

NUTRITION & HEALING

“NEW” botanical breakthrough beats high blood sugar and cuts cholesterol naturally!

By Jonathan V. Wright, M.D.

If there ever was any excuse for prescribing “statin”-type patent medicines to lower cholesterol, that excuse is now totally gone. The November 2010 *Nutrition & Healing* reviewed research showing that the botanical “berberine” actually controls cholesterol and triglycerides better than the most-commonly prescribed formerly patented medicine for type 2 diabetes. Combined with the Paleo diet, interval training, and essential nutrients required in greater quantity by type 2 diabetics, berberine has lowered cholesterol and triglycerides very significantly in all the type 2 diabetics with whom I’ve worked

Then there’s red yeast rice and red yeast wine, both of which lower cholesterol by directly inhibiting the enzyme (for the technically inclined, “HMG CoA reductase”) considered key to cholesterol synthesis. As you likely know, red yeast (for the technically inclined, “*Monascus purpurea*”) contains tiny amounts of a type of statin, but not anywhere close to the relatively large amounts found in the various statin patent medications. (There’s suspicion here and there that the patent medicine company which patented the very first statin knew about this, but carefully didn’t disclose it to the patent office—otherwise, they wouldn’t have been able to patent it!) Despite the tiny amount of statin red yeast contains, it’s still quite effective in lowering cholesterol, and with many fewer adverse effects than much higher dose statin patent medicines.

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How to stimulate your body to fight prostate cancer naturally

By Jonathan V. Wright, M.D.

If you read the February 2011 issue of *Nutrition and Healing*, you learned about breakthrough research which showed that “3β-Adiol” (for the technically inclined, 5α-androstane-3β,17β-diol) is a naturally occurring *anti-carcinogenic* metabolite of testosterone present in every man’s body. Researchers experimenting with the metabolite reported the regression of prostate cancer in experimental animals, and wrote: “the effects here described entail a novel potential application of this agent against human PC.”¹ In English: “3β-Adiol has the potential to treat prostate cancer.” (For further details, “go to” www.wrightnewsletter.com, “click” the archives, and choose the February 2011 issue.

For several months in 2011, compounding pharmacies were able to supply “3β-Adiol” for relatively reasonable prices. A number of men, who unfortunately had prostate cancer, were able to use this entirely natural testosterone

for three or four months, but then it suddenly became unavailable. According to the compounding pharmacists who supplied it, a certain agency of *los federales* began to interfere with freedom of trade. 3β-Adiol suddenly became entirely unavailable. Surprised, anyone?

Fortunately, researchers are reporting possibilities for stimulating the natural endogenous bio-synthesis (for the technically non-inclined, helping your own body make more) of 3β-Adiol with natural substances. These natural substances work by stimulating 3β-HSD and/or 17β-HSD, the enzymes that convert 5α-DHT into 3β-Adiol.

But there’s a caution: Although these studies are *theoretically* promising, none of them have, as of yet, actually measured “before and after” quantities of 3β-Adiol itself, but rather activity and/or quantity of the *enzymes* that lead to 3β-Adiol.” Until this research has

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Dr. Jonathan V. Wright's

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Our mission:

Nutrition & Healing is dedicated to helping you keep yourself and your family healthy by the safest and most effective means possible. Every month, you'll get information about diet, vitamins, minerals, herbs, natural hormones, natural energies, and other substances and techniques to prevent and heal illness, while prolonging your healthy life span.

A graduate of Harvard University and the University of Michigan Medical School (1969), Dr. Jonathan V. Wright has been practicing natural and nutritional medicine at the Tahoma Clinic in Renton, Washington, since 1973. Based on enormous volumes of library and clinical research, along with tens of thousands of clinical consultations, he is exceptionally well-qualified to bring you a unique blending of the most up-to-date information and the best and still most effective natural therapies developed by preceding generations.

Nutrition & Healing cannot improve on these famous words:

"We hold these truths to be self-evident, that all men are created equal, that they are endowed by their creator with certain unalienable rights, that among these are life, liberty, and the pursuit of happiness."

The inalienable right to life must include the right to care for one's own life. The inalienable right to liberty must include the right to choose whatever means we wish to care for ourselves. In addition to publishing the best of information about natural health care, *Nutrition & Healing* urges its readers to remember their inalienable rights to life, liberty, and freedom of choice in health care. This information is published to help in the effort to exercise these inalienable rights, and to warn of ever-present attempts of both government and private organizations to restrict them.

