

# Health Hunter<sup>®</sup>

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N E W S L E T T E R

JUNE 2003

## You don't need vitamins?

by Richard Lewis

**R**ecently, *The New York Times* ran an article called "Vitamins: More May Be Too Many" by Gina Kolata.

The article opened with this paragraph: "A growing number of medical experts are concerned that Americans are overdoing their vitamin consumption. As many as 70 percent of the population is taking supplements, mostly vitamins, convinced that the pills will make them healthier."

**...the percentage of Americans over 20 not getting even the RDA of many nutrients is appalling.**

This riled Dr. Riordan so much that he wrote the following letter to the *The New York Times*:  
Letters to the Editor  
*The New York Times*  
229 West 43rd Street  
New York, NY 10036

What an amazing article. "Vitamins: More May Be Too Many," by Gina Kolata (April 29th) is missing a few details. According to the latest available U. S. Government statistics, the percentage of Americans over 20 not getting even the RDA of many nutrients is appalling.

Here are four examples from the data.

Nutrient	Percent NOT Receiving the RDA	
	MALE	FEMALE
Vitamin C	39.4	43.9
B6	52.6	64.2
Magnesium	65.7	75.7
Zinc	67.6	82.6

*Based upon its own data, our government and a responsible publication like The New York Times should be screaming that the nutrient intake of Americans is so low in so many that it is a national scandal and a public health menace.*

*Do the quoted experts who claim there are no longer vitamin deficits have their heads in the sand?*

*Sincerely,  
Hugh D. Riordan, M.D.*

*President—The Center for the Improvement of Human Functioning International, Inc.*

*Director—The Bio-Communications Research Institute*

Dr. Riordan makes a good point in this letter. In females alone, 43.9% do not have the Recommended Daily Allowance (RDA) of vitamin C while 82.6% fail to meet the RDA for zinc.

The RDA was established many years ago so that people would get enough vitamins in their body on a daily basis to keep from getting deficiency diseases such as scurvy and beri beri.

Take scurvy, for instance. This was a common disease on sailing ships before the 1840's. In 1617, John Woodall, a prominent surgeon-general for the East India Company published a book that recommended lemon juice be carried on ships to treat scurvy and also recommended that the ship's surgeon should persuade the purser to purchase oranges, lemons, limes, and tamarinds for the crew whenever possible. This was eventually forgotten.


James Lind, a British ship's surgeon, discovered oranges were the best way to treat scurvy in the "Salisbury

*continued on page 2*

## Tea drinking boosts immune system

A recent study done by Dr. James Bukowski and colleagues of Brigham and Women's Hospital in Boston and Harvard Medical School found that drinking five cups of tea a day would boost the immune system's battle against bacterial infections.

To accomplish this, the researchers took 21 volunteers and divided them into one group of 11 and the second group of 10. They collected blood samples from the 21 and then had the 11 drink tea for four weeks. The other 10 drank coffee for the same length of time.

At the end of four weeks they again drew blood from the 21 subjects. They found that the blood from the 11 volunteers who drank tea for four weeks developed five times more interferon when exposed to the bacteria *E coli* than they did before the tests. The coffee drinkers showed no change in the reaction before and after the test. 

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# Nutritional Medicine

by Ron Hunninghake, M.D.

## Cellular wealth

*"I've been rich, and I've been poor...and rich is better!"*

I don't know who to ascribe this quote to. And I don't include it here to, in any way, belittle the terrible burden of poverty that the vast majority of human beings must struggle with on a daily basis. Here in America we are blessed with a level of wealth that only the royalty of most cultures could enjoy. This wealth, though not enjoyed by everyone, is available to everyone through our free enterprise system.

What does it mean to be wealthy? Wealth confers freedom, and the power to do and have what you want when you want it. Wealth is included as part of a triad of human goals often stated as: *healthy, wealthy, and wise*. Wealth implies having "the reserves to do what you want to do and need to do, with energy and enthusiasm." This, of course, is The Center's definition of health. So it would appear that health and wealth somehow go together.

