

# Health Hunter<sup>®</sup>

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N E W S L E T T E R

APRIL 2005

## Oh, my aching back

by Chad Krier, N.D., D.C.

If you suffer from low back pain, you are not alone. There are currently 75 million low back pain sufferers in the U.S. with 7 million new cases being diagnosed each year. This means that 8 out of 10 of us will experience back pain at some point in our lives.

Back pain can result from injury or trauma to muscles, ligaments, joints, bones, fascia, and intervertebral discs. However, back pain also arises from seemingly harmless repetitive motion events. In fact, non-injurious back pain is equal to back pain caused by trauma.

***I believe that one of the main culprits behind low back pain is poor sitting posture.***

Given the fact that low back pain occurs with about the same frequency in people with sedentary occupations as in those doing heavy labor, it appears that there is more to the picture than trauma alone. Indeed, I believe that one of the main culprits behind low back pain is poor sitting posture. There is a great deal of evidence to support this notion. In fact, a majority of patients with low back pain report an increase in pain when arising from a seated position. Further, an amazing 86% of low back pain sufferers have a loss of extension (bending backwards) range of motion secondary to poor sitting posture.

In poor sitting posture, the lumbar spine assumes a fully flexed position. This allows the low back (lumbar) muscles to become relaxed and

stretched. The ligaments of the back are now forced to take over the weight bearing stresses that were intended for the muscles. Over time the strained ligaments begin to weaken. What's the problem with weak ligaments? Glad you asked. Ligaments are responsible for holding the lumbar disks (water cushions of the spine) in place. When the ligaments become weak, they are unable to perform their job at full capacity and the disc may be allowed to bulge. The battle of the bulge ensues and causes pain by pushing on nerve tissue (ouch!). If the ligaments become so weak that they tear, then the disc may be allowed to herniate and really cause havoc. Herniation may lead to leg pain and bowel and bladder disturbances.

Picture your disc as a water balloon sandwiched between two bones. If you apply pressure to the front of the balloon (as in a stooped/flexed posture) the water will go to the back. If you apply pressure to the back of the balloon (as in a lordotic/extension posture) the water will go to the front. Repetitive flexed postures push the water backwards. If the ligaments responsible for holding the water in are weakened, you may spring a leak (bulge). If the ligaments are torn, you may blow a water main (herniation). Hence, it is wise to adopt healthy sitting postures that force the water to the front instead of the back of the spine.

If you really think about it, many of our daily activities are performed sitting, often in a flexed position: Namely, we sit when we eat, drive, watch TV, do computer or desk work, and during various meetings through-

*continued on page 2*


## To eat or not to eat breakfast

For years, we have heard people say to eat your breakfast, but they didn't give any concrete information on why.

Recently, researchers at Queen's Medical Center, University of Nottingham in Britain looked at eating breakfast vs. eating breakfast and cholesterol levels and insulin levels.

The researchers found that when the subjects did not eat breakfast, they had higher levels of low-density lipoprotein (LDL), reduced high density lipoprotein (HDL), and increased insulin levels.

One other interesting thing that happens when on the "no" breakfast eating regime. You actually have a higher level of energy intake than when skipping breakfast. People often skip breakfast because they feel that they will reduce the number of calories they consume, but this is not true, the researchers found.

So, eat your breakfast and lower your LDL level, lower your insulin level, increase your HDL (the good guys), and lower your energy intake. 

## Inside this issue...

The Riordan approach.....	2
Caffeine and risk of atrial fibrillation or flutter.....	3
A new exercise program for older people.....	3
Information worth knowing.....	4
Diabetes and hypertension: should we eat more chocolate?.....	4
The Garden and the gardener.....	5
Fungi.....	5
Food of the month—swiss chard.....	5
Volunteers "give and serve".....	6
The Western diet: health implications for the 21st century.....	6
Case of the month.....	6
Special discounts.....	7
Upcoming events.....	8
A big waist size causes heart problems.....	8

