PARENTS!
Read This Report To Discover How "Hidden Allergies" May Be Sabotaging Your Child's Health… Stealing Vitality From Her Tender Years, Robbing Him Of His Strength And Vigor—Making Them Frail And Sick!

This report will give detailed information about:

Seasonal Allergies: How you can stop your child's sneezing, runny itchy eyes, and stuffed up nose for good, without pills or painful shots.

Childhood Ear Infections: Find out what's causing your child's ears to get infected over and over again… You'll be shocked!

Eczema: Learn the secrets to what's making your child's skin itch, turn red, and flake or ooze… And what you can do about it NOW!

Asthma: Discover what's causing your child's asthma to flare-up and what can make her breathe better and possibly allow you to throw away her inhaler for good!

ADD/ADHD: Why does your child have trouble focusing long enough to finish her homework and what makes her so full of energy that she sometimes literally bounces off the walls? Read this report to learn why, and what you MUST do to help her!

Allergy-Related Autism: This report will explain what may be behind autism—one of the most puzzling conditions of our time—and what can be done about it!

Little Katie (not her real name) was only 18 months old when I first met her. Few people like to go to the doctor, but children can be especially frightened by stiff white coats and the expectation of getting a painful shot. Katie did not look happy to see me.

But her mother was determined to see if I could help. You see, Katie had anaphylactic allergies to wheat, soy, and peanut. Anaphylactic allergies are potentially life threatening. When Katie ate any of these foods her throat and tongue would immediately swell to the point where she would choke to death if she didn't receive immediate medical attention.

Her mother had to carry an EpiPen with her at all times in case Katie was mistakenly fed any of these foods. (An EpiPen is a medical device that when activated automatically injects epinephrine into the body.)

Katie's mom knew what foods Katie was allergic to because she had her MD run blood tests. But what treatment plan did the doctor prescribe? Avoidance. She had to make sure Katie wasn't fed anything with even trace amounts of wheat, soy, or peanut in them and hoped that Katie would eventually "grow out of" the allergies.

Can you see one huge problem? Can you imagine trying to feed a young child while avoiding anything with wheat, soy, and peanuts? It's very, very difficult, but you'd have to do it.

And just wait until Katie started school. Surely you've seen news clips of parents of children with severe peanut allergy. They quickly become the least popular parent at school. NO peanut product whatsoever can be allowed on campus. If their allergic child were to even touch a playground toy that had a speck of peanut oil on it they could be sent into anaphylactic shock and die within minutes.

I gave Katie three treatments—one each for wheat, soy, and peanut. The day after each treatment she was able to eat the food she had been treated for. This was many years ago and Katie continues to live a normal life where she can eat anything she likes.

Allergies ARE a big deal

You may already be thinking, "But my child doesn't have anaphylactic allergies so what does this have to do with me and my family?" As it turns out, although severe and potentially life threatening, anaphylactic allergies represent just a tiny fraction of allergy problems.

Make no mistake, though, *allergies and sensitivities can and probably are playing a BIG part in your child's health problems*. They cause or greatly contribute to ALL the conditions listed at the beginning of this report. Not only that, if left untreated, your child's allergies can and most assuredly will continue to wreck their health into adulthood, perhaps even their entire lives.

Read what Jacquenline Krohn, M.D., wrote in her book *Allergy Relief & Prevention:*

> "Allergies are not just a nuisance to be ignored until they can no longer be denied—they constitute a health problem that must be treated. Untreated allergies can lead to more serious problems as we get older. Blood pressure problems, diabetes, cardiovascular disorders, arthritis, and other degenerative diseases can develop as a result of untreated allergies. **If we do not take the time to treat allergies and to get well now, we will have to take the time to be sick later**."

Most of the adults I treat in my practice have chronic degenerative diseases that can be traced back to one or more of the common childhood health problems discussed in this report, so I know firsthand that Dr. Krohn's statement is true.

This bit of news probably comes as a great surprise to you. You had no idea hidden allergies were behind so much of your family's suffering, did you?

Well, there's some things you need to know about allergies that you won't hear from the HMO doctor or in the Zyrtec commercials you see on T.V.…

Allergy 101

When you hear the word "allergy," what do you think of? If you're like most people, you think of sneezing, itchy red eyes, and a stuffed up nose. And that's probably *all* you think about.

This type of allergy is often called "hayfever" or "seasonal allergies." It keeps medical allergists busy in the spring as the suffering throngs get scratch tests and seek relief from their misery via shots and pills. The most common culprit is pollen allergy, but other things like dust and pet dander can cause these kinds of allergies, too.

Seasonal allergies can be mild or severe. If your child has mild seasonal allergies you may consider them to be nothing more than a nuisance she must endure a few weeks every year. Or, it's just as likely your child's allergies are debilitating, making her miserable all year!

The medical term for this type of allergy is "common allergy." Symptoms caused by common allergy happen immediately and are usually localized to the part of the body exposed to the allergen, such as your child's nose and eyes. (Something you're allergic to is called an "allergen.")

