

Dr. David G. Williams

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Potato Power for Emergencies

here are numerous products I've covered in the past that I think everyone should their home, have in both—DMSO. car. or Citricidal, PAV. etc. This belief stems partly from my earlier days as a "be their motto of prepared." It also stems from a belief that while we should always hope for the best, we should be

prepared for the worst. My travels often take me into situations where emergency medical care is either nonexistent or of very poor quality, to say the least.

and

While you may not face those same situations, the possibility of having to rely on your own resources during an emergency is an ever-growing possibility. Knowing some basic first-aid procedures will go a long way, and having a few essential "tools" may actually save a life; this is particularly true when someone develops a severe bleeding problem.

Hundreds of types of injuries can result in rapid, life-threatening blood loss. Estimates are that about 60,000 individuals bleed to death in this country each year. Tens of thousands more experience injuries that result in enough blood loss to require a transfusion, which itself can open up a Pandora's box of additional health problems. Even bleeding from less-serious cuts, nosebleeds, and abrasions can be difficult to stop at times. Compression wraps, ice, and elevation of the wound are helpful but not always effective.

Leading Edge, Not Bleeding Edge

Fortunately, a company in Minneapolis, Minn., called Medafor has developed a remarkable new product from potato starch that can safely stop bleeding almost instantly. It's one of those products you should know about.

Dr. Mark Ereth with the Coagulation and Cardiopulmonary Bypass Research Group at the Mayo Foundation in Rochester, Minn., recently tested the product with 29 volunteers, who agreed to have two small surgical incisions in their forearms. One of the bleeding incisions was treated with the Medafor product, TraumaDex, and the other incision was used as a control. Direct, gentle pressure was then applied for 30 seconds to both the treated and the control wounds.

The wounds treated with TraumaDex stopped bleeding within 84 seconds compared to 381 seconds for the control site. (In 23 of the 29 individuals treated with TraumaDex the bleeding stopped immediately.) The difference in overall average times was about five minutes. (Presentation at the Annual Meeting of the American Society of Anesthesiology, Sept. 2002, Orlando, Fla.)

This potato-based starch consists of tiny beads that expand like a sponge when wet to

quickly stop bleeding. Once the bleeding stops, the excess beads break

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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

down and leave no residual effects. Because the potato starch is totally natural, there are no side effects or allergic reactions to it like there can be to other hemostatic agents made from animal or human compounds.

I've had the opportunity (if you want to call it that) to use the product on myself for minor cuts. I've also seen numerous video clips where the product has been used successfully to stop serious bleeding during veterinary surgeries. The procedures included everything from a leg amputation, where the huge femoral artery had to be severed, to the removal of an abscessed tooth. The results were nothing short of amazing. Simply "spraying" the powder onto a surgical or traumatic wound and then applying some gentle pressure stops the bleeding almost instantly. It is far more effective than any other product or technique I've ever seen. It could be a lifesaver.

After the bleeding has been stopped, it's a good idea to seek medical attention to properly dress and care for the wound so infection doesn't set in. God forbid that you would be stranded or unable to secure medical aid, but if you were, you could resort to packing the wound with either sugar, a sugar and iodine mixture, or raw honey to prevent infections and help the wound heal.

Oftentimes, closing the wound may be necessary, but this gets tricky because you certainly wouldn't want to close an infected wound. Closing the wound can be done with something as simple as tape and, believe it or not, a disposable "body stapler kit" that's offered by Cabela's, the outdoor supply company. I personally think closing wounds is a little beyond the realm of most people, but who knows what circumstances might arise these days? The stapler kit is sterilized and the same one used in many emergency rooms. It comes with 15 staples and a staple remover in an airtight storage bag. For what it's worth, their advertisement also mentions that "it's good for treating cuts on your dog as well"... good luck getting Fido to sit still for the second staple. (Cabela's can be reached at 1-800-237-4444. The product is the Disposable Body Stapler Kit, code 515247. It sells for \$22.99.)

