

Health Hunter[®]

N E W S L E T T E R

Rheumatoid arthritis, The Center's approach

Richard Lewis

When I came to The Center, I suffered from arthritis for 25 years. My sister insisted I come since she had such wonderful results with her rheumatoid arthritis. Using The Center's approach, I can now see the knuckles on my hands, I have no pain, I can walk, and I don't wear braces in my shoes anymore. It was a miracle for me, too, as well as my sister," a woman told a Lunch and Lecture crowd this fall.

"...adverse food reactions can cause symptoms."

When asked about The Center's results with patient/co-learners diagnosed with rheumatoid arthritis, Dr. Riordan explains that it started with his first patient. "In February of 1978, Marge came to The Center for relief of her arthritis pain. It was considered quite a challenge to see someone with rheumatoid arthritis back then. The prevailing wisdom of the time was that a physician could prescribe something to alleviate the pain and 'teach the patient to live with their disease.'

"We approached The Center's first rheumatoid arthritis patient in much the same way we approach all patients. We wanted to discover the underlying factors that seemed to be triggering her body's painful response.

"In her case, we found adverse food reactions and a high body burden of lead, which is a protoplasmic poison [a poison that works at the level of the

basic components of the cells in the body]. Removing her lead burden by intravenous chelation and having her avoid the offending foods, we learned that the symptoms of arthritis, which had been present for months and months, disappeared.

"This seemed to indicate that rheumatoid arthritis was not an autoimmune disease as was commonly thought, but a disease whose causes most often went undetected.

"Since our first patient, we have come to learn that there are many, many causes for inflamed, swollen joints. These include bacteria, parasites, viruses, adverse food reactions, and excessive heavy metal burdens, just to name the more common ones. This led us to look very carefully and repeatedly for underlying causes in anyone evaluated at The Center with a diagnosis of rheumatoid arthritis.

"Another fascinating thing about our work with rheumatoid arthritis at The Center is to see how much standard medicine has shifted in its awareness in the last few years toward what The Center physicians have known for so long. For instance, until recently the party line of the arthritis establishment was that anyone who suggested food had anything to do with rheumatoid arthritis was a total quack. Now, many commonly understand that adverse food reactions can cause symptoms."

Research supporting a nutritional and biochemical approach to arthritis began coming together about this same time also. Norman F. Childers, Ph.D.,

continued on page 2

Some sports may increase osteoarthritis in women

Women who participated in long distance running or tennis have more osteoarthritis than women who did not participate in these sports, reported Dr. Tim Spector with St. Thomas' Hospital in London, England.

In this research, he compared 81 female ex-athletes with a control group of 977 women from the general population in northeast London.

Former tennis players had twice the osteophytes (bony growths pertaining to osteoarthritis) in the knee and hip than the controls. Long distance runners had twice as many as did tennis players.

Spector believes these two sports cause ex-athletes to damage these joints from the pounding the knees and hips take during practice and competition.

If athletes keep their biochemistry running as close to ideal as possible, they have a better chance of maintaining healthy bones throughout their lives. H

Inside this issue...

| | |
|--|---|
| An inner locus of control | 2 |
| FDA requested to rescind Olestra | 3 |
| Little known, but interesting facts | 3 |
| 'Ruomatiz' | 3 |
| Information worth knowing | 4 |
| The anticancer cruciferous twelve | 4 |
| Case of the month | 4 |
| Water—how much is enough? | 5 |
| Zinc lozenges relieve cold symptoms | 5 |
| Vitamin C does NOT cause kidney stones | 5 |
| Food of the month—pumpkin | 5 |
| Antioxidants help weekend athletes' sore muscles | 6 |
| Are you getting the nutrients you need? | 6 |
| Slowing crime with folate | 6 |
| Special discounts | 7 |
| Upcoming events | 8 |
| Male athletes need calcium, too | 8 |

Nutritional Medicine

by Ron Hunninghake, M.D.


