

# Health Hunter<sup>sm</sup>

N E W S L E T T E R

## Rethinking cholesterol

Donald R. Davis, Ph.D.

At mid-century, few Americans had heard of cholesterol, and fewer still worried about it. Cardiovascular disease was the leading killer, but many explanations of "hardening of the arteries" focused on "calcium deposits," not cholesterol. Less than 40 years later, cholesterol obsession reigned, and a

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***...most U. S. heart attack deaths occur at relatively low blood cholesterol levels...***

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federal agency launched the National Cholesterol Education Program (NCEP) to advise us to lower our dietary and blood cholesterol. Most medical scientists view this transformation as progress, as they point to our 25-year decline in heart disease (still our leading killer).

Some of us are skeptics. There have always been basic "flies in the ointment" of the cholesterol theories, but these are usually ignored. For example, the low rate of heart disease in Japan and in native Eskimos is not explainable by their cholesterol levels and intakes. And most U. S. heart attack deaths occur at relatively low blood cholesterol levels (under 200 mg/100 mL). But these pesky

facts have barely slowed the cholesterol bandwagon.

Finally, irresistible evidence is starting a new era of rethinking cholesterol. There is much to ponder, and even if the outcome is, as I expect, to clear cholesterol's "bogeyman" status, still it will take many years to overcome old ideas pervading our health professions, our media, and our advertising. Here I will highlight four areas needing rethinking.

**Total Mortality** Until recently, researchers focused only on the effect of cholesterol lowering on *heart* disease. Now they are shocked to find (or still deny) that cholesterol lowering *increases* death rates from

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### Little Things Add Up

More than 1/3 of all Americans are at least 20 pounds overweight. One reason might be the steady climb of pounds of snacks consumed between meals per person per year:

1993 - 21.5 lbs.

1989 - 18 lbs.

1987 - 17.5 lbs.

Source: *Snack Food Association*

## Caffeine and bone loss in postmenopausal women

Bone density loss is a major concern for postmenopausal women. There is that ever present worry of hip fracture when the bone structure just gets too thin to support the body. Hip fracture is often the first outward sign of more deterioration.

Now there is some interesting news about caffeine and bone loss. A recent research paper by Susan S. Harris and Bess Dawson-Hughes published in *The American Journal of Clinical Nutrition* sheds some light on the subject for coffee drinkers.

"This study demonstrates that consumption of caffeine over the wide intake range studied does not have a detrimental effect on bone in healthy postmenopausal women with calcium intakes near or above the recommended dietary allowance (RDA) of 800 mg.," they reported.

They go on to point out that, "Women who have lower calcium intakes may be at risk for increased bone loss if they are regular consumers of as few as two or three servings of coffee per day."

Furthermore, Harris and Dawson-Hughes wrote, "The present study provides evidence that a large

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# Nutritional Medicine

by Ron Hunninghake, M.D.

## Talking the talk vs. walking the walk


The "talk" in conventional medical and nutritional circles of experts has always been "eat a healthy diet and you don't need supplements." This has been almost gospel...until recently.

Several years ago, a survey was taken on dietitians in Washington state. Their official position was that all necessary nutrients could be derived from food sources alone. But when queried on their personal use of supplements, over half admitted to using them.

Informal surveys at cardiologists' meetings suggest that around 70% of these doctors use vitamin E. The prestigious and conservative

*Tuft's Diet and Nutrition Letter* editorial staff found that over 60% of their members were using supplements.

What does this mean?

It means that we, as a society, WANT RESULTS in our health badly enough that we are willing to go beyond dogmas that have been revered for decades. The evidence for antioxidant supplements is rapidly becoming so compelling that it will be increasingly difficult for old belief systems ("the talk") to hold sway over a powerful personal health improvement behavior, ie. the appropriate use of nutritional supplements ("the walk"). 

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cancer, accidents, and many other causes, with no net reduction in total mortality. So three researchers in 1992 published an editorial in *Circulation*, titled: "Health Policy on Blood Cholesterol: Time to Change Directions." Even the NCEP acknowledges the problem *briefly* in its recent introduction to several pages of detailed advice to physicians on how to—yes—lower cholesterol.

