

# Health Hunter<sup>®</sup>

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N E W S L E T T E R

NOV/DEC 2000

## Prostate health

James A. Jackson, Ph.D.

**W**hat do Arnold Palmer, Bob Dole, Jerry Lewis, Richard Petty, and thousands of other men have in common? They all have suffered from prostate cancer! This statistic is not unusual, as the prostate is said to be the most diseased organ in the male body. As Dr. Bruckman, executive director of the American Foundation for Urologic Disease, says: "men barely know how to spell prostate, let alone where it is or what it does." He also stated that men have a greater chance of something going wrong with their prostate than with any other organ in their body.

### *Men in Italy have 60 percent less incidence of prostate cancer than men in the U.S., England, and Ireland.*

What is the prostate? It is a small, walnut-shaped gland located at the base of the urinary bladder. It produces prostate specific antigen (PSA), an enzyme that is involved in semen production. If a man lives long enough, he is going to have prostate problems. It is a natural consequence of aging. Some of the problems may be significant. Some of the problems may be noncancerous and include benign prostatic hyperplasia (BPH).

BPH is a noncancerous, progressive enlargement of the prostate and affects about 25 percent of all American men 50 years of age and older. If left untreated, BPH can cause acute urinary retention, bladder infection and may eventually require surgery. Pros-

titis, another disease of the prostate, is an inflammation of the gland that affects millions of American men.

The most serious consequence of prostate disease is prostate cancer. About 180,000 men this year (about one man every three minutes) will be diagnosed with prostate cancer and 34,000 will die from the disease. It is increasing at a rate of about 6.4% a year among men 59 to 79 years old. The highest increase of 7.7% is in men 60 to 69 years of age. For a 50-year-old man, the estimated lifetime risk for prostate disease is 42%; the risk of clinical disease is about 10%; and the risk of death is about 3%. If your father or brother had prostate cancer, then your chance of getting it is twice that of men with no family history of prostate cancer. African American men have more prostate cancer than Caucasians, while it is least common among Asian-American men.

What can you do to help improve your chances of not getting prostate disease? It is recommended that all men over 40 should have digital rectal examination as part of their yearly physical, and those over 50 should have a yearly blood test for PSA (prostate specific antigen).

One theory suggests that "free radicals," or oxidants cause many degenerative diseases (including cancer). Therefore, it is important that you maintain an adequate level of antioxidants in your body to neutralize these "oxidants." One important way to do this is through your diet. Men in Italy have 60 percent less incidence of prostate cancer than men in the U.S., England, and Ireland. It is thought that this finding is related

*continued on page 2*

## Vitamin C may lower stroke rates

People with high levels of vitamin C in the blood have significantly lower stroke rates, reported Tetsuji Yokoyama, M.D., in a recent issue of *Stroke: Journal of the American Heart Association*.

The researchers followed 880 men and 1241 women for 20 years. These were divided into four groups according to their blood levels of vitamin C.

"The risk of stroke was 70 percent higher among those in the lowest quarter than those in the highest," Dr. Yokoyama said.

High concentrations of vitamin C in the blood even helped participants with other risk factors such as heavier alcohol consumption, smoking, or lower physical activity. These risk factors did reduce the benefit somewhat.

Yokoyama said that screening for vitamin C levels may eventually be a good idea, but not now. The Center believes vitamin C levels are a good idea and could be important in preventing strokes. EH

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# Nutritional Medicine

by Ron Hunninghake, M.D.

## What's the rush?

The diagnosis of cancer comes as a world-shattering shock for most patients. Living in the silent fear that someday our turn would come, we all do our best to deny that it could ever happen to us or to one of our family members. Then when a troubling symptom persists or a cancer screening test is suspicious, we tell ourselves it is just another false alarm. Stubbornly we hold to the idea that "it just couldn't happen to me." Finally, the irrefutable is placed squarely before us. The unreal becomes real. The nightmare stares at us in broad daylight.

After being given the bad news, how strange it is to be told by the doctor that he or she is so sorry. They, of course, did not cause it. But they know the weight of our new burden. They know the implications of this powerful word. They, in spite of their medical power, are in equal awe (and probably carry their own hidden fear: "When will it be my turn to face this?")

