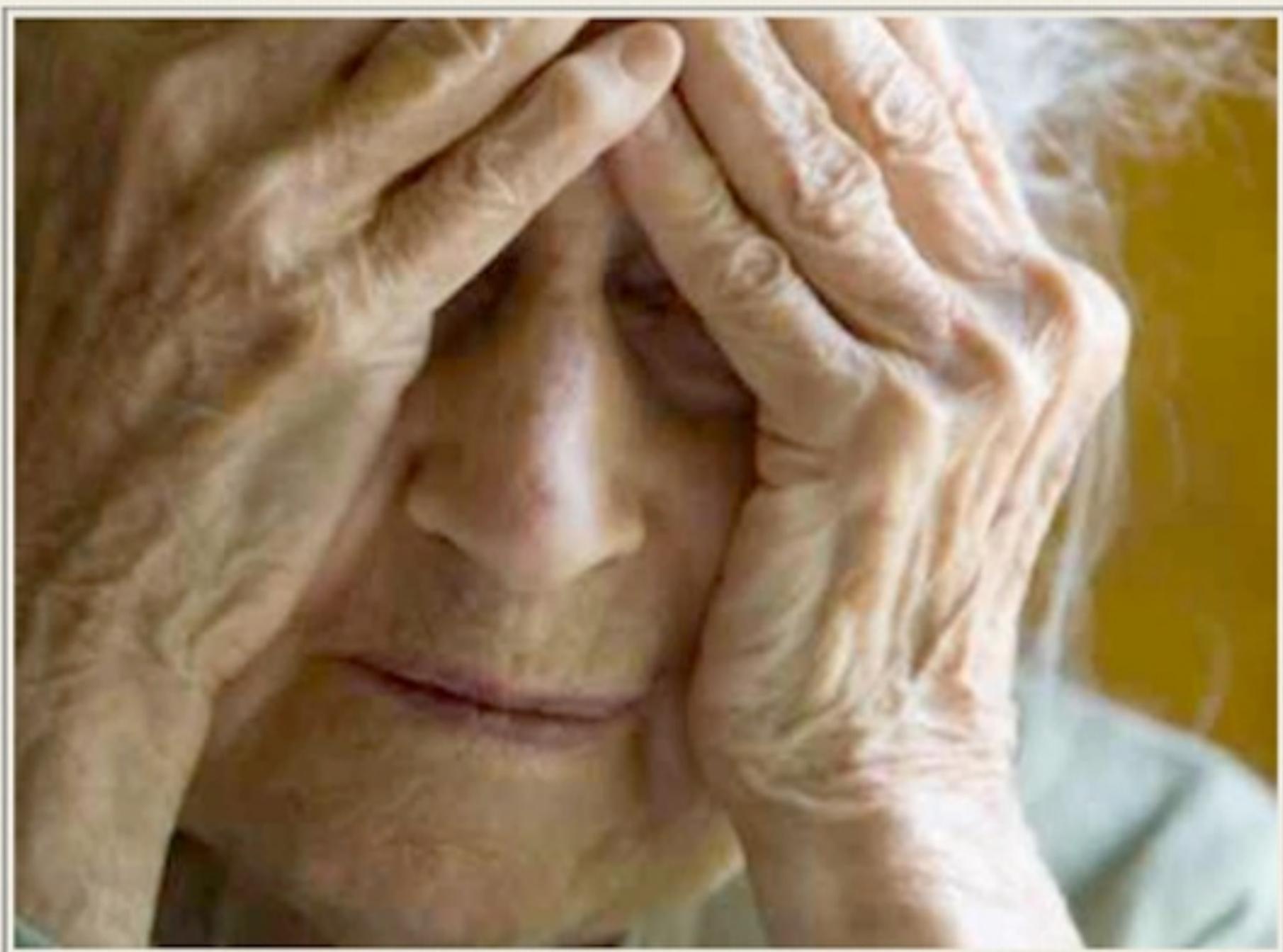

Reversing
Alzheimer's

By
Dr. Gerald Veurink



Foreword

Dementia is expected to become the number one health concern this century. It is projected to affect 115 million people worldwide by 2050. Families, friends and carers are overwhelmed by the affect of dementia on their loved ones. So it is extremely important to provide treatments that can prevent , stall or even reverse the disease. In addition to that it is also very costly to administer care to the patients. In 2010 the estimated cost in United States Dollars was \$604 Billion, and that is expected to increase dramatically by 2050. “Reversing Alzheimer’s” was priced at \$19-95 and was on Apple’s iTunes Store for \$9-99 but in order to reach as many people as possible I have decided to make it available FREE of charge. Please share it with anyone affected by Alzheimer’s. You may copy it, print it, email it, share it, like it and forward it to anyone as long as it is complete. It may not however, be sold in any format.

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To your good health and your loved ones,

kind regards

Dr. Gerald Veurink.



Need For Innovative Thinking

Innovation is needed to develop combinations of medicines that address all the factors involved in the disease process, and so providing a cure rather than symptomatic relief using a single ingredient medicine. For example combinations that alkalize, provide antioxidants, improve oxidation reduction potential, increase neurotransmitters, decreasing insulin resistance, provide nutrients for increased growth of new neurons (brain nerve cells) and removing plaques. Research has shown that there are many natural ingredients which provide these actions (Refer to Pubmed for example and see below).

Combined Antioxidants Therapy for Alzheimer's Disease.

A large number of research articles have demonstrated that antioxidants are helpful for Alzheimer's Disease. Antioxidants are substances which prevent oxidation such as vitamin C and vitamin E which remove or mop-up potentially damaging oxidising agents (free radicals or reactive oxygen species) in living organisms.

Different antioxidants have different mechanisms of action, and are effective against different free radicals. For example, vitamin C is effective for protecting cellular components in an aqueous environment, whilst vitamin E and carotenoids protect cellular components in lipid environments.

Since both lipophilic (fat soluble) and hydrophilic (water soluble) phases occur in biological systems, it is wise to use antioxidants which are effective in each phase or in combinations which can act synergistically. No single antioxidant is likely to be capable of scavenging the variety of free radicals formed in Alzheimer's disease, therefore, the utilisation of multiple antioxidants as a preventative measure or as a treatment for neurodegenerative disease has been postulated to be more beneficial than the use of single antioxidants.

