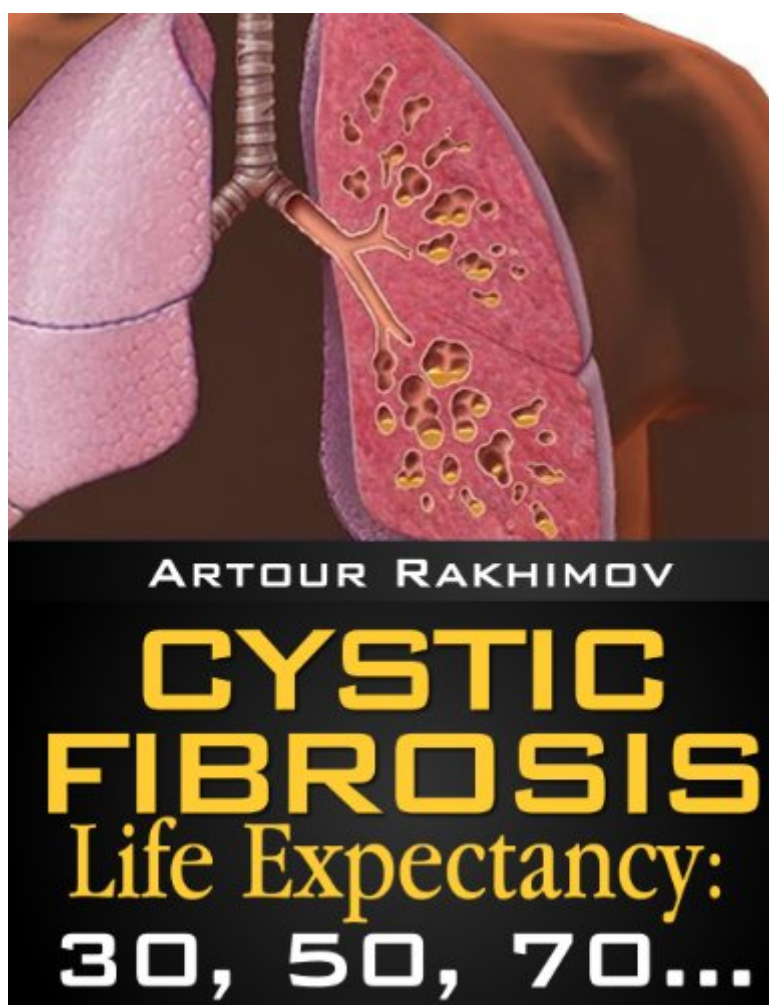


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Cystic Fibrosis Life Expectancy: 30, 50, 70... (Health, Fitness And Dieting: Children's Health: Cystic Fibrosis Book 1)



Synopsis

Cystic fibrosis life expectancy has been steadily growing for many decades. In late 1930s, most babies with cystic fibrosis died before their first birthday. Later, in the 1950s, cystic fibrosis life expectancy was less than 10 years. Soon after, due to use of various therapies, it increased from 14 years (in the 1980s) up to current 35-37 years. Some researchers predict that babies born with cystic fibrosis during this century can live up to their 50s. However, very few Westerners are aware that there are many Russian people with cystic fibrosis who are over 50 and even 60 years old due to their adherence to one medical therapy that was developed and practiced by over 150 Soviet and Russian doctors. Since 1960s, these MDs have applied the Buteyko breathing therapy to increase body O₂ levels, and these doctors claim that people with cystic fibrosis can have at least normal (or average) life expectancy if they maintain high (or normal) body O₂ content. My own experience, in successful elimination of major symptoms of cystic fibrosis in my students, also suggests the same conclusions. These breathing methods address lifestyle factors that influence body O₂ and use breathing exercises to increase body oxygenation. The book offers a detailed description of main lifestyle modules that increase body O₂ naturally and significantly reduce many symptoms of cystic fibrosis (e.g., coughing, too much mucus, wheezing, and various digestive concerns) within days.