An inner locus of control

Since the early 1900's, there have been over 26,000 prescription diets published. These "prescriptions" are actually "proscriptions." To proscribe means "to forbid" or "to denounce." In ancient Rome, proscription meant "to publish the name of a person condemned to death or banishment."

A modern example of a prescription diet that actually proscribes is the Pritikin Diet. This is a diet that proscribes FAT! Pritikin says: "You must banish the evil FAT from your life!"

The trouble with all proscription diets is that the dieter is compelled to focus on the food item he has been asked to avoid. To avoid fat, one must think about, scrutinize labels for, verbally denounce, and immerse oneself in the notion of FAT. This often leads to "falling off the wagon" with subsequent feelings of failure and guilt.

Along comes Whole Foods, to the rescue! Whole Foods is not a diet as much as it is a way of life. In the Whole Foods approach, there is nothing to avoid. The focus of Whole Foods is whole foods. One is asked to learn about whole foods through scientific lectures and via NutriCircles software. This is an inner discovery process. One is not being controlled by an outer rule, dogma, or proscription.

The Whole Foods approach suggests that you choose whole foods according to your own preferences. Go ahead and try non-whole foods and see how you feel. This points you in the direction of making choices that help you to feel better by eating healthier. By fostering this inner locus of control, you find yourself back in the driver's seat, where you can naturally steer in the direction of better health. 

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Associate Editors: Marilyn Landreth and Barbara Nichols

Illustrator: Jackie Clark

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The information in this publication is meant to complement the advice and guidance of your physician, not replace it.

Continued from page 1

a professor of horticulture at Rutgers University in New Jersey, wrote a book supporting the elimination of the night shade vegetables from the diet to control arthritis. The night shade vegetables include potato, tomato, eggplant, all kinds of peppers except black pepper, and tobacco.


George K. Davis Ph.D., a professor of animal nutrition at the University of Florida at Gainesville, found another correlation between night shade plants and arthritis, this time in animals. Cattle, in one area of Argentina, fed the leaves of night shade plants, often had to eat on their front knees because their necks were too stiff to feed naturally. These cattle had developed lesions of the soft tissues; primarily the elastic fiber had become calcified.

Dr. Davis discovered similar problems with cattle eating leaves from plants of the night shade family in Brazil, Hawaii, Jamaica, and the European Alps. Since that time, there has been other research observing various animals eating foods in their environment which caused various types of

arthritis.

The Center has always approached each person who comes in with arthritis, or any disease or diagnosis, from the standpoint that this person is different from all others. By doing this, we look at a person's individual biochemistry to find out just what underlying factors may be causing the body to have pain and inflammation in the joints rather than try to fit them into a particular protocol that has worked for some.

The Center is often compared to Sherlock Holmes, Sir Arthur Conan Doyle's famous detective. For those difficult cases Scotland Yard could not solve, they called in Sherlock Holmes to find the significant clues other detectives missed. The Center works much the same way, looking for the clues to unlock the underlying factors of a particular disease process.

This is why the Sherlock Holmes approach evaluates nutritional status, adverse food reactions, and reactions to bacteria, parasites, and viruses, along with stress, to help detect the underlying factors of arthritis. 

HEALTH HUNTERS AT HOME

FDA requested to rescind Olestra

Olestra, a non-digestible fat substitute made by Proctor and Gamble and approved by the Food and Drug Administration (FDA) in January to be used in snack foods, has come under fire from several corners lately.

The Center for Science in the Public Interest (CSPI), a Washington based public health advocate group, fired the loudest volley. CSPI formally asked the FDA to rescind its approval of Olestra because of health concerns.

In preparation, CSPI followed a Proctor and Gamble promotional campaign by inviting people to call a toll-free number and report any side effects they thought they experienced from eating products made with Olestra. A third of the callers reported severe diarrhea and abdominal cramps after sampling the snack foods made with fat substitute. In an interview with 506 households in three of the cities where the products were promoted, over a fourth of the adults they interviewed had tried the snack foods (many not more than once) and 20% reported gastrointestinal problems.

