

# Alternatives<sup>®</sup>

## FOR THE HEALTH-CONSCIOUS INDIVIDUAL

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Dr. David G. Williams

## Prescription for Death

The big news these days seems to be all of the recent recalls and warnings about the dangers of various pharmaceutical drugs, particularly anti-inflammatory medications.

It seems like every day the media “uncovers” another dangerous drug. First there was the revelation that taking Vioxx, the popular arthritis medication, had the side effect of increasing the risk of having a heart attack or stroke. Then another COX-2 inhibitor, Celebrex, came under scrutiny for possibly increasing the same risks. Supposedly, the FDA is taking a closer look at the broader class of anti-inflammatory medications called nonsteroidal anti-inflammatory drugs (NSAIDs). These include many of the popular over-the-counter medications such as naproxen (Aleve) and ibuprofen (Motrin and Advil).

Some people will claim that this is the end of modern medicine as we know it. They will proclaim that the floodgates have been opened and people will finally begin to see the error of their ways. It's not going to happen. The whole situation will be nothing more than a temporary blip on the health radar screen.

Nothing will significantly change. The public will continue to take and demand drugs to treat their symptoms. The FDA will continue to stress that everything is okay as long as drug users follow the dosing instructions on the labels. And the pharmaceutical manufacturers will continue to put the “correct” spin on studies to convince the public it needs their products. The only change that might take place is a modification of our laws that would further protect drug manufacturers from product

liability. You can bet the pharmaceutical companies will be making a bigger push in this direction.

This end result goes back to the “Golden Rule” that I've discussed in the past: “whoever has the most gold makes the rules.” And there are obscene amounts of gold involved here—Vioxx alone had annual sales of over \$1.7 billion in 2003. Pharmaceutical companies spend far more on the marketing and promotion of drugs (some estimates are as high as \$20,000 to \$25,000 per doctor) than they do on research and development.

The pharmaceutical companies have done an amazing propaganda job of convincing the public that drugs are the safe, effective answer to all health woes. The idea that a drug might actually increase the user's risk of serious disease or death apparently shocks everyone. I really don't understand why. Rather than blindly accepting television commercials as gospel, all one has to do is read the warnings for the drugs (which are actually grossly understated) and open their eyes to what's going on around them.

Drugs don't cure disease. Instead, they mask symptoms without regard to what might be causing the underlying problem in the first place. In the process, the production of certain hormones



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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*

can be suppressed while others are indiscriminately increased. Drugs also deplete minerals and vitamins, and they routinely interfere with the formation of prostaglandins, enzymes, and hundreds of other essential compounds. What has recently come to light with Vioxx, Celebrex, and the NSAIDs is that these side effects can be more dangerous than the symptom being treated with drugs. The side effects and problems created are only compounded when you add more than one drug to the picture.

There's no doubt that drugs can save lives under the right circumstances and situations. Antibiotics can help fight massive infections that would overcome the normal defenses of the body. Supplemental hormones can be a godsend when organs can't produce their own supply because they are damaged or cease to function. However, our society has been brainwashed into thinking routine drug use is "better living through chemistry."

The majority of individuals have accepted the false premise that popping a pill is at least as effective as making changes to their diet and lifestyle. They believe the premise because they want to; what they know for sure is that the pill is less of an inconvenience. It's a quick-fix solution to eliminating present symptoms, but a very short-sighted approach in the longer term.

## Questionable Benefits of Drugs

When it comes to pain killers, and the use of the COX-2 inhibitors and NSAIDs mentioned above, there is little, if any, scientific evidence to support their use for arthritis. In fact, any possible beneficial effects are offset by side effects, such as intestinal bleeding from older NSAIDs and the increase in heart attack and strokes from the others. In fact, there has never been any evidence

that they are beneficial in the long run. (*BMJ* 04;329(7478):1317) The same thing is true for other classes of drugs.

