Nutritional medicine for the new millennium
Richard Lewis

For the last ten years, and maybe even longer, Hugh Riordan, M.D., has said about The Center, “We practice non-acute care medicine the way it will have to be practiced by the year 2000 because we just cannot afford to continue what is being done today.”

“...1 in 4 Americans... may be using unconventional therapy in addition to conventional medicine...”

We are beginning to see the winds of change blowing. Standard medicine is beginning to look at nutritional medicine with more interest and less contempt.

James Gordon, M.D., wrote in the November issue of American Family Physician, “Twenty years ago, ‘alternative medicine’ was an obscure term, and the techniques to which it referred were all but unknown to the vast majority of American physicians and their patients. Today, many alternative therapies are widely used.”

In 1990, David Eisenberg, M.D., and colleagues surveyed the American public about the use of unconventional medical treatment, as they called it. They spent a year studying the data and writing a paper that appeared in The New England Journal of Medicine in January of 1993.

Eisenberg found that, “Roughly 1 in 4 Americans who see their medical doctors for a serious health problem [chronic illness] may be using unconventional therapy in addition to conventional medicine for that problem, and 7 of 10 such encounters take place without patients telling their medical doctor that they use unconventional therapy.”

“The most frequent users are educated, upper-income, white Americans in the 25-to 49-year group,” wrote Edward Campion, M.D., in an editorial that appeared in the same issue of the journal. “The reason people go to non-medical practitioners is simple: they want to feel better,” he added.

Dr. Gordon has some suggestions for family physicians concerning alternative medicine. For openers, “It is very important for family physicians to convey a sensitive acceptance of and an openness to all of their patients’ concerns, including their patients’ interest in alternative therapies. This open and sensitive attitude demonstrates the caring and respect that the patients want—and have every right to expect.”

This is crucial in this time of HMO’s, PPO’s and Managed Care that tend to limit the amount of time a standard doctor spends with a patient and the information he or she can give the patient.

It is much like a lady who called The Center the other day and said, “You do have compassionate doctors there that will listen to me and not have their hand on the door knob ready to run out of the room after a couple of minutes?”

The time and caring attitude that the nutritional physician gives patients such as those at The Center is what patients are looking for in today’s market. This alone will cause an increased

continued on page 2
Nothing new under the sun

A fascinating “new” realization is dawning on our civilized world: nutrients make a difference! A slew of recent studies on vitamin E, for example, have been published in big name journals, like The New England Journal of Medicine.

Our patients are coming in to report that their cardiologists are starting to recommend they take their daily E along with the now perfunctory aspirin. The scientific support for zinc lozenges for colds has resulted in most local suppliers being sold out in the early part of this wintry season. Such sources as the Internet can be searched to get the latest nutritional information.

This, of course, does not mean that nutritionally oriented medical care is now being universally acclaimed and welcomed. Cynics and naysayers still abound. And rightly they should. Our capitalistic market place is renowned for its amazing ability to blow things out of perspective in order to make the quick sale. Novice nutritionists will lose patience with the slow, “healing from within” nature of rational nutritional therapy.

In spite of all the hoopla, the truth will quietly find its way. The biological truth of the matter is simple: living organisms are cellular in their fundamental nature. Cells do not run on calories alone. The pleasures of non-whole, non-cellular foods will be seen more for their nutritionally delusive and destructive nature. Man-made chemicals, like pharmaceuticals, will never substitute for the life-sustaining biochemicals found in whole foods.

Once we as a culture grow up from our childish fascination with sugar and other non-whole food cravings, the greater availability and higher prioritization of healthy choices will dominate our grocery shelves.

Is any of this really new? Hardly. The father of medicine, Hippocrates, said it best, over two thousand years ago: “Let food be thy medicine, and medicine thy food.”

Nutritional Medicine
by Ron Hunninghake, M.D.

growth in the field of nutritional medicine until, as Gordon suggests, standard doctors such as family physicians embrace it. And the family doctors will probably be the first to do this.