One Size Could Fit All

Medafor currently markets five different products using the potato-based starch beads. One of the products is sold over-the-counter and the others are prescription-type items sold through various medical channels. The over-the-counter product is called Bleed-X. It comes in a single-use applicator filled with powder, which is squirted directly onto a wound. For nosebleeds, a cotton swab can be dipped in the powder and applied directly to the area of bleeding. Bleed-X is sold mainly to stop bleeding from small, superficial cuts or wounds.

- Trauma-Dex is for larger wounds and is marketed mainly to emergency medical groups.
- HemaDerm is for post-surgical topical use, as in the case of plastic surgery and such.
- Arista is for surgical, intra-operative use. It is an absorbable form of the potato starch product.
- HemaBlock is a product for animal use, sold through Abbott Laboratories mainly to veterinary surgeons and veterinary schools.

Regardless of the name, the underlying product is the same. Obviously, due to liability and U.S. Food and Drug Administration restrictions, Medafor can't mention the same uses for its over-the-counter product, Bleed-X, as it does for Trauma-Dex. However, the potato starch compounds in Trauma-Dex that can be used to stop bleeding from the carotid artery in an emergency room are the same compounds in Bleed-X. In reality, any of the products can be used on any size wound.

Although the general public and most doctors know very little about these products, more and more paramedics and emergency medical technicians are being introduced to them. Paramedics rarely carry hemostatic agents because of the high possibility of allergic reaction to products currently on the market. Trauma-Dex will change that because potato starch doesn't cause such reactions. Since there's nothing else like it, you can rest assured that the military will be stockpiling the product for use on the battlefield.

There have already been reports of lives saved by using the product. An emergency technician in St. Paul, Minn., stopped a woman from bleeding to death after she had already lost half of her entire blood supply.

A Product for All Seasons and Reasons

I can personally think of dozens of instances where I would feel more comfortable having Bleed-X on hand. In the past, compression techniques and tourniquets were the primary tools to use. I now keep Bleed-X on hand when I travel, in all my vehicles, and at home and work. I would highly recommend that you do the same. It's a small investment that could easily save your life.

On several occasions, I've seen individuals practically cut a finger off while filleting fish. Getting the bleeding under control was extremely difficult, and the situation was often complicated when the accident occurred on a boat away from shore. Under such circumstances, this product would have been a Godsend.

Accidents involving vehicles, cycling, climbing, hiking, sporting events, woodworking, cooking, and hundreds of other activities could result in profuse bleeding. The situation can be particularly frightening for individuals on blood thinners or those with unusual blood types. If you fall into either of those categories, Bleed-X is certainly something you should keep on hand.

The product is relatively inexpensive. Overthe-counter Bleed-X comes in two sizes, a 1/2gram resealable tube that sells for around \$6 and a 2-gram bellows applicator for around \$11 (not including shipping). It is impervious to heat and light, so storage is easy. Keeping it in the glove box of your car, for example, doesn't present a problem. According to the label, it has a shelf life of three years, but from my conversations with individuals at Medafor, I suspect unopened containers will remain effective far longer than that.

The product is fairly new, and most marketing efforts thus far have been directed at professional use. As such, don't expect to find the over-the-counter product at your local pharmacy for quite some time. I have spoken with company officials, and they will sell Bleed-X direct to *Alternatives* readers. Medafor can be reached by calling 1-877-633-2367 or writing to 5201 East River Road, Suite 312, Minneapolis, MN 55421.

Earlier, when I said I always hope for the best but try to be prepared for the worst, many of the survival-type recommendations I've made in the past came to mind. Bleed-X certainly falls into that category. There seems to be a lot of uncertainty in the world these days. One minute there are threats of terrorism and the next the cloud of war. Unfortunately, I don't think the situation is going to get any better in the near future. Whether times are good or bad, having products like Bleed-X on hand can not only afford peace of mind, but can also, under the worst of circumstances, save your or your loved one's life.

