# Enhancing vitality through the powers of detoxification

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

etoxification is a funny little word that can elicit numerous responses, depending on the context of its use. To the addict, it may mean a way to rid them of an addiction. However, to the Naturopathic physician it represents an intensive process of removing low grade poisoning from the cellular machinery of the body, leading to better health. In their book, 7-Day Detox Miracle, Doctors Bennett and Barrie discuss an intensive dietary plan of action for health promotion through detoxification.

The program is centered on diet, nutritional supplementation, and several modes of circulatory stimulation.

"Why would anyone want to put themselves through a diet-based detoxification program?" Good question. We know that our environment, both internal and external, is wrought with contaminants (heavy metals, man-made chemicals, tobacco smoke, alcohol ingestion, food preservatives, refined foods, etc.). It is also known that we can accumulate a low grade toxic burden over time, which is detrimental to our wellbeing. Hence, there exists a strong need to rid the body of the toxic burden by giving our organs of digestion, elimination, and detoxification a rest.

The seven-day detoxification program is geared toward supporting

the skin, lungs, kidneys, intestines, and the master filter and detoxifier—the liver. The program is centered on diet, nutritional supplementation, and several modes of circulatory stimulation. Anyone who is seriously interested in doing a detox program should purchase the book by Doctors Bennett and Barrie.

The diet is quite simple. For the first two days of the program, you don't eat anything (liquid fast). You are allowed to drink lemon water and herbal teas only. If this proves too intense for you, then go ahead and take in some fresh fruit or vegetable juices. The first two days can be intense, and some people experience fatigue, headaches, and, of course, hunger (duh!).

On days 3-7 you get some food (yippee). Before you begin salivating, let's talk about the food restrictions. Foods to avoid include meats, eggs, dairy, sugar, honey, molasses, artificial sweeteners, corn, wheat, most beans, grapefruit, butter, margarine, most condiments, coffee, teas, sodas, and alcohol. "Holy Cow, doc. What can we eat?" You're all so impatient; I'm getting to that. Foods to include are fresh fruit, fresh vegetables, brown rice, mung beans, miso, olive oil, flax oil, herbal teas, fresh fruit juices, fresh vegetable juices, sea salt, vinegar, soy sauce, and culinary spices. Still salivating? It's really not that hard. After all, it's only seven days out of your life.

Besides the above foods, it is recommended that you eat some of the more detox enhancing/healing foods on

continued on page 2

# History supports medical mushroom use

The earliest proof that mushrooms may have medicinal use dates back to a 5,300-year-old frozen mummy discovered in the Italian Alps. The well-preserved Neolithic man was carrying mushrooms in his medicine pouch.

As long as 4,000 years ago, Oriental medicine used mushrooms as a staple for medicinal herbs. In the first century, Greek physician and pharmacologist, Dioscorides, included medicinal mushrooms in his fundamental work, *De Materia Medica*, which stood as medical dogma for the next 16 centuries.

For the last 30 years, research into the use of mushrooms for medicinal purposes has been led by Chinese and Japanese scientists. The research demonstrates that mushrooms are excellent in making drugs that boost the immune system and assist almost every bodily function.

At least 5,300 years ago people realized some uses for mushrooms that we are just learning about.

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### **Nutritional Medicine**

by Ron Hunninghake, M.D.

#### **Toximolecular**

Orthomolecular means "right molecules." These are nutrients: molecules your cells need to function correctly.

Toximolecular means "wrong molecules." These are poisons: molecules that interfere with correct cellular functioning.

Molecules are invisible to the naked eye. Science tells us that these unimaginably small particles function according to principles of physics. They react according to principles of chemistry. They interact according to principles of biochemistry. And within cells, the science of molecular biology defines their "dance of life."

The right molecules promote the life and health of cells. The wrong molecules lead to cellular dysfunction and death. When cells malfunction, organs degenerate. Aging accelerates. Our human functioning suffers. Disease ensues. Our life becomes defined by the limits of our disease. Possibilities shrink. Dreams fade. Death begins to look like a friend.

Ironically, the reigning western

medical paradigm is dominated by toxic molecules. That's right – pharmaceuticals are toxins. They function by selectively poisoning one organ system in order to correct an imbalance in another. Diuretics poison the kidney in such a way that sodium is "leaked out" to the immediate benefit of the worsening congestive heart failure patient. This selective poisoning happens rapidly. Death by pulmonary edema (the lungs filling up with fluid) is temporarily averted. The patient is dramatically spared.

