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### Successful toxicological *Helicobacter pylori* infection treatment conducted in a male Congolese patient with severe hemoglobin deficiency in the Democratic Republic of the Congo

A strange phenomenon characterized by many digestive and extra-digestive pathologies exists in the Democratic Republic of the Congo. While Congolese population thinks to massive criminal poisonings, the Laboratory of Toxicology of the University of Kinshasa stated unexpectedly, in 2010 a surprising link with *Helicobacter pylori*. Since then, in different articles and international conferences, we have demonstrated a double intoxication which occurs by the passage of *Helicobacter pylori* toxins, ammonia and carbon dioxide in a gaseous state to the bloodstream via lungs path. This paper addresses an innovative treatment conducted in a male Congolese patient positive to *Helicobacter pylori*, suffering from a severe recurrent hemoglobin deficiency. The methodology was: case history, symptoms, socio-demographic data and biological parameters. The diagnostic was *Helicobacter pylori* toxic-infection with extra-digestive pathologies including *Helicobacter pylori* linked hemoglobin deficiency. The treatment with *Helicobacter pylori* Kit, after blood transfusion, did not bring any relief. The combination of *Helicobacter pylori* Kit with toxicological treatment failed also to bring relief. The toxicological treatment implemented alone during three months surprisingly raised and stabilized patient's hemoglobin rate beyond 12g % and cleared digestive and extra-digestive patient's symptoms. This positive result is very surprising as regular *Helicobacter pylori* treatment recommends germ eradication using *Helicobacter pylori* Kit. Nowhere in recent literature is toxicological treatment recommended and described. This result suggests for the first time that it could be useful to separate *Helicobacter pylori* from its toxins, ammonia and carbon dioxide. This case gives a good demonstration of the passage of ammonia and carbon dioxide to patients' bloodstream, turning *Helicobacter pylori* infection, in redoubtable *Helicobacter pylori* toxic-infection, generating huge extra-digestive pathologies, including a possible dangerous hemoglobin deficiency. This toxicological treatment could represent an interesting new way to explore.

#### Biography

Josaphat P Ndelo-di-Phanzu is a Congolese Toxicologist. After his graduation as a pharmacist at the Faculty of Pharmacy of the University of Kinshasa in 1975, he moved to Belgium at the Faculty of Pharmacy of the Katholieke Universiteit Leuven, where he performed a Master degree in Pharmaceutical Sciences followed by a doctorate degree in Pharmaceutical Sciences, Branch Toxicology in 1984. As complementary training, we can indicate public health, academic pedagogy, Food and drug control, ethics of biomedical research. At the end of his post-graduate training, he went back to the University of Kinshasa. He became an Associate professor in 1986, Professor in 1998 and Ordinary professor in 2005. Considering the administrative level, he was respectively granted Head of the Laboratory of Food and Drug Control of the University of Kinshasa, Head of the Department of Biopharmaceutical and Alimentary Sciences, Head of the Laboratory of Toxicology, Vice-Dean of the Faculty of Pharmacy of the University of Kinshasa, Dean of the faculty of Pharmacy, Rector of the University of Kinshasa. In the field of ethics of biomedical research, he is President of the Ethics Committee of Central Africa and Vice President of National Ethics Committee of DR Congo.

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