A SCIENCE-BASED PROTOCOL TO SLOW OR STOP PARKINSON’S DISEASE
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All of the following interventions have been shown in peer-reviewed medical journal studies to either eliminate a Parkinson’s promoter or add a Parkinson’s inhibitor. It is important that these interventions come from studies in peer-reviewed medical journals because those journals control the validity and reliability of their content by forwarding all submissions to acknowledged experts in each particular field of science for criticism, along with recommendations for whether a study is of sufficient value for publication, is ready for publication, and what changes need to be made to improve the study. All of the studies of Parkinson’s-relevant agents and activities listed below are to be found, usually with abstracts (summaries) and sometimes with full text, on the PubMed website of the National Center for Biotechnology, which is a part of the National Library of Medicine, which is one of the institutes in our U.S. National Institutes of Health. The reference number in [brackets] will take you to the correct citations in the references section following the Protocol intervention, and each one of those citations will be followed by an internet address where the abstract of the study, or the full study, can be read.

This list of interventions was initially composed in my efforts to help an old trail-running friend from Oklahoma who came down with Parkinson’s about a year after he got discouraged and quit running because he could no longer finish the Vermont 100-Mile Run at age 75. (I urged him to continue running shorter distances but he didn’t respond to my encouragement.) I decided to see what could be done when it got difficult to understand him on the phone, and so I started assembling this list of interventions at that time, a process that is still ongoing. When I had gathered as much science as I could on promotion and inhibition of Parkinson’s I communicated the list (shorter at that time) to my friend, who, after implementing my suggestions, improved to the point where phone conversations were no longer difficult, and he experienced no progression, or minimal progression of symptoms until, in his early 90s, his wife decided that they should go into assisted living. Consequently, he lost control of his environment, food and supplements, and declined rapidly as a result of being again exposed to the agents that promote Parkinson’s disease. After a while he quit answering the phone, and I presume he died shortly thereafter. More recently, another friend with very rapidly progressing Parkinson’s adopted much of this protocol and reports that the progression has either greatly slowed or stopped. Experience has shown that following this protocol dramatically slows, stops or even partially reverses the progression of Parkinson’s disease. There is no big money to be made with any of these interventions, and therefore no entity is financially motivated to educate the public. Consequently, you probably have not heard of any of these agents and activities as having any effect on Parkinson’s disease. Simply, the public has not been informed of these scientific findings because they are too cheap. I put them together for my friend, and welcome anyone who wishes to take advantage of the work I did for him to put the brakes on their own Parkinson’s. Note that the references list is not complete. I have read the studies, but am still in the process of transcribing. Please be patient.

1. Eliminate all contact with pesticides (insecticides, fungicides and herbicides), including natural pesticides like rotenone and pyrethrins from the chrysanthemum family of plants. Studies show more Parkinson’s in agricultural workers, people drinking from wells in pesticide-intensive agricultural areas, people who use pesticides in their yards, homes and gardens, and people who live in a home that is fumigated (a 5-fold increased risk). [references 1-10, 17]

2. Take 40 IU of vitamin D daily for every pound of body weight. Get blood vitamin D (25-OH-D3) tested, and modify dosage as necessary to keep 25-OH-D3 between 40 & 60 nanograms/milliliter. Additionally, get non-burning full body sun exposure twice a week, or go to a tanning salon twice a week and use a tanning bed with lights that produce 3-7% ultraviolet B. Vitamin D resists the effects of Parkinson’s-promoting agents. [ref 10-16]
3. Eliminate all dairy products, except butter, from diet. Rice and almond substitutes are quite good, and coconut frozen desserts taste even better than ice cream. Dairy protein and dairy sugar have both been shown to promote Parkinson’s. [ref 9, 17-20]

4. Drink black tea (better) or caffeinated coffee every day, starting in early morning and continuing through mid afternoon. [ref 10, 21-24]

5. Drink beer and/or wine every day, starting in the morning and continuing through afternoon. Avoid evening alcohol, as it causes insomnia 4-5 hours later. [21,24-27]

6. Use low-dose nicotine patches every day. [ref 8]

7. Eat a low protein diet, similar to the diet used for kidney failure. The best approach is to eat no animal products and no soy products, but at least eliminate mammal (red) meat from the diet. [ref 9]

8. Eat abundantly of organic fruit and organic foliage-type green vegetables. Avoiding foods that aren’t organically grown is one of the ways that Parkinson’s patients can stop taking in the pesticides, herbicides, and fungicides that cause and promote Parkinson’s disease. Parkinson’s patients are hugely more sensitive to pesticides than normal people, and much more negatively affected.

9. Take daily resveratrol supplements made from Japanese knotweed. [ref 10]

10. Take daily extracts of Chinese knotweed (Polygonum multiflorum); alcohol extract is best. [ref 10]

11. Take daily supplement of ginseng extract. Cover all the bases by taking a supplement that contains all three ginsengs: American, Korean and Siberian. Be aware that method of preparation/stabilization greatly affects the effects of Korean ginseng. In cancer, red ginseng is more potent but white ginseng may be more potent with Parkinson’s. Try them out one at a time and see which one makes you feel better.

12. Eat more raw or dry-roasted nuts regularly.

13. Take 1 teaspoon of turmeric spice and ¼ teaspoon black pepper 3-5 times a day, every day, or take 3-5 capsules of turmeric extract with piperin per day. Piperin in pepper improves uptake.

14. Take 1,000 mg of niacinamide twice a day.

15. Take 1,000 mg of omega 3 fatty acids per day for every 20 pounds of body weight.

16. Rub a little DMSO somewhere on your body every day. [ref 8]

17. Get chiropractic care once or twice weekly.

18. Take 100 mcg selenium for every 50 pounds of body weight.

19. Get serious about exercise. Take up body-contact dancing (i.e.: tango) and/or boxing practice (no head hits). Take up walking and push the pace. Work up to 3 miles 3 times a week. Then start running. Walk until you’re warmed up, run until you’re tired, walk until you’re rested, run until you’re tired, repeat. Walk for 15 more minutes after you stop running. Exercise doesn’t stop the progression of the disease, which is why I put it last, but it greatly decreases the symptoms of the disease, and gives Parkinson’s patients a much better quality of life.

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