

Feel Better!

CELEBRATION  
OF  
HEALTH  
ASSOCIATION

NEWSLETTER  
WINTER



2016

**L. Terry Chappell, M.D.**

122 Thurman St.  
Box 248  
Bluffton, OH 45817  
800-788-4627  
419-358-4627

[www.healthcelebration.com](http://www.healthcelebration.com)  
[www.terrychappell.blogspot.com](http://www.terrychappell.blogspot.com)

**COHA NEWSLETTER** is a communication with our patients and others exploring the potential of progressive medicine.

**Dr. Chappell** is a family physician specializing in nutritional and preventive medicine. His office, COHA, offers traditional family health care and services, plus innovative treatments for "hard-to-treat" medical problems.

**Publisher:** L. Terry Chappell, M.D.

**Layout design:** Betsey Angus

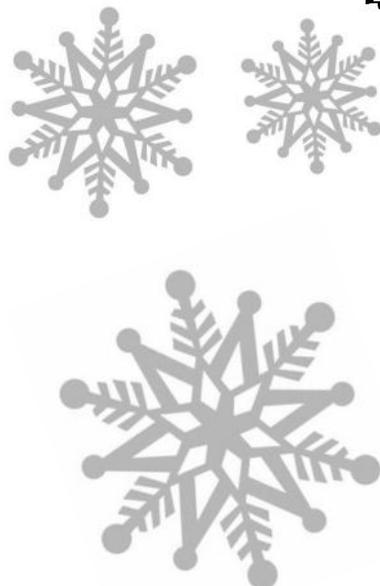
From Dr. Chappell's Desk

Welcome to 2016! As usual, much is happening at COHA. We are sorry to report that our Nurse Practitioner, Rae Neal, has gone on to the next stage of her career. We are grateful for the year she spent with us. She added a lot. During this next year and beyond we are re-implementing a team care approach that patients really liked earlier in the year. We have hired Emily Ulrey, RN, so that we can be fully staffed for nurses to guide patients through their office visits with me, and then complete the treatment plans with improved continuity of care. Emily will also be working with Shelley downstairs with IV treatments. She has had ten years of experience in the ER, and we are delighted to have her join our staff. She grew up in Bluffton and lives only a few blocks away. As many of you know, Bob was hospitalized for quite a while this past fall. Thank God he is now recovering at home. We look forward to when he is completely healed and can return to work.

This issue covers some emerging advances for women's health and the five protocol categories for brain issues at COHA. There is much that can be done to optimize brain function, and we are pleased to be able to offer some very effective therapies to help patients achieve high-level wellness.

To your health,

L. Terry Chappell, M.D.



Dear Celebration of Health Association; Dr Chappell, staff, and patients,

I'm writing today to thank you for accepting, nurturing, and educating me. Your knowledge, insight, and, experience will continue to benefit me on my journey in the world of health care. I am forever grateful to you for this opportunity to share and work with a great group of people.

It is unfortunate but there are reasons that make leaving COHA at this time the right choice for me. Thank you again for all the kindness you have shown by trusting and working with me toward lifelong health.

I wish you all the best and continued happiness.

I will remember you!

T Rae Neal CNP

## Women's Health—the Future is Rapidly Approaching

A group of European feminists call themselves GynePunks. They believe that the roots of medicine have exploited women in ways that continue today. They embrace the concept of do-it-yourself. For example, Gaudi Labs in Switzerland has developed open-source downloadable software for 3D printed speculums. Women will soon be able to insert the speculum into the vagina, visualize the cervix, and apply a little vinegar. If the cervix turns white, the “pap test” is positive and further care is needed to treat precancerous lesions.

Home test kits for ovulation, HIV detection, urinary tract infections, and genetic tests are available now or soon will be. Saliva or urine pH strips have long been used to determine if a person's body is alkaline, which has importance for allergy or cancer treatments. Test strips can also be used to detect levels of vitamin C, zinc, and chromium in the body.

## New Breast Screening Guidelines

For asymptomatic women, the American Cancer Society now recommends annual mammograms between the ages of 45 and 54. After that, screening mammograms are recommended every other year until a woman's life expectancy reaches less than ten years, when routine screening is stopped. Clinical breast exams for asymptomatic women by the doctor or by the patient are not recommended at any age. A major change is that screening decisions should be individualized, based on a woman's values and preferences, not just her underlying risk. The guidelines acknowledge potential risks of getting mammo-

**Dense breast tissue is very common and is not abnormal. However, dense breast tissue can make it harder to find cancer through mammogram. Also, dense breast tissue may increase your risk for breast cancer. Thermography can pick up abnormalities in dense breast tissue.**

Many women have read the study results that have shown that women who receive regular mammograms do not live longer than those who have not. In my opinion, thermography is a better option for breast screening, especially if the primary goal is prevention, rather than detection of cancers that are already present.

