Treating “Post-Treatment Lyme Disease Syndrome” And Its Mimics

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Morphology of Borrelia burgdorferi. Dark field image © Jeffrey Nelson, Rush University, Chicago, Illinois and The MicrobeLibrary

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LYME BORRELIOsis: 2nd Great Imitator

Lyme causes, mimics or contributes to more than 350 illnesses (www.nutramedix.ec)

Can mimic MS, myelopathy, polyneuropathy, brain tumor, encephalopathy (Neurosurgery. 1992 May;30(5):769-73)

Can cause meningitis, encephalitis, neuritis, mania, OCD, depression, schizophrenia, anorexia, dementia (Am J Psychiatry. 1994 Nov;151(11):1571-83)

Lyme can cause cardiomyopathy, CHF, perimyocarditis, arrhythmias, AV block and conduction disturbances (Eur Heart J. 1991 Aug;12 Suppl D:73-5)

90% of chronic fatigue patients are Lyme positive. (Informal study by American Lyme Disease Alliance)


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BORRELIOSIS: Usually Not Alone

Common Co-Infections
Borrelia burgdorferi, Borrelia afzelii, Borrelia garinii (& other species)
Bartonella (cat scratch fever & 31 other species of the bacteria)
Babesia (14 species of protozoa)
Anaplasma, Ehrlichia, Coxiella (and other rickettsia)
FL 1953 (Stephen Fry: protozoa called protomyxzoa rheumatica)
Microfiliaria (microscopic roundworm noted by Eva Sapi, PhD)
Chlamydia (a few species)
Mycoplasma (hundreds of L-forms)

Opportunistic infections (or Co-conspirators)
Parasites (other protozoa & helminths such as V.Klapowi lungworm)
Fungi (candida sp., aspergillus sp., penicillum sp., cladysporium, etc.)
Leptospira, Treponema sp. & Ochrobactrum anthropi (bacteria)
Viruses (HSV-1 & 2, HHV-6, CMV, Coxsackie, Human Parvovirus, etc.)
BORRELIA & CO-INFECTIONS: TRANSMISSION

Ticks, Mosquitos, Fleas
Blood Transfusions
Sexual Intercourse
Trans-Placental to Fetus
Breast Feeding
Unpasteurized Milk

William Harvey & Patricia Salvato, Med Hypothesis 2003, 60:724-59 (224 peer-reviewed references)
Most Blood Labs Miss Most Borrelia

- W. Harvey & P. Salvato, Med Hypothesis 2003; 60:724-759. (showed at least 2/3rds of the initial CDC Western blot & serum/urine PCRs for Bb were neg. in 455 fatigue patients but most became positive on subsequent testing in < 1 yr)
- Igenex is best known lab for Borrelia in US (ELISA & W.Blot)
- Advanced Laboratories (Pennsylvania) does Borrelia culture with immunofluorescent staining
- KS3Labs.com (Texas) does PCR for Borrelia & other bugs
- Microscopy (Norway) Biological and Biomedical Reports 2013;3(1):15-28
- Lymphocyte Transformation Test-MELISA = 86% sensitivity, 97% specificity, 93% reproducible DiagnMicrobiol InfectDis2007;57:27-34

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FIGURE 2. Average rate* of Lyme disease, by county of residence† — United States, 1992–2006§

* Per 100,000 population.
† County of residence was available for 98.1% of cases reported during 1992–2006.
§ During 2003, Pennsylvania reported 4,722 confirmed cases and 1,008 suspected cases.
Myth: Lyme is a Northeastern Disease

Dog vs. Human Cases: 2000-2006

Undercounting human cases leads to underdiagnosis

Misconceptions about Lyme Disease

- Lyme disease is only a concern in Northeastern states
- All patients recall a tick bite or bulls eye rash (>20% don’t)
- ELISA is a sensitive screening test (misses Dx >30% of time)
- Only one infectious pathogen is usually transmitted by the tick bite (usually at least two microbes & often more)
- A short course of antibiotics resolves all cases of Lyme disease (per “Treatment Guidelines” of IDSA)

Truth

Lyme disease is worldwide, may present as chronic and complex ‘medically unexplained symptoms’, is difficult to diagnose, is multi-microbial and difficult to treat.
Survival Strategy of Pleomorphologic Borrelia burgdorferi & Other Spirochetes

When exposed to antibiotics, Borrelia burgdorferi develops granules & cysts which are resistant to antibiotics.