And in this whirlwind of shock and fear, the newly diagnosed cancer patient is extremely vulnerable. Their doctor is quick to assert: "We need to do surgery right away." "Let's get the chemotherapy set up as soon as possible." And the cancer victim is more than agreeable. "Get that thing out of me!" "Kill it!" "I don't care what you do, just get rid of it." All of this is understandable from a feelings viewpoint. But is it scientific? Does the cancer pose an immediate threat?

There are newly diagnosed cancers that do pose immediate health risks. Brain tumors can cause brain swelling and seizures. Bone tumors can cause pathologic fractures. But most tumors are relatively slow growing. Many breast tumors have been growing for 5-10 years before they are discovered. Prostate cancers are commonly found in the autopsies of older male patients with no diagnosis having been made prior to death.

So, what's the rush? Scientifically there often is no rush. Irrational fear drives most quick decisions. Rather than taking a careful look at the tumor's medical statistics, in light of their own age, life expectancy, and immune status, most patients abdicate their power of choice. "It's beyond me." "I'm not an expert." So the path of least resistance becomes expediency, with total acceptance of the usual modes of treatment: surgery, radiation, and chemo.

The decision of how to best treat each individual's cancer may be the single most important strategy they will ever map out. It is best done when fully informed, in the light of clear scientific data. Hopefully, the emotional shock will have passed, and a reasonable review of all alternatives, both conventional and complementary, would have been undertaken. In this situation, patience and intelligence are the better part of valor, not fearful haste. H

## Prostate health—Continued from page 1

to the amount of tomatoes and tomato products Italian men eat.

Red tomatoes (not yellow ones) contain a high percent of the fat-soluble antioxidant lycopene. Ten studies reported data on the relationship between tomato or lycopene consumption and prostate cancer risk. All studies showed a significant risk reduction in prostate cancer for all groups with the highest intake of red tomatoes and lycopene than those with lower intakes. Therefore, a diet high in fruits and vegetables, especially tomatoes, along with regular

check-ups by your physician may help you delay the onset of prostate problems for many years.

It has been shown recently in England that aspirin could block a protein, COX-2, that is known to help promote cancer growth. There are several drug companies now producing new COX-2 inhibitors that may protect against both prostate cancer and colon cancer. The authors of the study were cautious in recommending that people take aspirin because of "the potential for bleed-


*continued on page 3*

ing problems or ulcers.

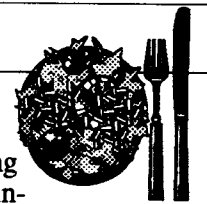
Based on these findings the author of this article has added an aspirin a day to his supplement list. He would rather have a bleeding problem or an ulcer (which would be rare) than prostate cancer! He also eats a lot of tomatoes and takes lycopene, 30 milligrams a day. The normal PSA range is 0.0 to 4.0 nanograms/mL. Not to brag, but the author had a recent PSA test performed and it measured 0.55 nanograms/mL. Not bad for a man the ripe old age of 60!

It is also a good idea to have blood tests done to see how much of the prostate protective antioxidants you have in your body. These tests can be performed at the Bio-Center Laboratory with the Prostate Health Panel. No doctor's orders are required and confidential results will be mailed to you with ways to improve your levels if low.

The Prostate Health Panel will measure vitamin C (an important water-soluble antioxidant), vitamins A and E (two important fat-soluble antioxidants), and urine vitamin C. A lycopene level will also be determined, as it has been shown that a high level of lycopene may help prevent prostate cancer. Two minerals, zinc and selenium, are also measured in the red blood cells. The red blood cell results are a good indicator of the tissue levels of the substances. Zinc is an important part of the antioxidant enzyme that destroys a certain type of free radical called superoxide. Selenium is an important part of another free radical fighting enzyme called glutathione peroxidase which breaks down hydrogen peroxide. In one study, it was found that patients given 200 micrograms of selenium a day had about a 56% reduction in various types of cancer.

If you have no digestive problems and would rather eat than take pills, some star foods for you to include in your diet are green leafy vegetables, red fruits, tomatoes, watermelon, red grapefruit, whole grains, brown rice, citrus fruits, and juices. All contain vitamin C, beta-carotene, lycopene, lutein, fiber, folic acid, potassium, and phytonutrients. 