A combination of antioxidants is likely to have a synergistic effect, as well as regenerate other antioxidants. For example, various studies have shown that ascorbic acid (Vitamin C) recycles alpha-tocopherol (Vitamin E). It has also been shown that consumption of whole fruits and vegetables or their juices is superior to an ascorbic acid supplement for antioxidant effectiveness.

It is likely that the combination of antioxidant ingredients in fruits and vegetables also have a synergistic effect.

The fact that various antioxidants protect neurons *in vitro* and *in vivo* from beta amyloid-induced oxidative stress lends further support for the use of a combination of antioxidants as an adjunct to other therapies in the treatment of Alzheimer's disease. Clinical studies have already found that vitamin E taken at 1000 IU twice daily delays the advent of death, institutionalisation or significant functional decline in patients with moderate Alzheimer's disease.

However, vitamin E in combination with vitamin C may prove to be even more beneficial to Alzheimer's disease patients as vitamin C recycles vitamin E as mentioned, to its active form and, more recently, a study of vitamin intake has in fact found a reduced incidence of Alzheimer's disease following the combined intake of vitamins C and E, but not vitamin C or E alone.

Recent reviews of such clinical studies of vitamin C and E intake in elderly patients have also concluded that it is likely that the combined intake of these vitamins may reduce the risk of Alzheimer's disease.

Not all studies agree, however; for example, one study of the intake of carotenes (vitamin A) and vitamins C and E from both dietary and supplemental sources did not find a reduced incidence of Alzheimer's disease in a 4 year follow-up of the elderly patients in the study. Nevertheless, this study may have had problems estimating dietary intake of vitamins as these were only calculated from food frequency questionnaires and the vitamin content of the foods would have been rough estimates only.

Since epidemiological studies have revealed a variety of dietary interventions which may slow down or prevent the onset of Alzheimer's disease, more fresh fruit and vegetables in a calorie-restricted healthy diet low in trans-fats and carbohydrates (sugars), possibly supplemented with a combination of antioxidants, may prove to be a beneficial preventative measure.

Other Aspects of Nutrition and Alzheimer's Disease.

Researchers have found that African-Americans and Japanese living in the United States have a much higher incidence of Alzheimer's disease (6.24% and 4.1% respectively) than their counterparts (<2%) living in their homelands. This suggests that environmental factors are also important players that interact with genetic susceptibility factors, or may play independent roles in the pathogenesis of Alzheimer's disease. This study also found that levels of fat intake had the highest correlation with both Alzheimer's disease and the prevalence of senile dementia, and that a high correlation existed between total caloric supply and the prevalence of Alzheimer's disease.

Similar findings on the deleterious effect of high saturated fat and trans-fat consumption on cognitive function in aged men have been independently reported.

Cancer, coronary heart disease and Alzheimer's disease become increasingly prevalent with age. Decreased fat intake has been linked to a reduced risk of coronary heart disease. Furthermore, individuals with coronary heart disease also have an increased density of senile plaques in their brains.

Many studies have found a large overlap in risk factors for these two diseases. Such studies also give credence to the notion that environmental factors are important agents in Alzheimer's disease.

These studies also provide strong evidence that inappropriate diets may contribute to the pathogenesis of Alzheimer's disease as well as heart disease via an increased occurrence of oxidative stress or impaired cholesterol metabolism.

The concept that diet can affect mental ability and susceptibility to neurological disorders is not new. Several thousand soldiers held as prisoners of war in Japanese camps were made prematurely senile by almost four years of malnutrition. Supplementation with megadoses of nicotinic acid (Vitamin B3 at 3 grams per day) restored mental capacity. This led to the conclusion that “senility is due to chronic malnutrition and that it is a vitamin-dependent condition which comes from many years of mild or moderate chronic vitamin deficiencies”.

A variety of other nutritional factors have also been integrally linked with Alzheimer's disease. For example, it has been shown that dysregulation of energy balance, vitamin B12, folate and homocysteine levels play a role in the pathogenesis of Alzheimer's disease.

It has therefore been suggested that an integrated medicine approach combining evidence-based treatments from the literature on dietary intervention, a reduction in stress, an increase in exercise, and dietary

supplementation with pharmaceuticals and/or vitamins and antioxidants into an all-embracing complementary treatment strategy would benefit the elderly in many health aspects, and possibly reduce the risk of age-related conditions including Alzheimer's disease.



Mineral and Antioxidant Deficiencies in Foods

Agricultural methods

Unfortunately the nutrients contained in food crops has decreased over the last 200 years or so.

The nutritional value of crop plants is determined by a number of factors including genetic makeup, the type of soil in which the plants are grown, seasonal effects, stage of maturity at harvest, and the quantity and type of fertilisers used in the production of the plants.

Hundreds of years of agriculture using the same soil in many countries have slowly drained soils of minerals. In addition, pesticides and herbicides have been sprayed on most soils, inadvertently destroying the microorganisms which are needed to release many of these minerals and to maintain soil fertility.

In Western Australia it is common practice to test soils for nitrogen, phosphorous and potassium (NPK) levels since that is all plants need to look good and grow; other macro and trace elements are rarely tested, and thus depletion of many essential minerals has not been documented carefully, or even measured, in many areas.

The continuous yearly application of NPK fertiliser has resulted in a high phosphate status of soils, and two thirds of high phosphate status

soils have been found to be deficient in sulphur and a quarter deficient in potassium.

Problems are compounded by the fact that high phosphate soils greatly diminish the uptake of copper, zinc and manganese by plants, probably owing to the formation of complex phosphate salts. Essential minerals and trace elements are not replenished with the addition of NPK fertiliser and the resulting food crops are severely deficient in them.

Low zinc levels in soils have been found in many regions throughout the world, this may directly impact on antioxidant status since zinc has a direct antioxidant action by occupying iron or copper binding sites in lipids, proteins and DNA.

Interestingly, it has also recently been reported that zinc binding to beta amyloid inhibits neurotoxicity by suppressing the generation of hydrogen peroxide.

These studies and many others suggest there is a need for mineral replenishment of soils, since depleted soils cause deficiencies in plants which will have a detrimental impact on the entire food chain.

For example, studies comparing the antioxidant status of fruits such as plums, pears and peaches have found that levels of vitamins C and E and polyphenols are significantly higher in these fruits when grown using organic practices instead of conventional methods.

It has also been demonstrated that increased soil organic matter content increases the uptake of copper, zinc and manganese in oat crops.