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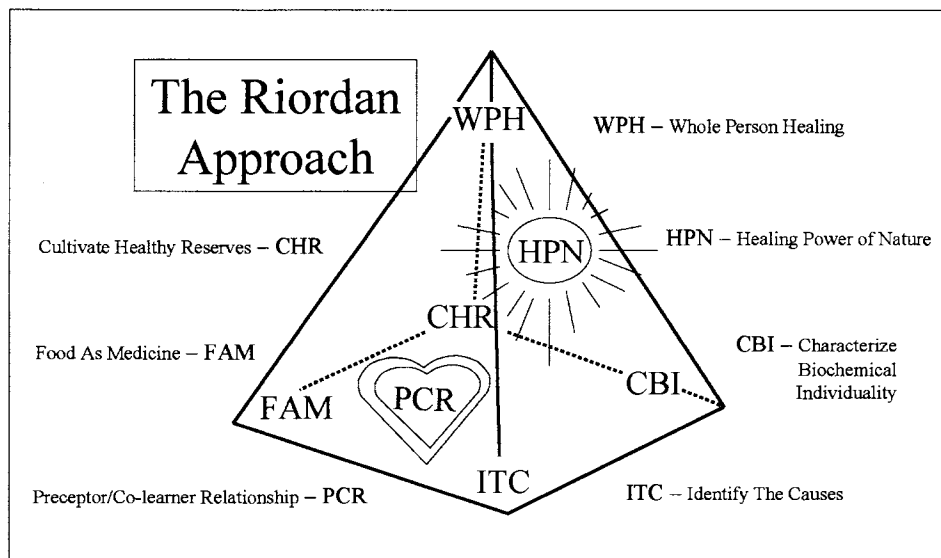
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# Nutritional Medicine

by Ron Hunninghake, M.D.

## The Riordan approach



Last month I wrote an extended essay on The Riordan Approach. In my attempt to crystalize this “essence of The Center,” I got a bit wordy. While sitting in church last Sunday, my mind wandered

back to these ideas and, voila!; I suddenly saw The Riordan Approach as a pyramid—the most stable structure known. Study this diagram and see if you can “catch” its dynamic simplicity. ☐

### Aching back—Cont'd from page 1

out the day. However, we rarely find ourselves going into extension motions. That is why it is important for us to begin to think about exercising our backs in different ways throughout the day

Ideal sitting posture allows you to maintain a lordosis (curve) in the small of your back while keeping your chest slightly elevated. The problem is that maintaining this posture requires mental thought while our normal tendencies are to slouch without thinking about it. Hence, lumbar support cushions, chairs, rolls, towels, etc. are helpful tools to use in order to help us maintain our sitting lordotic posture.

In addition to lumbar supports, it is important to perform exercises that strengthen the muscles that surround the low back (core muscles). Namely, extension and flexion exercises of the low back are useful in promoting strength, flexibility, and stability. As the low back muscles become trained to

do their job, the ligaments become less burdened. Giving the ligaments a break allows them to recuperate and gain strength. Eventually, with proper exercise and sitting postures the muscles and ligaments work more efficiently and are able to prevent the occurrence or reoccurrence of low back pain.

The exercises I generally recommend are taught in a progressive fashion (largely from R.A. McKenzie approach). Generally, they begin with the person lying on his/her tummy performing a series of extension exercises that raise the chest and neck off the ground. Starting in the lying position takes the added pressure of gravity off the spine and allows for easier motion. Once the lying exercises are mastered and pain has dissipated you can move to standing extension exercises. This brings back the weight bearing stress of gravity.

*continued on page 3*

After mastery of extension exercises has been obtained, it's time to introduce flexion in lying exercises (bending your knees toward your chest while on your back). I always recommend that following flexion you perform extension exercises to prevent any bulging of the disk that may result from too much flexion.

Eventually, when the co-learner is comfortable with their extension and flexion exercises, flexibility exercises are introduced to enhance blood and nutrient flow to joints and muscles.

If you suffer from low back pain, it may be wise to consult with someone knowledgeable in the areas of spinal rehabilitation that can come up with a tailor-made program for you. As mentioned in the beginning, there can be a wide array of causes for low back pain. I've identified what I believe to be one of the main contributing factors to low back pain. However, it is always wise to find the individual cause of your pain and come up with appropriate therapies to address that cause. [H]

## Caffeine and risk of atrial fibrillation or flutter

Coffee is one of the main sources of caffeine in the Danish diet, so Lars Frost, M.D., and Peter Vestergaard checked the consumption of coffee for 47,949 people in the Danish Cancer and Health Study to see if caffeine is associated with excess risk of atrial fibrillation or heart flutter. It is one of the main sources in the American diet, too.

