The Tuesday Minute Nutritional information.... one byte at a time

This Week's Topic

Molybdenum & EFA Clinical Pearls You'll Want To Share

I'm grateful for my mentors and my colleagues for their valuable friendships, their passion for their work, and for those little clinical pearls they pass on to me. I'm always eager to learn about a treatment or to learn about a supplement that works. A clinical pearl is a valuable bit of knowledge that comes out of a day to day commitment to helping people find optimal health. So here are two "pearls" I think you'll find useful.

The first pertains to people who are sensitive to chemicals, automobile exhaust, smoke, perfume, or for that matter any commercialized or synthetic odor. You know the person who goes into a salon and has a reaction to the chemicals in the air or has mental fog when they get close to the perfume aisle in a department store. This person might experience headaches when they get close to a heavily chlorinated pool. This is someone who may be considered carbohydrate sensitive.

If they eat sweets, for instance, they frequently experience what we in the nutritional field call "Candida-Yeast Syndrome." We all have sugar highs and lows but this person really has systemic issues. This person may also have a tendency toward anemia though they have taken all the iron, B12, folate, vitamin C, and copper necessary to correct the problem. Looking at their blood chemistry panel you might see a low uric acid. By now some of you have guessed the missing nutrient is molybdenum.

I first learned about molybdenum from my friend Dr. Wally Schmidt. Years ago, he explained in a lecture called "Common Threads," that one of the byproducts of yeast metabolism is acetaldehyde, and molybdenum is necessary to convert acetaldehyde into acetic acid and ultimately Acetyl-CoA. If the body is not processing acetaldehyde efficiently, it can build up in the system. Then exposure to a small dose, whether by smell or internal fermentation, becomes an excess and can weaken the system. Since then, I have been able to help many people with these symptoms.

"Dr. Wally" developed an interesting test where he would find a strong muscle, any strong muscle, and then have the patient smell some type of acetaldehyde substance, for instance nail polish remover. If the muscle weakened, then there was a good chance the body was already overloaded with acetaldehyde. Something as small as a good whiff, would cause a strong muscle to go weak.

He then instructed the patient to chew a tablet with molybdenum, re-sniff, and then re-test the muscle. To everyone's amazement the weak muscle would be strong about 85 % of the time.

Just to give you an idea of how fast it can work, I was giving a lecture to a group of doctors in Minnesota. We were close to a heavily chlorinated indoor pool. One of the doctors had an immediate headache upon entering the seminar. She was going to leave the seminar when I asked her to chew 3 Mo-Zyme Forte tablets and see if anything changed. To my delight, within 30 minutes her headache was completely gone.

Now, this isn't going to fix the severely environmentally challenged patients. In these cases there are so many mechanisms going on that one mineral is not enough. However, you will be surprised how many people it will help. So when you are doing your history, or listening to your patients talk about life in general and you hear that chemicals, automobile exhaust, smoke, perfume, or for that matter any commercialized or synthetic odor give them problems...think molybdenum, think Mo-Zyme Forte.

Now, here's another pearl that can be helpful in your practice. Do you ever see patients that are taking EFA's and a host of other anti-inflammatory nutrients and still seem to have joint pain and stiffness? I know this will be flying in the face of current thought but some people "genetically" seem to do better on omega-9's more than omega-3's.

Dr. Gary Lasneski shared this idea several years ago when he was looking for ways to affect cell membrane integrity. He investigated various oils that have anti-viral, antibacterial, and antimycoplasmic properties. He postulated that since the cell membranes were like lipid layer mosaics, the oils would migrate to the membranes carrying the anti-microbial properties with them. They would then modulate the immune system in a natural healthy manner.

He used walnut oil which has antiviral properties, hazelnut oil which also has antibacterial properties, sesame seed oil which has antioxidant properties, and apricot seed oil which modulates the immune system but doesn't suppress it. He combined the four oils and created a high omega-9, mid range omega-6, and low omega-3 oil called Mixed EFA's. He uses this oil with patients who don't feel a difference when supplementing fish oil, yet when they drink olive oil they feel noticeably better.

The down side of this oil is that some people who are allergic to nuts may not be able to use it. However, the upside is that this oil is virtually tasteless and can be added to any salad or on vegetables instead of butter.

Remember when you use oils like this you are treating cell membranes, all the cell membranes: gut cell membranes, brain cell membranes, etc.

I have seen results with ADD kids, chronic pain, increased athletic performance, weight gain and loss, as well as people who crave carbohydrates at night. These fatty acids help move minerals around which helps with insulin response.

For some people Mixed EFA's work better than fish oils to stabilize insulin. Use 2 tablespoons as a therapeutic dose for 3 weeks then reduce to a maintenance dose. For kids under 12 use 1 tsp, over 12 - 2 tsp, and adults -1 tablespoon.

One of my favorite sayings in this field is "patients need to change their oil"...cell membrane oil. What's nice about Mixed EFA's is that it has no taste which increases patient compliance.

If you are treating someone with good omega-3 oils and they are still having autoimmune like symptoms and or joint pain, try switching them to an omega-9 source like Mixed EFA's. Once you've seen the benefits, you'll want to pass these clinical pearls on to your colleagues and friends.

Thanks for checking in each week for another Tuesday Minute.