Our research here at The Center demonstrates that when individuals develop nutrient deficiencies, their cells begin to malfunction. Disease states

emerge. The individual's ability to function becomes compromised. This is due to depletion of their nutrient reserves. Another way of stating this: *they have entered into a state of cellular poverty*. Nutrient reserves to the cell are analogous to cash reserves to the individual.

This analogy is meant to challenge the basic premise of the recent *New York Times* article "Vitamins: More May Be Too Many." Rarely do we find people who feel they are "too wealthy." While there can be value judgments leveled against certain wealthy people, never would wealth itself be judged negatively. Similarly, while vitamin excess conditions certainly do exist, they are *by far* the rare exception rather than the rule.

In a country where fatigue and depression are rampant, medication usage is sky-rocketing, and the health care dollar is inflating out of sight, decrying vitamin excess appears to be a feeble attempt to deflect blame from where it truly belongs: the poverty of quality nutritional education in the field of medicine and society at large. FH

## Vitamins—Cont'd from page 1

Experiment" in 1747. With no success in spreading this idea throughout the navy, he published a book, *A Treatise on Scurvy* in 1753. He had no success in getting the Royal Navy to accept his solution for scurvy even with this process.

Lind, much respected by his peers, was elected Fellow and Treasurer of the Royal College of Physicians in Edinburgh, Scotland, and was appointed physician to the Kings Royal Hospital at Haslar. He died in 1794 with his approach to scurvy still not accepted.

Forty years after his death, his prevention for scurvy was finally accepted. It was the vitamin C in the citrus fruit that solved the scurvy problem in the Royal Navy.

Today, scurvy or near scurvy is still prevalent with 43.9% of women

and 39.4% of men not getting the RDA of vitamin C. We even see scurvy-like symptoms in some new patients at The Center.

At the other end of the spectrum, 82.6% of women do not get the RDA of zinc from their daily food, and 67.6% of men fail to get the RDA of zinc from what they eat, even though the article leads us to believe they do.

Zinc is involved in various problems individuals have. For instance, Dr. Riordan had a woman come to The Center with depression. She was in such bad shape that she did not want to attend the birth of her daughter's baby because she could not take care of herself, much less her daughter and a new baby.

Dr. Riordan evaluated her and dis-

*continued on page 3*

covered that she was low in zinc. He started her on zinc. She took the zinc and called back a couple of weeks later to say the zinc was not working to relieve her depression.

Dr. Riordan suggested she double the zinc and told her precisely how to take it. She took double the zinc and called back in about two more weeks and said, "It works." She was getting over her depression.

Zinc worked for her. Other nutrients work to correct depression in other patient/co-learners.

We are all different. We each have different fingerprints and we also have different nutrient deficiencies. That is why we need to evaluate each individual to find out what are the underlying causes, the nutrient deficiencies each person has and then begin working with these nutrients to get them up to as close to optimal as possible. This way, we get the individual back to working the way each person wants to be working.

Of course, the article refers to people eating "junk food" as their daily diet. Dr. Benjamin Caballero was quoted in the article that, "If you eat junk food every day, vitamins are the least of your problems. You cannot replace a healthy diet."

This is partially true. You cannot replace a healthy diet. Also, if you eat junk food for every meal of the day, you will be short of some nutrients—in spite of what Dr. Caballero says.

Here at The Center, we take a good look at the biochemistry of the individual's body no matter what type of diet he or she is eating. We also continue to work with them to get their diet up to where it is closer to what we believe it should be.

We also realize that in some cases, diet won't get the biochemistry up to where it needs to be. The individual may have one or more nutrients that are so low that at first supplements will have to be used. Or they may be too low that supplements will not pick the nutrients up quickly enough so we will use intravenous drips or intramuscular injections to get the nutrients up to where the supplements will begin to work.

