

African Traditional Herbal Research Clinic

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NEWSLETTER

September 2006

Extremely Resistant TB Emerges in South Africa

By Joy Victory
ABCNEWS.com

Serious Implications Seen in Fight Against HIV and Antibiotic Resistance

Aug. 18, 2006 — In a rural, impoverished area of South Africa, a scary outbreak is occurring primarily among AIDS patients -- a type of tuberculosis that is extremely drug resistant.

Of 53 patients who had this form of the lung infection in a research study, 52 died. Two of the people who died were health-care workers.

A doctor on staff suspects it may have killed other hospital workers who sought TB treatment at private clinics after becoming infected.

"It does mean that these people are virtually untreatable," said Dr. Tony Moll, the AIDS treatment director at the Church of Scotland Hospital in Tugela Ferry, South Africa.

Moll spoke to ABC News by phone. "That's why we had the high death rate. There was nothing we could do in terms of offering medication."

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What is the African Traditional Herbal Research Clinic?

We can make you healthy and wise

**Nakato Lewis
Blackherbals at the Source of the Nile, (U) Ltd.**

The African Traditional Herbal Research Clinic located in Bukoto is a modern clinic facility created to establish a model space whereby indigenous herbal practitioners and healers can upgrade and update their skills through training and certification and respond to common diseases using African healing methods and traditions in a modern clinical environment.

Traditional healers are the major health labor resource in Africa as a whole. In Uganda, indigenous traditional healers are the only source of health services for the majority of the population. An estimated 80% of the population receives its health education and health care from practitioners of traditional medicine. They are knowledgeable of the culture, the local languages and local traditions.

Our purpose is to raise public awareness and understanding on the value of African traditional herbal medicine and other healing practices. We are now open.

**Hours: 9:00 am to 6:00 pm Monday thru Friday
10 am to 4:00 pm Saturday
Sundays - Closed**

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The discovery was made when Moll and several other researchers collected sputum, or lung secretions, from 1,540 patients who had visited the hospital between January 2005 and March 2006. Thirty-five percent of them, or 536 patients, had tuberculosis. Of those, 221 had multi-antibiotic resistant TB, and of that group, 53 had the extremely drug-resistant form of TB.

The findings were presented Thursday at the 16th annual International AIDS Conference in Toronto.

Most of the group with extremely drug resistant TB also had HIV. The two infections often strike a person at the same time, because tuberculosis is often an opportunistic infection or lies dormant until a person's immune system is weakened.

Tuberculosis is caused by the bacteria *Mycobacterium tuberculosis*, and is spread through the air. It is one of the many types of bacteria that have developed resistance to antibiotic treatment.

Giving HIV drugs, known as antiretroviral therapy, helped patients deal with the co-infection.

Moll noticed, however, that there always seemed to be patients who, in spite of receiving the treatment and other medical care, still died from TB. This led to the sputum research.

The emergence of a potent TB strain is a major setback for HIV treatment and an additional cause for concern about the spread of antibiotic-resistant bacterial infections around the world.

"Not only does this have serious implications on our patients, it also has serious implication on this staff," said Moll, who has implemented tighter infection-control policies in the hospital.

"It also undermines a new hope that we had in antiretroviral therapy and what it could do for us and our community."

While this is not the first time extremely drug resistant TB has been reported, the finding makes Tugela Ferry the de facto epicenter of the infection.

Health officials admit there is a lack of information about TB infections in poor and rural areas of the world, and the true impact is not understood.

The discovery is alarming enough that the World Health Organization is quickly convening with South African health officials to investigate the matter, according to a source quoted in The New York Times.

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<http://abcnews.go.com/Health/story?id=2329685&page=1>

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Africa shows Alarming Rise in Tuberculosis

24 March 2005 – With 5,000 people dying from tuberculosis every day and Africa posing the “glaring exception” to a global trend of falling or stabilized rates, the United Nations today observed World TB Day with an optimistic report on the battle against the disease in the world’s other regions and calls for even greater efforts.

“Clearly, we must work harder if we are to achieve, by 2015, the Millennium Development Goal (MDG) of halting and beginning to reverse the spread of TB as one of the world’s major diseases,” Secretary-General Kofi Annan said in a message in which he called the scourge “both preventable and curable.

In most areas of the world, the battle is being successfully fought, but in Africa the disease has reached alarming proportions with a growing number of TB cases and deaths linked to HIV, the UN World Health Organization (WHO) said in its new report released today – “The Global Tuberculosis Control study for 2005.”

Global TB prevalence has declined by more than 20 per cent since 1990 and rates are now falling or stable in five of the world’s six regions of the world, but “the glaring exception is Africa,” where incidence has tripled since 1990 in countries with high HIV prevalence and are still rising across the continent at a rate of 3 per cent to 4 per cent annually, according to the report.

“Evidence in this report provides real optimism that TB is beatable, but it is also a clear warning,” WHO can’t fight AIDS unless we do much more to fight TB, and it is time to match his words with urgent action in Africa on the two epidemics together.”

Even Uganda, an African HIV reduction success story, is today curing fewer TB patients than it did four years ago. More than half of all people with TB in Uganda remain without access to life-saving DOTS services due to strained general health facilities.

DOTS, the internationally recommended strategy to control TB, combine five elements: political commitment, microscopy services, drug supplies, surveillance and monitoring systems, and the use of highly efficacious treatment regimes with direct observation of treatment.

There has been major progress in China and India, which account for one third of the global TB burden

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AFRIKAN SPIRITUALITY

Nilotic Spirituality and Philosophy -Part 2

Typical of African deities, Ausar had a known consort, Auset. Auset (Isis) was the wife and sister of Ausar. Like her husband, she was thought to be an ancestral spirit. Heralded as the Queen of Egypt, Auset was said to be responsible for bringing writing and agriculture to the people. She also symbolized the fertility of the land. One of the original 9 neteru of Creation, it is said that she gained her power by learning the secret name of her father Ra.

