

Treating the Milieu and Cleansing the Intestines

A Plan for the Treatment of Chronic Diseases

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As therapists, we not infrequently find ourselves faced with the problem of how to treat chronic diseases, which make their presence felt in a multitude of pathological manifestations. They may even disguise themselves and are then resistant to treatment with natural therapies.

Over the years, I have realized the strategic importance of taking the intestines and the body's internal milieu into account in treatment. This should not be under-estimated.

Functions of the Intestines

The intestinal tract is an organ with complex functions.

In the small intestine, the digestion of chyme and the absorption of nutrients, minerals and and vitamins take place. In order to manage this absorption, the surface area of the mucosa is considerably enlarged by means of folds, villi and microvilli. The villi of the small intestine are finger-shaped protuberances, projecting into the lumen, and about 1 mm in height and 0.1 mm thick. Each villus comprises a frame of connective tissue, linked to the arterial and venous blood-supply, a network of capillaries and, finally, a central lymphatic vessel. Towards the end of the small intestine, this enlargement of the surface gradually decreases, since the uptake of nutrients becomes less and increasingly only water is absorbed.

However, the small intestine is also an important immune organ, constituting the first defence barrier in our body through the interaction of intestinal bacteria and lymphocytes. Within the intestinal mucosa of the terminal ileum and in the vermiform appendix of the cæcum we find numerous lymph follicles, either in isolation or in groups. Together with the diffusely distributed lymphocytes, which constitute an intestinally-associated lymphatic system, these are known as Peyer's patches.

Thus, in addition to its digestive functions, the intestine plays a central role in our immune defence. Here, we find almost 70-80% of all the cells that produce antibodies, secreting the important Immunoglobulin A (IgA). Secretory IgA is a substantial component of humoral defence and makes up what we might call the immunological mucosal barrier in the gut. In this complex fashion the body is protected by the gut from assimilating harmful agents.

As well as this, the intestine is a metabolic organ, its function being of particular importance for the acid-alkaline balance. It is the main arena, as it were, so far as the formation of inorganic acids is concerned. Inevitably, the intestinal flora suffers from any over-acidity of the gut's contents; as a result that acids cross into the blood, leading necessarily to an accumulation of excess acids in the tissues.

The colon's primary functions are the absorption of water and salts, as well as elimination. It contains indigestible remains of food, which are broken down by bacteria in processes of fermentation and putrefaction. The mucosa of the large intestine has a substantially smaller surface area than that of the small intestine. It lacks villi, and the surface

is augmented exclusively by deep depressions (crypts). Here too, the mucosa contains numerous lymphatic follicles.

The intestinal functions described above - an organ of absorption and secretion - must always be seen in the context of its bacterial "carpet". The resident intestinal symbionts represent a complex ecological balance consisting of a mixture of ærobic and anærobic flora and individual groups of fungi. The procentual composition of the germs is influenced by disorders, resulting automatically in undesired changes within the microbial population and the local milieu.

Thus, there are several provisions for the protection of the surface of the intestinal mucosa:

- Intestinal barrier (Intestinal wall with its lymphatic system)
- Secretory IgA
- Bacterial ,,carpet"

In this, the bacterial ,,carpet" and the mucosa form one unit. This means that, if the mucosa enteralis is damaged, then the bacterial flora suffers, and vice-versa.

The Intestine as a potential Interference Field

If we stop to consider that a human being acts as host to more bacteria than there are cells in his/her body, then we can comprehend how great is the importance of the intestinal bacteria and milieu for the organism as a whole. It is as if they constituted an important "internal organ". The bacteria that colonise the lower ileum and the whole of the colon and rectum consist of over 400 different bacterial varieties. Over



90% of these are strictly anærobic strains (e.g. bifidobacteria), the remainder are ærobic ones (e.g. E. coli, enterococci).

The bacteria of the intestinal flora have an important metabolic function, since they can split substances which arise e.g. during the breakdown of protein (ammonia). This clearly takes some of the pressure off the liver in its detoxifying function.

The following factors may damage the intestinal flora or reduce their numbers:

antibiotics, antacids, laxatives, nicotine, preservatives in food, dietary errors (too few vegetables, too much meat, a lot of sweet things, fast food), and food intolerances.

As a general rule, sooner or later, intestinal dysbiosis results in damage to the intestinal organ. The mucosa becomes gradually more porous and more penetrable by harmful substances. The villi atrophy, as they can no longer regenerate to their normal height as a result of the permanent destruction. A consequence of this is a diminished production of secretory IgA and the demise of the Peyer's patches. This state of affairs is known as "leaky gut syndrome". Overall both the detoxificatory and the digestive performance of the intestine are compromised, and so the road to chronic disease is wide open.

