

Health Hunter[®]

N E W S L E T T E R

Researchers find a key to coronary artery disease

Richard Lewis

Insufficient levels of essential fatty acids (EFA) in the blood are a key risk factor for coronary artery disease (CAD), according to a research team at Boston University Medical Center (BUMC).

...cardiovascular disease is associated with insufficient levels of EFAs.

These fatty acids, or fats, are labeled essential because your body cannot manufacture them. They must come from what you eat. For your body to manufacture many other needed fatty acids, it requires these EFAs to start the process.

The current push by many doctors on lowering the saturated fat and cholesterol in your diet to reduce the risk of CAD is misplaced, the BUMC researchers believe. "We propose that cardiovascular disease is associated with insufficient levels of EFAs," wrote Edward Siguel, M.D., Ph.D., co-principal investigator of the study reported in the August, 1994 issue of *Metabolism*.

"Unfortunately," he told *Cardiology World News*, "EFAs are difficult to obtain in processed foods

as food manufacturers generally remove them from plant products because they shorten shelf-life."

The research team found that patients with CAD have lower than desirable fatty acid profiles in their blood. In looking through prior studies, the researchers found no mention of EFA deficiency and CAD.

According to the BUMC research team, "These abnormalities, milder than the ones reported in patients with severe EFA deficiency, may produce subtle clinical changes such as increased lipids (cholesterol), increased platelet aggregation, and suboptimal cell function, including

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Little Things Add Up

When you understand all about the sun and all about the atmosphere, and all about the rotation of the Earth, you may still miss the radiance of the sunset.

A. N. Whitehead

Vitamin E and C help stop atherosclerosis

"This whole area of [plaque growth in arteries] caught my eye in 1967/68 when I came upon a paper published in 1950 that had to do with lipid profiles in rabbits and the seasons of the year. What it noted was when rabbits had nice green food to eat, lipid profiles changed, lipid blood levels went down, and lipids in tissues went down. Then when the rabbits went into the winter the levels went back up again.

"I wondered if it was the intake of vitamin C that was having an effect on the lipid change with a change in the seasons. So from that time on I have been working on antioxidants and atherogenesis," Anthony Verlangieri, Ph.D., Atherosclerosis Research Laboratory, University of Mississippi, told those attending the 14th International Conference sponsored by The Center recently.

Oxidated low density lipoprotein (LDL) in the blood, most researchers feel, is caused by oxygen free radicals, and this oxidized LDL has atherogenic or arterial plaque causing properties.

In 1980, he and his colleagues began a ten year, 1.5 million dollar study to look at the effect of vitamin C and E on atherogenesis (the growth

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Nutritional Medicine

by Ron Hunninghake, M.D.

Empiric prescriptions

In 600 BC, alternative medicine was on the rise.

The Cnadians of ancient Greece practiced the highly unorthodox method of classifying their patients according to the organ most afflicted with the illness. These renegade physicians actually believed that knowledge of the disease was more important than knowledge of the patient. By studying a large population of patients with similar disease processes, they believed that general remedies could be developed for anyone with that particular disorder.

Their orthodox rivals on the island of Cos thought this was pure lunacy. How utterly ridiculous to even think that two individuals might have the same cause for their illnesses, no matter how similar they appeared.

The Cosians believed that mental classification schemes, while a good idea, did not do justice to all the unique differences of their patients: diet, level of physical exer-

cise, family upbringing and current setting, personality strengths and weaknesses, and a whole host of other factors that could be discerned by questioning and observing the patient.

Further, how could just one remedy for each disease modify all these contributing variables? Multiple remedies based upon natural healing mechanisms, such as diet, fresh air, proper attitude, herbs, hygienic considerations, the arts, and a whole host of carefully chosen *empiric prescriptions*, comprised the treatment of choice for a complex illness.

Not even Hippocrates, the medical champion of the day, and the father of the highly empirical "Hippocratic Method"...not even he could talk any sense into these so-called "rationalists."

Many respected empiricist physicians wondered about their misguided rationalist brethren: "What is this world coming to?" H

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reduced cell life."

They proposed "that hyperlipidemia (high cholesterol) is more an indicator of abnormal fatty acid metabolism or EFA deficiency than mere presence of excessive cholesterol. Incidentally we found significant biochemical evidence of EFA deficiency...consistent with the view that EFA deficiency is the major cause of hyperlipidemia and CAD."