Following her husband's death, Auset searched the land for him. She found his body only to have Set dismember it into fourteen pieces. Once more she searched for her husband and located all of the pieces of his body save his phallus. Auset created the tekhen (obelisk) to symbolize her husband's missing member. With the help of the neteru Tehuti and Anpu, Ausar was resurrected. Legend further goes to say that while her husband was dead; his spirit entered and impregnated her. Shortly thereafter she conceived a child who would be named Heru. This act represents the first immaculate conception known to mankind. Auset's worship would remain for several thousand years up to Rome where her temples became numerous.

Heru is the immaculately conceived son of Auset and Ausar. At his birth it is said three wise kings or Magi came to honor him while he was adored by all manner of neteru and men. As an adult, Heru avenged his father by triumphing over his wicked uncle Set. Heru then journeyed to the underworld where he sits with his father in judgement of the dead. Heru's triumph over Set is the origin of the word "hero" and his association with the zodiac makes him the source of the world "hour." Thus the minor deities of the zodiac are the "Watchers of the Hours (Horus)" or horoscope. He is depicted as a falcon or a man with a falcon head. Heru became known also as the "child of the light" representing the sun (knowledge) driving away darkness (Set; the setting sun; ignorance). From the earliest times in Egypt he came to represent the living king or divine kingship. This idea of the king as nearly a living god typifies African ideology and is thought to have come up the Nile from the south to Egypt. In fact it is said in Egyptian texts that Heru invaded Egypt from the south.

With this belief in a god-like king came the association of

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The traditional shrine as a symbol of our cultural history

the king with the land. Thus while a powerful king ensured the land's prosperity, a sick or weak king foretold its demise. Many believe the kings of prehistoric Egypt were put to death when they became sick or weak. This unique practice was known in many African societies such as the Sofala whose king was required to commit suicide when he became weak. Ritualistic-symbolic death eventually replaced the actual practice and can be found among the common day Yoruba, Dagomba, Shamba, Igara, Songhay, the Hausa of Gobir, Katensa, Daura and Shilluk to name a few.

Originally called the Her-em-akhet (Heru of the Horizon), the immense statue commonly known as the sphinx symbolizes several key Egyptian concepts. Symbolically the lion portion of the statue represents the animal nature and raw chaotic power within mankind. The human head represents the intelligence needed to ascend above the animal power and use it wisely to rule and bring divine order to chaos. Thus the blending of these two opposites brings about harmony. Also depicted is the ability of mankind to rise above his chaotic nature and ascend to divinity. Here once again are the African concepts of opposites.

Also within the Her-em-Akhet is the association with the divine kingship as the statue also represented the power of the ruler. The head of the statue is none other than the ruler's very symbol, Heru. The lion portion symbolizing strength is well known throughout Africa. In Nubia the lion-headed god Ampedak was revered and the king depicted as a conquering lion is found repeatedly within Egypt.

No discussion of Egyptian cosmogony would be complete without alluding to Ma'at who best represents the ideas of divine order so common in African belief. Pictured as a woman with extended wings, Ma'at is associated with seven cardinal virtues: truth, justice, propriety, harmony, balance, reciprocity and order.

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FEATURED ARTICLES

Herbal Review

Rashan Abdul Hakim, A.K.A. "Bush Doctor"

March 15, 2000

Today we will deal with a topic that relates to everybody. I know there are people out there with many different types of ailments and when we recognize that most ailments have a common source then it becomes easier to understand the nature of such diseases. There are a lot of ailments going around like arthritis, rheumatism, high blood pressure, etc. All of these are common ailments that result from the accumulation of waste in the system. The different types of waste are given different names. For instance, when uric acid is present in the body and starts to lodge mostly in the muscles and joints, it is defined as arthritis and rheumatism. When the same waste lodges in the veins and arteries, it is called varicose veins and when it lodges in the gall bladder or the urinary tract, it is called gallstones. So when we deal with most of these ailments, we are dealing with the same thing.

Many of these ailments have the same treatment which is basically cleansing the blood, cleansing the stomach, cleansing the intestines and the bowels and cleansing the body cavity of accumulated mucus. Mucus is another type of waste that comes from such foods as milk, butter, eggs, cheese, rice, flour and "dead meats". These foods leave a lot a mucus and uric acid in the body. Mucus also lodges in the lungs and the breathing passages. Based upon the amount and where it lodges, it is known by different names such as asthma, bronchitis and emphysema. All of these are aspects of the same ailment, where mucus accumulates in the breathing passages and obstructs the flow of air to the lungs. The mucus, lodged in our bodies, provides the breeding ground for all types of viruses including the AIDS virus and any other type of virus, germ and bacteria that you can talk about. For instance, take the AIDS virus, which is nothing really. It's not the AIDS virus that will kill you. AIDS has never killed anyone; it cripples the immune system and allows other

diseases such as tuberculosis and pneumonia to come forth. It's tuberculosis that will kill you. I repeat, AIDS cause is usually tuberculosis and/or pneumonia.

Tuberculosis is coming back at an alarming rate, so we have to make sure we do not provide the environment for this virus to live and breed in the lungs. Such an environment is the mucus from the foods we consume that allows different viruses and germs to breed and multiply and attack various systems of the body. They attack the immune system and do a number of things from that point of reference. The flu is another very devastating virus that is going to be at epidemic levels in the next few years, just like tuberculosis. The antibiotics used by the Western medical system are failing, actually. It's panic time but they don't want to let the public know. These diseases are going to spread mostly where a lot of people live and crowds gather, because these diseases are airborne diseases. We have to start taking certain precautions now to protect our family and to protect our community from these types of viruses and ailments that will be coming around.

