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NEWSLETTER

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“D.A.M.E.” your food and full speed ahead for good health

by Dr. James A. Jackson

The old saying “you are what you eat” is true up to a certain point. It is very important to eat whole foods with plenty of fruits and vegetables. The physicians at The Center recommend that people eat foods that are the “color of the rainbow.” When you look at your plate, you should see at least four or more different colors: green, orange, yellow, red, purple, etc. These foods will contain important bioflavonoids (plant chemicals) and enzymes. Therefore, the more colors, the better.

Many things must happen after you eat foods to get these molecules to your cells.

When we say D.A.M.E. your foods, we are not really cursing them. We are talking about four very important steps your body must perform in order for the molecular nutrients to get to your cells. These are **D**igestion, **A**bsorption, **M**etabolism, and **E**xcretion. Food is ingested in forms that are not available to your cells. Nutrients cannot be absorbed from the digestive tract until they have been reduced to smaller molecules. This process is called digestion. Your cells cannot use a carrot or tomato, but they can use the molecules beta-carotene and lycopene. Therefore, many things must happen after you eat foods to get these molecules to your cells. Proteins must be broken down to amino acids, starches to monosaccharides, and fats to glycerol and fatty acids. During this process, vitamins and minerals are also

made more absorbable, especially the fat-soluble vitamins. This process is mainly the work of various enzymes.

Digestion begins in the mouth with proper chewing to initially break down the food into smaller parts and mix the food with enzymes such as amylase. Coating the food with saliva from three sets of salivary glands is important, especially with dry foods, so they will easily pass down the esophagus to the stomach. Proper dental hygiene is important to maintain the teeth. Your mother was right when she told you to “chew your food.”

Water is also very important to digestion, as most of the digestive fluids are 95% to 99.5% water. Saliva, for example, is 99.5% water. Certain drugs (alcohol and morphine) and minerals (potassium, calcium, and bicarbonate) are also secreted in the saliva. The pH of the saliva is around 7.0 or neutral.

The esophagus is a muscular tube about nine inches long that carries food and liquids from the mouth to the stomach. It must also be working properly for proper digestion. If one has “G.E.R.D.” or other esophageal problems, digestion is affected.

When the food reaches the stomach, hydrochloric acid (HCl) and enzymes continue the digestion process. The stomach muscles mix all the food and stomach chemicals together. Many of us, as we get older, produce less stomach acid. That is why our physicians will sometimes order a test to measure stomach acid on our co-learners. Other important digestive factors


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Genetic basis for coronary problems doesn't hold up

Evidence from twin and epidemiological studies suggests a genetic basis for atherosclerotic heart disease and acute coronary syndrome (ACS), but it just doesn't hold up under closer scrutiny.

In a recent study reported in *The Journal of the American Medical Association*, researchers looked at 811 patients who had ACS along with 650 age and sex related control subjects.

Their blood was checked for 85 gene variants with only one genotype found that was nominally significant and four additional genes were positive. None of these was found more frequently than what would be expected by chance.

Their conclusion: “We were unable to confirm as risk factors ACS 85 genetic variants because none was unequivocally validated in this large case-control study of 1461 participants.” The gene risk factor didn't hold up as a cause for atherosclerosis and acute coronary syndrome. We are still unique individuals. 

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Nutritional Medicine

Longevity

The *Oxford Dictionary of Quotations* does not have in its index the word "longevity" but has 98 quotations listed under the word "old." Perhaps this tells us something about how we view the process of aging.

We do not, apparently, view aging as the process of extending our longevity so that we can experience more, learn more, and prolong our usefulness for a greater length of time. Instead, we fear old age. But as Dr. Hans Selye so succinctly states: "In all my autopsies (and I have performed quite a few), I have never seen a man who died of old age."

So, what is longevity anyway? First, there is the length of life of our total being as measured from birth. Secondly, there is the length of life of the cells of our different tissues. No matter what our age, there are no cells in our bodies except for those in our brains and spinal cords that are even a decade old.

