

Health Hunter[®]

VOL. 13, NO. 9

N E W S L E T T E R

OCTOBER 1999

Diabetes and nutrition: take charge!

Jeanne Drisko, M.D.

The foundation for diabetic care is a whole foods diet, followed by lifestyle and environmental changes. To this add a lot of water. Water rinses your body constantly.

A high supply of carotenoids in the bloodstream is associated with very good insulin and glucose control.

When you eat and what you eat is very important because the food actually talks to every cell of your body. If you eat a lot of processed food that comes out of a package, it will raise insulin levels very high. When your insulin level rises rapidly, it actually down-regulates the insulin sensitivity on the cell surface. Diet is not just counting calories. The food is actually giving a message to your cell.

A high carbohydrate diet really slams the cells. It's really very hard on the insulin levels. Insulin seems to shoot up and it makes the receptors again insensitive.

The high carbohydrate diet also increases those bad fats and the bad cholesterol in our bloodstream. For a long time, you were told to eat a low fat diet and thought you were going to lower the bad fats in your bloodstream. When you ate that high sugar, high carbohydrate diet, you raised your triglycerides and bad cholesterol as well. It's now been recognized in various mainstream journals that high carbohydrate diets are not helpful.

This gets us back to our whole, fresh foods. There was an article in the

1999 issue of the *American Journal of Epidemiology*, showing the importance of diets high in carotenoids that we find in the colorful vegetable group. A high supply of carotenoids in the bloodstream is associated with very good insulin and glucose control. So the more fresh fruits and vegetables you can eat, the better control you have on the insulin levels in your bloodstream.

Flavonoids, a key component of fruits and many other fresh foods, are associated with better diabetic control. You may be able to buy a supplement with flavonoids in it, but you are going to be better off starting with a good, whole foods diet.

Good fats make up the lining of every cell in the body as well as the lining of the components inside of the cell. When the lining of the cell is normally formed with these good fats, they influence how the cells use insulin. There are two families of fatty acids, the omega-6 and the omega-3. The omega-3 is in short supply in our diets currently. Omega-3 fatty acids come from cold water fish and flax oil predominantly.

Omega-6 fatty acids come from vegetable oils and grains. Unfortunately, we tend to get too much omega-6 fatty acids in our diets. If you stick with a whole foods diet and try to get some of the good omega-3 polyunsaturated fatty acids in your diet, the receptors of your cells are going to be much more responsive to insulin.

These fats make up the walls of all our cells and the lining of our nuclear envelope inside of the cell. This is what protects our energy making machinery

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Vitamin C, the new antidote for stress

Heading for another stressful day? Dump in some vitamin C to help yourself and your immune system cope with the stress, according to research by P. Samuel Campbell and colleagues of the University of Alabama-Huntsville.

"We found that giving rats large doses of vitamin C essentially abolished the secretion of stress hormone," Campbell said.

Vitamin C seems to provide for a better immune system function under stress allowing individuals to combat illness, the researchers learned.

The current recommended daily allowance (RDA) is set at 60 mg. Many experts believe that the RDA should be raised to at least 200 mg. At The Center we believe the level should be tailored to the individual. Our needs are different.

"The RDA's...were established to prevent deficiencies, but as we are getting more research, there is a new philosophy—that is what we can do to promote health," said Chris Rosenbloom of Georgia State University. FH

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Health Hunter Newsletter is published as a service ten times a year by the Olive W. Garvey Center for Healing Arts, a division of The Center for the Improvement of Human Functioning International (A Non-Profit Organization). Memberships are \$25 plus tax for one year, \$30 plus tax for outside the U.S., \$48 plus tax for 2 years, \$53 plus tax for outside the U.S., and \$71 plus tax for 3 years, \$76 plus tax for outside the U.S. To subscribe, see the order form on page 7 of this issue. (Prices good through 1999.)

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Nutritional Medicine

by Ron Hunninghake, M.D.

Diabetes dialogue

OK, you are middle aged and you have diabetes. You know this is a very slow, insidious disease. You know that diet is the key factor regulating the progression of the illness. You know the consequences of poor control. But you rationalize: "I've got all this time...I can eat what I want...I'll work on diet later."