## HEALTH HUNTERS AT HOME



### Eating a better way

Often, when I leave the grocery store I stop by after work, I pass a fast food place with a long line of cars in the drive-through lane. I am always amazed at the number of moms with a carload of children getting something to eat while rushing to some little league game or a school performance. They may stop by a dairy bar for ice cream on the way home, as well.

Or there is the family in their van with the dad reaching out the window to get a load of sacks and boxes for the family to eat that evening as they rush to their destination.

According to three studies in the October issue of *The American Journal of Clinical Nutrition*, many people in the U.S. are on the slippery slide to low nutrition. Americans eat "energy-dense, nutrient-poor" foods. Those studied in the three cases mentioned were adults, but the fast food way of life starts early.

For instance, the first article looked at almost 45,000 men who were 40 to 75 years of age. The researchers discovered that they could divide the men into two food groups—those who ate the "western diet" that was low in fruits and vegetables and high in beef, and those who ate the "prudent diet," so called because it was higher in fruits and vegetables and substituted fish and chicken for more of the red meat.

The researchers found that the "prudent diet" reduced the number of heart attacks while those on the "western diet" had more heart attacks—both nonfatal and fatal. This was impressive.

The second study followed almost 40,000 women for five years and checked for cardiovascular disease and heart attacks, both nonfatal and fatal. The results were interesting: "In this large-scale prospective cohort of women, higher intakes of fruits and vegetables were associated with lower risk of [cardiovascular disease] and [heart attacks]," the researchers said. These findings support current dietary recommendations to increase the intake of fruits and vegetables as a primary measure against cardiovascular disease.

Both of these studies recommend eating more fruits and vegetables and

considerably reducing the red meat while increasing fish and chicken in your diet. These recommendations are for older men and women, but the habits could be instilled in the young, as well.

The third study also brings the message about increasing the number of fruits and vegetables in your diet while reducing the amount of red meat. In this study, the researcher looked at consumption of what he called "energy-dense, nutrient-poor" foods. Almost 1/3 of what many Americans eat are these types of foods.


These foods display increased high energy intake, marginal micronutrient intake, poor compliance with nutrient- and food-group reliance, and low serum concentrations of vitamins and carotenoids. In short, these are junk foods.

Energy-dense, nutrient-poor foods tend to substitute, rather than supplement, the more nutrient-dense foods in the American diet, the researcher concluded. This pattern leads to the above four problems plus low serum concentrations of HDL (high density cholesterol) and high serum homocysteine concentrations.

These three studies are convincing. When we eat the dismembered foods that are described as "energy-dense, nutrient-poor" foods, we fall behind the minimum daily requirements for nutrient intake and good health.

Let's compare this to eating from the other side—from the "high-nutrient, energy-low" side of eating.

An article in the *Journal of the American Medical Association*, which looked at the entire diet for almost 43,000 women, found that "women reporting dietary patterns that include fruits, vegetables, whole grains, low-fat dairy, and lean meats...have a lower risk of mortality," according to researchers.

When we eat lots of fruits and vegetables, replace red meat with more fish and chicken, and keep those snacks, candy bars, sodas, and desserts to an absolute minimum, we begin to get the nutrients we need from eating. 

—Richard Lewis

## INFORMATION WORTH KNOWING

Have you every considered all the many toxic elements in your life—toxins that you take in from the environment and the foods you eat as well as the ones that your body creates? Sidney MacDonald Baker, M.D., has written *Detoxification and Healing* to give you information to help you restore balance, harmony, and health. In his opinion, learning how to cleanse your body of poisons and learning the nutrients you need to help reduce those toxins, is the key to optimal health. The questions this month are taken from his book.

1 Cyberhealth is the application of general systems theory to medicine and has mostly to do with the approach one takes to understanding what has caused an event such as \_\_\_\_\_.

- a. symptoms or collection of symptoms
- b. lab tests
- c. signs
- d. all of the above

2 Doctors who follow a systems theory of illness take a broad path to understanding and treating the illness. They take a functional assessment where the \_\_\_\_\_ is the name not the cause.

