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## Prevent, Stop, or Even Reverse Vision Loss Right at Home

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Money-back guarantees are quite unusual in medicine and health care. A guarantee to stabilize or improve a major “untreatable” condition is even more rare, but that’s exactly what we’ve offered since 2001 at the Tahoma Clinic for the treatment of the “dry” type of age-related macular degeneration. Either we help you stop your vision loss, so it doesn’t get worse, or we actually help you reverse it. If your vision just continues to deteriorate, you get your money back.

The “dry” form of macular degeneration is much more common than the “wet” variety and is characterized by loss of pigment in the retina and the formation of small, yellowish deposits within the layers of the retina that make it difficult to see. We don’t expect to help everyone suffering from it to achieve these results, but over two decades, the success rate has been approximately 70 percent—and we don’t judge our own results: We insist on “before-and-after” exams by independent eye doctors. The treatment program takes about six to eight weeks and isn’t inexpensive.

But it’s a well-known “secret” that many people with macular degeneration (especially those with recently-diagnosed, “mild” or “early” cases) may not need to come to Tahoma Clinic for treatment at all. In fact, most of the nutrients used in the Tahoma Clinic macular degeneration treatment program have been contained in the supplement OcuDyne since Dr. Alan Gaby and I formulated it in 1993.

Since then, we’ve both heard from numerous patients that using this supplement has helped their condition stabilize, improve, and even disappear entirely. (Yes, I did write “disappear,” though this outcome is most likely in very early cases.)

But at a time when mainstream medicine insists that no reliable treatment exists for macular degeneration, how are we achieving such good results? The explanation goes back to 1977, when no one (especially me) knew anything at all about treating this condition, but “everyone knew” it couldn’t have anything to do with nutrition.

### The soil deficiency revelation that led to a cure

In 1977, Dr. Joseph Bittner published a newspaper column in the *Yakima Valley Sun* newspaper describing his own case of “dry” macular degeneration, and how he was able to reverse it. Yakima is in eastern Washington, a region whose soil has been known for years (by agricultural agencies, veterinarians, and farmers) to be very selenium deficient. Dr. Bittner guessed that selenium deficiency might be part of his eye problem, so he took selenium and vitamin E supplements to see if they helped. His macular degeneration improved.

Over the next two to three years, I passed along Dr. Bittner’s observations to a few individuals with macular degeneration. One had such a good result that his ophthalmologist told him his diagnosis must have been a mistake. Several had considerable improvement, and a few did no better or continued getting worse. But that told me that this supposedly “incurable” condition might be a nutritional problem that can be corrected, at least in part.

So I did a lot of reading about nutrients and the eye, and learned that the retina has particularly high concentrations of zinc and taurine, too. I added these nutrients to selenium and vitamin E, and there were fewer treatment failures.

Reasonably good results continued until 1986, when a 61-year-old woman arrived with “rapidly deteriorating” macular degeneration. She and her husband had already been following an excellent diet and using extensive vitamin-mineral supplementation which included zinc, selenium, taurine, and vitamin E, so as a “last-ditch” effort we gave her these nutrients intravenously. Just several weeks later, her vision improved to it’s former level.

In the early 1990s, she “slacked off” the at-home part of her treatment, and her macular degeneration returned, worse than the first time. Once again, IV treatment (expanded this time to include many more nutrients and metabolites than the four nutrients noted above) restored her vision. The same thing happened in 2001, and once again treatment **was** successful. Her vision is still good today.

But back to 1988. That year, two more cases convinced me that we could do even better in treating macular degeneration. One case involved an 86-year-old man whose ophthalmologist told me that in 1987, his vision had been corrected to 20/20 with glasses. But just a year later, when he was diagnosed with macular degeneration, the best his ophthalmologist could do was to help him get to 20/80 wearing strong corrective lenses. After two to three months of treatment with my nutrient protocol, his vision improved to 20/30. He still wore glasses, but the improvement—in such a short time frame—was impressive.

