

# WHAT DOCTORS DON'T TELL YOU

OUR 100TH  
ISSUE!

## Covid vaccines

The real truth about  
side-effects of shots

## Alzheimer's disease

New links with an  
unhealthy gut

**PLUS** Bee venom – the cure-all for Lyme and more • Natural remedies to heal angina • The best supplements to boost your sperm • Spontaneous remission: when cancer suddenly disappears • Kinder keto: phase your diet for maximum health

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\*\*Placebo Controlled Trial, Princeton Research UK 2017



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# W

elcome  
to this magazine's 100<sup>th</sup> issue.  
This is in fact the 360<sup>th</sup> issue of  
*What Doctors Don't Tell You* as a  
publication, but after starting out  
life as a newsletter, we rebranded  
*WDDTY* as a newsstand and  
subscription magazine in  
September 2012.

We first launched the newsletter  
31 years ago to universal acclaim  
as an investigative "voice in the  
silence" (*The Times*) that "rings the  
alarm bells" on medicine "before  
it becomes the stuff of national  
panic" (*The Observer*).

Then in 2013, after our  
decision to turn *WDDTY* into  
an international newsstand  
magazine, Sense about Science,  
an industry-sponsored lobby  
group, began a sustained attack on  
us, demanding our magazine be  
removed from the shelves.

Sense About Sciences' followers  
covered up our magazines in  
news outlets; engaged in phony  
letter writing campaigns to retail  
chains; reported our advertisers  
to the Advertising Standards  
Association; and even managed to  
place a potentially inflammatory  
article about us in *The Times*.

We prevailed over these online  
bullies, particularly after Sense  
about Science, which also tried to  
dispel the myths about sugar being  
bad for you, was discovered to be  
receiving funds from Coca Cola.

But now there is another, more  
menacing threat, a bigger bully  
trying to silence free speech—and  
ironically it comes from other  
journalists.

Newspapers, the nightly  
television news and just about every  
journalist writing or broadcasting  
have been jubilant over the arrival  
of the Covid-19 vaccine. Virtually  
all these journalists repeat the  
assurances from Pfizer and  
AstraZeneca that they are at least 90  
percent effective.

What these journalists don't do,  
however—what no mainstream



Editors

Lynne McTaggart and Bryan Hubbard

COMMENT

## THE INCONVENIENT QUESTION

journalist seems willing to  
investigate—is the most important  
question of all: how safe are these  
new vaccines?

As our Special Report (page  
26) details, in the first weeks of the  
Pfizer rollout, some 2.3 percent  
of people getting vaccinated—  
amounting to one in 43—had a  
reaction serious enough to make  
it impossible for them to perform  
daily activities and requiring  
care from a doctor or health care  
professional.

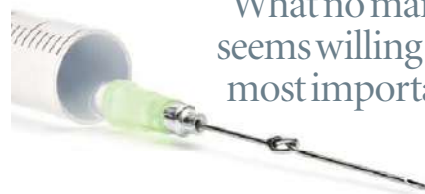
And many of these victims  
are in fact healthcare workers  
themselves. In the UK, Charles  
Moore, writing in *The Telegraph*,

stroke, apparently resulting from  
a lack of blood platelets, which  
enable blood to clot.

In our view, that question  
of safety is not only central to  
the question of Covid vaccines  
but central to the entire issue of  
vaccines used for children.

And it is a question that has now  
been shut down, with legitimate  
scientific evidence suppressed,  
articles removed off websites, and  
journalists and others who raise the  
question being labeled anti-vaxxers  
and worse.

Last year, a young representative  
from an organization called  
NewsGuard called our offices and



"What no mainstream journalist  
seems willing to investigate is the  
most important question of all:  
how safe are these  
new vaccines?"

revealed that the hospital where his  
medical friend works is severely  
short-staffed at the moment, in  
part because significant numbers  
of healthcare workers there are on  
sick leave, having been made ill by  
the Pfizer vaccine.

In the US, Dr Gregory Michael,  
an OB-GYN at Mount Sinai  
Medical Center in Miami Beach,  
Florida, sought emergency care  
three days after receiving the Covid  
shot because of evidence he had  
internal bleeding. Several weeks  
later, he died from a hemorrhagic

eventually spoke to Bryan, claiming  
that her organization, which  
attempts to highlight fake news,  
had read some of the material on  
the website of *What Doctors Don't  
Tell You* and was concerned that we  
seemed to be anti-vaccination.

"We are not anti-vaccination,"  
replied Bryan. "We are pro-truth."  
He explained that all our material  
on conventional medicine,  
including vaccines, comes from the  
medical literature.

The woman then told Bryan to  
show her the evidence. She gave

him a list of everything she wanted  
to see happening to "improve" our  
reporting in the future.

Bryan told her that since our  
company's day rate was \$1,000,  
we'd expect compensation. She  
said she would call him back to  
see if he'd indeed carried out the  
suggestions and hung up.

We never heard from her again.  
The chief investor of NewsGuard,  
which underwrote its start-up  
funds, is Publicis Groupe, the  
third-largest communications  
corporation in the world,  
which offers "advertising and  
communications services to a  
diversified customer portfolio  
that is representative of the global  
economy."

To get an idea of how big it is,  
Publicis employs 84,000 and has  
net revenue of nearly €9 billion.

Publicis Groupe is an octopus  
with many arms, one of which  
specializes in healthcare.

According a recent annual  
report, clients of their health  
division include AstraZeneca,  
Bayer, Bristol-Myers Squibb,  
Gilead Sciences, GlaxoSmithKline,  
Merck & Co, Novartis Pharma,  
Novo Nordisk, Pfizer, Roche,  
Sanofi and more—in other words,  
the giants of the pharmaceutical  
industry.

So now we have Big Pharma  
paying a PR firm to create a 'news'  
organization wedded to sifting  
out 'fake' news—i.e., news not  
compatible with the narrative  
developed and distributed by  
the drug industry. And they are  
employing journalists formerly  
linked to such well-regarded  
outlets as *The Wall Street Journal*  
and *The Atlantic*.

What this means is that there  
is more need than ever for an  
independent publication like ours,  
willing to ask the inconvenient  
questions, willing to hold  
governments and industry to  
account.

That has been our ethos from  
the start. So join us, raise a glass  
and toast the fact that we're still  
standing tall (now in 15 different  
languages) and, 31 years later, still  
demanding the inconvenient truth.



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more colorful and beautiful auric radiance. I coined the phrase, "energetically mellow" which is pretty much how I feel. Thanks so much!

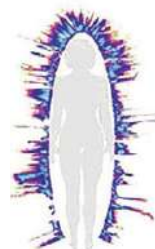
My two cats also don't get along very well. Usually they mingle for a few seconds, before it escalates. I had the disc only a day, and my husband said they just kept playing and chasing each other around our home. So it's helping them get along also. I look forward to more harmony in our home now for our fur babies.

PolarAid is a real gift and wellness tool, especially in these troubled pandemic age. What a masterful tool to balance your energies....I am grateful! Thank you."

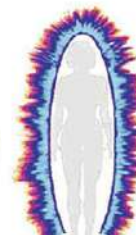
S.S, Tempe, AZ

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“Our immune system doubles up when defending against Covid with the combined action of immune cells and antibodies, and the cells are also able to memorize certain ‘moves’ of the virus and respond to them”

Winfried Pickl, research team leader.

See page 14

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Your views are important to us.

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*What Doctors Don't Tell You* is supported by some of the world's leading pioneers in nutritional, environmental and alternative medicine. Each is an authority in his or her field; many have broken new ground and inspired new practices in medicine.



**Dr Damien Downing**, a specialist in allergy, environment and nutrition, is current president of the British Society for Ecological Medicine, on the editorial board of *Orthomolecular Medicine News Service*, Chief Medical Advisor of cancer charity Yes to Life ([www.yestolife.org.uk](http://www.yestolife.org.uk)), and author of numerous books including *The Vitamin Cure for Allergies*.



**Dr Michel Odent**, a French-trained surgeon and obstetrician, is a pioneer of the natural birth movement, emphasizing home and water birth. Founder of the Primal Health Research Centre in the UK, he has written some 50 scientific papers and 11 books.



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**Craig Sams** is the co-founder of Whole Earth Foods and founder and president of Green & Blacks Organic Chocolate, as well as director of Soil Association Certification, executive chairman of Carbon Gold Ltd., a carbon sequestration business, and a trustee of the Slow Food Trust UK. He has authored four books, including *The Little Food Book*.



**Dr Harald Gaier** is a UK-registered osteopath, homeopath, acupuncturist, naturopath and medical herbalist. Former director of medical research at The Hale Clinic and a committee member of the Prince of Wales' Foundation for Integrated Health, Dr Gaier has authored numerous scientific papers and *The Encyclopedia of Homeopathy*.



**Dr Jonathan Wright**, medical director of the Tahoma Clinic in Washington, pioneered nutritional medicine in the US. A board member of the American Preventive Medical Association and the International College of Advanced Longevity Medicine, he has published 11 books.



**Janet Balaskas**, who named and inspired the Active Birth Movement in the 1970s, helped revolutionize maternity practices worldwide. Janet is the founder and director of the Active Birth Centre in North London and author of nine books including *Active Birth*, *Preparing for Birth with Yoga* and *Easy Exercises for Pregnancy*.



**Sally Bunday** is founder of the The Hyperactive Children's Support Group, the first organization to draw attention to the role of diet and nutrition, particularly food additives and essential fatty acid deficiencies, in childhood behavior problems. The charity has helped thousands of families in its more than 30-year history.

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## Honing in on histamine

I have been dealing with autism/mental illness for decades, controlling it with diet and lifestyle choices and tracing the issues 'upstream' to inflammation, without understanding the role of histamine in this process.

I have had a major transformation in my base level health, and my recovery from fatigue due to Covid post-viral condition, by switching my diet temporarily to exclude histamine containing/liberating foods and adding in histamine neutralizing/expelling foods.

I found the interview with Dr Janice Joneja on histamine intolerance on the website [www.healinghistamine.com](http://www.healinghistamine.com) very helpful, and it would be great if WDDTY could do something on this topic.

It is another dimension to the really vital mosaic of healing each of us needs to construct to manage and heal chronic conditions.

**Elizabeth Johnston, via email**

## A Covid conundrum

Re: "The Last Word" in the January issue, Bryan Hubbard and I seem to be living in different realities, and it would be good to know what to believe.

Bryan may possibly be right that Covid-19 is no more deadly than seasonal flu and certainly many people will die due to the loss of health services (rather than due solely to the lockdown).

What I would like to know is what Bryan would have done differently to the government when hospitals were being overwhelmed with seriously ill Covid patients. Or was that never true?

The narrative as I perceive it has been that our leaders in the UK, rather than being panicked into lockdowns,

put them off for as long as possible.

And it has been the countries that promptly imposed strict lockdowns that have fared best in the pandemic. Am I imagining all this?

Is Bryan of the opinion that we should just have let Covid run its course? Would the public have been happier with that approach, does he think?

**Richard Lund, via email**

## Thank you note

Thank you so much for your irreplaceable publication, which has been my reference for many years.

In your October 2020 issue, you published a letter [about the pandemic] by Dr Antony D Fox headed "New thinking needed."

I was fortunate to be a patient of Dr Fox, and when my six-year-old son became rapidly and

seriously ill, I drove him to Dr Fox early in the morning and without an appointment.

Using all his medical and homeopathic skills, he saved my son's life. He had a serious infection and was so weak it was alarming.

To cut a long story short, within hours he was visibly more alert and a couple of days later, he was on national live television on a completely unrelated subject. He is now 27 years old.

Dr Fox also did his allergy tests and discovered my son was allergic to all sorts of animals and E numbers. After a short time of desensitizing treatment, we were able to care for a dog and later have our own cat.

We owe him so much and cannot speak highly enough of such a remarkably talented homeopath. He is also a trained physician so allows for medical advice as well.

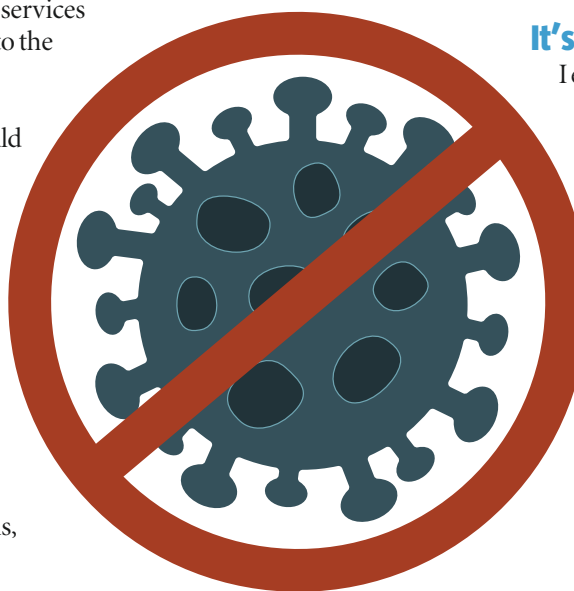
Thanks to him I found WDDTY! There were copies in his waiting room.

Practitioners like this need to be listened to. They are the ones with the experience, vision and unwillingness to toe the political line.

Thank you all for your sense and dedication to improving our understanding of how we are hoodwinked and sold questionable drugs for masking illness, rather than cures.

**PJ Darby-Smith, via email**

“Practitioners like this need to be listened to. They are the ones with the experience, vision and unwillingness to toe the political line”



## It's a Yass from me

I enjoyed your article by Dr Mitchell Yass in the May 2019 issue and went on to buy his book, *The Yass Method for Pain-Free Movement*, which I found most interesting and helpful.

I love your magazine. Keep up the good work!

**Helen Jones, Galashiels, Scotland**

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## Staying positive protects your memory as you get older

Those of us who remain cheerful and enthusiastic are less likely to suffer memory loss as we age, a new research study has discovered.

Not dwelling on bad memories and experiences seems to be the key or, as the old song puts it, accentuating the positive. In a series of tests on 991 older people, researchers at Northwestern University discovered that those who remained positive suffered less memory decline than those who were more negative or pessimistic.

Although all the participants suffered some decline, it was far less steep among those with a more positive outlook over the nine years of the study.

*PsycholSci*, 2020; 31:1386–95



## The vitamins that sneeze at the common cold

Respiratory infections such as the common cold and possibly even Covid-19 could be eased, and even prevented, by topping up with vitamin supplements, especially A, E and D.

Eating a more nutritious diet and avoiding processed and fast food can also help protect you.

Making sure we get these essential nutrients is vital for a healthy immune system that can keep us safe from the flu, colds, pneumonia and even possibly Covid-19, say researchers from Imperial College London.

We can top up our levels of vitamin A and E from supplements or a healthy diet, but we need to take supplements

to increase our levels of vitamin D. Foods rich in vitamin A include liver, whole milk, cheese, carrots, dark leafy greens such as spinach, and orange-colored fruit.

The researchers said that vitamin C didn't seem to protect people from any of the infections, although plenty of other studies have seen a positive benefit.

They tracked the health of 6,115 adults for eight years, who reported back on vitamins they were taking and their diet, and noted when they suffered a cold or other respiratory problems.

The researchers said there was an inverse relationship between nutritional status and infection; in other words, those who ate a nutritionally poor diet also had more respiratory infections.

Vitamin A—taken at doses far higher than the recommended dietary

allowance (RDA)—helps keep mucosal tissue healthy, vitamin E protects the lungs, and vitamin D has a positive impact on our overall health.

Although vitamin C helps the immune system produce more infection-fighting white blood cells, the researchers said they couldn't find evidence that it was especially good for fighting respiratory infections.

The researchers point out that the participants were reporting for the eight years up to 2016, and so this was long before the Covid-19 epidemic started. Although it's hoped the dietary approach might help avoid infection from the virus, they cannot be sure.

BMJ Nutr Prev Health, 2020; bmnph-2020-000150



## Vitamin D reduces risk of deadly cancers

Taking vitamin D supplements reduces your risk of getting deadly cancers that spread (metastasize) into other parts of the body, a major new study has discovered.

The risk can be reduced by as much as 38 percent—but only if you're not overweight or obese. The higher your BMI (body mass index), the less protective the supplements will be, say researchers from the VITAL research group.

The optimum dose is 2,000 IU (international units) a day, and the vitamin works best for people with a BMI of less than 25. The overall protective effect is around 17 percent,

but that includes all participants, including those with a BMI in excess of 30, which is considered obese. The researchers suggest that overweight and obese people may need to take higher doses to get the same benefits.

The researchers tracked the health and diets of 25,871 volunteers with an average age of 67. During the five years of the study, 1,617 people developed invasive cancer—but there was a significant difference in the number of cases between those taking vitamin D or a placebo, or dummy supplement.

The vitamin had similar protective effects against a range of

cancers, which suggests it can block the spread of most forms of the disease. Even when prostate cancer—the most prevalent cancer reported in the the population—was removed from the analysis, the positive effects were still there. For more on vitamin D and cancer, turn to page 24.

JAMA Network Open, 2020; 3:e2025850





# Forget 98.6— one degree less is the new normal

Our bodies are getting cooler. The 'new normal' is more than one degree less than the standard 98.6°F (37°C), which has been considered our healthy temperature for more than 200 years.

But doctors are finding that the new average body temperature is 97.5°F (36.3°C), and this could have a big impact on understanding the severity of an illness or fever.

The cooling was first noticed in a study of 35,000 adults in the UK in 2017, when the average body temperature was measured at 97.9°F (36.6°C), and a separate study in 2019 saw that lower again, to 97.5°F.

This cooling has been sudden. The decline in body temperature in the last 20 years has been as great as anything seen in the previous 200 years, say researchers at the University of California at Santa Barbara.

But why? The researchers think that improved hygiene, cleaner water and better sanitation have led to fewer infections—which could explain the decline in the West, but a similar drop has been seen among indigenous people in Bolivia, who are living in the same conditions as their forebears.

Perhaps it's the availability of drugs or air conditioning, other theories suggest, but, again, the Tsimane people of Bolivia don't have access to those, either. "Body temperatures have declined even in this tropical environment, where infections still account for much of the morbidity and mortality," said researcher Michael Gurven.

But perhaps it's actually down to our fixation on a 'normal' temperature. There's a range, and even one person's temperature can fluctuate during the day and can vary by as much as a degree from the early morning to late afternoon. It also changes as we age, and as women go through the menstrual cycle. And, as everyone knows, it rises after strenuous activity.

So maybe we didn't check enough after Carl Wunderlich, a German physician, set the healthy temperature reading 200 years ago. There was no standard normal then, and there isn't one today.

*Sci Adv*, 2020; 6: eabc6599

## The protein that's an early-warning sign of Lyme infection

People with high levels of one specific protein get an early warning about Lyme disease infection, and so are much more likely to get it treated successfully.

Although everyone has the protein PGLYRP1 (peptidoglycan recognition protein 1), some of us have higher levels of it, and laboratory tests discovered the protein acts as an early-warning system against *B. burgdorferi*, the bacteria from ticks that cause Lyme disease. Mice with low levels of the

protein had more Lyme infection, and were also showing signs of immune system dysfunction, suggesting the protein can marshal an immune response.

Researchers at Yale University say the discovery could open up a new line of therapy against Lyme disease, and finding ways to increase levels of the PGLYRP1 protein could help fight infection.

*PLOS Pathogen*, 2020; 16: e1009030



### HEALTH FACT

Bee venom has potent antimicrobial properties against the Lyme disease-causing bacteria *Borrelia burgdorferi*, and it's used as a clinical treatment for Lyme patients (see page 47).





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## UNVACCINATED CHILDREN HALF AS LIKELY TO SUFFER AUTISM AND ADHD

Children who have never been vaccinated are around 50 percent less likely to develop autism and attention deficit hyperactivity disorder (ADHD), a new study has found.

Rates of autism are around 0.84 percent among unvaccinated children—compared to 1.69 percent in the general population—and the incidence of ADHD is also roughly half that of the national average in the US.

In fact, no unvaccinated child developed ADHD in the study that tracked 3,324 children who were cared for at Integrative Pediatrics, a private clinic in Portland, Oregon.