Winter: The Dog Days of Vitamin D

ost of us are currently in the midst of winter, which, as I've reported on numerous occasions, makes us more susceptible to low vitamin D levels. If you act on only one suggestion from this month's newsletter, make sure you're getting an adequate amount of vitamin D in your current multivitamin. This is particularly crucial if you live in the North, spend little or no time outdoors, have dark skin pigment, or a history of bone weakness or fractures. (I feel very strongly that you should be taking at least 800 IU of vitamin D per day. And if you've had your gallbladder removed or have problems digesting fat, your multivitamin or daily supplement should include bile salts, fat-digesting enzymes, or both, because vitamin D is fat-based.)

Valid clinical studies continue to show that lower levels of vitamin D are directly related to poor bone strength and growth (i.e., rickets in children and osteomalacia and osteoporosis in adults). This translates into a greater risk of hip fracture and fracture in the vertebra of the spine.

In addition to bone weakness, inadequate amounts of vitamin D have been associated with a higher incidence of breast, prostate, and colon cancers; multiple sclerosis; rheumatoid arthritis; lupus; and diabetes. Not surprisingly, research has demonstrated that cells in the breast, colon, and prostate have the ability to change vitamin

on the sales of these nutritional supplements and health products, which allows him to continue devoting his life to worldwide research and the

development of innovative, effective health solutions.

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News to Use from Around the World

Stem Cells Come Through Again

MONTREAL, CANADA—During the past month I've made two trips to Canada. On both trips I visited McGill University Medical Center and the Royal Victoria Hospital. Several interesting events have been taking place there.

Canada's medical system is quite different from ours. Ours is a semi-private system, whereas the Canadian government pays for the medical care of its citizens. In an effort to help control costs, physician salaries and other costs are regulated by the government. While this results in a great deal of frustration among many of their doctors, it also seems to draw a different type of individual into the profession. Those entering the field of medicine seem to be less interested in getting rich and more attuned to helping patients.

Don't get me wrong; it is my personal opinion that to survive, medical systems need competition and the free-market structure to continue to reward those who do the best work and to attract the brightest individuals. Canada, however, doesn't seem to have any shortage of gifted individuals when it comes to health care (though its system is infamous for its long waits). Another interesting fact is that there are more women in Canadian medical schools training to be doctors than there are men. In some classes, as many as 75 percent of the students are women.

Baby's Cord Cures Mother's Leukemia

Several years ago, I reported that the use of stem cells would one day be a very important step in the treatment of certain diseases. Doctors at McGill University have now used stem cells from a baby's umbilical cord to cure the mother's rare form of leukemia. The mother was diagnosed with acute myeloid leukemia in the third trimester of pregnancy, and the cancer continued to progress, despite chemotherapy treatments. Fortunately, some of the baby's umbilical cord and cord blood was frozen at birth.

A few weeks after the baby was born, the mother was given the cord cell transplant after all other treatment options had been exhausted. Her cells returned to normal after only six weeks, which was quite unusual since most cord cell transplants don't take effect for three to six months. As far as I know, this is the first case in the world where a mother has been cured of leukemia using her child's stem cells.

Stem cells will undoubtedly turn out to be one of the more important tools in the treatment of numerous

diseases. And, as I've suggested for years, storing a small amount of the cord blood when a baby is born could turn out to be one of the best investments you can make. (For details on cord blood storage, please refer to the October 2000 issue of *Alternatives*, Vol. 8, No. 16.)

Cultivate the Raisin Habit

SAN ANTONIO, TEXAS—Just down the road, at the 43rd annual meeting of the American College of Nutrition, Dr. Gene Spiller, a researcher from Los Altos, Calif., shared an excellent tip on how to reduce DNA damage.

Dr. Spiller has been studying the antioxidant effects of raisins. Raisins, much like the dried plums (prunes) that I reported on in the past, have a high Oxygen Radical Absorbence Capacity (ORAC). In simple terms, they have a strong ability to neutralize free radicals created in the body.

