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Understanding Asthma:

It is interesting to consider from an holistic viewpoint the modern (and more especially, Western) increase in the incidence of asthma.

Nowadays we are encouraged to equate any sort of stubborn cough and wheezy or rattly chest with asthma. This is why nearly half the children at the average pre-school day care center, arrive with their puffer and/or their spin inhaler and a program of treatments for the day.

We must sometime ask ourselves why is it that our respiratory systems are so much more sensitive or so much weaker than they ever were before?

I remember in the early 50's going to a small town primary school of about 200 students of which 2 were asthmatics. All of us other kids knew they were asthmatic because these two were a very different shape from the rest of us. They were skinny and had very high square shoulders and protruding chests. They sounded pretty wheezy and they couldn't keep up with the rest of us in our games in the schoolyard.

I only found out why they looked like this after it was explained to me that asthma was a difficulty in breathing out. These children could get air into their lungs OK but at times they were unable to breathe out. Therefore, when having an attack and while trying to get more air, they forced this exaggerated chest and shoulder movement. Their shape was a result of trying to get another breath when their lungs were already full.

As the son of the town's only Doctor and from accompanying my father on his house calls, I was aware that you could get infections in your ears and nose as well as your throat and lungs. I had all of these myself, at different times. I also learned the difference between true asthmatics and those who had weak chests and needed special attention in the form of steam in their bedrooms at night or camphor ointments applied to their chests.

Asthma as an immune system problem:

Nine out of 10 of the children who are presented to me as 'asthmatic' patients nowadays are simply those, whose chests are their weakest area during the perfectly normal development of their respiratory immune system.

I explain to their parents that while most aspects of our immunity are mature at birth, the respiratory system takes time to develop it's immunity because it does not get to practice until we are born and take our first breath. Nature has provided for our protection through antibodies in mother's milk for the first six months of our life. After six months, mother's milk no longer provides these antibodies, and we begin to learn to deal with air and all it carries, on our own. This is the period when we all suffer from sore throats, runny noses, wheezy chests, high temperatures and all the aches and pains and discomfort which goes along with viral and bacterial infections.

What we have forgotten is that it is nature's plan for us to go through all this, and that we are provided with safe places to fight these battles.

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Our tonsils and adenoids are large masses of specialised tissue provided for just this purpose. We may do battle with airborne bugs without doing any permanent harm to important organs. Our inner ears can also host these fights and, before the age of grommets, the eardrum would naturally split and then re-heal to relieve the pressure buildup due to infection. Our noses and sinuses would block-up and be relieved by blowing out all sorts of yellow and green mucus. We also accumulate and cough up similar material from our bronchial tubes all as a normal result of fighting off viral and bacterial infestation.

Every culture had its traditional medicines to assist with these processes. In the European herbal tradition we had Rosehips containing vast amounts of Iron and Vitamin C to support our immunity and Garlic as an antibiotic. We used Lemon as an antiviral and astringent tonic to our mucus membranes generally and Thyme as an astringent and antiseptic tonic especially for throat infections. We discovered Fenugreek, Camphor and Ginger in Asia as mucosal and antiviral support. We found Echinacea and Golden Seal in the Americas as detoxifying and antibacterial agents. We used seaweed and steam along with other herbs and natural aids to support our systems while they learned to look after themselves.

For the most part, by the time we reached 7 years of age, we had fully developed and matured immune systems capable of dealing with just about anything dangerous to our health in the environment which we might breathe in through our mouth or nose.

As part of the normal course of this development, a proportion of children will find themselves doing battle in their chests rather than on their tonsils or adenoids or in their sinus cavities or inner ear. Some of these will need to eliminate milk from their diet to reduce the accumulation of thick mucus in their bronchials. I will advise that all of them replace most cordials, carbonated drinks and fruit juices with drinks based on Rosehips, which I regard as the single most important herb to assist children in speeding the development of their respiratory immunity.

Western medicine encourages us to immunise ourselves medically against viral infection; to use antibiotics to treat bacterial infection; and to reduce symptoms and fevers with analgesics and the like. Western medicine pays scant regard to actively supporting the natural development of a healthy immune system.

Asthma as an environmental problem:

Some aspects of the modern incidence of asthma seem to link it with the environment. This is most easily understood by considering allergies and hay fever, which commonly result in wheezing and blocked noses (along with sneezing and itchy and sore eyes).

As some people's 'asthma' attacks seem to result from an infection "going to the chest" so do others seem to have attacks resulting from allergic reactions.

Allergic reactions are best understood as an exaggerated immune system response. Coughing, sneezing and runny noses are all methods the body uses to clear unwanted substances from the respiratory system.

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The immune system identifies an intruder or a substance dangerous to our health, and elicits a response aimed at clearing it away. However, while it is quite appropriate to react violently to tear gas, which is a dangerous and highly irritant substance, it is not appropriate to react with the same force to pollens or dust which are not at all life threatening.

It is very true that our external environment is being increasingly compromised by our many abuses. It is also true that our internal environment is being similarly abused. Our responses to the degradation of both internal and external environments are normally, over reactivity and over sensitivity on the one hand and lowered immunity on the other. Allergies belong to the first group.

If we find ourselves coughing or sneezing or wheezing and otherwise having difficulty with our breathing it can be that our over sensitivity is reacting to something in the environment which would only be mildly irritating to a healthy immune system. This is in contrast to the situation where there is a real threat as in the case of an infection.

