



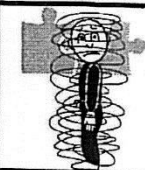
### HEALTH ZONE

A body free of toxins promotes optimal health and well being.

## DETOXIFICATION

### TOXICITY ZONE

Toxic Soup: Drugs, Chemicals, Metals, Environment, Wastes = Degenerating Health



## Dr. Brown's Heavy Metal Detox Protocol

From a clinical perspective, heavy metal detoxification has been a difficult subject to tackle. First it has been difficult to detect that heavy metals are the source of one's health problems. This is due in part to our previous inability to have a specific test protocol that isolates heavy metals reacting in the body. This has been solved with the advent of Autonomic Response Testing protocols that monitor the nervous system reaction to toxic substances. My adaptation of Dr. Kinghardt's workshop protocol to isolate heavy metal reactions through the use of DMPS and heavy metal samples has made this process simple and effective.

Once detected, the second problem has been to effectively remove the heavy metals from tissue sites in the body without making the patient much sicker from the release of the metals. Mercury for instance is more volatile or reactive with the tissues in the form of methyl mercury than in bound mercury form. Some practitioners thus advocate leaving it alone.



I would partially agree with this opinion. However, when we test people and their autonomic response testing indicates that they are reactive to DMPS and mercury, we also find mercury in tissue sites such as: major organs, endocrine system, autonomic nerves (parasympathetic and sympathetic ganglia), brain centers, and



central areas of long bones (marrow). These are generally the areas where the patient is having chronic pain or degeneration (i.e. bone degeneration). Therefore it is not prudent to just bury our heads and pretend the problem will go away or remain dormant. On the contrary, clinical research from various sources and locations around the world is indicating that mercury and lead are associated with chronic pain and degenerative disease including heart disease and cancer.

Also associated with heavy metal toxicity are bacterial, viral, and parasite infections, as well as localized circulatory and immune system compromise. Heavy metals block proper assimilation and utilization of other beneficial minerals and nutrients. In other words, heavy metals are at the source of many of our degenerative health threatening processes, and are not something that one can ignore in the quest to reverse the effects of aging thus restoring health.



Until recently removal has relied on oral or intravenous use of compounds such as DMPS or DMSA along with vitamin C or other chelating agents. The problem has been that these methods are incomplete at either binding or removing the metals from their compartmentalized tissue sites in the body. In reviewing the literature and testing patients with various protocols using autonomic response testing for verification of effectiveness, we have come up with the following protocol that seems to be both cost and treatment effective for the majority of patients we see. This protocol addresses each of the detoxification steps or compartments of the body as the metals are being displaced and removed.

The analogy we teach patients is that of toxic garbage removal from a house:

1. The first step is to get the toxin out of the fabric or type of tissue it is imbedded into (i.e. the carpet). This involves a solvent or stain remover to make the toxin more soluble.
2. Next the toxin needs to be sucked up and bagged as with an appropriate device (i.e. vacuum cleaner).
3. The bag then needs to be



removed and placed in the garbage can.



4. Finally the garbage needs to be taken from the yard and placed curbside at the appropriate time in the appropriate container so that it can be hauled to the dumpsite (eliminated from local area).

### Heavy Metal Detox Protocol

*(Weakness response when tested with autonomic response testing to DMPS or DMPS-specific heavy metals)*

#### Step 1 - Always needed

The use of an appropriate binder to contain the metal at the garbage can site (liver and bowel). We use Seroyal AMD or Metagenics ToxiCleanse for this function (2 to 6 per a day individual doses).

#### Step 2 - Always needed

Use of a metal solvent to release the metal from the tissue binding sites

We have found Vibrant Health's heavy metals homeopathic product to work consistently for this step (10 drops 2 times a day is the usual dose).

#### Step 3 - Always needed

The use of appropriate drainage remedies to move the metals from tissues or organ drainage sites. Generally we use the Unda number drainage remedies, which are a mixture of herbal and minerals to target specific tissues or organs. They work deeply and effectively and have proven themselves over a long period of time. We test for effective remedies or apply based on symptoms of tissue organ overload. For example:

*Autonomic Nervous System - Unda #9*

*Thyroid (Neck region) - Unda # 16, #273 (deeper), or #10*

*Liver- Unda #243, #20 (upper digestive system)*

*Kidney- Unda #13, #7*

*Pancreas - Unda #34 or #20*

*Lungs - U #5, U #19 (deeper)*

*Joints- U #11*

*Bone Marrow- U #18*

These need to be tested and will change as the metals unload from deeper tissue sites. We almost always find the need for U #9 as well as one or two major organ sites. (i.e. kidney, thyroid, or upper digestive areas). Dosage is 3-5 drops 2 to 3 times daily.

#### Step 4 - Use of a deep tissue solvent to move the metals from the deepest levels.

This step usually shows as being tolerated after 3 - weeks of using the first three steps. Otherwise the system will overload with detoxification occurring too quickly and the body unable to bind and remove the metals.

At this level we use Unda Gammadyn - MnCo (one ampoule once daily).

This is added to the above regime with whatever else is tested as necessary and effective.

#### Notes:

(a) Symptoms of detoxification overload are flu-like aching and symptoms in affected tissues.

(b) Heavy metal toxicity is often accompanied by viral or parasite loading. We test for and are on the lookout for these patterns and often need to treat them at the same time. This is especially important in the early phase of treatment. Removal of the metals will expose the underlying infection which will then need to be treated appropriately.

(c) Once a patient's A.R.T. is strong against DMPS and specific heavy metals samples, we add local anesthetic to the test in order to stimulate further reactions from the cell/nerve membranes. Local anesthetic opens cell membranes to better access intracellular-information.

**Step 5 -** Some patients have residual deposits at brain ganglia or deep tissue sites. For these patients or patients with difficult symptoms or significant brain loading or autonomic ganglia, we use a product called NDF, a nanocolloidal detoxification formula which can dramatically assist the body in binding and removing the burden of metals. As this is a more expensive product, we usually test its need and amount and limit its use in our protocol.



Additionally we may recommend the use of micro

currents or acupuncture treatment and structural realignment to assist in optimizing blood flow and circulation through specific areas of the body. This will assist in drainage and detoxification.

Generally treatment follows a course of 2-3 weeks per body compartment with four compartments being needed to clear. The four compartments we see are:

**1st:** General detoxification pathways and nerve ganglia

**2nd:** Major compromised organs e.g. thyroid, lung, kidneys, joints

**3rd:** Nervous system e.g. brain tissues and specific ganglia

**4th:** Bone marrow of long bones

*Note:* This protocol works for the majority of patients we see in our clinic. In extremely toxic patients it may be necessary to utilize this protocol plus chelation or DMSA protocols. Clinically, about 60% of patients seen test positive for heavy metal reactivity using this test protocol.

