Lyme Disease The Vitamin C Conspiracy Thomas E. Levy, M.D., J.D.

Lyme Disease -- Wiped Out By Vitamin C

http://www.newmediaexplorer.org/chris/2005/09/22/lyme_disease_wiped_out_by_vitamin_c.htm

2005

Re: The Stonewalling of Vitamin C

At 06:12 PM 21/09/2005, you wrote:
This was extremely interesting, and helpful. I'm giving it to my Doctor. He is very open to natural remedies. I wonder if you have any information on Vitamin C in regards to Lyme disease. I am incredulous that so little attention is being paid to Lyme, when it seems to be virtually epidemic. I believe it often masquerades as other diseases. I, and my whole family tested positive, and are all undergoing antibiotic therapy including heavy doses of probiotics. We are in the third month of treatment, so imagine my delight at being able to treat this with Vitamin C! Please forward any research that you can find on this.

Thank you,

B. Dyjak

Barbara,

"Vitamin C has already been extensively and unequivocally documented to readily cure a wide range of infectious diseases, including many viral syndromes considered incurable even today (Stone, 1972; Smith, 1988, Levy, 2002). In reviewing a great amount of this information, it becomes apparent that for most infectious diseases, especially viral ones, the only clinical failures of vitamin C appear to occur when a large enough amount of vitamin C cannot be effectively delivered to the invading microorganisms."....

See Dr. Julian Whitaker and Dr. Tom Levy's notes below also read: When Antibiotics Fail: Lyme Disease and Rife Machines, with Critical Evaluation of Leading Alternative Therapies

There is some useful information to convince your doctor in:

How to Get Intravenous Vitamin C Given to a Hospitalized Patient

At the bottom you will also find a, do it yourself, Salt and Vitamin C regimen developed by personal experiences of real lyme sufferers.

Chris Gupta

Below, information from Dr. Julian Whitaker, forwarded by Betty Martini:
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From: "Dr. Betty Martini,D.Hum."
Date: 22 May 2005, 02:16:09 AM
Subject: Lyme Disease -- Wiped Out In A Hurry, Dr. Julian Whitaker

Because so many aspartame victims suffer from Lyme (and especially for Angel Hemming and Doris) this article may be helpful. For Dr. James Bowen's article on Lyme Disease Reactivated by Aspartame and Sexually Transmitted go to www.dorway.com and scroll down to experts.

Dr. Betty Martini, Founder, Mission Possible International, 9270 River Club Parkway, Duluth, Georgia 30097 770 242-2599 http://www.wnho.net and http://www.dorway.com

LYME DISEASE -- WIPED OUT IN A HURRY:

"At a recent meeting of the American College for Advancement in Medicine, Hugh Riordan, M.D., of the Center for the Improvement of Human Functioning International in Wichita, Kansas, gave an extremely provocative presentation on the power of IV vitamin C rekindled my interest and commitment to this therapy. Even more convincing is the research presented in a book by Thomas E. Levy, M.D., J.D., Vitamin C, Infectious Diseases and Toxins: Curing the Incurable -- a must-read for doctors and patients. This 400 page volume with over 1,200 cited scientific references is a litany of the unbelievable. It's all true.

Thomas E. Levy, M.D., J.D. reports that in the late l940s, Frederick Klenner, M.D., F.C.P., used IV Vitamin C to cure 60 consecutive cases of polio. In one case, a young girl stricken with polio had already developed weakness and semi-paralysis in her lower extremities. but with high-dose IV vitamin C this was reversed in one week, and the entire disease was ultimately eliminated. Klenner presented this information to the American Medical Association and published his results in several papers, but his findings were completely ignored by the conventional medical community.

Dr. Levy's book also outlines how IV vitamin C has been used to cure hundreds of cases of acute hepatitis, both B and C strains, which are thought by conventional physicians to be incurable. I recently spoke with Dr. Levy about some of his personal experiences using IV Vitamin C.

One case in particular stands out. A woman suffering with severe and debilitating Lyme disease had been seen by many doctors and had not responded to several courses of antibiotics. Her health was rapidly failing and her husband called Dr. Levy.

