

June 2025

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CLOSED Sundays, Mondays, & major holidays

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Disclaimer: All information in this newsletter is for educational and entertainment purposes. **It is not meant to diagnose, treat, or cure.** Please discuss your health concerns with a qualified health professional of your choice, including holistic practitioners whenever possible. Contact Nan for a list of possible alternative practitioners.

June 15: Father's Day.



June 9-16: VACATION! Natural Health and Home will be CLOSED this week.

Methylene Blue: DANGER!

Several customers have inquired about using methylene blue (MB) as medicine. First of all, meth blue is NOT an herb; it is a chemical, so I cannot carry it or sell it. Secondly, Dr. Peter Breggin and a growing list of researchers have noted the DANGERS of using meth blue. Dr. Breggin argues:

To get a sense of all the potential adverse effects of methylene, just look up all the adverse effects of all the antidepressants, all the stimulants, all the antipsychotic drugs, and the main anti-Parkinsonian drugs. **Methylene blue is a witch's brew of neurotoxins.** It jacks up the output of serotonin, dopamine, and norepinephrine in the brain, and eventually, the brain will react by jacking down all three neurotransmitters. That's probably worse than most witch's brews. (AmericaOutLoud.news, April 5, 2025, as well as in his book *Talking Back to Prozac*, 1994)

...and from Dr. Ariyana Love's references (<https://drloveariyana.substack.com/p/methylene-blue-binds-to-dna-stew>):

This synthetic substance has a fascinating history that dates back to the late 1800s, where it was first developed as a dye for textiles. It has historically been used in medicine as a stain to identify microorganisms and as a treatment for malaria. It is also used in current medical settings, most prominently as a diagnostic aid.... But non-approved uses for methylene blue, such as proposed "cognitive enhancement", have been cropping up online with potentially dangerous — and even fatal — consequences. . <https://inagene.com/blogs/whats-new/the-whole-truth-about-methylene-blue>

Further, she states that MB assists in the genetic modification of cells, degrades and mutates human DNA, acts as a catalyst to activate graphene oxide, synthesizes sharp poisonous nanomaterials inside our bodies, contributes to the making of the long, white, fibrous “clots” embalmers are finding in veins and arteries of people who took the covid shots, and more.

Dr. Robert Young also states MB “tattoos your organs, staining them blue,” especially the brain, heart, liver, and kidneys. MB cannot be detoxed from the body. MB also suppresses nitric oxide.

MB is a NEUROTOXIN and can be FATAL to those using it long term or if certain health conditions already exist or if someone is already taking certain pharmaceuticals. There is NO long term safety data and NO human trials have been conducted.

Electrolytes for Summer Health

Summer activities cause us to sweat—which is good, natural, and healthy! But when we sweat, we lose minerals (the stuff that leaves a whitish residue on clothing) which must be replaced in order for our hearts to beat properly and to help prevent fainting. We know we must drink plenty of water to replace the fluids we sweat out, and we must also replace the mineral salts.

A man-sized pinch of Celtic or Colima salt helps replace those minerals and gives a quick boost of energy and clear thinking. Coconut water, bananas, spinach, and avocados are also sources of minerals which form electrolytes. I like to add a pinch of salt to highly diluted orange juice or homemade lemonade sweetened with maple syrup when I work outside or at the gym.

At Natural Health and Home, I also offer prepackaged electrolyte mixes in several flavors by NOW, EnerC, and Doctor's Blend.

Are Your Supplements Natural...or Big Pharma? *The following is quoted from <https://greensmoothiegirl.com/the-truth-about-methylene-blue-supplement/>*

“One whistleblower said he worked for one of **the big six pharma companies in the 1990s**, when it was widely known that **the company's projected revenue by the year 2000 would be higher for supplements than for drugs**. And the people who identify as “holistic,” or anti-pharma solutions, are mostly none the wiser, thinking that all these alternatives, as long as Pfizer isn't on the label, for instance, are “natural” and proven to be beneficial to the body.”

