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Inside this Issue

Patient Advises Others To
“Be Curious” After Potentially
Fatal Autoimmune Diagnosis

Riordan Clinic Seeks
Whole Person Balance in
Autoimmune Treatments

Lifestyle and Environmental
Factors May Be Causing
Increase in Autoimmune Diseases

Zucchini Lasagna
Recipe



Riordan Clinic is a world-renowned, academic medical center that has led the world in integrative oncology and complex chronic illness care since 1975. The Riordan Clinic was established as a 501 (c)(3) non-profit organization with missions in research, provider education, and patient education. The Health Hunter newsletter has been published since 1986 as an educational resource to providers and patients.

Patient Advises Others To “Be Curious” After Potentially Fatal Autoimmune Diagnosis



AUTHOR

Melody Spurney

Scleroderma started small for Denise Douty, 49, of Wichita. Her fingers felt funny after scraping her windshield on a frigid January morning in 2019. Not thinking much of it at first, she assumed it would go away. It didn't.

Not long after, she began experiencing joint pain, which became increasingly debilitating. As the year progressed, so did her pain. Denise had a job teaching a graduate school class at a Wichita-area college that summer. She said the pain was getting so bad she began to doubt if she would be able to walk across campus. She also worked as a licensed counselor and could hardly show up for appointments because of the exhaustion and pain.

Having no primary care physician of her own, she saw her wife, Cindy's, doctor, who referred her to a rheumatologist. During the four-month wait for her appointment her symptoms continued to worsen.

“By that time, I thought I was just dying,” Denise said. “I was feeling awful and could hardly work.” At her appointment, the rheumatologist looked at her swollen, puffy hands and diagnosed her with scleroderma.

“My heart just sank,” she said.

Denise said she had done her own research on Google with symptom analysis websites, which also indicated she may have the rare autoimmune disease that causes the skin to become thick and tight and can also damage internal organs.

“The only answer that kept coming back was scleroderma, and that was something I did not want to have because it is fatal. There's no cure. It's extremely rare; extremely debilitating,” she said.

As a result of the disease, Denise said she lost fat, her face changed, her skin tightened, and her

Continued on pages 2 & 3



fingers contracted. Further testing showed she had the subtype of diffuse systemic scleroderma, which Denise called “the worst type of scleroderma you can have” because of its high mortality rate. She said the average lifespan after diagnosis is two years.

“That was devastating,” she said.

Denise said treatments typically include an off-label use of medications intended for other purposes. She tried taking methotrexate, which itself comes with life-threatening side effects, but the medication didn't help her.

Her next hope was to get into a clinical trial. A blood draw was required for consideration, but her veins were so badly compromised that not enough blood was able to be taken, and she couldn't initially qualify. Her rheumatologist approved a port-a-cath to help with blood draws and eventually was able to give enough blood to qualify for the study. However, because she was the only person in the nation to qualify, the study was canceled.

Turning to the Riordan Clinic

With her symptoms progressing and traditional treatments not helping, Denise decided she wanted to go to the Riordan Clinic. She said her niece had been successfully treated at the clinic for Crohn's disease, and she hoped to find help, too.

Like her niece, Denise's care is overseen by Dr. Ron Hunninghake, MD, and the clinic's Chief Medical Officer. Funding was a challenge, though. Denise and her wife had enough to pay their bills and her student loan debt for graduate school but not much more. Her sister and parents stepped in to help, and she started her treatments.

“At that point, I could barely walk. The skin tightening makes it impossible to bend at your joints,” Denise said. She said her knees and ankles couldn't flex and she needed help walking into her first visit.

She started with lab evaluation, but the clinic staff couldn't get enough blood for the tests, and she had to come back a second time to finish.

Denise also had office visits with Dr. Ron, which she called “life-changing” because she felt like a person, not just a disease.

“He was the first person who just wanted to know me as a person,” she said.

Dr. Ron and Denise discussed her life experiences, external environment, internal environment, and her emotional health and how all of those factors can contribute to disease. She realized that she had unresolved trauma and issues that she needed to continue to work through.

“It dawned on me that my internal environment had become a perfect place for disease,” she said.

At the end of their conversation, Dr. Ron gave her something that she hadn't had since her diagnosis – hope.

“He said that I could get better. That just changed everything for me. Nobody had told me that. From that moment on, I believed it,” she said.