In the second case, a 67-year-old woman came to see me after she had been examined by a retinal specialist who diagnosed her with macular degeneration in both eyes. He found 20/50 vision in her right eye, and 20/200 in her left eye. After a month of treatment at the Tahoma Clinic, she could drive herself to the clinic and read her newspaper again without a magnifying glass. After six months of treatment, her ophthalmologist told her that her right eye vision had improved to 20/20, while her left eye remained at 20/200. She’d made good progress in one eye, but obviously there was more to learn.

Since that time, I’ve kept close track of any research even remotely related to the “dry” form of macular degeneration. Dr. Gaby and I have also kept track of research related to prevention and possible reversal of cataract. The following list outlines some of the nutrients and botanicals that research indicates may be helpful to prevent and treat these unfortunately all-too-common eye problems.

### Bilberry and beyond: 9 sight-saving nutrients

Lutein and zeaxanthin are carotenoids—major components of retinal pigments, which enable vision. Research has shown that those with the highest intake of lutein and zeaxanthin have a 57 percent lower risk of developing macular degeneration.

These two nutrients also help to protect against cataracts. In the 12-year, 77,000+ woman Nurses Health Study, women in the top group of lutein-zeaxanthin intake had 22 percent lower risk of cataract surgery. And an eight-year study of 36,000+ male physicians found a 19 percent lower risk of cataract in the highest lutein-zeaxanthin consuming group.

Lutein and zeaxanthin are found in highest concentrations in

**Medical data is for informational purposes only. You should always consult your family physician, or one of our referral physicians prior** spinach, collard greens, and other deep green leafy vegetables. Just one more reason you should keep eating them.

Ginkgo was found to be significantly better than placebo in a double-blind study of long distance vision in subjects with “dry” macular degeneration. Although it isn’t clear exactly how it works, ginkgo does improve arterial blood flow and peripheral vascular disease and possesses significant antioxidant activity—which certainly can’t hurt your eyes.

As mentioned above, our retinas contain high concentrations of zinc. In a double-blind, placebo-controlled trial of individuals with macular degeneration conducted in 1988, those who took 45 milligrams of zinc orally each day lost significantly less vision than those who took placebos. Another study found lower plasma zinc levels in people with cataracts than in age-matched individuals with no cataracts. (Actually, plasma isn’t the best place to measure zinc. White blood cell measurements are better, but the vision improvement is the most important thing to consider for our purposes here).

Oysters are far and away the best food source of zinc. Other shellfish and fish (low mercury types only, please) are also good sources, as is red meat. In vegetables, there are useful quantities of zinc in pumpkin seeds, other nuts and seeds, beans, and whole grains.

Selenium is found in high concentrations in both the retina and the lens of the eye. Individuals with macular degeneration have been found to have significantly lower selenium levels than “age-matched” individuals without the problem. Selenium is a key element in regenerating glutathione, a major antioxidant protector against cataract. It’s actually been found to help reverse cataracts in experimental animals.

Good sources of selenium include liver and kidney (organic only, of course), brewer’s yeast, ocean fish (low-mercury types only), and red meat. Vegetable sources are dependent on adequate soil selenium, but when there are adequate amounts, onions, garlic, mushrooms, and broccoli are good sources.

Riboflavin (vitamin B<sub>2</sub>) is also very important for the regeneration of glutathione. Riboflavin deficiency has been associated with cataract formation in both rats and pigs. In people with cataracts, one study found 34 percent to be riboflavin-deficient, versus 0 percent riboflavin deficiency in the control group. Another study found 81 percent riboflavin deficiency in the cataract group versus 12.5 percent in the control group.

Animal studies have found riboflavin to be useful in maintaining normal retina function.

As with selenium, liver and kidney, as well as brewer’s yeast are among the best sources of riboflavin. Almonds, mushrooms, wheat bran, and dark green leafy vegetables are also good sources.

Taurine is found in high concentrations in retinal light-receptor cells. While taurine hasn’t been formally studied in human macular degeneration or cataract, taurine-deficient monkeys have actual structural changes in retinal light [perception?]. There’s a bit of evidence to suggest that taurine might help prevent cataract, too.

Taurine is concentrated in animal proteins, especially organ meats, fish, and other animal protein, but is virtually absent from vegetables.

