

# Alternatives

FOR THE HEALTH CONSCIOUS INDIVIDUAL

September 2000

Volume 8, No.15



Dr. David G. Williams

## Don't Be Indolent About Getting Your Indoles

(Or, As Your Mom Would Say, Eat Your Broccoli)

Exactly ten years ago this month, the lead article in *ALTERNATIVES* reported that you could reduce your risk of getting various cancers by including cruciferous vegetables in your diet. At that time, all the research I had uncovered focused on the prevention of cancer with these vegetables, not the treatment of existing cancer.

I'm now happy to report that, ten years later, researchers at the Louisiana State University Medical Center have remedied this situation. They found that a natural extraction of indole-3-carbinol (I-3-C) from these vegetables can reverse and possibly cure the most common form of cervical cancer. This latest report, authored by Dr. Maria Bell, is nothing short of a major breakthrough in the treatment of cervical cancer.

I-3-C is a compound found naturally in cruciferous vegetables like cabbage, broccoli, bok choy, Brussels sprouts, cauliflower, cress, kale, mustard, radish, horseradish, turnip, rutabaga, and kohlrabi. When these cruciferous vegetables are crushed, chewed, or exposed to an acid environment, like that of the stomach, I-3-C is changed into another indole called Diindolylmethane (DIM). We now know that DIM has the unique ability to modify the metabolism of estrogen. This capability led Dr. Bell and her colleagues to focus on the extracts of these vegetables for the treatment of estrogen-mediated cervical cancer.

Thirty women with stage II and stage III cervical cancer were involved in the study, which lasted only 12 weeks. Ten women took a placebo,

ten took 200 mg of I-3-C daily, and ten took 400 mg of I-3-C daily.

After 12 weeks, none of the women taking the placebo showed any regression of their cancer. Of those taking 200 mg of I-3-C daily, four women had complete remission. Four women taking 400 mg also experienced complete remission. At the conclusion of the study, all patients were given pap smears, a colposcopy, and a biopsy to verify these findings. (*Gynecol Oncol* 00;78(2):123-129)

### A Not-So-Dim Future For Cancer Sufferers

Dr. Bell reports that additional research is planned, but instead of using I-3-C, her group of researchers will be using DIM. DIM appears to have several advantages over the I-3-C.



### In This Issue

Don't Be Indolent About Getting Your Indoles. ....	113
The Pepsi Generation Is Old Before Its Time .....	115
News to Use from Around the World ....	117
Health Hints from Readers .....	119
Mailbox .....	119

*You will observe with concern how long a useful truth may be known and exist, before it is generally received and practiced on.*

—Benjamin Franklin

First of all, I-3-C is inactive until it is transformed by stomach acid into DIM. As I've mentioned in earlier issues, we tend to produce less acid in our stomachs as we get older, which makes foods more difficult to digest and probably inhibits the conversion of I-3-C to DIM. Also, I-3-C is very unstable. Some reports have cited reduced effectiveness over time because of the compound's short shelf life. Using pure DIM overcomes these problems. DIM needs no conversion in the stomach and is very stable. It also appears to be effective at lower doses than I-3-C.

Since these compounds are natural components of vegetables, they have the added benefit of being non-toxic. And best of all, they are currently available as nutritional supplements.

### A Bone of Contention

The only concern that has arisen with I-3-C and DIM is the possibility that, if taken for long periods of time, they might decrease bone density. A couple of individuals who have been taking high doses of I-3-C continuously for 4 to 6 years to help control an incurable disease called Recurrent Respiratory Papillomatosis (RRP) have reported lower bone density test scores.

Whether the estrogen-altering effect of I-3-C is responsible for the bone loss has not yet been determined. But if I had to choose between getting rid of cancer and the possibility of bone density loss, I could live with the bone loss (though I would be sure to employ several of the techniques I discussed in the July 1998 issue of *ALTERNATIVES* to help prevent bone loss). Just for the record, I should also mention that the quantity of these indoles you get from eating cruciferous vegetables is far less than is in the extract, so there shouldn't be any concern about overconsumption of the vegetables. Also, I suspect that it would take several months of high dosage I-3-C or DIM usage before bone loss could occur, if it even does.

### Hope for Other Cancers, Too

Cervical cancer isn't the only form of cancer that might be treated by these indoles. Dr. Bell's research opens up a whole new phase in the natural treatment of estrogen-mediated cancers.

