A NATURAL TREATMENT AND SUPPORT FOR AMYLOIDOSIS

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Amyloidosis is a disease characterized by amyloid proteins abnormally deposited in various tissues in the body. A protein is amyloid if due to an alteration in its secondary structure; it takes on an aggregated insoluble form similar to the beta-pleated sheet.

Approximately 60 different amyloid proteins have been indentified, and at least 36 have been found to be involved in some way with a human disease.

Amyloidosis can be very difficult to diagnose especially in the early stages. Symptoms very widely depending upon where in the body the amyloid deposits accumulate.

Many patients go undiagnosed. Amyloidosis can affect so many internal organs, and the symptoms can resemble so many other ailments that other problems are often suspected.

Amyloidosis can be localized or systemic. The localized form only affects one organ or one part of the body. It does no damage to the rest of the body. Two common conditions associated with localized Amyloidosis are Type 2 diabetes where the amyloid protein builds up in the pancreas and Alzheimer's where the amyloid proteins build up in the brain.

Systemic Amyloidosis can cause damage to any organ in the body. Often a variety of unrelated organs are involved, and death can be caused by toxic activity in any of these organs.

The heart is often involved, and there can be a wide variety of symptoms in the heart ranging from arrhythmia and irregular heartbeat to congestive heart failure. The respiratory tract can be affected. The spleen can enlarge and sometimes rupture. The gastrointestinal tract is sometimes affected causing diarrhea, vomiting and hemorrhaging.

Conventional treatment for Amyloidosis has consisted mostly of steroids and chemotherapy. Stem cell transplants are also sometimes done. All of these treatments have usually resulted in limited success.

An important mouse study involving the use of DSMO was conducted by Mordechai Ravid, Igal Kedar, M. Greenwald, and in Israel. Amyloidosis was induced in these mice by injecting them daily for 18 days with vitamin-free casein. They were then studied for the following 60 days until they were killed and autopsied.

The urine of the mice treated with DMSO showed broken up amyloid fibrils starting shortly after the start of DMSO treatment. When the DMSO treated mice were autopsied their livers were completely free of amyloid deposits. The livers of the control mice that were not treated with DSMO were loaded with amyloid. This study showed that DMSO dissolved the amyloid protein.

Other studies have shown mixed results. However, no studies have shown any adverse reactions when treating Amyloidosis with DMSO. Therefore, there is no reason not to treat all cases of Amyloidosis with DMSO. This does not mean that DMSO should be the only treatment. DMSO could be combined with any other treatment that may be used allowing such other treatment to work more effectively.

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