The longevity of our red blood cells is only about four weeks. In the past second, we have disposed of and regenerated about 2 ½ million red blood cells. This means, in terms of our red blood cells, we are really very young. Our white cells are also relatively young. Even our cartilage and bone cells are, at most, about six years old. So, our various parts are really quite youthful. It is only our total beings that have lived

the full chronological age.

So, why don't we all achieve youthful, vigorous longevity? Or as Dr. Emanuel Cheraskin would ask, "Why are some of us 40 going on 70 and others of us 70 going on 40?" One of the answers to that question can be found in the level of nourishment our cells receive.

Millions of chemical reactions are taking place in our cells every second. Multiply this by the 60 trillion cells in our bodies, and the awareness of just how much nourishment is needed becomes more apparent. Our cells cannot be produced from nothing. Nutrients such as vitamins, minerals, trace minerals, amino acids, and the right kinds of essential fatty acids must be provided every moment we and our cells are alive.

To stay alert and vigorous it is important to realize that the organ in the body that uses the most energy is the brain. Take care of your nourishment by building your reserves and you can stay alert and vigorous as did many of those we know from history. Winston Churchill wrote a six-volume history of World War II in his 70's and won the Nobel Prize. Benjamin Franklin wrote his remarkable biography when he was in his 80's. Many people throughout history have led productive lives well into their 70's, 80's, and 90's and you can too. [H]

"D.A.M.E." your food—Cont'd from page 1

in the stomach are histamine, pepsin, rennin, and lipase. Digestion continues after food leaves the stomach and enters the intestine.

As the acidic content leaves the stomach, the pancreas and liver generate enzymes and chemicals to continue the digestion process. Sodium bicarbonate is produced to neutralize the stomach acid. The liver produces bile to help fat-soluble nutrients be absorbed. As the digestion process continues, Absorption is the next major step. After the mouth, stomach, pancreas, and intestine have broken down the fats, carbohydrates,

and proteins to small molecules, they must then cross the intestinal mucosa and enter the blood stream. This is where several problems may occur, not only with food but with many supplements as well.

Anyone with intestinal yeast infection, stomach ulcers, irritable bowel syndrome, parasites, Crohn's disease, ulcerative colitis, diarrhea, constipation, etc. will probably have absorption problems. The absorption surface of the intestine is about equivalent to the area of a tennis court.

continued on page 3


How can we detect an absorption problem? Easy; measure the nutrients in the blood. If they are absorbed, they will be in the blood; if not, they will be absent or very low. This is also one of the advantages of our Health Hunter/Beat The Odds program. It allows you to "see" the level of nutrients in your blood.

Metabolism is the next important step. All blood draining from the intestines goes directly to the liver. The liver has many functions. It makes proteins, it recycles many substances, it detoxifies toxic substances, it stores several substances, it activates and deactivates medications, and it makes and deactivates cholesterol. If the liver is not operating at its potential, the absorbed nutrients will not be metabolized.

What would cause the liver not to work properly? Various types of viruses such as hepatitis A, B, and C, Epstein-Barr, and CMV; alcoholism or illegal drug use; genetic problems; gall bladder problems; blocked ducts; lack of glutathione; certain parasites; etc. The liver, as well as the kidney (and in some cases the lung, sweat glands, and saliva), is involved in excretion.

Excretion is handled mainly by the liver, usually fat-soluble drug and food metabolites, and the kidneys, usually water-soluble substances. Gases such as CO₂ are removed via the lungs. Urea is excreted by the kidneys. Two ammonia molecules connected to one carbon molecule make urea. The ammonia comes from the breakdown of amino acids (proteins). If not excreted by the kidneys, or if the liver is severely damaged, the brain is damaged by the ammonia. Also, severe ulcers form in the mucous membranes.

After the nutrient molecules reach the cells, they are attached to certain receptors, cross the cell membrane, enter the cytoplasm, mitochondria, nucleus, etc., and "nourish" the cells, or in case of antioxidants, protect the cell from free radical or "oxidation damage." As an example, L-carnitine and CoQ10 are necessary for the mitochondria to make ATP, the energy source of the body.

