David Brownstein, MD

Iodine: Why You Need it, Why You Can't Live Without It

Cubberly Community Center
4000 Middlefield Road, Room H1, Palo Alto, California

Thursday, January 19th, 2006 at 7:00 PM

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(Add your own notes, too!)

Future Speakers:
• February 16, John McDougall, MD,

Prevention and Cure of Common Diseases with a Simple Tasty Diet:
Why the Medical and Pharmaceutical Businesses Fail

FMBR Meeting Notice: Friday, January 27, 2006 at 8:00 pm at ITP, Palo Alto (See fmbro.org for details);

Dr. Karl Maret, M.E., M.D. of the Dove Center for Integral Medicine will speak about the ability of water to encode information and its implications to our health. Karl spoke before FMBR in Nov. 2004 and the audience requested that he speak again and expand upon his discussion of water. Karl has just returned from Europe where he learned about the latest research in this field and some exciting new technologies that he will be demonstrating.

Another Meeting Notice (Not SLF): Monday, February 6, 2005, at 8:00pm (after a 6:30pm $13.00 dinner meeting) at the Gourmet Vegetarian Dinner (PeninsulaMacro.org) at First Baptist Church, 305 N. California Ave, Palo Alto, Dr. T. Colin Campbell, Professor of Nutritional Biochemistry and author of the China Study, will be speaking on the results of his comprehensive study. Call 650 599 3320 for reservations.

In The China Study, T. Colin Campbell, Ph.D., details the connection between nutrition and heart disease, diabetes and cancer. The report also examines the source of nutritional confusion produced by powerful lobbies, government entities, and opportunistic scientists. The New York Times has recognized the study (China-Oxford-Cornell Diet and Health Project) as the “Grand Prix of epidemiology” and the “most comprehensive large study ever undertaken of the relationship between diet and the risk of developing disease.”

Meet Dr. David Brownstein

David Brownstein, M.D. is a family physician who utilizes the best of conventional and alternative therapies. He is the Medical Director for the Center for Holistic Medicine in West Bloomfield, MI. He is a graduate of the University of Michigan and Wayne State University School of Medicine. Dr. Brownstein is member of the American Academy of
Family Physicians and the American College for the Advancement in Medicine. He is the father of two beautiful girls, Hailey and Jessica and is an active soccer coach. Dr. Brownstein has lectured internationally about his success with using natural items. Dr. Brownstein has authored these books:

**Salt Your Way to Health**  
**Iodine, Why You Need It, Why You Can’t Live Without It**  
**The Miracle of Natural Hormones 3rd Edition**  
**Overcoming Thyroid Disorders**  
**Overcoming Arthritis**

Dr. Brownstein has been interested in iodine supplementation for years. Michigan resides in the “Goiter Belt” of the United States, where the soil is deficient in iodine. Although he long suspected iodine deficiency in many of his patients, his initial uses of potassium iodide gave suboptimal results. Some patients did improve, but many did not notice any appreciable improvement. **When he started using the correct form and amount of iodine, he started to see clinical results.** With the advent of iodized salt, iodine deficiency was thought to be a thing of the past. That is not true. Iodine deficiency is occurring at near epidemic rates. This presentation will review the consequences of iodine deficiency.

Three years ago, Dr. Brownstein began testing his patients with the Iodine Loading Test (FFP Labs, 877–999–5556). Although he expected lowered body iodine levels, he was not ready for the magnitude of the results. After testing over 500 patients, he found that 94.7% of his patients showed deficiency on laboratory testing for inorganic iodine. When physiologic doses of iodine/iodide were added to their regimen, many of these patients showed dramatic improvement in their condition.

Many illnesses have been helped by iodine/iodide. These include fibromyalgia, thyroid disorders, chronic fatigue, immune deficiency syndrome, autoimmune disorders, as well as cancer (including breast, prostate, thyroid, and ovarian). Most patients who are deficient in iodine will respond positively to iodine supplementation. In fact, Dr. Brownstein has come to the conclusion that iodine deficiency sets up the immune system to malfunction which can lead to the development of many of the above disorders. Every patient could benefit from a thorough evaluation of iodine levels.

Iodine deficiency is often thought of as synonymous with thyroid malfunction, particularly with the development of goiter. The research is clear that iodine deficiency can lead to
cysts and nodules of the thyroid gland. David Marine reported the benefits of treating school-aged children with iodine/iodide (Lugol's solution) nearly 70 years ago (JAMA. 1937. 108:860-864). Marine looked at two groups: a control group and a treatment group receiving 9mg/day of iodine/iodide. The iodine/iodide treatment group had a 0.2% incidence of goiter, while the control group had a 22% goiter—a 110x difference. This was the first U.S. iodine study showing the decline of goiter formation with the use of iodine. Shortly after this study, iodized table salt was introduced and was a great success in eliminating goiter in the U.S.

In medical school, little was taught about iodine. Specifically, doctors were taught that the iodization of salt was implemented to prevent goiter and therefore no further iodine was necessary in the diet. After studying the literature on iodine, Dr. Brownstein realized what he was taught in medical school was incorrect. The iodization of salt was adequate to lessen the prevalence of goiter, but it did not address the rest of the body's need for iodine.

