

# Breakspear Medical Bulletin

Issue 30

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## Notes on the importance of colour in food

In the autumn, one cannot help but admire the beautiful colours of the deciduous trees as they prepare for winter.

The very molecules that display colour and beauty in our countryside have also been coined the 'medical future of the 21st century'.

The brilliant colours occur as the trees move nutrients down to the roots where they are stored. This will provide the trees' energy for growth in spring. As nitrogen and magnesium are taken away from the leaf, the green colour is removed and



coloured pigments, called anthocyanins and carotenoids, remain. Carotenoids are responsible for red, yellow and orange. Carrots are an example of a food with carotenoids. Anthocyanins are responsible for red, purple and blue.

From our food, anthocyanins are members of the flavonoid group of phytochemicals. This group is predominant in teas, honey, wines, fruits, vegetables, nuts, olive oil, cocoa, and cereals.

Flavonoids are frequently referred to as bioflavonoids due

*(Continued on page 2)*

## Thai medical students and teachers visit Breakspear



In October 2011, 17 first year medical students and teaching doctors from Mae Fah Luang University in Thailand visited Breakspear Medical Group, as part of an educational collaborative.

The teachers and students toured the facilities and

attended afternoon lectures given by Dr Jean Monro, Medical Director, and Dr Peter Julu.

The Mae Fah Luang University is an autonomous public university, which was established to meet the educational needs of the people of the north of Thailand.

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**Breakspear**  
Medical Group Ltd  
Hertfordshire House  
Wood Lane  
Hemel Hempstead  
Hertfordshire HP2 4FD  
United Kingdom  
Tel: +44 (0) 1442 261 333  
Fax: +44 (0) 1442 266 388

## On the market: beneficial berries, berry juices and berry supplements

Research has shown that berries have a powerful antioxidant effect and may help a variety of conditions, such as bladder infections and constipation. There have also been studies completed on berries' effect on cardiovascular health and cancer.

Many varieties of berries and berry juices are readily available in the fruit, cooler or freezer section of food stores. However, some berries and juices may contain too much fructose for some people.



Berry extract-containing supplements have been on the market for years, produced by a variety of manufacturers. For example, Pure Encapsulations manufactures OptiBerry™ which contains blueberry, strawberry, cranberry, bilberry, elderberry and raspberry seed extracts.

*If you are interested in more information about the benefits of berries, juices and supplements, speak to your Breakspear doctor about specific ones which may benefit you.*

### Notes on the importance of colour in food

*(Continued from page 1)*

to their multifaceted roles in human health maintenance. These powerful free radical scavengers can help protect DNA from breakage, protect cells from oxygen damage (lipid peroxidation), prevent excessive inflammation in the body, decrease capillary permeability and fragility, and increase membrane strength.

Daily intake of anthocyanins is estimated from 500 milligrams to 1gram, but may be several grams per day if an individual is consuming flavonoid supplements, such as grape seed

extract, ginkgo biloba, or pycnogenol.

There are many folk remedy roles of anthocyanin pigments used throughout the world for a wide range of diseases. In the past decade, specific anthocyanins are being studied for their pharmacological properties. For example, berry juice has been reported to be helpful in protecting against oxidative damage in patients with chronic medical conditions. Studies show that berry juice increases glutathione levels and reduces cell-free DNA levels.

Patients with post-exertional fatigue and muscle pain often have this due to excessive oxidative damage following activity. Significantly increasing their intake of anthocyanins should be very helpful in aiding recovery.

A study recently published from a London university showed that the consumption of a tart Montmorency cherry juice for 7 days before and 2 days after doing exercise was helpful for post-exercise recovery. In a crossover trial, study participants were given a small amount of cherry juice or a small amount of isoenergetic fruit concentrate. When the test subjects had drunk cherry juice, compared with fruit concentrate (both having the same calories), they had significantly better muscle recovery and less oxidative damage after the exercise.

At Breakspear, our advice is always to consume a wide range of vegetables and fruits of different colours, as this is what gives us a broad range of important nutrients.