So, do yourself and your body a favor—D.A.M.E. your food and full speed ahead to good health. 

HEALTH HUNTERS AT HOME

Another book review

Karen DeFelice presented a recent Lunch & Lecture at The Center covering enzymes and gave us an idea of how they work in the gut—or don't work. Then, we each got a copy of the book *Enzymes: Go With Your Gut* by Karen. This book has a subtitle: *More Practical Guidelines for Digestive Enzymes*. So, I thought that I would just leaf through the table of contents.

Sound familiar? Just like last month, I did, and I started reading it. I read it all and I would suggest that you do the same.

First, a little background. Karen has her master's degree in agriculture. She said during the Lunch and Lecture that when her first child was born he soon began banging his head on the floor. He would bang his head on the floor for hours on end—all day—day after day. This went on for several years with the doctors saying that he had severe autism and should be put in an institution.

Karen's younger son was different. He had chronic bowel problems. Karen also had frequent severe migraine headaches. They each had different symptoms.

She wrote, "Eventually, solutions came. Bit by bit. Following a process of analysis, research, application, then revise and refine, and try again, it was possible to hone in on each of our problems and deal with it."

It sounds like what Dr. Riordan used to say. The Center is like Sherlock Holmes, the fictional British detective.

"Scotland Yards could take care of most problems with the law. But when things got really tough, Scotland Yards called in Sherlock Holmes to solve the case." When other circumstances don't work, it is time to call The Center.

We look very closely at the individual to find out where she/he is doing poorly with his/her biochemistry, and then get that part of the biochemistry back in good shape, and the person begins doing well.

Dr. Riordan also said that individuals are like plants. If a plant is doing poorly, you can give it nutrients and it does well. Karen did this with

her children and herself. She used her agricultural research model to discover that each one had problems with digestive enzymes.


She wrote that when you build a house you gather all the material you need—concrete, lumber, plumbing, electrical, and other materials you need for the house. But nothing happens with the materials without construction workers. Digestive enzymes are to the body as construction workers are to the building of your house. Without them, nothing happens. In your body, you may have all the nutrients you need, but without enzymes the nutrients are not very effective.

Karen goes on to explain such topics as enzyme nutrition, trends in enzyme therapy, digestive enzyme supplements, biological population dynamics, probiotics (both whole foods and supplements), and much, much more. But one chapter really interested me—"The Great Low-n-Slow Method."

Taking digestive enzymes is much like when she was teaching her son to water the new grass seeds in their lawn. She had to get him to slow down and sprinkle the seeds gently several times a day rather than just pour gallons of water on the seeds. The same is true for fertilizer. Just a small amount spread evenly will do.

Digestive enzymes are much the same. "A 2-year-old tends to need as many enzymes as a 20-year-old or a 60-year-old eating the same quantity of food." That fascinated me.

For the Great Low-n-Slow Method, you first start with a broad based low protease enzyme product. Protease tends to be the workhorses in healing. Second, she suggests adding a high protease enzyme product, along with the broad based enzyme after the broad based has had a chance to heal. Third, add other enzymes for special uses as a final step. Just don't be in a hurry to go to the next step until the step before it has had a chance to work.

Again, I suggest that you read the book. It might help you or your spouse or friend. 

—Richard Lewis



INFORMATION WORTH KNOWING

by Marilyn Landreth, M.A.

Do you or someone you love suffer from depression? Do you crave sweets or starchy carbohydrates? Do you feel hungry or shaky an hour or two after eating carbohydrates? Are you often excessively sleepy? Do your arms and legs feel heavy? Are your feelings easily hurt? If you answered, "yes" to one or more of these questions, according to Malcolm Noell McLeod, M.D., you may be suffering from the type of depression known as atypical depression. He has been treating this type of depression with a new and natural method. His book, *Lifting Depression: The Chromium Connection*, pieces together hundreds of clues from his insights during therapy sessions and the research he has conducted. The book describes a five-step program that has helped others be free of depression. Dr. McLeod writes in a manner that holds your attention while giving many references to lend credence to his theory. The questions this month are taken from his book.