When the intestine is functionally disordered, the weak organs react in its stead. A weak organ is always that part of the body which is least

tolerant of stresses and strains of whatever kind and therefore produces a pathological reaction (in response to a stimulus). We frequently come across these "weakest links" in a pathologically altered state: lymphatic organs (e.g. hypertrophied tonsils), teeth (malposition, mouth-breathing), respiratory tract (rhinitis, bronchitis), skin (eczema), back/joints (lumbago, arthritis, ankylosing spondylitis), nervous system (ADHD, migraine), to mention only a few.

Every person has his or her own weak spots, according to their predispositions. However, the unhealthy gut is at the root of it all, and this is analagous to Reckeweg's displacement of symptoms. On account of this vicariation, whilst the nutritional function of the intestinal "shock organ" remains intact, its immunological competence is lost. The weak organs mentioned above are frequently responsible for the chronicity of an illness.

The Influences of the Milieu

The so-called internal milieu plays an important part in the origin of chronic and allergic illnesses. Briefly, the milieu is the space in which a reaction runs its course (Werthmann), it is the environment in which life comes into being and continues to develop. It is shaped by various factors and influences, both from within and from outside. In many situations the milieu of an organ is the deciding factor as to whether some physiological or pathological reaction goes ahead. Each organ has its own physiological sphere of tolerance. Thus, the stomach milieu is acidic, whereas in the small intestine alkaline conditions prevail. A woman's vaginal milieu is on the acid side, the normal pH level of a man's sperm is slightly alkaline, and so on.

For the maintenance of all vital processes, the basis of a correct milieu is provided by the blood, as the most important buffer, and by the connective tissue, with all its regulatory provisions. Our organs of elimination and defence organs (kidneys, respiratory organs, skin, digestive organs, lymphatic organs) help in maintaining a constant milieu in the various tissues.

The creation of the physiological milieu is a cornerstone of holistic biological medicine. Thus, Prof. Günther Enderlein, along with many others, saw in the milieu the alldeciding factor in the development of diseases. He showed that the blood was not sterile, but rather the playground of every possible microorganism, pathogenic or nonpathogenic, as they constantly evolve either upwardly or downwardly. Proceeding from the altered milieu of the blood, pathological changes can of course spread out into other tissues.

Enderlein's theses can generally be summed up as follows:

- Disease means disorderd symbiosis.
- Being ill is a biological problem, and only biology can solve it.
- The milieu is everything; it determines which pathological processes are able to develop in the body or in individual organs.

Let us take various bacteria as examples: depending on the kind of

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bacteria, the milieu in question permits pathogenic agents to emerge from strains which, in themselves, are innocuous. Therefore, there is no point in annihilating germs (using antibiotics, anti-fungals); what is important is to bring about a thorough change in the milieu. This is comparable to a garden, where healthy growth only occurs in healthy soil.

Humans live in intense symbiosis with their micro-organisms. This is obvious particularly in the intestinal system, but of can be applied to all the other areas of the body.

Treatment Strategy

Particularly in the case of chronic illnesses, we must bear in mind that, whereas many sick organs or organ systems may not be directly connected with the intestines, nevertheless the symptoms are remote consequences of a dysbiosis in the enteral system.

Thus the cornerstones of the treatment are:

- Adjustment of the milieu
- Intestinal cleansing
- Stimulation of the immune system

This order must be adhered to. After all, there would be little point in kick-starting the immune system with a stimulative therapy without ensuring that the intestinal equipment designed to deal with such a stimulus (Peyer's patches, the villi, the mucosa) was in a fit state to cope.

Nutrition

Right near the top of the list, as far as the intestinal cleansing is concerned, is a dietary change, aimed at reducing the acid-forming portion, which in most people is in the region of 70-80%. The alkaline part must therefore be raised to about 70%. As well as that, for the duration of the long-term treatment dairy products (from cow's milk) and food containing hen's egg must be avoided; these represent primary allergens for the intestines and damage the villi. Meat consumption is to be cut down in favour of vegetable proteins. Pig meat should be abstained from as a matter of principle. Sweets and other acidforming foods must also be avoided.

It is only on this basis that any medical treatment of the intestine has any chance of succeeding.

Building up the Flora of the Large Intestine

The recommended treatment for this purpose is the rectal use of EXMYKEHL 3X, one suppository once or twice a week. Colonic irrigation has achieved good results in practice; its main action lies not only in the rinsing out, but also in a deep but careful abdominal massage, which stimulates the parasympathetic nervous system.