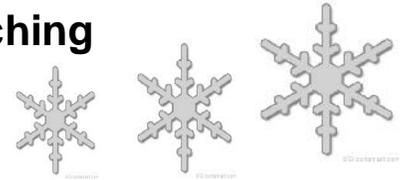
Certain diseases such as chronic fatigue, fibromyalgia, irritable bowel syndrome, sub-clinical hypothyroidism, and hormone imbalance are more common in women. Other diseases, such as coronary artery disease, have different symptoms in women than in men. Conventional physicians have often lacked effectiveness in treating these conditions. Many women continue to suffer from such problems, because the drugs prescribed are ineffective or have significant side effects. A natural approach is much more effective, in my experience. Un-

grams including over-diagnosis, over-treatment, false positives, added imaging studies, and unnecessary biopsies. I would add the possible dangers of combining compression with radiation. The most recent data from JAMA found that 85% of women who died in their 40s and 50s from breast cancer would have died regardless of whether they had mammograms or not.

My recommendations are quite different. I suggest annual screening thermographies, beginning at age 35, or younger if symptoms develop. If the vascular pattern on thermography indicates fertile tissue for cancer to grow, I prescribe nutrients to reduce that risk. Clinical breast exams are indicated if there is any abnormality on

## Estrogen is Back!

The Endocrine Society has swung the pendulum back. For women, hormone replacement is again recommended as a treatment for hot flashes, as long as there are no contra-indications. Added benefits might include improved mood, decreased sexual problems, and improved sleep (one-third of women in midlife have chronic insomnia). I use bio-identical hormones whenever possible, and I prefer to balance estrogen with natural progesterone, even if the woman has had a hysterectomy. I believe that natural hormones from plants are just as effective and much safer than synthetic drugs such as Provera and Premarin.



fortunately, herbs, homeopaths, and a healthy diet are rejected by most doctors. Some physicians refuse even to discuss these measures with their patients.

Women took a big step forward in the 1960s and 70s with books like the “Boston Women's Health Book Collective” and “Our Bodies, Ourselves.” It is now time for the next step.



thermography. Breast screening, clinical breast exams, and pap smears are recommended annually for women who are taking hormone replacement. Mammograms can be done according to the ACS guidelines if the patient prefers. However, thermography should be considered in addition to mammograms for prevention, which is not offered by mammograms.

**Thermography can detect areas of asymmetrical heat 7 years before a mammogram can identify a cancer. This allows time, through diet, weight loss, lifestyle changes and breast-specific supplements, to heal the evolving abnormality and quite possibly, completely avoid the diagnosis of breast cancer.**

**Tenpenny Newsletter 10/14/2015**

For men, low-dose testosterone can be prescribed to increase libido. Several other drugs might help this problem by affecting serotonin and/or dopamine, including bupropion, trazadone, and Viagra. A more natural approach might be to measure the neurotransmitters with a urine test. Various combinations of amino acids can improve these neurotransmitters in the brain, which might help both depression and sexual satisfaction. Oxytocin is a compounded hormone that also might improve libido.

# Power Protocol B—Brain

The Better Brain Book by David Perlmutter

## Description of Protocol B

Your brain and nervous system direct the mechanisms that enable you to be a well-functioning human being. One-hundred million persons in the U.S. develop significant brain disorders such as the four “a’s:” autism, anxiety/depression, addiction, and Alzheimer’s disease, during their lifetimes. Strokes, peripheral neuropathy, multiple sclerosis, ALS, and Parkinson’s disease can ravage the nervous system. Functional disorders like post-traumatic stress disorder, phobias, and brain fog can be very disruptive. In recent years, neuroscience and psychiatry have produced more accurate ways to recognize and classify these disorders, but the therapies offered are painfully inadequate. Nutritional and complementary approaches often get better results.

One of the most common symptoms we hear is “brain fog.” This is Category 1 of our brain disorders. Patients know exactly what I mean when I ask whether they have it. Brain fog is a combination of fatigue, toxicity, and allergies. Usually there is a yeast imbalance in the digestive tract. When patients eat carbohydrates, especially of the sugar variety, yeast thrives and releases toxins. One of the most common toxins produced is acetaldehyde, which is a breakdown product of alcohol. It causes hangovers, even without drinking alcohol. Food allergies, low thyroid, and adrenal stress can all make this worse. A yeast imbalance is easily treatable with a low carbohydrate diet, probiotics and anti-yeast medications or supplements.