The total mortality problem appears both in studies using diet and studies using drugs. It may be caused by cholesterol lowering as such, by the *methods* used to accomplish the lowering, or both. Very recently, a Scandinavian trial of the drug simvastatin found a major reduction in cardiovascular deaths and, for the first time, in total mortality. Proponents of cholesterol lowering are ecstatic, and claim vindication, but prematurely. It was a fairly short

(5.4 year) study of a new drug. Skeptics may point to the dismal record of other cholesterol lowering drugs and to past unpleasant surprises when new drugs failed in further testing, or showed unexpected side-effects after long use.

Another bright hope for cholesterol fighters is the proof of regression of atherosclerotic plaques by strict cholesterol lowering methods (Dean Ornish and others). But these studies are not yet long or large enough to address the total mortality issue. Because they use extreme versions of the cholesterol lowering methods that previously increased mortality from cancer and other causes, even greater problems with total mortality seem likely. But like many new medical procedures, regression therapies are now advocated without much testing.

**Biased Reporting** Cholesterol

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The information in this publication is meant to complement the advice and guidance of your physician, not replace it.

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fighters still say that cholesterol lowering at least reduces coronary mortality, if not total mortality. However, even this claim is suspect. A citation study of 22 controlled cholesterol lowering trials found that supportive trials are cited about six times more often than the many un-supportive trials. Since 1970, key un-supportive trials are entirely un-acknowledged in the major journals, although their number almost equals the supportive trials (*British Medical Journal*, 1992; 305:15). All 22 trials considered together point to only a 6% reduction in coronary mortality, too small to be statistically reliable even with the huge number of subjects involved. Selective reporting causes unrealistic beliefs about the benefits of cholesterol lowering, which needs rethinking in full view of neglected data.

**Exceptions** Cholesterol lowering began with the undisputed observation that high blood cholesterol is statistically linked to heart disease. But this observation applies mainly to middle-aged men (and is of little use even to them, as noted). Failure to consider exceptions sadly misleads the aged to needless worry about "high cholesterol," and misleads them and their doctors into useless, risky and often costly therapies. This view is strengthened by a recent report in *The Journal of the American Medical Association* (November 2, 1994). After a 4-year study of 997 persons older than 70 years, the authors found no evidence that high blood cholesterol, high LDL cholesterol, or low HDL cholesterol are associated with cardiac mortality, total mortality, or hospitalization for cardiac causes. In fact, women with the *highest* cho-

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## HEALTH HUNTERS AT HOME

### Hand washing—history revisited

As little kids, we had drilled into our heads to wash our hands before eating—and on other occasions, too. Hand washing is still the front line of defense against infectious diseases.

Hospital acquired infections are still a major cause of illness and death throughout the world, according to a recent article in *The Lancet*. This brings to mind the work of Ignaz Semmelweis, the pioneer of hand washing in hospitals.

In Vienna, back in 1847, he observed that puerperal fever was more prevalent on the wards where medical students worked than on wards staffed with midwives. He observed that the students would come from dissecting cadavers to working on the wards without washing their hands. They were bringing the infection from the cadavers, he concluded.

The solution was simple. Semmelweis had the students wash their hands in chlorinated lime before examining patients. The infections dropped dramatically.

Semmelweis carried his hand washing a step further by having all medical staff wash their hands before examining patients. Infection rates dropped even lower. He was subsequently posted at two other hospitals that had high infection rates where he also incorporated his hand washing technique. These hospitals had similar results.

Semmelweis didn't report his findings until 1857 and at his death in 1865 his recommendations were still ignored by many clinicians. Today, his simple solution to infectious disease is again ignored by some hospital workers at all levels. There are two lessons we can take from this.

First, never be reluctant to ask a doctor or other health care worker if they have washed their hands before examining you. He or she should never be offended by such a question if basic cleanliness is a way of life.

Second, hand washing is a good thing for us as well. You don't know where your hands have been or who was there before you, so go ahead and give them a wash. Those lessons you learned so well as a child are still well worth remembering. As Ben Franklin said, "An ounce of prevention is worth a pound of cure."

If you would like to know more about the pioneering work of Ignaz Semmelweis and other people in the medical world, who went against the accepted standards of their times and bucked the ridicule of their colleagues to make a change in the world for the better, read Dr. Riordan's two small books, *Medical Mavericks, Volumes 1 and 2*, available from The Center. They are interesting reading. [H]

Richard Lewis

Success is not the result of spontaneous combustion. You must set yourself on fire.