The agricultural problems are further aggravated by the common harvesting procedure of picking fruits and vegetables before they reach maturity, despite the fact that most fruits and vegetables reach their maximum vitamin content at maturity. This practice also impacts upon the phytonutrient and antioxidant content.

Food processing and storage methods

Extensive research needs to be undertaken on the effects of storage on vitamin and phytonutrient levels in fruits and vegetables, since some studies have demonstrated their reduction during storage. Processing and preservation of foods increases the problem further; for example, nutrient losses following the refining of flour and sugar have been demonstrated.

Similarly, a marked decrease of all trace elements with the exception of copper occurs when rice is polished.

Large losses of nutrients also occur due to the canning of fruits and vegetables. Although the snap-freezing of vegetables is thought to preserve many of the vitamin content of such foods, it has been found for example that the freezing of vegetables results in a loss of 37- 56% of vitamin B6 levels.

Levels of vitamin B6 and pantothenic acid are also decreased as a result of freezing and canning of fruits or fruit juices, with losses ranging from 7% to 50%.

Wholegrain foods on the other hand are valuable sources of nutrients which are low in the diet, including dietary fibre, the B-group vitamins, vitamin E, selenium, zinc, copper, magnesium and phytonutrients, including the phenolic antioxidants.

Whole-grains are also a source of alpha-sitosterol, a cholesterol-lowering plant sterol.

Recently, some strategies have been developed to combat zinc and iron deficiencies by the fortification of these compounds in bread flour however, it is still lacking in sufficient nutrients.

Another problem is that the gluten content of wheat has been raised from 5% to 50% through the development of various hybrids and genetic modification of the wheat. It also means that the other nutrients in wheat have been lowered.

Recent research has established that the high levels of gluten has made the flour toxic to humans as it causes leaky gut syndrome. This means that holes are formed in the intestines, and then some of the contents of the intestines get into the blood stream. As a result the immune system attacks it so setting up a continuous process of inflammation. Therefore, it is not surprising that we see an increase in autoimmune diseases and an increase in various degenerative diseases. At least 205 diseases have been associated with wheat and/or wheat gluten. See website below for more information.

<http://www.greenmedinfo.com/toxic-ingredient/wheat#>

I therefore strongly advice everyone to stay off bread and wheat products.

Around 40 micronutrients including vitamins, essential minerals and trace elements are required in the human diet. Recommended dietary allowance of micronutrients is mostly based on information on acute effects of dietary deficiencies.

However, for long-term health, the optimum intake of dietary micronutrient quantities is largely unknown, and a substantial percentage of the population is deficient in many of the micronutrients.

Many individual essential minerals have been found to be lacking in Western diets despite the availability of a huge range of foods, and supplementation of such minerals may prove to restore antioxidant balance in the body, or improve resistance to Alzheimer's disease via other mechanisms.

For example, magnesium has been studied extensively by researchers and has been demonstrated to lower serum total cholesterol, decrease serum LDL and insulin-stimulated glucose uptake in type 1 diabetic subjects.



Low Carbohydrate Diets

In developing countries diets are increasingly becoming higher in trans-fats, carbohydrates and refined foods; however, levels of fibre have decreased. These dietary factors are contributing to a rapidly increasing prevalence of obesity and type 2 diabetes and a decline in health, particularly in the aged.

Alterations in dietary lipids have been posited as playing a role in cognitive defects in Alzheimer's disease. It may be likely that high-carbohydrate and high-fat (transfats & saturated), high-cholesterol diets, together with declining levels of vitamin B12 and folate and with declines in trace minerals, may play a role in the pathogenesis of Alzheimer's disease.

The common recommendation of low-fat and high-carbohydrate diets, however, is contradicted by various studies. In fact, studies of glucose metabolism suggest this sort of diet is actually detrimental to human health. For example, in a dietary intervention study in which patients were subjected to either a high-fat or high-carbohydrate diet, it was demonstrated that triglyceride, glucose and insulin levels were higher on the high-carbohydrate diet.

In another dietary intervention study, it was shown that a high-carbohydrate diet lead to increased insulin, and triglycerides but to significantly lower levels of HDL. Similar results were seen in non-insulin-dependent diabetes mellitus subjects when fed high- and low-

carbohydrate diets; the conclusion suggested that high- carbohydrate diets did not improve glycaemic control nor insulin sensitivity but contributed to raised plasma triglycerides and VLDL concentrations yet reduced HDL levels.

Moreover, it has been demonstrated that a high- monounsaturated-fat, low-carbohydrate diet improves insulin sensitivity peripherally in non-insulin-dependent diabetes mellitus subjects.

The effect of high dietary fat on endurance performance in athletes has also been assessed, and a significantly improved performance was demonstrated when compared to a diet with high carbohydrate intake.

Studies of aerobic exercise and diet on obese women have also demonstrated that a greater loss of weight occurs when subjects are on a low-carbohydrate diet than when consuming a low-fat diet.

The use of a low-fat, high-carbohydrate diet has also been found to increase hyperglycaemia and hyperinsulinaemia, therefore leading to upper-body obesity, glucose intolerance, hypertension and hypertriglyceridaemia. For example, a cross-sectional study of subjects in India revealed that central obesity was associated with higher postprandial plasma levels of insulin, glucose, serum iron and oxidative stress. This study also found that vitamin C, vitamin E, serum zinc/insulin ratio and serum magnesium/insulin ratio had an inverse association with high body fat.

In addition, when a diet consisting of 17 snacks per day was compared to the common three meals per day, a reduction of fasting serum cholesterol, LDL, apolipoprotein B and mean serum insulin levels were demonstrated. These results suggest that the frequency of meals is an important determinant of fasting serum lipid levels, probably due to the changes in insulin secretion.

Insulin resistance syndrome and associated conditions such as type 2 diabetes mellitus and hypertension are associated with age-related

memory impairment and Alzheimer's disease. As the evidence of links between insulin resistance, impaired glucose metabolism and Alzheimer's disease increases, it would appear that diets appropriate for the prevention of diabetes and obesity may also be appropriate for the prevention of Alzheimer's disease.

A meta-analysis of a number of studies has also revealed that high-mono-unsaturated-fat diets can improve lipoprotein profiles and glycaemic control in patients with type 2 diabetes. Therefore, a diet rich in mono-unsaturated fatty acids and medium chain saturated fatty acids (as in organic coconut oil) and low in carbohydrates, trans-fats and long chain saturated fats, may be useful for the elderly and also for Alzheimer's disease patients.

