Five-and-a-half years ago, in November of 2004, I found myself in a desperate and devasting situation. I could barely hold up my head, due to swelling in my brain from a central nervous system infection. My cognitive function was severely impaired, and I could barely walk due to excruciating pain in my legs, ankles and feet.

It was providence that led me to the knowledgeable and compassionate doctor who was able to recognize what no other previous doctor had been able to do. Dr. Warren Levin diagnosed me with Lyme disease and provided the treatment that saved my life.

My heart swells with gratitude for Dr. Levin’s response to my situation and for his experience with Lyme disease and other chronic infec-
tions. Dr. Levin has for many years engaged in continuing research and study in the pur-
suit of better treatment out-
comes for his patients. He has successfully implemented many innovative methods in his med-
cal practice.

Dr. Levin opened the first Holistic Health Center in New York City in 1974, and his defense of Complementary Medicine for over fourteen years before the Office of Professional Conduct was successfully in 1994, leading to the passing of NY State’s Alternative Medical Practice Act, and the ignominious defeat of the infamous Victor Herbert, MD, the self-appointed Chief Quackbuster of Mainstream Medicine. Since then, Dr. Levin has been publicly referred to as the Dean of Alternative Medicine on the East Coast.

Tina: Dr. Levin, as always, it's such a pleasure to speak with you. What medical gems of knowledge will you be sharing with us today?

Dr. Levin: Thank you, Tina. It's a pleasure for me, also, since you consulted me early in my short stay in Arizona, and at that time the State’s Health Department had seventeen total cases of Lyme disease in Arizona for the entire year of 2003. I found seventeen cases in my first six months in practice, with no patient base to start from, and fortunately, you were an activist. Hopefully, together we have helped to change their focus. What I'd like to do in this interview is that there is a growing interest within the mainstream medical community in neurotransmitters and the role they play in mental illness. As usual, Complementary physicians have been way ahead of the field, because of our concern for the built-in fail-
ure rate of Conventional Psychiatry’s approach, and the powerful alternatives available that combine the basic princi-
bles of OrthoMolecular Psychiatry, (a term first created by the genius Linus Pauling, PhD as the title for an article in Science Magazine in 1958), and Biochemical Individuality as the title of a book published by another great biochemist of the 20th century - Roger Williams. The most concise expression of those two combined concepts is embodied in a beautiful quota-
tion from a relatively unknown scholar of the 19th century, Augustus Pugin. “If the human brain were simple enough that we could under-
stand it, we would be so simple [minded] that we couldn't help it.”

Going back in time, the big breakthrough in psychiatry came from Freud coming up with theories about mental ill-
ness through his very time-con-
suming and often complicated process. Even when I was in medical school, his theories were still the major paradigm, but some where between then and now behavioralism came into play. Freud said that you cannot change your behavior until you understand why you're behav-
ing that way. The behaviorists said that if you change your behavior intentionally and maintain the change, your brain will convert and act that way by itself. I certainly think that behaviorism is a more efficient method than analysis.

All sorts of methods came about to help people change their attitudes, behav-
iors and their basic views of life. Still, therapists are con-
stantly trying to make this process easier and more help-
ful. Then the pharmaceutical industry came into the picture. Again, when I was in medical training, we did not have any tranquilizers or anti-depres-
sants. While I was between my junior and senior years in med-
ical school, I worked in one of the largest insane asylums in the country, Byberry Hospital outside of Philadelphia, Pennsylvania.

My job was to conduct the physical examinations of schizophrenic patients, who were living in horrendous con-
ditions – worse than being in jail – and then to follow them to see how they responded to Thorazine, which was the very first anti-psychotic drug. Now the success of that treatment with Thorazine is testified to by the fact that Byberry is basically closed down. What that means is that the people who had been forcibly institutional-
ized at Byberry, those who were unable to care for them-
selves and who were risks to themselves and society, were eventually converted into mem-
bers of that society. They actu-
ally became able to live outside of the abnormal conditions in the hospital, even though they weren't completely healthy or well. They were not happy or healthy, but they could manage on their own and be able to maintain their jobs.

So, due to this success with the use of Thorazine, the drug-ori-
treatedment of psychiatric disorders was born. After that, I think the next thing that came along were the so-called “uppers”, the use of psychiatric drugs. The first to come along were the barbiturates, Miltown (Meprobamate). With the “downers” and “uppers”, the use of psychiatric drugs for socially happy pur-
poses began, with healthy peo-
ple taking the drugs to feel good and get either high with amphetamines (by prescription only of course), or to zone out with prescribed anti-depressants. Unfortunately, we have gone on from there.

What I think is now most horrifying is the idea that we are giving children of younger and younger ages psy-
chotropic drugs to make them conform to somebody’s stand-
ards of acceptable behavior. Ritalin was the first that I am aware of that was used specifically for Attention Deficit Hyperactivity Disorder (ADHD), and it continues to be a mainstay, along with the other class of “uppers” - the Amphetamines. As an example of our continuing ignorance, we still do not understand why nurses upperclass learn the hyperac-
tive kids, and the doctors also work hard, basically to get them *wound up.*

It is interesting to note that the pharmacological action of Ritalin is identical to that of cocaine, except that it has a slower onset and is of longer duration. So, with Ritalin, you get the same effect, but it is delayed and is longer-acting. At the same time that we tell kids to stay away from drugs like cocaine, with the other hand, we give them these cocaine-like drugs. I use a dif-
f erent definition of ADHD that I picked up from one of my colleagues, Mary Ann Block, DO. She said it stands for: “Another Doctor Handing out Drugs.”

Many of the medicina-
tions that are being used today are from a group of drugs in which they don’t really know the mechanism of the action of these psychotropic drugs. The literature isn’t certain and exactly where it works in the brain isn’t certain, either. However, we give it to people merely because “it works.” Although we have no idea of what's going to happen after many years of taking these drugs, they are prescribed any-
way. This results in the fact that we are truly a drugged society, and the people who are responsible for bringing this about support each other by making up new diagnostic codes for mental disorders. It appears that as soon as they make one up, they have a drug ready for treatment.

I'll give you an exam-
ple: PMS has been given a fancy name now -- “Premenstrual Dyshoric Disorder.” I laughed when I heard it called pre-menstrual syndrome. Although it is hor-
monal in nature, it’s no longer treated with hormones; it’s now treated with psychotropic drugs. Moving on to depres-
sion, one of the really sad things about this whole drug treatment scenario is that peo-
lies often do feel better with the newer drugs (the gen-
el class of “reuptake inhibitors”), but unfortunately, that feeling doesn’t last. So, they use a little more, which helps again, and then it wears off and they go on to take a higher dose. They eventually run into total resistance in which they don’t get any benefit out of it, or they get side effects that are worse than what they were treating. Sometimes, patients cannot afford to pay for the medication, because the insurance companies won't con-
tinue to provide insurance cov-
erage. In any case, every peo-
ple try to stop taking the drugs, they can’t stop taking them due to the immense side effects caused by stopping. Thus, stopping the drugs abruptly causes them to crash.

