Volume 6, Issue 4 August 2010



Bernard Bihari, MD November 11, 1931 – May 16, 2010

On May 16th, the LDN community lost its most notable hero, Dr. Bernard Bihari, who died after a long illness. Dr. Bihari's discovery that LDN can help patients with autoimmune diseases has made so many of our lives easier. His life has special meaning for us; his death is a huge loss.

Thanks to Dr. Bihari and LDN, tens of thousands of people with multiple sclerosis, rheumatoid arthritis, lupus, HIV/AIDS and even cancer are now living better lives.

Dr. Bihari's credentials were impeccable. He had a Bachelors degree from Cornell University, and his MD degree was from Harvard. Had he wanted to, he could have made lots of money within organized medicine. But that's not the route he chose. Instead, Dr. Bihari dedicated his life to alleviating the suffering of real people outside of mainstream medicine, whether or not he was praised or scorned by his fellow doctors. And he never lost sight of his true mission.

Our hearts go out to Dr. Bihari's wife, Jackie Young. She stood steadfastly by him for many years, and through many hospitalizations and home-rehabilitations – especially in the past several years. I know she will miss him, as will we.

This memorial tribute was adapted from one I posted on my website, www.HonstMedicine.com (http://tinyurl.com/2b7bkqf), within days after Dr. Bihari died.

LDN Mascot Lambs



Dr Tom Gilhooly was caught playing with the LDN Research Trust's Mascot Lambs by Suzanne Harvey. One could say he looks a little "sheepish"!

Just for fun we are asking people to send in suggestions as to what Dr Tom is saying, we look forward to your replies contact@ldnresearchtrsut.org which will be added to the next newsletter. The winner will receive a free lamb.

To adopt your own lamb visit:

http://www.ldnresearchtrust.org/ldn-research/163-ldn-lamby.asp



Please can you help?

Times are tough for all of us and raising funds is very difficult. Everyone one at the LDN Research Trust works as a volunteer, no one gets paid and we receive no funding from anyone. We do however have running costs which have to be paid for and we really could use YOUR help!

Can you spare £1, \$1 or 1 Euro a month or an annual donation. To help support the LDN Research Trust?

Many people said they are embarrassed to make such a small donation, please don't. Every little really does help!

If you would like to make a donation please visit: http://tinyurl.com/yfsog9m

Most people could afford £1, \$1 or 1 Euro a month, please consider helping us today.

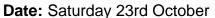
Your help will make a difference. Thank you for your support





Britannia Hotel Birmingham, UK Saturday 23rd October 2010

LDN Conference



Time: 9 am – 5 pm

Venue: The Britannia Hotel, New Street, Birmingham, B2 4RX

Admission: A nominal donation of £10 per head, to help cover Refreshments and Buffet Lunch.

Room: The Malvern Suite 2nd Floor. Wheelchair accessible, via guest lift (2 available)

Refreshments:

Morning: Tea/Coffee and Biscuits

Lunch: Assorted Sandwiches, Crisps, Nuts, Fruit, Tea, Coffee and Biscuits

Afternoon: Coffee, Tea, Biscuits

Accommodation: Should you wish to stay over we have negotiated special rates for rooms, breakfast and evening meals. Full details of these special rates will be sent in the registration

confirmation email.

We have an exciting line up including:

Dr Tom Gilhooly, Dr Bob Lawrence, Dr Pat Crowley, pharmacist Stephen Dickson, MS Nurse Elaine Bosley - Speaks of her patients' experience of LDN plus Video presentations by Dr Phil Boyle and we are honoured that Dr Jacquelyn McCandless presents the use of LDN in Autism & the Mali HVI trial results. We have LDN users talking of their experience for an assorted range of conditions.

To see the updated agenda visit:

http://birmingham2010.ldnresearchtrust.org/ldn-event/105-agenda.asp

Places are limited so book your place now:

http://birmingham2010.ldnresearchtrust.org/registration.asp to complete registration you will be taken to My Charity Page to make your donation, you will receive details how to take advantage of the discounted rooms and evening meals. We have reserved 30 bedrooms.

Donations can also be made by cheque.

LDN (Low Dose Naltrexone)

By Linda Elsegood

Linda Elsegood, 53, has had MS for "at least 21 years". She lives near Norwich, Norfolk with her husband Marcus. She has two daughters, Sara and Laura, and two grandsons, Leo and Max. She is founder of the LDN Research Trust

fter years of having MS I found out about LDN and discovered that people were taking it with great results. I contacted Dr Bob Lawrence, one of the private doctors who prescribes LDN, who suggested that I change my diet, take supplements, and go on LDN. I started LDN in 2003.

I started on 3 mg for 4 weeks and then increased to 4.5 mg. I find this dose still suits me. I have never had any side effects from taking LDN.

At the beginning, my diet consisted of just chicken, fish, fresh fruit, vegetables and water. I ate no red meat, dairy, gluten, caffeine, citrus fruits or potatoes. This diet was fine at home but impossible on holiday, so after five months I slowly introduced other foods back in my diet. I now eat most things within as healthy and fresh a diet as possible, avoiding processed and sugary foods.

After Three Weeks on LDN I Felt Like The Old Me Again

After just three weeks things were improving and I started to feel like the old me again. The fog in my head started to clear and over the next weeks and months pins and needles, numbness, vertigo, burning limbs, restless legs, bowel and bladder problems, leg strength, memory and many other things returned to normal.

My walking at that time was like a geriatric, and it took me about 18 months of daily exercise to build



Linda Elsegood

stamina and strength. I started a regime where I would walk 10 steps away from home and then the 10 steps back, increasing by two steps every week.

