

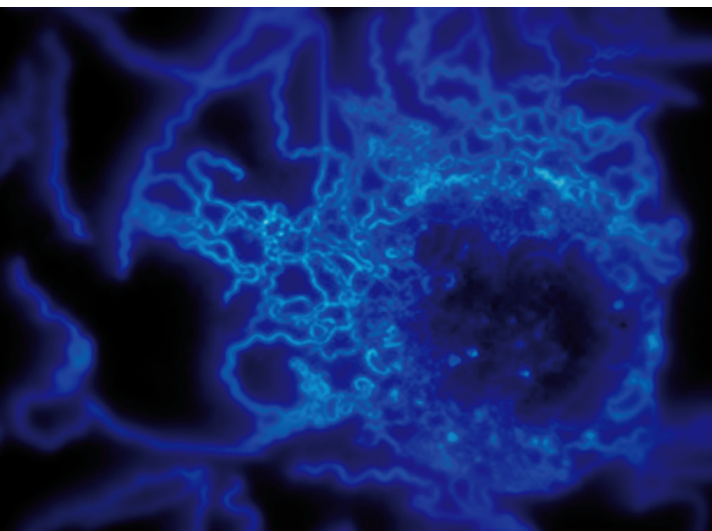
Treating Lyme

Part 1: The foundation for treating chronic infections

Treating Lyme Disease is a challenge for every practitioner. There are many treatment protocols, from conventional antibiotics to various alternative methods. I believe they all have their merits, but using both conventional medical drugs, alternative treatment protocols, psychotherapy and lifestyle changes together has proven to be the most successful approach over the years. Still, deciding which steps to take first in each individual case is not easy. I want to share with you my own ideas as well as the protocols that have emerged from the experiences of other practitioners over the years. The content and creation of the following article was only possible with the communal effort of the Dana Gorman www.thriive.com think tank and summit of experienced AutismSpectrumDisorder (ASD) and Lyme practitioners. We believe that most ASD children have congenitally acquired Lyme and we can apply the principles of ASD treatment successfully to our Lyme patients. Special thanks to Catherine Tamaro for the Vit K protocol, Amy Derksen for organizing and re-thinking the material, Anju Usman for sharing the experience of the busiest and most successful ASD practice in the world. Also thanks to Amy Yasko for introducing us to the Methylation cycle, Abram Hoffer for discovering KPU and to all the other unnamed pioneers in our field.

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Basics:



Before addressing the actual treatment, I would like to draw attention to a few very basic principles, the understanding of which is crucial to a successful treatment of Lyme Disease.

First of all, microbes exist in communities: bacteria, viruses, mycoplasma and molds co-habitate. One species supports and mutually benefits from the other. Therefore one has to treat the entire microbe-ecosystem of a patient in order to have a realistic chance of treating Lyme.