- a. mother
- b. pulse
- c. diagnosis
- d. none of the choices listed

3 Balance means providing all the necessary elements to optimize the system and removing any interfering elements.

- a. True
- b. False

4 Detoxification is central to understanding the functional assessment in medicine because it is the biggest item in your \_\_\_\_\_ budget.

- a. biochemical
- b. genetic
- c. environmental
- d. health

5 Illness and disease will affect the body's \_\_\_\_\_ system and, if there is something wrong with that system, any other problem will be aggravated.

- a. alarm
- b. detoxification
- c. blood
- d. none of the above

6 Individuality is the key to understanding Dr. Baker's concepts of detoxification chemistry.

- a. True
- b. False

7 When we talk about food poisoning, germs always cause the toxicity, either ones that infect us or ones that leave their \_\_\_\_\_ in the food we have consumed.


- a. DNA
- b. calling card
- c. toxins
- d. all of the above

• FOR ANSWERS, SEE PAGE 7 •

## Vacations may improve your health

Taking a vacation may be more than just a luxurious pleasure. It may be good for your health as well, reported researchers in a recent issue of *Psychosomatic Medicine*.

For most people, stress is much

lower while on a vacation. People are less stressed, so they are more healthy, said the researchers. Vacations were more protective against death from coronary heart disease, a known stress factor, they added. So, just go and enjoy. 


## Exercise fights depression

Exercise works as well as a popular antidepressant drug, according to researchers in a study reported in the journal, *Psychosomatic Medicine*.

Duke University Medical Center researchers found exercise reduced or eliminated depression as well as Zoloft (a popular antidepressant) alone or Zoloft in combination with exercise.

"The present findings suggest that a modest exercise program...is an effective, robust treatment with major depression," the researchers reported.

The 156 adult subjects in the study volunteered to follow an exercise project for four months. The exercise primarily consisted of walking, riding a stationary bicycle, or jogging for 30 minutes, plus a ten minute warm up and a five minute cool down three times a week.


At 10 months from the beginning of the study, 133 patients remained in the study. The researchers found that exercisers were more likely to see the depression stay away. Only 8% of the exercisers saw the depression return, compared to 38% of those taking drugs or 31% taking drugs and exercise. 

## Older exercisers can gain, too

Older exercisers may gain strength just like younger athletes, if they work hard at it, researchers said.

"Elderly men cannot only tolerate these very high workloads, but will exhibit muscular changes similar to their younger counterparts," according to a research study reported in the *Journal of Gerontology*.

Among men ages 60 to 75, leg strength increased by 84% over 16 weeks of intense work-out matching that of men in their 20's who were regularly working out. Older exercisers increased their muscle fiber size as well—matching those of younger exercisers.

Although age may limit how much strength the exercisers can gain, researchers are unsure what these limits may be. So, if the doctor says it is O.K. to increase exercise, go ahead and do it. 

## Case of the month

A 41-year-old male first came to The Center in June of 1998 with a myriad of complaints. These included allergies, asthma, constipation, depression, gastritis, high cholesterol, irritable bowel syndrome, mild obesity, pain in his legs and knees, and pain in the lower back.

In addition, he had a mitral valve prolapse problem, a heel spur, fatigue, insomnia, and a history of peptic ulcer and myalgia. He had a lot of work to do for his first day.

Initially, he received an injection of magnesium which he repeated the two following weeks.

In August, he started on a morning nutrient shake made of a scoop of Ultra Clear Sustain, 1/2 tablespoon of fortified flax meal, a cup of frozen fruit, a cup of low fat milk, and 2 tablespoons of honey. In addition, he was started on Ester C, Fruit and Veggie Plus, black current seed oil, melatonin lozenge for sleep, Zinc Boost, glucosamine sulfate, and Fibroplex.

He continued on these and added grape seed extract, walking 1 to 2 miles a day for 4 or 5 days a week, Osteoprime, 5HTP, Niaplex, and, finally, green tea extract.

In October of 1998, he felt he was beginning to improve. His bowels were better and he had more energy. But he was not sleeping very well and had trouble getting to sleep. His back was better, but still not good.

In May of 1999 his back was great. He was tilling the garden and mowing the yard. There is a lot of sweating with the exertion, but it is worth it, he added.

