Advanced Skin Rash/GERD

In just 4 months-

- ✓ Rash Completely Gone!
- ✓ Diaestion Better
- ✓ Cut GERD meds in half!

Initial Symptoms-

- ✓ Severe Rash
- √ GERD/Indiaestion
- ✓ Overweight
- √ High Cholesterol
- √ Skin Lesions

"Things like rashes, acne or discolorations are a sign of greater problems. Don't just apply a cream and forget it. Pay attention to your body and address the real issue!"

-Dr. Van D. Merkle

Patient Profile:

09-09-09 - The 66-year old Patient presented with a severe skin rash covering her entire anterior lower left leg which first appeared about two years ago and also occasional smaller rashes on her abdomen or arms. The surface of the rash is very rough and the patient states it "really itches" and frequently scratches at it until she bleeds. She often wakes up in the morning bleeding because she even scratches the rash in her sleep. This has caused significant scarring on both her legs and arms. The itching/rash becomes worse in winter when her skin is drier and more sensitive. Dermatologists have tried cortisone, creams, etc but nothing has helped. Skin lesions (50-60) are also visible on the patient's neck; these may possibly be skin tags. The patient had them removed but they came back. The patient also suffers from gastroesophageal reflux disease (GERD) and has been dependent on Prilosec for about three years stating she "can't go without it". At the time of the initial visit, she weighed 166 lbs at 5'3" and her blood pressure was 132/82. The patient takes Prilosec daily and Xalatan for Glaucoma.

Patient's tests results:

09-09-09 - The total cholesterol, triglycerides, LDL and VLDL are all high while the HDL cholesterol is low. This is basically too much fat in the blood and is commonly associated with a poor diet, liver dysfunction (SGOT, SGPT and GGT which are also all high), diabetes mellitus, infections and inflammation. The LDH and CRP are also high indicating a nonspecific tissue injury and inflammation. A high Ferritin level shows excess iron stores within the body and the very low vitamin D can result in a lowered immune system and a reduced ability to absorb and utilize essential nutrients.

Results of Initial Blood Test:



Some toxicity appeared in the hair analysis including high levels of Nickel which has been linked to gastro-intestinal pain and eczema/skin disorders. Several nutritional deficiencies also appeared including low levels of Chromium and Boron. Chromium is essential to carbohydrate and glucose metabolism and depletions can lead to reduced metabolism of amino acids, protein, glucose and lipids (cholesterol). It has also been liked to elevated cholesterol levels and corneal damage. Boron is essential for good bone health and deficiencies are associated with skin allergies, eczema, acne and osteoporosis.

Results of Initial Tissue Mineral Analysis:

Legend: Warning Hig	gh Risk Critical		★ Optimal	Improvement		8 Worse	Ø No Improvement		
Test Description	Current Rating 09/09/2009		Prior	Delta	Healthy		Clinical		Units
Toxic Elements									
Aluminum	5.40	high			0-	2.20	2.21-	7.00	ug/g
Antimony	0.02	*			0-	0.06	0.07-	0.12	ug/g
Arsenic	0.02	*			0-	0.03	0.04-	0.06	ug/g
Barium	1.80	high			0-	1.00	1.01-	2.00	ug/g
Uranium	0.03	high			0-	0.03	0.04-	0.06	ug/g
Nickel	0.32	High			0-	0.25	0.26-	0.30	ug/g
Silver	0.23	High			0-	0.10	0.11-	0.15	ug/g
Cadmium	0.03	*			0-	0.03	0.04-	0.05	ug/g
Lead	0.12	*			0-	0.40	0.41-	0.60	ug/g
Mercury	1.20	High			0-	0.50	0.51-	0.80	ug/g

Results of Initial Tissue Mineral Analysis Continued:

Legend: Warning High	n Risk Critical		★ Optimal	Improvement		8 Worse	Ø No Improvement		
Test Description	Current Rating 09/09/2009		Prior	Delta	Healthy		Clinical		Units
Essential Elements									
Calcium	2240.00	High			663.00-	753.00	300.00-	1200.00	ug/g
Magnesium	210.00	High			53.00-	62.00	35.00-	140.00	ug/g
Sodium	12.00	Low			72.00-	126.00	18.00-	180.00	ug/g
Potassium	3.00	Very Low			30.00-	53.00	8.00-	75.00	ug/g
Copper	13.00	low			18.00-	29.00	11.00-	37.00	ug/g
Zinc	160.00	*			150.00-	170.00	140.00-	220.00	ug/g
Manganese	0.10	low			0.28-	0.40	0.08-	0.60	ug/g
Chromium	0.40	Low			0.48-	0.57	0.40-	0.65	ug/g
Vanadium	0.02	low			0.04-	0.05	0.02-	0.06	ug/g
Molybdenum	0.04	*			0.03-	0.04	0.02-	0.05	ug/g
Boron	0.25	Very Low			0.65-	2.50	0.40-	3.00	ug/g

Doctor analysis:

O9-16-09 - The hair analysis was very illuminating for this patient. Her two main concerns - GERD & Advanced Skin Rash - are very likely being affected by the toxins and essential element deficiencies shown in the graph above. Essential elements must bind to toxins to remove them from the body, so when we see high levels of things like Calcium and Magnesium this means that instead of being utilized by the body for things like healthy bones, they are being spent to remove toxic elements. Eventually the body will run out of its stores of essential elements and we will begin to see essential element deficiencies.

It is essential that she eat a well-balance diet, rich in vitamins and minerals and also use a natural chelator like Chlorella to aid the body in toxin expulsion. Once the toxin levels are reduced and essential element stores replenished, the problems seen in the blood like high cholesterol, inflammation, infection and diabetes should being to improve, however as toxins are flushed out, these values may temporarily become worse. Also boosting vitamin and mineral stores like Chromium and vitamin D will allow for improved digestion and reduced GERD symptoms. A few digestive aids like papaya or bromelain can also be taken with meals.

Patient assessment:

01-18-10 - After about <u>four months</u> under our care, the patient's rash had disappeared for the first time in two and a half years! Her GERD had also significantly improved and she was able to reduce her

intake of Prilosec to every other day and sometimes even less frequently than that! We did not see great improvements in her blood analysis which I expected due to the work on toxic element removal we were doing, but also adding to this, the patient had an emergency appendectomy about five days before completing her blood test. This was a direct cause for the elevated CRP and ESR and most likely contributed to the high cholesterol levels which will rise to protect the heart when the body is battling things like inflammation or infection. Her liver function (SGOT, SGPT and GGT) greatly improved along with the thyroid and vitamin D levels. Also the patient stated that because of all the supplements she was able to recover from her surgery very quickly.

Results of 2nd Blood Test:

Legend: Warning High Risk	Critical	ı ★ op	otimal ©	Improver	nent 😕	Worse	Ø No Impro	vement	
Test Description	Current Rating 01/15/2010		Prior 09/09/2009	Delta	Healthy		Clinical		Units
Alk. Phosphatase 25-530	68.00	*	78.00		40.00 -	130.00	25.00 -	165.00	IU/L
Creatine Kinase	57.00	low	97.00	8	64.00 -	133.00	24.00 -	173.00	u/l
LDH	232.00	high	266.00	©	120.00 -	160.00	100.00 -	250.00	mu/mL
SGOT (AST)	30.00	high	45.00	©	15.00 -	26.00	6.00 -	40.00	mu/mL
SGPT (ALT)	43.00	High	61.00	©	15.00 -	26.00	6.00 -	40.00	mu/mL
GGT	41.00	high	43.00	©	22.00 -	39.00	6.00 -	65.00	mu/mL
Serum Iron	70.00	low	87.00	8	85.00 -	120.00	40.00 -	155.00	mcg/dL
Ferritin	170.00	High	166.00	8	30.00 -	115.00	13.00 -	150.00	NG/ML
Total Cholesterol	267.00	High	266.00	8	140.00 -	170.00	100.00 -	199.00	mg/dL
Triglyceride	184.00	High	146.00	8	80.00 -	115.00	10.00 -	149.00	mg/dL
HDL Cholesterol	34.00	Low	38.00	8	39.00 -	120.00	36.00 -	140.00	mg/dL
VLDL Cholesterol	37.00	high	29.00	8	5.00 -	20.00	4.00 -	40.00	mg/dL
LDL Cholesterol	196.00	Very High	199.00	©	50.00 -	75.00	6.00 -	99.00	mg/dL
Total Cholesterol / HDL Ratio	7.90	High	7.00	8	0.00 -	4.00	0.00 -	5.00	ratio
TSH	1.36	*	1.37		1.00 -	2.50	0.35 -	5.50	mIU/I
T4 Thyroxine	11.20	high	9.50	8	7.10 -	9.00	4.50 -	12.00	mcg/dL
T3 Uptake	28.00	low	26.00	©	29.00 -	35.00	24.00 -	39.00	%
T7 Free Thyroxine Index (FTI)	3.10	*	2.50	0	2.61 -	3.60	1.20 -	4.90	
CRP C-Reactive Protein	7.70	High	3.80	8	0.00 -	1.50	0.00 -	4.90	mg/L
ESR-Erythrocyte Sed Rate, Westergren	8.00	high	3.00	8	0.00 -	6.00	0.00 -	20.00	mm/HR
Vitamin D 25-Hydroxy	54.60	*	17.30	0	50.00 -	90.00	32.00 -	100.00	NG/ML

Dr. Merkle's Final Thoughts:

Your body is not concerned with how your skin looks. If you have underlying health problems, the body will utilize all its resources to protect and defend the essential organs like the heart, lungs, liver, brain, etc leaving the non-essential skin to fend for itself. Things like rashes, acne or discolorations are a sign of greater problems. Don't just apply a cream and forget it. Pay attention to your body and address the real issue!"

We have to put in the work to maintain a healthy body. Think about all the chemicals and toxins you are exposed to everyday from industrial pollution, pesticides, manufacturing, cleaning solvents, etc. Is your body healthy

enough to flush these dangerous items back out of your system? A complete blood analysis and hair test is the only ways to be sure exactly how your body is holding up against these outside contaminants. If these toxins build up in your system, they can contribute to many long term issues like Alzheimer's, Multiple Sclerosis and more. These toxins will also deplete your body of essential nutrients leaving you malnourished and creating havoc among your hormone signals which could lead to all sorts of disruptions such as indigestion, high cholesterol, high blood pressure, skin problems, weakened nails and dry hair, inflammation, bone loss, liver dysfunction, etc.

Environmental toxins will silently sit in your body creating problem after problem unless you address the issue. Work to reduce environmental exposure to toxins and chemicals in your home by using natural cleaners and eating organic food. Do not use bug sprays or weed killers in your home or garden and purchase a reverse osmosis water system for your home. And get tested soon.

-Dr. Van D. Merkle

This case report showcases a real patient's results using the Science Based Nutrition™ system of analysis, which takes into account hundreds of numeric data and their roles, combinations and inter-relationships as related to disease diagnosis. This patient is/was under the care of Dr. Van D. Merkle, creator and founder of Science Based Nutrition™, Inc. and is meant to serve as an example of results achieved using the Science Based Nutrition™ report Contact your local health professional and ask him/her to provide you with the Science Based Nutrition™ report. Results will vary based on patient ability/willingness to follow the recommended nutritional protocols, among many other factors. Any suggested nutritional advice or dietary advice is not intended as a primary treatment and/or therapy for any disease or particular bodily symptom. Nutritional counseling, vitamin recommendations, nutritional advice, and the adjunctive schedule of nutrition is provided solely to upgrade the quality of foods in the patient's diet in order to supply good nutrition supporting the physiological and biomechanical process of the human body.