Roman Bystrianyk, "Stopping epileptic seizures using omega-3, vitamin E, diet, and more", Health Sentinel, October 20, 2005,

Recently a parent brought their child to a neurologist because of concerns of a possible seizure disorder. After an overnight EEG, which is a test in which electrodes are placed on the head to measure electrical activity produced by the brain, the neurologist determined there were some irregularities and that seizures were possible in the future. The parent asked a few questions including whether there was anything they could do with diet to prevent that possibility. The neurologist replied that aside from the Ketogenic diet, which would only be considered in extreme cases, that there wasn't anything that could be done.

I decided to see what information I could find on seizures and epilepsy. According to the website epilepsy.com:

“There is a fine balance in the brain between factors that begin electrical activity and factors that restrict it, and there are also systems that limit the spread of electrical activity. During a seizure, these limits break down, and abnormal electrical discharges can occur and spread to whole groups of neighboring cells at once. This linkage of electrical discharges creates a "storm" of electrical activity in the brain. This is a seizure. When a person has had at least two of these seizures, that's called epilepsy.”

They also note that essentially many times the cause was unknown:

“The reasons why epilepsy begins are different for people of different ages. But what's true for every age is that the cause is unknown for about half of everyone with epilepsy. Children may be born with a defect in the structure of their brain, or they may suffer a head injury or infection that causes their epilepsy. Severe head injury is the most common known cause in young adults. In middle age, strokes, tumors, and injuries are more frequent. In people over 65, stroke is the most common known cause, followed by degenerative conditions such as Alzheimer's disease.”

According to the website that apart from the Ketogenic diet there wasn't much that anyone could do to prevent seizures. I decided to take a trip to a local medical library to start my own research to see what I could come up with. I spent quite a few hours the first night searching and sifting through studies from a large number of medical journals. I did that over a number of weeks and accumulated a large number of studies that provided some amazing information.

### Omega-3 Fatty Acids

One of the first studies I discovered was from the journal Epilepsia (1). The authors described that omega-3 fatty acids (or n-3 PUFAs) are essential for normal brain development and that a deficiency in these fatty acids can "contribute to the emergence of neurologic dysfunctions". With respect to epilepsy, “recent studies in animal models have shown that n-3 PUFAs can
raise the threshold of epileptic seizures." Based on this knowledge the study authors provided a spread of 65% n-3 PUFA (46% DHA, 18% EPA, 1% alpha-linolenic acid) plus 100 IU of vitamin E to 5 patients with severe seizure disorders. The spread (about 5 grams) was eaten at breakfast by 5 patients each day for 6 months. Although this was a small study, the results were nothing short of dramatic. The frequency of grand mal seizures (grand mal seizures are characterized by sudden loss of consciousness followed by violent full-body convulsions lasting several minutes) before the omega-3 diet and after were as follows:

Patient 1 – Grand mal seizures before were 2-3 per week and after zero.
Patient 2 – Grand mal seizures before were 6-8 per week and after zero.
Patient 3 – Grand mal seizures before were 1-2 per week and after 1 per month.
Patient 4 – Grand mal seizures before were 1-2 per week and after zero.
Patient 5 – Grand mal seizures before were 14 per week and after 3 per week.

The authors conclude in their study that, "All five [epileptic] patients exhibited substantial improvement and alleviation in frequency and strength of both GM [Grand mal] and PM [Petit mal] seizures. No adverse affects were noticed in any of them. Our study shows that n-3 PUFA [omega-3 polyunsaturated fatty acids] can alleviate symptoms of human epilepsy."

In another journal, Seizure (2), two authors discussed epilepsy and sudden unexpected death in epilepsy or SUDEP that claims the lives of approximately 500 people each year in the UK. Although epidemiological studies indicate that 70% to 80% of people who develop epilepsy eventually go into remission there are those that continue to have seizures.

The authors note the importance of omega-3 fatty acids in brain health. Key omega-3 fatty acids that are found in large amounts in fish are eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA).

"Nutrition is likely to be one of these factors [contributing to seizures] and, in particular, deficiency in omega-3 fatty acids might be an important factor. Nutritional studies suggest that the Western diet is deficient in omega-3 fatty acids, which is an essential nutrient. Hence people with epilepsy in the UK, like those in the general population are likely to be deficient in omega-3 fatty acids. Omega-3 fatty acids have important roles in determining the structural and functional properties of neuronal membranes, affecting membrane functions such as electrical signaling, receptor sensitivity, and neurotransmitter release."