A really unfortunate aspect in dealing with depres-
sion and marital relationships is that two of the most important side effects of the class of drugs that is most prescribed for depression now – “Dr. Levin” ...cont’d pg 8
"Come and go with me...to My Father's house, to My Father's house. Come and go with me to My Father's house where there's love, love, love." 

These are the words of a little lullaby song we used to sing. The next verses are the same with the words, "where there's joy, joy, joy," and then "where there's peace, peace, peace."

We all long for that place where we are loved unconditionally. However, in contrast, we find many conditions where the love of God the Father, hasn't yet reached. How about your heart? Is it secure, in the truth that Father God loves you? Or do you still feel like an orphan?

Here is a little test - like when you are in a mall and you see the sign "You are here!" with a little red dot. Where do you find yourself in the lists below?

AN ORPHAN HEART

1. You see God as judge.
2. You strive for praise & acceptance.
3. You re-justify by comparing yourself with others.
4. Accusing and critical - you make others look bad so that you can look good.
5. You must be right - you get easily hurt and close off your emotions.
6. You see authority as a source of pain/anger. You distrust them over you and lack submission.

HEART OF A SON

1. You see God as your loving father.
2. You feel totally accepted in God's love & grace.
3. You know you are radically favored and greatly loved by God.
4. You seek to restore others in love and honor.
5. Accountable and humble in receiving instruction when confronted.
6. You honor and trust those who God has put in a leadership role in your life.

OK - so perhaps you identify with some of the items in the orphan heart column. The worst thing you could do is throw up your hands and take that as condemnation. The whole point of this little test is to identify where our hearts have wandered, or have never been tethered, to the heart of God. Maybe you lived with a father or mother who abused or neglected you. Or maybe you never had a mother or father active in your life.

If you are one of the fortunate ones who can fully identify with the Heart of a Son, then you will find your DNA to reach out to those who are yet unaware of God's love; or perhaps actually orphans.

One example is the Tacy family who adopted Michael, a homeless young man of another race, which the movie The Blindside was based on. They literally said, "come and go with me" like the little song, and brought him into their family. It took a while to earn his love and trust. Leigh Ann shares in the book Be A Heartbeat, that she would go into the kids' rooms and kiss them good night and say, "I love you." After Michael moved in she would say it night after night for months without a reply. Then one night, in the dark, the quiet response, "I love you, too". Close to home, for me, is being able to participate in the ongoing joy of the friends who adopted Shosha, a little girl from an orphanage in China several years ago. Just last week, they completed their journey to bring home Joshua Joseph, a baby they adopted from a Taiwan orphanage.

How can families love a baby they didn't give birth to? Perhaps even a child of another race?

Doesn't it sound like God - to desire a child to receive salvation from loneliness, to have his needs for security and identity met? In fact, the Bible reveals the first adoption when Moses was brought into the very palace of the Pharaoh who desired his death. Likewise, we are redeemed from destruction, and brought into the house of God when we accept Jesus Christ as our Lord, and learn to live in His love. In Romans 8:15-17 we are told that, "You received the Spirit of adoption by whom you cry out Abba, Father. The Spirit Himself bears witness with our spirit that we are children of God." ...And God takes great care of His kids!!!!
From Roadblocks to Recovery:  LIA Conference Unites Practitioners and Patients and Offers Hope

Part 2

by Scott Forsgren

The first part of this article was presented in last month’s Public Health Alert and is available online at http://www.PublicHealthAlert.org. In Part 2, we continue with a review of the following:

- **A Comprehensive Holistic Approach to Healing the “Tough” Ones** (Andrea Libutti, MD)

  - Digging Deeper into Lyme and Autism by Identifying the Emotional Trauma Behind These Conditions (Dr. Gilbert Renaud, PhD and Dr. Jorge Renaud, PhD)
  - “Tough” Ones (Andrea Libutti, MD)

- **Utilizing Plant Stem Cells and Embryonic Phytotherapy** (Dr. Toby Watkinson, DC)

- **Aerobic and Anaerobic Fuzzy Immuno Reactivity** (Dr. Kenneth Stoller, MD, FACHM)

- **A Comprehensive Holistic Approach to Healing the Autism Spectrum Disorder** (Dr. Dietrich Klinghardt, MD, PhD)

- **The Judicious Use of Nutrients** (Scott Forsgren)

- **The Environmental Working Group (http://www.ewg.org)**

- **Utilizing Plant Stem Cells and Embryonic Phytotherapy**

- **Aerobic and Anaerobic Fuzzy Immuno Reactivity**

- **A Comprehensive Holistic Approach to Healing the Autism Spectrum Disorder**

- **A Comprehensive Holistic Approach to Healing the “Tough” Ones**

  - Andrea Libutti, MD (http://www.SpectrumHealingCenter.com) has personal experience with ASD as she has helped her own son emerge from autism. Her pursuit to help her son over the past four years has had the side effect of being able to help many other children on the spectrum. From her work with the great autism doctors and autism moms, she has found a number of promising therapies.

  - Libutti stated “our environment is getting more and more toxic every year - exponentially increasing - and autism happens to be one of the bad manifestations of this”. The Environmental Working Group (http://www.ewg.org) published their “Body Burden” report in 2005 and looked at random umbilical cord blood samples. They tested for 400 chemicals and found 287 in all samples with 207 carcinogenic or neurotoxic chemicals. ASD children are compromised from birth.

  - Pesticides, heavy metals, chemicals (from furniture, carpets, paints, clothing, and mattresses), poor indoor air quality, mold, vaccines, and electromoog are all environmental toxins. All children are impacted by our environment, but some children are more susceptible to damage as a result of their genetic backdrop.

  - Libutti considers three core issues in autism. Those are neurotoxicity and inflammation, the crippled immune system, and impaired detoxification. Neurotoxicity looks at infections, chemicals, pesticides, and heavy metals. Chronic pathogenic infections such as Lyme, co-infections, yeast, viruses, parasites, and bacteria all cripple the immune system and further lead to allergies to food, chemicals, and things in the air.

  - A treatment approach includes eliminating toxins that are coming in, increasing the toxins that are being removed by supporting detoxification, addressing infectious burden, supporting the immune system, and helping the body return to homeostasis.

  - Her comprehensive approach includes biochemical interventions such as nutrients, diet changes, IVs. Energetic inter-ventions such as homeopathy, acupuncture, lasers, cranial-sacral, and chiropractic are used. Spiritual well-being is also considered and may be the most important.

