

PHYTOTHERAPY

Herbals outperform antibiotics in treatment of Lyme Disease

One of the world's leading Lyme Disease researchers has tested a natural treatment protocol based on the Cat's claw (*Uncaria tomentosa*) product Samento and Banderol (from the Otoba plant) and found that it is at least as effective as conventional antibiotic treatment - and for some forms of the disease, more effective, reports CAM editor Simon Martin.

Dr Eva Sapi, PhD, a professor of cellular and molecular biology at the University of New Haven, Connecticut, was the first person to discover that the microbe that causes Lyme disease, *Borrelia burgdorferi* (Bb), creates biofilm communities that protect it from the immune system - and from antibiotics.

Lyme Disease is usually passed to humans through the bite of a deer tick infected with Bb. The bite is usually followed by a rash and/or bulls-eye shaped red mark. Additional signs and symptoms include a flu-like feeling, fever, chest congestion, headache, nausea, and joint pain. Unfortunately, the classic bulls-eye rash doesn't always occur - probably only in 30% of cases - and some patients get no rash at all. Medical malpractice lawyers are warning doctors that a Lyme Disease rash is often misdiagnosed as poison ivy or ringworm. Other symptoms are commonly confused with the flu or a musculoskeletal injury.

"The failure to diagnose Lyme Disease can have devastating consequences, including brain damage due to meningitis, heart damage due to infective endocarditis, Lyme arthritis and Bells' Palsy", say leading malpractice lawyers Bottar Leone.

Pleomorph

The microbe is classified as a spirochete bacterium, but is a pleomorph; it cycles between different forms, some of them inactive – one of these a cyst form, as well as the colony-like biofilm - in response to the presence of antibiotics.

"Unfortunately, when Bb is in these inactive forms, conventional antibiotic therapy will not destroy the bacteria", say Sapi and her colleagues. "The frontline treatment for chronic Lyme disease is administration of tetracyclines (eg doxycycline) or macrolides (eg clarithromycin). However, even after 3 months of treatment with these drugs, only a 50%-60% improvement rate is observed in patients, with a cure rate of only 20%. Besides this, the conventional antibiotic treatment...has several

disadvantages, including relapse of disease, high treatment cost and extremely unpleasant side-effects".

Eliminate all forms

"In this study, our working hypothesis was that for an efficient therapy, we have to find antimicrobial agents that can eliminate all the forms of *B. burgdorferi*", Prof Sapi and colleagues reported.

"During the course of *Borrelia* infection, the bacterium can shift among the different forms, converting from the spirochete form to the others when presented with an unfavourable environment and reverting to the spirochete when the condition is again favorable for growth. To successfully eradicate *B. burgdorferi*, antimicrobial agents should eliminate all those forms, including the spirochetes, round bodies, and biofilm-like colonies.

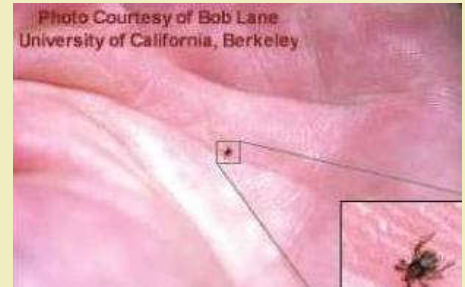
"Here we have provided evidence that two natural antimicrobial agents (Samento and Banderol extracts) had significant effect on all three known forms of *B. burgdorferi* bacteria in vitro. We have also demonstrated that doxycycline, one of the primary antibiotics used in the clinic to treat Lyme disease, only had significant effect on the spirochetal form of *B. burgdorferi*."

Both herbal products are part of the Cowden Condensed Support Programme, which has been in use against Lyme since 2006. Dr Cowden's protocol was previously tested in 2007 by Dr Richard Horowitz, who found a 70% rate of improvement, significantly higher than previous clinical trials on pharmaceutical antibiotics. (Horowitz R. Classical and integrative medical approaches in chronic Lyme disease: new paradigms in diagnosis and treatment.