So, you go ahead and eat what you want. You're in a rush, so the convenience store goodies are quick and tasty. You're stressed, so chocolate chip cookies and milk make you feel better. You don't have time to cook at home, so fries, a coke, and a monster burger are your basic food staples.

The consequences are subtle at best. You feel sluggish and tired, but who isn't. Your digestive tract is often bloated and gassy, but that is only par. You barely have time to check your blood sugars...they tend to run over 200. The weight keeps creeping up. The point is, you keep going. If this diabetes were really bad, it would slow you down pronto...right?

Wrong! The incubation period for the severe consequences of poorly man-

aged diabetes is decades, not days and weeks. Blindness, loss of limbs, kidney failure, and other complications are all late stage consequences. Know your disease. Be emotionally honest. Confront your denial. Practice tough love. Self-discipline and self-care go hand in hand.

Your new focus: whole foods, lovingly chosen, based on personal preferences, using the 80/20 rule (20% of the time you can "cheat" and choose a non-whole food...to allow for some flexibility and balance.) Cultivate this balance. Talk to yourself with disciplined love, not like a permissive parent to a spoiled child. Grow up in a maturing knowledge and respect for your illness. It can be managed well...but only you can do it...with the right attitude.

Experience the power of being self-directed. Have fun, without losing your balance. Allow your disease to teach you how to live a life of greater freedom, based upon self-discipline. You can beat the long-term consequences of diabetes with knowledge, determination, and inspirational self-talk. **YOU CAN DO IT!** 

Diabetes and nutrition - Continued from page 1

in the cell. If you eat processed corn oil and other fats of that type, the cells are going to take up the wrong type of fat. These bad fats make the insulin receptor sites less functional because these fats are stiff and they don't fit right into the cell wall. Also, cut out the trans fatty acids such as margarine, the kind of processed fat that is man-made or handled. (It is also necessary to cut back on saturated fats which come from animal fat.) The trans fatty acids decrease the membrane fluidity. Cell membranes would feel velvet-like if you could touch them—soft and easily deformed. But, when you put in the wrong kind of fat, these cell membranes become very stiff. This is important because the insulin comes to the cell wall and binds to the cell wall. Fatty acids carry glucose across the cell wall with it into the cell. If the cell can't get that glucose into the

energy factory of the cell, it can't use it for energy.

When you are not as sensitive to insulin, you tend to make too much insulin. Therefore, we have a lot of insulin floating around, but it is not being used effectively because it is not binding to the cell wall properly and it is not getting glucose across to make energy.

So what does all the diet information mean? Moderation is the key word. You should have a moderate intake of carbohydrates, obtained from a complex whole foods source. You should consume a moderate amount of fat, but emphasize the essential fatty acids—the polyunsaturated fatty acids and the mono-unsaturated fatty acids like olive oil. Again, you need a moderate high quality source of protein. All of these things should decrease your fasting

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glucose, decrease your insulin level and decrease your triglyceride levels and your low density cholesterol.

An article in a recent issue of *The New England Journal of Medicine* suggests that exercise is one of the most important things you could do to improve the responsiveness of the cell to insulin. Another part of this is smoking cessation. There is no doubt that if you smoke, the load of oxidative (free radical) damage is tremendous. It is very hard for the body, when it is already under this metabolic burden of having diabetes, to fight the extra damage from smoking. Stress reduction is also important.

Weight-loss is another important factor. Type 2 diabetics have too much insulin, but the cell is not sensitive to it. When you lose weight, your cells become more sensitive to the insulin so your body stops making so much insulin.

Micronutrients are important to diabetics.

- **Vitamin E**—It is important for diabetics because it increases insulin sensitivity, particularly in type 2 diabetics. When you look at that fat layer of the cell, vitamin E is probably protecting that nice fat layer from oxidant damage.

- **Vitamin C**—When you are a diabetic, you need extra amounts of vitamin C. Vitamin C protects that nice fatty layer of the cells. It also helps bolster your immune system to help fight off those common infections.

- **Vitamin B6**—Recent research shows diabetics seem to have lower blood levels of B6. People predisposed to heart disease have high homocysteine in the bloodstream. Vitamin B6 helps eliminate excess homocysteine. If vitamin B6 is already in short supply, then diabetics may be at a greater risk for heart disease.