In addition, we have to deal with the everyday ailments that are based on our improper diet and lifestyle. Ninety percent of all ailments that affect us come from the accumulation of waste in the body, waste from different types of foods. Once you clean that waste out, you are going to get results, just by changing your diet alone. Any ailment you have is going to show improvement if you avoid milk, butter, eggs, cheese, rice, flour, chicken, red meat, can foods and wheat. These foods are not really compatible with our biological makeup as African people. We have to go back to eating foods that are more compatible with our biological makeup--foods like millet instead of rice, an ancient traditional grain, and ground food such

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as cassava which are much more compatible. Cassava, for example, contains natural steroids, so we don't need to take unnatural steroids. Cassava, or any type of ground food, builds tissue and muscle and makes the skin very resilient. Also, cassava contains elements that prevent blood cells from sickling. These foods are very important to us as African people. Sickle cell anemia is an ailment that appeared after we came out of Africa to the West and were deprived of certain foods that enable our cells to reproduce correctly. Over generations, the cells began to reproduce in an abnormal fashion due to lack of the foods that are compatible with our biological makeup. This is what is called "sickle cell anemia". We could have eliminated sickle cell anemia in one generation just by changing our diet alone.

"In cleansing the body", the stomach, intestines and the bowels are the major areas of concentration.

These are the main breeding grounds for parasites. Ninety percent of all cancers and ailments have parasites. Parasites eat the living cells, pass waste and contaminate the cells around it. This is called "spreading of the cancer". These parasites breed and multiply in your intestines, bowels and colonic areas. They come from the food that ferments, creating a great deal of gas and acid in the stomach. These are the same parasites that breed, multiply and contaminate the entire body. Anywhere the blood goes, these parasites can go. That's why cancer can spread to any part of the body. When cancer cells find an area to lodge, they breed and multiply and contaminate the entire area, then spread to other parts. Cut them off in the stomach, intestines and the bowels and you will cut down the population.

Bitters are very important, especially to African people. Bitters control the levels of liquids in the body to include the bile and other digestive juices. Bitters also control hormone levels and help to restore and maintain their balance within the body.

We, as a people, need to return to our culture and heritage. Living in this western environment where we are in jeopardy, we need to go back to what our ancestors/grandparents did and how they used to deal with common ailments with products derived from traditional African formulas, passed from generation to generation. The ailments that are affecting us today are not common to us. We, as a people, need to realize what is going on and return to our traditional ways.

Rashan Abdul Hakim, born in Jamaica, is a well-known herbalist in the New York area. He hosts a radio program entitled "Health at Sunrise" on 93.5 FM WRTN. Mr. Hakim comes from a family background of herbalists and horticulturists. His grandfather, Charles Williams, was a noted horticulturist in Jamaica. Mr. Hakim is the author of Basic Herbs for Health and Healing.

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'Super-TB' Created by Scientists

**BBC News
December 26, 2003**

A virulent form of tuberculosis was created in the laboratory by experts trying to alter its genetic structure.

The mutant form of the bug multiplied more quickly, and was more lethal than its natural counterpart.

Researchers from the University of California at Berkeley, US, had actually been trying to disable genes and make the bacterium less deadly.

"This is one of the very few hyper-virulent organisms ever created," said scientist Dr Lisa Morici.

Tuberculosis is one of the world's biggest killers, and scientists are probing its genetic structure in a bid to find weaknesses that might be exploited by new treatments.

The Berkeley study, published in the Proceedings of the National Academy of Sciences, concentrated on a particular collection of genes thought to give TB some of its virulence - its ability to infect.

Growing threat

They disabled these genes, and expected to find a weakened form of TB as a result. Instead, the organism grew in virulence.

It killed laboratory mice within seven months of exposure, while those infected with normal TB survived the experiment.

Further investigations suggested that the genetic changes had the unexpected effect of undermining the body's own immune response against TB.

Professor Lee Riley, who led the study, said: "These findings came as a complete surprise to us."

"We thought we had made a mistake, so we repeated the test several times, and we always got the same result."

Bioterror played down

There have been fears that similar genetic modifications

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FEATURED ARTICLES

THE SCIENCE OF AFRICAN BIOCHEMISTRY – PART 2 A Nutritional Guide for Healing, Diet, and Well-Being

Tariq M. Sawandi, M.H., N.D.

This is the final continuation of “The Science of African Biochemistry by Tariq Sawandi. Part I appears in the August 2006 issue.

It is no longer a speculation, but a fact supported by a mountain of evidence that “nitriloside” (beta-cyanogenetic glucosides)-rich plants and foods are a vital part of an amazing bio-chemical process in the African body type.

The compound nitriloside occurs abundantly in nature in over twelve hundred edible plants and found virtually on every continent in the world. It is mainly found in the seeds of those fruits in the “Prunus Africanus” and “Prunus Rosacea” species of plants. It can also be found in grasses, sorghum, millet, cassava, and many other foods that generally have been removed from the foods of Western civilization.

Like sugar, nitrilosides can be classified as a food component or a food factor. It is non-toxic, water-soluble, and completely normal to and compatible with human metabolism. Since it was an essential food compound in the diet of our African ancestors, I call it “African Nutritional Factor”.

African physiology evolved over millions of years to be in the best possible harmony with the diet our ancestors were eating. If we were to eat now approximately what we ate then, our bodies will automatically tend to resume the harmony of their natural state. In other words, our immune systems would perform at its highest function if we give it those food nutrients that it needs, in the form that it craves.

The African diet was primarily vegetarian. That is, our diet was almost exclusively from the plant kingdom. Very little animal or dairy products were eaten. However, today, the foods that once provided African-Americans with ample amounts of natural nitriloside compounds were replaced altogether by

foods almost devoid of this factor. Significantly, it is during the time span that we have been in the Americas, that the cancer rate has moved steadily upward to the point where, today, it is one of the number one causes of death of Africans in America.

The Protective Role of Nitriloside Foods against Cancer

For centuries, nitriloside-rich plants were used by Africans as a food and medicinal agent without manifesting any side effects. This diet has been one of the deciding factors that protected the integrity of the biochemical processes in African people. Preventing the formation of cancer cells, appear to be closely related to the traditional African diet. Let’s examine the science behind this ancient wisdom.