The woman was immediately infused with 100 grams of Vitamin C and within just two hours of treatment here husband reported that she looked 50 to 60 percent better. Over the next two days she received five more 50 gram infusions of Vitamin C, and by hour 72 she was completely well. That was nearly two years ago. She has since suffered no relapses, nor is there any indication of a chronic infection.

LET THE TRUTH BE KNOWN

Vitamin C has been much maligned by conventional medicine. For years it was blamed for causing kidney stones and Vitamin B12 deficiencies -- accusations that were proven false (although this misinformation remains in textbooks everywhere).

At the Whitaker Wellness Institute we've used IV Vitamin C (up to 75 grams per dose) as part of our standard protocol for over 20 years, with no sign of toxicity. And virtually every orthomolecular physician I know uses IV Vitamin C, but conventional physicians never do. If you want IV Vitamin C, you're going to have to see a different kind of doctor.

RECOMMENDATIONS

To find a physician with experience in IV Vitamin C, visit the American College for Advancement in Medicine (ACAM) Web site at www.acam.org, or call 800 532-3688.

For appointments: Hugh Riordan, M.D., in Wichita, KS, 316-682-3100 or brightspot.org; Thomas E. Levy, M.D., J.D. in Denver, CO, 866-750-2121 or peakenergy.com; Robert F. Cathcart, M.D., in Los Altos, CA, 650 949-2822.

Dr. Levy's book, Vitamin C, Infectious Diseases, and Toxins: Curing the Incurable, can be ordered online at www.amazon.com or by calling 888-795-4274

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Pulsed Intravenous Vitamin C (PIVC) Therapy

Vitamin C has already been extensively and unequivocally documented to readily cure a wide range of infectious diseases, including many viral syndromes considered incurable even today (Stone, 1972; Smith, 1988, Levy, 2002). In reviewing a great amount of this information, it becomes apparent that for most infectious diseases, especially viral ones, the only clinical failures of vitamin C appear to occur when a large enough amount of vitamin C cannot be effectively delivered to the invading microorganisms.

With this in mind, then, a more effective dosing and/or delivery system of vitamin C to the various tissues of the body should further improve the clinical efficacy of this agent. In cancer, Riordan et al. (1995) demonstrated the likelihood that vitamin C was an effective anti-tumor therapy as long as high enough concentrations of it could be achieved inside the tumor(s). These researchers also concluded that oral vitamin C supplementation was unlikely to produce blood levels of vitamin C high enough to have a direct killing effect on a given tumor. Later, in studying a certain line of cancer cells and the ability of vitamin C to kill those cancer cells, Casciari et al. (2001) elegantly demonstrated this point. They showed that the rapid intravenous infusion of vitamin C as sodium ascorbate in combination with alpha lipoic acid was effective in reaching vitamin C levels that were toxic to the cancer cells. They also showed that a fat soluble analogue of vitamin C, phenyl-ascorbate, was able to kill cancer cells effectively at a dose roughly three times lower than seen with unaltered vitamin C.

All of the conclusions reached by Casciari et al. noted above support the proposed concept that most clinical failures of vitamin C for infections or other medical conditions relate to inadequate delivery. They administered as much as 60,000 mg of vitamin C over an 80-minute period, a very sizable dose and a fairly rapid administration by most standards of current usage. Yet such a large and rapidly administered infusion of vitamin C will not always be clinically effective. This still does not mean that the vitamin C might not be the optimal treatment for a given condition.

At the Colorado Integrative Medical Center (www.coloradomedicalcenter.com) in Denver, CO, we are starting to use a unique form of vitamin C therapy known as pulsed intravenous vitamin C (PIVC) therapy. First and foremost, this therapy utilizes the principle that the more rapidly a given dose of any nutrient or medication is given, the higher the peak blood level of that substance will be. This very rapid delivery of vitamin C was first reported to be both safe and

highly effective by Klenner (1971). In acute barbiturate overdose Klenner gave as much as 42,000 mg of vitamin C "by vein as fast as a 20 gauge needle could carry the flow." This dose awoke the patient and began the reversal of the barbiturate toxicity without causing any side effects of note. Klenner safely administered IV push vitamin C on multiple occasions, often on very critically ill patients, with great clinical success and no reported toxicity.

