

Probiotics

Another in Dr. Smith's Client Education Series

This pamphlet is complimentary to Dr. Smith's clients.

Old Loft Ent., LLC
9833 Pacific Heights Blvd
Suite "A"
San Diego, Ca 92121
760-613-8645
www.BioCytonics.com

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Playing Russian Roulette With Your Health

Many people are still not quite sure what a probiotic is or the impact they have on human health. More important, we are now facing a worldwide crisis in health care as we pay the price for the continued overuse of antibiotics over the last 50 years.

Since the 1940's, we have prescribed antibiotics for everything from colds to diarrhea in such huge numbers that the future of our health has now at risk. Antibiotics actually work on principles of poor science. Pasteur's theories of bacteria being the causative agent of diseases was (and is) so flawed that even he recognized that he was wrong. On his death bed he remarked "Antoine was right. It isn't the seed, but the ground."¹

When we hear bacteria we think immediately of disease. In fact, our skin, stomach and colon are "crawling" with friendly microflora.... that is, friendly bacteria (probiotics) that are also killed off by antibiotics. (Keep in mind that antibiotic means "against life" and probiotic means "for life").

We had an individual call recently in tears as she related how she had "six diseases from advanced Crohn's Disease² to Fibromyalgia. They have removed all but 7 inches of my large intestine and bypassed my small intestine."

I asked her first how long she had these conditions and she responded with "A little over a year and it is getting worse. I want to die." I then asked her when she had been on a major run of antibiotics. She answered with "about two years ago they put me on antibiotics for strep' throat for a few months!"

What had occurred was that this lady, whose immune system was already in jeopardy, had her last line of defense removed when the antibiotics took over. Crohn's disease is not incurable and is caused by diets high in chemicals, sugars, additives, low fiber intake and low vegetables and fruits and, often, by the overuse of antibiotics.

While antibiotics certainly have their place in *judicious* use, they ultimately cause more problems than they solve.

"Antimicrobial resistance is a problem because there is now less choice of effective drugs with which to treat infections. The more an antimicrobial drug is used, the more resistance develops in the germs it is used to treat. For example, only a few years after penicillin was developed,

¹ Antoine Bechamp was a contemporary of Pasteur and proposed that imbalances in the body are the cause of disease and not outside bacteria.

² The incidence of Crohn's disease is increasing rapidly, and is more common now than ulcerative colitis, showing a twenty-fold increase from 1940 to 1970. Crohn's disease is also called regional ileitis; it is a chronic, progressive, inflammatory disease of the bowel. The symptoms are most commonly that of diarrhea and pain. Weight loss, fatigue, and irritability are characteristic of the disease. The bowel movements often include mucus, blood and pus because of the infection. Fat may occur in the bowel movements, making them bulky and foul smelling.

resistance to it was discovered in *Staphylococcus aureus*. This is a bacteria commonly found on our skin as part of our microflora. Some *Staphylococcus aureus* (hospital acquired infections) are now resistant to almost all antibiotics and can be very difficult to treat if they cause illness. Following years of heavy use of penicillin several species of bacteria are now resistant to this drug. Minor infections that were or are easily treated may become more serious if this trend continues as the range of effective antimicrobials is reduced.”³

Worse yet, we are now seeing forms of staphylococcus that thrive on antibiotics! We are being subjected to huge amounts of antibiotics in our food supply and consumer products including canned foods and inkjet printer inks!

“Drug-resistant salmonella bacteria in European, Asian and North American animals have caused diarrhea, blood poisoning and death in humans, WHO said. The guidelines also say use of antimicrobials to promote growth in animals should be ended or rapidly phased out if the drugs are also used for treating humans and no safety evaluation has been carried out.”⁴

"Studies suggest that people living in areas with intensive use of antibiotics as feed additives are at greater risk of contracting antibiotic-resistant infections," said Ellen Silbergeld, Ph.D., Professor of Environmental Health Services at Johns Hopkins Bloomberg School of Public Health.

North Carolina and Iowa are each estimated to use three million pounds of antibiotics as feed additives annually, the same quantity of antibiotics estimated to be used each year in human medicine nationwide. At least one million pounds of antibiotics are estimated to be used as feed additives annually in seven other states: Georgia, Arkansas, Texas, Alabama, Minnesota, Mississippi and Missouri. On a per square mile-adjusted basis, Delaware is estimated to be by far the most intensive user of all antibiotic feed additives, using three times as many antibiotics per thousand square miles (187,000 pounds) as the next closest state, North Carolina (64,000 pounds). Two other smaller states join the ranks of the top 10 states on a per square mile basis, Maryland (4th) and Indiana (9th).

