



Natural Health Support Measures for Congestive Heart Failure

By

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Congestive heart failure (CHF) or heart failure (HF) refers to reduced or compromised heart function such that the output of blood is inadequate to meet the body's oxygen demands. There are many conditions that lead to CHF: Hypertension, failure of heart valves to work properly, congenital malformations, hardening of the arteries (arteriosclerosis), infections, constrictive infection of the lining around the heart (pericarditis), and hyperthyroidism.

The symptoms of CHF vary according to the side of the heart affected -- left or right. The most common symptoms are shortness of breath, cardiac asthma (an asthma-like condition caused by heart failure), edema (build-up of fluid in various body parts), cyanosis (bluish color to lips, nose, etc., caused by lack of oxygen), and cardiac hypertrophy (heart enlargement).

Conventional medical treatment varies with the cause, but often includes such therapeutic measures as rest; use of oxygen; improvement of heart muscle contractibility by use of certain drugs such as digitalis and diuretics; sodium restriction; and correction of heart arrhythmias.

Is there anything natural medicine can offer in terms of prevention or treatment of this insidious health challenge? Published research indicates "yes" to both.

Prevention is pretty straightforward. At least some forms of CHF appear to arise, in part, because of age-related declines in ubiquinone (Coenzyme Q10) levels in heart muscle and elsewhere in the body. CoQ10, which plays a vital role in the energy-generating machinery in every cell in our bodies, is synthesized in the human liver. As we age our ability to produce CoQ10 drops steadily. The late Dr. Karl Folkers, winner of the prestigious Priestly Medal in Chemistry, and a University

of Texas-Austin researcher, believed that persons with CHF and cardiomyopathy have below normal CoQ10 levels (Personal communication to the author back in 1987). To prevent this, many physicians and scientists suggest that people over fifty years of age or so take 300 mgs. (or more) of CoQ10 daily. Unfortunately, most forms of CoQ10 are poorly assimilated. Thankfully, better assimilated forms of CoQ10 are being marketed.

Since high blood pressure can lead to CHF and seldom produces symptoms, readers would be wise to have their blood pressure (BP) checked often. There are simple-to-use, relatively economical BP monitors available at most pharmacies and many large department stores. Should your BP creep up to the 130/90 level (120/80 is normal), you are in the borderline high BP range. Your physician should be called upon to double check this and prescribe the appropriate BP-lowering regimen (typically sodium reduction, weight loss, and possibly the use of a diuretic or other BP-lowering drug).

If your family has a history of heart disease, including CHF or cardiomyopathy, or if you have occasional arrhythmias, there are published studies that indicate that vitamin E and magnesium are helpful both in terms of prevention and as therapeutic tools. And of course, regular physicals will help your doctor catch an evolving heart problem early on and hopefully nip it in the bud.

What, if anything, can natural medicine offer those who have CHF?

First off, CHF is a serious malady and under no circumstances should a CHF patient commence taking a natural remedy on his own. Always involve a primary care physician (M.D. or D.O.) Only he or she can decide the appropriateness of any adjunctive (add on) measure and then faithfully and competently monitor a CHF patient, and adjust or drop prescribed medications.

The promise of certain natural compounds and combinations of compounds for CHF was driven home for “yours truly” by a series of experiments I conducted involving animals and then humans. The animals were pets with end-stage CHF treated by veterinarians using protocols I provided them. The human patients were treated by research-oriented MDs employing a slightly modified version of the animal or veterinary regimen.

Most of the animals were, in human equivalent years, 80-100 years old. The human patients were as young as 60 and as old as 96. The treatment approach did, on a whole result in increased ejection fractions (a measure of output from the heart), quality of life and life span.

Here are two of the more dramatic cases and the outcome – taken from my own published records:

Human: Female, age 96, mild-moderate CHF. Chronically short of breath, fatigued and subject to frequent episodes of edema in the legs and feet. Being treated with diuretics. Patient was placed on the therapeutic agents recommended and showed a gradual but steady improvement in terms of diminished symptoms during the ensuing six months. A thorough exam by her cardiologist

including echocardiogram, EKG, and other cardiac function tests showed significantly improved heart action (ejection fractions).

