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N E W S L E T T E R

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Alternative medicine, the quiet revolution

Richard Lewis

Some call it the quiet revolution. Others refer to it as the people's movement. Whatever you call it, medicine, as practiced in the United States, is changing and the patients are behind the change.

...9 out of 10 Americans believe that alternative therapies may help a wide variety of health conditions...

Patients are wanting more access to alternative forms of medicine, more access to doctors who will take time to talk with them as peers about various forms of alternative therapies rather than discard these ideas out of hand.

According to a recent survey conducted by Puritan.com, 9 out of 10 Americans believe that alternative therapies may help a wide variety of health conditions such as dealing with stress, reducing fatigue levels, or helping control joint pain and arthritis—ailments which are the most common non-acute or chronic problems reported today. (The Center prefers to refer to chronic illness as sustained illness.)

Vitamins and herbs led the way as the alternative therapies of choice in this survey. About 74% of the women surveyed said they took vitamins on a daily basis, while 57% of the men said they also consumed daily vitamins.

These trends tend to agree with a survey that appeared in a November, 1998, issue of the *Journal of the American Medical Association*

(*JAMA*). "Alternative medicine use and expenditures increased substantially between 1990 and 1997, attributable primarily to an increase in the proportion of the population seeking alternative therapies, rather than increased visits per patient," the *JAMA* researchers wrote. They included 16 different alternative healing modalities in the survey.

The people surveyed by the *JAMA* researchers are voting for alternative treatment with their pocketbook since most of this treatment is not paid by insurance. And when you vote with your pocketbook, it is a loud vote.

For instance, the *JAMA* report said that in 1997 Americans spent about \$29 billion on standard medical treatment including hospital expenses, doctor office calls, and medications.

The same year the researchers calculated that Americans spent about \$27 billion on all alternative medical disciplines including office calls, nutrients, herbs, books, and other educational workshops.

They also found that in 1997 the percentage of people seeking alternative medical treatment for a specific medical problem grew greatly over 1990.

"Despite the dramatic increases in use and expenditures associated with alternative medical care, the extent to which patients disclose their use of alternative therapies to their physicians remains low," the researchers observed.

Hugh Riordan, M.D., and the head


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Healthy eating lengthens life

It is now official: women with healthy diets live longer, according to a report in a recent issue of the *Journal of the American Medical Association*.

Researchers from the National Cancer Institute reviewed questionnaires filled out by over 42,000 women between 1987 and 1989 to check their eating habits and their health. To accomplish this, the researchers checked to see how many of 23 targeted foods the women ate on a regular basis and gave each woman a score on her diet.

Next, they compared these scores with the death rates among the women five to six years after the survey. They discovered that the women who ate the highest amounts of the 23 recommended foods were 30 percent less likely to die than the women who scored the lowest on eating the recommended foods.

The researchers' conclusions: women who eat the widest variety of fruits, vegetables, whole grains, low fat meats, and dairy products have the greatest chance of living longer. Amazing! 

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Nutritional Medicine


by Ron Hunninghake, M.D.

Non-acute care

In the heat of an acute medical emergency, conventional doctors are trained to respond rapidly, predictably, and effectively. A heart attack, an auto accident, a ruptured appendix are all acute, life threatening situations that demand the best conventional medicine has to offer. And the general consensus is that our acute care system is perhaps the best in the world.

So, when your life may hang in the balance, having a surgeon stop to ask you about the sugar content of your breakfast cereal doesn't make much sense. However, it is equally inappropriate to medically ignore what you as a patient typically eat. Or to chant that empty platitude: "just eat a balanced diet." Most doctors probably do believe this is important, but their horribly busy schedules disallow meaningful inquiries into the

realm of proper nutrition. They are too busy putting out those acute fires, as per their training.

It appears that a new breed of doctor is needed. One that has been trained to look at non-acute issues: wholeness of diet, adequate hydration habits, proper breathing technique, measured adequacy of essential nutrients, stress management skills, detoxification, and a whole host of highly important health maintenance strategies. Such issues would require more than a 10 minute appointment. Careful investigation, thoughtful planning, and detailed follow-up would be required. The evaluation and treatment environment for such a practice would probably look more like a school than a clinic. Indeed, a non-acute care doctor would reflect the true meaning of the word doctor: "teacher." 