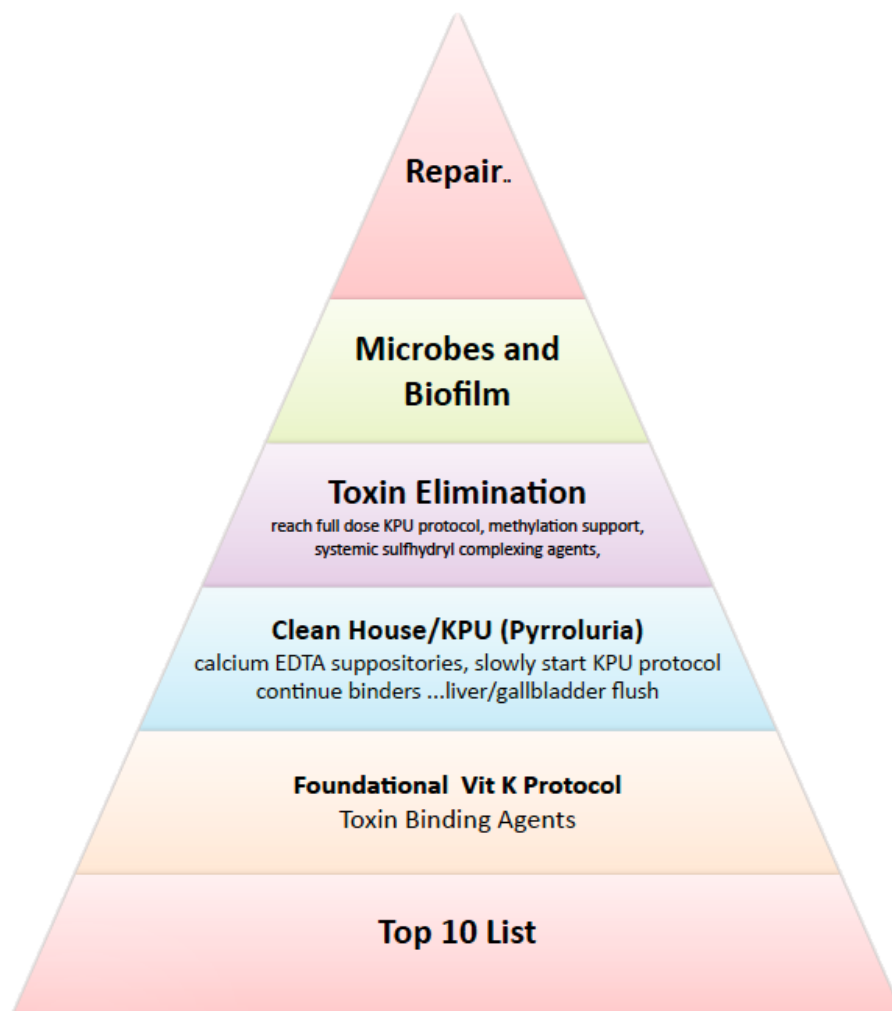
Secondly, microbes secrete biotoxins to subdue the host's immune-responses – immunotoxins and enzyme blocking agents – resulting in a high load of neurotoxic substances, kryptopyrroles and molecular mimicry, which obviously means that we also have to detoxify the patient.

And last but not least, patients get sick in certain environments and in certain life phases against a certain genetic, biochemical and emotional background. Changing the lifestyle, the nutritional habits and the sleeping location can have a dramatic impact and accelerate the recovery of a patient to a spectacular degree.

In short, there are 4 steps that are vital in the treatment of Lyme Disease and chronic infections:

1. Decreasing the toxic body burden
2. Improving disturbed physiology
3. Decreasing the microbial count
4. Immunomodulation

These steps and the principles they are based on are woven into the treatment suggestions below.



The Thriive.com top 10 list:

Start with the Thriive.com top 10 list which contains helpful life-style choices for both parents and children:

1. Life – add pleasure, reduce stress
2. Energy – add sunshine and nature, reduce EMF's at night (turn off all electricity at night, no cell phones, no DECT phones in the house; "Sleep Sanctuary" to shield from cell phone broadcast)
3. Water – add purity and structure, reduce contaminants. Start with clean drinking water. If you live in chlorinated area: charcoal filter is good enough. If you live in fluoridated area: only a 5 stage reverse osmosis system will do.



- add electrolytes. Best: Matrix Electrolyte from BioPure. Put RO-water in large glass jar, add 2 tbsp Electrolyte per liter water
- add structure: Best: M-Water (BioPure) 1 capful per liter
- add light: Best: bubble Valkion singlet oxyge energy enriched air into the water for 30 minutes.

4. Food – go organic and choose real food, avoid anything your body cannot digest properly (often: milk and gluten).

5. Exercise – get moving: 30 min per day just for you, more for the child.

6. Tests – utilize more energetic testing, less blood draws/lab.

7. Emotions – decrease negative self talk, allow yourself to feel, address your own psychological issues and traumatic experiences with a therapist.

8. Body – treat and eliminate focal lesions (scars, dental, organs)



Dental issues and suggestions:

- Tooth decay in children and adults is most often a sign of HPU, lead toxicity or Vitamin K deficiency (see Vit K protocol)
- children should never have amalgams or root fillings placed – ask for composite fillings
- find a biological dentist who is already aware that mercury-containing amalgams out-gas mercury which is a potent neurotoxin (no matter how much politicians may have distorted the science).
- find a dentist who understands the occlusion (he would work closely with an osteopath)
- use non-fluoride toothpaste (better options contain xylitol) and a tongue scraper
- sterilize the toothbrush (UV-chamber, hydrogen peroxide and water)
- teach and/or apply good dental hygiene from the beginning
- be cautious with enzymes and flavored vitamins sitting in the mouth – enamel erosion.