Benefits of Olive Oil.

HDL, which carry cholesterol from the body's tissues to the liver, are considered to be the 'good' form of cholesterol. LDL, often classed as the 'bad' form of cholesterol, contain greater amounts of cholesterol than HDL, carry cholesterol and fatty acids from the digestive tract to tissues, and have been linked to the formation of atheromas, atherosclerosis and heart disease.

Various studies have demonstrated positive health effects, including raising HDL/LDL ratios, following the replacement of saturated fatty acids with monounsaturated fatty acids in the diet, such as those present in extra virgin olive oil. For example, in patients who consumed a liquid diet in which high levels of mono-unsaturated fatty acids were incorporated, LDL levels were lowered and the levels of HDL were maintained or increased.

The effects of an oleate-rich versus a linoleate-rich diets have also been assessed in humans, resulting in the finding that mono-

unsaturated fat alters LDL fatty acid composition and that LDL become less susceptible to oxidation.

It has since been demonstrated *in vitro* that LDL oxidation is inhibited to some extent by the naturally occurring polyphenolic antioxidant compounds in extra virgin olive oil. In fact, extra virgin olive oil phenolic compounds have been shown to be more potent in preventing the oxidation of human LDL than their pure components and probucol.

In support of this, another study has found that the phenolic compounds in olive oil protect LDL against the peroxy radical dependent and metal-induced oxidation *in vitro*, although olive oil lacking phenolic compounds also protect against LDL oxidation.

Various mechanisms have been proposed for the antioxidant effects of olive oil. In a randomised and strictly controlled crossover study, it has been demonstrated that a diet enriched with olive oil (but not rapeseed or sunflower oil) beneficially affects postprandial blood coagulation factor VII by lowering its concentration. This study was carried out to investigate the lower than expected ischaemic heart disease found in Crete, given the blood lipid profiles of the population, and supports the concept that the high olive oil intake of these people protects against thrombogenesis.

It has also been reported that olive oil has anti-inflammatory effects due to the oleic acid content of these oils. The polyphenolic antioxidant hydroxytyrosol is thought to exert its antioxidant effect via the chelation of free metal ions and by scavenging free radicals.

Studies of the individual purported anti-cancer and antioxidant components of olive oil, for example studies of hydroxytyrosol, have not always found significant beneficial effects. However, there are substantial amounts of other compounds deemed to be anti-cancer agents (e.g. squalene and terpenoids) as well as the secoiridoids and lignans antioxidants and the peroxidation-resistant lipid oleic acid.

Therefore it is prudent to make sure you are getting nutrient-rich food in your diet to prevent or even reverse degenerative diseases.



A New Treatment Approach

In war, battles are fought on different fronts and employ not just an army, but also the navy and air-force, so too the treatment of Alzheimer's disease should battle the disease from various approaches. It is my belief that a one ingredient “magic bullet” will never be found to treat Alzheimer's Disease because the disease has many factors involved in it, each one which must be addressed in order to bring about a cure. Single ingredient drugs which may provide symptomatic relief of an aspect of the disease will not be able to deal with all aspects or factors of Alzheimer's Disease. Therefore a new paradigm shift must be made in order to create combinations of ingredients which deal with all aspects of the disease process and so bring about a cure.

The environment in which the neurons live must be made alkaline, this helps to prevent the deposition of protein remnants or peptides and also to minimise free radical production.

Blood sugar levels must be kept low to prevent the cross-linking of peptides with sugars which result in the formation of insoluble advanced glycation end products.

Nutrients beneficial for optimising the immune system and for repairing or generating new neurons must be supplied.

The spice turmeric provides curcumin which assists in the removal of plaques in the brain.

Omega 3 fatty acids (EPA and DHA) are necessary for a reduction in inflammation.

Antioxidants are needed to mop up the devastating free radicals.

To bring all this about a low carbohydrate diet must also be started and maintained for the duration of the treatments as well as drinking the brain booster smoothie up to three times per day.

Brain Booster Smoothie.

Combine the following ingredients in a suitable mixing container and then use a stick mixer to mix all the ingredients.

- 1 Tablespoon of Chia powder
- 1 Tablespoon of unsweetened chocolate powder
- 1 Tablespoon of Spirulina powder
- 2 Free Range Eggs
- 1 Tablespoon of Organic Coconut Oil
- 1 Teaspoon of Turmeric powder
- 1/4 Teaspoon of Cinnamon powder
- 1/4 Teaspoon of Clove powder
- 1 Teaspoon of Sodium Bicarbonate
- 1 Teaspoon of either Xylitol or Stevia powder (can be more or less depending on taste)
- 750 mL of water

(The best water to use is from fresh running mountain streams, electrolysed water (alkaline) is next best, otherwise use distilled water).

The Brain Booster Smoothie provides the necessary ingredients to optimize the healing of the brain. Chia and spirulina are super-foods that supply the amino acids needed for the repair and replacement of neurons. They also provide the best sources of natural minerals and vitamins. Chia is also an excellent source of ALA which the body can convert to EPA and DHA omega 3 fatty acids which have been demonstrated to be helpful in Alzheimer's disease. However, as we age this conversion process is limited.

Chocolate powder is an extremely good antioxidant, moreover, it is excellent for the brains circulation.

The free range egg provides lecithin which assists in providing choline for the neurotransmitter acetylcholine necessary for memory.

Organic coconut oil provides the energy needed for the repair of neurons without raising blood sugar levels.

The turmeric powder provides curcumin which has been demonstrated to attach to the plaques in the Alzheimer's brain to help remove them.

Cinnamon powder assists in maintaining proper blood sugar levels and also is an extremely good antioxidant.

Clove powder has a very high ORAC (measurement of antioxidant status) and so is one of the best antioxidants.

A teaspoon of sodium bicarbonate is added to the smoothie in order to make the extracellular pH more alkaline.

The Xylitol or Stevia powder are added to improve the overall taste of the smoothie without raising blood sugar levels.



How About Dietary Recommendations

The secret to treating degenerative diseases such as Alzheimer's disease, arthritis, heart disease and strokes etc. is to raise the pH of the extra-cellular matrix. That is, make the ambient environment for your body cells more alkaline or basic as it should be at around pH 7.4.

