

Holistic Steps Advised for Respiratory Health

BY DOUG BRUNK

SAN DIEGO — Taking an integrative holistic medical approach to treating respiratory disease requires addressing the patient's environment, immune system balance, and emotional health.

At a meeting sponsored by the Scripps Center for Integrative Medicine and the American Board of Integrative Holistic Medicine, family physician Robert S. Ivker described four steps to achieve this goal:

► **Heal the mucous membrane by reducing and/or eliminating inflammation.** Optimal air quality is key, said Dr. Ivker, cofounder and past president of the American Board of Holistic Medicine. He defined this as air that is free from pollutants, has a humidity level between 35% and 55%, a temperature between 65° and



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DR. IVKER

85° F, 100% oxygen saturation, and a negative ion content between 3,000 and 6,000 0.001-mcm ions/cm³.

Home-based methods for achieving optimal air quality include using a negative-ion generator that does not emit ozone, an electrostatic or pleated furnace filter, and keeping the furnace, air ducts, and carpets clean, without the use of harsh chemical-based cleaning agents.

Dr. Ivker recommends the use of a warm-mist room humidifier in bedrooms and offices, especially during the winter months. Certain plants can also assist in cleaning the air, including those that remove formaldehyde (Boston fern, chrysanthemums, striped Dracaena, and the dwarf date palm), and carbon monoxide (spider plant).

Other strategies for healing mucous membranes include getting proper hydration with good quality water (0.5 oz/lb of body weight per day); using a saline nasal spray with aloe vera or other anti-inflammatory herbs every 2-3 hours; using a steam inhaler for 15-20 minutes two to three times per day; inhaling medicinal eucalyptus oil frequently; and swabbing peppermint oil outside of both nostrils following use of the saline nose spray.

Nasal irrigation has also been found to alleviate sinonasal symptoms (Otolaryngol. Head Neck Surg. 2001;125:44-8). Options include the SinuPulse, a pulsatile irrigation device that removes biofilm covering the mucous membrane. This is "the most effective and most expensive option at around \$100," Dr. Ivker said.

► **Strengthen and/or restore balance to the immune system.** Inflammation increases free radicals, so emphasize fresh, organic fruits and vegetables, whole grains, fiber, and protein, said Dr.

Ivker, who also was in the department of family medicine and is now in the department of otolaryngology at the University of Colorado, Denver.

Exercise helps. He recommends 20-30 minutes of aerobic exercise at least three times a week, in addition to stretching and strengthening exercises. If patients currently have no exercise regimen, "start very gradually," he said. "Patients with chronic and fungal sinusitis have a

weakened immune function, so you don't want to recommend strenuous exercise right off the bat."

Dr. Ivker also recommends "emotional exercises" that strengthen immune function. These include practicing "safe" anger release technique such as pounding one's fists on a pillow or punching bag, screaming, laughing, crying, and writing in a journal. "Repressed anger is the primary emotional factor

contributing to chronic sinusitis," he said.

He emphasized that getting at least 7 hours of sleep per night "is possibly the most overlooked key to overall well-being and a strong immune system."

► **Mitigate fungus/candida, if applicable.** Patients with suspected fungal sinusitis or candida/yeast overgrowth—typically the most severe cases of chronic sinusitis and the most challenging to treat—often have food allergies and sen-

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sitivities and should avoid sugar, milk, and dairy products; fruits; vinegar; mushrooms; alcohol; and bread and other foods that contain yeast or wheat. After 3 weeks, "then you can start to introduce nongluten grains such as brown rice, quinoa, millet, and so on," he said.

In a study, Dr. Ivker and his colleagues demonstrated the effectiveness of an integrative holistic approach for treating chronic fungal sinusitis with fluconazole and a restrictive diet (*Altern. Ther. Health Med.* 2009;15[1]:36-43).

"We still don't have a consistently reliable diagnostic test for fungal sinusitis.

Genova [Diagnostics'] Comprehensive Digestive Stool Analysis is currently the best test we have, but it's not consistent. There are still too many false negatives. I use the patient's history, clinical picture, and Dr. William Crook's Candida Questionnaire and Score Sheet. That seems to correlate quite well with successful antifungal outcomes," he said.

One antifungal supplement he routinely recommends is 100% pure allicin as found in the products Allimax and Allimed from AlliMax International Ltd.

► **Address the mental, emotional, spiritual, and social causes.** Staying positive

and fostering social connections play a role in good respiratory health, Dr. Ivker said. In a study of medical students who were tested at final exam time, those who scored high on the Holmes-Rahe Social Readjustment Rating Scale and the UCLA Loneliness Scale had significantly lower levels of natural killer cell activity, 90% lower interferon gamma levels, and lower T-cell responsiveness, compared with those with low-scale scores (*Psychosom. Med.* 1984;46:7-14).

Findings from another study demonstrated that among caregivers of dementia patients, social connectedness corre-

lated directly with immune function. Those reporting the fewest social connections had more upper respiratory infections and decreased immune responsiveness, compared with those who had the greatest number of social connections (*Psychosom. Med.* 1991;53:345-62).

Dr. Ivker also pointed out that the recent emergence of laughter yoga (www.laughteryoga.org) indicates that the idea of not taking life too seriously is catching on. "There are laughter yoga clubs starting up all over the country," he said.

Dr. Ivker had no relevant conflicts to disclose. ■



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References: 1. Cluff RS, Rowbotham MC. Pain caused by herpes zoster infection. *Neurol Clin.* 1998;16(4):813-832. 2. Dworkin RH, O'Connor AB, Backonja M, et al. Pharmacologic management of neuropathic pain: evidence-based recommendations. *Pain.* 2007;132(3):237-251. 3. Dubinsky RM, Kabbani H, El-Chami Z, Boutwell C, Ali H. Practice parameter: treatment of postherpetic neuralgia. An evidence-based report of the Quality Standards Subcommittee of the American Academy of Neurology. *Neurology.* 2004;63(6):959-965. 4. Lidoderm Prescribing Information. Chadds Ford, PA: Endo Pharmaceuticals Inc; 2008.

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