

## MULTIPLE SCLEROSIS – AN OVERVIEW

An estimated 2½ million worldwide have Multiple Sclerosis, there are about 85,000 cases in the UK. It is the most common potentially disabling disease of the central nervous system affecting young adults in the Western world. Its causes are unknown.

Every week around 50 people in the UK are diagnosed with MS. Diagnosis is usually between the ages of 20 and 40, rarely under 12 or over 55. Three women have MS for every two men.

The outlook is uncertain, ranging from benign; disease progression on a relapsing/remitting basis, ie sometimes getting worse, sometimes improving, to progressive disabling paralysis with some sufferers ending up having to use wheelchairs.

Common symptoms include pain, deadening fatigue, problems with sight, mobility and co-ordination. Multiple Sclerosis is not hereditary but there is a slightly higher chance of getting it if a relative has it.

There is no proven cure for Multiple Sclerosis. This applies both for complementary approaches to MS and conventional approaches.

Our approach centres on reducing antibody levels which the immune system often forms in Multiple Sclerosis to myelin which is the nerve sheath, which is damaged in MS. This is achieved by modulating immune function using natural medications. We would also try to reduce the patient's reactions to foods, we use nutritional approaches which include specific fatty acids, and there are studies showing that this can be helpful in Multiple Sclerosis.

We refer some of our MS patients abroad for two new and relatively unusual approaches. One is the use of a neurotoxin derived from the Thai cobra. The inherent toxicity of neurotoxins has prevented their use as a treatment modality for obvious reasons, but there are studies in Multiple Sclerosis using oxidised cobratoxin as a therapeutic agent. This is applied with a spray into the mouth. This increases nerve conduction. Most patients are able to walk if they could not previously, a few minutes after taking the spray, but this has to be repeated two to three times a day. This spray works much less well in Multiple Sclerosis sufferers who smoke. We have patients who are now able to walk using this approach who could not previously. This approach is not curative in any way, it's purely an effective method of dealing with the symptoms of poor mobility.

Some patients have used human umbilical cord stem cells. Their use is not permitted in Europe, Australia or America, but we have clinical contacts with a clinic in Mexico who use this approach, and, simply, these cells are infused into a vein and the treatment only takes a short time. We then see these patients and focus on stimulating growth factors, using nutritional medicine, glycoproteins and various related approaches, enabling the stem cells to divide as effectively as possible in order to repair nervous system damage. Reports of improvement in Multiple Sclerosis from this use of stem cells has been anecdotal. There have been no formal clinical trials done on this approach, and it will be many years before these studies appear. For the cobratoxin and stem cell treatments we simply act as a referral source. The patient then deals directly with the clinic abroad.

In summary therefore Multiple Sclerosis is a condition which is very difficult to treat, there is no known cure. Anecdotally we find the approaches we use have resulted in slower disease progression. This is anecdotal evidence only and is not supported by clinical studies.