

Monday June 15, 2009

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Teen Diagnoses Her Own Disease In Science Class

By Glenn King, PhD, R.D., C.N.

Jessica Terry, age 18, went to doctors for 8 years while suffering severely from stomach pain that would literally bring to her knees. The repeating horrible pain was accompanied by diarrhea, vomiting and fever that made her so ill she lost weight and missed a lot of school. Her physicians, collectively with the expertise of modern medicine, could not figure out the cause of Jessica's digestive disorder or offer any understanding whatsoever.

Then one day in school, Jessica figured it out on her own.

In Jessica's Advanced Placement high school science class, she looked under the microscope at her own pathology slides of intestinal tissue, which pathologists had said were completely normal. She identified an area of inflamed tissue called a granuloma. This was a distinct indication, according to medical science, that she had Crohn's disease.

Jessica told a CNN affiliate in Seattle "It's weird I had to solve my own medical problem. There were just no answers anywhere as to why I was always sick."

She graduated this month (June 2009) from Eastside Catholic School in Sammamish, Washington, and is being treated for Crohn's disease.

She was very excited about finding the granuloma. She told her

science teacher, Ms.Welch, "Come over here. I think I've got something!" Ms. Welch immediately searched on the Internet to confirm whether she had truly found a granuloma.

Ms. Welch snapped a picture of it on the microscope and e-mailed it to the pathologist. Within 24 hours, he sent back an e-mail saying "yes, it is a granuloma." Jessica was relieved to finally get a diagnosis, but she was also stunned to find that she has such a serious disease.

Physicians offer treatment, but definitively state "there is no cure for Crohn's." Crohn's disease is a condition in which the digestive tract becomes inflamed. It can lead to ulcers, malnutrition and other health problems.

One of the most common causes of Crohn's is another serious disorder named Celiac disease or an intolerance to gluten (Gluten is Latin for "glue," a complex protein chain found in wheat, barley and rye. The powder-like substance is currently used in many products not commonly thought to contain any flour product).

"As I get older, the disease can get worse," Jessica said to CNN.

Crohn's disease is often misdiagnosed or diagnosed very late, says Dr. Corey Siegel, director of the



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Inflammatory Bowel Disease Center at Dartmouth-Hitchcock Medical Center in Lebanon, New Hampshire.

"Granulomas are oftentimes very hard to find and not always even present at all," Siegel said. "I commend Jessica for her meticulous work."

It is not uncommon for pathologists to also miss important findings for other diseases, says Dr. Mark Graber, chief of the medical service at the Northport VA Medical Center in New York.

This story reveals a valuable lesson about how common errors are made. It also reveals the ability of a lay person to find the errors and self diagnose with "fresh eyes," just like in Jessica's case. A few specialty centers, recognizing the reality of perceptual error and the power of a second independent reading, are now requiring second reviews on certain types of smears and pathology specimens.

Welch credits Jessica's "fresh eyes," but also local pathologists who volunteered to train her and her classmates on how to view specimens under the microscope. "We've been lucky to have that partnership. It allowed Jessica to think of herself as a scientist," Welch says. "The class empowered Jessica to think of herself as being a partner in her own health care." This is a truly important perspective for everyone for proper health care.

Jessica starts nursing school in the fall and has written a book for children about Crohn's disease... hoping it will be published.

"This has been the highlight of my high school career, for sure. It's been amazing," says Jessica.

This is a lesson for everyone. Ω



Photo courtesy of Fotolia

Soft drinks causing soft muscles!

The case studies can be found in the International Journal of Clinical Practice (June issue).

Too Much Cola Can Cause Hypokalemia

By Glenn King, PhD, R.D., C.N.

A Greek medical study released in May 2009 included a warning that drinking too much cola can increase the risk of a muscle disorder called hypokalemia.

The Greek researchers conducted a review of people who drank between two to nine liters of cola a day and found significant changes in potassium levels, or hypokalemia. Hypokalemia involves low blood potassium levels which results in problems for vital muscle functions. Symptoms range from mild weakness to serious paralysis.

Two study patients were pregnant women who ended up in the hospital with low potassium levels. One woman, age 21, drank up to three liters of cola per day complained of fatigue, appetite loss and persistent vomiting. An electrocardiogram revealed a heart blockage, and blood tests showed low potassium levels, says researchers.

The second pregnant woman consumed up to seven liters of cola per day for nearly 10 months. She also had low potassium levels and was suffering from increasing muscular weakness.

Both patients recovered after stopping the consumption of cola drinks and received oral or intravenous potassium to stabilize this essential mineral.

People are consuming more soft drinks (SD) than ever before, and a number of health issues have already been identified including tooth problems, bone demineralization and the development of metabolic syndrome and diabetes (formerly known as sugar diabetes), and many other health issues including a decrease in brain functions. There is increasing evidence that excessive SD consumption leads to hypokalemia, says Dr. Moses Elisaf, of the University of Ioannina.

Elisaf says "the three most common ingredients in SD - glucose, fructose and caffeine - contribute to hypokalemia."

"The individual role of each of these ingredients in the pathophysiology of SD induced hypokalemia has not been determined and may vary in different patients," says Elisaf. "However, in most of the cases we looked at for our review, 'caffeine intoxication' was thought to play the most important role. This has been borne out by case studies that focus on other products that contain high levels of caffeine but no glucose or fructose."

