

# IIPA Level III

The Works of John Andrews  
Research and Studies



## John Andrews

- John is a modern-day pioneer in the field of iridology. His practice is in East Yorkshire, England.
- He trains iridologists at all levels of iridology practice and is involved in numerous research activities, always promoting and advancing iridology.
- John co-authored with Dr. Daniele Lo Rito to write *Embryology & Iridology*.
- If you would like to further your education with John Andrews, please reach him at [www.johnandrewsiridology.net](http://www.johnandrewsiridology.net)



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SYMPTOMS ARE THE TIP OF THE ICEBERG - THE END RESULT OF VARIOUS PATHWAYS OR TRIGGERS. THE FOUNDATION IS THE BODY OF THE ICEBERG, HIDDEN UNDER THE SURFACE - WHICH CONTRIBUTES TO THE FORMATION OF THE TIP. MODERN IRIDOLOGY CAN HELP TO ASSESS THIS FOUNDATION



## Bitot's Spots

Pierre Bitot (1822-1888), a French physician, discovered a foamy spot or lesion mostly noted in the nasal and temporal conjunctiva of the eye.

In 1863 it was so named after the founder and referred to as Bitot's Spot. While more common in third world countries, it can teach us much information.



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## IIPA Level III- John Andrews

- While most common in males, Bitot's Spots are common to see in someone deficient in Vitamin A. The deposits are formed on the conjunctiva of the eye, and with proper utilization and absorption of Vit A, this can be corrected.
- Noticed in oval, irregular, or triangular shapes.
- It may also be found in those with normal levels of Vit A but have problems with malabsorption of lipids. Vitamin A is a fat-soluble vitamin.



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## IIPA Level III- John Andrews

- **Patient may have:**

- Conjunctiva xerosis
- Corneal xerosis-drying of the cornea
- Corneal ulceration
- Keratomalacia
- Night blindness

- **Secondary causes:**

- GI diseases (Celiac)
- Alcoholic cirrhosis
- Hepatitis
- Bowel resections
- Cystic fibrosis



### **Patients/clients may have:**

- Conjunctiva xerosis – Bilateral dryness of the eyes
- Corneal xerosis-drying of the cornea
- Corneal ulceration - Pain
- Keratomalacia – Severe bilateral Vitamin A deficiency
- Night blindness

### **Secondary causes:**

- GI diseases (Celiac)
- Alcoholic cirrhosis - Liver
- Hepatitis
- Bowel resections - Removal
- Cystic fibrosis – Poor night blindness

## IIPA Level III- John Andrews

- Children with any of the eye signs of VAD (Vit A deficiency) are at high risk of dying. One of the first studies in Indonesia showed that children with night blindness were almost three times more likely to die as those from the same community without night blindness, and children with both night blindness and Bitot's spots were almost nine times more likely to die.



1. Sommer A, Tarwotjo I, Hussaini G, Susanto D. Increased mortality in children with mild vitamin A deficiency. *Lancet*. 1983; 2(8350): 585-8 [\[PubMed\]](#)



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## IIPA Level III- John Andrews

- Bitot's spots are more common on the temporal side. The white deposit consists of keratin, which the conjunctiva starts to produce because the deficiency has led to 'squamous metaplasia' with the cells in the conjunctiva becoming more like skin than a mucous membrane.
- To a certain extent the white foamy material can be wiped away from the surface of the conjunctiva, but does not disappear completely, even after the vitamin A deficiency has been treated.
- Hence, this sign does not necessarily mean that the child is currently vitamin A deficient. Bitot's spots usually appear in children aged 3–6 years. Bitot's spots that do not respond to vitamin A treatment are more common in school-aged children.