Dr. Spiller tested the effects of giving raisins to groups of athletes competing in triathlons before competition. He found that within 15 to 30 minutes of eating raisins, antioxidant power in the bloodstream significantly increased. After 60 minutes, the antioxidants had moved from the bloodstream into various tissues of the athletes' bodies. From a practical standpoint, eating raisins before undertaking any type of strenuous activity can help prevent oxidative stress–induced DNA damage. This is the same type of damage associated with tissue aging, memory loss, and loss of brain function.

For some reason it seems that everyone inherently knows raisins are good for them. I think we just need to get into the habit of eating more of the strong antioxidant foods like raisins and prunes (excuse me...dried plums). Next time you're searching for a snack, keep in mind that just a small handful of these dried fruits can pack a very powerful punch when it comes to helping you stay healthy.

Antibiotics Aren't the Answer for Your Heart

LUDWIGSHAVEN, GERMANY—Here's one report that certainly won't get much "air play" in America: Doctors here have found that contrary to reports released earlier in the U.S., antibiotics aren't effective at preventing the inflammation thought to be involved in atherosclerosis.

If you recall, several months ago the headlines were screaming that heart disease and atherosclerosis

News to Use from Around the World

were the result of infections caused by pathogens like *Chlamydia pneumoniae*. This suggested that our No. 1 killer, heart disease, could be prevented through the continuous use of antibiotics. They were being touted as a major breakthrough that could help eliminate the disease once and for all.

Researchers throughout Germany conducted a randomized, double-blind study involving 872 heartattack patients from 68 different medical centers. Half of the group was given antibiotics along with their regular treatment, and the other half acted as controls and received a placebo. The one-year survival rate for those on the antibiotics was 93.5 percent compared to 94 percent on the placebo. There was no significant difference in survival rates between the two groups, and there was also no difference in complications or the need for additional surgeries. (*Presented at the 24th Annual Congress of the European Society of Cardiology, Berlin, Germany*)

In essence, although some doctors have already started to recommend such action, there's no benefit in taking antibiotics either to prevent a first or second heart attack, or to prevent atherosclerosis (clogging of the arteries).

We already know how to prevent heart attacks and clogging of the arteries using proper diet and a variety of nutritional supplements. Like most preventive measures, however, it requires a little self-discipline and effort, which most people are reluctant to endure. As a result, there will continue to be a growing market for a "silver bullet" medical approach. Rest assured, the pharmaceutical companies will come up with such products, but in the long run the products either won't work or will do more harm than good. Don't waste your time, money, or health waiting on such nonsense.

While I'm on the topic of heart attack, recent surveys have shown that most people have little knowledge of the common symptoms associated with heart attack. As a result, out of the 50 percent of individuals who initially survive the attack, most don't seek medical help until an average of over six hours later. Since time plays such a key role in both survival and damage control, knowing the major symptoms might help save a life. It's imperative that upon first recognizing the symptoms you immediately call for an ambulance and then give the individual an aspirin to chew, or, if that's not available, a teaspoon of Tabasco in a small amount of water or a capsule or two of cayenne pepper will suffice.

Some form of chest pain or discomfort is the key symptom associated with heart attack. Shortness of breath and palpitations (noticeable heart throbbing) are two other, more common complaints. Other symptoms often associated with heart attack include dizziness or lightheadedness, sweating, nausea or vomiting, weakness or fatigue, jaw or neck pain, and upper back pain.

It's True: Men Don't Make Passes at Women Who Wear Glasses

LONDON, ENGLAND—In an earlier issue, I stressed the importance of smell in the selection of a mate. If you recall, birth control medication can alter a female's sensitivity to smells and thereby disrupt her body's innate ability to properly select a male partner. The implication was that the high divorce rates we're experiencing today may in part be due to not following our instincts. I suggested that females looking for a mate forgo birth control pills for a few months to improve the selection process. The research still bears this out, and some new research may help women even more.

British researchers at the University of Warwick have found that when women trade their eyeglasses for contact lenses, the interest from males increases by an astounding 400 percent. The study involved a "busload" of women aged 18 to 25, all of whom wore vision aids. The women were divided into three groups: one told to wear their usual form of eye correction, the second traded their eyeglasses for contacts, and the third traded their contacts for eyeglasses.