Then in September of 2000 he said that the Ultra Clear had helped the gut. He feels much better there. He is riding a bike in addition to the walking he has been doing. He has had no hamburgers or Mountain Dew for two months and is sticking with the diet. He is sleeping good, his knees are better, his back is good; he is doing great.

Oh, yes, he added, he had sneezed a couple of times, but the allergies are no longer a problem. FH

# Herbal History

## Cottonwood, *Salicaceae*

The cold of winter is almost upon us and we long for the spring breezes rustling the new, fan shaped leaves on the cottonwood. All we have now is the winter winds moaning through the limbs. But it was more for the native Americans when the land was theirs.

From the bark, the Blackfeet made scrapings and boiled these scrapings to make a tea for the women of the tribe to drink just before childbirth. They would also make a tea from the bark to treat symptoms resembling heartburn.

In 1877, Valery Havard, the assistant surgeon and botanist for the Seventh Cavalry reported seeing areas in Montana where "whole groves of Cottonwood were seen with their trunks stripped by the Indians, who used the inner layers of the bark as a mucilaginous and anti-scorbutic."

The Lakota called the cottonwood

the "canya'hu" meaning peel off wood and "wagacan" described as take off wood. They fed the bark to their horses, according to D. J. Rogers.

The tribes of the upper Missouri river also placed mystical power to the cottonwood tree. Melvin Gilmore wrote in 1918, "The cottonwoods they found in such diverse situations, appearing always so self reliant, showing such prodigious fecundity, its lustrous young leaves in springtime by their sheen and by their restlessness reflecting the splendor of the sun like the dancing ripples of a lake that to this tree also they ascribed mystery...Even in still summer afternoons, and at night when all else was still, they could even hear the rustling of cottonwood leaves by the passage of little vagrant currents of air."

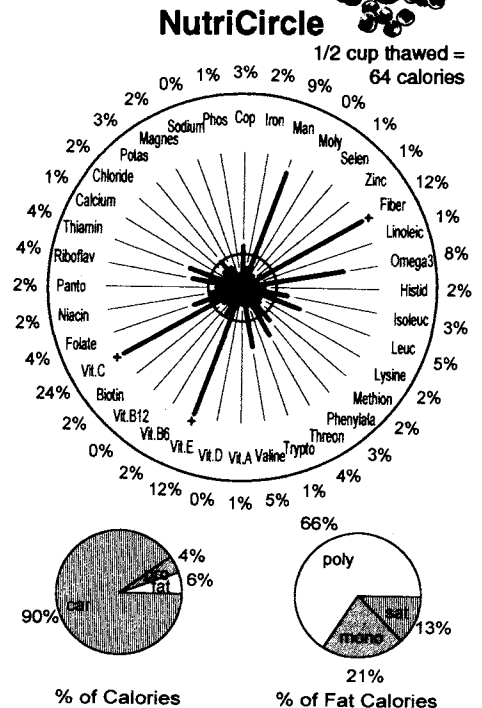
Source: *Medicinal Plants of the Prairie* by Kelly Kindsher FH

## Food of the Month

by Donald R. Davis, Ph.D.



**BLUEBERRIES** ranked highest in antioxidants among 41 fruits and vegetables in a recent study of their ability to neutralize oxygen free radicals. One antioxidant is the blue pigment, a potent flavonoid. In another study, a blueberry extract improved balance, coordination, and short-term memory in aging rats. Moreover, blueberries are similar to cranberries in preventing and treating bladder infections. Among 16 nutrients that are adequately supplied relative to calories, vitamin C, fiber, omega-3 fat, and manganese stand out. Try fresh or frozen blueberries plain, on cereal, in smoothies and fruit salads, and on pancakes and waffles.



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). FH

# Mental Medicine

by Marilyn Landreth, M.A.



## Is it failure, or is it success?


Roger von Oech has written books with catchy titles such as *A Kick in the Seat of the Pants*. He said, "Most people think of success and failure as opposites, but they are actually both products of the same process." Think about that for a minute.

Most of us are fairly judgmental about our lives. This was "good," that was "bad." When we think back on our lives and remember the times we considered "bad," could it have been a turning point that helped us become the person we are today? Now, we might not want to go back and relive that moment or even to do it again, but was it really all bad? Success and failure are two sides of the same coin.