This is why cyclic therapy is needed

Kersten A; Poitschekc: Rauch S.; Aberer E. 1995

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Post Treatment Lyme Disease Syndrome

• 2006 Infectious Diseases Society of America wrote chronic Lyme does not exist & called it PTLDS (IDSA said all Lyme is cured with 4 weeks of antibiotics)

• CT Attorney General brought antitrust suit against IDSA (b/o board members’ conflicts of interest)

• Court-mandated IDSA review was done with bias
  http://www.peh-med.com/content/5/1/9

• Medical boards sanction docs b/o IDSA guidelines

• Insurance companies refuse to pay b/o IDSA guidelines

• Lyme patients are suffering & unable to get treatment

• Solution?
Dallas, Texas Pilot Study 2003
(Unpublished)

The Question To Be Answered:

“Can Integrative Natural Medicine make a difference in chronically-ill Borreliosis patients given no hope by conventional medical doctors?”

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Multisystem Protocol for Borreliosis & Co-infections

- Blood Type Diet
- Enzymes with meals
- Enzymes between meals
- Vitamins & Minerals
- Herbs to detoxify and support all organs
- Homeopathics
- Samento

- Laser Detox
- Chi machine/Light beam generator
- Skin Brushing/MLD
- Bath Detox
- Self-adjustment
- Laughter
- Prayer
- Emotion Release

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The die-off of toxin-producing microorganisms releases toxins into the body and as one takes treatment to get better, they feel temporarily worse (described first by the German physician Karl Herxheimer)

- Herx reactions resolved rapidly in the study using drainage remedies
- Adverse reactions are rare with this natural treatment other than Herx
Dallas Pilot Study at 10 Weeks

• 28 Western-Blot-Positive Stage-3 Lyme patients started the study in Dec. 2002 (Borrelia & 1+Co-inf.)

• 14 “control” patients continued using conventional therapy during study; one improved moderately, 6 improved slightly, 3 worsened & 4 remained the same.

• Of 14 patients in “integrative” treatment group, 13 completed study (1 dropped out due to tumor surgery) and all 13 improved subjectively and objectively (2 moderately and 11 markedly &/or significantly).

• By 18 weeks, further improvement in the “integrative” group but not in the “control” group.
Multisystem Cowden Support Program
For Borreliosis, etc. As It Evolved

- Blood Type Diet
- Enzymes with meals
- Enzymes between meals (Serrapeptase)
- Vitamins, Minerals
- Magnesium Malate
- Detox herbs = Pinella + Burbur/Parsley/TMRD
- Stretching
- Cumanda or Banderol or Houttuynia+Samento

- Sulfa Detox = Sparga
- L-glutathione (liposomal)
- Light beam generator
- Lymph drainage/ Chi machine
- Bath Detox
- Laughter
- Emotional release
- Drink enough water
- Binding metals = Zeolite
- Mora or Enula +/- Lakato

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Richard Horowitz MD, then vice-president of ILADS, in Dec. 2006 started several hundred Lyme patients (who had failed to improve on antibiotic therapy) on the all-natural Cowden Support Program.

“Cowden Support Program” had developed from the Lyme Pilot Study in Dallas in 2003.

70% of his patients improved fairly quickly.

Dr. Horowitz presented this at ILADS Conf. 2007.

I evaluated some of the “failures” in his office.

Failures were toxic from mercury, biotoxins, & EMF, dehydrated, and had food allergies.

Cowden Support Program was then modified.

