

**AUTOIMMUNE NEWS**  
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**Oh my goodness, issue 31? Wow that is over TWO years? Two years and seven months to be exact.....holy crap!! I have known some of you for that long if not longer. WOW I am so blessed.**

**Well, upcoming events for the Yocals are the picnic on June 8<sup>th</sup> at the American Legion located at 822 Mantoloking Rd Brick NJ 08723. We ask everyone to RSVP and let us know what you are bringing and how many are attending. We wish everyone around the country could be here. We miss you all.**

**We also have our 3<sup>RD</sup> ANNUAL walk a thon scheduled for September 13, 2008. I wish everyone could be here to see this event. Our walkers walk with “walking in honor of” signs on their backs. They wear them with pride. For those that cannot attend, there are many that say “for all of us”..... enough said.**

**At the moment I write this there are 88794 hits on our website. That should let you know you are not alone. As of tonight, March 26<sup>th</sup>, there are 76,188 people on our mailing list. There are that many ( for a small organization) suffering.....YOU ARE NOT ALONE!!!**

**Till next time, stay SANE!!!**

*ALL OUR LOVE -----KEITH AND BARB*

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## **GOTTA Have Dr Weil.....**

Q: I've been told that my diet has no effect on arthritis pain. Is this true?

A: No, it's not. Inflammation is a root problem in arthritis, and it is often directly responsible for joint pain and tissue damage. Your food choices can either increase or decrease inflammation. In my book

[Healthy Aging](#) (Anchor, 2007) I give a detailed description of an anti-inflammatory diet. And it is in no way onerous; in fact, it is a very satisfying way to eat, which I follow myself and greatly enjoy.

The first rule is to avoid refined, processed, and manufactured foods, most of which contain pro-inflammatory fats, carbohydrates, and additives. For example, omega-6 fatty acids intensify inflammation, and most people eat too much of them; a major source is refined soybean oil, a cheap ingredient in many processed foods such as cookies, crackers, and snacks. Another culprit is high-fructose corn syrup, the ubiquitous sweetener. It is a quickly digested carbohydrate that disturbs metabolism in many people and favors production of inflammation-promoting substances in the body.

When preparing your food, use good-quality extra-virgin olive oil. Its unique antioxidant (polyphenol) content helps protect all tissues from inflammatory damage. Be sure also to increase consumption of anti-inflammatory omega-3 fatty acids by eating oily fish (sockeye salmon, sardines, herring) at least three times a week. I do this, and every day I take two to three grams of supplemental fish oil, which I recommend to most people, certainly those with arthritis.

Learn to distinguish good carbs from bad carbs by understanding glycemic load—the measure of how carbohydrate foods affect blood sugar. (One helpful website is <http://pi.oregonstate.edu/infocenter/foods/grains/gigl.html>.) Minimizing spikes in blood sugar by reducing the glycemic load of meals helps contain inflammation. Replace high-glycemic-load foods, such as those made with flour and sugar, with foods that have lower glycemic loads, such as whole or cracked grains, sweet potatoes, winter squashes, and beans. Moderate portions of pasta cooked al dente are better than most breads and potatoes.

Reduce consumption of animal protein, especially red meat and chicken, which contain a pro-inflammatory amino acid. Instead, eat more vegetable protein such as beans and soy foods.

Eat plenty of fruits and vegetables that cover the color spectrum. The pigments in these foods have health-protective effects. Try to find ways to consume ginger and turmeric in any forms; both spices have powerful anti-inflammatory effects. Two tips: Add a teaspoon of powdered turmeric to soups, stews, and other dishes, and eat candied ginger with bits of dark chocolate (also rich in antioxidants) when you want a sweet treat. And try to include in your diet good-quality tea—especially white, green, or oolong—another source of anti-inflammatory compounds.

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SAN CARLOS, Calif. - (Business Wire) Alvine Pharmaceuticals, Inc., a biopharmaceutical company focused on the treatment of autoimmune and gastrointestinal diseases, today announced that the first study subject was dosed in a Phase 1 clinical trial of its lead clinical candidate ALV003 which is in development for the treatment of patients with celiac disease. ALV003 is an orally administered combination of two proteases engineered to detoxify gluten.