**Vitamin E**

Vitamin E (or α-tocopherol / alpha-tocopherol) prevents the damaging effects of oxidation in brain tissues. Free radical scavengers, such as vitamin E, have been implicated in prolonged seizure activity. Vitamin E is a natural nutrient that works to stabilize the membranes of cells and has no known toxic effects. Early animal studies, published in the Annals of Internal Medicine (3), found that rats and mice that were exposed to 100% oxygen had seizures. However, the authors found that they could prevent the seizures if they administered vitamin E before the experiment. "Seizures occurred in 100% of the vitamin E deficient rats and in 50% of those fed a normal diet, but none developed in rats fed a diet containing an α–tocopherol supplement."

In the journal Epilepsia (4), the authors of a study examined the effect of vitamin E supplementation on 24 patients. The study was a double-blind and placebo-controlled using 400 IUs of vitamin E for 3 months. At the end of the three months the authors found a dramatic
decrease in seizure activity in the patients taking the vitamin E supplement.

“Of the 12 subject receiving active drug [vitamin E], 10 were considered responders (> 60% reduction in seizure frequency), 6 had 90-100% reduction of seizure frequency, and 4 had 60-90% reduction. Two were considered failures (< 60% reduction in seizure frequency). The two failures were clinically identified as noncompliant subjects during the trial period, and so confirmed by Vitamin E assays.”

Not only was there a dramatic decrease in seizure activity, there was even improvement in some of the patients’ EEG measurements. “The EEG findings, however, appeared to have improved in > 50% (four of seven patients) of the responders who had EEG performed before and after trial of add-on vitamin E.”

After the 3 months, the 12 patients receiving the placebo were placed on the vitamin E supplementation. Those 12 patients also showed dramatic improvements by a “reduction in seizure frequency between 70 and 100% in all patients.” Also, those patients that continued the vitamin E protocol after the first 3 months continued to show improvement. “[The] response of six subjects continuing vitamin E after beneficial effects in the first phase [of the study] showed continued improvement.”

This study followed an older study published in Canadian Journal of Neurological Sciences (5), where the author examined 100 children that had grand mal seizures versus 100 healthy children. The author found that those with the seizures had a much lower blood level of vitamin E (632 µg/dl [micrograms per deciliter) than those that did not have seizures (822 µg/dl). Here the author concluded that, “supplements of α–tocopherol might improve seizure control in such patients.”

Vitamin B1

Thiamine, also known as vitamin B1, is essential for the functioning of the heart, muscles, and nervous system. A deficiency of thiamine can cause weakness, fatigue, psychosis, and nerve damage. There is no known toxicity associated with thiamine and studies have documented a relationship between thiamine deficiency and epilepsy.

At the neurotransmitter level, thiamine deficiency may be accompanied in a lowering in the concentrations of γ–aminobutyric acid (gamma aminobutyric acid) or GABA. GABA is a neurotransmitter that is inhibitory, that is, it helps quiet the brain. Low levels of GABA are also associated with epilepsy or seizure disorders.

Studies of elderly populations show that 10% are deficient in thiamine, and an even larger amount of 23% of nursing home residents were also deficient. This indicates the relatively high rate of thiamine deficiency occurring especially in the elderly. Thiamine deficiency appears to exist in 25-30% of epileptic patients.

A study in the journal of European Neurology (6), examined 50 patients who were diagnosed with a vitamin B1 deficiency. Out of the 50 patients 16 of them had shown epileptic manifestations, where 11 of them had severe vitamin B1 deficiency. They patients were provided with thiamine supplements. In 10 of the patients epileptic seizures were completely “abolished”. The authors conclude that, “patients with late-onset epilepsy thiamine deficiency may be considered as one of several possible causes and that a search for thiamine deficiency should not be neglected as it many give a clue towards simple and effective treatment.”
Another study in Epilepsy Research (7) involved 72 adult epileptic patients receiving a supplement of 50 mg of thiamine and 5 mg of folic acid. The 6 month, double-blind, placebo-controlled study measured the improvement in verbal and non-verbal IQ. At the end of the study the authors found there was an improvement in verbal and non-verbal IQ scores as well as in other neuropsychological functions. The authors conclude that, “the search for thiamine deficiency should not be neglected in chronic epileptics; empirically – if thiamine assessment is not available – we suggest 50 mg of thiamine supplementation daily for 1-3 months in chronic epileptics to prevent organic cerebral damage.”