With this information in hand, CSPI made their move. CSPI and many other experts opposed the approval of the product. In addition to the gastrointestinal problems and "inadequate" testing, there is concern that the fat substitute could prevent the body from absorbing the fat-soluble carotenoids which could lead to increased risk of heart disease, macular degeneration, and cancer. [H]

Little known, but interesting facts

45% of people ate sugar-free and low-fat foods ten years ago.

92% eat them today.

The amount of weight gained by the average person in that decade—8 pounds.

from the Calorie Control Council and National Health and Nutrition Examination Surveys [H]

"Ruumatiz"

When I was a kid, people took "rumatism" lightly, unless they had it. Most people couldn't spell it, much less say it right. "Uncle Fred's so stove up with his 'ruumatism' that he can barely get out of bed to do his chores."

When we attended the Saturday matinees at the local movie house, it seemed like the westerns always had a running joke about this wizened old man with an unruly gray beard who cooked for the cowboys out on the range. The boss would often say, "Step lively there, Cooky," to which the cook would answer, "I'm moving as fast as I can with my ruumatiz."

As is often said, though, what goes around, comes around. Now my generation is no longer sitting in the Saturday matinee. We have reached the age that we can not only spell rheumatoid arthritis, but find it far too common.

There are other varieties of it now. Along with rheumatoid arthritis, there is fibromyalgia and osteoarthritis, to name a couple. The editors of *Arthritis Today*, a publication of the Arthritis Foundation, wrote recently that there are "more than 100 different forms of the disease, arthritis defies clear categorization."

As the types of arthritis continue to grow, so do the numbers of people with arthritis. The Centers for Disease Control's statistics show that almost 40 million people currently have arthritis. This comes down to one in seven people who now suffer with it. By the year 2020, it is estimated that more than 59 million will have arthritis. That is a 50% increase in a little more than 20 years.

These numbers would make arthritis treatment one of the fastest expanding growth industries in the United States. But is this our destiny? We don't think so.

The fact that arthritis "defies categorization" reminds me of the three blindfolded men trying to describe an elephant. One man has hold of the trunk, another an ear, and the third has grabbed the tail. Each one argues strongly that his description of

the part of the elephant he is holding is an accurate and complete description of the whole elephant.

At The Center, we believe it is time to give up the blindfolds, step back a few steps, and view the whole elephant, not just a single part. Or in this case, view the whole person, not just the disease.

We also believe it is better to treat the person than the disease. When we work with the person, we want to find the underlying factors or cause for the arthritis rather than just treat the inflammation and pain; why it makes sense to the person's body to have inflammation and swollen joints.

Take Betty for example. When she came to The Center, she said that if she wanted to pick up a plate from the table, she had to use both hands. Her standard care physician wanted to start her on methotrexate, an antimetabolite used to treat neoplastic disease, severe psoriasis, and adult arthritis. After reading the warnings, precautions, and side effects of this drug, she knew there must be a better way.

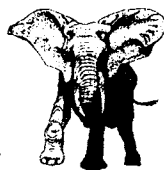
When she came to The Center for her initial evaluation, she had some other problems she wanted to work with, in addition to the arthritis. Most people coming to The Center have multiple symptoms. By working with the person rather than the disease (her arthritis), we were able to work with all of her symptoms at the same time.

Today, she is pain free. She said she can now grab several plates with one hand. In addition, the other problems she had no longer bother her. She is pain free in many ways.

She has become a marvelous unofficial ambassador for The Center. In addition, she has sent her husband, sister, and friends to The Center and they have had equally good results.

All of this came about because we treated the whole person rather than her arthritis. It will be good when others let go of their part of the elephant, throw away the blindfold and get a better idea of who they are treating rather than what. [H]

—Richard Lewis



INFORMATION WORTH KNOWING

Dehydroepiandrosterone (DHEA) is a hormone that is necessary for our body to keep on working to keep us going. Beth M. Ley has written *DHEA: Unlocking the Secrets of the Fountain of Youth*. DHEA may not be the fountain of youth but it is certainly involved with a great deal of our bodily processes. Although DHEA is sold as a supplement, it is suggested that it be taken under the directions of a doctor. Find out the story on DHEA. The questions this month are taken from this book.