  - Organic, non-GMO foods are critical. Animals that were fed GMO food for three months developed kidney and liver damage. Teflon should be avoided and only stainless, glass, or ceramic should be used for cooking. Safer plastic options should be employed and microwaves should be avoided. Diet should generally start with a GFCF allergen-free diet. The specific-carbohydrate diet (SCD) has been helpful. Only organic, real food should be consumed. Most kids need minerals, essential fatty acids, Vitamin C, Vitamin D, and probiotics. Home cleaning supplies and personal care products should be clean.

  - Electromagnetic fields (EMF) reduce the body’s ability to disrupt and detoxify the blood-brain barrier. Libutti suggests getting rid of all cord- less phones and turning off wireless internet at night. Cell phones should be avoided.

  - Libutti has found the “PK Protocol” helpful in addressing neurotoxicity as it helps to rehabilitate the cell membrane and helps nutrients get into cells and toxins to be removed. Phosphatidylcholine repairs cell membranes while glutathione detoxifies cells and supports the immune system. Libutti employs orthomolecular medicine following the teachings of Linus Pauling, Abram Hoffer, and Jonathan Wright. Vitamin C is in high doses, B vitamins, minerals, and other nutrients may be used as oral and IV nutrients. There are orthomolecular protocols for infections, allergies, asthma, CFS, and heavy metal toxicity.

  - On the homotoxicology front, Libutti utilizes products from HVS Laboratories such as Adaptascope which supports the body’s stress response, Biosode which supports the organs, and Detoxosode which helps the body to remove any offending agents. These are combined with drainage remedies to help the body detoxify. NAET can be helpful, but often holds better in higher-functioning children. Laser Energetic Detoxus (LED) from Lee Cowden, MD can help the body to release specific toxins.

  - Quantum Neurology is a promising modality. Inherited emo- tional trauma is a significant factor for many kids and classi- cal homotoxicology can be very helpful. Libutti suggested that quantum physics explains the power of prayer and that retraining our brains in this direction is critically important.

- **“LIAF” …cont’d pg 4**
The body is controlled by the "automatic brain" which keeps us alive from moment to moment. It is a vast network of nervous system centers that together regulate and coordinate the body's functions, from breathing and heart rate to digestion and body temperature. The brainstem, which is the most evolutionarily ancient part of the brain, is responsible for basic survival functions such as heart rate, blood pressure, and breathing. The brainstem also contains centers that regulate sleep and wakefulness, as well as the body's response to stress, known as the fight-or-flight response. Understanding how the brain functions and how it can be affected by disease is crucial to improving patient outcomes and quality of life.

"LIAF"... cont'd from pg 3

The psychological and emotional conflicts of the parents become the biological conflict of the child.

Dr. Kenneth Stoller, MD

Dr. Kenneth Stoller, MD (http://www.KennethStoller.com) advocates the use of LIAF in Lyme disease and autism. He writes: "LIAF is a system that has been named "Emotional Neuroimmunology". Factors in autism include genetics, environmental toxins, changes in the serotonin system and biologic and immunologic abnormalities. Many of the so-called "derangements" are observed in autistic children. Autism is a disease that has in the both "politically incorrect" disease and the body with low levels of oxygen. This is the reason why oxygen with HBOT thus may be an effective mechanism for treating autism.

A comprehensive treatment program is required to successfully treat autism and the brain alone and without addressing other factors, HBOT may dis-appear. HBOT is incorporated into a well-planned approach that becomes LIAF may have profound benefits.

Utilizing Plant Stem Cells and Embryonic Phytotherapy for Immunization, Biofilm, Treatment and Management of LIAF


She also has more than 20 years of experience in dealing with patients with autism, ADHD, and other neurodevelopmental disorders. She is the author of several books on these topics and has presented her work at many conferences and workshops. Her research interests include the use of herbal remedies and other natural therapies to treat autism and other neurodevelopmental disorders.

Auto Immunity and Autism

Dr. Tony Watkinson, DC (http://www.Tobinstitute.com) presented a new hypothesis on the link between vaccinations and autism. In the past, many doctors have believed that vaccines may be the cause of autism, but this belief has come under scrutiny in recent years. Watkinson believes that vaccines may contribute to an increase in the risk of developing autism, but it is not yet clear if this is a direct cause or if there are other factors at play.Watkinson also discussed the role of thimerosal, an ingredient in some vaccines that contains mercury.

Antibiotics and Lyme: The Evolution of Merck’s "Lyme Vaccine"

In the late 1990s, Merck developed a Lyme vaccine called "lymerix," which was approved by the FDA for use in children. However, the vaccine was withdrawn from the market in 1998 after it was found to be ineffective in preventing Lyme disease.

Since then, Merck has developed a new vaccine called "lymerix-2," which has been tested in clinical trials. The vaccine is based on a genetically modified form of the Lyme disease bacterium, B. burgdorferi. The vaccine is designed to stimulate the immune system to produce antibodies that will help fight off the bacterium in the event of an infection.

In 2012, Merck announced that it had begun testing the vaccine in a phase 3 clinical trial. The trial will involve thousands of participants in the United States and Europe, and will be conducted by vaccine developers and regulatory authorities.

However, some experts have raised concerns about the vaccine's safety and effectiveness. Some experts believe that the vaccine may not be able to prevent Lyme disease, and that it may even increase the risk of developing the disease in some patients.

In addition, there are concerns about the vaccine's potential to cause adverse effects. Some experts have noted that the vaccine may cause fever, fatigue, and other symptoms in some patients.

Nonetheless, Merck continues to work on the vaccine, and it is hoped that the results of the phase 3 trial will provide important information about the vaccine's safety and effectiveness.

The vaccine is currently in development, and it is hoped that it will be available for use in the near future. However, it is important to remember that the vaccine is not a substitute for other preventive measures, such as tick prevention and early treatment. It is also important to keep in mind that the vaccine may not be effective for everyone, and that it may not be able to prevent Lyme disease in all cases.
Countries with the high- est percentage of people with autism avoid vaccines at birth. Other countries start at two months or later and have a much lower inci- dence of autism. The earlier the age of the first vaccination, the higher the incidence of autism that is observed. Antibiotic use in food animals contributes to autism. Mercury exposure leads to antibiotic- resistance. Ammonium salts and antimicrobial in vaccines lead to numerous adverse reactions. 

Acrobic and Anaerobic Conditioning in Dr. Fields and My Lyme Plan / How I Did It!