Overuse of antibiotics in agriculture is widely regarded as contributing to the spread of antibiotic-resistant bacteria that threaten human health. Antibiotics are added to feed not to treat sick animals, but rather on the grounds that they may promote slightly faster growth or prevent disease that could result from the crowded, stressful conditions.

"Feeding antibiotics to animals is not only a major cause of antibiotic-resistant bacteria in the human food supply, but also results in the presence of antibiotic-resistant bacteria in animals and in their waste," said Environmental Defense senior scientist Rebecca Goldberg, Ph.D., co-author of the report. "Those bacteria can in turn colonize and infect farm workers, as well as contaminate water, air, and soil."

³ Published by: Health Canada, 01/16/2003

⁴ World Health Organization, 6-15-2000

"With antibiotics, the more you use them, the faster you lose them," concluded Goldberg. "That's because bacteria become resistant in response to being exposed to antibiotics. Antibiotic resistance is a serious and growing threat to human health, so it's just plain foolish to be feeding vast quantities of antibiotics to chickens, pigs, and beef cattle."⁵

What appeared to be a wonder drug in the Second World War (penicillin) is now proving to be our downfall as chronic diseases (such as Chronic Fatigue Syndrome, Fibromyalgia and Crohn's)⁶ are rising at an alarming rate. This is due in part to the overuse of antibiotics which we further exacerbate by treating with the very thing that is implicated as the causative agent of the disease itself...a compromised immune system!

Now the Good News From Mother Nature

Existing within and without the human anatomy are literally billions and billions of bacteria. They have names such as *Lactobacillus acidophilus*, *Lactobacillus sporogenes*, *Bifidobacterium breve*; strains too numerous to mention here. But the purpose of this microflora zoo is manifold. Just a few of their myriad jobs are to assist in digestion, enhance the immune system and may have the ability to reduce the risk of cancer.⁷

Bifidobacteria were first discovered in 1900 by Henry Tissier. He was the first to encourage the therapeutic use of Bifidobacteria for the relief of intestinal disorders. It wasn't until 1950 that the remarkable probiotic effects of this effective microorganism were first demonstrated. The three specific effects noted were, elimination of pro-carcinogens, altering of procarcinogenic enzymes and tumor suppression.⁸

Several months ago, we saw a young mother who complained that her day was planned around knowing where every clean restroom was within 15 minutes. Her condition was diagnosed as chronic colitis. Colitis, of course, is simply the *lower* version Crohn's Disease.

We put her on a simple protocol of probiotics, altered her diet by excluding sugar and processed foods and gradually increased her fiber intake. Within one month, she called and reported that "I'm cured! I have normal bowel movements and needn't worry about where the closest bathroom is."

The human intestinal tract contains over 400 friendly bacteria. So how does an individual choose which probiotic he requires? Sounds a bit daunting. We've all heard of acidophilus. It's in some milk and yogurt products. But, what is it and what does it do?

⁵ Environmental Defense, News Release, 06/01/2005

⁶ A huge number of people who suffer from these conditions have been completely reversed using probiotics and altering diet.

⁷ Fernandes CF et al: Anticarcinogenic and immunological properties of dietary lactobacilli. *J. Food Protection* (1990) 53, 704 - 710.

⁸ Kampman E et al: Fermented dairy products, calcium and colorectal cancer in the Netherlands cohort study. *Cancer Research* (1994) 54, 3186-90

Lactobacillus acidophilus

Lactobacillus acidophilus (*L. acidophilus*) is the most commonly used probiotic, or "friendly" bacteria. Such healthy bacteria inhabit the intestines and vagina and protect against the entrance and proliferation of "bad" organisms that can cause disease. This is accomplished through a variety of mechanisms. For example, the breakdown of food by *L. acidophilus* leads to production of lactic acid, hydrogen peroxide, and other byproducts that make the environment hostile for undesired organisms. *L. acidophilus* also produces lactase, the enzyme that breaks down milk sugar (lactose) into simple sugars. People who are lactose intolerant do not produce this enzyme. For this reason, *L. acidophilus* supplements may be beneficial for these individuals.

L. acidophilus has been researched and proven useful for the following:

L. acidophilus is the first line of defense as a replacement of the "friendly" intestinal bacteria destroyed by antibiotics which, in turn can lead to colitis and Crohn's disease. *L. acidophilus* can prevent and reduce the recurrence of vaginal yeast infections,⁹ urinary tract infections and cystitis.¹⁰ It improves lactose absorption for people who are lactose intolerant. It enhances the immune system and, of course, helps the body prevent infection. It is also extremely useful in preventing and/or treating diarrhea. Oklahoma State University conducted several studies indicating that *acidophilus* consistently and safely reduced cholesterol by 10%-12%.¹¹ And, perhaps of primary use in the field of agriculture, The University of Nebraska proved that using *L. acidophilus* in cattle feed reduced the incidence of *e. coli* by an amazing 61%.