Regardless of what you may have been led to believe, research doesn't support the idea that lowering cholesterol levels increases one's lifespan. The studies that report less risk of heart attack from lower cholesterol levels also show increased deaths from cancer and suicide. I strongly suspect we'll see a frightening picture begin to emerge if longer-term, more intensive studies are ever undertaken on the subject.

One of cholesterol's functions is to form, support, and protect cell membranes and nervous tissue. It only makes sense that "depleting" cholesterol would leave these areas more vulnerable to injury and destruction, and lead to an increased risk of neurological problems and cancer. Cholesterol-lowering drugs, including the new popular statin drugs, work by interfering with normal liver function. They may also interfere with the liver's ability to neutralize excess hormones and environmental toxins, which would also lead to increased risk of cancer and various neurological problems. (If you need or want further research support concerning this, I suggest you read the book *The Cholesterol Myths* by Uffe Ravnskov.)

There are even legitimate questions as to whether the use of blood pressure-lowering medications decrease one's lifespan. While the benefits of lowering one's high blood pressure through exercise, diet, and supplements are well known, the use of drugs to achieve the effect may be causing a host of other problems and premature death. Undoubtedly, a much closer look needs to be taken at this issue now that pharmaceutical companies and the National Institutes of Health have promoted new guidelines on what now constitutes high blood pressure (not to mention the new classification

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## NEWS TO USE FROM AROUND THE WORLD

### Power Walking

FELDKRICH, AUSTRIA—Dr. Heinz Drexel with the Vorarlberg Institute has discovered a very useful tidbit when it comes to exercises.

Over a four-month period he studied the metabolism of 45 healthy, yet inactive, individuals who spent three to five hours a week either walking up or walking down the slope of a mountain. Dr. Drexel found a very significant difference in what was metabolized in the body depending on which direction the participants were going.

For the first two months they walked up the mountain and rode the cable car back down. For the next two months they rode the cable car up and walked down. When hiking up the mountain, only the metabolism of the participants' triglycerides improved; only when going downhill did their glucose processing improve.

Based on these findings, if you have diabetes and want to increase your body's efficiency at lowering blood glucose levels, your best bet is taking downhill walks. From a practical standpoint, you can take the elevator up in buildings but take the stairs down. If your goal is to improve blood fat levels, then hiking uphill, or taking the stairs to the upper levels of a building and the elevator down, would be the best exercise routine.

This program would be an easy, yet beneficial, way to start exercising if you've been sedentary for some time and are out of shape. You don't have to use a mountain or stairs; a nice sloping walkway will do the trick as you increase your strength and fitness ability.

### Power Napping

CAMBRIDGE, MASSACHUSETTS—Researchers at Harvard University have discovered that taking naps can be an effective way to stimulate learning.

Through a series of complicated learning experiments, Sara Mednick and her colleagues found that when volunteers took longer naps—which consisted of both slow-wave sleep and rapid-eye movement sleep—following their learning exercises, their ability to learn skyrocketed in contrast to those who took shorter naps or no nap at all.

It appears that for naps to encompass both types of sleep, they generally need to be longer than 30 minutes, and as long as 90 minutes for some individuals. (*Nat Neurosci* 03;6(7):679–8)

Sleep still remains a mystery in many ways. Exactly why we need sleep has never been fully understood. Some researchers have theorized that sleep is needed to "record and file" the information and knowledge that was gained during the day. This particular study

seems to support that idea. When I was in college, and had the opportunity, I would study for exams for several hours and then immediately take a nap. I felt it helped my retention. Looking back I'm sure it was just luck that I did the right thing. Based on this research, however, you can put naps to good use.

If you're in a position of having to learn material, a nap immediately following your study can be as effective as a night of sleep.

### Young and Younger

SALERNO, ITALY—Doctors at the Cava de' Tirreni Hospital, working in conjunction with those at the State University of New York at Buffalo, have found that children as young as seven years old are starting to show signs of artery disease.