The orthomolecular approach to congestive heart failure is much slower. Coenzyme Q10 is a slow feeding of the heart cells with a nutrient that enhances oxygen utilization. More energy is made. The muscle cells slowly get stronger. The recovery is non-dramatic but amazing nevertheless. Research confirms it, but there is no army of drug salesmen to promote CoQ10 to doctors who have never even heard of it, who know not how it functions, and who have been biased by their training to mistrust nutritional therapies.

Detoxification - Cont'd from page 1

a daily basis. These include beets, broccoli, green barley powder, Jerusalem artichokes, and rice protein concentrates. Beets are loaded with betaine. which can reduce the toxic effects of homocysteine and support fat utilization in the liver. The cruciferous vegetables like broccoli improve the capabilities of functional liver enzymes—promoting detoxification. Green barley powder provides antioxidant properties that protect against cellular membrane damage. Jerusalem artichokes contain inulin which promotes waste elimination through the kidneys, while stimulating the immune system. Lastly, rice protein concentrates are a source of amino acids, which are vital to supporting the liver's detoxification machinery.

"What about nutritional supplementation? Do we need to take supplements while doing the diet?" Yes, nutritional supplementation is vital while

going through this process. There are eight components of the supplementation program:

- 1. Antioxidants for tissue protection (lipoic acid and vitamins C and E).
- 2. Amino acids to assist the liver in the breakdown of toxins (NAC and glycine).
- 3. Bile lubricants to keep the liver and gallbladder flowing smoothly (dandelion root, turmeric, and lecithin).
- 4. Bile binders to promote elimination of toxins (charcoal and soluble fiber).
- 5. Friendly bacteria (probiotics) to promote intestinal health.
- 6. L-glutamine and NAG to support the integrity of the intestinal lining
- 7. Milk thistle to enhance glutathione production (antioxidant important for detoxification) and to stimulate the *continued on page 3*

Detoxification—Cont'd from page 2

detoxification enzymes of the liver.

8. High potency multivitamin to cover the bases and support the biochemical processes involved in cellular detoxification.

In addition to the diet and nutritional supplementation, it is important to stimulate the circulatory system and other organs of elimination (skin and lungs) through various techniques. Namely, hydrotherapy is used to enhance blood circulation to the kidneys, intestines, and liver. Hydrotherapy involves the use of hot and cold water in conjunction with electrical muscle stimulation over body points that correspond to the organs of digestion and elimination. In addition, skin brushing is recommended to promote the health of the skin and lymphatic systems. Lastly, breathing exercises are utilized to calm the mind, oxygenate the tissues, regulate autonomic function, and promote lung health.

The spring or summer is a great time to get started on a detoxification program. So what are you waiting for—out with the old, in with the new.

# Walking may melt more pounds than running

A brisk walk just might be better than a fast run for burning pounds, according to a small study that appeared in the *International Journal of Sports Medicine*.

In this study, 14 women embarked on a three-month exercise program. The women who worked out at a moderate pace (brisk walking) lost more weight than did those who exercised at a higher intensity.

The researchers in Greece discovered this by assigning the 14 normal weight and overweight women to one of two groups: one that exercised on a treadmill at a moderate pace four times a week and one that worked out at a vigorous pace four times a week. The researchers set the duration of the workouts so that both groups burned 370 calories.

After three months, the walking group lost an average of seven pounds while the runners lost only four pounds.

### **HEALTH HUNTERS AT HOME**

### Will grapefruit really help you lose weight?

Since the 1930s, grapefruit has been used for losing weight, but there was no scientific proof that grapefruit really worked.

When the "Hollywood Diet" was first introduced in the '30s, people ate grapefruit, hard-boiled eggs, green vegetables, and melba toast to lose weight. This probably worked since people were eating only about 585 calories a day when they were on the diet. Since then, many diets have incorporated grapefruit, grapefruit juice, and grapefruit capsules to help people lose weight.

Again, there was no scientific proof grapefruit worked. It was just handed down as if it would work and the lay public accepted it as fact. Well, there is now scientific proof that grapefruit works for losing weight.

Ken Fujioka and his colleagues have now published a report titled "The Effects of Grapefruit on Weight and Insulin Resistance: Relationship to the Metabolic Syndrome" in the Journal of Medicinal Food recently. Wow, the title is a mouthful! A preliminary report appeared in Diabetes in 2004 by Fujioka, Greenway, and Sheard, three members of the team of authors who published this paper.

