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**Riordan
Clinic**

Health Hunters Newsletter

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Keep Your Pump and Pipes Working



THE AUTHOR

*Karen Wheeler,
APRN*

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When I was a nursing student back in the early 1980's, one of my first rotations was in Coronary Care. I fell in love with the challenge of caring for critically ill patients and did that for 17 years before completing my Master's Degree as a Family Nurse Practitioner. The heart and the entire circulatory system are so wonderfully complex that here it is nearly 4 decades later and I am still fascinated with the cardiovascular system! Having worked in conventional medicine for so many years, I am comfortable with caring for patients with high blood pressure, arrhythmias, heart attacks and strokes. When I started here at Riordan Clinic in 2014, I made learning the functional medicine approach to heart disease a priority. So it is only fitting that I write about cardiovascular disease treatment and prevention.

According to the Center for Disease Control, heart disease is the number one cause of death in this country for both men and women. More than 26.5 million adults are diagnosed with heart disease. It affects people of all races. Professional guidelines recommend screening children as young as 9 years old for high cholesterol in an attempt to intervene early to prevent heart disease.



Commonly quoted risk factors for heart disease are high blood pressure, high cholesterol, diabetes, obesity, tobacco use, physical inactivity and stress. But Dr. Mark Houston, a cardiologist who has an integrative cardiology practice in Nashville, Tennessee, points out that there are close to 400 risk factors in his book "What Your Doctor May Not Tell You About Heart Disease." That statement really got my attention!

Dr. Houston points out that the root causes of cardiovascular disease start as functional changes in our teens and progress to structural changes as we age. All of those risk factors are making changes in the endothelium, which is the lining of the blood vessels. Changes, such as inflammation, oxidative stress and immune dysfunction, cause arterial stiffening and lipid deposits in the sub-endothelial layers of the arteries, which eventually lead to acute events such as heart attacks and strokes.

Every day, people with normal cholesterol levels suffer heart attacks and strokes! This is because just knowing how much cholesterol and what kind your body has is not as



Riordan Clinic is a not-for-profit 501(c)(3), nutrition-based health facility in Wichita, Kansas. We have integrated lifestyle and nutrition to help you find the underlying causes of your illness. Since our inception in 1975, the mission has been clear and unwavering to "...stimulate an epidemic of health."

Keep Your Pump and Pipes Working continues on page 2...

Contact the Editor

Please send any comments or suggestions to newseditor@riordanclinic.org.

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Erin Manning
Editor

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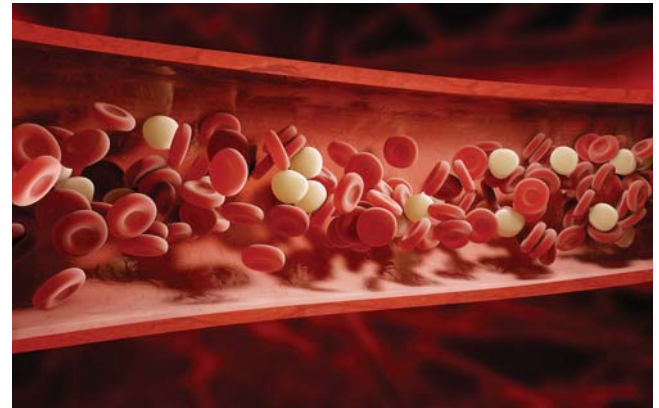
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important as knowing the particle size and functionality of the different cholesterol. This information can be measured using advanced lipid testing which is available through several labs throughout the country.

If the LDL or “bad” cholesterol particles are bigger, they are less likely to infiltrate the endothelial lining. Likewise, the HDL or “good” cholesterol needs to be found in high enough numbers and functionality because it is the “clean-up crew” that neutralizes any damage caused by the LDL. In some people, the HDL level is just too low to keep up with the high amount of LDL while in others it may not be functioning well enough. HDL becomes dysfunctional from inflammation, heavy metal exposure, infection or poor nutrient intake. Addressing each of these factors can improve the functionality of the HDL and therefore lessen the risk of cardiovascular events. Chelation is one of the methods used at Riordan Clinic to remove heavy metals to help patients with cardiovascular disease. C - reactive protein (CRP) is a marker of HDL dysfunction and inflammation and is routinely done to monitor effectiveness of interventions.