1 _____ is/are responsible for our sexuality, give our body shape, determine how much body hair we have, and give our voices a high and low pitch.

- a. food
- b. hormones
- c. enzymes
- d. water

2 Dehydroepiandrosterone (DHEA), produced by the adrenal gland, is the most abundant hormone in the body.

- a. True
- b. False

3 Studies indicate that an increase in blood levels of DHEA sulfate is associated with a reduction in _____.

- a. mortality
- b. the birth rate
- c. iron
- d. none of the above

4 Constant or continual stress causes adaptations in the body. The first of these changes can be seen as warning signs which eventually progress to disease. Hans Selye, M.D., calls this the _____.

- a. Disease of Convenience
- b. Disease of Adaptation
- c. Disease of Boredom
- d. Disease of Contraindication

5 Meditation and prayer are _____ techniques that go directly to the root of the stress response by releasing the triggers for new stress.

- a. medical
- b. standard
- c. mind-body
- d. all the above

6 DHEA has shown that it has no therapeutic effects against obesity.

- a. True
- b. False

7 DHEA may be helpful in preventing heart disease by _____.

- a. lowering cholesterol levels
- b. increasing the amount of iron in the bloodstream
- c. acting as a regulator of heartbeats
- d. all the above

• FOR ANSWERS, SEE PAGE 7 •


The anticancer cruciferous twelve

Mom always said, "Eat your vegetables!" Now evidence continues to mount suggesting that eating cabbage and its cruciferous relatives more than once a week significantly reduces the occurrence of colon cancer and protects against ulcers.

Which vegetables are the cruciferous twelve?

- Broccoli
- Brussel Sprouts
- Cabbage
- Cauliflower
- Cress
- Horseradish
- Kale
- Kohlrabi
- Mustard
- Radish
- Rutabaga
- Turnip

They received their name from the shape of their flower. Botanists felt the four petals of the flower resembled a crucifix; thus cruciferous.

Mom was right all along—especially the mother of a recent president, "Eat your broccoli, George." Anyone have a good recipe for kohlrabi or rutabaga? 

Case of the month

A 35-year-old female came to The Center concerned about her loss of hair that had become considerably worse in the last year.


Both her local doctor and then a dermatologist had tried a variety of solutions for the hair loss problem including oral antifungal medicines, topical steroids, steroid injections in the areas of baldness, and intramuscular and oral steroids. Nothing worked and the baldness got worse.

By the time she came to The Center for evaluation, she had over 40% of her head scalp showing significant hair loss. This, needless to say, was of great concern to her.

From the laboratory tests done during her initial visit, she found that she had excessive copper, calcium, and arsenic in her hair tissue. In addition, she was very low in both blood plasma and urine vitamin C and showed low B vitamins as well. Tissue calcium to potassium ratios suggested poor thyroid receptor functioning.

As a result of these findings, she was placed on a special potassium vitamin C drink, a high potency B complex twice a day, 200 micrograms of selenium a day, and a special form of slow release T3 every other day. We also suggested that she increase the number of fruits, vegetables, and whole grains that she consumed in her diet.

As a result of being on this program for about 10 weeks, she has shown return of hair growth in all but about two of her hair loss areas. This represents an 80% improvement in the balding areas.

A side benefit of being on this program has been an increased sense of well being and more energy. With both of these improvements, she is looking forward to continued hair growth and more energy to do the things she wants to do. 

Health Hunter Holiday Event
Friday, November 22
5:00 p.m. - 7:30 p.m.
Double your Health Hunter discount on all items in the Gift of Health!

Water—how much is enough?

I have been reading a book from the Gift of Health at The Center, *Your Body's Many Cries for Water*, by F. Batmanghelidg, M.D., in which he states you are not sick, just thirsty!