Foods can be common allergies, too. Katie is a dramatic example of people who have severe common food allergies.

What you probably didn't know is that there are other types of allergies. Here's one I bet you never heard of:

It's called **"delayed pattern food allergy."** With this type of allergy, your child may not have symptoms for up to *three days* after eating a food she's allergic to and allergic foods can keep causing her symptoms for *weeks*. As you can imagine, figuring out on your own what foods your child is allergic to is all but impossible.

Before I explain this in depth, let's talk about…

Is it allergy or sensitivity?

Sometimes your child reacts negatively to things she doesn't produce antibodies to. Let's say her bottom lip tingles every time she eats anything with banana in it. You rush her to the allergist for tests, but they come back negative for banana. Huh?

When you ask the doctor what gives, he says, "Oh, she's just sensitive to bananas." Or, he'll use the word "hypersensitive." Either way, in his mind your child is not allergic to bananas and as far as he's concerned the only thing you can do is make sure she isn't fed anything with banana in it.

In truth, many people have more sensitivities than true allergies. In fact, many patients I've treated said their doctor told them they weren't allergic to anything, or just a few things. Then they'd say to me, "Then why do I feel so bad?"

Scientists don't really understand how we can be sensitive to something without being allergic to it. Here's my take: true allergies occur when your *immune system* makes mistakes. With sensitivities, I believe we must point the finger of blame at your *brain*. Your brain may get your immune system involved in the mess, because your brain controls everything in your body, but it's not your immune system's fault.

True allergy

A true allergy occurs when your child's immune system makes an antibody to something it mistakingly thinks is bad for her.

Let's use ragweed as an example. Ragweed allergy occurs when her body comes to think ragweed is a "threat" to her safety and wellbeing. There's no reason for her to be allergic to ragweed, by itself it's harmless, but somehow her immune system comes to think it is.

For something to be called an allergy, one's body must make an antibody to it. If it doesn't, it's called a sensitivity.

How did your child get her allergies?

More is probably *not* known about how we get allergies than *is* known. Here's some of what we do know:

Most likely your child inherited many of her allergies and sensitivities. If mom, dad, and grandma are allergic to ragweed, chances are she will be allergic to ragweed, too. She can inherit *any* allergy or sensitivity. This explains, in part, how she can react to something she's never eaten or been exposed to.

Another common way children develop food allergies is by being fed solid food too early in life. Feed a baby a food it can't digest and there's a good chance it will become allergic to it.

When partially digested food gets into her bloodstream through an underdeveloped intestinal wall, her immune system won't recognize the food and so has to think of it as a threat. Her body will make an antibody to the food and she'll have a new food allergy.

An antibody is like a wanted poster. It helps the cells of her immune system recognize things thought to be bad. Millions are made and travel throughout her body, in her blood and lymph vessels, looking for the "bad guy" they were made to identify. More on the role these guys play in disease later.

Lastly, your child can become sensitive to things because of poor genetics. This is different from inheriting allergies. She may have been born with a poor immune system, one barely capable of keeping track of what's "good" and what's "bad." Such a poor immune system would likely develop allergies to many harmless substances.

Categories of allergens

Inhalants. Anything your child contacts through her nose, throat, and bronchial tubes. Examples are pollen, smoke, smog, scented products such as perfumes and cosmetics, dust, dust mites, and chemicals.

Ingestants. Food, and everything modern industry puts in food. Foods that cause immediate reactions are easy to figure out, but what about the ones that don't affect your child for days?

Contactants. Things that touch your child's skin, including fabrics, lotions, baby oil, carpets, leather, cosmetics and cosmetic applicators, food when it comes in contact with the skin, money, and many other things.

Injectants. Vaccinations, immunizations, antibiotics, and anything else someone may inject into your child's body.

Infectants. Yes, your child can be sensitive to viruses, bacteria, and parasites. If she is, it will mean she'll be far more likely to fall victim to invasion by that infectant. In other words, if she's sensitive to viruses that cause the common cold she will be more likely to catch a cold.

Physical Agents. Heat, the sun, humid air, cold, cold mist, microwave, x-ray radiation, fluorescent lights, radiation from cell phones, cordless phones, computers, TVs, and power lines, and noise coming from traffic, airplanes, trains, etc. Frightening, I know.

What causes allergy symptoms?

By now you should have a decent idea of *how* your child gets allergies and sensitivities, so let's talk about how they can make her feel so bad.

Allergy symptoms are caused by chemicals released by your child's body, mostly the cells of her immune system. These powerful chemicals are called "signaling molecules" (SM). They carry names like histamine, heparin, serotonin, lymphokines, leukotrienes, cytokines, prostaglandins, interferons, and bradykinins. You may have heard of some of these SMs.

Each SM causes its own signature set of symptoms. Some cause flushing, pain, shortness of breath, fast heart rate, constricted or dilated blood vessels, diarrhea and abdominal cramps. Others cause headache, itching or burning sensations followed by a flushing or "heat" sensation, sneezing, nasal discharge, asthma attacks, and odd body sensations. Still others cause fever, swelling, drowsiness, confusion, feelings of anxiety, extreme fatigue, memory loss, and even feelings of impending doom. I could go on and on!

