



Macular Degeneration - A Case for Two!

by Heinz-Dieter Bartels, Naturopath

A 52-year-old graduate in Psychology consulted me in October 2001, panicking that she might go blind within a few months.

Introduction

While consulting an optician in Autumn 2000 for the prescription of reading glasses, she was told she had significantly elevated intraocular pressure and scotomas. Conventional treatment had been of little help. For a short while, on the advice of a friend, she had used MUCOKEHL 5X eye-drops, which had not led to any deep-reaching improvement either, especially since she had still been taking the other eye treatments.

The application of sulphonamide-based eye-drops caused unpleasant cardiovascular side-effects. After that, the drug Xalatan was prescribed, to reduce the elevated intraocular pressure. A dramatic aggravation ensued, with oedema in the left eye and a residual vision of 20% with a severely restricted visual field, vertigo, and her vision increasingly foggy. She finished up with a dry macular degeneration with druses on the retina, massively elevated intraocular pressure and iatrogenic oedema.

Complaints identified in the consultation: frequent sinusitis, tonsillitis, cardiac dysrhythmias, tendency to thromboses, grinding of the teeth and chronic tiredness. One could not fail to notice her obesity and state of dehydration (double chin!). The clues and symptoms indicated a severely disturbed basic regulation, a body economy that had gone seriously off the rails, together with substantial deficiencies of minerals and essential nutrients.

1. Correction of lifestyle:

- 6 weeks on food low in proteins, or Dr. Baum's „Major Metabolic Cure“ (see SANUM-Post No. 64, Pg.9ff.)
- Improvement of fluid balance by drinking more pure water; strictly no coffee (from beans) or alcohol
- Brisk walking (2 x 1 hour) daily
- Wholefood diet with a high proportion of fresh foods
- High dosage of food supplementation, wheatgerm oil, MA-PURIT and vitamin supplements, particularly vitamin C to dry out the oedema.

2. Body-environmental and

Regulatory treatment:

- Alkalinisation with ALKALAT 2x 1 tablet daily for 10 days, then with ALKALAN 2x half a measuring spoonful in a large quantity of hot water in the mornings on an empty stomach and in the evenings before retiring to bed.
- Detoxification (iatrogenic poisons etc.) with OKOUBASAN 2X 2 tablets to be sucked 4 times a day.
- Activation with UTILIN „S“ capsules, 1 capsule monthly.

3. Directed Symbiosis:

- MUCOKEHL 4X capsules and PINIKEHL 4X capsules alternately, 1 capsule twice daily.
- MUCOKEHL 5X eye-drops, 2 drops twice daily in the external canthi.
- SANKOMBI 5X drops, 5 drops twice daily to be sniffed up the nose.

Injections:

Intravenous doses of 1 ampoule of MUCOKEHL 6X and 750 mg Vitamin C; also, 2 ml SANUVIS

and 2 ml CITROKEHL intramuscular, initially twice a week, then later once a week.

Treatment progress:

The intraocular pressure returned to normal immediately after each injection and stabilised for longer and longer periods at a time. According to optical examinations, the oedema reduced slowly but visibly. After 5 weeks, the intraocular pressure remained more or less constant, the druses had disappeared, and after 10 weeks, the oedema likewise. Her vision has become just about normal for her age. The macular degeneration has been rectified.

Summary:

In my opinion, the intravenous injections of MUCOKEHL and Vitamin C were the decisive factor. On each occasion, the patient received a pronounced lift from them. Her improved fluid balance and the doses of essential nutrients were certainly also contributory factors in the success of the treatment.

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