Lyme Fields

Lyme Fields (http://www.Heatly.com, www.THELDDr.com, www.TheTrikStayer.com, www.HealthToHeart.com) has “been there done that” and feels healthier now than she has ever been. Fields is a USA Track and Field athlete who was bitten by a tick in 2003 and not diagnosed with Lyme until 2005 and had a lower incidence for Borrelia, Babesia, and Bartonella. By early 2009, Fields had a full recovery and returned to racing in 2010. Fields has a rare disease and doesn’t fool around. She does whatever it takes to get herself well. She employed antibiotic therapy for only 30 days before deciding to use an alternative path to wellness.

Fields noted that many people with Lyme are angry and have a bad attitude and that these people will never get well. She cautioned people not to fall into that trap. She con- tinued to make many innovative therapies to keep her as healthy as possible.

Fields says that people who are not incident recover- ing from Lyme are imple- menting the wrong therapy. The reason is that they believe explain those plans who do not get well include: 1) some people think it is easier to stay sick - getting well is work, 2) acceptance of being ill with “no cure” - the universe is a big place and there is a cure for everything, 3) incompetence of the medical system, 4) unwilling- ness to “stick to it” and imple- ment, and 5) emotional hang- ups. “You are worth it!” Fields talks about Lyme in the past tense which may itself be a sig- nificant reason for her recovery.

Fields does not believe that people with Lyme have to suffer. “The highs should get higher and the lows should get higher.” She supported working with a DO or integrative medical doctor that has an open attitude and many treatment options. She believes that we must educate ourselves as “nobody will care for you like you should care for yourself.”

Many people focus on killing Lyme. Fields believes that people with “Lyme dis- ease” have 80% of their prob- lems rooted in other dysfunc- tions and only 20% is actually attributable to Lyme itself.

Fields suggested that before starting treatment one must forgive. “Forgive every- thing and let go of any anger.” She suggested balancing emo- tions with talk therapy, EFT, and various oil blends. Make your living environment a happy one or you likely won’t get well.

Fields believes that you must stay active. She says, “If you are not moving and don’t have a lot of appetite, and you aren’t willing to get better, you’re not going to get better.” Acrobic and anaerobic conditioning can be used to improve your situation.

People with Lyme need to stay relaxed and not get unnecessarily stressed. Stress hormones impede our ability to recover. Breathing techniques can be helpful in improving lung capacity, improving levels of oxygen, and can help to kill microbes naturally. Exercise helps the body to manage stress and increases natural endor- phins. Breathing and sweating both serve as mechanisms of detoxification. Immune function can be greatly improved with exercise. Lymphatic drainage is aided by exercise as well.

Both aerobic and anaer- obic exercises are important in the recovery from Lyme dise- ase. Her favorite options are biking and running mixed with weight training. She cautions people to start slowly, but to start some form of exercise even if it is just walking. Fields noted that hard exercise can stress the adrenals and that too much can be problematic.

Fields believes that nutrient balancing is critical at the beginning of any treatment plan. Everyone should be on one or more nutrients. Fields suggests that blood testing can be useful and that vitamins, sup- portive vitamins, taste-sensitive minerals, and taste-sensitive electrolytes are often what patients need. She encourages taking nutrients with aloe juice to increase assimilation. Fields suggests that many people incorporate “fancy stuff” into their treatment protocols while they overlook the basics. Her favorite supplements include Betaine HCL, IP6, alpha-lipoic acid, NAC for liver support, glutamine/MSM/MSM cocktail for the gut. Permeability factors, selenium, iodine for thyroid support, and flax. She likes wheat grass, barley grass, yerba mate, nettle leaf, and loose leaf teas.

Fields suggests avoiding corn, soy, and gluten. She advocates the use of raw milk. Protein is necessary and organ- ic feed goat’s milk is ideal. Quinoa, ghee, and coconut oil are her favorites.

For building immunity, Blood UV, sun gazing, probiotic supple- ments, and vitamin D may be helpful. As for Herxheimer reactions, she suggests that appropriate detoxifi- cation support can minimize these reactions. Rebounding, skin brushing, electrolytes, clay baths, coffee enemas, infrared saunas, liver flushes, castor oil packs, colon cleanses, and exer- cise are among Fields favorite detoxification options.

Fields suggests working on Leaky Gut and ensuring that Candida is being appropriately treated. Stoel treatment and treat- ment for gut pathogens can be quite important. Thyroid underfunctioning is a common issue in many people that are ill and cannot be addressed. Hormone formu- lations may be helpful. The adrenals may require support with licorice with an immunomodulating formula. “Lyme” Pathology is a criti- cal issue. Wisdom teeth removal and root canals can cause cytokine dys- neresis. A biological dentist may be a key part of one’s recovery. Some biological den-ists use advanced technologies such as the Cavitron and the Axsistem; both of which Fields found helpful in her own jour- ney. Once these issues are addressed, Fields moves on to “killing the bugs”. Attacking Lyme is not an end and 50/50 is a good place to start. Fields believes that antibiotics can make people worse for a long period of time and should be a last resort. First, a parasite is addressed. Fields is a Lyme patient who has used a DO for years. She utilized energetic medicine such as the Osmadated and the Multi-wave Oscillator. She likes the Salt/C complex fol- lowed by liquid Cold Pulsating such as grapefruit seed extract and argon and ozone oil. Fermented enzymes may also be needed.

Fields suggests that hyperthermia such as sauna therapy can be used and that both Y’s and ozone are more aggressive options for micro- bial management. Chlorophyll, pyruvic acid, charcol, and WBCs are options for continuing to sup- port detoxification while killing bugs. Metal chelation with citrulina and chlorophyll may be beneficial. DMSO with 30% food grade hydrogen peroxide may be helpful. Ozonating water and ozone ene- mases. Fields is now on a maintenance program consist- ing of “My Kit”, “My Nutrients”, “My Diet”, “My Living Environment”, ozone, energetic medicine, geo-cards, clean water, dry sauna, exer- cise, parasite annihilation, annual colon cleanses and liver flushes, continuing to remove metals, happiness, and forgive- ness. With her current pro- gram, Fields is back at the top of her game.

Fields is an upcoming, tell-all book which will be available through the web site http://www.TheLDDr.com.

LIFE...cont’d pg 7

Dr. Kenneth Hinkle, OMD (http://www.KHinkle.org) shared the latest approaches to treating ASD. Klungshardt emphasized that the numbers are far worse than we ever imagined. A recent study of 190 children with ASD showed that 85% is a gross under-estimate and expensive. Fields believes that antibiotics can make people worse for a long period of time and should be a last resort. First, a parasite is addressed. Fields is a Lyme patient who has used a DO for years. She utilized energetic medicine such as the Osmadated and the Multi-wave Oscillator. She likes the Salt/C protocol fol- lowed by liquid Cold Pulsating such as grapefruit seed extract and argon and ozone oil. Fermented enzymes may also be needed.

