Many people think of Lyme disease as a simple illness caused by the bite of an infected tick. Though a bite may be a triggering event, this perspective is simplistic and does not take into consideration the numerous issues that both the patient and doctor must consider and treat in order to attain the best possible outcomes. Furthermore, medical literature suggests that Lyme disease is a complex illness which may be transmitted by mosquito bites, blood transfusions, sexual intercourse and many other ways. For those patients that become chronically ill after having been infected with the many microbes associated with chronic Lyme disease, there is often much more to the puzzle than simply controlling these numerous infections which may have been introduced. In fact, it is believed that there is a subset of the population that may carry the exact same infections, having even been bitten by the same tick, and yet not present with a chronic illness.

Testing for Lyme disease is notoriously insensitive and misses a significant portion of actual cases. As a result, many patients never receive a proper diagnosis. If and when a diagnosis of chronic Lyme disease has been made, the highest likelihood of recovery comes from a treatment program that considers the multi-factorial nature of the disease process. In order to support the patient’s road back to wellness, treatment must address each of these many factors as part of a well-planned strategy.

Underlying Cause of Many Chronic Illnesses
Lyme disease mimics over 350 different illnesses. It has become known as “The Great Imitator” due to the fact that symptoms of the disease mirror those of so many other ailments. It has been suggested that Lyme disease may be a factor in Multiple Sclerosis, Parkinson’s, Alzheimer’s, Chronic Fatigue Syndrome, Fibromyalgia, and many other conditions lacking clear origin. Once the Lyme disease is effectively treated, many of these other conditions “magically” resolve.

Detoxification of Total Body Burden
A key component of this system is the belief that if a patient does not deal with the numerous toxins stored within the body, it will not only take longer to get rid of the disease, but the patient will generally not remain symptom free and is more likely to relapse at a later time. He is very clear in stating that “toxins create an environment that supports the growth of microorganisms.”

Beyond the fact that toxins create a welcoming home for infection, if one focuses solely on eradication of the Lyme organisms, via antibiotic or other antimicrobial therapies, resistant strains often develop which makes it more difficult to ultimately control the disease process. Thus, it is the body’s terrain which becomes the more important aspect of treatment as opposed to a sole focus on antimicrobial therapies.
After years of advancing the germ theory of medicine, Louis Pasteur’s own deathbed confession was “The microbe is nothing. The terrain is everything.” It is with this focus on the terrain and addressing the root causes of why the body became ill in the first place that true recovery emerges. Thus, the ideal treatment program is one that incorporates both detoxification and antimicrobial therapies in a highly coordinated fashion. Such a program has been created and patient responses have been quite positive.

Beyond using his vast clinical experience and traditional lab testing, a “fully automated, computerized, quantitative electrodermal screening system”, is utilized, or similar bioenergetic testing procedures, to assess the priority items that may be impacting a patient’s health. One of the benefits of this system is that it has the ability to quantify the severity of any number of identified problems such that the practitioner has a better idea of the most important issues to begin treating at that particular time in the patient’s recovery.

As a general rule, it is found that those patients suffering from chronic illnesses have both a high total body burden of pathogens and a high total body burden of toxins. As previously noted, the two are not unrelated. In order to effectively remove pathogenic organisms, one must first unwind the numerous toxic insults that have taken place within us.

A key component of this detoxification approach is the use of laser energetic detoxification (LED). During an LED session, the light of a laser is passed through a clear glass vial of a homeopathic substance which was previously identified, through energetic assessment, as being a stressor for the patient. When laser light shines through a vial of clear liquid, the light coming out the other side of the vial is transformed from a point into a line. This light is “swept” onto the body and immediately signals the release of the “substances” being treated. LED can be used to treat toxins, allergens, infections, as well as auto-immunity to one’s own glands and organs.

Though LED treatments can dramatically accelerate the detoxification process, a patient can be successfully detoxified without the use of LED, if necessary, through the use of homeopathic drops and various other oral chelating and toxin binding agents.

