

# Breakspear Medical Bulletin

Issue 26

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## Notes on switching to a gluten-free diet

More and more people are being diagnosed with a gluten intolerance.

Gluten-free diets have been found to be beneficial for alleviating symptoms of attention deficit hyperactivity disorder (ADHD), autism, fibromyalgia, multiple sclerosis, irritable bowel syndrome (IBS) and dermatitis herpetiformis (DH).

For a person diagnosed with coeliac disease, the only way to treat the condition is to eliminate gluten from the diet.

Many short-term detoxifying diets require eliminating processed carbohydrates from the diet,



There are many naturally gluten-free wheat flour replacements readily available.

such as pasta, bread and cereals.

Gluten-free diets exclude all gluten from the food eaten. That means no wheat, barley, rye, oats, kamut or spelt. Some patients who

are sensitive to gluten cannot manage other foods such as millet and, more rarely, rice and maize (corn).

Much so-called gluten-free flour is flour from which gluten (the glutinous protein component) has been removed and the starch that is left is said to be gluten-free. However, the Codex Alimentarius, which is a

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## Introducing new specialist ASD nutritionist

Breakspear Medical Group has expanded its services so as to offer further support for patients with Autistic Spectrum Disorders (ASD) and therefore recruited specialising nutritionist, Angelette Müller in September 2010.



Angelette Müller,  
Nutritional Consultant

medical practice. Her interest in child health led her to develop nutrition and food education workshops for children and adolescents. She was invited to act as a consultant nutritionist on the Food Dude Project

commissioned by Wolverhampton PCT.

Miss Müller has worked as a senior lecturer on an undergraduate course in nutrition therapy and was involved in postgraduate

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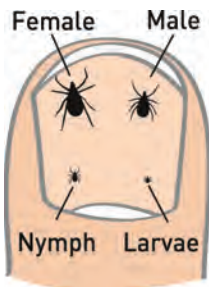
## On the market: tick removal kit (with tick carrier)

Ticks are small, blood sucking arthropods that feed on the blood of just about any bird or mammal. Ticks can be born with, or pick up and carry, many different diseases, including borreliosis (also known as Lyme disease). An infected tick may be spreading numerous diseases to its various hosts in its lifetime.

It is recommended that everyone who walks in the woods, in long grass, through leaf litter and even in urban parks and gardens, wear long trousers and socks to protect him/herself from ticks.

After an outing, one should inspect his/her entire body for these tiny creatures in order to remove them before they start burrowing their heads into the skin to start feeding. One should pay particular attention to one's armpits, groin, navel, neck and head.

Many people are bitten and unaware because ticks are tiny and often their bite is painless and many people do not experience symptoms. Others may start feeling ill within days or weeks after a tick bite and often do not make the association between the bite and the illness.



When removing a tick that is embedded, and therefore reduce the risk of being infected, it is important not to squeeze it because it can eject its saliva and gastrointestinal contents into its host. It is also important not to break off the embedded head from its body, as that will make it more difficult to remove the head, which can still transmit disease.

Tick removal kits are now available, which are small enough to store conveniently in a wallet or pocket. Inside the kit, there is a tick removal tool provided, which will lift the tick off.

If a patient of Breakspear wishes to have the tick tested, to see if it is carrying borreliosis, he/she should place it carefully in the universal container provided and then despatch the kit to Breakspear Pathology. For an additional charge, the tick will then be submitted for testing by the PCR technique for *Borrelia* and a report will be provided. The report usually takes between 1 and 2 weeks. (The cost of this test for Breakspear patients is £66.)

If living in an area where *Borrelia* is endemic in the tick population, it would be wise to seek advice and possibly receive antibiotics immediately, whilst waiting for the report.

### Breakspear Medical Bulletin

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**Breakspear Medical Bulletin** is a private publication that we aim to produce quarterly. It is for the promotion of environmental medicine awareness and Breakspear Medical Group Ltd. This newsletter is not intended as advice on specific cases but as a forum of information researched and stored at Breakspear Medical Group. We urge readers to discuss the articles in this bulletin with their health-care practitioners. Unauthorised reproduction of this newsletter, or quotation except for comment or review, is illegal and punishable by law.