The subjects drank one to four cups of coffee a day, the researchers said. After checking the electrocardiographs of the subjects, their results were clear. "We did not find any risk of atrial fibrillation or flutter associated with consumption of caffeine," the researchers concluded.

With this conclusion, if you want a cup of coffee with breakfast or a latte in the afternoon, enjoy it and realize that it probably will cause no atrial fibrillation. Just be sure that you do not overdo your coffee (or soda, which also contains caffeine) consumption. [H]

## HEALTH HUNTERS AT HOME

### A new exercise program for older people

Tufts University has recently published a spiral-bound book called *Growing Stronger, Strength Training for Older Adults*. Since I am certainly an older adult, I copied the book off the internet to see what they had to offer. Copying off the internet is encouraged, but it is 126 pages, so be prepared.

As I said, I am certainly an older adult and I have noticed that I have been getting weaker for the last couple of years and I have been gaining weight also. I have not been trying to gain weight; it just started accumulating around the waist. Jackie, my wife, also wanted to start getting back into better shape, so we decided to give this book a chance.

The preface starts with "Growing Stronger was written for you—the older adult who wants to grow stronger, healthier, more active, and more independent." That appeals to us and probably to you, too.

It goes on to say, "These activities will help you:

- Build strength
- Maintain bone density
- Improve balance, coordination, and mobility
- Reduce your risk of falling
- Maintain independence in performing activities of daily life."

This sounds good, but is it really an exercise program designed for older adults or is it just another one of those programs designed for much younger people that is just dumbed down for older people to use, if they can?

I was encouraged when I looked at Chapter 5 in *Growing Stronger*. Chapter 5 presents a 3-Part Program to get you started and to continue working with you. The exercises only need to be done two or three times a week. I chose three times a week because I like to do them on Mondays, Wednesdays, and Fridays. This gives me the weekend open to do whatever we want to do.

The first part is fairly simple. It starts off with doing squats using a chair so that the load on your legs is

easier. Then you do wall push-ups. These are just like the push-ups you did in school but easier. Rather than getting down on the floor, you do them standing and push off the wall.

Next, you do toe-raises that work your calves. These are done using a chair for balance and rising from the floor to toe stands. It suggests that you can use the stairs later when the chair gets fairly easy. This is followed by three simple stretching exercises for your arms. Easy!

When you complete the first phase of exercises (about two or three weeks), you begin using light weights for part of the exercises. The program starts women at two or three pounds and men at about five pounds and builds from there. After a few more weeks with these exercises, you go to the third part of your exercise program—the ongoing part. The book leads you easily through all of these exercises.

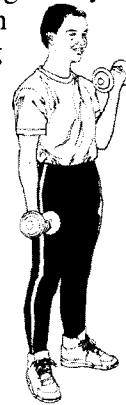
Now for the hard part of the program—how do they keep you motivated to continue the program? This comes in Chapter 6, "The Courage to Progress," and Chapter 7, "Staying on Track: Your 12-Week Workbook."

Chapter 6 does a good job of leading you through the reasons why you need to keep doing the exercises and what benefits you will gain from the exercises. Just to give you a hint of what you will gain from the exercises, you will easily be able to lift an eight-pound gallon jug of milk, you will feel younger, and, most importantly, you will gain greater stability and reduce your risk of falling.

Chapter 7 is an excellent tool to help you keep track of your weekly progress. You will have a place on a weekly chart to keep track of the exercises you do and when you do them. This helps motivate you to do the exercise program on the days you have setup to do them so that you have a completed chart at the end of each quarter of a year.