8th Annual International Lyme and Associated Diseases Society (ILADS) Conference; 2007 October.)

* Akshita D et al. In vitro effectiveness of Samento and Banderol on different forms of *Borrelia burgdorferi*. Poster presentation.

* Akshita D et al. In Vitro Effectiveness of Samento and Banderol Herbal Extracts on the Different Morphological Forms of *Borrelia Burgdorferi*, Townsend Letter 2010. July.



Sapi — a sufferer leading the charge against Lyme

Before Dr Eva Sapi's brain swelled after she was bitten by a deer tick, she was researching cancer cures. She now sees a naturopathic physician and is relentlessly dedicated to finding agents that reliably kill *B. burgdorferi*.

"Samento and Banderol are found to be important herbal allies in this study conducted by our friends at the Lyme Disease Research Group of the University of New Haven", commented Suzanne Arthur of the Lyme Disease Research Database. "In our interview with Dr Sapi, director of the graduate program in Lyme disease research, she promised that she was quite determined to find an effective agent that would 'kill the bug - and soon'. So, this study is proof that Dr Sapi is following through with her promise. It is a hopeful note in the battle against the nasty bacterial complex we know as *Borrelia burgdorferi*."

Testing negative is common

Prof Sapi was appalled to find that when it came to Lyme diagnosis and treatment, chaos reigned. Despite her own symptoms, she initially tested negative for the infection.

"Researchers don't even know what Lyme Disease is," she says. "I realized that somebody had to go back and test the ticks."

A noted researcher and former Yale post doctoral/operative fellow in therapeutic radiology, Prof Sapi quickly made a



breakthrough: she discovered that deer ticks could be infected with mycoplasma, a rogue life form. The tick passes the mycoplasma onto the human, resulting in all kinds of chaos. Once she began looking, she found other pathogens living in deer ticks.

Such chaos occurring in patients who test negative for Lyme Disease, including a herd of doubting physicians she had consulted for her own illness, moved her to help. "I have been to so many doctors who laughed at me," she said.

One of her research teams is now using nanotechnology to create new, more accurate detection test. As it stands now, the best test for Lyme Disease still offers a 70% false negative rate.

Improvement

"If you know a person has mycoplasma, you can treat it," Prof Sapi says. She cited a small New Jersey study of seven patients with Lyme symptoms who tested negative for Lyme Disease. But when the physician handling the cases tested for mycoplasma, all seven patients tested positive. Once treated, they all showed signs of improvement.

Prof Sapi presented research on mycoplasma at the national Lyme Disease conference at the University of New Haven in May, and has submitted a paper on the topic to the Journal of Medical Entomology.

She has also been seeing a naturopathic doctor, whose treatment seems to be working.

* Sources: University of New Haven and www.lyme-disease-research-database.com

Why the herbal programme works better than pharmaceuticals

Two leading Lyme Disease experts commented on the New Haven study exclusively for CAM.

Dr Philip Kielman, who conducted the five-doctor study featured in our May 2009 issue, told us that in addition to Lyme Disease the products used in the recent research could potentially be used for other conditions.

The combination of the herbals' properties suggests they would be active against these infections and conditions:

- E-coli
- Mycoplasma
- Rickettsiae
- Salmonella
- Shigella and streptococcus
- Common bronchial infections (acute pharyngitis, bronchitis, sinusitis)
- Infections of the urinary tract
- Stomach and bowel problems.

Dr Lee Cowden, MD, who has developed an extensive treatment protocol for Lyme Disease — and who was a keynote speaker at the Rio Health-sponsored CAM conference earlier this year, says that he was not surprised by the results. Dr Cowden and many other colleagues have noticed from their clinical experience that the antimicrobial herbals outperform pharmaceutical

antibiotics — which is what you would expect given the herbs' broad-spectrum activity, against which microbes find it very difficult to adapt.