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Prostate cancer (continued from page 1)

been done, the best alternative is measuring the "before and after" levels in individuals, especially those who are found to personally have low 3 β -Adiol levels. (In my own practice, I've observed that several of the items I detail below have been associated with improved 3 β -Adiol levels in individuals, but it's too early to report that any one is reliably associated with improvement in low 3 β -Adiol levels.)

Stimulate your body to make its own

Let's start with (no kidding) coconut oil and olive oil. In 2008² and 2009,³ researchers reported that these two oils, used separately, *significantly* raised testosterone levels in experimental animals. The researchers also measured the activity of the two enzymes that transform 5 α -DHT into 3 β -Adiol (for the technically inclined, the enzymes 3 β -HSD and 17 β -HSD) and reported that olive oil and coconut oil significantly stimulated them, too.

However, these researchers did not actually report the "before and after" levels of 3 β -Adiol which these enzymes are known to produce. So while it's entirely logical to expect more testosterone (reported) and more 3 β -Adiol (not reported) with coconut and olive oils, only the testosterone data is reported "for sure."

Grapeseed and soy oils were included in this research as well, and were found to have no significant effect on testosterone levels or 3 β -HSD and 17 β -HSD activity.

More natural 3 β -Adiol stimulators

Several natural substances have been found to stimulate 3 β -HSD,

one of two of the enzymes that help our bodies synthesize 3 β -Adiol. These include the "active" thyroid hormone T₃, NADH (for the technically inclined "niacinamide adenine di-nucleotide), lithium, and a very active form of vitamin A named "all-trans retinoic acid".

Zinc is the well-known "male health" mineral. Studies in male rats have demonstrated found that zinc deficiency decreased 3 β -HSD activity. Zinc deficiency also was associated with a very significant reduction in testosterone itself.⁴

There's a strong possibility—although not yet proven—that a weak thyroid may contribute to higher prostate cancer risk. Since hypothyroidism and "sub-clinical" hypothyroidism are relatively common problems, it's good to be aware of the possibility.

The thyroid hormone T₃ stimulates 3 β -HSD type 2.⁵ Although this does suggest that T₃ stimulates more 3 β -Adiol, there aren't yet any research publications exploring this possibility. But if you're a man with a weak thyroid, it might be wise to have your level of 3 β -Adiol checked. Or, if you're a man with low 3 β -Adiol, it might be wise to have your thyroid status checked.

3 β -HSD also requires NADH,⁶ but once again there are no studies yet definitively linking NADH supplementation with improved levels of 3 β -Adiol.

NADH is a very important "co-enzyme" found in every cell of our bodies. Among the zillions of things NADH does it works with co-enzyme Q10 to help produce energy. One researcher reported

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Herbs and phytochemicals with the power to prime

A new insight into herbal antioxidants: Part 2

By Kerry Bone

What are the key herbs/phytochemicals with Nrf2/ARE priming activity? The research has focused on just a few key ones: sulforaphane from broccoli (especially the sprouts), curcumin from turmeric, resveratrol, carnosol from rosemary, Ginkgo extract, the polyphenols from green tea, and the sulfur compounds in garlic.

Cruciferous cancer fighters

The consumption of cruciferous vegetables has long been associated with a reduced risk of cancer at various sites in the body. The key chemopreventative phytochemical sulforaphane is found in certain cruciferous vegetables and is especially high in broccoli sprouts.¹ It is believed to react with the cysteine amino acid residues in Keap1. As well as Nrf2-mediated induction of cellular defenses, many other mechanisms have been proposed for chemoprevention by sulforaphane and these appear to act synergistically.² Broccoli sprouts have reduced measures of oxidative stress in type 2 diabetes patients in a clinical trial.³