You may have noticed the empha-

*continued on page 4*

## HEALTH HUNTERS AT HOME

### Computers to teach proper nutrition

An article in *The American Journal of Clinical Nutrition* recently titled, "Past, Present, and Future of Computer-tailored Nutrition Education," got me thinking about what we would do in using computers to educate people about how to eat properly.

The first computer program to come to mind is NutriCircles. If you will take a look on page 5, you will see a NutriCircle used to explain the "Food of the Month." This is a program that is constantly being updated to incorporate the latest techniques to make it easy to use as well as including new foods as the government finds the nutrients in these foods.

You can look up the nutrients in a single food or combine food ingredients in a recipe so that you get a NutriCircle for the recipe. You can even get the NutriCircle for an entire meal.

I asked Dr. Donald Davis, a consultant at The Center and one of the two originators of the NutriCircles program, if he could give me the basics of the program. He told me that the program has over 3,000 individual foods in it and there are another 3,000 that come on the CD that are available to you if you are interested in transferring them. He said they did not include these foods in the program because they were just too complex.

"A cut of beef, for instance, may have as many as 12 different names for it. We include the most popular ones in the NutriCircles program, but have the others available on the CD so the person using the program may include one of them if they want," Dr. Davis said.

He also told me that they have worked very hard to get as many nutrients as they can. For instance, he said that vitamin K, iodine, and chromium are hard to find or nonexistent in the USDA data that they get so they have to find these nutrients from other sources to bring you as complete a set of nutritional information as they have available to them. Digging up that data takes a lot of work and double-checking, but it is worth it to keep NutriCircles as

current as possible.

In addition, he mentioned that the USDA has made available its fifteenth edition of foods and nutrition and the program has kept abreast of every one so that you have the latest information.

Dr. Davis also suggested that if NutriCircles gives you more information than you can use, you might check with the USDA to see what they have to offer. You can get their web page at [www.nal.usda.gov/fnic](http://www.nal.usda.gov/fnic). So I took a look, and this is what I found.

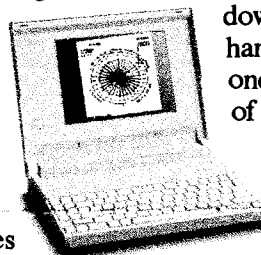
The U. S. government offers various programs on their web site. These are programs that you can download on your personal PC computer with Windows operating system. You can also download some of these on a hand-held computer if you are one of those people who has one of these small computers.

These programs are based on national databases that give you quite a bit of information to choose from in evaluating the foods you want to check. If you want, you can refer to the web page and check out what they have to offer.

If you want to purchase the NutriCircles program, you can order it on line. Just type [www.brightspot.org](http://www.brightspot.org) in your computer and click on search. This gets you The Center's web page. Click on the "Current Brightspot.org website" and in the left hand column it will give you a selection of pages. Go down eight places to "What Are You Eating." Click on this and it will give you some NutriCircles as examples, information about how to order the program, and the cost.

When the program first came out several years ago, it was limited on the number of foods available and was one that took some knowledge about using a computer. It is now simple to use and I am sure that you will enjoy it once you get started using it. I find it a fun program to use that provides me with a lot of information on the foods I am eating. You will too.

—Richard Lewis



## INFORMATION WORTH KNOWING

Diagnosed with epilepsy at age 32, Barbara Reed Stitt faced many health problems. Her diet was atrocious; it consisted of sugary foods and large quantities of coffee. She developed extreme fatigue, lethargy, violent mood changes, sleeplessness, and nightmares to name a few. Dr. Stitt also contracted streptococcus throat infections and had memory lapses. She sought the advice of the medical profession. They prescribed tranquilizers that made the problem worse than before. Dr. Stitt came across a book that recommended that she should stop eating "dead" food. "Dead" foods were those foods that were refined or processed, such as white sugar, white flour, coffee, and chocolate. She made changes in her diet by adding whole foods and gradually cutting down on coffee and junk food. Barbara Reed Stitt has written the book, *Food and Behavior*, to share her story with parents, teachers, and others. The questions this month are taken from her book.