The research patients were all obese at the beginning with a body mass index (BMI) of between 30 and 40 kg/m², but they were all free of type 1 or type 2 diabetes. The researchers also encouraged the patients to walk 20 to 30 minutes three to four times each week while they were on the diet.

The researchers randomized 91 patients to one of four groups: a placebo group, those eating a half of a grapefruit before eating their three meals each day, those who drank 8 ounces of grapefruit juice, and those taking a grapefruit capsule and drinking apple juice. They continued eating the food they were eating before the diet. In the end, 77 patients completed the entire 12-week program.

The results of this research are interesting. "This pilot study looking at the effects of grapefruit and grapefruit

products showed that eating a half of a fresh grapefruit before each meal three times a day is associated with 1.6-kg (3.6 pounds) weight loss over 3 months in obese subjects with or without metabolic syndrome. When only those subjects with metabolic syndrome were considered, the grapefruit group, the grapefruit capsule group, and the grapefruit juice group all lost more weight than the placebo group."

The interesting thing about the metabolic syndrome people is the overproduction of insulin and insulin resistance.

"The grapefruit group had a significant reduction in the 2-hour insulin level compared with grapefruit capsules, but not with placebo, when the study was analyzed without respect to

the metabolic syndrome." But when only those people with

metabolic syndrome were considered, those eating a half a grapefruit before each meal had a significant reduc-

tion in the 2-hour post-glucose insulin level. This reduction in insulin is consistent with an improvement in insulin resistance.

So, what did we learn from all of this? The whole grapefruit group showed a reduction in body weight when compared with the placebo group. The grapefruit group who had metabolic syndrome showed up with a significant weight loss when compared with the placebo group.

"In addition, the grapefruit group had a significant decrease in the 2-hour post-glucose insulin, suggesting an improvement in insulin resistance."

This study does show that eating a half of a fresh grapefruit before eating your meal does work for losing weight—even when you continue to eat meals like you were eating before adding the grapefruit to your diet. Now, if you would reduce the number of calories that you ate, along with adding the grapefruit to your meal, you may lose more weight.

Maybe they did know what they were doing back in the 1930s.

—Richard Lewis

### INFORMATION WORTH KNOWING

While Irritable Bowel Syndrome (IBS) is one of the most challenging disorders for both the health care professional and the patient, there has been a quantum leap in the way physicians and researchers think about IBS. IBS is a disorder characterized by an altered bowel motility and hypersensitivity. This includes a variety of symptoms such as abdominal pain, diarrhea, constipation, and bloating. Although specific symptoms need to occur to have the IBS diagnosis, other symptoms can vary from person to person and even be different for the same person at different times. Jonathan M. Berkowitz, M.D., has written *Overcoming Irritable Bowel Syndrome*. This book offers you power through knowledge about IBS. Some chapters are devoted to learning how the digestive system works and what can go wrong with that system. Other chapters explore the connection between mind and body, diet, and the use of nutrients to alleviate symptoms. The questions this month are taken from his book.

There is a complex interplay between the central nervous system and the bowel nervous system that occurs to bring about IBS. The physical and psychological components form a theory called \_\_\_\_\_

- a. Mind Body Model
- b. Einstein-Bowel Model
- c. Brain-Gut Model
- d. Food Disease

IBS is a common condition with \_\_\_\_\_ percent of the population having the problem. IBS is the most common reason for primary care physicians to refer someone to a gastroenterologist.

- a. 10 to 20
- b. 15 to 20
- c. 20 to 25
- d. 25 to 30

Because of five decades of intensive research, health care professionals can now identify the anatomic, microscopic, infectious, and/or biochemical problems that cause IBS.

- a. True
- b. False

How long it takes for bowel contents to move through the small and large intestine is a very useful way to understand IBS. The average time for food to move through the ascending and transverse colon is \_\_\_\_\_ hours.

- a. 12
- b. 15
- c. 24
- d. 36

A diagnosis of IBS is often arrived at through a process of elimination (no pun intended). Some disorders that can mimic IBS are lactose intolerance, gastroesophageal reflux disease, colon cancer, and

- a. peptic ulcer
- b. hyperthyroid
- c. hypothyroid
- d. Reynold's disease

While the symptoms of IBS may be difficult to live with, IBS is not fatal, does not reduce your lifespan, and with proper care can be managed or cured.

