Alternatives
FOR THE HEALTH-CONSCIOUS INDIVIDUAL

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Dr. David G. Williams

Healing Stems from the Umbilical Cord

A couple of years ago, I wrote about what I predicted would become one of the most precious gifts you could give to a child. Specifically, I discussed the procedures for storing the blood from a newborn baby's umbilical cord. Cord blood, as you might recall, contains very special cells called "stem cells."

If you're not yet familiar with stem cells, I'm sure you soon will be. They have recently become one of the most exciting and controversial areas of research in the health field, holding promise for the successful treatment of many diseases, cancers, and immune disorders. In fact, some medical researchers now predict that within 10 to 20 years stem cell research will enable us to grow an unlimited supply of any type of replacement body tissue or organ. The method of research being used to get us to that point, however, has created a great deal of controversy. Perhaps a bit of background is in order.

The Cells Behind Blood, Sweat, and Tears

When life begins we have a number of embryonic stem cells. These special cells have the capacity to become any type of tissue the body needs. Depending on how they are stimulated or controlled, they can just as easily form the lens of your eye as your liver. Because of this amazing versatility and its applications, being able to isolate and grow these embryonic stem cells has always been considered virtually the "holy grail" of science.

In the early 1900s, and continuing to this day, clinics in both the U.S. and Europe have offered injections of animal fetal cells, also known as "fetal cell therapy." The hope was that these young fetal cells would rejuvenate aging organs and tissues and slow the aging process. The therapy was popular among many movie stars and the very rich. Winston Churchill was just one of many who underwent fetal cell therapy.

While the theory behind the treatment seemed to have merit, the procedure was extremely crude and mostly ineffective. Today's technology, however, is quickly making stem cell therapy a treatment with promise, which most of us might benefit from in just a few short years.

A New Definition of Versatility

Scientists have found a way to extract stem cells and grow them outside the body in a nutrient-filled medium. (By the way, they are called stem cells because all 210 different types of cells within your body develop, or "stem," from these special cells.) By putting

In This Issue

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*

different nutrients in the "broth" used to nourish these cells, scientists have been able to coax stem cells to develop into dozens of different types of tissue.

In animal experiments, researchers have grown heart-muscle tissue from stem cells and injected this growing tissue into damaged heart muscle. The tissue later replaced and strengthened the existing heart muscle. In similar experiments, stem cells have been transformed and used to grow new blood vessels, joint cartilage, and even nerves. Scientists around the world are reporting that stem cells are also being converted into pancreatic cells (which can make insulin), liver cells, brain tissue, and practically every other tissue present in the human body. Before the use of this tissue becomes commonplace, however, there are several hurdles that must be overcome.

Good Science Requires a Good Source of Stem-cells

One of the major hurdles isn't a technical problem, but a moral one. I guess that you could say there are two types of stem cells: embryonic and adult. Embryonic stem cells exist only in the embryonic stage of human development. To date, most of the work involving stem cells has been possible only through the harvesting of stem cells from aborted fetuses, which obviously raises certain moral issues.

Some researchers are working to sidestep the moral issue by attempting to clone stem cells from adult tissue. However, adult stem cells have been hard to isolate and, as you might expect, it's tricky to remove brain tissue from living adults for experimental purposes. Besides this difficulty, stem cells are more abundant in embryonic tissue and embryonic stem cells possess two distinguishing characteristics. First, unlike adult stem cells, embryonic stem cells might be immortal. If they are kept in an immature state, they will continue to divide forever. Second, embryonic cells can be transformed into any type of tissue. Adult stem cells are limited in the types of tissue they can form. Stem cells from the bone marrow, for example, might be coaxed into becoming blood vessels, bone, or nervous tissue, but not much beyond that.

Another problem with stem cell tissue is that of rejection. Researchers are encountering the same rejection problems with stem cell-generated tissues as have been encountered with organ transplants. This problem necessitates finding compatible tissue types or using immunosuppressive drugs.

Despite the hurdles and moral controversy, stem cell research is continuing at an unbelievable pace. For most of us, there's not much we can do at this point except sit and wait. Any possible benefits we receive as adults are a few years away, at best. If you have a child or grandchild on the way, however, a unique opportunity currently exists.