Concurrently with this an effective detoxification can be achieved with OKOUBASAN 2X, 5 drops 1-3 times daily.

Regeneration of the Flora of the Small Intestine

Alkaline powders are indispensible for this purpose, but care must be taken to administer them at the right time, so as to ensure their immediate transport from the stomach to their actual scene of action - the small intestine. Therefore the alkaline

powder is best consumed in the morning on an empty stomach, preferably dissolved in warm water.

Building up the Mucosa

- Mucosa comp. ampoules (Heel), one to be insalivated once a day.
- OKOUBASAN 2X, 5 drops 1-3 times daily.
- Diet (as described above)
- Glutamine (c.2 gr. twice daily), or potato juice; both protect the gut and build it up.

Building up the Intestinal Flora

My prescription for restoring a symbiontic bacterial flora suitable for this part of the tract is as follows: for at least 4-5 weeks: FORTA-KEHL 5X drops, 1-8 drops once or twice a day, followed by PEFRAKEHL 5X drops (1-10 drops once or twice daily). Afterwards, I recommend multimicrobial probiotics, e.g. ProEmsan (by Tissot) or relatively frequently also a phased treatment using Myrrhinil-Intest and Rephalysin (by Repha).

Once again, I would like to emphasize that often just a logical dietary change constitutes a considerable step towards recovery!

Immune Stimulation

Only then do I start the stimulative treatment, as a rule using the immune modulators UTILIN, UTILIN "S", LATENSIN, RECARCIN and in some cases REBAS. This last-mentioned is a potentised remedy produced from Peyer's patches of the pig.

By means of these preparations, not only is a non-specific immune sti-



- 1. Correction of milieu throughout the whole course of treatment:
 - Dr. Werthmann's diet- ALKALA N, once or twice daily, 1 measuring spoonful to be dissolved in warm water and drunk on an empty stomach.
 - Depending on the individual situation: OKOUBASAN 2X, 5 drops or 1 tablet twice daily
 - Mineral and trace element supplementation, e.g. MAPURIT, 1 capsule once or twice daily; SELENOKEHL 4X drops, 5-10 drops in the morning; ZINKOKEHL 3X drops, 5-10 drops in the evening.
 - Mucosa comp. ampoules (Heel); 1 ampoule to be held in mouth with saliva once daily.
 - Possibly Myrrhinil-Intest, Rephalysin or ProEmsan.
- 2. Specific regulation: EXMYKEHL 3X suppositories, rectally, 1 in the evenings (possibly only 1 once or twice a week); or FORTAKEHL 5X in the morning and PEFRAKEHL 5X in the evenings, in both cases 1 tablet or 2-8 drops.
- 3. General regulation: SANKOMBI 5X, 2-8 drops twice daily Mon. Fri.; on Sat. and Sun. revert to EXMYKEHL 3X or FORTAKEHL 5X and PEFRAKEHL 5X, as in (2) above.
- 4. Immunomodulation begins along with (3) above UTILIN 6X, UTILIN ,,S" 6X, LATENSIN 6X, RECARCIN 6X in weekly sequence, 1 capsule per week; REBAS 6X caps., 1 daily.

The duration of treatment depends on the symptom picture and on progress; generally it lasts 6-8 weeks.

Basic scheme for intestinal cleansing.

mulation achieved, but the general level of readiness for reaction is raised, any congestions or blocks are cleared, and the ability of the organism for regulation is intensified. REBAS, in particular, has proved to be a very effective remedy for building up the immune system, and has been successfully put to use in many cases.

However, as already mentioned: before immune modulation the intestinal mucosa and bacterial "carpet" must be regenerated and built up, if we are to avoid initial aggravations, unwanted reactions or even a failure of the treatment, as the result of some blockage.

Orthomolecular Substances

The damage to the intestine as described above also results in the gradual loss of minerals and trace elements. Therefore, the mineral economy of the body should be taken into account, in particular

Zinc, Manganese, Magnesium and Calcium. Zinc is required as a major building block by the enzymes of the digestive and immune systems. Manganese and Magnesium are also needed for all the energetic processes in the cells. Selenium is considered to be a hunter of radicals and improves the ratio of helper and suppressor cells.

The extent to which such deficiencies must be supplemented should always be decided individually and not on a flat-rate basis. On the contrary, the use of antioxidants generally makes good sense.

Closing comment

In this contribution, I have attempted to show the relationships between a chronically sick intestine and its remote effects on various organs, so that a foundation may be laid for successful treatment.

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