- a. True
- b. False

One study found that people with diarrhea-predominant IBS had the most adverse reactions to

- a. mold
- b. house dust
- c. weather
- d. food

### What to plant??

by Gary Branum, Ph.D.

The Brightspot Garden here at the Center is a Certified Organic Garden. Each of us probably has our own ideas about what "organic" means and why it's a good idea to eat organic produce. But have you ever wondered how we here at The Center decide which varieties of each vegetable to plant? There are thousands of different vegetables available. For example, one seed company sells only tomatoes and has over 250 varieties listed in their catalog.

Each vegetable is defined by its DNA, therefore each variety has a certain collection of proteins, amino acids, starches, and sugars bound together in a specific manner that makes it what it is. Most of those chemicals (yes, they're all chemicals) are found in every vegetable. It's the way they're put together that makes each one unique. The term "organic" refers to the manner in which the plant is grown, cared for, and processed.

Modern fruits and vegetables have been bred for bulk production. Large farms want firm produce that doesn't get bruised during shipping, is large and attractive, can be picked quickly, and has a long shelf life. Plant breeders have obliged by developing varieties that meet these requirements. Note that "flavor" is not one of the requirements.

I'm frequently amazed at the blandness of commercial produce. Corn is tough and starchy, tomatoes are hard and tasteless, and strawberries, although big and pretty, don't taste much like strawberries. When I bite into a tomato or strawberry, I want my mouth to explode and juice to run down my arm.

Here at the Brightspot garden we select vegetable and fruit varieties for flavor and nutrition rather than attractiveness or the ability to tolerate rough handling. Many varieties are heirlooms that have been around for generations, the same varieties that your grandmother had in her garden. Most of the varieties that we use are old friends that we've grown for years because they do well in our climate and we like the flavor and appearance of the fruit. Our produce is juicy, flavorful, and nutritious...and sometimes ugly.

We hope you'll come visit the garden. I guarantee you won't find flavor like this at your local supermarket! [#]

<sup>•</sup> FOR ANSWERS, SEE PAGE 7 •

# Test of the Month

by Dr. James A. Jackson, Director, Bio-Center Laboratory

# Cytotoxic food sensitivity test

The Merck Manual states, "The daily human diet contains as many as 100,000 chemical substances (e.g., 1 cup of coffee contains 1,000). Of these, only 300 can be classified as nutrients and 45 as essential." Some things are added to food to improve production, processing, and packaging of food. These are preservatives, emulsifiers, antioxidants, and stabilizers. Spices, flavors, odors, colors, phytochemicals, and many other natural products improve the appearance, taste, and stability of foods.

Given the tons of food we eat over a lifetime, it is amazing that many more of us don't have problems with food allergies. Food allergies, or sensitivities, may affect our respiratory system, G.I. or digestive system, skin, and brain. We have seen patients at The Center who have been to many doctors but still have fatigue, headaches, constipation, diarrhea, joint and muscle pain, depression, ADHD, hyperactivity, etc. Many of these patients were found to have numerous food sensitivities.

The test is done on your own blood against purified antigens (food and additive). The reacted cells are checked microscopically by Sharon Neathery, who has been doing the test for 31 years. A negative response means you have no sensitivity to that particular antigen. A positive response (1+,2++,3+++, or4++++) means your cells were damaged by the antigen. The more positive the rating, the greater degree of sensitivity you have.

Reactive foods (1+ and 2++) should be eliminated from the diet for 30 days. They may be eaten again every four days if no symptoms appear. Foods rated 3+++ or 4+++ should be eliminated for 120 days and probably shouldn't be eaten again.

It is important to remember that the symptoms may become worse during the first 3 to 4 days of elimination of the positive foods!

## **Herbal History**

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

### Oat (Avena sativa)

The preparations of oat used for botanical medicine are the dried and chopped pieces of the stem, leaf sheaths, and leaf blades. The seed is the part of the plant harvested and eaten as a cereal grain. Avena preparations have become popular for their antidepressant, nervous system trophorestorative (good for the nerves), and cardiac tonic effects.

The alkaloids in the plant are believed to account for oats' relaxing action. The eclectics viewed it as one of the most important restoratives for conditions depending upon nervous exhaustion.

Avena is often used to aid people giving up addictive substances. The alcohol-based tincture of the fresh plant has proven promising in cases of nicotine withdrawal. In one study the use of Avena extract (1 ml of the liquid four times

daily) helped habitual tobacco smokers significantly decrease the number of cigarettes smoked. Avena is useful because it helps to restore strength to the nervous system.