Why does your child's body release these chemicals if they cause her to feel so bad? They're there to protect her and were only meant to be used when a *real* threat appears, like when a bacteria, virus, or parasite tries to invade her body.

When a real threat appears, you want her immune system to react swiftly and violently because if it doesn't, these things could kill her! In fact, if her immune system stopped working today, the next virus or bacteria that came along would kill her.

SMs serve a critical function and won't cause problems if they're released in small amounts. When she has a lot of allergies, though, **these chemicals can do great harm**. How? Mostly because they cause chronic inflammation and chronic inflammation tears her body apart from the inside out!

What I've just described is the biochemical explanation for how allergies cause many symptoms common to childhood, such as seasonal allergies, eczema, asthma, and chronic bowel problems.

But this simple biochemical explanation does NOT explain how allergies cause or contribute to conditions such as ADD, ADHD, allergy-related autism, and learning difficulties. To understand how allergies and sensitivities cause these conditions, we have to dig deeper.

Your child can be sensitive to <u>ANYTHING!</u>

Shocking I know, but 100% true.

Jimmy (again, not his real name), just four years old, suffered from eczema, a skin condition caused by food sensitivities. When I first saw him he was shy, but oddly motivated. His little cheeks were red and inflamed and there were scaly rashes on his arms and legs. "This is when he looks good," his mother told me.

Jimmy was motivated because his mother had told him that if my treatment really worked he could eat all his favorite foods again, the very foods that were making his skin red and irritated and were making him feel bad. Jimmy missed his salmon and asparagus!

Figuring out what's causing eczema in a child can be relatively easy if their diet is limited. Usually they have to be treated for the basics: wheat, corn, dairy, eggs, soy (common additive), some fruit, a few veggies, and sugar.

Not so with Jimmy. He enjoyed a varied and healthy diet any health-seeking adult would be proud of. Lucky for him, his mother had already identified many foods that made him sick so from the first treatment we were off and running. Jimmy's eczema resolved through Sensitivity Elimination Treatment. (I'll be talking about eczema in depth later—keep reading!)

Nutrient sensitivities

Yes, as the heading implies, your child can be sensitive to nutrients. As I've said, she can be sensitive to *anything*.

What does it mean to be sensitive to nutrients? Nutrients and energy (calories) are why we eat. Or rather, they're what our body's get out of the food we eat.

She needs nutrients called amino acids to make things like hormones, enzymes, neurotransmitters and to repair damaged or worn out tissues; she needs fatty acids to make supple brain cells to assist her in learning; vitamins like C, E, and D to help her fight off bacteria, viruses, and parasites; sugar for energy; and minerals to act as co-factors for enzymes and cellular processes like energy production.

When your child is sensitive to a nutrient she will absorb and utilize that nutrient poorly and may suffer a symptom or symptoms when she eats a food that contains that nutrient.

That statement is so important I want you to go back and read it again.

This is why giving your child vitamin supplements may not only not help her, it may make her feel worse because you would just be giving her more of the very things she was sensitive to! I've seen this many times in practice. After learning this, patients often say, "No wonder I felt bad after taking my supplements!"

This is so important for you to get that I'm going to borrow information from a later topic, ADHD. Mineral deficiencies, caused by both poor nutrition as well as sensitivities to the minerals, are a significant contributing factor to ADHD. Statistics show that 100% of these children are deficient in magnesium, 50% are deficient in manganese, and 80% are deficient in zinc.

Children with ADHD are almost always sensitive to these minerals, and much more. When they eat foods with these minerals they don't absorb them well, which leads to deficiencies, which leads to ADHD behavior. Supplementing with minerals is mostly ineffective if the child is sensitive to the supplements. Supplementing *after* Sensitivity Elimination Treatment is by far the best way to restore normal levels of these important nutrients.

Treating nutrient sensitivities is so important that I always do it first in any treatment program. It would be foolish if not downright wrong for me to do anything else.

Let me give you a few examples of just how powerful nutrient treatments can be.

My very first seasonal allergy patient was a young man who complained of sneezing attacks every day, all day. They were worse in the spring and summer, but he said he sneezed *every* day.

He was almost done with the treatment program and while he was feeling a little better, he was still sneezing. One day I treated him for quercetin, a member of the bioflavonoid family. On his next visit he reported that he stopped sneezing about three hours after the treatment.

Curious, I read up on quercetin and found that one of its functions in our bodies is to act as a natural antihistamine. (This type of sneezing is caused by excessive histamine release.) I also learned quercetin is naturally present in almost all foods. My patient was sensitive to quercetin so

he didn't absorb it very well and thus didn't have the benefit of its antihistamine effects. Once the sensitivity was corrected things returned to normal.

Another example is a young mother who came to me shortly after being diagnosed with chronic fatigue and fibromyalgia. Among her complaints were widespread pain, anxiety, and insomnia. Her first treatment was for amino acids. She returned the following week and reported that 80% of her pain was gone, she had *no* anxiety, and she was sleeping through the night.