Most of us, especially the elderly, do not drink enough water. Many in nursing homes have a container of water on their bedside tables but, more often than not, the water is never offered to them by those who are caring for them. Also, many of the elderly are suffering from severe arthritis pain and are taking many drugs to relieve this pain. If they would just drink more water many of them would find help.

Our bodies are made to function with up to a half-gallon of water daily. This is plain water—not coffee, teas, or juices—but WATER. Beverages, like coffee and tea, contain water, but also contain dehydrating agents. They get rid of the water in which they are dissolved plus some more water from the reserves of our bodies.

You will find you will also have more energy when you form the habit of drinking more water. Ladies, your skin will become softer and smoother.

Perhaps you are already drinking the required amount but, if not, work up to it gradually and you will soon have that “good” feeling to start a new day.

—Nelda Reed

Hope sees the invisible, feels the intangible and achieves the impossible.

Anonymous

Zinc lozenges relieve cold symptoms

According to the *Annals of Internal Medicine*, low dose zinc lozenges (a lozenge containing 13.3 mg zinc gluconate every 2 hours) relieved rhinorrhea (runny nose), headache, nasal congestion, coughing, and sore throat significantly faster than did the placebo. Some in the study did complain about side effects such as bad taste, mouth irritation, and upset stomach.

Vitamin C does NOT cause kidney stones

An article in the recent issue of the *Journal of Urology* may finally lay to rest an old myth floating throughout the medical community about vitamin C.

For years, researchers found vitamin C not only to be safe, but useful in treating various diseases. But there was always a nagging myth cropping up that said large doses of vitamin C caused kidney stones.

This myth came about because one of the breakdown products of vitamin C is oxalate, a substance that could combine with calcium in the urine to form calcium oxalate, a.k.a. kidney stones. But even megadoses of vitamin C produce very little oxalate. In addition, doctors prescribing vitamin C for decades have observed essentially no kidney stones in their patients.

But, say the doctors who don't prescribe vitamin C, this is anecdotal information, not science. They continue to believe that if oxalate is present,

kidney stones will form.

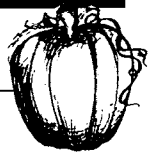
Now science supports what vitamin C advocates have “known anecdotally” for years. G.C. Curhan and his associates at the Harvard School of Public Health followed 45,251 males between the ages of 40 and 75 for six years who were free of kidney stones at the beginning of the research to see what effect vitamin C and B6 would have on kidney stone formation.

They found that men who consumed 1500 mg or more of vitamin C had 22% fewer kidney stones compared to men getting less than 250 mg. After adjusting the results for other potential risk factors, the results did not change significantly nor did vitamin B6 show up as a risk factor.

The researchers' concluded, “These data do not support an association between a high daily intake of vitamin C or vitamin B6 and the risk of stone formation, even when consumed in large doses.”

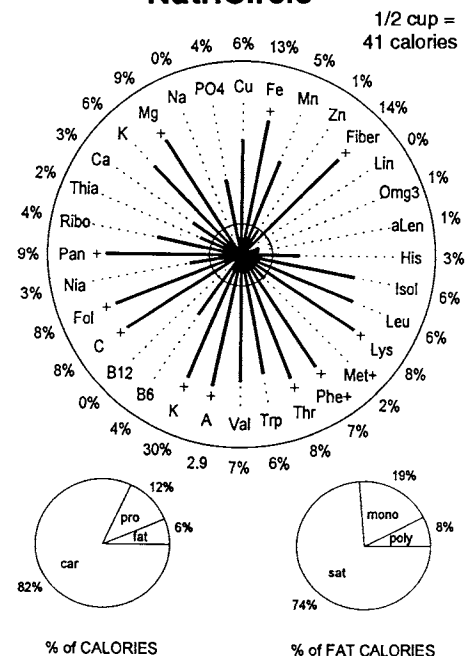
Food of the Month

by Donald R. Davis, Ph.D.