The spice connection

Rosemary contains the antioxidant molecules carnosol and carnosic acid. Both of these are now understood to be potent primers of the Nrf2/ARE pathway. For example, they have demonstrated neuroprotective activity by this pathway, which reflects on rosemary's traditional use for memory.^{4,5} Recently a single 750 mg dose of rosemary

improved the speed of memory and alertness of healthy older adults.⁶

Multiple animal lab studies have demonstrated the chemopreventative activities of curcumin and turmeric.⁷ The Nrf2/ARE pathway is thought to be an important basis for these effects. For example, the epigenetic silencing of Nrf2 during the progression of prostate tumors in a mouse model was reversed by curcumin.⁸ Brain and liver injury were reduced by curcumin through Nrf2-mediated induction of HO-1.^{9,10} Dietary curcumin led to increased Nrf2 protein levels and enhanced ARE binding in the liver and lungs of mice.¹¹

A significant proportion of the health-promoting activity of green tea and its key component EGCG is now thought to be via the Nrf2/ARE pathway.¹² These activities include chemopreventative, neuroprotective, detoxifying, and antioxidant outcomes. These beneficial effects for green tea are not seen in Nrf2-deficient animal models.

Cruciferous vegetables that contain sulforaphane

- broccoli sprouts
- brussels sprouts
- cabbage
- cauliflower
- broccoli raab
- bok choy
- kohlrabi
- kale
- collard greens

Resveratrol's powerful protection

Resveratrol is a highly active primer of the Nrf2/ARE pathway. Favorable Nrf2-mediated protection has been demonstrated in many body systems including the endocrine, cardiovascular, and nervous systems. For example, the endothelial (circulatory) protective effects of resveratrol against a high-fat diet were largely diminished in Nrf2 knockout mice.¹³

In a recent double blind, randomized, crossover study, 10 normal, healthy men and women were given a high-fat, high-carbohydrate (HFHC) meal (930 kcal) either with a placebo or a product containing 100 mg of resveratrol from *Polygonum cuspidatum* plus 75 mg of total polyphenols from a grape extract.¹⁴ The DNA binding activity of Nrf2 in white cells was significantly increased by 150 ± 39% over baseline at 3 hours after the meal and supplement intake, whereas meal consumption in the placebo group resulted in a significant reduction in Nrf2 binding activity at 5 hours. These were associated with a significant reduction of Keap1 by 48% in the supplement group and a significant increase by 66% in the placebo group.

Ginkgo deflects damage

Ginkgo is now well known as a powerful clinical antioxidant. Its antioxidant properties could play an important role in protection against radiation damage and appear to be mediated by Nrf2. In

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This often-overlooked common seed could be the key to balancing your menstrual cycle hormones

By Jonathan V. Wright, M.D.

As every woman knows, progesterone is the second steroid hormone of a normal menstrual cycle. (For the one man who doesn't know, estrogen is the first steroid hormone of that normal menstrual cycle.) As menstrual bleeding ends, ovaries secrete more and more estrogen until the peak at ovulation when an ovary releases an egg for its journey towards the uterus and just possibly a meeting with a sperm cell.

At that time of ovulation, the ovaries produce a surge of progesterone, reaching levels much higher than prior to ovulation. After ovulation, progesterone levels stay relatively high for a while, waiting for the egg (egg cell to be technically correct) to meet and merge with a sperm cell. But if that doesn't happen, progesterone levels decline along with estrogen levels, and the next menstrual bleeding begins.

(Serious hormone scholars will point out that progesterone is also made by adrenal glands, too, specifically the adrenal cortex which also produces cortisol, DHEA, aldosterone, and dozens of related natural steroid hormones. However, these other natural steroids are not an intrinsic part of the menstrual cycle.)

Hormone havoc

Although testosterone is usually thought of as a "male hormone," it's actually the third steroid hormone of a normal menstrual cycle, as ovaries secrete all three:

estrogen, progesterone, and testosterone. Although testosterone is certainly not the only hormone driving libido for women, it is the major libido-driver for many. So it just makes sense that in most normal menstrual cycles, testosterone starts to rise after menstrual bleeding stops, and reaches its highest levels (surprise!) before and at the time of ovulation. This small testosterone peak often means the newly released egg will have a better chance of meeting and greeting a sperm. After ovulation, testosterone declines again, and if dips more than usual, the relatively low testosterone can also contribute to estrogen dominance.

As menopause approaches, progesterone levels decline, usually well before estrogen levels do. This can lead to an imbalance ("imbalance" relative to the estrogen/progesterone ratio of a woman's 20s and earlier 30s) that's sometimes termed "estrogen dominance." Estrogen dominance can be associated with a variety of symptoms. See the sidebar on this page for some of the most common ones.