Before I went on LDN I had been 2.5 on the Disability Scale. But just three months after starting, this went down to 0, where it still is today.

The only old symptoms I'm still troubled with are heat sensitivity and fatigue, though this is nothing like it used to be. I can't have hot baths and hot weather really affects me. I also can't walk as far as I used to and infections always get me down and it can take a few weeks before I bounce back.

After my success with LDN I wanted everyone to know about it. In May 2004 I formed the LDN Research Trust and I spent all my time trying to help other people who are in the same place I used to be, whilst trying to raise funds for LDN clinical trials. Many of the 8000 on our database have had similar results to me by taking LDN.

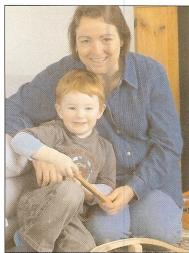
LDN isn't a miracle drug or a cure and doesn't work for everyone, but

it is non toxic and inexpensive, so it's well worth trying. After all, what is there to lose?

My biggest blessing is having my grandsons Leo and Max; I can be the grandmother to them that my mum was to my girls – something I thought wouldn't have been possible before LDN.

OK, I know I have MS but life is good. I can set goals for the future and achieve them.

There is not a day that goes by without me thinking just how lucky I am.



Linda with her grandson Leo

Info Box

For more information on LDN and the doctors who prescribe it: LDN Research Trust (A registered charity run by unpaid volunteers). PO Box 1083 Buxton Norwich NR10 5WT Tel: 0844 41 45 295 www.ldnresearchtrust.org contact@ldnresearchtrust.org

LDN in Hayfever - Dr Tom Gilhooly

This summer has been one of the best for a long time but the good weather brings with it its own problems. We have had one of the highest pollen counts in recent years and this has caused misery to millions of those susceptible to hav fever. My own son was having severe symptoms particularly itchy, sore eyes which were not helped with eye drops or anti histamines. It is a shame to have such good sunny weather at the same time as having disturbed sleep with hay fever. The next step after anti histamines has traditionally been steroids either orally or by injection. When my son asked what other treatment could be tried I

was reluctant to recommend steroids. This seemed like a sledgehammer to crack a nut and there is always a concern about the side effects of steroids. The way steroids work is to block an enzyme that is required to make repair hormones, these can be inflammatory or anti inflammatory depending on whether they are based on omega 3 or omega 6 fats. This obviously reduces the inflammation associated with hayfever, but obliterating the anti inflammatory hormones along the way can cause significant side effects such as ulcers and osteoporosis.

One thing that I had noted from my clinic was that patients on LDN were reporting having very few hay fever symptoms and as this is an immune based



condition it makes sense that it would work for this. The big advantage over steroids is that LDN is relatively free of side effects. It is an immune modulator rather than an immune suppressant, which reduces the inflammation of the immune system without flattening the whole system. I decided it would be a safe medication to try and he started it the next day. In this clinical trial of one, he reported the best night he has had for weeks and although his symptoms were not completely gone, it was now bearable. On the second day he informed me that I did not know the true potential of

this drug! Maybe none of us do but we can add another new condition that seems to respond to LDN.

In atopic conditions one of the main inflammatory cells are the mast cells. The activity of these cells is controlled by receptors on the surface known as Toll-like receptors. The recent Stanford University study into LDN in Fibromyalgia showed that LDN binds to the toll-like 4 receptors which suppress inflammatory activity. This binding is the probable mode of action in hayfever, where LDN binds to these receptors and reduces the production of inflammation. This suggests that LDN may have a potential action in other atopic conditions such as asthma and eczema.

Staying cool in summer...by Patti Powell

- Don't stress. Relax and realize that in 200 years we will all be dead.
- Do not go out between ten am and two pm. Hottest time!
- Wear a hat in the sun...use sunblock or screen.
- Point a fan into the bathroom. Be careful!
- Put a chair in the bathroom and sit to do makeup or other deeds.
- Stay hydrated...buy yourself a pretty water bottle and keep it in fridge...full of H20.
- Swim as summer exercise...but not for too long at a time. MOVE in pool.
- Rest after any activity...even five minutes helps!
- Smile and be happy. Laugh as well.
- Take a nap in a cool room after lunch every day!





Win a NEW Mini First Hatchback 1.63dr Draw Tickets £2 Each We receive £1.90 for each ticket sold.

Get in touch with us at:

If you'd like to find out more information or sell some tickets to your friends email us at contact@ldnresearchtrust.org

You can buy tickets online, through our charity page on the FSI website at

http://www.thefsi.org/charityprofile/ldn-research-trust# or contact us by email

contact@ldnresearchtrust.org for offline tickets.

Good Luck we hope YOU are a winner.



Managing
Multiple
Sclerosis
Naturally

A SELF-HELP GUIDE TO LIVING WITH MS

Judy Graham

Check out Judy Graham's New Book Which is available from Amazon.

http://tinyurl.com/2w4bc8n



Judy Graham is the editor of the MSRC's New Pathways Magazine



Linda Elsegood

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Are you or have you taken LDN for any condition?
We would love to hear your story, please email contact@ldnresearchtrust.org
We would not use your name without your permission.

Thanks to Cris Kerr from Case Health - Health Success Stories, for all her help, support, sharing stories with us and for compiling the eBooks below.