Animal: Female longhair domestic "tuxedo" cat, aged 20 years, end-stage CHF. This poor animal was on beta blockers and a diuretic, but coughed constantly, had virtually stopped eating (weighed 5 pounds), could not walk more than a foot without being winded, and was having serious episodes of breathlessness and cyanosis (tongue and lips bluish; tongue hanging out). The owner implemented a high dose version of the CHF regimen, almost as a last ditch effort. The day after commencing the therapy this cat was sitting up and coughing less. Over the next two weeks the cat began eating, stopped coughing for the most part, and the cyanosis disappeared. By week three the cat was walking 5-7 feet without dyspnea (shortness of breath). Improvement continued and the cat went on to live out its natural life free of CHF symptoms.

And what brought about these noteworthy clinical responses? This is the approach I tooled together:

Human:

100 mgs. of the amino acid L-Taurine per kilogram (2.2. pounds) of body weight. A typical man weighs 77.27 kgs. or 170 pounds, which is $77.27 \times 100 = 7727$ mgs. L-Taurine daily (Divided doses on an empty stomach). Most L-Taurine supplements come in 500 mg. tablet, capsule or caplet form (albeit some retail outlets market 1,000 mg capsules & caplets) So, in the case of the average man, he would take 5 (500 mg) tablets, capsules or caplets one hour before or two hours following each meal.

L-Taurine is an amino acid, one of the building blocks of proteins and a player in many systems. In the brain it acts as a neuromodulator. It also plays a vital role in the healthy functioning of the heart and eyes.

The use of L-Taurine in the amelioration of CHF is in accord with findings made in various published animal and human studies.

N-acetyl-carnitine: 250 mgs. 2-4 times daily. 500 mgs. in advanced cases.

Ubiquinone (Coenzyme Q10): 1200 mgs. with or after meals (3600 mgs. daily).

Octacosanol (1 capsule 2-3 times daily): This wheat germ derivative appeared to increase some patient's physical energy and stamina.

Coleus (Coleus forskohlii): 475 mgs. 2-3 times daily. This Ayurvedic herb raises levels of a regulatory compound called cyclic adenosine monophosphate (cAMP) in various organs including heart and lungs. This boosts heart action and relaxes bronchial airways. It is an herb that must be

used with caution in people on digitalis or other cardioactive drugs, and one that is contraindicated for use by men with prostate trouble or a history of prostate cancer.

My research collaborators and I found that patients not on a pharmaceutical diuretic, but suffering from enough edema to need minor intervention benefited from the herb **Corn Silk**: 475 mgs. 3-4 x daily. Corn silk is a mild diuretic.

Small animals (Cats) -- Crisis care

L-Taurine powder: 500-1000 mgs. per 4 kilograms of body weight mixed with a small can of cat's favorite canned food. Once the cat has exhausted his food and shows a renewed interest in eating -- typically 4-6 hours later -- repeat. Set out food and L-Taurine mixture before retiring at night. A 9-pound cat (4 kilograms, roughly) would get 1000 mgs. Taurine powder.

N-acetyl-carnitine: 250 mg. capsule emptied into each canned food feeding.

Corn silk: 200-250 mgs. mixed into each canned food feeding.

Coleus (Coleus forskohlii): 150 mgs. mixed into each canned food feeding.

Multi-mineral/vitamin tablet: Ground and mixed into canned food per directions.

After the crisis is passed and there is DVM-verified improvement:

Maintenance regimen

Continue all the aforementioned, except the *Coleus forskohlii* (lower or drop it). Reintroduce Coleus if the cat begins experiencing cardiac asthma (wheezing and cough).

The measures outlined in this regimen, being implemented and supervised by a physician (or veterinarian in the case of small pets), was found to offer significant relief by improving cardiac function in most cases of CHF. This is consistent with the published studies concerning various components of the treatment program and the results obtained by health care providers employing the complete regimen.

Complementary To This Approach

To combat hardening of the arteries and help shuttle calcium out of already hardened blood vessels and back to bone: Menaquinone-7, a form of vitamin K2. Also, if available try eating one packet daily of the Japanese fermented soybean food called "Natto". People on blood-

thinners need to check with their physician before using supplemental MK-7.

[Stepping out from behind the curtain](#)

[Reversing arterial blockage: Experimental regimen that worked for man facing amputation of his lower legs](#)

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