Blood pressure is considered a risk factor for heart disease because of the shearing force stress that it puts directly on the blood vessels as well as the heart as a pump. The top number of a blood pressure is called the systolic BP and is how hard the heart has to exert to push the blood out of itself and into the arteries. The bottom number is the diastolic and reflects how much the heart gets to relax between beats. Since the heart cannot ever completely rest, it is imperative to not overwork it so the pump wears out!

Over the years, the numbers that have been considered “normal” blood pressure have changed. The Joint National Committee periodically updates these values to guide practitioners with what this expert panel has determined will give patients the best outcomes based on current research. Currently, the target for an adult is to have their blood pressure <120/80. A person has pre-hypertension with a BP between 120-140/80-90 and is considered to have high blood pressure (AKA hypertension) if their blood pressure is above 140/90.



Blood pressure is affected by many factors such as sodium and water intake, caffeine, tobacco and stress. It varies from minute to minute. Patients often report having “white coat hypertension” because their blood pressure readings are “fine” at home but are high when taken at the doctor’s office presumably from being nervous in that setting. Obviously, the doctor’s office is not the only

stressor that the person will experience and, not treating elevated blood pressures when they are found there, is a gamble.

Dr. Houston points out that a person's blood pressure should "dip" during the night by approximately 10% of their daytime readings and that people who do not "dip" or whose blood pressures elevate during the night are at increased risk of cardiovascular events. He suggests using a 24 hour blood pressure monitor to document a person's blood pressure including their "dipper" status. He emphasizes that it is not as simple as moving blood pressure medicines to be taken before bed because excessive drops in nighttime blood pressure have increased risk of strokes. There are multiple nutrients that can be used to improve blood pressure such as Hawthorne berry and magnesium. (Do NOT stop any of your medications without proper consultation and monitoring or you risk an acute event or even death!)

Having normal blood sugar is essential to preventing cardiovascular disease. Dr. Houston points out that conventional medicine has been too lenient compared to functional medicine on what is considered acceptable blood sugar levels. While conventional medicine would accept fasting blood sugars of up to 100 as being normal, he considers the ideal fasting blood sugar to be 75! A blood sugar taken 2 hours after eating a meal is considered normal at 140 but functionally should be limited to 110 to lessen the risk of atherosclerosis since most of the damage to the blood vessels occurs after eating unhealthy foods. There are several supplements and diet changes that can be made to improve blood sugar levels.

Metabolic endotoxemia is being researched as one of the leading causes of cardiovascular disease. This refers to the phenomena of the lining of the gastrointestinal tract being damaged by gluten, sugars and chemicals that are ingested. This damage allows bacteria from the GI tract to enter the bloodstream which results in inflammation and infection. This in turn leads to damage in the endothelium which starts the deposits of cholesterol and aggravates the clotting factors that eventually cause heart attacks and strokes.



Nutrients that are helpful with cardiovascular health include red yeast rice which has natural statin effects. Vitamin C and vitamin E can also help lessen inflammation. Eating cruciferous vegetables and a Mediterranean diet that uses olive oil and limits red meat will lower cardiovascular risk. Dr. Houston also recommends garlic, lycopene, resveratrol and niacin. Good balance between GLA, DHA and EPA, he considers essential to cardiovascular health. A patient's essential fatty acids can be measured to be sure that this balance is in place and, if not able to achieve it with diet alone, supplements can be taken.



Prevention of cardiovascular disease with a healthy lifestyle is key. One should limit their sodium intake to less than 2 grams/day. Eat a Mediterranean diet and avoid all tobacco products. Eat a Mediterranean diet. Avoid all tobacco products. Maintain an ideal body weight and composition with a daily exercise program that consists of 40 minutes of resistance training and 20 minutes of interval aerobic exercise. Dr.

Houston recommends increasing potassium intake but I would caution readers to only do this if they know that they have normal kidney function and that they are not on medications



Food as Medicine

A foundational nutrition course

There are a lot of questions in today's world about what to eat, how to eat and why.

This in-depth course will connect the dots and address some fundamental questions behind how our diet impacts our health and well-being and how it contributes to the progression of chronic disease.

Held every Tuesday from 2:30 – 4:30 p.m. at the Riordan Clinic.