DIM is not a plant estrogen, or phytoestrogen. Instead of mimicking estrogen like a phytoestrogen, DIM has instead been shown to exhibit these three specific mechanisms that can help reduce cancer:

1. Reduction of the activity of estrogen receptors in

the body. (*Carcinogenesis* 98;19:1631-1639)

2. Promotion of "selective cell death" which helps in the body's removal of malformed and/or damaged cells. (*Anti-Cancer Drugs* 98;9:141-148)
3. Promotion of the beneficial metabolism of estrogen in the body. (*Pro Soc Experi Bio Med* 97;216:246-252)

By making sure that estrogen in the body is broken down into only its beneficial components, DIM can help prevent the growth of cancers that feed off the harmful by-products of estrogen. I suspect that future studies will show that, in addition to cervical cancer, DIM is useful in treating breast cancer in both men and women, prostate cancer, uterine cancer, and lupus erythematosus. All of these cancers have been linked to higher estrogen levels. DIM might also be helpful in mitigating the increased cancer risk associated with female hormone replacement therapy, increased alcohol consumption, and the use of DHEA.

It may take several years before we understand the full benefits of DIM. However, certain other benefits are already known. For instance, we know that the indoles from simply eating cabbage once a week can dramatically lower the risk of esophagus, lung, bladder, colon, and rectal cancer. (*Am J Epidemiology* 79;190(1):1-20) (*Cancer Res Suppl* 83;43:2488s-2453s)

The rational extension of past research would suggest that a form of cancer brought into remission using DIM would be prevented from recurring by a diet high in cruciferous vegetables. If you have a family history of one of the cancers mentioned earlier, I would highly recommend including cruciferous vegetables in your diet at least three or four times weekly. And if you have one of these cancers, DIM certainly appears to be a strong natural treatment option.

### Still Saved By the Cross

While exact dosages of DIM can vary slightly from one individual to another, therapeutic daily doses generally range from about 5 mg to 8 mg per kilogram of body weight. For someone weighing 150 lbs, the daily therapeutic dosage would normally be between 340 mg and 540 mg. (Divide 150 lbs by the 2.2 lbs/kg conversion factor to get the number of kilograms [68.18], and then multiply that number by 5 and by 8 to get the total daily dosage range [68.18 x 5 = 340 mg and 68.18 x 8 = 545 mg].)

DIM is available under the name Phytosorb-

DIM in either 75 mg or 150 mg capsules from the company BioResponse. For pricing and ordering information, BioResponse can be reached by phone at 303-447-3841. This company has done much of the cancer research with DIM to date. Please keep in mind that this a small company so please be patient while placing your order. Another source that sells the Tyler Encapsulation DIM product, Indolplex, at a 20 percent discount is N.E.E.D.S. at phone number 800-634-1380. Neither of these companies will be able to give treatment information over the phone, so please be aware of that when you call.

My article ten years ago was titled "Saved By The Cross." That title referred to the fact that this class of vegetables is called cruciferous because their flowers resemble a cross or crucifix. Based on this latest research, it appears that that reference is even more accurate than I first thought.

## The Pepsi Generation Is Old Before Its Time

In the January 1997 issue of *ALTERNATIVES*, I warned that the increased consumption of soft drinks was contributing to osteoporosis and bone fractures. At the time, I was flooded with letters claiming that I was over-reacting and "making a mountain out of a mole-hill." More and more research however, continues to support this connection.

In a study involving 460 ninth- and tenth-grade girls, researchers found that the girls who drank colas were three to five times more likely to experience bone fractures than the girls who didn't drink colas. (*Arch Pediatr Adolesc Med* 00; 154(6):610-3)

While the above study didn't attempt to explain exactly how soft drinks contributed to bone loss and softening, I still suspect that the high levels of phosphoric acid in the sodas are part of the problem. Phosphoric acid alters calcium metabolism and, in effect, causes bone loss.

### Kids Really Are Growing Up too Soon

This study also confirms that osteoporosis, like many of the so-called adult diseases, is beginning to show up earlier and earlier in life. For those of you who are new, here are just a few of these diseases I've discussed in past issues of *ALTERNATIVES*.