Category 2 of our brain disorders includes anxiety, depression, and post-traumatic stress disorder (PTSD). These are common complaints in any primary care medical office. In addition to our history and physical exam, we often collect a urine specimen for neurotransmitters. Most patients with these problems have an imbalance, which we can correct biochemically by prescribing oral amino acids and other nutrients. Sometimes it is also helpful to do a heart rate variability test to assess the balance between the sympathetic and parasympathetic nervous systems. A trained medical therapist can tap on specific acupuncture points to increase parasympathetic activity. This can have a profound positive effect, even for PTSD and phobias. A low-dose laser can also be helpful, as can the Heart Math computer program that uses biofeedback, and a micro-current machine to accomplish the same thing. The latter three instru-

ments can be purchased for home use. Homeopaths and herbal preparations, such as SAME, Anxiety NatRelief and 5-HTP, can often be as effective as prescription drugs without the side effects. Any of these modalities can be very effective, but the doctor has to find the best one for each patient.

Addictions fall into Category 3 of our brain disorders. For simple addictions, we use a great supplement called Crave Arrest. When a patient has a more serious problem and needs to come off alcohol or medications, we work with a group in California that supplies us with an individualized combination of intravenous amino acids. The IVs must be administered almost daily for two weeks. Most patients detox much easier with IV amino acids than with high-dose conventional medications in an inpatient setting. Long-term results are more favorable, as well.

Mild cognitive impairment and Alzheimer’s disease fall into Category 4 of our brain disorders. Many patients are concerned about memory loss and Alzheimer’s disease, due to personal memory changes and/or a positive family history. The first test that should be ordered is a challenge test for toxic metals, especially for lead, aluminum and mercury. If one or more is elevated, oral or IV chelation therapy can remove the metals effectively. The IV version also helps improve circulation and the oxygen supply to the brain. Other ways to improve oxygen are deep breathing, exercise while breathing oxygen through a mask, improving sleep apnea, hyperbaric oxygen treatments, and slowly sending ozone from a bag through a tiny tube into the rectum. Nutrients including phosphatidyl choline (which is commonly given intravenously in Europe, along with glutathione), acetyl L-carnitine, phosphatidyl serine, NAC, and thiamine can improve memory. The most effective natural oral preparations in my experience are high-dose “Prevagen” and a new one called “Ultimate Focus.” The versions that are available only through physician offices are stronger than those available over-the-counter. Weekly methyl B12 shots can sometimes be very helpful. We use weekly cold laser treatments around the skull to further improve circulation and help memory. Genetic testing can be done for Alzheimer’s disease, but I usually do not recommend it because variations in genetic expression make it impossible to estimate

when or if the Alzheimer’s gene will be activated. A simple family history is usually quite sufficient. Low-dose naltrexone (LDN) can be compounded and used for various neurologic problems, including Alzheimer’s disease.

Other chronic neurologic conditions such as multiple sclerosis and Parkinson’s disease can respond to B12, Low-Dose Immunotherapy (LDI) (see Protocol A), metal detox with chelation, and IV phosphatidyl choline with glutathione. High-dose vitamin E and Coenzyme Q10 might also be helpful. Music therapy is very effective in improving the gait of patients with Parkinsonism.

Our Category 5 brain disorder group refers to Autism Spectrum Disorder. There are many conventional therapy programs for autism and these are fine, as long as they do not involve mind-altering drugs. Integrative physicians like myself have many other therapies that can be very effective in some, but not all patients. We like to test for food allergies and toxic metals and treat the abnormalities we find. Protocol A contains Low-Dose immunotherapy (LDI) treatments for autism, which sometimes offers dramatic improvement. Methylated vitamin B12, low-dose naltrexone, Sensitivity Reduction Training (SRT) for sensitivities, tapping on acupuncture points, essential fatty acids and other nutrients, yeast treatment, and homeopaths for mental clarity all are potentially effective for aspects of this group of disorders.

Despite the studies from conventional medicine that contend that vaccines have nothing to do with the development of autism, we frequently hear from parents that the devastating symptoms of this disorder begin soon after an immunization. It could be that those unfortunate children that become afflicted are genetically prone and that a vaccine or heavy metals from the mother transmitted across the placenta activate the gene.