Those That Suffer Much, Know Much 2009 eBook - http://tinyurl.com/yd3alyf
100 Reasons Why You Should Know About LDN eBook - http://tinyurl.com/yz35rce



Cris Kerr



Moshe Rogosnitzky - Director of Research - MedInsight Research Institute

Why We Created LDNscience.org

LDNscience.org is a project run by the MedInsight Research Institute, an American-based non-profit organization. MedInsight is committed to bringing relief to those who suffer from cancer or chronic medical conditions by making doctors aware of commercially unsponsored medications, off-label uses for approved medicines, long-lost therapies and specialized tests that enable treatment to be tailored to the individual. MedInsight's mission is to bridge the widening gap between medical research and medical practice.

I have been involved with LDN research for almost 10 years. When I first came across it on the web, it sounded like snake oil: a non-toxic drug reportedly able to help a couple of dozen diseases but with no published clinical trials confirming its effectiveness. However, the doctors prescribing it were bona fide physicians and the pre-clinical research was coming from a reputable academic institution, so I decided to investigate it in depth.

I visited Dr. Bihari in New York City and learned the history of how he became involved with LDN and how he pioneered its clinical use in various diseases. I visited Dr. Ian S. Zagon and Dr. Patricia J. McLaughlin, of Hershey Medical Center, Penn State University, and heard about how they made the original discovery 30 years ago. I also discovered all the research that had been carried out since then to demonstrate how LDN works.

I soon began advising the group of physicians I worked with on how to use LDN and its related therapy for cancer patients – OGF (Opioid Growth Factor). It is the OGF that exerts LDN's beneficial effects. LDN is a clever tool used to raise OGF levels in the body but when there is an established tumor it is usually necessary to treat it using OGF, as LDN cannot increase the body's level of OGF to sufficient levels to control the cancer.

As the positive results of using these two drugs emerged, I struck up a close collaboration with Dr. Zagon in an effort to identify other drugs that could enhance LDN or OGF's effects. In 2004, I proposed a clinical trial for Crohn's disease, and Dr. Jill Smith at Hershey Medical Center agreed to lead the study. The overwhelmingly positive results were published in the American Journal of Gastroenterology in January 2007. This Crohn's disease study was actually the first published clinical trial of LDN in relation to any disease. Since then studies of clinical trials have been published about LDN for multiple sclerosis and for fibromyalgia.

Conducting clinical trials that highlight both the safety and effectiveness of LDN make it much easier for patients to obtain a prescription for it. Doctors need to

be able to explain their decision to prescribe a drug for off-label use if they are quizzed by the medical boards. Having a study to refer to opens the way for them to prescribe without running into problems with the medical authorities.

As the use of LDN grew rapidly across the world, a new problem emerged. Most doctors were unable to devote the time to read the dozens of studies that Drs. Zagon and McLaughlin had conducted on the topic. Therefore they didn't have a clear understanding of how LDN worked. The misinformation on the internet about how LDN worked, or that it was only effective if taken at night, led to even more confusion. Furthermore, without understanding the basis of LDN's effect, some doctors and patients believed that the more they took, the better it would be for them. So they would take higher doses, or timed-release formulas, which not only failed to help them, but made them feel even worse.

Dr. Zagon was inundated with dozens of emails every day from doctors and patients seeking answers, clarifications and explanations. But his duties as professor and head of a large research department did not allow him the time to answer every query. As a scientist who had dedicated his life to helping make people's lives better, this situation disturbed him.

So in the interests of getting all the correct scientific information about LDN and OGF out to doctors and patients, and increasing efficiency in disseminating this information, we embarked on a project to create LDNscience.org and it was finally launched earlier this year. The website has been very well received and numerous doctors have listed themselves in our international directory of physicians prescribing LDN. The site provides all the scientific background about LDN and OGF for both patients and physicians. It lists all of the pre-clinical and clinical research carried out to date and provides a database of trials with LDN or OGF. It also contains interviews with researchers studying LDN or OGF, a Question and Answer section where we respond to users' questions and a worldwide directory of physicians prescribing LDN and OGF.

A year ago we embarked on a project to create a video animation explaining and demonstrating how LDN works. This video was recently completed and now appears on YouTube (it is embedded on our homepage). An increasing number of LDN-related sites are linking to or embedding this video and it is helping doctors and patients to gain clarity into how LDN works.

Our ultimate goal is to spread the scientific understanding of LDN, OGF and related therapies, and to encourage sponsorship of further clinical trials in different diseases. This is the best way to gain widespread acceptance of LDN in the medical world.



Poem A part of me now - Steve Morris

Sun rise and sun set, was all the same to me, this new day the same as the last so what could set me free. A lonely life was mine to hold with romance gone astray, beating hearts once one then two, three words for her to say. My bitterness now loneliness while sorrow was around, I had no hope of peace back then, no footsteps off the ground. But through it all my hope renewed when simple words were spoke, the doctor told of illnesses that time alone awoke. MS thought I, how can this be, my body fought all ills, activity my middle name, but now I'm taking pills. My mind exploded after this and from the shards I sought to piece together only good, the bad I left for nought. Can people change, I know they can, if given half a chance, for I had done what others dream and in my mind I dance. If nothing else will come off this then nothing else is lost, but dream we must and carry on our footsteps in the frost. The morning sun will melt away the path that was my past.



Steve has MS and now takes LDN. He is a very talented artist, you can see his work

www.paintingsilove.com/artist/stevemorris

Steve will be offering one of his drawing up for auction for the LDN Conference in Birmingham, watch this space!

Please can you help if you are a Type 1 Diabetic taking LDN? Ginny Dudek



Hi

I'd like to hear from other Type 1 diabetics using LDN. My 34 year old son developed insulin dependent diabetes after an infection, 10 years ago.