> 80% of subsequent Lyme patients improved.
Borreliose Centrum Study Germany

- 20 advanced Borrelia pts. w/ co-infections x9mo. on empiric Cowden Support Program
- 80% improved by symptoms (CFS, FM, joint pain, chest pain, HA, fever, chills, sweats, insomnia, anxiety)
- 90% improved by lab (Borrelia IgM, IgG by EIA & Blot, PCR, Elispot-LTT, CD57)
- 45% had Herx (resolved w/ Burbur, Parsley, Pinella)
- 1 patient had severe Herx to Cumanda/Houttuynia
- 1 patient stopped from cancer dx on week 2
- 1 patient stopped w/ unrelated psychosis month 5

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Cowden Support Program

- First 3 days take Burbur & Pinella 10 drops 2x/day & 4 drops of Trace Minerals Relax/Detox 2X/day
- Day 4 add 2 caps 2x/day Serrapeptase, 2+ caps Mg.malate, 10 drops 2X/day Sparga; also add Banderol & Samento-starting 1 drop each & building to 30 drops of each 2X/day
- Day 4 add every 3rd night 2 caps Zeolite, then on Day 49 change to Zeolite to Zeolite-HP (+/- DMSA)
- On day 78, cycle Banderol to Cumanda+ Mora then Enula+ Houttuynia 30 drops 2X/day for 12.5 days on, 36 hours off
- On day 78, cycle Samento 30 drops twice daily 12.5 days on, 36 hours off with each day of Mora, Enula, Banderol
- 190-day program + 2pg. Summary at www.nutramedix.ec

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Purpose of Each Product in CSP

- BurburDetox & TraceMinerals Relax/Detox imprinted with energies to detoxify liver, gallbladder, kidneys, lymph & ground matrix/mesenchyme
- Pinella for brain, spine & peripheral nerves detox
- Sparga imprinted with nosodes of sulfa drugs
- Magnesium malate helps produce adenosine-tri-phosphate, relaxes muscles & aids neuro-conduction
- Serrapeptase digests fibrin in capillaries, improves tissue oxygenation & exposes microbes to leukocytes
- Zeolite & Zeolite-HP bind heavy metals in the gut
- Broad spectrum antimicrobials are Samento, Banderol, Cumanda, Mora, Enula & Houttuynia

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University of New Haven Study

- In vitro studies done 2010 on Borrelia at University of New Haven (Connecticut)
- Compared doxycycline with Samento & Banderol against Borrelia burgdorferi (Bb)
- Samento & Banderol were as effective against Bb spirochetal forms as doxycycline
- Round-body forms of Bb increased with Doxy but decreased with Banderol & Samento
- Banderol + Samento eliminated biofilm but doxycycline did not (Townsend Letter 7/2010)
Effect of Therapies on Borrelia Biofilm

Control

Doxycycline

Banderol Only

Samento Only

Banderol+Samento

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In vitro eval. of Banderol, Samento, Cumanda, Stevia, Takuna, Enula, Mora, Houttuynia & Doxycycline vs 3 forms of B. burgdorferi (biofilm, cyst, spirochete)

Against Bb biofilm, all of the herbs were effective but Doxy was not effective.

Against Bb cyst, several of the herbs were effective but Doxy was not effective.

Against Bb spirochete, Doxy & all of the tested herbs were effective.
Lack of Toxicity of Herbal Products in Condensed Cowden Lyme Protocol

- Pharmacology & toxicology studies were done at the University of Guayaquil in Ecuador.
- Samento, Banderol, Cumanda, Mora, Enula, Houttuynia, Burbur, Parsley, Pinella, Sparga, Amantilla, Babuna, & Avea were all tested.
- Doses equivalent to thousands of times the recommended doses for humans caused no organ damage acutely or chronically nor any unexpected adverse-effects.
Anti-inflammatory Effects of Quantum-Enhanced Herbals

- Pharmacology & toxicology studies were done at the University of Guayaquil in Ecuador
- Drug Feldene reduced inflammation 99.8%
- Samento reduced inflammation 84%
- Cumanda reduced inflammation 97%
- Quina reduced inflammation 99.9%
- Noni Conc. reduced inflammation 99.4%
- Morinda Noni reduced inflammation 31.3%
Co-morbid Conditions in Borreliosis
(that can predispose to, or perpetuate, Borreliosis & Coinf’s)