Approximately 36 subjects are planned for enrollment in the Phase 1, single-blind, placebo controlled, dose-escalation clinical trial to be conducted in the United States. Both healthy human volunteers and subjects with celiac disease are expected to be dosed in this trial.

“We are very excited to begin our clinical program evaluating ALV003 for the treatment of celiac disease,” said Dr. Abhay Joshi, President and Chief Executive Officer of Alvine.

The October 25, 2007 issue of the New England Journal of Medicine discusses gluten detoxification as an approach to treating celiac disease. Authors Peter H.R. Green, M.D. and Christophe Cellier, M.D., Ph.D. state in the article: “There is considerable interest in the development of nondietary therapies that might either replace or supplement the rigorous gluten-free diet. Currently, the most attractive alternative involves the use of recombinant enzymes that digest the toxic gliadin fractions in the stomach or the upper small intestine.” About ALV003

ALV003 is an orally administered combination of two proteases engineered to digest gluten. It targets the glutamine and proline residues that are common in gluten. ALV003 consists of a glutamine-specific cysteine protease (EP-B2) and a proline specific prolyl endopeptidase (PEP). The proposed mechanism of action of ALV003 is to digest gluten into non-immunotoxic fragments.

## About Celiac Disease

Celiac disease is the most common hereditary autoimmune disease with prevalence as high as 1% in the U.S. and E.U. Celiac disease is triggered by the ingestion of gluten in genetically susceptible individuals. Gluten is a protein found naturally in wheat, rye, and barley, and is one of the most common food additives in the human diet. Patients with celiac disease mount an immune response to gluten and gluten fragments, resulting in systemic immune mediated damage in the gut and other organs. Gluten ingestion can be associated with symptoms such as nausea, diarrhea, constipation and rash. Complications of celiac disease can include osteoporosis, anemia, dermatitis, weight loss, diabetes, central nervous system conditions, other autoimmune diseases and malignancies. There are currently no approved pharmaceutical therapies for celiac disease. The only available treatment for individuals diagnosed with celiac disease is a life-long adherence to a strict gluten-free diet which is difficult to follow. There is a high unmet medical need for celiac disease therapies.

## About Alvine

Alvine Pharmaceuticals, Inc., is a privately held biopharmaceutical company dedicated to developing and commercializing therapeutics for autoimmune/gastrointestinal diseases. Alvine's lead product candidate, ALV003, is a combination protease engineered to digest gluten. It is being developed to treat patients with celiac disease. For additional information about the company, please visit [www.alvinepharma.com](http://www.alvinepharma.com).

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# Diseases Like Mine Are a Growing Hazard

By Donna Jackson Nakazawa  
Sunday, March 16, 2008; B03

Some weeks ago, my husband and I treated ourselves to a night at the movies and caught a showing of "The Diving Bell and the Butterfly," the story of a successful French journalist who suffers a massive stroke that changes his life. As I watched the opening scene and the moment when the main character realizes that he's trapped inside his own body, incapable of moving or communicating with those around him, a shiver of recognition washed over me. Two years ago, I also lay paralyzed in a hospital bed, unable to use my arms or legs, to hug my young son or daughter, or to type a word to meet an impending book deadline. Unlike the movie's protagonist, however, I was immobilized by a type of disorder that afflicts nearly 24 million Americans -- and counting. Autoimmune diseases -- a group of about 100 conditions in which the body's immune system turns on the body itself -- are reaching epidemic proportions. In the past decade, 15 top medical journals have reported rising rates of lupus, multiple sclerosis, scleroderma, Crohn's disease, **Error! Hyperlink reference not valid.**'s disease and polymyositis in industrialized countries around the world. Over the past 40 years, rates of Type 1 diabetes have increased fivefold; in children 4 and under, it's increasing 6 percent a year. If I wanted to make a movie about my life, I'd pitch it to **Error! Hyperlink reference not valid.** as "The Diving Bell and the Butterfly" meets "An Inconvenient Truth," the Academy Award-winning **Error! Hyperlink reference not valid.** documentary about global warming. Rising levels of autoimmune disease may well prove to be the next environmental disaster -- only in this case, the changes taking place degree by degree are in the interior landscapes of our bodies. My paralysis was caused by Guillain-Barré syndrome, an autoimmune disease in which the nerves' myelin sheaths are destroyed by the body's immune system, short-circuiting messages from the brain to the muscles. I've been paralyzed twice in the past seven years. Each time, months of rigorous physical therapy and treatment have enabled me to walk again. But remnants of the disease -- and other autoimmune conditions that have