When he began testing his patients for iodine levels, he was amazed at the prevalence of iodine deficiency. As previously stated, 94.7% of his patients tested low for iodine. He noticed that patients with chronic illnesses, from autoimmune disorders to cancer, often have lower iodine levels as compared to relatively healthy patients.

He was initially hesitant to use higher (>1mg) doses of iodine due to his concern about causing adverse effects. In reviewing much of the literature there was concern about larger doses of iodine causing hyperthyroid symptoms. However, a further, more exhaustive review of the literature failed to prove that iodine, in milligram doses ever was shown to cause hyperthyroid symptoms. In fact, as iodine levels have fallen over 50% in the last 30 years in the United States, autoimmune disorders and hyperthyroid symptoms have been increasing at near epidemic proportions (CDC. NHANES study 1971-2000).

After testing individuals and finding low iodine levels, he began to use smaller milligram amounts of iodine/iodide (6.25mg/day). Upon retesting these individuals 1-2 months later, little progress was made. He then began using higher milligram doses (6.25-50mg) to increase the serum levels of iodine. It was only with these higher doses that he began to see clinical improvement as well as positive changes in the laboratory tests.

Why would people need the larger doses of iodine? Why have iodine levels fallen 50% in the last 30 years? As he pondered these questions, he came to the conclusion that the toxicity of modern life must be impacting iodine levels. It is well known that the toxic
halides, fluoride and bromide, having structure similar to iodine, can competitively inhibit iodine absorption and binding in the body.

After the thyroid gland, the breasts are the second main glandular storage site for iodine. The relationship between breast illness and iodine deficiency has been reported for over 100 years. Iodine concentrates in the breast and is secreted from the breast. Normal breast architecture will not develop when there is iodine deficiency present. Diseased breast tissue has been shown to take up more iodine as compared to healthy breast tissue (Eskin OB-GYN. 1974;44:398-402). The higher uptake in the abnormal breasts indicates that a greater deficiency of iodine is present compared to normal breasts.

Maryann is a 45-year-old R.N. who has been a patient of Dr. Brownstein for five years. He diagnosed Maryann with hypothyroidism five years ago, and she was being treated with Armour thyroid. Her hypothyroid conditions (fatigue, hair falling out, etc.) improved significantly with thyroid replacement and she was presently euthyroid. Maryann was also suffering from fibrocystic breast disease. She said, “I was thinking about a mastectomy. I can’t wear a bra because my breasts are so tender.” Maryann was told to avoid caffeine and to go on birth control pills to treat the cystic breasts. She could not tolerate the birth control pills and received minimal improvement from dietary changes. When Dr. Brownstein checked with the iodine loading test, Maryann was found to be very low on iodine (27% excretion—normal is >90%). Within three weeks of taking 50mg of iodide/iodine (4x Iodoral®), all her breast symptoms improved. She said, “My pain level declined immediately and after three weeks, it was 70% better. I can now wear a bra without pain.” Two months later, a physical exam revealed no signs of fibrocystic breasts, and she was now completely pain free. “I am ecstatic. I can now exercise, and I feel just wonderful,” Maryann said.

Iodine/iodide supplementation has markedly improved the course of illness in fibrocystic breasts in almost all of Dr. Brownstein’s patients with fibrocystic breast disease. In addition, those with breast cancer also improve. Nodules and fibrous changes of the breasts significantly improve in a short time period. He believes that the epidemic of breast disease we are seeing in this country is due, in no small part, to iodine deficiency.

There are many other illnesses that also improved with iodine therapy. Table 2 gives examples of some of these illnesses.

Iodine has many positive therapeutic actions. It is a potent anti-infective agent. No virus, bacteria or parasite has been shown to be resistant to iodine therapy. He has found that
providing adequate iodine to provide the body with iodine sufficiency markedly decreases the number and severity of infections in these patients. Table 3 lists some of the other therapeutic actions of iodine.

**Conditions Treated With Iodine:**

- Breast Disease
- Diabetes
- Dupuytren’s Contracture
- Excess Mucous Production
- Fatigue
- Fibrocystic Breasts
- Hemorrhoids
- Headaches and Migraine Headaches
- Infections
- Keloids
- Ovarian Cysts
- Parotid Duct Stones
- Peyronie’s
- Sebaceous Cysts
- Thyroid Disorders
- Vaginal Infections

**Therapeutic Actions of Iodine and Conditions Iodine Can Treat:**

- Antibacterial
- Anticancer
- Antiparasitic
- Antiviral
- Mucolytic Agent

Dr. Brownstein’s clinical experience using physiologic doses of iodine/iodide (6.25-50mg/day) has been very positive. To date, he and his practice partners have treated over 3,000 patients. The side effects with using these doses have been minimal. Rarely, has he observed iodism (metallic taste in mouth, frontal sinus pressure/pain, and increased
salivation). Iodism is easily rectified by adjusting the dose of iodine down or simply by telling the patient to await the resolution of these symptoms, which takes approximately 1-3 weeks. In treating over 3,000 patients, he has found three patients with “allergy” to non-radioactive inorganic iodine/iodide. An acupressure technique, NAET (NAET.com) has proven very effective to reverse this allergy. Allergy to fish, shellfish or radioactive iodine does not mean there is an allergy to inorganic non-radioactive iodine. In fact, true inorganic iodine allergy is very rare, if it in fact exists.