Moving forward, Denise said that she focused on getting better instead of being afraid she was going to die. She participated in lab tests to address nutritional deficiencies, levels of toxins and heavy metals, a nutrition genome, and worked on her methylation cycle and metabolic efficiency.

She said better health began emerging, but not without work and sacrifice. One big blow to this baking enthusiast was eliminating gluten and sugar.

“I used to live on cookies. I love my sugar,” she said.

She also eliminated caffeine and dairy as a result of her tests. She now focuses on organic food when available, grass-fed beef, pastured poultry, fruits and vegetables, and coconut milk to replace dairy.

Denise's love for cooking helped as she was able to create recipes for favorite foods like tacos and nachos using ingredients she could eat.

“It's a learning process, and it did become a full-time job,” she said, adding that she wasn't able to work outside of home anyway.

As she worked on improving her health, Denise's hands began to work better, helping her achieve goals in the kitchen and beyond. No longer unable to tie her shoes, she can now wield her Ginsu knife to do everything in the kitchen any other home cook can do.

“Sometimes, I just have to get creative,” she said.

In addition to cooking, Denise found something to love that she never expected – exercise. Her father fixed up an old exercise bike that had been in his basement and gave it to her. She wanted to do some exercise for her heart health but had never been interested before she was sick.

“The first time I rode it, it was terrifying. I didn't know if I was going to tear my skin or have a heart attack. I was so deconditioned,” she said.

At Dr. Ron's suggestion, Denise began using a symptom tracker so she could see her improvements. Her bike sessions began with 15 minutes. She has worked up to 10 miles daily and said she doesn't feel right on days when she isn't able to ride.

“I had no idea it would feel so good,” she said. “I was always, like, ‘Exercise, no!’ I hate sweating. But I got to the point that I couldn't sweat for a while because my skin was so thick. So when I got to the point that I could sweat again, I was so grateful. I was like, ‘Let's sweat it out!’”

Denise also enjoys gardening and simply moving. She even tried running at home recently, “because what if someone broke in,” she joked.

Currently, Denise comes to Riordan Clinic every other week for Ultraviolet Blood Irradiation (UBI) treatments and is often joined by her sister.

Family Healing

Part of Denise's path to better health has been addressing the whole person, including past emotional trauma that affected her.

Denise is one of five children in a large family. She said she felt shame as a normal part of being in the family and dismantling those feelings was a part of her healing journey. She said that her family did not initially respond well to her being gay, and she was alienated from her family for a long time.

"Nobody had the tools to really deal with it, and I understand that now," she said.

However, they rallied around her when she got sick, which is something that has changed the relationships for the better.

"I wouldn't think being sick is a blessing, but it changed everything for me. I wouldn't advocate, 'Hey, go out and get scleroderma or another rare disease that's going to kill you.' But for me, it has been my path to figuring out a better way and a better me," she said.

Denise and Cindy have been together nine years and married for about two. Denise's parents now visit weekly for lunch or to talk or to enjoy the garden. When her sister joins her for her UBI treatments, they sit and talk, and then the two go home for snacks.

"So much healing has come from that. When somebody gets sick, it is such a wake-up call," she said.

Advice to Others: 'Be Curious'

In keeping with the Riordan Clinic's approach to co-learning care, Denise and the clinic team launched what she called an experiment with her treatments. She said that she and Dr. Ron worked together and tried various treatments and dosages based on his suggestions and her feedback.

"You feel like you have an ally in your big experiment," she said. Through some trial and error, they found out what worked and what Denise felt was unnecessary. She said keeping an open mind is important throughout the co-learning process.

"You've got to stay curious. If you are closed with an idea, that thing that you need might be right in front of you, but you just don't see it," she said.

Denise said that although not all of her healing journey has been easy, she is grateful for how far she has come and where she is today.

"I feel super blessed. In a lot of ways, I feel better than I have in many, many years," she said.

