

Transformation Enzyme Therapy Center Case Study: Crohn's Disease

Chart Review: "M.G."
DOB: 1/29/1978

Initial Visit: 11/4/2003, 25 yrs. old

Personality: Always a "go-getter" type of person, especially devoted to children-oriented fundraisers. Upon initial visit was a motivational speaker, taught aerobics classes, and was a business owner dealing with interpersonal communications skills. Was writing a book.

History: Asthma, induced by humidity and activity. Crohn's disease started before he entered college. Signs and symptoms include bleeding and pain. Saw numerous doctors to resolve issues. August 2003, temporary colostomy was performed and was hoping for reconstructive surgery in Feb. 2004. Having liquid BM's in a bag. Has had anemia since surgery. Not taking Prednisone. Overall, feels much improved since surgery. Hospitalization weight: 129 pounds; Current weight: 159 pounds (per patient); Current weight: 153 pounds (per Transformation scale). Exercises 4-6x/week for 1 to 1 ½ hours.

In previous 7 years, patient was more homebound due to symptoms. Becoming more social since surgery. Still building strength, but has some energy issues. Could not drink while eating as it causes extreme gas formation and food to pass too quickly into bag. Patient hoping to gain weight.

Protocol: 3 Purezyme 3x/day between meals, 3 Plantadophilus before bed, 3 DigestZyme and 1 Super CellZyme with meals.

12/15/2003

Protocol: 3-4 PureZyme 3x/day between meals, 2 TPP Antioxidant twice daily (morning, bedtime), 1 dropper K-Drain in AM, 2 TPP Probiotic before bed, 3-4

DigestZyme (or 2 TPP Digest) and 1 Super CellZyme with all meals, 1 dropper K-Drain with lunch only.

TEC Office Visit: 2/15/2004

Enzyme History: Was slow to add enzymes, play it safe with his system. Using Super CellZyme, TPP Digest and Plantadophilus 100% of the time. PureZyme about 50% of the time, hard to remember on empty stomach. Since starting enzymes, patient noted the colostomy elimination is more firm (i.e. mashed potato texture).

Weight in office: 160 ¼ lbs. No complaints of pain or discomfort. Exercises 4-5x/week for 1 ½ - 2 ½ hours.

Plan: To become more consistent with enzymes.

TEC Office Visit: 2/17/2004

Enzyme History: Taking all enzymes 100% of the time. Colostomy elimination continues to be more consistent and with texture.

Allopathic notes/Intervention: Recent testing revealed a ballooning of small intestine. Retesting scheduled, surgery delayed. For first time pt. noted CBC, RBC, hemoglobin, and hematocrit were normal.

Weight in office: 163 pounds. No complaints of pain or discomfort. Exercises 2 hours daily, weights and cardio.

Plan: To change from DigestZyme and PureZyme to TPP Digest and TPP Protease (these are stronger).

Protocol: 2 TPP Protease 3x/day between meals, 2 TPP Antioxidant in AM and PM, 2 TPP Probiotic in PM, 2 TPP Digest and 1 Super CellZyme with meals.

TEC Office Visit: 2/25/2004

Enzyme History: Taking enzymes 100% of the time. Noted 2 caps Protease caused elimination to turn more liquid, backed off to 1 cap of Protease and all was going well.

Weight in office: 163 ½ pounds. States he is sleeping better than ever before. No complaints of pain or discomfort. Exercise, same as before.

Protocol: 2 Protease 3x/day between meals, 2 Antioxidant twice/day (AM/PM), 2 ExcellZyme twice/day (AM/afternoon), 2 Digest and 1 Super CellZyme with meals, 2 Probiotic at bedtime

6/21/2004 (Via phone)

Feeling well. To see doctor that week for possible reanastomosis of colon. Continues to take enzymes.

8/30/2004 (Via phone)

Pt. was scoped to prepare for reanastomosis and inflammation inside lower colon discovered. Pt started bleeding. Further surgery was canceled indefinitely. Doctor using aspirin suppository to treat inflammation. Continues to take enzymes.

TEC Office Visit: 11/18/2004

Here for retesting before reanastomosis surgery on 11/29/2004. Current allopathic testing shows the inflammation decreased and patient is ready for surgery. States that all his blood work is very good, never looked better, all values are normal. Doctors know he is on the natural product, but not actual inquiry made. Patient states he did nothing different in his lifestyle other than use enzymes to make all the positive changes. States he was able to gain weight only after using enzymes.

TEC Office Visit: 2/17/2005

Weight before surgery: 164 pounds
Weight after surgery: 155 pounds
Current weight in office: 161 pounds

Currently on Immuran post surgery. Stress high during decision-making regarding job and move to Florida. Now that decision is made, feels much better. Currently has 2 regular BM's daily. Exercises 5x/week for 1-2 hours.

Cholestech® Lipid Profile

His total cholesterol (TC) was low but showed some improvement at last visit. TC/HDL ratio was consistently good. No concerns here.

	11/4/2003	2/25/2004	11/18/2004	2/17/2005
TRG	54	47	<45	49
TC	115	114	118	134
GLU	91	137	83	86
HDL	45	63	48	51
LDL	59	42	64	73
TC/HDL	2.6	1.8	2.5	2.6

Body Composition Analysis (BCA/BIA)

Overall body composition improved, noting a slight setback after his surgery the end of November 2004.

SUPRA	12/2/03	12/15/03	2/17/04	11/18/04	2/17/05
Weight	153	160.2	163	164	161
% Fat	11	12.8	14	13.5	14.4
PA	7.8	8.3	8.5	9.1	8.4
Cap.	948	1018	1031	1134	972
BMI	21.46	22.47	22.86	23	22.45
BCM	46.5	46.3	46	47.6	45.5
ECM	42.5	40.8	40	38.9	40
ICW	66.2	67.2	67.7	69.4	67.8

Biological Terrain Assessment

	12/6/03	2/25/04	11/18/04	2/22/05
Blood pH	7.34	7.33	7.34	7.3
Blood rH2	26.9	26.3	26.2	26.2
Blood R	207	198	171	171
Saliva pH	7.21	6.81	7.14	7.31
Saliva rH2	27.8	25.3	27.4	28.5
Saliva R	243	207	215	154
Urine pH	6.75	5.3	5.39	5.5
Urine rH2	25	19.2	19.6	20
Urine R	77	71	82	44

For more information, please contact
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