*Individualised advice should be sought from your doctor or nutritionist as to whether it would be more suitable for you to have cherry/ berry juices or whether to take them as capsules. Juices may contain too much fructose for certain individuals.*

#### Breakspear Medical Bulletin

Breakspear Medical Group Ltd  
Hertfordshire House  
Wood Lane, Hemel Hempstead  
Hertfordshire HP2 4FD  
United Kingdom

#### Editor:

Carolyn Northcote Monro

#### Contributing writers:

Dr Jean Monro  
Angelette Müller  
Dr Christabelle Yeoh

**Breakspear Medical Bulletin** is a private publication that we aim to produce quarterly. It is for the promotion of environmental medicine awareness 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 Medical Group. 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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## Ask Dr Christabelle Yeoh



**I think the office I work in is affecting my health, what can I do to check and manage this? I have had one cold after another, have developed**

**fatigue, sore eyes and a cough. A few people at my office also complain of frequent colds.**

If you are working in a new or remodelled building, or have recently moved to one, and as a result developed these new onset (or significantly worse) symptoms, then it is important to consider whether you have Sick Building Syndrome (SBS).

**A 1984 report by the World Health Organisation (WHO) determined that almost 30% of new buildings around the world could cause SBS.**

A 1984 report by the World Health Organisation (WHO) determined that almost 30% of new buildings around the world could cause SBS. Women seem to be more susceptible to the effects.

The NHS recognises that SBS can lead to a large number of symptoms, ranging from headache to fatigue and skin rashes to muscle pain and mood changes. It is described as a 'poorly understood phenomenon' but within environmental medicine circles it is a well-known problem. In modern well sealed buildings, indoor pollution is often a much bigger problem than outdoor pollution. It is very important that there is fresh ventilation.

The main groups of chemicals which cause problems indoors are:

- volatile organic compounds (VOCs)
- combustion pollutants (carbon monoxide, sulphur dioxide, nitrogen dioxide)
- building construction and furnishing components (for example, formaldehyde from plaster board, cleaning agents from carpets, solvents from paints)

Other chemicals in the office may come from printing inks, electronic equipment and any

other specific manufacturing material.

Other non-chemical pollutants would include moisture (leading to moulds), noise and electrical pollution.

If you think that you are unwell due to the factors within the building, it is important to spend some time away from the place and observe your

responses after a couple of weeks. Often, during this time, the SBS sufferer will improve quite significantly and deteriorate shortly after returning. Often people will not improve if they



remain exposed to the toxic exposure.

Ideally, people should:

- ventilate the area well with fresh outside air
- drink a lot of water
- sleep at least 7-8 hours at night
- eat a pure, organic wholefood diet
- take supplements to help the liver and nerve cells
- detoxify in several ways such as infrared hyperthermia, saunas, and massage

The diet should be high in a range of coloured vegetables and fruit (see cover article, Notes on the importance of colour in food), low in saturated fat and very high in protein. Sugar and processed food should be eliminated.

These are all very non-specific approaches to many environmental health conditions, but it is helpful to know the important steps, which are to identify and remove the trigger whilst putting all the right nutrients into the diet. At times, a person may be unwell due to an allergy or sensitivity and it is helpful to treat the patient with low-dose immunotherapy.

If you think you suffer from SBS, talk to your colleagues to see whether they are having similar symptoms and if it appears to be a workplace issue, bring it to the attention of your health and safety representative. Your employer has a duty of care to investigate.

## Notes on HPV and preventing cervical cancer

### Everyone, man and woman, has heard about the life-threatening potential of cervical cancer but are enough of us doing anything preventative?

In early 2009, the news was filled with stories about human papilloma virus (HPV) as British reality TV star Jade Goody made her demise public with media documentation of her failing health. Other celebrities such as TV show Charlie's Angels' star, Farrah Fawcett, Argentinean leader Juan Peron's second wife, Eva Peron, and Scottish singer/songwriter, Sandi Thom, have had their HPV stories go public.

HPV is a common sexually transmittable infection. There are numerous types of the virus; many types are thought to be harmless while others are responsible for cervical, anal and penile cancer, and genital warts. Certain types are linked to cancers in areas of the head and neck.

HPV is transferred person-to-person by genital contact from an infected to an uninfected person. The American National Institute of Allergy and Infectious Diseases reports that an infected person will transfer the virus to an uninfected sexual partner about two-thirds of the time.

As it is a sexually transmitted disease, the most straightforward way to prevent contracting it is by limiting the number of sexual partners. Using a condom may help but the virus can be transmitted through skin contact in the genital area.

Two vaccines have been developed to protect against specific strains of HPV. The NHS offers Cervarix for girls, which protects against HPV types 16 and 18 and is supplied by

GlaxoSmithKline. The more expensive vaccine, which has been recommended for boys, too, because it also protects against genital warts, is

Gardasil which protects against four HPV types: 6, 11, 16 and 18 and is supplied by Merck. Both vaccines are being promoted for girls as young as 9 years old, as the vaccine is considered to be more effective when given before they are sexually active.