Of these, 2,763 children had been given between one and 40 different vaccinations, and their health was compared to the 561 children who didn't have any vaccinations. The children were born between 2008 and 2019.

Researchers from the Institute for Pure and Applied Knowledge in Pittsburgh ran all the known reactions to vaccination, as identified by the US Centers for Disease Control and Prevention, against both groups, and tracked the number of clinic visits.

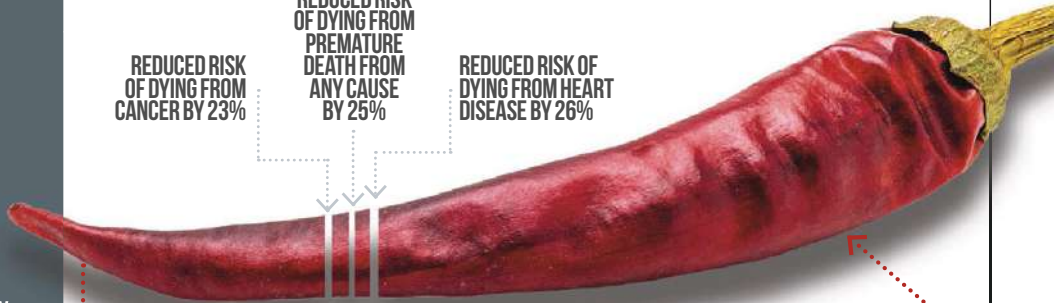
The highest rates of clinic visits were seen among the children who had been given the most vaccines, and some of their most common issues included anemia and respiratory infections, including colds and the flu.

Developmental problems, including speech, seizures, learning ability and social interaction, were also more common among the vaccinated group. However, rates in both groups were very low, and well below national averages. This could be because of the vaccine spacing the clinic practices, as well as the rapid response of parents when the first signs of learning problems were detected.

Genetic and family history was similar in both groups, the researchers add, and each group had roughly the same number of boys and girls. Their findings reflect those of a study carried out in 2017 that concluded vaccinated children were five times more likely to suffer from learning difficulties, and their risk of autism was four times greater than that of unvaccinated children.

Int J Environ Res Public Health, 2020; 17: 8674

REDUCED RISK OF DYING FROM CANCER BY 23%  
REDUCED RISK OF DYING FROM PREMATURE DEATH FROM ANY CAUSE BY 25%  
REDUCED RISK OF DYING FROM HEART DISEASE BY 26%



## Some like it hot—and they're more likely to live longer

People who sprinkle chili powder on their food add years to their lives and reduce their chances of dying from heart disease or cancer.

It's all down to the pepper's active ingredient, capsaicin, which is an anti-inflammatory and antioxidant, as well as an anticancer agent and glucose regulator.

People who regularly use chili powder reduce their risk of dying from heart disease by 26 percent, from cancer by 23 percent, and premature death from any cause by 25 percent compared to those who rarely or never use the powder.

The diets and overall health of more than 570,000 people living in

the US, Italy, China and Iran were tracked by 4,729 studies that researchers from the Cleveland Clinic reviewed. The researchers said they were surprised by the results, and admitted they weren't sure just why the pepper should have such benefits to our health.

American Heart Association Scientific Sessions, presentation P1036, November 13, 2020

## Cannabis halves OCD symptoms

Smoking cannabis can halve the severity of obsessive-compulsive disorder (OCD) symptoms. OCD sufferers reported that their compulsive behavior fell by 60 percent and unwanted thoughts by 49 percent within four hours of smoking cannabis.

Cannabis with higher concentrations of CBD, or cannabidiol, was even more effective, say researchers from Washington State University.

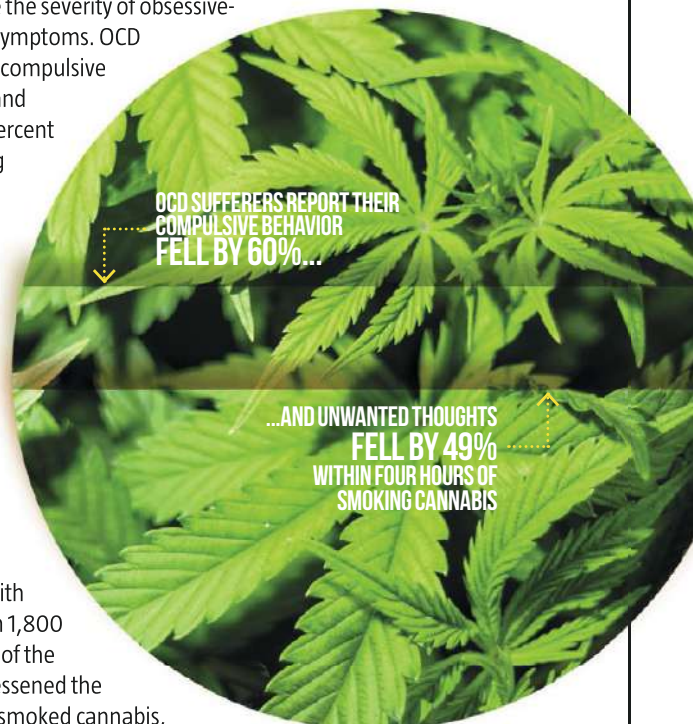
The good effects are short-lived, however, but the results do point to a longer-lasting solution, say the researchers.

They tracked the use of cannabis by 87 volunteers with OCD, who logged more than 1,800 sessions over the 31 months of the trial. The good effects also lessened the more the study participants smoked cannabis, suggesting they were building up a tolerance.

J Affect Disord, 2020; 279: 158–63

OCD SUFFERERS REPORT THEIR COMPULSIVE BEHAVIOR FELL BY 60%...

...AND UNWANTED THOUGHTS FELL BY 49% WITHIN FOUR HOURS OF SMOKING CANNABIS





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# COVID-19 NEWS

## Wearing a face mask doesn't prevent infection

Wearing a face mask doesn't offer much protection against the Covid-19 virus, despite what our health guardians tell us.

There isn't much difference in infection rates between mask wearers and the unmasked, say researchers from the University of Copenhagen in Denmark. In fact, there's even a possibility that wearing a mask increases the risk of infection.

The researchers tested the effects of mask wearing among a group of 4,862 volunteers.

Half were asked to wear a mask for up to a month whenever they left their home, and the rest didn't wear one other than in locations where they were legally required to do so. All were encouraged to follow standard social distancing rules.

At the end of the 30-day study period, 42 participants who had worn a mask had tested positive for infection, and 53 in the non-mask group had also become infected. This equated to a 0.3 percent difference between the two groups, which was not statistically significant, the researchers said.

*Ann Intern Med, 2020; M20-6817*

## The seven types of Covid

Covid-19 infection manifests as one of seven seemingly different symptom categories—including gastrointestinal complaints that affect up to 20 percent of everyone who catches the virus.

The seven categories or "forms of disease" are:

- 1 Flu-like symptoms, including fever, chills, fatigue and cough
- 2 Common cold symptoms, such as sneezing, dry throat and nasal congestion

- 3 Joint and muscle pain
- 4 Eye and mucosal inflammation
- 5 Lung problems, including pneumonia and shortness of breath
- 6 Gastrointestinal problems, such as diarrhea, nausea and vomiting
- 7 Loss of smell and taste

Researchers from the Medical University of Vienna studied the symptoms experienced by 109 people recovering from infection and compared them against 98 healthy people.

The symptoms range from mild to severe and can damage the immune system for up to 10 weeks after initial

infection, they say. But the immune system also builds a memory of the virus, and its 'killer' cells can be activated weeks after infection.

"Our immune system doubles up when defending against Covid with the combined action of immune cells and antibodies, and the cells are also able to memorize certain 'moves' of the virus and respond to them," said Winfried Pickl, who led the research team.

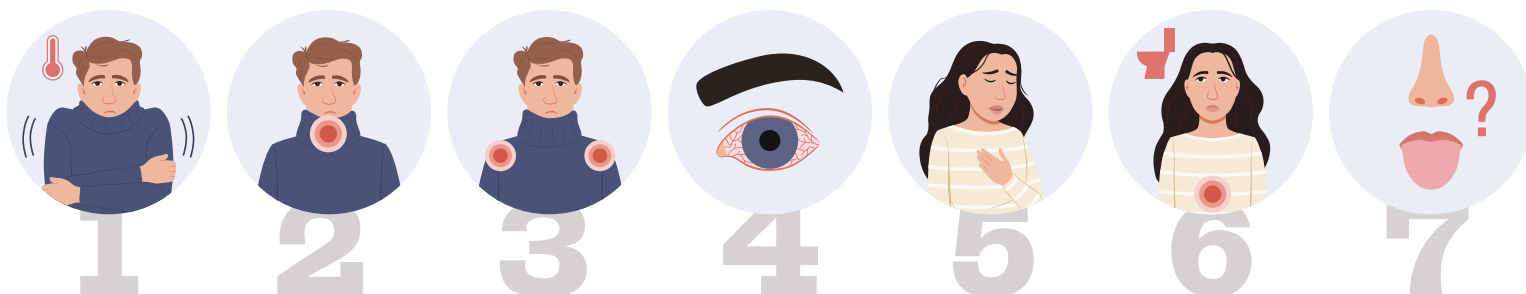
The loss of smell and taste seems to be more common in younger people.

In a separate study, researchers have discovered that gastrointestinal

problems are some of the most common symptoms of a Covid infection, affecting up to 20 percent of sufferers. Symptoms include a loss of appetite, nausea, vomiting, diarrhea and general abdominal pain, say researchers from the University of Alberta.

Around 18 percent of Covid patients suffer gastrointestinal symptoms, and 16 percent report that they don't suffer any other reactions. In extreme cases, the virus can cause inflammation of the small and large bowel and bowel perforation.

*Allergy, 2020; doi: 10.1111/all.14647 (signs of Covid); Abdom Radiol (NY), 2020; 1-7 (GI symptoms)*







## Melatonin is a likely treatment

Supplements of melatonin—the hormone that regulates our sleep cycles—could be a successful treatment for Covid-19 and halve the risk of catching the virus in the first place.

The hormone impacts many of the body's processes that are

affected by the Covid virus and is likely to be a viable treatment. It also protects against the virus: it reduces the risk by 30 percent in some, but this rises to 52 percent among African Americans.

The hormone was among the likeliest new approaches to treat the virus identified when researchers from the Cleveland Clinic ran a “big data” sweep that included health records from the clinic to identify

common symptoms of Covid infection.

They discovered a close link between autoimmune, pulmonary and neurological disorders and Covid reactions, and identified more than 30 drugs that could be successful therapies, with melatonin near the very top. Supplements are available over the counter in the US but are regulated in Europe.

*PLoS Biol*, 2020; 18: e3000970



## Most Covid patients are low in vitamin D

More than 80 percent of Covid-19 patients are deficient in vitamin D, the “sunshine vitamin”—and doctors believe the nutrient could protect people from the virus.

The vitamin is vital for a healthy immune system and

bolsters its response to infections, which could include the Covid-19 virus.

Vitamin D deficiency seems to be a common factor in Covid sufferers. When doctors in Spain examined 216 Covid patients, they found that 82 percent of them were vitamin D deficient.

Those low in the vitamin

were also more likely to suffer from high blood pressure (hypertension) and cardiovascular disease, and they had higher levels of inflammatory markers in their blood, another indication that the immune system isn't working properly.

The researchers also tested blood levels of the vitamin in 197 healthy volunteers, and just 47 percent of them were deficient.

High-risk people—nursing home residents, the elderly and those with an existing health problem—should be increasing their vitamin D levels, either by taking supplements or eating foods rich in the vitamin, such as oily fish, red meat and egg yolks, said Jose Hernandez at the University of Cantabria.

One strategy to combat the virus could be to test vitamin D levels in those at risk, and start giving them supplements if they have a low reading.

*J Clin Endocrinol Metab*, 2020; dgaa733

## ALZHEIMER'S COULD BE DOWN TO A BAD GUT

Alzheimer's disease may not all be in the head. It could be triggered by an unhealthy gut and its interaction with our nervous system, new research suggests.

Brain plaques, which are characteristic of Alzheimer's, could have their origins in the gut microbiome and especially in ‘bad’ bacteria, researchers at the Scientific Institute for Research, Hospitalization and Healthcare (IRCCS) in Italy have discovered.

They scanned the brains of 89 people between 65 and 85 years old, some of whom were suffering from Alzheimer's disease or another neurodegenerative disease that caused similar memory problems, while the others were still mentally sharp.

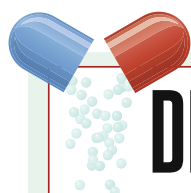
The researchers looked for amyloid plaques in the participants' brains before measuring inflammatory markers in their blood and proteins produced by gut bacteria such as lipopolysaccharides and short-chain fatty acids.

They discovered that those with the most brain plaques also had the highest levels of inflammation and bacterial proteins. “Our results are indisputable,” said researcher Moira Marizzoni. “Certain bacterial products of the intestinal microbiota are correlated with the quantity of amyloid plaques in the brain.”

It's already known that Alzheimer's patients have a gut microbiome that's out of balance and with less bacterial diversity than a healthy person. Lipopolysaccharides, proteins on the membrane of bacteria that cause inflammation, are often found in amyloid plaques and vessels around the brain in Alzheimer's patients. See page 18.

*J Alzheimers Dis*, 2020; 78: 683–97





## DRUG NEWS

### Big rise in cases of liver failure from 'safe' acetaminophen

Acetaminophen (paracetamol) is the world's top painkiller—and it's considered to be a safe remedy, available in pharmacies without a doctor's prescription.

But exceed the recommended dose, and it becomes a dangerous poison, causing liver failure and even death, say health regulators in Switzerland, which has seen a 40 percent rise in cases of poisoning after more powerful doses of the drug started to be sold in pharmacies.

The sudden increase happened in the first three years after 1,000 mg (1 g) doses became available over the counter. People have been taking too many of the tablets every day, and probably exceeding the maximum daily dose of 4 g.

"It is not effective for all patients or against all forms of pain. If the drug doesn't help to ease someone's symptoms, they may be tempted to increase the dosage," said Andrea Burden at ETH Zurich.

Cases of poisoning were almost nonexistent when only the 500 mg tablets were available without a

prescription, she said, but this started to change when the 1,000 mg dose was introduced in Switzerland in 2003.

Today, sales of the more powerful acetaminophen are ten times higher than the weaker version.

Burden recommends that fewer tablets be included in the 1,000 mg packs, and people also need to be told that the drugs are not suitable for chronic pain management. It's only for short-term pain relief, she added.

*JAMA Netw Open, 2020; 3: e2022897*

### HRT linked to breast cancer risk

The most common type of hormone replacement therapy (HRT)—combined estrogen and progestogen—increases the risk of breast cancer by up to 80 percent, a new study has found.

The risk increases the longer that women take HRT—but it also falls off quickly once the therapy is stopped.

Researchers from the University of Nottingham say the risk is higher than an earlier study had estimated, although it varies between the different types of HRT and the length of time it's taken.

Comparing HRT usage in 98,611 women diagnosed with breast cancer and 457,498 healthy women, the researchers discovered there was a 15 percent

increased risk in women taking estrogen-only therapy, and a 79 percent greater risk among those taking estrogen and progestogen.

But the risk virtually disappeared in women who had stopped taking estrogen therapy, although those who had stopped taking the combined therapy still had a 16 percent raised risk, even years later.

*BMJ, 2020; 371: m3873*

### MS wonder drug fails at the first hurdle

The new wonder drug against multiple sclerosis (MS) is actually making the disease worse.

The drug, known as TEPP-46, has failed badly in animal tests, one of the earliest stages for drug approval. It caused inflammation in the spinal cord—one of the characteristics of MS—to move into the brain, and also harmed the immune system's killer T-cells.

TEPP-46 is a new generation of MS drugs that won't block the immune system's ability to fight infections, one of the most serious side-effects of the current generation of treatments. The drugs were developed to fight cancer, but researchers were excited by the possibility they could also treat MS as they target the way cells generate energy.

Researchers from the University of Virginia Health System say that other researchers need to tread carefully as they test TEPP-46.

"It was not at all what we expected. The take-home message is that we should be very careful and do more fundamental research before we propose to take this to clinical trials," said lead researcher Alban Gaultier.

*SciSignal, 2020; 13: eaay9217*

**Switzerland has seen a 40% rise in cases of poisoning after more powerful doses of the drug started to be sold in pharmacies**





David Lusch



Mayur Shah

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## Misery guts

The latest evidence about the main cause of Alzheimer's has nothing to do with the head and everything to do with the gut, says Tony Edwards

**T**he 20 feet of convoluted tubing linking your stomach to the outside world is commonly known as the gut, and until recently its functions were believed to be simple: finish off the messy business of food digestion, extract as many nutrients as possible and expel the remainder as waste.

The gut is also known to be populated by bacteria, all of which were once thought to be harmful. But no more. Many gut bacteria are now recognized as vital for one's health—not just locally but, perhaps surprisingly, throughout the whole body. These microscopic inhabitants of our midriffs are increasingly being linked to a whole raft of diseases—even dementia.

### Leaky gut

The new buzzword is microbiome, coined to describe the colony of literally trillions of bacteria that are the semipermanent residents of our gut. Why semipermanent? Because we ourselves can at least partly control what types of bacteria live there, simply by deciding what to put in our mouths.

At one extreme, the bacteria can be exterminated by oral antibiotics, and at the other, encouraged to proliferate in a healthy diversity by consuming fermented foods or probiotics.

There are an estimated 5,000 strains of gut bacteria—some beneficial but many not. In practice it's impossible to have a microbiome that is completely free of harmful bacteria, and it's the beneficial bacteria's job to keep the harmful ones in check by what is called competitive inhibition—in other words, crowding them out. If they fail, pathogenic bacteria can gain the upper hand, causing gut “dysbiosis” or imbalance.

*WDDTY* was probably the very first periodical to report on this field back in the 1990s. Then, a tiny band of doctors—among them Professor Theron Randolph in the US, and in the UK Professor Jonathan Brostoff and Dr Damien Downing (still on *WDDTY*'s advisory panel)—developed the science of what they called “clinical ecology.”

They pioneered the theory that gut health might lie at the root of many intractable diseases. One of their first discoveries was that gut dysbiosis creates local inflammation, leading to actual perforations in the walls of the intestines. This so-called “leaky gut syndrome” was found to cause food allergies and intolerance, as well as major diseases of the gut such as irritable bowel syndrome and Crohn's disease.

Largely ridiculed 40 years ago, leaky gut has become an accepted medical condition. According to a recent review, it's now seriously considered as a cause of not just food allergies and bowel disease but obesity, hepatitis, lupus, celiac disease, type 1 diabetes and even some cancers.<sup>1</sup>

More astonishingly given the distance between the brain and the gut, currently the most exciting area of gut research is in disorders of the mind. There is growing evidence that the gut and the brain are very closely connected.

First, there is a major physical connection between the two areas, via the vagus nerve. What's more, the communication isn't one-way: the gut sends signals to the brain and vice-versa. This is known as the “gut-brain axis.” Furthermore, some gut bacteria produce metabolites that are identical to brain chemicals. The most important of these are *serotonin*, a major mood-altering chemical, and *dopamine*, the

“reward” chemical. Surprisingly, both these neurotransmitters are thought to be produced almost entirely within the gut, which helps explain why the gut is increasingly being referred to as “the second brain.”