He started on LDN for fatigue at 2mg with improvement. He increased to 4.5 mg but had a day with severe hypoglycemia. He stopped LDN for a few weeks, and has restarted at 2 mg. This indicates to me that his diabetes is autoimmune in nature, and that his pancreas may have started producing insulin on its own.

We would love some guidance as to what to expect and how to proceed. Thank You! Please email contact@ldnresearchtrust.org, all emails will be forwarded to Ginny.



Marne & Wesley - Ulcerative Colitis

My son was diagnosed with Ulcerative Colitis (UC) in 1996. He was only a baby.

Then in 1998 following a liver biopsy, at the tender age of 3, he was diagnosed with a rare and devastating condition, Primary Sclerosing Cholangitis (PSC), confirmed again later when he reached school age.

No effective medical therapies are recognized for Primary

disease that can lead to liver failure and the need for a liver transplant.

He had a rash almost from the day he was born and was prescribed many different medications over suing years, such as cortisone cream. Basically the rash was ignored, and considered only as a symptom of his Ulcerative Colitis. A special diet was not advised. The physicians said to give him Flintstone vitamins and let him eat whatever he wanted . I always consulted the best doctors I could for him, even hopping on a plane for an appointment with a 'top' researcher and specialist in the field. He said he'd seen thousands of PSC cases and that none of them looked as good as my son. He scoffed in disbelief that he even had PSC. I then listed the high profile doctors that had diagnosed him, and he admitted they were good doctors.

My son was not taking any drugs at the time, but the doctor did not at any time ask me what it was that I was doing for my son that may have been making a ference.

That was our life, a seemingly endless round of doctor appointments and tests, none of which brought the improved health my son and I both dearly wanted for him, and for which I prayed regularly.

In 2006 my son's MRCP (Magnetic Resonance Cholangiopancreatography) came back worse than ever. For the first time he had an enlarged spleen. His liver biopsy was stage 3 of 4, yet no treatment was advised other than the controversial Ursodiol/UDCA.

I did not give it to him. Many gastroenterologists had already told me it would not delay transplant, and as mentioned earlier, there was conflicting advice around it.

In October 2008 I found out about the importance of glutathione (an antioxidant), and my son began IV glutathione treatments from Dr. Gurney Pearsall, a hour drive away. The glutathione relieved ALL of his symptoms, so we continued with it. For a child that has never known life without fatigue, his words to me, "I feel like Superman!" were music to my ears. He was now asymptomatic, as in; NO itching, strength he had NEVER known, and NO fatigue. You can only imagine how his mother, me, felt... tears of joy!



My son's health was finally improving and we could not have been more elated.

We still had some way to go though. His hemoglobin had dropped to 8.0. According to Johns Hopkins, this was due to blood loss from chronic and acute inflammation of the colon, however; he was asymptomatic and had not been losing blood in his bowel movements each day - so this result in combination with low Red and White

Sclerosing Cholangitis (PSC). It is a slow but serious Blood Cells set off a light bulb warning in my head which resulted in my finding out his bones weren't growing at the rate they should, AND that he had developed adolescent onset mild scoliosis.

> Having learned of LDN, I now wanted to see if adding LDN could spur further improvement, so whilst still at Johns Hopkins, I phoned for a consultation with a knowledgeable LDN doctor, Dr John simultaneously forwarding all of my son's records for his review and documentation.

> I filled Dr Sullivan's LDN prescription, and on 15 March 2009 my son and I both started on LDN. I had decided to take LDN at the same time so I could better understand what he was experiencing. I started my teenage son on 3mg and then moved him up to the highest dose of 4.5mg after only two weeks.

> We experienced sleep disturbance on the first night only: We were up at midnight, walked around a bit, raided the fridge, then went to bed and slept heavily. The next evening we adjusted the time. My son took his LDN right before bed. He took his LDN, went straight to bed, and slept heavily. So neither of us experienced any lasting sleep issues and it has actually helped him sleep better.

> There was a significant change in my son's health within two weeks: My son had suffered a 'rash' his entire life. I say 'rash', but that doesn't give the full picture: He'd get painful sores on his inner thighs and buttocks and the scars left behind looked like a teenager's acne scars. As a young man he thought of his future and how embarrassed he'd be with a girlfriend.

> All the cortisone in the world would not take his rash away. Within two weeks of starting LDN, the rash he'd had his entire life cleared completely. It went away and has not returned! He was all smiles and, without any prompting, took his LDN faithfully!

In April 2009, after one month on LDN plus one iron pill per week, his haemoglobin rose to 12.5. I saw this as a positive sign that the problem was fixed.

My son has also had a severe peanut allergy his whole life. If someone even ate a peanut in the same room as him he'd start coughing. But after only two weeks on LDN, his mother, me, ate peanut M&M's in the car with him. He didn't cough. He and I were both shocked. The only thing that had changed in his life-threatening allergy to peanuts was 4.5mg of LDN nightly!



continue Marne & Wesley - Ulcerative Colitis

After he'd been taking LDN for three months, and seeing it helping, not hurting, I stopped taking it myself. As time went on there were other indicators that LDN was benefiting him:

Meanwhile I was still concerned with my son's low GH and IGF-1 levels, particularly as he was now around 14.5 years, a critical developmental window during which most young teenage men experience a growth spurt (he hadn't).