However, "caffeine-free SD products can also cause hypokalemia because the fructose they contain can cause diarrhea and other complications," says Elisaf.

Hypokalemia alternative names are: Potassium - low; Low blood potassium.

Definition: Hypokalemia is a lower-than-normal amount of potassium in the blood. It may result from a number of conditions.

Potassium is needed for cells, especially nerve and muscle cells, to function properly. You mainly get potassium through food. The kidneys remove excess potassium in the urine to keep a proper balance of the mineral in the body.

Hypokalemia is a metabolic disorder that occurs when the level of potassium in the blood drops too low.

Possible causes of hypokalemia include:

- * Certain antibiotics (carbenicillin, gentamicin, amphotericin B...)
- * Certain drugs, called diuretics, that can cause excess urination
- * Diarrhea (including the use of too many laxatives, which can cause diarrhea)
- * Diseases that affect the kidney's ability to retain potassium (for example, Liddle syndrome, Cushing syndrome, hyperaldosteronism, Bartter syndrome, Fanconi syndrome)
- * Eating disorders (such as bulimia, Crohn's and Celiac disease)
- * Eating large amounts of licorice or using products such as herbal teas and chewing tobaccos containing licorice made with glycyrrhetinic acid (this substance is no longer used in licorice made in the United States)
 - * Excessive sweating
 - * Excessive vomiting
 - * Kidney problems
- * Lack of enough potassium in diet (rarely)

Symptoms: A small drop in potassium usually doesn't cause noticeable symptoms. However, a big drop in the level can be life threatening.

Symptoms of hypokalemia include:

- * Abnormal heart rhythms (dysrhythmias), especially in people with heart disease
- * Breakdown of muscle fibers (rhabdomyolysis)
 - * Constipation
 - * Fatigue
 - * Muscle weakness or spasms
- * Paralysis (which can include the lungs)

Examinations and Tests: Your health care provider will take a sample of your blood to check potassium levels.

Other tests might include:

- * Arterial blood gas
- * BUN and creatinine
- * Electrocardiogram
- *Glucose, magnesium, calcium, phosphorous, thyroxine, or aldosterone.

Treatment: Mild hypokalemia can be treated by taking appropriate potassium supplements by mouth. Persons with more severe cases may need to get potassium through a vein (intravenously).

If your doctor places you on diuretics, ask your doctor to switch you to a form that keeps potassium in the body (such as triamterene, amiloride, or spironolactone).

One type of hypokalemia that causes paralysis occurs when there is too much thyroid hormone in the blood (thyrotoxic periodic paralysis). Treatment lowers the thyroid hormone level, and raises the potassium level in the blood.

Outlook (**Prognosis**): Taking potassium supplements can usually correct the problem. Without proper treatment, potassium levels in severe cases can drop low enough to cause death.

Possible Complications: In severe cases, patients can develop paralysis that can be life threatening. Hypokalemia also can lead to dangerous irregular heartbeat. Over time, lack of potassium can lead to kidney damage (hypokalemic nephropathy).

Contact a Medical or Health Professional When: Call your health care provider if you have been vomiting or have had excessive diarrhea, or if you are taking diuretics and have symptoms of hypokalemia.

Prevention: Do not drink sodas (if you do, only small amounts occasionally). Eating a diet rich in potassium can help prevent hypokalemia. Healthy Foods high in potassium include:

The table below lists foods high in potassium shown with greatest first. All foods are per 100 grams (3.5oz) for comparison purposes and because its difficult to estimate an average serving for each potassium rich food.

Potassium rich foods

Soya flour	1650mg
Black treacle	1500mg
Apricots ready-to-eat	1380mg
Bran Wheat	1160mg
Tomato Puree	1150mg
Sultanas	1050mg
Raisins	1020mg
Potato chips (crisps UK)	1000mg
All Bran	1000mg
Wheatgerm	950mg
Granola	900mg
Figs	900mg
Dried mixed fruit	880mg
Tomatoes	800mg
Bombay Mix	790mg
Papadums	750mg
Currants	720mg
Sultana Bran	660mg
Seeds average	650mg
Nuts average (unsalted)) 600mg
Baked Potato + skin	600mg
Roast Potato	550mg
Oven chips	530mg
Bran Flakes	530mg
Gammon lean	520mg
Soya beans boiled	510mg
Plantain boiled	500mg
Raisin Splitz	500mg
Crispbread	500mg
Muesli low salt	450mg
Sardines	430mg
Pilchards	420mg
Veal	420mg
Wholemeal Pasta	400mg
Kiwi	400mg
Banana	400mg
Brussels sprouts	400mg
Oranges	380mg
Peas and beans	360mg
Lima beans	300mg
Peaches	220mg □

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Glenn T. King, PhD, RD, CN and James O. Robertson, ND

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Note: If able, PLEASE bring a massage table(s), two 100 percent cotton sheets (not flannel) and a pillow.

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Web site: www.kinginstitute.org (Links below are also located on our web site) Ministry Pamphlet: www.kinginstitute.org/TKM%20Ministry%20Pamphlet.pdf

Color Conference Flyer: www.kinginstitute.org/WonderfullyMade.pdf

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