1 As a probation officer, she found that many of the diet changes she had made for herself could be tailored for \_\_\_\_\_.

- a. probationers
- b. strangers on the street
- c. vegetarians
- d. none of the above

2 George M. Gould, M.D. wrote an article in \_\_\_\_\_ for *The Medical Review* that described hyperactivity and attention deficit disorder. In this article he said, "...many patients do not get well because they live too exclusively on sugar and starchy foods."

- a. 1900
- b. 1910
- c. 1930
- d. 1960

3 "A malnourished \_\_\_\_\_ system will inevitably lead to serious physical and behavioral problems, problems which no amount of medication or psychiatry can touch."

- a. circulatory
- b. central nervous
- c. respiratory
- d. none of the above

4 A whole foods diet is the cure for every type of emotional, psychological, and behavioral disorder.

- a. True
- b. False

5 When thinking about the phrase, "You are what you eat," we need to look at the deeper truth of the statement. When we trace action down through the organ system, to organs, to cells, to an array of amino acids, enzymes, and neurotransmitters, we arrive at a common denominator: the action and reaction of \_\_\_\_\_.

- a. ions
- b. molecules
- c. dendrites
- d. none of the above

6 If our diets do not provide the cells with the substances they need, our bodies will malfunction in one way or another.

- a. True
- b. False

7 This organ is the most important one in the body. Other organs can be removed or replaced but shut off the \_\_\_\_\_ and you have killed the organism.

- a. stomach
- b. heart
- c. brain
- d. none of the above

• FOR ANSWERS, SEE PAGE 7 •


If one advances confidently in the direction of his dreams, and endeavors to live the life which he has imagined, he will meet with a success unexpected in common hours.

—Henry David Thoreau

## Vitamins—Cont'd from page 3

sis on the individual throughout this explanation of how *The New York Times* article is in error. We believe that chronic or sustained illness is an individual process rather than a group process. The doctors who were quoted in *The New York Times* article tend to see everything as data for the group. This is where we part ways.

It has been our experience that only by evaluating the individual who has a chronic or sustained illness that we find out what the individual needs to get well again. The individual is very important to us. By treating the individual, we can replace the nutrients that the individual needs rather than just give them a protocol that fits all people. The individual is different from everyone else who has been at The Center and must be treated that way.


Back to Dr. Riordan's letter to the Editors of *The New York Times*. People as a whole do have deficiencies in the RDAs he mentioned in his letter, but the individual is important and we treat the individual. He or she has the problem and needs our attention so that each one gets better. 

## Obesity associated with cancer death

Obesity is on the rise in the U.S. as are various types of cancer. Eugenia Calle, Ph.D., and her colleagues wanted to find out if there was a correlation between these two facts.

To find this out, the researchers reviewed more than 900,000 people who were free of cancer in 1982 and followed them for 16 years. There were 57,145 deaths from cancer during the follow-up period. They reported the results of their research in *The New England Journal of Medicine*.

In both men and women, the body mass index was associated with higher death rates from cancer of the esophagus, colon and rectum, liver, gallbladder, pancreas, and kidney. The same was true of non-Hodgkin's lymphoma and multiple myeloma.

In short, increased body weight was associated with death rates for all cancers combined and for cancers at multiple specific sites. 

## Athletes develop larger muscles with whey

Stores have been selling a combination of creatine and whey protein, a by-product of cheese making. Despite the success athletes have had with the combination, there have been no studies on its impact on muscle fiber—until now.

Paul Cribb and colleagues of Victoria University in Melbourne, Australia set out to see if the creatine-whey combination did actually help muscle growth. To do this, they recruited 33 highly trained bodybuilders in their mid-20's for a 13-week dietary trial.

The researchers divided the volunteers into four groups. Each person received a caloric bonus per day—a flavorful drink that contained a gram of supplement per kilogram of body weight. One supplement contained only carbohydrates, another contained only whey powder, and the other two contained a mix of creatine and either carbohydrates or whey powder.