The concept of PIVC is to get acute blood levels of vitamin C as high as possible. By simple diffusion physiology, an acute doubling or tripling of the blood vitamin C levels will temporarily allow an acute doubling or tripling of the amount of vitamin C that normally diffuses into perfused tissues via the gradient that is present at the baseline concentration. The temporary blood levels achieved can be substantial. If Casciari et al. can get a certain high blood level from infusing 60,000 mg of vitamin C over 80 minutes, then an IV push of 20,000 mg of vitamin C over 2 minutes can be expected to temporarily increase the peak blood concentration by 10-fold or more over the rapid intravenous infusion. This amount has already been administered safely on multiple occasions.

A physiological effect of such a rapid administration of vitamin C appears to occasionally induce an acute hypoglycemia. Sylvest (1942) found that a majority of people given intravenous vitamin C showed a clear lowering of blood sugar. This effect is possibly due to a significant reflex release of insulin from the pancreas. Such a conclusion is directly supported by the work of Cheng et al. (1989), who found that vitamin C injected into rats "produced a dose-dependent and marked hypoglycaemic effect after intravenous injection." They also found that the hypoglycemic effect was maximal at five minutes after injection, coinciding with an increase in the plasma insulin concentration. Vitamin C is a very similar molecule to glucose, and a rapid spike of vitamin C released into the blood likely can induce the same reflex insulin spike that is seen in a glucose tolerance test, where a large dose of glucose is given to evaluate how quickly and effectively one can restore glucose levels to normal by inducing insulin release. Clinically, this hypoglycemic effect has been the most notable in patients who are ingesting little food and drink, and in those patients who are generally sickest, as in advanced neurological conditions. In such patients just an infusion of vitamin C can cause hypoglycemia as well, not requiring the rapid IV push. Such patients may need a bolus of 50% glucose to rapidly reverse the low blood sugar, as it has been noted to occur even when the carrier IV fluid is 5% dextrose (sugar) in water. However, the IV push does seem to more reliably cause the hypoglycemic symptoms, which fits with the animal literature cited above.

This vitamin C-induced hypoglycemia should prove to be a very desirable effect clinically, however. Severe hypoglycemia has already been safely and deliberately induced in a protocol that has been in existence for over 70 years now. Known as insulin potentiation therapy (www.iptq.org), intravenous insulin (roughly 20 to 40 units) is given rapidly to induce hypoglycemia. As hypoglycemia becomes manifest, minidoses of cancer chemotherapeutic agents are administered. Such small doses, in the presence of insulin-induced hypoglycemia, appear to be facilitated in their transport across the cell membrane pathways such that the drugs reach killing concentrations inside cancer cells at much lower dosage levels. Traditional chemotherapy can often be given without causing the otherwise inevitable loss of hair seen with the much larger doses.

Vitamin C and glucose actually directly compete with each other for insulin-mediated transport into the various cells of the body (Washko et al., 1991; Cunningham, 1998). Increased intracellular access should prove to be a major leap forward in the effective treatment of most diseases already known to be responsive to vitamin C, and in likely quite a few more diseases that just need more effective dosing of vitamin C to show a positive response. Proprietary protocols being developed at the Colorado Integrative Medical Center are using such "Vitamin

C-Enabled Intracellular Nutrition" (VEIN) methodologies.

A side effect associated with high doses of vitamin C, along with other nutrients given intravenously, and sometimes associated with concomitant hyperbaric oxygen therapy, has been noted at our facility. On three occasions patients have complained of bilateral mid-back discomfort. When this has been reported, further intravenous nutrients are discontinued, oral hydration and intravenous hydration are initiated, and oral or intravenous furosemide is given. This has resolved the discomfort in all circumstances. No associated abnormal laboratory findings have been seen to result. It is hypothesized that when the solute load gets high enough in the blood perfusing the kidney, a dehydrating effect is acutely inflicted on the kidney cells, causing the pain/discomfort reflex. Neglected, more serious complications could occur. However, the regimen just outlined takes care of such situations fairly promptly. Furthermore, such a side effect can actually give the health care practitioner a practical point beyond which further intravenous nutrition should not be pushed acutely.