If we can just live our lives doing the best we can do, taking some risks and really living our lives, not just attempting to keep from failing, then we will be a success. If we looked upon our

lives in a financial sense we could say that yesterday is a cashed check. It is already spent. Tomorrow is a promissory note that we can't spend yet. Today is all the cash we have to spend, so don't let it slip away. Buy something with the "cash" of life that will give meaning and joy to your life. Find the "success" in each "failure."

Success can be noticing the little things in life: a smile from a stranger; the laughter of a child; the wisdom that accompanies the wrinkles of an elderly person; the beauty of a flower, stars, sunset, or a bird's song; truly sharing the burdens and joys of life with another (be it a person or a pet); and, above all, gratitude that we have the life we have with all its imperfections and challenges.

Harvey Mackay said, "There is only one other lesson that success should teach us: be amazed by your own success as your friends are." 

## CENTER UPDATE

### Glucosamine sulfate gains scientific attention


It is completely backwards. People began giving glucosamine and chondroitin to their dogs and horses for arthritis in the early 90's and these animals did well. So animal owners began taking it themselves and they did well.

These owners began telling their doctors about how well they were doing by taking glucosamine for their arthritis and doctors began telling other patients that they might try using it to see if glucosamine and chondroitin might help them. These patients began to do better. So, now, doctors are looking at studies to see if glucosamine really is effective in stopping pain caused by arthritis.

Researchers began looking at studies done in Europe even before the animal owners in the U.S. began using it on pets and horses. They discovered that they had good results when they examined the effects of glucosamine and chondroitin for people with arthritis. But, the researchers believed that these studies were not well done and

they tended to exaggerate the treatments' efficacy.

A series of studies done here in the U.S. is trying to find definitive answers to how these two chemicals work. This month, in the journal, *Osteoarthritis and Cartilage*, is the largest study currently undertaken. When looking at how the glucosamine-chondroitin affected the pain and movement of the arthritic knees of 93 patients, the researchers found good recovery. "The treatment was significantly more effective than a placebo for pain and function," said Dr. Amal Das, the lead author and a joint replacement surgeon in Hendersonville, NC.

This and other research will most likely prove the usefulness of glucosamine and chondroitin in relieving the pain of arthritis and adding to the function of the joint—with probably some restrictions. But people have been using it for years and will probably continue. 

### Whole grains help elderly women


In reading the Harvard Medical School's consumer health information, I discovered some good news for me and my elderly friends. The study states: "Whole Grains Cut Stroke Risk in Women."

The findings based on data on 75,521 American participants in Harvard University Nurses Health Study, appear in Wednesday's *Journal of the American Medical Association*. The report was that those who ate the most whole grains—the equivalent of two to three slices of whole-grain bread daily—were 30 percent to 40 percent less likely to have an ischemic stroke than women who ate less than half a slice or the equivalent daily.

Strokes, America's third leading cause of death, afflict men and women equally but are more likely to be fatal in women. In the study, the more whole grains women ate, the less likely they were to have a stroke.

The findings suggest that "replacing refined grains with whole grains by even one serving a day may have significant benefits in reducing the risk of ischemic stroke," wrote the authors, led by Dr. Simin Liu of Harvard's Brigham and Women's Hospital in Boston.

Whole grains consumed by study participants included whole-wheat bread, whole-grain cereal, popcorn, wheat germ, oatmeal, bulger, and couscous. Refined-grain foods included sweet rolls, white bread, white rice, and English muffins. Dr. Liu said it is unclear how whole grains might prevent strokes, although they have been linked to lower levels of the so-called bad cholesterol that can clog arteries.

Again, I feel very fortunate to be a part of The Center. I use the granola that is sold here in the Gift of Health most of the time for my breakfast and, of course, I eat my lunch at the Taste of Health the four days that I work here each week. They bake their bread fresh daily using whole grains in their baking, and if I run short, I use a 7-grain bread from the grocery store. I have watched my consumption of bread and grains for the past 20 years. 