The men continued their supervised resistance training for 13 weeks. At the end of the training, the men who had whey added to their drink made more gain than those with only carbohydrates. Creatine added further boosts with the creatine-whey group gaining the most strength. The gains in strength roughly correlated with increases in cross-sectional area of type II muscles—the muscles that bulk up in response to exercise.

Now, the research team is doing a study on elderly people to see if the creatine-whey product would benefit them. The elderly typically lose muscle and strength over time. [H]

## Diet affects cardiovascular risk factor

Dutch researchers found that eating junk food increases your risk factor for cardiovascular disease, according to *The Journal of Clinical Nutrition*. Junk food, according to the researchers, includes foods such as French fries, high-sugar beverages, and white bread. [H]

# Herbal History

## Golden root, *Rhodiola rosea*

*Rhodiola rosea* grows in the arctic regions of Europe and Asia primarily in dry, sandy soil at high altitudes. It grows 12 to 30 inches tall with a single yellow flower at the top. It is a perennial with thick rhizome that is fragrant when cut. *R. rosea* is commonly known as golden root or roseroot.

The first recorded medical application of *R. rosea* was by the Greek physician, Dioscorides, in the year 77 as *rodia riza* in *De Materia Medica*. Linnaeus renamed it *Rhodiola rosea* because of the rose-like fragrance of the fresh cut rootstock.

Researchers from Sweden, Norway, France, Germany, the Soviet Union, and Iceland published many scientific papers between 1725 and 1960 on *R. rosea*. More than 180 publications have been produced since 1960, but it still remains relatively unknown here since these pub-

lications appeared in foreign journals.

Traditional folk medicine practitioners used *R. rosea* to increase work productivity, physical endurance, longevity, and resistance to high altitude sickness. They also used it to treat depression, anemia, fatigue, gastrointestinal ailments, infection, impotence, and nervous disorders. *R. rosea* was prescribed in Middle Asia for colds and flu that occurred during the cold Asian winters.

For centuries, only Siberian family members knew where to harvest the “golden root” and how to make the extraction from it. Siberians secretly transported the herb down ancient trails of the Caucasian Mountains to trade for Georgian wines, fruits, garlic, and honey.

*R. rosea* has been included in official Russian medicine since 1969. It was recognized by Sweden as an Herbal Medical Product in 1985. [H]

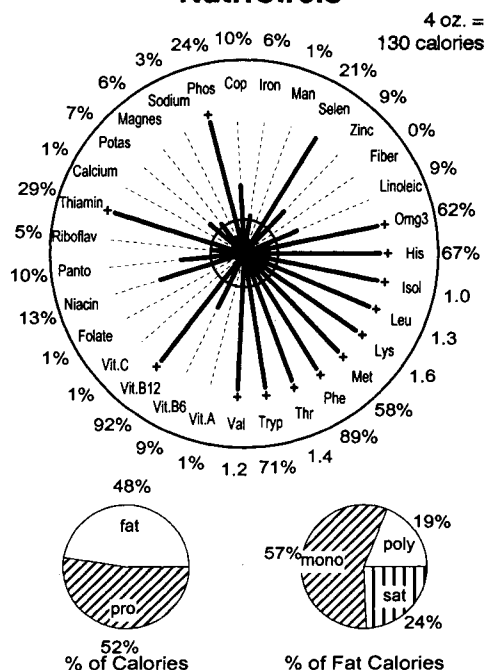
# Food of the Month

by Donald R. Davis, Ph.D.



## NutriCircle

**CATFISH** in markets is mostly farmed in large man-made ponds. Catfish farming has several advantages and a disadvantage or two. Farmed catfish is more plentiful and affordable than wild catfish, and it has much lower levels of mercury and other contaminants than wild catfish. Most nutrient contents are similar, but farmed catfish (shown here) has about twice the fat of wild catfish, slightly less omega-3 fat (Omg3) and much more omega-6 fat (Linoleic). Still, it is a valuable source of needed omega-3 fat, as well as amino acids, vitamins B<sub>6</sub> and B<sub>12</sub>, niacin, pantothenic acid, thiamin, phosphorus, copper, selenium and zinc.