However, there is controversy surrounding the vaccines. For example, in November 2011, the Daily Mail featured an article stating, "Girl, 13, left in 'waking

coma' and sleeps for 23 hours a day after severe reaction to cervical cancer jabs". Also in November 2011, the Telegraph reported that the head of Hornsey School for Girls in north London, stopped nurses from delivering a range of vaccines, including Cervarix, because it was found that the girls' behaviour after the vaccinations affected their concentration and caused them to become emotional, which disrupted classroom time. In October 2011, the Daily Mail's headline read, "NHS Trust suspends cervical cancer vaccinations after girl, 14, dies within hours of jab".

Some critics believe that the HPV vaccine will give teenagers a false sense of security, which may lead them to be more sexually active because they believe they are immune to cervical cancer.

Not all people infected with the virus will develop cancer. However, supporting the body's immune system and monitoring for abnormal cells on a regular basis, by way of regular smear tests, may be the best advice available at this time.



**When was the last time you were tested for HPV?**

*(If you don't know, you probably haven't been.)*

## Cervical health checks available

Breakspear Medical Group continues to offer a smear test for abnormal cells, together with a check for HPV (which is not part of NHS cervical screens) and to exclude gonorrhoea and Chlamydia. From the tests performed, it can be determined whether one has the virus and whether one has any abnormal cells that indicate an early change in the cervix. We also have the means of investigating the body's own resilience and immunity to viruses and can develop a personalised programme to improve and maintain an

improved state. Nutrition is important in raising immunity-protecting mucous membranes. Trials have shown that early abnormalities can be reversed with nutritional and other interventions.

This comprehensive cervical screening is available at the price of £135.

For further information on Cervical Health Screening, please ask for one of Breakspear's information leaflets.



## Patient's own story: living with multiple chemical sensitivity



The following is an account of a Breakspear patient (who wishes to remain anonymous), sharing her experiences and difficulties of suffering from multiple chemical sensitivity (MCS), which is a hypersensitivity to everyday chemicals.

I am a 57 year old woman, 5'6" tall, weigh 6 stone and I suffer with MCS. It affects every single area of my life and has made my life a nightmare.

Exposure to chemicals causes me to taste the chemicals, like a thick film over my tongue that I can only describe as a mix between petrol and rancid vinegar that cannot be washed away. Over time, my gullet has become extremely sore and sensitive. I often suffer from coughing fits, which can last up to 10 minutes.

When chemicals reach my stomach and digestive system through saliva in my mouth being inadvertently swallowed, they sometimes induce vomiting. If I do not vomit, whatever food I have consumed is rendered indigestible and feels as if it has turned to putrid rubber. It remains in my stomach for anything up to 20 hours, which means I am unable to eat or drink anything else except plain water for this entire period. As you can imagine, this leads to terrible exhaustion and degenerative illness.

MCS is not limited to chemicals of extreme potency; it can be caused by everyday chemicals, such as cleaning products, petrol, exhaust fumes and domestic products. For me, by far the most prevalent dangers are perfumes and air fresheners.

An everyday task such as going shopping is a struggle as I must take spare clothes to change into and a hat to wear, a flannel to wash my face and hands, and a bottle of water to frequently rinse my mouth, to wash out the vapours. I have to park as far away from other cars as I can because most people have car air fresheners. If I am lucky, I can get in and out

before I feel too sick, settling gratefully for only having stinging lips, gums and throat. If I am unlucky and the exposure to the vapours is too prolonged or intense, I feel sick and sometimes vomit.

I cannot go out for dinner to a restaurant, to the cinema or to the theatre. I cannot even go out walking in the woods without fearing to meet other people who may be wearing perfumes or aftershave.

I live in constant fear.

I am a patient at Breakspear and have received knowledgeable and professional advice, which has helped me so much. (I have found the range of supplements and unscented cleaning products very helpful.)

But my most serious potential danger is hospitalisation. I have been admitted to an NHS

hospital on two occasions but I discharged myself from both because I was becoming more ill than when I went in. They were horrendous experiences. I lost 6-8 pounds in weight after each visit. I have told my family and loved ones that I will never go to hospital unless my life is at severe risk and can only be saved by hospitalisation.

Perhaps the most painful thing about MCS is the fact that most of it could be avoided.