The women were then taken to prestigious London nightclubs and asked to log their "pulling power," for lack of a better term, as well as to make a self-assessment of their physical appearance and self-esteem prior to the event, during the event, and a few days afterward. Surprisingly, 85 percent of those in the group who switched from eyeglasses to contacts reported a rise in self-confidence. On the flip side, 75 percent of those who traded their contacts for glasses complained of feeling less confident. The "pulling power" among the groups also changed.

More than 50 percent of the women who changed from glasses to contacts reported a definite increase in their ability to attract the opposite sex. And 80 percent of those who wore eyeglasses felt less able to attract the opposite sex. Even more amazing was the fact that those switching to contact lenses were three times more likely to report "hugging," four times more likely to report "kissing," and six times more likely to report "fondling" than usual. (*Med Post Oct. 22,02*) Parents and grandparents, take note: Based on this evidence, you may or may not want to encourage your daughter or granddaughter to wear glasses.

News to Use from Around the World

A Rose-Colored View of Sleep

CHARLEVOIX, QUEBEC, CANADA—Researchers at the University of Toronto are working with optometrists to develop special eyeglasses for individuals who work night shifts.

Based on research I've found over the last decade or so, I'm of the firm belief that our change in sleeping patterns contributes to many of the diseases we're now experiencing. Proper sleep will one day be considered a very necessary factor in disease prevention, just like exercise, nutrition, and stress reduction.

Studies continue to show that exposure to light at night increases the risk of breast cancer and cardiovascular disease. Light at night disrupts the circadian rhythm controlled by the pineal gland. The pineal gland secretes the hormone melatonin, which has now been shown to exhibit anticancer properties. Melatonin's anticancer effect seems to be particularly effective at preventing hormone-dependent forms of cancer, such as those of the prostate and breast. Melatonin release generally peaks sometime between 1 a.m. and 2 a.m. If you are awake during this time, or even sleeping under bright lights, melatonin production will be suppressed.

Dr. Robert Casper, a professor at the University of Toronto, has found that different wavelengths of light affect the pineal gland in different ways. In his studies, blue/green wavelengths suppressed 65 percent to 81 percent of the production of melatonin and also delayed its release by up to half an hour. On the other hand, red light waves appeared to have no effect on melatonin production or release. He is currently testing various types of lenses and eyewear that night workers could use to filter out the blue/green wavelengths. At least for night workers, the world may really be a better place when viewed through rose-colored glasses.

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D to the biologically active form (1,25-D), which prevents cells from becoming cancerous. It should also come as no surprise that people living in the northern latitudes have a greater risk of dying from all types of cancer, not just those of the prostate, breast, and colon.

Still, most doctors continue to overlook the importance of vitamin D. Either they never learned or they have forgotten that only vitamin D can aid the absorption of calcium in the intestines. Without vitamin D, the absorption of calcium is limited to somewhere between 10 and Once we have more definitive research in this area, I hope that filtered nightlights also will become available. This is an area of research I will definitely continue to follow and update you on. Our nighttime and sleeping habits are, without a doubt, a very important tool in our quest to stay healthy. For most of us, it's also an area over which we have control.

A cautionary note: Please don't use this research as an excuse to routinely take melatonin. I know there are some anti-aging doctors and individuals who recommend the daily use of melatonin. I don't. Melatonin is a hormone, and we don't fully understand the ramifications of taking any hormone on a long-term basis. Although melatonin is sold over the counter and generally considered to be safe, it is still better to play it safe.

One recent study found that melatonin use lowers sperm counts. This small, double-blind study took place at the Haemek Medical Center in Afula, Israel. Eight healthy men were given 3 mg of melatonin or a placebo at precisely 5 p.m. each day for two separate three-month periods. While on the melatonin, two men experienced a significant drop in their sperm levels. Before the study, their sperm counts were between 25 and 35 million/mL. While on melatonin, the counts dropped to 3 million/mL in one man and 12 million/mL in the other. The men also experienced a 30 percent drop in sperm mobility. Six months after the melatonin was stopped, one man still had lower sperm counts and sperm mobility. (J Androl 02;23(4:572-8)

Melatonin is known to inhibit the production of estrogen, a necessary hormone in both male and female reproduction. This helps explain some of melatonin's role in preventing breast cancer, but in males it may cause other problems that we don't yet fully understand. A hormone—any hormone—should never be taken lightly.