When they evaluated the carotid arteries of 100 obese children, the researchers were shocked to discover the arteries were already thick and stiff—early signs of atherosclerosis (hardening of the arteries). They also found the children had high blood pressure, high cholesterol levels, and the risk factors associated with developing diabetes. (*Diabetes Care* 04;27:2506–08)

Sadly, I predict we'll begin to see more and more studies like this one. And while they should serve as an early warning sign for us to make drastic changes in our diet and eating habits, I'm afraid that instead, they will only be used as an excuse to begin drug treatment earlier and earlier in children. Hopefully, this is one prediction I'll be wrong about.

### Pollution Gets Inside

LOS ANGELES, CALIFORNIA—In the previous article, I mentioned how researchers discovered that obese children had abnormally thick and stiff carotid arteries—leading risk factors for heart attacks and strokes. It now appears that living in a polluted environment can make the problem even worse.

Researchers here have found that the more air pollution there is around your home, the thicker the walls of your carotid arteries become. (*Circulation* 05;109:71–77)

Trying to eliminate cardiovascular disease will be an ongoing and difficult problem, particularly the way it is being approached in this country. Everyone seems to be looking for the one magic bullet that will stop the disease. A few years ago it was inflammation, and it was suggested that the continuous use of antibiotics would curb the problem. Then, more recently, the multi-pill approach was put forward. This was the combination drug to drop cholesterol, help control inflammation, etc., etc.

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## NEWS TO USE (Continued from page 155)

Research continues to show that cardiovascular disease can have numerous causes. Inflammation from environmental toxins, our food supply, drugs, and numerous other factors is only one part of the problem. Another is the lack of proper nutrients, antioxidants, and compounds the body needs to protect and repair the cells of artery walls.

This latest study found a direct relationship between air pollution and damage to arterial walls. This damage has been a suspected factor for some time, but it's still unknown just how long and how much exposure to various toxins it takes to do the damage. It will be difficult to totally clean the airborne pollutants out of our environment. And with the threat of airborne pathogens

—cold and flu viruses, or even worse—I would expect to see small portable nasal filters become a fashionable item in the next few years.

In the meantime it would be wise to flush your nasal cavities on a daily basis—preferably with a mild saline/xylitol solution such as Xlear, or just a small amount of salt water or very dilute hydrogen peroxide. (Xlear is available from the manufacturer at [www.xlear.com](http://www.xlear.com), or from Mountain Home Nutritionals at 800-888-1415.) When in working order, your nose can provide a great deal of protection against many of the more common pathogens we encounter. As far as the increasing amount of man-made pollutants, we may soon all be wearing our little disposable nasal filters.

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called “pre-hypertension”), which I’m sure will be used to justify preventive drug treatment in the not-so-distant future.

## Awful Dollar Drain

And by now everyone knows about the use of amphetamines to treat children for so-called ADD/ADHD (over 8.5 million kids in this country). The problem has become so pervasive that in high schools and colleges this form of “speed” is in hot demand and sells for \$5 to \$10 a pill. It is rapidly becoming accepted as a way to enhance academic performance by allowing students to stay up later during studies and remain more alert in class. When I was growing up, we were taught that “speed kills.” Apparently the new message for kids is that “speed heals.”

The pharmaceutical companies feel they have pretty much saturated the children’s market, and have begun to introduce their drugs to the adult population under the guise of treating Adult-ADD.

The latest drug, Strattera, was developed by its maker, Eli Lilly, as an antidepressant in the 1990s. Apparently they were unable to find a market for the drug until they came up with the idea of Adult-ADD. They now estimate that 8 million adults suffer from the disease in this country alone. They even have a short six-question screening test to help determine if you have the problem. Reportedly, if you answer “yes” to at least 4 of the questions you have over a 90 percent chance of having ADD and can be helped with their antidepressant medi-

cation. After having read the questions, I would venture to say that practically every adult in the world suffers from the problem, with the exception of someone in a coma or already in a stupor from taking antidepressants. See for yourself.

