

Sharp Again

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Naturally

Newsletter Issue #2

Making Alzheimer's Only a Memory

BACK FROM OBLIVION, PART I

Using Supplements to Bring Someone Back From End-Stage Dementia



By Dr. Richard Carlton, M.D.

I am a physician specializing in psychiatry, but my approach since way back in 1975 has differed from that of most of my colleagues. Rather than make medication my primary treatment modality, I have been using a Complementary & Alternative Medicine (“CAM”) approach, which looks first to the use of nutrients to treat not only psychiatric problems (such as ADHD and mood, anxiety, and autistic spectrum disorders), but also certain neurological problems (such as seizures and migraines).

Gravitating toward a CAM approach was natural for me. Biochemistry describes a complex and endlessly elegant system that I have always enjoyed learning about. Beyond that, it's a fact that mental and emotional problems are often caused by biochemical and nutritional imbalances.

This idea of putting nutritional approaches before medication shouldn't surprise anyone; virtually everything in the brain is made with the help of (a) nutrients, along with (b) enzymes, and (c) co-factors. Enzymes are proteins that speed up

Cont. on page 2

QUINOA: the Inca's “Chisaya Mama”

Five thousand years ago, quinoa (pronounced keen-wah) originated in the Andean region of Ecuador, Bolivia, Peru and Colombia. The Incas considered quinoa to be sacred and they called it as *chisaya mama* or ‘MOTHER of all GRAINS’.

The Incan emperor would traditionally sow the first seeds of the season using “golden implements.”

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From the desk of JACQUI BISHOP



What's new?

Sharp Again Naturally was originally formed to transform the fear and resignation that normally follows a diagnosis of Alzheimer's and other forms of dementia into hope and determination. This issue contains the fascinating story of a very late-stage dementia patient who is recovering, even as I write. His case is part of the mounting evidence supporting the belief that it is never too late to attempt to disarm dementia.

In addition to that story, we have four big firsts to celebrate with you this quarter:

The IRS says we're the real deal!

As of March 26, the IRS approved Sharp Again Naturally's official tax-exempt status as a 501(c)(3) public charity. That means when anyone chooses to donate money to us, they get to take it off their tax returns. So if you contribute to Sharp Again, not only do you have the pleasure of knowing your money is helping to educate the public about natural approaches to reversing dementia, the government says “Thank You” by giving you a tax break.

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(catalyze) an otherwise-slow reaction that transforms nutrients into such finished products as neurotransmitters, myelin sheaths, etc.

Defects in these finished products can seriously impair cognitive functioning. Co-catalysts or co-factors, such as a B vitamin and/or a mineral, are often required to make the enzymes work. Without these co-factors, the brain's reactions can stall like a car engine with faulty spark plugs.

Given the magnitude and complexity of all that, it has always seemed to me only common sense to check out the functioning of the body before assuming anything psychopathological is going on. And my "common sense" turned out to be correct: Supplements of missing nutrients often produced massive improvements in my patients' mental and emotional functioning. So I kept doing it.

That's where I was in March 2012 when a former colleague of mine asked me if I would be willing to treat her husband—my old friend, Dr. T. Dr. T was in desperate shape. In 2007, at the age of 73, he had been a

practicing psychiatrist running a private clinic, authoring articles on regulation of monoamine neurotransmitters, tangoing with his wife, and enjoying his children and grandchildren.