—Nelda Reed

Answers from page 4

- 1 d. Dr. Baker looks at illness being caused by a web of interactions rather than a single cause and effect.
- 2 c. It is just a name for the disease not the cause of the symptoms. "Your high blood pressure is caused by hypertension."
- 3 a. Nutrients are necessary elements and toxins are interfering elements.
- 4 a. It handles wastes from every organ and systems in the body as well as from the environment.
- 5 b. Detoxification is central to all systems. It provides a way to understand the functional aspects of each human being.
- 6 a. The concept of toxin includes a wide variety of familiar substances that may pose problems for some people and not others.
- 7 c. Most of the time when food spoils it is because of germs such as bacteria and molds that are present when they are fresh and continue to grow unless it has been treated to prevent or retard spoilage.

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### DETOXIFICATION & HEALING: The Key to Optimal Health

by *Sidney MacDonald Baker, M.D.*  
 This book is an introduction to detoxification and healing which leads to a better understanding of preventive medicine. Dr. Baker explains that illness is a complex problem composed of a person's belief system, environment and genetic structure, and the ability to defend against disorganizing forces.  
 Retail Price: \$14.95  
 Health Hunter: \$13.46

### BREAST BIOMARKERS

with *Ronald Hunninghake, M.D.*  
 Biomarkers for breast health help women assess their nutritional reserves in areas that studies have suggested are protective. For instance, lycopene levels are higher in the Italian population, presumably due to their high consumption of tomato foods. Lycopene helps to protect against cellular damage by free radicals that could initiate the neoplastic changes characteristic of tumor cells. Selenium, vitamin D, coenzyme Q10, and folic acid are also discussed.

### PHYTOCHEMICALS: Plant stuff that may play a role in slowing aging, reducing the risk of cancer, boosting immunity, and protecting the heart

with *James Jackson, Ph.D.*  
 Phytochemicals are naturally occurring chemicals found in plants that give them color, smell, and flavor. There are over 500 compounds now identified that, when working together, may have specific disease-fighting qualities. Some of these compounds (anthocyanins, genistein, resveratrol, lutein, etc.) are discussed as to their structure, disease-fighting capabilities, and best dietary source.

### CHOCOLATE: The "Best" Candy

with *Donald R. Davis, Ph.D.*  
 Several studies suggest that chocolate improves health and longevity. We should not be completely surprised because chocolate contains cocoa and often milk and nuts—all nutrient-rich whole foods. Cocoa and nuts are also rich in beneficial phytochemicals. These advantages should be weighed against the added sugar and possible adverse effects such as headache, heartburn, and acne.

• To Order, Fill Out the Form Below •

TITLE	AUDIO OR VIDEO TAPE <small>circle one</small>	PRICE	QUANTITY	TOTAL
Detoxification and Healing (book)		_____	_____	_____
Breast Biomarkers	audio video	_____	_____	_____
Phytochemicals	audio video	_____	_____	_____
Chocolate: The "Best" Candy	audio video	_____	_____	_____
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# Upcoming Events...

NOVEMBER				
Monday	Tuesday	Wednesday	Thursday	Friday
		1	2	3 Yoga NOV. 4 - OPEN HOUSE
6	7 Yoga	8	9	10 Yoga
13	14 Yoga	15	16	17 Yoga
20	21	22	23 Center closed	24 Center closed
27	28	29	30	

## DECEMBER

22 Center closed  
25-26 Center closed

## Vitamin C helps smokers, too

Vitamin C may reduce and restore myocardial blood flow (MBF) in smokers, according to a recent study completed by Philipp Kaufmann and co-workers at the University Hospital, Zurich, Switzerland.

Smoking is thought to cause oxidative damage to the endothelium of the arteries of the heart. The researchers used PET scans to look at the MBF of 11 heavy smokers and 8 nonsmokers at rest and during smoking. They repeated the scans after infusion of three grams of vitamin C.

In smokers, they found coronary blood reserves compared to baseline MBF were 21% lower during smoking than at rest. After the vitamin C infusion, the coronary blood reserves and MBF returned to normal in the heavy smokers, but showed no effect on the nonsmokers.

Health Hunter  
A Publication of The Center for the Improvement  
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3100 North Hillside Avenue  
Wichita, Kansas 67219 USA

RETURN SERVICE REQUESTED

- Prostate health
- Vitamin C may lower stroke rates
- Exercise fights depression
- Whole grains help elderly women

INSIDE THIS MONTH'S ISSUE