A biofeedback device utilizes to help identify key problem areas in a patient

Dr. Cowden often analogizes the health of the human body as a bathtub. He suggests that one needs to limit or reduce those items that he terms the “dirty-water faucets” such as nutrient-depleted foods, electromagnetic fields, radiation pollution, toxic relationships, toxic emotions, polluted air, heavy metals, antibiotics, and pesticides. He then suggests that we need to increase those items that he terms the “clean-water faucets” such as healthy food and nutrients, purpose and will to live, sunshine and exercise, good relationships, peace, joy, and love, purified water, and fresh air. While simultaneously reducing the flow of dirty water and increasing the flow of clean water into the bathtub, one must ensure that the “drains” or channels of elimination are open. These channels include the bowel, liver, kidneys, and lymphatics. These organs are at the core of the body’s ability to detoxify.

A number of options for enhancing the body’s ability to detoxify are supported. First, pesticides, herbicides, and solvents can often be specifically removed with the use of homeopathic detoxification formulas. Far-Infrared (FIR) sauna can promote effective, nonspecific detoxification through the surface of the skin either alone or in conjunction with specific homeopathics. As an alternative to FIR sauna therapy, various clays can be mixed with warm water and applied to the skin in a warm bathroom, allowed to dry, and washed off in the shower in what are called “clay plaster” therapy. The patient starts with a very small area such as the soles of the feet, the abdomen, or the thighs. It is important to start small or the patient may detoxify too much and, as a result, feel ill.

A technique referred to as “oil swish and spit” or “oil pulling”, where one continuously moves a healthy oil (such as sesame, walnut, almond, or olive oil) around in the mouth for at least 5 minutes before expelling the
oil into the trash, can support the removal of fat-soluble toxins. The best time to "oil pull" is upon awakening in the morning or during the last 5 minutes of a FIR sauna session. Other therapies that can be beneficial for toxin removal are colonics, clay baths, other detox baths, liver/gallbladder flushes, exercise, dry skin brushing, rebounding, neural therapy, herbs and, of course, Laser Energetic Detoxification (LED).

For movement of the lymphatics, which is key in supporting excretion of toxins, a Chi machine or a photomagnetic lymph treatment device such as the Light Beam Generator, the ST-8, or the Lymphstar Pro have been found to be useful options.

Burbur Detox and Parsley Detox are key components of Dr. Cowden’s approach to treatment. Folate, Methyl B12, B6, TMG (trimethylglycine), and certain other nutrients can help bypass specific genetic problems in those patients that have methylation defects identified by genetic testing. Glutathione, chlorella, and spirulina may be quite useful in supporting the body’s ability to detoxify as well.

In general, it is suggested that a combination of detoxification approaches be implemented, such as homeopathy with clay plasters or FIR sauna with “oil pulling”. One approach might be to take a homeopathic detoxification remedy and some heavy metal chelating agents followed by a FIR sauna session and then “oil pulling” during the last 5 minutes of the FIR sauna session.

On average, FIR sauna should be used 2-3 times a week or as often as daily, if tolerated. As with any therapy that promotes sweating, beware that it is important to replenish minerals which may be lost as a result of any sauna therapy.

Another common issue found in patients with chronic Lyme disease is a problem with sulfa drug detoxification. Both past antibiotic use and consumption of meat can unfortunately lead to this problem. Sulfa-based antibiotics are commonly given to animals in order to increase their weight. When the meat is later consumed by humans, these same antibiotics are now introduced into our bodies. Chronically ill patients cannot detoxify these accumulations of sulfa drug residuals which now affect our ability to utilize various sulphur-based detoxification agents such as cysteine, taurine, glutathione, DMPS, DMSA, lipoic acid, and others. This problem with sulphur-based detoxification is likely the result of a genetic defect in one’s sulfation pathway.

In the past, this issue was treated with LED. Though this is still believed to be the ideal solution, a new product that can be used is called Sparga. Though the detoxification of the sulfa drugs may take several weeks with this approach, it is a useful option for those that cannot do the LED therapy. It is recommended that patients do a full bottle of Sparga and then stop. If the patient begins to feel worse, additional treatment with Sparga may be necessary. Once the problem has been adequately addressed, the patient is then better able to take advantage of detoxification agents which previously would have only made the patient feel worse.