You may well ask, why is that important? An acidic environment for your cells amongst other processes, causes a dramatic increase in free radical production so that your body needs far more antioxidants to cope with any disease process. Free radicals are associated with virtually all disease processes.

So how can you best raise the alkalinity extra-cellularly? The simplest way is to eat only vegetables until you are healthy again.

Wait a minute, are you serious???? What about the proteins, carbohydrates, minerals, vitamins, fat and fibre that I need in my diet? Glad you asked. Let us consider how much protein your body really needs. Whilst a baby is growing most rapidly, the protein content of the mother's milk is less than five percent. Not much at all is it? You can easily get that much protein from a variety of vegetables. Vegetable proteins represent a much wider range of varieties, nutritional values and tastes. The most desirable proteins are found in sprouted vegetables such as peas, beans, lentils. Raw seeds and nuts as well as avocado's also are rich in all the essential amino acids.

O.K. What about carbohydrates? Vegetables are also a wonderful source of carbohydrates from dry raw broad beans which have 388 calories per hundred grams down to raw mature hot red peppers which have 93 calories per hundred grams. Furthermore, your body is so unique it can make energy from proteins, carbohydrates and fats. Let me explain.... your body converts and assimilates proteins, carbohydrates and fats and one of the end-products of these chemical reactions in the body is glucose. Let me repeat. Your body can make glucose from either fats, carbohydrates or proteins.

So what are the best vegetables to eat then? All vegetables are great and good for you especially if they are grown organically. The healthiest choices and most beneficial for raising alkalinity are fresh spinach, broccoli, cabbage, Brussels sprouts, beets, Swiss chard, any of the beans (red, green, broad), lentils, peas, beets, carrots, onions and sweet potatoes. It is even better to drink the juice of these vegetables including the fibre (don't throw it out).

Tomatoes on the other hand, should be limited during the treatment period since they make you more acidic. Other foods and beverages which make you more acidic are, meat and purine rich foods, coffee, cereals, grains, bread, pasta's and pepsi, coke, and other soft drinks.

But I need my minerals and vitamins don't I? Once again you are right, you do need minerals and vitamins. If you check the amount of minerals and vitamins that are in vegetables using food nutrient tables you will discover that vegetables are a rich source of minerals and vitamins. See the food nutrient tables at the website below.

<http://www.nal.usda.gov/fnic/foodcomp/search/>

Well, I thought fats are bad for you? Most certainly, trans-fats and high levels of long chain saturated fats are unhealthy. However, there are fats which are particularly good for you. Extra virgin olive oil and

macadamia oils are very healthy and beneficial for you because they are rich in mono-unsaturated fats as is organic cold pressed coconut oil high in medium chain fatty acids. These oils help to reduce your bad cholesterol (LDL) and increase the good cholesterol (HDL).

Moreover, these oils provide around twice as much energy than what carbohydrates do. So if you use 3 tablespoons of any of the good oils per day and stir fry your vegetables, you will have plenty of energy and still loose weight, since the vegetables are relatively low in calories. As a bonus you will also obtain as much fibre as your body needs. Furthermore, by eating stir fried vegetables you will provide your body with an abundant variety of necessary antioxidants both water soluble and oil or fat soluble ones.

But I'll get so hungry just eating vegetables. True, if you eat just steamed vegetables you will soon be hungry again because vegetables are digested very easily. But because the vegetables are stir fried the fats help to slow down the digestion of the vegetables and so you will remain satisfied for longer. Remember do not eat again until you are hungry. It is actually best to have six smaller meals rather than the usual three meals a day. This helps to maintain better control over your blood sugars and it speeds up your metabolism effectively.

Raw seeds and nuts such as walnuts, almonds, brazil nuts, macadamia nuts as well as any single fruit like an apple, banana, guava, orange, lemon, lime, grapefruit or avocado may be used as a snack.

To speed up the process of making your body more alkaline you can also drink freshly made vegetable juices but not fruit juices (which are rich in fructose without the necessary enzymes to digest it effectively and so will raise your blood sugars).

For variety you can have salads, and vegetable soups instead of stir fried vegetables. For further variety you can have a different vegetable as the main ingredient in a meal containing other varieties of

vegetables and you can change the flavours or taste by adding different herbs and spices. Cinnamon, turmeric, garlic, ginger, rosemary, basil, parsley, sage, thyme, celery, peppers, pomegranates, are excellent choices of herbs or spices to add wonderful flavours as well as loads of antioxidants. However, do not use processed sauces as these are often laced with sugar, fructose or high fructose corn syrup which all will send your blood sugar sky rocketing and are associated with the increased obesity problems in many of the western civilised nations.

Use the salt which is good for you namely unrefined sea salt which has around 84 different minerals in it. As the Bible states salt is good, but that refers to unrefined sea salt. The refined table salt indeed is not very healthy and the majority of medical journal articles detailing negative aspects of salt intake deal with refined table salt. However, to infer from this research that pure unrefined sea salt is not good for you either is flawed science.

Stay well clear of any man-made, refined or processed foods. That means no cereals, breads or pastas, no coffee, sugar, artificial sweeteners except Stevia and Xylitol. It is also best to avoid beer and any other form of alcohol whilst undergoing vegetable therapy. Instead drink herbal teas, or water.

The best water is from fast moving mountain streams, glazier water, or its equivalent such as electrolysed water, which is alkaline and rich in antioxidants. Alternatively distilled water, reverse osmosis water or otherwise water filtered through a ceramic and carbon filter. Do not drink tap water as it contains fluorides or chlorine and other chemicals and it often has high alum and copper levels.



Additional Supplementation

You may also ask your Doctor or Health Care Provider to give you a prescription in order to have the following supplements made up for you by a Compounding Pharmacy.

Folic acid 1.2 mg/day

Vitamin B12 5 mg/day (methylcobalamin)

Vitamin B6 30 mg/day

Lithium Orotate 20 mg/day

Deodorized Garlic Extract Powder 200 mg/day

Potassium Citrate 500 mg/day

Magnesium Citrate 500 mg/day

Grape Seed Extract 300 mg/day

Bacopa Monniera standardized to 20% bacosides A and B, 400 mg/day

The best readymade supplements that I recommend are from Primal Force just click on the link below.