Symptoms associated with estrogen dominance

- irritability
- mood swings
- trouble concentrating
- less restful sleep
- water retention
- headaches
- breast tenderness

Flaxseed the hormone helper

All the way back in 1993, researchers reported that ground flaxseed powder can favorably affect all three natural steroid hormones—estrogen, progesterone, testosterone—of the menstrual cycle.¹ Now I know that information would cause some to say, "Back in 1993? Isn't that research out of date?" But as a *Nutrition & Healing* reader you know that if eating ground flaxseed powder had effects on human ovarian hormones in 1993, eating ground flaxseed powder will always have those effects whether it's 2013 A.D. or 2013 B.C. In stark contrast the effects of patent medicines tend to be greatest during the 17-year duration of the patent, and frequently suffer a dramatic decline after that, only to be replaced by yet another patent medicine! But I digress...

Researchers recruited eighteen women having normal menstrual cycles, using a balanced, randomized, cross-over design. (For the non-technically inclined, this design eliminates "researcher bias".) Each woman ate her usual diet (omnivorous, relatively low fiber) for 3 complete menstrual cycles and continued that very same diet with flaxseed powder for another 3 complete menstrual cycles. Hormone levels of the second and third menstrual cycles with usual diet but no added ground flaxseed powder were compared with hormone levels of the second and third menstrual cycles with the

(continued on next page)

same usual diet, but with added ground flaxseed powder.

During the “luteal phase” (for the non-technically inclined, the days of the menstrual cycle starting with ovulation and ending at the start of menstrual bleeding) the progesterone/estradiol ratios were significantly higher during the cycles when the eighteen women were adding ground flaxseed powder to their usual diets. The “luteal phase” was also a day longer during the cycles when ground flaxseed powder was consumed.

During the months when the women had ground flaxseed powder added to their “regular” diets, their testosterone levels were slightly higher before ovulation than during the months with no

added ground flaxseed powder.

As noted above, thirty-six total “no added ground flaxseed powder” menstrual cycles (two per woman, eighteen women) were compared with thirty-six total “added ground flaxseed powder” menstrual cycles (again two per woman, eighteen women). During the thirty-six “no flax” cycles, there were three cycles with no ovulation (“anovulatory cycles” for the technically inclined). By contrast, ovulation occurred in all of the thirty-six “added flax” menstrual cycles.

Reaping the benefits

What is the potential practical result of these findings? With added ground flaxseed powder, testosterone is slightly higher before

ovulation and all cycles resulted in a human egg. With testosterone slightly higher, libido is likely to be slightly higher also, and—in addition to personal and marital satisfaction—because of the pre-ovulatory timing, the monthly egg is more likely to meet with a sperm. And after ovulation (the “luteal” phase), if there is no union of egg and sperm, with added ground flaxseed powder, the progesterone/estradiol ratio is still significantly improved, and there’s less “hormone imbalance”, thus lessening the chances of estrogen dominance symptoms, again contributing to marital harmony.

All of these effects appear to be right in line with what appears to

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Blood sugar botanical

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Cholesterol control from the Mediterranean

Now there’s another botanical shown very recently (in research terms) to lower cholesterol. Bergamot (more formally “*Citrus bergamia*”) is native to Italy and other Mediterranean countries. Sometime in the next few months, we’ll cover bergamot more completely; for now, we’ll review very briefly research about its effects on cholesterol and blood sugar.

In 2009, Italian researchers published results of analysis the activities of two flavonoids found in bergamot, “brutieridin” and “melitidin” (for the technically inclined “3-hydroxymethylglutaryl flavonoid glycosides”).¹ They reported that these flavonoids had “statin-like principles”. Of course since Nature, *Citrus bergamia*, and “3-hydroxymethylglutaryl flavonoid glycosides” have been around for hundreds of thousands of years, and statin patent medicines for less than fifty years, in my opinion the researchers should have written that “statin patent

medicines have 3-hydroxymethylglutaryl flavonoid glycoside-like principles” or “bergamot-like principles” for short.

In 2010, a different group of Italian researchers wrote that brutieridin and melitidin were “...identified to be structural analogues of statins...”² They wrote that “...a detailed analysis of the geometrical and electronic features affecting the binding of these compounds...to the active site of the enzyme [HMG CoA reductase] and to give better insight into the inhibition process.”