But can altering gut bacteria actually affect mental states? The answer is yes. Inevitably, the initial evidence has come from laboratory experiments on rodents. Deliberately altering animals' gut microbiota can seriously affect their behavior—inducing stress and anxiety, for example.<sup>2</sup>

### But what about us humans?

There's been a surge of interest among neurologists keen to explore the gut-brain axis in mental health, with some interesting findings. “Over the past decade, a growing body of evidence has suggested that compositional changes in the gut microbiome are highly correlated with several mental disorders,” said a review of the evidence late last year.<sup>3</sup>

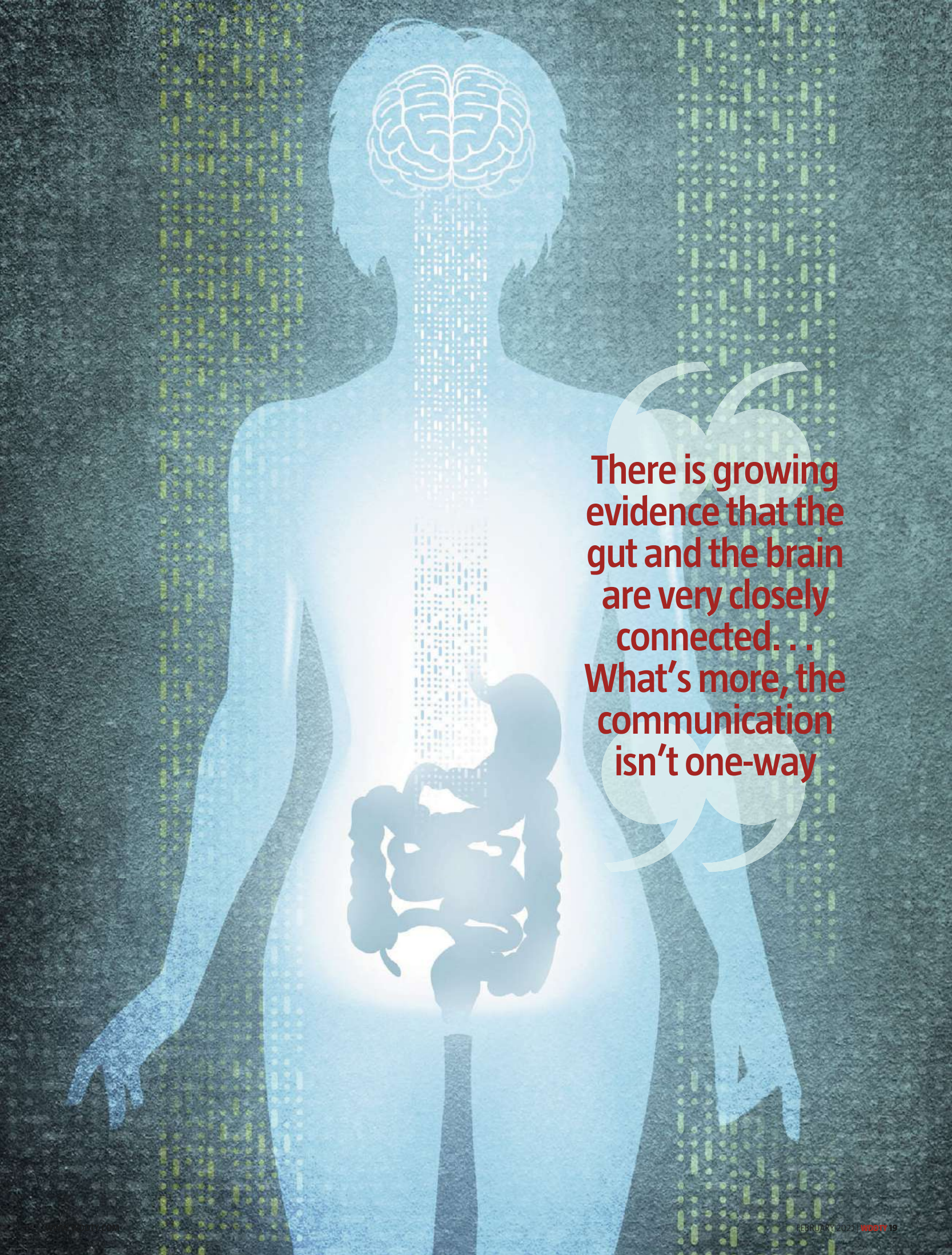
One of the most dramatic findings is the link between gut dysbiosis and autism—research partly pioneered by Dr Andrew Wakefield in the late 1990s.<sup>4</sup> Although he's best known for his ‘controversial’ research on vaccines, Wakefield's early gut dysbiosis/autism work has now been replicated by other researchers, with some finding a link between autism spectrum disorders (ASD) and antibiotics.

Indeed, an alternative theory to vaccines as a cause of the exponential rise in ASD is the exponential prescribing of antimicrobial drugs to the very young. So far, attempts to ameliorate children's existing ASD by treating their gut dysbiosis have been limited but promising.<sup>5</sup>

Among the old, too, neurological diseases are being increasingly linked to the microbiome. Parkinson's disease (PD), for example, is now thought to be at least partly related to gut health. In one series of experiments, mice treated with fecal samples from PD patients went on to develop “motor dysfunction,” i.e. Parkinsons-like symptoms.<sup>6</sup>

The reason appears to be that when the health of the gut bacteria is compromised, body-wide inflammatory reactions occur; these penetrate the blood-brain barrier, promoting “neuroinflammation and ultimately





**There is growing evidence that the gut and the brain are very closely connected. . . What's more, the communication isn't one-way**



## Could something as simple as manipulating gut bacteria be the answer to dementia—perhaps with a cocktail of bacteria tailored to the individual?

neurodegeneration,” says a recent review of the animal evidence.<sup>11</sup>

And recent evidence from Aarhus University in Denmark shows that PD can start in the intestines and travel to the brain.<sup>12</sup> There are more grounds for hope with the other great challenge of old age: Alzheimer’s disease (AD). Again, mice have led the way. For example, in 2019, Hungarian scientists reported finding that probiotics and exercise improved the cognitive functions of mice genetically engineered to develop AD.<sup>13</sup>

Similarly, US scientists have found that altering the gut bacteria of mice can prevent the formation of the beta-amyloid plaques in the brain associated with AD.<sup>14</sup> But again, how relevant are these animal studies for us?

### Promise for prevention

The human research data is fairly thin on the ground, but last November Italian neurologists announced some exciting new findings.<sup>15</sup> They had compared 150 Italian seniors between the ages of 65 and 85, roughly 90 of whom were diagnosed with AD, while the rest were mentally fully functioning.

Brain scans of the dementia group confirmed the classic signs of AD—amyloid plaques in the brain. Once thought to be the root cause of AD, these plaques are now believed to be the result of the disease rather than its cause.

The researchers went on to discover that, as in the animal experiments, the gut bacteria profile of AD sufferers was also significantly different from the mentally healthy seniors. “Their microbiota has a reduced microbial diversity, with an over-representation of certain bacteria and a strong decrease in other microbes,” reported Professor Giovanni Frisoni.

“Our results are indisputable: certain bacterial products of the intestinal microbiota are correlated with the

quantity of amyloid plaques in the brain,” said his colleague Dr Moira Marizzoni.

But how can the gut affect the brain? The clue came from the AD patients’ blood samples, where the research team found specific “inflammation markers” produced by gut bacteria, corresponding to the presence of amyloid plaques; these were not present in the blood of the cognitively healthy participants.

The Italians aren’t the only group to find this astonishing connection between gut bacteria and dementia. A Wisconsin research team has reported “the gut microbiome of AD patients has decreased microbial richness and diversity.”<sup>16</sup>

This is all very promising. Dementia is a terrifying disease, and its incidence is rising exponentially, now rivaling cancer and heart disease as a major cause of death. Despite billions spent by the pharmaceutical industry, there is currently no cure for it. Could something as simple as manipulating gut bacteria be the answer—perhaps with a cocktail of bacteria tailored to the individual?

Frisoni thinks this scenario is too optimistic, but he does foresee a major role for gut bacteria in prevention. “We must first identify the bacterial strains of the cocktail,” he says. “Then, a neuroprotective effect might be effective at a very early stage of the disease, with a view to prevention rather than therapy.”

The good news about prevention gets even better for people who are at much greater risk of AD than average—those with a genetic mutation known as the APOE4 allele, which multiplies their risk of AD up to 12 times. A team at the University of East Anglia has discovered that people with that gene have a unique gut microbiome, specific to their condition. This offers “the prospect of reversing the risk of AD by altering the gut bacteria,” say the researchers encouragingly.<sup>17</sup>

**Tony Edwards**

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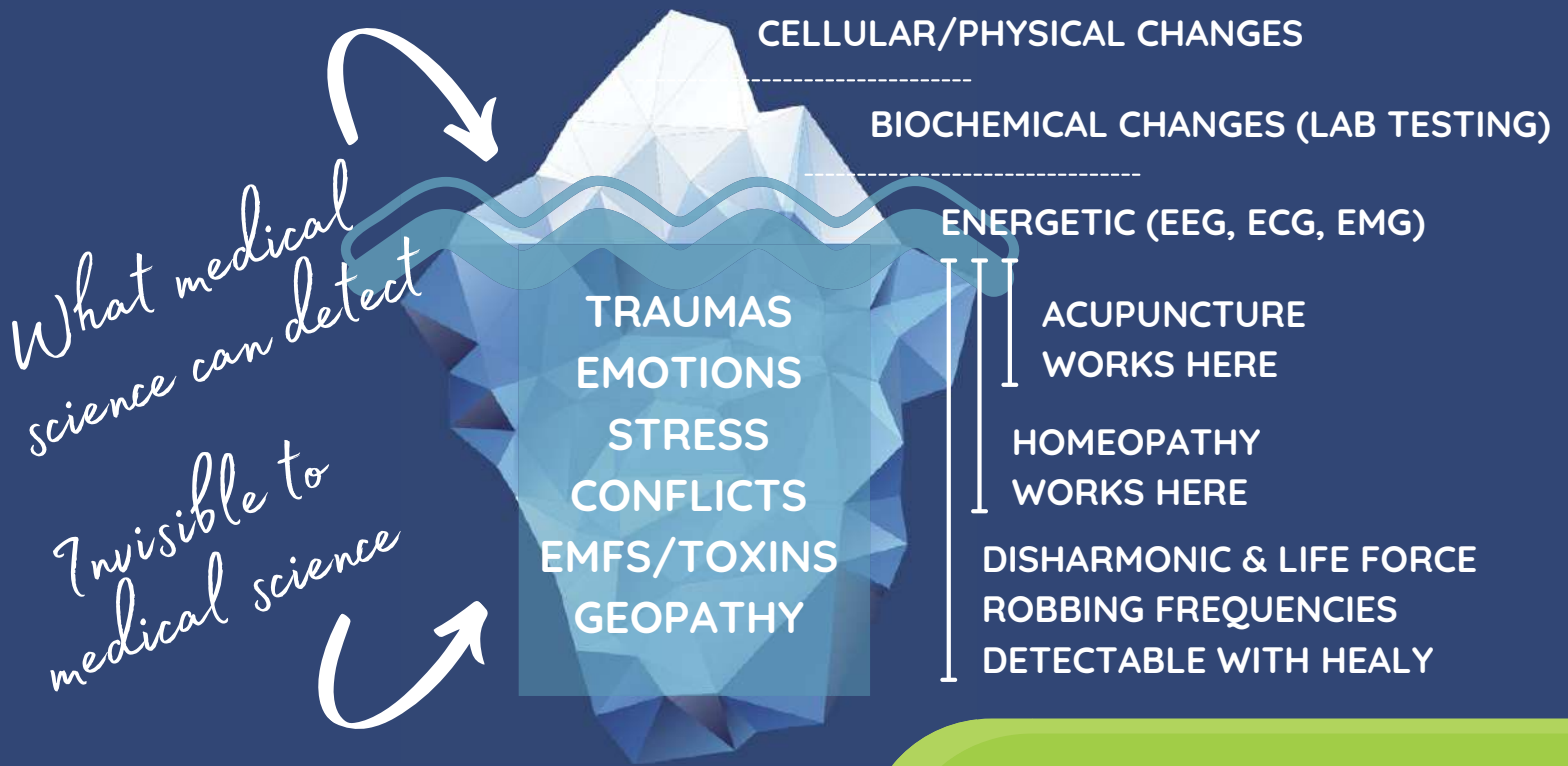
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# R

egardless of how you feel about the threat posed by the new coronavirus, or the human response to it, these last 11 months have been an ordeal.

Barring the few who have benefited massively from the pandemic, nearly all the rest of us have been impacted negatively—sometimes catastrophically so.

But there is always a silver lining somewhere. If we focus only on the negativity, we will pay an unnecessarily heavy price in anxiety, depression, apathy and disempowerment. So I want to touch on what I feel are some of the most important things we've learned about the world we are so drastically, and often unwittingly, reshaping.

One silver lining has been the belated but by now widespread recognition of the importance of nutrients, especially vitamin D, C and zinc, to impact infection severity. These micronutrients help provide the immune system with resources it needs to function competently. The ANH has launched campaigns around these nutrients, recommending evidence-based target levels much higher than those used by governments, which have failed, with very few exceptions, to acknowledge the preventative or therapeutic role of supplements.

Another observation that struck me as a scientist is the engagement of politicians in scientific decision-making. While scientists have been feeding huge amounts of information to governments and international organizations like the World Health Organization, it is politicians who have been making the decisions that affect our daily lives.

These circumstances have allowed for remarkable U-turns in policy on lockdowns and other



Rob Verkerk The Politics of Health

## FORCE OF NATURE

We need to work with, not against, nature, when it comes to COVID-19 says Rob Verkerk

restrictions. They've also resulted in the communication of much erroneous information to the public, such as telling people they should stay indoors, or justifying huge public spending programs for mass testing.

Right now, while scientists in the UK attempt to understand a new mutant strain of SARS-CoV-2, politicians are forced to give answers. Expect some to be wrong. In a world where distrust of big government and big corporations has reached an all-time high, this isn't a good plan. Better to communicate

out, alongside studies of clinical data from different countries and regions. But while there is no evidence suggesting increased threat to public health, there is no justification to act as if there was. So, don't shut the borders. Let nature do its thing.

The silver lining to all this could be that we learn just how much unnecessary damage can result from the misuse of molecular biology.

And what about the silver bullet? It is challenging to find any substantive evidence that the new generation of



It is challenging to find any substantive evidence that the new generation of synthetic biology vaccines can rid the world of this virus

truthfully about the uncertainty.

The reality is that all viruses mutate, and in RNA viruses like this, the mutations rarely change how the virus functions or how harmful it is. There may be impacts on vaccine effectiveness, given we know that some mutations can be resistant to neutralizing antibodies, but this is currently being widely denied (without supporting data) by vaccine makers.

All this deep uncertainty won't be resolved until extensive molecular analyses are carried

out, alongside studies of clinical data from different countries and regions. But while there is no evidence suggesting increased threat to public health, there is no justification to act as if there was. So, don't shut the borders. Let nature do its thing.

Vaccines for the two most closely related coronaviruses, SARS and MERS, caused excessively severe reactions or arrived too late. These viruses have managed to self-regulate with the human immune system

so they're still present but no longer a global threat. SARS-CoV-2 could similarly peter out.

I'd argue that for those of us who are healthy, we should stop either trying to fight with or hide from this virus. Nature will take its course and rebalance.

It turns out the patterns of mortality in Sweden and the UK over the last year have been remarkably similar despite dramatically different government responses.

Perhaps in time we'll see that the inordinate efforts invested in trying to control the virus resulted in a vast waste of resources while undoing decades of societal efforts to narrow social and health inequalities.

Using lockdowns and social distancing to slow transmission of viruses might one day be thought of as akin to trying to herd cats.

We must be much more cognizant of whole systems—and therefore the risks and benefits to all parts of the human and nonhuman ecosystems we inhabit and share.

This is why we can no longer ignore the collateral damage caused by efforts such as lockdowns to delay transmission. We also need all available data—which is why the vaccine transparency initiative we've launched at the ANH is so crucial.

And we need to get real about the unlikelihood that there will ever be a single silver bullet for this virus, even one that comes in the form of a syringe, and appreciate that we probably cannot afford to repeat this exercise every time we encounter a new virus.

That's why the ANH is working just as hard in 2021 to help bring more and more people on board with a vision and plan for humanity and health that works with, not against, nature.

Visit [www.anhinternational.org](http://www.anhinternational.org) to find out more about our campaigns.



# It's D-day every day

It protects against Covid-19—and now there's evidence that vitamin D protects against life-threatening cancers as well

**I**t's been quite a year for vitamin D. It is one of the key vitamins to protect us from Covid-19 infection, and a new study has discovered it can also block life-threatening cancers.

Having good blood serum levels of the vitamin reduces our risk of developing a fatal cancer that has spread (metastasized) by nearly 40 percent—provided you're not overweight or obese. The average protective effect for people of all shapes and sizes is 17 percent, say researchers from Brigham and Women's Hospital in Boston, Massachusetts.<sup>1</sup>

Although it's called the sunshine vitamin, most of us don't see enough of the sun to keep levels up, and so one of the best ways to top up is by taking

a supplement every day. For the Brigham study, nearly 26,000 people were given either 2,000 IU of vitamin D or a placebo every day for five years.

The amount they were taking is far higher than the recommended daily allowance (RDA) of just 800 IU—roughly 20 mcg—for people older than 70, and 600 IU (15 mcg) for younger adults.

That's not going to be enough for those of us in sun-starved northern regions—essentially anywhere north of Atlanta—as one study discovered when it measured the blood serum levels in a group of Bostonians at the end of the winter, with two-thirds being deficient.<sup>2</sup>

Around 40 percent of Americans are deficient in vitamin D all year round, and

that rises to around 80 percent of African Americans and Hispanics.<sup>3</sup>

Despite the name, vitamin D is actually a steroid hormone that's produced from cholesterol when your skin is exposed to sunlight, but it has to be a strong, summer sun to start the process.

The food we eat delivers vitamin D in one of two forms: as D3 (cholecalciferol), which is found in fatty fish and egg yolks, and D2 (ergocalciferol), an ingredient in some plants, mushrooms and yeasts. D3 is the one to focus on, as it's almost twice as effective at increasing levels in our blood.

But whichever way you get it, the message is clear: every day should be a D-Day.

## How much do you need?

**Healthy adult: 800 IU**  
(Recommended Daily Allowance, RDA)

**Adult with vitamin D deficiency: 6,000 IU a day\***

**Adult who is deficient and obese or with malabsorption problems: 10,000 IU a day\***

**Disease prevention: 2,000 IU a day**

\*Until blood serum levels are above 30 ng/mL

## Sunshine health benefits

- Reduces risk of osteoporosis, fracture and falls
- Reduces risk of life-threatening cancer
- Reduces risk of early death
- Eases symptoms of severe depression
- Reduces risk of type 1 and 2 diabetes
- Protects against Covid-19

## Signs of deficiency

- Children may have difficulty walking or need to sit for long periods—an early sign of rickets
- Chronic aches and pain in the muscles
- In severe cases, children will have bowing in the legs
- In adults, bone pain, detected by pressing on the sternum or tibia

## REFERENCES

- 1 JAMA Network Open, 2020; 3: e2025850
- 2 Am J Med, 2002; 112: 659–62
- 3 Nutr Res, 2011; 31: 48–54



## Getting the D



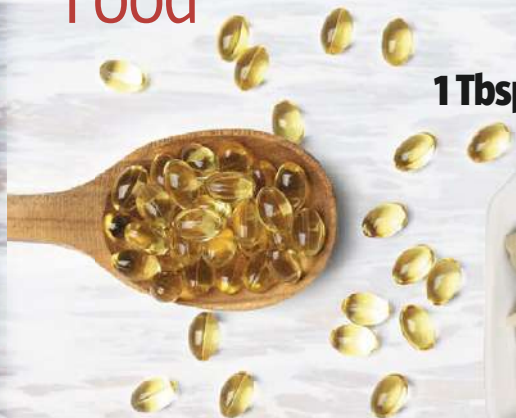
## Sunshine

Full-body sunbathing between 10 am and 3 pm until skin is pink:

**10,000-25,000 IU**

## Food

1 Tbsp (15 mL) cod liver oil: **1,360 IU**



Pickled herring, 100 g (3.5 oz):

**680 IU**



Mackerel, 100 g:

**360 IU**



Canned salmon with bones, 100 g:

**624 IU**



Canned sardines, 100 g:

**272 IU**



## Supplements

Typical multivitamin: **400 IU**



YOU  
HERE



# How safe are vaccines?





# It's a bad day for company public relations when two people suffer severe allergic reactions on *Day One* of your new product's highly publicized roll-out.



Troubles had just begun for the vaccine meant to save the world from the pandemic, however. Five days later, a US Centers for Disease Control and Prevention (CDC) epidemiologist named Thomas Clark was presenting internal data on the thousands of people who got Pfizer's much-ballyhooed Covid-19 vaccine and had reported "health impact events."