<http://www.marketerschoice.com/app/?af=1567133>

You may also like to use Krill Oil Capsules as the Omega 3 fatty acids EPA and DHA are more bioavailable than in Fish oils and therefore you do

not need as many capsules. Take 3 capsules (333.33 mg each) 3 times per day until healthy. May be reduced to 1 three times per day as a preventative or maintenance dose. You will need advice from your healthcare professional if you are allergic or sensitive to some seafoods. Krill Oil is excellent against inflammation. It also contains Astaxanthin likely the most potent antioxidant available now.

Astaxanthin is also available as a supplement. Not only is it an excellent antioxidant it is also a great source of Omega 3 fatty acids, and it can cross the blood brain barrier so it can reduce inflammation as well as protect the brain from destructive free radicals.

Recently Seanol has been reported to be the best antioxidant available so that may be worthwhile to look into as well.

Acetyl-L-Carnitine is an essential amino acid which converts dietary fats into energy. Without sufficient Acetyl-L-Carnitine in the brain you will feel tired mentally and have poor concentration and memory. This is particularly important for vegetarians since Acetyl-L-Carnitine is primarily sourced from meats and dairy products.

Another recent addition as a supplement is Myoinositol (one of the most bioavailable B vitamins). It is also an important component of brain cell membranes responsible for fast communication between the brain cells (quick thinking).

Phosphatidylserine assists in sharpening the brain improving both memory and concentration. It is a major component of the cell membrane of brain cells. It also acts as a neurotransmitter which improves cell to cell communication. In a double-blind clinical trial people had dramatically improved concentration and memory.

Lecithin is also an important supplement since it is a precursor to the neurotransmitter Acetylcholine, which is needed to transmit communication signals between different brain cells in other parts of

the brain. Lecithin provides choline which is needed for the brain to produce the neurotransmitter Acetylcholine. Even better is the supplement Cytidine Diphosphate Choline (also known as CDP Choline). Researchers have demonstrated that it is far superior to lecithin because it is faster at crossing the blood-brain barrier and is better absorbed by the brain cells. Other studies have shown that CDP Choline markedly improved mental performance.

Apoaequorin is a protein which binds to harmful excess calcium in your brain cells and so helps to remove it. Apoaequorin is a completely safe protein you already have in your own body. A major research study has shown that it can keep brain cells alive longer and reduce cell death by as much as fifty percent. Another recent study confirmed that it substantially improved concentration and memory. Improvement was seen in as little as a week.

A recent development is L-carnosine which is used to repair tissues and remove toxins in the body, and removes aggregated beta amyloid in Alzheimer's. It also increases energy levels in your mitochondria (the power plants in all your cells). L-carnosine rescues your brain cells by reviving your mitochondria.

1. Corona C, et. al. "Effects of dietary supplementation of carnosine on mitochondrial dysfunction, amyloid pathology, and cognitive deficits in 3xTg-AD mice." PLoS One. 2011;6(3):e17971.
2. Aloisi A, Barca A, Romano A, Guerrieri S, Storelli C, Rinaldi R, Verri T. "Anti-aggregating effect of the naturally occurring dipeptide carnosine on $\alpha\beta$ 1-42 fibril formation." PLoS One. 2013;8(7):e68159.

Another well researched supplement is Curcumin which passes into the brain, binds to the plaques and helps remove them from the brain. However, it is important to only take a standardized supplement since curcumin alone is not absorbed or assimilated very well. The addition

of piperine in the curcumin supplement has been demonstrated to increase bioavailability by 2000%.

For more research information on Curcumin see the following articles that were published in

1. Neurology. 1998; 51(4): 1000-1008.
2. Arthr Res Ther, 2005:8(1): doi:10.1186/ar1846.
3. Planta Med. 1998; 64(4): 353-356. .

Herbal Teas.

In traditional herbal medicine four main herbs that have been used for memory problems are the following:-

Rosemary

Brahmi (*Bacopa monnieri* not *Gotu Kola*)

Ginkgo Biloba

Sage

Sweeten to taste with Honey, Stevia Extract or Xylitol but do not add milk nor sugar.

The herb tea Sage has been used in China for a thousand or so years to maintain mental acuity into old age.

Exercise

It has also been demonstrated that keeping the mind active by for example learning new things is helpful as well as physical exercise.

One other treatment has been suggested, namely making up a fresh mixture containing turmeric in ghee or organic coconut oil and then sniffing it up the nose so that it is taken up by the brains circulation. It is imperative that only fresh ingredients are used in this procedure to prevent the introduction of microbes. Nasal delivery of medication is

helpful as it assists in crossing the blood-brain barrier and thereby making it available to the brain only.

Email Dr. Gerald Veurink for the Bibliography or References if interested.

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What About Pharmaceutical Drugs

Countless millions of people's lives have been saved by the Pharmaceutical Drug industry. For instance, Antibiotics including for example Penicillin; (which has been estimated to have saved 80 million lives by the World Health Organisation (W.H.O.)). Life saving drugs which require immediate administration include for example Adrenaline for anaphylactic shock, or Heparin for heart attacks. Furthermore, according to the W.H.O. Vaccinations save in excess of 3 million people each year. However, when it comes to degenerative diseases such as Alzheimer's, drug treatments are totally inadequate, because they only address one aspect or factor of the disease process. Sometimes alternative or natural treatments are more effective than medicinal drugs. For example research has demonstrated that Grape Seed Extract was more effective than Aspirin for thinning blood and without the side effects.

Research by The Scripps Research Institute has shown that Chang Shan a Chinese herbal medicine is most effective against malaria fevers. Cinnamon is very effective in supporting healthy blood sugar levels. The antioxidant Astaxanthin is more effective than any other synthetic antioxidant. Vitamin D3 and Pomegranate have been demonstrated to be excellent anti-cancer supplements. The natural enzyme Nattokinase has been shown to be more effective than drugs to dissolve blood clots. Because of their effectiveness some pharmaceutical companies have now teamed up with Chinese companies to provide Traditional Chinese Medicine mixtures for a variety of diseases. The Pharmaceutical Drug Companies are part of a multi-billion dollar industry some of which are intent by any means (sometimes even criminal) to increase their profits. They spend millions of dollars lobbying governments, and the F.D.A. In order to keep their monopoly on health care. Those companies are not really interested in finding cures for any diseases

because they make more profits by keeping as many as possible on drugs that give symptomatic relief and keep them on those drugs for life. This provides them with repeat business amounting to almost a Trillion dollars per year. Moreover by stating that there is no cure , people are willing to give money for further research. Drug companies even have funds (as a cost of business) allocated to paying settlements of fines and Big Pharma Lawsuits.