PUMPKIN is a native American squash that Indians dried and used as flour. Pumpkins grown for jack-o'-lanterns are edible but less sweet than varieties most used for cooking. The fresh “pie” or “sugar” pumpkins now in many stores may be round or oblong and have various colors. Of the 32 nutrients shown here for canned pumpkin, 26 are in adequate amounts compared with calories. Interestingly, if we eat the seeds, 30 nutrients are adequate (all but vitamin B-12 and sodium). Pumpkin is richest in vitamin A (carotenes), vitamin K, fiber, iron, magnesium, pantothenic acid, and folic acid (8% to 290% of the RDA in 1/2 cup).

NutriCircle



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).

Beat The Odds Update

Antioxidants help weekend athletes' sore muscles


The weekend athlete, after a week of driving his desk chair during the day and flying his couch in the evenings, takes on a weekend of playing second base in the annual softball tournament. On Monday, he is so sore that he can barely drag his body back to his desk chair and this soreness lasts for a few days.

This is not an uncommon occurrence today. But science offers some new hope for weekend athletes along with a little understanding of why this happens.

William Evans, Ph.D., professor of nutrition and applied physiology and director of the Noll Physiological Research Center at Pennsylvania State University spoke at a workshop sponsored by the National Institutes of Health. He said his research showed that unaccustomed exercise by weekend athletes may result in delayed-onset of muscle soreness because of microscopic tears in the muscles.

"Muscles continue to show signs of damage for days after the exercise," Dr. Evans said in *Family Practice News*. This is "likely due to an increase in the production of oxygen free radicals within the muscles," he added.

Recent tests by Dr. Evans' research team, "demonstrates that vitamin E supplementation in the older subjects restored their response to that which was seen in the young subjects," Dr. Evans said. "This involves the mobilization of immune cells to invade the damaged muscle and ultimately to stimulate repair." Younger nonhabitual exercisers might also benefit from supplemental antioxidants, Evans added.

Other studies suggest that selenium supplements (selenium is also an antioxidant) may be beneficial as well, but the research is not conclusive, according to Carl Keen, Ph.D., chair and professor of Nutrition and Internal Medicine in the Department of Nutrition at the University of California, Davis. 

CENTER UPDATE


Are you getting the nutrients you need?

If you are an average American eating the average American diet, and if you answer truthfully, your response to the question "Are you getting the nutrients you need?" would be a resounding "No."

Donald R. Davis, Ph.D., presented graphic examples of the shortfalls of the average American diet in a lively lunch hour lecture at The Center. He reported that for most of us, only 1/3 of what we eat is living, whole, highly nutritious food. The other 2/3 of our diet consists of refined foods which have been stripped of their nutrients through processing. Sugar is an excellent example. On average, 25% of the calories we consume come from sugar. That's a whopping 140 lbs. per person per year!

It is easy to see that there is much room for improvement in the average

American diet. Dr. Davis advises that choosing foods which are more nearly whole will give you a much better supply of the nutrients you need. For example, given a choice between a snack of a 1 oz. bag of pretzels and a coke or a 1/2 oz. bag of peanuts and a 12 oz. can of orange juice, most people would choose the pretzels because they are lower in fat than the nuts. However, the wiser choice in the wholeness category would be the peanuts and orange juice, since 83% of the 236 calories come from whole foods, whereas only 19% of the 248 calories in the pretzels and coke come from whole foods.

As you can see, you don't have to give up everything you like to get more nutrients out of the food you eat. Just increase the amount of unprocessed foods in your diet and vary the kinds of foods that you eat. 

Slowing crime with folate

Premature birth strongly correlates with criminality according to researchers, including those in a recent issue of *Crime Times*. Why not work to reduce the occurrence of premature births to help get a handle on reducing crime in the future?

Theresa Scholl, with the Departments of Obstetrics and Gynecology at the University of Medicine and Dentistry of New Jersey-SOM, thinks that premature birth rates should be lowered and has found an easy way to do it—raise the folate levels of pregnant women.