Another fibromyalgia patient reported that about four hours after being treated for amino acids her sense of smell and appetite returned. She hadn't smelled anything for over three years and had so little appetite that she weighed only 98 pounds when she started treatment.

One more fibromyalgia story. This woman had severe neck pain for no apparent reason and was often so muddle-brained that she got lost driving home from work. About three hours after her second treatment all her neck pain and brain fog completely disappeared.

Are these miracles? These patients think they are.

Three ways to handle allergies and sensitivities

What can you do about your child's allergies and sensitivities? I'm aware of only three ways to treat them:

Avoidance: The first is to have her avoid the offending substance. This could be easy or it could be very difficult, as it was with Katie. Avoidance and rotation diets do help for food allergies and sensitivities, but it's a lousy way to live.

Shots and medication: The second way is to follow the medical route. Allergy shots work for some people, but not for many, mostly for inhalant allergies. But who wants to drag their child to the doctor's office to get a shot they hate every week for a year or two, or longer? I've had several patients tell me they got allergy shots for more than 25 years!

SET-DB™: The third way is through Sensitivity Elimination Treatment by Dr. Boothe™ (SET-DB™). This is what I do. Let me explain…

Sensitivity Elimination Treatment by Dr. Boothe™ (SET-DB™)

SET-DB™ was developed by Dr. Teryl Boothe, D.C., about 20 years ago. It's a fascinating story that I won't get into in this report. Suffice it to say, SET-DB™ is uniquely effective, so effective I rarely have to repeat my treatments. This means about **99.8% of the time my patients have to be treated only once for anything they're sensitive to**.

The treatment itself is simple and painless. It's so gentle I can comfortably treat patients as young as six months and as old as 92.

How I test for sensitivities

Let's back up. Before I can treat her, I have to find out what she's sensitive to. To do this, I use sophisticated computerized equipment. The testing begins after she places her hand on a sensor.

I'm not going to get into exactly how the testing is done because it's outside of most people's education and experience. I once had a retired physicist come to my office for an evaluation. He understood everything I was doing—it was child's play to him. But to you and I it seems almost magical because it's outside of our education and experience.

Simply put, I will test your child electronically, or "energetically," to see what it doesn't like. (Remember, a sensitivity is nothing more than something your body has come to dislike.) Because the testing is done electronically, I can test hundreds of potential sensitivities in a few minutes. The software records how mild or strong she reacts to everything.

This type of testing isn't allergy testing because it doesn't involve blood. Scratch tests are the most common type of allergy testing because they're cheap and easy to do (which is why insurance companies gladly pay for them), but they're not very accurate. Many patients have told me their scratch tests were negative, yet I found tons of sensitivities with my equipment.

How SET-DB™ is done and how it works

Let's say we were treating tree pollens today and I found she was sensitive to 55 trees. After testing, I would make a treatment vial containing the electronic equivalent of all 55 trees. Again, physicist stuff here.

Simply put, when I place this small treatment vial in her hand her nervous system will detect the energy in the vial and think she's holding the 55 trees. And because it mistakenly thinks the trees are "bad," it will focus like a laser beam on them.

She will remain seated while I perform the treatment, which effectively "reprograms" her brain right there and then to stop identifying the 55 trees as bad.

We don't really know exactly why this procedure is so effective. That shouldn't bother you, though. Do you watch television? If so, can you explain how sound and images get transmitted around the world and from outer space on invisible beams of energy to your house? Probably not, but you can still operate a TV and take advantage of the technology.

You don't have to know HOW something works to use it.

It's the same with SET-DB™.

This is the best way I've come up with to explain it. Windows 3.1 came out way back in the 1990s. It ran much better than 3.0, but one big problem remained: computers running 3.1 would still lock up every day. Users could usually reboot their computers by pressing control-alt-delete

on the keyboard, but sometimes it was so bad they had to unplug the computer and plug it back in before it would run again.

Here's what was happening: Windows locked up when two programs tried to access the same memory address. A fix for this didn't exist in Windows' code so the program stopped working and the computer froze.

A sensitivity is kind of like that: it's an electrical incompatibility between your child's body and the substance it's come to believe is bad. SET-DB™ is like a "reboot": it cancels the electrical incompatibility so that the next time she runs into that substance she won't react to it.

The big difference here is, Windows 3.1 always locked up again, usually the same day, but her sensitivity will be gone for good.

When you bring her in for her next treatment, we move on to another category without retesting the trees she was treated for. SET-DB™ is so effective I have complete confidence that when I treat her for something, she will no longer be sensitive to it.

Now, "forever" is a long time. I can't say with 100% surety that all my treatments will last forever. But, SET-DB™ is so effective that very, very few treatments ever have to be repeated. If a treatment ever does have to be repeated, the visit is free.

I think I've laid enough groundwork to begin talking about specific health challenges your child may be having. With each condition, I will discuss the roll sensitivities play in the condition, my treatment protocol, and other common treatment options.