1 The term "atypical depression" is misleading because it implies that it is a rare form of depression. One-half of the depressed people in America suffer from atypical depression. This amounts to _____ million people.

- a. one
- b. ten
- c. thirty
- d. fifty

2 The first type of depression to be identified was associated with weight loss, loss of appetite, severe insomnia, self-loathing, and suicidal thoughts. This type of depression is labeled _____.

- a. bipolar
- b. severe
- c. melancholic
- d. mild

3 "To learn to treat disease, one must learn how to recognize it," was written by _____.

- a. Carl Menninger
- b. Albert Einstein
- c. B.F. Skinner
- d. Jean Martin Charcot

4 Iproniazid was given to patients with tuberculosis (TB) in the 1950s. Before the discovery of Iproniazid there was no medical treatment for TB. A side effect of the drug was a lifting of depression and a return of energy.

- a. True
- b. False

5 One physiological cause of depression is an underlying medical condition. A thorough medical evaluation can often find a medical cause of depression. Cushing's syndrome, hypothyroidism, as well as _____ can cause depression.

- a. vitamin B12 deficiency
- b. diabetes
- c. multiple sclerosis
- d. all of the above

6 As Dr. McLeod studied the effects of taking chromium picolinate in the treatment for depression, he found that the danger from taking the chromium far out-weighted the benefits.

- a. True
- b. False

7 Because Dr. McLeod's patients responded to chromium (an insulin-sensitizing agent), he suspected that their depression, excessive appetite, and unexplained exhaustion might be due to the insensitivity of their bodies to the action of _____.

- a. insulin
- b. protein
- c. fat
- d. vitamin C

Getting rid of pests—organically

by Gary D. Branum, Ph.D.

Where gardens grow, insect pests can't be far behind. These pests can reduce production, kill plants, and make vegetables inedible. So, how can we control these pests without using commercial insecticides?

There are four fundamental methods of controlling insect pests:

Crop rotation is a long-term control method, and today we're interested in the bugs that are eating the plants now, so we'll save this topic for another time.

Physical control, which consists of removing the bugs by hand or by using a small vacuum cleaner, can be used for small areas and limited infestations, but diligence is required to control pests that will hatch in a few days.

Biological controls can be divided into two categories: predators and infectious agents. Common predators, available at your local nursery, include lady beetles (ladybugs) and praying mantises. Ladybugs feed primarily on aphids, while the praying mantis is a hunter that feeds on pretty much all insects. Organic control methods available at most nurseries are *Bacillus thuringiensis* (abbreviated as BT), a bacterium that causes a fatal infection in chewing insects, and insecticides containing spinosad.

Poison is the last of the four methods and the only approved poisons for use in an organic garden are two plant-derived toxins: pyrethrum and rotenone, and two oils, neem oil and horticultural oils.

Remember, insects are a natural part of the environment. Treatment by any of the products listed above will also kill beneficial insects. A few bug pests in your garden are not going to have a major effect, so consider doing nothing to see if the problem becomes significant. If the pests begin to become a problem, try the least toxic of the methods above first, and give it a chance to work.

So treat your garden, treat your bugs, and treat yourself to the fruits of your labor!

[H]

• FOR ANSWERS, SEE PAGE 7 •

Test of the Month

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

Carcinoembryonic Antigen (CEA)

Another abbreviated test to remember is CEA. This test measures the presence of a "tumor marker." Tumor markers are used to help diagnose and monitor therapy of patients with various types of malignancies, evaluate a response to therapy, and as an indicator of recurrence of the cancer. Different cancers produce different markers and most have a "normal range." Elevated markers MAY indicate the presence of cancer since the cancer has to produce the marker.

CEA is used to help diagnose colon or colorectal cancer. If a CEA test is ordered, it must be noted on the request form if the patient is a "smoker or nonsmoker." CEA levels are elevated in smokers. The normal range for a nonsmoker is 0 to 3.0 ng/mL. For a smoker it is 0 to 5.0 ng/mL.

