

Colon Hydrotherapy: A Forgotten Art

Colon Disease, Pathology and Detoxification

Good health is as much a function of our elimination status as the quality of food we ingest. Consider that over 400 million dollars is spent annually on laxatives in the United States. Every year 140,000 Americans are diagnosed as having colorectal cancer. Of this population, 44% will die as a result of the disease. Colon cancer is the second leading cancer killer in the U.S., following lung cancer in men and breast cancer in women. At least two million suffer from colitis, ileitis and diverticulitis, and 100,000 have a colostomy each year.

Periodic cleansing could minimize the exposure of potential carcinogens to colon walls. The colon hydrotherapy procedure allows the opportunity for digital rectal examination. At this time a hemocult smear (persons over 30) could be obtained, and a screening method for the detection of colorectal cancer observed. Periodic cleansing could dilute the toxin concentration in the cecum and facilitate the removal of same. The result is a reduced load on the portal and lymphatic system allowing the five eliminative organs to the body to balance the removal of these toxins with their production. When a breakdown in one or more of these systems exists and toxins abound, the potential for disease is greatly increased.

Research has shown a definite correlation between the nature of the diet and type of flora in the intestine. A diet high in protein results in predominantly proteolytic putrefactive bacteria, which produce toxic compounds, some of which are absorbed. Alteration of the physiologic Flora (balanced) can predispose to some 36 bacterial toxins. The physiologic (normal) Flora consists of 30 - 40% gram negative bacillus and over 30% acidophilus. The pathogenic Flora consists of streptococcus, staphylococcus, E. coli, etc., which are present normally in small numbers. When conditions exist that alter this proposed balance, the pathogenic Flora can flourish and be a source of disease.

Small amounts of protein, fats and carbohydrates escaping digestion in the small intestine may be digested by bacterial enzymes in the large intestine. These organisms are capable of breaking down (cellulose) and synthesize folic acid and other B vitamins, as well as vitamin K. E. coli has recently been recognized as being able to split triglycerides (fatty acids). Certain amino acids: tryptophan, tyrosine, phenylalanine and

histidine under bacterial enzyme influence produce the toxic compounds: skatole, indole, phenol, cresol, histamine, etc.

The products of putrefaction may be absorbed in small quantities by the mucosa and transported to the liver, where they are detoxified to be excreted by the kidney in the form of sulfates and glucuronides. The material which remains in the colon and is eliminated in the feces contain indole, skatole, mercaptan, hydrogen sulfide and bacterial end products of cystine, which gives the feces an unpleasant odor. The color of the feces is due to bacterial action on stercobilin (bile pigment).

Some ammonia is formed by bacteria in the intestine, mainly from digestive products of proteins and converted to urea in the liver. In liver disease such as cirrhosis, increased levels of ammonia in the vascular system can cause neurological symptoms resembling hepatic coma. A low protein diet may ameliorate these systems. Cleansing the colon serves to dilute and remove the toxin concentration in the large intestine and respective blood supply. Speculation has been made that a change in diet from high protein to high carbohydrate results in dominance of a non-putrefactive Flora.

Other evidence implies that the ingestion of fermentable carbohydrates (glucose, fructose, lactose) results in delay of or complete inhibition of the putrefactive process. The liver is the main detoxification organ of the body. The portal vein drains the gastrointestinal tract, gall bladder, pancreas and spleen. The blood retrieved from the stomach and intestines is not returned to the heart but shunted to the liver where portal blood is discharged into sinusoids of the liver, which are surrounded by liver cells. In addition to removing, altering, storing and delivering the body digested fats, carbohydrates, proteins, vitamins and minerals, hepatocyte (liver cells) would detoxify and toxic material present and remove them from the system.

The problem arises when toxins are present in too great a number to be adequately handled by the liver. As with any organ or system in the body, the liver has a certain capacity for performing these functions of metabolism. When an unusual burden is placed on any one system, a breakdown occurs which affects the body as a whole. This breakdown results in an increased absorption of toxic substances, and if left uncollected the body will poison itself (auto-intoxication).

Intestinal cleansing is a therapeutic measure, which addresses the cause or source of the problem. Other measures, which treat only the symptoms, will provide only temporary relief of the problem. Colon hydrotherapy could clean and dilute the toxin load in the large intestine, resulting in a reduced burden on the liver, allowing the eliminative organs to function optimally. Colon hydrotherapy could also prevent stagnation and minimize the exposure of carcinogenic agents to the colon wall. The above combined effect may serve to rejuvenate the immunological system and truly be a pathway to vibrant health! References for this article will be supplied upon request.

Tony Centracchio, P.A., is a graduate of Cornell Medical College who has devoted years of research to upgrading and refining the technology of today's colon

hydrotherapy instrumentation and who is closely associated with Dotolo Research. All editorials are submitted to our editorial board for review. Each article published is selected for its technical merit and overall excellence.

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