MCS is not an imaginary illness prompted by the smell of something alone. It is a real and physiological reaction to harmful chemicals contained in products such as perfumes, aftershave, air fresheners and many strong smelling deodorants. (Many of these products are derived from petrochemicals.) Everyone reacts to these poisons; the single difference is that only people with MCS can feel the reaction. This should concern everyone because it is all so unnecessary.

I personally feel obliged to do something about this, and so I have supported an e-petition to lobby the government to regulate which chemicals manufacturers are allowed to use.



"Exposure to chemicals causes me to taste the chemicals, like a thick film over my tongue that I can only describe as a mix between petrol and rancid vinegar..."

## e-petition

How to sign an e-petition to regulate chemicals used in manufacturing

If you would like to sign a petition to regulate cosmetics, especially perfumes, and ban the use of toxic chemicals, please go to:

<http://epetitions.direct.gov.uk/petition/15337> (closing 29 February 2012)

Sign this petition ►

## My story: going grain-free

**Introducing a new reader contribution section.** In upcoming Bulletins, we hope that readers will submit stories about the dietary changes they and/or their families have made to improve their health. Send submissions to: email: [cmonro@breakspearmedical.com](mailto:cmonro@breakspearmedical.com), fax or post to the clinic, Attn: C N Monro.

Carolyn Northcote Monro

When I tell people that my husband cannot eat grains, so many ask, "But what does he eat?" Believe me, as we both battle expanding middle-age midriffs, there are a plenty of grain-free foods available.

My husband is a very sensitive coeliac which means he cannot eat any grains at all, including rice and maize.

Coeliac disease is usually defined as an autoimmune disease, triggered by gluten. While some mild coeliacs can tolerate "gluten-free" wheat flour, where most of the gluten has been removed, my husband cannot tolerate the tiniest traces of it.

If he does accidentally have some, he will quickly start looking a bit ill (I can usually see him reacting before he realises it), then he will get stomach cramps and bloating, followed by many other progressive digestive tract discomforts, which may be accompanied by a migraine and usually involves becoming a grump for the week following.

Undiagnosed coeliacs (or those who continue to eat grains) may suffer from depression, fatigue, joint or bone pain, problems relating to malabsorption, such as osteoporosis, pancreatic disease, tooth enamel problems, internal haemorrhaging and nervous system disease. It has also been linked to certain types of cancer, particularly intestinal lymphoma and colon cancer.

Both for his health and our continued happiness, it is best that grain encounters do not happen.

In the beginning, our shared household was entirely grain-free so that there were to be no accidents.

Gravy is made from scratch, using drippings, homemade broth made from leftovers which is stored in the freezer, and thickeners, such as potato flour or tapioca starch. Sometimes a little

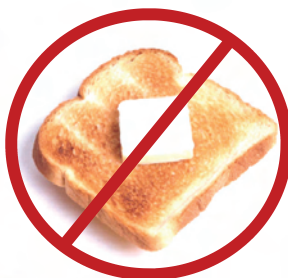
splash of Worcester sauce or Japanese soya sauce, tamari, can add taste and browning colour.

I bake homemade breads, crackers, muffins and cakes, which usually substitute a mixture of ground almonds, potato flour, tapioca starch and gram flour for regular flour, as well as carefully choosing my raising agents (some contain maize or rice flour). There are a few things that one learns when making flour substitutions and one of the first is that potato flour can make things go incredibly rubbery very rapidly.

I have also learned that although the listed ingredients make some premade foods seem gluten-free, there are ways that gluten or grain may be used in food processing, which means that traces may still be present but do not appear on the label. For example, some almond cakes have the ingredients listed as sugar, egg and ground almonds. However, in processing, the cake pan may have been floured and, as flour is not an ingredient, it is left off of the ingredient list. Consuming such a cake would be a tragedy for my husband.

After all these years, I admit that there are now a few grain-containing foods in our house for my consumption only. (This is despite the media frenzy over the latest best selling book in North America, "Wheat belly" which contains the message from the author/renowned cardiologist that removing wheat from our diets "can prevent fat storage, shrink unsightly bulges and reverse a myriad of health problems.")

Today I continue to prepare all shared meals entirely grain-free, stringently avoid contamination (such as crumbs in the butter) and am always learning new things and trying new recipes. It really is not so hard going grain-free and it seems that it may be better for everyone's health.



**In the beginning, our shared household was entirely grain-free so that there were to be no accidents.**

## Recommended recipe

Angelette Müller

Traditionally moussaka is a baked lamb and eggplant casserole covered in potatoes and béchamel sauce.