Fields suggests that hyperthermia such as sauna therapy can be used and that both Y’s and ozone are more aggressive options for microbial management. Chlorophyll, pyruvic acid, charcoal, and WBCs are options for continuing to sup- port detoxification while killing bugs. Metal chelation with citrulina and chlorophyll may be beneficial. DMSO with 30% food grade hydrogen peroxide may be helpful. Ozonating water and ozone enzymes. Fields is now on a maintenance program consisting of “My Kit”, “My Nutrients”, “My Diet”, “My Living Environment”, ozone, energetic medicine, geo-cards, clean water, dry sauna, exercise, parasite annihilation, annual colon cleanses and liver flushes, continuing to remove metals, happiness, and forgiveness. With her current program, Fields is back at the top of her game.

Fields is an upcoming, tell-all book which will be available through the web site http://www.TheLDDr.com.

Recent Advances in the Treatment of Autism Spectrum Disorder

Dr. Dietrich Klinghardt, MD, PhD (http://www.Klinghardt.org, http://www.Klinghardt Neurobiology.com) shared the latest approaches to treating ASD. Klungshardt emphasized that the numbers are far worse than we ever imagined. A recent study of 190 children with ASD showed that 85% is a gross under-estimate and expensive. Fields believes that antibiotics can make people worse for a long period of time and should be a last resort. First, a parasite is addressed. Fields is a Lyme patient who has used a DO for years. She utilized energetic medicine such as the Osmadated and the Multi-wave Oscillator. She likes the Salt/C protocol followed by liquid Cold Pulsating such as grapefruit seed extract and argon and ozone oil. Fermented enzymes may also be needed.

Fields suggests that hyperthermia such as sauna therapy can be used and that both Y’s and ozone are more aggressive options for microbial management. Chlorophyll, pyruvic acid, charcoal, and WBCs are options for continuing to support detoxification while killing bugs. Metal chelation with citrulina and chlorophyll may be beneficial. DMSO with 30% food grade hydrogen peroxide may be helpful. Ozonating water and ozone enzymes. Fields is now on a maintenance program consisting of “My Kit”, “My Nutrients”, “My Diet”, “My Living Environment”, ozone, energetic medicine, geo-cards, clean water, dry sauna, exercise, parasite annihilation, annual colon cleanses and liver flushes, continuing to remove metals, happiness, and forgiveness. With her current program, Fields is back at the top of her game.

Fields is an upcoming, tell-all book which will be available through the web site http://www.TheLDDr.com.
IGeneX, Inc.

Specializing in Lyme Disease and Associated Tick-Borne Diseases

Welcome to IGeneX!

The laboratory is CLIA-certified, inspected by the Department of Health and Human Services for Medicare testing, and is also licensed in those states with special requirements (California, Florida, Maryland, New York, and Pennsylvania).

795/797 San Antonio Rd.
Palo Alto, CA 94303
800/832-3200

www.igenex.com
**LIAF** cont’d from pg 5

many adults will outlive their children due to the fact that the "healthiest" and "lifespans" are declining.

Klinghardt noted that because the genes are the "core of our life" and that when the genes are not working, there is no chance of having a healthy life.

He aimed to clear up this misunderstanding that determines health and vitality is the activity of our metabolic enzymes. These enzymes are disturbed.

Enzymes can exist in many shapes and forms. The genes determine the basic building block of the enzymes but the shape and general activity of them are determined by signals coming from outside the cell. There is something higher than the genes that tell the genes what to do. Genes are not always active. They have a certain rhythm that determines when they should be active and when they should not be active.

ASD children may have a high degree of polymorphisms, or damaged genes, but no specific ones. For every gene defect identified there is a child, the same gene defect has been found in healthy children. This suggests that the gene defect is not the cause of the illness. Most genes have back-up genes that can take over when the primary gene fails. Even when a child has a demonstrated gene defect, this is not the end of the road according to Klinghardt.

The remaining healthy genes can make the proteins that are otherwise a result of a defective or missing gene.

Internal signals from the cell will signal what is going on or off of the genes. Three external signals are also involved. These are: biochemistry or signaling molecule, 2) EMFs and gravity, and 3) emotional, mental, and transpersonal fields.

Klinghardt suggested that doing FMT or treatment can be an emotional work on the mother or father which is a signal of a physical effect on the child. Autism is caused by inappropriate behavior by the cell. Autism can be healed by optimizing the environmental signals, even if there are genetic imperfections." 

Dr. Dietrich Klinghardt

---

**Fry Laboratories LLC**

**Committed to Understanding**

**Chronic Diseases Through Diagnostics and Research.**

**Services**

- Advanced and Traditional Microscopy
- Genus-wide PCR with Sequencing
- Oxidative Stress Testing
- Biafirm Detection
- Serology

**www.frylabs.com**

Fry Laboratories LLC
1-866-927-8075

**Do you have any of these symptoms?**

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fatigue</td>
<td>Myalgia</td>
</tr>
<tr>
<td>Infections</td>
<td>Hypersensitivity</td>
</tr>
<tr>
<td>Liver Function</td>
<td>Arthritis</td>
</tr>
<tr>
<td>Number</td>
<td>Numbness</td>
</tr>
<tr>
<td>Cardiovascular</td>
<td>Cord Compression</td>
</tr>
</tbody>
</table>

**Chronic Diseases Are Sometimes Associated with Infection**

- Chronic Fatigue Syndrome
- Lyme Disease
- Autoimmune Conditions
- Bronchitis
- Lupus
- Celiac Disease
- Psoriasis
- Crohn's Disease

**Vector-Spain Diseases and Co-infections of Interest**

- Borrelia Pyrogenes
- Hepatitis
- Anaplasmosis
- Influenza
- Recurrent Myalgia

We are a CLIA Certified Laboratory and we participate in the College of American Pathologists and American Proficiency Institute Testing Programs

---

**Medical Perspectives**

"Autism is caused by inappropriate behavior by the cell. Autism can be healed by optimizing the environmental signals, even if there are genetic imperfections." Dr. Dietrich Klinghardt

---

**Disclaimer**

This article is for informational purposes only and is not intended to serve as medical advice. All decisions regarding medical treatment should be made only in conjunction with your licensed healthcare practitioner. Errors or omissions may be present in this article's content.**LIAF**...cont’d pg 10

LIAF cont’d from pg 5

LIAF cont’d from pg 5

LIAF cont’d from pg 5

LIAF cont’d from pg 5

LIAF cont’d from pg 5

LIAF cont’d from pg 5

LIAF cont’d from pg 5

LIAF cont’d from pg 5

LIAF cont’d from pg 5
Dr. Levin  ...cont'd from pg 1

(That is, the SSRI's or selective serotonin reuptake inhibitors) and perhaps to a lesser extent, bupropion (Wellbutrin). The first SSRI on the market was Prozac and to give it its proper name, it's called fluoxetine (pronounced flue-o-sect). The first medication that depressed patients could take that would, would work, was made up of a series of forms from deep depression into a functional state. It's the most amazing thing, truly, but it isn't lasting. So, doses are increased and the drug is always more and quite as well. Then patients end up taking more and more and exaggerating their individual responses. If you place those symptoms into the picture of mimics or redescriptions, we were antagonizing to the relationship. There are many couples who have stayed together for years when one of them is really depressed and the other one is the caregiver, but that ends up being too much for many mar- riage. The only way to alleviate some of the problems, when the patient stops taking the medication, the depression returns with a vengeance and then the mar- riage is in a terrible place.