An End-Run Around Stem-cell Source Problems

With a few simple steps, you can avoid all these hurdles and insure the future health of your children or grandchildren. There's a unique and safe way of providing each child a future supply of his or her own stem cells. This is done by storing a newborn child's umbilical cord blood, which is rich in stem cells. There is only one opportunity to collect and store this cord blood, and that's at the time of the child's birth. I guess you could call it a form of "biological insurance."

Stem cells from cord blood are totally compatible not only with the child, but often with siblings and family members as well. In just the last few years, these stem cell transplants have been used successfully to save the lives of hundreds of children who have later developed genetic or immune disorders and certain cancers, such as leukemia. Over 30 diseases are currently being treated with cord blood transplants. I have little doubt that, as the research progresses, the banking of cord blood will become more and more routine.

Banking cord blood also sidesteps the moral issue of using fetal tissue and the problems associated with tissue rejection and immunosuppressive drug use. If the current research is any indication, having a supply of one's own stem cells could turn out to be the future cure for dozens of health problems, including cancer, heart disease, diabetes, Parkinson's disease, and others. It could also form the basis of regenerating aged organs and tissue.

If you have the opportunity to bank an upcoming child's cord blood, I urge you to do so. The company Viacord offers a complete program that makes the whole procedure very simple. They provide all the collection material, educate the hospital staff and doctors, and arrange for pickup and storage of the cord blood. It's hassle-free and doesn't interfere with the birthing process.

The initial cost is about $1,500. After the first year, the storage fee is less than $100 a year and is guaranteed not to increase for eighteen years. At these prices, storing cord blood could turn out to the one of the least expensive forms of health insurance you can get. And it might end up saving the life of the child, his or her sibling, or even the parent. I don't know how you put a price on that. In the next 10 to 15 years, we might all wish we had a private stockpile of stem cells.

For more information and details you can reach ViaCord at 800-998-4226 or www.viacord.com.

When the Roto-Rooter Isn't Enough, Try Glycine

One of the more commonly diagnosed circulatory problems I hear about these days is a blockage in one or both of the carotid arteries. These are the large blood vessels that run along the outside of the neck and provide much of the blood supply to the brain. The problem is often discovered when a person begins to complain of headaches, dizziness, or even short episodes of memory loss or confusion. The blockage location is normally determined through a CAT scan, which is often followed by surgical intervention. The procedure has become so popular that it has been given a nickname—"roto-rooter" of the carotid arteries.

A blockage of blood flow through these crucial arteries also happens to be one of the primary causes of stroke. Depriving the brain of this oxygen-rich blood almost always results in brain damage and some degree of disability. In as many as 14 percent of cases, it can also result in death.

A New Way to Limit Stroke Damage

I've written about stroke several times in the past, and outlined ways to help prevent such problems. New research has shed light, not on preventive measures, but on a simple, safe technique that can help prevent death after a stroke has occurred. The technique was recently discovered and reported on by doctors working in the Department of Neurology and Neurosurgery at the Russian State Medical University in Moscow.

The study involved 200 people who had suffered a stroke. Within six hours of the stroke, each person was given either a placebo or an oral dose of the amino acid glycine. The protection afforded by the glycine was remarkable, considering the seriousness of the problem.

Fifty of the patients were given a placebo, 49 were given 500 milligrams of glycine a day, 51 were given glycine at 1,000 milligrams a day and 50 were given glycine at 2,000 milligrams a day. The placebo and amino acid were given for only five days following the stroke.

During the following 30 days, 14 percent of the individuals on the placebo died. The mortality rate was about the same for those given only 500 milligrams of glycine. However, those given 1.0 to 2.0 grams (1,000 to 2,000 milligrams a day) faired much better. The mortality rate was 5.9 percent among those given 1.0 grams a day and 10 percent in the 2.0 gram-per-day group.

It was also noted that, during the 30-day observation period, those given bet-ween 1.0 and 2.0 grams of glycine had less severe disabilities and experienced a more favorable functional outcome. (*Cerebrovasc Dis* 00; 10(1):49-60)

Simple, Sweet, and Safe

Glycine is one of the simplest amino acids and is con-sidered nonessential for humans (meaning that it occurs abundantly in our normal food supplies). It is also extremely safe and nontoxic. The only side effect noted in the above study was that nine of the individuals taking the amino acid seemed to become slightly sedated. This is somewhat surprising, because most research has shown that it takes from 3–10 grams to experience any sedative effects. It is also surprising that such small doses had such profound effects. I noticed that when the

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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.

glycine was given, the individuals were told to let the powder or tablet melt under their tongues (sublingual) instead of simply swallowing a capsule. This delivery method might account for some of the difference in effect.