15 percent. With vitamin D, that figure increases to 30 percent in adults and as high as 80 percent in teenagers.

If you live in the northern part of the United States (above 38° North latitude, which runs approximately through Baltimore– St. Louis–Denver–San Francisco), it's a good bet that even if you work outdoors from October through March, the sun is too weak to stimulate the production of vitamin D in your body. And even if the sun were strong enough, more than likely the cold temperatures would keep you from sunbathing.

Supplementing with vitamin D is even more important for African Americans than people of other races. Because of their darker skin, they require as much as 50 times more sun exposure than fairer-skinned races to produce adequate amounts of the vitamin. This explains why somewhere between 30 percent and 50 percent of African Americans are vitamin D-deficient and thus have higher rates of prostate cancer.

Research has also revealed that although breast milk from a healthy mother contains practically all the nutrients a child needs, it is often lacking in vitamin D. Exposure to sunshine and a mother who gets adequate vitamin D are essential to a child's long-term health. I feel certain that one day we'll discover that all these children being slathered daily with sunscreen and kept in the shade will turn up with a greater risk of the diseases I mentioned earlier. Somewhere along the way we've come to the conclusion that wrinkling of the skin is abnormal and that avoiding all exposure to sunlight is normal.

Enjoy the sun and, whatever you do, make sure you're supplementing your diet with vitamin D. As my dad would say, vitamin D is cheap insurance, and there's certainly not much of that around any more.

News About Tea Just Keeps Getting Better

or years, Richard Anderson, with the U.S. Department of Agriculture, has been studying various food products and their relationship to insulin. Most recently, he discovered that drinking a cup of tea can enhance the activity of available insulin by 15-fold. A simple cup of tea could be the perfect "pick-me-up" for diabetics, though the compounds that enhance insulin activity would benefit all of us, not just diabetics.

Compounds in tea called polyphenols have been shown to have beneficial antioxidant properties, as well as antibacterial, antifungal, antiviral, and anticancer effects. But it's another compound in tea—epigallocatechin gallate, or EGCG—that appears to provide the insulinenhancing boost. I've discussed other benefits of EGCG in the past, including its anticancer and fat-burning properties. Insulin enhancement is one more. The more efficient insulin is, the less insulin your pancreas has to produce.

Anderson found, however, that herbal tea doesn't provide this insulin-enhancing effect. Only the true teas—green, black, and oolong were shown to work. You can find these in any grocery store. For those who are interested, I've put together a high-quality tea kit from green tea grown at the Madura Tea Estates in Australia. It contains enough tea to brew 325 cups and costs \$39.99. It's available from Mountain Home Nutritionals (1-800-888-1415). Mention item MGTK, code 18261I.

You should also know that adding milk, non-dairy creamer, and soy milk lessened the insulin-enhancing effect of the EGCG. Adding just 5 grams (less than an ounce) of 2-percent milk dropped the activity by one-third, and when milk was mixed 50/50 with the tea, the positive effect was reduced by 90 percent. There was no diminished effect, however, when lemon juice was added to the tea. (J Agric Food Chem 02;50(24):7182-6)

Oil of Thyme: Essentially No Match for Anthrax

ver the last year or so, it seems that essential oils have been getting a lot more attention. With the newly emerging terrorist threat, for example, there were reports that oil of thyme was effective at eliminating anthrax. I have spoken with dozens of experts and searched extensively, and still haven't been able to find any data to support oil of thyme's effectiveness in this realm. It may be effective, but I haven't seen any research to support those claims.

