

CHILLS is one of the signs of AIHA or IMHA

**Ask doctors to Look at red blood cells for anemia
This anemia is very hard to find ... odd assortment of things: Like high white blood cell count, and red blood cells globbing together**

www.valdezlink.com/pages/jaundiceandfatigue.htm 2 pages following

These signs

___ FATIGUE: **Symptoms of hemolytic anemia** ... suspect autoimmune *

___ Chills

___ Pale color

___ Shortness of breath

___ **Rapid heart rate** nervous system + adrenal glands? * BLOOD? * *

___ Yellow skin color (jaundice)

___ Dark urine - indicative of blood in urine

___ Red blood cells that are small-sized etc

___ **Enlarged spleen**

Is RDW elevated? ___ www.valdezlink.com/pages/rdw.htm#may

Random Distribution of Weight of red blood cells

High white blood cell counts? _____

RBC 'sticking together?' _____

'bites' out of RBCs? _____ (early); ~~Spikes~~ _____ ing

Fragility of RBC membranes? _____

___ Hormonal imbalances (high or low) Blood sugar high or low

___ Change in body temperature (high or low)

___ Blood pressure abnormalities (high or low)

Check kidneys as they send a hormone to bone marrow to make red blood cells and kidneys help make strong bones, too

www.valdezlink.com/rbc_size_shape.htm

___ **Horrible Headaches** * & other things in **CFIDS**, CFS

and it is an AUTOIMMUNE issue

a doctor shares with doctors -

Why glyconutrients help an autoimmune system

www.valdezlink.com/pages/newnutritionparadigm.htm

Caused by exposure to EGBE ... even before one's birth

Sort of a civilian 'gulf war syndrome'

Exxon Valdez oil spill cleanup workers and those they were around, would be able to 'prove' that this chemical IS the cause of 'gulf war syndrome' Soldiers also had exposure to 2-butoxyethanol and 2-butoxyethanol also known as ethylene glycol monobutyl ether

Look for the pattern of CFIDS;

Find this chemical's anemia

Look for autoimmune issues – even most of the cancers especially blood and blood forming organs, central nervous system, KIDNEYS and LIVER



jaundice: a yellowish staining of the skin, the whites of the eyes and deeper tissues

caused by an increased presence of bilirubin (bile pigments) in the plasma of the blood.

This can be a result of excessive breakdown of red blood cells or liver disease such as hepatitis (also called icterus).

IMHA

(**FORMERLY KNOWN AS AUTOIMMUNE HEMOLYTIC ANEMIA** or ?AIHA?) ...
Is immune mediated red cell destruction is a cause of icterus

IMMUNE MEDIATED HEMOLYTIC ANEMIA or "IMHA"

(FORMERLY KNOWN AS **AUTOIMMUNE HEMOLYTIC ANEMIA** or "AIHA")

Immune-mediated hemolytic anemia is a condition where the patient's immune system begins attacking its own red blood cells. What occurs on a microscopic level is this: the branch of the immune system that produces antibodies begins to direct them against the patient's own red blood cells. The red blood cells become quickly coated with tiny antibody proteins, essentially marking these red blood cells for destruction.

When the cells circulate through the spleen, liver, and bone marrow, they are plucked from circulation and destroyed, a process called "extravascular hemolysis." Their iron is sent to the liver as bilirubin for recycling. The spleen enlarges as it finds itself processing far more damaged red blood cells than it normally does. The liver is overwhelmed by large amounts of iron pigmented bilirubin **and the patient becomes jaundiced.**

Yellow pigmentation is jaundice from red cell destruction

Making matters worse, a special protein system called the "complement system" is activated by these antibodies. Complement proteins are able to simply rupture red blood cells if they are adequately coated with antibodies, a process called "intravascular hemolysis." Ultimately, there aren't enough red blood cells left circulating to bring adequate oxygen to the tissues and remove waste gases. A life-threatening crisis has emerged; in fact 20-80% mortality (depending on the study) have been reported with this disease.

may run a test called a "packed cell volume"

Anemia due to poor red blood cell production by the bone marrow is called a "**non-responsive anemia**." Such anemias are caused by chronic inflammatory diseases (like inflamed skin, infected teeth, or other long standing irritations), kidney failure, cancers of various types, or certain drugs (especially agents of chemotherapy).

Normally when red blood cells are lost, the drop in blood oxygen that results causes hormonal changes leading to increased production of red blood cells by the bone marrow. These are called "responsive anemias" because the bone marrow is responding. Bleeding and immune mediated red blood cell destruction are both "responsive anemias."

Pain use

THE TESTS REQUEST SUGGEST IMMUNE MEDIATED DESTRUCTION RATHER THAN BLEEDING

There are several clues in blood testing that tell us if our patient is bleeding or destroying red blood cells.

ICTERUS (ALSO CALLED "JAUNDICE")

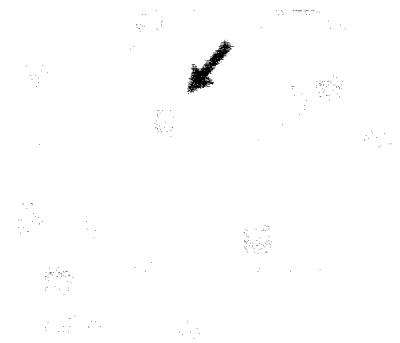
This is the yellow color that is taken up by a patient's tissues when the liver is overwhelmed with bilirubin, the iron containing by-product of red blood cell destruction. Normally red blood cells are removed from the circulation when they become old and inflexible. Their iron is recycled in the liver. With so many red cells being destroyed, the liver is overwhelmed and bilirubin (a yellow pigment) spills out everywhere, coloring urine, gums, skin, and the eyes orange.