Numerous studies have demonstrated the anti-cancer effect of nitriloside food nutrients. Its molecular composition was first isolated and identified in the 1950’s by Dr. Ernst T. Krebs, a biochemist in San Francisco. He advanced the theory that cancer was caused by a deficiency of the compound nitriloside. According to Dr. Krebs, cancer is the result of “over-healing” of the body. This is why smoking, a poor diet, or excessive exposure to the sun, or any number of harmful chemicals can cause cancer. Anything that causes damage to the body can lead to cancer if the body’s healing processes are not functioning properly. And, indeed, this has been proven to be true. According to Dr. Stewart Jones, author of **Nutrition Rudiments in Cancer**,

“When cancer begins to form, the body reacts by attempting to seal it off and surrounding it with cells that are similar to those in the location where it occurs. A bump or lump is the initial result.”

According to G. Edward Griffin’s book, **World without Cancer**:

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“Anything that produces prolonged stress or damage to the body can initiate the healing process. If this goes unchecked because the body lacks the necessary chemical ingredients to restore the equilibrium, then the result is cancer.”

It is significant that prior to African people’s arrival to the Americas, there were no known records of them contracting cancer while maintaining their traditional diet. Millet was once Africa’s staple grain. It is high in nitriloside content. In fact, missionary and medical journals have recorded many cancer-free tribes all over Africa.

As far back as 1913, Dr. Albert Schweitzer, the world famous medical missionary to Africa, discovered the basic cause of cancer. Although he had not isolated the specific nitriloside compound, he was convinced from his observations that a difference in food was the key. In his preface to Alexander Berglas’s book, **Cancer: Cause, and Cure**, he wrote:

On my arrival in Gabon (Africa) in 1913, I was astonished to encounter no cases of cancer. I saw none among the natives two hundred miles from the coast...I cannot, of course, say positively that there was no cancer at all, but, like other frontier doctors, I can only say that, if any cases existed, they must have been quite rare. This absence of cancer seemed to be due to the difference in nutrition of the natives compared to the Europeans...”

From all over the African continent, the one thing Africans have in common is that the degree to which they are free from cancer is in direct proportion to the amount of nitrilosides found in their diet. As much as 80% of the tropical African diet consists of nitriloside and thiocyanate yielding foods. The main staples of sub-Saharan Africa are cassava, yams, sorghum, and millet grains. Let us reinforce our knowledge with the science of how nitriloside foods work to fight cancer, sickle cell anemia and other chronic diseases.

Bio-chemical Process of Nitriloside against Cancer Cells

The nitriloside compound is a crystalline structure which contains two units of glucose (sugar), one of benzaldehyde, and one of cyanate, which are tightly bonded together. Locked together in this natural state, it is completely inert chemically and has absolutely no effect on human tissue.

There is only one substance that can unlock the nitriloside molecule and release the cyanate and

benzaldehyde. That substance is an enzyme called “beta-glucosidase”, which is known as the “unlocking enzyme”. When the nitriloside molecule comes in contact with this enzyme in the presence of water, both the cyanide and benzaldehyde are released, which are high toxic by themselves. Now both of these substances working together are at least a hundred times more poisonous than either of them separately. This phenomenon is known in biochemistry as “synergism”.

Perhaps the most interesting fact of all about this biochemical process is that the “unlocking enzyme” is not found anywhere in the body except at the cancer cells, where it is always present in large quantities, as much as one hundred times that of the normal cells. The result is that the nitriloside molecule is unlocked at the cancer cell site, releases its poisons to the cancer cell, and only to the cancer cell!

Another important enzyme in this process is called “Rhodanese”, which is called the “protecting enzyme”. This is because it has the ability to neutralize the cyanate by converting it instantly into nourishing by-products, which are actually beneficial and essential to health. But more than that, the protecting enzyme is found in great quantities in all parts of the body except at the cancer cell site, which prevents the cancer cells from being protected. On the other hand, healthy cells are protected, because of the excess of this enzyme which completely neutralizes the effect of the unlocking enzyme.

There are voluminous private records and medical papers written and published by well-known nutritionists, and physicians who have used nitriloside therapy in the treatment of their own cancer patients, with an effectiveness approaching 100%! It has been used to control and cure breast cancer, prostate cancer, lung cancer, skin cancer, and colon cancer, without any toxic side-effects.

The Controlling of Sickle Cell Anemia through African Nutritional Factors

Another benefit of the traditional African diet is the connection between nitriloside plants and the control of sickle cell anemia. In Africa, and other parts of the world, people of African descent have developed sickle cells in the blood apparently as a natural immunity to malaria. The development of the sickle cell trait was dependent, in part, on the nitrilosidic chemistry of the native African diet. Once Africans were transported to the Caribbean and the Americas, their diet became deficient in the nutrients needed to inhibit cell sickling in the blood. The result is the painful hemolytic crisis
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FEATURED ARTICLES

Tuberculosis: What Every Black Person Should Know

Nakato Lewis

Blackherbals at the Source of the Nile, UG Ltd.

Tuberculosis is a severe infectious disease caused by species of the *Mycobacterium tuberculosis* complex. This complex includes *M. tuberculosis*, *M. africanum*, *M. bovis*, *M. pinnipedi* and *M. microti*. The four first species are human pathogens. *M. microti* infects guinea-pigs, rabbits and sometimes bovines. *M. pinnipedi* is responsible for tuberculosis in seals. *M. bovis* is responsible for pulmonary disease in bovine and for mammary lesions that pass tuberculosis bacteria in milk. Both *M. bovis* and *M. pinnipedi* are responsible for the transfer of tuberculosis pathogens from animals to humans.

Some 2 billion people, one-third of the world's population, are infected with the tuberculosis bacterium. Most persons that are infected with *M. tuberculosis* harbor the bacterium without symptoms but many develop active tuberculosis disease. Each year, 8 million people worldwide develop active tuberculosis and 3 million die. Tuberculosis is the leading infectious disease cause-of-death and represents more than one quarter of the world's preventable deaths. Symptoms of TB include a chronic cough that last longer than two weeks, coughing up blood or sputum, chest pain, fevers and chills, weight loss, night sweats, weakness or fatigue, loss of appetite and death.