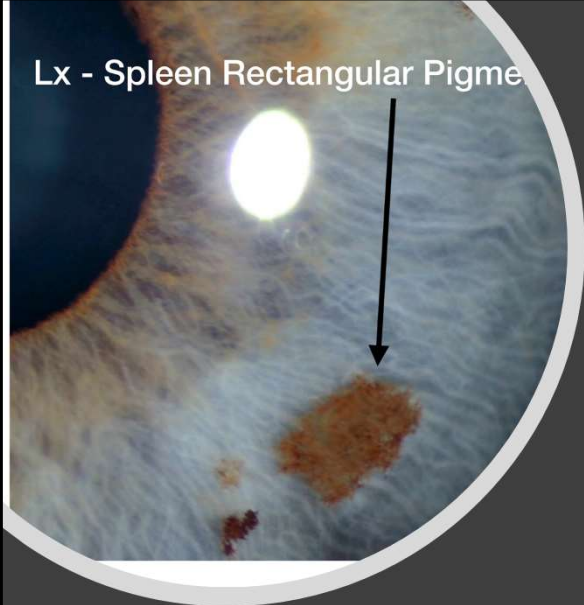
2. Cohen N, Rahman H, Sprague J, et al. Prevalence and determinants of nutritional blindness in Bangladeshi children. *World Health Stat Q.* 1985; **38**(3): 317–330 [[PubMed](#)]



Bitot's spots are more common on the temporal side. The white deposit consists of keratin, which the conjunctiva starts to produce. The deficiency has led to 'squamous metaplasia,' with the cells in the conjunctiva becoming more like skin than a mucous membrane. They can be hard and dry like skin.

b. To a certain extent, the white foamy material can be wiped away from the surface of the conjunctiva but does not disappear completely, even after the vitamin A deficiency has been treated.


c. Hence, this sign does not necessarily mean that the child is currently vitamin A deficient. Bitot's spots usually appear in children aged 3–6 years. Bitot's spots that do not respond to vitamin A treatment are more common in school-aged children.



Lx - Spleen Rectangular Pigment

## IIPA Level III- John Andrews

- The rectangular pigment, as seen in the photograph, is situated in the spleen reaction field.
- John's research tells us that when rectangular pigment is seen in any reaction of the iris, it is related to the spleen.
- The pigment can be seen in any color iris.
- The pigment can be seen in colors such as brown, black, orange, or ochre. The shape is the most predominant feature of this sign.



## Rectangle Pigment

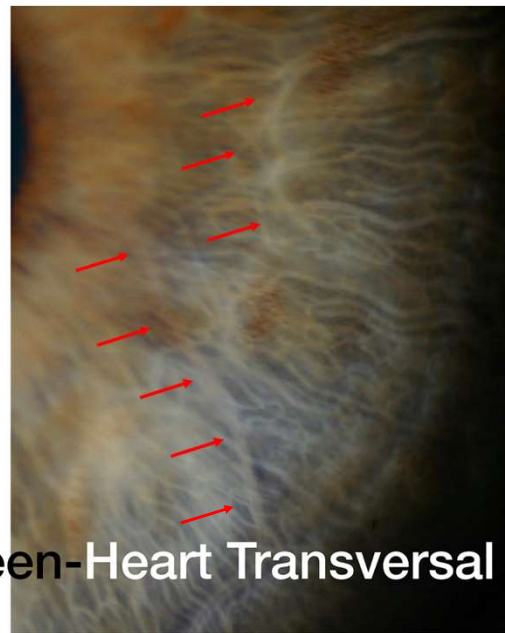
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Ask client: Are you sick often with colds or illnesses?  
 Check the immune system. The spleen supports our immune system.

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John Andrews



The Spleen/Heart transversal in the photo can be seen as vascularized. It is pink in color and moving directly towards the heart.



**Lx Spleen-Heart Transversal**

- The Spleen/Heart transversal is seen in the left iris.
- A transversal running from the spleen to the heart area indicates a strong family history of Myocardial infarction and severe congenital heart problems. It is not a definite indication the patient could have an infarction, but it is a distinct possibility depending on the current level of health, lifestyle, and cardiac risk factors.
- On an emotional level, vascularized transversals can relate to issues of anger, frustration, delusions, and relationships with females as underlying factors.
- Consider coleus forskohlii, Cordyceps or Ganoderma to move the blood. Co Q10 and lecithin may be helpful as well.

