

Getting Good Results With Lyme Disease

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More and more people are diagnosing and treating patients with Lyme disease but unfortunately the literature doesn't provide any "sure fire therapies". Even the diagnostic process has a lot of flaws and questions. As a result, experienced doctors recommend that Lyme disease be diagnosed clinically, meaning they base the diagnosis on an evaluation of risk of exposure and symptoms.



Lyme disease is an infection caused by the corkscrew-shaped bacterium *Borrelia burgdorferi*, a member of the spirochetes family. Early treatment with antibiotics can be very effective. However if not detected and treated early, the Lyme spirochetes can spread and may go into hiding in your body. Weeks, months or even years later patients may have problems with their brain and nervous system, muscles and joints, heart and circulation, digestion, reproductive system, and skin. Symptoms may disappear even without treatment and different symptoms may appear at different times.

The main carrier of Lyme disease are ticks. However, it gets confusing because ticks can carry other bacteria, viruses and micoplasmas as well. So rather than getting hung up on the label, consider treating the person. That's the approach Dr. Greg Peterson uses when he has someone who comes to him with the diagnosis or thinks they have Lyme disease.

He shared with me that he feels pretty lucky in that so far he has gotten good results with almost every patient that has come to him with Lyme disease. When I heard his

success, I asked him to share his systematic perspective. It's systematic, but aggressive, because as Dr. Alan MacDonald, a pathologist and Lyme disease expert, shares "one of the difficult aspects of treating spirochetes is that they often hide in tissues like brain or eye tissue or in biofilms where it is difficult to treat them. They also have been found to use cloaking mechanisms often involving our own antibodies to distract the immune system." Therefore, prolonged therapy should be employed until the overall wellness of the patient is enhanced.

Dr. Peterson uses two phases. First, begin a detox process while healing the gut. Second, build energy reserves by supporting energy pathways while supporting the immune system.

Here's how he describes his protocol: "I use 1 bottle of 21st Century Homeopathics Detoxification to "open" detox pathways, 1 tsp a day. Then I use the 21st Century Homeopathics Remedy that seems most important: acute or chronic stress, bacteria or heavy metal detox, based on presenting symptoms.

I continue with the homeopathics during the actual Lyme protocol as well. During this phase I use both caprylic acid, Caprin 4-5 tid, and oregano, A.D.P. 4 tid to clean out gut pathogens.

I have done hundreds if not thousands of stool analysis using a culture and sensitivity scale. Caprylic acid always comes back positive as a therapeutic agent. A.D.P. is one of the finest dysbiotic products available.

It's been known clinically that candida and probably other fungal forms suppress the immune system. We now know that candida causes hypomethylation. Methylation is a process that can silence or turn off genes. Hypomethylation therefore will allow destructive genes to be turned on or activated that can cause disease. Healing the gut will help facilitate healthy methylation which is a major bonus.

I support the adrenals by using ADHS with excess cortisol or ADB5-Plus with low cortisol. Most chronically ill patients need ADB5-Plus.

The next step is to ensure detox drainage pathways are open with Beta-TCP or Beta Plus if the patient has had their gallbladder

removed. I don't want to mobilize toxins if they are trapped in the liver. For liver detox I use MCS-2, 2 tid. I support HCL digestion as needed, generally Hydro-Zyme with meals.

My next step is to support healthy bowel function. I use a drink with patients twice a day containing 1 tablespoon of Colon Plus, 1.5 scoops of NutriClear, 1 scoop of Whey Protein Isolate, 1 tsp of IAG (immune enhancing arabinogalactans) and 1 tsp of Dismuzyme Plus Granules mixed with juice, almond, rice or coconut milk. If there is a propensity to constipation, I start with 4 Mg-Zyme at bedtime and increase by 1 each night until stools are "loose" and then back down one as improvement occurs.

Since by the time they come to see me they have already been on multiple rounds of antibiotics particularly doxycycline, I use BioDoph-7 Plus, 2-4 per day. After 30 days I palpate the gut and if still tender add IPS, 2 tid. I combine this with an anti-inflammatory diet and generally go for 8 weeks."

This is part 1 of a 2 part Tuesday Minute on Lyme disease. But as you can see this gut healing detox program is extensive. Dr. Peterson is methodic but aggressive as he addresses the basics of digestion, adrenal support, dietary inflammation and dysbiosis.

Serious cases need comprehensive care. Knowing that 70% of the immune system resides in the gut, the solution to any chronic immune challenge should begin by restoring gut health regardless of the label. The more serious the challenge, the more serious we have to be to restore the gut and I believe that is one of the reasons his success rate is so high. Be sure to look for part 2 on this topic.

Thanks for reading this week's edition. I'll see you next Tuesday.