Lactobacillus sporogenes

Lactobacillus Sporogenes was first isolated and described in 1993 by Russian Scientists L.M. Wassowal and N.W. Nowotelnow and proliferates within the gastro-intestinal tract in a non-invasive way characteristic of beneficial gastro-intestinal residents such as Lactobacillus Sporogenes, Lactobacillus Acidophilus. *L. Sporogenes* is the only FDA GRAS listed Bacillus probiotic. GRAS means Generally Recognised As Safe.

L. sporogenes has been extensively researched and proven useful for the following:

⁹ Hilton E et al: Ingestion of yogurt containing lactobacillus acidophilus as prophylaxis for candidal vaginitis. Ann. Int. Medicine (1992) 116, 353-57

¹⁰ Reid G: Is there a role for lactobacilli in the prevention of urogenital and intestinal infections? Clin. Microbiol. Review (1990) 3, 335-44

¹¹ "Assimilation of Cholesterol by Lactobacillus Acidophilus," published in the February 1985 issue of Applied and Environmental Microbiology, Dr. S. E. Gilliland, et al

It has proven useful in cholesterol reduction,¹² digestive issues such as colitis and stomatitis,¹³ vaginitis.¹⁴ candida albicans, Staph Infections, SIDS, Epstein-Barr Virus, athlete's foot, scalp nail and fungal infections, severe gastrointestinal upset and food poisoning.

Lactobacillus rhamnosus

Lactobacillus rhamnosus is a healthier species of good bacteria than acidophilus and colonizes in your gut mucosa. Importantly, it relieves hypersensitivity reactions and intestinal inflammation in individuals with eczema and food allergies. It supports normal intestinal pH. L. rhamnosus has excellent stability over a wide range of temperatures and pH levels and inhibits the growth of bad bacteria. It also enhances the immune system's resistance and has demonstrated antitumor activity.¹⁵ Finally, it prevents food allergies caused by a "leaky gut" condition.¹

Bifodobacterium longum

Bifodobacterium longum is a species that has a "sweet tooth." It craves carbohydrates and, with various enzymes, helps digest carbohydrates in the intestine. Of primary importance, is the ability of B. longum to eliminate nitrates, a growing concern with the huge rise in nitrate use in farming and home gardening. According to numerous studies, B. Longum may also significantly inhibit development of colon, liver and breast cancers.

Bifodobacterium breve

B. breve is the most prolific bacteria in the human digestive tract and is important in the control of proper digestive function. It has also proven to reduce rotavirus induced diarrhea.¹⁶ According to the Center for Disease Control "Rotavirus is the most common cause of severe diarrhea among children, resulting in the hospitalization of approximately 55,000 children each year in the United States and the death of over 600,000 children annually worldwide. The incubation period for rotavirus disease is approximately 2 days. The disease is characterized by vomiting and watery diarrhea for 3 - 8 days, and fever and abdominal pain occur frequently. Immunity after infection is incomplete, but repeat infections tend to be less severe than the original infection."

While the preceding is a necessarily brief explanation of the ingredients in the Dr Smith's Probiotic formula, it should make the use of this formula for overall health apparent. We believe that the use of Dr. Smith's Probiotic Formula should be an everyday part of a healthy regimen.

Dr. Smith's Probiotic Formula contains the following flora.

¹² Mohan JC, Arora R, Khalilullah M. Preliminary observations on effect of Lactobacillus sporogenes on serum lipid levels in hypercholesterolemic patients. Indian J Med Res 1990;92:431-432.

¹³ Smirnov VV, Reznik SR, V'iunitskaia VA, et al. The effect of the complex probiotic sporolact on the intestinal microbiocenosis of warm-blooded animals. Mikrobiol Z 1995;57:42-49. [Article in Russian]

¹⁴ Shirodkar NV, Sankholkar PC, Ghosh S, Nulkar SM. Multi-centre clinical assessment of myconip vaginal tablets in non-specific vaginitis. Indian Pract 1980;33:207-210.

¹⁵ Intest. Microbiol. 2000. 1(1): 13-24 A.J. Burns, and I.R Rowland.

¹⁶ Pediatric Infectious Disease Journal. 15(2):187, February 1996. Eichenwald, Heinz F. M.D.