This vegetarian version uses lentils as a substitute for lamb and omits the béchamel sauce, which reduces the fat and calorific content. The dish is also dairy and gluten-free.

Those on a specific carbohydrate diet can replace the potato with celeriac and soak the lentils for 24 hours before cooking (to increase the digestibility of the lentils).

An interesting health fact about lentils is that according to the Nurses Health Study 2 (1991-1995) eating 2 or more portions of beans or lentils weekly is associated with a 24% reduction in breast cancer.

Lentils have a low glycaemic index and help you feel full even when you are eating a higher GI meal.

### References

Mollard RC et al. The acute effects of a pulse-containing meal on glycaemic responses and measures of satiety and satiation within and at a later meal, *B J Nutr*. 2011 Nov 7:1-9 [Epub ahead of print].

Murray MT, Pizzorno JE, Pizzorno LU. The condensed encyclopedia of healing foods. New York: Simon and Schuster; 2006.

## Recipe

### appeal to readers

Do you have some favourite recipes that you'd like to share with other people who have common food allergies/sensitivities?

Email your recipes to the editor:

**cmonro@**

**breakspearmedical.com** or send

a copy in the post to the clinic,

Attn: C N Monro.

## Vegetarian moussaka

### Free from grain and dairy

Submitted by: Lizee McGraw, Nutritional Therapist



2 large onions	25g fresh basil
60ml olive oil	115g Puy lentils
4 garlic cloves	115g red lentils
1/2 red pepper	1L carrot juice
3 medium carrots	2 large aubergines
1 celery heart	900g potatoes

1. Chop the onions. Pour 30ml of the olive oil into a large pot over medium heat and fry the onions for about 5-10 minutes, stirring occasionally.
2. While the onions are frying, chop the garlic and basil roughly and slice the pepper, carrots and celery into bite-sized pieces and set aside.
3. When the onions are soft, add garlic, peppers, carrots, celery, basil and the Puy and red lentils. Stir for a few minutes on medium heat.
4. Add the lemon juice and 750ml of the carrot juice and reduce heat to simmer uncovered for 1/2 an hour, stirring occasionally. The mixture will thicken as the lentils cook so add more carrot juice when required, reserving a little for covering the base of the casserole dish (step 7).
5. Whilst this is simmering, preheat the oven to 180°C, slice the aubergines, peel and slice potatoes and set aside.
6. Spread the remaining carrot juice on the base of a casserole dish and then place a layer of sliced aubergine on top of this. Cover with a layer of lentil sauce and keep layering aubergine and sauce, alternating until all the sauce is used.
7. Cover the top with the potatoes and drizzle 30ml of oil over the top for browning.
8. Cook in oven for approximately 40-45 minutes.

Serve with crisp green salad and a little cooked millet or buckwheat

## Notes on lathyrism - a neurodegenerative condition

**Lathyrism is a neurodegenerative condition caused by eating the seeds of a species of a plant called Lathyrus, which is sometimes present today in Western foods.**

Lathyrus is a genus of flowering plants; species includes sweet peas and vetchlings. The main

species of concern to human health are *Lathyrus sativus*, *Lathyrus cicera* (flat podded vetch) and *Lathyrus clymenum* (Spanish vetchling). The seeds of these plants are toxic; however, they are used in various foods.

Lathyrism is a neurodegenerative disease of humans and domestic animals that is caused by eating significant amounts of seeds of these specific legumes. The condition is characterised by lack of strength, inability to move the lower limbs and/or emaciation of gluteal (buttock) muscles.

The condition is prevalent in Bangladesh, Ethiopia, India and Nepal, although several outbreaks have occurred in Spain. It generally affects men more than women.

Lathyrus seeds contain a toxin that is a non-protein amino acid called L-BOAA, which is an excitatory acid and a glutamate agonist. It has been shown to cause a condition in which the body's cellular energy provider becomes damaged or declines significantly, which is called mitochondrial toxicity.

The species *Lathyrus sativus* is grown for human consumption and also commonly grown for livestock feed in Asia and East Africa. It is also



### How to prevent lathyrism

Suggested food preparation methods which can help with the prevention of lathyrism:

- soaking the seeds overnight, decanting the water before cooking can eliminate 90% of the toxin
- roasting the seeds at 140°C for 15-20 minutes results in 80-90 % destruction of the toxin

known as chickling vetch, grass pea, keshari (India), Indian pea, almorta or alverjón (Spain) and cicerchia (Italy).