According to Siguel, one should strive to reach and maintain optimal weight, not by reducing saturated fat and cholesterol in your diet but by achieving an optimal balance of

essential fatty acids from meat, fish, and plenty of vegetables. You need to focus on whole foods rather than processed foods.

Excess calories from any source are stored as saturated fat in your body. It is calories, rather than the consumption of saturated fats and cholesterol in your diet, that control levels of saturated fat in your body.

"Avoiding cholesterol and saturated fats in the diet and replacing those calories with carbohydrates will not decrease blood levels of saturated fat and cholesterol," Siguel

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told *Cardiology World News*. "The body simply makes more cholesterol and saturated fat from carbohydrates. Eating more essential fatty acids increases their body level because essential fatty acids are an essential nutrient that the body cannot make."

The omega-3 and omega-6 fatty acids have been shown in previous studies by several research groups to reduce serum cholesterol and triglyceride levels. There are plenty of sources of omega-6 fatty acids in the average American diet today. What is needed is more of the omega-3's. Fish, vegetable oils, and soybean products such as tofu are some excellent sources of the omega-3 fatty acids. The research team even suggests soy bean or walnut oils or fish oils as another source and as a way to bypass some of the metabolism problems.

"Fish oils bypass the metabolic block. It is now well established that [omega-3] derivatives increase HDL cholesterol and reduce triglycerides, total cholesterol, plasma fibrinogen, and diastolic blood pressure. Eating vitamin E in addition to fish oil further reduces triglycerides and fibrinogen levels... , suggesting inhibition of fatty acid peroxidation by vitamin E," the researchers found.

They also pointed out that omega-3 and omega-6 derivatives such as fish oil or plant oil extracts, like evening primrose oil or borage oil, may meet the EFA requirements with fewer calories.

The BUMC researchers concluded by saying, "diagnosis and treatment of fatty acid abnormalities through nutrition is cheaper than drugs or surgery and could play a major role in prevention of cardiovascular disease." [H]

HEALTH HUNTERS AT HOME

I've never met a bean I didn't like

The way I like beans fixed best is often. I have eaten them for breakfast, lunch, dinner, and as a snack in between meals. I even eat cold bean sandwiches for a quick lunch or snack. Each time my wife looks at me as if she is doubting my sanity.

When the cooks in the Taste of Health restaurant at The Center fix their wonderful three bean salad with its subtle hint of garlic, I feast.

But beans don't get much respect. One often hears much comment in polite, and some not too polite, conversation about the side effects of eating beans. There is even that bit of prepubescent scatology we all learned about, "Beans, beans, the musical fruit ..."

Beans are fighting back, though, as more and more healthy reasons are discovered for their consumption.

Your heart and circulation system benefit in many ways from eating beans. In most cases, dried beans are low in fat, ranging 0.8% to 1.5%. The two exceptions are soybeans at 19% and peanuts at 46%. And Dr. Davis, a consultant from the University of Texas at Austin, says the fat in peanuts and soybeans are ones that the body can easily assimilate and needs.

Beans are also an excellent source of protein, not as good as animal protein, but they don't come with the fat and other baggage that comes with most commercially available animal sources.

Beans need to be combined with grains or flours to make a more complete protein to rival meat. For instance, red beans and rice, pasta and bean soup, or refried beans (without added fat) and corn tortillas are good examples of commonly

available foods that are good combinations to make a more complete protein. And, of course, my cold bean sandwich is good, too.

Part of the reason beans get a bum rap is their high fiber content. If your gut isn't used to high fiber, it can cause gas. By increasing the fiber in your diet more gradually, your body will adapt to the change and the discomfort will diminish.

Beans are a rich source of soluble fiber and soluble fiber has been connected with many health advantages. For instance soluble fiber has been shown to lower blood cholesterol and blood sugar, which can help reduce heart disease and the incidence of diabetes.

The insoluble fiber in beans is great for optimizing bowel functioning. If you have ever heard Dr. Riordan talk about floaters and sinkers, insoluble fiber helps increase floaters. If you haven't heard about this phenomenon, ask me.

