anticardiolipin antibodies interfere with essential and non-essential blood clotting pathways.

The standard treatment for APS is full anticoagulation with heparin or warfarin.

New findings relating to CFS

A recent paper by Hokama et al (2009)¹ showed that anticardiolipin IgM antibodies could be found in serum of 95% of patients who were clinically diagnosed with chronic fatigue syndrome (CFS).

This is an interesting and important discovery because anticardiolipin antibodies, especially at high levels, can cause damage and alterations to the inner membranes of mitochondria, which are at the centre of the body's energy production.

A paper published last year by Professor Hughes,² reflecting on the lessons he has learnt from 25 years of studying this condition, reports



Patients who have been diagnosed with CFS should be checked for APS and, if this is confirmed, the treatment would then include anticoagulation.

numerous problems that could also exist with CFS populations. These include memory loss, thrombocytopenia, liver function abnormalities,

balance problems, visual disturbances, headaches, migraine, dry eyes, heart murmurs and neurological

problems such as autonomic and peripheral neuropathy.

Professor Hughes writes that the diagnosis can be difficult as a significant number of patients have borderline or negative antiphospholipid antibodies, despite having all of the standard symptoms and signs. Because of this, he coined the term 'seronegative APS'. In his recent paper, he advocates treatment for seronegative APS patients with an anticoagulation and antimicrobial drug called hydroxychloroquine (Plaquenil).

At Breakspear Hospital, our medical team has been aware that patients with fatigue, due to a wide range of causes, have abnormalities with the clotting systems, as well as underlying infections that can lead to an autoimmune state.

Patients who have been diagnosed with CFS should be checked for APS and, if this is confirmed, the treatment would then include anticoagulation.

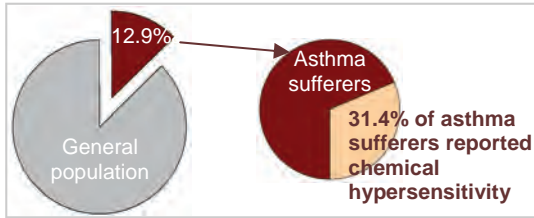
Importantly, as anticoagulation on its own is a form of symptom management and does not address reversible causative factors, we advocate searching for the underlying cause of autoimmunity in order that it can be addressed. The search for reversible causative factors can be complex but there may be clear infection or chemical/ toxin related factors, which are easily identified.

In terms of searching for clotting tendencies, if the anticardiolipin/antiphospholipid antibodies are negative, we would encourage further tests with fibrinogen, thrombin-antithrombin complexes (TAT) and prothrombin fragment 1+2.³ Apart from using standard anticoagulants such as heparin, warfarin or Clexane injections, we would consider a range of oral products which have evidence for their effectiveness as intravascular

New thoughts on asthma and chemical hypersensitivity



A new study conducted at the University of West Georgia, USA, concluded that there is an overlap between asthma and chemical hypersensitivity.



The study found that among asthmatics, 38% reported irritation from scented products, 37.2% reported health problems from air fresheners, and 13.6% reported their asthma

Data were collected from a geographically weighted random sample of 1058 people over the continental USA. The study found that 12.9% of the sample reported asthma, 11.6% reported chemical hypersensitivity, and 31.4% of those with asthma reported chemical hypersensitivity.

was caused by toxic exposure.

It was also concluded that asthma cases affected each racial/ethnic group in roughly the same proportion, with nearly 50% classified as childhood onset.

Outdoor swimming pools increase risk of asthma and allergies

A recent study concluded that “outdoor chlorinated pool attendance is associated with higher risks of asthma, airways inflammation and some respiratory allergies.”



There have been many studies published that have concluded there is an excess risk of respiratory symptoms indicative of asthma in indoor swimming pool swimmers and those who work at indoor swimming pool facilities.

This new Belgian study on outdoor pools examined 847 secondary school adolescents who attended outdoor chlorinated pools and found the prevalence of physician-diagnosed asthma sufferers and physician-diagnosed and under medication asthma sufferers significantly

increased with the lifetime number of hours spent in outdoor pools by up to 4 and 8 times, respectively, among adolescents with the highest attendance.

Reuters Health quoted Dr Alfred Bernard, Unit of Toxicology, Catholic University of Louvain,

“The impact of these chemicals on the respiratory health of children and adolescents appears to be much more important -at least by a factor of 5- than that associated with second-hand smoke.”