In most western countries, tuberculosis cases are mainly caused by *M. tuberculosis*. Blacks are less resistant to initial invasion than whites, which partly accounts for the greater prevalence of infection among Blacks. Blacks also have a higher incidence of TB. Moreover, the incidence of TB has increased alarmingly among persons infected with HIV, particularly among Black and Hispanic IV drug users. Incidence is lower in white, middle-class homosexuals with AIDS. Active TB is due both to the reemergence of dormant TB infection and to newly acquired infections such as HIV, which produces profound immunodeficiency. Signs of a potentially very dangerous epidemic of TB have

already appeared. The advent of HIV infection has created the circumstances not only for an increased incidence of TB, but also for the development of organisms, resistant to all first-line drugs.

M. africanum is responsible for 20 to 80 % of human tuberculosis in sub-Saharan Africa and for some tuberculosis cases diagnosed outside the continent. This type of tuberculosis is rare in the United States. The origin of *M. africanum* is broken down into two geographical subtypes, type I is from West Africa whereas type II is found in people of East African origin. A published study of the population structure of *Mycobacterium tuberculosis* complex strains from a single hospital in Kampala (Mulago Hospital) reported that *M. africanum* subtype II is a major cause of human tuberculosis in Uganda. It is important that clinical awareness is stressed to the fact that *M. africanum* is highly pathogenic and transmissible tuberculosis, rather than an opportunist or 'atypical' mycobacterium.

Extra-pulmonary infections in humans following ingestion of contaminated milk or milk products are due to *M. bovis*. This species is also responsible for pulmonary infections by inhalation of infected droplets through direct contact with infected animals. Some domestic animals, in contact with people suffering from tuberculosis, are able to develop tuberculosis and become themselves, a source of infection.

Recently, there have been many outbreaks of *M. bovis*-caused tuberculosis in humans especially HIV+ patients. Most have occurred in countries where *M. bovis* is endemic in the animal agriculture population. Multi-drug resistant strains of *M. bovis* are now appearing as well. The significance of this TB threat from *M. bovis* has not been taken as seriously as the threat from *M. tuberculosis*. However, the scientific and medical community must not ignore the potential of an *M. bovis* TB epidemic.

M. bovis has been causing TB in the animal kingdom

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long before invading humanity. However, after the domestication of cattle between 8000-4000 BC, there is evidence of human infection by *M. bovis* likely through milk ingestion. This coincides with archeological evidence of spinal TB (**Potts disease**) from 5000-1000 BC. *M. bovis* was the likely pathogen in human TB until around 1000 BC. After 1000 BC, widespread pulmonary TB emerged. In fact, *M. tuberculosis* is probably an evolved, specialized form of *M. bovis*, developed among milk-drinking Indo-Europeans who then spread the disease during their migration into Western Europe and Eurasia. By the 1st millennium BC, *M. tuberculosis*-caused pulmonary TB had spread throughout the known world.

Earliest tangible record of pulmonary TB was between 668-626 BC. The classic TB signs--cough, expectoration, blood in sputum, wasting of the body, were well recognized. The earliest written evidence of pulmonary TB was from the library of the Assyrian king Assurbanipal (668-626 BC):

“The patient coughs frequently; his sputum is thick and sometimes contains blood. His breathing is like a flute. His skin is cold, but his feet are hot. He sweats greatly and his heart is much disturbed. When the disease is extremely grave, he suffers from diarrhea.”

TB has had many aliases throughout history: The ancient Greeks called it phthisis (to waste). The swollen glands of the neck were called scrofula. It was called The Kings Evil in medieval times because newly crowned kings of England and France were believed to have powers to heal TB with their touch. TB of the skin was known as lupus vulgaris. TB of the bone is Potts disease with characteristic vertebral fusion and deformity of the spine. The most familiar term for TB, at least to our grandparents and great-grandparents was consumption, which means to consume or wear away.

There is no evidence of tuberculosis in sub-Saharan Africa, East Asia, or the Pacific until after contact was initiated with the Europeans, during the period of colonization. Even where tuberculosis existed it remained relatively rare until the 17th century in Europe. Tuberculosis, the White Plague, grew to epidemic proportions in Europe beginning in the early 1600's as populations shifted to expanding cities and population densities increased. For the first time, conditions ideal for the spread of this airborne disease were created and, as environmental conditions worsened, tuberculosis came to be the leading cause of

death in Western Europe in the 18th and early 19th centuries.

The tubercle bacillus, the bacteria that causes tuberculosis was discovered by German scientist Robert Koch in 1882. The bacterium, called *Mycobacterium tuberculosis*, enters the body in one of three ways: by inhalation, ingestion or inoculation. Butchers and other people working with animals were the first most likely to contract the bacteria by inoculation.

Transmission of TB occurs primarily by the aerosol route but can occur through the gastrointestinal tract. It spreads through the air like a cold virus, but is usually takes multiple exposures for a person to catch tuberculosis. Coughing by people or animals with active TB produces droplets containing infectious organisms and can remain suspended in the air for several hours. Infection occurs if inhalation of these infected droplets reaches the lung. Some people harbor the bacterium for years before contracting active TB, which destroys the lungs and slowly eats away at the body. TB doesn't just attack the lungs. The bacteria can also take hold in the lymph nodes, kidneys, bones, joints, larynx and central nervous system. The key to eliminating TB is treating people before they become infectious.

Once the bacteria enter the body, a tubercle, or tube-shaped lesion, develops at the point of entry or in the lung. If a person is healthy, the body's defenses attack the tubercle so that it hardens into scar tissue and seals in the bacteria. The disease is then dormant and non-infectious. Should a person's immune system weaken due to other diseases such as HIV, malnutrition, or old age, the tubercles will grow and multiply, spreading the bacteria. The tubercles become cavities in the lung, which expel pus, and the patient coughs up this pus, often mixed with blood. Eventually the cavities consume the lungs. The coughed-up material is called sputum.

The Tuberculin Skin Test is used to detect TB infection in healthy people. A dose of tuberculin is injected under the skin of the forearm. A mark called a wheal develops at the site of the injection, and is measured after 48 to 72 hours. If it's over 10 millimetres across, the test is positive, meaning the person has come into contact with TB bacteria. Further testing, like a chest X-ray or sputum test, is needed before a person is diagnosed with active TB. A sputum test is the most common means by which doctors make a diagnosis of active tuberculosis.

