MULTIPLE SCLEROSIS

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Multiple Sclerosis (MS) is a debilitating syndrome involving, among other issues, demyelination of the nervous system and a subsequent autoimmune reaction. It is a progressive degenerative disease affecting not only the nervous system but also muscular, sensory, vestibular and the genitourinary systems. Because of muscular and nerve involvement, the heart is generally weakened. The annual incidence rate for PMS ranges from 1.5 to 11, per 100,000 people, but the rate is rising! The disease is more frequent in women (60% female, 40% male). The symptoms occur sporadically resulting in short term remissions then relapses.

- Stiffness
- Leg dragging
- Weakness
- Fatigue
- Clumsiness
- Tingling
- Vertigo
- Numbness
- Spasticity - pain
- Blurring
- Cataracts
- Eye ball pain
- Double vision
- Equilibrium problems
- Incontinence
- Loss of sexual function
- Loss of bladder sensation
- Food allergies
- Heart involvement
- Pins and needles
- Life style factors
- Vaccine load (# of vaccines taken)
- Environmental toxicity
- Exposure to pathogens

Currently the diagnosis of MS is based on clinical features instead of hard core lab findings. There is no definitive lab test although diagnoses can be supported by lab findings. Lesions in the spinal cord found by an MRI are an indication of MS. However, MS is a diagnosis of exclusionexcluding other possible causes.

One of the earliest "events" in MS is the breakdown of the blood-brain barrier followed by infiltration of immune bodies thus initiating myelin breakdown. (The myelin sheath is the fatty protective covering of nervous tissue).
Thus, you have the vital statistics of multiple sclerosis. What the allopaths will not tell you is that MS cannot only be halted but that the body can regenerate damaged tissue. There are various different types of organs and thus tissues that need to be regenerated. MS is a multiple systems breakdown and all of the tissues involved can and should be supported for regrowth. I support the regeneration process by supplying the specific Protomorphogens (PMGs) (See Web article on PMG) and the nutrient building blocks to be used by each type. The PMGs are the specific blueprints that guide the cells to reproduce themselves in a normal healthy way. These Protomorphogens taken from animal tissue not only provide the cell blueprint, they also diminish the autoimmune response so damaging to all chronic illness, but specifically to MS. This is true because the same mechanism that controls normal healthy cell growth also controls the immune response.

Lectures by Dr. Royal Lee - p 168: "A protomorphogen is a cell secretion given off by all living cells at all times in minute amounts, that promotes the synthesis of protein for cell repair and cell maintenance on the outside of the cell wall, after which it is absorbed by the cell. Protomorphogens are chromosome end products, made in the cell nucleus, probably the agents by which the basic functions of the chromosome are exercised. All living proteins carry a protomorphogen component by which the protein is made specific in nature, specific in causing organic reactions, specific in function, specific in its ability to act as an antigen in provoking immune reactions. All antigens may be antigentic by reason of accompanying protomorphogens, in some cases instead of being attached to a protein molecule the protomorphogen may be attached to a lipoid or polysaccharide aggregate. When a protein has been separated from a protomorphogen it is said to be denatured, and it is no longer fully capable of antigenic action; that is, cannot create an antibody specific to it in the circumstance of its injection into an animal blood stream."

Taking the animal derived PMG for the specific cell type will reestablish normal cell growth which leads to recovery and health. It is the inflammation from the autoimmune response that causes most of the damage in MS. This damage is alleviated by the PMGs.

Autoimmune disease has just recently (in the last 30 years) been understood and recognized by the medical profession in general. Dr. Royal Lee postulated the role of PMGs in growth, repair and the immune response as early as the 1930's. Autoimmune theories did not show up in the literature until around the 1950's and then they were largely discounted.