Reggie Leach

## INFORMATION WORTH KNOWING

Do you know how your body functions? Do you know the kind of fuel (nutrients) it needs to keep functioning at an optimal level? Do you know how each nutrient combines to keep your body going? The *Know Your Nutrient* presentations, a part of our Luncheon Lecture series, has been attempting to answer some of these questions. The more we learn about the nutrients, the more we see how they all work together to keep us healthy. We have also found out what a complex and beautiful system our body has to repair damage from our diet, the environment, or lifestyle choices. The questions this month are taken from that series.

1. Antioxidant nutrients are thought to have an influence on
  - a. aging.
  - b. health.
  - c. disease.
  - d. all the above.
2. Antioxidants are found only in supplements.
  - a. true
  - b. false
3. Major minerals have something to do with
  - a. skeletal integrity.
  - b. rapid eye movement.
  - c. hair loss.
  - d. all the above.
4. \_\_\_\_\_ seems to regulate fat and protein metabolism.
  - a. Ascorbic acid
  - b. Vitamin E
  - c. Chromium
  - d. Copper
5. Zinc deficiency can contribute to many different kinds of ailments including
  - a. joint pain.
  - b. increased sense of smell.
  - c. freckles.
  - d. all the above.
6. Selenium is the most abundant trace mineral on earth and a lack of this nutrient will lead to white spots on the fingernails.
  - a. True
  - b. False
7. Gamma Amino Butyric Acid (GABA) seems to help
  - a. reduce muscle tension.
  - b. reduce the desire for alcohol.
  - c. reduce pain, stress, and anxiety.
  - d. all the above.

• FOR ANSWERS, SEE PAGE 7 •

Antioxidants may help prevent atherosclerosis by preventing the oxidation of LDL cholesterol. Epidemiologic data...generally support the hypothesis that antioxidants such as vitamins E, C, and Beta-Carotene reduce the risk of cardiovascular disease.

"Antioxidants and Cardiovascular Disease: A Review." *The Journal of the American College of Nutrition*, 1993; 12(4):426-432.

## Case of the month

A female, 73 years of age, came to The Center with unrelenting muscular pain since 1988. She was diagnosed to have rheumatoid arthritis and was previously placed on Methotrexate, to which she had severe reactions. She came to The Center to look for nutritional means of dealing with her pain and arthritis.

We found through laboratory testing that she had a low grade chronic bladder infection. Her hair tissue testing showed that she was very deficient in zinc, with poor absorption of calcium and magnesium. Also, it appeared as though she might have poor thyroid hormone utilization at the cellular level. Her *Candida albicans* IgG titer was elevated two and one half times. Magnesium and zinc levels in the blood were in the suboptimal range. The patient was also found to have *Blastocystis hominis* amoebic parasite with her stool testing. Finally, thirteen out of twenty foods were found to be positive on cytotoxic testing.

The patient was started on cranberry concentrate for the recurrent bladder problems. Glucosamine sulfate was given to help regenerate cartilage and reduce inflammation. Osteo Prime, a multiple vitamin and mineral designed for bone metabolism was introduced. She was given Zinc Drink, a liquid form of zinc, and Magnesium Gluconate to bring up her magnesium levels. Latero Flora, friendly bacteria that helps restore normal balance to intestinal flora, was initiated and the patient was started on Cod Liver Oil capsules.

When the patient was seen about two and a half months after starting her program, she reported a remarkable improvement in all of her symptoms.

Hi

## Lorenzo's oil shows clinical promise

Lorenzo's oil was brought to public attention by the movie of the same name starring Nick Nolte and Susan Sarandon as Augusto and Michaela Odone, who developed the oil to save their son.

The oil saved the Odone's son from certain death caused by adrenoleukodystrophy (ALD). ALD, a disorder that strikes only males, causes a build up of saturated very-long-chain fatty acids which are thought to attack the myelin sheaths that insulate the nerves.

Both the oil and the Odone's suffered initial discredit from the medical community even though the special oil they developed helped their son as well as others. But now that is changed.