In the last few years evidence has appeared in medical journals showing that dietary fiber decreased risk of colon cancer.

Low fat. High fiber. Good source of protein. Beans are, of course, an excellent source of complex carbohydrates. All of this you get from cooking some dried beans in water. You can throw in some spices and vegetables to add a more piquant flavor.

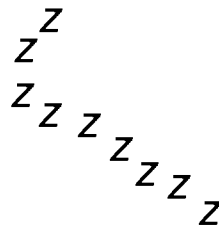
Maybe this evening I will go home and drag those leftover beans out of the refrigerator and spread them on whole wheat bread and add some fresh cracked pepper, cucumber slices and alfalfa sprouts — just for my health, of course. [H]

Richard Lewis

INFORMATION WORTH KNOWING

Millions of Americans suffer from not being able to go to sleep at night. Dr. Deepak Chopra presents a new and exciting program for achieving a good night's sleep. Based on mind/body principles, this program works on two levels. Learn techniques to eliminate insomnia and find the deeper issues of a lack of sleep. The questions this month are taken from his book, *Restful Sleep: The Complete Mind/Body Program for Overcoming Insomnia*.

1. Each year, at least _____ Americans see their Doctor because they are unable to get the rest they want.
 - a. 10 million
 - b. 5 million
 - c. 1 million
 - d. 10 thousand
2. Older people do not need as much sleep as young people so insomnia is to be expected among the elderly.
 - a. True
 - b. False
3. In terms of biological functions, our brain is really "_____" during the dreaming stage than during the day when we are awake.
 - a. less aware
 - b. working harder
 - c. not any different
 - d. none of the above
4. Scientists who have studied sleep for many years have found that the biological need for sleep is _____.
 - a. of no importance
 - b. still a mystery in many ways
 - c. a mini hibernation left over from prehistoric time to conserve calories
 - d. none of the above
5. Most people think that being deprived of a night's sleep results in a diminished sense of well being.
 - a. True
 - b. False
6. Sleep labs have reported as many as _____ of the patients they see, when observed in a sleep lab, sleep much more than they think.
 - a. three fourths
 - b. one half
 - c. one quarter
 - d. one tenth
7. When we find ourselves tossing and turning, Dr. Chopra's advice is _____.
 - a. to get up and do something else until we are tired.
 - b. next time, don't go to bed until we are tired.
 - c. that the tossing and turning may be a part of the repair work that the body is doing because of the stress and strain of our lives.
 - d. take a sleeping pill.



• FOR ANSWERS, SEE PAGE 7 •

Case of the month

In the fall of 1994, a 52 year-old female patient at The Center developed severe lumbar back pain. She was taken to the hospital by ambulance, put in traction, and given intensive physical therapy. In spite of medication and other efforts to improve the back pain, it continued to persist.


Fatigue had become severe, yet she had difficulty sleeping. She was also quite heat-intolerant.

About 7 years prior to coming to The Center, she suffered a severe post-surgical foot infection that required multiple rounds of antibiotics. Strangely, she developed cataracts in both eyes soon thereafter. She also had recurrent vaginal yeast infections.

A basic evaluation done here at The Center in 1994 was positive for elevated candida antibody titer. It also showed signs of poor conversion of T4 to T3 in thyroid functioning. Both magnesium and beta carotene levels were low.

Other antioxidants were within normal range, though by July of 1995, her vitamin E levels had dropped substantially, and her red blood cell zinc was extremely low.

Approximately 4 weeks prior to this report, the patient was begun on intravenous hydrogen peroxide, along with weekly auricular therapy sessions to treat the unrelenting severe low back pain. Sporinox and Nystatin capsules were prescribed to adjust candida levels.

About 4 weeks later, her back pain was markedly reduced, without a single episode for an entire week. (The patient even went to the State Fair twice.) She reported feeling significantly better, but felt that further rehabilitation therapy would be necessary for complete healing. 

Continued from page 1

of plaque in the arteries) in monkeys. Monkeys, like humans, guinea pigs, and one bat in Australia, lack the gene to synthesize vitamin C, making the monkeys a good model for humans.