The pharmaceutical industry, however, has contin- ued to churn out antidepressant drugs, the implication being that depression is a defi- ciency of neurotransmitters in the brain. The fact that this medicine works clearly demonstrates that if you think about it for any length of time, you can see that it is a huge overstatement of the official over the long run. Now, there are exceptions. There must be some groups of patients who have been on Prozac for ten years and are functioning, but they are in the minority. In fact, there are few and far between. Most patients have had terrible difficul- ties.

The reason for this was pointed out by members of our organization ACAM, the American College for Advancement in Medicine. About seven or eight years ago, they had a meeting that turned up with a new approach. One of the speakers had been working intensively with weight control issues and had presented his work by demon- strating that behavior using neu- rotransmitter precursor therapy. His name and this website: www.neurac- sist.com. In the time we heard about this, he had thousands of patients of experience using this therapy. He got together with a neuro- biochemist, Gottfried Kupper, who was a very bright guy who understood the neurobiochemistry more comprehen- sively and many of the two of them jointly presented the results of their findings. It didn't take long to convince me and many of my colleagues that there was a possible role for serotonin as a neurotransmitter in the brain. Serotonin is one of many neurotransmitters. A neurotransmitter is a chemical that transmits a signal, obvious- ly, but from where to where? The brain is not something that is somewhat ly complicated. I have on my wall one of the foundational principles of my practice. I again refer to the earlier quote from the quote from a neurologist who's not a neurologist or any other kind of doctor, but he came up with this principle many, many years for the age for when he said, "If the human brain were simple enough that we could understand it, we would be so simple that we couldn't understand.

I don't think that we will ever truly understand the com- plexities of the brain and this incredible computer. Now, I've meditated, I've argued the neuroscience, and the most important thing to me is this -- what he said is not that the brain is simple, and the brain is anything that is a mistake- ment or overstatement in that quotation. I think it says it all, and I question anybody who thinks that it makes sense to put a foreign chemical that has just been discovered in the last fifty years into the brain of all not a child's brain.

Taking into considera- tion the fact that the brain has evolved with its envi- ronment for the past million years, it is logical for all of us to give the power to say to a mother, "We'll give your newborn this drug, the so-called wonder drug, and it works, yet, but they're trying it out on all of these for many of them.

That is the most outra- geous thing I have ever heard them thinking? Hopefully, they won't take me out of making that statement. As much as I respect the psychiatric profession, along with the pharmaceutical industry, I wish they had paid for, and the guys who do it are taking part in a mass psy- chiatric delusion, thinking that actually as they really believe that they can "Fix" a sick or injured person out of the laboratory. It is just one of the things that I find puzzling about our profession and a profession- ed society. To understand the relation- ship between the body and SSRI's, let's take a look at the role of the neurotransmitter, serotonin. Basically, the body has an accelerator and a brake in control. The brakes are supplied by the diet. Now, the presence of serotonin, dopamine, norepi- norphine, and the other neurotransmitters were discovered within the last seventy-five years. I'm not sure when they decided that it was a deficiency in serotonin that caused the depression. The first selective serotonin reuptake inhibitor used was Prozac. However, Prozac is one of this - billions of cells in the brain connect to each other, and some cells, very far away. By "far away", what I mean is that, if you wanted to make the decision your move right foot forward to walk originates in the brain stem and the foot, and the length between these cells can be six or more feet.

The fact that these actions are accompanied by behaviors is really quite obvious. After that, or about five years ago, I think, I did a really significant study that the nerves did not continue all the way to the foot from the brain, they went from the brain to the spinal cord and then were retransmitted again to the spinal cord. So, the researchers there figured there basically had or had been a false neurotransmitter that has not been delivered. As microscopes and technology have improved over time, researchers were able to observe that a long nerve from a nerve cell in the brain stem that meets another nerve cell in the spinal cord that goes to the foot. They were then able to observe and measure the elec- trical response when the nerve is stimulated, so it was assumed that the connection between those two nerves is the resistance to the smooth flow of the electricity. They figured that the nerve kept sending the signal until it built up on the sending side, to the point that it jumped across the gap and stimulated the nerve on the other side. It's like the spark plug in an automobile.

However, it wasn't until late in the twentieth century that it was discovered that it wasn't the electricity or any kind of signal that was transmitted. Researchers found that the electro- chemical which is the size of the signal came down to the end of the "axon", which is the fiber that the signal is sent through. The signal is then received by the receptor located on the end of the synaptic, which is where the axon is received, from a nerve, the "Dendrite.

The synapse is the gap where the post-synaptic cell and the receiving fiber, and there is a bulbous bud at the end of the "axon".

The post-synaptic cell then received the signal and then, currently, the nerve cell is divided into the serotoninergic, the dopaminergic, and the GABAergic systems. And generally speak- ing, the body the responds in the way that the brain responds in the dopaminergic system. Now, if you think about it for a moment, when I was young, I wasn't allowed to go swimming right after I ate, or the instructions of our alternative medicine treatment. I'm not implying that we are going to ignore the possibility that many, many depression are secondary to significant prob- lems of the brain and the spinal cord. The brain is not a single system. There is a limited blood supply, so the muscles don't have enough blood supply when we are digesting our food. This causes us to get very sick, faster, especially when swimming in the water.

The sympathetic system is the fiber that carries the threat. It causes the heart to beat faster, the eyes to dilate, the pupils, the muscle and the heart to work extra hard. So, when you're excited, or when you're anxious, it's the other one is really depressed and then temporarily feels much better, but then they're on drugs. The dosage of the drugs then need to be increased so they feel better again, but the increased dosage lowers the reserves of serotonin. Ultimately, this doesn't work, because the reserves have run when you're not the body is well. Now, there's a balance with the proper reup- take is enough to keep us happy and healthy.