Bergamot lowers blood sugar too

Then in 2011, a third group of Italian researchers reported the effects of bergamot extract in two-hundred thirty seven individuals with high cholesterol, many of whom also had high blood sugar.³ Within thirty days, they had significant reductions in total cholesterol, LDL cholesterol, and triglycerides, along with significant increases in HDL cholesterol. In addition, there were significant blood sugar reductions in those who

had high blood sugar. As in the 2009 and 2010 research, they found that the bergamot extract inhibited HMG CoA reductase, that key enzyme for cholesterol synthesis.

Bergamot has recently been introduced into the natural food supplement market as “Bergamonte” in 250 milligram capsules. Suggested use is two capsules, twice daily. Of course, in our “free” country, *los federales*’ complete suppression of telling the truth (despite the 1st Amendment) about scientific research without “approval”—approval which can cost \$800 million to \$1 billion—you cannot read about these findings on the actual bottle label, which is why this information is here.

Bergamonte can be obtained from a few natural food stores and compounding pharmacies, and from the Tahoma Clinic Dispensary (see “Resources”, page 8). As noted above, sometime within the next few months, *Nutrition & Healing* will contain a more complete discussion of bergamot. **JVW**

that 79.2% of individuals suffering from Parkinson's disease had a moderate to very good degree of improvement while using NADH.⁷

In a study of adrenal cell activity, lithium was reported to increase synthesis of 3 β -HSD type 2. (Obviously the adrenals and testes are entirely different, but the 3 β -HSD enzyme is the same enzyme in both areas so it is worth exploring.)

Lastly (for now) all-trans retinoic acid (ATRA) has been shown to increase 3 β -HSD type 2.⁸ As too much ATRA can become toxic, this one is available only by prescription.

Why testing for 3 β -Adiol alone is not enough

There's little point testing 3 β -Adiol all by itself. As with estrogens, there are "pro" and "anti" carcinogenic testosterone metabolites, and—again as with estrogens—what's important is the balance between pro-carcinogens and anti-carcinogens. Our bodies make 5 α -DHT (often mistakenly called "DHT", but there's a 5 β -DHT also) from testosterone. 5 α -DHT is pro-carcinogenic, so even with the recent research about 3 β -Adiol, when physicians see an elevated 5 α -DHT test (which even testing labs label as just "DHT") they frequently recommend reduc-

ing that man's testosterone dose—even if he didn't feel as well with that lower dose—because of understandable concern about higher cancer risk.

But after testosterone is converted to 5 α -DHT, 5 α -DHT is in turn normally metabolized into a relatively smaller quantity of 5 α -androstane-3 α , 17 β -diol (abbreviated as "3 β -Adiol") and a much larger amount of 5 β -androstane-3 β ,17 β -diol (abbreviated as "3 β -Adiol"). But while nearly all the 3 α -Adiol is converted back to 5 α -DHT, the 3 β -adiol is not. So, in other words, 3 α -Adiol contributes to the *pro-carcinogenic* side, while 3 β -Adiol is an *anti-carcinogen* (for the technically inclined, a re-differentiating agent) that activates estrogen receptor beta, an anti-carcinogenic estrogen receptor present in large numbers in the prostate gland.⁹

So along with measuring the testosterone level itself, it's also important to measure anti-carcinogenic 3 β -Adiol and its "balance" with the two pro-carcinogens, 3 α -Adiol and 5 α -DHT. Certain men should be even *more* concerned about this balance and those include...

1. **Men taking Proscar[®], or Propecia[®] (brand names for "finasteride"), or Avodart[®] ("dutasteride").** *Nearly every man I've seen tested while taking these patent medicines has been found to have low levels of 3 β -Adiol, and greater quantities of 3 α -Adiol and 5 α -DHT. If you're taking any of these patent medicines, it's really best to STOP! Even *los federales* have this posted on their website: "FDA Drug Safety Communication: 5-alpha reductase inhibitors*

(5-ARIs) may increase the risk of a more serious form of prostate cancer."¹⁰ Even after you've stopped these dangerous patent medicines, it's best to test to make sure your balance of pro- and anti-carcinogenic testosterone metabolites have normalized.