Seasonal allergies

I've already explained that seasonal allergies, or hayfever, occur when your child becomes sensitized to things like pollens, pet dander, and dust/dust mites. Symptoms common to seasonal allergies are sneezing, itchy red eyes, and a stuffed up or runny nose.

Medical care consists of drugs—no surprise there—either by prescription or over the counter. They may be swallowed, given in shots, or sprayed up the nose. If your child's symptoms are mild and the drugs work fairly well, you may be tempted to do nothing more.

If so, I urge you to reconsider. Recall that Dr. Krohn said allergies must be treated *now* or dealt with later as illness. Drugs simply attempt to block your child's response to an allergen but do nothing about the allergy itself. And they have side effects. *All* drugs have side effects—some small and some big but they *all* have them.

It's my opinion, and the opinion of my many patients, that it's far better to get rid of your child's sensitivities than to attempt to suppress her body's response.

My treatment program for seasonal allergies consists of treatment for plant groups like trees, grasses, weeds, and flowers, as well as dust, fumes, epidermals, mold, and fungus. I have you

bring in samples from your child's environment, such as dust from your home and samples of pet hair if you have pets, to ensure she is cleared for those as well. (When a patient is treated for something they are said to "clear" that sensitivity.)

Childhood ear infections

Childhood ear infections (otitis media) are common. In fact, myringotomy, ear tube surgery, replaced tonsillectomy as the cash cow of pediatric offices years ago.

The middle ear is an air-filled cavity located behind the eardrum. When sound enters the ear it makes the eardrum vibrate, which in turn makes tiny bones in the middle ear vibrate. This transmits sound signals to the inner ear where nerves relay the signals to the brain, which decodes the vibrations into sound.

A small passage leading from the middle ear to the upper throat called the eustachian tube equalizes air pressure between the middle ear and the outside world. (When your ears "pop" while yawning or swallowing, the eustachian tubes are adjusting the air pressure in the middle ears.) Allergies and sensitivities, particularly to food, cause the eustachian tube to swell and plug up.

If there are bacteria or viruses in the middle ear when the eustachian tube plugs up, your child can get otitis media, or an ear infection. I'm sure you're familiar with the symptoms: pulling or rubbing the ear, fussiness or irritability, fluid leaking from the ear (when the eardrum bursts), fever, and difficulty sleeping.

Medical treatment is antibiotics. This may be somewhat effective for bacterial infections but worthless for viral problems. If your child has had frequent ear infections her doctor will likely recommend that tubes be placed in the eardrum so fluid can drain out. In essence they're saying, "We can't stop these ear infections so let's place a drain in your child's eardrum so the infected material has a way to get out."

In most cases the permanent answer is to have your child's sensitivities corrected so the eustachian tube doesn't become inflamed and blocked. Her ears will drain on their own and the ear infections will stop.

Your child would need to go through the food and nutrient treatments. If she has inhalant sensitivities she would go through those treatments, too, as they may also cause the eustachian tube to plug up. While it may sound like a lot of treatment, remember it will *fix* the problem. Also, your child would be far less likely to get some of the other conditions I discuss in this report if she gets her sensitivities corrected.

Eczema

Eczema (atopic dermatitis) is a skin condition that usually begins in infancy. (60% of kids with eczema get it before age one.) It's commonly found in kids with a family history of asthma, hayfever, or allergies of any type.

It's often called "the itch that rashes." Patients say it itches like crazy, which promotes scratching and keeps the skin red and chapped. Sometimes it oozes and gets infected. The rashes typically appear on the face, arms, and legs, but can occur anywhere.

I've seen many cases of eczema over the years. My guess the increase is partly caused by our polluted environment that gets worse each year. Your child's immune system struggles but is soon overburdened and easily develops sensitivities to foods and chemicals.

Medical treatment consists of salves to suppress the inflammation. Cortisone creams are commonly prescribed. Do they work? Yes and no. Sometimes they get rid of the rash, but it always comes back until the cause is corrected.

Eczema is caused by allergies and sensitivities, mostly to foods. Treating your child's sensitivities will make the eczema disappear. I've done it many times. Occasionally, fabrics, detergents, and personal care products like lotions have to be treated as well.

Milk, eggs, and peanuts are common offending foods, but sensitivities to wheat, sugars, soy, citrus, fruit juices, food additives, tomatoes, meat, fats, and chocolate are also common. Of course, sensitivity to *anything* can make her skin itch, turn red, or flake.

Allergic asthma

Asthma is a health problem on the rise. Consider these statistics:

- 10 million U.S. children under 18 have asthma.
- Asthma accounts for one-quarter of all emergency room visits in the United States each year with 2 million emergency room visits in 2001.
- Approximately 44% of all asthma hospitalizations are for children.
- Approximately 40% of children who have asthmatic parents will develop asthma.
- Every day in America 40,000 people miss school or work, 30,000 people have an asthma attack, 5,000 people visit the emergency room, 1,000 people are admitted to the hospital and 11 people die due to asthma.