When people have too little serotonin in their sero- tonins, and they take these SSRI drugs, their levels are depleted further, so they're even worse while they're on the drugs. The dosage of the drugs then need to be increased so they feel better again, but the increased dosage lowers the reserves of serotonin. Ultimately, this doesn't work, because the reserves have run when you're not the body is well. Now, there's a balance with the proper reup- take is enough to keep us happy and healthy.

When people have too little serotonin in their sero- tonins, and they take these SSRI drugs, their levels are depleted further, so they're even worse while they're on the drugs. The dosage of the drugs then need to be increased so they feel better again, but the increased dosage lowers the reserves of serotonin. Ultimately, this doesn't work, because the reserves have run when you're not the body is well. Now, there's a balance with the proper reup- take is enough to keep us happy and healthy.

When people have too little serotonin in their sero- tonins, and they take these SSRI drugs, their levels are depleted further, so they're even worse while they're on the drugs. The dosage of the drugs then need to be increased so they feel better again, but the increased dosage lowers the reserves of serotonin. Ultimately, this doesn't work, because the reserves have run when you're not the body is well. Now, there's a balance with the proper reup- take is enough to keep us happy and healthy.

When people have too little serotonin in their sero- tonins, and they take these SSRI drugs, their levels are depleted further, so they're even worse while they're on the drugs. The dosage of the drugs then need to be increased so they feel better again, but the increased dosage lowers the reserves of serotonin. Ultimately, this doesn't work, because the reserves have run when you're not the body is well. Now, there's a balance with the proper reup- take is enough to keep us happy and healthy.

When people have too little serotonin in their sero- tonins, and they take these SSRI drugs, their levels are depleted further, so they're even worse while they're on the drugs. The dosage of the drugs then need to be increased so they feel better again, but the increased dosage lowers the reserves of serotonin. Ultimately, this doesn't work, because the reserves have run when you're not the body is well. Now, there's a balance with the proper reup- take is enough to keep us happy and healthy.
Dr. Levin: This is really important work. Thank you so much for pursuing this on behalf of patients.

Dr. Levin: I'm honored to be doing it. I feel blessed to have been introduced to it, and to have listened to it, believed it and tried it. It is really important and quite effective in the right situations with the right patients.

I've also been involved with an alternative approach to diagnosing and treating thyroid dysfunction. The Wilton's Thyroid Syndrome organization holds an annual meeting and this year it will be held in Utah in October. For the second time, I will be lecturing. I'm hoping that Dr. Hinz will be included in that program, too. I'm trying to get the word out for him on this topic, as he has really performed a great service to mankind through his research and findings.

Dr. Levin: In patients with Lyme disease—whatever you call it—who are taking antidepressant drugs, the drug adds an additional chemical that they're not even aware of. I will start them on this program, so they'll get off the drugs. Some people say Lyme patients are chronically ill because they're depressed, but I don't think that's the likely scenario. Actually, many chronically-ill patients are depressed because they're chronically ill. In some instances, when we get under control whatever the chronic problem is, they are able to come off all of the drugs and without the alternative program.

Tina: It appears to me that if a person has a chronic infection that affects the nervous system, such as Lyme disease, and it has thrown the system out of whack, it may be a hormone-deficient situation to add drugs into the mix to correct the hormonal out of whack even more. Would this also apply to Parkinson's?

Dr. Levin: This is a very important topic for patients to think about. I will send the patients out for workshops, just treat them with drugs.

Tina: This is really important. I will offer this to you, Dr. Levin?

Dr. Levin: Eat the right food, exercise regularly, and take supplements to make up for the lousy food supply that we've created in this country.

Absolutely do not eat any genetically modified foods, such as soy, corn and cottonseed. Eat organic. Unless it's marketed organic, don't eat any soy or corn. More than 90 percent of the soy in this country is genetically modified and a very high percentage of corn and its derivatives are modified, also. We have no business feeding with the gene pool. I also suggest doing something that will bring you psycho-spiritual equilibrium.

Dr. Levin has a private practice in Vienna, Virginia. Visit his website at www.warrenlevinmd.org.

The biggest problem people face with the protocol in comparison to taking medications like Prozac, Paxil, Zoloft, Cymbalta, Lexapro and now Prozac, is that the prescription drugs require only one or two pills a day, but it takes well over twenty pills a day to reach and maintain the depletion of the reservoirs. There are also variations in the balance of the serotonin and the other side, the dopamine/norepinephrine, so that some psychiatrists are better than others with their intuition or under-standing of the drugs which will work better for each particular person.

When patients’ reservoirs are refilled, they can taper off these medications and they do not have to continue to correct their deficiencies and see if they have a source. We also look for allergies, because allergies can cause depression. This is especially true in people who eat food and drink allergies. So, when you take away the addiction, it speeds up the healing process.

Infections can also cause depression, and here we come to something you know about, knock on wood, Lyme disease. There was a Dr. Paul Fink, who was the President of the American Psychiatric Association about ten years ago. He said that anyone previously healthy suddenly shows up with any kind of psychiatric diagnosis, you should always consider the possibility that they have Lyme disease. I don't think a lot of psychiatrists think about that possibility. Coincidentally, by six degrees of separation, my brother is best friends with Dr. Fink's brother.

In my opinion, this is another example of how a holistic, complementary, integrative and functional approach works best. You just can't simply treat someone with a pill for their depression. You must look for their allergies, infections and analyze their diet nutrient deficiencies. When you get these things straightened out, they feel better. One of the sad things is that you can't even document it. Dr. Levin and Dr. Kellerman didn't last very long together. Very one was a psychiatrist, the other was a neurobiochemist. Dr. Kellerman began looking at all the neurotransmitters and when they gave their lecture about eight years ago, you could have heard a pin drop. I think that is scientifically established with peer-reviewed literature and the use of which was triggered by Dr. Hinz. I think that was what led to the demise of this neurotransmitter therapy. I think that is a comprehensive record on all the other neurotransmitters that had been identified. Dr. Kellerman wanted to address all of them.

What does Dr. Hinz identified, because he kept incredibly comprehensive records on everyone treated, was that even though some of these other neurotransmitters might be out of balance, if you straightened out the push and the pull of serotonin on one side and the dopamine on the other side, the other untreated neurotransmitters would fall in line. Therefore, when we straighten out the push and pull of serotonin on one side and dopamine on the other side, the other untreated neurotransmitters would fall in line. Therapy as we know it, has been therapy actually for the brain. This is a very complicated interpretation, so I send the patients to work with Dr. Kellerman. When they come to something you know about, knock on wood, Lyme disease. This is especially true about allergies can cause depression. This is especially true about allergies can cause depression. This is especially true about allergies can cause depression. This is especially true about allergies can cause depression.
FEATURE

SoulCare Counseling Center
405 Harwood Road, Bedford, Texas 76022

Has your chronic illness made your life unmanageable?
Do you feel out of control?

There is hope...