Glycine is a pleasant-tasting amino acid that has mainly been used as a sweetener, a food preservative against microbe formation, an additive in wound-healing creams, and as a treatment for depression. I have also heard reports of it being used to help treat hypoglycemia and improve pituitary function, but never for treating stroke. (As an interesting sidenote, glycine can help reduce some of the dangerous effects of aspirin when it is combined with the drug at a fifty-fifty ratio.)

Obviously, the above study needs to repeated on a larger group, but considering the safety of glycine and the dire consequences that can be associated with stroke, there's no reason glycine couldn't be used in the meantime.

If You Think You Might Need It, Get It!

If you've previously suffered from a stroke or mini-strokes, or have a family history of strokes, I would strongly suggest keeping some glycine close at hand. From this study, it would appear that between 1.0 and 2.0 grams (1,000 to 2,000 milligrams) of glycine needs to be taken as quickly as possible following a stroke. And though glycine was administered for only five days following the stroke, I would suggest taking it until you're fully recovered. Be sure to let the powder or tablet "melt" under your tongue instead of simply swallowing it. If you purchase the glycine in capsules, you can just break the capsule and put the powder under your tongue each time.

To have a simple, safe, inexpensive technique that can effectively reduce the death and disability rate from a stroke that has already occurred is nothing short of remarkable.

The best source of amino acid products is JoMar Laboratories (251 East Hacienda Ave., Campbell, CA 95008, 800-538-4545, www.jomarlabs.com). I've used them for years and I have yet to find a better source when it comes to product quality, price and service.

MAILBOX

Question: On numerous occasions you have questioned the use of aspirin for preventing heart disease. However, most of what I read supports the regular use of aspirin. How can you still disregard all the evidence supporting aspirin use as one of the oldest and safest anti-inflammatory agents available today?

—Paul K.
Boulder, Colorado

Answer: Aspirin has it uses. I have consistently recommended taking aspirin immediately following a heart attack. It is also useful for removing warts when applied topically. I even think it can be used occasionally for fever, pain, or headaches, but not on a regular basis. I won't go into detail again here, but aspirin and other nonsteroidal anti-inflammatory drugs (NSAIDs) are responsible for thousands of deaths each year from intestinal bleeding, and can contribute to the leading causes of blindness, macular degeneration and cataracts. There are alternatives.

Bromelain is still one of the safest and best natural anti-inflammatory agents to use on a regular basis. It's inexpensive and it works. In fact, it's so inexpensive and effective that the dairy industry has begin to use bromelain to treat chronic mammary gland infections in milk cows.

In addition to bromelain, you can obtain many of the benefits attributed to aspirin by simply including more vegetables in your diet. Tomatoes are a good example.

Researchers recently discovered that the yellow juice surrounding tomato seeds contains a compound called P3. The P3 from just four tomatoes can reduce platelet activity by up to 72 percent without the bleeding problems caused by drugs like aspirin. (A week of drinking a quart of purple grape juice per day has been shown to have a similar effect. [*J Nutr* 00;130(1):53-56])

Until now, another ingredient in tomatoes—lycopene—has been given all the credit for reducing the risk of stroke and heart attack. As you recall, most strokes and heart attacks result from the sudden blockage of a blood vessel. Platelet cells in the blood clump together and trigger this blockage, or thrombosis. The blockage of arteries feeding the

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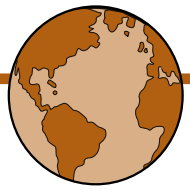

News to Use from Around the World

A Tasty Remedy for Diabetes

BELTSVILLE, MARYLAND—Nutritionist Richard Anderson, well known for his extensive work with chromium, has found that cinnamon might prevent or delay type II, or adult-onset, diabetes.

For years, I have recommended the use of this spice to help stabilize blood sugar levels. It is one of the essential ingredients in my protein shake each morning. Dr. Anderson, with the U.S. Agricultural Research Service, has found that cinnamon can improve glucose metabolism in fat cells by twentyfold. The researchers isolated the substance responsible for the amazing feat—a polyphenol called methylhydroxy chalcone polymer (MHCP). While I'm certain that further studies will concentrate specifically on MHCP and how the extract can be made into a drug, there's no reason you can't use cinnamon now to get the same effects.