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## Introducing our new specialist ASD nutritionist

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nutrition education. She also currently works as a consultant for Create, School of Food & Health delivering integrated health and culinary education.

Miss Müller is part of the clinical team at Breakspear Medical Group and will be working with Dr Daniel Goyal and all new and existing ASD patients.

She is currently undertaking research in the area of ASD and developing instructional guides on meeting the special dietary needs of ASD patients.

## Ask Dr Eberhard Schwarz



**I've heard a lot of talk about digestive enzymes and am wondering if I should be taking them. What are the benefits?**

Enzymes are proteins that are essential for our existence. Enzymes speed reactions by catalysing them, which enabling metabolic and physiological processes to take place.

Enzymatic activity makes life possible; catalytic activity of vital reactions would occur a million times more slowly if not for the catalytic activity of the enzymes.

In human physiology, enzymes' function can be broadly categorised as either digestive or metabolic.

Digestive enzymes stimulate (catalyse) the chemical breakdown of dietary micronutrients, such as proteins, carbohydrates and lipids, within the gastrointestinal (GI) tract.

Metabolic enzymes catalyse a huge number of biochemical reactions in the body's cells and tissues.

There is a third category of enzymes, namely food enzymes, which can be found in raw foods such as fresh fruits and vegetables, when they are ingested. Evidence suggests that plant enzymes may contribute to the human digestive process by initiating autolysis (breaking down) of plant foods within the GI tract. This capacity is lost when foods are cooked, pasteurised or thermally processed. To compensate for the loss of enzyme activity in modern diets, supplementation with enzymes derived from plant, animal and/or microbial resources is often beneficial.

### **Who should take digestive enzymes?**

Digestive enzymes are suitable for those eating moderate amounts of cooked and/or processed foods and may be especially helpful for people who feel they have digestive difficulties, or need support to break down specific dietary components such as dairy, wheat or high-fibre foods.

There is compelling evidence about the loss of digestive enzyme capacity in our diet. Much more effort to produce an efficient amount of

our own digestive enzymes is necessary. It must be considered that there is a gradual decline of enzyme production that also leads to reduced macro- and micro-nutrient availability and to GI tract symptoms. This can easily be changed for the better with the correct supplementation of digestive enzymes

### **What type of enzymes should be used?**

For most people, a broad spectrum enzyme supplement would be suitable.

If there is a particular class of foods about which to be cautious, an enzyme which contains specific special enzymes must



Digestive enzymes... may be especially helpful for people who feel they have digestive difficulties, or need support to break down specific dietary components such as dairy, wheat or high-fibre foods.

be considered and a doctor and/or nutritionist should be consulted. Seeking professional advice is particularly important when sensitivities and allergies have to be taken into consideration. For example, people with an allergy to pineapples should not take bromelain, and those allergic to papaya or pork should not take papayine or pancreatine respectively. Another example of a potentially dangerous reaction is when someone experiences a reaction to mould because that means that no fungus-derived enzymes should be taken (in effect, none of *Aspergillus* origin). Specialist advice is also very important during pregnancy, or for those with a severe gastrointestinal disorder or a metabolic condition, such as diabetes.

Some proteolytic digestive enzymes, such as bromelain from pineapple and papayine from papaya, have positive effects on different inflammatory conditions because they are used systemically in other parts of the body and not just the digestive tract. This could quite often lead to a considerable reduction in the need to take drugs which are not well tolerated.

There are many precautions to be considered before taking digestive enzymes; however, with expert advice, the benefits far outweigh the potential risks.

*Advice on helpful supplementation with digestive enzymes can be obtained from Breakspear Medical Group's Nutritional Consultant, Ron Leon.*

## Dr Terence Daymond's farewell message

*The 2 o'clock train from Newcastle says goodbye to the Angel of the North and quickly passes to Durham where we have a magnificent view of the Cathedral. Next stop is York, where there is always the anticipation of seeing a steam train outside the Railway Museum. After that it is sitting down and reading or catching up with the medical journals until the Arsenal Emirates Stadium welcomes you to Kings Cross. A quick walk to Euston, up to Hemel Hempstead, across the Common and canal and up the hill to Paradise, the site of the white concrete home of Breakspear Medical Group.*



**"... it has been a pleasure to work with everybody and note the dedication of all the staff."**

*- Dr Terence Daymond Consultant specialist in Rheumatology*

phosphatidylcholine is helpful in this regard. Likewise, the essential fatty acids are known to be of benefit in ME.