Last month, I reported that "adult onset"

diabetes is now occurring in children as young as four years old. And several months ago, I reported that clogging of the arteries, or atherosclerosis, is now routinely occurring in teenagers.

In the December 1997 issue of *ALTERNATIVES*, I wrote that young girls are reaching puberty at an earlier and earlier age. Much of the problem is due to hormone-mimicking compounds found in our food and water supplies, as well as increased obesity from higher sugar intakes. The protein leptin is contained in fat cells and is thought to be one of the primary components that triggers the start of puberty.

The trend toward earlier puberty, by the way, has continued to worsen. It is estimated that 7 percent of white girls and 25 percent of African-American girls begin to develop breasts before the age of eight. Normal puberty now occurs at age seven for white girls and age six for black girls. (*Pediatrics* 99;104 (4pt.1):936-41)

Obviously, young girls in the 2nd and 3rd grades are generally not prepared to begin handling the mood swings, periods, and breast development associated with puberty. In an effort to delay these changes, doctors are now routinely prescribing monthly shots of the hormone-suppressing drug Lupron, at an annual cost of between \$5,000 and \$10,000.

The writing is on the wall. The changes that have taken place in our diet over the last several decades are aging us prematurely. The children in this country are



### ALTERNATIVES™

ISSN# 0893-5025. Published monthly for \$69/yr by Mountain Home Publishing at 1201 Seven Locks Rd., Potomac, MD 20854. Editorial Office: P.O. Box 829, Ingram, TX 78025. Periodicals postage paid at Rockville, MD and at additional mailing offices. POSTMASTER: Send address changes to Alternatives, 1201 Seven Locks Rd., Potomac, MD 20854. Copyright © 2000 All rights reserved. Photocopying or reproduction is strictly prohibited without permission from the publisher.

Author: Dr. David Williams

Publisher: Erica Bullard

Editor: Robert Kroening

The approaches described in this newsletter are not offered as cures, prescriptions, diagnoses, or a means of diagnoses to different conditions. The author and publisher assume no responsibility in the correct or incorrect use of this information, and no attempt should be made to use any of this information as a form of treatment without the approval and guidance of your doctor. Dr. Williams works closely with Mountain Home Nutritionals, the supplement service that manufactures his unique formulations and supplies many of the hard-to-find nutrients he recommends. The compensation he receives allows him to continue devoting his life to worldwide research and the development of innovative, effective health solutions.



unwitting subjects of an ongoing experiment that no one seems to be watching.

### Five Steps to Healthier Living

With so much interest now being placed on life extension and longevity, it seems utterly amazing that we haven't grasped the concept that we're going to have to make dramatic changes to our current diet and lifestyle if we want to increase our lifespan. While the space in this issue is far too limited to cover the topic of life extension, there are several steps we should all be taking to increase not only our quantity of years, but the quality of those years as well.

**1. Increase the amount of unrefined foods in your diet.** Particularly try to eliminate or at least minimize sugar and refined carbohydrates.

Canned, frozen, and processed meats, vegetables, and fruits all have significantly fewer vitamins, trace minerals, and enzymes than their raw counterparts. (*Am J Clin Nutr* 71;24: 562-573)

Avoid fried foods and limit oil consumption to flax and cold pressed virgin olive oil.

The primary exception to these rules pertains to fermented foods. The natural fermentation process in foods like tofu, yogurt, buttermilk, cottage cheese, sauerkraut, etc. helps provide a wide range of beneficial enzymes, bacteria, and other compounds.

**2. Make sure your water supply is as clean and pure as possible.** I have always recommended distilled water, and I urge you to consider this option.

**3. Take steps to compensate for the decline in your metabolic rate that comes with aging.**

One inevitable consequence of aging is the reduction in our basal metabolic rate (BMR). Our BMR is the rate at which the resting body consumes energy.

Beginning at roughly age 30, our BMR decreases around two percent every ten years. Unfortunately, our nutritional needs continue to be about the same. So basically we continue to eat the same amount of nutrients, but since our activity level and BMR decline, we begin to experience problems with weight gain and obesity. There are two simple techniques that can help you cope with this imbalance.

First, make sure your thyroid is functioning properly. Hypothyroidism is one of the most underdiagnosed conditions in this country.

