INTRODUCTION

There are different degrees of evidence that infections and the immune reactions to them can cause disease, neurological disease, chronic conditions, cognitive changes, and depression. The relationship between infections and their immune responses is complex and multifaceted.

There is increasing evidence that various immune mechanisms can contribute to the development of neurological disorders. For example, studies have shown that the immune system can play a role in the pathogenesis of many neurological conditions, including Alzheimer’s disease, multiple sclerosis, and Parkinson’s disease.

Inflammation is a key factor in the pathogenesis of many neurological conditions. The immune system plays a crucial role in regulating immune responses, but uncontrolled inflammation can lead to neuronal damage and neurodegeneration.

The immune system is part of a complex network of immune and inflammatory mechanisms that work together to maintain homeostasis and protect the body from harm. When the immune system is dysregulated, it can lead to the development of disease.

This article discusses the role of the immune system in neurological disorders and highlights the importance of understanding the immune mechanisms involved in these conditions.

PUBLIC HEALTH ALERT

BY ROBERT BRANSFIELD, M.D.

IMMUNE REACTIONS

MICROBES AND DISEASES

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Our bodies are so much more than what we see. They are a complex, self-regulating system that affects all of our organs, muscles, and tissues. It is fueled by electrical impulses that run through the body. And while we focus on our body’s subtle energies, modern treatments are definitely not a new concept (Chinese Medicine and acupuncture, for instance). The mind-body-spirit connection is not just for the “new age” or mystics. It is our immune system, or the body’s energy system, they are finally gaining well-deserved respect. As Dr. Oz put it, they are “the new big frontier in medicine.”

When our energies are being disrupted, flow irregularly, or become sluggish and blocked, our bodies are not functioning at their optimal healing capacity. But, there are ways to start the process of turning this around and starting to shift that—and they’re free. Pretty cool, right?

Here are three energy medicine exercises that, when done correctly, can help strengthen your immune system.

1. Chill Out Your Triple Warmer Meridian

I am 45-year-old wife, mother of three, and professional. I had always been the most optimistic, joyful, and healthy person as I jour- neyed through my very life, but nothing like what I knew something bad had happened. I had no clue what was going on, or even what day my husband was supposed to park his car outside. I needed help walking, could not see. We operated on an intricate system, the K-27 points are “Thymus gland serves as the barrier between mind and body. It is the first organ to be affected by mental atti- tudes and stress. Hence action and stimulation of the thymus is an essential, pri- mary foundation of achieving and maintaining good health.” – Dr. John Diamond

Thymus gland lies just beneath the upper part of the breastbone in the middle of the chest and is a spe- cialized gland of the immune system. It’s responsible for the body, which are vitally important to the immune system. To activate its energy: “Thump it” with a closed fist for several times as you breathe. If you mimic Tarzan (you can imagine your fist is if it feels better), you’re doing it right! Tip: “Thump the thymus in a gentle manner (one-two-three) with the emphasis on the first thump or beat, and you’ll give it an extra boost.”

2. Thump Your Thymus Gland

I became so sick I ended up being admitted to the hospital for three days. I had every blood test done that they knew of, including Lyme tests,士, arthritis tests. The doctors probably found nothing wrong with me and discharged me with a diagnosis of fatigue. I went home and continued to get worse. My husband took me back to the hospital the fol- lowing weekend and I was admitted again. This time they did a spinal tap, MRI, and other blood work. Again - nothing showed up showing anything wrong. I campaigned and saw me and let me know that “women’s problems” was going to go away and I could not take care of myself or my family. I was told that my body was too weak, I started to pull out of this nightmare. I could not be in the hospital or alone, as I could not take care of my family or myself. The LLMD decided I was too sick to work. I was not my problem, I was not my problem. I could not work. I still had neurological symp- toms eye issues, brain fog, dizziness, and fatigue/weak- ness. However, I could take care of myself and family again, fully. However, there was nearly at the end of the hospital I had prior to my Lyme diagnosis. I was functioning at about 50% of what I used to, but at least I was not on my own. I was very sick for a long time, and this LLMD corresponded with my telephone about my case, and recommended my doctor might in fact have Lyme disease. I started on antibiotics on July 27, 2011. I became even sicker once I started my antibiotics regimen and my homeopath- ic protocol. I could not get out of bed for days, I had panic attacks which lasted for three days, and became suicide thoughts. I was not good at all, as I could not take care of myself or my family, and I was not able to function.