simultaneously ravaged my body -- have left me with a pacemaker, little feeling in my hands and feet, legs that can't ice skate or chase a child, a low white blood cell count and gastrointestinal problems that can land me in the hospital in a blink. Still, I consider myself one of the lucky ones. I know patients who are far less fortunate. I've spent the past two years interviewing leading experts at top medical institutions nationwide to find out why cases of autoimmune disease are skyrocketing. In recent years, many allergists and immunologists have been attributing the rise to the "hygiene hypothesis" -- the theory that our germ-free homes and childhood vaccinations have eliminated challenges to our immune systems so that they don't learn how to defend us properly when we're young. The scientists I interviewed tended to discard the idea that this alone is responsible. They agreed almost to a person that our day-to-day exposure to environmental toxins -- through the air we breathe and the chemicals we absorb through our skin -- is a major trigger of autoimmune disease. "Exposures from our environment are a significant contributor to today's rising rates," says Douglas Kerr, director of the Johns Hopkins Transverse Myelitis Center and a top clinician at the Johns Hopkins Multiple Sclerosis Center. In 2003, the **Error! Hyperlink reference not valid.** sampled 2,500 people nationwide looking for the "body burden," or amount of chemicals and pollutants each individual carried. They found traces of all 116 chemicals and pollutants they tested for, including PCBs, insecticides, dioxin, mercury, cadmium and benzene, all highly toxic in higher doses. Then, in 2005, researchers from the **Error! Hyperlink reference not valid.** found something more alarming: a cocktail of 287 pollutants -- pesticides, dioxins, flame retardants -- in the fetal-cord blood of 10 newborn infants from around the country. Because most toxins are found in only trace amounts, it has been difficult to gauge what effect they might be having on our health. Yet studies of both lab animals and people provide disturbing insights into how even low exposures can cause our immune systems to go haywire. Mice exposed to pesticides at levels four times lower than the level the **Error! Hyperlink reference not valid.** sets as acceptable for humans are more susceptible to getting lupus than control mice. Mice that absorb low doses of trichloroethylene -- a chemical used in dry cleaning, household paint thinners, glues and adhesives -- at levels the EPA deems safe and equal to what a factory worker might encounter today, quickly develop autoimmune hepatitis. And low doses of perfluorooctanoic acid, a breakdown chemical of **Error! Hyperlink reference not valid.** found in 96 percent of humans tested for it, impair rats' development of a proper immune system. Evidence from occupational studies is even more worrisome -- because the "guinea pigs" are people. Last year, scientists from the **Error! Hyperlink reference not valid.** and the **Error! Hyperlink reference not valid.** released the findings of a 14-year study of 300,000 death certificates in 26 states: Those who worked with pesticides, textiles, solvents, benzene, asbestos and other compounds were significantly more likely to die from an autoimmune disease than people who didn't. Other recent studies show links between working with solvents, asbestos, PCBs and vinyl chloride and a greater likelihood of developing autoimmune disease. Proving an absolute link between chemicals and autoimmune disorders in humans won't be easy. Researchers can expose rodents to low doses of chemicals and look for signs of autoimmune disease about six weeks to three months later. But in humans, autoimmune diseases are long, slow-brewing conditions that smolder for a decade or more before symptoms appear. Moreover, Kerr says, it may be that a combination of exposures rather than a single acute dose increases the risk of autoimmune disease. Meanwhile, we may all be unwitting participants in an uncontrolled experiment as we wait to see whether rising levels of toxins and pollutants in our blood are the cause of climbing rates of autoimmune disease. Our children are the high-stakes pawns in this game: Pounded for pound, they eat more food and drink more water than adults, and their immune systems are still developing and vulnerable. What can we do to lower the stakes for future generations? We could take a page from European environmental policy and its "precautionary principle" of preventing harm before it occurs. Last June, the **Error! Hyperlink reference not valid.** implemented legislation that requires companies to develop safety data on 30,000 chemicals over the next decade and places responsibility on the chemical industry to demonstrate the safety of its products. We also need to look beyond the "hygiene hypothesis" as the sole explanation for the autoimmune epidemic and wake up to what immunotoxicologists have been telling us for years: Our immune systems may be less prepared because we're confronting fewer natural pathogens, but we're also encountering an endless barrage of artificial pathogens that are taxing our systems to the maximum. Finally, we've waited too long for Congress to allocate funding to finding out what toxic exposures can cause our immune systems to turn against us. Though it estimates that 24 million Americans suffer from autoimmunity, the NIH spent only \$591.2 million on autoimmune disease research in 2003, the last year for which figures are available, compared with the \$5 billion annual budget for cancer, which afflicts 9 million. The NIH budget for cardiovascular disease, affecting 22 million Americans, is four times that of autoimmune diseases.