Alternative medicine - Continued from page 1

of The Center, speaking before a Kansas legislative committee recently, explained the reasons for much of this growth in alternative health.

The accompanying illustration

points out the seven main differences he has discovered between the two types of medicine from his 25 years of working as an alternative physician after his acute care training in

Using standard medical approach

- Acute care model requires training
- Doctor dominated environment
- Based upon Newtonian physics (simple cause effect)
- Name the disease
- Chronic illness perception
- Treat/suppress symptoms
- Doctors paid by insurance for process, regardless of outcomes

Using holistic/alternative/complementary approaches

- Non-acute care model requires education
- Co-learner environment
- Based upon Quantum physics (multifactorial understanding)
- Characterize the disease
- Sustained illness perception
- Detect/eliminate causes
- Doctors not paid by insurance even with good outcomes

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medical school and practicing in the acute arena.

First of all, Dr. Riordan pointed out that acute care medicine (standard medicine) in the United States is generally superb. If you are broken, bleeding, or just had a coronary or stroke, you will get exceptional care. All who went to medical school, he pointed out, were trained to provide acute care as was he.

The acute care model calls for rapid assessment and quick judgment followed by rapid action. But when the acute care model is used with non-acute illness, the results are not as good.

The acute care model does not allow for a thoughtful, educated, holistic approach, based upon quantum physics (see table), which recognizes that non-acute sustained illness is multifactorial in origin.

At The Center, the alternative approach begins with a biochemical assessment of the nutritional status of an individual. Our initial evaluation might be considered a nutritional medicine evaluation, in which the specific and unique needs of the individual are discovered.

We closely follow the work and ideas of Dr. Roger Williams, formerly of the University of Texas at Austin. There he headed the laboratory that discovered many nutrients, including folic acid. His work casts new light on human nutritional needs and biochemical individuality and its relationship to health or disease.

Many of the doctors practicing today know little about nutrition. That is because so little has been taught about nutrition in medical school.

In Dr. Riordan's opinion, looking at the nutrient status and genetic differences in nutrient needs should not be seen as alternative, but basic, good medical practice in the assessment of anyone with sustained illness.

"To me," Dr. Riordan told the legislators, " 'alternative' simply means 'not currently taught in medical school.' What is needed in relation to non-acute illness is outcome

continued on page 4

HEALTH HUNTERS AT HOME

Alternative medicine; it is about control

A quick disclaimer: The following tirade is strictly the editor's opinion and not necessarily The Center's.

For years, the medical profession has held control over your body. The general public thought it was their own body, but when they entered the doctor's office, they lost control of their bodies and the doctors took over.

It wasn't always this way. I must admit that I am old enough to remember when Dr. Williams would make house calls where he gently examined either my sister or myself and then carefully explained to us and our parents what was going on and what we could do.

Over time, this gradually started to change. Doctors stopped making house calls and you could only see them in the controlled office setting or the hospital. Specialization became more important with doctors becoming experts on smaller and smaller parts of your body.

I first had this anchored in my consciousness when many years ago I saw the movie, *Hospital*, starring George C. Scott. The one line that stuck this in my thought processes came when a surgeon had just performed a hysterectomy on the wrong woman. He cried out, "Can't anyone bring me the right uterus?"

I thought, "Is that ever right. We are becoming parts attached to a transport system. The transport system takes that offending part into the expert for the expert to examine and diagnose what is wrong with that part. We are not a whole human being examined by the old family doctor who cared for us."

At this point, I will hear outcries from those physicians who have tried to care for the whole person—and rightfully so. But it is still a practice of specialists working a small part of the whole.

To make matters worse, managed care appeared on the scene. Doctors were encouraged to spend less time with more people during the day. To a certain degree, even the doctors lost

control to the insurance companies and we lost even more control over our bodies.