Gordon further suggests, “It is important to begin now to integrate some aspects of alternative medicine into family practice. Mind-body interventions, as well as physical exercise, diet and nutrition will complement any physician’s work.”

To make this possible, insurance companies, including Mutual of Omaha and Blue Cross/Blue Shield of Washington and Alaska, have begun offering special plans that cover alternative therapies. When other insurance companies see the economic advantages of nutritional medicine’s approach to healing they will join the parade.

As there is a growth in openness between patients and their doctors due to the latter’s acceptance of nutritional medicine and a continued increase in patient satisfaction because of their receiving treatment through nutritional medicine, we will see nutritional medicine becoming more mainstream in the new millennium.

In a recent report in The Journal of the American Medical Association, Catherine Hoffman, ScD, wrote, “we believe that the sheer number of Americans with chronic conditions [est. almost 100 million in 1995] and the health care costs they incur have reached a threshold whereby both health care providers and policy-makers are not only facing health care financing issues, but they must deal with how to transform our health care delivery system so that it better meets the needs of those living with chronic conditions.”

The trend is showing Dr. Riordan to be right. There will be an increasing acceptance of nutritional medicine because it works—as Hoffman points out, and we cannot afford to continue the way we are headed.
In-line skate safety

Did you get a pair of in-line skates, sometimes called roller blades, for Christmas? Or maybe you know someone who did.

Did you, or they, get a set of wrist guards and elbow pads to protect against injuries when using the new skates?

If not, you should either buy or recommend they get wrist guards and elbow pads as minimum protection before venturing out on the skates again, according to Richard Schieber, M.D., M.P.H., and colleagues at the National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, Atlanta, GA.

The next key point is to wear them when skating. Schelter stated in The New England Journal of Medicine, "that wrist guards and elbow pads afforded skaters a high level of protection, but that their rate of use among injured patients was relatively low."

Wrist injuries account for 32% of all in-line skating injuries; 25% of all injuries are broken wrists, leaving only 7% for sprains and scrapes. These are injuries serious enough to go to the hospital emergency room.

Another interesting fact from the research was only 7% of those showing up at hospital emergency rooms wore complete safety equipment including helmet, wrist guards, elbow pads, and knee pads, while 46% of the injured skaters wore no safety equipment of any kind.

Elementary school kids accounted for more emergency department visits for in-line skate injuries than all other age groups combined—from junior high school through adults.

Safety equipment is widely available and reasonably priced for children as well as adults using in-line skates. If you skate, suit up. The odds are certainly in your favor if you do.

What concerns patients most?

• Losing weight
• Stress
• The effects of smoking
• Diet
• Psychological well-being
• Fitness

Hippocrates, October, 1996

HEALTH HUNTERS AT HOME

Ten years behind us, the world ahead

It is hard to believe that we have been publishing Health Hunter for ten years. Time flies when you have fun, and each year each issue has been fun.

A lot of change has taken place in the medical world in these ten years, along with many changes in Health Hunter.

I remember when we started Health Hunter. We would have to dig through the medical journals to find enough papers published relating to nutritional medicine so that we could loosely fill six pages. At that time The Center was well launched into our second decade of existence.

Dr. Riordan used to say that when The Center first started we were considered "totally quack" by the rest of the medical profession. By the time of Health Hunter's debut, he remarked that The Center was approaching "1/2 quack."

As the years went on, more and more articles and papers that applied to nutritional medicine appeared in the journals. We started filling six pages, then Health Hunter grew to eight pages.

Health Hunter took on a new format to make it easier to read as we added more information. Regular columns by Center staff were added for diversity and interest.

We added a second color, too, making it more appealing to pick up and read. For our tenth anniversary year, the familiar blue gives way to a more regal burgundy gracing the pages.