Continues on next page...

Getting started with Protocol B—Brain (brain fog, anxiety, depression, addictions, phobias, PTSD, memory loss, autism)

Brain disorder/symptom questionnaires

History and physical exam

**Category 1**—Brain fog—treat the underlying condition (yeast, thyroid, allergies, adrenals)

**Category 2**—Anxiety/Depression, phobias, PTSD—test and treat neurotransmitters, tap on acupuncture points, Heart Math

**Category 3**—Addictions—IV amino acid.

**Category 4**—Mild Cognitive Impairment and Alzheimer’s disease—Chelation for metal toxicity and IV phosphatidyl choline with glutathione, cold laser

**Category 5**—Autism spectrum—no meds are safe and approved. I like food allergy testing and treatment, metal detox, nutrients, B12 injections, homeopaths, and low-dose naltrexone.

Treatments for the five categories of brain disorders are very safe.

Cost—Moderate

Additional treatment options—laser and the Kaufman technique for PTSD. Micro-current, counseling, and exercise for Category 2. Acupuncture for Category 3.

Useful supplements--SAMe, 5-HTP, Anxiety NatRelief for Category 2. Crave Arrest for Category 3. Prevagen or Ultimate Focus (doctor’s strength) for Category 4. Also for Category 4, Acetyl-l-carnitine, phosphatidyl serine and phosphatidyl choline, thiamine, NAC, glutathione, low-dose Naltrexone, methyl B12 injections.

Medications with common side effects—anti-depressants and tranquilizers (sedation, fatigue, dependence, dulled emotions, decreased sex function) for Options 2 & 3.

Meds for chronic neurologic diseases have minimal benefit with an extensive list of potential side effects.

Name \_\_\_\_\_

Date \_\_\_\_\_

**COHA Brain Questionnaire—Anxiety**

\_\_\_ In the previous two weeks, have you experienced:

\_\_\_ Nervousness, anxiousness, being on edge?

\_\_\_ Inability to stop worrying?

\_\_\_ Restlessness, trouble relaxing?

\_\_\_ Irritability?

\_\_\_ Fear of something awful happening?

**COHA Brain Questionnaire—Depression**

\_\_\_ In the previous two weeks, have you experienced:

\_\_\_ Little interest or pleasure in doing things?

\_\_\_ Feeling down, depressed, or hopeless?

**COHA Brain Questionnaire—PTSD**

To what degree have you recently been bothered by a post-traumatic experience?

\_\_\_ Mild \_\_\_ Moderate \_\_\_ Severe

**COHA Brain—CAGE Questionnaire for Addictions**

Have you:

\_\_\_ Felt a need to cut down on your drinking (or substance abuse)?

\_\_\_ Felt annoyed by people who have criticized your drinking?

\_\_\_ Felt guilty about your drinking?

\_\_\_ Ever needed an eye-opener in the morning to recover from last night?

**COHA Brain—Mild Cognitive Impairment**

Do you often:

\_\_\_ Repeat stories, questions, statements on the same day?

\_\_\_ Need several reminders about days of the week or month, time of day, current year?

\_\_\_ Have trouble handling personal finances?

\_\_\_ Lose your sense of direction?

**COHA Brain—Autism (partial list)**

Are these developmental factors delayed or not present:

\_\_\_ Turning the head toward new people entering the room?

\_\_\_ Pointing to objects?

\_\_\_ Making eye contact?

\_\_\_ Imitating gestures and facial expressions?

\_\_\_ Showing interest in the objects you have?

\_\_\_ Showing interest in other children?

\_\_\_ Reaching developmental milestones?

\_\_\_ Regressing in speech and other milestones?

Other indicative or causal factors for for autism:

\_\_\_ Mother sick, received dental work, flu shots, or exposed to drugs during pregnancy?

\_\_\_ Suspected relationship to immunizations?

# National Heart Month



February is national heart month. Only one in five women consider heart disease to be a health threat to them, but heart disease is the number one killer for both men and women. We offer four important tests that can assess your risk: CardioRisk looking for plaque in your carotid arteries; the Boston Heart Profile detecting subtle but important abnormalities in

lipids, inflammation, metabolism and genetics; a toxic metal challenge test for potent oxidants; and the Max Pulse test that analyzes your pulse wave to see how much stress is affecting your heart. Of course, we believe that the best treatment is IV chelation therapy.