The use of residential outdoor pools was also associated with higher risks of elevated exhaled nitric oxide (NO), which is a well-known marker for established airway inflammation, and sensitisation to cat or house dust mite allergens.

(Continued from page 4)
and extravascular fibrinolytic enzymes, which improve blood flow.

The importance of blood flow through the entire microvascular system (which consists of small arteries, capillaries and small venules) should not be underestimated, as there are numerous consequent effects on metabolism and homeostatic mechanisms including detoxification, inflammation, repair and regeneration.

Our experience at Breakspear Hospital shows that autoantibodies and autoimmune diseases can arise from foods triggering an abnormal

antibody response. In the light of this, we have always dealt with autoimmune conditions by careful manipulation of the diet, treating increased gut permeability and giving low-dose immunotherapy to prevent altered immune responses to foods.

For more explanation of the findings cited in this article, please refer to the references found below.

References:

1. Hokama Y, et al. Anticardiolipin antibodies in the sera of patients with diagnosed chronic fatigue syndrome. *J Clin Lab Anal.* 2009;23:210-2
2. Hughes, GR. Hughes Syndrome (the antiphospholipid syndrome): ten clinical lessons. *Autoimmunity Rev.* 2008;7:262-6.
3. Hannan KL, et al. Activation of the coagulation system in Gulf War Illness: a potential pathophysiologic link with chronic fatigue syndrome. A laboratory approach to diagnosis. *Blood Coagul Fibrinolysis.* 2000;11:673-8.



Research on effects of aircraft cabin air on pilots' health

As reported on BBC Radio 4 and various news services, Dr Peter Julu, Specialist Autonomic Neurophysiologist and Consultant Physician at Breakspear Hospital, has examined 19 pilots and found links between fume-contaminated cabin air and chronic medical problems in these pilots.



The pilots were experiencing neurological symptoms such as memory loss, tremors, lethargy and poor cognitive functions. These were associated with and reinforced by other non-specific symptoms of aerotoxic syndrome, for example, flu-like illnesses that do not go away. Dr Julu conducted what he called "target-organ orientated examination of the autonomic nervous system", which he believes confirms the firm evidence of nerve damage caused by chemical contamination and other neurotoxins.

His clinical findings concluded that there are damages to the part of the brain that controls vital bodily processes, including breathing and heart rate, similar to symptoms he has seen in farmers and other workers exposed to organophosphates in sheep dip.

A recent study on 26 pilots in the United States of America discovered organophosphates in their blood and fatty tissues. The organophosphates found in the pilots' bodies are the usual additives of lubricating oil used in aircraft engines.

While Dr Julu does not believe that passengers are at high risk, mainly because they do not fly as frequently as commercial pilots, other researchers and even flight crews believe that passengers should be concerned.

Aircraft manufacturers deny that their aeroplanes are putting at risk the health of those who fly often, for example on frequent business trips.

There are over 10,000 members of the British Airline Pilots' Association; full members hold a current commercial pilots licence or flight engineer license and are currently engaged in British commercial flying.

The Daily Mail reported on the 25 September 2009 that former pilot and co-chairman of the Global Cabin Air Quality Executive, Tristan Loraine stated that, "I was fit — I used to compete in Ironman triathlons — and should have had years of flying ahead, but I'm now retired on the grounds of ill-health, my body poisoned by the air I breathed while doing my job."

Flight crew or cabin crew interested in completing Dr Julu's series of tests can telephone 01442 261 333 to make an appointment or email their name and address to:

info@breakspearmedical.com

They will then be sent some patient questionnaires to complete prior to their appointment.

The following additional biochemical tests may be run to determine toxicity levels:

- 2,3-BPG evaluation
- VEGF evaluation
- Fructose study (3 hours after food)
- Fatigue Panel
- TAT study
- Haematology and biochemistry profiles with electrolytes
- Immunology profile
- Neurofilament antibody test
- Evaluation of urinary organic acids to ascertain metabolic breakdown of carbohydrate, fat, protein and also the products of metabolism of yeast and bacteria in the urine
- Methylation markers

When the outcomes of investigations are available, patients will be referred to one of our specialist doctors for an individualised treatment programme.

See Investigations and treatments for aerotoxic syndrome on page 7.

