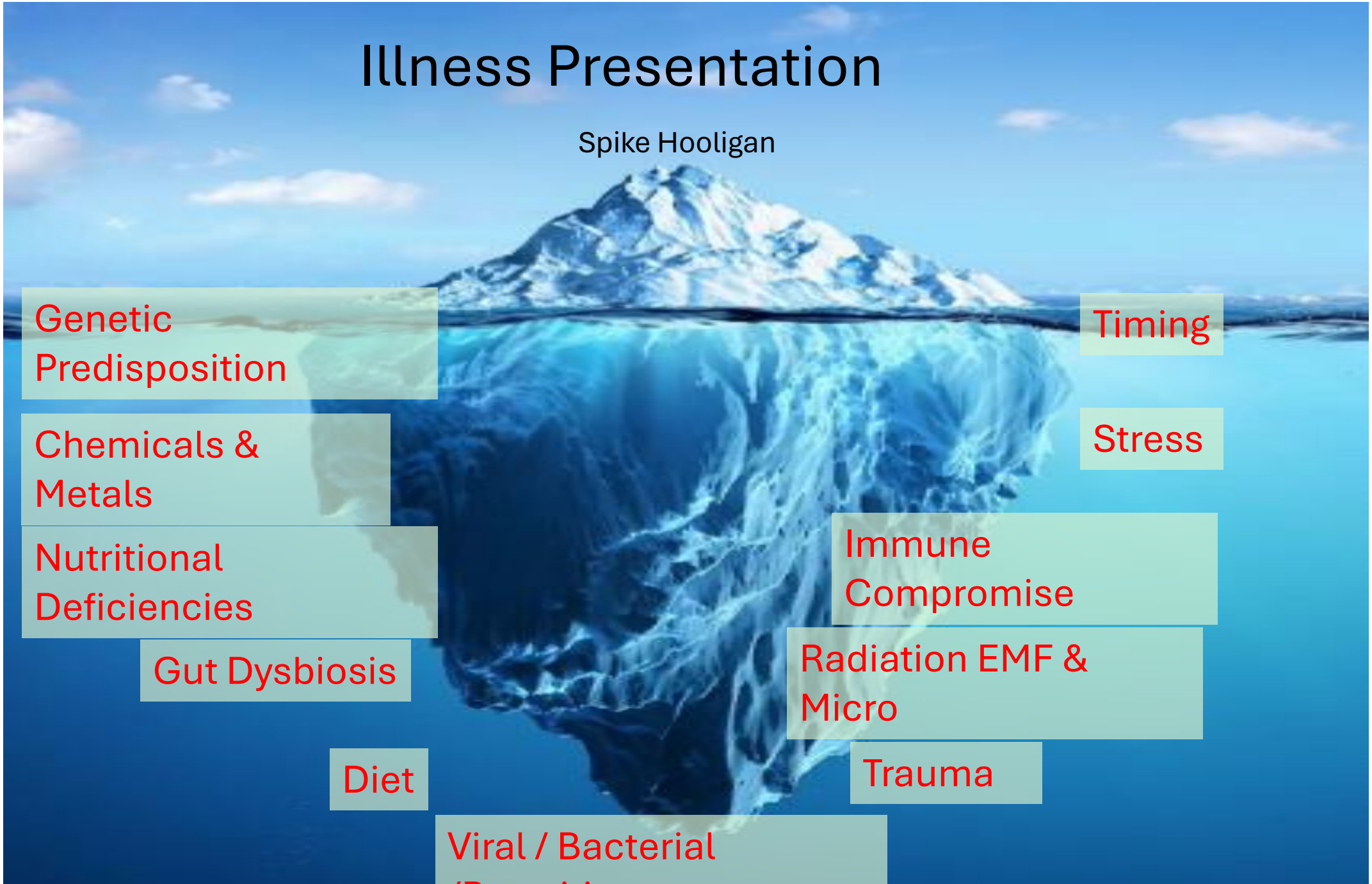
Illness Presentation

Spike Hooligan



CVD RISK FACTORS

- Race – Black African, African Caribbean, South Asian
- Smoking
- Occupation
- Blood pressure
- Stress
- Kidney Disease
- Diet – salt, sugar/refined carbs, wrong fats/lack of nutrients
- Lack of exercise
- Genetics/Family History
- Diabetes
- Dyslipidemia?
- THE NEW KID ON THE BLOCK - JABS