Progressive elevations of CEA (or serial monitoring) may show tumor recurrence three to 36 months before clinical evidence of metastases. A small rise may indicate local recurrence, while a large rise may indicate metastases to the liver. Liver scans become positive months after a rise in CEA. CEA is more sensitive to distance metastases of colon cancer than local recurrence. CEA is positive in about 63% of patients with colorectal cancer.

CEA should not be used as the only indicator of colon cancer. As stated before, it is elevated in smokers, as well as patients with inflammatory disease, some patients with hypothyroidism, cirrhosis, and in some patients with non-colorectal neoplasms. The Bio-Center Laboratory performs this test routinely on orders from our physicians to help care for our patients. [H]

"The doctor of the future will give no medication, but will interest his patients in the care of the human frame, diet and in the cause and prevention of disease."

—Thomas Edison

Herbal History

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

Throat support

We utilize a botanical product called H.E.M.P. plus (Throatease) by Wise Women Herbal for dealing with various infectious processes of the upper respiratory tract, namely the pharynx. The letters H.E.M.P. stand for Hydrastis, Echinacea, Myrrh, and Phytolacca. The formula also contains Queen's root. The botanical formula is a great antimicrobial for the throat and hence is best used for acute throat infections. The formula supports the throat's resistance to microbes while promoting lymphatic flow and decreasing congestion.

Goldenseal (*Hydrastis canadensis*) is antimicrobial and contains berberine, which works as an immune stimulant. Goldenseal acts as nature's bandaid by providing a slimy protective layer over injured areas of the throat. Echinacea (*Echinacea angustifolia, purpurea*) is an antiseptic, anti-inflammatory, antifungal,

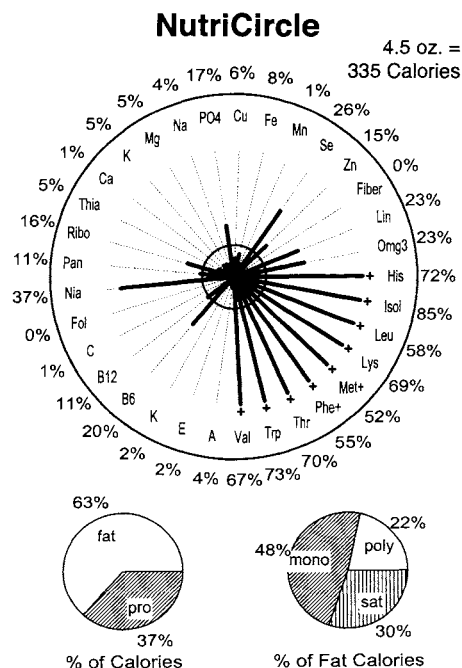
antiviral, and immune stimulant. Hence, Echinacea is useful for various infectious conditions of the throat. Myrrh (*Commiphora myrrha*) also acts as nature's bandaid while promoting expectoration and relieving pain (analgesic). Poke (*Phytolacca americana*) is useful in relieving congestion in hard swollen lymph nodes (lymphagogue). Poke should only be used in small amounts due to potential toxicity. Queen's root (*Stillingia sylvatica*) also works as a lymphagogue by stimulating the flow of new white blood cells to the tissues while promoting the removal of waste.

In acute situations with adults, I recommend ¼ to ½ tsp every 2-3 hours for 48 hours only. On days 3-6 go to ½ tsp four times daily. Days 7-10 decrease to ½ tsp three times daily. The herbal tincture can be mixed in water or diluted juice for increased palatability. [H]

Food of the Month

by Donald R. Davis, Ph.D.

CORNISH HENS originated from a small, plump-breasted breed of chicken from Cornwall, England. These slow-growing chickens are crossed with other breeds, usually the Plymouth Rock chicken. Rock Cornish "game hens" were first bred in Connecticut in 1950. They are small, tasty chickens, male or female, raised like other chickens and harvested young to make a convenient serving size. Nutritionally they are similar to other chickens. Nutrient amounts shown here are for a 4.5-oz. roasted weight, half of a typical commercial bird. The most notable nutrients are protein, omega-3 fat, niacin, selenium, and vitamin B₆.



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.

