

## EPD TREATMENT IS NOT CURRENTLY CARRIED OUT AT THE DOVE CLINIC BUT THIS IS UNDER REVIEW



### Allergy and Intolerance

The term 'allergy' was first used in 1906 meaning 'altered reactivity to the environment'. It is a response to a substance which may affect one person but not another, and is distinct from toxicity which affects everyone in a more or less predictable way.

Allergy has tended to be used synonymously with Type 1 Hypersensitivity which involves the triggering of IgE -sensitized mast cells and basophils to release mediators of inflammation which produce the clinical effects of allergy. Examples include hayfever, asthma, urticaria or hives, drug allergy and anaphylaxis to bee and wasp venom. Diagnosis of this type of allergy is classically by skin prick tests and blood IgE levels.

There are 3 other types of classical Hypersensitivity:

- .       □       Type 2 – which involves the formation of IgG and IgM antibodies to the surface of cells/tissue producing local tissue damage. This type of reaction is important in autoimmunity and transplantation.
- .       □       Type 3 – which is caused by the formation of soluble immune complexes which deposit in tissues causing inflammation and disease eg nephritis, farmer's lung.
- .       □       Type 4 – which is delayed-type Hypersensitivity, mediated by T cell-antigen interactions eg contact sensitivities to nickel and cosmetics.

It has become apparent to a growing number of doctors that a range of additional reactions to environmental factors exist, resulting in very real symptoms, but for which the mechanisms still remain largely unknown. A number of suggestions have been made to account for these including:

- other types of hypersensitivity reactions
- enzyme defects -irritant or toxic effects -the absorption of abnormal food molecules into the bloodstream via a 'leaky gut'.

These types of reactions are best described as 'intolerances' or 'sensitivities' as distinct from allergy per se, and include reactions to foods, inhalants and chemicals amongst other things. There is an increase within the population of these types of reactions and growing research information to explain them. Symptoms can be unexpected and diverse, ranging from fatigue, muscle and joint pains, irritable bowel syndrome, skin rashes, rhinitis and psychological problems etc.

At the Dove Clinic we offer a range of diagnostic tests including:

- Formal skin prick and IgE (RAST) tests
- Electrodermal testing (Vega)

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- IgE and IgG blood tests for foods/inhalants
- Lymphocyte sensitivity tests (for chemicals, heavy metals)
- Full nutritional testing (hair, blood, sweat)
- Dark Field Microscopy
- Immune function tests (eg TH1/TH2 balance)

We approach all types of allergy/intolerance using a range of approaches, and where possible, we try to determine cause rather than simply using medication to suppress symptoms. Approaches common to all types of sensitivity problems include the following:

- .  Nutritional support – to support effective immune function and detoxification processes using oral supplements and intravenous treatments.
- .  Immunotherapy – to try to address imbalances in the major branches of immune function eg classical IgE –mediated allergy usually reflects an increased TH2 response. Specific treatments can be used to increase the TH1 response, thereby restoring a degree of balance.
- .  Detoxification (to reduce ‘toxic load’) – Improving liver function in particular as well as reducing toxin exposure eg to chemicals in the environment, heavy metals, pesticide residues in food. We do chelation therapy to remove heavy metals.
- .  Identification and removal of offending factors as far as possible eg elimination diets, removing irritant chemicals etc from the environment.
- .  Correction of gut ecology, improvement of digestion and healing of a leaky gut
- .  Desensitizing treatments if appropriate eg homoeopathy, Enzyme Potentiated Desensitization
- .  Use of adjunctive treatments eg homoeopathy, herbal medicine, orthodox medication

### **Desensitization:**

Single, classical type 1 hypersensitivity reactions eg to bee and wasp venom, peanut allergy etc are often successfully treated by incremental immunotherapy which is available on the NHS (ask your GP to be referred to an Immunologist).

Multiple allergies/sensitivities cannot be treated by this method, but do respond to other types of treatment including Homoeopathic desensitization, Enzyme Potentiated Desensitization (EPD), and Neutralization (Miller Technique).

**EPD** is a method of low dose desensitization which has been shown in placebo-controlled double blind trials to be effective in the treatment of allergy. It was developed in 1966 by Dr Len McEwen at St Mary’s Hospital in London, and is prescribable on the NHS if your GP is willing to prescribe it. Treatment with EPD involves a course of intradermal injections of a naturally-occurring enzyme (  $\beta$ -Glucuronidase) with a very dilute vaccine containing antigens (foods/inhalants/bacterial and yeast antigens/chemicals etc) appropriate to the patient’s condition. Because the vaccine is so dilute it remains a very safe treatment. Over 300 000 treatments have now been given worldwide without any serious side effects.

EPD has been successfully used in the treatment of asthma, hayfever, eczema, urticaria, irritable bowel syndrome, some types of arthritis, chronic fatigue syndrome (ME), childhood hyperactivity and psychiatric reactions to food. It is not intended for the treatment of contact dermatitis (eg nickel sensitivity), allergy to aspirin, or allergy to stinging insects.

At a first consultation at the Dove Clinic, appropriate tests will be offered and a treatment strategy worked out. The patient’s GP will be informed.

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