My health right now is stable. There are challenges, to be sure -- I type these words with braces on my arms. But my legs take me where I need to go. Still, I live in fear of the day when that creeping paralysis could steal my life away again. Only if we take concrete steps now will the movie of my life and that of millions of other Americans have a chance at a happy ending.

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Education

## **New treatment found for skeletal muscle disorder**

UCI scientists have discovered a new treatment for the most common skeletal muscle disorder for people 50 and older, officials said. A new study shows that lithium chloride, normally used to treat bipolar disorder, is an effective means to slow inclusion body myositis, or IBM, which affects the elderly. Scientists Frank LaFerla and Masashi Kitazawa used mice, which were genetically engineered to have IBM, to test the drug and received positive results. Within six months motor function increased through daily use of the drug, according to the study. The muscles in the mice treated also had decreased levels of protein that could be related to muscle inflammation associated with IBM, scientists said.

— *Daniel Tedford*

## **Automimmune response more common in people with severe coronary heart disease**

*January 15, 2002*

The development of severe coronary artery disease may be part of a systemic autoimmune response, suggests research in the *Annals of the Rheumatic Diseases*. Autoimmunity occurs when the body's immune system produces antibodies, which attack its own tissues, and is thought to be the cause of certain diseases, such as rheumatoid arthritis. Researchers took blood samples from 40 people aged between 53 and 76 whose three main coronary arteries were at least 50 per cent blocked. They compared these with blood samples from 30 people aged between 48 and 74 whose arteries were normal. None of the people tested, nor their first degree relatives, had been diagnosed with autoimmune disease. The samples showed that over 70 per cent of people with severe coronary artery disease had high levels of antinuclear antibodies, a sign of a strong autoimmune response, compared with just 17 per cent of people with no evidence of heart disease. Most of the antibodies were directed against a particular type of antigen. In effect, people with severe heart disease were more than 11 times as likely to have these antibodies, and the findings were irrespective of age or gender. And the presence of antinuclear antibodies was not associated with a previous heart attack. The authors say that antinuclear antibodies may occur as a result of the inflammation now widely recognised to be associated with the development of atherosclerosis, or they may precipitate its development. And they conclude that if the findings can be repeated in larger groups of people, testing for antinuclear antibodies may become a useful non-invasive method of diagnosing coronary

artery disease.

