

What is Chelation Therapy? What's it for? How is it used? By Stuart H Freedenfeld, MD

In 1947 a synthetic amino acid called ethelene-diamine-tetra-acetic acid (EDTA), was approved by the FDA as a safe food additive. By 1952 EDTA was discovered to be a very safe and effective treatment for lead poisoning, which had become a common problem in the industrialized world. Treatments were given intravenously and the EDTA would Chelate, or bind in a claw-like fashion, around the lead molecules. Inside that chelated molecule, the lead could be safely transported to the kidney to be excreted.

As the treatment became popular, physicians began reporting that their older patients being treated for lead poisoning, who also had heart and circulatory diseases, were getting significantly better. Soon doctors began using EDTA for treatment of cardiovascular disease itself and this began a revolution in the treatment of this rapidly growing problem. But the revolution was not without casualties. Initially EDTA treatments were given too fast and at too high of a dose and some kidneys were damaged from the overexposure to lead or other toxic metals. Some patients died from their treatments. But the results in most patients warranted continued research. In 1960 a study involving 3000 patients was reported in the American Journal of Cardiology. The results were so promising that the author concluded "*every patient with [arteriosclerosis] in any part of the body should be given a therapeutic trial [with EDTA] before any type of vascular surgery is performed.*" The author further stated, "*We find in all cases of angina [that] the patient [has] no need for vasodilators after about the fifth infusion...and that ninety percent of these problems in the lower extremities make significant gains including regaining the ability to walk long distances comfortably...and evidence of improved distal circulation.*" Subsequent reports from other authors found improvements in patients with coronary artery disease, peripheral vascular disease, diabetic eye disease, macular degeneration and even cholesterol. Unfortunately in 1969, Abbott Laboratory's patent on EDTA ran out and no further commercial support for large-scale research was to become available. Medical interest turned to surgical approaches and the FDA never approved EDTA as a treatment for cardiovascular disease, though it remains approved as the treatment of choice for lead poisoning, even in children.

Over the past 3 decades growing numbers of doctors have continued to make this remarkable therapy available to their patients. **Many reports of successful chelation treatments continued to be published with success rates in the 80-95% range.** In 1993 Terry Chappell MD published a sophisticated meta-analysis of nineteen published research studies that reviewed the outcomes in a total of 22,765 patients treated with chelation therapy. Eighty seven percent (87%) of chelation treated patients in the meta-analysis showed clinical improvement by objective testing!

In the same year, a Danish study of 65 patients, who were on a waiting list for bypass surgery, were treated with EDTA. Eighty-nine percent (89%) of these patients were able to cancel their surgery because of symptomatic improvement. Another 27 patients, who were recommended for amputations, were treated with EDTA and out of the 27 patients,

24 limbs were saved. **In total, of the 92 patients referred for surgery, only 10 required surgery after EDTA treatments.** The study spanned 6 years, there were no adverse effects reported. The cost savings were over \$3 million.

Today, after a 50-year history, chelation therapy has been given to over 800,000 patients worldwide in over 13 million treatments. Following current protocols advocated by the American College for Advancement in Medicine (ACAM), chelation therapy is being safely offered in doctors' offices throughout the world. Typically a treatment last for either 1 ½ or 3 ½ hours and is given intravenously while the patient sits in a recliner or walks about the office pushing an IV pole. After a series of usually 30 initial weekly treatments, a maintenance schedule of monthly treatments keeps the benefits from loosing ground. Often blood pressure medications and angina medications can be discontinued as the treatments progress.

If you would like more information, or are wondering if chelation might be right for you, you can call our office and set up an appointment or join our next free evening seminar on Safe Treatments For Cardiovascular Disease.

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