

A Dietary Path to Rejuvenate!

Bobbie Barbrey, a registered pharmacist, has special skills and knowledge that often help people dealing with chronic illnesses achieve higher levels of health.

While he has a busy traditional and compounding practice, Medicap Pharmacy in North Raleigh, he is also a Certified Clinical Nutritionist with a special gift for working with clients one-on-one in matters of health. Often, the result of that work is the design and implementation of comprehensive health plans that are transformational for many.

“For the past six months,” he relates, “I’ve worked with a woman who was diagnosed with thalassemia, a blood disorder. She had seen many different expert physicians, and had been to a number of hospitals for testing, all in an effort to get relief from this condition. Thalassemia is an inherited disorder in which the body makes an abnormal form of hemoglobin, the protein in red blood cells that carries oxygen. It results in excessive destruction of red blood cells, which leads to anemia, and is often related to heart failure and liver problems. Treatment may include regular blood transfusions and folate supplements.

“For this patient, the illness was an everyday burden. Because of this blood problem, her oxygen carrying capacity is less than normal so she always felt fatigued. Her blood work was never quite in normal ranges. So our challenge was simply this: What changes could we implement to reduce this burden and restore her energy?”

“My first inclination was to consider adding more iron to her diet, but in fact this case took an unexpected turn.”

SEARCHING FOR INFLAMMATION

A BioMeridian scan proved illuminating. Mr. Barbrey introduced this scanning device into his practice some years ago and, he says, “It has become an invaluable tool because it helps me determine areas in the body that are out of balance, areas with possible inflammation, then target those areas for support.

“It’s not a diagnostic tool, but when I see areas of the body that seem to be inflamed—knowing that inflammation is often a precursor to disease—it gives me the information I need to make recommendations for the patient more precisely.

“In this case I was looking for clues that would tell me energetically what else this patient had going on that we had yet to discover. We were looking at a picture that included the thalassemia but which in fact was also broader and more embracing.

“Her BioMeridian test results were mostly in the normal ranges with the remarkable exception of several allergy points—they were simply off the charts. Apparently she was eating something or being exposed to something that did not resonate in her body. In the back of my mind I suspected that the culprit might be a food sensitivity.

SUSPICIOUS OF DIET

“We continued to work with the BioMeridian, and tested two categories in detail: dairy and grains. In particular I was looking to see if there was gluten sensitivity. And, in fact, when it came to allergic reaction to gluten, she was again off the charts.

“This is a woman who is very knowledgeable about her health, who has been to the best doctors, and when I asked her if she was aware that she is gluten sensitive. She said ‘No, I’m not a celiac patient.’

“It is important for all of us to understand that you don’t have to have celiac disease to be sensitive to gluten and have many of the problems associated with gluten. I encourage people interested in their health to read *Wheat Belly: Lose the Wheat, Lose the Weight, and Find Your Path Back to Health*, by William Davis, MD. It is one of the best general discussions of what gluten and wheat does to the body, especially if you’re diabetic or holding a lot of abdominal fat.

“With this patient, I really had no idea what effect gluten might have on the serious thalassemia issue, but I did know that gluten erodes the villi in the small intestines—kind of like removing the shag on a carpet—to the point where the body’s potential to absorb nutrients, including iron, is greatly compromised.

“This patient story has a good outcome. She was compliant and motivated, did some research about gluten on her own, and with my guidance, modified her diet.

“Interestingly, over time, her blood work began moving back into balance and she had more energy and zest for living. Her hematologist was amazed and wanted to know what she was doing differently. To me, it’s a classic story for a clinical nutritionist who understands that all systems of the body must work together to achieve and maintain health. Rather than being amazed by the outcome for this patient, I understood that she simply started absorbing the nutrients she needed to deal with this health issue.

“This is not suggesting that we have, by introducing a gluten free diet, managed a cure for the basic issue of thalassemia,” says Mr. Barbrey. “But together we have found a way to make this patient healthier and happier, and she is grateful for this better quality of life.

“Generally when I work with patients, helping them develop a comprehensive health plan, I’m always sensitive to issues of diet—and I mean a specific diet for a specific patient. I have on so many occasions observed dramatic changes when people alter their diet and do targeted nutritional supplementation. This can make a huge difference in their symptom picture and in their overall health.”

Mr. Barbrey agrees that it is essential for doctors and specialists “to focus on the



Bobbie Barbrey, RPh, CCN, in a health counseling session

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known problem, and treat and prescribe for that condition appropriately. In a complimentary way, I am inclined to step back from that diagnosis just a bit and look at what else the patient can do to improve his or her overall health. I love to use homeopathy, herbs, and nutritional products along with dietary changes and beneficial lifestyle changes such as appropriate exercise and quiet time for reflection and rejuvenation.

“You won’t achieve your health goals by watching from the sidelines. Step up and become a participant. Everything you do counts. Ultimately, we each get to decide: do we just treat the diagnosis, or do we treat the cause? I prefer the latter. I like to work on the cause.” h&h

BOBBIE BARBREY, RPh
Certified Clinical Nutritionist
MEDICAP PHARMACY
6675-101 Falls of Neuse Road
Raleigh, NC 27615
Telephone: (919) 676-6161
Fax: (919) 676-6575
www.MedicapRaleigh.com