Cinnamon is my kind of medicine. It's cheap, readily available, and tastes great. To achieve effects similar to those obtained in the above unpublished study, you need to take between ¼ to 1 full teaspoon of powdered cinnamon a day. I have been taking about ¾ teaspoon a day and will now start taking a teaspoon. As I said, I mix it with my protein shake each morning, but it could also be added to juice or coffee, or sprinkled over fruit, cereal, or oatmeal. (You can see the shake recipe at *www.drdavidwilliams.com. Click on Health Library, then Healthful Recipes.*)

I've discussed type II diabetes numerous times in the past. Worldwide, it now kills over 100 million people each year. It has quickly become one of the most common diseases of our time. With a daily dose of cinnamon, and by following the recommendations I've outlined many times in *ALTERNATIVES*, there's no reason you should ever become one of its victims.

The Price Moms Pay for Healthy Babies

ITHACA, NEW YORK—Since the 1970s, there have been theories that morning sickness is a protective mechanism that keeps women from ingesting foods that can cause fetal injury or abortion. A closer look at the data now supports these theories.

Researchers have found that women who experience morning sickness are less likely to miscarry than those who do not, and those who vomit suffer even fewer miscarriages than those who experience nausea alone.

Morning sickness occurs most frequently during the first trimester, when the fetus is most susceptible to the effects of chemicals and various microorganisms. This nausea causes the greatest aversion to meats, fish, poultry, and eggs. Not surprisingly, these are the foods the most susceptible to spoilage and parasitic infestation. (*Q Rev Biol* 00;75(2):113-48)

The Nicotene-Caffeine Connection

BALTIMORE, MD—A recent study has shown that the caffeine in soft drinks might not be added as a flavor enhancer, as claimed by the soft-drink industry.

In a study partially funded by the U.S. Public Health Service, individuals were given samples of two cola formulas that differed only in that one of them contained caffeine and other didn't. Only 2 out of 25 individuals could taste any difference between the caffeinated and caffeine-free drinks. This fact led the pharmacologist who headed the study to conclude that the soft drink industry's reason for adding caffeine is not for flavoring purposes, but rather to make them mildly addictive. (*Arch Family Med 2000*;9:727-734)

The idea that caffeine is being added to create a mild addiction and increase sales of soft drinks might seem unbelievable to some people, but, when you take a closer look, it's not that far-fetched.

In 1998, there were 15 billion cans of soft drinks sold in the United States alone. Of that total, 70 percent contained caffeine. The caffeine-free versions of Coca-Cola Classic and Pepsi account for only about five percent of their sales. Not surprisingly, Coca-Cola has refused to comment on the results of the above study. Earlier studies by this same research group, however, found that children did experience the typical symptoms associated with drug withdrawal when they were refused their usual supply of caffeinated soft drinks.

I don't expect that there will be any widespread demonstrations or revolt over the results of these studies. Soft drinks have become too entrenched in our lifestyles.

News to Use continued...

Through clever marketing campaigns, they have become readily accepted as harmless pleasures for children and adults alike. Unfortunately, they are just one of the seemingly insignificant additions to our diet over the last 30 or 40 years that contribute to many of the more prevalent health problems of our time (i.e., heart disease, diabetes, osteoporosis, etc.).

Glands Need TLC

WUERZBURG, GERMANY—Researchers here found that when women with adrenal insufficiency were given the hormone DHEA at 50 milligrams a day for four months, several adrenal hormones returned to normal. (*N Engl J Med* 99;341(14):1031-20)

I'm sure that you will soon be seeing this study cited as justification for the routine use of DHEA in women. I have no doubt whatsoever that the benefits are real and that the individuals involved experienced a dramatic improvement in their overall health. However, the majority of the time, similar results can be obtained without resorting to hormone use. I have worked with hundreds of similar patients and had fantastic results without having to use DHEA.

To me, using DHEA, an adrenal hormone, before trying to strengthen the adrenal glands, is putting the cart before the horse. I feel the same way about giving thyroid hormone before attempting to support the thyroid with iodine and other raw materials—and practically all hormones, for that matter.