Closely associated with ME/CFS is irritable bowel syndrome (IBS). This may be caused by disturbances of bacteria within the gut leading to perhaps an increase

in D-lactate within the body, which potentially gives rise to brain fog. A course of appropriate antibiotics and prebiotics is now available. These are Mutaflor, a beneficial E.coli derivative, given for 60 days with an appropriate antibiotic, such as erythromycin.

The management of ME has therefore improved considerably over the years I've been at Breakspear and I hope that for many patients this has alleviated their symptoms.

In the early part of the 19th century, doctors in Scandinavia and Germany described a condition associated with a red ring rash and neurological symptoms of fatigue, meningitis and Bell's palsy. It is known that these conditions responded well to treatment with penicillin.

It was not until the early 1970s, when a group of mothers in Lyme, Connecticut, USA, were worried about an epidemic of arthritis in their children and they asked the doctors to investigate, that the connection was made with the ticks. Later, Willy Burgdorfer isolated the spirochaete (bacterium) that causes Lyme disease, which has been given his name and is called *Borrelia burgdorferi*.

There seems to have been an explosion of cases of Lyme disease, partly due to increased recognition and partly associated with climate change and increased number of ticks and deer throughout the country. We have seen the number of cases increase rapidly over the last 3 years, so that we are treating new and long-established cases. We have been able to make contact with colleagues in America and Germany, with Lyme Disease Action and BADA/UK to help treat these patients. The advantage

*(Continued on page 5)*

For over 3½ years this has been my Monday afternoon trip and it has been a pleasure to work with everybody and note the dedication of all the staff.

In my years at Breakspear Medical Group, the management of myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) has progressed quite significantly.

Initially, we were concerned about a post viral infection, but now we are aware of the evidence of viruses, Lyme bacteria and changes that occur within the body metabolism that can give rise to the symptoms of fatigue and brain fog. Epstein-Barr virus is one such virus, but recently discovered is the xenotropic murine leukaemia virus-related virus (XMRV) and work is going on apace to record the epidemiology of this virus and its incidence and prevalence within a community; blood tests are now being undertaken in various parts of the country, including at Breakspear, to identify patients with the virus. Whilst it is early days, we are anticipating that anti-viral treatment may be helpful in the management of ME/CFS.

We are also aware of the changes in the body that occur. There are quite distinct changes within the muscle and mitochondrial function, which can be helped with supplements. A combination of coenzyme Q10, methylcobalamin, vitamin B<sub>12</sub> and

## Notes on switching to a gluten-free diet

(Continued from page 1)

collection of internationally recognised standards, codes of practice, guidelines and recommendations relating to food, allows a very small proportion of gluten in starch which is labelled "gluten-free" and this may be too much for some people who wish to avoid gluten altogether.

In order to completely eliminate gluten from the diet, it is best to use fresh foods and avoid grains altogether.

The best foods to make the centre of one's diet are:

- whole, unrefined carbohydrates
- complete proteins
- fresh vegetables and fruits
- essential fats, such as linseed oil

Foods which can be used to substitute for grains include:

- sago
- tapioca
- quinoa
- amaranth
- teff
- flours from the lentil family, such as gram, soya and pea flour



Fortunately more and more large chain food stores are recognising the demand for truly gluten-free baking supplies...

Those who can tolerate rice, maize and millet can also use these in their diets.

Some specialist shops sell almond flour and potato flour/starch (which are also available through Breakspear Pharmacy, in organic form wherever possible). Fortunately more and more large chain food stores are recognising the demand for truly gluten-free baking supplies and prepared foods and do offer some selection.

For example, there is a fresh organic chickpea spaghetti pasta available in some fine food stores, which is gluten- and dairy-free with appreciable amounts of protein and legume fibre.

Today more and more restaurant menus have inserted symbols that indicate which meals are suitable for special diets, such as vegan or vegetarian, and some now indicate "gluten-free". Particularly sensitive people must still be careful, as mentioned previously, because a very small proportion of gluten may still be contained in foods that are allowed to be labelled as gluten-free.