In India, the seeds are eaten in times of food scarcity and are also used in dhal. In Italy, the seeds are sold for human consumption in the region of Florence. In the La Mancha region of Spain, flour made from grass peas is the main ingredient for the *gachas manchegas* (a basic dish made from flour, water, olive oil, garlic and salt).

Lathyrus is also used as a homoeopathic remedy all over the world for treatment of an assortment of conditions, including muscular dystrophy, relieving pinched nerves or degeneration/bruising to nerve sheaths, and as a preventative for poliomyelitis.

Although Lathyrus can sometimes be called 'chick-pea', it is quite different from the high-protein 'chickpea', from the plant species *Cicer arietinum*. This type of chickpea is also known as garbanzos (Spain), ceci (Italy), Bengal gram (India) and pois chiche (France). Chickpea flour is the main ingredient of most dhal (India). As with most readily available beans, when cooked correctly, chickpeas are not toxic.

## New thoughts on banning mobile phones and wireless networks in schools

According to an article in the Telegraph May 2011, a Council of Europe committee examined evidence that technologies have "potentially harmful" effects on humans and concluded that immediate action was required to protect children. The report also highlighted the potential health risks of cordless telephones and baby monitors. The committee called for such actions as:

- setting thresholds for levels of long-term exposure to microwaves of the type emitted by mobile phones

- banning all mobile phones and wireless networks in classrooms and schools
- running information campaigns aimed at children and young adults about the risk to human health

The draft resolution will now go before the Council's full Parliamentary Assembly for approval. These conclusions contradict advice from the World Health Organisation, which states that exposure to electromagnetic fields poses little or no risk to human health.



## New thoughts on IBD and artificial sweeteners



**Inflammatory bowel disease (IBD) is an autoimmune disease which can have very serious consequences, requiring many sufferers to have extensive sections of their colon removed when therapies fail.**

IBD is often mistaken for a similar sounding condition, irritable bowel syndrome (IBS); however, it is a different condition, which includes both ulcerative colitis and Crohn's disease (CD). IBD is an inflammatory bowel disease while IBS is a functional bowel disorder.

Early studies suggested IBD was most prevalent in Western countries, such as the United Kingdom, United States, Sweden and Denmark. At that time, compared to these countries, Canada had much lower occurrence

rates. However, recent studies show that Canada is now topping the list with the highest global incidence of IBD.

Dr Joseph Mercola, an American osteopathic physician, posted a paper on his 'natural health website' which stated: "In 1981, the incidence of IBD in Alberta, Canada was only 44 per 100,000; less than half that of Olmsted County in Minnesota [USA]. By the year 2000, the incidence in Alberta had skyrocketed to 283 per 100,000; now 63% higher than that in Olmsted county..."

An article by Xiaoga Quin in the Canadian Journal of Gastroenterology September 2011, hypothesises that this disease may be related to the impairment of digestive proteases, caused by the inhibition of gut bacteria by dietary chemicals, such as saccharin and sucralose.

First produced in 1878, saccharin is a low-calorie sweet-tasting synthetic compound with a slightly bitter aftertaste. It is used to sweeten drinks, sweets, medicines and even toothpaste.

Artificial sweeteners may be contained in:

- diet or light drinks
- sweets
- breakfast cereal
- popcorn
- yoghurt
- snack bars
- baby foods
- frozen meals



Discovered in 1976, sucralose is the newest zero-calorie artificial sweetener, which is twice as sweet as saccharin, and commercially known under a variety of names, such as Splenda, SucraPlus and Nevella.

In 1977, unlike many other Western countries, Canada applied stringent standards for the use of saccharin but later did not apply these standards to sucralose. Sucralose was first approved for use in Canada in 1991 and was

approved to be used as a tabletop sweetener and ingredient in many processed foods.

Dr Mercola's website states, "[Sucralose] can destroy your immune system and is like eating an insecticide". After assessing the Canadian experience, his

article refers to a study published in 2008 in the Journal of Toxicology and Environmental Health which reported that Splenda increased the pH levels in intestines and reduced the amount of good bacteria by 50%. The study's author also stated that sucralose has a potent inhibitory effect on gut bacteria and inactivates digestive protease and alters gut barrier functions.

Dr Mercola cites another article, by Dr Sanjay Gupta, CNN's chief medical correspondent, which summarises research presented at the American Stroke Association's International Stroke Conference 2011 on the topic of people who drink diet pop having a much higher risk of vascular events when compared to those who do not drink fizzy drinks.\*

Dr Mercola concludes that patients with IBD should avoid all types of sugars and sweeteners.