Not only will hypothyroidism cause unnecessary weight gain and lack of energy, it can also cause a long list of other symptoms, including hypertension, cold hands and feet, hair loss, dry skin, female problems, and headaches.

The simplest method of checking your BMR is to check the temperature under your armpit before you get out of bed in the morning. For more details on this procedure and on natural ways to treat hypothyroidism, see the November 1999 issue of *ALTERNATIVES*.

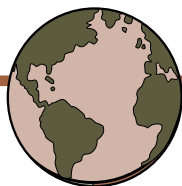
Exercise is the other factor needed to compensate for the age-related decline in your BMR. Any exercise helps, but the best results will be obtained when some form of resistance exercise, like weight lifting, is included. Exercise builds lean muscle, which is more metabolically active than the fat tissue it replaces, so you constantly burn more calories throughout the day and not just during the period of exercise.

**4. Take a good multi-vitamin/mineral complex.** The best ones provide the vitamins, minerals, and herbs that help prevent the most common health problems. It has always been my philosophy that a daily supplement should not only provide the necessary daily requirements of nutrients, but also help prevent problems like heart disease, cancer, osteoporosis, macular degeneration, memory and brain deterioration, arthritis, etc.

**5. Keep a good, positive attitude about life.** As simple as it may sound, your outlook on life might be the most important aspect of improving both the quality and length of your life.

### Guinea Pig Nation

Although few people realize it, we are currently in the midst of one of history's largest experiments on mankind. Our diets and environment are changing at a pace never seen before in history. Technology is now considered the solution to all of our problems, and the means of obtaining longevity. Strangely, our reliance on technology to solve our health problems has caused us to lose focus on many of the most basic tenants of good health. As a consequence, our children are now aging prematurely and they're exhibiting diseases that, until just recently, were found only in older populations. Regardless of how old you are, it stands to reason that these dietary habits and environmental changes will prematurely age you, too, if you don't take the necessary steps to correct them.



## News to Use from Around the World

### The Price Children Pay For Antibiotics

#### KNOXVILLE, TENNESSEE—

The number of children diagnosed with a problem called pyloric stenosis seems to have been increasing over the last couple of decades. The problem involves an overgrowth of muscle tissue at the pyloric valve where the stomach empties into the small intestine. An obstruction here can cause forceful projectile vomiting after eating, resulting in dehydration and failure to gain weight. Unfortunately, the only viable solution seems to be surgery.

I have a nephew who suffered from this condition and had problems eating, holding his food down, and gaining weight. The problem persisted for years until it was finally diagnosed and corrected with surgery. Until recently, the medical community generally considered pyloric stenosis to be a malformation that people were born with, which couldn't be prevented. Some new research, however, sheds a completely different light on the subject.

Recently, about 200 infants came into contact with a hospital worker infected with pertussis. As a means of prevention, the infants were given the antibiotic erythromycin. Seven of the infants (roughly 3.5 percent) later developed infantile hypertrophic pyloric stenosis (IHPS). In a similar group of infants not given the antibiotic, no cases of IHPS occurred. (*JAMA* 00;283(4):471-2)

It now appears that erythromycin somehow increases the risk of developing pyloric stenosis. I

have also learned that my nephew was given antibiotics routinely for recurrent ear infections in his early childhood.

It never ceases to amaze me how the medical profession and the public in general have been led to believe that antibiotics and dozens of other drugs are harmless. And this blind acceptance is increasing as more and more formerly prescription-only drugs are being sold over-the-counter. I can't understand how any drug deemed dangerous enough to require a physician's prescription can suddenly become safe for over-the-counter sale once its patent expires.

I guess there are two lessons we can learn from the pyloric stenosis episode. First, hospitals are dangerous places to be. Second, we shouldn't make the assumption that, just because a drug is widely prescribed and has been used for years, it is harmless.

### Put a Papaya in Your First Aid Kit

#### BANJUL, GAMBIA, AFRICA—

Doctors in the pediatric burn center at the Royal Victoria Hospital here have informed me that the pulp from the papaya fruit makes an excellent burn dressing.

Due to their very limited budget and resources, the doctors have been using papaya because it is both cheap and abundant in the area. The pulp of the papaya is mashed and applied directly to the burn. The children tolerate it well, and it has proven to be very effective at sloughing off dead tissue, preventing infections, and

providing a clean wound for later skin grafts, if necessary.