Asthma is a condition where a person's bronchial tubes (small airway passages that lead deep into the lungs) swell periodically and the muscles around the tubules tighten. This blocks the flow of air to the lungs and causes wheezing, coughing, and hard, labored breathing.

Asthma can start at any age, can come and go throughout life, and can progress to become a chronic problem. As you read above, although rare, it can be fatal. If your child has asthma you know first hand how scary an asthma attack can be.

Medical treatment for asthma consists of inhalers, devices called nebulizers that deliver drugs in a misty spray, steroids, allergy medications, and often antibiotics. Environmental recommendations can include hypo-allergenic coverings for furniture, replacing carpets with hardwood flooring to reduce dust and dust mites, getting rid of pets, and special filters to keep the air inside the home cleaner.

Because asthma can be fatal, it's important for all asthmatics to keep their inhaler close at hand. The 11 people who die daily due to asthma die because they left their inhaler at home or at the office, had an asthma attack, and couldn't get medical attention fast enough. They're all preventable deaths.

Asthma attacks can be triggered by sensitivities to foods, pollens, dust, environmental factors such as perfumes, chemicals, and animal dander. Even such things as bacteria, climate or weather factors and emotions can cause an asthma attack. In fact, a sensitivity to *anything* can cause an asthma attack.

Childhood is the best time to "nip asthma in the bud." Children respond extremely well to SET-DB™!

Asthmatics typically need to be treated for nutrients, foods, and inhalants. If you have some idea what's causing your child's asthma to flare up, those foods or items can be treated first (after the nutrient groups).

Years ago I had a mother bring in her young boy, about 10 years of age, for treatment. He had asthma and she had figured out which foods caused her son to have asthma attacks. (She figured *some* of them out; there were others she didn't know about.) Of course, it was all his favorite foods, particularly wheat, sugar, and dairy. After SET-DB™ he no longer needed his inhaler and was pleased as punch he could return to enjoying his favorite foods again.

ADD/ADHD

First, some terminology. ADD = Attention Deficit Disorder. ADHD = Attention Deficit/Hyperactivity Disorder. I'm going to use ADD for the sake of brevity. Some children who have problems focusing are also hyperactive.

Opinions as to just what ADD is, its causes, symptoms, and how it should be treated are as common as shaky hands at a Starbucks. The internet is choked with sites for teachers, parents, doctors, and patients. Much confusion abounds.

ADD is found more often in boys than girls, 80% to 20%. It was thought that only kids got it, but the latest research shows that about 50% of children with ADD may carry it into adulthood. I've treated adults with ADD.

Kids with ADD have trouble paying attention, concentrating, and are easily distracted. They are often impulsive, acting before they think. Kids who have these behaviors and are also in constant motion: running, jumping, rolling around, climbing, wiggling, tapping their fingers, swinging their legs, jumping up and down, etc., are also given the label "hyperactive" and would be diagnosed with ADHD.

Researchers are lost when it comes to what causes ADD. Is it a brain injury? Allergies? Deficiency of Class A stimulants like Ritalin? Is it inherited? They don't know for sure.

Also, there are other questions…

Why is the incidence of ADD so much higher in the U.S. than other major countries like the United Kingdom? It's reported to be diagnosed in 3–5% of U.S. children but only 1.7% of U.K. kids. Myself and others like me think the difference is the drug culture that permeates the U.S. is not as strong in the U.K. U.S. research says kids over six should be on drugs like Ritalin while the U.K. medical system is trying to improve their citizen's parenting skills.

When a capitalist builds a hammer they naturally go looking for people with nails to sell their hammers to. Invariably they begin "educating" the public that there are a lot more nails than we ever knew and thus a greater need for more and more hammers.

Now, we can't ignore the scientific achievements of the drug industry. There's no doubt drugs like Ritalin have helped many children perform better in school and behave better in society. Some, about half, are able to control their behavior while on the drugs. This allows them to get through school and hopefully lead a normal life. (I believe that if researchers continue to follow this half they would find many who developed degenerative diseases later in life. Why? Their sensitivities were never fixed.)

However, what about the other 50%? This group could have been sensitive to their drugs and thus did not respond to them. Also, they could have suffered side effects (or sensitivity reactions) of all types. In many cases the kids walk around like zombies or robots, their brains almost completely shut down. Others become violent, wrecking havoc with their family, at school, and with society in general.

Left completely untreated, ADD kids are likely to be social outcasts, school dropouts, or even criminals. They tend to grow up as frustrated, angry adults.

Sensitivities and ADD/ADHD

The shocking fact is there is hardly any disease or condition in which sensitivities are not involved, either as a direct cause or a contributing factor. You can be sensitive to anything you come in contact with, including the sun itself.

(As a side note, since I brought it up, I have treated several individuals for "sun allergy." They could not tolerate being in direct sun for more than a few minutes. Some would break out

in small white bumps or rashes while others would feel sick. After treatment they were fine. Odd, isn't it? But 100% true.)