Bilberry became much better known after World War II, when some British and American aviators reported their vision improved in combat situations with its use. Bilberry (along with grapes, blueberries, blackberries, raspberries, cherries, and other blue, red, and purple fruits) contains substantial quantities of flavonoids called anthocyanins, which have been shown to improve macular sensitivity and night vision—even in healthy individuals.

One research study found that higher doses of bilberry (80 to

160 milligrams three times daily) with vitamin E stopped progression of early “senile” cataract in 46 of 50 individuals.

Quercetin is another flavonoid. It inhibits the activity of a lens-of-the-eye enzyme (technically known as “aldose reductase”), which increases accumulation of certain sugar-alcohols that contribute to cataract formation. Onions, apples, kale, cherries, grapes, red cabbage, and green beans are all good sources of quercetin.

#### **Reverse existing damage—or prevent it from happening altogether**

If you don’t have macular degeneration or cataracts, and you include all of the foods and supplemental items noted above in your diet and supplement program, you’ll dramatically reduce your risk of ever developing these eye problems. Of course, you’ll need to eliminate all refined sugar, refined carbohydrates, partially hydrogenated fatty acids, non-food chemicals, and all other forms of junk food, too. As I’ve mentioned before, this is often the hardest part of beginning any nutritionally based treatment protocol. But it truly is worth the effort: Not only will it help you save your vision, it will also help your overall health in countless other ways as well.

If you’ve already been diagnosed with “dry” macular degeneration or cataracts, especially if it’s early, you may be able to reverse these conditions without intravenous treatment. All of the nutrients noted above and many more have been combined into *Ocudyne 2005*, which Dr. Gaby and I have just updated from *Ocudyne II* according to our own observations and the latest research. It’s available through natural food stores and compounding pharmacies, so check the ones near you to see if they carry it. If not, it’s also available through the Tahoma Clinic Dispensary. Make sure to work with a physician skilled and knowledgeable in nutritional and natural medicine, too, as well as your eye doctor.

If you follow all of the steps outlined above, change your diet, try *Ocudyne*, and you’ve done everything else your eye and natural medicine doctors have recommended you do, and your vision is still getting worse, don’t give up! You may still want to consider the intravenous program we use at the Tahoma Clinic. Combined with other nutritional interventions, it can often stop the progress of “dry” macular degeneration, or, in some cases, reverse it—even when other approaches haven’t worked. JWV

*The article “Nutritional Factors in Degenerative Eye Disorders: Cataract and Macular Degeneration,” by Alan R. Gaby, M. D., and me, describing all of the research not footnoted above is available on request from Allergy Research Group (800-545-9960, [www.allergyresearchgroup.com](http://www.allergyresearchgroup.com)). All other citations are available on the Nutrition & Healing website.*

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#### **The one-two punch for cataracts**

If you have cataracts, the recommendations in the accompanying article can still go a long way in helping your overall eye health. But there are at least two more things you can try: N-acetyl-carnosine eyedrops, and Hachimi-ji-ogan tablets.

N-acetyl-carnosine is a form of the amino acid carnosine and is known to protect tissues—including the lens of the eye—against “non-enzymatic glycosylation,” a condition where glucose (blood sugar) literally “sticks” to a variety of tissues, making them abnormally stiff and promoting premature aging. Non-enzymatic glycosylation is known to play a part in cataract formation.

A careful series of research studies, starting with animals and moving to people, has shown that N-acetyl-carnosine eyedrops can stop the progression of cataract, and in many cases reverse them at least partially.” They’re available in natural food stores, compounding pharmacies; and the Tahoma Clinic Dispensary under the brand name Can-C Eyedrops.

Hachimi-ji-ogan, also called Ba-wei-wan in Chinese, is a

**Medical data is for informational purposes only. You should always consult your family physician, or one of our referral physicians prior** combination of Chinese botanicals used for centuries for cataract treatment. In a human study of early cataracts conducted in Japan, Hachimi-jio-gan was associated with lessening of cataracts in 60 percent of research volunteers.<sup>5</sup> It's available as a formula called Clinical Nutrients for the Eyes, which is available from the same sources noted above.

If your cataract continues to worsen despite all of the nutritional and supplement recommendations noted above, there's probably little else to do except surgery, which very fortunately, is quite successful in nearly all cases.