PRIVATE LABS – RANDOX, BLUE CREST, TDL

HEART HEALTH

Total Cholesterol
LDL Cholesterol
HDL Cholesterol
Total Cholesterol / HDL Cholesterol Ratio
Triglycerides
Apolipoprotein A-I
Apolipoprotein B
Apolipoprotein B / A-I Ratio
Apolipoprotein CII
Apolipoprotein CIII
Apolipoprotein E
Small LDL Cholesterol Lipoprotein (a)
High Sensitivity C-Reactive Protein

A FEW EXTRA TESTS OF INTEREST

- HOMOCYSTEINE – corrected by B vits B1, B6, B12 & Folate – Blue Crest, Food for the Brain, Randox
- Methylation – tests on line. Under methylation rises homocysteine
- MTHFR gene variations
- D-DIMER (micro clots) – GP
- Microbiome – many labs
- Arterial Stiffness

METHYLATION

- Cardiovascular
- Neurological
- Psychiatric
- Pregnancy loss
- Autoimmune
- Impaired detox pathways

UNDER METHYLATION – HIGH HOMOCYSTEINE

- **Active Folate (5-MTHF):** This is the bioavailable form of folate, readily used by the body.
- **Vitamin B12 (Methylcobalamin):** Essential for converting homocysteine to methionine, a key step in SAMe production.
- **Vitamin B6:** Plays a role in methionine production and glutathione synthesis.
- **Magnesium:** Involved in the conversion of methionine to SAMe.
- **Betaine (TMG):** A methyl donor, especially helpful when folate or B12 is insufficient.
- **Choline:** Aids in SAMe production and is found in choline-rich foods.
- **Zinc:** Necessary for the activity of many methylation enzymes.
- **Vitamin B2 (Riboflavin):** Helps activate folate.
- **Vitamin B3 (Niacin):** Supports gene methylation.

PULSE WAVE VELOCITY

- PWV stands for Pulse Wave Velocity
- Speed at which pulse waves travel through your arteries
- Non-invasive way to assess arterial stiffness, a key indicator of cardiovascular health.
- Higher PWV values indicate stiffer arteries, which are associated with increased cardiovascular risk.
- Doppler Assessment e.g. Highway Health
- Arteriograph 24 (£6k)

IF LIPIDS ARE HIGH

- Diet – intermittent fasting, low carbs/sugars – keto/low fruit, plant stanols, oats, oils, probiotic foods
- Get bowel bugs right
- Exercise & exclude bad habits
- Chromium, Zinc, Omega 3 EFAs, B3, Fiber
- Fenugreek, ginger, ginseng, turmeric, garlic, cinnamon, and cumin
- RYRE (Red Yeast Rice Extract) - monacolin K – same as LOVASTATIN
- Statins – “The Great Cholesterol Con”
- May have to supplement with CoQ10 100-300mg
- Many lipid lowering combinations on line

CHOLESTEROL & STATINS

“These Drugs Will Not increase your life expectancy”

- QUB – 1983
- Increased cancer, neurological diseases, accidents and cancer
- Deplete Ubiquinone (CoQ10)
- Brain cell membranes & synapses
- Hormones
- Vit D synthesis
- **Cardiologist on the Over-Prescribing of Statins for Heart Disease – JOE ROGAN**

What to Do?