Some airlines are now offering gluten-free in-flight meals; however, these meals may contain sandwiches made from gluten-free wheat flour bread and/or rice cakes, which not all people can tolerate. In some cases, requesting a vegan meal or fruit platter may best meet the most sensitive patients' requirements.

*If you are switching to a grain-free or gluten-free diet, our Nutritional Consultant, Ron Leon, will be able to help you create a balanced new diet plan.*

## Dr Terence Daymond's farewell message

(Continued from page 4)

of seeing the number of patients that we have is that we can see the whole spectrum of the disease and, therefore, we are not just restricted to one form of treatment.

It is recognised that treatment must be individualised for each patient, as each patient reacts differently and requires their own specialised treatment. We rely upon clinical diagnosis, but fortunately we have laboratory

techniques which can help support that when necessary.

As I leave Breakspear Medical Group, I shall be sorry to leave my friends and colleagues behind, confident that the management of patients with ME/CFS, Lyme disease and environmental diseases will be provided to the highest possible standard.

Dr Terry Daymond



# Message from the Chairman of the Trustees of Breakspear Hospital Trust

Breakspear Hospital Trust, registered charity number: 1100205

*Dear Friend of Breakspear,*

Since the inception of Breakspear Hospital Trust in 2003, we have been able to spend money on each of our 3 objectives, namely to carry out research into treatments for environmental illness such as allergy and intolerance, to make available information about the subject and to help financially people in need of treatment for whom it would otherwise be impossible.



**In the coming year and beyond, with your support, we would very much like to develop these discoveries into medical research studies...**

The huge majority of expenditure so far has been on the third of these objectives; faced with the dilemma of whether to spend money on something which will bring immediate relief to sick people or on other activities, which would have less direct and immediate effect, the decision is not a difficult one. A great many letters of thanks show that the decision to help individuals has been the correct one, too.

However, one of the things we are mindful of is the need to persuade medical authorities, which in the main decline to help people with treatments such as are administered at Breakspear and other allergy clinics, that those treatments which we see as being valuable do work, and not just because patients say they make them feel better, or in many cases enable them to live a relatively "normal" life previously denied them. Of course we recognise that PCTs (and whatever new government-appointed body will replace them) do not have enough money to satisfy all the demands made of them, and that sometimes they need an excuse to say "no".

One of the common excuses made to refuse funding is that there is insufficient published evidence to show that treatments, such as low-dose immunotherapy (or LDI) as carried out at Breakspear, are effective, and although there is outcome evidence and many hundreds of past

and present patients who would testify that their treatment works very well, this is not enough to persuade many PCTs. It is clear that the issue of relevant and properly sourced published material needs to be tackled.

We were encouraged to learn about the discoveries recently made by Breakspear doctors (described on facing page).

In the coming year and beyond, with your support, we would very much like to develop these discoveries into medical research

studies and to move a little closer to providing, for the first time, thoroughly conducted research which will provide solid evidence that LDI does indeed have a significant effect and thereby explain scientifically why patients experience so much benefit from it.

As with many charities, the past year has been a relatively modest one in terms of income derived from donations. Nevertheless, we see our work as essential in helping to bring relief with a largely unrecognised treatment to people with an illness not well understood .

We always need more money to enable us to continue so I am appealing for further help from friends and supporters of Breakspear Medical Group and Breakspear Hospital Trust.

If you are able to make a donation you can rest assured it will all go to a very good cause, 100% of all income goes directly into our fund, there are absolutely no overheads for our Trust to bear, all those involved are unpaid and all administration is provided free of charge by Breakspear Medical Group for which we are grateful.

Thank you for your consideration.

Yours sincerely

*Ron White*

Chairman of the Trustees

# Help provide scientific evidence

## to help those with chronic fatigue

More than 50% of patients presenting at Breakspear Medical Group have chronic fatigue.

Our Neuroscience Department's specialist equipment monitors the autonomic nervous system, which is the branch of the nervous system (such as heart rate, digestion, respiration and perspiration) that operates primarily below the level of consciousness. The evaluations on fatigue patients are showing that there are specific patterns of disruption occurring within their autonomic nervous system, which are not under the control of the conscious mind.