The following is taken from Lectures of Dr. Royal Lee - Volume 1, p. 206:

"Pressman reported in 1951 the existence of anti-lung and anti-kidney antibody (Journal of Allergy, 22;337 Sept. 1951) and that they were immunologically similar and could be a cause of glomerular nephritis. Such allergens have also been called autoantibodies and natural tissue antibodies in the literature. In his article, Pressman also listed multiple sclerosis, rheumatic heart diseases, periarteritis nodosa and lupus erythematosus as said to be in this category. In pernicious anemia too, antibodies to red blood cell proteins are known to exist. Jahiel and Jahiel reported in the Journal of Allergy 21:102, 1950, that 'These experiments suggest that the partial hydrolysis of autogenous proteins, tissue destruction and liberation of endocellular material, and reabsorption of an excretory product, can, under certain conditions, give rise to autogenous allergens and provoke pathological changes in a previously sensitized tissue.' Here we have the most important physiological discovery in a century laid down in this

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Dr. Lee called the PMG the "determinants" of the cell because they determine the type of cell to be built. Each tissue type has its own specific PGM protected from enzymatic destruction by lipoid (fatty) wrappers somewhat similar to the myelin sheath of nerves. The integrity of the PMG wrapper depends upon the antioxidative value of the Vitamin E complex and adequate amounts of phospholipids and essential fatty acids. If either of these components of the PMG wrapper is deficient, then the chromosome factor (PMG) of the cell disintegrates and disease sets in. Taking the PMG by mouth plus the nutrients needed will restore the PMG integrity and this restores healthy tissue. Essential fatty acids are very important in MS because the PMG as well as the nerve tissues need fats to stay healthy.

The nerve tissue is the major organ affected by MS. Not only are fatty acids and the whole vitamin E complex needed but also the whole Vitamin B complex as well. The nervous tissue depends heavily on whole Vitamin B. This vitamin complex also facilitates fat and carbohydrate digestion and metabolism. All of the B complex is essential in supporting MS. Of particular value are choline, inositol, B 12-folic acid, and niacin. It has been noted in research that MS patients are often low in B vitamins as well as essential fatty acids.

Do you see the connection here? MS people have trouble with fat metabolism and assimilation. This is a key. There is also a defect in essential fatty acid absorption, utilization and/or transport which results in a functional deficiency of fatty acids particularly Omega 3.

Research has noted that in European coastal areas have fewer incidences of MS than inland farm areas. Why? I believe the reason to be varied. Medical experts believe it is due to diet, that individuals in coastal areas eat more fish (Omega 3) and less farm animals and dairy (saturated fats). MS is linked to consumption of saturated fats and to red meat. The consumption of meat products increases the need for essential fats thus stimulating a further need for essential fats in MS as well as other diseases. Omega 3's play a major role in the protection of the myelin sheath of nerve tissue as well as the wrapping of PMGs. A deficiency of alpha-linolenic acid and other Omega 3 acids result in impairing normal myelin formation. Normalizing fatty acid metabolism may take up to 2 years on an altered diet and supplementation.

Red meat and chicken and fish to some extent are not healthy choices for chronic disease. This is not only due to saturated fats but also due to other toxins. (See article on Healing from the Inside Out).

Gamma-linolenic acid (GLA) is also effective when combined with fresh ground flax seeds. Dr. Roy Swank, a professor of neurology at the University of Oregon Medical School, has provided very convincing evidence that a diet low in saturated fat and high in essential fats halts the disease process of MS. Other dietary factors also need to be addressed for optimal results. Diet is of primary importance in all chronic illness.

Dr. Rabb's MS diet
- Normalizes the decreased fatty acid levels in the blood cells, platelets, and cerebrospinal fluids
- Decreases the autoimmune response by altering prostaglandine metabolism and normalizing cell division
- Decreases the aggravation of blood platelets
- Maintains healthy release and metabolism of Protomorphogens
• Helps balance hormone production of the endocrine system
• Maintains healthy cell membranes

Dr. Royal Lee in Lectures of Dr. Royal Lee (p. 90) has this to say: "For instance, even congenital cataract: while unquestionably an inherited condition, usually shows progressive improvement if the victim is supplied with a high intake of the vitamin C and G complexes. We recall one boy who had to drop out of high school in his first year because of loss of sight, after vitamin treatment was enabled to finish and take job as a salesman, by keeping up the use of an optimum amount of the vitamins. Without the extra vitamins, his cataract would begin to recur. The improvement in diet changed his future from a ward of the State into that of a useful, independent citizen. Though born with susceptibility, it was controlled by diet. (Dr. Lee was referring to whole Vitamin C not ascorbic acid).