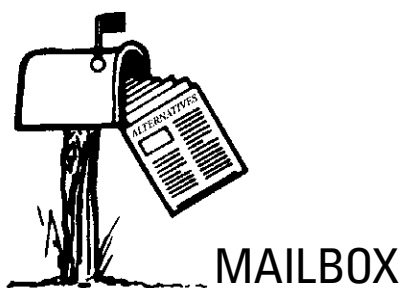
- 1) Do you have trouble wrapping up the final details of a project once the challenging parts have been done?
- 2) Do you have difficulty getting things in order when you have a task to do that requires organization?
- 3) Do you have problems remembering appointments or obligations?
- 4) Do you avoid or delay getting started on tasks that require a lot of thought?
- 5) Do you fidget or squirm with your hands or feet when you have to sit down for long periods of time?
- 6) Do you ever feel overly active and compelled to do things like you were driven by a motor?

## They’re Everywhere, They’re Everywhere!

I hate to be the bearer of bad news, but someone had to tell you that we all have some degree of Adult-ADD. The good news is that antidepressants can solve our problems and make us more socially acceptable and productive in the workplace.

As ridiculous as this propaganda is, over six million prescriptions for Strattera have already been written since 2002, and the market continues to grow. No wonder there seems to be little, if any, concern from the public over athletes that use

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## Massaging the Prostate

**Question:** I've had prostate problems for quite some time. I've been diagnosed with BPH (*benign prostatic hypertrophy*). I continue to follow the nutritional recommendations you've made, and exercise regularly (walk a mile or so each day). Before I moved, my last doctor used to perform a prostate massage once every 1½ to 2 weeks, and that seemed to provide some of the best relief and lasting results that I've had for years.

None of the other doctors I've spoken with, including my current doctor, offer this treatment, nor do they feel it is effective. The general feeling seems to be that prostate massage is very outdated, particularly in light of the new prostate medications available. I'm not sure some of the doctors I spoke with even knew what I was talking about. My experience may have been different than most, but I found massage very helpful. I would try to perform the procedure myself, but with my age, inflexibility, and other problems, I don't think that would be possible. Do you know of any supplements that would work as well as the prostate massage?

Thank you for all your help.

Jack T.  
Santa Barbara, California

**Answer:** I don't know of any supplement—or medication for that matter—that can achieve the results obtained by directly massaging the prostate. Anyone who believes there is one, probably thinks there's a medication or supplement that is as effective as a therapeutic body massage.

As far as prostate massage being an outdated procedure, that's only because most of the newer doctors are either more versed in drug treatment and have little, if any, training in hands-on procedures, or they feel the procedure is unbecoming to their "reputation" as a doctor.

Before drugs became the accepted first line of treatment for prostate problems, massage was used successfully, without hesitation, by practically all doctors. Massaging the prostate to remove congestion and improve circulation is in keeping with many of the known activities that promote prostate health. Exercises like walking cause a subtle shifting of the internal organs that has been shown to be beneficial. Many aspects of yoga utilize positioning and movements of the diaphragm to massage different organs. And sitting for long periods of time and lack of exercise are two factors that contribute to prostate stagnation and problems.

Prostate massage fell out of favor, not because it was ineffective, but because there was no money in it for the pharmaceutical companies. When you take a closer look at the prostate gland, however, it's easy to see why massage was (and still can be) so effective at treating BPH and other problems.

### The Gland Inquisition

The prostate gland is about the size of a walnut, and lies just below the urinary bladder. It completely surrounds the urethra, which carries urine from the bladder and semen from the sex glands through the penis.