The antioxidant revolution came into its own in the first ten years of Health Hunter, which made a big change in the number of medical journal articles that covered some aspect of nutritional medicine. The antioxidant nutrients, for those of you new to Health Hunter, are vitamins A, C, E, and beta carotene and the trace minerals selenium along with zinc and magnesium, primarily.

It was almost as if nutrients had been invented overnight as scientists battled over the relative merits and demerits of a particular antioxidant.

Health Hunter continued to evolve as we discovered new ways to increase its readability and content.

Now, what lies ahead for Health Hunter in particular and nutritional medicine in general?

My crystal ball isn't as clear as I would like it to be, but a few images are coming into focus.

As you read in the lead article, we can see increasing cooperation among physicians in standard practice, their counterparts practicing nutritional medicine, and other types of alternative medicine.

This increased cooperation and contact will result in even more articles in the medical journals about the effects of nutrition, nutrients, and other forms of alternative treatment as standard medicine works to make sense of a new way of treating chronic disease.

Many researchers have stated that chronic disease is the most rapidly growing part of medicine and also the most frustrating for standard physicians because all of their training has been in the acute care mode.

The developing partnership between standard and alternative medicine will mean two things for Health Hunter and its readers. First, the proliferation of information about nutrition and nutrients will require the Health Hunter editorial staff to be even more diligent in bringing you the information that is most timely and important.

Secondly, Health Hunter will become even more valuable to its readers as it helps guide them through the ever growing maze of difficult to decipher information and technical jargon.

This is our commitment to you, the readers of Health Hunter. While you stick with us we will stick with you and help you through the maze.

It will be a wild ride at times and smoother at others, but it will be exciting for all of us.

—Richard Lewis
INFORMATION WORTH KNOWING

When you want to build something do you want to start with the best building materials available or with products that are defective? Of course you want to build with good building materials so your creation can function as needed. Is what you put into your body any less important so that you can meet the needs of your day? Sometimes we act like what we eat has nothing to do with the way we feel. In Antioxidants: Your Complete Guide by Carolyn Reuben, we once again take a look at the nutrients that we require to allow us to do what we need to do and want to do with energy and enthusiasm.

It seems that one of the jobs of antioxidants is to help to keep free radicals under control. A Free radical is an unstable

- a. fugitive out on bond
- b. radical with a price on their heads
- c. molecule that reacts with other molecules in a destructive way
- d. all the above

Antioxidants are nutritional substances that can

- a. stop free radicals from developing
- b. stop the cascade effect of numerous free radical reactions
- c. repair damage caused by oxidation
- d. all the above

Free radicals are produced in the normal process of cell metabolism.

- a. True
- b. False

When oxidation begins in living tissues, the body makes a substance to surround and destroy the oxidants. These substances are called

- a. majoroxidants
- b. antioxidants
- c. death oxidants
- d. none of the above

All free radicals are destructive to our bodies and should not ever be useful.

- a. True
- b. False

The antioxidant defense system works by

- a. keeping oxidants from forming
- b. intercepting oxidants that are formed and stopping their chain reactions
- c. repairing damage caused by oxidants
- d. all the above

The antioxidant defense system is made up of

- a. enzymes
- b. bacteria
- c. nutrients
- d. all the above

Case of the month

This 27-year-old female came to The Center having had severe depression since 1991. In addition she had persistent acne which was treatment resistant.

Her other major complaint was recurrent vaginal yeast infections. Associated complaints were fatigue, anxiety, panic disorder, sexual dysfunction, PMS, dry skin, sleep disorder, gastric pains, bad breath, mouth sores, muscle weakness, waking up tired each morning, and craving sweets and alcohol.

Her test results showed low normal white blood cell vitamin C saturation, low normal KNA ratio, elevated Candida IGG titer, elevated histamine level, and low normal red blood cell zinc. Her body temperature reading averaged in the low to mid 97 range.