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\$10 textbook
17 and Under are Free
New Patients are Free

Register by phone 316.682.3100 x204 or by email: reservations@riordanclinic.org



Prostate Cancer PATIENT PROFILE



Chris Brannon RN, BSN
Clinic Manager

Declining health is a wakeup call for most people. The extent to which a person is willing to go is the real decision. Will you look for Real Health or settle for covering of symptoms?

In June of 2015 a 71 year old male came to the Riordan Clinic with an elevated PSA, high blood pressure, and diabetes as his main concerns. The traditional treatments (medications) were already underway from his Primary Care Physician. He continued to have fatigue, high blood pressure, elevated blood sugars, and difficulty sleeping.

After meeting with one of our Doctors and discussing all of his concerns they decided on extensive laboratory testing and to start Chelation IV's immediately.

Laboratory testing, which included heavy metal testing, cytotoxic food sensitivity, and a multitude of other tests, showed the following: elevated lead levels, elevated PSA (already known), elevated Hgb A1C (already known for his diabetes), and several food sensitivities. He had already come this far and was ready to make lifestyle changes to continue improvements to his health that medications weren't resolving.

After only 1 month, and making the necessary changes to his diet and lifestyle, he had already began to see the positive changes. His energy was returning and blood

Patient Profile continues on page 5...

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that retain potassium such as spironolactone because too high of a potassium level can be fatal.

It is beyond the scope of this article to go further into details of the functional approach to cardiovascular disease. If you are currently experiencing chest pain or shortness of breath at rest or with exertion, go to a conventional cardiologist to be sure that you are

not having those symptoms because your heart is not getting the blood flow that it needs. We do NOT treat acute heart attacks or strokes here at Riordan Clinic! But, once you are in a stable condition, come see us so we can get to the root of what is causing your heart and blood vessels to be unhealthy because that is OUR specialty!

To become a patient, please call us at 1.800.447.7276 today!

References:

<https://www.aap.org/en-us/about-the-aap/aap-press-room/pages/Physicians-Recommend-all-Children,-Ages-9-11,-Be-Screened-for-Cholesterol.aspx>
CDC.gov

"Cholesterol & Blood Pressure w/Dr. Mark Houston" High Intensity Health podcast
"What Your Doctor May Not Tell You About Heart Disease" by Dr. Mark Houston

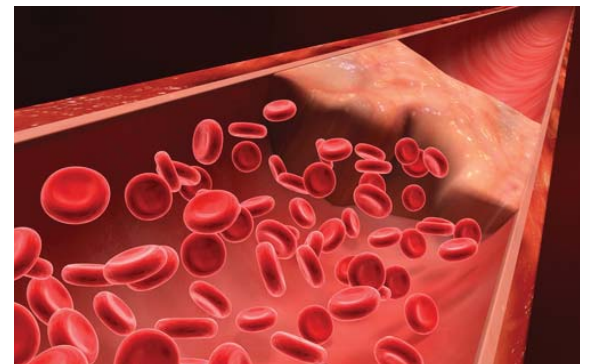
Chelation Therapy



THE AUTHOR

Annette
Chlumsky, RN

Chelation therapy using the synthetic amino acid known as EDTA (ethylene diamine tetracetic acid) intravenously has been a standard treatment for lead and heavy metal poisoning since World War II. "In the 1940s and 50s, patients taking EDTA for lead poisoning reported improved memory, vision, hearing and smell, and diminished leg and heart pain. From this discovery, the modern era of chelation began and since then nearly 1,000,000,000 patients with cardiovascular disease have been treated successfully. Chelation therapy is now being used to relieve symptoms of calcified disorders such as impaired circulation in the heart, leg arteries, carotid (neck) arteries, renal (kidney) arteries, hypertension, macular degeneration, osteoporosis, arthritis, fatigue and emphysema.