You can find *Growing Stronger* online at [go.tufts.edu/growingstronger](http://go.tufts.edu/growingstronger). [H]

—Richard Lewis



## INFORMATION WORTH KNOWING

Are you one of the estimated thirteen million who have been diagnosed with hypothyroidism, or are you someone who has spent a lot of time visiting doctors without getting to the cause of your problem? Ken Blanchard, M.D., and Marietta Abrams Brill wrote *What Your Doctor May Not Tell You About Hypothyroidism*. Their book is another avenue to explore. Have the "tests" you have taken in the past come back normal although you do not feel very good? One of the difficulties in getting the correct treatment may stem from not getting the correct diagnosis. Their book answers a lot of questions and gives information to help you discuss your problem with your doctor. The questions this month are taken from their book.

**1** Your energy is zapped and along with that the wonderful memory with which you have always prided yourself has diminished. Dr. Blanchard calls that \_\_\_\_\_ fog.

- a. brain
- b. blood
- c. morning
- d. all of the above

**2** Too few doctors pay attention to treatment protocols that have proved beneficial to many patients because \_\_\_\_\_.

- a. they believe that hypothyroidism can only be detected by tests that do not detect all hypothyroidism
- b. they believe in only one treatment
- c. when T3 is used, it is rarely used correctly
- d. all of the above

**3** It is the job of the thyroid and related endocrine system to be sensitive to changes in the body's internal and external environment and help the body keep a metabolic balance that deals with those changes.

- a. True
- b. False

**4** T4 is just one of the hormones produced by the thyroid gland. The thyroid also makes T3 as well as others. Dr. Blanchard has found that T4 and T3 are needed by the body in a specific balance. The physiologic balance that has worked best for his patients is \_\_\_\_\_.

- a. 50% of each
- b. 75% T4 and 25% T3
- c. 85% T4 and 15% T3
- d. 98% T4 and 2% T3

**5** There is growing evidence that adrenal insufficiency can impair the conversion of T4 to T3. Some reports indicate that \_\_\_\_\_ may stimulate an important enzyme and reduce TSH production.

- a. sugar
- b. caffeine
- c. smoking
- d. none of the above

**6** Everyone knows that one of the symptoms of hypothyroidism is weight gain. Going on thyroid hormone replacement will result in the weight just coming off.

- a. True
- b. False

**7** How thyroid hormone replacement is taken is important. Dr. Blanchard has found that thyroid hormone replacement should be taken \_\_\_\_\_.

- a. on an empty stomach
- b. by itself rather than with other vitamins
- c. two hours before taking other vitamins
- d. all of the above

## Diabetes and hypertension: should we eat more chocolate?

In our search for food to eat to combat diabetes and hypertension, we often come across fruits and vegetables as one solution. As good as fruits and vegetables are for you, the physiology and molecular mechanisms by which fruits and vegetables work are not well understood for heart disease, hypertension, and diabetes.

This brings us to dark chocolate. Dr. Davide Grassi and colleagues reported in *The American Journal of Clinical Nutrition* that the consumption of dark chocolate improves glucose metabolism and decreases blood pressure.

The researchers gave the subjects either 100 grams of dark chocolate a day or 90 grams of white chocolate a day for 15 days with a seven-day wash-out period in between the two types of chocolate. An oral glucose tolerance test was given after the dark and the white chocolate phases.

Again, they found that, "Dark chocolate, but not white chocolate, decreased blood pressure and improves insulin sensitivity in healthy persons." [H]

### "Overcoming the Odds" May, 2005 Leavenworth, Kansas

The first annual benefit event for the Eat, Exercise and Excel Program at the Anthony School, Leavenworth, Kansas, and the first public tribute to Dr. Hugh D. Riordan.

The EEE Program brought about amazing changes and hope to a school of "at-risk" children. Dr. Riordan supported and promoted the program:

"Every child in Kansas deserves this program. It is simple. It is inexpensive. It works!"

The Overcoming the Odds benefit event will help realize Dr. Riordan's dream in behalf of children's health.

Date to be announced.  
Please watch our website at  
[www.brightspot.org](http://www.brightspot.org).

• FOR ANSWERS, SEE PAGE 7 •

## The Garden and the gardener

by Melvin D. Epp, Ph.D.