There are times when you might need hormone therapy. If a gland no longer functions, hormones might be the only way to go. Most of the time, however, specific nutrients and glandular supplements will do the trick. Best of all, once a gland has been strengthened and allowed to function as it should, the need for the special supplements might be over. That doesn't happen with hormones. Hormones need to be taken on a continuous basis. and the longer you take them, the more likely it is that the gland will quit producing them and leave you dependent on hormone replacement therapy. Hormones are powerful, and most often produce an immediate response, but in the long run you may be paying an unseen price for the quick fix. I recommend using them as a last resort.

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heart is the most common cause of premature death in the developed world. It accounts for 30 percent of all such deaths. This is one of the primary reasons I formulated a heart product that you can take on a daily basis to prevent this problem.

By eating a variety of vegetables and regularly taking supplements like bromelain, vitamin E, and vitamin C, you can significantly reduce your chances of experiencing one of these blockages. On those rare occasions when you don't eat right, be sure to take an extra gram or two of vit-amin C *before you eat*, which will eliminate the extra platelet stickiness known to occur for an hour or so following a high fat meal.

To answer your question directly, I still don't recommend the regular use of aspirin because I think the benefits it affords can be achieved using safer, more effective products such as bromelain.

While I'm on the topic, there's another use for bromelain that few people seem to know about—treating ulcerative colitis.

Ulcerative colitis involves an inflamed, ulcerated colon, which results in numerous, loose, bloody bowel movements. It is generally difficult to treat using orthodox medicines like sulfur drugs and steroids. To resolve the problem, one generally has to make some dietary changes and eliminate foods that may be causing allergic reactions, such as milk, wheat, etc. Often times, however, a couple of bromelain tablets taken with each meal can help resolve the problem within a week or so.

When you consider that bromelain is a protolytic enzyme (one that breaks down proteins), it might seem that it would only further irritate the colon. However, that is generally not the case. Bromelain's strong anti-inflammatory powers help calm the lower bowel, and bromelain also been shown to be effective at preventing the attachment of the bacteria *Escherichia coli* and the infection that often follows.

(There are dozens of different brands of bromelain available, but determining their strength is difficult because of the way they are labeled. If you want to try bromelain for ulcerative colitis, start with a couple of tablets with each meal and ad-

HEALTH HINTS FROM READERS

One More Great Use for Lecithin

Here's another plus for soy lecithin.- People who communicate via sign language often have severe problems with numb hands.- I have seen interpreters with blue fingers and braces on their wrists and hands.- Many of us awaken at night with "dead" hands, and have to rub them back to life.- Believe me, the pain makes sleeping impossible.

After reading your recommendation for a daily dose of lecithin granules, I began taking one tablespoon a day.- In just two days, my numbness was gone. Whenever I talk with other people who sign, I make sure I tell them about lecithin.- Many interpreters are on medications and their doctors are telling them to have surgery for carpal tunnel syndrome.- Now, I can tell them that there is a natural, cheap alternative that works.- Thanks a million, Dr. Williams.

Dawn H.
Email message

(*Publisher's Note: You can order lecithin online at www.drdavidwilliams.com.*)

End Leg Cramps with Pickle Juice

The NFL Philadelphia Eagles drink two ounces of pickle juice before football games to prevent muscle cramps and improve their performance.- A simple remedy for muscle cramps is eating a slice of sour pickle; the cramp is gone in about 60 seconds. It also is supposed to prevent pulled hamstrings.- Some athletic trainers say that this is a grandma formula, but if it works, do it.-

Dan P.
Duncanville, Texas

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just that dosage depending on symptoms. You should begin to see results within a week.)

Question: I've just read about a study that found if you drink four or more cups of coffee a day, you greatly increase your chances of getting rheumatoid arthritis. Is this true?

Elizabeth D.
Boston, Mass.

Answer: While I'm not a fan of coffee (overuse tends to stimulate and weaken the adrenal glands), I'm not sure the study you're referring to is such a big deal. The study was an evaluation of data collected on over 18,000 adults between the early 1970s and 1989 in Finland. There is definitely some merit to the study, which found that, among the 4,641 individuals who drank three or less cups of coffee a day, only 0.4 percent developed rheumatoid arthritis compared to 0.8 percent of 14,340 individuals who drank four or more cups a day. (*Ann Rheum Dis* 00;59(8):631-5)

It possible that other lifestyle or diet factors played a significant role as well as coffee. Another factor that needs to be considered might be even more important. During the time of this study, Finnish coffee was unfiltered (this situation is not as common today). All in all, I don't think that there's too much to worry about, but drinking more than four cups of coffee a day is probably more than you should be doing anyway.

