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**Addison's disease MISCONCEPTIONS**

**By Charles Douglas Wehner**

**Addison's disease MISCONCEPTIONS by Charles Douglas Wehner**

Addison's disease affects about one person in TWENTY MILLION. In the United States there would be about ten to twelve cases, with similar numbers in Europe.

A quick check on the search engines at the time of writing reveals 14,440 websites on MSN and 83,800 on Google. All deal with the subject of this rare disease.

Does EACH patient in the States need between 1,444 and 8,380 pages of information to help him?

And is the information GOOD?

A quick check of the first entry on the Google list delivered the NIDDK page which has no AUTHOR NAME.

There were plenty of pronouncements about what the anonymous author believed the facts to be, but ABSOLUTELY NO ACADEMIC REFERENCES. The page ended with suggested reading, which left the most important author out – Thomas Addison himself.

The Internet is a rumour-mill, with one person of dubious accuracy taking the word of an anonymous publisher and on the strength of that, publishing again.

This is a very dangerous situation in the world of medicine.

The popularity of Addison's disease has never been higher. It was announced in the press that John F. Kennedy had the condition, and suddenly everybody has the "I AM JFK" mentality. Similarly, Elvis Presley became addicted to steroids, so many people have the "I AM ELVIS" death-wish.

True Addison's disease is HORRIBLE. Those who have it want to be free of it – but it has never been cured.

## Addison's disease MISCONCEPTIONS

When bad doctors declare people to have this condition, the true sufferers are outnumbered by phoneyes – the true condition is RARE, RARE, RARE!

So when each person who IMAGINES that he has got it writes a page on the Web, the truth becomes totally buried.

THE ONLY THING TO DO IS TO REPUBLISH ADDISON.

That is what I did. Dr. Thomas Addison discovered the condition. If you don't believe him, who will you believe?

When following the links, please click 'BACK' to return to this article.

### MISCONCEPTION 1. BLACK SKIN

Thomas Addison first noticed the anemia of two patients who died and two more who walked away from the hospital. The dead patients had damaged "suprarenal capsules". He assumed that the two who left must have had these too.

A report – not in Addison's words – appeared (<http://wehner.org/addison/first> ), in which he made NO MENTION of dark skin. HE HAD NOT NOTICED.

Just over five years later he published a book (<http://wehner.org/addison> ), in which he mentioned the pigmentation of the skin. You can see his signature at <http://www.wehner.org/addison/x0.htm> .

It was James Wootten (<http://wehner.org/addison/images/wootten.jpg> ) who was first seen to have a SUBTLE discoloration of skin, followed by James Jackson (<http://wehner.org/addison/images/jackson.jpg> ), Henry Patten (<http://wehner.org/addison/images/patten.jpg> ) and John Iveson (<http://wehner.org/addison/images/iveson.jpg> ).

NONE of these patients was in any way discoloured so as to draw attention to themselves in a crowd. Nor was any of them emaciated or otherwise sick-looking.

This is a collection of healthy, good-looking corpses!

It is true that Louis Martineau published a black image of the patient Gaget (<http://wehner.org/addison/images/gaget.jpg> ), but this appears to be because he could not afford proper colours. The text of the Martineau thesis emphasises that the hair was blond, turning to chestnut and that the eyes were blue – unlike the picture.

### MISCONCEPTION 2. ADDISON CRISIS

There is NO SUCH THING as an "Addison Crisis". That is to say, even an expert does not know what it is.

## Addison's disease MISCONCEPTIONS

The author nearly died of untreated Addison's disease several times. At no time did some phenomenon take place that would draw attention.

A doctor said to the author "If you had SEEN an Addison Crisis"... SEEN? The author felt it on his own body! A steroid addict may panic, and become hysterical before his energy disappears and he goes from paranoia to coma, but true Addison sufferers simply fade away.

In the Greenhow table of 128 uncomplicated cases, Case 55 and 56 ([http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able15.htm?sink](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able15.htm?sink)), Case 107 ([http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able33.htm?sink](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able33.htm?sink)), Case 147 ([http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able48.htm?sink](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able48.htm?sink)), Case 167 ([http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able55.htm?sink](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able55.htm?sink)), Case 169 ([http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able56.htm?sink](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able56.htm?sink)) and 173 ([http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able57.htm?sink](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able57.htm?sink)) all were described as dying from "SINKING". Other cases describe the same thing in different words.

The impression that bad doctors seem to have is that the patient "collapses unconscious". This never happens. A blood-clot usually seals the patient's fate. According to Greenhow "In every case in which I have witnessed the post-mortem examination, firm, discoloured fibrinous clots were found in the right cavities of the heart" (<http://wehner.org/cgi-bin/mark.pl/addison/greenhow/p62.htm?fibrinous>).

**SO IF YOU WAIT FOR AN ADDISON SUFFERER TO COLLAPSE, IT WILL BE TOO LATE.**

Again, Addison speaks of a "Semi-comatose state" in his previous work, and now speaks of a "torpid" state (<http://wehner.org/cgi-bin/mark.pl/addison/p17.htm?roused>) from which the patient can be roused. This does not disagree with Greenhow's assertion that there is NO coma in Addison's disease, and that often the consciousness is perfect to the last (<http://wehner.org/cgi-bin/mark.pl/addison/p17.htm?roused>, [http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able35.htm?consciousness](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able35.htm?consciousness) and [http://wehner.org/cgi-bin/mark.pl/addison/greenhow\\_able47.htm?consciousness](http://wehner.org/cgi-bin/mark.pl/addison/greenhow_able47.htm?consciousness) for example).