As I write this column in the middle of March, signs of spring are all around. The frogs are croaking, the day lilies have initiated growth, and the crocuses have been blooming for several weeks. My eyes are itchy; are the red cedars and elm trees shedding pollen? In my mind's eye, the winter was cold, rainy, and miserable this year. Perhaps the ice storm in January clouded my perception, since the tree limb cleanup is still ongoing.

With the onset of warmer days with increasing hours of sunlight, our interests again focus on the garden. Already, we conceptualize biting into the first crisp radish or delving into a salad with only fresh leaf lettuce. Early spring is also the time to step back and intellectually assess why we garden and how we plan to garden effectively.

I garden because I enjoy watching seeds germinate and plants grow. I enjoy the full-bodied flavor of fresh wholesome vegetables and fruits. Organic gardening moves me forward on that quest. The nutritious soils of an organic garden grow healthy produce with enhanced nutrition and flavor. The vegetables and fruits, and let's not forget the flowers, are grown without agricultural chemicals and pesticides. I don't like to carry chemical residues into my kitchen or dining room. Pesticides are poisons that kill bugs and most of them are toxic for me as well as the bugs.

The practices such as composting, cover cropping, and crop rotation maintain and build soil fertility. Planting a diversity of vegetables, flowers, and herbs helps create a complex, balanced garden ecology. Organic gardening promotes a healthy environment with non-toxic, ecological methods, such as using beneficial insects for pest control and mulching or cultivation to control weeds. This world sustains humans, animals, plants, and insects in an intricate web of life. Our gardens can foster diversity by providing a habitat. [H]

## Herbal History

by Chad A. Krier, N.D., D.C.

### Fungi

Maitake (*Grifola frondosa*), Shitake (*Lentinus edodes*), and Reishi (*Ganoderma*) are medicinal mushrooms that contain very high amounts of polysaccharides. Polysaccharides are the constituents in plants thought to be responsible for immune modulation. By increasing interferon (a powerful immune chemical) these polysaccharides are able to disrupt viral replication and inhibit bacterial infection. Further, polysaccharides are able to stimulate increased production of lymphocytes (types of white blood cells responsible for immune reactions).

The mushrooms are powerful immune tonics most indicated in the treatment of chronic immune disturbances rather than acute illnesses. In fact, in Japan various mushroom species are among the most utilized anti-cancer drugs.

Maitake is believed to be the most potent, in terms of immune enhance-

ment, among the three mushrooms. It has been used to improve CD4 counts (a specific type of immune cell) in HIV patients. Reishi inhibits the release of histamine (a chemical messenger responsible for allergies) while stabilizing immunoglobulins (immune proteins which become elevated with allergies). Hence, Reishi is useful for those who suffer from chronic allergies as well as food sensitivities. Shitake is believed to activate natural killer cells which are involved in tumor suppression.

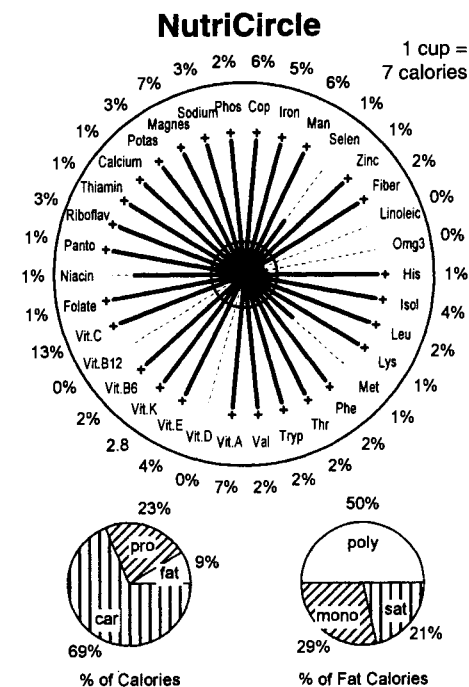
Maitake and Reishi have blood pressure lowering abilities, while all three mushrooms have been shown to lower cholesterol and triglycerides. The mushrooms also seem to enhance physiological resistance to stress thru analgesic and nervine (nerve tonic) effects. Moreover, Shitake and Reishi have been shown to improve liver enzyme (markers of liver destruction) levels as well as symptoms in patients with Hepatitis B. [H]



## Food of the Month

by Donald R. Davis, Ph.D.