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.

## Green water brings joy

Remember when you were a child and you thought all things were possible? Remember when you thought you were a magical person who could make fantastic things happen? The other day little Jadyn tapped into that possibility. She came running out of the bathroom yelling for her parents to come see what she had done. With a big grin on her face she pointed to the commode and said, "I turned the water green! Next time I'm going to make it my favorite color, pink." At that moment she was very aware of her abilities. Of course, we know that the bluing in the water when mixed with urine made the water turn green, but Jadyn knew that "she" had done something magical.

Wouldn't it be wonderful to be that excited about our abilities rather

than just taking them for granted? When you really think about the wonder of the world around us, it is amazing that for the most part we take it very much for granted.

There is real magic in enthusiasm. It spells the difference between mediocrity and accomplishment. An unknown person said, "Success is going from failure to failure without a loss of enthusiasm." Figuring out how to keep focused on the positive aspects of life while living through each day can be quite a challenge. Jadyn may not be able to turn the water whatever color she wishes, but she will explore the possibilities. Here is hoping that we can learn to explore the possibilities in our lives with the same excitement and joy as a three-year-old. 



## Case of the month


This 22-year-old female came to The Center complaining that she had frequent colds with congestion, cough, headaches, and weakness. This happened several times last year in particular. She said she also had ear problems such as clogging, popping, ringing, and itching, particularly in May and August. Also she mentioned that she had inflamed eustachian tubes, possible mononucleosis, and "slight" allergies and fatigue when she has a cold.

She works for a boy scout ranch in the west, and the colds and fatigue interfere with her work.

Dr. Riordan evaluated her. He then wanted to do some laboratory work to confirm his suspicions about what could be the underlying causes for the often reoccurring colds and fatigue that accompanied these colds. Dr. Riordan suggested she take Imm-Kine to boost her immune system and read the book, *The Wonderful World Within You*.

When the laboratory work was done, she called Mavis Schultz to get the results. In addition to a 15 gram intravenous vitamin C drip, Mavis suggested Zinc Orotate for her low zinc, biotin for her low biotin level, vitamin B6 to take care of her low B6 level, Protophilis for her high candida level, and Emergen C packets to take following the intravenous vitamin C drip she had.

She had two appointments with Dr. Lawton—one in February and another one in May. At the May appointment she said she was more than 50% better. She had just gotten back from a month long driving trip to Alaska. This alone was an indication that she was much better.

The occurrence of colds was much improved. She actually feels good. As a follow-up treatment, Dr. Lawton suggested that she finish the Zinc Orotate, Protophilis, biotin, and the Imm-Kine and start taking a multi-vitamin, Latero-Flora for the candida, increase the vitamin C to four to six grams a day, and start taking MSM. This gives her a simple regime to follow during the summer. 

## CENTER UPDATE

### Folic acid reduces homocysteine in older adults

Folic acid has been one of our concerns for many years. For instance, adequate levels of folic acid will reduce the occurrence of children born without a large portion of their brain or with spina bifida. These are called neural tube deficiencies.


Dr. Riordan has been proposing for years that women of child bearing age be given folic acid daily to help prevent this from happening. Neural tube deficiencies occur in the first month of a child's development, and many women do not know they are even pregnant during the first month.

At the other end of the age spectrum, older adults may need folic acid as well. Research was done by Floor VA van Oort and colleagues to find out if homocysteine levels in the blood of older Dutch men and women could be controlled by folic acid. Their results appear in a recent issue of the *Journal of Clinical Nutrition*.

Homocysteine is considered to be a

likely risk factor for cardiovascular disease. Research has shown that homocysteine can be lowered by folic acid.