Vitamin B6

Vitamin B6, also known as pyridoxine, is needed for protein metabolism, red blood cell metabolism, and proper functioning of the nervous and immune systems. Vitamin B6 is also involved in forming GABA, which mentioned before is a major inhibitory neurotransmitter in the brain. Impaired creation of GABA can lead to seizures. Vitamin B6 deficiency has been known to produce neuritis (nerve inflammation), dermatitis, anemia, and convulsions in infants.

A report in the journal Epilepsy Research (8), discusses the case of an 8-day-old boy that had developed seizures. A variety of antiepileptic medications that were tried, such as diazepam and phenobarbital, did not block the seizures. An injection of 80 mg of vitamin B6 did “abolish the seizure immediately.” In subsequent weeks the child got 40 mg of vitamin B6 daily and “several EEGs were normal and no further convulsions were observed.”

Analysis showed that the boy’s GABA levels were only at 13 pmol/ml (picomoles per milliliter) before the vitamin B6 and after had increased to 124 pmol/ml after vitamin B6 treatment. Children without any neurologic disease have a GABA level at 174 pmol/ml.

In the journal Pediatrics (9) several cases of children with seizures are discussed. The first case was of a 4 year old girl that had seizures since she was 2 months old. Despite antiseizure medications she still had daily seizures. She received 50 mg of vitamin B6 twice a day and within 24 hours she was seizure free. After a month her legal guardians stopped the vitamin treatment on their own and her seizures started again within 2 days. After restarting the vitamin B6 she again became seizure free.

The second case was of a boy who had been normal until 19 months old when he started having seizures. Despite antiseizure treatment he had between 2 to 6 seizures per day. He was given 100 mg of vitamin B6 intravenously followed by 100 mg of vitamin B6 orally by mouth and the seizures suddenly stopped. “The pyridoxine was stopped; 1 week later seizures recurred. The EEG showed runs of central spikes and sharp slow waves. Pyridoxine was restarted. A subsequent EEG was normal.” Despite the boy being seizure free for 3 months the parents stopped the treatment believing it was “dangerous”. Within 3 days he started to have 5 to 10 seizures per day. Vitamin B6 was restarted and again the seizures completely stopped.

A third case of a 4-month-old boy showed similar results. Despite large amounts of antiseizure medications his seizures continued. He was given 100 mg of vitamin B6 and “seizures stopped in less than 5 minutes”. Two years later he has not had any further seizures and is receiving 50 mg of vitamin B6 twice daily.

The authors conclude that, “the recommendations for pyridoxine treatment should be extended to include all children with seizure disorders with onset at any age who are poorly responsive
to medical therapy. The upper limit to the age of onset of pyridoxine-dependent seizures is
unknown; no one has studied this question.”

**Selenium**

Selenium is a structural component of and a co-factor for the antioxidant glutathione
peroxidase. Glutathione peroxidase is part of the defense mechanism of the body against
oxidation. If there were selenium depletion this would lower glutathione levels, which would
cause a higher susceptibility of the delicate fats that are part of cell membranes causing
membrane and brain cell damage. The failure of protection against oxidative stress due to
selenium depletion increases the oxidative stress on important firing neurons in the brain.

A study in the journal Neuropediatrics (10) discusses the cases of 2 children with severe
seizures. The first patient has suffered from seizures from 4 days old until the visit to the study
authors’ hospital at 5 1/2 months. The second patient had seizures from 11 months until the
visit to the hospital at 3 years and 9 months old.

The first patient showed an abnormal EEG pattern with “large slow activities mixed with
smaller amplitude polyspikes and marked asymmetry.” The child was started on oral selenium
supplements and within two weeks, “the daily number of seizures was reduced by 75% while
the duration of seizures regressed dramatically from more than 30 minutes duration to less
than 5 minutes. The focal sharp waves and spike-wave activity on the EEG recordings
disappeared.” The authors note that the patient’s condition may have been aggravated by the
low selenium content of the infant formula he was using.