Along with several other parameters, she and her colleagues examined the folate and B12 levels in the blood at 28 weeks and in the third trimester during the pregnancy of 832 women.

They found that lower concentrations of serum folate at 28 weeks were associated with a greater risk of preterm delivery, actually two times greater. Quite often lower income women tended to be lower in folate.

"Our study was observational, and low folate was linked to other risk factors and to lower intakes of energy and many nutrients. Thus, it is possible that folate (serum and total intake) may be a marker for other aspects of maternal lifestyle or nutritional status that are causal related to preterm birth," she concluded in the study published in *The American Journal of Clinical Nutrition*.

Scholl told *Science News* that it's ironic that pregnant women "can buy candy and chewing gum with food stamps, but... aren't allowed to buy vitamins." Nutrition needs to be a legislative concern when considering crime solutions.



Answers from page 4

- 1 b. Hormone levels, DHEA in particular, also serve as markers for aging and disease.
- 2 a. DHEA is a precursor to the sex hormones and a number of other hormones in the body.
- 3 a. Levels of this hormone are highest between the ages of 18 and 24.
- 4 b. Some of the early warning signs can include general irritability, pounding of the heart, dryness of throat and mouth, anxiety, and insomnia, to name a few.
- 5 c. Individuals who have meditated for a number of years tend to have stronger than average coping mechanisms.
- 6 b. It seems to encourage weight loss by raising metabolism, decreasing appetite, and discouraging fat storage.
- 7 a. It may also block enzyme activity associated with low density lipoprotein (LDL) oxidation which is associated with plaque formation in the arteries. PH

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 Video Tapes: Regular Price—\$19.95; *Health Hunter* Price—\$17.95

DHEA: Unlocking the Secrets to the Fountain of Youth

by *Beth M. Ley*

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with *Ronald Hunninghake, M. D.*

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with *Donald R. Davis, Ph.D.*

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with *Ronald Hunninghake, M.D.*

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| Monday | Tuesday | Wednesday | Thursday | Friday |
| | 1 L & L - Know Your Nutrients: Pycnogenol | 2 Yoga | 3 L & L - Making the Most of Aging | 4 |
| 7 Yoga | 8 L & L - Know Your Nutrients: Niacin | 9 Yoga | 10 L & L - Beat The Odds: User Friendly Program | 11 |
| 14 Yoga | 15 | 16 Yoga, Eat Your Way to Natural Weight Loss Workshop | 17 L & L - Taste of Health Tricks of the Trade | 18 |
| 21 Yoga | 22 | 23 Yoga | 24 L & L - The Center's Approach to Childhood ADD | 25 |
| 28 Yoga | 29 | 30 Yoga, Eat Your Way to Natural Weight Loss Workshop | 31 L & L - Parasites: What Every Person Needs to Know | |

NOVEMBER

Lunch & Lecture Classes:

- 5 Know Your Nutrients: Glutamine II
- 7 Cold & Flu Season—Get Ready!
- 14 Natural Options for Hormone Replacement Therapy
- 22 Health Hunter Holiday Event

Male athletes need calcium, too

Basketball players, long distance runners, and other males involved in intense physical activity need calcium as much as women athletes.

Robert Kresges, Ph.D., studied basketball players after intensive 3-hour workouts by sampling the amount of calcium lost in their urine and perspiration. He found that an average of 422 mg of calcium was lost in sweat during the 3-hour workout compared to 40-144 from a mild activity.

"During a 10-month period, the players' total body bone mineral content declined by 6% and bone mineral content in their legs declined by 10.5%," according to Kresges, codirector of the University Prevention Center, University of Memphis and reported in *Family Practice News*.

During the next season, Kresges found that with 2 g calcium supplement per day, the players gained 5% bone mineral content.

INSIDE THIS MONTH'S ISSUE . . .

- Rheumatoid arthritis, The Center's approach
- Vitamin C does NOT cause kidney stones
- Slowing crime with folate
- Antioxidants help weekend athletes sore muscles

Health Hunter

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