Case Study

34 year old white female with MULTIPLE SYMPTOMS - fatigue, lethargy, pain in legs, pain and muscle spasms in hands and feet, severe neck pain, headaches and frequent episodes of tachycardia

This patient’s past included Malaria-contracted while serving in the Peace Corps, lyme disease, supraventricular tachycardia, depression, fibromyalgia and gluten intolerance. She had been treated with standard medical therapy and consulted with several medical specialists including a neurologist, cardiologist, orthopedic surgeon, urologist and otolaryngologist. She also received alternative treatments including supplements, acupuncture, neurofeedback, physical therapy and chiropractic care – all of which had been somewhat successful but four years later, the above complaints persisted. The patient was on no medication, had a gluten and dairy free diet. She also had difficulty exercising due to pain. SpectraCell’s micronutrient testing revealed deficiencies in vitamin B12, pantothenate, choline, carnitine, CoQ10 and total antioxidant function. Intrinsic Factor block Abs (performed as a result of low B12) was found to be positive and she was therefore unable to sufficiently absorb B12 in an oral form. Based upon her deficiencies, she was administered the following treatment protocol:

1) Osteopathic Manipulative Therapy
2) 1cc of Vitamin B12
3) 1cc B-Complex IM for 6 weeks – then reduced the frequency to monthly and bi-monthly

Clinical Outcome:
Patient reported that the “electric shock nerve pain” sensation in her legs was gone along with the foot, hand spasms and twinges. The pain in her neck and fatigue improved. The frequency of episodes of tachycardia diminished. She is now able to take daily walks.

When she skips the B12/B-complex intramuscular injection, she begins to feel lethargic, the electric nerve sensation and foot spasms begin to return to a lesser degree and frequency. Every 2 weeks, she receives B12/B-complex intramuscular injections.

Two years later, testing revealed low normal B12 (value was 19-up from 12), pantothenate had improved, and choline and carnitine were now normal.

Cost Savings and Benefits:
Patient no longer sees multiple physicians with continued lab work-up costs in attempt to find the cause of her symptoms. She did not have the suggested cardiac EP studies as her symptoms have improved. The only treatments she receives are regular B12/B-complex injections and occasional Osteopathic Manipulative Treatment. She continues to improve and is now writing a book while at home and hopeful that she will return to work soon.