Flowers of life

Mother Nature has been quite cruel to us this year with her bright promise of an early spring dashed as she brought in snow to freeze the leaves and flowers. Now, she is once again decking out her bounty in flowers and foliage.

Matthew Fox said, "Looking for and enjoying beauty is a way to nourish the soul. The universe is in the habit of making beauty. There are flowers and songs, snowflakes and smiles, acts of great courage, laughter between friends, a job well done, the smell of fresh-baked bread. Beauty is everywhere." As we are challenged by life and the changeableness of the weather, we can choose to find beauty in everyday wonders.

On May Day one of our smallest neighbors left a May Basket on our front door. It brought back memories of helping our children fashion the baskets and sneak over to our elderly neighbors to leave the flowers. I was reminded of



a Chinese Proverb, "A bit of fragrance clings to the hand that gives flowers."

Speaking of flowers, I spent this last week working in my flower garden. Most of the time you could call it a pocket garden but as I planted flowers and spread mulch it seemed like it had multiplied in size. Quiet time spent digging in the dirt, listening to the birds, visiting with my neighbor, and planning the various shades of colors for my garden brought peace, relaxation, strained muscles, and a sweaty brow. After temporarily setting my garden to rights, it delighted my soul. Hopefully, I will be able to attend to it in a timely manner so the weeds don't overtake it.

Gardens are a little bit like life. We can plan our design and bring our ideas and schemes to fruition, but we know we have to pay attention or the weeds will take over. [H]

Case of the month

A 63-year-old woman came to The Center in June of 2004 with multiple concerns. Among them were fatigue, sinus headaches, a history of hypertension and high lipids, myositis/myalgia, and constipation. She told Ron Hunninghake, M.D., during her hour plus initial interview, that she had been constantly thirsty since 1987, in spite of drinking a lot of water every day. Also, her fatigue and fibromyalgia first flared up in 1987.

She had to retire at age 52 because of the fibromyalgia. According to her, she was a nursing instructor and she loved her job. It was hard to retire. She also told Dr. Hunninghake that she was cold all of the time and that she wore a jacket even in the summer.

She agreed to do the following laboratory tests that were recommended: coenzyme Q10; C-reactive protein; Epstein Barr; homocysteine; micoplasma/platelet aggregation screening; free T3 thyroid; vitamins A, C, E, B12, and folate, along with a B assessment profile; trace elements magnesium and zinc; amino acids; hair analysis; a complete parasitology; and a standard cytotoxic food sensitivity test—all in the blood. She also had the following urine tests: an indican, sodium/potassium ratio, pyrroles, a urine analysis, and vitamin C.

When she came back later in the month for the results of the tests, magnesium, thymic protein A packets, Pro EPA fatty acids, L-tryptophan, and an activated vitamin B6 were recommended. She also received an intravenous vitamin C in the form of a Meyers cocktail.

She continued in this way generally improving with occasional "holding-her-own" or backsliding.

She saw Rebecca Kirby, M.D., M.S., R.D., in January of this year and she said that she is sleeping better and she has more energy. She said that she has occasional aches, pains, and stiffness, but most of the time she feels great. She also says that The Center is responsible for all of her improvement. "I probably would not be here today without The Center," she added. [H]

CENTER UPDATE

The food pyramid

Several years ago, when the government came up with its food pyramid, The Center thought it might be a good idea to paint one on the west face of the pyramid. Then, the government agency started modifying the food pyramid and it became very complicated.

So, we had the west wall of the pyramid painted white again and did away with the food pyramid altogether.

Then, in the middle of 2005, the Japanese came out with Spinning Top Food Guide. The Canadians came out with Canada's Food Guide in 2007.

At first glance, the Japanese Spinning Top Food Guide looked like it just might be a good idea. But problems soon arose with the Spinning Top.

The top proved to be short in providing for the quantities of what it showed. For people with significantly unbalanced diets or a small interest in improving their diets, the Spinning Top Food Guide is useful to improve their diets.