All the monkeys were fed a high fat diet that would produce atherogenesis. One group of monkeys received vitamin C and another vitamin E. These were labeled the prevention groups. After one year, two other groups became the regression groups. One was given vitamin C and the other vitamin E to see if the plaquing started in the arteries would regress with the aid of vitamins. The researchers used duplex ultrasound scanning equipment to check the common carotid artery for blockage from atherosclerotic plaque.

Vitamin E has long proven itself an effective agent in protecting unsaturated fats against oxidation by free radicals. Studies of vitamin E dating back to 1972 showed its antioxidant power.

Epidemiological studies have found that subjects with higher blood levels of vitamin E have lower risk of ischemic heart disease. Dr. Verlangieri's study confirmed it.

"Data from the present study indicate that while d- α tocopherol (a natural form of vitamin E) does not totally prevent atherogenesis, it appears to lessen the severity and reduce the rate of the disease. Even more propitious is the evidence from ultrasound observations that supplemental vitamin E may regress well-established lesions...One of the mechanisms involved in this apparent protection may be attributed to the antioxidant properties of the vitamin as a scavenger of free radi-

continued in columns 2 & 3

Mental Medicine

by Jon Sward, Ph.D.

Recent surveys have shown that approximately 90% of Americans believe in God. However, an American Psychiatric Association study found only 43% of psychiatrists believe in God.

Perhaps that is why 25 years ago Dr. David Larson was warned by a medical school advisor that he would harm his patients by incorporating religion into his psychiatric practice. Dr. Larson, a psychiatrist, and president of The National Institute for Health Care Research, has spent the past two decades trying to prove them wrong. He has collected numerous research studies, both his own and others, which show the preventive and healing effects of religion or faith.

For example: one study of 232 people undergoing elective open heart surgery found those who received no strength or comfort from religion were more likely to die within six months of the operation. In another controlled study of elder-

ly women, the less religious women had mortality levels twice that of the more religious ones. Another study of women recovering from hip fractures showed those with stronger religious beliefs were less depressed and could walk farther at discharge.

Dr. Larson's review of over two hundred epidemiological studies indicates that religion may have a positive effect on a variety of diseases, ranging from cancer to strokes. One decade long study of 2700 people, after accounting for risk factors, found only one social attribute lowered mortality rates—increased frequency of church attendance.

Although these studies do not prove cause and effect relationships between religious practices and good health, they do lend a great deal of support to the common sense notion that positive beliefs contribute strongly to good health and well being. [H]

Continued from column 1

cals, particularly as they relate to the oxidative modification of LDL (cholesterol)," the research team concluded. Their first paper was published in the *Journal of the American College of Nutrition* in 1992.

Dr. Verlangieri, in his conference presentation, asked, "Is cholesterol the culprit in this disease process or is atherosclerosis free radical mediated damage? This data would say that cholesterol may be secondary, may be an innocent bystander in the atherogenesis."

He further pointed out that when plaque began to form in the arteries, cholesterol was in the blood and it

became trapped in the plaque. In the years gone by, researchers analyzed the plaque, cholesterol jumped out, and they immediately said they had the culprit.

The data from his research and that of others obviously points toward using antioxidant vitamins to reduce plaque in human arteries, Dr. Verlangieri added. After almost three decades of research into the effects of antioxidant nutrients, he feels it may be time to begin dedicating some research dollars to an antioxidant solution rather than continuing to pursue just cholesterol. [H]

Beat The Odds Update

How much vitamin E prevents LDL oxidation?

Researchers set out to discover how much vitamin E it would take to prevent the oxidation of LDL cholesterol in the blood.

Reporting their results in *Arteriosclerosis and Thrombosis*, the research team tested supplementation at 60, 200, 400, 800, and 1200 I/U per day as well as a placebo group. After taking base line data from the subjects, they were randomized into one of the six different groups—each group taking a specific amount of vitamin E or a placebo for eight weeks.

No significant reduction was

seen in the placebo group and 60 and 200 I/U groups on oxidation by measuring byproducts of oxidation. They did find the oxidative susceptibility of LDL cholesterol to drop at the 400 I/U level.

These results clearly indicate recommending at least 400 I/U of vitamin E to reduce the oxidation of LDL cholesterol.