British Medical Journal (BMJ)

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## **Researchers at Children's Discover Connection between Allergic Diseases and Autoimmune Diseases**

*April 04, 2007*

A new study by researchers at Children's and the University of Washington (UW) identifies a connection between allergic diseases such as atopic dermatitis, also known as eczema, and autoimmune diseases. The study was published in the April 1 edition of *Nature Immunology*. Approximately 75 percent of autoimmune diseases occur in women, most frequently during the childbearing years. These diseases also comprise a significant portion of chronic childhood disorders. Autoimmune disease refers to a group of more than 80 serious, chronic illnesses including diseases of the nervous, gastrointestinal, and endocrine systems as well as skin and other connective tissues, eyes, blood, and blood vessel. In all of these diseases, the underlying problem is similar—the body's immune system (including B and/or T immune cells) becomes misdirected, attacking the very organs it was designed to protect. "Our study implies that allergic and inflammatory diseases may actually trigger autoimmune diseases by relaxing the controls that normally eliminate newly produced, self-reactive B cells. This is important because many autoimmune diseases are caused by self-reactive antibodies produced by such B cells" said Dr. David Rawlings lead researcher and section head of Immunology at Children's Hospital and the UW. Researchers at Children's are now trying to discover specifically where the "relaxation" in the control of B cell autoimmunity takes place. "In association with other UW laboratories, we also have begun to study drugs that can counter some of these effects. One such drug helps to prevent autoimmune kidney disease in a related animal model," said Rawlings. In addition to Dr. David Rawlings, other authors of the study included Alexander Astrakhan, Thuc Nguyen, MD and Shirly Becker-Herman, PhD. For a complete copy of the study, please visit

<http://www.nature.com/ni/journal/vaop/ncurrent/abs/ni1452.html;jsessionid=oBFCABAFF538691D08AC7EABF55F0146>

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## **Wife gives special Valentine's gift to husband**

By **CHRISTOPHER RUVO**  
The Intelligencer

Marlene Moran has an unorthodox, but much-needed, [Valentine's Day](#) gift for her husband: a kidney.

The Plumstead woman is donating it to her ill spouse, Sean, who is suffering from a life-threatening autoimmune disease that has caused his kidneys to fail.



[CLICK TO ENLARGE](#)

"I'm very honored. I feel that I'm giving him the gift of life," said Marlene.

The couple, who have 23 years of marriage under their belt, will head to the [Hospital of the University of Pennsylvania](#) on Tuesday for the operation.

"I didn't know that this is what I'd be asked to do in life. But I'm happy. I want to do this," said Marlene, 47.

In 2001, Sean, 46, was diagnosed with [Wegener's disease](#), an autoimmune disorder that causes red blood cells to inflame, making it difficult for blood to flow. The disease, whose cause is unknown, can attack the sinuses, lungs, kidneys or other body parts.

Sean, a stone mason, was forced to undergo dialysis. Things got worse in 2002 when, as an offshoot of the Wegener's, Sean came down with a severe bout of meningitis that nearly claimed his life. "It was the fight of our lives," recalled Marlene.

Still, Sean got the treatment he needed and by later in 2002 the autoimmune disease had gone into something of a remission. While Sean's kidneys were only operating at 25 percent capacity, he was able to get off dialysis and get by with medication for the last five years.

But doctors' warnings made it clear to the Morans that there would come a day when Sean's kidneys would burn out. That day came in July.

Back on dialysis, Sean had to wait until December to see a specialist at Penn. There, Sean was tested to see if he could be a candidate for a kidney transplant.

Doctors also asked if the Morans brought any potential donors to be tested to see if they could match Sean.

"We had about 15 people who offered, but we didn't know they had to come down at that time," said Marlene. "So I said, just to get things going, 'Well, you can try me.' I didn't really expect that it would work."

It did.

On Dec. 21, the Morans learned Marlene had passed two initial phases of screening and looked a lock for being able to donate. "We felt that it was our Christmas miracle," said Marlene.

The mother of two had to undergo more testing but it was ultimately determined she was a suitable donor for her husband. "I was floored," said Sean.

Even if the operation is a success, Sean will have to be monitored and heavily medicated for months. He will then be on medication the rest of his life. But that's far better than the alternative, said Marlene.

"I want my girls to have both parents for a long time," she said, referring to the couple's daughters Carrie, 19, and Kate, 17.

In an interesting bit of foreshadowing, Marlene and Sean met at a wedding. Sean was a groomsman, Marlene a bridesmaid.