All these factors fuelled my determination, so to demonstrate my point, I took my younger (taller) son along to an endocrinologist appointment to convince them to address it, and finally, my son was prescribed injectable human growth hormone (HGH)

Back home again, I needed a local doctor. I booked an appointment with the top paediatric gastroenterologist in my area. This time I told him about LDN and IV glutathione, even emailing him documentation and information ahead of the appointment, and asked if he would prescribe LDN or IV Glutathione. At the appointment he walked in shaking his head. He would not do what I wanted him to do for my son.

So I needed a new gastroenterologist: I found one, and during the first office visit the doctor asked where I was taking my son for his transplant. This startled me but I said I hadn't decided yet, but probably Minnesota, because they do the most liver transplants for PSC children. I added that my goal was to avoid the need for a transplant for as long as we possibly could. She read everything I gave her about IV glutathione, and was willing to work with me on my son's many serious health issues.

On 21 December 2009, my son underwent the MRI/MRCP of his Abdomen that she had ordered. At that time, he'd been on IV Glutathione for around twelve months, and LDN for nine months:

Another problem emerged: My son's hemoglobin had dropped between April and December, even though he remained asymptomatic. The doctors kept telling me the drop in hemoglobin was due to blood loss, but I couldn't accept that. During all his years of illness my son's hemoglobin had always hovered around 14, even during his worst exacerbations and blood loss - so I'd been puzzled by the drop, especially because it occurred during a period of improving health and at a time when he had no inflammation or blood loss.

I also felt supplemental iron could be 'masking' an underlying cellular problem that needed to be addressed. I have another appointment on May 7, to see an endocrinologist knowledgeable in this area.

Going back to test results... I was sitting in the gastroenterologist's office to discuss the 3 March 2010 test results when she gave me the beautiful color photos of my son's healthy colon! I started crying and hugging her! Can you imagine the relief I felt?!

I then told his doctor he had never taken a single Asacol, and that he'd been taking LDN for the past twelve months. I told her after and not before, for obvious reasons, but more importantly, I wanted her to see for herself what LDN had done for my son so she'd consider

it as a treatment for her other UC and Crohn's patients.

I was scared of what might happen. Would she refuse to treat my son? But instead she asked if my son was in a study. I said there was a study, but that I didn't live close enough for it. She said she'd never heard of it and to my relief, indicated she wanted to know more about it. I sent her 150 documents! Amongst them, I emphasized the Penn. State Univ Crohn's Trial results by Dr. Jill Smith.

My son and I wish every Crohn's and UC patient knew about LDN and would give it a try. I'm thrilled because LDN has worked better than any other drugs ever did for him

I know there are hundreds, if not thousands of doctors who've seen improvement in patients taking LDN, yet who still refuse to research it further as a potential treatment option for other patients. And I also know there are doctors who've refused to treat patients when they find out they're taking LDN.

My son and I are among the lucky ones to have found a doctor with an open mind. The truth of this dramatic improvement was there in the test results for anyone to see, but other doctors have also seen similar results and reacted very differently.

I do know as a mother who would do anything for her son, I have a renewed respect for a doctor whose professionalism and skills are now partnering me in the best interests of my child. My prayers have been answered! She treats us with respect and greets us with a genuine warmth and kindness. She is now focussing on LDN, and I know she will educate herself on the clinical trials and huge success rates being achieved through Dr Jill Smith's trials. Now that her focus is on LDN, I know she will make an educated decision for the sake of her patients.

And my now teenage son is a walking LDN and IV glutathione poster child. LDN is becoming better known. There are doctors involved in MS and Crohn's clinical trials, lab researchers and scientists, and now; my son's new personal gastroenterologist who's also aware. All now know of LDN and have seen it works. The work of all those involved in scientific research and trials and the publication of their scientific research and trial data has contributed to the expanding scientific knowledge-base for LDN.

Patients who've benefited from LDN understand how important it is to diligently record their experiences, submit their testimonies, and grow the volume of testimonial evidence. They've responded to the urgent need to raise awareness through their testimonies, and their hope of decreasing unnecessary suffering around the world is united.

This is our contribution to that worthy worldwide effort, and to helping others discover the benefits of IV Glutathione and LDN, as we have.

Extract from - Collaborative Patient Testimonial: Marna Moran and Cris Kerr of Case Health, March 2010 6/10

The full story will be available in the 2010 International LDN Awareness Week eBook.

LDN Featured Prominently in Julia Schopick's Soon-to-Be-Published Book

I want to thank Linda for giving me this opportunity to tell you about my upcoming book, *HONEST MEDICINE*, which profiles four lifesaving treatments that are effective, low-cost, time-tested and safe. However, most doctors don't prescribe, or even know about them. I am hoping my book will help to change that. Of course, one of the treatments I am writing about is Low Dose Naltrexone!

For those of you who don't know me, I am hardly a stranger to LDN. I wrote a free 116-page ebook, *The Faces of Low Dose Naltrexone*, for the first International LDN Awareness Week in October, 2009 (http://tinyurl.com/nfwkra). And I've written several articles about LDN, as well (http://www.honestmedicine.com/low-dose-naltrexone/).

Four LDN advocates have graciously contributed chapters to my book:

- ♦ Linda Elsegood
- Dr. David Gluck
- Malcolm West
- Mary Boyle Bradley

Their personal stories are riveting. I am sure you'll enjoy reading them.

A Different Kind of Book

This book is truly different since, to my knowledge, it is the first to look at LDN as **one of several low-cost**, **non-toxic treatments** that the conventional medical system doesn't recognize. And, because they are so effective and cheap, all four treatments **could really save our healthcare system lots of money**.