- **Vitamin B12**—helps improve the neurologic function. Diabetics often have neuropathy that causes numbness and tingling in the lower legs. Vitamin B12 is helpful with this problem. There is no reported toxicity in the literature ever reported to vitamin B12.

- **Vitamin B3**—comes in two forms, niacin or niacinamide. They are really

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HEALTH HUNTERS AT HOME

Benefits of a sauna

Dr. Nina Mikirova, a native of Russia, is a member of the research staff at The Center. She wrote this guest editorial as part of her yearly goals.

This summer, my friend visited his mother in Russia. I asked him to bring books for my children and me and also bring something that is difficult to find in Kansas.

On returning to the U.S., the customs officer, a very nice lady, was surprised when she saw dried branches in his luggage. For a long time she could not understand his explanation of how they could be useful in bathing. These dried branches are what, in the northern countries, people use in bathing—whisks from the birch trees.

No visitor to Russia or Finland can stay very long in these countries without hearing talk of the sauna. The "sauna" is a traditional Finnish word. "Sauna" refers to the bathhouse itself, but because the verb "saunoa" is not translatable, in English one speaks of "taking a sauna."

Throughout the histories of the great cultures of antiquity, we can find references to different methods of washing and bathing. The Roman bathhouse was based on the same fundamental principles of the Russian sauna: alternating hot and cold air and hot and cold water.

The most important feature of the Roman bath was the hot, dry air which stimulates perspiration. It is easier to breathe in dry air than damp, and perspiration flows more freely.

The Russian missionary, St. Andrew, who traveled from Russia to Rome, gives one of the earliest descriptions of a Russian sauna. After visiting Novgorod, he wrote, "During my travels, I saw many wonderful things in the country of the Slavs. I saw bathhouses built of wood. When they have been heated to a very high temperature, people undress themselves completely and go inside. They pour tepid water on the backs of their necks and whisk themselves."

Today, the Russian sauna differs little from the sauna of nearly a thousand years ago. In the sauna, the heat is provided by a large stove in the steam room. This stove is covered with stones. Throwing a large amount of water on the heated

stones produces the hot steam.

The first thing people do in the sauna is to relax in the well-heated and dry atmosphere. The drier the air, the more heat the bather can tolerate. In the sauna, the temperature can reach as high as 212° F. As written in a book on saunas, "On the platform of a well-heated sauna, eggs can be hard cooked without water."

After 10 to 12 minutes in the hot sauna, people jump into cold water in a pool or go out and roll themselves in the snow, even when temperatures are below zero.

Another important element of the Russian sauna is the whisk of birch leaves. People gather branches from the birch tree in the summer, dry and keep them during the winter. Many people like to gently strike themselves with the birch leaves while perspiring in the bath. (Remember my friend trying to explain this to the customs person?) This is called "whisking." Whisking usually starts with the upper body and proceeds downward to the extremities. The purpose of whisking is to stimulate blood circulation in the capillaries.

The main purpose of the sauna is to induce perspiration. Perspiration is excellent for cleaning the skin and cleaning the pores of the skin. Perspiration also has a great influence on the activity of the internal organs.

A good sauna relieves nervous tension and is a good relief of muscle tension. People believe that the sauna is good for a number of ailments like skin diseases, rheumatoid arthritis, and obesity caused by overeating.

Also, heavy perspiration reduces weight by a few pounds. In many countries, athletes often use a sauna to lose weight.

The sauna affects not only the body, but the mind as well. After a sauna, bathers feel a balance return to the mind, a vanishing of psychological troubles and an excellent feeling of well-being.

It is customary to drink good tea after a sauna.

However, people suffering from respiratory disease, heart disease, or high blood pressure should be very careful about using a sauna. [H]

INFORMATION WORTH KNOWING

We are always presenting the latest in health information in this column. This month we are featuring the book, *The Alpha Lipoic Acid Breakthrough*, by Burt Berkson, M.D. Dr. Berkson first used alpha lipoic acid (ALA) in the treatment of patients who had eaten poisoned mushrooms. Since that time, he has branched out in the use of this powerful antioxidant. He has used it to fight chronic liver disease, in the prevention and progression of Alzheimer's and Parkinson's disease, as well as to prevent or treat the complications of diabetes. The questions this month are taken from his book.