The primary function of the prostate gland is the secretion of a milky,

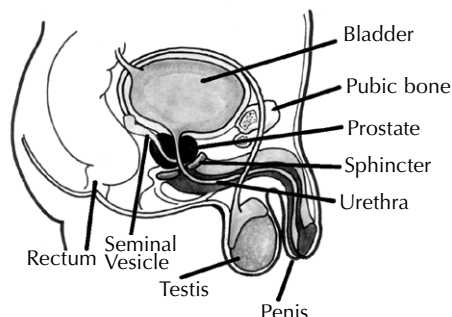
slightly alkaline fluid (the primary component of semen). This fluid helps nourish, protect, and move the sperm out of the body during ejaculation. The prostatic fluid makes up about one third of the total semen volume. Other fluids come from the testes and the seminal vesicles. Some components of the prostatic fluid help explain both the importance of the gland and why prostate massage can resolve many problems associated with enlarged prostates, and may even help prevent cancer.

Prostatic fluid contains special clotting enzymes that hold the ejaculated semen together so it can reach the deeper regions of the vagina and increase the chance of pregnancy. After about 10 to 15 minutes, the clot begins to dissolve and the sperm become highly active. The compound PSA (prostate-specific antigen) helps dissolve the clot.

Prostate fluid also contains calcium, phosphates, zinc, and citrates. New research indicates that zinc in the prostate seems to provide a protective role in keeping the normal citrate-producing cells from turning into citrate-oxidizing cancer cells. This research underlines the importance of maintaining adequate levels of zinc to prevent the development of prostate cancer. (*Oncology* 00;59(4):269–82) (*Prostate* 99;40(3):200–7) (*Inter Urol Nephrol* 97;29(5):565–74) (*J Biol Chem* 97;272(46):28875–81)

Congestion caused by either obstruction or the infrequency of prostate drainage is also thought to result in an increase in citrate oxidation, inflammation, and the formation of prostate cancer cells.

One recent study in Australia involving 2338 men found that those individuals who ejaculated five times a week or more during their 20s were a third less likely to develop aggressive prostate cancer later in life. (*BJU Int* 03;92(3):211–6) At first look, this result might sound strange, but it mirrors similar studies that have found that women who lactate or breastfeed have a significantly lower risk of developing breast cancer.



Just as with breast milk, some components of prostatic fluid are highly concentrated. The zinc concentration in prostatic fluid, for example, is the highest of anywhere in the body, at about 300 times that of blood plasma. Citrate concentrations and numerous enzymes are also very high. Unfortunately, when glands remove and concentrate these various minerals, enzymes, and compounds from the blood plasma, it is not uncommon for other toxic or carcinogenic compounds to hitch a ride and also concentrate at potentially dangerous levels. Animal studies have repeatedly shown that carcinogens such as 3-methylcholanthrene (from cigarette smoke), cadmium, and other toxins have an affinity for the prostate gland. (*Cancer Res* 86;46(2):651-7) (*J Nat Cancer Inst* 77;59(1):119-22) (*Br J Urol* 78;50(1):25-8)

It stands to reason that the longer the surrounding cells are directly exposed to such carcinogens, the greater the risk of developing cancer and/or other toxicity problems becomes. The increased risk holds true for breast tissue, prostate tissue, and tissue in other organs that manufacture and secrete various hormones and fluids. The higher the turn-over rate and subsequent reduction of exposure to these carcinogens, the lower the risk of developing cancer in these glands becomes—which is why lactation provides protection for breast tissue, and why ejaculation and/or massage can reduce problems and lower the risk of prostate cancer. In the case of the prostate, a reduction in cancer risk isn't the only benefit of prostate massage. It can be highly beneficial in treating cases of prostatitis and BPH.

The treatment of prostatitis with antibiotics has been only marginally successful (probably due to congestion within the gland). It is well known that antibiotics don't work that well at killing bacteria when they are entangled in inflammatory debris. Breaking up the congestion and improving blood flow to the area with massage naturally results in a higher success rate of treating the problem.