1) Electromagnetic pollution
2) Gastrointestinal dysfunction
3) Fungi (candida, etc) and/or mycotoxin exposure
4) Parasites, “non-Lyme” bacteria & viruses
5) Focal infections (esp. in mouth)
6) Heavy metal & other toxins
7) Kryptopyroluria & genetic detox defects
8) Nutrient deficiencies
9) “Toxic” and/or allergenic foods
10) Emotional traumas
11) Adrenal and/or thyroid insufficiency
12) Structural misalignments
13) Hypoxia
14) CCSVI

2 webinars recorded on www.acimconnect.com
The Chicken & The Egg Question

- In some cases, one of these 14 comorbid conditions can onset first and then predisposed to Borreliosis (hypoxia, toxicity, nutrient depletion, electromagnetics...)
- In other cases, Borreliosis onsets first & predisposes to one or more of these 14 conditions, thus making recovery much more difficult
- In still other cases, one or more of these 14 conditions was present first, predisposed to Borreliosis, then the Borreliosis caused the onset of other conditions, which delayed recovery or fooled the patient &/or doctor that Borreliosis persisted
- Often times, can use ElectroDermal Screening or evaluative kinesiology to figure out which
1) ElectroMagnetic Pollution

a) Low-frequency EMR from 110-220V appliances, wall circuits, transformers & electric power lines
b) High-frequency EMR from cell-towers, cellphones, cordless phones, WiFi, SmartMeter, dirty-electricity
c) Human body affected by thermal-effect, ionizing radiation & non-thermal, non-ionizing effect
d) EMR can cause insomnia, depression, MS, ALS, immune disruption, cancer, other chronic diseases
e) EMR causes leaky blood-brain-barrier & dementia
f) EMR can increase biotoxins in body & in home*
g) Create sleep sanctuary

*Cross Currents by Robert Becker, MD
Microwave Absorption in Brain According to Age

The developing nervous system of the child is much more sensitive to electrosmog (Cellphone, Bluetooth, etc.) than that of adults after 5 minutes of cellphone use:

From D.Klinghardt
Electrosmog Effects from Cellphone Broadcasting

Within 300 meters of cellphone tower, significant increase of problems

Fatigue
Iritability
Headache
Nausea
Anorexia
Insomnia
Depression
Uneasiness
Brain Fog
Memory loss
Skin Problems
Optic Problem
Hearing Loss
Dizziness
Incoordination
Cardiovasc.Dz

Dr. R. Santini untersuchte 1999 den Zusammenhang zwischen dem Auftreten bestimmter Krankheiten und der Nähe zu Mobilfunk-Basisstationen in Frankreich. Anhand einer Befragung von 530 Personen kam er zu dem Ergebnis, dass sich innerhalb einer 300 m Zone folgende Symptome häufen: Müdigkeit, Schlafstörungen, Reizbarkeit, Kopfschmerzen, Gedächtnisverlust, Konzentrationschwierigkeiten etc.

www.funkenflug.de
Cellphone Effects on Rat Brain

Salford 2003: Left=Control, Right=50 days post a 2-hour cellphone exposure

Normal Control Rat Brain With no Areas of Necrosis/Inflammation

Cellphone Treated Rat Brain With Many Areas of Necrosis/Inflammation

Hirnschäden bei Ratten durch Handystrahlung. Die blaue Bildgruppe zeigt zwei stark vergrößerte, mikroskopische Hirnaufnahmen von zwei stündig bestrahlten Ratten.
Treatment For Electrosmog

- Create a sleeping sanctuary (sleep inside German canopy or Emergency Blanket tent without lights or geopathic & flip off breakers)
- Earthing (copper wire or grounding bedsheet)
- No microwave oven use (only convection)
- No cordless phones or fluorescent lights
- Avoid mobile phone use (never in the car)
- No WiFi & no RF-Smart-Meters

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2) Gastrointestinal Dysfunction

a) Chronic stress => hi cortisol & stomach damage
b) Low stomach HCl => poor alkaline tide & tissue acidity
c) Low HCl also => low bile & low pancreatic enzymes
d) This => low absorption of AAs, EPA, vitamins A,D,E,K
e) This => poor synthesis of proteins & membranes
f) This => problems in immunity/bone/brain/coagulation
g) Undigested gut protein => putrefaction & food allergy
h) This => immune distress, fatigue, N/V/D, abd.pain
i) This => liver/GB toxicity (enterohepatic circulation)
j) This => poor metabolism of hormones & toxins in liver
k) Do Stress-reduction-technique 4 minutes 4X daily
l) Do 4-day-rotational blood-type diet w/ food-combining
m) Aloe+enzymes
3) Fungi & Mycotoxins

a) Immune response to fungi/mold in home/workplace can mimic Lyme (do VCA test on SurvivingMold.com)

b) If +VCA, look for mold/moisture behind sinks, tub, etc.

