



Inflammation

Part II: Evaluation & Treatment

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Chronic inflammation responses that escape our body's normal regulatory mechanisms stand as the primary cause of accelerated aging and provide the initiating spark for cancer, cardiovascular disease, neurodegenerative diseases like Alzheimer's, and, most importantly, just not feeling well! When we identify excess inflammation, the next step requires neutral self-inquiry, "Our symptoms are our teachers", to identify our unique trigger(s) and explore our unique psychoneuroendocrinological reasons for our unregulated inflammatory responses ([See Part I](#)).

If one cannot figure out why you have an "-itis", you and your physician have overlooked a variable. Start with the basics of stress, nutrition, and exercise, and extensively evaluate endocrine function and measure mediators of inflammation. I like the panel from True Health Diagnostics (formerly Health Diagnostics Laboratory) because in addition to the standard CBC, chem panel and urine, we can test for a myriad of mediators including Lp(a), fibrinogen, hsCRP, MPO, LpPLA2, BNP, galectin 3, A1C, insulin, homocysteine, vitamin D3, EPA/DHA index, and important genetic screens for tests such as the dreaded MTHFR gene SNPs, and Apo E alleles, hypercoagulability genes and more! In the near future, I expect many more tests will necessitate themselves in an ever-expanding complex field called "the practice of medicine". If you don't know these tests, don't worry, your integrative medicine healthcare professional does and can use these tests to guide further diagnostic tests and therefore treatment!

A new exciting test comes from Great Plains Laboratory: the total PLA2 or phospholipase A2, a urine test that looks at all PLA2 activity, not just the Lipoprotein bound fraction in the LpPLA2 test mentioned above. This enzyme may well serve as the best indicator of chronic inflammation yet found! Combined with the urine Organic Acid Test we can find new clues as to the cause and treatment of any chronic inflammatory condition. Other tests require historical cues as to whether to look for gastrointestinal sources (extensive stool tests and blood tests for food sensitivity) as well as markers of chronic infection, usually viral or Lyme's related. If you have chronic inflammatory symptoms (Calor, Rubor, Dolor, and Tumor) that evade the standard tests of your HMO doctor, get a real integrative medical evaluation.

Therapy for your condition must first focus on the "why", which I believe I have successfully complicated for you! Just treating the symptom without treating the etiology will never work long term. While etiologies get their due deserved evaluation,

one must treat the inflammation as well. The complication rate and cost of NSAIDs (non-steroidal anti-inflammatory drugs) remains hotly debated, yet the lowest rate for America documents over 100,000 hospitalizations annually, costing over 2 billion dollars and 16,500 deaths (primarily from gastrointestinal bleeding). This almost certainly grossly underestimates risk as the estimate comes primarily from prescription NSAIDs and not the far more common OTC Advil, Aleve, and aspirin usages. When one looks at the OTC meds, and includes the long term complications such as renal and liver damage, an estimate of double these numbers probably doesn't come close to the damage from a class of medicine that cures nothing! Again, treating the symptom without treating the etiology will never work long term.

Do you see now why the natural treatment of chronic inflammation must take precedence over the drug approach? Do you see also that our current medical system cannot deliver this approach to you, as the standard HMO type doctor doesn't have the time, ability, knowledge or flexibility to understand, order, evaluate, and treat using these tests? You must take the locus of control of your healthcare, and if you don't want a poison-first approach, seek something different.

First in our foundational approach, after our [Foundations of Health](#), comes the [Basic Nutritional Protocol](#), which calls for a multivitamin, vitamin D3, and fish oils. Using a potent multivitamin like Mitocore (Orthomolecular) or UltraPreventive X (Douglas Labs), you can correct common vitamin B inadequacies (obtaining homocysteine value less than or equal to 8). Due to the common occurrence of problems with MTHFR genes, I have shifted away from more "simple" multis like Life Force (Source Naturals) as a first line. Correct vitamin D deficiencies (adequacy determined by a level in the blood of 70-90) utilizing synergistic K2/D3 combos such as K-Force (Orthomolecular). Correct your EPA/DHA index to the 10-12% range utilizing triglyceride-form fish oils such as OrthOmega (Orthomolecular) and OmegaGenics (Metagenics). These simple steps can correct low-grade inflammation in and of themselves in the majority of the cases I have treated.

It may appear that going straight after the inflammation itself with a fancy herb or enzyme is the first step. Yet I have found that a foundational approach works so much better, and when we add natural anti-inflammatories, we get far superior results! In Part III we will discuss those approaches!

Your Journey to Health and Healing,
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References:
Upon Request

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