IIPA Level III- John Andrews

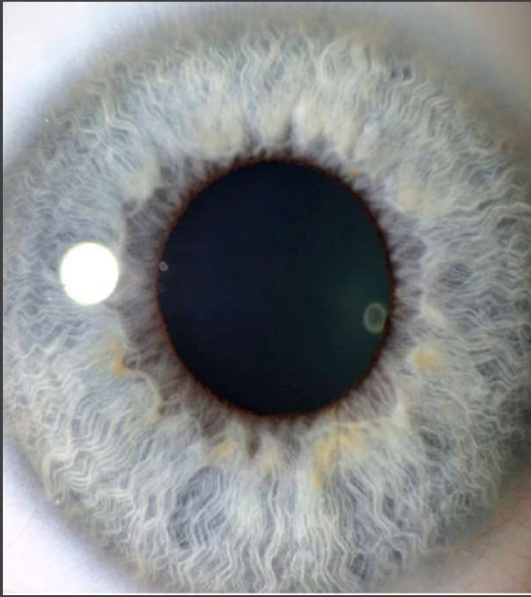


### **The Spleen/Heart transversal is seen in the left iris.**

A transversal running from the spleen to the heart area indicates a strong family history of Myocardial infarction and severe congenital heart problems. It is not a definite indication that the patient could have an infarction, but it is a distinct possibility depending on the current health, lifestyle, and cardiac risk factors.

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Familial heart attacks.



## IIPA Level III- John Andrews

- According to John Andrews, people with a tight, constricted collarette have-
- Less zinc in their bodies
- Tendencies to have fewer Killer T-cells
- Difficulty with caffeine (women)
- Tend to be pessimists- 91%



### **Tight Constricted Collarette**

According to John Andrews, people with a tight, constricted collarette have:

- Less zinc in their bodies – Buy zinc sulfate. Hold 10 seconds in the mouth. Doesn't have much taste.
- Tendencies to have fewer Killer T-cells
- Difficulty with caffeine (women) – strong stimulant
- Tend to be pessimists- 91% - more introverted

If there's a shadow around the pupil someone may be even lower in zinc. There may be a zinc deficiency.

## IIPA Level III- John Andrews

- The restricted or contracted collarette is often formed embryologically due to anxiety in utero. This may persist in adulthood in the form of self-doubt.
- Individuals tend to be inward-looking or very self-contained.
- Tendencies for ear, nose, and throat disorders relating to catarrhal conditions such as hearing loss, tonsilitis, laryngitis, or Otitis media (inflammation of the middle ear)
- There may be under activity of the Pineal, Thymus, and Hypothalamus gland



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  - There may be under activity of the Pineal, Thymus, and Hypothalamus gland
- Lower T-Cells – less immunity  
Lower digestive ability



## IIPA Level III- John Andrews

- **Psycho-emotional issues include:**
- Feelings of insecurity
- Fear of “letting go”
- Fear of dependence
- Issues of control
- Fear of relinquishing control
- For some women, Bulimia may be an issue
- Unresolved issues with father



### **Psycho-emotional issues include:**

- Feelings of insecurity – Don’t want to be open.
- Fear of “letting go.” – Perfect poker players.
- Fear of dependence
- Issues of control
- Fear of relinquishing control – Don’t want to let go. This is their lesson.
- For some women, Bulimia may be an issue
- Unresolved issues with father

## IIPA Level III-John Andrews

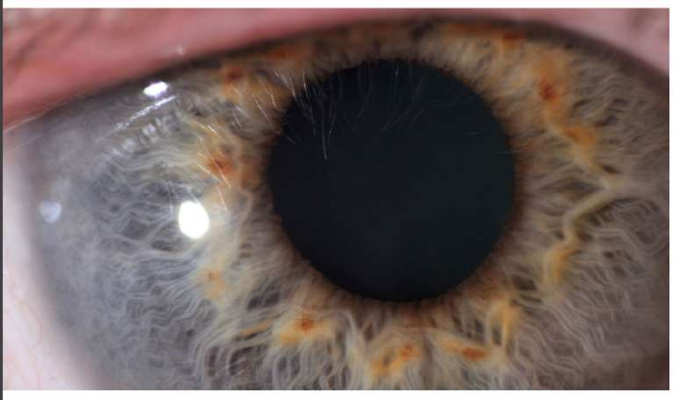


- A **Linear collarette** is like a square collarette associated with blood sugar irregularities.
- Only a portion of the collarette appears square.
- When all four sides a “square” there is a higher tendency for blood sugar issues/metabolism.