c) Stop source of moisture then remediate (incl. AC ducts)

d) Then must do no sugar/no starch diet, antifungals plus probiotics twice daily & daily sinus irrigation for 8+ weeks

e) If on antibiotics before w/o mold, must do (d) for 8+weeks

f) Untreated fungi => fatigue, N/V/D/C/abd.pain/brain-fog

g) After doing steps in (d), bind mycotoxins with chitosan, fiber, Cholestepure, or cholestyramine & heal leaky gut

h) Sauna & oil-pulling can also remove mycotoxins

i) Banderol & Cumanda are 2 of the best fungal remedies

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4) Parasites, Non-Lyme Bacteria & Chronic Viruses

a) Low HCl allows parasites in food to grow in gut
b) Parasites cause leaky gut & food allergies
c) Parasites spread to other organs w/ many symptoms
d) Best Tx= DiatomaceousEarth + Enula/Cumanda/Banderol +/- Artemisinin (or Rife frequencies)
e) Many causes of tissue acidity (stress, food allergies, deficient minerals); acidity stimulates microbe growth
f) Strep(PANDAS), staph, chlamydia, mycoplasma, etc can be resolved w/ Cowden Support Program herbs
g) EBV, CMV, herpes & other viruses can be resolved with Takuna, MCT oil, Lauricidin, Larix, Lomatium

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5) Toxic Focal Infections

a) An area of man-made & bio-toxins + microbes

b) 80% of toxic foci are in head & neck (sinuses, tonsillar crypts, root canals, dental extract sites)

c) Other toxic foci = GB, bile ducts, appendix, fallopian tubes, prostate, spleen, etc.

d) Adversely affects organs thru acupuncture meridians & via poisoning thru blood stream

e) Cannot be cleared with antibiotics

f) Often requires surgical drainage to resolve

g) 80% of dental toxic foci clear w/ Oral Health

h) Sinuses can clear w/ diet, oral herbs & NetiPot

i) Chi-machine
6) Heavy Metals & Other Toxins

a) Mercury from dental amalgams, fish, etc. poisons microtubules (mitosis, pseudopods, neurons...)
b) Aluminum from antiperspirants, cooking pots, etc.
c) Lead from coal-burning, old paints, leaded gas, etc. poisons brain, bone, bone marrow, enzymes
d) Ni, Cd, Ti, Pd, etc. cause allergic inflammation (MELISA.org)
e) Radioactive metals & iodine from Fukushima, nuclear weapons cause cancer & chronic infection
f) Pesticides, herbicides, solvents, GMOs, etc. disrupt DNA, enzymes, hormones, neurotransmitters
g) Eat organic, remove amalgams, take NM-Zeolite-HP, take Lugol’s iodine, do saunas & oil-pulling +/- DMSA, Lipophos-EDTA
The Detox Dilemma

- If one attempts to detoxify heavy metals from their body before they remove their amalgam fillings, most chelators will move more mercury from their amalgams into their tissues (zeolite does not cause this problem but cannot detox enough alone)

- This usually makes it preferable to remove amalgams first (& other dental metals that test as problems by MELISA testing), then detoxify heavy metals