1 As children our _____ produce(s) large quantities of ALA but as we age we manufacture less and less of it.

- a. lungs
- b. heart
- c. liver
- d. all of the above

2 ALA works on the cellular level to help produce _____. To do this it acts as a helper of the enzymes in the cell's major energy cycle.

- a. blood
- b. energy
- c. negatrones
- d. none of the above

3 ALA differs from most vitamins and minerals in that it is manufactured by the body.

- a. True
- b. False

4 Some scientists believe that increasing the amount of ALA in the body can greatly increase the amount of fuel burned in the cell, thereby adding the amount of energy available to your body for _____.

- a. muscle movement
- b. growth

- c. repair of tissues
- d. all of the above

5 ALA also appears to have the extraordinary ability to prevent damage to the cell at the _____ level.

- a. suboptimal
- b. genetic
- c. enzyme
- d. none of the above.

6 It appears that oxidative stress, the bombardment of our cells by toxic molecules called free radicals, serves as a signal for the stimulation and regulation of gene expression.

- a. True
- b. False

7 Deficiency of ALA may be the root cause of many common and serious health problems. Research is growing in this area and implicates how ALA can _____.

- a. inhibit production of the AIDS virus
- b. prevent cataracts
- c. protect the kidneys
- d. all the above


• FOR ANSWERS, SEE PAGE 7 •

Nutritional assessment reduces hospital costs

A simple laboratory test to discover the basic nutritional status of patients not only decreases the likelihood of complications in hospitalized patients, but also decreases hospital costs, Elia Mears told those attending the American Association for Clinical Chemistry Annual Meeting in New Orleans.

"Spending more in laboratory

costs reduces patient care costs downstream," she added. "This is especially important for elderly, surgical, and intensive care unit patients."

This probably sounds logical to *Health Hunter* readers, but it brings up the question of why not do more extensive testing to find out the status of all nutrients that would help the patient heal faster and more efficiently. 

Diabetes and nutrition Continued from page 3

not interchangeable. If your physician prescribes niacin, you can't substitute niacinamide. Niacin may impair glucose tolerance and blood sugar control. Niacinamide is used in early stages of type I diabetes. If you take it long term, it seems to impair blood sugar control.

- Biotin—improves glucose control. It may also help in the pain of neuropathy and discomfort in the legs and in the hands.

- Coenzyme Q10—is in every cell of the body. It works in the power supply, in the mitochondria (the little energy factory in the cell). It also works to mop up free radicals.


- Alpha Lipoic Acid—is found in the cells making energy. It is probably one of the powerful antioxidants. It also seems to be very powerful in helping the insulin move glucose into the cells so it can be used.

- Chromium—in adequate supplies, improves glucose tolerance and lowers triglycerides.

- Vanadium—helps with diabetes. Vanadate and vanadium sulfate forms have demonstrated insulin-like characteristics and improve insulin sensitivity in non-insulin dependent diabetics. Be very careful with this trace mineral.

- Magnesium—is typically low in diabetics even though it improves cellular uptake of glucose by insulin.

- Zinc—Diabetics appear to lose zinc easily in the urine. At the same time, zinc binds to and stabilizes insulin.

As you can see, nutrients, fatty acids, and trace minerals, along with exercise and weight and stress reduction, are important in the control of diabetes. The best way to get these nutrients is to eat a whole foods diet that is naturally rich in them. If you plan to add any of these in the way of supplements, it is wise to test first to see what your status is before adding them. And most importantly, tell your doctor what you are taking in the way of vitamins, trace minerals, and fatty acids. 

Join us for
Health Hunter Open House
Thursday, December 2
9 a.m. - 5 p.m.

Case of the month

A 68-year-old woman came to The Center in June of this year concerned that she couldn't walk at all without her nitroglycerin spray to control the angina pain. Three years ago, she was walking three miles every day. In addition to this, she had high blood pressure and diabetes which she controlled with medication. She was most concerned with the coronary artery disease, since her cardiologist wanted to do bypass surgery.

Dr. Riordan suggested she do a diagnostic chelation after she read about it to learn what was to be done. For the diagnostic chelation, the person collects a 24-hour urine sample, does one chelation and then collects another 24-hour urine sample afterwards. With these two samples, the lab can detect if a person has a heavy metal burden in her/his body. He also suggested she have a sonogram done of the gall bladder because of some abnormal symptoms.