Among the first 215,362 Americans to roll up their sleeves for the shot, 5,052 developed adverse effects defined as "unable to perform normal daily activities, unable to work, required care from a doctor or healthcare professional."<sup>1</sup> That amounts to a staggering 2.3 percent of injections, or one in 43 people that experience a significant short-term health impact.

Health authorities in the UK reported two serious anaphylactic shock reactions requiring emergency medical treatment among the first 5,000 vaccinated hospital staff in England. Symptoms of anaphylaxis include sudden hives, wheezing, swelling of the throat, nausea, confusion, anxiety and plummeting blood pressure that can lead to vascular collapse. It can be fatal.

Within days, two more reports of Covid vaccine shock in healthcare workers came from a single hospital in Juneau, Alaska. Then the reactions of four staff at a Chicago hospital caused it to temporarily suspend injections. The CDC reported six serious anaphylactic responses by the week's end.

**Public health says vaccines are 'safe and effective.' Period. A rising tide of heartbreaking stories of vaccine injury that mainstream media won't report and a growing medical literature on adverse events suggest they have something to hide.**  
**Celeste McGovern investigates**

One woman, who reportedly had no previous allergic history, was given a dose of epinephrine and put on a drip of steroids to combat her immune hypersensitivity to the shot. Doctors removed the drip when her symptoms abated, but the reaction began again. She was re-medicated and hospitalized overnight.

It was early days of the launch, but already the COVID vaccine picture was looking a smudge less rosy than health agencies and the media had been proclaiming for months. Severe allergic reactions are "one-in-a-million," government overseer Paul Offit of the US Food and Drug Administration (FDA) Vaccines and Related Biological Products Advisory Committee said confidently in the week leading up to the launch. Nothing to worry about.

It was early days of the launch, but already the COVID vaccine picture was looking a smudge less rosy than health agencies and the media had been proclaiming for months

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Leave Lyme Behind starts mid-January 2021



Two in 5,000, six in 215,000 may be small risks, but neither UK or US experience is “one in a million.” And neither is 2.3 percent. Vaccinate 100 million people, and 2,300,000 of them are not functioning or seeking medical help. Risk calculations matter. Especially when you are injecting billions of previously healthy people who face a less than one percent chance of dying from the virus you are trying to protect them from, should they even encounter it.<sup>21</sup>

Just how prevalent are allergic reactions to vaccines? Are all cases being reported? Is there some particularly allergy-inducing ingredient in this vaccine (see box, page 35)? Did some people have attacks after they left the hospital? What about the booster shots that public health is already saying will be more reactive?

The UK’s Medicines and Healthcare Products Regulatory Agency issued an advisory saying that people with a history of a “significant allergic reaction to a vaccine, medicine or food should not receive Pfizer’s vaccine” and added that “resuscitation facilities should be available at all times for all vaccinations.” That didn’t stop them from setting up a “drive-through vaccination center” in Manchester, however.

Serious anaphylactic reactions usually happen within minutes or hours of an offending foreign agent entering the body, but they are the tip of a very large iceberg of immune-mediated diseases. Most allergies and other immune conditions have long simmering periods before they manifest as full-blown disease.

What happens in the hours, days, months and years after an immune system is chemically altered by vaccination? What besides allergy can go wrong and how often does it happen?

Eight researchers from six countries including Georgia Institute of Technology research affiliate Ronald Kostoff, University of Bari professor of biochemistry Darja Kanduc and leading Israeli immunologist Yehuda Shoenfeld tackle that question in a 2020 paper published in *Toxicology Reports* voicing their concerns about the fast-tracked experimental COVID vaccine.<sup>22</sup>

“Numerous mid- and longer-term potential issues concerning vaccines have been identified,” they say, listing 16

## ‘Physicians need to be aware’

There’s an entire medical textbook, *Vaccines and Autoimmunity* (Wiley-Blackwell, 2015), in which dozens of researchers and doctors survey the literature linking vaccines to autoimmune diseases from alopecia to ulcerative colitis. It is mostly inconclusive, yet full of statements like this:

“The various vaccines given to children, as well as adults, may contain either whole weakened infectious agents or synthetic peptides and genetically engineered antigens of infectious agents, and adjuvants (typically aluminum). In addition, they also contain diluents, preservatives (thimerosal, formaldehyde), detergents (polysorbate) and residuals of culture growth media (*Saccharomyces cerevisiae*, gelatin, bovine extract, monkey kidney tissue, etc. . . . The safety of the residuals has not been thoroughly investigated . . . However, some studies suggest that even these trace amounts may not be inherently safe as was previously assumed.”

“Physicians need to be aware,” the text continues, “that in certain individuals, vaccinations can trigger serious and potentially disabling and even fatal autoimmune manifestations.”



## A 2019 forensic study of 32 cases of sudden infant death syndrome found that more than one in five deaths occurred within seven days of vaccination

mechanisms known to be problematic after vaccination, including: “antibody-dependent enhancement,” “chronic immune activation,” “cross-reactivity” and “impact of combinations of toxic stimuli” on the immune system.

People respond differently to vaccines

depending on their prior history of vaccinations and natural infections, their exposures to toxins before and after vaccination, their nutritional status and the route of infection, the researchers note.

Their paper also describes how both vaccine and natural viruses can share molecules with human proteins that might trigger immune responses against not only the virus but also the human proteins, causing autoimmune disease. Research shows that “latency periods can range from days to years for post-infection and post-vaccination autoimmunity,” and they point to autoimmune and neurological diseases in the biomedical literature that are “triggered by vaccinations.”

### Catalog of disease

PubMed—a biomedical research database run by the National Institutes of Health—houses hundreds of case reports and studies where vaccination is a suspected or confirmed cause in a catalog of illnesses. A smattering of these include reports of children who have died from the virus in a vaccine vial—test-confirmed fatal infection with vaccine chickenpox, for example.<sup>23</sup>

One 2008 paper investigated the case of a three-month-old baby who died within 24 hours of vaccination. The Italian researchers used immunohistochemical and other laboratory tests not used routinely in postmortem exams and concluded that “acute respiratory failure likely due to post hexavalent immunization-related shock was the cause of death.”<sup>24</sup>

How often does this happen? Sudden unexplained death is a leading cause of infant mortality in developed nations.<sup>25</sup>

A 2019 forensic study of 32 cases of sudden infant death syndrome (SIDS, a term for deaths of babies with no obvious reason) found that 21.9 percent of them—more than one in five deaths—occurred within seven days of vaccination.

The researchers examined three babies who died within three days of receiving shots and found common immunological evidence between all three suggesting a plausible role for vaccination in their deaths. “The important question of whether the disorders are truly related to

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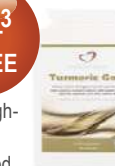
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vaccination remains,” they concluded.<sup>14</sup>

It's not just babies and children in the medical literature of adverse vaccine case reports. One paper describes a previously healthy 79-year-old woman who went deaf in both ears two days after an influenza shot.<sup>15</sup> Another case report describes a man going blind in both eyes after a swine flu vaccine.<sup>16</sup> The *British Medical Journal* reported a case of a 36-year-old active serviceman who developed serious heart disease (myocarditis) after smallpox vaccination, which has been linked to the disease repeatedly.<sup>17</sup>

Another study in the journal *Vaccine* (the journal of the vaccine industry) reveals that in the days after they receive a measles vaccine, thousands of children (0.8 percent or nearly one in 100 of those vaccinated) are taken to a hospital with fevers and seizures.<sup>18</sup>

Parents are told to expect mild symptoms within two weeks of the shot, but these “medically attended” fevers are evidently not so mild. Apparently, even doctors have a hard time distinguishing “vaccine-associated rash illness” from the real measles, as there are a number of cases where only genetic testing confirms which is which.<sup>19</sup>

### Neurological disorders

Multiple studies confirm more than 1,400 cases of the brain disorder narcolepsy-cataplexy that resulted from a discontinued vaccine used in the H1N1 swine flu pandemic a decade ago.<sup>20</sup>

It may surprise some people that the World Health Organization acknowledges that virtually all polio left in the world today is spread by a vaccine virus. Circulating vaccine-derived poliovirus (cVDPV) is the source of dozens of outbreaks in at least 21 countries and responsible for hundreds of cases of paralyzing poliomyelitis, mostly among poor children.<sup>21</sup>

Studies link vaccination directly to other paralyzing diseases too, like Guillain-Barre syndrome,<sup>22</sup> transverse myelitis (the frightening disorder that derailed Astra Zeneca's COVID vaccine trial in September),<sup>23</sup> and a host of other “demyelinating” central nervous system disorders.<sup>24</sup>

One review paper looks at 29 case

studies of blistering rashes and the horrendous, potentially fatal and blinding skin-shedding diseases Stevens-Johnson syndrome and toxic epidermal necrolysis following vaccination.<sup>25</sup> These may be rare conditions, but autoimmune diseases are a growing phenomenon affecting up to one in five people globally, and a stack of studies link autoimmunity to vaccination.

One 2019 review paper catalogs 500 cases of autoimmune diseases, from rheumatoid arthritis and acute disseminated encephalomyelitis to painful giant cell arteritis and optic neuritis, reported by doctors as triggered by vaccination.<sup>26</sup> Other case reports document a horrific blistering autoimmune skin disease, bullous pemphigoid, in infants after multiple vaccinations,<sup>27</sup> the skin disease Sweet's syndrome in a man after pneumococcal vaccination,<sup>28</sup> and systemic lupus erythematosus after vaccination against HPV in girls and women,<sup>29</sup> for example.

### How many others?

Larry Cook started collating dozens of “coincidences” like Bear's (see box, page 33) on the website for his group Stop Mandatory Vaccination ([www.stopmandatoryvaccination.com](http://www.stopmandatoryvaccination.com)). He created a Facebook page devoted to them, and when it started to get a lot of traffic, the mainstream media caught wind of the campaign.

Suddenly, he says, he was the target of dozens of news articles accusing him of “dangerous,” “anti-vaxx” lies and claiming he was responsible for children

No science has been done to see if these powerful immune-modulating formulas have any role in the current skyrocketing rates of cancer and infertility

dying from medical neglect. Facebook, in turn, shuttered his group, with 200,000-plus followers, from its platform. Twitter followed suit.

Hundreds of websites share stories of vaccine injury around the world, though. One of the most well-known is VAXXED, which shares its name with the documentary about CDC whistleblower William Thomson, who admitted to the father of an autistic child that his team of scientists shredded data showing an increased risk of autism following MMR vaccination.

Nearly 126,000 people have shared their harrowing stories of vaccine injury and deaths via the VAXXED website ([www.vaxxed.com](http://www.vaxxed.com)) and YouTube channel. These nightmare injury stories suggest the potential for more subtle and easily missed damage that vaccines may do in altering the natural immune system, particularly in children who receive 70-plus doses of 16 diseases before the age of 18.

If vaccines can cause serious brain and autoimmune disorders, what else can they do? (See box, page 37)

### The trouble with vaccine trials

“Vaccines do not appear to have the same safety requirements as many drugs,” write the authors of the *Toxicology Reports* paper. Most pharmaceutical package inserts on vaccines—MMR II, influenza vaccine, diphtheria-tetanus and HPV, for example—declare that their product has “not been evaluated for carcinogenic or mutagenic potential” or its “potential to impair fertility.” In other words, no science has been done to see if these powerful immune-modulating formulas have any role in the current skyrocketing rates of cancer and infertility.

“Long-term safety studies of vaccines are rare,” the researchers add. “The typical vaccine study is aimed at efficacy. Such studies tend to be a few months long, and the main evaluation criterion is titers of antibody in the serum.” You can't see long-term effects in short-term data.

Clinical vaccine trials also exclude people with underlying conditions. Anyone with allergies, autoimmune diseases, illnesses like diabetes and heart

# Far infrared saunas for health

Published studies in recent years have highlighted the benefits of taking regular saunas.

A study from Loughborough University showed how exposing the body to heat for 60 min periods, burns calories and helps regulate blood sugar levels.

Finnish studies highlighted benefits to the cardiovascular system and blood pressure.

Australian studies showed benefits to the immune system and prevention of colds.

Canadian research pinpointed sweating as an effective means of detoxing cells.

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disease along with the frail and elderly is screened out. Only a real-world roll-out can reveal just how these people will react.

"You're only going to find a rare, serious event post-approval. That's definite," vaccinologist Offit told the editor-in-chief of the *Journal of the American Medical Association* the week before the launch of the Covid-19 vaccine. Quoting the "Father of Vaccinology" Maurice Hilleman, he added: "I never quite breathe a sigh of relief until the first three million doses are out there."<sup>21</sup>

So, while the first three million people to get a jab are the real-world experiment, public health doctors say that a sophisticated "post-marketing" surveillance system is in place to catch danger signals. In the US, this is the Vaccine Adverse Event Reporting System (VAERS), the database used for most epidemiological vaccine safety studies.

### The trouble with VAERS

VAERS was created at the time US Congress passed the National Childhood Vaccine Injury Act of 1986, which gave pharmaceutical companies blanket protection from lawsuits over injuries from childhood vaccines at a time of public fear about brain damage from the pertussis vaccine. (Similar blanket liability exists in most countries.)

Between 1990 and mid-November 2019, 8,087 vaccine-related deaths were reported to VAERS, nearly half of them among children under three years old, according to the National Vaccine Information Center (NVIC).<sup>22</sup> There were more than 17,394 reports to VAERS of permanent disability following vaccinations in the same time frame.

Doctors are supposed to report any adverse event following vaccination to VAERS, but it is a "passive reporting" system that most doctors have not even heard about. Like most passive reporting systems, VAERS has a serious problem with under-reporting.

A groundbreaking study from Harvard Pilgrim Healthcare looked at actual diagnostic codes in the records of people up to 30 days after vaccination and found that less than 1 percent of vaccine adverse events that should have been reported to VAERS actually were.

"In other words, the actual numbers of adverse reactions to vaccines are one

## The short life of Bear

In pictures, Berit "Bear" Bliss is an adorable infant with an impish grin. "He was smiling and rolling over and was really alert. Bear was a cuddle bug," his mother, Anne says. "He loved to be held." Bear was born on January 29, 2015. The following day he was vaccinated against hepatitis B—a disease that affects one in 100,000 Americans and for which the most common risk factor is intravenous drug abuse.

His next round of vaccines was at his two-month check-up. Anne recalls having a "gut feeling" she shouldn't vaccinate Bear before she went to her appointment, and she objected to the number of shots—six separate needles containing eight disease antigens. But the pediatrician assured her that it was routine.

After his shots, Bear slept almost all day. "I had to wake him up to feed him; that was very unusual," Anne recalls. He also cried and wanted to be held more than usual. At 3 a.m. on March 28, Bear was asleep on Anne's chest in her bed because he had been fussing. She set him down on his back and went to the bathroom. He was asleep. When she returned to pick him up, he was limp. "I screamed."

Anne's husband woke up and immediately started doing CPR on the baby. Anne called 911 and, forgetting her address as they had recently

moved, told the dispatcher to call the hospital two minutes away to expect them. "By the time we got there, he had blood running out of his nose. They got him back and lost him several times. That beeping sound still to this day makes me feel like my heart is being ripped out of my chest."

The next morning a doctor told the couple that Bear would not recover and was not getting enough oxygen. The 20-year-old mother and her husband had to make "the hardest decision ever. We decided to take him off of the machine and hold him while he took his last breaths. At 10:13 am, he was pronounced dead.

"Those months following, and still to this day, are sometimes unbearable."

Anne waited four months before a coroner ruled Bear had died of SIDS—and that the eight vaccinations he'd received not two days before were "just a coincidence."



## The actual numbers of adverse reactions to vaccines are one to two orders of magnitude higher than those reported in VAERS

to two orders of magnitude higher than those reported in VAERS," write the authors of the *Toxicology Reports* paper.

That would mean there were more like 808,700 vaccine-related deaths since 1990, says NVIC.

Similarly, the number of vaccine-

related disabilities is closer to 1,739,400 since 1990. What's more, the *Toxicology Reports* paper authors note, since the study only looked at single vaccination appointments and only for one month, serious long-term immunological reactions like autoimmunity are completely missed. "One can only conclude that a negligible fraction of long-term adverse events is reported in a passive monitoring system like VAERS."

### Real risk: one in 39

"It's a completely different calculus than one-in-a-million," Robert Kennedy Jr, chairman of Children's Health Defense, told *WDDTY*. He also cites the million-dollar 2010 Agency for Healthcare



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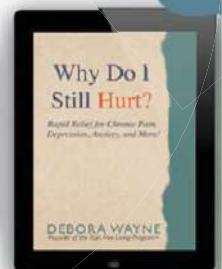
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## PEGylated nanoparticles in your vaccine

Harold Gielow had his first allergic reaction when he was in his 20s, while on active duty aboard a US naval ship in 1983. Had he or the Navy known he had allergies, he would have been precluded from fine operations. But he'd never experienced any symptoms before, and he didn't know what was making him react suddenly.

Over the years he had skin reactions to various glue substances, for example, but nothing serious until a few years ago, when he had a severe anaphylactic reaction to preparatory medicines for colonoscopy.

"I started itching all over; I had urticarial hives inside and out. My blood pressure dropped rapidly, and then I passed out," says the 63-year-old retired United States Marine Corps lieutenant colonel. "It all happened in 60 seconds." He was taken to hospital by ambulance where he recovered.

Follow-up tests at Johns Hopkins University confirmed the culprit: the petrochemical polyethylene glycol (PEG), used widely in creams and lotions, laxatives and other pharmaceuticals.

Even when Gielow has informed doctors about his known allergy, they've prescribed him drugs that don't specify PEG on the label because it's not required—and he's had allergic reactions. When talk of the new COVID-19 vaccine began, Gielow was astonished to find that the top three vaccine candidates, including those first approved from Pfizer and Moderna, contain PEG as a lipid nanoparticle vector that carries the active messenger RNA into the body.

What's more, he says, the companies know it's dangerous, used it anyway, and are not informing doctors or the public.

Many recent studies confirm the potentially deadly properties of PEG: it can stimulate anti-PEG antibody production that can leave a person

vulnerable to an allergic reaction. A 2016 study showed that 72 percent of the general population already has measurable anti-PEG antibodies and concluded that this "underscores the potential importance of screening patients for anti-PEG antibody levels prior to administration of therapeutics containing PEG."<sup>1</sup>

For example, in the case of cancer drugs that are chemically linked to PEG (so-called PEGylation), laboratory studies show that the immune-stimulating properties of PEG can interfere with the effectiveness of the drug—quite the opposite of its intended function.<sup>2</sup>

And it's not just cancer drugs, as PEG has become ubiquitous in drug delivery. A 2020 review of the literature on the dangerous "immunogenicity" of PEG concludes that efforts are "urgently needed to design, synthesize and evaluate new alternatives to PEG."<sup>3</sup>

Moderna even wrote about the dangers in a report to the Securities Exchange Commission in 2018: "Certain aspects of our investigational medicines may induce immune reactions from either the mRNA or the lipid as well as adverse reactions within liver pathways or degradation of the mRNA or the LNP [lipid nanoparticles], any of which could lead to significant adverse events in one or more of our clinical trials."<sup>4</sup>

Lethal anaphylactic reactions have been increasing in recent years without clearly identified culprits, particularly in young people.<sup>5</sup>

Judging by the anaphylactic shock reactions and the thousands of reported "health impact events" in response to Pfizer's PEGylated vaccine in the first days of its roll-out, Lt. Col Gielow thinks a fatal reaction is inevitable: "I'm really worried people are going to die from this."

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Research and Quality (AHRQ) study—which analyzed data on 1.4 million doses of 45 different vaccines administered to over 376,000 individuals between 2006 and 2009. The AHRQ used a new electronic surveillance system (ESP-VAERS) that could detect adverse events from vaccines by digitally counting clinician visits, diagnostic codes, prescriptions and vaccines rather than voluntary VAERS reports, which often lack critical record-keeping data. The system reported an adverse event rate of 2.6 percent—or one event for every 39 vaccines administered.<sup>12</sup>

"If those numbers are close to the truth—and they appear to be in comparison with other clinical trials like the Gardasil trial in which 2.3 percent of vaccinated girls developed autoimmune disease<sup>13</sup>—then the risks are much greater than the public health authorities and pharmaceutical companies are claiming," said Kennedy.