The second patient had recurrent petit mal seizures that “recurred and became uncontrollable
despite benzodiazepine drips or high doses of dexamethasone.” He was started on an oral
supplementation of selenium rich lactobacillus (a probiotic bacteria) referred to as “Se-Lb”.
After two weeks on this supplement his glutathione levels became nearly normal and “petit mal
status and mycolonic seizures together with generalized spike-wave activity in the EEG
stopped completely.”

After selenium treatment was stopped his glutathione levels dropped and seizures started
again. Selenium treatment was restarted which resulted in “marked clinical improvement with
virtually complete cessation of myoclonic seizures and petit mal.”

The authors conclude that, “we think that children with epilepsy who develop intractable
seizures should be screened for the possibility of selenium deficiency as a trigger of neuronal
membrane damage and instability. Inborn errors of selenium uptake or metabolism could be
involved in the pathogenesis of intractable epilepsy, Alpers disease (a progressive
degenerative disease of the central nervous system that occurs in infants and children) or
progressive neuronal degeneration of childhood.”

**Carnosine**

Carnosine (β-alanyl-L-histidine) is a dipeptide, which is a combination of two amino acids of
alanine and histidine. Carnosine is an antioxidant that stabilizes cellular membranes protecting
them from damage by free radicals and is found in large amounts in the muscle and brain of
mammals. Carnosine also appears to help to modulate zinc and copper into neuronal cells
near GABA receptor sites potentially helping with the epileptic inhibition effect of GABA.
Carnosine appears to be non-toxic and studies involving carnosine have shown no side
A study in the journal Neuroscience (11) examined the effects of carnosine on seizures in rats. In that study the authors found that carnosine decreased seizure duration as well as the amount of time between seizures. “Carnosine could easily penetrate across the BBB [Blood Brain Barrier] and has few side effects. Therefore, it is likely that carnosine might be a new potential anticonvulsant drug for clinical therapy of human complex partial epilepsy in the future.”

Past research has shown that there is an association between EEGs and autism. One in three children with autism suffer one or more seizures by adolescence. A double-blind, placebo-controlled study in the Journal of Child Neurology (12) examines the effect of L-carnonsine supplements in children with autism. They studied 31 children with autistic spectrum disorders over 8 weeks using 800 mg daily of L-carnosine.

The authors of the study found that, “the results of this study suggest that supplementation with carnosine can significantly improve receptive speech, socialization, and behavior in children with autistic spectrum disorders.” In addition, “if, indeed, carnosine acts to affect GABA bioavailability, it may likely alter the seizure threshold or GABA function.”

**Diet**

During a previous study that analyzed the effect of an oligoantigenic diet to treat migraine and hyperactive behavior in children the authors noted those children with epilepsy often had their seizures stop during the study. An oligoantigenic is a “few foods” diet in an attempt to eliminate foods that might be causing a reaction in a person. A study based on this observation in Journal of Pediatrics (13) examined the role of diet in 63 children with epilepsy.

All the patients were put on a restricted diet for 4 weeks. Normal daily helpings of excluded foods were reintroduced one at a time at the rate of one per week. If symptoms reoccurred that had disappeared in the initial stages of the diet, then it was eliminated, otherwise it was incorporated back into the diet.

Although none of the 18 patients with epilepsy alone improved, 40 of the 45 patients with migraine and epilepsy did improve in one or more symptoms. All patients, except for one, reacted to at least two foods. “During follow-up of 7 months to 3 years on diet, 25 of these patients achieved complete control of seizures, four other had seizures only with upper respiratory tract infections, and seven had seizures less than half as frequently as formerly; in all these patients other symptoms also improved. In four other patients, other symptoms improved but seizures did not.” Also, “19 of the 25 patients whose seizures stopped have phased out anticonvulsant therapy, and five are still doing so.”

A large number of foods caused reactions in the different patients. The foods that caused the most seizures and symptoms were: cow milk (seizures: 37%, other symptoms: 63%), cow cheese (seizures: 36%, other symptoms: 55%), citrus fruits (seizures: 29%, other symptoms: 50%), wheat (seizures: 29%, other symptoms: 49%), and food additives (seizures: 25%, other symptoms: 58%).

In 16 of the patients EEG was repeated at least 1 month after the study started. “There was no change in five of six patients who previously had had multifocal discharges, whereas normalization of the EEG occurred in one. The EEG improved markedly in there of six patients...
whose previous EEGs had displayed unilateral epileptic activity. The EEG of one of the two with moderate abnormalities became normal.