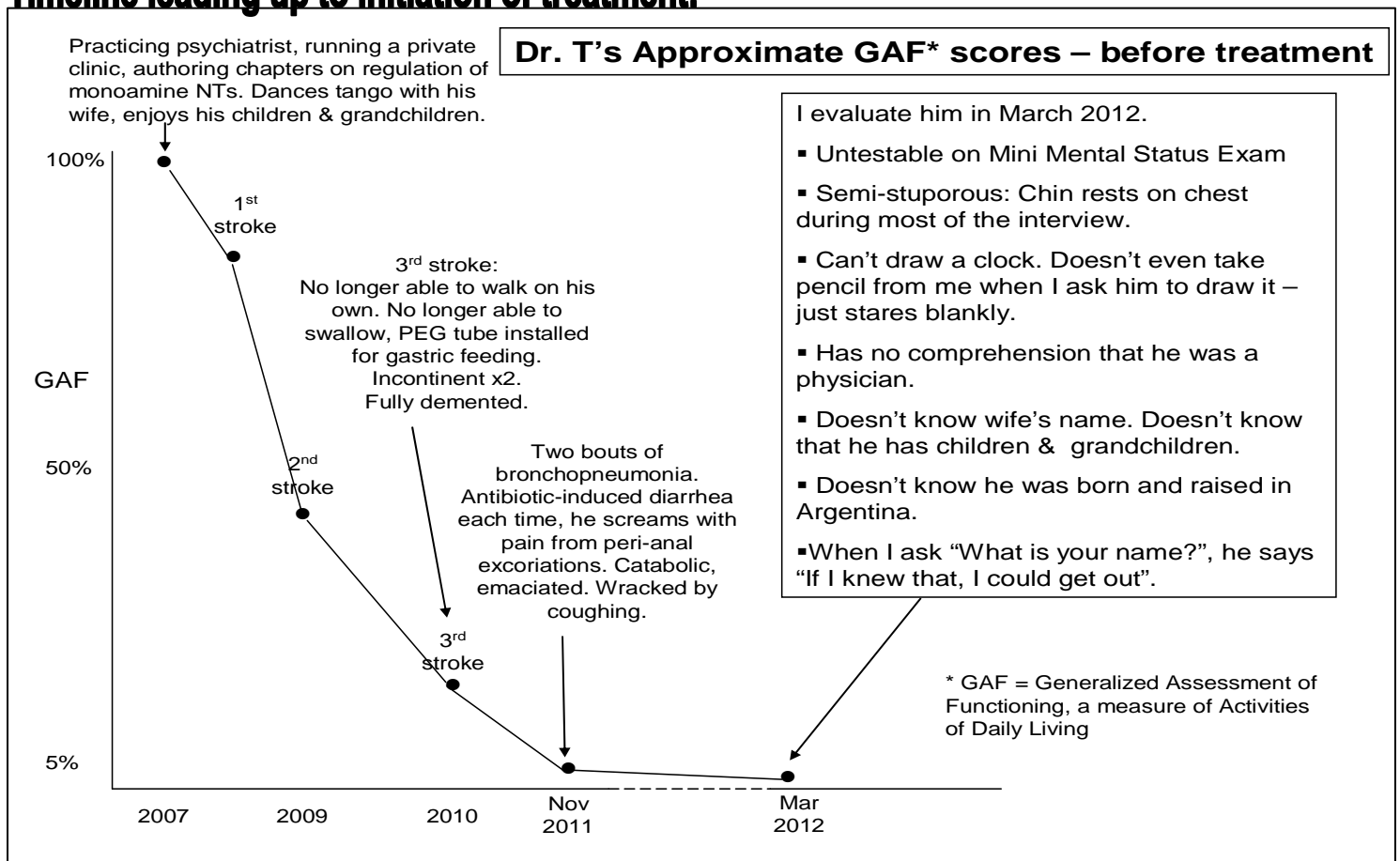
Now, just 5 years later, after 3 strokes and two bouts of bronchopneumonia, he was in end-stage dementia and miserable.

His scores of the GAF (Generalized Assessment of Functioning, a measure of a person's ability to perform Activities of Daily Living) had fallen below 5 percent. He was un-testable in the Mini Mental Status Exam, knew no one in his family, couldn't remember his birth country or that he was a doctor, and was wracked by coughing and excruciating peri-anal excoriations brought on by antibiotic-induced diarrhea. Hospice workers had recommended his tube feedings be stopped (in other words, "let him go").

But there were flashes of awareness. When I asked him what his name was, he replied, "If I knew that, I could get out." I said to Mrs. T, "I sense there's someone in there, and if we can connect the drive train to the motor, I think we can get somewhere."

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Timeline leading up to initiation of treatment:



I then began a phased treatment process that, for a number of reasons, began with coconut oil. There is mounting evidence that, in various types of dementia, some regions of the brain don't respond properly to insulin. When, as a result, the neurons fail to absorb glucose, their primary fuel, they starve and die and the brain shrinks.

Fortunately, a neuron is a hybrid engine in that it can use an alternate fuel—ketone bodies. Ketone bodies are produced by our liver when we eat certain types of fats and oils such as coconut oil, and these ketone bodies then nourish the damaged but still living neurons and restore them towards normal metabolic functioning.