FAQ **HAVE QUESTIONS ABOUT THE CLINIC?**
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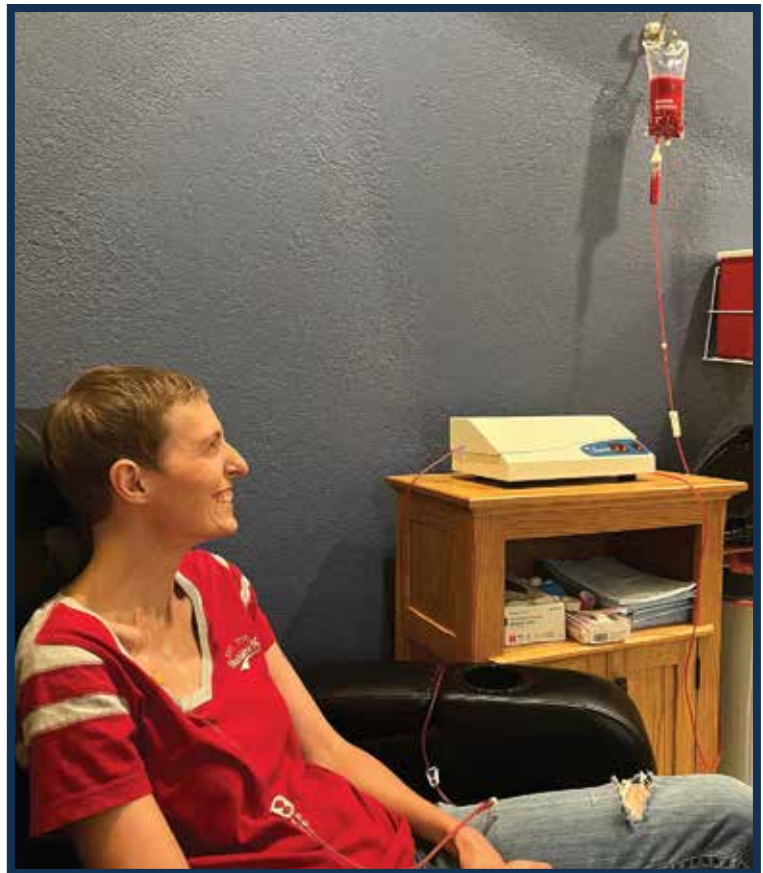
WHAT IS UBI?

UBI – Ultraviolet Blood Irradiation – helps boost the immune system by exposing blood to ultraviolet light. In this procedure, 60 CCs of blood are withdrawn through an IV, injected into a bag of sterile saline, and then run through a device that exposes the blood to selected frequencies of ultraviolet light that kill foreign organisms (viruses, bacteria, and fungus) and reduce general inflammation. After the blood has been exposed to ultraviolet light, it is returned to a patient's bloodstream. Medical-grade ozone is also often included in the treatment.

Benefits of the procedure include greater oxygenation, increased immune response and pain tolerance toward radiation or chemotherapy, stimulation of the production of red blood cells, and improved blood flow and cardiovascular function. At the Riordan Clinic, UBI treatments may be used for patients with cancer, chronic acute infections, chronic fatigue, and autoimmune diseases, among others.



For more information about UBI, scan this QR code!



Riordan Clinic Seeks Whole Person Balance in Autoimmune Treatments



AUTHOR

Melody Spurney



When it comes to autoimmune diseases, Riordan Clinic providers follow a functional medicine model of searching for the underlying “why’s,” not just the “what.”

Traditional care models focus on the organ presenting with the symptoms of an autoimmune disease. For example, in Hashimoto’s thyroiditis, the diseased organ is the thyroid gland.

Dr. Ron Hunninghake, MD, and Chief Medical Officer for the Riordan Clinic, said that by taking a whole person approach to diagnosis and treatment, he finds that autoimmune inflammation is linked to broader imbalances in the body.

From a systems biology perspective, both organs and systems within the body can malfunction and co-contribute to autoimmune illness. The Autoimmune Association cites two types of autoimmune diseases: organ-specific disorders and non-organ-specific diseases.¹

“When something goes bad, there can be a domino effect,” he said. In her article published June 13, 2022, “The Functional Medicine Solution for Autoimmune Disease,” Dr. Christine Maren, DO, IFMCP, states that it takes three underlying causes to create a full-blown autoimmune disease: genetics, environment, and poor gut health.²

Dr. Ron said that when diagnosing an autoimmune disease, he first evaluates a patient’s nutrient levels. This is how Dr. Hugh Riordan, clinic Co-Founder, began his evaluation of complex chronic disease.

Dr. Ron said that when nutrient levels are out of balance it can indicate problems within the body. Common nutrient tests include vitamins D and C, zinc, magnesium, and fatty acids, among others. He said that abnormal nutrient levels can be compared to warning lights and gauges on a car’s dashboard.

“We use nutrient tests as gauges, they tell us how well nutrients are working in the body,” he said, adding that individual nutrients can have diverse functions in multiple organs.