DAWN IRONS
Graduate Associate Intern
Individuals, Couples, Families
Relationship Problems, Communication Difficulties, Unresolved Conflict,
Trauma-Related Issues, Depression, Anger, Anxiety, Grief,
& Chronic Illness

dawn@soulcarecounselingdfw.com Call 972.804.2876 for appointments

“LIAF” ...cont’d from pg 7

LIAF is excited to announce monthly conferences that will be live and online. People all over the world will be able to access these events which will allow LIA to reach a far larger audience than ever before. Further information can be found online at http://www.LIAFoundation.org. Don’t miss out on this exciting opportunity.

Resources
DVDs of the 2010 LIA "From Roadblocks to Recovery" conference can be purchased from ZenWorks Productions at http://ZenWorksProductions.com. I highly recommend reviewing these conference DVDs as they are packed with valuable information.

About the Author
Scott Forsgren is the editor and founder of BetterHealthGuy.com where he shares his thirteen year journey through a chronic illness only diagnosed as Lyme disease after eight years of searching for answers. Scott was honored to be awarded the “2010 Educational Excellence Award” from the LIA Foundation for his efforts in educating the public on Lyme disease. Scott can be reached at Scott@BetterHealthGuy.com.

Klinghardt Lyme Cocktail (KLC)

This remedy is based on 150 lbs body weight. The dosage has to be adjusted according to the weight of the child. The KLC has helped many autistic children to improve significantly.

- 200-400 mg Artemisinin, 100 mg OSR (glutathione), 10 ml Phospholipid Exchange in blender at high speed to make liposomal artemisinin (detox, anti-viral, anti-Babesia, anti-Lyme, shuttle agent, biofilm breaker)

Then add:

- D-galactose : 5 grams (increases ATP dramatically)
- 10 -20 drops 20 % Propolis Tincture (anti-viral)
- Quintessence (Lyme, Ehrlichia, Bartonella) = 5 energetically enhanced anti-Lyme herbs (Buhner)
- 15 ml Rechtsregulat (enzyme mix to break biofilm)
- MicroSilica 100 mg

- Co-curcumin (Ayush Herbs): 1 tsp plus Pippali 2 caps (pepper to increase absorption)
- Vitamin C powder 2000 mg
- Acai powder (antimicrobial, antioxidant) 1 tsp
- Mucuna powder 1 tsp (increases L-Dopa for language and motor development)
- ½ glass grapefruit juice (important for artemisinin absorption)
- ½ glass water

Optional:

- GSE 10 drops - grapefruit seed extract (antimicrobial, anti-biofilm)
- Freeze dried garlic 4 capsules
- Energized Neem - 2 caps three times a day

Drink this amount twice daily, 5 days on, 2 days off. 3 weeks on, 1 week off.
ENERGY • DETOX • COGNITION

Complete Mitochondrial Support
ATP Fuel™: the key to cellular energy production. It contains the essential researched nutrients for healthy mitochondrial function:
- NT Factor Energy™ to improve mitochondrial membrane function
- CoQ10 for ATP energy production
- NADH to convert food into cellular energy
Your patients get performance and convenience in one formula.

Liposomal Glutathione
Tri-Fortify™ provides the preferred reduced L-glutathione, the major intracellular antioxidant essential for detoxification in the body, in an absorbable liposomal delivery system. The unique liposome structure, developed as a pharmaceutical delivery system, allows it to combine effectively with the body’s natural fluids and penetrate its protective membranes, bypassing the digestive system and directly entering the blood stream. Tri-Fortify™ promotes:
- Detoxification
- Healthy immune response
- Antioxidant protection

Cognitive Performance
CogniCare™ meets the needs of many patients requiring a well-balanced cognitive support formula. Combining eight nutrients at research strength, each capsule of CogniCare™ includes:
- Neurotransmitter modulation and optimization
- Ultimate Focus Complex™ to nurture memory & brain function
- ProAcuity Mood Complex™ to promote healthy mood function

“ATP Fuel™ contains the top three ingredients clinicians know to be the most helpful for their patients with fatigue. We all know the essential role of supplemental glutathione, and now it can be delivered orally! I found CogniCare™ to be beneficial for many of my patients, of all ages, who have cognitive issues.”

Joseph J. Burrascano Jr. M.D.

NEW PRODUCTS

Researched Nutritionals
solutions for life
Toll Free: 800.755.3402 • Tel: 805.693.1802 • Fax: 805.693.1806
www.ResearchedNutritionals.com | Available only through healthcare professionals

*These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.
PUBLIC HEALTH ALERT

“CONDENSED”
COWDEN
SUPPORT PROGRAM

FINANCIAL ASSISTANCE IS AVAILABLE
FOR THE CONDENSED COWDEN SUPPORT PROGRAM
FOR ONE PATIENT OF A PRACTITIONER
LIMITED AVAILABILITY – CONTACT US FOR MORE INFORMATION

ABOUT THE COMPANY

Nutramedix was founded in 1993 and currently has facilities in Jupiter, Florida, USA and in Shannon, Ireland supplying highly bio-active nutritional supplements to health care professionals and consumers.

From the beginning, Nutramedix has operated with a unique business model. First, the owners and management work diligently to operate a company according to Biblical principles— with honesty, integrity, value and respect for all people. Its corporate environment is one that works to serve both its customers and its employees, producing one the best customer service teams in the industry. Second, Nutramedix was founded with the goal of using a significant amount of its proceeds to support orphans, widows, Christian pastors and missionaries in economically distressed parts of the world. So as a customer, you are not just purchasing high quality nutritional supplements, you are helping us give back to people in need all around the globe.

ABOUT THE PRODUCTS

Nutramedix has made a significant investment to develop a novel, proprietary extraction and enhancement process used to manufacture its liquid extracts. The result is a highly bio-available whole plant, broad-spectrum extract that is also very cost effective. We were the first to introduce Samento, a rare chemo-type of Cat’s Claw, which has remained one of our signature products. We have since developed a full line of liquid extracts utilizing the same proprietary extraction and enhancement process.

Nutramedix also conducts extensive research to procure the very highest quality raw materials for its powdered capsule products, many of which have been designed to enhance the effectiveness of the liquid extracts. We are committed expanding our line of natural products meeting the highest expectations of health care professionals and consumers.

ABOUT THE FOUNDATION

The owners of Nutramedix have been involved in international Christian ministry since the 1980s. Prior to starting the company in 1993, our Founder and President was a missionary pilot serving tribal groups in Peru. The Kairos Foundation was created in 1995 to fund projects that address both the physical and spiritual needs of people in some of the most disadvantaged areas of the world. The foundation provides ongoing financial support for organizations operating in Africa, Asia, Eastern Europe, North America and South America.