Some individuals are claiming that one drop of oil of thyme mixed in 8 oz. of water and taken every two hours will defeat an anthrax infection. Although I doubt there is any harm in following these directions, I'm not sure they would work.

Some research has shown, however, that the tripeptide glutathione can help counteract the toxicity and macrophage breakdown caused by anthrax. One of the least expensive and more effective ways to increase glutathione levels is by taking 600 mg per day of N-acetylcysteine, a sulfur-containing amino acid. Alpha lipoic acid, vitamin C, and the amino acid taurine could also be of help. (Mol Med 94;1(1):7-18) (See the

December 1997 issue of *Alternatives*, Vol. 7, No. 6, for more ways to raise glutathione levels in your body.)

Another study has shown that DHEA and melatonin can reduce the toxins created by anthrax. (*Cell Biol Toxicol 00*;16(3):165-74)

Keep in mind that anthrax is caused by bacteria, and while there are probably several natural products that can kill the bacteria, most research has focused on which compounds kill the bacteria upon direct contact. When it comes to fighting an established internal infection with these compounds, the research just isn't there. Instead, one of the best defenses for anthrax and any other bacteria or pathogen is to maintain a strong immune system to begin with. Sound nutrition, healthy intestinal flora, adequate rest, clean water, and a good supplement program are some of your best defenses.

And for any inhaled pathogen, I wouldn't hesitate to immediately use Xlear Nasal Wash on a regular basis, in addition to inhaling the fumes of eucalyptus oil constantly. (Xlear is available from Mountain Home Nutritionals, 1-800-888-1415.) Additionally, I would increase my intake of the supplements mentioned above, as well as other well-known natural antibacterial products like garlic and hydrogen peroxide. (I wrote about hydrogen peroxide therapy in the June 1992 issue, Vol. 4, No. 12.)

Myrrh for "Snail Fever"

On another front, researchers at Mansoura University in Egypt have found that myrrh, the oleo-gum resin from the stem of *Commiphora molmol*, is very effective for treating the parasitic infection schistosomiasis. We don't hear much about schistosomiasis because it mainly occurs in tropical and subtropical regions of South and Central America, Africa, Asia, and southeast Asia, where it infects over 200 million individuals. Schistosomiasis is also called snail fever, because snails are an intermediate host before the parasite is released into water. From the water, the worm enters humans through the skin and eventually lodges itself in the liver where it can reside for as long as 30 years. During that period, if untreated, it can cause severe liver damage, kidney and heart failure, and seizures. Currently there is only one form of drug treatment (Praziquantel), and resistance to the drug is becoming more common.

In the Egyptian study, infected individuals were given 10 mg myrrh for every kilogram (2.2 pounds) of body weight for three days. If biopsy reports found there were still parasite eggs present in the large intestine, the individuals were given another course of the herb, at the same dosage, for six days. Following that, there was a cure rate of 91.7 percent. If any eggs remained after six months, yet another course of treatment was given, which increased the total cure rate to 98.1 percent. Only mild and temporary side effects were reported in 11.8 percent of the individuals. (*Am J Trop Med Hyg 01;65(6):700-4*)

Considering how stubborn this parasite is and the safety and relatively low cost of myrrh, it would be a good idea to carry this antimicrobial agent with you when you travel to any of the tropical or subtropical regions of the world. I recommend any myrrh gum product for this purpose. Penn Herb (*www.pennherb.com*, 800-523-9971) is a reputable supplier and carries several brands. You'll have to figure out the dosage because it depends on your weight (10 mg per 2.2 pounds that you weigh). A 100-pound person, for example, would take 454.50 mg of myrrh gum per day for at least six days.

Take care,

Dr. David Will

If you have questions or comments for Dr. Williams please send them to the mail or email addresses listed to the right. 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 61010, Potomac, MD 20859-1010 or <u>mailbox@drdavidwilliams.com</u>
- For Customer Service matters such as address changes, call 1-800-527-3044 or write to <u>custsvc@drdavidwilliams.com</u>
- To get important information between issues, sign up for email dispatches at <u>drdavidwilliams.com</u>
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