The environment also plays a role. Some common environmental

tests at Riordan Clinic include mold, chemical, and heavy metal toxicities, as well as glyphosate, a common herbicide used to kill certain weeds and grasses. These toxins can disrupt normal immune system functioning.

Inflammation markers, insulin resistance testing, and gut microbiome evaluation can help to identify imbalances early.

Gut health is a particular key to understanding autoimmune diseases. Intestinal permeability, sometimes known as “leaky gut,” describes the passage of material from inside the gastrointestinal tract through the cells lining the gut wall into the rest of the body. That leakage can then trigger cascades of inflammation, Dr. Ron said.

Recent research shows that the number of cases of autoimmune diseases has been rising. Dr. Maren states that 1 in 5, or 20 percent, of Americans are affected by one or more of the 100+ types of autoimmune diseases that have been identified.² In fact, the Autoimmune Association states that between 5 and 10 percent of Americans have more than one autoimmune disease.¹

Research also shows that more than 80 percent of all patients diagnosed with an autoimmune disease are women. In her article, Dr. Maren stated some potential causes for the imbalance between the rate of diagnosis between men and women.

According to Dr. Maren, theories include:²

- **Gender differences in immunity:** Studies have shown women naturally have stronger inflammatory responses than men when their immune systems are triggered.
- **Sex hormones:** Many autoimmune diseases tend to affect women during hormonal changes such as pregnancy, menopause, and other times of large hormonal changes.
- **Genetic susceptibility:** Some evidence shows that the X chromosome may be related to susceptibility to certain autoimmune diseases.
- **Pregnancy:** Related hormonal changes, as well as stress and lack of sleep, could be factors.
- **T helper (Th) cell immunity:** These cells help regulate the mother’s immune response, but changes in the cells may also drive the progression of certain autoimmune conditions.

Finding Relief

Dr. Ron said that controlling environmental factors, especially diet, can help patients find relief from their symptoms and reduce the inflammation that contributes to autoimmune diseases. Reducing trigger foods such as dairy and gluten is often a good place to start. Some people are also sensitive to the lectins in nightshade plants, such as tomatoes and potatoes.

Dr. Ron recommended eating nutrient-dense foods that are organically grown, when possible. He also recommended avoiding packaged food that can contain vegetable oil that can spoil easily. Focus instead on good fats, especially Omega-3. He said wild-caught seafood is preferable to farm-raised because farm-raised seafood is often fed glyphosate-contaminated grains.

“Eat organic foods, clean foods, and colorful foods,” he said. “If you can afford cleaner food, you will be better off in the long run.”

Dr. Ron added that food issues and environmental toxin issues can overlap. For example, he said that autoimmune patients can sometimes be misdiagnosed with having celiac disease, which is an intolerance for gluten, when the problem may actually originate with the herbicide glyphosate, which was likely used to treat the grain used in the product they consumed.³ He also said that chemicals can creep into the household environment through sources such as cleaners, make-up, plastics, laundry detergent, and more.

Other factors such as lack of sleep and excessive stress can influence digestive health. Dr. Ron said that stress can trigger a “fight or flight” response that disrupts gastrointestinal functioning, leading to increased inflammation. He said the brain and the gut are very connected, adding that the gut actually has more neurotransmitters than the brain.

“There are fascinating connections between the gut and the brain,” he said.

He also said that some patients can benefit from Low Dose Naltrexone (LDN). LDN is a novel drug therapy for general autoimmune diseases. It binds to endorphin receptors for up to 90 minutes. When it wears off, there is an hormetic response where the body increases both endorphins and endorphin receptors. Endorphins can then modulate the inflammation of various autoimmune diseases.⁴

Riordan Clinic also uses innovative intravenous therapies, such as ultraviolet blood irradiation along with high dose ascorbate, for more transient care of autoimmune disease.

For more information about autoimmune diseases and an alphabetical list of currently identified conditions, visit www.autoimmune.org/.