Without the truth about how many and what kind of adverse events these vaccines cause, the claim that they are 'effective' is irrelevant, and that they are 'safe' is a lie

### Broken system

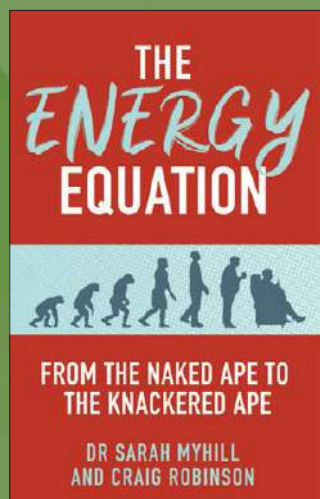
"The surveillance system is completely broken," Kennedy adds, referring to VAERS. What's worse is that oversight agencies like the CDC, charged with monitoring adverse events and protecting the public, know there is a big problem but have turned a blind eye to the evidence.

The ESP-VAERS was designed to replace the failed VAERS, but when the results came in showing the staggering one-in-39 adverse event rate, suddenly the CDC, responsible for implementing the program, went dark on the researchers. Their final report states: "Unfortunately, there was never an opportunity to perform system performance assessments because the necessary CDC contacts were no longer available and the CDC consultants responsible for receiving data were

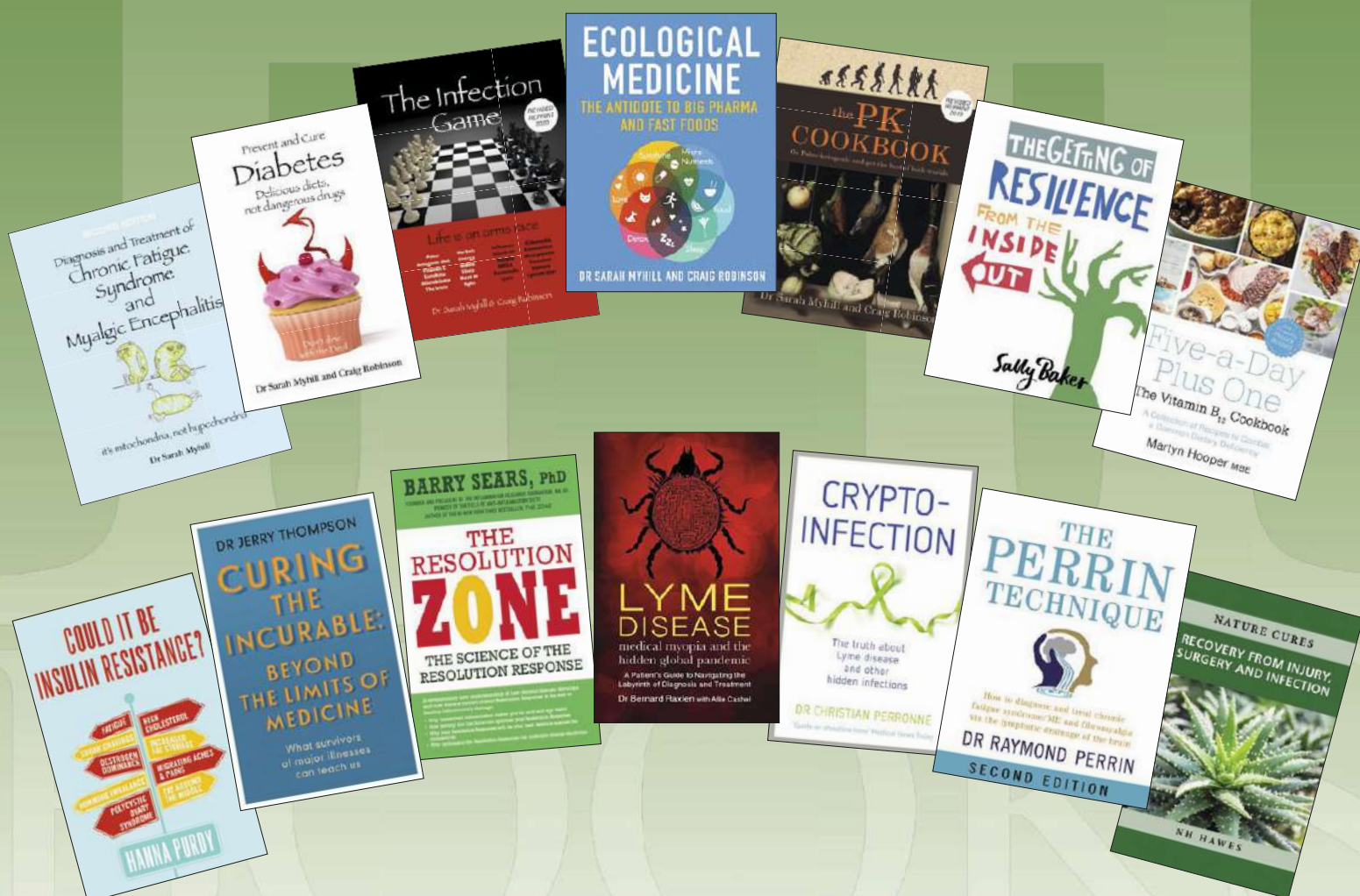


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## Vaccinated vs. unvaccinated children: who is healthier?

Across the globe, children receive far more vaccinations than their parents and grandparents did. For example, in the US, children currently receive up to 79 vaccine doses against 16 diseases by age 18. In comparison, children in 1983 received just 11 shots against eight diseases.

Remarkably, no large-scale study has ever compared the health outcomes of children who receive all of the currently recommended childhood vaccinations against those who receive none, which leaves an important question unanswered about the health impact of vaccines on children generally: are vaccinated children, protected from common childhood infections, healthier overall?

In November 2020, pediatrician Paul Thomas and independent researcher James Lyons-Weiler published their landmark study attempting to answer this question.<sup>1</sup>

The study compared the “relative incidence of office visits” (RIOV)—a measure of days of required healthcare—of 3,324 pediatric patients who received care in Thomas’s integrative pediatric practice over a 10-year period. Of those, 2,763 had received at least one vaccine (variably vaccinated group) and 561 had received no vaccines (unvaccinated group). The results were astonishing.

- Children who were vaccinated required twice as much healthcare time overall compared to unvaccinated children.
- There were a total of 34 vaccine-preventable infections among the unvaccinated children compared to just seven in the vaccinated group. Most of these (23) were chickenpox. None of the children in either group died.
- Remarkably, no unvaccinated children developed the common childhood disorder attention deficit hyperactivity disorder (ADHD). Compared to the children who’d had the fewest vaccinations, the children who had the most vaccinations visited the clinic for ADHD-related issues over 53 times more often (ROIV = 53.74).
- Vaccinated children had 10 times as many

doctor visits for behavioral issues (ROIV: 10.28).

- Vaccinated children visited the doctor more often for ear pain and otitis media (ear infection) (ROIV: 10.37 and 7.03, respectively).
- Vaccinated children were treated more frequently for eye disorders (ROIV: 5.53).
- Vaccinated children required six times more healthcare for anemia than their unvaccinated peers (ROIV: 6.334).
- Vaccinated children were treated three times more often for asthma than their unvaccinated peers (ROIV: 3.496).
- Vaccinated children were seen for allergic rhinitis (hay fever) nearly 6.5 times more often than unvaccinated children in the practice (ROIV: 6.479).

The study was unable to detect differences in developmental disorders including autism, the biggest tempest in the vaccine debate, perhaps because many patients in the practice ceased vaccinating when they experienced adverse events and were only partially vaccinated.

Larry Cook, of the 200,000-member

strong, now-shuttered Facebook group Stop Mandatory Vaccination, says it’s also in keeping with what he heard from parents time and again:

“Their vaccine-free children reached milestones sooner, didn’t get as sick as often, got over illness faster and were far healthier in every possible way without chronic ailments compared to their vaccinated siblings.”

Given that American children are suffering from a soaring epidemic of chronic immune-mediated illnesses including asthma, ADHD, autism and allergies with no identified causes, you’d think public health would take great interest in this research.

Apparently, they did. Four days after he published his study, health authorities in the state of Oregon, where Dr Thomas practices, suspended his license to practice medicine without a hearing, leaving his patients unattended. You can learn more about his research—and now his legal battle—at [www.paulthomasmd.com](http://www.paulthomasmd.com).

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no longer responsive to our multiple requests to proceed with testing and evaluation.”

In December, Kennedy wrote a lengthy letter to David Kessler, co-chair of Joe Biden’s Transition Covid-19 Advisory Board. Kennedy detailed the problems with vaccine adverse event surveillance, which he called “a direct threat to patient life and public health,” and concluded: “Your committee should not allow further rollout of Covid-19 vaccines until FDA’s capacities for monitoring long-term vaccine safety are significantly improved.”<sup>2</sup>

The COVID-19 campaign targets virtually everyone on the planet with an extraordinarily experimental vaccine, but Kennedy’s warning to Kessler could apply to each and all of the 70-plus vaccine doses given to children or any vaccine for adults in the arsenal of public health.

Without the truth about how many and what kind of adverse events these vaccines cause, public health’s claim that they are “effective” is irrelevant, and that they are “safe” is a lie.

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# Change it up

Phasing your diet is the key to better health and vitality, says Chalene Johnson

After the shocking discovery that she was on the fast track to early-onset Alzheimer's disease, health and fitness expert Chalene Johnson embarked on a three-year quest to find out why and how this happened. Her extensive research, together with a team of experts including registered dietitians, integrative and functional medical doctors and top researchers in metabolism and gut health, culminated in the 131 Method, a customizable nutritional plan involving 'diet phasing' that enabled Chalene to turn her health around and has now been tested by more than 50,000 people.

Here, Chalene introduces the method and why it works.

## Bacon quiche

If you prefer, use heavy cream instead of coconut milk for a more neutral flavor.

Makes six servings

### Ingredients

#### Crust:

Coconut oil cooking spray  
2 cups almond flour  
1 large egg  
2 Tbsp coconut oil, melted  
1 tsp fine sea salt

#### Filling:

6 strips 100% grass-fed, pastured and nitrate-free bacon  
1½ cups (12 oz) canned full-fat coconut milk or heavy cream  
4 large organic eggs  
¼ tsp fine sea salt  
¼ tsp freshly ground black pepper

### Method

To make the crust:

① Heat the oven to 350°F/177°C. Coat a 9-inch (23-cm) round pie plate with cooking spray.

② Whisk together the

almond flour, egg, coconut oil and sea salt in a bowl until fully combined.

③ Press the dough into the pie plate, pushing it evenly up the sides. Bake for 13 to 15 minutes, until the crust is lightly golden.

To make the filling:

① Fry the bacon strips in a large skillet over medium heat until crisp on both sides. Put the bacon on paper towels and then, when cool enough to handle, blot well and crumble.

② Whisk together the coconut milk, eggs, salt and pepper in a bowl. Stir in three-fourths of the crumbled bacon. Pour the egg mixture into the baked crust and top with the remaining bacon.

③ Bake for 35 to 38 minutes, until the top is lightly golden and the eggs are set. Cover with aluminum foil if the crust begins to brown too much. Cool for 15 minutes before slicing.





**T**oday, at 50, I have no brain fog, a regular cycle and none of the premenopausal symptoms I once experienced. Headaches are rare, as is bloating, soreness and fatigue. I never count calories or deprive myself of foods I want to eat. I'm consuming things I once thought I had to give up for good.

The mystery of weight loss is gone. I now know what it feels like to effortlessly maintain my weight. I choose workouts that make me feel restored and strong. By eating more and exercising less, my body is getting better results.

My cognitive function continues to improve, and I can't say that I've ever had this much energy. My skin looks better and my body feels, well, *young*. I feel better today than I have in my entire life.

And it's thanks to the 131 Method.

It isn't a one-size-fits-all plan with simplified rules or a universal list of what you can and cannot eat. With the 131 Method, you'll understand what's really going on in your body and how to take control of your health; then you'll design a plan that fits your own unique lifestyle.

The 131 Method consists of three phases: Ignite, Nourish and Renew. In each phase you spend three weeks following a specific dietary approach, then you can either continue to follow the meal plan for one more week, or you can choose to fast and refuel to rest the gut, correct your appetite, and emotionally detach from food. By the end of the 12 weeks, you'll learn how to apply the principles of the 131 Method to your life.

### Phase 1: Ignite

Ignite cranks up your metabolism and sets it on fire. Your body will go from sugar-burning to fat-burning mode, or ketosis, and learn to use stored body fat as fuel.

On Ignite you'll enjoy satisfying, delicious meals high in healthy fats and low in carbohydrates. You'll also learn how to use intermittent fasting to supercharge your fat-burning results and stabilize your appetite. You'll eat foods that reduce inflammation, balance hormones and promote gut healing.

### Phase 2: Nourish

Nourish builds on the fat-burning foundation of Ignite while increasing your body's ability to metabolize micronutrients found in whole foods

## Macrophasing: cross-training for your metabolism

Macrophasing is a lot like cross-training. To achieve optimal fitness results, top trainers know the importance of changing up routines to keep clients' workouts exciting and push the body to use energy instead of storing it. By cycling different macronutrient ratios in specific amounts over a period of days, you teach your body to use the energy from foods you eat rather than storing it as fat. The result is improved metabolic flexibility.

Each week of the Renew phase has three different stages or types of menus: Lean Green for two days, Carb Charge for two days and then Fat Burning for three days. How you organize those days each week is up to you. However, to comfortably transition into ketosis, be sure to finish strong with three consecutive days of Fat Burning ratios before starting a fast in week 4.

### LEAN GREEN

For two days each week, eat meals high in protein, low in fat and low/moderate in carbohydrates along with plenty of vegetables. The macronutrient range I suggest is:

10–15 percent fat  
30–50 percent protein  
20–40 percent carbohydrate  
Here's how:

- Eat lean proteins and lots of plants.
  - Avoid excess fats.
- Remember that while many foods are high in protein, such as nuts and nut butters, they are also high in fat.
- Use high-quality ingredients to fuel your tank.

• When in doubt about the fat content of a food, check it on an app like MyFitnessPal.  
Meal ideas:

- Smoothie with greens, berries such as blueberries or blackberries, and quality protein powder
- Salad with lots of greens and non-starchy vegetables such as celery, mushrooms, cucumbers, Brussels sprouts, broccoli and more
- Roasted cabbage or sautéed greens with protein of choice (such as baked chicken)
- Low-carb coconut wraps (found in many health food stores and online) or lettuce wraps filled with greens and a protein.

### CARB CHARGE

For the next two days, eat high-carb, low-fat and moderate-protein foods. The ratio is as follows:

15–20 percent fat  
15–25 percent protein  
55–70 percent carbohydrate  
Here's how:

- Choose healthy carbs that work for you and do not cause you digestive discomfort, bloating or an inflammatory response, such as sweet potatoes, quinoa, rice, bananas, grapes and other fruits, legumes and gluten-free pastas.
  - Avoid foods that you know cause you inflammation.
- Meal ideas:

- Oatmeal with berries
- Low-carb soup like chili with sweet potato or beans added
- Roasted vegetables, such as sweet potatoes, beets, carrots or squash of choice, and protein of choice with no extra fat added
- Quinoa or rice salad with protein of choice.

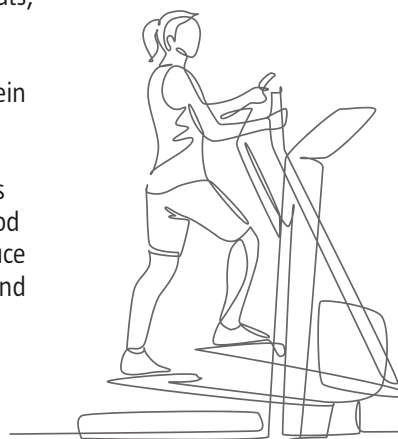
### FAT BURNING

For the next three days, eat low-carb, high-fat and moderate-protein foods. The ratio is as follows:

70–80 percent fat  
15–20 percent protein  
5–10 percent carbohydrate  
Here's how:

- Emphasize foods low in carbohydrates and high in healthy fats.
  - Limit carb intake to green and non-starchy vegetables.
  - Choose high-quality protein and pasture-raised meats whenever possible.
  - Opt for higher-fat forms of quality meats and fish (such as grass-finished beef, wild-caught salmon).
- Meal ideas:

- Eggs with avocado
- High-fat smoothie with avocado and macadamia nuts
- Salad with olives, olive oil dressing, chicken and low-carb vegetables such as cucumbers, bell peppers, asparagus, mushrooms, zucchini and radishes.
- Baked chicken with roasted cauliflower cooked in coconut oil, dunked in guacamole or macadamia hummus.





## Blender bread

Once baked and sliced, this gluten-free bread can be toasted for breakfast and sandwiches. It's all put together in a blender, and you don't have to wait for the bread to rise.

Makes about 18 servings

### Ingredients

Coconut oil cooking spray  
4 large organic eggs  
1 cup liquid organic egg whites  
1 cup natural roasted almond butter  
½ cup coconut flour  
2 Tbsp nondairy milk  
1½ Tbsp apple cider vinegar  
2 tsp baking soda  
8 drops liquid vanilla stevia  
¼ tsp sea salt

### Method

1 Heat the oven to 325°F/163°C. Line a 9×5-inch (23×13 cm) loaf pan with parchment paper. Spray the parchment paper with cooking oil.  
2 Place the eggs, egg whites and almond butter in a blender. Process on low, then turn up the speed to medium until the mixture is combined, about 1 minute.  
3 Add the coconut flour,

milk, apple cider vinegar, baking soda, liquid stevia and salt and process for 20 seconds.

4 Pour the batter into the prepared loaf pan. Bake for 50 to 55 minutes, until a toothpick inserted in several places comes out clean.

5 Cool on a wire rack for 5 to 10 minutes, then turn the loaf out of the pan and cool on the rack.

and plants. You'll gradually cut back on animal proteins and increase vegetables and plant-based healthy fats.

### Phase 3: Renew

Renew will teach you how to use fats, proteins and yes, even carbs for energy. It's in Renew that your body will effectively use all macronutrients for energy, which is called macrophasing (see page 39). Macrophasing provides the ultimate approach to metabolic flexibility by changing or "phasing" your macronutrient ratio of carbohydrates, protein and fats every two to three days.

With guidelines and recipes, you'll design a meal plan to best suit your life. You'll enjoy carbs, fats and proteins and experience the joy of a metabolism that works with you, not against you.

### How the diet works

Diet phasing is a key component of what makes the 131 Method work. Why? Homeostasis.

Every function and every system of the body is meant to keep us alive. The body tunes in and accommodates subtle shifts in our nutrition, movement, sleep, stress levels and more to maintain internal stability, or homeostasis.

Homeostasis refers to the body's "set point," the status (including weight) at which your body stubbornly wants to remain. While adaptation is our primitive brain's way of keeping us alive, homeostasis can also keep us feeling fluffy, fat and frustrated. Regardless of what you eat, your body is programmed to figure out how to adjust energy expenditure and maintain the status quo.

This is also why, regardless of the diet, many people experience initial weight loss. Homeostasis simply has not yet had a chance to take hold. You're excited to buy smaller jeans and ready to become a lifetime member of whatever diet tribe you've just discovered. But when you stay on that diet for an extended period, what results is the natural process of homeostasis. You gain back all that weight—and probably more—as your body does what it was designed to do.

