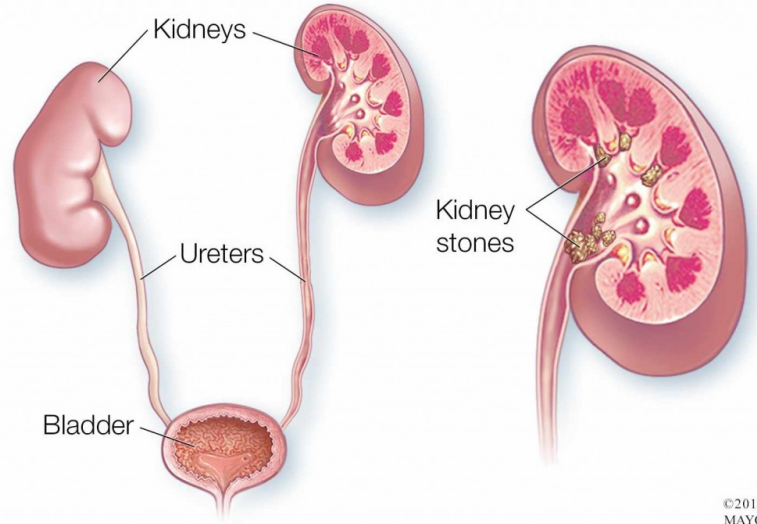


The kidneys filter unwanted substances from the blood and produce urine to excrete them. During the secretion phase of urine production, the filtrate flows into the renal tubule where essential ions are absorbed back into the capillaries while at the same time, waste ions, such as sodium and calcium, and hydrogen ions pass from the capillaries into the renal tubule where they combine with the filtrate and become urine. The urine passes into the collection duct where it eventually passes out of the kidneys into the ureter.

Kidney stones are hard deposits made of minerals and salts that develop in the kidneys. Kidney stones form as a consequence of increased urinary supersaturation with subsequent formation of crystalline products such as calcium, oxalate, and uric acid. Urinary supersaturation, as well as urine that lacks substances that prevent crystals from sticking together, creates an ideal environment for kidney stones to form. Most kidney stones are composed of calcium, usually in the form of calcium oxalate. Oxalate is a substance secreted by the liver but is also in some foods such as fruits and vegetables.



Some factors can contribute to the development of kidney stones such as family history, dehydration, certain diets, obesity, digestive diseases that affect the absorption of calcium and water, and renal tubular acidosis (RTA). RTA occurs when the kidneys fail to excrete acids into the urine, which causes the blood to remain too acidic. This leads to an excess of calcium deposition in the kidneys and that then develops into kidney stones, most likely calcium phosphate stones.

A kidney stone may not cause symptoms until it moves around within the kidney or passes into the ureter. These symptoms include severe pain in the side and back, pain that radiates to the lower abdomen, pain with urination, pink, red, or brown urine, nausea, urinary frequency, fever, and chills if an infection is present, and urinating small amounts.

Wellness Recommendation

The wellness recommendation for kidney stones includes KS. Based on TCM, kidney stone formation is caused by kidney damp and heat. KS helps dissolve and remove kidney stones by clearing damp and heat in the kidneys as well as clearing inflammation and infection of the kidneys. Pyrrosiae Folium, an herb utilized in KS, has been used in Chinese medicine practice for the treatment of urinary infections, urolithiasis, and hematuria caused by damp heat.¹ This herb works through the process of diuresis, or increased urine production, to help patients pass the stone. It also contains antibacterial activities to clear the infection within the kidneys.¹ Patients can experience improvement in their urinary frequency, urinary infection, clearing of blood in urine, and pain with urination in just one week. 2-4 weeks of treatment is recommended for dissolving and passing the kidney stone. Six weeks is recommended to clear kidney damp and heat and prevent stone reformation.

If the kidney has been damaged by the kidney stone and kidney function has been affected, it is recommended to incorporate LC Balancer and Xcel after the kidney stone has been removed and most damp and heat have been cleared, which usually takes about 2 weeks. LC Balancer and Xcel help repair kidney damage and improve kidney function. LC Balancer and Xcel should not be taken before most of the damp and heat have been cleared to avoid aggravating the kidney inflammation.

Selected Case Studies

Case 1: Successful Kidney Stones Treatment

Karen Willfahrt, ND, RN, BSN, AZ

The patient is an 83-year-old female with kidney stone issues. We put her on a therapeutic diet and herbal intake formula KS from Wei Labs. She reported that the kidney stone resolved within days of starting treatment, and she regained her strength. She returned to 80% within 1-2 weeks, and 100% within 2 months. The patient is happy with the treatment. Recuperation took 6 weeks to 2 months due to her advanced age.

Case 2: Successful Treatment of Kidney Calcifications and Kidney Stones

Rebecca Burton, DC, OK

Dr. Burton had a 62-year-old female patient with very severe kidney problems. The patient had previously suffered low energy, kidney stones, and multiple kidney lithotripsies. X-rays showed that the entire kidneys were both calcified. A previous doctor had used an IV to balance minerals which generated some improvement but eventually, the patient saw a plateau. Dr. Burton recommended a very specific treatment protocol from Wei Labs consisting of an internal kidney treatment and WHITEE patches to reduce scarring on the kidneys.

The patient started using KS formula at full dosage for one week. Afterward, Dr. Burton incorporated LC Balancer and Xcel to support kidney structure and filtration as well as WHITEE patches. After a few weeks on this protocol, the patient's blood pressure had decreased significantly and the patient experienced improvement in her memory recall and encountered less brain fog. Her back and kidneys were less painful as well; however, she still experienced burning during urination and had very concentrated urine. When first taking Xcel, the patient experienced some irritation. Also, she noticed that her vision was blurry for five minutes after opening her eyes in the morning.

In order to address this irritation, the patient started taking Bitter Capsules at one-third dosage to remove inflammation from the blood along with the LC Balancer (half dose), KS Formula (2/3 dose), and Xcel (1/3 dose). After a few weeks, the patient reported that she still experienced the burning sensation during urination and her blood pressure started increasing again. Her kidneys felt really sensitive. Dr. Burton recommended adding the BI capsules to remove heat and inflammation within the urinary tract as well as increasing the dosage of the other products on the regimen: LC Balancer (half dose), KS Formula (Full Dose), Xcel (Half Dose), Bitter Capsules (Half Dose). The patient no longer needed to use the WHITEE patches on her lower back.

After 10 weeks of treatment, follow-up x-rays show no more calcifications in either kidney. The patient no longer experiences irritation or burning and follow-up x-rays demonstrate no further calcifications! The patient is very satisfied with the results!

Reference:

1. Xiao, Wei et al. "Comparative Evaluation of Chemical Profiles of *Pyrosiae Folium* Originating from Three *Pyrosia* Species by HPLC-DAD Combined with Multivariate Statistical Analysis." *Molecules* (Basel, Switzerland) vol. 22,12 2122. 1 Dec. 2017, doi:10.3390/molecules22122122