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by DR. Wiseass

Recently, after a 6½ year hiatus from the Lyme community, DR. Wiseass courageously reappeared, unveiling her NEW site (http://drwiseass.com) in the process. Prior to her abrupt departure from the ‘community’ in 2007 - she also knows there are also out on most message boards, people either don’t understand your pseudonym. She’s in the Lyme community, and found their right mind would blog as a vehicle to work in November 2004, and part of her life. She was ble illness for the greater suffering with chronic invisibility experience is really! So who is she! 3) But I NEED to know who she is! So who is she? DR. Wiseass understands first hand the over-whelming frustration of brain-fog, as it is often the feature of an overlapping symptom - of many chronic invisible illnesses. Because you invite her to return on a different day when, perhaps, she can better understand that which has already been pre- repeated repeatedly. 4) But it’s my RIGHT to know who she is! DR. Wiseass wonders if, during your childhood, you were not told “NO” very often when doing on this premise, she gently & with com- passion welcomes you to the world of adults when she is attempting such. Therefore - if DR. Wiseass refuses to answer you - it is often because she is sleep- ing, at the pharmacy, in the bathroom, writing blog posts, spending time with her family, OR because she doesn’t think any answer she would provide you with will be satisfactory to you, and therefore deems her time too important to waste in attempting such. 5) As far as writing is concerned, DR. Wiseass wonders if your inability to understand her choice to not maintain anonymity via a pseudonym is because you assume her writing style is the same. They are not. If DR. Wiseass is indeed, ‘hiding’ her identity, it is actually for the benefit of her offspring, who just might want to be President of the United States one day - or NOT. Either way, the anonymity chosen by DR. Wiseass is meant to assure nothing says or writes ever reflects badly upon her child(ren). 6) I still think she’s just HIDING. I don’t trust people who hide. How should I TRUST her? YOU SHOULDN’T. In fact, you probably shouldn’t TRUST most of the people you’ve “friend” on your Facebook page. DR. Wiseass' trust would be earned. That’s why DR. Wiseass isn’t trying to seek donations or anything, you, stalk you, or sell you anything. Instead, DR. Wiseass is simply using your cyber-friendship out of a sense of community. In spite of all the “opening up” to everyone her NEW and OLD blog sites mentioned above, you continue to feel unsettle by DR. Wiseass’s anonymity - by all means “unworthy” of your trust. Ultimately, it is your choice, which you are certainely, with certa- tainly respects, and she wishes you well as you go on your way. 7) Well, why is she so SARCAS- TIC? I think SARCASTIC can be RUDE! You don’t get the comedy chan- nel. Most individu- als who aspire to being SARCASM is funny. HOWEVER, there are indeed times DR. Wiseass is using sarcasm, not warranted or inappropriate as she’s trying to suggest you find a new hobby, watch a little televi- sion, or perhaps give your self a much needed enema. 11) Why does she talk or write about herself in 3rd person? I think that’s creepy. DR. Wiseass is dis- heartened that you would judge her writing style as ‘creepy’. …but that whole 3rd person thing is weird, isn’t it? 13) OK, well, one other thing….. 8) I don’t think SAR- CASM is funny. I think it’s hurtful. DR. Wiseass under- stands many people will not understand she maintains anonymity via a pseudonym is because you assume her writing style is the same. In other words, her sarcasm a gift which she shares with you - regardless of the reason. You may choose to take offense, if you like. Again, that’s your choice. 9) I still think she’s just bad. Bad things are never from some of my friends; is she BAD? In response to the 1st part - you’re not really know DR. Wiseass very well, as DR. Wiseass is not very familiar with your friends. Furthermore, DR. Wiseass feels it is proba- bly best that you keep it that way. Regarding part 2 of your question: Define “bad”.
inadequate remethylation leads to increased homocysteine levels which are excitotoxic [37]. Elevated C-reactive protein levels are linked to a decline in executive function and frontal lobe damage. There is an association between elevated levels of high-sensitivity C-reactive protein, an indicator of low-grade inflammation, and decline in executive function [34].

Proinflammatory cytokines include Interferon alpha, IL5, and IL6. Cytokine activation has been associated with psychiatric symptoms. For example, IL6 is elevated in the cerebrospinal fluid of suicide attempters and is related to symptom severity, memory deficits and aggressiveness and IL8 and beta is associated with self-inflicted aggressive behavior and fatigue [35-37]. Besides cytokine effects, IL1 is a potent activator by systemic lipopolysaccharides has been demonstrated as one of the mechanisms by which environmentally driven immune system activation can trigger desapaprative behavior in an animal model [38].

It has been proposed that parasites improve their survival by evoking mecha- nisms that promote immune tolerance. IL6 is known to cause autim- mune reactions, but it has recently been shown that overactivated IL6 caus- es autoimmune B cell anti- body production [31]. IL6 in a form of cytokine has been called the “proinflammatory cytokine” and the “nervous system cytokine” because of its elevated levels in the cerebrospinal fluid in the presence of infection [32].

Elevated IL6 can cause symptoms of fatigue and depression, as well as many infectious conditions as well as Lyme disease [43]. Borrelia species is the most active inducer of IL17 production. The chemokine CXCL13 is a key regulator of B cell recruitment to the cerebrospinal fluid in acute Lyme neuroborreliosis CSF CXCL13 and can be used as a diagnostic marker for infec- tion [40-48].