Bifodobacterium breve	1.2 Billion
Bifodobacterium longum	1.2 Billion
Lactobacillus rhamnosus	2.2 Billion
Lactobacillus sporogenes	360 Million
Lactobacillus acidophilus	240 Million

While Dr. Smith's Probiotic Formula is stabilized, we recommend that they be kept at temperatures at or below 55 degrees. If you refrigerate Dr. Smith's Probiotic Formula, please allow it to return to room temperature (at least 15 minutes) before opening as the moisture will eventually destroy or reduce the number of friendly bacteria.

End Notes

¹ Leaky Gut Syndrome

While many doctors will argue that there is no such thing as leaky gut syndrome, the fact is that it does exist albeit under differing names. More often it is called Candida-Related Complex (CRC).

Chronic candida refers to a cluster of systemic and gastrointestinal symptoms that some physicians report responds to anti-candida treatment. Nationwide there are a minimum of 300 MDs who recognize and treat the condition. There is no reliable information on it's incidence, cause, or effective treatment because it has yet to be researched. In 1990 the New England Journal of Medicine urged further study on the condition, but no research is being done at present. Many patients demand treatment despite the lack of research because it is empirically effective, and other, more conventional approaches failed.

History

In 1983, Dr. C. Orian Truss published "the Missing Diagnosis", a treatise on his success treating what were thought to be psychosomatic symptoms with anti-candida measures. William Crook published "The Yeast Connection" the same year, in which he reported similar positive results.

We recently had a client complain of horrendous rashes and yeast infections. When asked when they began, she responded "Right after my anti-biotic treatment for h. pylori." The anti-biotic treatment actually created the problem. Doctors had now prescribed prednisone to reduce the rashes. This is absolute insanity. Her problem is the reduction of friendly bacteria in the colon or leaky gut syndrome.

Constipation, diarrhea, bloating, indigestion, fatigue, weight loss, depression, brain fog and irritability are common symptoms.

Doctors who recognize CRC vary in how they treat it, based on their own experience. Many (possibly all) use prescription antifungals, such as nystatin, diflucan, and sporanox. Most practitioners and books on chronic candida advise dietary changes as a cornerstone of treatment. The most common recommendation is the elimination of sugar; in fact, an exacerbation of symptoms after eating sugar is a cardinal symptom of the condition. The elimination of "junk-foods" (i.e. potato chips) is also often advised; other dietary suggestions differ depending on the source.

Unfortunately, the use of anti-fungals is also contraindicated in our experience because it actually exacerbates the problem rather than helping it.

We recommend using 2 Dr. Smith's Probiotic Formula capsules 3X daily until symptoms subside then reducing to 1 capsule 2X daily for maintenance.

Company Profile

Old Loft Enterprises, LLC is a Nevada Limited Liability Corporation.

The Manager and Founder is Hugh Smith, Ph.D.

Dr. Smith is an internationally respected and well known researcher in chronic illnesses and mycoplasma infections. Many M.D.'s depend on Dr. Smith for consultation and often refer their "difficult" patients to him for help.

His background in microscopy represents 20 years of research in nutrition, bio-psychology, bio-energetics and **Targeted Nutritional Intervention-TNI**. Dr. Smith writes for several magazines, researches for nutrition companies as well as the design of training programs for health care professionals interested in adding nutritional counseling to their practices. His expertise in nutrition is represented in nationwide seminars.

Based upon his clinical observations, Dr. Smith has developed several innovative products designed to slow the aging process and naturally combat chronic illnesses. Nutritional counseling is effective with ADD/ADHD, fibromyalgia, chronic fatigue syndrome, irritable bowel syndrome, weight loss, arthritis, candidiasis and more.

Dr. Smith specializes in Vital Hematology (or Real Time Microscopy) as a means of observing cell wall deficient forms and the living blood of clients to recommend nutritional interventions to reverse risk factors for chronic disease and nutritional deficiencies. (If an individual is interested in scheduling a consultation, please e-mail for details and fee schedules to hugh@biocytomics.com or call the office at 760-613-8645.

Currently, Dr. Smith's research facility is located at 9833 Pacific Heights Blvd. Suite "A", San Diego, Ca 92121. Initial client visit includes the observation of living blood (with a video tape of the observation included), and nutritional counseling for chronic illness and potential risk factors.

Individuals interested in scheduling a seminar or group demonstration of Vital Hematology should address e-mail to Dr. Smith at hugh@biocytomics.com

Dr. Smith's research schedule no longer makes it possible for personal demonstrations. However, several of Dr. Smith's colleagues are available for demonstrations to groups, health food stores and/or practices wishing to offer nutritional interventions to their clients and practice. For details, please call the office.