Investigations and treatment for aerotoxic syndrome



According to the Aerotoxic Association, "aerotoxic syndrome is the name given to the illness caused by the long-term effects of breathing contaminated cabin air in an aircraft."

Acute and chronic symptoms can include:

- tunnel vision
- seizures
- chronic fatigue
- neurological symptoms
- cognitive problems
- respiratory failure
- tightness in chest
- sleep disorders



In order to help those who suspect that they may be suffering from this condition, Breakspear Hospital offers an array of neurological and biochemical investigations and individualised treatment programmes.

In order to evaluate an aerotoxic syndrome sufferer's condition, it is beneficial to measure levels of tricresylphosphate (TCP), which is an organophosphate compound and the principle pollutant. TCP is a known neurotoxin which is found in the engine oil of commercial jet airliners. Testing for TCP would be especially useful for pilots who are still flying (perhaps less valuable for those who are not).

It may also be beneficial to measure antibodies to neuronal components, which provide an evaluation of the immunological problems that may have occurred and may be reversed with targeted treatment.

A lymphocyte sensitivity test can evaluate whether or not there is a sensitivity (a negative immunological reaction), which has occurred in relation to organophosphates. This blood test assesses responses of cells, through

measurement of calcium influx into the cell when it is being observed under confocal microscopy, and this can be assessed in relation to organophosphates in particular. If more calcium gets into the cell, it indicates that the cell membrane has become more permeable and is thereby responding adversely to organophosphates put in proximity to the cell.

Following these evaluations, together with any others that may be specific to the crew member, a personal detoxification programme can be undertaken for clearing pollutants from the body. It is important to clear pollutants from the body as fast as possible because the faster the chemicals are excreted, the less likely they are to have a lasting effect.

A good detoxification programme will help to eradicate toxic chemicals from the body, restore proper nutritional status, and work towards optimum health. Such a programme may include chelation therapy, hyperthermia, and a customised nutritional supplement programme, which increases the effectiveness of the body's detoxification pathways.

In addition to a detoxifying programme, autonomic nervous system disruptions, which are evaluated by Dr Peter Julu's neurological tests, may be stabilised using low-dose immunotherapy which has proven helpful for several pilot patients and many other patients with agricultural organophosphate poisoning.

Flight crew or cabin crew interested in Breakspear Hospital's investigations and treatments can telephone 01442 261 333 to make an appointment.

New thoughts on brain dysfunction in multiple chemical sensitivity

Reported in the Journal of Neurological Science Oct 2009, a new study at the Servei de Pneumologia, Hospital Universitari Vall d'Hebron, Barcelona, Spain concluded that in patients diagnosed with multiple chemical sensitivity (MCS), chemical exposure caused neurocognitive (thought and behaviour)

impairment, and SPECT brain dysfunction, particularly in odour-processing areas, thereby suggesting a nervous system origin of MCS. In comparison to controls, MCS cases presented poorer quality of life and neurocognitive function at baseline, and neurocognitive worsening after chemical exposure.



Health improvements documented with hunter-gatherer diet

A recent study conducted at the University of California San Francisco School of Medicine concluded that the contemporary American diet figures centrally in the development of numerous chronic diseases.

The researchers investigated whether or not a diet similar to that consumed by Palaeolithic man, which was a pre-agricultural hunter-gatherer diet, was better for today's humans than the contemporary diet.

The Paleo diet consists of meat, vegetables, fruits, nuts and seeds. It completely excludes grains, sugar and processed foods.

The 9 non-obese, healthy volunteers were monitored in this controlled study while they followed several different diets for a set period of time. Many different metabolic and physiologic tests were performed, such as arterial blood pressure, urine sodium and potassium excretion, and insulin tolerance, in order to determine if any of the trial diets were beneficial for health.

The study concluded:

Even short-term consumption of a Palaeolithic type diet improves blood pressure and glucose tolerance, decreases insulin secretion, increases insulin sensitivity and improves lipid profiles without weight loss in healthy sedentary humans.

While this study provides researched, scientific evidence, over the last few years there have



been a succession of reality and documentary television shows on the same subject.

The Truth About Food (BBC Two) covered a trial set up at the Paignton Zoo, Devon, where 9 volunteers, aged 36 to 49, went on the 12-day Evo Diet, consuming up to 5 kilograms of raw fruit and vegetables a day.