During this period, some people started looking for a way to regain control over their own bodies and started searching out physicians and other health care providers who would help them do just that. Give them back the control while providing them with knowledge to turn their control into personal healing.


The Center is an example of one of the places that assures that control of my body remains with me as it does with everyone who comes through the door for healing. Since we first opened 25 years ago, Dr. Riordan has preferred the term "co-learner" over "patient."

A co-learner relationship is one where, "while I learn from the doctor, the doctor is also learning from me." There is a constant flow of information moving both ways.

In short, The Center doctors and health care providers don't want control over me. I have to live here in my body so I need the control and the knowledge to live the best I can. The doctors at The Center work to give me the information I need to become the expert on myself. And it is true for you also.

This is the model of health care sought out by the thousands of Americans now paying for alternative medicine. They search out those people that will support them in the learning process.

But, times they are a' changing. "I am getting a lot more patients who are well-read, who don't want to take estrogen, who want to know what their alternatives are," Dr. Felecia Dawson, an obstetrician-gynecologist remarked recently. "Most doctors are hearing that these days, because our patients are asking for it. But only some of us embrace it."

As more physicians begin to embrace this type of relationship, they will gain and the patient will gain. It is a win-win solution to today's dilemma. 

—Richard Lewis

INFORMATION WORTH KNOWING

In his book, Andrew Weil, M.D., continues supplying us with information that we can use to improve our health. In *Eating Well for Optimal Health*, he provides us with informed choices about how and what to eat. Dr. Weil includes basic facts about human nutrition, ways to evaluate the latest "miracle" diet, weekly menus, and provides delicious recipes with rigorous and reliable nutritional breakdowns. His book is highly practical and inspiring concerning food, diet, and nutrition that will change our ideas about eating. It is possible to eat in ways that best serve our body while also getting all the enjoyment we expect from food. The questions this month are taken from his book.

1 The body requires _____ for the heart to beat, to eliminate wastes, and for transmission of electrical and chemical signals in the nervous system.

- a. fat
- b. heat
- c. energy
- d. none of the above

2 _____ is fuel that contains energy from the sun, originally captured and stored by green plants and then passed along.

- a. Food
- b. Oxygen
- c. Gas
- d. All of the above

3 Food can function as medicine to influence a variety of common ailments.

- a. True
- b. False

4 Fats that remain fluid at low temperatures and give vital flexibility to cell membranes are the _____ fatty acids.

- a. low
- b. omega-3
- c. high
- d. none of the above.

5 We store fat under the skin in all the familiar places _____

- a. as energy reserve in anticipation of hard times.
- b. to insulate the body.
- c. to cushion vital organs.
- d. all of the above.

6 Our bodies can easily turn glucose into fat, and also turn fat back into glucose without any difficulty, which has a profound implication for dieters.

- a. True
- b. False

7 _____ make(s) up most of the weight of the human body that is not water.

- a. Protein
- b. Carbohydrates
- c. Fats
- d. none of the above

• FOR ANSWERS, SEE PAGE 7 •

Alternative Medicine—
Continued from page 3


studies, rather than emotional rejection of any approach that some people believe is useful in those who are unwell and suffering."

At The Center, as with many other alternative practitioners, we have to have good results consistently. If we didn't, we would have disappeared quickly rather than celebrating our 25th anniversary this year. Again, patient/co-learners vote with their pocketbooks.

Building on a base of understanding biochemical individuality, we use a variety of approaches not currently taught in medical school. We do what we do because it works.

The Center uses itself as an example of one approach to medicine that has been marginalized by what is not taught in medical school. We represent a very small percentage of this rapidly growing field called "alternative medicine."


Some forward thinking medical schools are trying to incorporate some of the alternative field into the medical school of the future. They are seeing large amounts of dollars being spent with other than medical doctors who graduate from their schools. They want to recapture their primacy in the medical field.

Standard medicine has a lot of growing to do to catch the tail of this rapidly moving comet in the field of health care. 

Women handle stress differently than men

Under stressful situations women tend to turn to their children or seek out a friend. Men tend to have a "fight-or-flight" response.

Researchers at the University of California, Los Angeles, call the woman's response to stress the "tend-and-befriend" way of dealing with stress.