- These people need feelings of love and need to be appreciated.
- The collarette is flatter.
- A linear collarette has 1-sided flatness or 1 portion of the collarette is straight.

## IIPA Level III-John Andrews



Swirls of orange/yellow pigment on the collarette show us...

Vitamin B6 deficiency tendencies

Lower vitamin B6 can increase inflammatory stages and CRP (C-reactive protein)

Orange pigment or heterochromia in the intestinal and stomach zone can indicate betrayal, especially in connection to parent relationships.



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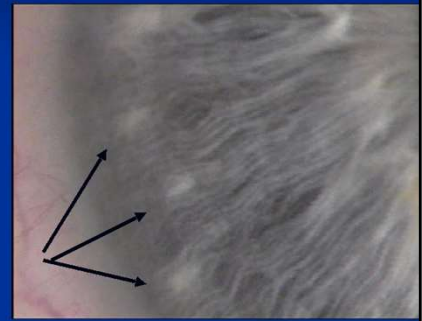
- Vitamin B6 deficiency tendencies
- Lower vitamin B6 can increase inflammatory stages and CRP (C-reactive protein) – liver inflammation marker
- Orange pigment or heterochromia in the intestinal and stomach zone can indicate betrayal, especially in parent relationships.

Check for MTHFR.

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John Andrews

- Genetic markings
- Clinical sign in 85% Down's Syndrome children
- Genetic/ Pre-clinical sign present in 15% of the general population
- Peripheral Sign - collarette & embryological topography give greater reliability in regards to the immune system

## Brushfield's Spots



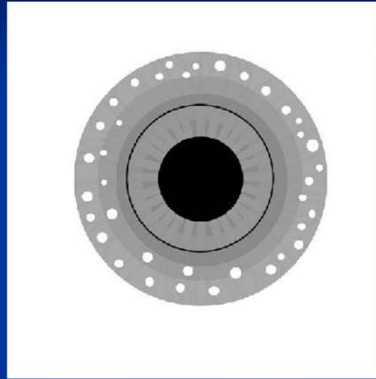
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- Genetic pre-clinical sign present in 15% of the general population
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Tophi are further in the ciliary zone.

## Brushfield's Spots - Physical Tendencies

- Dairy intolerance
- Allergies
- Poor skin elimination
- Catarrhal afflictions
- Fluid retention
- Stagnant lymph & CALT
- Mastalgia



## IIPA Level III- John Andrews

- In IIPA Level I & II, we refer to flocculation in the periphery as tophi or lymphatic rosary.
- We also refer to this as the Ring of Harmony. People with this sign usually shoulder the blame for misdoings, want to keep the peace, and have a desire not to upset people.
- CALT is conjunctiva-associated lymphoid tissue.



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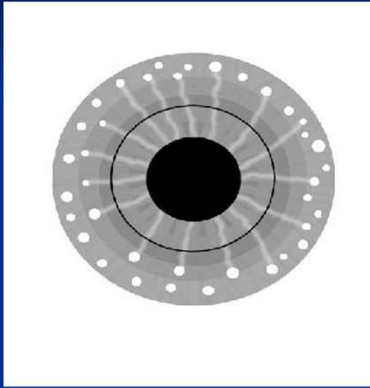
•CALT is conjunctiva-associated lymphoid tissue. –  
Lymphatic issues.

Tophi are further in from the lymphatic zone.

Ring of Harmony – Avoid arguments, don't want to rock the boat.

Mastalgia – Pin in the breast.