In Lyme disease, mercury is seen as one of the most important toxins affecting recovery. Unfortunately, the presence of mercury amalgams in the teeth makes it much more difficult to implement a successful detoxification strategy. Thus, it is generally recommended that amalgams be removed by a biological dentist early in treatment. Both chlorella and zeolite can be used to lower the body burden of toxic metals safely with amalgams present. However, these agents alone are not strong enough to fully address advanced heavy metal toxicity. The use of stronger heavy metal chelating agents such as DMSA or DMPS while amalgams are still present in the teeth can be dangerous. Often, this results in pulling toxic metals from the teeth and shuttling them directly into the brain which may significantly increase neurological symptoms.

Many people make the incorrect assumption that the simple fact that they do not have mercury-containing amalgams means that they do not have an issue with mercury. This is often a dangerous belief. Sources of mercury other than dental amalgams include coal burning for heat and energy (even coal burning in China and other countries affects people in the US), fish consumption, the preservative thimerosal in vaccinations, playing with mercury as children, and industrial exposures. Beyond these sources, a significant amount of the heavy metal burden of the mother is passed directly to her child while pregnant.

Dr. Cowden’s experience is that everyone is metal poisoned to some degree. If one is lucky enough to be one of the rare cases where mercury is not an issue, other metals likely are. Arsenic and lead are common. Exposure to cadmium occurs through inhalation of second-hand smoke. Steel dental crowns contain high levels of nickel. Bottom line is that we are exposed to numerous types of metals from a number of sources on a regular basis. Heavy metals poison more enzyme systems in the body than any other known substances. These metals have deleterious impacts to our overall health and specifically to our ability to recover from chronic illnesses such as Lyme disease.

An often useful option which supports detoxification is a product containing zeolite. Zeolite is a mineral formed from molten lava that binds to various toxins, including heavy metals, and helps to remove them from the body. Zeolites often work well in conjunction with DMSA and oral DMPS.

Another often overlooked aspect of detoxification is not drinking enough water. It is routinely found that patients are drinking coffee, tea, and sodas but not adequate amounts of water. The importance of consuming pure water as part of a detoxification program cannot be overstressed. If patients are dehydrated, not only is detoxification limited, but numerous other bodily functions are impaired. Drinking an average of three liters per day of non-carbonated water to improve kidney, liver and lymphatic function is suggested.
A good detoxification program is the framework upon which other aspects of therapy can be built. Attempts to implement other treatment strategies without first ensuring that the body's channels of elimination are working efficiently lead to a less than ideal outcome. In fact, the original studies where the use of Samento showed significant patient benefits were done in conjunction with a detoxification program. It is believed that the results with Samento alone would not have been as compelling.

**Cowden Lyme Treatment Protocol**

Now that the importance of detoxification is understood, we will turn our attention to how Dr. Cowden approaches the multitude of infections present in those patients with chronic illnesses.

The "Protocol", was put together to address Lyme disease through the use of a number of products that he has found to be highly beneficial. In actuality, the protocol was modified to each of his patient's needs using an electrodermal biofeedback device, or similar bioenergetic testing. However, for practitioners that do not incorporate these tools into their practices, the protocol was designed to ensure the broadest applicability for a chronic Lyme disease patient. The protocol addresses infections, detoxification, heavy metals, hormonal imbalances, sleep and mood disorders, and pain.

At a number of recent conferences, Richard Horowitz, M.D. has shared the results of his own experiences using the protocol. Many of the patients had previously failed to respond to antibiotic therapy. Dr. Horowitz reports that this Lyme treatment protocol showed a moderate improvement in symptoms in 70% of patients. With recent refinements in the protocol, Dr. Horowitz is now seeing improvement in 90% of his patient population that are using the protocol. The conclusion drawn was that the special herbal protocol with hormonal support and heavy metal detoxification may result in an improvement in a significant number of chronic Lyme disease patients.