Men taking saw palmetto should check their levels of these testosterone metabolites, too. A significant minority of men taking saw palmetto have too little 3 β -Adiol, and need to "back off" to an amount which allows their 3 β -Adiol to rise and re-balance with the "pro-carcinogenic" testosterone metabolites.

2. **Men with a family history of prostate cancer.** In addition to testing for these testosterone metabolites, men with this family history should remember to check for pro- and anti-carcinogenic estrogen metabolites too, as a low "2/16" estrogen ratio has been associated with higher prostate cancer risk.¹¹
3. **Men using testosterone replacement therapy.** For unknown reasons, "replacement" testosterone metabolizes into 5 α -DHT more than internally secreted testosterone. It's best to make sure that if this happens, you have a greater quantity of 3 β -Adiol than 5 α -DHT + 3 α -Adiol, more "anti-carcinogen" than "pro-carcinogens"

How to get the test done

Although the situation will very likely change, at present there is only one laboratory in these United

(continued on next page)

Natural 3 β -Adiol stimulators

- olive oil
- coconut oil
- T3 "active" thyroid hormone
- NADH
- lithium
- Active vitamin A "all-trans retinoic acid"

CLINICAL TIP #155

The two-step “blast from the past” secret to kicking that cold quicker

It's well into the “cold and ‘flu” season already, but if you've been a *Nutrition & Healing* reader for a while, you already know that a combination of whole foods, no sugar and refined carbs, allergy elimination, and nutritional supplementation can *drastically* cut your own risk of seasonal infection. But if you should be unlucky enough to catch a cold anyway, extra amounts of just two supplements—taken with cod liver oil—can help you “chase that cold away” much faster.

Here's the report summary, taken from research reported in 1944:

“112 patients with colds received a cod-liver oil concentrate. The dosage contained 150,000 units of vitamin A and 15,000 units of vitamin D on the first day and one-third of those amounts on the second day. If symptoms remained, two-thirds of the original dose was given on the third day. After the first 24 hours, 30.3% of the patients were symptom-free and an additional 51.8% were almost symptom-free, for a total of 82.1% cured or almost cured. Using this treatment, many patients have avoided colds by stopping them in their prodromal stage. No adverse effects of the treatment were seen.”

Curing or almost curing 82.1% of 112 colds within twenty-four hours with “just” cod-liver oil containing a high dose of vitamins A and D? No vitamin C, no botanicals, nothing else? Does this *really* work? Is it safe? Where has this treatment been

for nearly seventy years? Why didn't my doctor tell me?

It's true: it really works. And dozens of Tahoma clinic clients have confirmed it for me over the years. Many of them add in extra vitamin C and other things they've read about “just to be sure.” Since it's hard to find a cod liver oil preparation with that much vitamin A in a reasonable quantity, most have also adjusted the cod liver oil dose to 15,000 IU of vitamin D, and added enough vitamin A to reach a total of 150,000 IU.

And yes, it's safe. The researchers wrote: “No adverse effects were seen”. Remember the highest amounts were taken for just one day, then...if necessary...one-third the second day, two thirds the third day. And that's all there is to this rapid-acting treatment. (However, please remember that women who have any chance at all of getting pregnant during or immediately after the days needed for this treatment *should not use it*, as high doses of vitamin A may—or may not, but it's best to be cautious—be associated with a higher risk of birth defects.)

Where's this treatment been for almost seventy years? Why didn't your doctor tell you? Unfortunately, it's been buried in the pages of a medical journal (see below), ignored by all but those who believe in preventing and treating illness with natural substances and natural energies first...only using patent (or formerly patent) medicines when absolutely necessary.

Crampton CW. *Vitamin A in the treatment of colds*. NY State J Med 1944;44:162-166.

The hormone helper

(continued from page 5)

be life's plan for humans on planet Earth: a little more marital harmony, and a few more babies!

Oh yes: how much ground flaxseed powder each day? At least one ounce, but two is probably

better. For the technically inclined an ounce is twenty-eight grams, and for the culinary inclined it is a slightly rounded tablespoonful. You can either grind flaxseed yourself, or buy it sealed containers already ground. Both are available

at natural food stores, a few compounding pharmacies, and many on-line sources. If you buy it already ground, avoid large containers so that it won't have as much time to oxidize. *Always make sure it's organic!* JWV

Prostate cancer

(continued from page 6)

States doing the blood test for testosterone, 5 α -DHT, 3 α -Adiol, and 3 β -Adiol. As you might guess, it's Meridian Valley Laboratory, where I am the medical director. Meridian Valley Laboratory was also the first in these United States to introduce the “2/16” estrogen test to

help assess women's breast cancer risk in the early 2000s, once again at my request. Now the “2/16” test is done in many laboratories!