- Do basics – diet, BP, Homocysteine, bowel, nutrients,
- D-Dimer – via GP
- Cytokines – rise after JABS & COVID
- AONM – UK agent for ARMINLABS – measure cytokines
- Juicing – NOT FRUIT – vegetables & maybe a little fruit
- Wheatgrass – reduces inflammation, nutrient & enzyme rich
- Simple aspirin
- Get rid of heavy metals – fillings and other sources

GETTING RIDE OF SPIKE PROTEIN

- Intermittent daily fasting or periodic daily fasts
- Ivermectin
- Moderating physical activity
- Low-dose naltrexone LDN
- Nattokinase
- Aspirin
- Melatonin
- Magnesium
- Methylene blue
- Sunlight and Photobiomodulation
- Resveratrol

2nd LINE

- Vitamin D (with Vitamin K2)
- N-acetyl cysteine
- Cardio Miracle™ and L-arginine/L-citrulline supplements
- Omega-3 fatty acids
- Sildenafil (with or without L-arginine- L-citrulline)
- Nigella sativa
- Vitamin C
- Spermidine
- Non-invasive brain stimulation
- Intravenous Vitamin C
- Behavioral modification, relaxation therapy, mindfulness therapy, and psychological support

3rd LINE

- Hyperbaric oxygen therapy
- Low Magnitude Mechanical Stimulation
- “Mitochondrial energy optimizer”
- Hydroxychloroquine
- Low-dose corticosteroid

OZONE AUTOHEMOTHERAPY

- Take Blood Out (200mls) – mix with ozone and reinfuse
- Reduces all proinflammatory cytokines
- Rises anti-inflammatory enzymes and antioxidant markers
- Eliminates viruses contributing to many diseases
- Reduces lipids
- Increases Heart Function – ejection, rhythm
- Rises stem cells – seek and repair (above 8 passes)
- Gets rid of SPIKE HOOLIGAN

CPR – Compression Only (Adults)

1. Kneel next to the person and place the heel of your hand on the breastbone at the centre of their chest. Place the palm of your other hand on top of the hand that's on their chest and interlock your fingers.
2. Position yourself so your shoulders are directly above your hands.
3. Using your body weight (not just your arms), press straight down by 5 to 6cm (2 to 2.5 inches) on their chest.
4. Keeping your hands on their chest, release the compression and allow their chest to return to its original position.
5. Repeat these compressions at a rate of 100 to 120 times a minute until an ambulance arrives or for as long as you can

CPR – with breaths

1. Place the heel of your hand on the centre of the person's chest, then place the palm of your other hand on top and press down by 5 to 6cm (2 to 2.5 inches) at a steady rate of 100 to 120 compressions a minute.

2. After every 30 chest compressions, give 2 rescue breaths.

3. Tilt the person's head gently and lift the chin up with 2 fingers. Pinch the person's nose. Seal your mouth over their mouth and blow steadily and firmly into their mouth for about 1 second. Check that their chest rises. Give 2 rescue breaths.

4. Continue with cycles of 30 chest compressions and 2 rescue breaths until they begin to recover or emergency help arrives.

CHILDREN OVER A YEAR

1. Open the child's airway by placing 1 hand on their forehead and gently tilting their head back and lifting the chin. Remove any visible obstructions from their mouth and nose.
2. Pinch the child's nose. Seal your mouth over their mouth, and blow steadily and firmly into their mouth, checking that their chest rises. Give 5 initial rescue breaths.
3. Place the heel of 1 hand on the centre of the child's chest and push down by 5cm (about 2 inches), which is approximately one-third of the chest diameter. The quality (depth) of chest compressions is very important. Use 2 hands if you can't achieve a depth of 5cm using 1 hand.
4. After every 30 chest compressions at a rate of 100 to 120 a minute, give 2 breaths.
5. Continue with cycles of 30 chest compressions and 2 rescue breaths until the child begins to recover or emergency help arrives.

CHILDREN UNDER A YEAR

1. Place your mouth over the infant's mouth and nose and blow steadily and firmly into their mouth, checking that their chest rises. Give 5 initial rescue breaths.
2. Open the infant's airway by placing 1 hand on their forehead and gently tilting the head back and lifting their chin. Remove any visible obstructions from their mouth and nose.
3. Place 2 fingers in the middle of the infant's chest and push down by 4cm (about 1.5 inches), which is approximately one-third of the chest diameter. The quality (depth) of chest compressions is very important. Use the heel of 1 hand if you can't achieve a depth of 4cm using the tips of 2 fingers.
4. After 30 chest compressions at a rate of 100 to 120 a minute, give 2 rescue breaths.
5. Continue with cycles of 30 chest compressions and 2 rescue breaths until the infant begins to recover or emergency help arrives.