The lab tests from her initial visit revealed that she had an amino acid deficiency, high urinary pyrrole excretion, low vitamin C, and low essential fatty acids. These were all addressed with appropriate supplements. It was also suggested she begin deep breathing exercises.

After the results came back from the diagnostic chelation, she started receiving a chelation treatment once a week for five weeks.

At a recent appointment, both she and her husband were enthused by her recovery at this point. She said, "I feel better!"

She remarked that she is now walking three to eight minutes in the mall without any angina pain and taking no medication. Her husband remarked, "This may not seem like much, but before she had trouble making it from store window to store window—and that was with her medications."

They report noticing improvement after the diagnostic chelation and she continued to improve with each of the next five chelations. She is now scheduled for five additional chelations. She continues her nutrients and is looking forward to getting back to where she can again walk three miles a day. FH

Herbal History

Cottonwood tree, *Populus deltoides* Marsh

People have a love-hate relationship with the cottonwood tree. In the spring, people curse the tree because its "cotton" tends to stick on air conditioners, sapping them of the ability to cool.

Others excuse the tree for the lovely rustling sound it makes when the wind plays on the leaves. Before air conditioning, the tree was valued by native Americans for its medicinal purposes.

Commonly found along rivers and streams, it is rumored that it was one of the few trees that could survive prairie fires. Its thick bark protected it from the fire.

The thick bark was scraped by the Blackfeet to brew a tea for women to drink before childbirth. They also made a bark tea for symptoms of heartburn and general discomfort.

"In 1877 Valery Havard, the Assistant Surgeon and Botanist for the Seventh Cavalry, reported from an area

that is in present-day Montana that, 'whole groves of cottonwood were seen with their trunks stripped by the Indians, who used the inner layers of the bark as a mucilaginous and anti-scorbutic food,'" Kelly Kindscher reported in *Medicinal Wild Plants of the Prairie*, University of Kansas Press, 1992.

It's been used in folk medicine as a tonic. All of the *Populus* species contain varying amounts of salicin and populin that were the precursors to aspirin, according to one researcher.

Even the cottony buds found their way into folk remedies. Early practitioners soaked the buds in olive or almond oil for a week and then added a little beeswax as a thickener to make salve.

The next time you hear the gentle rustle of cottonwood leaves in the wind, remember this sound reminded native Americans that this tree had healing powers for the body and the soul. FH

Food of the Month

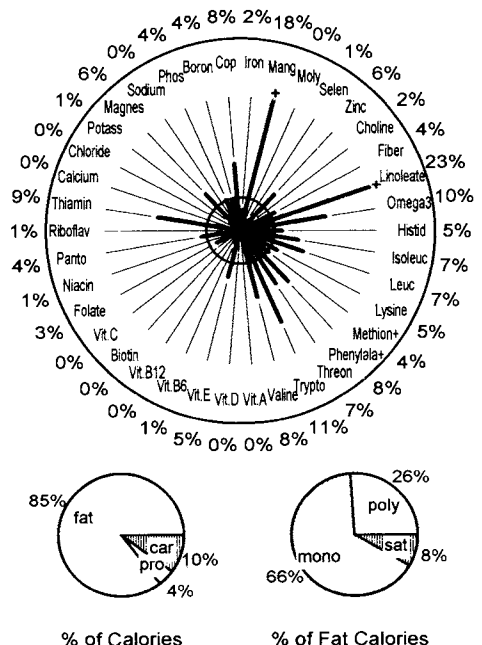
by Donald R. Davis, Ph.D.



NutriCircle

1/2 oz. = 95 calories

PECANS fall with autumn leaves, nourishing both squirrels and squirrel watchers. Out of 37 nutrients shown here, 20 are adequate compared to calories, especially essential fatty acids, manganese, copper, thiamin, and the amino acids of protein (3 to 6 o'clock in the diagram). Pecans are among the few nuts with significant omega-3 fat. Nuts are a great way to get the fats we must have—far more nutritious than any oil, for example. All studies find that big nut eaters have better blood fats, less heart disease, and less obesity than those who avoid nuts. How sad it is that many skip nuts for unfounded reasons.



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). FH

Mental Medicine

by Marilyn Landreth, M.A.



What is failure?


What do you consider as failure? Is it when you try to do something and it does not turn out as you wish? Did you fail? Is it when you put your faith in a relationship and it does not work out? Do you consider that a failure? All of us have had to deal with the realities of life.

