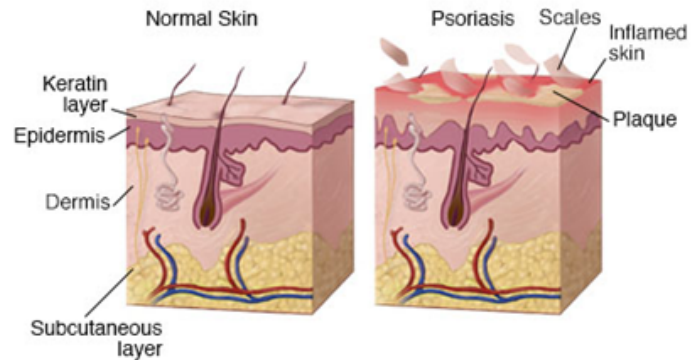


Psoriasis and Psoriatic Arthritis Protocol

Psoriasis is a chronic autoimmune skin condition in which the life cycle of the skin's cells is greatly accelerated leading to a buildup of dead skin cells on the surface of the epidermis. Typically, skin cells grow deep in the skin and then rise to the surface and eventually fall off. In psoriasis, the extra dead skin cells on the surface form red patches and scales that are often itchy and sometimes painful. Psoriasis scales are often a white-silver color and can crack open and bleed. Scales often develop on the joints like knees and elbows but they can form anywhere such as hands, feet, scalp, face, and neck.



Symptoms: Along with the thick red patches and silvery scales, symptoms of psoriasis typically include: itching, burning, or soreness, thickened nails, and swollen, painful and stiff joints, as well as general fatigue. There are several types of psoriasis in which most go through cycles in which the condition flares up for a few weeks or months and then subsides for a period of time.

Causes: Psoriasis is an autoimmune condition in which white blood cells, called T cells, become over active and attack the skin's cells. This mistaken attack causes the skin cell production process to go into overdrive. The sped-up skin cell production causes new skin cells to develop too quickly and are pushed to the skin's surface where they pile up. The overactive T cells also trigger an increased production of more T cells and neutrophils which travel into the skin and can cause pus in pustular lesions. The dilated blood vessels in the psoriasis-affected area create warmth and redness in the skin lesions. The process becomes an ongoing cycle in which new skin cells move to the surface too quickly, typically in days rather weeks.



The cause of the malfunctioning T cells is still unknown but researchers suspect it may be caused by genetics and environmental factors. Factors such as viral and bacterial infections especially in individuals with HIV or a compromised immune system can increase the risk, stress, obesity, and smoking may also be risk factors.

The liver is an important organ involved in an immune response. Hepatic involvement in adaptive immunity allows clearance of activated T cells and signaling molecules following inflammatory reactions. If the liver is not functioning properly due to any of the above risk factors, the deficient liver can lead to an accumulation of excessive over activate T cells, and can then lead to an autoimmune condition such as psoriasis.

Psoriatic Arthritis (PsA) is an inflammatory form of arthritis also caused by an autoimmune condition. Comparing to Rheumatoid arthritis (RA) which is an autoimmune condition caused by an over production of and anti-citrullinated protein antibodies produced by the B cells, in PsA, the joints are attacked by the body's over active T cells. The joint attack by the T cells lead to symptoms such as pain in the joints, joint stiffness and swelling, physical deformity, and fatigue. Patients with psoriasis have a greater risk of developing PsA. According to the Arthritis Foundation, 30 percent of individuals with psoriasis develop PsA. Most individuals with PsA have skin symptoms before their joint symptoms appear, but the joint problems can sometimes begin before skin lesions appear. PsA can also occur in people without skin psoriasis, particularly in those who have relatives with psoriasis.

Comparing to RA which is diagnosed using the RF factor, there is no definitive test for PsA and, therefore, PsA is often undiagnosed or misdiagnosed. Patients who present with characteristics of PsA, particularly the pain, swelling, tenderness and stiffness and the inflammation of the tendons and ligaments in the joints, should be further evaluated for the possibility of PsA.

Patients who have liver conditions such as hepatitis, alcoholic liver disease, non-alcoholic fatty liver disease, cirrhosis etc. often develop arthritis with joint pain and inflammation. Since these people do not have psoriasis, their condition is usually not diagnosed as PsA. However, due to the involvement of liver, these cases can be viewed as pseudo PsA. Pseudo PsA is often observed in RA patients, especially in those who have suffered from RA for very long time and their liver is severely damaged due to the long-term use of immunosuppressant drugs.

Both psoriasis, PsA, and pseudo PsA are caused by a Liver Yin deficiency in TCM.

Wellness Recommendation:

The recommendation includes Brown and LC Balancer to address the liver deficiency. Brown helps nurture the liver, improve liver function and structure to restore liver functionality in regulating the clearance of activated T cells. Through improved hepatic involvement, T cells can stop their attack on the skin's cells. LC Balancer helps improve kidney structure and increase microcirculation to bring in nutrients to the damaged areas. Patients should experience symptom reduction in joint pain and swelling within 2 weeks of the protocol and 6-10 weeks treatment is recommended for sustained results.