This is why women, the researchers added, are less vulnerable to drug and alcohol abuse and stress-related disorders such as hypertension than men. 

25th Anniversary Update

Sept. 22-24 - 15th International Conference on
Human Functioning

Case of the month

Recently, a young woman came to see Dr. Hunninghake who had not seen her for a year. She told him that everything was wonderful. She was not having any symptoms of her prior problems and had been that way for over a year. She was losing weight, she had had no colds, no flu, and no sinusitis. She was elated.

It wasn't always that way. When she first came to The Center in the fall of 1997 she was 28 years old. She complained of having allergies, depression, gastritis, irritable bowel syndrome, a low functioning thyroid, herpes, and sinusitis. Her weight has been creeping up for a while and she had tried several things to get it in control without success—just to name the most significant problems.

From the laboratory work she did during her initial evaluation, she discovered several deficiencies.

First of all, she learned that she had a high level of pyrroles in her urine and was started on vitamins B1, B6, and B12 by intramuscular injection as well as vitamin B1 by mouth to help bring this into line, chromium picolinate to compensate for a low chromium level, and she started taking fatty acid supplements to correct her fatty acid imbalance. Armour thyroid and slow release T3 were also added to take care of her low thyroid readings.

As she began to improve, her nutrients and thyroid aids underwent continual adjustment during the first year. After the first year many of her symptoms began dropping away. Her depression began to lift. She had no herpes symptoms and that continues today.

She added Weight Watchers to everything done at The Center and finds that the pounds are slipping away instead of forever accumulating. The regular meetings are a marvelous motivator for her. She continues on her supplement regimen that has evolved over the first year along with the thyroid boost she began here since it has all been so successful. This is why she did not come back for a year—she did not need us anymore. [H]

Herbal History

The wild rose, *Rosa arkansana*

By the time you read this, the wild roses in Kansas and many states north and east of here will either be blooming or just finished to give way to the development of the fruit or rose hip.

The wild rose has been called by various names: prairie rose, Arkansas rose, meadow rose, and pasture rose. The Dakota name for the wild rose is "onzhinzhintka" which translates "rose-bush."

The wild roses that inhabit The Center's nature preserve grow about two to three feet tall with a profusion of small, white flowers. Each flower has five petals about 1/2 inch long. On some varieties, the petals may grow as much as one inch long and the color will vary from white to pink. On all wild roses, the fruit, or hip, develops after the flowers drop off.

The native Americans used several parts of the wild rose for various

medical purposes. They also used the fruit as an emergency food. Researchers have found that the rose hip is a rich source of vitamin C, much richer than the orange. One researcher found that three rose hips have as much vitamin C as an orange.

The Omaha steeped the fruit or roots of the wild rose to make a wash to treat eye inflammation. From the lower plant, the Pawnee would collect the spherical galls caused by insect damage to the plant, then char and crush the galls to make a dressing for burns.

The Chippewas made a tea from the wild rose and used it for diseases of the eye. They also used the inner part of the bark to treat cataracts. The inner part of the bark from the red raspberry was also used to treat cataracts.

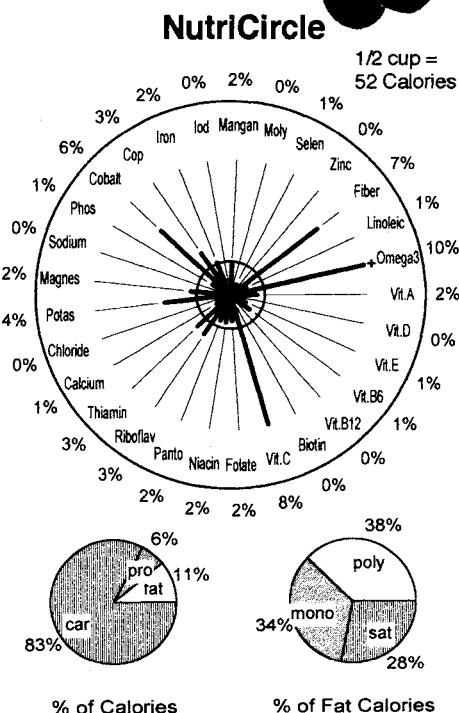
The wild rose makes a wonderful addition to wild flower gardens, although somewhat hard to propagate. [H]

Food of the Month

by Donald R. Davis, Ph.D.