Is immune mediated red cell destruction the only cause of icterus? Absolutely not. Liver failure also leads to icterus when the diseased liver cannot process normal amounts of bilirubin. In cats especially, bacterial endotoxin (the toxic cell walls of certain types of infecting bacteria) can lead to icterus. Usually, however, an responsive anemia together with icterus, suggests immune-mediated red cell destruction.

SPHEROCYTES

Spherocytes are special red blood cells produced when a red blood cell is not completely removed by the spleen. The spleen cell "bites off" only a portion of the red cell leaving the rest to escape back to the circulation.

A normal red blood cell is concave on both sides and disc like in shape. It is slightly paler centrally than on its rim. After a portion has been bitten off, it re-shapes into a more spherical shape with a denser red color. The presence of spherocytes indicates that red blood cells are being destroyed.



*Arrow points to a spherocyte.
Note it's uniform dense red color, as opposed to the normal red blood cells without a dense red color.*

AUTOAGGLUTINATION

In severe cases of immune mediated hemolytic anemia, the immune destruction of red cells is so blatant that the red cells clump together (because their antibody coatings stick together) when a drop of blood is placed on a microscope slide. Imagine a drop of blood forming not a red spot but a yellow spot with a small red clump inside it. This finding is especially forboding.

spikes RBCs?

LEUKEMOID REACTION

Classically, in IMHA the stimulation of the bone marrow is so strong that even the white blood cells lines (which have very little to do with this disease but which also are born and incubate in the bone marrow along side the red blood cells) are stimulated. This leads to white blood cell counts that are spectacularly high.

hair use

Dear Doctors

When doctors find the fatigue of CFS, FM, CFIDS there will be a paradigm shift in medical thinking. The commonly used chemical in cleaning products and paint ... & during EVOS should be suspect for causing diabetes ...

.... even severe arthritis, FATIGUE to the point of 'sleeping' a lot; rapid heart beat; blood pressure (high or low); severe shortness of breath Causes personality changes, FATIGUE, memory loss, depression, HEADACHES and suicidal tendencies, AUTOIMMUNE issues in general and more

Direct exposure 'looks like' the flu.... especially DIARRHEA

What to do for an autoimmune system? that is the question

CFIDS? AIHA must be THE fatigue doctors are looking for

at the very least I want to get this info to you so you can consider when this chemical exposure may be involved

The EVOS workers should look like the 'gulf war syndrome' vets ... there is also something called 'second hand solvent exposure' Someone with direct exposure can breath the chemical out in their respiration and it can get into the eyes of others in the family ... not unlike alcohol showing up in a breathalyzer test. 2-butoxyethanol is a complex alcohol.

For better info than can be received by fax please e-mail me at valdez@alaska.com

Sincerely,



Margaret Diann Hursh, Box 233, Valdez, AK 99686 907-835-3135

I didn't realize that this Ethylene Glycol Monobutyl Ether was a pesticide (per an odd EPA definition) ... and so widespread in use (until I started checking into it.) Military.com has given a 'forum' to express my 'findings' It will be those who have been harmed & their doctors ... who have the proof. I am in high hope that this chemical will be found out and someday banned by Congress. The EPA is impotent to help us.

Even our sweet babies and our pets are at risk.

Summary of this thread - first 3 posts: Why I think 2-butoxyethanol exposures & resultant CFIDS should be on the list of presumptive disability compensation

I have a totally different perspective since I started to recognize this chemical's harm:

1- the flu is a chemical exposure, primarily. Just because a virus or bacteria is found, does not mean it is the cause of what ails you.

2- Diabetes and abnormal blood pressure, body temp - are side effects of autoimmune hypothalamus. There is nothing wrong with the genes in some families; we have multiple generations of chemically poisoned people.

3- Prominent people like Pres FDR have the signs of this chemical's pattern. I suspect VP Cheney is not far from 'collapsing' and they know his heart is OK. "shortness of breath" I wish I knew more about when former US Attorney General, John Ashcroft, came down with 'flu symptoms' I do suspect that would have been the start of what resulted in gall bladder pancreatitis.

4- We need to pay more attention to those with CFIDS, CFS, FM, ME. The fatigue doctors are looking for must be Autoimmune Hemolytic Anemia or Immune Mediated Hemolytic Anemia. Checklist of 'the pattern' with emphasis on the signs of AIHA

By the time other things pile on top, people forget to mention how tired they are. And they are exasperated to continually hear nothing shows up in their medical tests. When the chills and shortness of breath start up, they are at a serious, advance stage of THIS fatigue.

Diann Hursh, Valdez

- ___ Do you recall a serious flu? or 'sniffles?' How often?
- ___ sniffing? diarrhea? eyes burning?
- ___ Flatulence? (Farting a lot),
- ___ Yeast infections fatigue:

Symptoms of hemolytic anemia ... suspect autoimmune

- ___ Chills ~~★~~ (*advance fatigue*)
- ___ Fatigue
- ___ Pale color
- ___ Shortness of breath
- ___ **Rapid heart rate** nervous system + adrenal glands? * BLOOD? * *
- ___ Yellow skin color (jaundice)
- ___ Dark urine (indicative of blood in urine)
- ___ Red blood cells that are small-sized, etc
- ___ Enlarged spleen

What is your RDW?

www.valdezlink.com/pages/rdw.htm#may

- ___ **Horrible Headaches** *
- ___ **Depression** (Central Nervous System damage)
- ___ Some Autoimmune issue, often diabetes
- ___ **Short term memory loss** (CNS damage)
- ___ Suicidal Tendencies (CNS)
- ___ Change in personality - constantly irritable *Burst of A...*