## Lymph Cords



- Deeper lymph circulation is located around the external border of the collarette
- 70-80% lymph nodes attached to the exterior of the intestines
- Lymph cords attach with Brushfield's Spots suggesting a tendency to stagnation of these intestinal nodes and hormonal fluid circulation
- The Lymphatic system has the capacity to hold 18 litres of waste fluid

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- Lymphatic vessels are found in nearly all tissues throughout the body except in the cornea, inner ear, epidermis of the skin, cartilage, bone marrow, and the central nervous system.



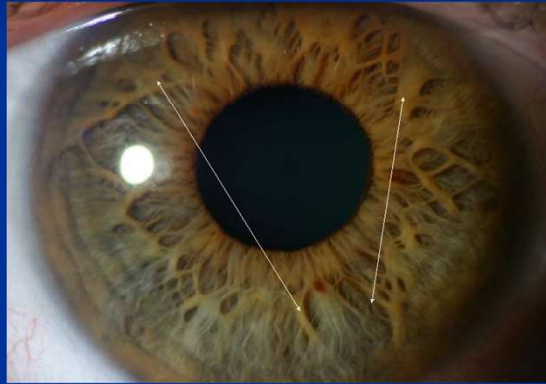
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Berberis herb is good for liver and anti catarrhal.

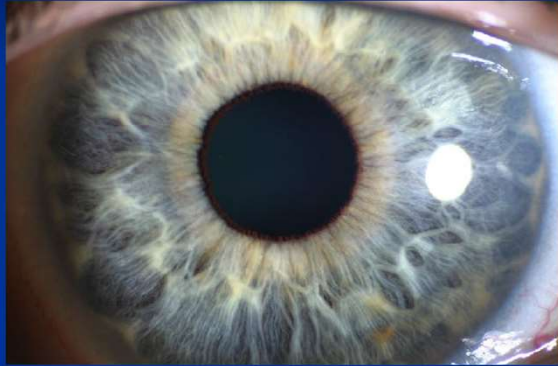
Cords – Stagnation of intestinal nodes.

Lymph Cords are also present in the  
Haematogenic & the Mixed Iris - illustrated below  
- *Berberis* indicated in such cases

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Multiple Lymph Cords are present in this example  
and the general collarette diameter & structure  
points to mesenchymal matrix compromise tendency



- **Mesenchyme** is a type of tissue comprised of loose cells embedded in the mesh of proteins and fluid called the **extracellular matrix**.
- The loose fluid of mesenchyme allows its cells to migrate easily and play a crucial role in the origin and development of morphological structures during the embryonic and fetal stages of life.
- Mesenchyme gives rise to most of the body's connective tissues, from bones to cartilage to the lymph and circulatory systems.

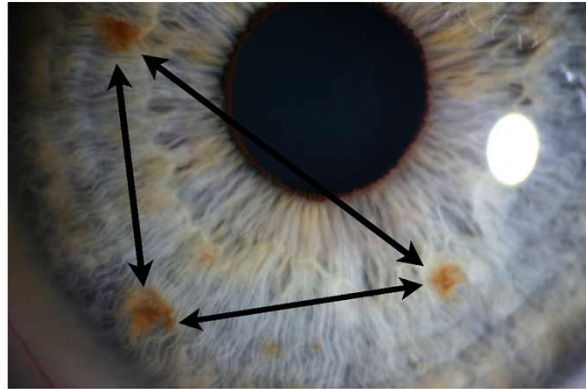


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Mesenchymal Matrix Compromise Tendency – When mesenchyme was compromised in utero.



Pigment Triad/Triangle - Frequently observed in autoimmunity. If Px does not have AI, then always an immune consequence - also with Lower Orexin - 89/114 Px



## Pigment Triad/Triangle

1. Auto immunity
2. Poor immunity/lower immunity
3. Lower orexin – Narcolepsy
4. Question the client about their immunity
5. Mushrooms, coelus, astragalus, echinacea, herbs for immunity
6. If patient does not have AI then there's always an immune consequence.
7. Orexin is a neuropeptide that affects our energy. Can have narcolepsy which is when someone is falling asleep all the time.

## IIPA Level III – John Andrews

- Many thanks to John Andrews for allowing his expertise to be shared with IIPA Certified Iridologists.