"There was definitely a spark at first," said Marlene. "Within six weeks of dating we knew we were going to get married."

So far, the Morans have found a way to build their young love into a marriage of nearly a quarter century. The trick?

"Lots of vodka!" said Marlene, laughing.

Sean offered: "We have mutual respect and we listen to each other. That's a lot of it."

Marlene said the key to a good marriage comes down to being there for each other and learning how to grow with your partner.

"We've had to reinvent ourselves and the relationship. But it's really about just taking time to be with each other and persisting through the bad things and the good things. We have been a rock for each other."

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## **Fosamax Linked to Unusual Femur Fractures**

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**Published: 03/19/08**

WEDNESDAY, March 19 (HealthDay News) -- In the latest research to cast a shadow on the safety of a popular bone-strengthening medication, researchers report that long-term use of Fosamax is associated with unusual fractures of the thigh bone. The fractures were low-energy fractures, meaning that they all occurred from a fall from standing height or less, and the bone cracks were in an unusual horizontal pattern. About one-third of women with these types of fractures were on long-term therapy to prevent osteoporosis, the researchers noted. Of these women, two-thirds were taking Fosamax (alendronate), for an average of more than seven years. Fosamax is a bisphosphonate, a class of drugs used to increase bone mass and reduce the risk of fracture in those who have osteoporosis. "These were peculiar fractures that would occur when the women were

basically doing nothing," said the study's senior author, Dr. Joseph Lane, chief of metabolic bone disease at the Hospital for Special Surgery at Weill Cornell Medical College in New York City. Fifteen women were included in Lane's analysis. The average time on Fosamax was 5.4 years before they experienced the unusual femur fracture. Of these 15, 10 women had similar, atypical fractures. These women had been taking Fosamax for an average of 7.3 years, while the remaining five had only been on the drug for an average of 2.8 years. "Our results provide further evidence of a potential link between alendronate use and low-energy fractures of the femur," the authors said in a letter reporting their findings, which is published in the March 20 issue of the *New England Journal of Medicine*. But, the authors acknowledge the limitations of their retrospective analysis and suggest that these findings need to be confirmed in a prospective study. Lane said there are several theories as to how alendronate could be related to these fractures. One is that the drug slows down the development of new collagen, and he said new collagen is very strong. Another could be because there is slower bone turnover on the medications. That could mean there may be accumulated microdamage in the bone, making it more susceptible to fracture in certain women. Lane said that women taking this medication should keep taking it, and these findings shouldn't cause them alarm. "This is a great drug that does wonderful things. Bisphosphonates have dropped the rate of hip fractures," he added. Ron Rogers, a spokesman for Merck, which manufactures Fosamax, said, "Fosamax has not been associated with an increased risk of fracture at any skeletal site." Rogers also noted that this study didn't prove a cause and effect relationship between the drug and these unusual fractures, and that the researchers noted that 63 percent of women treated for low-energy fractures weren't taking bisphosphonates at all. Dr. Loren Wissner Greene, co-director of the osteoporosis and metabolic bone disease program at the New York University School of Medicine, agreed that this study has just pointed out an association between Fosamax use and these fractures, not proven a causal relationship.

Still, Greene said she believes these atypical breaks probably are related to the medication, although she added, "If this is a related complication, it appears to be very rare." Like Lane, she said, "Alendronate is still a very valuable drug in decreasing the risk of hip fracture." But, she said, what would be helpful is a test that could

identify who is in the sub-population that might have a problem on this medication. Lane said that women who've been taking this medication for a long time and have test results that suggest low bone turnover, may want to take a "bone holiday," and stop taking the medication for a year. But, he added, this shouldn't be done on your own. "If you've been on alendronate for a long time, talk to your doctor," he suggested. The U.S. Food and Drug Administration in January issued an alert to physicians about the possibility of severe bone pain occurring as a result of bisphosphonate therapy. Additionally, last year Fosamax was also implicated in some cases of atrial fibrillation -- a serious type of irregular heartbeat -- though the FDA hasn't found evidence to support this association.