This is a good general starting point. But at The Center, we believe it is better to look specifically at your personal blood level of vitamin E and tailor the vitamin E recommendation to what you need. HE

Zinc helps build bigger infants for some pregnant women

In a group of small framed, but otherwise healthy, African-American women, taking supplemental zinc helped them produce larger, stronger babies, according to Robert Goldenberg, M.D., and associates with the Division of Maternal-Fetal Medicine, Department of Obstetrics and Gynecology, University of Alabama at Birmingham.

“We demonstrated that supplementing pregnant women with a daily oral dose of 25 mg of zinc throughout their pregnancies beginning at an average of 19 weeks’ gestation resulted in a significantly larger birth weight,...with significant increases in head circumference, arm and femur lengths, and skin fold thickness,” the researchers reported in *The Journal of the American Medical Association*.

The research team pointed out that zinc plays a critical role in many biochemical functions in the body. These include the synthesis of protein, working as a catalyst for over 200 enzymes, and functioning as a structural component of various proteins, hormones, and nucleotides as well as playing a role in gene expression and immune functions.

Oysters are by far the best source of zinc, but it is also found in other sea foods, meat, nuts, and milk in much lesser amounts.

“In summary, our data strongly suggest that zinc supplementation improves pregnancy outcomes in at least some pregnant women, and we support the inclusion of zinc in prenatal multivitamin/mineral tablets,” the researchers concluded. HE

CENTER UPDATE

Exercise, chronic disease, and diet: what is the relationship

For over 20 years, researchers have shown that regular exercise reduces the risk of coronary heart disease. Physical activity also is inversely related to colon cancer, prostate cancer, hypertension, and diabetes mellitus. But there has always been a fly in the exercise ointment. The results are not as consistent as investigators would like.

Enter Charles B. Eaton, M.D., and the research he and his team reported in the *American Journal of Preventive Medicine*. They looked at the relationship between the diet and physical activity of people living in two New England communities.

It was the first time researchers had collected data on diet and exercise as a combined risk reducer.

In this case, Eaton and his team reported that, “the strong association between physical activity and health-promoting diets found in this study

indicates that diet may be a powerful confounder in the inverse relationships between physical activity and coronary heart disease, colon cancer, hypertension, prostate cancer, and diabetes mellitus that have been found in other studies in which diet has not been measured.”

They found that moderate to active people ate foods higher in fiber and lower in total fat and saturated fat than did the couch potatoes in the study. The active people also consumed more of the vitamins A, C, D, and E; and more beta carotene and calcium along with more fruit and vegetables than the sedentary.

Now researchers have another puzzle. How much these improved risk factors come from exercise alone, or just an improved diet, or the fact that people who exercise take better care of themselves? The answer may be: all of the above. HE

Answers from page 4

1. a. About 1/2 of those seeing their physician about sleep receive a prescription. We have trained out the natural rhythms of our body by living by the clock.
2. b. Because the elderly have more problems getting enough sleep, many people think they need less sleep.
3. b. This varies with the individual. Just as some people seem "more awake" during the day, some are "more asleep" during the night.
4. b. Deepak Chopra believes that sleep is needed by the body to repair and rejuvenate itself.
5. a. One sleepless night has no measurable effect on our ability to carry out normal functioning.
6. b. Part of the problem may be that we think we are being deprived of sleep.
7. c. Learning to not be concerned if our body needs to toss and turn can be helpful rather than "trying" to go to sleep. TH

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10/12 Healthy Eating Tips for Vegetarians and Meat Eaters
10/19 Can Bowel Cleansing Lead to Better Health?
10/20 Beat The Odds Update
10/24 Know Your Nutrients: Folic Acid
10/26 How Visualization Can Help Battle Cancer
11/2 Wonderful World Within You & How to Help Your Children and Grandchildren Do Better in School
11/9 How to Boost Your Energy
11/14 Know Your Nutrients: L-Lysine
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Saw palmetto extract helps prostate problems

Prostate problems haunt all males as they age. New research shows that the symptoms of mild to moderate benign prostatic hyperplasia (BPH), the basis for male concern, may be treated effectively with *serenoa repens* (saw palmetto) extract.

In this study, published in *Current Therapeutic Research*, the researchers enrolled 505 men with BPH in a three month open trial. Each one took 160 mg of a brand name saw palmetto extract twice a day. Forty five days into the trial, the subjects showed significant improvement in urinary flow rate and reduction in residual urine volume and prostate size.

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