But even though this test is available at just one laboratory at present, like most blood tests, specimens can be mailed in from anywhere in

these United States and some from overseas by both physicians and non-physicians. For further information for you and your physician, and instructions for specimen collection and shipping, go to www.meridianvalleylab.com/testosterone-metabolites. JWV

an uncontrolled trial conducted in 1995, Ginkgo extract protected against radiation-induced DNA damage in Chernobyl workers.¹⁵ More recently, the same dose of extract (120 mg/day) protected against DNA damage caused by radioactive iodine treatment in patients with thyroid disease.¹⁶

There have been many trials of Ginkgo and stroke recovery in China and the *Cochrane Collaboration* published a systematic review and meta-analysis.¹⁷ While the review expressed concerns about the quality of most trials, it did find that Ginkgo was associated with a significant increase in the number of improved patients, based on neurological symptoms. Induction of HO-1 via Nrf2/ARE activation by Ginkgo has been suggested as a significant mechanism for neuroprotection and recovery following cerebral ischemia.^{18,19}

So this new understanding has the potential to provide us with herbs that can benefit health by:

- providing clinically relevant, safe, targeted antioxidant cover
- supporting antiaging/healthy longevity protocols
- supporting the detoxification of ANY toxin: drugs, alcohol,

smoking, heavy metals, etc

- facilitating protection against ANY physical or biological stressor: especially radiation and heat stress
- reducing cancer incidence
- reducing cancer recurrence (but they are not to be used during chemotherapy or radiotherapy, see later)
- reducing neurodegeneration as in macular degeneration, Alzheimer's and Parkinson's diseases, stroke recovery and diabetic neuropathy
- acting as key moderators in any chronic inflammatory disease, such as osteoarthritis and autoimmune diseases
- acting as key preventative and palliative agents in cardiovascular disease, especially for arterial and endothelial damage/dysfunction
- helping to counter the negative metabolic effects of a high-fat and/or high-fried/food diet
- providing protective cover during weight loss
- improving metabolism in diabetes and metabolic syndrome
- supporting the lungs in any chronic lung disease

Why wouldn't you take these herbs every day? In fact, many of

us do, either in our diets as supplements. I certainly do.

The 48-hour rule

There is just one cautionary note, Nrf2 and its downstream genes are over-expressed in many experimental cancer cell lines and human cancers, giving cancer cells an advantage for survival and growth. Also Nrf2 is upregulated in cancer cells resistant to chemotherapy and is thought to be responsible for acquired chemo-resistance. Therefore it may prove advantageous to inhibit the Nrf2/ARE pathway during chemotherapy.²⁰ There are still many questions to be answered. However, caution dictates that any known Nrf2/ARE upregulating herbs should not be taken at least 48 hours either side of each chemotherapy or radiotherapy treatment, so the cancer killing effects of these treatments is not interfered with.

As a final reminder, the key herbs/phytochemicals identified by current research that are most active at priming the Nrf2/ARE pathway are: broccoli sprouts/sulforaphane and garlic, turmeric/curcumin, rosemary and green tea/EGCG, and resveratrol and Ginkgo. **KB**

ALTERNATIVE HEALTH RESOURCES

American College for Advancement in Medicine (ACAM)

Phone: (888)439-6891

www.acamnet.org

American Academy of Environmental Medicine (AAEM)

Phone: (316)684-5500

www.aem.com

Tahoma Dispensary

for supplement orders only

Phone: (425)264-0051; (888)893-6878

www.tahomadispensary.com

Tahoma Clinic

for appointments only

Phone: (425)264-0059

www.tahomaclinic.com

American Association of Naturopathic Physicians

Phone: (866)538-2267

www.naturopathic.org

Meridian Valley Laboratory

Phone: (855)405-8378

www.meridianvalleylab.com

International College Integrative Medicine

Phone: (419)358-0273

www.icimed.com

Nutrition & Healing online

www.WrightNewsletter.com

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