Dr. Hugo Moser, a neurologist at the Kennedy Krieger Institute in Baltimore, has seen some positive effects from recent long term clinical studies even though he had initially said the oil didn't work. To Dr. Moser's credit, he did not let his initial results stop further testing. In Moser's latest study, he found that of 32 boys who took Lorenzo's Oil, 73% survived 5 years from the time of their first symptom, compared to 40% of the 29 controls not taking it. Even more promising are the results of a group of boys who started Lorenzo's Oil before symptoms ever appeared. This data suggests that Lorenzo's Oil may keep these boys from suffering the severity of neurological damage generally caused by ALD.

The Odone's became the consummate colearners when they took on the impossible task of learning why their son had the disease and what could be done about it. [H]

*Continued from page 3*

lesterol levels lived significantly longer than those with low or medium cholesterol levels. Surely we must rethink our ideas about cholesterol in those over 70.

**Better Ways** Even if cholesterol lowering were as successful as is widely claimed (10% to 15% reduction in cardiac mortality), it fails miserably to even approach the minuscule rates of heart disease in Americans of a century ago, or in modern (but non-westernized) Eskimos who eat large amounts of cholesterol. Yet few researchers wonder whether cholesterol lowering might be "barking up the wrong tree." Those who do are finding striking results. Preliminary studies suggest roughly a 50% reduction in heart disease associated with each of the following: (1) Eating seafood frequently (U. S. men, Europeans, Japanese, Eskimos), (2) Eating nuts frequently (Seventh-Day Adventists, Iowa women), (3) Taking  $\beta$ -carotene supplements (U. S. phy-

sicians), (4) Taking vitamin E supplements (U. S. nurses), and (5) Avoiding margarine, vegetable shortening, and other partially hydrogenated fats (U. S. nurses). At least the fish studies show both reduced cardiac mortality and reduced total mortality. If even some of these ways are confirmed, cholesterol lowering will be discarded as we move on to better ways.

After we rethink these and other aspects of cholesterol lowering, I expect that Americans one day will enjoy much of the blissful ignorance about cholesterol that they had prior to mid-century, as heart disease nevertheless continues to decline. Might Americans 40 years from now regard the current era of cholesterol phobia and the NCEP as medical relics, akin to blood-letting and snake oil? I hope to live long enough to find out, as I personally ignore cholesterol but take many other steps to build my health. [H]

*Continued from page 1*

segment of the older population may be consuming a combination of low calcium and high caffeine intakes that is harmful to the bone." They are not alone in these views.

Other research has shown the negative effect of caffeine on bone density, first in rats and then in women both before and after menopause. Still other studies have shown that caffeine clearly causes an increase in urinary calcium excretion for one to three hours after drinking a cup or two, but there is little evidence that these short term calcium losses result in a net increase in calcium excretion over longer periods.

So what does all this mean? If

you are reasonably healthy and get plenty of calcium in your diet (greater than 800 mg.), two or three cups of coffee won't make too much difference.

If you fall below the level of 800 mg. of calcium consumption on a daily basis, you may need to consider a couple of changes, according to the two researchers. First, increase your calcium consumption to reach or exceed the 800 mg. level. Secondly, if you can't give up coffee or other beverages with caffeine, you may want to reduce your coffee consumption to a couple of cups a day to give your bones a better chance. [H]

### Flax oil may help breast cancer

Flax oil is rich in omega-3 fatty acids, often in short supply in the American diet. Now researchers think they have found a link between this shortage of omega-3 fatty acids and breast cancer.

Recent research published in the *British Journal of Cancer* studied 121 women with initially localized breast cancer. The researchers checked the adipose breast tissue and any visceral metastases for fatty acid content. Breast tissue from surgery showed a low level of alpha-linolenic acid (omega-3 fatty acid) was associated with lymph node involvement and vascular invasion. After 31 months of follow-up, 21 patients developed metastases. Low levels of alpha-linolenic acid was the first determinant in these patients. Since the spread of the breast cancer to other organ systems is the main cause of death, these findings are very important.

### Fish oil slows kidney failure

Fish oil is back in the news and it is all because it is another good source of omega-3 fatty acids. This time researchers found it useful in slowing the deterioration caused by IgA nephropathy, or progressive kidney failure.