To figure out how to hack this process, I turned to scientists who have studied how to avoid physical adaptation and plateaus. Their studies usually focused on changing exercise training protocols at regular intervals in top-performing



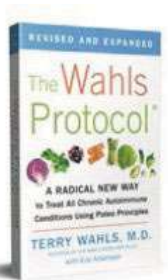
# The Wahls Protocol®

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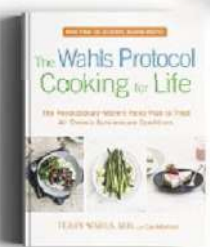
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### Research

Dr. Terry Wahls is a clinical professor at the University of Iowa where she conducts clinical trials testing the efficacy of therapeutic lifestyle to treat multiple sclerosis-related symptoms. Download a copy of her research papers and watch videos showing the remarkable gains in function observed in the clinical trials testing her protocol on patients with progressive multiple sclerosis at :

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Contact her study team at:  
[MSDietStudy@healthcare.uiowa.edu](mailto:MSDietStudy@healthcare.uiowa.edu)

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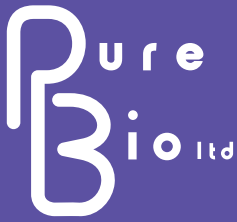
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## Flaxseed-cinnamon muffins

When muffins are made with healthy ingredients, they contribute to your fat-burning goals. You can enjoy these with a cinnamon icing or an almond butter drizzle, or on their own if you prefer. It's your program, so it's all up to you.

Makes 12 servings

### Ingredients

#### Muffins:

2 cups ground flaxseed  
½ cup Swerve Confectioners Sweetener  
3 Tbsp ground

#### cinnamon

1 Tbsp aluminum-free baking powder  
½ teaspoon sea salt  
5 large organic eggs  
½ cup melted coconut oil or avocado oil  
2 tsp pure vanilla extract

#### Cinnamon bun icing:

½ cup coconut butter  
2 tsp MCT oil  
2 Tbsp Swerve Confectioners Sweetener  
1 tsp pure vanilla extract  
1 tsp ground cinnamon

#### Almond butter drizzle:

2 Tbsp natural, salted almond butter  
2 Tbsp coconut oil  
2 Tbsp Swerve Confectioners Sweetener

### Method

To make the muffins:

- 1 Heat oven to 350°F/177°C and line a 12-count muffin pan with paper liners.
- 2 Whisk together the flaxseed, Swerve, cinnamon, baking powder and salt in a bowl.
- 3 Place the eggs, coconut oil and vanilla in a blender with ½ cup room temperature water and blend on high speed until foamy, about 30 seconds.
- 3 Pour the egg mixture over the flaxseed mixture and stir well with a spatula just until incorporated. The batter will be fluffy. Let sit for 3 minutes.
- 4 Divide the batter among the paper liners. Bake for 17 to 19 minutes, until a toothpick inserted

in the middle of a muffin comes out clean.

- 5 Turn the muffins out on a rack and let cool for at least 20 minutes.

To make the icing:

- 1 Place the coconut butter and MCT oil in a microwave-safe bowl. Microwave for about 30 seconds, until melted and smooth.
- 2 Stir in the Swerve, vanilla extract and cinnamon. Use a knife to spread the icing on each muffin.

To make the drizzle:

- 1 Place the almond butter, coconut oil and Swerve in a microwave-safe bowl. Microwave for 20 seconds. Drizzle on top of each muffin.

athletes. This training approach is sometimes referred to as periodization, cross-training, cycle training or phasing.

This approach has become widely accepted as the most effective way to obtain optimal physical results. The 131 Method applies the same biological principle in the form of diet phasing.

Diet phasing is as old as human evolution. Scientists agree our Paleolithic ancestors thrived on completely different nutrients with each change of season. The changing availability of food and resources necessitated seasonal variation in the diet for basic survival. Using that knowledge and employing the right sequence of diet phasing helps your body avoid homeostasis. By changing things up, your metabolism doesn't have time to adapt or slow down. The result is increased metabolic flexibility.

Metabolic flexibility is how we get the body "unstuck." It's the process by which we are able to use carbohydrates, fats and proteins effectively through a complex communication system in which nutrients are used or metabolized as energy rather than stored as fat.

A flexible metabolism means that when you eat healthy fats, the body burns fat as fuel. Eat more carbs, and the body can return to using stored glucose (carbs) for fuel. The body is so smart, but it hasn't evolved much in millennia. Diet phasing in the right sequence works with your biology to increase metabolic flexibility.

Each phase of the 131 Method helps you efficiently improve your metabolism while simultaneously healing the gut. Diet phasing delivers so many benefits: hormone balance, freedom from obsessive dieting, balanced insulin sensitivities, increased metabolic flexibility, increased gut microbiome diversity, seasonal convenience and the freedom to eat a wide variety of foods.

To show you just how freeing the plan can be, try these delicious 131 Method recipes.

Adapted from  
**131 Method** by  
Chalene Johnson  
(Hay House,  
2019)



# TEN (more) ways to live to 100

This issue is our 100<sup>th</sup> as a magazine, which we launched in September 2012. In our 100<sup>th</sup> issue as a newsletter, we listed 100 ways to live to 100. As we can't find another 100, here are 10 more to celebrate our magazine century

## BREATHE PURE OXYGEN

Pop star Justin Bieber could live to a grand and healthy old age if a breakthrough research study is to be believed—or is that believed? Bieber has installed hyperbaric oxygen chambers in his home and recording studio, and that could be a wise move, according to scientists who have discovered that breathing pure oxygen in these pressurized chambers reverses the aging process as measured by telomere shortening and senescent cell growth, two key biological markers of aging.

Telomeres are caps on the end of chromosomes, our DNA strands, which can shorten—and so lose their protective abilities—because of stress or chronic inflammation, or if we're overweight or a smoker. As a result, our DNA can be damaged, and healthy cells stop regenerating, which can trigger many chronic health problems including cancer and

Alzheimer's. When our chromosomes are damaged, "zombie" senescent cells are created, and these block the growth of new, healthy cells.

Hyperbaric oxygen therapy could be the holy grail that can reverse those processes, say researchers from Tel-Aviv University. They saw dramatic improvements in the biological age of 35 participants who had five, 90-minute sessions a week for three months. By the end of the trial, their telomeres had lengthened by 20 percent, which had been their length 25 years ago, suggesting their "biological age" had gone down. The researchers also saw the participants' levels of senescent cells fall by 37 percent.

*Aging (Albany NY), 2020; 12: 22445–56*

## EAT POMEGRANATES

There have been plenty of contenders for the superfood crown, but when it comes to aging, the pomegranate could win the prize.

The fleshy fruit contains a molecule that kick-starts flagging mitochondria—our cells' powerhouses—back into life. This gives new energy to tissues and muscles, which can weaken over the years.

A pomegranate-derived precursor molecule is transformed into urolithin A, which is an anti-aging agent, by microbes in the gut. So, yet again, it all comes down to having a healthy gut.

*NatMed, 2016; 22: 879–88*

## DRINK RED WINE

There's something in red wine that can trigger anti-aging processes. The wine activates an anti-aging protein called SIRT1, which rejuvenates cells in our immune system.

The protein revives cytotoxic T cells, which kill cells infected by a virus and block cancer cells.

As we age, our cells lose the SIRT1 protein, and this can start inflammatory processes, which lead to heart disease and some cancers.

*J Exp Med, 2018; 215: 51–62*

## START DANCING

Any exercise can reverse signs of aging in the brain—but the best of all is dancing.

Learning dance routines gives new life to brain areas that usually decline with age, such as the hippocampus, which plays a key role in memory and learning. Dancing also improves balance and flexibility.

Researchers put a group of older volunteers with an average age of 68 through 18 months of weekly dance lessons where they learned new steps and routines, and positive changes in their brains were measured by MRI.

*Front Hum Neurosci, 2017; 11: 305*







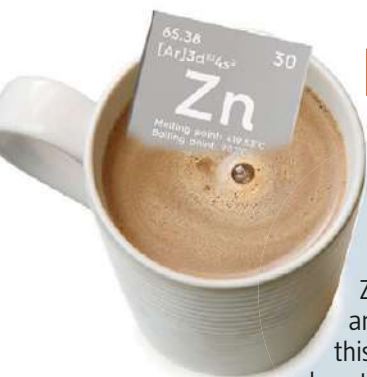
## TAKE ASTAXANTHIN

Astaxanthin holds the mantle of anti-aging super-supplement. It's a powerful antioxidant that is also found in marine animals such as salmon, shrimp and crab and gives them their pink hue.

It's been proven to protect us against a range of health problems usually associated with aging, including dementia, failing eyesight, wrinkles and fine lines on our skin. It may also protect against cancer, improve heart health and boost fertility.

The optimum daily dose is 2–4 mg, and it's best to take after a meal that includes fats. It's also a good idea to take it with healthy fats such as olive or flaxseed oil.

J Nat Prod, 2006; 69: 443–9



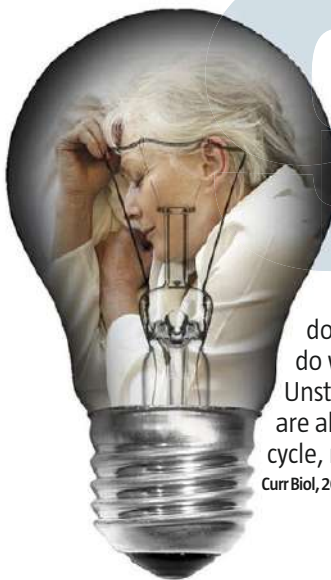
## EAT DARK CHOCOLATE AND ZINC (YES, TOGETHER)

Zinc is a mineral that has anti-aging qualities—and this gets a rocket-charged boost if you take it with a piece

of dark chocolate. It doesn't have to be chocolate; anything that contains polyphenols will do, and that also includes cocoa powder, berries, nuts, vegetables, wine and beans.

Whatever combination you choose, it will combat the effects of aging, including wrinkles and lines, and reduce inflammation and the risk of neurodegenerative diseases such as dementia and Alzheimer's.

Nat Chem, 2018; 10: 1207–12



## TURN OFF THE LIGHT

Around 75 percent of the world's population is exposed to artificial light during the night, and this interferes with our circadian light-dark cycle that helps regulate and maintain good health.

Many of the signs of aging that we put down to advancing years could have more to do with us rarely experiencing total darkness. Unsteadiness, frailty, muscle loss and osteoporosis are all a consequence of an interrupted circadian cycle, researchers have discovered.

Curr Biol, 2016; 26: 1843–53

## EAT LESS

Fasting—either by eating fewer calories every day or limiting the window of time when you can eat—could help you live longer.

There's not enough evidence to categorically prove it helps people live longer, but fasting helps maintain a healthy cardiovascular system—and with heart disease being the number one killer, that must help with longevity.

When we fast, a molecule called beta-hydroxybutyrate is produced by the liver, which has an anti-aging effect on the health of our arteries and blood vessels.

Mol Cell, 2018; 71: 1064–78.e5



## STAY POSITIVE

Living a long life isn't just down to eating healthily and exercising—your attitude to life is just as relevant. Researchers have discovered that keeping positive and optimistic is as important as the food we eat.

People who remained optimistic were nearly twice as likely to reach the age of 85 as others who were more pessimistic and world-weary, according to one study.

Proc Natl Acad Sci USA, 2019; 116: 18357–62



## BE SOCIAL

Being in any social group—whether it's a church or the local amateur dramatics society—has a big part to play in longevity. Community is one of the cornerstones of health and wellbeing, and that has an impact on just how long we live.

One study of more than 300,000 participants discovered that those who engaged in any social activity were 50 percent more likely to live a long life.

PLoS Med, 2010; 7: e1000316





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# Floats like a butterfly...

The latest “pharmaceutical gold” for everything from Lyme disease to rheumatoid arthritis and cancer comes from the nasty venoms of creatures like bees and worse. Cate Montana reports

**K**ris Rossi, 63, was diagnosed with chronic Lyme disease in 2009. A nurse anesthetist from New Hampshire, she started therapy with an allopathic doctor who treated Lyme with antibiotics. She’d get better for a little while, but then all her symptoms would come back and she’d have to start the course of antibiotics all over again.

“I had chronic fatigue and some joint pain and numbness on the left side of my face,” says Rossi. “My hand would twitch, and my tongue and the left side of my lip would twitch. I had numbness in my feet and decreased sensation in my hands, and I had bad insomnia and a lot of cognitive difficulties.

“I would be driving to work—and I’ve worked in the same hospital for 20 years—and suddenly I wouldn’t recognize where I was. I knew if I just kept driving that it’d come back to me, and usually within half a block I’d know where I was. But I was really struggling. Basically I was at my wit’s end. I figured I was either going to lose my job or have to quit.”

Realizing that allopathic medicine had nothing for her, she quit her doctor and the antibiotics. She tried herbal remedies, ozone treatments and special diets. Then one day at work one of the other nurses, a beekeeper, shared a story from a beekeeping newsletter about Ellie Lobel, a now-famous woman who had put bee venom therapy on the map in the US.

Ellie was in her 40s, and had been on the verge of death from Lyme disease. The story reported that she



## A brief history of venom therapy

Apitherapy—using honeybee products from venom to propolis to royal jelly—has been practiced worldwide for millennia and can be traced back to ancient Egypt, the Middle East, Greece, China and India. References to the beneficial uses of bee products can be found in the Vedic scriptures, Bible and Quran.

In ancient Egypt, honey was an ingredient in the embalming fluid used to preserve the dead. Hippocrates, the “father of medicine,” used bee venom to treat joint pain and arthritis. Greek athletes reputedly consumed honey to increase their energy levels during sports competitions.

In the Middle East, potions made from snakes were considered to be a cure-all. To this day, some Bedouin tribes are believed to eat poisonous snakes as a restorative aid to good health and a long life. In India, snake venom has been used since ancient times in Ayurvedic medicine to cure various pathological conditions.

In Europe, a homeopathic preparation of venom from the surukuku or bushmaster snake of Brazil was introduced in 1835.



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was taken into a garden by her caretaker to get some fresh air and got attacked and stung repeatedly by a massive swarm of bees.

"The caretaker ran off, and Ellie, who could barely walk, thought God had sent the bees to kill her off even earlier," says Rossi, "She refused to go to the hospital afterwards and went to her room to die. Three days later she wasn't dead, the pain was gone, she could walk, and she hadn't felt so good in years."

Not long afterwards, Rossi stumbled across the website of Emily Maiella, ND, and made an appointment to see her at her office in Brattleboro, Vermont. During her appointment, Emily asked if she'd ever thought about bee venom therapy. "I thought, I don't think I can sting myself with bees, but I'm really comfortable with syringes. So I started doing the venom protocol with her."

Rossi used the therapy for nine months and experienced improvement, especially in terms of daily energy, but found that the therapy made her insomnia worse. At that point she decided to stick with the therapy but make a big change: to become a beekeeper and use the live bees for venom.

"I ordered a book on beekeeping, and I got the bees and the equipment and signed up for a course on using bees for therapy. I started stinging myself the day the bees came, and I've been doing it for two and half years."

Today the twitching and numbness are gone. Her insomnia is cured, her cognitive abilities are normal and her energy is back. Even a strange case of psoriasis she developed has disappeared.

"The change in energy from before I started bee venom therapy is profound," she says. "For instance, I can ride my bike for 20 miles or more and feel appropriately tired afterward, not sick tired. It's a joyful thing to get your energy back."

### Apitherapy

Apitherapy is a branch of alternative medicine that uses bee venom and other honeybee products such as honey, pollen, propolis (a mixture of bee resins, waxes, essential oils, pollen and other organic compounds) and royal jelly (a substance secreted from the glands of nurse bees made to feed bee larvae).

Bee venom, however, is the major player in apitherapy. A colorless, odorless, slightly acidic liquid produced by female worker bees, bee venom is mostly water combined with an extremely complex blend of peptides, enzymes and other bioactive molecules.<sup>1</sup>

Studies indicate that whole bee venom and the venom peptide melittin are effective antimicrobial agents against *Borrelia burgdorferi*, the spirochete bacteria responsible for Lyme.<sup>2</sup> Microscopic analyses

The change  
in energy  
from before  
I started bee  
venom therapy is  
profound



## The venom

Even the word seems poisonous. And yet, if we break down the various venoms — whether they come from bees, snakes, scorpions, toads or toxic snails — and look at their individual components, we find some highly beneficial substances. As the ancient Ayurvedic physician Acharya Agnivesha put it several thousand years ago, "Even an acute poison can become an excellent drug if properly administered."

The most commonly used and understood venom comes from the honeybee (*Apis mellifera*). Bee venom contains many biologically active substances, including peptides (short chains of amino acids), enzymes (long, complex chains of amino acids), amines (compounds derived from ammonia such as histamine and epinephrine) and other components.<sup>1</sup>

The biggest known players in bee venom therapy are the peptides melittin, apamin, adolapin and mast-cell-degranulating (MCD) peptide. Here is a quick rundown on what they do:

**Melittin**, a peptide consisting of 26 amino acids, is responsible for the burning pain associated with bee stings and the principal ingredient of bee venom, accounting for approximately 50 percent by weight of dried bee venom. In high doses it can cause itching, inflammation and localized pain, but at small doses, melittin has broad anti-inflammatory effects and inhibits the production of proinflammatory cytokines.<sup>2</sup>

**MDCP** is a peptide that, at low concentrations, can stimulate mast cells to release antimicrobial cytotoxins. (A mast cell is a part of the immune system with a major role in allergic reactions.)

**Adolapin** is an effective pain killer and anti-inflammatory with antipyretic (fever-reducing) properties.<sup>3</sup>

**Apamine** blocks potassium channels and regulates genes involved in cell development. It has potential applications in the prevention of apoptosis (cell death) and fibrosis (unchecked growth of connective tissue), and in the treatment of central nervous system diseases.<sup>4</sup>

#### REFERENCES

- 1 Pharmacol Ther, 2007; 115: 246–70
- 2 Molecules, 2016; 21: 616; Molecules, 2018; 23: 332
- 3 Toxicol, 1982; 20: 317–21; Acta Physiol Pharmacol Bulg, 1985; 11: 50–5
- 4 Toxins (Basel), 2020; 12: 195

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## The sting without the bee

Patients are much more receptive to venom therapy when you replace the word “sting” with “injection.”

Most therapists offering bee venom therapy do not use live honeybees. Instead they deliver bee sting “equivalents” via a regular syringe and needle. Treatments vary widely depending upon the condition being treated. “If you’re treating headaches, then a couple of stings on the neck close to the ears is enough,” says Emily Maiella, ND. “If somebody has diffuse body pain, then 13 bee sting equivalents might be more appropriate.”

Some therapists use heavier doses. For instance, Donese Worden, NMD, regularly treats patients for rheumatoid arthritis, MS and other autoimmune disorders like fibromyalgia with bee venom using upwards of 36 injections per treatment with good effect.

Maiella’s protocol for Lyme patients involves treatment three times a week, and the “stings” are applied down both sides of the spine. After first doing a shallow subdermal test “sting” to make sure there is no allergic reaction, Maiella starts with the equivalent of one-fourth of a bee sting for the first two treatments.

If everything looks okay and the reaction isn’t too big or too small, she bumps up to half a sting for the next treatment. She keeps increasing the dosage, rotating the sites along the spine, working up to 13 bee sting equivalents per treatment for a 150–170-pound (68–77-kg) person.

Procaine, a topical anesthetic, is added to the serum to reduce the itching and swelling, and actually has medicinal properties in and of itself, says Maiella. “But you want the itching and the burning,” she adds. “If you don’t have any itching and burning, you really worry that the patient’s immune system is so deactivated it doesn’t even react. If you have too much itching and burning, it’s not necessarily a sign that they have an allergy. Most often it means their immune system is just more sensitive, and you apply the therapy more slowly.”

For systemic conditions, Maiella says that a year’s commitment to weekly therapy is not unusual. And then there’s the flip side. Some bee venom advocates, including Dr Dietrich Klinghardt MD, PhD, a specialist in the role of the nervous system in autoimmune disorders, believe that injectable venoms ultimately won’t cure a systemic disorder because they are not as strong as venom from the live source.

“When you make a natural substance sterile and heat it, there are changes in structure. You lose enzymes and other nutrients,” says Kris Rossi, a beekeeping nurse who treats herself on an ongoing basis for Lyme. “The bee venom from actual bees gives a much larger dose and you get a stronger response.”