Papaya pulp contains the proteolytic enzymes papain and chymopapain, and has been used for centuries to remove warts and other skin imperfections. Apparently the pulp has components that exhibit antimicrobial activity, since these doctors are also applying the pulp to infected wounds with successful results.

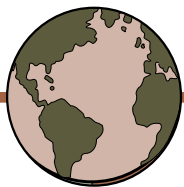
When I was traveling extensively in Central America, a common treatment for intestinal parasites was to grind a small handful of papaya seeds into a powder or simply chew and swallow them. It seemed to work quite well. And knowing that papaya can be used as an effective dressing for serious, infected burns is another precious tidbit to keep in mind.

### A Proper Use for Coke Bottles

**KENYA, AFRICA—**An ingenious technique has proven effective at reducing fly populations in Africa's Rift Valley.

As you know, I'm a firm believer that vision is one of our most precious senses. As such, I am constantly on the lookout for ways to improve eyesight and prevent unnecessary blindness. I've written numerous times on ways to help prevent and treat macular degeneration, the world's leading cause of blindness in the elderly. Now I've learned that there is a simple, inexpensive way to help reduce trachoma, the world's second leading cause of blindness.

Although trachoma isn't a problem in this country, anything



## News to Use continued...

we can do to spread the word about its prevention will help. If you have relatives or friends living in areas where trachoma is a problem, please feel free to pass along the following discovery. As you'll see, it may also have practical applications for use around your home or business.

It is estimated that over 14 million people worldwide suffer from trachoma. Trachoma is a bacterial infection that is primarily spread by flies. It starts as an inflammation of the eye, which produces irritating mucus secretions. Repeated infections cause the upper eyelid to tighten and begin to curl under, which, in turn, allows the eyelashes to rub against the cornea and create scar tissue. As the scar tissue increases, it turns white and eventually results in the complete loss of sight.

Normally, trachoma is treated with antibiotics and/or surgery. However, as you might suspect, millions of cases go undetected until too late. Another option for dealing with the problem is to reduce fly populations, which until now hasn't been very economical. The cost of pesticides in most third-world countries can exceed the cost of food and other necessities.

### A Better Fly Trap

Dr. David Morley of London has devised a unique flytrap, however, that is practically free and can be used safely by anyone. It's something you can even use around your own home.

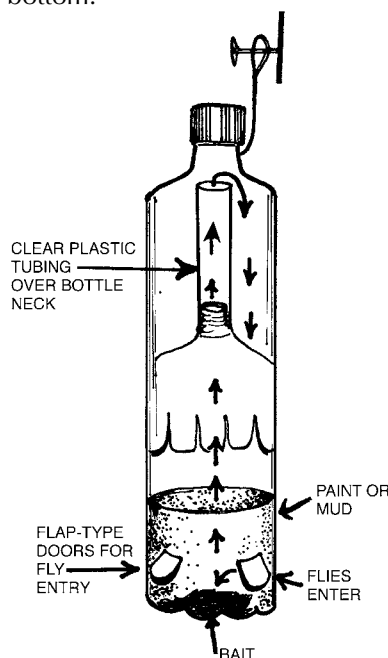
In many homes in Africa's Rift Valley the fly count in a typical home can be as high as 32,000 flies. (I seriously doubt that any

*ALTERNATIVES* reader in the U.S. has such a problem, but this simple fly trap will still be useful on the patio in the suburbs or all around the property if you reside on a ranch or farm where livestock is being raised. This device will be particularly helpful in my Australian rainforest bungalow and around the many racehorse facilities in that country.) Using the following device, the fly population in these homes has been reduced as much as 40 percent and the incidence of trachoma reduced by 36 percent. I'm certain that the reduction will be even greater over time.

The device consists of two clear, plastic soda or water bottles. Here's how you make it.

1. Cut the base of the top bottle off and then cut small slits up the sides about an inch or two.

2. The second bottle is the "bait" bottle. Cut small "flap-type" doors a few inches from the bottom.



3. Place a clear plastic tube either over the mouth or just inside the mouth of the bottle.

4. Paint the lower half of the bottle a dark color. (In Africa, the lower half of the bottle was covered with mud and allowed to dry.)

5. Place a small amount of fly bait in the bottom of the second bottle. In Africa, the bait consists of a mixture of goat droppings and cow urine. I'll leave the choice of bait up to your own imagination.