The term chelation comes from the Greek word chele which means claw. Chemically, the chelating agent is claw shaped and attacks a positively charged metal and surrounds it, making it inactive and eventually removes it from the body. There are several theories as to how the calcification and circulation is improved. Thirty-two scientific research articles have been written that provide solid evidence for benefit, but the specific

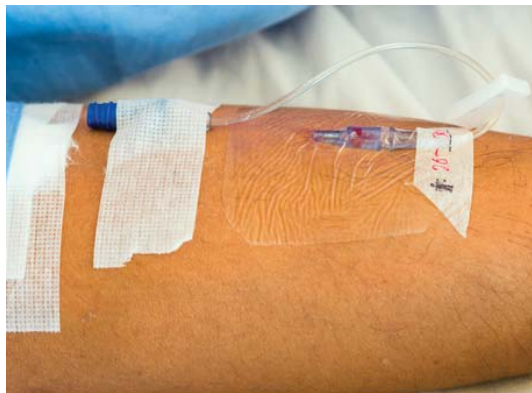
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mechanisms that make it work are still not entirely clear. Of course chelation removes heavy metals such as lead and cadmium and reduces free iron and copper, all of which can contribute to degenerative diseases. Clinical results are consistently impressive showing improvements in blood flow throughout the body, reducing platelet “stickiness”, improving liver and kidney function, improving blood fat ratios, reducing blood pressure, improving vision, healing of vascular ulcers, relieving arthritic symptoms and reducing the incidence of cancer.

The only real criticism that has persisted about the therapy from traditional practitioners not familiar with the procedure is that the therapy affects the kidneys negatively. Two scientific papers authored by Dr. McDonagh at McDonagh Medical Center in Kansas City, seem to put that rumor to rest. Actually kidney function, on the average, improves with chelation as long as it is prescribed properly. During the course of chelation therapy, the heavy metals are removed largely through the kidneys. The EDTA dosage is based on age, weight, and kidney function test results, so it is calculated specifically for each individual.”A blood test is used to assess kidney function with every 5 to 10 chelation treatments. These two safeguards prevent potential complications.

Riordan Clinic offers both the DiSodium EDTA and the Calcium EDTA for chelation. There is research to show that DiSodium EDTA has a slight edge in effectiveness for cardiovascular symptoms. Both are excellent for removal of heavy metals. DiSodium EDTA is given over several hours as a slow IV drip. Calcium EDTA has the added advantages of FDA approval for heavy metal removal and can be administered as a slow intravenous push that takes minutes, not hours. If you wish to pursue treatment, often the initial testing is a provocative test which means giving a chelating agent either intravenously or orally, then collecting all urine for 6 hours. The urine is sent to a lab for heavy metal analysis, checking for 20 different metals such as lead, cadmium, mercury, arsenic, and aluminum.



The chelating process and treatment schedule is highly individualized. If you start chelation preventively, prior to onset of symptoms, fewer treatments will be needed. In cases where you have an established history of cardiovascular disease and/or heavy metal toxicity, anywhere from 10 to 30 treatments will be needed, with additional follow-up treatments intermittently to maintain improvement.

The actual intravenous chelation therapy is only a part of the disease reversal process. Improved nutrition and lifestyle are absolutely essential for lasting benefits of the chelation treatments. By improving your food choices and physical activity and following an oral supplement program, you are protecting your money and time invested in your chelation treatments. After all, you would not think of putting dirty oil in your new car’s engine! We highly recommend anyone interested in chelation read, “Forty Something Forever” by Harold and Arlene Brecher. This is a very easy read, consumer-oriented book which will help answer many more questions. You are also invited to attend the Food as Medicine Class offered through the Riordan Clinic. This will help you understand how our diet impacts our health and contributes to the progression of chronic disease. The nursing staff at the Riordan Clinic is always available to help answer your questions. The more you know, the better your opportunity to make health-promoting lifestyle choices!

pressure had dropped from 130/70, at his initial appointment, to 117/68. These were early signs that he was making the right changes.

Now, six months later, the positive impact continues. He has had a total of 13 Chelation IV’s and his lead level has dropped from 9.5 to 7.7 ug/g. His Hgb A1C has decreased from 6.2% to 5.8%; and PSA has dropped from 9.6 to 7.4 ng/mL.

Not only has the blood levels of his labs changed for the better, it also has resulted in the loss of almost 6 lbs and he has been sleeping better. This rejuvenated energy has made great positive changes in his life and he cannot wait to see how much better he feels in the years to come.



Are you ready?

Talk with your Riordan Clinic provider today to see how Nutrient Lab Testing could benefit you!