The patient was treated with melatonin; paxcil, 20 mg. daily; selenium, 200 mg. daily; zinc 100 mg. a day; niaplex, 500 mg., one per meal; vitamin A, 25,000 I.U. twice daily; and vitamin C, 3,000 mg. per day. In addition she was advised to use retin-A gel at bedtime.

She was started on a low dose (1/2 grain) of natural thyroid which was slowly increased over the next couple of months. Vitamin E was added at 400 units per day and chromium, 200 mcg. twice daily.

The patient was also advised to avoid the foods that were positive on her cytotoxic test. These were approximately 20, including all the sugars.

The patient progressed slowly but after two to three months her cravings left, her anxiety markedly improved, and her depression completely disappeared.

Her skin was also slow to resolve but about six months into the therapy she had significant resolution of her acne. Her PMS symptoms also cleared and she had had no further vaginal yeast at subsequent appointments.

The last contact with the patient was through her local physician. This physician called to inquire just how The Center was able to use the natural therapies instead of drugs to significantly improve the clinical status of this young lady.
Nutritional aging

Studies show that certain nutrients tend to lengthen our life span when we combine them with an exercise program and a good lifestyle.

If, early on, we develop a good nutrition program consisting mainly of whole foods—and many of them raw, if possible—and definitely not overcooked, we should live longer.

Remember those boxes of candy and cookies your friends and relatives gave you at Christmas? That was very kind and generous of them to do this, but do try to sample them sparingly.

We need to get a good night of restful sleep (at least six to eight hours) and develop a good exercise program that is right for us. In another part of Health Hunter, there is an article showing that seniors can gain more stability and develop a good exercise program through regular exercise. And we may be able to lengthen our life span, too. Each individual needs to determine what exercise is right for them today.

Also, we need to eliminate stress from our everyday lives. As we get older, it is good to form a habit of listening to soothing music. I find if I put a disc on my CD player at bedtime, I don’t hear “click” when it is finished like I do with cassette tapes, thus I drift off to a quick and restful night’s sleep to arise at 4:00 a.m. ready to start a new and busy day.

You will find that the “cure-all” for longevity hasn’t been found as yet, but we can each find a good nutritional and exercise program that is right for ourselves and thus have some happy, pleasant days left in our allotted time.

The only real certainty in life is, if we can avoid accidents along the way, we will grow old and die. Nutritional aging will help make this as successful as possible.

—Nelda Reed

Mental Medicine

by Marilyn Landreth, M.A.

Can negative thoughts ever be useful?

We have learned that thinking positive thoughts and having a positive attitude can be beneficial to our health. Did you know that negative thoughts and feelings can also be healthy? It is what we do with those thoughts and feelings that matters.

Ruth Cohn Bolletino wrote in a recent issue of Advances: The Journal of Mind-Body Health, “Natural emotions such as anger, fear, grief, and love, for which we appear to have an innate capacity, are responses to our inner and outer environment. So long as such emotions are acknowledged and in some way expressed or dealt with, they provide information that aids survival and helps us experience what life offers.”

Natural anger can help us set boundaries or make other necessary changes. Repressed anger can result in hostility, powerlessness, and other problems.

Natural fear is a survival reaction alerting us to danger and giving us the strength to fight or flee. Distorted fear can lead to phobia, anxiety, or needless worry.

Grief is felt whenever there is a separation, whether from death or in the hundreds of other smaller separations that we experience. Grief that is felt and expressed can “soften and end.” Grief that is not dealt with can be distorted into depression or self-pity.

When we experience negative thoughts or emotions, if we can just learn to use the power they have to benefit us rather than distort those feelings into something harmful we will all be further along the road.

Food of the Month

by Donald R. Davis, Ph.D.

BROWN RICE is similar to whole wheat in color and nutrients. Unfortunately, usually it is processed like wheat to remove its bran and germ. White rice lacks most of the vitamins, minerals, trace minerals, and fiber shown here.