Dr. Antonio Feliciano, with the Manila Genitourinary Clinic, continues to obtain outstanding results by combining repetitive prostate massages (sometimes called prostate stripping) with antibiotics, when necessary, in the treatment of BPH and inflammation of the prostate (prostatitis). His program consists of completely draining the prostate through increasingly more vigorous massages performed as often as three times weekly. The secretions are checked for the presence of infectious bacteria. If bacteria are present, antibiotics are also used.

Massage is done only in the direction in which the gland drains. Pressure is applied from the sides toward the midline. Care is taken to drain every reachable area of the prostate. (I first wrote about this practice, also known as prostate milking, in Vol. 2, No. 14.) Dr. Feliciano has reported no harmful or adverse effects in his patients; in fact, he reports complete resolution in prostate patients where no other therapies had worked. (*Tech Urol* 99 5(3):146-51) (*Clinical Remission of Chronic Refractory Pelvic Symptoms in Three Men* an original report to be published in *Digital Urology Journal*)

Other doctors from around the world are starting to share the same types of success. (*Tech Urol* 99;5(3):146-51) (*Tech Urol* 99 5(1):1-7)

Dr. Daniel Shoskes of UCLA treated 73 men with chronic prostate problems. The average duration of their problems was 6.7 years, and other treatments had been unsuccessful. Using prostatic massage one to three times a week, and antibiotics when indicated, 40 percent of the men had complete resolution of their symptoms. Another 19 percent also had complete resolution followed by a recurrence, and another 21 percent reportedly showed significant improvement. (*Prostate Cancer Prostatic Dis* 99;2(3):159-162)

In a separate study, Dr. Shoskes treated 28 patients who had been seen by an average of 4.5 doctors prior to treatment without resolution of their problems. Again, after prostate massage (and antibiotics when neces-

sary), 43 percent had complete resolution of their problems and another 36 percent showed improvement. (*Research pending publication*)

Although prostate massage fell out of favor, particularly in the early 1970s when antibiotics and other medications became the favored treatment for prostatitis and BPH, its effectiveness was never the deciding issue. The problem probably had more to do with the location of the prostate.

The prostate gland resides deep inside the pelvic cavity. Short of surgical removal, the only effective method of examining the gland is through the wall of the rectum (which is also the only route through which the prostate can be massaged). The massage generally involves the insertion of a gloved finger, which has unfortunately spurred numerous jokes and has also given a distorted image of the actual benefits of the procedure.

At present, it might be more difficult to find doctors willing to perform prostate massages, particularly among younger doctors. Hopefully, that will start to change as more research is published. Unfortunately, there doesn't seem much interest or incentive to perform this type of research, particularly in this country.

## Getting the Massage

I'm sure there are still some doctors around the country utilizing prostate massage, and even following the work and research of doctors like Dr. Feliciano. However, locating them might be a problem.

The Prostatitis Center in Tucson, Arizona reports to follow the protocol of Dr. Feliciano. Additionally, Dr. Scott Zeitlin, in the Los Angeles area, used to work with Dr. Shoskes and utilizes prostate massage therapy.

Finally, there is a very helpful device called the Pro-State Massager. It can be a lifesaver to someone suffering from prostatitis or BPH.

The Pro-State Massager is a somewhat odd-shaped device made from FDA-approved non-porous plastic. With very little effort and practice, it allows one to gently, yet effectively, self-



massage the prostate gland, hands-free, simply through contractions of the rectal muscles. It promotes increased circulation to the gland and helps reduce congestion, swelling, and inflammation. The manufacturer offers three models that are all very similar, but the recommended one is their "PS New" model. The massager, along with the necessary lubricant, sells for about \$55 and comes with complete instructions.

The device is made by a company called High Island Health, P.O. Box 55427, Houston, Texas 77255. They have a Web site that helps explain its use, benefits, and how to order at [www.HighIsland.com](http://www.HighIsland.com). They can also be reached by phone for orders at 713-680-8840. Mention *Alternatives* when you order and they'll include a free bottle of lubricant. (If you order over the Web, type *Alternatives* in the "How did you hear about us?" field.)