Anecdotally, I have had the occasion to clinically cure a case of acute Lyme disease with three days of intravenous vitamin C therapy. Whether this is readily repeatable, or whether a chronic case of Lyme disease would respond as well remains to be seen. At the Colorado Integrative Medical Center we are now initiating a combination of therapies including those mentioned in this newsletter to see precisely how much success we can have on a regular basis with this particular disease. We are presently accepting new patients at this time who have this condition and are looking for another treatment option.

Contact Information:
Colorado Integrative Medical Center
1260 South Parker Road
Denver, CO 80231
Toll-free: 866-750-2121
FAX: 303-750-4992
Ask for Darren Green, office manager

Bibliography

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Consider forwarding this newsletter to your personal email lists or to specific friends who may be interested in the information. Thanks.!

Vitamin C Regimen Developed By Personal Experiences Of Real Lyme Sufferers

"After 13 years of suffering with Lyme disease, a possible cure has been stumbled upon. A cumulative effect of much research has produced the possibility that salt and vitamin C may be all that is needed to beat this elusive illness. Without going into a lot of detail, our theory is that Lyme is not just a bacterial disease, but also an infestation of microfilarial worms. Bacteria, worms, internal mites and the possibility of other creatures have been quite horrifying. Ticks can transfer many types of pathogens into the body of their host. It is also possible that the tick could pick up a new pathogen and pass it on to their next host, explaining why Lyme patients have different types of organisms within their bodies. Shortly after starting the treatment, we were shocked by the presence of the worms. Microfilarial worms live symbiotically with bacteria. They protect the bacteria from being exterminated by the antibiotics. Our theory is that the microfilarial worm, though possibly a nematode, is a parasitic nematomorph which we name Paragordius Lyme Incorporehumani. The Lyme bacteria is Borrelia burgdorferi, named after Willy Burgdorfer. After experimenting with the treatment of salt and vitamin C, we settled on a dosage of 12-one gram tablets of salt and 12-1,000 mg tablets of vitamin C, spaced throughout the day. The brand of salt pill is CMC(Consolidated Midland Corporation), NDC#0223-1760-01, ordered through a pharmacy (no prescription required) and the vitamin C used is a GNC product, though any good quality vitamin C pill should work. We have no relationship with either company. The Treatment can be grueling; taking it with food may aid in digestion. The results should be almost instantaneous. The Herxheimer reaction is an excretion of toxins from dying organisms; this will be experienced. Diarrhea will occur as your body sheds itself of the pathogens. The die-off will occur in cycles. Try to stick with it; it is well worth the inconvenience. Remember to drink plenty of water. Water is an important factor, not just in keeping yourself hydrated, but to make sure the treatment is circulating through your entire body. Salt is an electrolyte which your body needs to function properly. Please proceed through the next 16 pages on our journey to a cure. You can click on any photo and get a larger view and a little more info. The photographs are untouched and no dyes were added. Our specimens have been saved in case the integrity of the website is questioned. The last page will attempt to explain how this conclusion was reached."

Continue reading at: http://www.lymephotos.com/

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posted by **Chris Gupta** on **Thursday September 22** 2005
updated on **Saturday September 24** 2005

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Lyme Disease & Rife Machines
Lyme Disease & Rife Machines By Bryan Rosner's, is a unique book that demonstrates what lay people can do, but the billion dollar medical industry can't or won't do. This example, clearly affirms the "self empowerment theme" of "Share the Wealth" site. An erudite balance between electromedical, mainstream and alternate approaches in dealing with disease. A profound piece of work that is sure to educate all regardless, wether one is... [read more]
March 31, 2005 - Chris Gupta