Dr. Horowitz further suggests that if patients have had a significant improvement with antibiotic therapy, the herbal protocol may be appropriate to incorporate when antibiotics are stopped in order to help promote continued wellness of the patient. With regard to this outstanding Support Program, Dr. Horowitz has said "The majority of chronic Lyme patients relapse once they are taken off antibiotics with symptoms of chronic fatigue, muscle and joint aches and neuro-cognitive problems. I have been searching for a long time for a natural remedy which is safe and efficacious, and I am very happy with the results that I am seeing."

The experience with the use of pharmaceutical antibiotics for the treatment of chronic Lyme disease has been disappointing. It has been found that most of the patients that he sees that have been ill with Lyme disease for long periods of time have attempted antibiotic therapy, but that the antibiotic therapy did not bring about resolution of the condition or that the patient later relapsed when treatment was stopped. In general, patients with suspected or known Lyme disease should seek out a practitioner who can customize a protocol for them. If for some reason that is not possible, many individuals have improved simply by using this published Support Program.

In the past, this Support Program consisted of taking various products up to eight times a day. Some patients found this difficult to follow and as a result, they were not compliant with the protocol or in some cases did not continue at all. Recently, Dr. Cowden has made significant changes to the protocol and created the "Condensed Support Program". The condensed protocol has cut the number of dosings per day from eight to four. Further, early reports suggest that the condensed protocol is more effective than the full protocol, likely due to better patient compliance.

Another exciting aspect of the new condensed protocol is that the products have been energetically infused with frequencies that make them far more effective in addressing the various microbial factors found in chronic Lyme disease.

It has been found that antimicrobial herbs such as Samento, Cumanda, Enula, Takuna, Houttuynia, Banderol, and Quina are powerful options for addressing the common infections found in Lyme disease patients and can be very effective when used with the rest of the protocol.

Houttuynia has been shown to be effective against numerous species of Bartonella, arguably the most difficult microbe to treat in chronic Lyme patients. It is suggested that a rotation of Houttuynia, Cumanda, and Banderol may be the best approach for dealing with Bartonella. For certain species of Bartonella, dosing goes as high as 120 drops twice daily with an average dose of 60 drops twice daily. The rotation is generally one of the three antimicrobials 12 days on followed by 1 days off, followed by the same pattern for the other two products for a total treatment length of six weeks. In general, this approach seems to work for most patients in dealing with pesky Bartonella.

It has been found that, in some patients, Babesia can be more difficult to treat than Borrelia itself. Dr. Cowden recommends both Enula and Mora for Babesia treatments are recommended and often combines Mora with Artemisinin.

In general, the herbs have been found to be highly effective in addressing Borrelia, Bartonella, Babesia, Ehrlichia, Coxiella, Mycoplasma, Chlamydia, HHV-6, EBV, and many other infections commonly seen in chronic Lyme patients.

It is preferred to alternate the antimicrobial herbs in order to ensure that the organisms do not build up a resistance to any one treatment option. He also finds that taking 36 hours off between rotations allows the organisms to come out of hiding and transform into their more vulnerable forms which are then more easily attacked by the herbs. All of these factors are incorporated into the Cowden Support Programs.
It has been found that patients who stay on these protocols for about a year can generally stop treatment and remain in good health. He does, however, caution that physical or emotional trauma or significant toxic exposures can result in triggering the body back into a disease process. As many of the organisms involved in Lyme disease have an ability to hide in the body, one can never be sure that the organisms are entirely eradicated. Instead, the goal of treatment is to tip the balance back into the body's favor such that the body can ensure itself a continued state of wellness.

**Clots, Fibrin and Biofilms**

Another important aspect of treatment includes ensuring that hypercoagulated or thickened blood is addressed. In many cases, the micro-organisms signal the body to create layers of a protein called “fibrin”. This fibrin layer can impair oxygen transport from the blood cells into the tissues and also protects microbes so that they cannot be easily penetrated by antimicrobial herbs or identified as foreign and attacked by white blood cells. Beyond this fibrin build-up, the concept of biofilms has emerged in chronic Lyme disease. Biofilms are yet another protective measure that allow the microbes to be unaffected by antimicrobial treatments. Addressing both hypercoagulation and biofilms increases the chances of a successful treatment outcome.