In this research study, the Dutch researchers enrolled 316 Dutch men and women aged 50 to 75 and then they were divided into six groups. The subjects received a daily dose of 50, 100, 200, 400, 600, and 800 micrograms of folic acid or a placebo, depending on which group they were assigned. This lasted for 12 weeks.

The relative decrease in plasma homocysteine concentration came down with the increase in the dosage of folic acid. The placebo group showed no decrease in homocysteine level. The dosage of 400 micrograms showed the best results. These people had a 22% decrease in their homocysteine which is 90% of the level the 800 microgram group received. This trial shows that folic acid does reduce the plasma homocysteine level which is a cardiovascular risk factor. 



Answers from page 4

- 1 a. An incredible number of Dr. Stitt's probationers managed to stay out of trouble and out of the courtroom.
- 2 b. Refining of flour had only reached the United States in the late 1800s.
- 3 b. A simple diet of whole food is absolutely necessary in order to give the brain and the rest of the central nervous system what it needs to function properly.
- 4 b. While there are other factors to consider, providing an inadequate diet is like trying to drive a car without gasoline.
- 5 b. There is only one source of molecules or their building blocks that is needed for the interactions that make up our lives: our diet.
- 6 a. Every protein in the body, all the fuel, and enzymes come directly from, or are derived from, what we eat.
- 7 c. The brain can't store energy. It can survive for a very short time without oxygen, and when something is wrong with the body, the brain suffers first. [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

### FOOD & BEHAVIOR

by *Barbara Reed Stitt, Ph.D.*

The connection between food and behavior is so basic that it is often overlooked by parents and professionals when dealing with children with behavior problems. Dr. Stitt is a former probation officer who has developed a nutritional program that has helped thousands to lead healthier lives. Her book is for people in trouble with their health and behavior as well as for those people who work with people with health and behavior problems. Softcover.

Retail Price: \$9.95

Health Hunter: \$8.96

### HOW TO MAXIMIZE PERFORMANCE: SPORTS NUTRITION

with *Rebecca Kirby, M.D.*

Proper nutrition is key to maximizing athletic performance. Appropriate amounts of carbohydrates, fat, protein,

and fluids are necessary to insure adequate energy, stamina, and muscle maintenance. A balance of micro and phytonutrients, as well as macronutrients, is important. Whether training for a marathon or working up to a one-mile walk, you want to provide your body with the best nutrition possible. It's all about balance. Learn from this unique M.D., who also is a biochemist and registered dietitian.

### CENTER TECHNIQUES FOR REDUCING PAIN

with *Tim Lawton, M.D. & Marsha McCray, R.N.*

Sometimes older, well-proven treatments are good alternatives to consider for pain control. Dr. Lawton reviews a non-narcotic treatment for chronic pain called the sphenopalatine ganglion block and the use of colchicine for spinal disc disease.

• To Order, Fill Out the Form Below •

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# Upcoming Events. . .

**Atkins Book Club continues** - June 5, June 12, & June 19

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**Watch for up-coming  
Lunch & Lecture classes.**

Men succeed when they realize that their failures are the preparation for their victories  
—Ralph Waldo Emerson

## Alzheimer's disease linked to saturated fats

Eating saturated fats may be a cause of Alzheimer's Disease, according to Martha Clair Morris and colleagues who reported the results of their research in the *Archives of Neurology*.

The researchers used 815 community residents aged 65 or older who were unaffected by Alzheimer's Disease at the beginning of the research project and who completed a food-frequency questionnaire at the start of the project. The researchers then followed these 815 people for 3.9 years. During this time 131 people developed Alzheimer's Disease.

Consumption of saturated fats and trans-unsaturated fats proved to be positive for the risk of Alzheimer's Disease. Omega-6 polyunsaturated fats and monounsaturated fats tended to slow the development of Alzheimer's Disease.

- You don't need vitamins?
- Tea drinking boosts immune system
- Obesity associated with cancer death
- Athletes develop larger muscles with whey

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