I'm hoping you'll help me to spread the word about this book, so that **HONEST MEDICINE** will be read by lots of people, and will save many lives.

The other treatments I'm featuring are:

Intravenous alpha lipoic acid for terminal liver disease and cancer. Used successfully by Dr. Bert Berkson since the 1980s, IV ALA has helped many people with hepatitis C and other liver diseases to live longer,



healthier lives. More recently, Dr. Berkson has also been successfully using this treatment, together with LDN, for patients with autoimmune diseases and cancer. You probably know about him, since he has spoken at LDN conferences, both in the US and Scotland.

The Ketogenic Diet for pediatric epilepsy. Thousands and thousands of children have been successfully treated with this special high-fat diet since the 1920s at Johns Hopkins and other prestigious medical institutions worldwide.

Unfortunately, most doctors would prefer to put children on dangerous anti-seizure drugs, instead of the diet. (Sound familiar?) Three parents and two dieticians have contributed their heart-wrenching stories to my book.

Silverlon. This is the safe, inexpensive wound-healing treatment that saved my husband Tim's life in 2002, when the surgeries his doctors were subjecting him to kept making him sicker and sicker.

http://honestmedicine.typepad.com/National-Brain-Tumor-Foundation-Article.pdf
You may read more about these four treatments at
http://www.honestmedicine.com/2008/05/four-lifesaving.html.

And please watch for news about my book on my website, also called Honest Medicine

(http://www.honestmedicine.com/). I'll post more information there, as the publication date nears. (I'll also post information about the book on my Facebook Page -- http://www.facebook.com/#!/profile.php?id=100000662160280) - so please "friend" me there.)

I Could Use Your Help!

If any of you have contacts at radio stations, newspapers or magazines, who might want to interview me, or review my book, please let me know by writing to me at ldnebook@aol.com. I look forward to hearing from you!

Together, let's continue to get the word out there about LDN, and about other treatments that save lives without harming people, and without costing lots of money!

Sjogrens Syndrome - Philip Madsen Queensland Australia

My story, whilst a bit lean on LDN information, I have only been taking LDN for about 8 months, will nevertheless be clinical and hopefully of interest and help to some.

It was some time in 1963, I was about 29 years of age, when a very sharp continuous pain in my left shoulder caused a doctor to tell me I had rheumatoid arthritis. It was sudden and without any sign or warning. Within a month or so I had the classic swelled-up fingers and the symptoms progressed to other joints over the weeks. First aspirin, as much as 16 x 300mg per day. Then Indocid. At that time I followed doctors instructions, though they acknowledged that no cure existed, but had to be managed. The most

useful drug, but most dangerous, as will be seen later was 5mg of prednisone daily. And I managed with copious amounts of beer regularly most days for years.

It wasn't long before I began to look to alternative medicine. Cod liver oil, yuk! boiled leaves of all sorts, I gave everything a good month's trial. Chiropractic, even the historical 30 day fast with nothing but water. During this early period, the doctor treated my knees by 'expiration' or draining out the fluid, and injecting cortisone direct into the cavity.

Somebody in North Queensland was offering to let people with arthritis be stung by their bees. I should have rushed up there, but I was a coward. By 1970 the knees had become beyond use, damaged I learned later by the cortisone. I had to stop work. I was hooked on prednisone to the extent that I would go comatose trying to give it up. We were only now beginning to equate the immune system as a factor in arthritis, as well as many other diseases. They did try chloroquine as an immunosuppressant without any result, but I rejected it on the grounds of the alleged threat to my eyes. I might add that I had by this time become more knowledgeable in medicine than most medical students.

By 1973, two medical miracles happened. First, a Dr. Cilento offered to try bee venom injections. The method was essentially the same treatment used to get people non-allergic to bee stings. Small needle, starting with 10% venom in water, artificial stings three inside each



Phil with a young lady, her boyfriend lent him his ceremonial costume.

forearm . Over a month this is repeated every few days till full strength was used. Before it was over, I had gone cold-turkey on the prednisone, and the arthritis was in full remission. Even the knees let me walk with crutches.

Then my doctor introduced me to one who I call the real hero of medicine, the orthopaedic specialist Dr. Peter Milroy. Within 18 months I had received two total knee replacements, and those two knees are still working perfectly today in 2010. That's over 35 years, and he only gave me a 10 year warranty.

So why am I still here writing to you? The rheumatoid factor took a new turn over the years. Years ago it had already began depleting my tears

production. Serious eye dryness has occurred. I handled this with artificial tear drops, but when the salivary glands began to dry up, I began to take notice. It is bad, and I admit for the first time I nearly panicked. There is no suitable artificial saliva.. Of all the internet searches I found a stimulant that did work.. Salagen tablets. Not recognised/allowed in Australia. The drug admistration threatened me if I tried to import them. Fancy being called a criminal for such a big and terrible crime. Anyway, a New Zealand doctor publishes on the web a way to make the dose in liquid form from a common eye drop containing pilocarpine, the ingredient of Salagen. Whilst this certainly works, it is not a cure and it has some mild undesirable side effects.

Hence I am now trialling LDN, which is working on the real cause of most of these problems, a faulty immune system. Nothing dramatic for me to report, other than to say its not getting worse, and yes, improved enough to cancel any panic attacks.

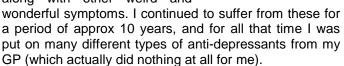
I would like to conclude by saying something that goes against my nature as a beer-loving beer-drinking person who loves meat. To be fair, I must be honest and say it. Among all the alternatives I have ever tried, over the years I have to admit that a healthy nutritious diet of fresh fruit and vegetables, raw and never overcooked without little or no meat vastly improved my condition. I guess it's all a matter of balance, moderation and control..