How and why can these therapies work? Cystic fibrosis is considered a genetic disease. So is asthma, or Down syndrome. Not all genetic diseases are the same. Many of them, cystic fibrosis included, are also lifestyle diseases meaning that lifestyle choices have a direct impact on quality of life (and cystic fibrosis life expectancy). Western medical studies clearly proved that tissue hypoxia (low O₂ in cells) creates problems in the work of tiny ionic pumps that transport chemicals (sodium, chlorine and water) across the epithelial layers. This negative effect of hypoxia is present even in healthy people, but more expressed in people with cystic fibrosis due to the presence of the defective CFTR gene. Each and every study that measured respiratory parameters in people with cystic fibrosis found too fast and deep breathing (hyperventilation) in comparison with the medical norm (that is tiny). There are two long-term scenarios due to overbreathing. Either we get low CO₂ levels in the blood (this causes spasm of blood vessels and reduced body O₂) or we destroy our airways and lungs due to injurious effects of hypocapnia. In any scenario (with and without lung involvement), hyperventilation leads to low O₂ levels in cells. Low cellular O₂ causes formation of too thick and viscous mucus. Cell hypoxia also suppresses the immune system. Both factors promote growth of pathogens in people with cystic fibrosis in the respiratory and digestive systems, while other organs and body parts are also under physiological and biochemical stress due to low O₂ in cells. Other factors, such as chronic mouth breathing and chest breathing, also reduce body

O2 and make any treatment of cystic fibrosis less effective. Therefore, the suggested medical therapy, in order to increase cystic fibrosis life expectancy, is to slow down automatic breathing back to the medical norm and increase body O2 naturally. Clinical experience of Buteyko breathing MDs in Russia suggests that results of a simple body O2 test predict cystic fibrosis life expectancy. People with moderate degree of cystic fibrosis usually have only about 15-20 seconds or less for their body oxygen test, while the medical norm is 40 seconds. In terminally ill people (with cystic fibrosis and many other disorders) body O2 is less than 10 seconds. With over 40 seconds for the body O2 test, a person with cystic fibrosis can eliminate all symptoms and have an average life expectancy.

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Customer Reviews

I feel this author has important things to say to help those with breathing problems. However, if you get one book of his, you have essentially almost the same things in each one over and over, so choose wisely. I have non-smoker's COPD type issues and doctors insist you can't do much about it if you have to be on O2. However, just know that diet plays a HUGE part. I radically changed my diet and it has made a profound change in my ability to breathe. I dropped wheat, meat, dairy, soy, sugar, white flour, rice, oats, barley. Well there you go...almost everything in the store and

everything you love to eat. I did add grain alternatives of spelt, amaranth and quinoa. Just changing my diet has enabled me to cut my O2 almost in half, from 3 continuous to 1.5 continuous when at rest and 2 when doing lite walking and 3 when doing fast walking for medium distances. I can now do the 6 minute walk test on 6 continuous and STAY over 84 WITHOUT stopping!!!! This is after 2 months on the diet. The diet is not his suggestion, just to let others out there know other things do help. As far as the author's info, I am a "3", pretty bad really. So right now I am just using the 'pursed lip' breathe-out technique when I feel I need to build up O2 in my blood to help my muscles at this lower level of O2. This one technique helps me more than anything besides the diet change. Haven't been doing anything else yet since he says if your level is that low, to be extremely cautious. So I am working on diet right now, loosing some weight and using the "lung exerciser" machine my dr gave me (now he gives it to me, why not at the beginning?)--like the frolof gizmo. Reading this book has given me some hope that I can get off this O2 dog-leash.

My brother bought us this book...What I know about health is that all disease can be helped. "There is no such thing as an incurable disease, but at times incurable patients..." -Dr. Christopher. Many people choose to be victims in there own health struggles. Everyone is welcome to go to a hospital and take the "band aid method" of using different medications that cause more health problems in the long run. In order for Dr Artour Rakhimov suggestions to work, you must follow his directions and do the work! This is your body, and your health. Your body didn't get sick over night, it was a process, just as breathe retraining is also a process. If you truly want to get better, set your intentions high because health is up to the individual. I'm so thankful for this book and teachings. I'm learning even more on the normalbreathing.com web site.

It is interesting to note that such a simple test devised by a Russian Doctor (Professor Buteyko) could actually provide so much information in regards to the health of an organism. That test being the Morning Control Pause. Getting a high control pause means higher oxygen levels in the body and thus an ability to be able to be resistant to disease (at its simplest). The author Mr. Rahkimov has gone into great detail with many references to substantiate his work relating to the causes behind disease and how to eliminate cystic fibrosis (through increasing breathing rate to normal (4/L Minute). My query has to be why this method has not receive more scientific justification in Western Medicine and why it is has not received any support from Western practioners? Though I am sure that each case varies I would also be interested to know the average time frame for overcoming cystic fibrosis, using the methods described in this book.

We live in England and our 4 yo daughter has cystic fibrosis. A friend sent me a link to this book, which I tried to buy for my Kindle - but alas, for some reason won't let you buy it if your Kindle is registered to .co.uk as opposed to .com - HELP!!!!!!!!!!!!!!

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