Serrapeptase is used to help address this hypercoagulable state as well as the protective biofilms. Serrapeptase is a hypoallergenic extract from silkworms which has anti-inflammatory, fibrinolytic (fibrin-digesting), and thrombolytic (clot-dissolving) effects in the body. It is far less likely that a patient would react negatively to Serrapeptase than to other proteolytic (protein-digesting) enzymes made from aspergillus. It is generally recommended that patients take 1-3 capsules twice daily 30 minutes before food with water only.

In some cases, SPS-30 will be added to more specifically address biofilm formation. It has been found that this is only needed in about 10% of patients. In these cases, both Serrapeptase and SPS-30 are incorporated in a very specific way. SPS-30 is taken 60 minutes before a meal followed 30 minutes later by Serrapeptase and then 30 minutes later by the meal.

**Other Important Factors – Sleep, Scars, EMF, and Emotions**

Sleep has been found to be one of the most important aspects of recovery. If a patient is not sleeping, they are unlikely to recover from their illness. In some cases, melatonin has been helpful in helping patients to attain restorative sleep patterns which allow the body to heal more effectively from chronic illness. Liquid melatonin has also been found to be helpful rubbed into the temples to calm autistic children. Amantilla and Babuna are also very helpful in assisting sleep.

It has been found that addressing energetic disturbances, such as scars, can improve patient outcomes significantly. Unimpeded energy flow is needed to ensure optimal healing potential. Scars are often found to have energetic blockages or dysregulations associated with them. The treatment used for scars is a mixture of Calcium Bentonite clay powder and Cicatrix. Once the two are mixed, the paste is applied to the scar, allowed to dry for ten minutes, and then washed off. The process is then repeated twice more the same day.

It is suggested that not more than one scar be treated per day as the treatment can release toxins into the body and make the patient feel worse. Starting with the most problematic scars on the hands and feet and then working towards the core of the body in the midline is also suggested. Of midline scars, circumcision or episiotomy scars are the first that should be addressed. Then, work up the front of the body over the top of the head and down the back of the body to the tailbone area, where there are often invisible bruise scars, until all scars have been treated.

It has been found that many patients have fallen on their tailbone at one time or another and they have a contusive bruise scar which they may be unaware of. As mentioned earlier, three or four clay applications can be helpful. Forceps births, car accidents, and falling out of a high-chair are other common findings which impede optimal structure and function. Cranio-sacral therapy and osteopathic or chiropractic manipulations can help address such structural contributors to illness.

Other important aspects of treatment include supporting the lymphatics, addressing structural issues, and investigating and resolving geopathic and electro-smog exposures. The Chi machine or Healthy Swinger can be supportive of the lymphatics, building up to 15 minutes once or twice per day. A common cause of clogged lymphatics is the presence of filarial worms, which may benefit from the use of Enula.

Geopathic exposure is another important factor in illness. A geopathic field is a disease-causing influence that emanates from the earth above an underground water stream, metal ore vein, fault in the earth, or similar phenomenon. Geopathic stress is best evaluated by a German-made geomagnetometer or by an old-time plumber using dowsing rods, a method used in the past to find pipes buried in the ground. Electrodermal screening can be used to identify energetic influencers which may result in actions such as moving the bed in an attempt to remove one’s sleeping location from a geopathically disturbed area. Spending several hours per night sleeping on a geopathically stressed location often is the single issue preventing a patient from recovering. Geopathic exposure at night also impairs sleep, as can electro-smog.

Electro-smog, or electromagnetic pollution, is a stressor that can be evaluated with a number of relatively inexpensive instruments. If instrument readings on one’s sleeping location are abnormally elevated, the first step is to
Success is not measured by how many Truman's are turned off, but how many people actually get well. If the number of Truman's is reduced to zero, but none of the patients get well, then the success rate is zero. It is not about the method or tools used, it is about the patients getting well. The best way to measure success is by the number of patients that get well.