Simply put, the specialist equipment is providing evidence that chronic fatigue is not just in the patient's mind and, in the future, could be used to objectively diagnose chronic fatigue.

As well, many patients who have had follow-up autonomic evaluations have demonstrated some extraordinary and unexpected recovery, particularly occurring as a result of Breakspear's low-dose immunotherapy.

Breakspear Medical Group's Specialist in Autonomic Neurophysiology, Dr Peter Julu, and his neurophysiologist colleagues at other institutions have found some of the changes remarkable and they want to carry out further investigations.

A large scale multi-centred study to map autonomic change in allergic response has been proposed. The research would be conducted both at Breakspear Medical Group and a major London teaching hospital. However, we need to raise funds to conduct the necessary pilot studies to develop Dr Julu's hypothesis before such a large study can take place.

The findings of these proposed studies could provide new information on the autonomic changes during allergic response, scientifically supporting the use of Breakspear's low-dose immunotherapy, and could lead to an objective clinical test for chronic fatigue, as well as a providing a standardised method to monitor recovery.

***To help fund this research, please send donations to Breakspear Hospital Trust, Hertfordshire House, Wood Lane, Hemel Hempstead HP2 4FD***

### **Dr Peter Julu is the only GMC registered Specialist in Autonomic Neurophysiology in the UK**

Most of you will know of Dr Peter Julu, who joined Breakspear Medical Group 4 years ago. He is a Consultant Researcher at the Institute of Communication in Aalborg University, Denmark and the Neurophysiologist in charge at the Swedish National Rett Centre at Frösön Sweden, an Honorary Consultant Autonomic Neurophysiologist at the Royal London Hospital, and an Honorary Senior Clinical Lecturer at both the Wingate Institute for Neurogastroenterology and the Royal London Hospital.

In addition to seeing his own patients, many of whom have a documented history of organophosphate exposure, Rett Syndrome or autism, Dr Julu has investigated the autonomic function of over 300 Breakspear patients and his findings have been of huge benefit in their treatment.



## Notes on myalgia and fatigue caused by lactate acidosis

Many different types of lactate are produced in cells in various parts of the human body. When there is too much lactate, symptoms can occur as a condition develops called lactate acidosis.

L-lactate is produced in different ways as part of the body's normal energy-producing cycle, the Krebs cycle, and by gut bacteria. Typically L-lactate acidosis happens when cells are receiving too little oxygen, which causes low pH levels and simultaneously causes cells to break down carbohydrates anaerobically (without oxygen), leading to the production of lactic acid.

Accumulation of lactic acid causes myalgia (pain in the muscles). L-lactate is a normal product of anaerobic metabolism and is usually quickly metabolised by an enzyme called lactate dehydrogenase.



Many people with chronic fatigue, brain fog and TATT (tired all the time) syndrome suffer from D-lactate acidosis.

Examples of anaerobic exercises are weight-lifting, push-ups or pull-ups when L-lactate will be produced, causing lactic acidosis and aching of the muscles. This will happen particularly, for example, when a person who is unused to exercise goes running. They will not have built up the mitochondria in their muscles which can metabolise aerobically.

Trained athletes normally have more mitochondria present; their multiplication over time with repeated exercise enables athletes to perform without severe pain in their muscles because the mitochondria use oxygen and can metabolise fats in the Krebs cycle.

D-lactate is produced largely by gut bacteria. D-lactate acidosis is a condition characterised by low pH in body tissues and blood, and high build-up of D-lactate.

(Continued on page 9)

### D-lactate-producing bacteria, which can cause D-lactate acidosis, are:

Producers of only D-Lactate	Producers of Racemate Lactate [50%D - 50% L]	Producers of only L-Lactate
Lactobacillus delbrueckii <i>subsp. delbrueckii</i>	Lactobacillus acidophilus	Lactobacillus agilis
L. delbrueckii <i>subsp. lactis</i>	L. amylovorus	L. amylophilus
L. delbrueckii <i>subsp. bulgaricus</i>	L. aviarius <i>subsp. aviarius</i>	L. animalis
L. jensenii	L. brevis	L. bavaricus
L. vitulinus	L. buchneri	L. casei
	L. crispatus	L. mali
	L. curvatus	L. maltaromicus
	L. fermentum	L. murinus
	L. gasseri	L. paracasei <i>subsp. paracasei</i>
	L. graminis	L. paracasei <i>subsp. tolerans</i>
	L. hamsteri	L. ruminis
	L. helveticus	L. salivarius
	L. homohiochii	L. sharpeae
	L. pentosus	L. rhamnosus
	L. plantarum	
	L. reuteri	
	L. sakei	



## Increase in rickets in Southampton



BBC News 12 November 2010 reported that “more than 20% of children tested for bone problems in Southampton showed signs of the crippling disease rickets, a Health Trust has revealed.”