\* Editor's note: this presented research paper abstract was not a study reviewed for publication by experts in the field.

## Did you know...?

### Defining the criteria for CFS/ME

The terms "chronic fatigue syndrome" (CFS) and "myalgic encephalomyelitis" (ME) have been used over the years to describe a complex, severe condition of continued tiredness that is not relieved by rest and is not directly caused by other medical conditions.

The International Consensus Panel, which is a group of 25 doctors and scientists from 13 countries, recently prepared a new, precise set of criteria for CFS/ME. It is thought that this will help researchers to study uniform patient sets and standardise an important diagnostic tool for clinicians.

One of the main recommendations of the International Consensus Criteria (ICC) was to standardise the name "ME" to describe the condition.

ME has also been called CFS, CFIDS (chronic fatigue and immune dysfunction syndrome) and ME/CFS. There have been many criteria published, some of which are very inclusive and make it very difficult to use effectively.

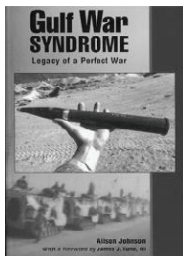
The ICC is based on research which shows profound pathological deregulation of the central nervous system, immune and endocrine systems, dysfunction of the cellular energy metabolism and ion transport and cardiovascular abnormalities.

The ICC recommends that "Researchers use the ICC exclusively and call the disease ME in all written documents about their research." Also included in their recommendations are proposals to have government agencies and institutions adopt the ICC approach and promote and fund only agencies and foundations that use the standardised ICC criteria.

The new ME criteria were published in the October 2011 edition of the Journal of Internal Medicine and can be accessed online:

[onlinelibrary.wiley.com](http://onlinelibrary.wiley.com)

**Editor's note:** At this time, Breakspear Medical Group will continue to use "CFS/ME" to describe this condition in our literature.



### MCS documentaries available free online

American graduate and author Alison Johnson is fighting to gain acceptance for multiple chemical sensitivity (MCS).

Ms Johnson has produced many videos, including "Multiple chemical sensitivity: Reflections by Dr Christine Oliver and Alison Johnson", which is a new 29-minute video. (This video is available to view free online at [www.alisonjohnsonmcs.com](http://www.alisonjohnsonmcs.com); transcripts are also available.)

The video relays the policy of the American Centers for Disease Control and Prevention (CDC) that concerns minimising fragrances in all CDC facilities across the United States. Comments in the video may be helpful for anyone requesting a scent-free policy in their workplace, university, place of worship or shared accommodation.

In 2001, Ms Johnson's book "Gulf War Syndrome: Legacy of a Perfect War" was published, which presents an analysis of the various toxic exposures that have contributed to Gulf War syndrome and includes veterans' stories of devastating health problems.

### Women with fibromyalgia have lower levels of essential elements

A study published in the Journal of Korean Medical Science 2011 evaluated the characteristics of hair minerals in women with fibromyalgia compared with a healthy reference group. It found that the women with fibromyalgia had significantly lower levels of calcium, magnesium, iron and manganese, even after adjustment for potential confounders.



### Child paracetamol dosages revised

The MHRA (Medicines and Healthcare products Regulatory Agency) advises lower doses of pain relief for children than before. Studies show that incorrect dosages of paracetamol may cause liver damage and/or higher incidence of toxicity, which have been reported after multiple dosing. About 84% of children in the UK have received paracetamol-based products by the age of 6 months. Revised instructions should be followed carefully.



## Available at our Pharmacy

[www.breakspearmedical.com/shop](http://www.breakspearmedical.com/shop)



### New feature online: save on shipping charges

Due to popular request, we have now made shopping online for your Breakspear Pharmacy even better.

Now you can choose to have your order shipped directly or opt to collect your order at the Pharmacy within 7 days, which saves you shipping charges. Using this feature, your order will be picked, packed and waiting for you at a time to suit you.

Visit Breakspear Pharmacy's online shop anytime of the day or night to order and pay securely for:

- nutritional supplements
- alternative foods
- toiletries
- household cleaning products

## Notice to patients: book your next appointment early

Breakspear Medical Group is currently recruiting additional doctors who specialise in allergy and environmental medicine. (See article on Professor Basant Puri on page 12.) However, at this time, there are a large number of new and returning patients wishing to see the doctors and that has resulted in long waiting times for consultations.