Electro Medicine and Lyme Disease
While the self righteous medical Mafia and bigoted sceptics continue to debunk electromedicine and other alternatives - time and time we see lay people do what the multi billion dollar industry does not want to do. Yet they will clamor all this is anecdotal, not been peer reviewed, trialed etc. etc. Not realizing how 'el stupid o' they look in the face of the fact that some of these results... [read more]
September 02, 2004 - Chris Gupta

Cancer: Intravenous Vitamin C Effective Treatment
Studies during the 1970s first suggested administration of high doses of ascorbate might provide a clinical benefit for treating cancer, but later studies using the same high doses found no benefit. However, researchers now say the original studies used intravenous and oral ascorbate, while subsequent studies used only oral administration. Recognizing those differences might account for the disparate clinical outcomes, Mark Levine and colleagues at the National Institutes of Health... [read more]
September 13, 2005 - Sepp Hasslberger

Readers' Comments

I have Lyme disease. I once used 8 grams of Vit. C plus 8 grams of salt for 30 days. I had about 2 weeks of feeling the disease was fading but then the effect stopped and I stopped the regimen. Now I want to start IV Vit. C. I know for this to have any real effect it has to be given daily and long term otherwise it will be a total waste of time and will prove nothing. There is no chance of getting any doc. to do this daily and long-term! Where can I buy packs of IV vitamin C for my personal use? I am spending a fortune and getting nowhere. Vitamin C is a food, not a drug and I should be able to buy it for myslf. Please advise me where it is available.

Posted by: Bob Frederick on January 26, 2006 12:37 AM

Bob, see:

http://www.orthomed.com/civprep.htm

Posted by: Chris Gupta on January 27, 2006 11:10 AM

I have 7,5 gram botles of IV vitamin C. Ready for use, pH balanced, made by an ISO 9001 certified laboratory.
If you are interested please contact info@amaruka.com

Posted by: Fernando Pinto on January 31, 2006 06:12 PM

Intravenous Vitamin C is also helpful for Babesia, which is a frequent Lymes Co-infection. Florida Detox and Wellness Institute is presently treating a patient who has been disabled by Babesia and possibly Lymes. Robert has been treated by Dr. Schaller with Artemisinin, Mepron, and Biaxin. Robert experienced decreased chills and decreased shortness of breath initially, on the anti Babesia regimen. As doseage increased, Robert experienced increased pain, especially on the plantar surface of his feet, with swelling in feet and fingers and increased memory problems. His blood pressure also increased, with a momentary spike of diastolic pressure over 130. After Artemisinin and Mepron were discontinued and cholestyramine resumed, swelling and joint pain decreased slightly first day after Cholestyramine was resumed and wrist, knee, and ankle pain and swelling decreased considerably second day, with the worst remaining pain in his toes. Rt ankle and foot remain painful, on 3rd day of cholestyramine,but patient reports joint pain is decreased to 2/10 (WAS 6/10, PRIOR TO BEGINNING TREATMENT, 3 TO 4 MONTHS EARLIER) He reports swelling is almost gone and he can wear his wedding band again. Robert also reports transdermal SAMe reduces knee pain, during his Babesia dieoff. Robert reports chills which interfered with sleep are not interfering with sleep now. He still suffers pain in soles of feet, which can limit his ability to travel. He did report being able to travel from New Port Richey to Tarpon Springs, for an appointment. A nonaddictive prescription transdermal pain cream containing Ketamine, Ketoprofen and Ibuprofen is controlling moderate levels of joint pain, but is inadequate to control severe joint pain flares, during microbial dieoffs. Robert initially responded well to treatment. He hopefully will be able to perform at least some of his previous work, on an irregularly scheduled basis, if he continues responding well to treatment. His ability to walk is limited and he is still very embarrassed in public, by uncontrollable excess sweating, which gives him an anxious appearance, during business meetings. Robert will need to avoid mold exposure, since he tested positive for highly increased mold sensitivity,, on the HLA DR4 genetic profile. Robert is among 24 percent of the population who clear moid neurotoxins over 200 times slower than the other 76 percent of the population. More recently, Dr. Schaller modified Robert's regimen and Robert reports he is medicated with the following medications: Mepron, Malarone, Biaxin, Flagyl,Minocycline and Belladonna. The recent regimen caused nausea and Belladonna is used to decrease nausea and vomiting. Robert also takes supplements including Artemisinin. Robert receives injectable Vitamin B12, transdermal Androgel testosterone and a transdermal pain cream containing ketamine, ketoprofen and ibuprofen from Florida Detox and Wellness Institute. Robert reports his fatigue has worsened recently and his blood pressure increased, requiring increased Atacand blood pressure medication, which is prescribed by another physician. Robert also reported pimples, which apparently occurred after Malorone, Biaxin, Flagyl, Minocycline or Belladonna were started by Dr. Schaller. Robert discontinued some medications, in an attempt to determine causation of the pimples. Pimples resolved with discontinuation of some medications prescribed by Dr. Schaller. On 4/17/09 natural killer cells had increased to 195/ml, MMP 9 had decreased to 209 ng/ml, ferritin was 58 ng/ml, Immunoglobin M remained deficient at 25 mg/dl. Despite normalization of MMP 9 and increased NKC, Robert feels his pain has worsened. Robert reports blood pressure as high as 170/90, on increased Atacand dose and reports improvement with B12 subcutaneous, although his B12 level