Hidden sensitivities can cause symptoms of any health disorder, including ADD and ADHD, at any age.

I would like to introduce the term "brain allergy." It's not that your child is allergic to her brain, it's that her sensitivities *affect* her brain.

Some allergy reactions are biochemical, as discussed earlier in this report. Signaling molecules (SM) released by her immune system during an allergy reaction can affect her brain in powerful ways.

In clinical experiments, cytokines, an SM commonly released during an allergy response, have been given to human subjects with the hope they would help them combat cancer or other severe diseases. These trials showed how many symptoms are produced by cytokines. Some patients become belligerent and confused after IV infusion of cytokines while others developed symptoms of psychotic illness.

I could go on and on but I'm afraid I would put you to sleep. Instead of citing research I'd like to give you a couple of examples of how sensitivities can affect the brain, from my own clinical experience.

I had a patient who got two treatments in one day, the first before lunch and the second after lunch. Before lunch she was as lucid and responsive as anyone else. After lunch was a different story. She had eaten wheat, a sensitivity she hadn't yet been treated for. She could hardly hold her head up, almost fell out of her chair, and her speech was slurred. I know it sounds like she was drunk but relatives who dined with her said no one drank any alcohol.

Another patient had severe food sensitivities that affected her thinking. Her husband made custom wood clocks he sold at fairs up and down the state. She went with him once to help out. She said she "ate the wrong thing for lunch" and that afternoon initiated a two-for-one sale: every customer who bought a clock got a second for free. Needless to say, that was the last sales trip she was invited on.

Sensitivities of all kinds can have profound effects on your child's brain, and yours, too.

My treatment program for ADD includes treatment for nutrient and food sensitivities, of course. If your child has seasonal allergies those can be treated as well.

A young mother brought her 12-year-old son in for treatment. She told me he was failing school because he couldn't concentrate long enough to complete a homework assignment and was always getting in trouble in class for not paying attention.

After treatment, she said, "He's like a whole different kid!" He was able to finish his homework without badgering—he just sat down and did it—and could pay attention in class. It wasn't long before his grades came up.

Another mother brought her 13-year-old son in for ADD and other behavioral issues. In addition to not being able to pay attention in school or when doing homework, he had fits of rage at school and at home. Normally a very sweet and mild-tempered boy, the wrong foods could make him fly off the handle or render him completely unable to complete even the simplest task. It had become so bad that he had to be home schooled as he could no longer function in public schools. He also suffered skin rashes caused by food sensitivities.

SET-DB™ corrected all these problems and allowed him to attend public school, something both he and his mother wanted.

Allergy-related autism

If your child has autism you don't need to be told what it is. It isn't my intention to define all the possible signs and symptoms associated with autism—there are too many for this short report. Autism includes a wide spectrum of conditions and behaviors.

Autism has become a huge health problem in the U.S. Hardly a month goes by without some story appearing in the media debating its cause. Some say it's caused or greatly aggravated by childhood immunizations. The government, which has a huge investment in immunizations, swears the shots are (almost) harmless. What causes autism then? They don't know.

In fact, Western medicine knows very little about autism. Sure, scientists have defined symptoms, argued over possible causes, postulated on treatments, and plead for millions in new research money—but they still know very little about it.

According to the CDC, in the U.S. the incidence of autism spectrum disorder went from 6.7 per 1,000 in 2000 to 14.6 in 2012—staggering numbers.

Doctors like myself who do SET-DB™ think differently about autism than other doctors. This part of my report will discuss autism from a sensitivity viewpoint.

What is allergy-related autism?

I have a personal connection to autism because one of my children was thought to be autistic when very young. He wasn't, but we learned a lot about it as we strove to help him. I didn't do sensitivity work back then so I didn't know much more about autism than anyone else.

Dr. Devi Nampudripad, who pioneered sensitivity elimination treatment, defined autism as:

"*A nutritional deficiency disorder causing biological, neurological, and developmental problems in children. The nutritional deficiency is not caused by failing to take enough nutrients by mouth but by poor digestion, absorption, assimilation, and utilization of essential nutrients due to allergies*."

This is the approach I and other doctors who treat sensitivities take. Will SET-DB™ help *everyone* with autism? Frankly, I don't know. Dr. Nampudripad claims to have a 90% success

rate so I'm prone to believe it will help *most*. Even if a patient can't completely be rid of the condition, SET-DB™ will certainly help them have better health and ease their suffering.

Now, back to the subject…

As discussed earlier, your child cannot adequately digest and absorb nutrients she is sensitive to. Regular body functions can't happen without adequate amounts of nutrients. These nutrients are necessary for normal growth and development of your child's every organ, gland, and tissue, as well as her brain, most important in her first five years of life.

In autism, more so than with ADD, every time your child comes in contact with something she is sensitive to it can directly target her brain. Any sensitivity can act as a trigger for autistic behavior. When sensitivities affect different parts of her brain, she can experience symptoms related to the function(s) controlled by that location.

