Components in Colostrum Balance Blood Sugar Levels and Reduce Insulin Requirements
by Thomas E. Stone ND, CNHP

The American Diabetes Association has estimated that 1 in every 14 people in the United States either have, or will have diabetes during their lifetime.

Diabetes is generally divided into two categories. Type I diabetes requires often does not require insulin, although it can develop to the point where insulin is required.

Type I diabetes is often referred to as juvenile onset diabetes and can progress rapidly. Frequently, it develops as an autoimmune disease, where antibodies attack the insulin-producing cells of the pancreas. One early treatment for this form of diabetes is the use of immuno suppressive drugs which may cause other complications. As a viable alternative, colostrum contains a substance known as PRP, which has been shown to balance the overactive immune response associated with autoimmune diseases. Rather than suppressing the immune system with drugs, colostrum can balance overactive immune responses to reduce the attack on pancreatic cells.

Diabetes requires careful dietary and exercise programs. Even though Type II is a milder form, it is not without secondary complications which include heart disease, kidney disease, atherosclerosis, vision problems and circulatory problems. Those with diabetes, regardless of the type, are 5 times more likely to develop cardiovascular disease than those without diabetes. Often diabetes is diagnosed for the first time following a heart attack. Colostrum is known for its ability to regrow heart tissue and supporting blood vessels, and for its ability to reduce the bacteria associated with arterial plaque.

Colostrum has also been shown to balance blood sugar levels. This is due, at least in part, to a growth factor known as IGF-1 (insulin-like growth factor). A 1990 publication in “Diabetes,” suggested that colostrum supplementation would be a very beneficial treatment for diabetes, based on the fact that IGF-1, can stimulate glucose utilization. Researchers found that IGF-1 levels were lower in diabetic patients than in healthy individuals. After administering IGF-1 to patients, doctors noticed a two-fold increase in glucose transport to the muscles, potentially treating hyperglycemia and the dependance on insulin.

As a naturopathic physician, I was using colostrum 20 years ago. Back then, I could get it from organic farmers in the Midwest - and I used it as a liquid. However, when I moved my practice, I was no longer able to obtain it from the local farmers and so I investigated numerous forms of dried colostrum on the market. None of them even came close to the track record I had established with true colostrum, so I eliminated it from my practice for a number of years. Finally, several years ago, I discovered the Immune-Tree brand. Just tasting and feeling it, I knew I had found the real thing. And sure enough, when I gave this to my patients, they experienced the benefits I knew they could. So, once again, colostrum is an integral part of my practice.

For diabetic patients, colostrum is unbeatable. Within months, every one of my patients have either greatly reduced their levels of insulin or they have eliminated it altogether. That’s quite a track record, but it’s true. Of course, they are also drinking plenty of good water, exercising and eating an enhanced diet of “live, whole foods,” but it is the colostrum which makes the program work. In my experience, given enough time, colostrum can completely eliminate the need for insulin. It balances the pancreas just like it does the thymus so that blood sugar levels are able to normalize.

I have also used colostrum with a product called “Hydroxygen Plus” for the resolution of diabetic ulcers on legs and feet. As a poultice, it heals ulcers which have been untreatable by conventional methods. Most ulcers of this nature
will heal within a matter of weeks. For the diabetic, colostrum is a Godsend - literally!

Please note, that especially with insulin-dependant patients, it is very important to consult a health care practitioner before taking colostrum and/or making changes in medication.

References:


2. Carroll PV et al. “rhIgF-1 administration reduces insulin requirements, decreases growth hormone secretion, and improves the lipid profile in adults with IDDM.” Diabetes 1997 Sep;46(9):1453-8


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