"When trying to achieve a healthier dietary lifestyle and to improve the quality of life of the society as a whole, two factors, access to information and access to food, need to be considered," *Nutrition Reviews* said. So, it is back to the drawing board for the group that devised the Spinning Top.

Canada's Food Guide is a booklet that uses a rainbow to project the food choices. The booklet works well in showing food intake pattern development through this method, but it is a booklet and not something that can be presented on the face of the pyramid.

The U.S. continues to adjust the food pyramid and has come up with a pyramid that runs in six segments of varying sizes with each segment running from the top of the pyramid to the base.

For now, The Center's pyramid will remain white until someone comes up with a design that works well for the general public. [H]

Answers from page 4

- 1 c. According to the result of a study published in 1998, atypical depression is the most common type of depression seen in outpatient settings.
- 2 c. About 42% of outpatient diagnosis with depression suffered from atypical depression compared to 12% with melancholic depression.
- 3 d. Jean Martin Charcot (1825-1893) was the founder of modern neurology.
- 4 a. Iproniazid was an enzyme that allowed serotonin and norepinephrine to remain in the brain longer. It also led to liver failure.
- 5 d. Cushing's syndrome is caused by too much of a stress hormone to be present in the body.
- 6 b. A deficiency of chromium causes several adverse symptoms in the human body. He found that the benefits of taking chromium far outweigh any theoretical risks.
- 7 a. He theorized that depression and craving carbohydrates were also signs of insulin resistance. PH

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 CDs: Regular Price—\$14.95; Health Hunter Price—\$13.45
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LIFTING DEPRESSION: THE CHROMIUM CONNECTION

Malcolm Noell McLeod, M.D.

Millions of Americans suffer from depression that is linked to carbohydrate cravings, weight gain, and fatigue, according to the pioneering work of psychiatrist Malcolm McLeod. His observations have led to a safe, natural treatment for depression. Regular Price: \$24.95; Health Hunter Price: \$22.46

IMPROVING AUTISM OUTCOMES WITH MERCURY CHELATION

with Ron Hunninghake, M.D.

One of Dr. Bernie Rimland's discoveries of biological causes of infantile autism was mercury preservatives in childhood vaccinations. Removal of mercury by chelation, when used in conjunction with a tested protocol of nutritional interventions, can promote recovery from this dreaded illness.

DEPRESSED, ANXIOUS, IRRITABLE, AND ACHY—A USER'S GUIDE TO HYPOGLYCEMIA

with Chad Krier, N.D., D.C.

Complex hormonal fluxes can result from chronic ingestion of simple sugars. We derive energy and pleasure from the simple sugar molecule, but it can wreak havoc on the body's systems if not kept in check. Learn the lowdown on avoiding sugar's pitfalls (no pun intended!).

GOING WHEAT—LESS!!

with Rebecca Kirby, M.D., M.S., R.D.

Sensitivity to the proteins in wheat and the prevalence of celiac disease appear to be more common in the U.S. than has been generally recognized. Undiagnosed gluten sensitivity could be contributing to chronic intestinal problems, osteoporosis, autoimmune disease, joint inflammation, and more.

• To Order, Fill Out the Form Below •

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Lifting Depression	circle one book	_____	_____	_____
Improving Autism Outcomes	audio video CD DVD	_____	_____	_____
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Upcoming Events. . .

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Niacin good for cholesterol

In a recent lecture titled "Food Pharmacy III," Dr. Chad Krier said that niacin (vitamin B3) is involved in carbohydrate metabolism by helping the body create energy. He also said that it is a coenzyme for alcohol detoxification and a cofactor in the production of anti-inflammatory GLA (gamma linoleic acid, a fatty acid).

Dr. Krier added that good food sources of niacin include dairy, poultry, fish, lean meat, nuts, and eggs. For instance, six ounces of water packed tuna provides about 22 mgs of niacin, while six ounces of beef liver provides about 30 mgs of niacin. A cup of chopped peanuts will give you 24 mgs of niacin. Choose your food right and you can get quite a bit of niacin from it, according to Dr. Krier.

- "D.A.M.E." your food and full speed ahead for good health
- Throat support
- Flowers of life
- The food pyramid

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