

ISSUE 5
PRICE £2.50

ALOE VERA
INFORMATION SERVICES

ALOE VERA

Aloe in Alternative Medicine Practice

By Dr. G. Lawrence Plaskett B.A., Ph.D., C.Chem., F.R.I.C.

Aloe Vera can easily be incorporated into practice in Clinics of Nutritional Medicine, Naturopathy, Herbalism, Iridology, Kinesiology, Vega Testing and Mora Therapy, Colonics, Aromatherapy and Reflexology. It can be similarly used by Practitioners of Dowsing and Radionics. Within more orthodox practice, it can be used in conjunction with Physiotherapy.

This newsletter examines the rationale that lies behind the use of Aloe in these contexts. It looks at what is involved in incorporating Aloe into practice, gives guidance on the types of product that are needed and recommends a range of possible doses.



BIOMEDICAL INFORMATION SERVICES LTD
23 Chapel Street , Camelford, Cornwall. PL 32 9PJ

The Practitioner's Thinking which lies behind Treatment with Aloe

Practitioners who have assimilated the contents of Aloe vera Information Service NewsLetters 1-4 will by this time have abundant reasons for regarding Aloe with a great deal of respect as a powerful herbal remedy with multifaceted potency within the widest field of "healing". At the same time many readers may have been quite properly impressed with Aloe's powers in specific healing directions, such as those applying to those named medical conditions which have been subjected to trials with Aloe for potential therapeutic application. For yet other people, who perhaps suffer from no illness or significant symptoms, the attraction of Aloe may well be its potential for maintaining good health by a general "toning up" effect, which is inherent in Aloe's fundamental actions, especially those having to do with maintaining or improving the condition of the immune system and increasing the oxygen consumption, and therefore the activity levels, within the tissues. These, effects, most emphatically, appear to offer a very positive route to the avoidance of the partially de-oxygenated, low-activity and toxic condition which is recognised, naturopathically and vitalistically, as constituting the state of "chronicity". Furthermore, whilst this state of "chronicity" is the major predisposing factor towards chronic illness, it does not yet form part of the philosophy and outlook of mainstream medicine. Notwithstanding this, the concept is nonetheless wholly compatible with the principles of modern medical biochemistry.

It will be clear why Aloe gets dubbed with emotive terms such as "The Silent Healer" and even "Panacea". This happens, even among quite well informed users of Aloe, not just people who are easily influenced by hype and imagination. It does so because the nature of the fundamental actions of Aloe are to improve the status of some vitally important systems of the body which affect many functions. In this way it improves, generally, the biochemical status, activity levels and metabolic and functional competence of cells. Obviously, any such influence will be a most positive factor in keeping the individual safer than they would otherwise be, from developing chronic diseases in general. The painstaking process, which no doubt will have to be gone through, of thoroughly testing Aloe in clinical trials against every known chronic disease, is, to a certain extent superfluous within the philosophy of anyone who truly understands the fundamental modes of action of this remarkable herb.



It is, to a certain extent, inevitable that the fundamental changes which Aloe is capable of making within the body will help the body to fend off each and every chronic disease. Much though that may sound like a heresy to strictly orthodox clinicians, whose medical philosophy requires them to look at each and every labelled medical condition as though it were a separate entity, this author, who is himself so deeply rooted in medical science, now regards this as a truism, and that conclusion emanates from deep enquiry into the biochemical actions of Aloe at the cellular level. There is, indeed, every reason, through a process of scientific inference, to believe that each and every chronic disease will be found to respond to greater or lesser degree, to Aloe. The most likely exception to this is those genetic illnesses which are wholly determined by genetic error, but even with these there is a chance that the overall medical condition of the patient will be better for a certain toning up of cellular metabolism, such as Aloe can bring. This author's exploration of the literature has found a general absence of negative results when people have tried the use of Aloe against chronic disease. Some of the papers on the subject report that 100% of patients responded to Aloe or very nearly so.

How does Aloe relate to specific Disciplines within Alternative and Complementary Medicine?

Nutritional Medicine

For the Practitioner whose prime field is Nutritional Medicine, Aloe vera can be seen in the role of a quite unique adjunct of the Therapy. Although Aloe is often advocated for its content of nutrients, this is not really a key point, nor even a very significant point at all about Aloe. Naturally, Aloe, being a plant juice, contains some protein, carbohydrate and lipid, contains minerals, such as calcium, magnesium, sodium and potassium, and some of the vitamins, but the amounts of these are low. Because Aloe is the juice of a plant which is adapted to water-storage, its juice is very dilute, the gel containing about 0.5 - 0.7% of total solids and the Whole Leaf Extract about 1.0 - 2.0% of total solids. Most other plant juices are much more concentrated than this. Given these low concentrations, and the modest volumes of the juice which are used for therapy, the quantities of nutrients taken in with a daily dose of Aloe are very small compared to dietary intakes. Therefore, one does not use Aloe for its nutrient content. Instead, Aloe is to be uniquely valued for its content of active biochemicals. These are substances which interact with living cells in very small amounts, producing

significant changes to cell metabolism and cell behaviour. These substances interact with specialized receptors on the cell surface to produce these changes, in a way which might be described as "pharmacological". Yet the substances within Aloe which are doing this are entirely non-toxic natural substances and they leave no residues in the tissues. Any practitioner who is a purist and, perhaps, does not much like the use of the word "pharmacological" in this connection, can rest assured that Man has always been exposed to active substances of this kind in the his foods. Aloe itself, of course, is not a food, but pharmacologically active substances of the same general type are well distributed among unprocessed whole foods. None of our foods contain the same range of active cell-stimulating constituents as Aloe in the same proportions, but the principles involved in using Aloe are much the same as when one uses some foods as medicines.

Naturally, much of what one does when using foods as medicines involves selecting the foods for their nutrient content. Unlike Aloe, we eat enough of various individual foods, or can do, to contribute significantly to the dietary supply of specified vitamins, minerals etc. That is one most important element of food therapy. The other aspects of food therapy, but one which is often forgotten, due to focusing primarily upon the nutrients, is the way that the various whole unprocessed foods contribute pharmacologically active substances which constantly stimulate or otherwise modify the behaviour and metabolism of our cells. We are used to the idea that food processing can damage our food by causing extensive losses of nutrients but, almost certainly, there is another huge area of understanding - one which we are only just beginning to glimpse at the present time - which concerns the way in which the processing of food damages these pharmacologically active substances which are in natural, unprocessed foods but which may be absent, or nearly so, from processed foods.

The presence of special bioactive substances in plant-derived foods is the subject of two important books by Jean Carper "The Food Pharmacy", 1989 and "Food Your Miracle Medicine", 1993. Some of the components she identifies are nutrients and others simply have very powerful anti-oxidant effects, but it seems rather clear that some of them exert actions of a pharmacological kind.

Just because the pharmacologically active substances in Aloe, and also those in foods, interact with cell surface receptors, and because drugs also do the same thing, there is no need whatsoever to regard these substances as being drug-like in their