**YOU ARE DAZED, AND JUST TOO TIRED TO SPEAK, BUT YOU ARE AWAKE.**

So there is no "Addison crisis" to see.

### MISCONCEPTION 3. SALT CRAVING

The Internet is full of stories of people craving salt, by which the condition is said to have been discovered. However, the full documented literature from my website at <http://wehner.org/addison.htm> shows that there NEVER was any salt craving until steroids arrived on the market in the nineteen-fifties.

Aldosterone drives the salt-digestion.

No aldosterone, no salt hunger.

## Addison's disease MISCONCEPTIONS

When aldosterone, or a substitute (FluDROcortisone, known as Florinef) is taken, the body absorbs salt from wherever it can. When it can no longer do so, you crave salt.

Mac E Hadley, in "Endocrinology", 3rd Edition, Prentice–Hall, describes how aldosterone causes sodium to be recovered from the renal tubules, from the gut and from the skin.

**SO THOSE WHO CLAIM THAT THEIR ADDISON'S DISEASE BEGAN WITH SALT–CRAVING ARE ACTUALLY THE VICTIMS OF FLORINEF POISONING.**

Mistaking FluDROcortisone for a glucocorticoid FIUOROcortisone is a typical cause.

Addison–dog owners may like to put food WITHOUT salt in the bowl of their pet, with a SEPARATE plate of salt beside it. When medicated with Florinef, the dog will take the salt that it needs.

Incidentally, another tip from Greenhow is to use SODA–WATER (fizzy water) as medication. When effervescent water is given to an Addison patient – man or dog – it protects the duodenum from ulcers caused by the sodium loss.

### MISCONCEPTION 4. AUTOIMMUNE

The story is put about that Addison sufferers have an AUTOIMMUNE condition. Evidence is often brought in the form of "ATROPHY" of the Adrenal glands.

However, there is a distinction between ATROPHY and APLASIA. The former is just SHRINKAGE (like an emaciated person developing wrinkles – and then fattening up when fed). There is no DAMAGE in atrophy.

Aplasia is the condition that WOULD be found in an autoimmune condition – and this never happens. Autoimmunity means that ANTIBODIES appear that EAT AWAY the glandular tissue, so that it is GONE. Aplasia means WITHOUT TISSUE.

This happens in DOGS – but was never reported in man.

The only way that tissue has ever disappeared from the adrenal glands has been by means of GERMS.

GERMS have the power to adapt to a hostile environment like the adrenals. The high steroid concentrations however, will exclude most types of germ. It has to be tuberculosis, or in AIDS the Cytomegalovirus, or the even rarer Histoplasmosis fungus.

A specialised germ that manages to invade ONE adrenal will be able to invade THE OTHER. Cancer cannot do this (<http://wehner.org/cgi-bin/mark.pl/addison/greenhow/p50.htm?cancer> ).

BOTH glands must be destroyed for symptoms to appear, because each acts as a reserve gland for the other.

## Addison's disease MISCONCEPTIONS

So the vast throngs of Addison sufferers in their self–help groups, and the vast numbers of "experts" who have seen the condition a "thousand times" are plain WRONG.

We must RETURN to Addison and his CO–WORKERS. We must RE–READ the ESTABLISHED LITERATURE, with all its academic links to the Lancet, British Medical Journal, Canstatt's Jahresbericht, Gazette des Hopitaux and others.

Not a single case of steroid addiction clouds the story, and there is not a single case that resembles the auto–immune condition.

All cases in the 19th century were TUBERCULOSIS.

What went wrong? They lost the skill to diagnose.

Regain that skill at <http://wehner.org/addison.htm>

Collect the books to your own computer from <http://wehner.org/wehner.zip> (takes just over 8 megabytes).

This is a FREE SERVICE – to set the record straight. You can compare the Wehner retypes with the originals in the British and Wellcome library, or possibly in the Library of Congress.

White pages are EXACTLY as the originals.

Charles Douglas Wehner

Charles Douglas Wehner is an electronics design engineer and technical author who has suffered from Addison's disease for over forty years.

### **ADDISON'S Addison's disease**

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The Internet is full of "GOSH–JOURNALISM" articles about Addison's disease. Sometimes, these are written by somebody who declares himself to be a doctor, sometimes they are anonymous.

There is reputed to be a "CRAVING FOR SALT" – yet the truth is that the hormone aldosterone stimulates the digestion of salt – so when it is deficient there is actually a DEFICIENCY of salt appetite.

In the final analysis, the only people who can really decide what the disease is like are those who RESEARCHED the subject, and researched it PROPERLY in the DAYS BEFORE STEROIDS ARRIVED.

## Addison's disease MISCONCEPTIONS

There is no way that the medication can be confused with the disease, because there was no medication.

Go to <http://wehner.org/addison/htm> to read ADDISON'S OWN BOOK, as well as those of his assistant WILKS, of GREENHOW and others.

I took the trouble of republishing in order that the truth shall be preserved.

Copies of these books can also be found in national libraries – the US Library of Congress, the British Library and the Wellcome.

Go for it – it's the truth.

Charles Douglas Wehner is an engineer and technical suthor afflicted with Addison's disease.



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