Drug Companies have been charged with the following offences.

1. Illegally promoting drugs to the elderly and children.
2. Giving payments, kickbacks and expensive vacations to medical professionals and pharmacists/Chemists.
3. Attempting to persuade doctors to prescribe drugs for unapproved uses, some having been linked to an increased risk of death.
4. Highlighting studies that had a favourable outcome whilst failing to publish studies that show a detrimental outcome.
5. Fraudulently suggesting a painkiller was less addictive than other painkillers, using misleading sales tactics, decreasing risks associated with using the drugs and for promoting the drugs for uses for which it was not studied.
6. Misconduct involving claims of safety and effectiveness, marketing, pricing and dosage of the drugs.
7. Fraudulently marketing allegations and safety claims after a drug had been shown to double the risk of heart disease and stroke. The drug caused heart attacks in up to 140 thousand people of which half died.
8. Merck was exposed by 2 of its Scientist staff, for falsifying results of a vaccine clinical trial by spiking blood samples with animal antibodies so that its vaccine would appear more effective.
9. GlaxoSmithKline knew their diabetes drug Avandia put patients at an increased risk for cardiac complications. The public was not made aware of it until 2007 after an increase in heart attacks and cardiovascular deaths had been reported. Out of 42 clinical trials on Avandia 35 were not published.
10. Bristol-Myers Squib paid \$515 million for illegally promoting Abilify to kids and seniors despite the potentially fatal side effects in the elderly.

11. Eli Lilly paid out \$1.4 billion for promoting Zyprexa for unapproved use and for not disclosing side effects properly (Increased risk of death).
12. Abbott Laboratories paid out \$1.5 billion for illegally promoting Depakote for off-label use in aged dementia patients, even though effectiveness and safety information was lacking and it increased anorexia in the aged.
13. Johnson & Johnson will have to pay between \$1.5 to \$2 billion for illegally marketing Risperdal and other drugs as well as hiding data about their drugs side effects.
14. Pfizer for the fourth settlement within ten years had to pay \$2.3 billion for illegally marketing Paxil and Welbutrin and for not fully revealing the side effects of Avandia.

Please don't think that government agencies such as the F.D.A. protect you or your freedom especially with regards to the health care system. Pharmaceutical Companies give multi-millions to the F.D.A. to have their drugs approved. Moreover, the F.D.A. Now has a spy program in order to retaliate against whistle-blowing scientists who express safety concerns about drugs which are being sold. Recently the Supreme Court signed a bill which grants amnesty from any and all lawsuits brought against unsafe vaccines. Another favourite method is for the F.D.A and Pharmaceutical Companies to discredit alternative treatments and therapies by stating that there is no scientific evidence for their use even though there are many peer reviewed articles available; just check out Pubmed for example. Another strategy that they use is to do research using synthetically made (often petrochemical derived) vitamins etc. without stating that they are synthetic and then showing that they have a detrimental impact or are not effective to treat disease, whereas research using natural ingredients has shown that they are effective.

What About Doctors?

Alas Doctors are so busy nowadays, with so many patients, that they simply do not have enough time to keep up with reading medical journals for the latest developments in medicine. The number of medical and research journals that are published (thousands) also makes it impossible for a Doctor to read all of them. Thus Doctors are inclined to accept the information which is supplied by the Drug Company Representatives in the brochures or pamphlets which they provide. Bear in mind also that Doctors throughout

their years of training were taught that drugs and surgery are the only viable treatment option by lecturers at Universities which are also partly supported by the monetary contributions of “Big Pharma”. Moreover, in some countries Doctors are “struck off the medical register”, for recommending alternative medications or treatments and so they are reluctant to suggest them. They are often also unwilling to recommend natural alternatives for fear of ridicule from their peers even though many Doctors are very unsatisfied with the results of drug therapy. This situation has unwittingly or unknowingly turned Doctors into “Glorified medical drug pushers” and victims of misinformation and lack of information. Many are now just going to their medical Doctor to be diagnosed and then search the internet for alternative treatments and medications. Some are saying “if you want symptomatic relief see a Doctor, if you want a Cure seek out alternatives”. Doctors however, are excellent in life-saving medical emergencies and other surgeries.

Well Informed

I encourage you to become well informed, so that you may get the right facts and the real truth about the health care system and effective alternatives. I have provided links to further information on the next page.



Become Well Informed.

<http://healthland.time.com/2012/09/17/pharma-behaving-badly-top-10-drug-company-settlements/#69093-2>

<http://www.medicalnewstoday.com/releases/250213.php>

<http://pubs.acs.org/doi/abs/10.1021/cn3000923>

<http://www.nejm.org/doi/full/10.1056/NEJMp1209249?query=TOC&&>

<http://www.greenmedinfo.com/toxic-ingredient/statin-drugs>

<http://www.ncbi.nlm.nih.gov/pubmed/16531616>

Other Web Sites that provide excellent information:

<http://www.alsearsmd.com/cmd.asp?af=1566892> Dr. Al Sears provides extremely good information.

<http://www.mercola.com> An exceptionally informative website (become a member free of charge.)

<http://www.naturalnews.com> Natural Health News is also very informative.

<http://undergroundhealthreporter.com> Reports on the latest findings and exposes shortcomings of the healthcare system.

Read articles from these sites then you can also see links to peer reviewed articles that they refer to for more information.

You can also do your own research by reading peer reviewed research articles available from Pubmed at <http://www.ncbi.nlm.nih.gov/pubmed>.

Drugs for Alzheimer's Disease.

The drugs for mild to moderate Alzheimer's disease include: Razadyne® (galantamine), Exelon® (rivastigmine), and Aricept® (donepezil). Another drug, Cognex® (tacrine), was the first approved cholinesterase inhibitor but is rarely prescribed today due to safety concerns. Namenda® (memantine), is used for moderate to severe Alzheimer's. Aricept® is also approved by the F.D.A. for the treatment of moderate to severe Alzheimer's disease. All of these drugs only delay some of the symptoms of Alzheimer's.