Before the routine pasteurization of milk, it was possible to contract bovine tuberculosis by drinking cows' milk. The health of the animal is an important factor. Pathogenic organisms of both bovine and human origin

Continued on page 10

Continued from page 2 – Africa Alarming Rise in Tuberculosis

and have rapidly scaled up DOTS. As a result, cases thus treated worldwide rose 8 per cent in 2003 compared to the previous year. Other countries such as Indonesia and the Philippines are showing similar progress.

Assuming strong commitment and resources are sustained, four regions – the Americas, Eastern Mediterranean, Southeast Asia and Western Pacific – are on track to reach the Millennium Development Goal. The two exceptions are Africa, due to the TB/HIV co-epidemic, and Europe, where there are high levels of multi-drug-resistant TB and slow advances in DOTS in countries of the former Soviet Union.

Since 1995, over 17 million people with TB have benefited from effective treatment under DOTS, but more could be achieved within countries, and in research into new diagnostics, drugs and vaccines, if the annual \$1 billion funding gap for TB control was filled.

“To achieve worldwide impact, more is needed,” Mr. Annan said in his message. “And we must provide greater support for the increasingly wide range of caregivers who help find people ill with TB and assist them with treatment.

These providers include not just public health doctors and nurses, but also community leaders, former patients, women’s groups, and many others.”

WHO regional offices marked the Day with special activities, supporting symposiums, fundraising events and the distribution of educational posters. UN representatives on the front line joined in the effort. In Afghanistan, for instance, spokesperson Ariane Quantier drew attention to the severe problem TB poses, with 18,402 Afghans diagnosed with TB last year, 67 per cent of them women.

http://www.blackherbals.com/africa_alarming_rise_in_tuberculosis.htm

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Continued from page 5 - Super TB Created by Scientists

might lead to a new form of TB that could be used in bioterrorism, but Dr Morici said this was unlikely.

The bacterium is hard to deliver in an aerosol - the accepted method of spreading it over large populations - and despite its extra virulence in the lab, still grows relatively slowly and can be treated by antibiotics.

"There are several other organisms out there that are easier to manipulate than TB," she said.

Dr Neil Stoker, from the Royal Veterinary College at the University of London, UK, said that his research had also uncovered hyper-virulent strains of TB.

The emergence of these strains should pose no risk to humans, he said.

"These are not going to become 'super-strains'," he said. "They are already going to be out there, and they have not become dominant."

TB is such a "successful" pathogen, he said, for completely the opposite reason.

"It is such a phenomenal pathogen because it does not cause disease in everyone it infects.

"It has this extraordinary ability to transmit itself, and nine out of 10 people who have it will never fall ill."

<http://news.bbc.co.uk/go/pr/fr/-/2/hi/health/3301159.stm>

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Continued from page 9 – Tuberculosis: What Every Black Person Should Know

have been isolated from milk. Milk, therefore, can serve as a carrier of diseases. This type of TB attacks not the lungs but the glands, bones and joints, and was often the cause of death in children under age five. Pasteurization involves heating milk to kill any bacteria present and discourage further growth. Many serious epidemics were caused by the consumption of such products before this fact was clearly recognized. However, this became less common as milk sanitation has improved and pasteurization is being more widely practiced.

TB bacteria die very slowly. It takes at least 6 months or more for conventional medicine to destroy all of the TB bacteria. If you have TB, you will need to take several different drugs, usually for six to nine months. Treatment lasts longer for those who have HIV or have active TB outside of the lungs.

Establishing good sanitation and good nutrition can help restore damaged immune function. Herbal and dietary supplements can help to prevent TB by increasing our resistance to the TB infection. Effective control of TB, however, will depend upon the appropriate use of various herbal medications and food therapy. Researchers are continuing to investigate the potential value of vitamins and herbs to combat TB.

Nakato Lewis is the vice president of Blackherbals at the Source of the Nile, UG Ltd and the editor of the African Traditional Clinic Newsletters.

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Continued from page 7 - Science of African Biochemistry

caused by the clumping of the red blood cells. According to research developed by Dr. Robert Huston which appeared in the American Journal of Clinical Nutrition in 1974, he learned that sickle cell anemia could be controlled by cyanate tablets. However, cyanate is also produced by nitrilside plants acting within the body, and it seems logical to assume that this is the way nature intended it to be taken.

According to Barbara Dixon's book, **Good Health for African Americans**,

“In Africa, an estimated 25 percent of the population, carry the sickle cell trait, yet the incidence of sickle cell disease itself is rare. In fact, from 1925 to 1950, it was estimated that fewer than one hundred cases of sickle cell anemia were reported throughout the continent.”

As is well-known, sickle cell anemia is relatively rare in the Caribbean. Those with the sickle cell condition are found living healthy into old age, and few ever experience serious crises. In fact, the Jamaican diet is rich in thiocyanate where cassava and yams are staples. It is proposed that sickle cell anemia represents an “unrelieved nutritional condition” which is dependent on the presence of thiocyanate and nitrilosides in Africans who are genetically predisposed to the disease. The significance of this research is that the solution to sickle cell anemia can be found in the field of nutrition rather than drugs, blood thinners, and blood transfusions.

Other Health Benefits of African Nutritional Factors

Another welcomed consequence of eating nitrilosides and thiocyanate plant foods is that they prevent high blood pressure, arthritis and rheumatism, gastrointestinal disorders, and cardiovascular disease.

Experiments conducted by Dr. Ernest Krebs have indicated that trace amounts of cyanate and benzaldehyde released in the mouth and intestines are a part of the delicate balance of nature and serve beneficial effects in the human body. In the mouth and stomach, these chemicals apparently attack the bacteria associated with tooth decay and bad breath.