### **More information**

Visit the National Library of Medicine to learn more about [alendronate](#)

Last reviewed: 03/19/2008 | Last updated: 03/19/2008

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## **Mystery solved: Gold's power against autoimmune diseases defined**

*February 27, 2006*

Gold compounds have been used for the treatment of rheumatoid arthritis and other autoimmune diseases for more than 75 years, but until now, how the metals work has been a mystery. Harvard Medical School researchers report in the Feb. 27 issue of *Nature Chemical Biology* that special forms of gold, platinum, and other classes of medicinal metals work by stripping bacteria and virus particles from the grasp of a key immune system protein.

"We were searching for a new drug to treat autoimmune diseases," says Brian DeDecker, PhD, HMS post-doctoral student in the Department of Cell Biology and a study co-author. At the time of this work, DeDecker was in the Harvard Medical School Institute of Chemistry and Cell Biology, which uses powerful chemical tools to illuminate complex biological processes and provide new leads for drug development. "But instead we discovered a biochemical mechanism that

may help explain how an old drug works."

DeDecker and co-author Stephen De Wall, PhD, undertook a large-scale search for new drugs that would suppress the function of an important component of the immune system, MHC class II proteins, which are associated with autoimmune diseases. MHC class II proteins normally hold pieces of invading bacteria and virus on the surface of specialized antigen presentation cells. Presentation of these pieces alerts other specialized recognition cells of the immune system called lymphocytes, which starts the normal immune response. Usually this response is limited to harmful bacteria and viruses, but sometimes this process goes awry and the immune system turns towards the body itself causing autoimmune diseases such as Juvenile diabetes, Lupus, and rheumatoid arthritis.

During their search through thousands of compounds they found that the known cancer drug, Cisplatin, a drug containing the metal platinum, directly stripped foreign molecules from the MHC class II protein. From there, they found that platinum was just one member of a class of metals, including a special form of gold, that all render MHC class II proteins inactive.

In subsequent experiments in cell culture, gold compounds were shown to render the immune system antigen presenting cells inactive, further strengthening this connection. These findings now give researchers a mechanism of gold drug action that can be tested and explored directly in diseased tissues.

In 1890, a German doctor named Robert Koch found that gold effectively killed the bacteria that caused tuberculosis. In the 1930s, based on a widely held but probably erroneous connection at the time between tuberculosis and rheumatoid arthritis, a French doctor, Jacques Forestier, developed the use of gold drugs for the treatment of rheumatoid arthritis. Gold drugs have been used since then as an effective treatment for this and other autoimmune diseases such as Lupus, but treatment can take months for action and sometimes presents severe side effects which have diminished their use in recent years.

With this new understanding of how these metals function, it may now be possible to develop a new generation of gold-based drugs for treating rheumatoid arthritis and other autoimmune diseases that are more effective with fewer side effects.

Harvard Medical School

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Ok Enough of the harsh SH\* .....

We need jokes too.....

If you can't laugh at yourself, give it up!!!!!!!!!!!!!!

The very first ever Blonde GUY joke..... And well worth the wait !!!!

>> An Irishman, a Mexican and a Blonde Guy were doing construction work on scaffolding on the 20 th floor of a building.

>>

>> They were eating lunch and the Irishman said, "Corned beef and cabbage! If I get corned beef and cabbage one more time for lunch, I'm going to jump off this building."  
>> The Mexican opened his lunch box and exclaimed, "Burritos again! If I get Burritos one more time I'm going to jump off, too."  
>> The blonde opened his lunch and said, "Bologna again! If I get a bologna sandwich one more time, I'm jumping too."  
>> The next day, the Irishman opened his lunch box, saw corned beef and cabbage, and jumped to his death.  
>> The Mexican opened his lunch, saw a Burrito, and jumped, too.  
>> The blonde guy opened his lunch, saw the bologna and jumped to his death as well.  
>> At the funeral, the Irishman's wife was weeping. She said, "If I'd known how really tired he was of corned beef and cabbage, I never would have given it to him again!"  
>> The Mexican's wife also wept and said, "I could have given him tacos or enchiladas ! I didn't realize he hated Burritos so much."  
>> (Oh this is GOOD!!)?  
>> Everyone turned and stared at the blonde's wife. The blonde's wife said,  
>> "Don't look at me. He makes his own lunch"