Rickets is a disease mainly caused by a lack of vitamin D, which can lead to deformities such as bowed legs, stunted growth, poor tooth formation, curvature of the spine and ill health in children. It occurred frequently in England in the 17th century and many doctors are fearing a resurgence. (Rickets in adults is known as osteomalacia.)

Fortunately most children in the UK should be able to get enough vitamin D from at least 15



minutes of unprotected sun exposure per day, as well as eating certain foods such as oily fish, eggs and fortified foods which contain the vitamin, and by taking nutritional supplements, particularly in the winter months.

Pregnant women should discuss supplementation of vitamin D, especially later in the pregnancy, as it is crucial for the absorption of calcium, which is key in the formation of healthy bones.

Studies have shown that people with darker skin are at a greater risk of vitamin D deficiencies because increased pigmentation reduces the capacity of the skin to manufacture the vitamin from sunlight.

## Notes on myalgia and fatigue caused by lactate acidosis

*(Continued from page 8)*

One way that D-lactate is produced in the gut is as a result of anaerobic metabolism by bacteria and the creation of energy by using carbohydrates in the absence of oxygen. As there is very little oxygen in the gut lumen in the lower intestine, anaerobic metabolism occurs in tissues and muscles during anaerobic exercise, which is when muscles are used vigorously in short bursts. Unlike L-lactate, D-lactate is not readily metabolised by humans and its elimination from the body depends on an alternative complex and slower metabolic pathway, because people do not possess the enzyme D-lactate dehydrogenase.

Many people with chronic fatigue, brain fog and TATT (tired all the time) syndrome suffer from D-lactate acidosis. D-lactate is always produced by “unhealthy” gut bacteria and is rarely produced by energy production in the Krebs cycle.

It is possible to examine and determine whether an individual has predominantly aerobic or anaerobic respiration, check the energy-creating Krebs cycle, and check factors where there is low oxygen in tissues, using tests of VEGF and 2,3 BPG and carbonic anhydrase (which assesses whether there is low carbon dioxide), and by transcutaneous gas measurements of oxygen and carbon dioxide.

It may be determined that fatigue patients should start re-training the fatigued body to breathe aerobically, which is the preferred method that requires oxygen to generate energy. One can ‘train’ to increase mitochondria, hence aerobic metabolism; also by altering the way these patients breathe, they may experience less myalgia.

Because D-lactate is produced by gut bacteria, the presence of high levels of D-lactate in a blood sample is a reflection of noxious bacterial overgrowth in the gastrointestinal tract.

It is very important to reduce the number of gut bacteria which produce D-lactate.

To address the harmful gut bacteria, nutritional supplements may be used. By using broad spectrum nutritional analysis, doctors can determine deficiencies and offer advice on how to reduce the L-lactate production and address abnormal bacterial flora to reduce D-lactate.

At Breakspear Medical Group, particular probiotics are recommended preferentially. (See table on page 9 for a useful list to guide those who are considering probiotics.)

Patients with chronic fatigue syndrome should avoid those bacteria which can produce D-lactate including, if they have myalgia, the 50:50 D: L-lactate strains.

Correction of breathing methods and oxidation processes, and balancing the gut bacteria may result in a restitution of proper metabolic function in tissues and improvement in the fatigue state.

## Did you know...?



### Top perfumes contain unidentified chemicals

Earlier this year, AOL news reported that the two advocacy groups, the Campaign for Safe Cosmetics and the Environmental Working group, commissioned laboratory analysis of 17 big-selling fragrance products and prepared a 43-page study on their findings.