Vaccinations:

Never give Tylenol as preparation, or for a fever after (it reduces glutathione production and makes thimerosal more difficult to clear from the body).

Never vaccinate while your child is ill (runny nose, fever, diarrhea, hay fever)

Try not to give more than one vaccine at a time; the MMR can be given in individual components.

Double check that vaccines are Thimerosal-free.

No flu shots if possible (all contain ethyl-mercury).

Fever support: cool bath, homeopathics (Aconitum 6X at beginning of fever, Belladonna 30 C later), high dose Vit A (up to 400 000 i.u per day while ill) – use Biotics Research Ae-Mulsion forte (12500 i.u per drop), if child well enough, use also Vit C to bowel tolerance every hour. Children that take regular Vit C and zinc rarely get seriously ill (look at Polio research)

The younger a child is, the more vulnerable his/her neurologic system is to the adjuvants. If possible, wait till after the 2nd birthday (at this time the TH-1 part of the immune system is developed and stable)

try to give/get i.v glutathione ASAP after the injection (minimizes adjuvant toxicity without lessening the immune entrainment (10 -20 mg/kg). At minimum, give NAC 10 mg/kg 3-4 times per day for 1 week before and 2 weeks after.

9. Supplements – add minerals, decrease: multi-vitamins (sensitize towards food allergies), calcium (element of biofilms).

10. Detox

- your house: open windows, no carpets (or vacuum daily), no shoes inside, wash hands, no chemicals in home or garden (no VOC paints, insecticides, etc., use vinegar for mold stains), cups: no soap residues fragrance-free, no ozone air purifiers (use BioPure propolis vaporizer to eliminate mold spores and microbes in air), keep humidity in the house less than 50% (dust mites and mold grow in higher humidity), bedding should be aired out since it retains significant humidity; exposing 1 hour of sunlight to porous materials reduces dust mites by 80%.
- your food: organic food, no plastic cooking gear, avoid aluminum, use stainless steel or ceramic coated cast-iron pans; cups, plates and especially colored glass may contain and give off lead; plastic gives off phthalates.
- laptops/DVD players outgas PBDEs (flame retardants) and heavy metals (beryllium, mercury lead,...); use separate keyboard to get distance.
- check for: nearby coal plants or crematoriums and the prevailing wind direction; treated wood (arsenic), sandboxes (often contaminated), imported toys (lead), moist walls or ceilings, near-by traffic (cadmium), good quality air filters.



Vitamin K Protocol:

Next use the modified foundational Catherine Tamaro protocol (aka "Vitamin K Protocol", <http://health.groups.yahoo.com/groups/Vitamink>):

Step 1: As patients get started on this protocol, the body increases the ability to mobilize toxins and the cells start dumping, so it is important to have some toxin binding agents on board, ready to mop up the fallout and manage the symptoms of "reverse toxicity" (metals and other toxins detach from their binding sites and move towards the exits – liver and kidneys – in their often more toxic activated free radical form).

Use:

- BioPure MicroSilica (SH-enhanced silica spheres) – 100µg per 10 kg body weight per day during the time of detox crisis (or with the first signs of it); otherwise 2 scoops (200µg) per day
- Chlorella (BioPure): 1 – 2 tbl/kg during days of crisis
- Green Clay and/or zeolite: 1 tsp twice daily
- Charcoal for acute reactions
- Beta Sitosterol
- Alginate or apple pectin for mild reactions
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Step 2: Baking soda baths to help alkalinize the body in order to reduce the most acute symptoms (like seizures). Every day or

alternating with Epsom salt baths (Magnesium Sulfate); transdermal uptake of magnesium to turn on many metabolic enzymes and body systems and to increase the parasympathetic tone (decreases tension/stress, increases sleep and ensures good bowel move-



ments, turns on detoxification pathways). Use 8 cups per bath.