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Zucchini Lasagna



INGREDIENTS

- 3 large garlic cloves
- 2 Tbsp unsalted butter
- 1 (15-ounce) can crushed tomatoes, fire roasted if possible
- 1 (15-ounce) can tomato sauce, fire roasted if possible
- 1 tsp dried basil
- 1 tsp dried tarragon (or oregano)
- 2 tsp kosher salt, divided
- 2 tsp cornstarch (or arrowroot starch)
- 2 pounds zucchini (3 large or 5 small-medium)
- 2 ½ Tbsp chopped fresh thyme
- 2 tsp lemon zest (½ lemon)
- 1 ½ cups ricotta cheese
- ¾ cup shredded Parmesan cheese, divided
- 2 cups (7 ounces) shredded mozzarella cheese, divided
- ¼ tsp ground nutmeg
- Fresh ground black pepper

COOKING INSTRUCTIONS

1. **Preheat:** Preheat the oven to 450°F.
2. **Prepare the sauce:** Mince the garlic. Add the butter to a medium saucepan over medium heat. Once melted, add the garlic, and saute until fragrant, about 1 minute. Turn down the heat and add the crushed tomatoes, tomato sauce, basil, tarragon, ½ tsp kosher salt, and several grinds of black pepper. Remove ¼ cup of the sauce, stir it with the cornstarch, and add it back to the pan. (This helps to thicken the sauce.) Simmer while making the remainder of the recipe, at least 15 minutes. When ready to use, remove the pan from the heat.
3. **Roast the zucchini noodles:** Slice the zucchini into noodles ¼-inch thick, using a knife or mandolin. You can discard the pieces that are just the peel. Place the zucchini strips on two parchment-lined baking sheets and drizzle them with olive oil. Use your hands to rub the slices so they are lightly coated on both sides. Sprinkle with 1 tsp kosher salt, divided across the 2 trays. Roast 10-12 minutes, until just tender. Remove the pans from the oven and set aside.
4. **Meanwhile, prepare the cheese filling:** Destem the thyme and coarsely chop the leaves. Add 2 Tbsp thyme to a medium bowl, reserving about ½ Tbsp for topping the lasagna. To the bowl, add the lemon zest, ricotta cheese, ½ cup Parmesan cheese, 1 cup shredded mozzarella cheese, nutmeg, ½ tsp kosher salt, and several grinds of black pepper. Stir to combine.
5. **Turn down the oven:** Turn down the oven to 375°F.
6. **Assemble the lasagna:** In a 9” x 9” baking dish (or similar volume baking dish). Spread ½ cup tomato sauce on the bottom of the pan and top with 1 layer of the zucchini noodles, half of the cheese mixture (in dollops), and about ½ cup of the tomato sauce. Use a spatula to spread the sauce evenly over the cheese. Repeat again, topping with 1 layer of noodles, the remaining cheese mixture, and ½ cup of the remaining tomato sauce. Finally, top with a final layer of noodles, then another ½ cup tomato sauce. Sprinkle the entire top with the remaining 1 cup mozzarella cheese, ¼ cup Parmesan cheese, and ½ Tbsp of fresh thyme.
7. **Bake the lasagna:** Bake the lasagna for 40 minutes, uncovered. Let stand for at least 15 minutes before serving. (This allows the lasagna to set. You can let it sit even longer if desired.) Leftovers can be refrigerated for 2 to 3 days and reheated in a 375°F oven.

Lifestyle and Environmental Factors May Be Causing Increase in Autoimmune Diseases



AUTHOR

Dr. Tereza Hubkova, MD



Dr. Tereza Hubkova, MD, ABIM, ABIHM, IFM, discusses autoimmune diseases in this issue of Health Hunters. She is a strategic partner of the Riordan Clinic.

The last few decades have brought a steep rise in autoimmune diseases. Autoimmune diseases occur when our immune system attacks parts of our own bodies. When diseases start occurring at epidemic rates, it suggests that environmental and/or lifestyle triggers are contributing factors. Genetic predisposition to autoimmunity contributes about 30 percent of the risk.¹ More than 100 autoimmune diseases exist.² Common autoimmune diseases include Hashimoto's thyroiditis, Grave's disease, rheumatoid arthritis, lupus, type 1 diabetes, psoriasis, multiple sclerosis, inflammatory bowel diseases, and, increasingly, celiac disease. They affect more women than men and are among the top ten causes of death in women under 65 years of age.³

We need to do a better job getting to the root causes of autoimmune diseases, educating people about ways they can lower their risk, and addressing the environmental and societal factors that fuel the epidemic. Functional medicine practitioners believe lifestyle choices and environmental factors could play roles in autoimmune diseases, and research increasingly confirms that.

