

## Best Cases In Biological Medicine Series #8



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*Biological medicine works. The purpose of this series is to present illustrative cases from different practitioners in order to demonstrate the highly effective principles and practice of Biologic Medicine. If you have cases which have educational value for others using Biological Medicine in practice, please email them in Word format to Dr. David I. Minkoff M.D. at [drmlinkoff@bodyhealth.com](mailto:drmlinkoff@bodyhealth.com). They will be presented each month as part of the Best Cases in Biological Medicine series.*

S.J. is a 45 year old female who presented to her family doctor over 7 years ago with anterior neck pain of two weeks duration. Her symptoms had begun slowly, with a feeling of fullness on either side of her laryngeal cartilage. She felt warm but had no fever and fatigued.

She recalled having similar symptoms in the past associated with stress. She was chronically tired. She denied any trauma to the area, URI symptoms, recent dental work or medications. She had a predominantly vegetarian healthy diet, had daily exercise, and no significant past medical or surgical history. There were no cardio-respiratory complaints, GU symptoms, or GI symptoms. Her practitioner palpated a symmetrically enlarged and tender thyroid gland without other findings. He ordered a CBC that was normal, and a thyroid panel which showed a TSH of 4.5 (upper limits of normal) with normal free T3 and T4. ESR was 35 (normal being less than 30) Anti thyroglobulin and anti microsomal antibodies were 3x elevated. ANA and RF were negative.

A diagnosis of Hashimoto's Thyroiditis was made and she was recommended anti inflammatories and rest. Over the next few years she had recurrent episodes of similar symptoms and since she felt her condition was not improving she sought alternative care and came to our clinic.

Hashimoto's Thyroiditis is a common problem especially in women, who are affected 50 times more often than men. It is an autoimmune disorder in which the thyroid gland is slowly attacked by the body's immune system. In most cases it begins in the third or fourth decade of life. It is the most common cause of hypothyroidism. Other autoimmune disorders occur with increased frequency and include celiac disease, vitiligo, RA, SLE, diabetes, myasthenia gravis, and pernicious anemia.

Traditional medicine has not clearly defined any etiology for this autoimmune condition and has no effective treatment save anti inflammatory medication and replacement of thyroid hormone when hypothyroidism manifests.

In Biological Medicine we have a different approach. Autoimmune conditions have causes and when we look for them we can usually find them. In her case, when she presented to us after several years of symptoms her physical exam was normal save for a slightly enlarged and slightly tender symmetrical thyroid swelling.

Eleven mercury fillings were present. She had no root canals and healthy appearing gums. Autonomic Reflex Testing showed her autoimmune condition, and direct resonance revealed high levels of mercury and CMV in her thyroid.

She was treated with autohemotherapy using procaine, traumeel, thyroidia comp, pleo nig, and pleo lat every other week for a total of 4 injections. After her first injection she got fever and chills lasting 3 days, followed by a surge of energy compared to her prior condition. Each additional shot gave less reaction until the last which caused no symptoms at all.

A complete workup including a CDSA, RBC minerals, essential fatty acids and gluten/gliaden antibodies was done.

Dysbiosis was treated and since her gluten and gliaden antibodies were high she was taken off all grains except rice.

Her mercury fillings were removed by a Biological Dentist and a full mercury detox program was done including Metal Free, garlic, chlorella, cilantro, MSM, minerals and antioxidants. The CMV was treated with Monestary of Herbs CMV remedy with Omura drug uptake technique to for the thyroid.

She had neural therapy done to both lobes of her thyroid gland using procaine, traumeel, thyroidea comp, pleo nig, and pleo lat.

This was done twice a week for four weeks.

Retesting with ART after six months showed no mercury or virus in her thyroid gland and no more autoimmunity. She felt completely normal, with good energy and sleep and no thyroid pain or swelling.

Her sed rate returned to a normal of 5. Her TSH was now 1.5, down from 4.5. Anti thyroglob and microsomal antibodies were in normal range, and free T3 and T4 were normal.

She has had no recurrences of any symptoms for five years and has remained well with normal thyroid and ESR on lab studies. She continued her gluten free diet.

This case of autoimmune thyroiditis has several factors that may have singly or in combination set off this condition.

Gluten/gliaden sensitivity, mercury toxicity, CMV viral load, and dysbiosis are all possible cofactors. They either altered the surface protein structure of the thyroid cells to make them appear "foreign," or have some antigen that "looks like" the membrane proteins on the thyroid tissue cells, or some combination of both that lead to immune attack. Lymphocytic infiltration and inflammation of the thyroid tissue are the hallmarks of the pathology. Whatever the etiology, the causes are usually reversible, if we are able to alter the factors responsible for the body reaction that leads to the pathology.

Our benign interventions were able to turn off the basic mechanism and allow healing and restoration of the gland itself. As a result the inflammatory markers returned to normal and thyroid function has been normal for the last five years.

Autohemotherapy is one of my favorite treatments because the results that can be obtained are often spectacular. Using ones own blood along with appropriate homeo and iso pathics to immunize the patient can bring very nice outcomes. Whenever this diagnosis presents itself, I am always excited to explain to the patient that this is a method of resetting their immune system. The job of the immune system is to protect the body against foreign invaders. These are "non-self" tissues or antigens. The immune cells are to protect "self." When there is autoimmune disease the immune system has become confused or fooled into attack on "self." The auto hemotherapy can often realign the immune cells to attack only the true foreign tissues and leave "self" alone.

When we did this, and then handled the issues that were behind it, the body in its innate wisdom took care of the rest.

Biological Medicine is the science of working with the laws of nature and life to heal the body. When these principles are followed, and the patient is compliant, and providing we are not too late, we can be successful. 🌸

*Please send me your illustrative Biological Medicine cases. I would love to share them with others.* – D.. Minkoff

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