Functional Blood Chemistry Levels, Mark Schopp, DC (see ad on top of p. 4)

Many times, a patient comes into the office with what are considered completely normal lab results, but the patient simply feels awful. The patient has been told that everything is great; all your blood work is normal. But if one feels poorly, then there is a problem.

First, we want to look at blood work lab levels, which is what is on the report, as well as the **optimal levels** which we receive after we put them in our computer. The computer then shows us a difference between the two. Optimal levels are healthy levels. One reason for this is we want to see where the patient is so far as healthy levels. Any levels that are off, we want to address to make the patient feel better as well as be a preventative, so the health is maintained in the future.

Secondly, when we look at functional levels. We see a lot of information that can get the proper protocols to make the patient feel better. However, **functional ranges** are geared at evaluation and analyzing blood testing

to reveal early stages of physical imbalance. They are narrowed to show more appropriate ranges for the population. We are also able to see imbalances in chemistry before sickness or pathology occurs. It is not dependent on the population sample which are simply averages on what should be normal.

In functional medicine we look at three phases: the CHI, Water and Blood. In the first phase, the CHI Phase means life force or life energy. There are no major symptoms in this phase, but the patient feels off-- simply not as good as he/she should. The second phase is the Water Phase. In this case, patients have symptoms but no real medical cause. Usually, blood work would be normal in both cases unless we view it at optimal levels. In these two phases they are usually told everything is normal, and we will check again in a year. In both these phases though, a patient can feel quite bad.

The third phase is the Blood Phase. In this phase, many tests will start to show positive findings. It could be blood work, X-ray or MRI etc. At this phase the patient will be labeled as “sick” or “well” based on the findings of these tests. So, in other words, the patient must feel two thirds sick before a problem is recognized. Many times, when there are no actual findings, a patient is prescribed an antidepressant or anti-anxiety medication, some being told it is all in their head. After practicing for 40 years, I have come to believe this occurs more in women than in men with practitioners brushing their symptoms aside instead of looking for the root cause of a problem. This does not seem to happen as often with men.

If you are told your blood work is normal, that’s great news. But it does not mean that you don’t have a health problem. One must look for the root cause of every problem for each patient to make a plan that will give the patient a healthier and better life. To take product just to cover up a symptom will never get one to that point. By finding the root cause, we can determine what is right nutritionally with proper nutritional supplementation to get a patient feeling better.

By using clinical nutrition, we can address these problems, and the patient will feel better. In the past it could have been difficult to get the proper lab work on patients who do not have insurance. However, now we have entered a buying group with LabCorp and can get lab prices for approximately 1/3 of what we would consider normal prices. If you are having health problems or just not feeling quite right call us at 314-843-9355.

Book Review: *Medication Madness*, by Peter Breggin, MD (NY: st. Martin’s Press, 2008)

Hollywood could not write a more frightening plot than this 350+ page accounting of real life tragedies caused by psychiatric drugs such as Prozac, Paxil, Zoloft, Cymbalta, Effexor, Wellbutrin, and more, as well as stimulants such as Adderall, Ritalin, Concerta, and others (pp. 335-6).

Psych drugs, according to Dr. Breggin, “can be spellbinding, insidiously compromising your mind and emotions before you realize what is happening to you. They can make you feel sad, agitated, or fearful.... (driving) some toward mania or depression,... and compel you to act in violent or self-destructive ways.” Further, they can be prescribed in combination, and stopping them can be very dangerous unless done under appropriate medical supervision.

I spoke with a customer a few years ago who was struggling with weight gain despite her attempts to eat clean, healthy foods and exercise. She also had chronic headaches, low energy, severe short term memory loss, problems sleeping, and pain “from my toenails to the ends of my hair,” she stated. She met with two or three medical doctors who found nothing wrong. They finally sent her to a psychiatrist who argued, “You’re a woman. You’re probably hormonal. Take Prozac.” Had anyone checked her hormones? No matter. The answer in that MD’s mind was Prozac. (By the way, all her symptoms were from consuming an artificial sweetener that she wasn’t aware was unhealthy. Two weeks without the sweetener, and she felt fine.)

Recently, a woman told me she was given Prozac for her perimenopausal sleep problems.

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