- Biological dentists use safest removal techniques
7) Kryptopyrroluroria & Detox SNiPs

a) **Kryptopyrroluria** from heme metabolism defect poisons detox pathways (in >90% of Lyme pts)

b) Treat KPU w/ zinc, manganese, B6, C, biotin, Mb

c) Metal-bindners often needed (DMSA, DMPS, EDTA)

d) Some **Single Nucleotide Polymorphisms** impair detox (GST, CytP450, SUOX, CBS, MTHFR, etc)

e) Treat SuOX w/ molybdenum; MTHFR w/OHB12 and 5MTHF; GST w/ liposomal-glutathione; CytP450 w/ milk thistle, sauna, oil-pulling

f) Treat CBS with low-Sulfite/ low-sulfur diet, taking TMG & Nutramedix Sparga plus avoiding vitamin B6
8) Nutrient Deficiencies

a) Get most nutrients from organic, non-GMO foods
b) Nutrients often missing: Mg, chromium, Zn, iodine, EPA, D3, CoQ10, vitC, other antioxidants, minerals
c) *Fewer antioxidants needed if Earthing all night
d) Zinc citrate, C, chromium polynicotinate after food
e) Best Mag = Malate, then 2AEP or glycinate w/ Zn, C
f) Fulvic minerals w/ Mag (improves lactic acidosis)
g) Best CoQ10 = Ubiquinol in oil-gelcap before food
h) Best D3 mycelized w/ EPA/DHA & Q10 before food
i) Lugol’s iodine orally 30min. before food
j) 5-MTHF, B3, B5, B2, B6, B12, ribose, carnitine if tired

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Insufficient Nutrients

- Eating “fast-food” speeds you to your grave
- Eat for health first (side benefit is good taste)
- With meals, no fluids, esp. cold drinks
- Eat as much raw, organic, non-GMO, sprouted & fermented foods as possible
- Food green-picking, processing, cooking & preservatives reduces nutrients
- Soil depleted from corporate farming x 100+ years
- Many nutrients wasted from the body under stress (Mg, chromium, B vitamins & vitamin C)
- A toxic body uses up nutrients faster

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9) Toxic & Allergenic Foods

a) Sugars cause inflammation, Synd.X (esp. fructose)
b) No toxic oils = peanut, canola, hydrogenated, fried
c) Genetically-Modified (wheat, soy, corn, caged-chickens, feed-lot-beef) cause cancer, allergies, autoimmunity
d) Leaky Gut from fungi/parasites/EMR causes allergy
e) NSAIDs & other drugs also cause leaky gut
f) Foods wrong for blood type more likely allergenic
g) Foods wrong for metabolic type => acidity/alkalinity
h) Food allergies cause allergic gastritis/enteritis, tissue acidosis, mineral depletion, more infections, immune-disruption, body-wide inflammation, more cancer risk
i) 4-day clean-food rotation using Coca pulse test

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10) Emotional Traumas

a) Emotional events in childhood or intra-uterine emotions felt from parents cause physical toxins to accumulate in organs (anger in GB; fear in UB, KI)

b) Toxins disrupt organ function & attract microbes

c) Immune response to microbes is inflammation

d) Evox + Recall Healing + Ezov drops can resolve even subconscious emotions from parents & self

e) When emotion resolves, physical toxins leave the affected organ, thus changing the “tissue terrain”

f) Microbes leave when the terrain normalizes, then inflammation & symptoms resolve
11) Adrenal & Thyroid Insufficiency

a) Stressors can be emotional, chemical, EMR, structural (MVA, sleep-apnea...), microbial, etc.

b) Adrenal response to protracted stress exhausts adrenals & thyroid tries to compensate

c) Thyroid can develop hyperfunction or burn-out

d) If thyroid & adrenal both exhausted, first resolve stress & rebuild adrenal, then rebuild thyroid (to avoid palpitations, chest pain, anxiety, insomnia, etc)

e) Evox, Stress-Reduction 4 min. 4x/day, B5, C, herbal adaptogens +/- adrenal glandular/live-cell 3-5d/wk

f) For thyroid, visualize/rage to speak all unspoken issues, take Lugol’s iodine +/- tyrosine & tx scars