**NutraSweet or Aspartame**

The artificial sweetener aspartame or NutraSweet was introduced to the market in July 1983 and has become pervasive in the food supply. Although some studies have shown it to be safe, large numbers of adverse reactions are still reported. According to a report in 1984, two-thirds of reactions involve neurologic or behavioral symptoms, particularly headaches.

A study in the journal Biological Psychiatry (14) examined the effect of aspartame on 40 patients with unipolar depression along with 40 patients without a psychiatric history. The study was double-blinded and placebo controlled. Patients either received a placebo or aspartame capsules roughly equivalent to 10-12 cans of diet soda.

The study was halted early by the Institutional Review Board [IRB] because of the severity of reactions within the group of patients with a history of depression. During the study 3 of the patients reported they felt that had been “poisoned”. One of the three to use the term “poisoned” experienced “a conjunctival hemorrhage for the first time in her life during the aspartame week. These events led the Chairman of the IRB to halt the project.”

Some of the more severe symptoms noted are as follows: headache (placebo: 63%, aspartame: 88%), nervousness (placebo: 25%, aspartame: 63%), trouble remembering (placebo: 0%, aspartame: 63%), nausea (placebo: 25%, aspartame: 100%), depression (placebo: 38%, aspartame: 75%), insomnia (placebo: 38%, aspartame: 50%), and temper (placebo: 0%, aspartame: 25%).

The authors concluded that, “a significant pattern of reactions to aspartame emerged in patients with a history of major depression. It would appear that individuals with mood disorders are particularly sensitive to this artificial sweetener; its use in this population should be discouraged.”

A study in Environmental Health Perspectives (15) also examined the effects of aspartame on the brain. The authors note that “doses of aspartame which are within the range actually consumed by some people can affect the chemical composition of the brain, and may thereby contribute to particular CNS [Central Nervous System] side effects, including headaches, inappropriate behavior responses, and seizures.”

The authors performed a study on rats to determine the effects that aspartame might have on the human brain. They pretreated the animals with various doses of aspartame 1 hour before exposing them to a seizure inducing treatment. At 1000 mg/kg [milligrams per kilogram] 78% of the animals had seizures, at 2000 mg/kg 100% of the animals had seizures. Only 50% of the animals that were pretreated with water had seizures.

The authors note that, “it is possible that doses of the sweetener [aspartame] that cause a sufficient increase in brain phenylalanine might increase seizure frequency among susceptible humans, or might allow seizures to occur in people who are vulnerable but without prior episodes.”

**Pesticides**
Pesticides include various agents devised to control a wide number of pests. A 1997 report by the Environmental Protection Agency (EPA) estimates annual usage of 975 million pounds of pesticide active ingredients. Because the calorie and fluid intake of children are much higher relative to body weight than adults, small amounts of pesticides considered safe for adults could result in unsafe exposures in children.

A study in Pediatric Clinics of North America (16) discusses the effects of various pesticides on children. Cholinesterase-inhibiting insecticides are the most commonly used pesticides. “Central nervous system toxic signs and symptoms include headache; nausea and vomiting; dizziness; respiratory depression; mental status changes, including coma; and seizures.” Several studies have provided evidence that children display different symptoms than adults. “In these studies, children were more likely to present with mental status changes, including coma. They were also more likely to present initially with seizures.”

Organophosphates produce toxicity by inhibition of the cholinesterase enzyme. The result is an accumulation of the neurotransmitter acetylcholine. This causes a prolonged firing of neurons in the brain. There is a wide range of toxicity for organophosphates and many of the more toxic ones are absorbed right through the skin.

“Organophosphates have been thought for many years to be associated with subtle, long-term neurologic effects years after acute and sub acute exposure. Individual case reports first documented patients with reported headaches, blurred vision, memory, depression, irritability, and problems with concentration.”

A case history of a child in the journal Pediatric Emergency Care (17) discusses organophosphates. “Organophosphate poisoning continues to be a relatively common occurrence, especially in rural areas of the United States. Insecticides fall into four classes: organophosphates, carbamates, organochlorines, and pyrethroids. All compounds can precipitate seizures except for carbamates, which have poor central nervous system (CNS) penetration.”

