Soft Tissue Research

Early Life Infections Improve the Function of the Immune System

1) Atopic diseases (asthma, hay fever, and eczema in this study) are rapidly rising in westernized communities.
2) The mechanism for this increase in atopic diseases is reduced exposure to microbes.
3) Atopic diseases were significantly statistically linked to immunization with the Pertussis vaccine and to treatment with oral antibiotics in the first two years of life.
4) The authors conclude that exposure to certain infections represses atopic disorders.

A 1999 article published in the journal THE LANCET titled “Atopy in Children of Families with an Anthroposophic Lifestyle” notes:
1) The increased prevalence of atopic disorders in children may be associated with changes in childhood infections as related to vaccination programs and antibiotics that alter intestinal microflora.
2) Children who use antibiotics restrictively and have few vaccinations have lower levels of atopic diseases.

Another 1999 article published in the journal CLINICAL EXPERIMENTS – TAL ALLERGY titled “Allergic use in early childhood and the development of asthma” notes:
1) Allergic use is significantly associated with a history of asthma.
2) If antibiotics are used in the first year of life there is a 305 percent increased risk of developing asthma when compared with children who had never used antibiotics.
3) If antibiotics are used only after the first year of life there is a 64 percent increased risk of asthma when compared with children who had never used antibiotics.
4) The greater the number of courses of antibiotics given to children, the greater the risk that they will develop asthma.
5) “Early childhood infection may have a protective role against the subsequent development of asthma.”
6) The treatment of infant infections with antibiotics could play a role in the development of childhood asthma.
7) Antibiotics increase the risk of asthma by “reducing the intensity and duration of acquired bacterial infections.”
8) There is a “temporal association between the increasing prevalence of asthma and the increasing use of antibiotics throughout the developed world.”

A 2000 article published in the journal ALLERGY titled “The immunology of letuses and infants: What drives the allergic march?” notes:
1) Atopy refers to allergic conditions which include hay fever, asthma, and eczema, and are associated with the production of IgE antibodies to common environmental allergens.
2) The risk of atopic disease early in life is particularly high in Western industrialized countries.
3) The critical period that influences the development of atopy is the first years of life.
4) “A decline in certain childhood infections or a lack of exposure to infectious agents during the first years of life could have caused the recent epidemic of atopic disease and asthma.”

REVIEW: Article Reviews
From
Dan Murphy, DC
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SUBSCRIBER COMMENTS
Dr. Dan,

Any chiropractor that truly cares about his patients and not about just making a buck needs to be subscribing to your E-mail Article Review Updates. I certainly am going to do my part to see that each chiro I come in contact with knows what an absolutely invaluable resource it is. I sat in amazement at the last two articles you sent regarding antibiotic overuse and atopic disorders. What crucial information to pass on to my practice members.

Thanks and keep up the awesome work!
— Dr. G.M.; August 1, 2002

Just a note to let you know that I truly appreciate the articles. Is it OK with you if I hand them out to patients?
— JR, DC; January 8, 2005

Great stuff to blast insurance companies with.
— R.M.; August 2, 2002

Dear Dr. Dan,

I hope you can continue providing this information for many years to come. I have been in practice for 18 years and find these citations to be the most informative, chiropractically relevant information that I have received in my career. I would be willing to pay more for this information to make sure that it keeps coming. Again, thank you!!
— JR, DC; January 8, 2005

A 1998 article published in the journal THORAX titled “Early childhood infections and Atopic Disorder” notes:
4) Bacterial or viral infections also increase the risk of asthma.
5) "The incidence of asthma among children who had two or more older siblings or who attended day care during the first six months of life was significantly lower than that among children who had one sibling or no siblings and who did not attend day care."
EARLY LIFE

continued from previous page

sue to endotoxin and its relation to atopy in school-age children” notes:
1) “Asthma is the most common chronic disease in childhood and accounts for substantial morbidity and health care costs.”
2) One can have exposure to microbes in various parts of the body and become infected.
3) Environmental exposure to microbial products may have a crucial role in the development of childhood asthma.
4) Exposure to microbial products is associated with a significant decrease in the risk of hay-fever, atopic sensitization, atopic asthma, and atopic wheezing in childhood.
5) The innate immune system responds favorably to one’s entire life to a high microbial burden.
6) Exposure to microbial products strongly affects the development of atopy and childhood asthma.

This article generated an editorial titled EAT DIRT — THE HYGIENE, HYPOTHESIS AND ALLERGIC DISEASES that included the following comments:
1) There is an epidemic of both autoimmune diseases and allergic diseases.
2) “One theory proposed to explain this increase in the prevalence of autoimmune and allergic diseases is that it results from a decrease in the prevalence of childhood infection.”

Another 2002 article published in the same issue of the NEW ENGLAND JOURNAL OF MEDicine titled “Mechanisms of Disease: The Effect of Infections on Susceptibility to Autoimmune and Allergic Diseases” notes:
1) Infectious agents can suppress allergic (asthma, rhinitis, and atopic dermatitis) and autoimmune (multiple sclerosis, insulin-dependent diabetes type 1 diabetes, and Crohn’s disease) disorders.
2) The incidence of these disorders began to increase in the 1950s coincidently with the availability of antibiotics and vaccinations and continues today.
3) There has been a significant decrease in the incidence of infectious diseases in developed countries as a result of antibiotics, vaccinations, and improved hygiene.
4) Early childhood infections change immune system maturation.
5) The administration of antibiotics to children increases the risk of asthma and allergy.
6) Decreased exposure of women to viruses before pregnancy may subsequently reduce the degree of protection against these viruses afforded their newborns.
7) “Vaccination strategies should be examined in the context of the hygiene hypothesis.”
8) Vaccinations may prevent “protective” infection and thus have an unfavorable effect.
9) “In addition to the problem of antibiotic resistance, unnecessary treatment with antibiotics could reduce the degree of physiological immunostimulation afforded by commensal bacteria.”
10) “There is a certain irony in the fact that we must now search for new ways to reproduce the infectious diseases against which we have been fighting with great success over the past three decades.”