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## >>The Silent Treatment\*

A man and his wife were having some problems at home and were giving each other the silent treatment. Suddenly, the man realized that the next day, he would need his wife to wake him at 5:00 AM for an early morning business flight. Not wanting to be the first to break the silence (and LOSE), he wrote on a piece of paper, "Please wake me at 5:00 AM " He left it where he knew she would find it.

The next morning, the man woke up, only to discover it was 9:00 AM and he had missed his flight. Furious, he was about to go and see why his wife hadn't wakened him, when he noticed a piece of

paper by the bed. The paper said, "It is 5:00 AM. Wake up." Men are not equipped for these kinds of contests.

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#### \* WIFE VS. HUSBAND \*

A couple drove down a country road for several miles, not saying a word. An earlier discussion had led to an argument and neither of them wanted to concede their position. As they passed a barnyard of mules, goats, and pigs, the husband asked sarcastically, "Relatives of yours?"  
"Yep," the wife replied, "in-laws"

#### \* WOMEN'S REVENGE \*

"Cash, check or charge?" I asked, after folding items the woman wished to purchase. As she fumbled for her wallet I noticed a remote control for a television set in her purse.  
"So, do you always carry your TV remote?" I asked.  
"No," she replied, " but my husband refused to come shopping with me, and I figured this was the most evil thing I could do to him legally."

**\*UNDERSTANDING WOMEN \***

**(A MAN'S PERSPECTIVE)**

I know I'm not going to understand women.  
I'll never understand how you can take boiling hot wax, pour it onto your upper thigh, rip the hair out by the root, and still be afraid of a spider.

**\*W O R D S\***

A husband read an article to his wife about how many words women use a day... 30,000 to a man's 15,000.

The wife replied, "The reason has to be because we have to repeat everything to men..."

The husband then turned to his wife and asked, "What?"

**\*CREATION \***

A man said to his wife one day, "I don't know how you can be so stupid and so beautiful all at the same time."

The wife responded, "Allow me to explain."

God made me beautiful so you would be attracted to me;

God made me so stupid I would be attracted to you

**ROMANCE MATHEMATICS**

Smart man + smart woman = romance

Smart man + dumb woman = affair

Dumb man + smart woman = marriage

Dumb man + dumb woman = pregnancy

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#### OFFICE ARITHMETIC

Smart boss + smart employee = profit

Smart boss + dumb employee = production

Dumb boss + smart employee = promotion

Dumb boss + dumb employee = overtime

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#### SHOPPING MATH

A man will pay \$20 for a \$10 item he needs.

A woman will pay \$10 for a \$20 item that she doesn't need.

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#### GENERAL EQUATIONS & STATISTICS

A woman worries about the future until she gets a husband.

A man never worries about the future until he gets a wife.

A successful man is one who makes more money than his wife can spend.

A successful woman is one who can find such a man.

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## HAPPINESS

To be happy with a man, you must understand him a lot and love him a little.

To be happy with a woman, you must love her a lot and not try to understand her at all.

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## LONGEVITY

Married men live longer than single men do, but married men are a lot more willing to die.

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## PROPENSITY TO CHANGE

A woman marries a man expecting he will change, but he doesn't.

## A DISCUSSION TECHNIQUE

A woman has the last word in any argument.

Anything a man says after that is the beginning of a new argument.

an marries a woman expecting that she won't change, and she does.

## HOW TO STOP PEOPLE FROM BUGGING YOU ABOUT GETTING MARRIED

Old aunts used to come up to me at weddings, poking me in the ribs and cackling, telling me, "You're next." They stopped after I started doing the same thing to them at funerals

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This newsletter is not a replacement for medical advice. Please contact your doctor in the case of an emergency.

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We are here if you need us...just yell!!!!!!!!!!!!!!!!!!!!!!

Keith and Barb ☺