The modern medical response to 'allergic asthma' is to reduce levels of inflammation and histamines with steroids or anti-histamines. These drugs aim to reduce the symptoms of sensitivity rather than to deal with the reactivity itself. My approach to the condition is to support and rebuild the immunity to reduce reactivity and to support the healing of those areas, which have become irritated and weakened by constant stimulation.

I prescribe simple herbs, which soothe and support the healing of irritated mucous membranes in the respiratory system. Amongst these are included Lemon, Fenugreek, Horse Radish, Kelp, Marshmallow, Comfrey and Elecampane. The principal anti-oxidant, which I provide to my patients is **Maritime Pine**, which I extract, each spring from the bark and sapwood of the Pinus Pinaster. This has anti-oxidant properties 25 times more powerful than Vitamin C and dramatically enhances the lower levels of the immune system.

Asthma as a natural control of over breathing:

The premise of modern medical approaches to treating asthma is that the sufferer must be assisted to clear the airways and re-establish normal breathing patterns. All modern asthma medication is based on this premise.

A very disturbing realization is emerging that asthma may in fact be a response to over breathing, where the body is reacting to the fact that the Oxygen to Carbon Dioxide balance within the body has become abnormal. To correct this imbalance the body temporarily suspends respiration for a period to allow things to return to normal. When the correct balance is re-established, breathing resumes.

The understanding that correct breathing is fundamental to physical and spiritual health has been around forever and has formed part of eastern medical systems. The value of controlled breathing is implicitly recognised in the West where many of our competitive swimmers were introduced to the sport as a means of alleviating their asthma. In the 1950's, Dr. Konstantin Buteyko a Russian respiratory specialist scientifically validated controlled breathing techniques that have been an integral part of the Russian health system since 1981.

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The Buteyko breathing technique has been freely available in the West since 1990 and trained instructors who are now available around the world. The Buteyko breathing system is effective and asthmatics achieve an average of 90% reduction in the need for reliever medication.

There are two important barriers to the acceptance of this technique and its theoretical foundation. They both involve powerful vested interest groups.

Firstly, there is the orthodox medical fraternity, which has committed itself to the assumption that one must assist asthmatics to breathe. If this assumption proves to be dead wrong they must take responsibility for the increase in asthma deaths worldwide in the last 20 years or so. Secondly, there is a billion dollar industry which has sprung up around asthma medication in support of the assumption that we need to treat asthma by assisting breathing and we can be certain that this industry is not going to let this cash cow go without a fight.

My advice to all my genuine asthma patients is to immediately seek out a practitioner trained in the Buteyko breathing technique and look forward to quickly giving up their dependence on drugs.

Asthma as a problem of fear:

The next question we must ask is 'Why are asthmatics over breathing?' and this leads us into even more controversial territory. I ask that you suspend your disbelief for a few moments and follow through the reasoning below.

Let us start by considering that asthma can be defined as a 'respiratory panic attack'. If confronted by sudden fear or shock we can all be temporarily unable to catch our breath. This reaction is within the normal range of behaviours exhibited by our bodies. For most of us it requires a sudden, dramatic and confrontational situation to produce this reaction. For asthmatics, maybe these panic episodes are coming out of past experiences.

Modern science with its mechanistic view of the world and its creatures decided that breathing was purely and simply to provide oxygen to the blood through the lungs because this was the most obvious function subject to measurement.

If we observe nature, we see that human babies along with other mammals are provided in the womb with an umbilical cord through which they are supplied with nutrients including oxygen. We have also discussed previously the first breath which we take after birth and which begins our independence from our mother. Breathing is really our first experience of the outside world.

Again, if we observe nature there is no obvious rush to take this first breath. The umbilical cord continues to pulse and if left alone will sustain the baby for many minutes until breathing is established naturally and the placenta is expelled. The midwives of other cultures and of earlier times in the West were in no particular hurry to separate the baby from its support until it showed that it was ready. They waited until breathing was established and the cord stopped pulsing and then they cut the cord.

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I am suggesting here that the fear and the panic reaction to a premature and abrupt separation from our placental support, all in the context of our first experience of the world outside the womb is a major cause of over-breathing. I am suggesting also that the "healthy cry" of the new born infant is in fact a result of the distress and panic of having to breathe before it was quite ready to do so.

Early medical intervention in cutting the umbilical cord was justified by claiming that the baby's blood would otherwise leak back out of its body through the cord unless it was cut. The practice of violent birthing experiences continued with "hang em up by their feet, slap their bottoms, rejoice in their howling, wash them and wrap them in prickly towels before putting them to their mothers breast". These practices have only very recently been changing to more sympathetic procedures, but the impatience and production line mentality of hospital birthing continues.

Maybe the fear and the over-breathing which is behind the illness of asthma comes, at least in part, from our birthing experience and is therefore just another example of our ignorance and disregard for the natural world which supports us.

There is one branch of alternative therapy named Re-Birthing that would better be described as Re-Breathing. This concentrates on using breathing techniques to uncover and release fear and buried stresses. Eastern meditation and Yoga techniques also understand the relationship between breathing and emotional well being and are useful aids in dealing with Asthma.

In Conclusion:

As you can see there are a number of areas not considered by modern science, which provide insights into the condition known as Asthma.

Understanding is power and there are many things, which one can do before reaching for the Asthma drugs or in support of a program aimed at getting off them.

You won't get much support or encouragement from your orthodox medical practitioners at the present moment. However, this will change very quickly over the next few years as the pressure of consumer demand alongside demands for cost effective treatment, turn the tide on vested interests.

In the meantime, use some of the insights and arguments above to support a change in how you or your family deals with asthma.

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