Coconut oil is a relatively safe substance and many, many people have used it to good effect. Even so, there are some important caveats to keep in mind when using coconut oil:

There can be side effects (e.g. diarrhea, gassiness, significant distaste, even nausea). Sometimes one

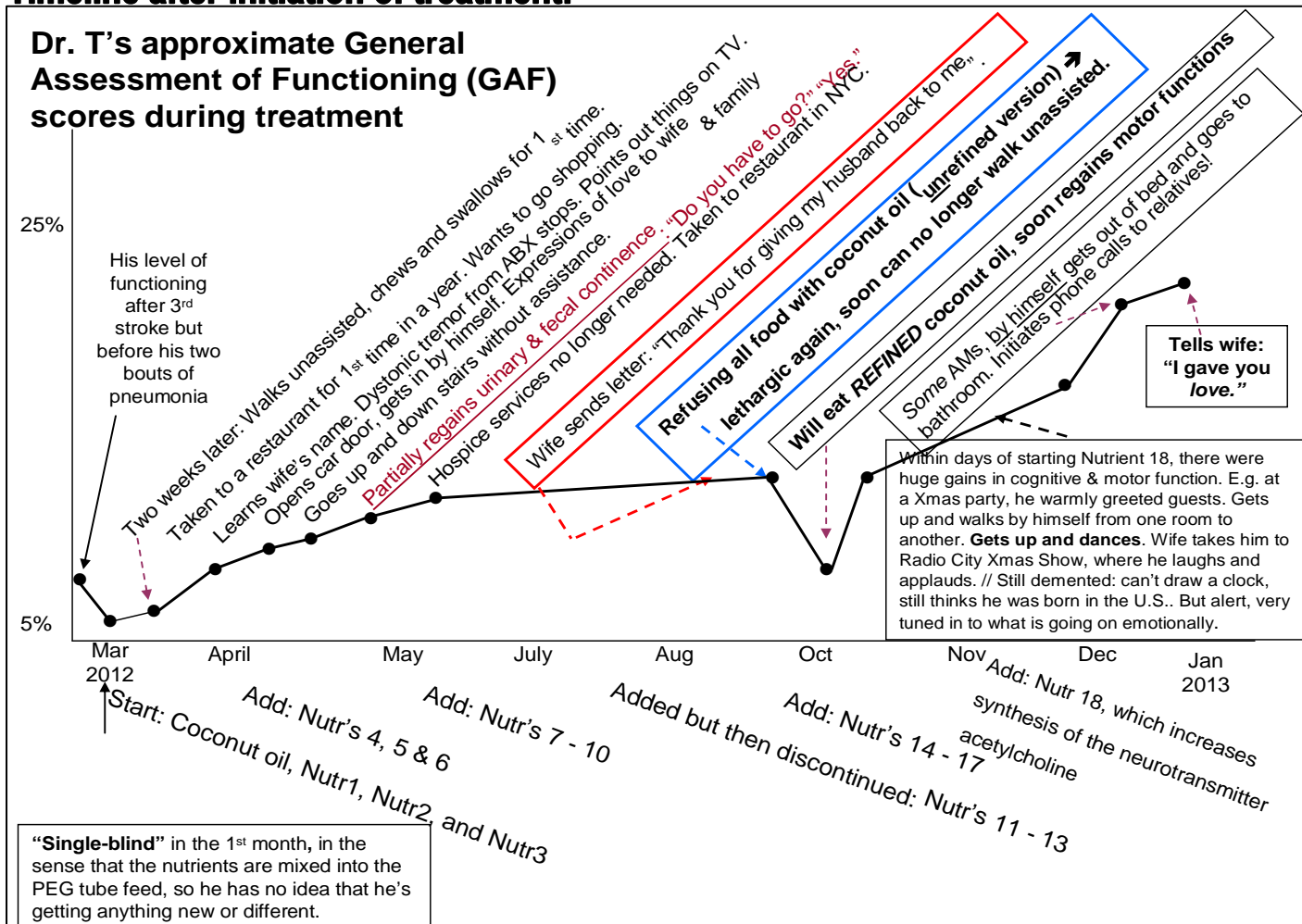
can back off and increase quantities at a much slower rate. Sometimes one can switch to a highly refined version that doesn't have the coconut taste. If that doesn't work, it can be discontinued without creating lasting problems.

Improvements in patient functioning can occur more quickly than caregivers expect. It's important to take preparatory steps to head off the problems patients can get into when they come rapidly out of a vegetative state. For example: Consider baby-proofing the house, including the entryway! In Dr. T's case, this meant locking the door to the basement when overnight he went from wheelchair-bound to wandering all over the house.