Cooked brown rice has enough of all the hundreds of other smaller separations that we experience. Grief that is felt and expressed can “soften and end.” Grief that is not dealt with can be distorted into depression or self-pity.

When we experience negative thoughts or emotions, if we can just learn to use the power they have to benefit us rather than distort those feelings into something harmful we will all be further along the road.

As I grow older, I pay less attention to what men say. I just watch what they do.

Andrew Carnegie
Beat The Odds Update

Vitamin E deficiency in people with angina pain

Vitamin E continues to make it into mainstream research. In this case, Kunihisa Miwa, M.D., and associates in Japan, found that people who had low plasma vitamin E often had angina pain.

Coronary artery spasm is often a cause of many other heart problems related to a reduction in blood flow to the heart muscles. Oxidation of low density lipoprotein (LDL) plays an important role in the development of atherosclerosis, which often is the cause of the reduced blood flow.

Enter vitamin E. "Oxygen free radicals seriously damage arteries in animal models as soon as the physiological radical scavengers, such as vitamins E and C, glutathion, and ubiquinol 10, are exhausted. Vitamin E is the most important [blood] lipid-soluble antioxidant and the resistance of LDL to oxidation has been shown to be increased by oral intake of vitamin E," wrote Miwa in a recent issue of the journal Circulation.

He went on to point out that, "Vitamin E is potent and is the most readily available naturally occurring, lipid-soluble antioxidant carried in LDL."

In the laboratory, research has shown that vitamin E is very effective in keeping platelets from aggregating, or clumping, in the arteries. The sharp rise in lipid peroxidation (cholesterol oxidation) normally associated with platelet clumping is greatly reduced by ample vitamin E, according to a report by Steiner and Anastasi in the Journal of Clinical Investigation. The platelets become slippery and don't stick to the walls of the artery and to themselves to cause the artery blocking blood clot.

Researchers, such as Miwa's group, are finding more reasons why vitamin E is the heart-friendly nutrient.

Home workouts found excellent

The research is mounting every day that older Americans, through training, can improve balance and stamina while burning fat and building muscle.

But most of this research was done in a gym. Allen Jette, and his colleagues at Boston University, wanted to find out if seniors between the ages of 66 to 87 could get the same advantage by working out at home with simpler equipment and if they would stick with the exercise routine.

Armed with simple, elastic exercise bands and videotaped exercise routines that build strength in their arms, legs, and torsos, he set out to answer these questions. One group of his subjects worked out at home using his system three times a week for 12 to 15 weeks.

At the end of the study, he found that those working out at home completed 60% of the workout on the video. From this, they increased their leg strength as much as 20% and 10% in the shoulders.

The results were slightly less than the gains found in supervised studies but were impressive. And, the people did not have to travel to the gym.

Smoking linked to LDL oxidation and early coronary disease

In smokers, low density lipoprotein (LDL) oxidizes nearly 40% faster than in non smokers, James Dwyer, Ph.D., told an American Heart Association Conference on Cardiovascular Disease, Epidemiology and Prevention recently.

Dwyer, and colleagues at the University of Southern California, Los Angeles, may have found the link between smoking and heart disease.

In addition to initiating heart disease through plaque buildup in the arteries, cells containing excess amounts of oxidized LDL cholesterol can cause plaque ruptures and promote damaging blood clots that occur in later stages of heart disease.

CENTER UPDATE

Chronic disease, sustained illness—the numbers rising rapidly

Standard medicine calls it chronic disease. At The Center it is referred to as sustained illness. The difference is standard medicine works with chronic disease from the model of acute care medicine. The Center looks for the underlying factors that cause the illness.

By either definition, this type of disease is on the rise, according to Catherine Hoffman, ScD, and her colleagues at the University of California, San Francisco.