Patricia Barnfield - CFS/ME & LDN

My diagnosis came in January 2005, and I started LDN May, 2006 - returned to work July 2006.

In 1995, I was diagnosed with a very serious viral condition, which took me 12 months to recover from. One of the main symptoms was fatigue, and even though I managed to fight the virus, I was left with the fatigue, along with other weird and



It was after meeting my now husband, who had suspected MS, and conferring about symptoms, that I started to think I had MS. Shortly after we got married, we found out that I was pregnant, and although being overjoyed, my symptoms got worse (especially during the first trimester). It was at this time that I went for further investigations i.e. MRI. The results came back negative, but I continued to suffer the symptoms, and had to take time off work as a result.

Following the birth of our daughter by caesarian, and having feeding difficulties, I became extremely ill, and so did my husband. When I think back to those days it all feels like it was a very bad nightmare, and I often wonder how we survived. BUT WE DID. Whilst I was extremely concerned for my new baby, which led me to trawl the internet, I was also very concerned about my husband, and obviously trawled the web for potential cures for MS. It was then that I came across LDN, and the hope and relief it was giving to so many MS sufferers. During my research, I noted that the symptoms LDN was able to alleviate, were again very like mine. I then wondered if it bluow benefit me, along with mγ husband.

I then found Linda's contact number and email, and without hesitation contacted her with regards to obtaining LDN. Linda was a tower of strength, and so was Ted Heath, who visited my home following a very painful phone call, which I had made to them. I can't thank Linda and Ted enough for what they did for me and my family, for they gave us the gift of good health.



Stock Photo

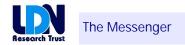
I managed to get a prescription, and Linda gave me assistance on the best place to get it dispensed.

When our delivery arrived, I can remember both my husband and myself being a little worried about what it would do, and how it would affect us. We started taking a very small amount initially, gradually building the dose up over the period of a few months. I remember that at first I

started getting some of the very old symptoms I had had years previously. They were brief fleeting glimpses of the past which lasted a very short time (minutes - a couple of hours), , and then just passed off again, as if they hadn't been there. The more I took the LDN, the more my strength improved, and so did my husband's. Within a few months of starting to take LDN I was able to return to work, and my energy was not only back to what it had been on my very good days, but back to the way I had been when I was a much younger person. I was able to do things again without having to plan the consequences rigorously. I WAS ABLE TO REALLY LIVE!!

I no longer get the weird and wonderful symptoms I was previously plagued with, and have forgotten what most of them were. It is only when I forget to take my LDN for short periods of time (once it was a month), that I start to remember why I take LDN. Once back on LDN, it doesn't take long (a couple of days) before I'm back to feeling really good again, but even on my worst of those days I am still able to function normally.

I hope this little summary will help others who find themselves in a similar situation, and will assist Linda and the LDN Trust in their endeavours to have real clinical trials done in this country, because, anyone who suffers from a condition that robs you of your vitality for life deserve all the help we can give. I believe that having the courage to try LDN was the single most important thing I ever dared to do, and I am now reaping the rewards from that demonstration of courage.



Selling Goods on ebay?

You can donate a percentage to the LDN Research Trust when listing your items. Every little helps!

Now is a good time to have a good clean and get rid of all your unwanted items and you can donate a percentage of what you raise to the LDN Research Trust.

We are very grateful to all of you that have made donations already via eBay, your help and support is truly appreciated.



Why do I think everyone with MS or autoimmune disease should be taking Resveratrol? Pharmacist Stephen Dickson

Basically, the studies are convincing, the pharmacology is good, and a huge drug company just spent \$750M dollars purchasing the research. In fact, I'm so convinced about the benefits of Resveratrol that most of my family are taking it – purely for the anti-aging effects (including myself!).

But the question remains, how much do you need to take orally – to get a similar effect to the animal studies in MS. Thankfully, the bioavailability of Resveratrol was proving by David O Kennedy et al, so an equivalent would be: **Dose: 1000 – 1500mg of Trans-Resveratrol orally daily.**

As this product is not directly available in the UK – I was having it made for my family, but we now have a large supply of Trans Resveratrol 500mg capsules in stock. You can buy it at www.dicksonchemist.co.uk or by calling Paula/Lorraine on 0141 647 8032.

NB: This product has few side effects, but it will colour your urine an unusual colour initially. This is nothing to be concerned about.

Start taking 1 capsule a day for 7days, then increase to 2 capsules.

We will donate £1 to the LDN Research trust for every pack sold.

Full article can be found on page 11 of the June 2010 Newsletter http://www.ldnresearchtrustfiles.co.uk/docs/June2010.pdf

Leave a Gift in your Will to the LDN Research Trust With the help of the Big Give Charity

Add a legacy to your Will (Codicil Form)

If you have already made your Will, it is very simple to amend it leave a gift to charity. You do not need to write another Will, you can just add the amendment (codicil) to your existing one.

Please complete this form http://www.thebiggive.org.uk/legacies/codicil.php?charity_id=490 and send one copy to your solicitor and another copy to your executor or a trusted friend with a note of where the original is kept: It doesn't cost you anything.

The Big Give Will Planner

Your Will is one of the most important documents you will ever write, but it needn't be complicated. Alongside advice from your legal advisor, this brief guide will help you ensure your wishes are carried out.

Fill in the relevant sections,

http://www.thebiggive.org.uk/legacies/will planner.php?charity id=490 take it along with you to your legal advisor and hopefully it will help you save both time and money.