How often a man has to use the technique varies from individual to individual. During the initial phases, when inflammation is more severe, it's not unusual to start with 20- to 30-minute sessions three times a week. (Some individuals experience their best results with sessions as long as an hour.) Again, the directions are pretty simple, and a man can easily and safely adjust the self-treatment program to his own needs.

I have recommended this simple device for some time now. I know of dozens of individuals for whom it has been an absolute godsend, and I would highly recommend it if you suffer from any type of prostate problem, or as a way to help prevent future prostate problems.

### Overgrowth or Infection?

When it comes to prostate problems, most of the discussion focuses on BPH or prostate cancer. It seems there is very little information on inflammation of the prostate (prostatitis). Yet it's been estimated that as many as 80 percent of all men will experience prostatitis in their lifetime. It's the third most prevalent diagnosis in men 51 years old or older.

Urologists report there are over two million office visits per year for prostatitis, yet in 90 percent of the cases the exact cause of the problem remains unknown. Most of these men will be told it's a problem they will have to "learn to live with." In many cases, something as simple as prostatic massage can provide blessed relief and correct the problem when various drugs and other therapies have failed.

As I've written in great detail in past issues and reports, with BPH one of the principal causative factors appears to be hormonal, which is when herbs such as saw palmetto, nettle, pygeum, and other natural remedies can be used effectively. (*Publisher's note: See Vol. 1 No. 19 for more about BPH.*)

I'm sure many men are confused about the difference between BPH and prostatitis. While it's fairly common for the same symptoms to appear in both BPH and prostatitis, the inflammatory component of prostatitis can add a whole new dimension of suffering to the picture.

In both cases, the prostate swells and can create the urinary difficulties that are the hallmark of BPH: difficulty starting a stream; weak flow; dribbling afterward; constant feeling of bladder not being empty; pain upon urination; sudden, uncontrollable, or frequent urges to urinate; waking frequently at night; etc.

Prostatitis can also trigger all of these symptoms. Inflammation of the prostate gland can result in swelling, and, since the donut-shaped prostate gland encircles the urethra, even a small amount of enlargement can cause a restriction in the flow of urine from the bladder.

Additionally, inflammation of the prostate can cause severe unrelenting pain above the pubic bone or during urination or ejaculation, as well as in the testicles, the low back, the hips, the rectum, or the perineum (the area between the rectum and scrotum). It can also result in erectile dysfunction, elevated PSA levels, bowel problems, recurrent urinary infections, et cetera.

So it's not hard to understand why many men develop depression after trying to "live with these difficulties" for years on end.

Sometimes I don't know if it's worse for closed-minded doctors to let their patients continue to suffer when there are valid treatments available such as prostate massage, or to subject them to various surgical treatments with well-known possible dangers. In the few published studies, it appears prostate massage often lowers PSA levels—which should make it one of the first lines of treatment for prostate cancer, instead of the current surgical procedures that are known to leave between 20 and 70 percent of patients impotent and between 15 and 50 percent incontinent.

It will probably require more research data for most doctors to "rediscover" the benefits their patients can obtain from prostate massage. But it's important to keep in mind that the technique isn't new or untried. In fact, it has been an accepted and highly utilized technique in both Oriental and Ayurvedic medicine for centuries. It should come as no surprise that cultures that practice these techniques experience significantly lower rates of prostate cancer and other troubles.

### When Sugar's not Sugar

**Question:** I've noticed that you've recommended xylitol both as a sweetener and in the nasal wash Xlear. At the same time you recommend staying on a low-glycemic type diet. Since xylitol is a sugar, even though maybe a "good" sugar, isn't this somewhat of a contradiction?

Kate W.