The results after the 12-day diet was completed were remarkable. According to www.news.bbc.co.uk:

Overall, the cholesterol levels dropped 23%, an amount usually achieved only through anti-cholesterol drugs statins.

The group's average blood pressure fell from a level of 140/83 - almost hypertensive - to 122/76. Though it was not intended to be a weight loss diet, they dropped 4.4kg (9.7lbs), on average.

The Breakspear Medical Bulletin Spring 2005 featured the story Notes on Allergies in Our Changing Environment, which stated, "Since the industrial revolution, which happened so recently in the evolution of man, our lifestyle has drastically changed, the air we breathe is different and our diet is far removed from our ancestors' basic 'no added chemicals' hunter-gatherer diet. To regain health in our polluted and artificially modified world, we must try to minimise the exposure to toxins and to detoxify our bodies of the harmful items to which we've already been exposed."

Diet for reducing incidence of kidney stones

MedPage Today 14 August 2009 reported that a diet similar to the one used in the Dietary Approaches to Stop Hypertension (DASH) study reduced the incidence of kidney stones by up to 50%.

The DASH-style diet emphasises consumption of fruits, vegetables, nuts and legumes, whole grains and moderate intake of low-fat dairy products. The diet also specifies low



consumption of sodium and sweetened drinks and limited consumption of animal proteins, particularly red and processed meats.

It was concluded that the consumption of fruits and vegetables increases urinary citrate, which inhibits calcium stone formation.

The findings came from a retrospective analysis of data from several large observational studies.

Notes on low-dose naltrexone



Dr Terence Daymond

Naltrexone is a drug that antagonises the effect of opiates and blocks the opiate receptors in the brain. It is used in the management of people addicted to heroin and other drugs including alcohol, and is used together with counselling and social support.



This led to improved immune status in AIDS patients.

Recent work confirms that low-dose naltrexone (LDN) has a beneficial effect on endorphins and improves the immune function. This has led

to the funding of studies on patients with beneficial effect.

Endorphins are natural substances in the body that act like opiates. There are receptors in the brain so that when endorphins are raised, they make one feel good. That is why a keep-fit session with running, gym work, and games, which increases endorphins, will make one feel good. Acupuncture may have a similar effect.

Endorphins also interact with our immune system, so that when one has the flu, the endorphin levels fall and this leaves one feeling miserable and unwell.

Naltrexone was introduced over 30 years ago. When treating heroin addicts who suffered from AIDS, a doctor in America noticed that the patients had lower levels of endorphins and he thought this might be a reason why they were taking heroin in the first place.

In his research, he found that there are opiate receptors throughout the body. By trial and error, he noted that if a low dose of naltrexone were given at night, this temporarily blocked the endorphin levels so that the body responded with a greater stimulus of endorphins in the morning.

These studies include :

- a study in Pennsylvania which showed that LDN reduced the severity of Crohn's disease and improved the quality of life. 89% of 17 patients had improvement and 67% had remission.
- studies in patients suffering from multiple sclerosis that showed there was an improvement in symptoms of spasticity. There was also continued improvement if they remained on LDN at night.
- a study in patients suffering from fibromyalgia, showing a reduction in symptoms with objective improvement and less pain across the shoulders.

There are also anecdotal reports to suggest the benefit of LDN in multiple sclerosis, fibromyalgia, and other immune disturbances as well as some cases of cancer.

Please speak to your Breakspear Hospital doctor for more information. When required, naltrexone can be obtained on prescription.

Trial conducted on the benefits of milk immunotherapy

Once a child is diagnosed with a cow's milk allergy, the mainstream, standard course of action is strict avoidance. However, a recent double-blind trial, which was announced online, concluded that nearly all children showed markedly increased tolerance to milk protein when treated with oral immunotherapy.

MedPage Today 20 August 2009 reported that the American trial documented that 14 of 15 children aged 6 to 16 years were able to increase their initial daily milk dose, which had been 500mg to 4,000mg milk protein per day, to maximum doses of 1,000mg to 16,000mg.



After a median of 17 weeks, oral food challenges were conducted on 13 of the children, and 5 were able to tolerate the maximum 16,000mg without adverse effects.

As most patients of Breakspear Hospital know, the Hospital specialises in treating allergy/sensitivity using the technique of low-dose immunotherapy. The result is that many of our patients can eat and enjoy foods that previously caused them discomfort or serious reactions. If you are interested in investigating a low-dose immunotherapy programme to treat your child's or your milk and dairy product intolerance, please speak to your Breakspear Hospital doctor.