Our bodies were meant to be used. If we were to rest all the time so our muscles were not overused then we would become less strong. Our muscles improve as we work them. It is the same thing with failure. If we try something and it does not work out or a relationship fails, if we decide we won't try again or won't have faith in another person—that is giving up. Marilyn vos Savant said, "Being defeated is often a temporary condition. Giving up is what makes it permanent."

Learning about life can tempt us

to quit trying. Just like our muscles are meant to be used to get stronger, dealing with life's setbacks will make us stronger individuals. Knowing that there are meant to be problems with which to cope and "failures" from which to learn makes the difference between a hardy individual and an individual who is hardly there.

Thomas Edison failed ten thousand times while trying to invent the incandescent lamp. When asked if that was a lot of times to fail, he replied, "I didn't fail ten thousand times. I successfully eliminated, ten thousand times, the materials and combinations which wouldn't work."

Giving ourselves permission to fail is the ingredient that can lead to our success. The mental medicine for today is to learn what works from what you might once have considered failure. 

You can reduce diabetes risk

According to Dr. Frank B. Hu, a researcher at the Harvard School of Public Health, a proper exercise program can help the elderly reduce diabetes risk. His main suggestion is to get away from the television, go out and take a walk. The elderly need to increase their physical activity level and reduce their sedentary behavior. The beneficial effect of exercise may be offset by their sedentary behavior if they spend too much time on the couch watching TV.


Previous studies have found that the risk of obesity, which itself is a risk factor for diabetes, rises with more hours in front of the tube. The study finds diabetes is more likely to develop with constant viewers, even when obesity and other factors are taken into account.

A nutritional supplement now available over-the-counter holds promise as a treatment and preventative for nerve damage complications faced by the elderly with advanced diabetes.

Lester Packer, speaking at the Annual Conference of the American Diabetes Association, said the supplement, alpha lipoic acid, can prevent or slow nerve damage experienced by up to 70% of diabetics. This is a treatment that can't do any damage and there is even evidence that it can slow down the aging process. Alpha lipoic acid is found in minute quantities in foods like potatoes, spinach, and red meat. The Gift of Health here at The Center carries this supplement. Research in Germany, where alpha lipoic acid has been used to treat nerve damage for more than 25 years, indicates even more promising results.

Remember, turn that TV off, go out for a walk, or just do some exercise. Just move your body about—on a regular daily basis.

If you cannot go out for a walk, open your door or window for some fresh air and do your regular exercise program that you are comfortable with, but do it today.

Think of this. That which you are able to do may seem small compared with what others accomplish or compared with what you would like to do, but your little, if done well, may count for more than some ambitious task, poorly done. 

—Nelda Reed

CENTER UPDATE

Eating more whole-grain foods lowers risk of coronary heart disease in women

Dr. Simin Liu and colleagues, of Harvard Medical School and Brigham and Women's Hospital in Boston, Mass., found that women could lower their coronary heart disease (CHD) risk factor as much as 30% by just eating whole-grain products.


For years, Donald Davis, Ph.D., and a consultant to The Center from the University of Texas-Austin, has been telling audiences about the advantages of eating whole foods such as whole grain products. Dr. Liu now agrees.

In this case, Dr. Liu suggests that you should eat whole-grain products rather than products made from white flour that has been stripped of almost all vitamins and all of their natural fiber. Dr. Davis calls white flour a dismembered food as opposed to a whole food. Dismembered foods, such as white flour and white sugar, have had most of their nutrients stripped away during the refining process.


In a recent study reported in the

American Journal of Clinical Nutrition, Dr. Liu and colleagues found that by eating 2.5 servings per day of whole grain products women lowered their CHD risk by 30% when compared to women who consumed only 0.13 servings per day. They found this by following over 75,000 female nurses aged 38 to 63 starting in 1984 for six years.

The researchers report that the relationship between whole-grains and the risk of CHD in these women "...was independent of both dietary and nondietary coronary risk factors and, to a large degree, was not explained by the constituents of the whole grain thought to be protective," including vitamins B6, E, folate, and fiber.

In the case of whole foods, the food has a greater effect than the known individual constituents. For instance, a recent area of research has been in phytonutrients—or food based nutrients, many of which have not yet been discovered. 

