

## STROKES: AN ALTERNATIVE PROTOCOL

When our daughter was born with Down syndrome, we found ourselves in uncharted waters so we turned to the experts for guidance. We were told that, among other things, our child would likely have significant diminished mental capacity and a compromised immune system. They told us that we could look forward to 8-12 ear infections each year and regular courses of antibiotics to fight off chronic infections. Today our daughter is 12 years old, and to date, she has never had an ear infection or has had need to take a course of antibiotics. We didn't just "get lucky". This is the result of a lot of research and making deliberate dietary and medicinal choices. Sometimes a fresh protocol can pay dividends. This same principle can be applied in the treatment of strokes.

For decades, I believed there was only the standard tried and tested protocols available to treat stroke patients. The harsh truth is that stroke protocols don't work for all patients. I was forced to confront the limitations of this approach when I impotently watched from afar as my father-in-law became one of the statistics of a stroke patient who did not get to the hospital in time to diminish the effects of a massive stroke. If a stroke patient is able to get to a hospital in time to dissolve their clot, there is a high likelihood that the stroke can be reversed, and they can go on to lead a relatively normal life. Other stroke victims benefit from medications, therapies and monitoring. But there is a group who, despite the best efforts the medical community has to offer, are left tragically disabled. I wanted to offer my patients another solution; a protocol that could improve their lives, even just a little.

Gabriel was a grandfather and a carpenter by trade. His family brought him to me 5 months after his stroke. I was shocked at his appearance. I had seen Gabriel just a year before and he had been the picture of vitality and health. The Gabriel before me now, was much diminished. His eyesight was compromised and his right-side leg and arm were not functional. His voice, speech and memory were unaffected. He had been to rehab and, despite doing everything he was told to do by the medical experts, he wasn't much better. We gave the family some treatment options and they settled on a course of treatment. Besides giving the family access to research on the protocol, we also gave them the risk assessment. At a 70-80% success rate, they were willing to take the risk. We were able to treat him that day. They called the next day to tell us that his eyesight was back and that his arm and leg were just fine.

One morning, I received a frantic phone call from a concerned husband. During the night, his wife had suffered a massive stroke and he wasn't sure she would survive. She was under the care of the doctors at the hospital, so all I could do was pray with him. I also recommended she try my treatment for strokes. He mentioned it to her doctor and was told it couldn't be done because it wasn't part of the hospital protocol. She did survive but was severely disabled. She was bed-ridden, unable to talk, and extremely confused. She could communicate by making noises. Total care was needed. Again, the husband asked if I could help. While she was under hospital care, I could not. After a few weeks, she was sent to a rehab facility. After being there for a short time, the family got permission to fly her down via air ambulance to our facility. We treated her and she flew back the same day. We received a call 3 days later. She was the talk of the whole rehab facility! They had never seen their protocols work so well. She was speaking, feeding herself and there were no signs of dementia. In all their years there, the doctors, staff, therapist and nurse had never seen their protocol work so fast and so well. The husband didn't say anything. We repeated the treatment 6 months later and she showed another spike in improvement.

Recently, I received a call from a concerned wife. A stroke had left her husband without the ability to speak clearly and his mind had also been affected. He could not read or express thoughts. He continually looked to his wife to complete a sentence or a thought. The initial treatment option for this case was donated umbilical cord blood stem cells. He improved over the course of the next few months but the wife wished to see his improvement go even faster. She agreed to try the treatment we had done with my other stroke patients. On the follow-up visit after the alternative treatment, he talked the whole visit and never needed his wife to prompt or complete any sentences or thoughts.

When the unexpected happens - be it the birth of a special needs baby or a sudden stroke - we turn to the experts to help us as we try to navigate the uncharted waters. Sometimes the protocols work and the predictions are just as they say but sometimes a different approach is required. Standardized protocols can be useful to some but not all patients. Surely it is the role of the medical practitioner to help the patients who fall through the cracks, to find out-of-the-box solutions to improve the lives of those who have lost hope and exhausted their options?