Organically grown foods reduce the amount of pesticides on food and in the environment. A recent study, reported in Medical News Today (18), by researchers at Emory University examined the effects of an organic diet on children. “Immediately after substituting organic food items for the children’s normal diets, the concentration of organophosphorous pesticides found in their bodies decreased substantially to non-detectable levels until the conventional diets were re-introduced.”

Wrap Up

Omega-3 fatty acids are extremely important in a properly working brain. These omega-3 fatty acids through EPA and DHA supplementation appear to have anti-epileptic effects in animal studies and in a dramatic but small clinical trial. Vitamin E protects the membranes of brain cells dramatically reversing seizures. The B vitamins (B1 and B6) are important in the formation of GABA, a brain “quieting” neurotransmitter, also with dramatic results. Selenium is important in the formation of glutathione, which also helps protect the brain from oxidation. Carnosine also plays a role in the GABA story. A diet free of certain items (often dairy, wheat, food additives, and citrus) is important in controlling seizures. Aspartame causes neurologic problems in certain individuals and may be a contributing factor in seizures. Pesticides, which are pervasive in our environment and in our bodies, are also a piece of the puzzle.
Other factors, such as lead, mercury from the environment and vaccines, quercetin (a bioflavinoid), vitamin C, and more also play a role in the health of the human brain and can also have an effect on seizures.

These studies mentioned here and many more are all important pieces of the puzzle. Each study was designed and executed by a large number of dedicated and thoughtful scientists. But what is often lacking is a synthesis of these pieces of information. Combining all the mentioned approaches into a comprehensive protocol: omega-3, vitamin E, vitamin B1, vitamin B6, selenium, carnosine, proper diet, avoidance of aspartame, pesticides, and more could only produce spectacular results.

SOURCES:

(1) Diet Enriched with Omega-3 Fatty Acids Alleviates Convulsion Symptoms in Epilepsy Patients, Simon Schlanger, Meir Shinitzky, and Daniel Yam, Epilepsia, January, 2002, Vol. 43, No. 1, pp. 103-104


(3) High atmosphere pressures; physiological effects increased and decreased pressure; application of these findings to clinical medicine, A.R. Behnke, Annals of Internal Medicine, 1940, Vol. 13, pp. 2217-2228


(9) Postneonatal Vitamin B6 Dependent Epilepsy, Steven B. Coker, MD, Pediatrics, August 1992, Vol. 90, No. 2, pp. 221-223


(18) Organic Diets Lower Children’s Dietary Exposure to Common Agriculture Pesticides, Medical News Today, September 30, 2005

Comments:

(Your Comment will be reviewed before posting)
Left by: Anonymous on Oct. 28, 2005
Subject: Press Release
SUGARPLUMS WITHOUT ASPARTAME ARE SAFER TREATS

Its the sugarplum time of year, with myriad Candies and Sweets in bright enticing colors and flavors. Therein lies the hazard, for our Fatal Drugs Allowed folks, the FDA, has blessed several poisons as sugar substitutes for holiday confections. As the Big Bad Wolf would say, The better to murder you with, my Dear.

Under labels as Sugar Free, Low Cal, and Diet! thousands of tons of deadly aspartame [NutraSweet/Equal], Neotame and Splenda will be substituted for sugar. All in the name of good health, of course. The chemicals are a boon to candy & confection makers because:

They’re a lot cheaper to use than sugar. Spoilage is lower because bacteria wont eat them, They tend to be addictive and increase consumption Sugarless is magic for media manipulation!

Before you load a shopping cart with these kid killers you should know what impartial scientific investigation by renowned researchers reveals:

ASPARTAME: To a Senate hearing Dr. Louis Elsas, Professor of Pediatrics [Genetics] at Emory University, testified: I have spent 25 years in biomedical sciences trying to prevent birth defects caused by excess phenylalanine. And therein lies my basic concern, that aspartame is in fact a well known neurotoxin and teratogen [causes birth defects] which, in some as yet undefined dose, will both reversibly in the adult and irreversibly in the developing child or fetal brain, produce adverse effects. Testimony to the Labor & Human Resources Committee, 11/3/87
Dr Miguel Baret of the Dominican Republic removed cows milk from 360 childrens diets as it has a specific protein that can cause diabetes, especially in children. Instead they drank juice laced with aspartame, and most developed abnormal restlessness, lack of concentration, irritability and depression. When removed: The results were astonishing. Their symptoms disappeared in 4-6 days in ALL of them!