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Chelation therapy offers a greatly improved quality of life for millions of people with many different age-related disease processes. “In recent years, almost as many patients were being chelated as bypassed, with a 40 year record of safety. The effects of the treatments can be dramatic, restorative, and life-prolonging.



▶ **Visit our website for more articles about chelation:**
<https://riordanclinic.org/journal-articles/>

To become a patient, please call us at 1.800.447.7276 today!

An excerpt from:

Chelation therapy and cardiovascular disease: Connecting scientific silos to benefit cardiac patients

Authors Julio G. Peguero, Ivan Arenas, and Gervasio A. Lamasn

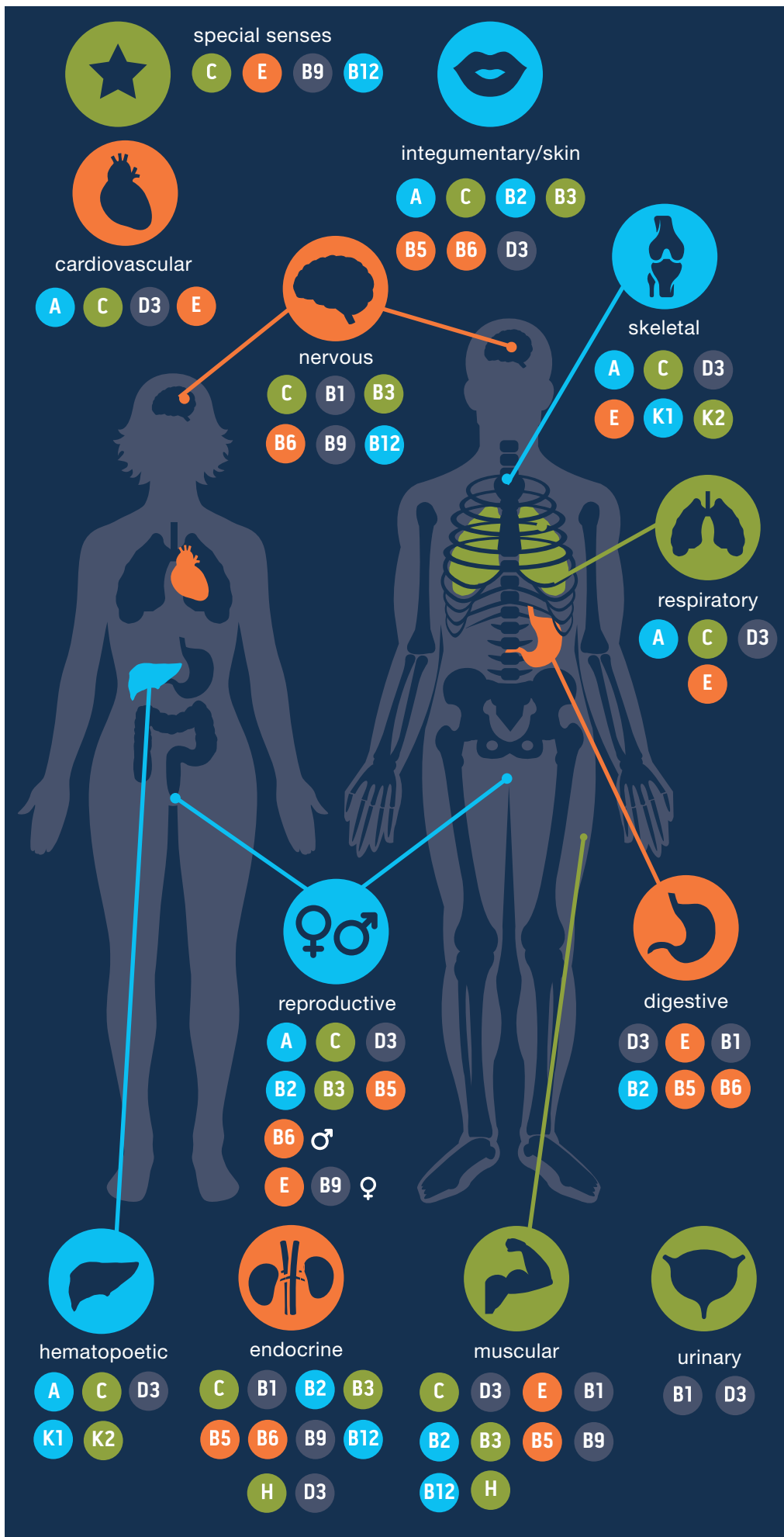


Medical practitioners have treated atherosclerotic disease with chelation therapy for over 50 years. Lack of strong evidence led conventional practitioners to abandon its use in the 1960s and 70s. This relegated chelation therapy to complementary and alternative medicine practitioners, who reported good anecdotal results. Concurrently, the epidemiologic evidence linking xenobiotic metals with cardiovascular disease and mortality gradually accumulated, suggesting a plausible role for chelation therapy. On the basis of

the continued use of chelation therapy without an evidence base, the National Institutes of Health released a Request for Applications for a definitive trial of chelation therapy. The Trial to Assess Chelation Therapy (TACT) was formulated as a 2 2 factorial randomized controlled trial of intravenous EDTA-based chelation vs. placebo and high-dose oral multivitamins and multimineral vs. oral placebo.

The composite primary endpoint was death, reinfarction, stroke, coronary revascularization, or hospitalization for angina. A total of 1708 post-MI patients who were 50 years or older with a creatinine of 2.0 or less were enrolled and received 55,222 infusions of disodium EDTA or placebo with a median follow-up of 55 months. Patients were on evidence-based post-MI medications including statins. EDTA proved to be safe. EDTA chelation therapy reduced cardiovascular events by 18%, with a 5-year number needed to treat (NNT) of 18. Prespecified subgroup analysis revealed a robust benefit in patients with diabetes mellitus with a 41% reduction in the primary endpoint (5-year NNT ¼ 6.5), and a 43% 5-year relative risk reduction in all-cause mortality (5-year NNT ¼ 12). The magnitude of benefit is such that it suggests urgency in replication and implementation, which could, due to the excellent safety record, occur simultaneously.