Not that I want to confuse matters, but there are some studies that have identified benefits from coffee or caffeine in general. Keep in mind, however, that caffeine hasn't been shown to be a cure, but a drug that can be used as one form of treatment.

One study, just released, stud-ied the relationship between coffee consumption and Parkinson's dis-ease. Researchers tracked the habits of over 8,000 Japanese-American men between the ages of 45 and 68. The study found that the incidence of Parkinson's disease decreased with increased consumption of coffee. In fact, similar results were found with increased intakes of caffeine from non-coffee sources. (*JAMA* 00;283(20):2674-2679)

Elsewhere in this issue I've discussed how caffeine has been added to soft drinks, not for it's flavoring, but possibly for it's addictive qualities. This evidence that it might help prevent Parkinson's disease might be confusing. There are a couple of things to keep in mind.

We know that caffeine is a central nervous system stimulant. With regard to Parkinson's, caffeine doesn't appear to cure or change the disease, but acts more like a medication lessening its effects. Hopefully this study won't be used to promote more coffee or caffeine consumption.

Any way you slice it, caffeine is both an addictive compound and a nervous system stimulant. Studies have shown that after consuming three cups of coffee, adrenaline from the adrenal glands increased by 80 percent. This increase is the roughly the same amount that has been shown to be released when an individual is placed in a stressful office or industrial situation, or the amount released during an emotionally-charged movie presentation. (*Acta Med Scand* 67;181 (4):431-438)

Continued stimulation by

the regular use of caffeine will eventually deplete the adrenal glands, which interferes with blood sugar regulation and leads to symptoms like headaches, fatigue, tremors, heart palpitations, dizziness, etc. And adding caffeine to sugar-laden or artificially sweetened colas only makes matters worse.

When it comes to coffee and/or caffeine-laced products, like most things in life, moderation is the key.

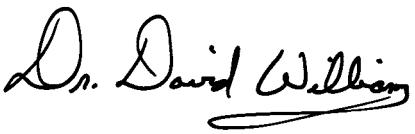
World-Wide Williams, the Sequel

Several months ago, I told you about a website I'd been working on to enhance the information you get from *ALTERNATIVES*. This new site, www.drdavidwilliams.com, is in no way intended to replace the newsletter, just add to its value. The newsletter will continue to be at the core of everything I do for you. But the web offers some incredible opportunities to serve the subscribers who make all this effort worthwhile.

This month, I'm pleased to tell you that the website is entering its second phase. A new and vastly expanded site will be in place by the time you read this announcement. With this site, you now have access to a brand new, more comprehensive Health Library. You can research specific health conditions and find my top recommendations for nutrients, foods, and more. And you can look up the unique nutrients I recommend, as well as many mainstream nutrients, in the Nutrient Encyclopedia. When you visit, be sure to check out some of my favorite Healthful Recipes and Instant Solutions for everyday problems like dandruff, poison ivy, and insomnia. You can also correspond with other health-conscious individuals on the new health Message Board. And of course, the ability to order products from Mountain Home Publishing and Mountain Home Nutritionals is still there, too, 24 hours a day, seven days a week.

The nature of my work makes another capability of the web less necessary, but still nice to have. By that I mean that the web is great for instantaneous communication on "breaking news." My work is proactive, not reactive, so I don't pay much attention to mass media news. If I'm doing my job right, I've covered a subject several years before it breaks. (That's why, if you write in and ask for information about a breaking story, the ALTERNATIVES customer service team will often refer you to an article I've written years earlier.) What this means is that, unlike many sites, you won't see a lot of reactive commentary on new and unknown subjects. Instead, you'll see the breaking news of 2002, 2005, and beyond.

I hope you'll visit the new site. It exists for the same reason as the newsletter—to help people. See if it accomplishes that purpose for you. And if you'd like to know more about the capabilities and benefits of the new site, please see the enclosed insert for specific information.



P.S. There was a typo in last month's issue. The phone number for BioResponse, maker of Phytosorb-DIM, is 303-447-3841. Please accept my apologies for any inconvenience this might have caused.

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
- For Customer Service matters such as address changes, call 800-527-3044 or write to custsvc@drdavidwilliams.com
- To get important information between issues, sign up for email dispatches at www.drdavidwilliams.com
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