Did you know...?

Lyme disease thriving in Britain's woods

In August 2009, *Candis*, a magazine dedicated to family health and happiness, featured an article, "If you go down to the woods today..." which focused on the rising incidence of Lyme disease in Britain and the general lack of knowledge people and doctors have about the illness.

Breakspear Hospital's Dr Terence Daymond, a consultant in rheumatology, was interviewed for the article and described the various stages the disease goes through.

The article covered many aspects of the illness, including how many people think that it is solely an American problem. However, the Health Protection Agency recorded 813 cases for the year 2008 and Dr Daymond believes that the real number of cases may be up to 15 times greater than those on record.

Lower calories may lead to longer lives



A study conducted at the Wisconsin National Primate Research Center, published in *Science* magazine, studied rhesus monkeys for over 20 years and concluded they lived longer and better when they ate less.

The study was conducted on monkeys between 7 and 14 years old. Half the monkeys were allowed to eat as much as they liked, while the other half had their calorific intake reduced by 30% compared to their free-eating days.

Twenty years later, 37% of the monkeys on the non-restrictive diet had died of age-related causes such as cancer and heart disease. Only 13% of the restricted diet monkeys had died from the same causes.

Diabetes was another condition that the free-eating monkeys experienced while this condition was absent from the dieters.

Given the biological similarity between rhesus monkeys and humans, the researchers suggest that moderate calorie-cutting could have beneficial effects on human lifespan.

Half of all fruit and veg in the UK is contaminated

In August 2009, the *Sunday Herald* ran an exclusive story which revealed that "half of all the fruit and vegetables sold across the UK are contaminated with toxic pesticides, according to the latest scientific surveys for the government."

The study, which tested 4000 samples of foods on sale in 2008, found that 46% of all the food samples were found to contain detectable levels of pesticides. "In 57 cases the levels of contaminations were so serious that they



breached the government's safety limits."

Fortunately the vast majority of organic food tested was clean.

This report on pesticides was released shortly after the Food Standards Agency (FSA) released their report which proclaimed that organic foods were no healthier nutritionally than ordinary food. Pesticides were specifically excluded from the FSA study.

Many experts warn of the dangers of different chemicals, particularly the "cocktail effect" of mixing multiple pesticides.

"Widespread recognition of the demonstrated benefits of N-acetylcysteine, American ginseng and elderberry for prevention or treatment of flu in humans can significantly decrease the nation's burden of illness this fall and winter." - Dr Leo Galland, Director of Foundation for Integrated Medicine, New York, USA.

Available at our Pharmacy



www.breakspearmedical.com/shop

From 23 November 2009, the Breakspear Pharmacy Online will be live! That means UK patients and practitioners who have accounts with us can register and order from our website. Ordering online gives you the freedom to place and securely pay for your orders any time of any day or night!

Introductory offer: free postage and handling for all orders placed and paid for online.*

* Free postage and handling applies only to orders placed and paid for online and does not apply to orders placed in person, by fax or over the phone. Offer expires 30 June 2010.

Notes on the Sherwood Technique

(Continued from page 1)

Dr Sherwood's contribution to the alleviation of wide range of conditions including allergies, inflammatory bowel disease (IBD) and more recently pervasive developmental disorders, focuses on the effects of physical medicine on the autonomic nervous system.

The most common problem for patients attending Dr Sherwood's clinic is back injury leading to back spasm, which then leads to congestion in the muscles and surrounding tissue. This congestion can lead to allergy, migraine, arthritis, indigestion, increased heart rate variability, low blood pressure (eventually high blood pressure), irritable bowel syndrome (IBS) and fatigue.

At Breakspear Hospital, we have found that some of our patients have "bad backs" as a primary complaint, which then leaves them vulnerable to other consequences such as low sympathetic drive and adrenal depletion. A greater proportion of our patients have secondary back issues; this means that they have allergies from another cause – inherited or toxin/gut or infection-related – which can develop spasm of the paravertebral muscles that in turn worsens their autonomic function.

Whilst spasm is painless, it can be detected quite readily by simple palpation of the muscles adjacent to the spine. When the patient is lying down, these muscles should be soft and relaxed and, by moving the fingers across them with modest pressure, a healthcare professional can determine if they are hard or

rope-like. If they are tense and contracted at rest, then there is a reasonable chance there is some spasm.