Gilham et al’s findings should not come as a surprise; however they have stopped short of questioning the possible benefits to the immune system of what were once called ‘normal childhood infections’ and now, are extremely rare.”

“Prevention of infectious diseases is seen universally as beneficial to the health of society. However few have considered the possibility that natural selection and these diseases, played a role in the development of the immune system to fight more deadly diseases.”

Dr. Lanigan then cites references to support the following points:
1) Children who take fewer antibiotics and a lower rate of immunization also have a lower prevalence of asthma, eczema and hay fever than the controls.
2) Children who contract measles are less likely to develop asthma, a disease that was rare thirty years ago and now kills 2000 people per year in the UK.
3) DPT vaccination increases the risk of allergy.
4) There is a specific inverse relationship between contracting measles and atopic diseases.

see EARLY LIFE on next page
5) Children who did not have the DPT vaccine lived 10 years longer than those who did not suffer from asthma or other allergic ill-
nesses while 23 - 30 percent of the controls died of leukemia.
6) Children who suffered infec-
tions in the first year of life are less likely to develop insulin dependent diabeti-
s.

Depleted immune children twice the incidence of type-1 diabetes.
—Richard Lanigan, Chiropractor

"The study by Gilham et al. con-
firm the hypothesis that reduced exposure to infection early in life has effects on the mutating immune sys-
tem that increase the risk of acute lymphoblastic leukaemia (ALL) and possibly other malignancies.

"The immunological basis of this increased risk is uncertain but it could be the result of the inadequate devel-
oped of immune surveillance mech-
anism that detect cancer-specific antigens determinants.

Gilham et al. postulate that the inadequate immunization system due to a lack of exposure to infection permits subsequent infections in the first few years of life to provoke, probably viruses, to cause immune dysregulation leading to acute lym-
phoblastic leukaemia.
— John M Grange
Centre for Infectious Diseases and International Health, University College London

"Before 1920, acute leukemia among children was a rare event. A significant peak-age incidence (2.5 years) appeared after 1940. Since then, the incidence rate of childhood leukemia has been more or less remarkably stable and about the same that some leukemogenic factor must have been introduced in children’s lives some time around 1940.

"It is a highly striking coincidence that at the same year the introduction of immunization against diphtheria was begun on a large scale—
— Petar I. Ivanovski, pediatrician
University Childrens Hospital, Belgrade

"I wonder if our friends at the CDC, NIH, WHO etc. have considered adding leukemia in addition to diabetes, Galambos Barrette, Autism, SIDS, ARTHRITIS, THROMBOCYTOPENIA, ESCHERICHIA, DEATH, SIDS, DISTRESSED BREATHING, THIMEROSAL ACCUMULATION IN BRAIN (TAB), delayed speech, tics, seizures, hallucina-
tion, dizziness, Hemorrhagic Vas-
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SURE TO ENDOTOXIN AND ITS RELA-

"I draw attention to a letter entitled "Immunization and Childhood Leukaemia" in which it was shown that Leukaemia in children is a "natural
cancer". Children born between 1598 to 1964 showed a significant statistical associ-
ation between leukaemia and death against dyp-
theria, tetanus and whooping cough.

In view of Dr Ivanovski’s observa-
tions that the incidence of childhood leukemia increases with the intro-
duction of DPT vaccination it is virtu-
ally certain that, if investigated, they will show an association with leukemia also shows a statistically significant increase in immunization with DPT vaccine.

— Michael Innis, Director

KEY POINTS FROM THIS ARTICLE INCLUDE:
1) A number of studies going back nearly two decades propose that a delayed system of defense against the stimulus agents in infancy delays immune sys-
tem development and is consequently responsible for the childhood peak of acute lymphoblastic leukemia at age 3.5 years.
2) Sending infants to day care increases the incidences of infections, which plays a role in improving immune system development, and reduces the incidence of acute lym-
phoblastic leukemia.
3) In this study, infants in day

creases in the risk of acute lymphoblastic leukemia in children who attended formal day care during the first three months of life. (Very important: this indicates that the first 3 months of life are a crit-
tical time for infants to actually get infections so that their immune sys-
tem develops appropriately and strongly, which reduces the inci-
dences of acute lymphoblastic leukemia and other cancers.
4) Not being infected ("immuno-
logical isolation") increases the risk of acute lymphoblastic leukemia.
5) Not all case-control stud-
ies of childhood leukemia suggest a reduction in risk of around 30-40 per-
cent for day care transmitted infections and increased infections.
6) Not being infected ("immuno-
logical isolation") in the first year of life provides "inadequate priming of the naive immune system" and may precipitate a highly dysregulated immune response.
7) Increased infections in the first few months of life reduce chances of developing acute lym-
phoblastic leukemia.
8) "The most plausible interpreta-
tion is that this protection comes from exposure to infections in infancy. (This means that exposure to com-
mon childhood infections in the first few months of life may play a role in immune system development and reduced incidence of acute lym-
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9) "Some degree of early expo-
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Eating too much sweets and sugar can also cause diabetes.

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