The large and small intestines are home for over four hundred different kinds of microorganisms, mostly bacteria, flora, and some fungi. These microorganisms live in harmonious, symbiotic relationship with us, provided the conditions are favorable and the friendly bacteria (*Lactobacillus acidophilus* and *Lactobacillus bifidus*) are sufficient in quantity. These bacteria feed on the fermentable carbohydrates in our diet (found in grains, beans, vegetables, fruits, roots, and seeds). If the

African body type lacks in a sufficient diet rich in nitrilside and thiocyanate plant foods, it causes a decrease in the number of favorable intestinal bacteria and a subsequent increase in unfavorable organisms. This is the beginning of many problems such as gas and constipation, yeast infections, to colon and rectal cancer. However, nitrilside and thiocyanate plant foods interact with the “bacterial micro-flora” in the stomach and colon to suppress or eliminate the ailments associated with westernized foods.

High Blood Pressure and Heart Disease

But, more than that, thiocyanate is known as a natural regulator of blood pressure, which helps to prevent hypertension (high blood pressure) in African physiology. High blood pressure is a condition in which the muscles in the walls of the arteries constrict, causing the heart to pump harder or in which arteries have lost their elasticity due to arteriosclerosis. One of its underlying causes is a deficiency of African Nutritional Factors. Dr. Afrika states in his book, **African Holistic Health**:

“Hypertension is usually caused by a lack of proper nutrition. Improper nutrition weakens the internal organs, immune system, and lowers the organs’ abilities to utilize nutrients which feed the body. The body begins to starve because the loss of proper nutrients creates a nutritional debt. Moreover, the nutritionally starved body tries to get more nutrients to pay the debt. Consequently, the body demands more food (nutrients in the blood) by drawing on more (below-nutrient-level) blood. In order to increase the blood supply the body begins to increase the pressure. The increase in pressure is the body’s attempt to feed itself.”

The body is merely defending itself by reacting with high blood pressure caused by a poor diet lacking in essential plant nutrients.

Traditional African doctors consider heart disease (arteriosclerosis, heart attack, stroke, and hypertension) to be a combination of poor nutrition and destructive eating habits. When this occurs, there is a tendency for cholesterol to accumulate in the arterial lining. The major cause is a loss of vein and artery flexibility due to a lack of biochemical precursors and enzymes which prevents the artery walls from deteriorating. These chemical precursors have been found in natural foods containing nitrilosides.

Arthritis and Rheumatism

The fact is nitrilside food factors also serve as biochemical mechanisms in African physiology to prevent

Continued on page 12

rheumatism and arthritis. Once they enter into the blood stream, derivative compounds called "salicylates" are produced. This natural compound helps to fend off arthritis and rheumatism. Some African health practitioners including myself attest to the theory that many toxins bind to cell membranes and disturb cellular metabolic functions, and can cause tissue damage which contribute to many of the symptoms of rheumatism, arthritis, and muscle aches. Intestinal bacteria - "Proteus mirabilis", for example, an organism recently implicated in rheumatoid arthritis, is believed to be produced by the toxic waste in the body causing painful joint inflammations.

Whereas rheumatoid arthritis disease afflicts millions of people of African descent in the U.S., affecting one in 10, very few cases have been reported among the larger populations of tropical Africa. This has defied explanation in Western health sciences. According to African traditional medicine, rheumatism and arthritis is a disease reaction, which creates inflammation caused by crystallized urine and toxic waste. These impurities accumulate around the joints, bone lining and connective tissues. Arthritis is waste in the bone joints while rheumatism is waste in the muscles. Both of these diseases are caused by the same thing - excessive fat and meat, synthetic foods, and a poor diet deficient in thiocyanates and nitrilosides.

In this connection, Robert Houston, M.D., author of **Sickle Cell Anemia and the Metabolites of Vitamin B17**, compared the rate of rheumatoid arthritis between African-Americans and continental Africans. He found that Africans living in West Africa and throughout tropical Africa only experienced rare cases of rheumatism, arthritis, and osteoarthritis where millet and sorghum grains are staples. He also found that a "salicylic acid isomer" is nutritionally produced from the nitriloxide in millet and sorghum grains which works in the body to nourish healthy tissue and joints.

As demonstrated in the foregoing research, nature has assigned to the African body-type a specific diet for keeping it vital, healthy, and free from cancer. There is much yet to be learned about our bodies, and no one can claim nitrilosides are the whole answer. It is possible that an important role also may be played by other vitamins and enzymes. However, nitriloxide rich foods and vitamins seem to be the most vital and direct acting of all these factors. It is an interlocking part of the total African bio-chemistry.

Tariq Sawandi is a Master herbalist, nutritionist, and consultant on holistic health. Dr. Sawandi is renown for his in-depth knowledge of African holistic medicine.

www.blackherbals.com/science_of_african_biochemistry.htm

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Continued from page 3- Nilotic Spirituality and Philosophy II

These virtues, along with 42 other laws, correspond to the divine order by which the universe---from the common person to the neteru--- must abide.

Het-Heru (Hathor) was not only a consort of Heru but one of the most important deities in Egypt. She is regarded as the neteru of beauty, joy and love and is associated with life, health and fertility. She is especially important because of her bovine attributes. The usage of animals to depict deities, a common African practice, is well illustrated in Egypt. A feature that permeates much of Africa, most especially the Nilotic region, is that of cattle culture. As early as 6,000 BC the southern Sahara yields depictions of a cow horned goddess delivering food and life to mankind. This attachment to cattle comes from the very heart of Africa. As early as 9,000 BC Nilo-Saharan peoples were domesticating cattle. These Nilotics steadily moved up the great river to found the Egyptian and Nubian cultural complexes.