SWEET CHERRIES are richest in omega-3 fat, vitamin C, fiber, and cobalt. They contain lesser amounts of potassium, magnesium, copper, iron, and other nutrients. Much of the color in cherries and other plant foods comes from antioxidant phytochemicals that help prevent heart disease and cancer. Tart or sour cherries (used in pies) are especially rich in certain kinds of anti-inflammatory anthocyanins. This might explain why—according to folklore—regular consumption of raw or frozen tart cherries helps relieve arthritis and gout.



The length of each bar shows the amount of one nutrient. If a bar extends out to the inner circle, the food has enough of that nutrient to match the calories it contains. The numbers show nutrient amounts in RDAs per serving shown. The pie charts show the sources of calories (left) and the types of fat (right). [H]

Mental Medicine

by Marilyn Landreth, M.A.




Life can change forever in a heartbeat

Does one day seem to run into another while you do the same thing day after day? Now is the time to wake up and enjoy your life rather than living each day as if your life will go on forever and never change. Many people have found that life can change forever in a heartbeat.

Tragedies happen to most people during their lifetime; a parent dies, divorce happens, people lose their jobs, or health deteriorates, to name a few. Most of the time we do not appreciate what we have until we no longer have it. It is time for us to appreciate and celebrate the life we have.

One way to acknowledge and appreciate your life is through a gratitude journal. Write down at least one thing for which you are grateful in your life everyday. It can be little things like the

song of the bird or seeing a delicate flower. It can be bigger such as the love of your family. It can be something as mundane as being grateful for our aches and pains after working in the garden all day because it lets us know that we are capable of working hard.

Mental Medicine can be the thing that can add life to your being. Get out of that rut. Do some of the things you want to do but have put off until you have more time, more money, or more energy. Have a dream and take steps to make it happen. Live each day as you really want rather than just going through the motions. The past can haunt us and make our life miserable if we let it. We can't change what has happened in the past but we can be the one to decide to let go of the past and live today with courage and humor. 

CENTER UPDATE

Learning how to hug

"Hugging is an excellent tonic," said Dr. Harold Voth, senior psychiatrist at the Menninger Foundation in Topeka, Kansas. "It has been shown scientifically that people who are mentally run-down and depressed are far more prone to sickness than those who are not. Hugging can lift depression, enabling the body's immune system to become tuned up. Hugging breathes new life into a tired body and makes you feel younger and more vibrant. In the home, daily hugging will strengthen relationships and significantly reduce friction."


For some, you have been hugging since you popped out of the womb. Others had to learn the value of hugs after you had gained quite a few years. Yet others never learned.

Effie Poy Yew Chow, Ph.D., the founder and president of the American Qigong (pronounced chee gung) Association and the World Qigong Federation, believes there is a right way to hug and those who learn it will gain even more from hugging.

Dr. Chow's first rule is that a hug should be heart to heart—none of these side-by-side, one arm gestures, or these touch-your-cheeks, but the remainder of the body never touches and gets farther apart as you get down to your feet things. A hug needs to be heart to heart.

Her second rule is they should be left cheek to left cheek. By following these two rules, the greatest positive healing energy is passed between the two huggers and each comes away energized from the hug.

It is not that you have been hugging wrong all these years and it was all for naught. According to Qigong's 5000 years of history of enhancing energy, using these two rules makes each hug even better. If Dr. Voth knew of this, it is a sure bet that he would not only recommend hugs, but would suggest these two rules to all who want to enhance their hugs.

Dr. Chow has one other recommendation: Get a least eight hugs a day—every day. 

Fatigue and the elderly

According to a report in the *Journal of the American Geriatrics Society*, many older people suffer from undiagnosed fatigue which could be linked to depression, pain, and the use of more medicine.