The report states that, on average, popular fragrances contain 14 chemicals which are not identified on the product labels due to a loophole in the law. According to the report, many of these unlisted chemicals are sensitising chemicals that can trigger allergic reactions. As well, some fragrances contain hormone disruptors and others contain chemicals that have not been tested for safety by government or the fragrance industry.

According to the AOL article, "The researchers say these [chemicals] include diethyl phthalate, a chemical found in 97% of Americans and linked to sperm damage in human epidemiological studies..."

The study was self-published and not peer-reviewed.

### Rush to buy traditional light bulbs underway



Various newspapers have reported that shoppers throughout Europe are stocking up on traditional 75W light bulbs before a European Union ban comes into force.

In early September, production of the traditional 75W light bulbs ceased under EU legislation aimed at reducing carbon dioxide emissions and energy consumption.

Last year the ban on 100W bulbs led to Germans fighting over the last of the stocks in shops.

### Payout for boy left disabled by MMR vaccine

The Telegraph 30 August 2010 reported that a medical assessment panel ruled that the MMR vaccine caused a now 18 year-old boy to suffer severe brain damage. £90,000 has been awarded. Robert Fletcher received the combined measles, mumps and rubella (MMR) vaccine when he was a healthy 13 month-old baby. Today he suffers from epileptic fits, is doubly incontinent and cannot stand, talk or feed himself. He requires 24-hour-care from his parents who have been seeking compensation for 13 years.

## Swine flu vaccine may be linked to narcolepsy and rare nerve disorder

### Narcolepsy link

European drugs regulators are investigating a link between the swine flu vaccine and narcolepsy, which is a rare condition that causes people to fall asleep suddenly.

The Telegraph 27 August 2010 reported that investigations have been prompted after health officials in Finland announced they were

suspending the vaccination programme following reports of narcolepsy in 8 people who had received the vaccine.

So far there have been 27 reports of suspected narcolepsy in people who have received the vaccine. According to the article, no cases related to the swine flu vaccine have been reported in Britain.

In the general population, it is believed that around 1 in 2000 people has narcolepsy.



**Over 30 million people in the EU have been vaccinated with Pandemrix, the H1N1 swine flu vaccine.**

### Guillain-Barré syndrome (GBS) link

Health watchdogs are admitting there may be a link between the swine flu vaccine and increased risk of developing this rare nerve disease.

The Telegraph 18 October 2010 reported that studies are underway to examine a possible association between

the vaccine and Guillain-Barré syndrome, which is a condition that affects the nervous system and can lead to paralysis, particularly to the hands and feet, and may be fatal if it paralyses the respiratory system.

"The position was and remains that there is no confirmed evidence that the vaccines are a cause of GBS," said a Medicines and Health Care Products Regulatory Agency (MHRA) spokesman.

## Available at our Pharmacy



[www.breakspearmedical.com/shop](http://www.breakspearmedical.com/shop)

Visit Breakspear Pharmacy's online shop anytime of the day or night to order and pay securely for:

- nutritional supplements
- alternative foods
- toiletries
- household cleaners

Breakspear Pharmacy Online has extended our free postage and handling offer until the end of the year. That means UK patients and practitioners who have accounts with us can register and order any time of the day or night from our website and receive their order with no additional postage fees. (Free postage and handling applies only to Mainland UK orders placed and paid for online which do not require special delivery and does not apply to orders placed in person, by fax or over the phone. Republic of Ireland registered customers will be charged £15 for parcels up to 2kg. Offer expires 31 December 2010.)

## Daily exposure to titanium dioxide, a possible carcinogen

**Titanium dioxide has recently been classified by the International Agency for Research on Cancer (IARC) as an IARC Group 2B carcinogen "possibly carcinogenic to humans".**

Nano-titanium dioxide is used in close to 10,000 'over the counter' products. It is in everything from medicine capsules and nutritional supplements to food products (when used as a food colour, it has E number: E171), sunscreens, cosmetics and toothpaste, as well as in jewellery, inks, paints, and carrier bags.

Two million pounds of nano-sized titanium dioxide are produced in the United States each year, according to Professor Robert Schiestl, a genetic toxicologist who ran the laboratory at University of California Los Angeles School of Public Health, where molecular biologist Bénédicte Trouiller gave drinking water containing nano-titanium dioxide to laboratory mice. She found that the nano-titanium dioxide was damaging or destroying the animals' DNA and chromosomes.