Step 3: the Rehydration Cocktail

Rehydrate the cells to restore and expand cell membrane structure, intracellular scaffolding and function of all intracellular processes and membrane channel activity and efficiency

BioPure Matrix Electrolytes: 2 tbsps per 6oz cup filled with 2/3rd water and 1/3rd goat - milk/nut or soy milk or protein power drink (helps the trans-membrane traffic of water). Add source of glucose for electrolyte for electrolyte transport across cell membranes and ¼ tsp baking soda. Drink 2 cups a day.

Potassium-based salts, glucose and aminoacids increase the cell hydration and the expansion of the inner scaffolding of microtubuli. The phosphorus in Matrix-Electrolytes helps the coupling of toxins to acids in the kidney, which then can be shuttled successfully out in the urine.

If symptoms aggravate add high dose Vitamin E and Freeze Dried Garlic as well as binding agents to accelerate the process and minimize the detox reactions.

Step 4: Basic ingredients

- Magnesium: 200mg up to 800mg or more; helps move the bowels (magnesium citrate) and support muscle and connective tissue (magnesium glycinate and others); gets very deficient in KPU and HPU cases



- Phosphorus: often quickly reduces the need for high doses of B6 (in HPU/KPH, seizure disorders, sleep,...). It is needed

for the conversion of B6 to its active form P-5-P and for ATP production in the mitochondria. ASD children often have low kidney lab markers (BUN, GFR) that just won't improve until you give phosphorus.

- ATP: provides fuel for all metabolic processes in the body; 50-450mg/day of any brand depending on age and size, on empty stomach, start with 10-20mg, increase slowly; Valkion singlet oxygen energy (start with 2 oz/day of energized water, slowly increase, then start inhalation)
- Vitamin D3: give at bedtime 75 IU/pound of body weight daily (goal: blood levels of 80 or more); anti-inflammatory, supports bones, teeth and facial development, anti-viral and anti-bacterial (Tbc etc.), important for many functions of the immune system
- Vitamin K2 (menatetrenone): work up to 1mg/10 pounds body weight dosed at least twice daily due to short half life; puts calcium into the bones, stops synthesis of oxalates in the liver, helps with myelin formation, decreases the integrity of pathogenic biofilms, transports Vit A and thyroid hormone to the brain; it's common to see improvements in the teeth; side-effects include insomnia (if you work up too fast) and maybe some kidney pain
- Vitamin A (must be fish or liver source!): < 2 years old: 2.500-5.000 IU daily, 2-10 years old: 5.000-11.000 IU daily, > 10 years old: 5.000-16.000 IU daily, pregnant/nursing: 10.000-20.000 IU daily, up to 250.000 IU daily during biofilm treatment (goal: blood serum retinol > 80 µg/dL); natural sources of Vit A have 1/10th the toxicity of water soluble sources; activates all hormone receptors except for testosterone receptors, antiviral, supports thyroid, anti-inflammatory, needed for vit D and K2 receptors, nerve growth, cholesterol and bile salt formation
- Probiotics: work up to very high doses (450 billion or more), expect digestive die-off symptoms
- SSKI (Saturated Solution of Potassium Iodide: TriQuench): start at 100µg (1/18th drop), work up to 3 drops a day, best if inhaled with vaporizer (Omron); anti-microbial, anti-yeast, normalizes breast tissue, helps thyroid, increases body temperature; inhalation has strong effect against Babesia, Bartonella and lungworms
- Optional:
 - Phosphatidyl Choline: 3.000-10.000mg daily (helps membrane fluidity, supports liver, upregulates PPAR receptors to help manage inflammation)
 - Phosphatidyl Serine: 100-1.500mg daily (helps membrane fluidity, supports adrenals, upregulates PPAR receptors to help manage inflammation, helps with hyperactivity)
 - Phospholipid Exchange (BioPure): 1 tsp (4ml) per year of life until 7, then 7 tsp/day in divided doses (contains lipids, EDTA, Alpha lipoic acid and Magnesium; increases the uptake of any nutrient)
 - Melatonin: 2-10mg at night for kids, adults up to 30mg (anti-inflammatory, immune modulator, anti-oxidant for the brain, main agent for brain detox).