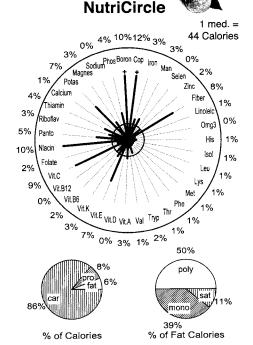
Avena is also thought of as being good for the heart. Nervous palpitations and weak hearts (decreased contractility) may respond to administration of Avena. The eclectics observed that Avena acted as a good tonic to improve the energy of the myocardium (heart muscle).

Avena has also been used for dermatological conditions. The seeds or grains of Avena are high in mucilage and are known to soothe inflammation of the skin. Oatmeal baths, compresses, and poultices are often recommended to relieve inflammation and itching of insect bites, eczema, topical fungal infections, and contact dermatitis.

### Food of the Month

by Donald R. Davis, Ph.D.

**NECTARINES** are a fuzzless variation of peach that originated in China over 2,000 years ago. They are not a cross between peach and plum, as some of us were taught. Their name probably derives from nektar, Greek for "drink of the gods." Nectarines tend to be more red, sweet, and round than peaches. Nearly all market nectarines come from California, where the harvest peaks in July. Winter stocks are imported. Let them ripen at room temperature until they become slightly soft. Out of 35 nutrients shown here, 18 are adequate compared to calories, especially vitamins C and E, niacin, potassium, boron, copper, and fiber.



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).

## **Mental Medicine**

by Marilyn Landreth, M.A.

#### Wahoo!

My oldest granddaughter recently graduated from Chisholm Life Skills Center, a school for children with special needs. Their graduation was as special as the young adults themselves. They marched into the auditorium to the tune of "Pomp and Circumstance." Most of the young adults marched with a specific amount of space between them and the person in front of them. A couple of the young people walked as fast as they could, almost running over the person in front of them.

All the teachers were present and were spaced out among the young adults. The graduates were all in caps and gowns and the teachers were all dressed up. You could almost feel the pride and love in the room for these special people who had attained so much against tremendous odds.

Many years ago the mentally and/or physically handicapped were kept at home or put in an institution. Now, they are given an education that allows them to develop to the best of their ability. The teachers and administrators can be proud of what they accomplish every day.

When they called Janae's name, the principal added a "wahoo" when introducing her. She just beamed as she danced across the stage to him. She forgot her diploma or to shake hands with the other dignitaries as she reached for the man who had challenged and supported her.

Janae is the happiest person I know. It is a joy to buy her presents because she is so excited and happy with everything she gets. Yes, she does have a lot of challenges in life and it has been difficult for her parents. They knew how important it was for Janae to have the best education possible. Sometimes they had to stand up and fight to get her the training and education that she needed. They have done a great job.

Whenever the challenges of life come my way, I like to think of Janae's big smile and think, "wahoo!"

### Case of the month

An 81-year-old woman came to The Center in February 1995 with high cholesterol, high blood pressure, and hearing loss. She also mentioned she had had cold feet since she started to school and now had cold hands, nose, and ears. After checking her over, Dr. Riordan suggested that she do some laboratory work.

Her urine potassium/sodium ratio was low normal and her pyrroles were a little high. In her blood work, the magnesium and manganese were low normal while her zinc was just above the middle of the normal range. Her blood count had no serious abnormalities.

The vitamin mini-profile showed a very low vitamin C and a high level of vitamin A and E. Both her cholesterol and triglycerides were high. Her hair analysis showed her minerals were either low or very low except for selenium, which was very high (7.2 with a normal range from 0.2 to 1.4). She had acceptable vitamin B1 and B6 levels. Her thyroid was normal at that time. Her urine vitamin C was on the low side.

Dr. Hunninghake started her on intravenous mini-chelations in March 1995 and she continues them off and on to this day. He also started her taking by mouth CoQ10, Cardi-rite for a multi-vitamin, magnesium gluconate for her blood pressure, and Emergen C for low vitamin C.

He recommended she get a hearing aid in 2004, which she did, and she continues to use it today. Her hearing had gotten quite bad before she got the hearing aid.

She continues coming to The Center. In January 2006, Dr. Hunninghake continued her on thyroid, which had been added earlier, and added Cal-Mag-Zinc for a muscle relaxant, melatonin, and one aspirin before going to bed to help her sleep. All of this was given to her because she said that she had trouble falling asleep and staying asleep.

