

Unity Health Newsletter

Welcome to our latest bulletin – This time the topic is Asthma. I hope you gain further insights into this deadly condition.

Here's to vibrant health

Stephen Guy-Clarke



Spotlight on Asthma

By Stephen Guy-Clarke ©

Asthma – What is it and how can it be treated?

Asthma is characterised by episodic attacks of wheezing and breathlessness, whereby the airways of the lungs are constricted by muscular spasm surrounding the bronchi (small airways in the lungs). There is tightness in the chest which develops before the wheezing. The difficulty with respiration and wheezing is generally worse on expiration, but an individual assessment would need to determine between the effects of both inspiration and expiration on the patient. As the wheezing develops there is breathlessness. Often sticky mucus or phlegm is produced. The severity of attacks are variable with some being mild with only wheezing whilst others develop with severe breathlessness.

According to Dr Stephen Gascoigne there is a rapid pulse which can be quite high. At a level of 120 beats per minute it indicates a severe attack and at 140 per minute a life threatening situation. On average 1,500 people die from asthma each year in the UK alone and at least a third of those are under the age of 65.

Asthma is divided conventionally into extrinsic and intrinsic types. Extrinsic asthma is usually first seen in childhood and there is often a family history of allergies. Worryingly the UK has the highest prevalence of severe wheeze in children aged 13-14 years worldwide. The spasms that characterize an acute attack are not the cause of the disorder, but a result of chronic inflammation and hypersensitivity of the airways to certain stimuli. An attack may be triggered if a susceptible individual is exposed to an allergen or irritants. Common asthma provoking allergens include animal dander, chemicals, drugs, dust mites, environmental pollutants, feathers, food additives such as sulphites, fumes, mould, and tobacco smoke, but any kind of allergen can precipitate an asthma attack in a susceptible individual. This “atopic” group may also have other conditions such as eczema, hay fever or migraine

The intrinsic asthma, a less common form of the disease, generally appears during adulthood and is often associated with other respiratory diseases such as bronchitis or sinusitis, and tends to appear during upper respiratory viral infections. This group are usually vulnerable to changes in weather, exercise, emotional stress, and other factors relating to inner feelings.

Asthma specialists speculate that rising levels of environmental pollution lead to a higher incidence of asthma. Within a generation in the industrialised West we have gone from dealing with up to 300 chemicals daily, absorbed through the skin, the air we breathe and ingested, to some 30,000 on a daily basis, (asthma is uncommon in developing countries). In the last decade, the number of Americans with asthma has increased by one third. With increased deterioration in the immune system is it any wonder that here in the UK alone 8 million people have been diagnosed with asthma. Respiratory disease is the most common illness responsible for an emergency admission to hospital. Asthma epidemics related to atmospheric contamination, in which dust and chemical particulate matter are abundant, and on the increase, especially within enclosed environments.

The main aim in conventional medicine is to prevent wheezing to minimise long-term lung damage. Therefore, medical practitioners are keen to use treatments regularly and long-term in an attempt to achieve this result. Dr Gascoigne states that corticosteroids are increasingly likely to be used as a first choice. The estimated cost of treatment to the NHS is a staggering £850 million per year.

Conventional treatments in order of severity include:

- Bronchodilators as inhalers or oral
- Sodium cromoglycate
- Corticosteroids inhaled, or oral
- Bronchodilator as nebulised or injected
- Corticosteroid as injected.

According to the National Asthma Campaign many people are turning to complementary medicine and various therapies to seek relief. A good example of a complementary therapy is Buteyko a breathing technique developed by the Russian scientist Konstantin Buteyko. His theory that asthma is caused by hyperventilation led him to devise a system of breathing exercises designed to reduce breathing rate and depth. Similarly, pranayama yoga has been used to treat asthma in eastern societies for centuries. Preliminary research suggests that Buteyko improved asthma symptoms, and the respondents on the program were able to cut their use of their reliever inhalers by up to two puffs a day. Acupuncture may also prove helpful in addition to homoeopathy, and nutritional counseling.

On a nutritional note, many asthmatics find it beneficial to avoid mucus and phlegm forming foods either on a temporary or permanent basis. Also eliminate any yeast and fungal infections, as Candida, (a type of yeast which can mutate to the fungal version called Candida Albicans), loves warm moist places such as the lungs. n.b. I will cover Candidiasis, (yeast overgrowth), in a future newsletter.

An exciting new discovery in the field of Natural Medicine comes from the bark of the rare African Gum tree, Funtumia Elastica. It was used by a local healer to help many of the tribe's people who came to her with chest and allergy problems. The secret has been passed on to her grandson Jerry Yamo- hence its name "Yamo".



Dr Nyjon Eccles of the Chiron Clinic in London suggests that Yamo has some kind of immune modulatory action. That is, it readjusts the immune system, like turning up a thermostat, so that it is not so sensitive and no longer over-reacts to the usual triggers. Dr Eccles has successfully treated both asthma and hayfever with this remarkable natural product. The extrinsic asthma group are more likely to respond as this typical testimonial shows.

Ms K.B, London, Age 28

KB suffered mild asthma and hayfever symptoms with swollen red eyes and also difficulty in breathing. Her asthma limited her ability to walk long distances. She had mild attacks of asthma 3 times a day necessitating the use of inhaled ventolin each time. Dust would trigger both her hayfever and her asthma. She took her first month's course of Yamo 4 years ago and has taken it each season since as a preventative. She no longer has hayfever or asthma symptoms, and is able to walk long distances without shortness of breath.

No side effects have been observed over many years on hundreds of patients using Yamao. It is now available as vegicaps taken twice a day for adults and children aged 10 and older, and half a capsule twice a day emptied into a little juice for children less than 10. Two months treatment is recommended, it is important to stress however, with no change to prescribed medication unless under medical supervision. Continued small-scale trials will seek to determine the exact mechanism of action but already it appears to offer some degree of relief for many asthma sufferers.

As we can see, asthma appears to be a disease which is growing year on year in the modern industrialised West, so we face a continued challenge to come up with safe effective treatments. After all it was the late Comedian George Burns who said, “The secret to a long life is to keep breathing”