Diabetic specialist H J Roberts MD, FACP has a data base of 1,300 victims. In his 1,038 page Aspartame Disease, An Ignored Epidemic are hundreds of case histories. He says If a child is diabetic aspartame will drive blood sugar out of control, destroy the optic nerves and cause diabetic convulsions. He was named The Best Doctor in the United States by a doctors’ magazine. www.sunsentpress.com

The Senate Congressional Record printed a long list of objections by the National Soft Drink Association against aspartame approval for soft drinks which said: Especially worrisome are reactions involving the brain, including seizures, incapacitating headaches, dizziness, behavioral changes and depression there is concern, too, over the possibility that in some consumers, aspartame may cause subtle disruptions in the balance of brain chemicals that influence mood, alertness and hunger. [May 7, 1985 page S5493]

A three year study of aspartame carcinogenicity by the European Foundation for Oncology was released July 14, 05 which concluded: aspartame is capable of inducing lymphomas and leukemias in female rats. 1,800 rats were observed until they died. The report identified the chemical as a multi-potential carcinogen. Neurosurgeon Russell Blaylock, MD, one of the world’s leading authorities on aspartame neurotoxicity, extensively reviewed the Soffritti report. "This study should terrify mothers and all those consuming aspartame sweetened products. This was a carefully done study which clearly demonstrated a statistically significant increase in several types of lymphomas and leukemias in rats. Both of these malignancies have increased significantly since the widespread use of aspartame." Dr. Blaylock is author of Excitotoxins: The Taste That Kills, www.russellblaylockmd.com

Ralph Walton, M.D., Psychiatrist, reports: "We have known for years that when aspartame is ingested with a carbohydrate rich meal the usual physiologic increase in tryptophan is blocked, while brain phenylalanine and tyrosine concentrations are increased. These changes in amino acid neurotransmitter precursors could alter indoleamine/catecholamine balance, and thus have a profound effect on mood and cognition - depressed mood, anxiety, dizziness, panic attacks, nausea, irritability, impairment of memory and concentration."

NEOTAME The results are in, aspartame is poison. Monsantos patent on the product expired several years ago, so they introduced a new model, just as toxic, don't be fooled. SPLENDA Wonderful if you don't care about staying healthy and want to slowly poison your kids. This venom is simply chlorinated sugar that destroys the immune system among other blessings. Why try a new way to die?

80% of FDA consumer complaints on food additives were about aspartame until they slammed the complaint window. Their last official report tallied more than 10,000 volunteered complaints from American consumers and a list of 92 symptoms including four types of seizures, blindness, sexual dysfunction and death. A parade of FDA officials including four Commissioners hired into the aspartame business which always has a job for an FDA buddy!

Jack Samuels, President, Truth in Labeling Campaign has sincere concerns: "The problem with MSG in candy is that it is usually hidden in an ingredient that the general public does not recognize as MSG. Parents should be aware that much candy distributed to children contains aspartame and one or more sources of MSG. Aspartame and MSG are known neurotoxins that cause adverse reactions in children from mild and transitory to debilitating, life threatening and fatal. Under FDA regulations, aspartame should be labeled as an ingredient on all candies. For a list of the most common labeled ingredients that contain MSG, go to www.truthinlabeling.org/hiddensources.html ."

FDA is funded by the business they regulate. They're actually paid to process and approve applications. So whom do you think FDA works for, you or the money? Think of FDA as Big Pharmas Branch Office in Washington. FDA approved VIOXX, then it killed 55,000! Can you believe 55,000 heart attacks and sudden occurred before our overpaid experts figured out why? The problem is FDA embarrassment. FDA is humiliated when they have to admit they rubber-stamped another poison, so everybody hides while the bodies pile up!

Massacres are remembered with a cry: Remember the Alamo! Remember the Maine! Remember Corrigador! When next you shop, remember VIOXX, and ditch the artificial sweeteners. Let your sugarplums be sugared. Just don't eat the whole box.

This year is more important than others because the FDA has avidly approved even more poisons for
manufacturers to pour into our food, and this chemical feast is a plague international, for whatever FDA blesses becomes that old time religion for other nations who assume it must be harmless. In case there’s any hesitancy overseas you can be sure Big Pharma is right there with a fat checkbook to lubricate the process. The cumulative effects destroy the brains and bodies of children world wide. Incredible, heinous, savage, vicious mindless cruelty.

