

Sarcoidosis

James A. Jackson, MT (ASCP)CLS, Ph.D., BCLD¹,
Ronald E. Hunninghake, M.D.² and Hugh D. Riordan, M.D.²

The patient is a 42 year old, white, single female who has a masters degree level education. She is unemployed and lives with her mother.

Her past history showed complaints of chronic, severe cough which was diagnosed as Stage III Sarcoidosis through chest X-rays and skin biopsy. A lung biopsy was not performed. Her diagnosis was confirmed by three different physicians. She has never smoked cigarettes. Her past pulmonary function studies showed "mild obstruction and restriction". Chest X-rays showed bilateral interstitial/alveolar infiltrates. She had been taking Prednisone, 20 mg per day. Other complaints included "peeling skin on hands and feet" (negative fungus tests), fatigue, hypothyroidism, difficulty in swallowing, shortness of breath, frequent problems with PMS and dry skin. She is allergic to penicillin and sulfa medications.

When seen at The Center, her cough was still present and she had been experiencing "difficulty in breathing" for the past three months. A complete physical, psychological and biochemical evaluation was performed. Significant findings included: a tender thyroid, low levels of vitamins A, E and B₂, a zero urine vitamin C, 2- urinary indican (normal - negative to 1+), cytotoxic allergy test reactions to coffee (3+) and cow's milk (2+), low essential plasma fatty acids, positive rectal swab test for *Dientamoebafragilis* and a "geographic tongue".

She was advised to restrict coffee and cow's milk. She was treated with oral vitamin C (1/4 teaspoon at each meal and bedtime with gradual increase to bowel tolerance dose), then daily supplements of vitamin C (2000 mg), vitamin E (400 IU), beta carotene (25000 IU), and flax seed oil capsules (500 mg three

times a day). She was also started on zinc lozenges and later with zinc picolinate (20 mg twice a day with food). She was continued on Prednisone and Armour Thyroid (2-1/2 grains daily). Parasites was treated with Doxycycline.

One month after treatment, her cough had improved, she was "feeling better" and looked better. Four months later her coughing had stopped and she stated she felt a "definite improvement".

This case illustrates how careful attention to correcting abnormal nutrient levels, eliminating key food sensitivities, upgrading metabolic function, diagnosing and treating unsuspected intestinal parasites has strengthened the patient's adaptive reserves and allowed her to arrest an otherwise untreatable illness.

1. Professor and Chair, Department of Clinical Sciences, The Wichita State University, Wichita, Kansas 67208-0043.

2. The Center for the Improvement of Human Functioning International, Inc., 3100 North Hillside, Wichita, Kansas 67219.