**Bee venom  
is used to treat a  
diverse array  
of clinical issues,  
from Alzheimer’s  
disease to  
musculoskeletal  
pain and multiple  
sclerosis**

have shown that *B. burgdorferi* has “extraordinary sensitivity” to melittin, which severely compromises the mobility and surface structure of the Lyme bacteria.<sup>51</sup>

“Even though melittin is anti-spirochetal, I think there’s still a direct immune system response in Lyme cases,” says Maiella. “It appears to work through downregulation of inflammatory cytokines and upregulation of anti-inflammatory cytokines.”

Cytokines are molecules secreted by immune system cells as a form of communication. Among their many functions, they can drive immune cells to ramp up or sustain an inflammatory response, or conversely, they can cool down inflammation by promoting anti-inflammatory pathways. The same cocktail of peptides and other compounds in bee venom that makes a bee sting hurt—over a small area for a short time—is able to signal the immune system to reduce inflammation throughout the entire body for a longer time.

Bee venom is used to treat a diverse array of clinical issues in addition to Lyme disease, from Alzheimer’s

disease to intervertebral disc disease and spinal cord injury, musculoskeletal pain and multiple sclerosis.<sup>52</sup> It’s also being used to treat inflammatory diseases and has proven highly effective in treating both rheumatoid arthritis and osteoarthritis.<sup>53</sup>

Naturopathic doctor Donese Worden, NMD, from Mesa, Arizona, has treated many patients with arthritis (and many other conditions) using bee venom. One of her favorite stories involves a 95-year-old man with rheumatoid arthritis.

“The arthritis in his knees was severe, but he was healthy otherwise,” says Worden. “He couldn’t bend his knees or go up and down stairs. I

injected him with bee venom, and it worked so well and so quickly that he was invited onto a local TV station to talk about the therapy. In the middle of his interview he forgot he was supposed to stay seated, hopped up and started doing deep knee bends on camera, challenging the people in the studio to keep up with him. I only did one injection series on him and his body took hold of it. I didn’t have to continue to do treatments.”

Bee venom is also an effective treatment for chronic low back pain.<sup>54</sup> Clinical and experimental studies have demonstrated that bee venom and its active components can be used to treat a wide range of immunological and neurodegenerative diseases, such as Parkinson’s disease.

The mechanisms that make bee venom effective as an painkiller and anti-inflammatory agent have yet to be completely understood, but studies support Maiella’s assessment that bee venom modulates immune cells as well as glial cells, which are the support cells that feed and protect neurons.<sup>55</sup>

# Why CBD Skincare Is The Next Big Thing

## What is CBD?

You've probably heard the buzz in wellness circles about CBD - also known as cannabidiol. It's been used as a healing herb for thousands of years and its natural properties are just being rediscovered. CBD comes from the cannabis plant, but unlike the THC part of the plant, CBD has no intoxicating qualities. This means that CBD contains all the calming properties of the plant, in a fully legal formulation. Wellness gurus use it to calm racing minds, anxieties and soothe chronic pain.

## Are you happy with your skin?

**Eczema, psoriasis, rosacea** - CBD has early promising studies showing it soothes redness, inflammation and itchiness of these conditions, by uniquely binding to the body's own endocannabinoid system to calm and balance skin.

**Acne** - CBD may be particularly powerful for acne, both soothing the inflammation and redness of cystic acne, and helping regulate sebum production to reduce surface oiliness.

**Anti-ageing** - Because of its plant based properties, CBD is a powerful anti-oxidant, stronger than Vitamin C & E, that can help fight visible signs of ageing. The hydration of the oil provides rich moisturisation to boost CBD's balancing powers.

*"I've been a follower of CBD oil for a while but never used it in skincare. After using for just a week I feel my skin is much calmer already, amazing"*  
Charlotte S, Instagram Influencer

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Perhaps the most exciting application for bee venom is cancer. Laboratory studies suggest that melittin could reduce the propensity for non-small cell lung cancer to spread.<sup>3</sup> One of the most recent discoveries is that honeybee venom and melittin can suppress the growth of breast carcinoma cells by interfering with receptors on the cell surface.<sup>2</sup>

“Melittin rapidly kills cancer types,” says Worden. “Within 20 minutes it disrupts the chemical messengers that the cancer cells need to grow and divide, which is, of course, how cancer kills you. And it can completely destroy the cancer cell membrane within 60 minutes, punching holes in the outer membrane. This is big news in the research world.”

Melittin has even been found to effectively treat moderate to severe depression. In one study, volunteers with severe depression treated with melittin experienced either no depression or mild depression after six months, and absolutely no depression after 12 months.<sup>10</sup>

Bottom line, bee venom therapy works. “I think that it has to be approached with due respect,” says Rossi. “People need to have an EpiPen with them [all of Maiella and Worden’s patients carry an EpiPen], and they need to know how to be prepared for an allergic reaction. It is rare, but it would be a tragedy to develop a problem when you’re doing bee venom therapy on yourself in your bathroom.”

Despite its unusual nature, Rossi is unhesitating in her appreciation and enthusiasm for the therapy. “With bee venom, I feel like I am my own physician.”

### But don’t stings hurt?

“People are willing to have back surgery that might not work and leave them in chronic pain for the rest of their lives rather than do some exercises to treat their back problem,” Rossi observes. “Those are the same people who are like, ‘Oh, no, I could never sting myself with a bee.’”

“Yes, it hurts a lot. But it hurts a lot for 15 seconds and then it’s gone. Frankly, I think you must get some endorphins or something from a sting because there is a sort of peace afterwards that’s so good.”

With  
bee venom,  
I feel like I am  
my OWN  
physician

## Snakes and spiders, snails and scorpions

“Pharmaceutical gold,” that’s what venoms produced by a vast array of creatures—cobras, vipers, scorpions, spiders, tarantulas, centipedes, snails and toads—are being called. More and more powerful peptides and enzymes in toxins used by nature for killing prey and for bodily defense are undergoing preclinical and clinical development for treating everything from diabetes to multiple sclerosis, cancer and cardiovascular disease.<sup>1</sup>

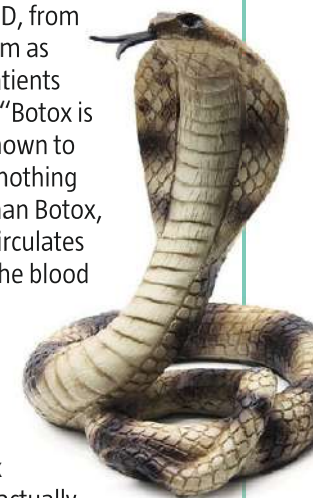
Venom peptides target a wide variety of protein channels and receptors in the human body. Cone snail venom peptides, for example, affect a wide range of mammalian ion channels and receptors associated with pain signaling.

Chlorotoxin isolated from the deathstalker scorpion binds to calcium-chloride channels affecting certain tumors.

The peptide toxin from the earth tiger tarantula irreversibly activates the capsaicin (heat-sensitive) ion channels in the human body and is a possible candidate for pain relief. Doctors are giving a drug derived from the venom of the Malayan pit viper, ancrod, to mitigate the damage caused by acute ischemic stroke.<sup>2</sup>

But not all venom applications are for dreaded diseases. Donese Worden, NMD, from Mesa AZ, also uses cobra venom as a replacement for Botox for patients worried about pesky wrinkles. “Botox is the most potent neurotoxin known to man,” says Worden, “There’s nothing that will kill brain cells faster than Botox, and now studies show that it circulates from cell to cell, going across the blood brain barrier.”

“I started doing research to keep my patients off of Botox, and I found a cobra venom that was being used topically to relax muscles just like Botox does. This particular venom is actually being used in clinical trials as an agent protecting neurons in the brain. So, if you want to fight wrinkles, it’s a lot better to use a topical cobra venom cream than Botox!”



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### RESOURCES

Emily Maiella, ND: [www.windhorsenaturopathic.com](http://www.windhorsenaturopathic.com)  
Donese Worden, NMD: [www.drworden.com](http://www.drworden.com)

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## THE NATURAL MEDICINE CASEBOOK

WDDTY offers practical, natural solutions to your most pressing health problems

## Natural remedies for angina

My 75-year-old mother has stable angina and takes medication for it, but still suffers chest pain when going up the stairs or walking. She'd love to be able to exercise more and not have to rely so much on her medication. Can you suggest any natural solutions?

T.S., via email

Typically described as a feeling of squeezing, heaviness, pressure or tightness, angina is a type of chest pain that develops when the heart muscles don't get enough oxygen. Often this happens when the arteries that supply oxygen-rich blood to the heart become rigid and narrowed—a process known as atherosclerosis.

Stable angina, the form your mother has, is the most common type and is generally predictable, coming on when the heart has to work harder such as during exercise or climbing stairs. Unstable angina is classed as a medical emergency as it's unpredictable and may signal a heart attack. Angina caused by spasms of the coronary arteries is known as variant angina.

Fortunately, natural medicine has plenty to offer when it comes to stable angina. Besides following a heart-healthy lifestyle that includes eating a balanced diet, not smoking, minimizing alcohol, maintaining a healthy weight and exercising regularly, here are some natural options found to alleviate angina. Crucially, many of them may help improve your mother's ability to exercise, which is so important for heart health.

Just make sure your mother is monitored by a doctor and seeks medical help immediately if she notices any worsening of her angina, or if symptoms don't go away within a few minutes of rest or medication.



## TRY TRADITIONAL CHINESE MEDICINE

Traditional Chinese herbs and techniques have proved effective in treating angina:

**Herbs.** *Salvia miltiorrhiza* (known as danshen or red sage) combined with conventional treatment was better than conventional treatment alone at reducing angina symptoms and the frequency of attacks in a review of 56 trials.<sup>11</sup> And the herbal remedy *suxiao jiu xin wan* was superior to the standard drug treatment nitroglycerin for angina in a review of 15 trials.<sup>12</sup>

**Acupuncture.** This needling technique can improve angina symptoms and electrocardiography (ECG) results (showing heart rhythm and electrical activity) and reduce the need for medication.<sup>13</sup>

**Acupressure.** Similar in principle to acupuncture but using physical pressure rather than needles, this technique appears to be just as effective as nitroglycerin, but works faster and comes without adverse effects.<sup>14</sup>

Visit [www.atcm.co.uk](http://www.atcm.co.uk) in the UK or [www.nccaom.org](http://www.nccaom.org) in the US to find a qualified practitioner who can tailor-make a treatment plan specifically for you.



## OPT FOR AMINO ACIDS

The amino acids L-carnitine and L-arginine can be helpful for angina. Taken as supplements, both appear to improve the ability of angina sufferers to exercise without chest pain or other symptoms.<sup>5</sup> In one study, 23

percent of patients became free of angina with L-carnitine compared to just 9 percent with a placebo.<sup>6</sup> Suggested dosages:

L-carnitine: 1 g two to three times daily; L-arginine: 2 g three times daily



## UP YOUR ANTIOXIDANTS

Supplementing with these antioxidants may be beneficial for angina:

**Coenzyme Q10.** Well-known for its heart-healthy effects, this vitamin-like substance was found to improve exercise tolerance as well as reduce angina attacks and medication use, although the results weren't statistically significant.<sup>15</sup>

**Suggested dosage:** 150 mg/day ubiquinol

**Vitamin E.** Low levels of vitamin E have been linked to angina, and some evidence suggests that supplements can have a small but significant protective effect.<sup>16</sup>

**Suggested dosage:** 50 mg/day was the dose used in the study, but higher dosages are commonly used

**Vitamin C.** Angina sufferers have been found to have lower levels of vitamin C,<sup>17</sup> and one study reported that vitamin C infusions were helpful for variant angina.<sup>18</sup>

**Suggested dosage:** 1–3 g/day





## CONSIDER OTHER SUPPLEMENTS

Several other nutritional supplements appear to be beneficial for angina:

**Magnesium.** This mineral can improve exercise tolerance, exercise-induced chest pain and quality of life in patients with coronary artery disease.<sup>11</sup>

**Suggested dosage:** 365 mg/day magnesium citrate

**Bromelain.** An enzyme derived from pineapple, bromelain has been found to minimize the severity of angina and control attacks.<sup>12</sup>

**Fish oil.** Those taking fish oil supplements saw a 40 percent reduction in angina attacks, while no change was seen in the placebo group.<sup>13</sup>

**Suggested dosage:** 10 g/day

## GO PLANT-BASED

A couple of individual case studies suggest that following a plant-based diet might alleviate angina.

In one, a 77-year-old woman (taking medication for angina) saw her symptoms more or less disappear one month after switching to a whole-food plant-based diet that included all vegetables, fruits, whole grains, potatoes, beans, legumes and nuts and excluded all animal-derived products, such as eggs, cow's milk, yogurt, chicken and beef. Her symptoms quickly returned when she resumed her previous diet.<sup>14</sup> Try adopting a plant-based diet for a few months to see if you notice an improvement.



## TRY MIND-BODY THERAPIES

Yoga and meditation both appear to be helpful for angina,<sup>15</sup> so try incorporating these or other mind-body techniques, such as tai chi or qigong, into your life.

## GET HELP FROM HAWTHORN

According to herbalist Meilyr James, owner of the Herbal Clinic in Swansea, Wales ([www.herbalclinic-swanea.co.uk](http://www.herbalclinic-swanea.co.uk)), the herb of choice for stable angina is hawthorn (*Crataegus monogyna*). "Hawthorn increases the strength of the heart muscle and improves the oxygen uptake by the heart," says James. "It has been shown to reduce atherosclerosis, the buildup of plaques in the artery walls, which plays a significant role in angina." In fact, research shows the herb can be effective for alleviating angina symptoms. Hawthorn is very safe, says James, and can be taken over a period of several months.

**How to take:** Make a decoction of the berries (see box) and drink one cup per day (sweetened with honey if desired)

You can also make tea using hawthorn leaves and flowers and combine it with other helpful herbs, such as:

**Motherwort (*Leonurus cardiaca*).** This herb is good for heart issues aggravated by anxiety, says James, and traditionally used to treat angina worsened by effort.

**Common lime (*Tilia europaea*).** This encourages dilation of the blood vessels, reduces atherosclerosis and is valuable for those who feel agitated, says James.

**How to take:** Combine equal parts of the dried herbs (hawthorn, motherwort and common lime).

Use 1 Tbsp per mug of boiling water and infuse for 10 minutes. Drink one mug per day.

Alternatively, a tincture of these herbs can be used in the following ratio:

Hawthorn (1:3 tincture) 50 mL  
Common lime (1:4 tincture) 25 mL  
Motherwort (1:4 tincture) 25 mL

**How to take:** combine in one bottle and take 40 drops three times daily in a little water



## Hawthorn decoction

- Soak 4 Tbsp of berries overnight in 4 cups of water.
- In the morning, bring them to boil, using the same water they were soaked in, and simmer for 20 minutes with the lid on.
- Strain the berries from the liquid. This should produce around 3 cups of liquid hawthorn decoction.
- Any additional decoction can be kept in the fridge and warmed to make a drink as needed.



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# Natural ways to boost sperm quality

My husband and I have been trying to conceive for over a year, and we've just found out he has low sperm motility, with no obvious cause. Are there any effective supplements he could take or anything else he could do to improve it?

T.L., via email

Sperm-related problems account for some 20 to 30 percent of infertility cases worldwide.<sup>1</sup>

Sperm motility refers to its ability to move efficiently—vital for it to travel through a woman's reproductive tract and reach and fertilize an egg. Sperm count or density (number of sperm), morphology (size and shape) and viscosity (consistency) are other important aspects of sperm quality for fertility, and terms you've probably seen on your husband's semen analysis report.

A huge variety of nutritional and lifestyle factors can affect sperm quality, so there's lots he can do to try to improve it. But female issues could potentially be playing a role too, so it's important to take a holistic view.

The best option would be for you and your husband to visit a naturopathic practitioner specializing in infertility, who can assess both of you in terms of your diet, lifestyle and medical history and recommend an individualized preconception plan.

British charity Foresight developed a comprehensive natural preconception plan with an impressive success rate that starts with hair mineral analysis. You send off a sample of your hair to test for mineral and heavy metal content, and you get a diet and supplement plan based on your results.

Sadly, the charity no longer exists, but there are several practitioners in the UK trained in Foresight's approach, some of whom offer online consultations (see below).

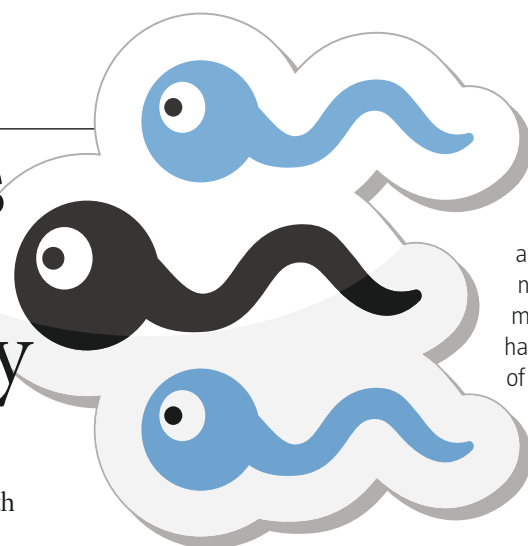
But if you want to know what's worked in scientific studies to improve sperm motility, and the dos and don'ts for healthy sperm, here's a handy guide you can pass to your husband.

## Foresight-trained practitioners

Kathleen Boyd: [www.birds-and-bees.co.uk](http://www.birds-and-bees.co.uk)

Eli Sarre: [www.wildfare.co.uk](http://www.wildfare.co.uk)

See [www.foresight-preconception.org.uk](http://www.foresight-preconception.org.uk) for a full list



## TRY SUPPLEMENTS

**Coenzyme q10.** Low levels of this antioxidant and energy-promoting nutrient have been found in infertile men,<sup>2</sup> and taking CoQ10 supplements has been found to improve several aspects of sperm quality including concentration, morphology, density and motility.<sup>3</sup>

**Suggested dosage: 100 mg ubiquinol three times/day**

**Zinc.** A lack of zinc has been linked to male infertility, and research suggests supplements can help.<sup>4</sup> In one study of men with poor sperm motility, those taking zinc supplements saw a significant improvement in progressive motility (sperm swimming in a mostly straight line or in very large circles) as well as sperm count and fertilizing capacity.<sup>5</sup>

**Suggested dosage: 60 mg/day plus 2 mg copper**

**Selenium.** Supplementing with this mineral improves sperm motility and the chances of successful conception, according to one study of men with reduced motility.<sup>6</sup>

**Suggested dosage: 100 mcg/day**

**Arginine.** Essential for normal sperm development,<sup>7</sup> this amino acid appears to be beneficial for sperm motility.<sup>8</sup>

**Suggested dosage: 4 g/day**

**L-carnitine and L-acetylcarnitine.**

These micronutrients used either individually or together can significantly improve sperm motility.<sup>9</sup>

**Suggested dosage: 3 g/day**



## GET HELP FROM HERBS

**Ginseng.** Korean red ginseng, also known as *Panax ginseng* C.A. Meyer, has been found to boost sperm motility as well as sperm count and morphology.<sup>10</sup>

**Suggested dosage: 4 g/day**

**Maca.** *Lepidium meyenii*, or maca, can improve several aspects of sperm quality, including motility, in both healthy and infertile men.<sup>11</sup>

**Suggested dosage: 1,500–3,000 mg/day**

## FOLLOW A MEDITERRANEAN DIET

Men who closely stick to a Mediterranean diet, which focuses on fresh fruits and vegetables, beans, whole grains, nuts, herbs, spices and healthy fats like olive oil, are less likely to have abnormal sperm, according to one study. Those who scored the lowest on their adherence to a Mediterranean diet were two and a half times more likely to have poor sperm concentration, count and motility compared to those who scored the highest.<sup>12</sup> But choose organic produce whenever possible. Another study found that higher intake of fruits and vegetables with high amounts of pesticides is associated with poorer sperm quality.<sup>13</sup>



## CUT OUT THE CHEMICALS

A vast range of environmental contaminants we come into contact with daily can have a detrimental impact on sperm motility and other measures of sperm quality, including pesticides, phthalates, bisphenol A and heavy metals.<sup>11</sup> Here are a few ways to minimize your exposures, but see the “Healthy Home” guides in *WDDTY*’s January 2019 to January 2020 issues for more detailed information.

