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M-I-N-D Study Description

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Alzheimer's & Dementia Study Description

Purpose: To Improve Function in Alzheimer's & Dementia

Background: Dementia is a devastating condition affecting upwards of 10,000,000 Americans, with ~ 5 million having Alzheimer's Disease (AD). Dementia can be triggered by numerous causes including Alzheimer's, multi infarct dementia, and nutritional deficiencies. Treatment currently is geared towards giving 2 modestly helpful medications, Aricept and Namenda. Numerous studies show that many factors increase the risk of developing dementia, and there is no reason to believe those factors stop contributing to progression and impairment once the dementia occurs. Unfortunately, these factors are largely not addressed in treating these conditions.

Let's Begin with an Important Concept

In most organs, such as the kidney and lungs, over 50% of function can be lost without much clinical effect. As the damage increases however, eventually small changes in function can have dramatic clinical implications. Likely, this also occurs in dementia, which is why some days the person may function quite well and other days they may not remember their children. It is suspected that fluctuations may occur for a number of reasons, as many factors affect brain function.

This leads to a common sense hypothesis: A simple yet comprehensive program aimed at optimizing brain function may increase the person's ability to function in dementia. This may be done by optimizing factors shown to impact the likelihood of developing dementia (e.g.- thyroid and other hormone levels, nutritional factors, treating infections) as well as incorporating low-cost and benign treatments that have clinically been shown to be helpful, but do not get much attention *because* they are low cost.

Restore Cognitive Clarity with the MIND Protocol

So let's go back to how we can improve cognitive function 5-10 %, which can improve function considerably, and sometimes even make the Dementia go away. Begin with a good overall physical. Remarkably, even in teaching hospitals only half of those with dementia had received the basic recommended evaluation. So we begin with a thorough history and lab exam.

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Here is a simple acronym to focus your evaluation and treatment:

M-I-N-D:

Metabolism:

Optimize ***thyroid and testosterone function.***

In 2004, investigators at Wayne State University examined **testosterone levels in men** enrolled in a larger aging study. They found that every 50% increase in free testosterone in the bloodstream was associated with a 26% decrease in the risk of developing Alzheimer's. Men who went on to develop Alzheimer's disease had about half the free testosterone in their bloodstreams as men who did not. More is not better though. In a study giving a much too high dose of 100 mg a day, it unmasked underlying heart disease, increasing heart attack risk early on. 25-50 mg a day topical in men is a reasonable dose in men if the testosterone level is under 450 ng/dl. Caution: Elevated testosterone in women can cause diabetes, so careful not to get it on others. **Thyroid is also critical.** In the Framingham study, women in the lowest and highest third of serum TSH (thyroid test) concentrations had more than twice the risk of developing Alzheimer's.

Infections

Does your mind feel fuzzy when you have an infection? We ignore "asymptomatic" bladder infections at the person's peril! In addition, **Candida is a common cause of post nasal drip and constant throat clearing as well as increased gas.** Consider the expression "old fart" may in part come from Candida! Sinusitis also needs to be treated.

Nutrition

The typical American diet is just as bad for your brain and memory as it is for your heart, leading to cell-damaging inflammation throughout the body, including the brain. Good brain function relies on the right nutritional support. We'll start by introducing a high potency vitamin powder along with other key nutrients such as fish oil, Curcumin¹, and Methylene Blue². Additionally, iron and B12 levels will be evaluated and treated if necessary. For study participants with a history of allergies, this may also be explored as part of the study.

Drugs

We will spend the needed time and get people off of any unnecessary medications. If most people were on the dozen medications that many of the elderly are, they'd likely get arrested for DWI! Very often, many of these are no longer needed, and the benefits of stopping any unnecessary meds can be dramatic.

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¹ **Curcumin** - A special highly absorbed BCM95 **Curcumin** (CuraMed 750mg 1 three times a day. Each cap replaces 10 regular curcumin caps). Curcumin is associated with a 70% lower Alzheimer's risk. Adding Vitamin D makes it even more effective

² **Methylene blue** 60 milligrams three times daily for methylation support (from compounding pharmacies)(WARNING: WILL TURN URINE BLUE!)

Study Objectives

1. Improve cognitive function for study participants
2. Improve functional abilities of study participants (daily tasks)
3. Slow down progression of the illness and additional loss of function
4. Identify patients with cognitive dysfunction who have been incorrectly diagnosed with Dementia

Study Criteria/Requirements

1. Diagnosis of Alzheimer's Disease/Dementia by a neurologist
2. Study participant needs to be ambulatory (even with assistance is okay)
3. A relative or representative who lives with the study participant and will help administer treatments and participate in appointments
4. Complete study administrative forms
5. Pre-study testing (will also be repeated at the end of the study)
 - a. Cognitive testing (15-30 minutes)
 - b. Phone interview with our office to assess daily activities (this is done with the caregiver) 20-30 minutes
6. Collection of recent medical records that includes:
 - a) Neurology exam,
 - b) Lab results/records from your family doctor if necessary
7. Blood work required for the initial appointment (this is usually covered by Medicare or private insurance and can be done at any local lab)
8. Prescription treatments if necessary. These may include some of the following:
 - a) Thyroid prescriptions
 - b) Bioidentical hormones
 - c) Any necessary antibiotics
 - d) Vitamin B12 injections
9. Optional treatments - Treatments that may be recommended but not be paid for by the study (prescription or natural treatments that Dr Teitelbaum feels will be helpful). Any supplements available by our office can be provided at wholesale.
10. The length of the study is 6 months after starting the initial treatments. We may extend this to 9 months if you did not have time to complete the protocol (unusual)

Welcome to the Study!

We think we can help you and others with dementia markedly improve cognitive function. We look forward to helping you and your loved one, while also offering help and hope to millions of others!

Love & Blessings

Jacob Teitelbaum MD

Director-Practitioners Alliance Network (PAN)