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positive inspiration

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As well as standard insurance risk, we also specialise in non-standard insurance, such as:

Travel insurance for customers with any pre-existing medical condition (including MS)

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Motor insurance for people with convictions or bans

To obtain a quote or to get further information, please call us on 0844 57 31 922 or visit our website www.insurancechoice.co.uk/aff02348

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Awake refreshed and alert.

Hypnosis for MS CD from Sharon McKay will help people to stay relaxed, calm and focussed, and can also help with the following:

- Promoting your body's own natural healing force.
- Help you to feel loved, wanted and respected.
- Strengthen your sense of purpose and meaning on this earth.
- Inspire you to remain positive in the face of adversity.
- Help you to reassess your life and goals in a positive
- Help you to deal with other peoples' reactions in a positive way.
- Reinforce your sense of pride and dignity.
- Improve your self esteem, and elevate your mood.
- Boost your confidence and self belief.
- Help to get rid of fear, and manage each day as it comes.
- Improve your sense of well-being
- It can also improve sleep, and sometimes help with

For full Details

http://www.ldnresearchtrust.org/ldn-research/146-hypnosis-for-ms-cd.asp

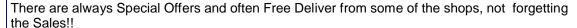


Shop online and we get a commission

Do you shop online?

Check out the High Sheet Shops and Major Retailers, for every sale we get a commission. http://www.buy.at/LDNResearchTrust?CTY=26&LID=24-07-2008

Remember each time to use our link every time you shop online.





With summer being here in full swing, this newsletter is dedicated to the fantastic summer activities. You can find them under the 'Summer Activities' tab at the top of http://www.buy.at/LDNResearchTrust

If you're keen to get your hands on a free UK paintball session, free broadband, cheap bikes or great Twilight deals, check out the 'Special Offers' section. You'll find these offers when you visit http://www.buy.at/LDNResearchTrust on the right hand side under 'Special Offers'.

We've recently launched quite a few new retailers – great news! Make sure you have a look at the 'New Retailers' section, which can be found under the 'A-Z' tab at http://www.buy.at/LDNResearchTrust.

Remember that every purchase you make via your Webshop generates a commission for LDN Research Trust.

If you think that other supporters of LDN Research Trust would be interested in shopping online to raise funds for the cause, please forward this email on by clicking this link: http://awin.sendloop.com/f/cnQvdDQvdHIv

Help fundraise with Everyclick, search engine.

When searching the internet you can help earn us money at no charge to you, regardless where you live in the world.

Membership is free & easy and every search helps raise funds. http://charities.everyclick.com/info.xq?id=578&name=LDN-Research-Trust

Save the link as your favourites and use it each time you search the internet and funds will soon add up.





Sally's Fundraising Items



White Polo Shirts in 5 sizes ideal for summer

£12 each plus P&P



Wristbands in 2 sizes for a £2 donation including P&P worldwide



LDN Mascot Lambs

Donation of £5 for one or £10 for 3 including P&P worldwide.



Free LDN Car Stickers we would appreciate a small donation to help cover P&P.

Silver coloured metal pin badges for a £2.50 donation including P&P worldwide.



We would greatly appreciate your support promoting these items.

All these Items can be found in our website shop:

http://www.ldnresearchtrust.org/ldn-research/161-shop.asp

LDN Research Trust Links

LDN RT Main website: http://www.ldnresearchtrust.org LDN RT Forum: http://forum.ldnresearchtrust.org/

LDN RT Chat Room: http://forum.ldnresearchtrust.org/index.php?app=ipchat

LDN RT Facebook: http://www.facebook.com/home.php?#!/group.php?gid=10412539044

LDN RT on Twitter: http://twitter.com/LDNRTrust

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Fundraiser Kacey J on facebook: http://www.facebook.com/home.php?#!/Kacey.J?ref=ts

Kacey J's website for record downloads: http://www.kaceyj.com/listen.html

LDN Aware Website: http://www.ldnaware.org/

LDN Aware on Facebook: http://twitter.com/LDNAWARE

LDN Aware YouTube Channel: http://www.youtube.com/user/edannajaynes59

All idea's and suggestions are welcome to raise awareness and funds for LDN.



For information how to obtain LDN in the UK or for general LDN information call:

0844 41 45 295

Local rate number

Outside of the UK please email, we have managed to help people worldwide obtain LDN

LDN Research Trust

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The LDN Research Trust is a non-profit-making Registered Charity, and all helpers are volunteers.

However, we are no different from other charities, in that there are unfunded elements which do ultimately cost us money to maintain and operate.

To help us continue our work we would appreciate help with fund-raising, either in cash or in kind. You can be sure that all contributions are greatly appreciated, however small.

How to make a Donation

To Make a Donation from anywhere in the world using MyCharitypage.com. This is our preferred method as there are no fees plus if you are a UK tax payer they claim the gift aid back for us!! www.mycharitypage.com/LDNResearchTrust

To Make a Donation Direct into our Bank Account
Or
To setup a regular monthly payment

Barclay's Bank PLC Sort Code: 20-03-26

Bank Account No: 60515213

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If you pay UK Income Tax - like tax on your pension if you are retired, or Capital Gains Tax, or tax on the interest from your savings - then every donation you make, or have made since 6th April 2000, could be worth almost a third more, without any cost to you.

If you want to help the LDN Research Trust to maximise the impact you make through your donations, all you have to do is complete a gift aid form.

http://www.ldnresearchtrust.org/gift-aid-form.asp

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