Since there are many factors associated with Alzheimer's disease I personally think that a single ingredient drug will never be discovered or developed. It is therefore imperative that a new paradigm shift is made away from single ingredient drugs to a cocktail of combination medications. Moreover, I would encourage governments to make it compulsory to compare medical drugs with the effective natural medicines in order to ensure that the most beneficial treatments are given.



Latest Developments

Lithium Orotate has been demonstrated to increase human brain grey matter.

In The Lancet, Volume 356, Issue 9237, Pages 1241 - 1242, 7 October 2000

“Lithium-induced increase in human brain grey matter” By Dr Gregory J Moore PhD, Joseph M Bebchuk MD, Ian B Wilds MSc, Guang Chen MD, Prof Hussein K Menji FRCP(C).

“Lithium stimulates progenitor proliferation in cultured brain neurons”. Neuroscience 2003; 117(1): 55-61.

“Neuroprotective and neurotrophic actions of the mood stabilizer lithium: can it be used to treat neurodegenerative diseases?” Crit Rev Neurobiol. 2004;16(1-2):83-90.

“Lithium at 50: have the neuroprotective effects of this unique cation been overlooked?” Biol Psychiatry. 1999 Oct 1;46(7):929-40.

“Lithium exerts robust neuroprotective effects in vitro and in the CNS in vivo: Therapeutic implications”. Neuropsychopharmacology 2000; 23(S2): S39.

“A feasibility and tolerability study of lithium in Alzheimer's disease”. Int J Geriatr Psychiatry. 2008 Jan 8 [Epub ahead of print].

“Lithium for prevention of Alzheimer's disease”. *Br J Psychiatry*. 2007 Oct;191:361; author reply 361-2.

“Lithium: a novel treatment for Alzheimer's disease?” *Expert Opin Drug Saf*. 2007 Jul;6(4):375-83.

“In search of the Holy Grail for the treatment of neurodegenerative disorders: has a simple cation been overlooked?” *Biol Psychiatry*. 2007 Jul 1;62(1):4-6.

“Lithium and risk for Alzheimer's disease in elderly patients with bipolar disorder.” *Br J Psychiatry*. 2007 Apr;190:359-60.

“Implications of the neuroprotective effects of lithium for the treatment of bipolar and neurodegenerative disorders.” *Pharmacopsychiatry*. 2003 Nov;36 Suppl 3:S250-4.

“Lithium and dementia: a preliminary study.” *Prog Neuropsychopharmacol Biol Psychiatry*. 2006 Aug 30;30(6):1125-8. Epub 2006 Jun 6.

“Lithium inhibits amyloid secretion in COS7 cells transfected with amyloid precursor protein C100.” *Neuroscience Letters* 2002; 321(1-2): 61-64

“A review of clinical trials of lithium in neurology.” *Pharmacol Biochem Behav*. 1984;21 Suppl 1:57-64.

“Lithium regulates adult hippocampal progenitor development through canonical Wnt pathway activation.” *Mol Psychiatry*. 2007 Oct 30 [Epub ahead of print]

“The mood stabilizers lithium and valproate selectively activate the promoter IV of brain-derived neurotrophic factor in neurons.” *Mol Psychiatry*. 2007 Oct 9 [Epub ahead of print]

“Lithium up-regulates the cytoprotective protein Bcl-2 in the CNS in vivo: a role for neurotrophic and neuroprotective effects in manic depressive illness.” J Clin Psychiatry. 2000;61 Suppl 9:82-96.

“Lithium improves HIV-associated neurocognitive impairment.” AIDS. 2006 Sep 11;20(14):1885-8.

It has now been demonstrated that B-vitamins reduced the rate of brain atrophy (shrinking).

In Int J Geriatr Psychiatry. 2011 Jul 21. doi: 10.1002/gps.2758. [Epub ahead of print]

“Cognitive and clinical outcomes of homocysteine-lowering B-vitamin treatment in mild cognitive impairment: a randomized controlled trial”. By de Jager CA, Oulhaj A, Jacoby R, Refsum H, Smith AD.

CONCLUSION:

In this small intervention trial, B vitamins appear to slow cognitive and clinical decline in people with Mild Cognitive Impairment, in particular in those with elevated homocysteine. Further trials are needed to see if this treatment will slow or prevent conversion from Mild Cognitive Impairment to dementia.

“Homocysteine-lowering by B vitamins slows the rate of accelerated brain atrophy in mild cognitive impairment: a randomized controlled trial”.

By Smith AD, Smith SM, de Jager CA, Whitbread P, Johnston C, Agacinski G, Oulhaj A, Bradley KM, Jacoby R, Refsum H. PLoS One. 2010 Sep 8;5(9):e12244.

New Newborn Adult Neurons in the Brain.

Not long ago it was stated that no new neurons developed after birth, the following research article demonstrates that new neurons are

grown in human and animal adult brains, even in people with Alzheimer's disease.

In Eur J Neurosci. 2011 Mar;33(6):1101-14. doi: 10.1111/j.1460-9568.2011.07609.x.

“A new chapter in the field of memory: adult hippocampal neurogenesis”.

By Koehl M, Abrous DN.

Music Therapy.

Music therapy is also beneficial for people with dementia as it assists in calming them and improving mood.

Br J Nurs. 2010 Jan 28-Feb 10;19(2):108-13.

“The effects of music therapy for older people with dementia.”

Wall M, Duffy A.

RESULTS:

Thirteen studies were reviewed and the majority of these studies reported that music therapy influenced the behaviour of older people with dementia in a positive way by reducing levels of agitation. The research further identified a positive increase in participants' mood and socialization skills, with carers having a significant role to play in the use of music therapy in care of the elderly nursing.

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Thank You So Much!!!



Appendix: About The Author

Dr. Gerald Veurink is the author of the book "A Radical Approach to Treating Degenerative Diseases". He is a medical scientist having done his PhD on the Role of Antioxidants in Alzheimer's Disease. Recently Dr. Veurink has received a provisional patent for an alkalizing antioxidant which may be beneficial in the treatment of neurodegenerative diseases.

Dr. Veurink has also developed "Els Complete Skin Care Daily Beauty Lotion", which is a all in one skin care product which can be used as a cleanser, make-up base, all-over moisturizer, day creme, nourishing cream and make-up remover.

Dr. Veurink has also offered computer software programs which are very simple to use via his Software Simply website.

For more information email me on

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<http://www.naturels.com.au/gveurink/Welcome.html>

http://www.naturels.com.au/Software_Simply/Welcome.html

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