Dr. Davidson in his celebrated experiments in which he caused mice to become cancerous on a diet low in vitamins and minerals, and by feeding a better nutritional schedule cured the mice and made the strain immune to cancer; simply proved that poor diet can cause racial degeneration, and a good diet cause racial regeneration. He was able to cure cancer, not in the individual, but in the race, by a better diet. He was able to cause cancer consistently, not in the individual but in the race, by a poor diet. To get the individual mouse to become cancerous he had to resort to two causes-poor diet plus a chemical irritant. Since we are all exposed to both influences in more or less degree, it is no wonder that cancer is progressively increasing in all countries where poor diets prevail-all countries where refined sugar, bleached flour and packaged groceries prevail.

In considering the importance of diet in cancer, it is well to recall the comment of Dr. Daniel T. Quigley, made at the national AAAN meeting last year, where he showed many slides of patients before and after surgical removal of cancer, and in which Dr. Quigley found in over 30 years of experience that no patient had had a recurrence of cancer who had followed his dietary recommendations. That is one situation where an ounce of fact is worth a ton of theory.

A recent report by a German doctor named Evers, on the treatment of multiple sclerosis is very similar. In treating over 600 cases, this doctor says that the only treatment he found of value was dietary correction; the use of uncooked foods as far as possible. By this means he could produce progressive improvement in all new cases, and at least arrest the progress of the disease in all old-standing cases."

Even though an individual may be prone genetically to MS or other chronic disease, this does not mean that these diseases are caused by genetic deficiencies. Genetics can only pre-dispose one toward a particular illness which manifests if external and internal conditions are favorable-such as poor diet and other life-style habits. An overlooked factor in MS is lack of the whole vitamin D (not synthetic) from either sunlight or whole food vitamins. The fact that people in coastal Europe experienced less MS points to this as a factor. Also, the fact that MS individuals experience more osteoporosis also indicates that Vitamin D may be involved. (see article on Web about calcium metabolism).

Heart problems and food allergies are also often overlooked in dealing with MS. Both of these problems involve nutrient and mineral metabolism. Poor inadequate digestion is almost always a problem in chronic illness and needs to be addressed in the healing process. Of the three types of food that the body has to digest-fats, carbohydrates, and proteins-fats are the most difficult. The body is primarily water and not fat, so fat has to be carefully handled and processed. (See article on Diabetes for more information on fat metabolism).
Energy medicine is also a key factor in healing from chronic illness. I use Rife technology, Pranic healing, body work, and other technologies to help the healing process. Adequate nutrition when combined with energy modalities and body work works synergetically to promote healing and recovery as well as age reversal. You can heal yourself!

For more information, visit Dr.Rabb’s website: www.drsharonrabb.com

About Dr. Sharon Rabb

Since the 1970's, Dr. Rabb has devoted her time to the study of both traditional and holistic medicine. Her extensive studies and knowledge of allopathic (traditional) medicine and the powerful healing properties provided through nature enable her to integrate a broad spectrum of modalities that merge scientific knowledge with natural healing. She specializes in chronic illness and degenerative diseases in both adults and children.

Dr. Rabb is also a public health nutritionist and educator certified in the State of Texas. Health education is one of the foundations of her program. She also uses a variety of modalities including CRA (Contact Reflex Analysis) to facilitate individuals in achieving optimal balance and health. Nurturing and gentle approaches are integrated with the latest in scientific research to provide a professional and caring environment. As a gifted public speaker, she has become increasingly popular among both lay and professional audiences.

For more information regarding this health topic or to arrange for a FREE initial phone consultation, call (214) 724-3505 or email her at drsrabb@yahoo.com.