Increase the amount of exertion *slowly* to allow the body to adjust gradually to restored mobility. You don't want the patient going into cardiac decompensation, which is what happened to a Parkinson's patient I was treating with coconut oil. Instead of staying in her wheelchair all day long, she asked her aides to take her outdoors in NYC, and she

Timeline after initiation of treatment:

Cont. on page 5





Now science has shown the Incas were onto something: this ancient seed is actually a superfood! Quinoa is full of phytonutrients, antioxidants, high-quality protein and fiber, *and* can even help balance your blood sugar, a crucially important aim for dealing with dementia. You may or may not have heard of Diabetes III; it's the term applied to brain cells that have lost their ability to consume glucose and are therefore dying.

Reducing the amount of refined or "white" carbs (wheat, rice, and corn) and replacing them with foods that both satisfy the mouth *and* support pancreatic and cellular health is imperative for avoiding Diabetes III. Quinoa is an excellent replacement for these hard-to-digest grains, because it can be prepared to be light, fluffy, slightly crunchy, and always easy to assimilate.

WHAT IS QUINOA? A GLUTEN FREE CHOICE

Although it cooks and tastes like a grain, quinoa is actually a seed related to the beet and spinach family (grains like wheat, rye and barley come from grasses). When cooked, quinoa is subtly flavored, making it an excellent replacement for grains that are difficult to digest or that feed the systemic fungal infection known as Candida.

Although quinoa is delicious, its flavor is only part of why it is such an amazing "supergrain." Quinoa is close to one of the most complete foods in nature because it contains amino acids, enzymes, vitamins and minerals, fiber, antioxidants, and phytonutrients. In particular, it supplies:

✦ **Complete protein.** Quinoa contains all 9 essential amino acids that are required by the body as building blocks for muscles.

✦ **Magnesium.** A high magnesium level helps relax your muscles and blood vessels and lowers blood pressure.

✦ **Fiber.** Quinoa is a wonderful way to ensure that you consume valuable fiber that eases elimination and tones your colon.

More minerals than any other grain. Quinoa also contains more calcium, phosphorus, magnesium, potassium, iron, and zinc than wheat, barley, or corn.

Quinoa, in its unprocessed form, has been associated with the prevention and treatment of arteriosclerosis, breast cancer, diabetes, and insulin resistance.



See our recipe for Quinoa Taboule on the back cover and visit our website for more info and healthy recipes.

SharpAgain *Naturally*

Making Alzheimer's Only a Memory

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insisted on walking a lot. She so over-exerted that she wound up in the hospital in congestive heart failure.

In addition to coconut oil, I used other nutrients, nutraceuticals, and herbs, including B vitamins, amino acids, minerals, and herbal extracts standardized to specific percentages of the main active ingredients.

Let me pause here a moment to comment on a question I've wrestled with: "Do I name the nutrients and quantities I used for Dr. T or not? What are the risks?" If I name them, I run the risk of people getting into trouble by following a strategy designed for someone else and based on a sophisticated understanding of the interactions and risks. If I withhold the names of the nutrients, I risk having my readers think I'm arbitrarily withholding secrets (perhaps for financial reasons) that might save the life of someone they care about.

I consider this article valuable and radical even without the names of the specific nutrients, because it demonstrates that *it's possible to completely turn around even extreme debility in a patient who has dementia, and to do so using a treatment strategy heavily weighted toward the nutritional*, perhaps using only few medications aimed at specific results.

Because *I would not want a bad experience based on incomplete understanding to take anything away from that value*, I chose the conservative route and have withheld most of the specifics from the printed article.

Let me explain more about why I made that choice.

The process I went through in treating Dr. T is one that I know well, that uses primarily nutrients and nutraceuticals (many of which are readily available in health food stores), and that with proper instruction can be administered at home. But someone can get into serious trouble using these nutrients on a profoundly impaired person—especially in combination with psychiatric drugs—without understanding how they interact and what that might look like.

My purpose in withholding nutritional specifics is to support you in getting the best treatment you can for yourself or a loved one. If you choose to follow a supplement-based strategy, then please find qualified clinicians to guide you who have been trained to understand how supplements interact with one another and, especially, when they should be stopped. (It's amazing how many people will simply keep taking a vitamin despite uncomfortable side effects that often signal the need to revise the protocol.)