6. Slide the bait bottle up into the top bottle and hang the top bottle from a string. To empty the catch, simply pull the two bottles apart.

### It Couldn't Happen to a Nicer Fly

In designing this flytrap, Dr. Morley took advantage of the fact that, after feeding, flies fly upward towards light. In doing so, they fly upwards through the tube and become trapped in the second bottle. After that, it isn't long before they die from heat, exhaustion, or exposure to the UV light.

The trap has proved to be such a success in Africa that many teachers are now having children make them as school projects.

If you see a similar device begin to show up around the country or on the shelves of your local WalMart, it will probably be the work of some enterprising *ALTERNATIVES* reader. With this diagram, however, you can save your money and make dozens of the devices for practically nothing.

# HEALTH HINTS FROM READERS



## Instead of the Hair of the Bug That Bit You, Try DMSO

Thought you would like to know that I tried your latest info about using DMSO for a Brown Recluse spider bite. However, I used the DMSO on a yellow jacket sting instead. The results were truly incredible. He hit me in the little finger of my right hand when I tried to knock his nest off my front porch.

It felt like I had been stabbed with a red-hot needle. I ran upstairs and rubbed in the DMSO within just minutes after the sting. The pain started to subside immediately. Within less than 30 minutes, all the pain was gone and there was not even a red mark left to tell where he had hit me.

--James W.

Email message.

### Additional Comments from

**Dr. Williams:** While I'm glad to hear about this successful use of

*DMSO, I do want to sound a small note of caution. Although it can reduce inflammation, there's always the possibility that DMSO could also spread the toxin. Because of this possibility, I was initially somewhat surprised that DMSO is being used successfully for insect bites. According to the letters I've been receiving, however, it does help. I haven't actually used DMSO for Brown Recluse spider bites, but just wanted to pass along some helpful research from a doctor using it for that purpose. In the same vein, I'm passing along this reader's experience in the hope that it will be helpful.*

## A Treatment That's Simply Shocking

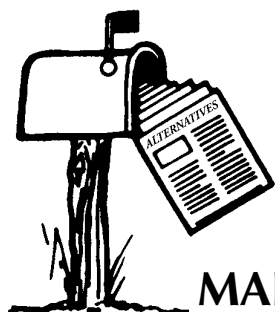
Your latest newsletter discusses a treatment for a Brown Recluse spider bite. Another inexpensive and effective treatment that I have used very successfully on several patients is an electric current.

Several years ago, *Field and Stream* magazine had an article discussing emergency in-the-field therapy for poisonous snake bites. It suggested using electricity from a nearby source, such as an electric fence or a spark plug wire. Since then, I have heard of people using less potent sources, such as a TENS unit. I have an electric stimulator that is run by those little 9-volt batteries, which works just fine.

To treat, just use the source on one side of the bite and the ground on the other. I shock across the bite in several directions, making a circle around the area while keeping the center of the bite as the focal point. My instrument has two poles, which work well for this purpose.

Please pass this along and spread the word. I would like someone to do an official study to give more credibility to the treatment.

--Bernie C., D.C.  
Woodbury, Tennessee



## MAILBOX

## The Fine Art of Chewing Nicotine Gum Correctly

**Question:** "I've tried dozens of ways to quit smoking, and the only thing that seems to work for me is nicotine chewing gum. It's allowed me to stop smoking, but I

can't seem to stop using the gum. I know chewing the gum is better than smoking, but it's just about as expensive, and I'd rather not be dependent on anything. What are your thoughts on using the gum?"

--Larry S.

Abita Springs, Louisiana

**Answer:** I agree that the gum is far less of a problem than smoking. Keep in mind, however, that nicotine is the addictive ingredient in cigarettes, which explains the problem many people have when it comes to stopping their use of nicotine gum. The problem is complicated by the fact that most people don't use the gum properly.

Most people chew it like ordinary gum, but it's not designed to be used that way. The gum should be bitten down on and chewed once or twice and then "parked" for a minute or so between the cheek and gum before chewing it a couple more times. This way, only a small amount of nicotine is released instead of the large surge that occurs when the gum is chewed like regular gum. When a large surge of nicotine is released, one of two things usually happens. Either you experience a "sickly" feeling and quit using the gum altogether, or your body adapts to the nicotine rush and develops a craving for that strong surge of the drug.