For those suffering back spasm primarily, depending on the underlying pathology, the Sherwood Treatment is simple and highly effective. The principle of treatment is to clear the congestion by getting the spasm out of the muscle and by using faradism (a form of electrotherapy to treat conditions such as muscle strain) to pump the muscle without strain. Once the muscle has been cleared of toxins and oxygen delivery returns, the back is decongested and the ganglion (a small relay station for the sympathetic nervous system in the back) begin working properly again.

Treatment with the Sherwood Technique is more complicated for those in whom the back problem is secondary to infection, allergy or toxin. For some, the treatment will add to the recovery process but in others there will be minimal gain.

After my training with Dr Sherwood, I believe his understanding of physical medicine draws us closer to the link between physicality and biochemistry. We are pleased and excited to offer the Sherwood Technique to our patients at Breakspear Hospital.

For more in-depth explanation, request Dr Goyal's paper on the Sherwood Technique.

Editor's note: After Dr Goyal received training at the Sherwood Clinic, Dr Sherwood retired and his London clinic is now closed. Breakspear Hospital is now one of the few clinics able to offer the Sherwood Technique.



Separate baby vaccines now available

It is important to immunise in order to avoid preventable illnesses, which could have long-term effects and/or be life-threatening. For years,

Breakspear Hospital has been providing only mercury-free vaccinations for children and adults to cover everyone for school, business and international travel requirements.

Breakspear Hospital will soon be offering individual first year baby immunisations because we believe that individual doses, given at appropriate intervals, are less of a burden on the immune system, particularly in children's developing bodies.

As with the new 5-in-1 combined vaccine, the separate vaccines are classified as mercury-free.

Years ago there was a mercury-based preservative, thiomersal, in the whooping cough element of the preceding 4-in-1. However, this ingredient was taken out of the 5-in-1 vaccine, which is currently used by the NHS. The 5-in-1 vaccination is formulated to protect against diphtheria, tetanus, pertussis, polio and HiB (Haemophilus influenzae type b).

Parents wishing to consider giving their child these vaccines separately may contact Breakspear Immunisation Department 01442 261 333 Option 1 to ask questions or make appointments. The immunisation clinic is open 9:00am to 5:00pm Tuesdays, Wednesdays, Thursdays and Saturdays.

Bulletin board

Doctors attend Autistic Spectrum Disorder Seminar

In late September 2009, Dr Jean Monro and Dr Christabelle Yeoh attended Dr Dietrich Klinghardt's Autism Seminar for parents and practitioners, held at the Columbia Hotel, London.

Dr Klinghardt has developed many methods for the treatment of autistic spectrum disorder (ASD) which focus on heavy metal and chemical toxicity and sessions of systematic family work, offered in group sessions.

He recently visited Breakspear Hospital and, during his presentation in London, praised the Hospital for its high standard of biomedical testing for both ASD and Lyme disease and its use of low-dose immunotherapy for desensitising.



Warning for walkers and campers

Mrs Ellie Marshall, who was treated for Lyme disease by Dr Terence Daymond, was featured in an article in *The Journal* and also in *PRIMA magazine*. Both articles stressed the importance of walkers and campers to being on their guard after a dramatic increase in the number of suspected cases of Lyme disease in the UK.

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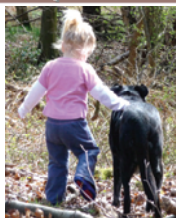


Breakspear Hospital closing dates for 2009 Christmas holidays

The Hospital will close at 5:00pm on Thursday 24 December 2009 and re-open at 9:00am on Monday 4 January 2010. Be sure to order all your antigen vaccines by Monday 7 December and supplements before Friday 11 December to ensure your order is processed in time!

Important: international mumps vaccine shortage update

In early November 2009, Breakspear Hospital received notification that Merck & Co, Inc, the exclusive manufacturer of the individual mumps vaccines, has decided not to resume production of MUMPSVAX® (the single mumps vaccine). MUMPSVAX® was the only



single mumps vaccine produced anywhere that had a proven record of safety and efficacy.

Letters of explanation have been sent to parents of children on our Immunisation Department's mumps waiting list. Pre-payments will be refunded.

Visit www.breakspearmedical.com/mmr for more information.