Dr Cowden commented: "The recent in vitro research at the University of New Haven, Connecticut, using the Nutramedix herbals Banderol and Samento against Borrelia burgdorferi, when compared to the pharmaceutical doxycycline, confirmed what I and others had observed clinically in Lyme Borreliosis patients.

"Many patients with Lyme Borreliosis fail to improve clinically with doxycycline (or any other pharmaceutical antibiotic), but improve dramatically in a few weeks on the Condensed Cowden Support Programme that includes Banderol and Samento as the primary antimicrobials.

LESS RECURRENCE

"Also, patients who use the Programme appear to have a lower likelihood of recurrence of Lyme Borreliosis than patients who are on pharmaceutical antibiotics when the therapy is stopped, presumably at least in part because the herbal agents appear to eliminate the biofilm microbial colonies and

other hiding forms of Borrelia burgdorferi better than the pharmaceutical antibiotics.

"Richard Horowitz, MD, in New York state, has placed several hundred patients who failed with pharmaceutical antibiotics on the Programme and reports that well over 70% improve after several weeks on the all-natural, predominantly herbal program.

BROADER SPECTRUM

"He and I have observed that Lyme Borreliosis patients who eat less junk food, eat less allergenic food, drink more water, plus take the additional organ-support herbs and detox substances found in the Programme improve more consistently and more rapidly than those who take only the antimicrobial herbs.

"The other benefit of the herbal programme over pharmaceutical antibiotics in these Lyme patients, that I believe future research will prove, is that the antimicrobial herbals have a much broader spectrum of action than any pharmaceutical and are capable of simultaneously eliminating the co-infections including babesia, bartonella, rickettsia, mycoplasma, microfilaria, fungi and viruses."

Revised 2010 protocol for treatment of Lyme Borreliosis (Lyme disease)

Schedule:

- Samento 10 drops, 3 x per day for 60 days (may be combined with antibiotics).

Support:

- Detoxification of the kidneys by drinking enough water (min. 1.5 litres per day).
- Burbur detox (works on the kidney, liver and lymph) 8 drops. 4 x per day.
- Green Magma Organic Green Barley Grass Juice extract may be used as further aid to detoxification where required. Suggested dose: 3-6g powder (1-2 teaspoons) or 10 tablets per day
- Caution: Warn of a possible Herxheimer reaction.

Lyme Borreliosis; Chronic Schedule:

- Start with Samento 1 drop, 1-3 x per day.

- Increase dosage with 1 extra drop a week to 10 drops, 3 x per day. (If there is a Herxheimer reaction, or extreme tiredness, stop for 1 day and start slowly again with the lowest dosage with which it was going well).
- Use Samento for 12.5 days and then stop for 1.5 days.
- After 1 month at 30 drops per day — substitute use of Samento with use of Banderol 2 x 20 drops and continue with Banderol for 12.5 days, then stop for 1.5 days, then switch back to use of Samento. Thereafter, rotate the use of Samento and Banderol. This should prevent the bacteria from building up a resistance to Samento.
- In case of co-infections (present in 45% of chronic Lyme disease cases), add Cumanda (build up to 20 drops, 2 x per day) for 8-12 months. This should be used in addition to either Samento or Banderol.

Support:

- Detoxification of the kidneys by drinking enough water (min. 1.5 litres per day).
 - Burbur detox (works on the kidney, liver and lymph) 8 drops, 4 x per day.
 - Green Magma Organic Green Barley Grass Juice extract may be used as further aid to detoxification where required. Suggested dose: 3-6g powder (1-2 teaspoons) or 10 tablets per day.
 - Other suggested supportive supplements: Magnesium malate (highly recommended), Bromelain, Chlorella, Colloidal silver, Dandelion root.
 - Blood group diet.
 - Caution: Warn of a possible Herxheimer reaction.
- The daily dose may be administered in fewer or more doses as required — i.e. 2 x 10 drops = 3 x 7 drops etc.