Professor Schiestl says that the degree of DNA damage can be "linked to all the big killers of

man, namely cancer, heart disease, neurological disease and aging".

Along with being potentially cancer-causing, chronic exposure to any metal in jewellery, dental implants and restorations, cosmetics, joint prostheses or even coins can sensitise genetically predisposed individuals and induce a so-called Type IV hypersensitivity reaction.

The classical symptoms of a Type IV allergic reaction to metal are contact dermatitis and eczema. Titanium may induce local dermal or oral lesions and

systemic reactions involving headache, migraine, neuralgia, depression, insomnia, arthralgia, paraesthesia, fatigue and immune dysfunction.

In addition, chronic exposure to metals has been implicated in the cause of multiple sclerosis, amyotrophic lateral sclerosis, chronic fatigue syndrome, fibromyalgia, multiple chemical sensitivity and, recently, autism.

*For more information about the studies on this metal and others, as well as the evaluations available to diagnose sensitivities/allergies to metals, please request Dr Jean Monro's paper, Titanium dioxide.*



## New policies introduced to improve patient service

As a result of a significant increase in telephone calls and email requests to our doctors, Breakspear Medical Group has reviewed the way in which our appointments system operates and how we respond to incoming calls and emails.

In order to ensure that every patient has fair and reasonable access to the clinical advice and support they need from our doctors, we will be implementing certain changes taking effect from 4 January 2011.

From that date, if you wish to speak directly to a doctor, please direct your call to Reception who can book a telephone consultation for you (professional fees will be charged).

*Your doctor will no longer be able to accept calls without a pre-arranged appointment.*

If your call is urgent and no appointments are available, your doctor's Medical Secretary may be able to assist you. The Medical Secretaries are also available to help with queries regarding your medical letters or queries about the interpretation of your test results.

**If you are unsure who you need to speak to, please direct your call to Reception: 01442 261 333 Option 3**

Emails will be routed to your doctor's Medical Secretary, who will forward the email on to the appropriate individual for response. We aim to respond to your email within 3-4 working days. If

## Doctors' contact details

**Telephone: +44 (0) 1442 261 333**

**Dr Daniel Goyal**

Contact: Julie Matthews ext. 218

**Dr Peter Julu**

Contact: Julie Matthews ext. 218

**Dr Jean Monro**

Contact: Margaret Schwartz ext. 314  
or Vicky McLucas ext. 243

**Dr Eberhard Schwarz**

Contact: Claire Norris ext. 316

**Dr Margarete Segner**

Contact: Claire Norris ext. 316

**Dr Christabelle Yeoh**

Contact: Claire Norris ext. 316

Our Patient Liaison team can respond to queries regarding your estimate or treatment/testing plan.  
Contact: Patient Liaison ext. 293

your email requires a lengthy response, you may be asked to book a consultation.

**Important:** If you send us an email or give us your email address you are consenting to its use. Correspondence we send to you may include estimates for testing/treatment or clinical advice that you have requested. This information is confidential to you (therefore you should be aware of who can access your email).

## Bulletin board

### New faces at Breakspear Medical Group

Along with our new Nutritional Consultant, Angette Müller (*see page 1 for story*), there are a few other new faces around the clinic.

Breakspear welcomes Joni Caswell to the new position of Quality Manager and Sara Talbot, who will be helping with administration. (Sara is the third generation of her family to work for Breakspear Medical Group.)

A new receptionist, Debbie Gover, recently started, replacing long-time receptionist, Lynda Jenkins, who is currently training to become a member of the Patient Liaison team.

The clinical team may be expanding in the New Year with the addition of more Registered Nurses.

### Closing dates for Christmas 2010

**The clinic will be open as usual on Friday 24 December 2010 and will then be closed until Tuesday 4 January 2011.**

- Orders for antigen vaccines should be requested by 6 December 2010 for European destinations and by 7 December 2010 for UK destinations, to ensure being despatched before Christmas.
- Pharmacy orders should be requested by Friday 10 December 2010.
- All Pathology kits must be returned by Thursday 16 December 2010.

*Best wishes for Christmas and the New Year!*