

# Memory Loss and Response to Hyperbaric Oxygen Therapy

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**Abstract** *Hyperbaric Oxygen Therapy (HBOT) has been used for decompression problems for many years. It is used frequently for carbon monoxide poisoning and wounds that will not heal. Many diseases respond to HBOT, especially those involving the central nervous system. We have previously described HBOT treatment in patients with stroke, dementia and wound healing problems. This article discusses another female patient with short-term memory loss and dementia and a male with a stroke successfully treated with HBOT.*

## Introduction

The patient is a 78-year-old female who came to The Center with a history of transient ischemic attacks, memory loss, fatigue, congestive heart failure, cough, arrhythmia and macular degeneration. She had been to see several different medical specialists with no improvement in her conditions. Her husband was very worried about her short-term memory loss.

He remembered reading about hyperbaric oxygen therapy (HBOT) helping patients with head injuries and memory loss. He searched the Internet to find a local facility that performed HBOT. He found only one such place listed in the Wichita area—a local hospital. He contacted the hospital and was told that they only used their chambers to treat wounds that had trouble healing. The person at the hospital told him to contact The Center as we had a hyperbaric chamber and used it for various conditions.<sup>1</sup>

Her husband enrolled her as a new patient at The Center in July 2009. Her physician was Dr. Rebecca Kirby, who is a regis-

tered dietician as well as a board certified Family Physician. After a lengthy visit with the patient during which a complete history and physical was done, Dr. Kirby ordered the following laboratory tests from the BioCenter Laboratory: coenzyme Q<sub>10</sub>, high sensitivity C-reactive protein, erythrocyte glutathione, homocysteine, a thyroid panel, vitamins A, E, C, D, B<sub>1</sub>, B<sub>2</sub>, B<sub>3</sub>, B<sub>5</sub>, B<sub>6</sub> and B<sub>12</sub>, folate, beta-carotene, lutein and lycopene. She also ordered a red blood cell magnesium/calcium ratio, zinc, copper, manganese, selenium, essential fatty acid panel, lipid profile, a basic cytotoxic food sensitivity test,<sup>2-7</sup> a female hormone panel and a urinalysis with urine vitamin C screening test.<sup>8</sup>

The laboratory results showed that she was borderline hypothyroid and her cholesterol and triglyceride levels were elevated. She also had an elevated homocysteine, a few food sensitivities, a low plasma vitamin C and a deficient vitamin D<sub>3</sub> level. Her urine vitamin C was zero. The urinalysis results indicated she also had a urinary tract infection.

On the second day of her visit, she was

treated for her urinary tract infection and had a diet consultation regarding her food sensitivities. Dr. Kirby also ordered an "IV Mini-Meyers," and various nutritional supplements to address what was low or deficient on her laboratory report, plus a series of 20 HBOT treatments.<sup>8,9</sup> The Center has two employees trained and certified to perform HBOT. We use a single chamber for the HBOT treatments. The patient breathes pure oxygen through a mask while the pressure is controlled by the technician who can see and talk to the patient while they are in the chamber. The time and pressure is based on the diagnosis of the patient.<sup>1,9</sup>

The woman's first HBOT started on a Friday. When she came back for a second treatment on Monday, her husband stated that for the first time his wife "did not ask him what day it was." She knew both days of the weekend and she knew that she had another appointment on Monday. As she continued her treatment, her memory continued to improve. The patient, her husband and Dr. Kirby were very happy with the progress and changes that HBOT has made in the patient's life. Her husband stated "I am a true believer in hyperbaric oxygen therapy!"

We also treated a 55-year-old man with a stroke who came to us in a wheel chair with slight paralysis of his left side. About four months later, he helped one of the authors (Jackson) present a lunch and lecture on HBOT.

The authors would recommend that any one interested in HBOT for many diseases read the book *The Oxygen Revolution, Hyperbaric Oxygen Therapy*, by Paul G. Harch and Virginia McCullough.<sup>9</sup> They have treated over 21 different diseases with HBOT and monitored the patient's progress via 3D SPECT scans before, during and after treatment.

At The Center, we use HBOT for wound healing problems,<sup>10</sup> strokes, Parkinson's and dementia. We have also used HBOT for several research projects in cell culture and continue to treat our patients with it when indicated.

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