Among the Ugandans anthropologists noted how chiefs would moan over the loss of cattle as if it were their child. The same attachments are found among other cattle culture groups in East Africa such as the Nuer and Dinka. Cattle culture rituals seen among the predynastic Egyptians are today still practiced almost to the point of perfection by these Nilotic groups. The Egyptians' love of their bovines is well documented among households who built special rooms for their animals in life and elaborate funerals for them in death. The first king of Egypt, Narmer (Menes of the Greeks), displayed Het Heru on his standards. Cattle culture and divinity also play great roles among the later West African empires, as in the Sundiata legend, and among the Zulus. *To be continued Oct. issue*

http://www.geocities.com/CollegePark/Classroom/9912/nilotic_spirit.html

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African Quotes:

‘The (African) now stands at the crossroads of Human destiny. He is at the place where he must either step forward or backward. If he goes backward he dies; if he goes forward it will be with the hope of a better life. Those of us who have developed our minds scientifically are compelled, by duty, to step out among the millions of unthinking masses and convince them of the seriousness of the age in which we live. ’

Marcus Mosiah Garvey, Pan Africanist

August 17, 1887 – June, 10, 1940

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Cattle are the Major Cause of the Spread of TB

Irene Elorm Hatsu
Public Agenda

March 17, 2006

The Programme Officer of the Disease Control Unit of the Ghana Health Service, Dr. Nora Bonso-Bruce has called on herdsmen to seek early veterinary care for their cattle after continuous coughing for three weeks or more.

She disclosed that cattle can be infected by Tuberculosis (TB) germ known as Mycobacterium bovis, this type of tuberculosis according to her can be transmitted through the milk obtained from the cattle to the consumer if not processed. "If you drink fresh unpasteurised milk from a cow suffering from TB you can get TB, however, the type of TB you get in this case affects mainly the intestines", she added.

She advised that one should avoid drinking fresh unpasteurised milk if one is not sure of the source. "If you still have to drink fresh milk from cattle, then you should boil the milk before drinking it. In this way you would be able to destroy any TB germs that might be present in the fresh milk. Secondly, if a veterinary declares that a particular cow is suffering from TB, that animal must be destroyed", she warned.

She stated that sick cattle are capable of transferring the disease to healthy ones and may end up affecting the rest of the herd. Therefore she called on herdsmen to isolate the sick cows from the healthy ones and destroy them immediately a veterinary expert confirms that some of the cattle are suffering from TB. Dr. Nora Bonso-Bruce made this known at the Ghana Health Service's monthly promotion programme on the topic "Tuberculosis: The African Emergency – What Everyone Should Know.

She stated that a person who has contracted the disease TB can be treated with drugs if the person takes all the drugs correctly. However, she said "if on the other hand the drugs are not taken correctly or the person stops taking after a short time, the disease will not disappear, but may get worse and will then be difficult to cure". Dr. Bonso-Bruce said the drugs for treatment are available in government hospitals and some mission hospitals and are free. These drugs according to her are expensive drugs far beyond the pockets of many patients.

The cost of the drugs have therefore been taken up by the government. Some patients may however be found to be suffering from other diseases such as malaria. In such a case you may be asked to pay for the cost of treating Malaria and not TB. The cost of laboratory investigation for TB patients is also free," she disclosed. She called on the public to report any health worker who collects payment for treating TB to the hospital authorities for investigations.

According to her TB is caused by certain germs which make a person cough, get weak, spit and become thin. She stated that it is easily passed from one person to another and usually attacks the lungs, but may also affect other organs of the body. "Among infectious diseases tuberculosis is the commonest killer of adults in the world. Dr. Nora Bonso-Bruce disclosed that tuberculosis is believed to be common in Ghana. At least almost every Ghanaian has heard of the disease or known somebody who has got tuberculosis or died from it. Each year 30,000 people are affected with TB and about 15,000 die.

According to her one can get lung TB if the person breaths in the germs which another person who has the disease has coughed out into the air and advised that it is necessary to cover the mouth when coughing. She said it is important for people who have TB to get treatment immediately; adding that curing them is the best way of preventing the spread of TB as it eliminates the source of infection.

Dr. Nora Bonso-Bruce appealed to the public to report to a health centre as soon as one shows signs of TB for the sputum and the coughs to be examined.

http://www.ghanaweb.com/public_agenda/article.php?ID=5000

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“Where there is no culture, there is no indigenous knowledge. Where there is no indigenous knowledge, there is no history. Where there is no history, there is no science or technology. The existing nature is made by our past. Let us protect and conserve our indigenous knowledge.”

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CALENDAR OF EVENTS

SPECIAL EVENT: CLINIC OPENING

PLACE: AFRIKAN TRADITIONAL HERBAL RESEARCH CLINIC

TIME:

Afrikan Traditional Herbal Research Clinic
1175A Mukalazi Road, P.O. Box 29974
Bukoto, Kampala, Uganda East Africa
Phone: 041 530 456
Email: clinic@blackherbals.com

ADDRESS CORRECTION REQUESTED

Herb of the Month

Bitters

Bitters are a diverse group of chemical compounds that share the common characteristic of a bitter taste. Bitters can be used to strengthen and improve the whole digestive system in the body as well as the nervous system. Bitters also act to increase the vital energy centers in the body. Because they have such a broad effect on the body's entire physiology, tone and function, bitters are a principle that can be used to treat the body as a whole. Bitter stimulation can often shift a condition or illness that does not appear to have anything to do with the digestive process. The bitter principle acts to increase self-healing and resistance in many ways.

Bitters act to increase or stabilize the appetite. In general, there is a stimulation of the appetite, which is important in conditions of convalescence and where there is otherwise a reduction of appetite. Bitters do not seem to increase appetite in a digestively healthy person; rather a more healthful balance in the appetite develops. The body acquires more taste for healthy foods and less taste for unhealthy foods. Bitters stimulate the liver to do a more effective cleansing and detoxifying job and prompt the gallbladder to make bile. The production of bile helps metabolize fats and keeps elimination moving smoothly. Bitters also produce a diuretic and hepatic effect in the body. This has value when working with any condition that has origins in a sluggish or overworked liver. In some therapeutic circles bitters are indicated for treatment of those recovering from infectious diseases including viral conditions. Bitters can also be supportive in and regenerating the nervous system.

Bitters are indicated when there is digestive weakness. Digestive weakness is often associated with an infectious disease that depletes the vital energy of the body. Digestive weakness and decreased vitality both reduce the assimilation of nutrients and the elimination of wastes resulting in a spiraling effect of energy depletion in the body. Stress can also deplete vital energy which disrupts digestion and this further decreases the body's vital energy.

<http://evenstaronline.com/articles/bitters.html>

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