In May 2006, Dr. Hunninghake said that she was doing well and that she continues to be a very good water drinker, one reason why she is doing so well at age 92.

### CENTER UPDATE

### It might be mom's fault

For decades, we have attributed inheriting cardiac problems that we may have to our dads. An article published recently in the *American Journal of Preventive Medicine* by Dr. Kristina Sundquist of the Center for Family Practice in Stockholm, Sweden, suggests moms may be to blame as well.

The researchers created a database of 10,946 male patients and 3,281 female patients who had a mother and/or father with heart disease. The researchers compared the number of heart disease patients with a parental history of similar heart problems to the number of heart patients with no parental history of heart problems.

The researchers found men had a 55% greater risk of developing heart disease if they had a mother who had heart disease. They also found that men had a 40% higher risk of heart problems if their father had heart disease than

men with no parental history of heart problems. The risk doubled to 109% for male patients if both parents had heart problems.

"Maternal transmission of CHD [coronary heart disease] was stronger than paternal transmission in women as well, 43% versus 17%," the researchers said. The risk if both parents had CHD was 82%. The researchers also found that men and women who had at least one parent who developed premature heart disease, before age 55 for fathers and 65 for mothers, were at even higher risk.

Dr. Sundquist speculated that the greater influence from mothers could come from genetics or from some other form of fetal programming of metabolism and other heart disease risk factors. She also suggested the child may share other risky habits and behaviors during childhood.

#### Answers from page 4

c. Knowing there is a connection between the psychological and physical has changed the way researchers and health care professionals think about IBS.

b. IBS is responsible for 20% to 50% of all specialist referrals. IBS is also responsible for about 12% of primary care visits.

b. Multiple theories have been put forth to explain IBS but do not hold true for a majority of cases.

b. It takes another three hours to go through the descending colon. If food passes too fast, diarrhea may result. If it moves too slow constipation may result.

a. These disorders need to be ruled out because the symptoms found in IBS are also found in multiple gastrointestinal disorders.

a. Part of the challenge of dealing with IBS is that it has multiple causes.

d. People with diarrheapredominant IBS respond better to food elimination diets.

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### OVERCOMING IRRITABLE BOWEL SYNDROME

by Jonathan M. Berkowitz, M.D. Irritable bowel syndrome (IBS) is sometimes seen as a mysterious illness in which the large intestine does not function normally. The causes for IBS are not fully understood and treatments are not always successful. This book explores the best of conventional and alternative therapies. Soft cover.

Retail: \$14.95 Health Hunter: \$13.46

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with James Jackson, M.T.(ASCP), Ph.D. Have you experienced fatigue, headaches, intestinal gas, bloating, diarrhea, memory loss, depression, drowsiness, or joint and muscle pain? If so, Candida albicans or yeast overgrowth may be suspected. Dr. Jackson discusses how The Center tests for this infection and how it affects your health.

#### REDUCE YOUR RISK FOR DEMENTIA AND ALZHEIMER'S DISEASE

with Rebecca Kirby, M.D., M.S., R.D. The most common chronic condition in the U.S. puts Americans at a 74% risk for dementia. Learn about the risk factors associated with memory loss and learn how to reduce your odds of getting dementia.

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### **Lunch & Lectures:**

#### June:

- 1 Trans Fats: and You Thought Lard Was Bad
- 8 Control Inflammation, Lose Weight, Look Younger
- 15 Organic Nutrition—More Than Nutrition?
- 22 Still Nuts About Nuts, 12 Years Later
- 29 Parasites—Nature's Hitchhikers: How to Avoid Giving Them a Lift

### July:

- 13 The Role of the Compounding Pharmacist in Health Promotiion
- 20 Tomatoes: Wolf Peach or Love Apple
- 27 Monitoring the Effects of IV Vitamin C in Cancer Patients

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Health Hunter

## Green tea may ward off diabetes

Drinking green tea, as long as it is caffeinated, may protect women and overweight men from developing type 2 diabetes, the type that is non-insulin dependent, according to a Japanese study that appeared in the *Annals of Internal Medicine*.

In the study, 17,412 men and women between the ages of 40 to 65 and free of diabetes at baseline comprised the group. New cases of diabetes occurred in 213 women and 231 men over a five-year follow-up period.

Those who drank six or more cups of green tea a day were 33% less likely to develop diabetes when compared with subjects who did not drink green tea. Drinking black or oolong teas did not have the same effects as green tea did in protecting against type 2 diabetes.

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