In a survey of a long-term care facility, it was found that in addition to fatigue the residents suffered from depression, pain, and the inability to carry out daily activities. Each of the elderly in the report had more than nine medical problems and were taking an average of ten medications.

When I was working as a nursing home administrator, it was not uncommon for us to check in a new resident and find among their inventory a large box of drugs; many were from two or more physicians. With fatigue, if the elderly don't receive help from one physician, they feel they must try another; thus, the multiple supply of drugs.


Many times these conditions are the cause of many elderly finding themselves on the way to a care facility. Families find it difficult to cope with this continued fatigue and the responsibility of securing and monitoring the multitude of pills.

I am fortunate to have my position here at The Center so I do not have time for any boredom or lack of activity. My medications are at a bare minimum, and I take a variety of supplements, the most important of all is vitamin C.

Another problem with which the elderly are afflicted is overweight, and many prescription drugs are administered in the hope of finding help. In reality, if they could be provided adequate meals with all whole foods, these problems would probably drop to a minimum.

I feel fortunate to have been exposed to The Center's Beat The Odds program where they measure my antioxidant levels (vitamins A, C, and E). They recommend that we retest our antioxidant levels at least once a year to assure that we are on the right track to optimal health.

The following quote by Johann Wolfgang von Goethe, if practiced, would help many of the elderly with their problem of fatigue:

We ought to hear at least one little song every day, read a good poem, see a first-rate painting, and if possible speak a few sensible words. 

—Nelda Reed

- 1 c. The body gets its energy from food we eat by taking it in, digesting it, and metabolizing its components.
- 2 a. This solar energy is passed along to fruits, seeds, and animals. Humans eat these foods and burn the fuel they contain.
- 3 a. The way we eat is an important determinant of how we feel and how we age.
- 4 b. When we go on very low fat diets, it further reduces the amounts of omega-3 fatty acids we are getting in our diets.
- 5 d. Fat is necessary to our bodies, although stored fat cannot be converted to energy as quickly or as easily as glycogen can.
- 6 b. Because our bodies cannot turn fat back into glucose, this has implications for people who are starving or dieters who restrict or eliminate carbohydrate intake.
- 7 a. Proteins contain amino acids which are the building blocks that our bodies need for growth and repair.



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EATING WELL FOR OPTIMUM HEALTH by Andrew Weil, M.D.

Americans have obsessed about their weight as they became even heavier. Food should be used to supply the basic needs of the body while fortifying the body's defenses and mechanism of healing. Good food—and the good feeling it engenders at the table—is not only a delight but also necessary to our well-being, so that eating for health means enjoyable eating. Hardcover. Retail Price: \$15.95
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with James Jackson, Ph.D.
 Some changes due to aging are inevitable, while some are reversible. Some effects of aging are due in part to free radicals, or oxidants, and can be prevented by antioxidants. If free radicals are not efficiently destroyed, the degenerative diseases associated with aging occur: arthritis, atherosclerosis, cancer, heart failure, stroke, senility, diabetes, and cataracts. Audio cassette & video tape.

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with Donald R. Davis, Ph.D.
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with Ronald Hunninghake, M.D.
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5	6	7 Yoga	8	9
12	13	14 Yoga	15	16
19	20	21	22 L & L - Chocolate: the "Best" Candy?	23
26	27 L & L - Eating Vegetables with Pizazz	28	29 L & L - Qigong II	30

JULY

6 Sounds for Healing

Bedtime snack may reduce diabetics' blood sugar

Snacking on slow-release carbohydrates just before hitting the pillow at night may reduce the blood sugar levels of type 2 diabetics before and after breakfast the next morning, according to a report in the *American Journal of Clinical Nutrition*.

The Swedish researchers found that the 14 diabetics studied who ate uncooked corn starch just before bedtime had reduced blood sugar concentrations after breakfast the next morning.

Since the bedtime snack did not increase the diabetics' insulin sensitivity, the researchers suggest, it is possible that the carbohydrate may have improved the release of insulin from the pancreas or decreased the output of sugar from the liver.

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- Healthy eating lengthens life
- Learning how to hug
- Fatigue and the elderly

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