The Western diet seems to be a major trigger of autoimmunity and inflammation, especially due to the lack of dietary fiber and nutrients that are needed to support a healthy gut microbiome. Individuals often eat too many processed, artificial, and inflammatory foods and too much of the wrong fat, salt, and sugar. Disruption of the gut microbiome by the "Standard American Diet" (quite appropriately abbreviated as SAD) and "leaky gut" leads to the introduction of food antigens and microbial components into our body, causing chronic inflammation and contributing to autoimmunity.⁴

Gluten is a particular problem for many people. Celiac disease, a hypersensitivity to gluten that leads to difficulty digesting food, was once considered rare. It is now estimated to affect 1 in 100 people.⁵ In celiac disease, autoimmunity affects almost any organ from the pancreas to the brain. Most people with celiac don't know they have

it, and the diagnosis can be delayed by as many as ten years. The Celiac Disease Foundation reports that only about 30 percent of people who have celiac disease worldwide are properly diagnosed.⁵ If we do not test our patients with autoimmune thyroid disease for celiac and get them on a gluten-free diet, we are missing an opportunity to prevent or delay another autoimmune disease they might otherwise develop later.

Inflammation worsens autoimmune disease. This dysfunctional inflammation can attack any part of the body, including the brain, joints, digestive tract, skin, and thyroid. Other lifestyle factors can also impact autoimmune disease including stress, a sedentary lifestyle, obesity, smoking, a lack of sleep, and a lack of nutrients and vitamins – especially vitamin D. Vitamin D acts more like an immune-modulatory hormone, able to curb infections, many cancers, and excessive inflammation. However, many people have low levels of the vitamin as we don't spend enough time outdoors and exposed to sunshine. Sunscreen decreases the formation of vitamin D in our skin, so individuals might want to be outdoors for 20-30 minutes before applying it, unless you are very sensitive to sunburn. Infections, such as Epstein-Barr Virus (EBV) and *Helicobacter pylori*, have also been implicated in autoimmunity.⁶ Swift treatment of *Helicobacter* may even reverse or improve some autoimmune conditions, such as idiopathic thrombocytopenic purpura (ITP), if identified early enough.⁷

The immune system must first learn to discern what is normal and what is not normal, thus a possible threat, to each individual. Damaged tissues, such as damage due to excessive oxidative stress and inflammation, may expose parts of our cells that the immune system will react to and sometimes develop antibodies against. And modern life, unfortunately, provides too many causes of inflammation and oxidative stress, including environmental pollution. Air pollution, pesticides – specifically the herbicide glyphosate – as well as heavy metals (lead and mercury), plastics (such as bisphenol A), adjuvants (such as aluminum), and many other toxicants have been linked to autoimmunity.

Environmental toxins attach to our cells and make them look like strangers to the immune system. The immune system does its

proper job and attacks the “stranger,” inadvertently damaging our own tissues in the process. Environmental pollution is an ongoing problem that we need to address as a society, or we will keep suffering the consequences.

Testing can help doctors and patients identify potential imbalances as well as markers of autoimmunity years before developing symptoms. Identifying potential imbalances in the pre-symptomatic stage allows doctors and patients to act to decrease the chance of developing disease, or at least postpone it into the more distant future. There is nothing to lose and only better health and energy to gain by cleaning up our diet, optimizing vitamin D levels, improving the gut microbiome, and getting toxins out of our lives.

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Please send any comments or suggestions to marketing@riordanclinic.org

Thank you for reading.



Melody Spurney
Editor

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LIPOSOMAL GLUTATHIONE



August’s featured supplement is Glutathione, which is an antioxidant produced in cells and comprised largely of three amino acids: glutamine, glycine, and cysteine. The Riordan Clinic offers two varieties, a refrigerated Liposomal Glutathione, and shelf-stable Lypo-Spheric Glutathione. Benefits may include support for the immune system, cellular and liver health, and protection against free radicals.



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LATEST EPISODES



EPISODE 38
CANCER JOURNEY INSPIRES BELIEVE BIG WITH IVELISSE PAGE

Ivelisse Page, co-founder of Believe Big

Dr. Lucas Tims, ND, FABNO, interviews Ivelisse Page, who founded Believe Big after being diagnosed with stage 4 colon cancer in her 30s. They discuss Ivelisse's personal experience with cancer as well as a new clinical trial of mistletoe therapy.



EPISODE 37
BIOLOGICAL DENTISTRY AND RISKS OF MERCURY

Dr. Julie Babcock, DDS

Dr. Lucas Tims, ND, FABNO, welcomes biological dentist Dr. Julie Babcock, DDS, to discuss toxins as they relate to dental issues. Dr. Babcock explains the dangers of mercury and its use in traditional dentistry. She also offers listeners tips on at-home oral care.

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