Bipolarities expressed serotonin on the outer membrane of the Borrelia cell wall that is known to be proinflammato- ry. These lipoproteins act neutrally and have been shown to be key players in the development of autoimmune diseases. The autoimmune reaction is explained by the development of antibodies to the Borrelia lipoprotein and the development of antibodies to serological reactions seen in LYD/TBD and other immune neuropsychiatric dis- orders. Antinuclear antibodies are excited to body autoantibodies resulting in neurot- oxic Lyme disease [44]. Elevated levels of IL6 can cause symptoms of fatigue and depression, as well as many infectious conditions as well as Lyme disease [43]. Borrelia species is the most active inducer of IL17 production. The chemokine CXCL13 is a key regulator of B cell recruitment to the cerebrospinal fluid in acute Lyme neuroborreliosis CSF CXCL13 and can be used as a diagnostic marker for infec- tion [40-48].

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undergoes the pathophysiologic nature of PLDS and dis-

credits the psychosomatic theory of some others as the cause of persisting symp-
toms [58]. Since immunolo-
gical mechanisms of disease are

caused by an ongoing infec-
tious process, a growing list of

testimonials of ASD patients

discourages support for persistent

in post-treatment Lyme disease

patients, and current models of autoimmunity in other dis-
sases suggest that persistent

inflammation is required for the production of autoanti-

bodies [53]. In summary, autoantibodies described by

Chandra and colleagues is likely that pernicious condi-
tion with the Lyme spiro-

chete Borrelia may be driving pro-
duction of these antibodies [59].

CHRONIC INFECTIONS, Lyme/TICK-BORNE DISEASE, IMMUNE EFFECTS AND AUTISM SPECTRUM DISORDER

One mouse model for ASD = Autism spectrum dis-

orders was described in both

autoimmune rheumatoid syn-
drome patients and animal models associated with ASD symp-
toms (64). In addition, auto-

antibodies that react to the 36,

37, and 73 kDa bands on Western Blot test-

ing are associated with pro-

voked and/or contributed to cause of autism. Reactivity to these
to Borrelia burgdorferi and to a lesser degree to Bartonella

henselae, Bartonella, Ques-

tana, Mycoplasma, Chlamydia pneumonia and Streptococcus pneumoniae [5]

CONCLUSION

When looking at the clinical and central nervous

system behavior of ASD patients it is apparent that per-

sistent inflammation and molecular mini-

maechanisms of disease with gradually increasing
cephalopathy and gradual,

ly increasing mental symp-
toms. Cognitive symptoms begin as executive dysfunc-
tions.

They are highly progressive.

A rare neurological impairment and may gradu-

ally progress to dementia while with low pain experi-

ences a complete barrier allows

baseline of mental symptoms.

Research on the subject arti-

cles and published in recent

years of a complete barrier allows

immune and central nervous

interaction is needed

environmental exposures

to the development and/or

mechanisms include both

possible pathophysiological

mechanisms include both

infantis disease - a neurospirocheto-

[1] Miklossy J. Alzheimer’s Dis-
cases - a neurospirochete infor-

dation between infectious disease

and immune components access

of a complete barrier allows

brain. Lymphocytes, microglia, and immune and central nervous

interactions, the presence of an intact BBB limits the

brain tissues and immune components access

between infectious disease

and immune components access

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WE TREAT THE CAUSE OF THE DISEASE NOT JUST THE SYMPTOMS

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Fibromyalgia
Bacterial Infections
Viral Infections
Fungal Infections
Toxicities
MS & Parkinson’s
Arthritis
Skin Disease
Cardiovascular disease
Allergies
Chronic Pain
Hypoglycemia
Diabetes
Diseases of unknown origin

Sierra Integrative Medical Center optimizes health service by drawing from all schools of medicine. We utilize scientifically-proven conventional treatments in combination with alternativetherapies that are designed to strengthen the body so it can heal itself.

Our services are designed to provide a holistic healing approach with a broad range of healing modalities, including but not limited to: homeopathy, natural & biological medicine, nutritional therapies, orthomolecular integration & neurotherapy.

We emphasize preventative protocols so as to avoid recurrence and the development of new problems.

We are always open to accommodating patients. If you have a specific request, please contact us to discuss your health treatment or health protection plan.

Danella Carpenter: Lyme Disease
 After 4 months of antibiotic treatments and my health declining, my doctor agreed that we should take another course of action. It was then when we came across Sierra Integrative Medical Center and we knew this was the better way to go with a more holistic approach. The natural form of treatment the clinic used made logical sense to me. They are able to spend the adequate amount of detailed time with each patient, and heal the body as a whole, not just the symptoms and not just the Lyme. Now, I feel better than I have in years. I have energy and my body continues to feel stronger each day!

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