History shows that chronic health conditions have been the leading public health concern since 1920. It has grown rapidly since. Today, Hoffman writes in The Journal of The American Medical Association, "We estimate that the number of persons with chronic conditions in 1995 was almost 100 million."

Further, Hoffman writes that, "The majority of persons with chronic conditions are not disabled, but are living normal lives. However, they live with the threat of recurrent exacerbations, higher health care costs, more days lost from work than others, and the risk of long-term limitations and disabilities."

She points out that our health care system is largely based on the acute care model and often fails to meet the needs of those with chronic conditions.

By contrast, The Center offers a model that is both cost effective and geared to properly handle this type of sustained, or chronic, illness.

This model is based on nutritional medicine. In this model, we work with each person because they are special, unique, and different. And by working with each individual this way, we are able to find out what she or he needs and to custom tailor that individual's route back to health.

It is a model that will work for the start of the next millennium, as well as right now.
c. The unstable molecule is usually an oxygen molecule. In our body it is called “free” because it is missing an electron.

d. These nutritional substances can also repair damage caused by lipid peroxidation.

a. The ordinary task of taking in nutrients, repairing damage, and disposing of wastes can produce free radicals.

b. Because our bodies suffer all kinds of insults and over use, the natural antioxidants can be insufficient unless our daily diet is rich in fruits, vegetables, and whole grains.

c. Oxidants are used by our immune system as a form of defense against invaders. Our white blood cells bombard the invader with an oxidative burst of superoxide free radicals and hydrogen peroxide until it dies.

d. Antioxidants also clean up and replace molecules that have been damaged, removing undesirable substances generated by its activities.

d. While intestinal bacteria are not considered antioxidants, as part of the defense system they may keep decomposing bacteria from becoming oxidants.

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Video Tapes: Regular Price—$19.95; Health Hunter Price—$17.95

**ANTIOXIDANTS: YOUR COMPLETE GUIDE**
by Carolyn Reuben
We read or hear about antioxidants all the time in the news lately. But what are antioxidants and how can they help us prevent disease and strengthen our immune system. This book gives you the latest information and best sources of antioxidants. Softcover.
Regular price: $12.95
Health Hunter price: $11.66

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**COLD & FLU SEASON—GET READY!**
with Ronald Hunninghake, M.D.
As antibiotic resistance continues to be a growing problem, more scientific attention is being given to the prevention of colds and flu. These viral infections can lead to more severe secondary bacterial infections. Nutrient and lifestyle choices can help bolster your natural immunity at this time of higher incidence of infection. Audio cassette & video tape.

**PARASITES: WHAT EVERY PERSON SHOULD KNOW**
with Yiming Li, M.D. & Neil Riordan, P.A.
Parasites are not just a problem of the tropics. They are here in the center of the nation and many people have illnesses because of them. Learn from the man who developed such a unique technique to detect a type of parasite that the method was patented. Also hear some of the more interesting specimens found by our parasitologist. Audio cassette & video tape.

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### Upcoming Events... 

#### JANUARY

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#### FEBRUARY

Lunch & Lecture Classes:
1. Know Your Nutrients: Gingko
2. RECNAC Cancer Research Update
3. Know Your Nutrients: Folate
4. Natural Options for HRT Part II
5. Nutritional Therapy for Diabetes

### OK to eat shrimp if concerned about cholesterol

Worried about getting too much cholesterol from eating shrimp? Well, worry no longer, says Elizabeth De Oliveira e Silva with the Laboratory of Biochemical Genetics and Metabolism at Rockefeller University in New York. She found that HDL cholesterol, the good guys of the cholesterol family, showed a greater percentage of increase than did LDL cholesterol, the bad guys, when eating shrimp. “Moreover, shrimp consumption decreased [triglyceride] concentrations significantly,” she added.

One reason for this positive effect from eating shrimp is “poorly absorbed noncholesterol sterols in shrimp may compete with cholesterol for absorption,” she wrote in The American Journal of Clinical Nutrition.