To read the full article, please visit <http://www.ncbi.nlm.nih.gov/pubmed/25106084>



ON THE BENEFITS OF COMPREHENSIVE EVALUATION OF NUTRITIONAL STATUS

The human body is comprised of water (60%), plus 60 essential minerals, 16 essential vitamins, 10 essential amino acids and two essential fatty acids (40%). Essential, in this case, simply means that all 99 of the preceding listed nutrients must be obtained from the diet and cannot be manufactured in or by ourselves. Fortunately, most of the required nutrients have multiple functions, and to a point, a deficiency of a single nutrient can be masked by other nutrients.

Examples of this include two well-known causes of anemia, iron deficiency and vitamin B12.

We continue to function at reduced efficiency with either deficiency, but severe and prolonged deficiency will cause death. The following graphic, constructed from studies conducted at the University of Maryland, shows which body systems are affected by 13 of the essential vitamins.



**Bio-Center
Laboratory**

@Riordan Clinic

Charles T. Hinshaw, Jr. MD,
Director, BioCenter Laboratory
chinshaw@riordanclinic.org

Hang me on your fridge

HOW TO BUILD A COLOR SMOOTHIE



- | | | |
|--------------|---------------------------|-------------------------------------|
| Avocado | 1 Tbsp chia seeds | 1-2 tsp cinnamon |
| Fresh ginger | 1-2 Tbsp shredded coconut | 1-2 Tbsp almond butter |
| Hemp seeds | 1-3 tsp coconut/MCT oil | 1-2 Tbsp sunflower or pumpkin seeds |
| Cacao powder | 1-2 Tbsp ground flaxseeds | |

BOOSTERS (1-2)*

FRUIT/VEGGIE ADD-INS (1-2 SERVINGS)
(RAW, FRESH OR FROZEN)



Berries



Citrus



Beets



Sweet Potato



Pumpkin

LEAFY GREENS (2-3 SERVINGS)



Spinach



Kale



Swiss Chard



Romaine lettuce



Spring mix



Collard greens

LIQUID BASE (1-2 CUPS)

- Water
- Unsweetend almond milk,
- Unsweetened coconut milk, rice milk
- Coconut water

TIPS:

- Blend your seeds first (such as flaxseed) to get more benefits
- Add ice for a refreshing, cool drink during the summertime
- Drink within 2-4 hours for most antioxidant benefit
- Can be a meal replacement