Greedy Big Pharma is arrogance personified. Like high priestly wizards they expect government regulators will kowtow in humble submission to their supreme wisdom. Are they not the embodiment of Science? Do they not bring blizzards of phony research records assuring the beneficence of VIOXX/aspartame/whatever? And are there not golden employment opportunities for those who serve them well?

Once there was a Delaney Amendment that forbid adding carcinogens to food. Honest FDA toxicologist Dr. Adrian Gross testified to Congress that aspartame violated this law because “without a shadow of a doubt” it produces cancer. So what do you do when you break a law you don’t like? Repeal it! And they did!

FDA allows for Citizens Petitions, and the statute requires them to answer. Almost four years ago I petitioned them to ban aspartame and furnished heavy documentation. FDA’s letter advised me that they have other matters to tend to of higher priority. Translation: the law only works against those helping people with natural cures. We’re above the law, so Big P gets a free pass with their bottomless bank account; http://www.wnho.net/citizens_aspartame_petition.htm

A new example of FDA’s blatant disregard for the Americans and contempt for consumers is a proposed standard for ice cream that will permit imported milk from sheep, goats, yaks, water buffalo, etc to replace cow’s milk in ice cream, with only a side-panel: “Made with ______ milk.” Call it “mystery milk.” Sharp-eyed ingredient readers will know what they’re eating; but as for the rest of us: what you don’t know may not hurt you … this time. If you order it in a restaurant no one will know. FDA doesn't give a flip what you eat, as long as its cheaper to make or full of chemicals.

What regulation will FDA next change to hide toxins and destroy us? How about no regulation at all? To be marketed the first half of 2006 is SENOMYX, a biotech food enhancer. It will be unlabeled and not require FDA approval. Says Jack Samuels: “I'm scared to death of this Senomyx product. It apparently uses the same neurologic pathways as does MSG. My logic tells me that it may very well cause reactions similar to MSG, but only time will tell. The MSG replacer is to be the company's first product." A witches brew!

Today all eyes are on New Mexico where Citizen Stephen Fox has successfully petitioned the New Mexico Environmental Improvement Board to hold a hearing on banning aspartame because it violates state and federal adulteration statutes. Viva New Mexico! The hearing is scheduled for five days in July 2006. http://www.wnho.net/viva_new_mexico.htm http://www.wnho.net/letter_abq_journal.htm

Many New Mexicans are alarmed and concerned over the aspartame issue, including:

Grant La Farge, M.D., Santa Fe Pediatric Cardiology, 505 982 - 7661

Ken Stoller, M.D., Pediatrics, Assistant Clinical Professor, UNM School of Medicine & Founder, New Mexico Hyperbaric Medical Center 505 820 6234

Stephen Fox, 505 983-2002, Author of Legislation to create New Mexico Nutrition Council and Petitioner to New Mexico Environmental Improvement Board to ban aspartame. Email Stephen@santafefineart.com

Leland Lehrman, 505 982-3609, Founder, Mother Media, Lamy, New Mexico

Dr. P. Bradley Carey, President, World Natural Health Organization, www.wnho.net

The Honorable Jerry Ortiz y Pino, New Mexico State Senator 505 263-3717

Dr. Betty Martini, Founder, Mission Possible Intl, 9270 River Club Pkwy, Duluth, Georgia 30097 www.wnho.net and www.dorway.com

Left by: Anonymous on Oct. 24, 2005
Subject: does this work for siezures that are myoclonic?
Left by: Anonymous on Oct. 22, 2005
Subject: The Shocking Story of the World's Best Selling Sweetener
With regard to this article aspartame is a seizure triggering drug as proven by a pivotal study that approved the toxin -RAO - its on www.dorway.com Note FDA report on that page admitting to 92 documented symptoms including 4 types of seizures.

Today there is even an aspartame documentary, Sweet Misery: A Poisoned World, www.docworkers.com

Here is the most recent article on aspartame in the prestigious Ecologist, 18 page cover story including the new Italian study showing aspartame triggers malignant brain tumors, lymphoma and leukemia. http://www.wnho.net/the_ecologist_aspartame_report.htm

Other updates on www.wnho.net