If it affects her vision center her vision may become blurry or fuzzy and images may get scrambled, causing unclear pictures to "float" through her vision. This may be why autistic children don't make eye contact when you talk to them. Her hearing may be affected, as well as her sense of smell. Her thinking, creativity, and imagination may become muddled because brain tissue and nerves responsible for these functions can't do their job without proper nutrition.

Sensitivities common to autism

Autistics can be sensitive to anything and probably are sensitive to just about everything. However, here are some specifics:

Inhalants: Environmental sensitivities are a huge problem for most autistics. While any sensitivity can cause any symptom, remember that with autism the brain is almost always the target. So if an autistic has seasonal allergies she can have behavior flare-ups as well as the typical seasonal allergy symptoms.

Ingestants: Anything that enters the mouth can cause symptoms that may occur immediately or not for days. New substances are added to our food every year to preserve color, flavor, and to extend shelf-life. Some additives have caused serious health problems to sensitive people. Others are just plain harmful, like MSG and aspartame.

Most ill children, autistic or not, "self medicate" by demanding certain foods. I'm often told by a parent that their child will only eat such-and-such and refuses to eat anything else. Typical foods are cheese, crackers, and sugars including fruit and fruit juice, but it can be anything. They're usually highly sensitive to these foods and because they eat practically nothing but them, their behavior gets worse and worse.

Contactants: Sensitivity to natural or synthetic fabrics can affect autistic children and adults. Many are sensitive to cotton even though it's a natural fiber. Cotton fibers are used in carpet, elastics, bed sheets, cosmetic applicators, toilet paper, clothing, etc. Wool can also cause brain symptoms in sensitive persons.

Sensitivity to crude oil and everything made from it is common. Before you say your child isn't exposed to crude oil, think again. The phones you use, the milk containers you pour milk from to feed your family, the polyester fabrics you dress your children in and decorate your house with, and many of the cosmetics you apply to you and your children's bodies are made from crude oil. Take a walk around your house and take note of everything made of plastic or that has plastic components. How about your car? The inside is plastic or fabric, both made from crude oil.

Your child can be sensitive to smells from cleaning agents, cooking, scented paper products, plastic bags, ink, pencils, fertilizers applied to outside plants then tracked into the house, crayons, the insecticides sprayed outside your home, etc.

Injectants: Here we are back to immunizations, the most common injectant your child is likely to be exposed to. Aside from the toxicity issue, vaccinations and immunizations can cause sensitivity reactions. Many, many autistic children were relatively normal until about 18 months of age, the time when most kids get the MMR and other immunizations. The government says it's a coincidence, but many think it isn't.

SET-DB™ for autism

As you can probably imagine by now, treating autistics with SET-DB™ can be very effective, but it is usually a long process. There are many sensitivities to treat. Also, autistics can be difficult to treat because of behavioral issues. While the testing I do is simple and easy for adults and most children, it can be difficult for an autistic, especially on a day when she feels worse than usual.

But the reward will be well worth the time and expense.

Conclusion

When parents actually see their child's health improve with SET-DB™, they often ask me, "Why doesn't everyone get this treatment?" Indeed. I firmly believe that everyone should have their sensitivities identified and eliminated. Unnecessary pain and suffering could be avoided by millions.

There are many reasons why there isn't an SET-DB™ practitioner in every town. Foremost, very few medical doctors do this treatment and they're the gateway into the health care system for most people. If their MD doesn't recommend SET-DB™ they will have to hear about it from someone else.

Also, I have to admit the treatment does sound too good to be true. A cure for allergies? Most people don't believe such a thing is possible. I've seen immunologists on TV claim it's impossible to "cure" an allergy. Well, for *them* that's true.

But it is possible. There is a cure for allergies and sensitivities and now you know about it.

The question is, what are you going to do with this information? Are you going to reject it because you don't understand it, effectively dooming your child to a lifetime of medication and suffering?

Or are you going to investigate it further, try and find out if your child can be helped by SET-DB™? If so, you should know that I offer prospective patients a free 15-minute consultation. This gives me enough time to speak with you about your child's health and to run some tests. We'll discuss the test results and I'll answer any questions you might have.

I'll tell you if I think I can help your child, how many treatments I think she needs, and how much the treatment program will cost. You can accept or reject my recommendations—it's entirely up to you.

I urge you to call my office today and schedule an appointment for your child. The number is **352-586-3005**. My receptionist, **Denise**, will answer the phone. Tell her you've read this report and want to set up a free consultation for your child.

Delaying this visit could cost your child dearly, leaving her to suffer unnecessarily. You now hold the answers you seek for your child's health in your hands!

Thank you for taking the time to read this admittedly long report. I hope we can work together on making your child's life healthier and happier.

Sincerely,

Jason Andras

www.SharingAlternativeSolutions

P.S. We reserve a limited amount of time for these consultations so if you're going to take advantage of this offer, you should call now while you're thinking about it. I would hate for your child to have to wait several weeks or months to get in.

P.S.S. Of course, adults can benefit from SET-DB™, too. You are also invited to schedule a consultation for yourself if you have allergies or health challenges.