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12) Structural Misalignments

a) Most common structural misalignment is C1
b) Most common C1 cause is anger affecting GB20
c) If one does conscious & subconscious forgiveness, then turns their own neck, often C1 re-aligns
d) Next is sacro-iliac misalignment which can come from sexual frustration or poor family support
e) At bedtime self-adjusting both hips & both SI-joints decreases adrenalin release from pelvic ganglia
f) Then sleep can be deeper & more healing
g) Sleep-apnea is common cause of chronic dis-ease
h) TMJ dz & malocclusion also stress entire body
13) Hypoxia (& Lactic Acidosis)

a) **Hypoxia** from shallow breathing (esp. “stress”): Breathe deeply (Stress-Reduction x4min.4x/day)

b) **Hypoxia** from mucus & biofilm in alveoli or CHF: Avoid mucoid foods (dairy, gluten, soy); Mucolyxir; Biofilm remedy (vinegar, Banderol/Samento); EVOX (brokenheart)

c) **Hypoxia** from low hemoglobin or carbon monoxide (cigarette smoke, bad furnace, poorly tuned car): Avoid smoke, tune the car & furnace; EWOT; HBOT

d) **Hypoxia** from fibrin lining capillary endothelium (from fibroblast response to infection): Serrapeptase/Lumbrokinase/etc. 30min.ac 2-3x/day; Treat infection
Co-morbid Conditions in Borreliosis
(that can predispose to, or perpetuate, Borreliosis & Coinf’s)

1) Electromagnetic pollution
2) Gastrointestinal dysfunction
3) Fungi (candida, etc) and/or mycotoxin exposure
4) Parasites, “non-Lyme” bacteria & viruses
5) Focal infections (esp. in mouth, head, neck)
6) Heavy metal & other toxins
7) Kryptopyroluria & genetic detox defects
8) Nutrient deficiencies
9) “Toxic” and/or allergenic foods
10) Emotional traumas
11) Adrenal and/or thyroid insufficiency
12) Structural misalignments
13) Hypoxia
14) CCSVI

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14) Chronic CerebroSpinal Venous Insufficiency (CCSVI)

a) CCSVI 1st described in MS patients by P. Zamboni


b) Patients had jugular/azygous vein stenoses

c) Some MS pts got better instantly with angioplasty

d) Many who got better had recurrence

e) Reimaging showed restenosis of jugulars

f) But no one has proven why veins re-stenosed
Infectious Etiology of Vasculitis
(Possible Contributor to NeuroBorreliosis)


Abstract: Infectious agents have been implicated in the etiopathogenesis of various vasculitides via numerous and overlapping mechanisms including direct microbial invasion of endothelial cells, immune complex mediated vessel wall damage and stimulation of autoreactive B and/or T cells through molecular mimicry and superantigens. While the causative role of hepatitis B virus in polyarteritis nodosa and hepatitis C virus in mixed cryoglobulinemia is clearly established, evidence is accumulating for the association of other infectious agents with vasculitis, including HIV (human immunodeficiency virus), parvovirus B19, CMV (cytomegalovirus), varicella zoster virus, *Staphylococcus aureus*, *rickettsiaceae*, *Treponema pallidum* and *Borrelia burgdorferi*, among numerous others.
Color-Flow Doppler & Phlebography On Same MS Patient - Distal Internal Jugular Vein Stenosis With Substitute Collateral (SC) Veins

P Zamboni & R Galeotti – Phlebology 2010; 25:269-279
CCSVI Unpublished Observations

- Dietrich Klinghardt, MD, PhD found CCSVI by Doppler-imaging in nearly all of his patients with MS, autism & chronic Lyme disease (unpublished)
- He saw quick improvement with vein angioplasty in many but large % symptom recurrence if borrelia & co-infections were not fully treated first
- He theorized that some CCSVI pts. have a microbial venous vasculitis with venous scarring, possibly explaining CCSVI recurrences after balloon dilation
- David Hickey, MD & I have found “hot” jugular veins by thermography on all 25+ CCSVI patients in Dallas (diagnoses Lyme disease, autism, CFIDS, chemical sensitivity, presenile dementia, not just MS patients)
Thermography of Inflamed RIJV

Patient with Borreliosis & chronic headaches
“Normal” Neck Thermography (except for inflammation of thyroid & left sinus)
Distinguished doctors of our Scientific Advisory Board have joined me to make a difference.

Connealy
California

Gordon
Arizona

Cowden
Panama

Contreras
Mexico

Kuipers
Netherlands

Klinghardt
Germany

Renaud
Canada

Clark
Florida

Perez-Leon
Spain

Mercola
Illinois

Thompson
Canada

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