MEMORY LOSS
(Short Term)

1. Pre-Disposing Factors and Clinical Indicators: According to the AACC the serum, CSF and urine indicators for short term memory loss are mixed and present no common pattern.

a. Food allergy/sensitivity.
b. Reduced blood flow in the carotid arteries (atherosclerosis).
c. Toxic element exposure.
d. Normal memory loss associated with aging.
e. Lack of exercise.
f. Primary thyroid hypofunction or hypofunction secondary to pituitary hypofunction.
g. Reactive hypoglycemia.

2. Dietary Suggestions:

a. Drink at least 8 full glasses of pure water daily (no well water or city water).
b. Eliminate all hydrogenated fats and oils. Increase raw and fresh oils.
c. Avoid refined carbohydrates, processed foods, alcohol, fried foods and caffeine.
d. Conduct food allergy testing if food sensitivity is suspect.
e. Increase raw foods and quality proteins.

3. Primary Supplemental Support in order of need: After the pre-disposing problems indicated above have been addressed, use the following supplemental program. Note: Thyroid hypofunction, hypofunction secondary to pituitary hypofunction and atherosclerosis are very common with senile dementia and short term memory loss and although not addressed below, should be considered and supported as indicated in other sections of this manual.

a. **NeuPerzine** – 1 bid and **Cognitive Enhancer** – 1 tid.
b. **RB-Zyme** - 2 tid.
c. **Nuclezyme Forte** - 2 tid.
d. **Phosphatidylserine** – 1 tid.
e. **B-12 2000** and **5-MTHF Plus Forte** – 1 each bid.
f. **VasculoSirt** - 3 bid.

4. Other Considerations:

a. **Porphyra-Zyme** - 4 qid on an empty stomach.
b. **Super Phosphozyme Liquid** – 30 drops bid in pure water.
c. **Bio-Trophic Plus** – 3 tid or **Pro-Multi Plus** – 3 bid.
d. **Ginkgo Biloba** – 1 tid.