**SWISS CHARD** is related to beets and spinach. Nutritionally, it resembles spinach, collards, kale, and other dark greens—extraordinarily high in nutrients per calorie, especially vitamin K, which helps build strong bones. It is also one of the easiest vegetables to grow. Use it like spinach—raw in salads, or lightly cooked and seasoned with vinegar or lemon. Europeans favor the cooked stems. One cup chopped, raw Swiss chard (shown here) contains at least 2% of the RDAs for over 20 nutrients, including 280% for vitamin K, in a mere 7 Calories. One-half cup lightly cooked contains approximately double these amounts.



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.

## Volunteers "give and serve"


It is time to recognize a wonderful group of people working here. They are enthusiastic, knowledgeable, and willing to get the job done. Some of them work one or more days a week, while others are on an as needed basis. I'm talking about the great volunteers who are associated with The Center.

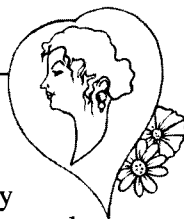
They can do any and everything from mailings to proofing books to helping with Lunch and Lectures. They all pitch in to do whatever needs to be done. Bob Richards said, "Ingenuity, plus coverage, plus work, equals miracles." Center volunteers are miracle workers.

People volunteer their precious time for many reasons. Many want to support The Center because they have been helped in the past or because they believe in The Center's mission. Another reason is to use their skills or gain

some new ones. They may want to meet new people, make new friends, and/or develop professional contacts. They may get personal satisfaction by helping others.

Martin Luther King, Jr., said, "Everybody can be great...because anybody can serve. You don't have to have a college degree to serve. You don't have to make your subject and verb agree to serve...You only need a heart full of grace, a soul generated by love." And Sir Wilfred T. Grenfelt said, "The service we render to others is really the rent we pay for our room on this earth. It is obvious that man is himself a traveler; that the purpose of this world is not 'to have and to hold' but 'to give and to serve.' There can be no other meaning."

Center volunteers "give and serve" on a regular basis with a heart full of love. You are appreciated. 



## Case of the month

This 68-year-old woman first came to The Center in 1989 with skin problems, fatigue, and muscle cramps. These problems were cleared up by the end of 1991.

She came back again in April, 2004, with problems with her knees. She said that she could not kneel in church without pain and having someone help her back up to her feet. This was extremely frustrating for her as it would be for almost anyone. It also affected the work she needed to do at home.


Dr. Chad Krier examined her and discovered that she had back pain and hip pain in addition to the pain in her knees. She also had many orthopedic problems as well. The back pain and hip pain actually increased the knee pain by a significant amount so these needed to be worked with also to help relieve the knee pain.

To do this, Dr. Krier used myofascial treatment to relax the knees and the back. He also used Russian electrical stimulus to the large muscles. Russian electrical stimulus begins to work with the nervous system in the large muscles so that these muscles will respond to the treatment and exercises more quickly.

In addition, he used heat treatment to the back and the knees to increase the blood flow to the muscles. All of these treatments were used three times a week for about two months.

He re-examined her at this point and found she had gained full strength in her right knee and that the pain in her left knee was gone. He also found that the orthopedic problems were gone at this time.

About seven months later, she returned and said that she must have done something to cause a little bit of pain in her knees again and wondered if he could treat it. He did treat it and she continues to remain pain free, and she can again arise from kneeling in church by herself and has no knee pain.

As long as she keeps up the simple leg and back exercises, she will continue to remain pain free. Dr. Krier feels that she will. 

## CENTER UPDATE

### The Western diet: health implications for the 21st century

Changes in the Western diet over the last 150 years and activities of the contemporary Western people have contributed to 50%-65% of the chronic disease affecting the adult population, researchers recently wrote in *The American Journal of Clinical Nutrition*. These researchers were not only from the United States but from around the world.

The Center's physicians would assess a higher percentage than the 50%-65% for changes that have occurred in just the last six generations.

