

## **INTEGRATIVE MEDICINE FOR CHILDREN**

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Integrative medicine for children needs to truly integrate conventional and complementary and alternative therapies. The good news is that many of the common problems of childhood can be handled successfully with the use of alternative therapies, particularly nutrition. More serious conditions, however, tend to be even more dangerous for children than adults and will almost always usually require conventional medical therapy, at least in the initial stages. Occasionally, once the acute situation is stabilized with conventional medicine, an underlying problem can be found that over time may respond to alternative therapies and lessen the need for prescription medication.

There is increasing evidence that nutrition may be playing a key role in childhood health. Our children are increasingly being fed a diet that the human organism has never before been exposed to, with its reliance on high quantities of processed foods, sugar and sugar substitutes, and acidic compounds like those found in soft drinks. To make matters worse, these foods are being peddled in our schools as a way for the school district to make money. While we seem to have made great progress in wiping out serious pediatric conditions like life threatening infections, we are seeing steady increases in diseases such as asthma, autism, ADD, childhood obesity and even the appearance of what used to be called "adult-onset" diabetes in teenagers! While the link to nutrition in some of these is more obvious, alternative practitioners are finding that all of these have at least some nutritional component that can improve with proper therapy.

The beginnings of this may go back 50-75 years and nutritional researchers are finding that the effects of dietary deficiencies become progressively worse with each generation. There is increasing evidence that deficient intake of essential fatty acids and minerals such as zinc and magnesium, which are being increasingly depleted in our food due to commercial farming methods, may be having a cumulative effect as mothers do not get enough in pregnancy while the baby is growing and then the babies do not get enough after they are born. This sets the stage for additional effects from processed foods and the frequent use of antibiotics for common infections, which can result in an abnormal balance of bacteria in the intestinal tract. As a result, more and more commonly, children seem to develop hidden intolerances to foods like wheat and dairy. It is surprising how many children with asthma, chronic sinus and ear infections, and even ADD show some improvement and need for less medication when you stop processed foods, dairy, wheat, and sugar while giving supplements to replace the "good" intestinal bacteria and essential fatty acids. The problem, obviously, is getting kids to eat this type of diet given the cultural messages they are bombarded with daily.

A number of neurologic conditions, including ADD, autistic spectrum disorders, and even seizure disorders, can respond to nutritional therapy in some cases. This can lead to a reduction, and even elimination, of the need for medication. In these cases, more detailed laboratory work looking at levels of such things as minerals, amino acids, essential fatty acids, and the breakdown products of vitamins is frequently needed to determine and monitor therapy. This type of testing is only done by certain labs and may or may not be covered by insurance. The results of the testing can then be analyzed to determine a specific diet and supplement plan for that particular child. Any alterations in medication should be done only under strict medical supervision.

Another area where there is growing controversy is the issue of childhood immunizations. While there is no doubt that tremendous strides have been made against such scourges as meningitis, polio, and diphtheria, and the rare but serious consequences of infections like measles, mumps, and rubella have been almost completely eradicated; critics point out that the long term safety of these vaccines remains to be proven and that the way we are administering them may be causing harm. There is some circumstantial evidence that giving such a large number of vaccines in the first 2 years of life may have detrimental effects on the immune system and contribute to the documented rise in immune related diseases such as allergies and asthma, and possibly even autoimmune diseases. In addition, if the vaccines have the preservative thimerosal, using the recommended vaccination schedule for the first six months of life may actually exceed the acceptable limits set by the EPA for mercury exposure.

In the end, parents should make the decision on what is best for their child given all of the evidence available. Educate your self as much as possible on all sides of the issue. I recommend looking closely at the rationale for each and every vaccination and reviewing it based on your family's needs. Many of the vaccine recommendations are based on public health criteria that may not apply to your family. This particularly applies to hepatitis B vaccine, which many authorities feel can be safely delayed at least several months unless the mother is a carrier. Until more is known, consider using only thimerosal-free vaccines and possibly even spreading out the vaccines over a longer period of time, even if it means more visits to the doctor for shots.