Answers from page 4

- 1 c. As we grow, our bodies must maintain large amounts of ALA to stay healthy.
- 2 b. I just made up negatrones. As a coenzyme, ALA takes part in a multi-enzyme process preparing the fuel for the mitochondria.
- 3 a. As we grow older, our bodies manufacture greatly reduced amounts of ALA.
- 4 d. ALA changes certain chemicals that are required for energy metabolism and it provides the means by which these essential substances can enter the mitochondrion.
- 5 b. Probably the most significant function of ALA is its role as a modulator of gene expression.
- 6 a. ALA is a superior antioxidant and free radical scavenger and we will probably be learning more about this in the future.
- 7 d. ALA seems to increase the amount of T-cells in your blood and helps fight the disease process. 

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

THE ALPHA LIPOIC ACID BREAKTHROUGH

by *Burt Berkson M.D.*

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Health Hunter: \$11.66

GUAIFENESIN: Dr. St. Amand's Fibromyalgia Therapy

with *Ronald Hunninghake, M.D.*

Dr. Paul St. Amand has been treating fibromyalgia successfully for over two decades. He has demonstrated that there is a toxic build-up of phosphate crystals within the muscle cells of patients with fibromyalgia. Using guaifenesin, which increases renal excretion of phosphates by 30%, he has achieved effective pain relief in 90% of his patients. Audio cassette & video tape.

HUMAN GROWTH HORMONE REPLACEMENT THERAPY

with *Neil Riordan, RPA-C*

Growth hormone replacement in deficient adults increases lean muscle mass, decreases body fat and enhances immune function. Audio cassette & video tape.

THE GREAT SALT DEBATE

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

For many decades we have heard that excess salt increases our risk of high blood pressure and the diverse ills associated with it. But many, if not most, experts are unconvinced, for good reasons that will surprise those who have not heard the contrary evidence. Although salt restriction clearly helps some, it has overshadowed other, more powerful, dietary aspects. We examine the growing view that general recommendations to restrict salt are unproductive and possibly even harmful. Audio cassette & video tape.

• To Order, Fill Out The Form Below •

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The Great Salt Debate	_____	_____	_____	_____
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Upcoming Events. . .

OCTOBER				
Monday	Tuesday	Wednesday	Thursday	Friday
				1
4 Yoga	5 L & L - Many Ways Vitamin C Affects Cancer & Health, Yoga	6 Yoga	7 L & L - Lycopene, Sounds for Healing	8
11 Yoga	12 L & L - Know Your Nutrients: Carnitine, Yoga	13 Yoga	14 L & L - Facing Cancer Together, Part I	15
18 Yoga	19 L & L - A New Approach to Controlling Asthma, Yoga	20 Yoga	21 L & L - Vitamin K: New Interest in an Old Vitamin	22
25 Yoga	26 L & L - Ipriflavone: Osteoporosis Treatment, Yoga	27 Yoga	28 L & L - Facing Cancer Together, Part II	29

NOVEMBER

- | | |
|--|--|
| 2 Immunotherapy and Cancer | 11 Do Food Preferences Help Us Get |
| 4 Getting Rid of Chronic Diseases | What We Need? |
| 9 Safe Uses of Low Doses of Hydrocortisone | 16 How Perception Influences Our Lives |
| | 18 A Review of You |

Low serum magnesium—high risk of death from ischemic heart disease

The lower one's blood serum magnesium, the higher the risk from ischemic heart disease, according to a report in the *International Journal of Epidemiology* by Dr. Earl Ford of the U.S. Centers for Disease Control and Prevention.

Dr. Ford, in studying 19 years of data from the National Health and Nutrition Examination Survey I Epidemiologic Follow-up Study, analyzed death from ischemic heart disease in 12,340 people and compared them to 12,952 all-cause deaths for the same period.

Dr. Ford found that "...serum magnesium concentration, independent of other risk factors was inversely associated with mortality from all causes and [from] ischemic heart disease."

- Diabetes and nutrition: take charge!
- Vitamin C, the new antidote for stress
- Benefits of a sauna
- You can reduce diabetes risk

INSIDE THIS MONTH'S ISSUE . . .

Health Hunter
 A Publication of The Center for the Improvement
 of Human Functioning International, Inc.
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