"In particular, food staples and food-processing procedures introduced during the Neolithic and the Industrial Periods have fundamentally altered seven crucial nutritional characteristics of ancestral hominid diets:


- 1) glycemic load
- 2) fatty acid composition
- 3) macronutrient composition
- 4) micronutrient density

- 5) acid-base balance
- 6) sodium-potassium ratio
- 7) fiber content,"

the researchers wrote.

The Center's physicians try to get every patient/co-learner to become involved with all seven of these points.

In short a burger, fries, and soft drink aren't good for an individual. They increase the glycemic load, increase the omega-6 fatty acids while reducing good omega-3 fatty acids, the nutritional level is very low, they increase the sodium load while reducing the potassium level, and the fiber content is very poor. But if you observe the "drive-by" windows at fast food restaurants, you will notice a lot of the cars have one or more children in them eagerly waiting for a burger, fries, and a soft drink.

So, watch your diet. It may be a major cause of present or future chronic diseases. 

- 1 a. It can also be called hypothyroid fog. You are essentially robbed of your passion and ability to live a full life.
- 2 d. Symptoms and patient history are better indicators of disease than the TSH test.
- 3 a. Thyroid rhythm changes over time with the body's metabolic needs, and these changes are more pronounced the older you get.
- 4 d. The correct dosage of T3 is important in order to achieve effectiveness and to avoid side effects.
- 5 b. The key enzyme (deiodinase enzyme) contains a naturally occurring nutrient, selenium. A deficiency of selenium can also contribute to hypothyroidism.
- 6 b. Thyroid hormone replacement will not solve your weight problems. It will help with energy production so you can exercise and take more active control of your diet.
- 7 d. Since most thyroid hormone replacement is given only once a day, the above recommendations are important. [H]

## SPECIAL DISCOUNTS

Audio Tapes: Regular Price—\$7.95; *Health Hunter* Price—\$7.16  
 Video Tapes: Regular Price—\$14.95; *Health Hunter* Price—\$13.45

### WHAT YOUR DOCTOR MAY NOT TELL YOU ABOUT HYPOTHYROIDISM

by *Ken Blanchard, M.D., Ph.D.,*  
 with *Marietta Abrams Brill*  
 An experienced endocrinologist shares his revolutionary, research based approach to the diagnosis and treatment of hypothyroidism. Dr. Blanchard's program offers hope for approaching this common, yet regularly overlooked, disease. Softcover.  
 Retail Price: \$14.95  
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There are many myths and misconceptions about toxic heavy metals. Learn more about mercury, lead, and arsenic

and find out what is the best way to help detoxify from them.

### THE CENTER'S APPROACH TO RELIEVING ARTHRITIS

with *Ron Hunninghake, M.D.,*  
*Rebecca Kirby, M.D., R.D.,*  
 & *Chad Krier, N.D., D.C.*  
 Learn how The Center has successfully helped co-learners with sustained illnesses. Doctors discuss The Center's approach to relieving arthritis.

### OH, MY ACHING BACK: A Comprehensive Approach to Managing Back Pain

with *Chad Krier, N.D., D.C.*  
 Learn about the varied causes of back pain and the many ways to prevent and treat this common affliction.

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# Upcoming Events. . .

## Lunch & Lectures:

### April

- 5 Sound, Music, Color, and DNA
- 7 Iodine: the Thyroid Enhancing, Immune Boosting, Cancer Preventing, Hormone Modulating Mineral
- 12 The Center's Approach to Managing Stress
- 14 Feed Your Genes Right
- 19 Voicing Positive Affirmations
- 21 Low-Carb Dieting for Dummies
- 26 Health Hunter Beat The Odds
- 28 Dr. Hugh Riordan: A 30-Year Retrospective

## A big waist size causes heart problems

For years, doctors have considered a large number for the body mass index to be a major risk factor for cardiovascular (CVD) disease. But now researchers have come up with a new measurement that may be a better indicator of the disease—waist measurement.

The researchers have also provided a waist circumference cutoff, above which you may fall into a risk group for cardiovascular disease. For men, this waist circumference cutoff point is between 35 and 36 inches and for women the cutoff point is about 33 inches. Above these numbers, you may fall in the CVD risk category.

- Oh, my aching back
- A new exercise program for older people
- Diabetes and hypertension: should we eat more chocolate?
- A big waist size causes heart problems

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