**Eat organic produce whenever you can.** If you’re on a budget, check out the ‘dirty dozen’ lists published by the Environmental Working Group ([www.ewg.org](http://www.ewg.org)) in the US and the Pesticide Action Network in the UK ([www.pan-uk.org](http://www.pan-uk.org)) for the top 12

fruits and vegetables with the most pesticides. If you eat these, make sure they’re organic.

**Get a water filter.** The ZeroWater jug filter is capable of removing virtually all dissolved solids from tap water, including heavy metals.



**Opt for natural, nontoxic cleaning products, cosmetics and toiletries.** Sites like [www.lovelula.com](http://www.lovelula.com), [www.naturisimo.com](http://www.naturisimo.com), [www.biggreensmile.com](http://www.biggreensmile.com), [www.vitacost.com](http://www.vitacost.com) and [www.thrivemarket.com](http://www.thrivemarket.com) are good places to look.

**Choose glass over plastic for food storage.** If you buy food and drinks in plastic packaging, transfer it to a plastic-free container when you get home.

**Avoid aluminum and Teflon cookware,** and use parchment paper rather than aluminum foil.

**Opt for fresh, whole foods** as much as possible over processed and canned foods, and homemade meals rather than takeaways. They’re less likely to be contaminated with chemicals from packaging, storage or preparation.



## DITCH THE DRUGS

Certain medications, such as aspirin, acetaminophen (paracetamol) and proton pump inhibitors can affect sperm motility,<sup>12</sup> so try to find an alternative whenever possible. Recreational drugs, including marijuana, can also affect motility.



## LOOK AT YOUR LIFESTYLE

There are lots of simple lifestyle changes you can make to improve the quality of your sperm.

**Avoid alcohol.** Drinking is known to reduce sperm motility; giving it up reverses the effect.<sup>13</sup>

**Stop smoking.** Even moderate cigarette smoking can have a significant effect on sperm motility.<sup>14</sup>

**Get off your bike.** While some forms of exercise can be good for sperm, provided it’s not too intensive,<sup>15</sup> cycling, even for just an hour and a half a week, may have a detrimental effect.<sup>16</sup>

**Keep cool.** Anything that heats the testicles can damage sperm,<sup>17</sup> so avoid hot baths, saunas, hot tubs, tight underwear and putting your laptop directly on your lap.

**Minimize mobile phone use.** The more you use your mobile, the more you harm your sperm.<sup>18</sup> At the very least, don’t carry your phone in your pocket.<sup>19</sup>

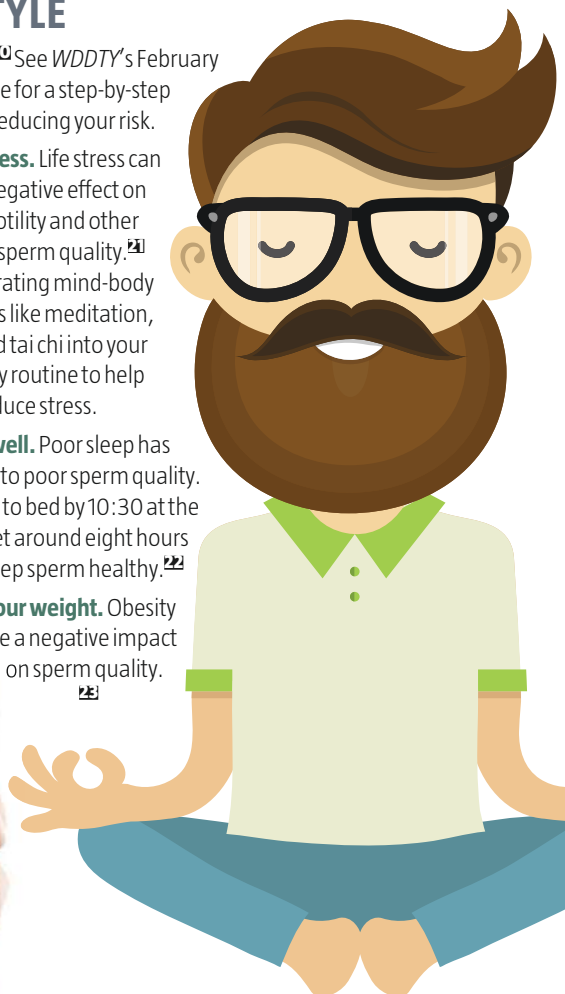
**Watch out for Wi-Fi.** Wireless internet is another form of electromagnetic radiation that can be harmful to sperm, especially sperm

motility.<sup>20</sup> See *WDDTY*’s February 2020 issue for a step-by-step guide to reducing your risk.

**Ease stress.** Life stress can have a negative effect on sperm motility and other aspects of sperm quality.<sup>21</sup> Try incorporating mind-body techniques like meditation, yoga and tai chi into your everyday routine to help reduce stress.

**Sleep well.** Poor sleep has been linked to poor sperm quality. Aim to go to bed by 10:30 at the latest and get around eight hours a night to keep sperm healthy.<sup>22</sup>

**Watch your weight.** Obesity can have a negative impact on sperm quality.<sup>23</sup>



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## Good breeding

Holistic vet Rohini Sathish shares alternative and complementary treatments for the womb infection pyometra in dogs

**Q** Our vet has advised us to get our five-year-old dog, Lucy, spayed. We wanted to have her puppies but never got around to breeding her. The vet says she may end up with a serious condition called pyometra. Can you suggest any holistic options?

A.B. via email

**A** Pyometra is a life-threatening infection of the uterus that typically affects older, intact (unspayed) female dogs. It can occur in cats too, although it's much more common in dogs.

The name literally means pus in the uterus (womb). It's not unusual for dogs to get a bacterial infection in the uterus from time to time, but if there is a buildup of the uterine lining without a pregnancy, the infection can persist and become pyometra.

The use of hormones like estrogens to control when a dog goes into season/heat or to end an unwanted pregnancy can increase the risk of pyometra. Female dogs raised with intact males but not allowed to breed when they come into season may have an increased risk of pyometra when they are older. Elderly unspayed females that have never had pups are also predisposed to it.

Symptoms of pyometra include lethargy, a lack of appetite, drinking and urinating more, vomiting, excessive panting and a high temperature (104°F/40°C and above). You may also notice an obvious swelling of the abdomen as the uterus becomes distended with pus.

Pyometra can be 'open' or 'closed.' In the case of open pyometra, the womb entrance is open, meaning you are likely to notice smelly discharge from your dog's vulva. With closed pyometra, the womb entrance is shut, so you are unlikely to see any discharge.

The closed form is much more serious due to the risk of rupture. If left undiagnosed, dogs with closed pyometra can die within 14–21 hours from the first clinical signs.

### Diagnosis

Pyometra is an emergency, so you should take your dog to the vet immediately if she is showing any signs. It's usually diagnosed on the basis of the symptoms alone, but an ultrasound scan or X-ray may be necessary to confirm the condition.

Leukocytosis (a large number of white blood cells) is often seen in closed pyometra, so your vet may recommend a blood test to check leukocyte numbers. Pyometra should also be differentiated from metritis, a uterine infection that occurs in dogs that have just had pups.

### Conventional treatment

Ovariohysterectomy (OVH), or spaying, is the treatment of choice if your pet has pyometra. The success rate is quite high if your pet is diagnosed quickly after the symptoms develop.

I have successfully performed many of these operations and have had no problems, even in elderly pets that are otherwise healthy. In most animals, the distended uterus is at least four to five times the size of a normal uterus.

Intravenous fluid therapy prior to surgery is very beneficial, especially if there is kidney dysfunction due to the increased thirst.

A course of antibiotics is usually prescribed to combat the infection. A combination of prostaglandins and antibiotics have been tried in cases where surgery is not possible due to some other



**Pyometra is a life-threatening infection of the uterus**

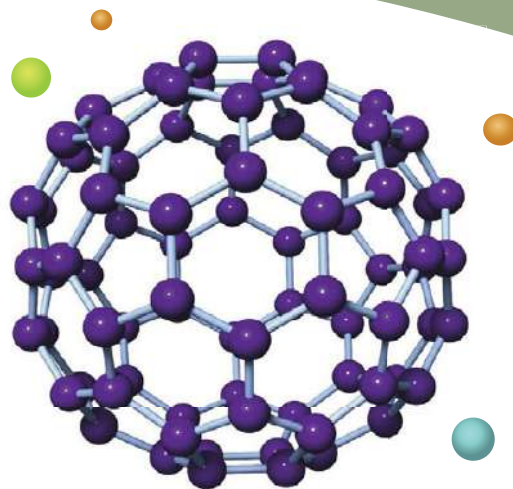
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serious health condition or because the dog is used for breeding. But these are not always successful, and most pets have required spaying at some point.

More recently, a drug called aglepristone has been tried in pyometra, with limited success.

## Alternatives

### Ovary-sparing ovariectomy

If you don't intend to breed your pet but want to keep her hormones functioning as nature intended, then it is a good idea to get her operated on by a vet who is willing to remove just your dog's uterus and leave her ovaries inside her. This will prevent pyometra.

The cost of performing a routine OVH or an ovary-sparing spay is much less than the cost of surgery for pyometra.

Observing your pet and monitoring when she goes into season is also very important to enable early diagnosis and treatment.

Remember, though, that even if just a small bit of the uterus is left behind while performing a full OVH or an ovary-sparing hysterectomy, your dog can develop a "stump pyometra," where an infection develops inside the remaining stump. To avoid this, make sure you get an experienced surgeon to operate on your dog.

## Uterine lavage

A newer treatment option, this involves using a transcervical endoscopic catheter (used routinely for artificial insemination) to infuse warm saline containing prostaglandin F-2alpha into the uterus. An ultrasound is then performed every two days to check for fluid in the uterus. If any fluid is detected, the process is repeated.

This procedure may resolve pyometra the first time around, but it's possible your dog may develop it again in the future after her next season.

## Soothing aloe and yarrow gel

This homemade gel can be gently massaged around the suture line and over the abdomen of your dog in the post-op period. Aloe and yarrow both have analgesic and anti-inflammatory properties and contain small amounts of the painkiller salicylic acid (the active ingredient in aspirin).

**4 oz (115 g) yarrow leaves and flowers**  
**6 Tbsp aloe vera gel**  
**½ tsp xanthan gum (a natural thickener available online)**

- 1 Place the yarrow leaves and flowers in a mortar and bruise them with a pestle to release some of the precious oils. Place in a cup, add boiling water and steep overnight until cool.
- 2 Strain the liquid and pour into a blender with the aloe vera gel and the xanthan gum. Blend until a smooth gel is formed. Pour the gel into an airtight glass jar and label.
- 3 Store in the fridge for up to one month (not for internal use).
- 4 Apply topically and massage gently to affected areas, avoiding the face and genitals.

## Garlic canine biscuits

If your dog has a poor appetite, you can feed her simple chicken broth or try these garlic canine biscuits.

**4 oz (115 g) oatmeal**  
**3.5 oz (100 g) self-rising flour**  
**2 cloves garlic, ground to a paste**  
**1 Tbsp honey**

- 1 Preheat oven to 375°F/190°C. Grease an 8 × 11 in (20 × 28 cm) baking sheet.
- 2 Mix together all the ingredients in a large bowl to form a soft dough. Spread mixture ½ inch (1 cm) deep on the baking tray. Bake for 25–30 minutes until just firm.
- 3 Remove from the oven and let cool. Cut into bite-sized squares.
- 4 Keep in an airtight, labeled container in the fridge for up to five days or freeze for up to one month.

## Homeopathy

The following homeopathic remedies can be helpful for pyometra:

**Aconite 1M.** Give this remedy as soon as your dog is even slightly off color, 6–8 weeks after her season.

Crush up the dry pellets and place them directly on the tongue or gums.

**Hepar Sulphuris 6c or 30C.** Dose 3–4 times daily for 4–7 days as long as she is improving. Try this remedy only if your dog has open pyometra and she is off color, very thirsty, not eating normally and has an obvious foul-smelling dark-red vaginal discharge, especially a few weeks after her season. If she is not improving at all or getting worse (e.g. more lethargic, stops eating entirely), rush her to your vet.

**Carduus marianus 6c along with Berberis 6c.** These remedies are effective in supporting the liver and kidneys during the infection. Give three times daily for two weeks as a liquid. Fill an amber bottle with distilled water and add 4 pellets of the remedy, allowing it to dissolve for 30 minutes. Use separate bottles for each remedy.

If you and your vet decide that spaying your dog is the best option, then consider these two remedies following her surgery:

**Arnica 1M.** Give immediately post-op to help with the physical and emotional trauma. Give once every hour for three doses, followed by Bellis perennis.

**Bellis perennis 1M.** Give every hour for three doses to alleviate the deep abdominal muscle trauma and pain.

## REFERENCES

- 1 J Am Vet Med Assoc, 1984; 184: 1255–8
- 2 J Am Vet Med Assoc, 1973; 163: 290–2



**Rohini Sathish, DVM, MSC, MRCVS, MHAO, MCIVT**

Dr Sathish is an award-winning holistic vet with 22 years of experience. After training in acupuncture, acupressure, energy healing, Emotional Freedom Technique (EFT), animal communication and herbal medicine, she now actively integrates conventional veterinary treatments with complementary therapies and is co-author of *You Can Heal Your Pet* (Hay House UK, 2015). You can contact Dr Sathish at her website: [www.rohinisholisticvetcare.com](http://www.rohinisholisticvetcare.com)

# THE HEALTHY **HOT** LIST

Looking for a healthy and natural gift for your Valentine? Joanna Evans rounds up her top picks



## UNCOMMON SCENTS HIRAM GREEN

Lustre Eau de Parfum, \$165/€155 (1.7fl oz/50 mL)

In the UK: [www.hiramgreen.com](http://www.hiramgreen.com)

In the US: [www.luckyscent.com](http://www.luckyscent.com)

Most perfumes contain a cocktail of noxious synthetic chemicals, but this one is 100 percent natural and handcrafted in small batches by luxury perfume maker Hiram Green in the Netherlands. It's a radiant rose fragrance with notes of citrus, orris and frankincense that's unisex, vegan and ideal for Valentine's Day. And there are six other all-natural Hiram Green fragrances to choose from, from woody Hyde to violet-themed Vivacious.

## A SOFT TOUCH TEKLA

Hooded bathrobe in Stella Pink, \$185/£149

[www.teklafabrics.com](http://www.teklafabrics.com)

Copenhagen-based natural textile company Tekla has a super soft and luxurious range of unisex bathrobes, all woven from the finest combed 100 percent organic cotton and certified by textile industry watchdog Oeko-Tex to be free of harmful chemicals. Choose from two styles (Classic or Hooded), three sizes and a variety of colors, such as this pretty pale pink.



## MY CUP OF TEA PUKKA

Love tea, \$5.47/£2.99 (20 sachets)

In the UK: [www.naturisimo.com](http://www.naturisimo.com)

In the US: [www.iherb.com](http://www.iherb.com)

This heart-warming herbal tea is an Ayurvedic blend of chamomile, elderflower, rose, lavender, licorice, lime flower and marigold that can be drunk day or night to relax and soothe. All the ingredients are ethically sourced and organically grown, and the tea comes in individual plastic-free tea bags and recyclable envelopes.





### SAY IT WITH ROSES ALTEYA ORGANICS

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[www.lovelula.com](http://www.lovelula.com)

Featuring Alteya's signature rose oil from the company's own rose fields and state-of-the-art skincare manufacturing facility in the heart of Bulgaria's Rose Valley, this facial skincare set includes a nourishing day moisturizer, a repairing night moisturizer and an intensive anti-aging eye cream—all 100 percent natural and certified organic. Designed to support and protect the skin, the set is a pleasure to use and smells divine.

### IT'S A WRAP CREATIONS BY JENNIE LEE

Zero Waste Cutlery Wrap, White Heart Print, \$24.92/£19.50

[www.etsy.com](http://www.etsy.com)

Perfect for your eco-conscious significant other, this cutlery set includes a bamboo knife, fork and two spoons, a stainless-steel straw and a straw cleaner, all wrapped up in a cute handmade heart-print pouch. It's ideal for taking with you when you eat out on the go or get a takeaway so you can say no to plastic straws and utensils.



### SPICE IT UP FORREST & LOVE

SELO Sensual Love Aroma Cushion,  
\$34/£25

[www.lovelula.com](http://www.lovelula.com)

Said to boost libido and enhance sensuality and attraction between lovers, this handmade cushion is naturally scented with dried herbs, spices and essential oils including black pepper, cardamom, rosewood and ylang ylang. The inner cover is 100 percent muslin and the outer is azo-free dyed cotton, which means no potentially toxic dyes were used. Place it on your bed to enjoy the stimulating aroma.

We're only just beginning to understand spontaneous remission

# When cancer goes away

Bryan Hubbard

**L**et's face it, you're complicated. Much as scientists like to put us on straight tracks that lead to measurable and inevitable endpoints, we curve, dip, bend and even go into reverse.

If we're unlucky enough to develop cancer, the disease doesn't always follow its inexorable path from stage I to stage IV when it's not successfully treated. Instead, it sometimes just goes away.

This strange and very unscientific phenomenon, known as spontaneous remission, was first reported by doctors more than 130 years ago. Since then, nearly 4,000 cases of spontaneous remission from end-stage cancer have been reported in the medical literature.

The Institute of Noetic Sciences, which carried out a review in 1993, thinks there are many more that have gone unreported, often because the patient disappears from medicine's gaze.

But why does it happen? Holistic cancer specialist Bernie Siegel used to challenge his patients to finally express the things they'd never said or do the creative things they'd always held back on. We're emotional, physical and spiritual beings, and each aspect of us has to be expressed and fulfilled, he reasoned. If we suppress any part of the triad, we can get sick.

When Kelly Turner was studying for her degree in psychotherapy, she became fascinated by spontaneous remission, but also puzzled as to why nobody was discussing the phenomenon, let alone researching it.

After graduating, she decided to dive deeper. She interviewed around 1,500 people who had experienced "radical remission," as she calls it, which she has defined as anyone with end-stage cancer who either never had

conventional medical treatment or could not be helped by it, and yet fully healed.

In those interviews, she picked up common threads that were shared by many of the survivors. She discovered there were nine essential ones, which she outlined in her book, *Radical Remission* (HarperOne, 2015). As Bernie Siegel also found, they are about expression and taking control, physically, emotionally and spiritually.

In the physical segment of the triad, a radical change of diet is key. Out go the processed foods and drinks dripping in sugar, and instead vegetables, fruits and whole grains fill the plate.

Making sure we're properly nourished with the right supplements and herbs that also spark the immune system into cancer-fighting action is the second factor in the physical sphere, and the third is taking charge of your health. In other words, get in the driver's seat and don't be a passive recipient of medical advice and treatment.

But we don't live by bread alone, even if it is gluten free. We're also a seething mass of emotions, and these can have as direct an influence on our health as anything we eat. Turner found that the cancer survivors she interviewed had successfully 'released' their emotions—either through a therapy or just getting honest with those around them.

Then there's the half-empty, half-full outlook on life. It's been noticed by other researchers that people who maintain positive outlooks suffer fewer illnesses than those of a more pessimistic mien, and Turner discovered the same thing among her cancer survivors.

As a final component to emotional health, trusting our intuition also plays a key role—listening to, and acting on, our own still, small voice and giving less significance to others and their opinions.

Spiritually, we need to make a connection to something bigger and greater than ourselves. It could be to God, but it could also be to an ideal, to humanity or our community. Leading on from that, we need better reasons to be alive. We need a purpose, whether that's in our work or relationships; in short, we should be looking to make the world, or those closest around us, better for us having been alive.

Finally, we should be connecting more socially. That could be joining a community or even a local book club, but it involves supporting, and being supported by, others.

These are a mighty nine, and Turner is continuing her research with Harvard T H Chan School of Public Health.

Some oncologists dismiss the idea of spontaneous remission and maintain that cancer is a physiological process that needs a physical factor to end it. This may be so, but Turner has outlined some non-physical factors that trigger the physiological reversal.

See, you are complicated.



**We should be looking to make the world, or those closest around us, better for us having been alive**



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