was >2000 pg/ml. Eosinophil percentage increased to 5.0 percent. RDW was 13.3 . Robert had a hematology consultation with Dr. Wright, in Tampa, on 5/01/09. Robert was prescribed oxygen by his personal care provider, when his oxygen saturation percentage, on room air, was 87. Severe inflammation and pain continues. On 6/04/2009, Quest Diagnostics measured LD 315 (100-220 U/L), Cardio CRP 3.3 (1.0-3.0mg/L, Creatine Kinase 288 (44-196 U/L, Fibrinogen antigen 393 (fibrinogen over 310 DOUBLES RISK OF FATAL CARDIAC OR STROKE), C4a 8040 (0-2830). Immunoglobin M 14 ((48-271 mg/dL) remains suppressed. Angiotensin I Converting Enzyme was 74 U/L (9-67) Eosinophil percentage was 5.7. Testing indicates tissue destruction, excess clotting and considerably higher risk of a fatal cardiac or stroke, in addition to severe immune suppression. Robert began Nattokinase on 7/24/09, and observed some improvement same day, with decreased pain in feet, next day. Robert received 50,000 milligram intravenous Vitamin C, magnesium sulfate, glutathione, lidocaine and B vitamins, on 7/28/09. He did not appear to have dieoff symptoms, and was able to walk without a limp, with reduced air hunger, after the IV. He continued to have pain, in hands, knees and feet. He felt tired and went to sleep early. On 7/29/09, Robert returned to Florida Detox for second Vitamin C IV, without cold packs. His ankles felt better and he rested quietly, during infusion. Taurine and Theanine were added to IV today. Hands remained painful, appeared swollen,but feet and knees less painful today, and he appears to be breathing easier. After third Vitamin C IV, Robert's wife reported he was taking 4 Nattokinase capsules daily. Knee pain decreased to 1/10 (was 8/10 prior to intravenous vitamin C;) swollen dorsal foot surface less painful; shortness of breath decreased; concentration improved; Cholestyramine not producing further improvement; feet, hands and ankles remain swollen and painful, ankle pain interferes with walking Lisa, Robert’s wife, reported her daughter has painful hands and feet, which occasionally when they occasionally turn blue, in cold water. It was explained that the daughter’,s Reynauds symptoms might be due to a hereditary Factor V Leiden deficiency, which Robert will be tested for. To Be Continued

Posted by: Steven Sponaugle on August 7, 2009 10:21 AM

I have tried high doses of vitamin c, 1000mg on my children when they where about four when they had a virus infection and I feel sure that it cured their complaint. I was dumfounded when I saw my children running around quite well again. I have used it on myself and my wife when we are at work and I am sure it has helped. I think by boosting the immune system http://myhealth-your-health.blogspot.com

Posted by: mike on July 4, 2011 06:53 AM