So, if you decide to use the gum,



which I think can be a tremendous help, use it properly so you at least reduce your chances of becoming addicted to it.

## **LASIK Surgery and Night Blindness**

**Question:** "I'm near-sighted and tired of wearing glasses. I would like to undergo laser surgery to correct my vision, but I'm not sure if I should. I've spoken with an ophthalmologist who performs the procedure, and he has assured me that it is safe and generally very effective without any harmful side effects. The only possible problem is there may be some temporary halo and starburst effects around lights at night. He's says it's fairly rare, however, and most people can adjust to the problem pretty quickly. What's your opinion?"

—Vicki M.  
Denver, Colorado

**Answer:** I have a keen interest in visual correction since I am somewhat near-sighted myself. Over the last couple of months, I have been taking supplements specifically formulated for the eyes and using microstimulation (see the March 2000 issue of *ALTERNATIVES* for more information on this technique) to improve circulation to the area. I have noticed a significant improvement, but I think more time is needed to see the full effects.

I have kept watch on the eye surgeries and LASIK surgery has certainly become popular. Many people seemed to be pleased with the results. But before you trust your vision to anyone, bear in mind that there are risks involved. In addition to the small risk of infection or a worsening in vision, the night vision problems you mentioned are fairly common and are potentially even worse than you were told.

### **See No Evil**

Most ophthalmologists haven't followed the progress of their surgical patients for any length of time after surgery. However, one Canadian surgeon, Dr. William Jory of Toronto, recently did follow-up examinations of his patients two to seven years after surgery. He discovered that 58 percent of them had failed the contrast sensitivity test for night driving.

Another night vision study, undertaken by the U.K. Transportation Research Laboratory, tested individuals that had undergone laser surgery. The study found that 80 percent of these people couldn't see a traffic sign at 55 meters, and 40 percent couldn't see the sign at 15 meters (roughly four car lengths).

The problem appears to be that the laser's energy disrupts small sensitive fibers in the eye, which reduces one's ability to see at night. The damage is apparently permanent

and irreversible, and cannot be corrected with glasses.

Strangely, most people are unaware that their night vision is impaired by LASIK surgery. However, even those that are aware of it appear to be happy with the surgery, since their daytime vision has improved.

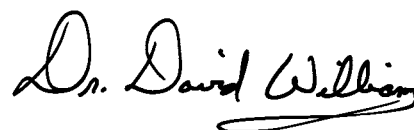
### **Unless You Have Sonar, Think Twice About LASIK**

While there were over 800,000 LASIKs performed in 1999, and another 1,200,000 will be performed this year, several ophthalmologists I spoke with feel that laser surgery will be a thing of the past 10 years from now. As more studies begin to focus on the procedure's permanent damage to night vision, implants or other forms of correction will become the preferred treatment.

Personally, I would be hesitant to risk my vision when there's even the slightest chance of permanent damage.

I'll keep you informed, as any new or refined procedures become available.

Take Care,



---

## **We Hope to Hear From You!**

Dr. Williams greatly appreciates hearing from you, and gears his research to the concerns you express to him in your letters. Of course, practical and ethical constraints prevent him from answering personal medical questions by mail or email, but he'll answer as many as he can in the Mailbox section of *Alternatives*. For our part, we'll do our best to direct you to his issues, reports, and products related to the subject of your interest.

Here's how you can reach us:

- To send in Mailbox questions or Health Hints, write to P.O. Box 829, Ingram, TX 78025 or [mailbox@drdavidwilliams.com](mailto:mailbox@drdavidwilliams.com)
- For Customer Service matters such as address changes, call 800-527-3044 or write to [custsvc@drdavidwilliams.com](mailto:custsvc@drdavidwilliams.com)
- To get important information between issues, sign up for email dispatches at [www.drdavidwilliams.com](http://www.drdavidwilliams.com)
- To order nutritional supplements from Mountain Home Nutritionals, call 800-888-1415 or visit [www.drdavidwilliams.com](http://www.drdavidwilliams.com)
- To order back issues or reports, call 800-718-8293
- To sign a friend up for *Alternatives*, call 800-219-8591

Let us hear from you soon! —The *Alternatives* Customer Service Team