In this research, done through the Mayo Clinic and published in *The New England Journal of Medicine*, was a double blind study combining the results from 21 different centers. The researchers wanted to find out if fish oil would stop or slow down the progress of this type of kidney failure. The project was carried out over a two year period.

"Dietary fish-oil supplementation significantly slowed the rate of loss of renal function in patients with IgA nephropathy," the researchers wrote. In the two year period, only 6% had an increase in their serum creatinine concentration of 50% or more—a marker of kidney function. By contrast, 33% of the placebo group showed an increase at or above these levels. In addition, the annual decline in renal function was slower in the fish-oil group as a whole.

Fish oil, being a fat, has been accused by some people of raising cholesterol and triglyceride levels. "In our study plasma cholesterol and triglyceride concentrations did not change in the patients treated with fish oil," the researchers added.

### Greater fitness, fewer heart attacks

Sounds logical, but new data from a Finnish study takes it from logical to concrete.

This study followed 1,453 men, ages 40 to 60, for five years. The researchers wrote that, "Our findings are consistent with the notion that lower levels of both conditioning leisure-time physical activity and cardiorespiratory fitness are important, independent coronary risk factors. Both men with more than two hours of conditioning physical activity a week and men with maximal oxygen uptake of at least 2.7 liters per minute, had less than half the risk of [heart attacks] of the least active or the least fit."

In short, if you are exercising now, you are at a lower risk for a heart attack. If you are not exercising now, it is time to get started. [H]

## Back to nature

To learn from nature you have to put aside self and become nature. When you meet a member of another species, honor it and mentally ask permission to know it. Feeling love first, gently intuit how it feels to be another. Try to replace fear with love. Project love. All things are sacred because all are creations of the same God.

We need nature to nurture our hearts and minds which become desensitized by technology. We need technology because we have forgotten how to derive our existence from the earth, but that need also destroys serenity and peace. I believe there is no true peace in the world because peoples have lost the essence of peace within. This can be regained if we all practice going back to nature.

Parents must teach children the value of nature and how to be still long enough to experience this peace. We are in desperate need of this peace in our young. They must be taught the value of all life, to honor all life, and to thank each thing that gives its life that we might have sustenance.

Make an effort to get to places of nature in all seasons. See beauty in the shape of bare tree limbs. How marvelously they are shaped by wind and the struggle to reach the sun. Notice the placement of nests that are exposed by the absence of leaves. Intuit what it feels like to live in such a fragile abode when the north wind blows. Feel the icy wind blow. Examine the crystal paradise that is the result of sleet. See the reflection and refraction of sunlight perceived through ice. Know that beauty surrounds you at all times. Don't miss the chance to see it. [H]

*Love and light,  
Norvalee*

Answers from page 4

1. d. Many nutrients have anti-oxidant effects although vitamins, A,C, and E seem to be leaders in that field.
2. b. Although supplements can be beneficial, the best way to get an abundance of antioxidant nutrients is through eating a variety of whole foods (foods that have not been manufactured or highly refined).
3. a. 99% of the calcium in our bodies is in the bones and teeth, and magnesium and potassium may help prevent osteoporosis.
4. c. Sources for chromium include: brewer's yeast, whole grains, and black pepper.
5. a. Zinc has many influences on many areas including: skin, endocrine system, and wound healing.
6. b. This is a false statement on two counts. Silicon is the most abundant mineral and a zinc deficiency can cause white spots on the fingernail.
7. d. In clinical trials on the effects of GABA, it was found that GABA reduces muscle tension in 7 minutes. It helps reduce pain, stress, anxiety, and addictions. H

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## Lift weights, lose weight

For years we have been told that aerobic exercise was the best way to lose weight. You had to get in your mileage running or pounding the boards doing aerobic dancing to peel off pounds.

Now there is a proven better way—lifting weights. Wayne Campbell of Tufts University put 12 healthy but sedentary men and women between the ages of 56 and 80 through 12 weeks of weight training. They did leg lifts, curls, and chest presses three times a day.

He found that with weight lifting one's metabolism stays up long after you are through exercising. "Even when you're just sitting around, you're using more energy," he said.

## INSIDE THIS MONTH'S ISSUE . . .

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### Health Hunter

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