Appointments are booked on a first come, first served basis.

As announced in spring 2011, new patients of Breakspear Medical Group will have a follow-up telephone conversation with their doctor included in the initial consultation fee. As a courtesy to all patients, doctors will try to keep to schedule as much as possible.

We ask patients to understand that doctors will do their best to speak with all patients by arrangement. If, after arranging the time of your follow-up telephone consultation, you find that the time-slot is no longer convenient, please let Reception know as soon as possible so that it can be rescheduled.

### Reminder to all patients regarding repeat prescription policy:

To request repeat prescriptions or to order nutritional products, or to make an appointment for low-dose immunotherapy testing, patients are required to have had a minimum of one 30 minute consultation with a Breakspear doctor within the last 12 months.

Breakspear Medical Group also requires patients to allow the clinic 2 business days to process all repeat prescriptions, both prescription-only medicines (POMs) and supplements.

### In order to avoid unexpected delays, we recommend that you:

- **Book your next appointment before you leave the clinic.** Appointment cards are available to make it easy for you to remember your next appointment. Later in 2012, we are introducing a mobile phone texting service to help remind patients of appointments. (Please speak to Reception for more information.)
- **If you are able, request to be put on a cancellation list, as well as booking your next appointment.** If you are flexible time-wise, this option may provide an earlier appointment date at short notice. (Your previously booked appointment will then be made available to someone else.)

Please note: Breakspear Medical Group reserves the right to charge for missed appointments which are not cancelled 24-hours in advance.

## Introducing Professor Basant Puri

On 17 November 2011, Professor Basant Puri joined our medical team at Breakspear Medical Group. Professor Puri is a medical researcher and consultant at Hammersmith Hospital and Imperial College London. He has researched a variety of conditions, including depression, chronic fatigue syndrome (CFS),



attention-deficit hyperactivity disorder (ADHD) and Huntington's chorea, using state-of-the-art electrophysiological, brain scanning and biochemical techniques. He will be carrying out medical studies and consulting on a part-time basis at Breakspear and supervising research into nutritional medicine.

Breakspear Medical Group is pleased to announce that Dr Prem Bajaj, who has moved here from Denmark, started as full time member of the medical team in February 2012. *More about Dr Bajaj in the next Bulletin.*

## Bulletin board

### Staff Christmas party held early

To avoid what could have been the third consecutive snowy weather cancellation of the annual after-work party, the 2011 staff Christmas party was held on 3 December 2011. 45 staff members signed up to attend the Moonlit in Marrakech-themed event held in Aldenham, near Watford.

On 16 December 2011, staff enjoyed a Christmas lunch and Secret Santa gift-exchange.



### Dr Jean Monro gives lecture in London

In November 2011, Dr Jean Monro presented her training session entitled, "Environmental medicine aspects of neurological disease with reference to one pollutant—lead" to the British Society for Ecological Medicine in London.

### Lyme borreliosis talk given by Dr Carsten Nicolaus

On 29 September 2011, Dr Carsten Nicolaus visited Breakspear to deliver a Lyme borreliosis talk. His talk involved both an introductory presentation and a workshop for all interested members of staff.

### Results of survey on proposed Breakspear ASD workshops

The results are in from our survey of parents of children with an autistic spectrum disorder (ASD), which was to find out how Breakspear can help parents beyond the clinical appointments and testing. In the next edition of the Breakspear Medical Bulletin, find out what we learned.

### Afternoon of talks for staff

On the afternoon of 6 December 2011, the staff of Breakspear attended informational lectures given by other members of staff. Topics included: principles of environmental medicine, known causes of autism, and low-dose immunotherapy.

### Would you like to participate in a CFS/ME & Fibromyalgia PhD project?

PhD student Pamela McKay, who is a staff nurse working at a hospital in Inverness, is currently working on a study with the University of the West of Scotland. The study has secured ethical approval from the University and Pamela McKay has been awarded a scholarship by the Florence Nightingale Foundation in support of her work. Its main aim is to explore and analyse similarities between symptoms associated with CFS/ME and FM. She hopes this will help "to establish an in-

depth understanding of the impact these symptoms have on patients".

The study involves logging on to Pamela McKay's website, creating a user account and then answering questions relating to the symptoms experienced.

If you would be interested in participating visit: [www.cfsmefibromy.co.uk](http://www.cfsmefibromy.co.uk) Or email Pamela McKay: [cfsmefibromy.study@gmail.com](mailto:cfsmefibromy.study@gmail.com)