To find such a health care professional, start by contacting www.aaim.com (the American Association of

To give the reader a sense of the dangers of the side effects: Of the 20 or so nutrients (single agents, or combinations of agents) that I have prescribed for Dr. T, I discontinued five because of side effects. These side effects included rashes from one nutrient; drops in blood pressure with fainting that may have been due to a second nutrient. Just today, as I was writing this article, I learned from Mrs. T that Dr. T has been experiencing dangerously high blood pressure readings (systolic pressures of over 200 and diastolic pressures exceeding 110). The high readings started 10 days ago when I put him on a new combination product intended to improve his ability to handle the insomnia he gets whenever his wife is away from home for more than a day or two. I told her to discontinue this product immediately.

Integrative Medicine) and check the Directory section of the website. If you have them call me, I will gladly share the list of nutrients and quantities with them. I can be reached for more information and consultation at (917) 697-4233.

Dr. T is still improving today. Compared with what his GAF scores would have been before his strokes (100%), they are at about 25%, up from only about 5% just prior to initiating treatment. He is still considered demented, given he can't yet draw a clock or remember that he was born in Argentina. But he is alert and registering subtle gains most days. And there are high points: For example, around Christmas time, he warmly greeted guests, walked around the house, and even got up and danced.

Later, when his wife's birthday came around, the aide teased him by twice asking, "What did you get your wife for her birthday?" When the aide left the room, Mrs. T said to him "Don't worry if you didn't get me something for my birthday, you've given me lots of things over the years." He thought about it, and then asked, "I gave you love?" Her heart melted and she said "Yes".

Dr. T's case is not a fluke. In Part II of this article, appearing in next Issue of this newsletter, you will read about Mr. F, who experienced a very similar turnaround using the same basic strategies.

For more information:

www.RichardCarltonMD.com/contact

(917) 697-4233



We gratefully received a donation of \$5,000 from a private family trust. These funds, the first to flow from outside our founding circle, will help us in completing the documentary film of people who have reversed their dementia and reclaimed their lives,.

Twelve Westchester libraries have invited Sharp Again Naturally to present programs. The Harrison Public Library led off in March; they have already called us for a follow-up event in the fall.

Our Medical Advisory Board has acquired its 1st member, Dr. Richard Carlton, M.D. a psychiatrist long known for combining nutritional and psychiatric strategies.

Dr. Carlton begins his collaboration with Sharp Again by contributing this issue's lead article, "Back From Oblivion, Part I" which describes his success in treating a patient with advanced dementia.

In the article, he describes his search for the nutrients his patient's brain needed, and, working independ-

ently, he discovered the power of coconut oil to nourish the brain when the glucose receptor mechanisms fail.

Remarkably, it was only later that he came across the information we brought you in the Winter issue about Dr. Mary Newport using coconut oil to bring her husband back from late-stage dementia.

The full article, which will appear in two parts in this issue and the next, is written for the lay public. In addition, Dr. Carlton has put together a much more technical report for clinicians (aspiring and experienced), and that will be found on our website.

This issue also presents an article: "Quinoa: Mother of All Grains," which includes some delicious and nutritious recipes.

As always, we are grateful to you who have encouraged and contributed to the work we are doing. Thank you.

Make a beautiful memory today!


Jacqui Bishop
Sharp Again President

QUINOA TABOULI

1 cup quinoa (can use any combination of white, black and red quinoa)
2 cups water (or any/all vegetable or chicken broth)
¼ c. chopped scallion
2-3 TB chopped carrots
4-6 oz. sautéed mushrooms
2-3 TB pine nuts or slivered almonds
1 TB parsley, finely chopped

Cook the quinoa, according to directions. Allow to cool.
When cooled, add chopped scallion, chopped carrot, sautéed mushrooms, pine nuts and parsley.*

Dress with lemon, olive oil, salt and pepper to taste.
Serve at room temperature.

* Feel free to substitute other vegetables and herbs.

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7 Reversible Causes of Dementia to Test for

Based on our research, we recommend testing for *all* these. Reversing those that test positive can make a huge difference.

1. Mercury, lead, and heavy metal toxins
2. Low T3, even when thyroid tests are normal
3. Nutritional imbalances-vitamin and mineral deficiencies and excess sugars and/or the wrong fats in the diet
4. Neurological side effects from prescription medications
5. Toxins in our food, water, air, and work/home environment
6. Inflammation from low-level infections, food allergies, etc.
7. Stress and related factors

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