

CHAPTER

14

Why Sherlock Holmes Would Be Shocked

An Interview with Dr. Albert Robbins

In this interview, Albert E. Robbins, DO, MSPH, discusses principles that can be helpful for understanding the role of the environment, diet, and nutrition in tic disorders. Dr. Robbins is board-certified in both preventive medicine, and occupational and environmental medicine. He is a fellow of the American Academy of Environmental Medicine, a Diplomate of the international and American boards of environmental medicine, and former editor of the Environmental Physician. (Interview by Sheila J. Rogers.)

Dr. Robbins, I know you have a special interest in tic conditions. How did that interest develop?

It was serendipitous. While treating patients for allergy, we found that some who also had tic disorders (including Tourette syndrome), hyperactivity, and/or obsessive-compulsive disorder, reported symptom relief, not only from their traditional allergies, but also for these neurologically related symptoms. I began to explore this angle more comprehensively. And we later had the dramatic case of Griff Wakem, whose severe symptoms improved so remarkably with this approach.

I've treated more than 100 allergic patients who also had one or more of these over-

lapping central nervous system disorders and have found each case to be challenging and unique. Although we cannot help all patients with tics or Tourette's, we can identify some of the environmental or allergic triggers that such patients attribute to the waxing and waning of their condition.

I should mention that I am not the first to observe this environmental/neurologic connection. Theron G. Randolph, MD, the "father" of environmental medicine, Marshall Mandell, MD, and Doris J. Rapp, MD, all reported an environmental connection for tics and TS more than 18 years ago. Further, there are many other physicians who are successfully using an environmental approach for these central nervous system disorders. This is an observational approach to a neurologic disorder that appears to have allergic triggers.

What do you mean by an environmental or observational approach?

This approach uses a Sherlock Holmes-type of investigation that searches for environmental clues to the triggers that either cause or aggravate disease. These clues comprise both internal and external susceptibility factors that may modify disease states and include everything we eat and drink, breathe, and use. Certainly, this would include stress factors, diet, personal care products, geography, climate, seasonal variations, infections, exposures to chemicals, allergens, pets, biologic agents (parasites), and other reservoirs of disease. Common environmental allergens include pollens, dusts, molds, animal danders, and certain foods. After the investigation is complete, we then create a treatment plan that includes avoidance (environmental controls) and allergy desensitization.

Exposures to certain common chemicals are known to produce serious neurologic effects in susceptible individuals. Such chemicals include perfumes, pesticides, and *volatile organic compounds* (VOCs), such as formaldehyde, fabric softeners, naphthalenes or mothballs, and phenols, such as those found in Lysol cleanser. Air fresheners (both aerosol and plug-ins) may contain p-dichlorobenzene. New carpeting also contains off-gassing chemicals. Moldy homes and offices can release VOCs that give the air a musty odor and can affect the nervous system. Finally, I should also mention cigarette smoke as a serious offender.

Many chemical products, particularly when used indoors, make the environment dangerous for the environmentally hypersensitive—those with allergic disease, asthma, and chemical hypersensitivities. Patients with these conditions, therefore, would be wise to avoid exposures to indoor chemical agents; they may test this hypothesis for themselves. My experience has been that some patients have a marked decrease in symptomatology when they avoid these agents completely.

Control of inhalants including mold is also important. Mold has been associated with periodic limb movement disorders in published research. There are reports that people exposed to mold from water damage in buildings found an increased risk of autoimmune response, such as inflammation, as well as neurologic reactions affecting the central and peripheral nervous system.

I understand you're an osteopathic physician, board-certified in preventive medicine, with a subspecialty in occupational/environmental medicine. Could you explain for our readers what an osteopathic physician is?

In the United States, an osteopathic physician, or DO, is equal to an allopathic physician, or MD, in medical education, licensing, right to hospital affiliation, board-certifications, and medical specialties. Osteopathic physicians practice medicine in all states throughout the country, under equal status as MDs. The only major difference is that osteopathic physicians have received training in manipulation—which they may or may not use in their practice—and they are trained to approach health and illness from a more holistic orientation than MDs. By holistic orientation, I mean looking more at lifestyle factors whenever possible as contributors to health and illness, rather than just prescribing medication.

For example, for decades I've advised patients with hypertension to follow a diet that's high in fruits, vegetables, and fiber and low in saturated fat, and salt, and instructed them also to exercise regularly. Just recently, results of studies have confirmed that this approach can be used as an initial therapy for the treatment of mild hypertension and may work as well as medication in some cases. An environmental approach that examines lifestyle issues for people with tics also promises to be helpful.

Is environmental medicine expensive?

Cost is always a factor when considering medical treatments. I suggest that families educate themselves in principles of environmental medicine and test the environmental principles for themselves. Before the initial office evaluation, I usually recommend avoidance of certain foods, allergens, and chemical exposures. If they find a connection between symptoms and exposure during the trial period, then assessment and treatment is usually warranted.

Parents and children have told me that their symptoms improve when they avoid certain common foods and scented personal care products. We ask patients to keep a diary of when and where symptoms are better or worse in an attempt to isolate environmental factors. This tracking includes the effect of foods, chemicals, and indoor environments. Such assessment and treatment is relatively brief and inexpensive.

When further evaluation is required, comprehensive allergy skin testing, laboratory blood tests, stool evaluations, urine and hair testing may be recommended. Allergy vaccines, routine office visits, and environmental changes may certainly be worth the expense. However, it would be prudent to begin a trial of environmental allergy and chemical avoidance along with an allergy elimination diet first. It is not wise to spend a considerable amount of money on testing and treatment without understanding the underlying environmental principles involved. One must work within the boundaries of science and utilize environmental principles appropriately to improve chances for good results.

Does research support the allergy connection to Tourette syndrome?

One of the most significant articles related to allergies and Tourette syndrome was reported several years ago in the *Journal of the American Medical Association*. The authors reported on identical twins, detailing a relationship between TS symptoms and environmental factors. The authors observed that although the twins had an identical genetic makeup, their TS manifested differently in each, with varying degrees of severity. I recall also that the authors suggested “optimizing the environment” to lessen the impact of the genetic predisposition but specific suggestions were not given. I believe that a thorough environmental medical approach is an appropriate place to start.