## TACT-2 Update

Dr. Chappell is in close contact with Dr. Gervasio Lamas about the second Trial to Assess Chelation Therapy, which will soon be funded by NIH. Enrollment will likely begin in the fall of 2016. We are committed to enroll 10 patients in the first 2 weeks of the study. We need your help. To qualify you have to be a diabetic who is at least 50 years old and has a

history of having a heart attack. It is likely that you will have a 2/3 chance of receiving 40 treatments of chelation without charge. If you know anyone who might be eligible, let us know. If you are seeing a cardiologist or endocrinologist whom you think might be receptive, please tell us so we can contact him or her.

## Welcome Back, Grapefruit Juice!

If you are taking a statin drug or red yeast rice to control your cholesterol, you probably were warned not to drink grapefruit juice. A study published in the January issue of the American Journal of Medicine showed that the incidence of a severe muscle disease from adding grapefruit juice to a statin is about 1 in 100,000. On the other hand, the juice increases the absorb-

tion of the statin, which might reduce the incidence of heart attacks. Some cancer chemotherapy drugs are also more effective when taken with grapefruit juice. If you need these drugs, you can probably get by with a lower dose by adding grapefruit juice. Check with your doctor first. If you want to avoid statins altogether, we can help.

### WE HAVE SPECIAL INTERESTS IN:

- Allergies
- Arthritis and unstable joints
- ADHD and autism
- Autoimmune diseases
- Back and neck pain
- Bio-identical hormone replacement
- Chronic fatigue and frequent infections
- Depression
- Diabetes
- Digestive disorders
- Fibromyalgia, natural pain relief
- Heart disease and circulation problems
- Heart attack and stroke prevention
- Macular degeneration, other eye problems
- Immune and nutritional factors for cancer
- Longevity medicine
- Memory problems
- MS and neurologic disorders
- Rheumatoid arthritis
- Sports injuries
- Thyroid and adrenal imbalance
- Yeast

## REFERRALS

A SINCERE THANK YOU TO ALL WHO HELP SPREAD THE WORD OF OUR OFFICE!

NEW PATIENTS MENTIONED THE FOLLOWING BY NAME:

- |                     |                          |                        |                      |                     |
|---------------------|--------------------------|------------------------|----------------------|---------------------|
| Arnold Wright       | Dr Cusono                | Jon Kessler            | Maureen Caes         | Susanna Stutzman    |
| Barbara Jane Ehle   | Dr Kondrot x2            | Journey 2 Wellness     | Meleijha White       | Tammy Nash          |
| Barbara Kramer      | Dr. Dave McCarty         | Kameel & Jackie Ansara | Micah Klotz          | Theresa Dunlap x2   |
| Barbara Tompany     | Dr. Gary Petro           | Karen Beier            | Monica Fetzer        | Tim Luginbill       |
| Becky Arnold        | Dr. Jay Nielsen x2       | Kathy Reed             | Mrs. Raymond Ohlrich | Tim Weaver & wife   |
| Bertha Clinger      | Dr. John Biery           | Kathy Schwieterman     | Nancy Grubb          | Tom & Sheena Dotson |
| Beth Richards       | Dr. John Needler         | Katie E. Bontrager     | Nelson Apple         | Tom Rose            |
| Celia Williamson    | Dr. M White              | Kellie Hoelscher x2    | Nicole Holliday      | Wayne Wilson        |
| Charlie Schroeder   | Dr. John Winder          | Kelly Rasusson         | Owen Hall            | Wendy Fisher        |
| Christine Beiderman | Dr. Mark Yoder           | Kim Geddis             | Rebecca Vagedes x2   |                     |
| Connie Gordon       | Dr. Monnin               | Koni Riegsecker        | Robert Crilow        |                     |
| Dan Condon          | Dr. Roberts              | Lanre Balogun          | Sarabell Knipp       |                     |
| Deb Meinberg        | Dr. Nichole Nygren       | Laura Brodman          | Sarah Morris         |                     |
| Debra Reichard      | Elizabeth Mangum         | Laurie Hoppe x3        | Scott Grilliot       |                     |
| Dee Klotz           | Health Food Claudia's x6 | Linda Pezzino          | Sean Miller          |                     |
| Diane Rosenbeck     | Holly Cramner            | Lois Mermeier          | Sheila Umb           |                     |
| Dianne Burt         | Holly Easton             | Marie Heitkamp         | Stan Scott           |                     |
| Dorothy Kipfer      | Jane Slavik              | Mary Ann Stucke        | Susan Bones          |                     |

THANK YOU!