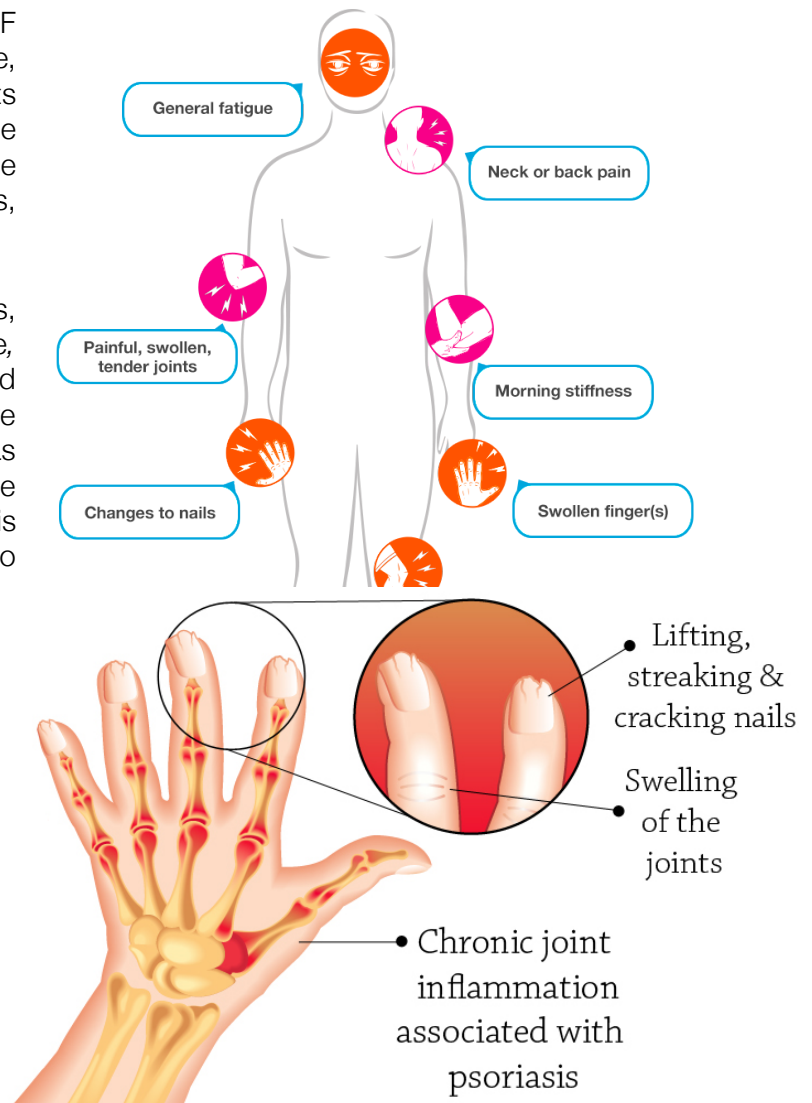
If at any point during the protocol the patient is not seeing the expected improvements, Java is recommended. It is common for patients to suffer from spleen damp along with a liver deficiency, especially when addressing autoimmune conditions. Java improves lymphatic circulation which will help circulate the build-up of T cells and neutrophils out of the affected area. It is recommended to alternate 2 weeks of Brown/LC Balancer and Java/LC Balancer.

Selected Case Studies

Case 1: Successful Resolution of Psoriasis

Robert Bartosh, DC, Danville, Illinois

A 66-year-old female patient was diagnosed with psoriasis with symptoms of rashes and itching. The cause of the condition was undetermined. She started an herbal regimen with products consisting of LC Balancer, Brown and Xcel Capsules. After 4 weeks of the protocol, she reported feeling much better with all of her symptoms and decided to continue for an additional 3 weeks. Within the following weeks, she saw incredible results consisting of diminished rashes and less itching. Dr. Bartosh was very excited and took pictures of the skin improvement and recommended she continue for an additional 3 weeks to continue seeing improvements and to stabilize the improvement.



Case 2: Successful Symptom Relief for Psoriatic Arthritis and Raynaud's Disease

Russel Sher, DC, Asheville, NC

A 17-year-old woman visited Dr. Sher as she was about to receive chemotherapy treatment for her autoimmune conditions which consisted of psoriatic arthritis and Raynaud's disease. She had been working with a Rheumatologist and her condition was deteriorating. She wanted to see if there was an alternative option due to the devastating side effects of chemotherapy.

Dr. Sher looked over her blood tests and put her on a nutritional supplement program to modulate her immune system consisting of Wei Laboratories psoriatic arthritis protocol. In addition, she was put on a 4-week anti-inflammatory detoxification cleanse. Within 4 weeks of the regimen, she was symptom-free. She remains symptom-free and is continuing to improve 2 years later.

Case 3: Successful Healing of Chronic Lifetime Skin Problems

Valerie Ozsu, MSN, CNM, NP, Vacaville, CA

A female patient, 55 years old, came for treatment as she suffered from severe skin lesions on her neck, trunk, and extremities with large patches of bleeding lesions. The problems dated back to her infancy. Further diagnosis (e.g. allergy test) identified extreme sensitivity to sugar and most grains.

The practitioner prescribed a rigid dietary program with a weekly review cycle. A new nutritional schedule including supplements was adopted. After nine months into the treatment program, one month of herbal solutions from Wei Laboratories consisting of LC Balancer and Brown Juice was integrated. After completing the herbal remedies all skin lesions had been completely eliminated. The patient's food sensitivities were tackled in an ongoing process based on cold laser and tapping on allergy meridian points (specific meridians).

The results of the one-year treatment program have been remarkable. Significant skin improvements had been achieved within nine months. After completing the one-year program her skin had been completely cured and normal. The results have been sustained to this day. The patient is back to eating healthy food with no bad skin reaction.