Jacksonville, Florida

**Answer:** Not really. Xylitol falls into a category called "sugar alcohol." And under the current FDA regulations products containing sugar alcohols are "sugar free." Xylitol has very little effect on blood sugar levels and on the glycemic index it rates an 8. By comparison, white sugar rates a 68 and fructose rates a 20.

performance-enhancing drugs, or the legalized drugging of infants and children, or the growing problem with reliance on drugs in this country.

Currently, 49 percent of women in the US take prescription drugs, and 39 percent of men. That works out to over 40 percent of Americans taking at least one prescription drug, and one in six taking at least three different drugs. Of those under the age of 18, over 24 percent now take prescription drugs. This ever-increasing drug use has become one of the leading causes of death. Ten years ago, a study found that over 200,000 people each year died from prescription drug use, compared to only 20,000 who died from illegal drug use. (*Arch Intern Med* 95;155(18):1949–56)

I'm sure these numbers have gone up substantially, but just try to get ahold of the data. "Adverse drug reaction" is now the most common cause of injury in hospitalized patients. (*Arch Intern Med* 02;164(7):785–92) And if that's not scary enough, it's been reported that 40 percent of impaired or dead drivers show prescription drugs in their system. ([www.AddictionByPrescription.com](http://www.AddictionByPrescription.com))

## Misplaced Priorities

Only when one steps back and takes a look at the situation does it become obvious how absurd the situation has become. Some doctors are now advising their patients to permanently eliminate grapefruit and cranberries from their diet because *they interfere with the absorption and metabolism of their prescription drugs*. We're talking about the same fruits that contain compounds that have been shown to reduce body fat, clear arteries, strengthen capillaries, prevent cancer, stop urinary tract infections, and provide dozens of other benefits.

If our diet was rich in foods like these, there probably wouldn't be a reason to be on the medications in the first place. Hippocrates, the Father of Medicine, once said, "Let your food be your

medicine and your medicine be your food." I guess that's another phrase that technology and modern medicine feel is obsolete.

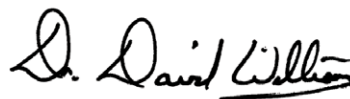
I have no intention of scaring people completely away from prescription or over-the-counter drugs. I only hope they learn the truth about drugs—their potential benefits, but also their dangerous and long-term side effects. Pharmaceutical companies and government agencies who are supposed to be protecting the public have no interest in publicizing the full story. If the facts were in the open, the public could make educated decisions and live with the consequences. But that won't happen. It goes against the Golden Rule.

Before you take any medication, realize that it will have side effects, and many will be unknown—particularly if you take it long-term. No drug is risk-free. Being "legitimized" by advertising, FDA approval, or your doctor doesn't make it any safer.

Determine what you're trying to accomplish. If it's relief of symptoms, then you should be looking at trying to resolve the deeper cause of the symptoms. You wouldn't disconnect the oil light in your car to stop it from coming on and expect the problem to be resolved. And you shouldn't take a drug just to cover up a warning sign or symptom of some underlying problem. The deeper cause might be hormone imbalance, an improper diet, lack of exercise, unresolved stress, a spiritual problem, a mechanical problem, or a mineral or vitamin deficiency. Rest assured, though, it's not a drug deficiency. Whenever possible, fix the problem and forgo the medication.

If medication actually makes one healthier, then someone needs to show me all the healthy people taking these drugs.

Take Care,



If you have questions or comments for Dr. Williams, please send them to the mail or e-mail addresses listed to the right. Of course, practical and ethical constraints prevent him from answering personal medical questions by mail or e-mail, 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:

- For Customer Service matters such as address changes, call **800-527-3044** or write to [custsvc@drdavidwilliams.com](mailto:custsvc@drdavidwilliams.com).
- To order nutritional supplements from Mountain Home Nutritionals (MHN), call 800-888-1415 or visit [drdavidwilliams.com](http://drdavidwilliams.com).
- If you are a licensed health professional and would like to learn how to begin reselling MHN supplements to your patients, please send an e-mail to [practitionerinquiries@davidwilliamsmail.com](mailto:practitionerinquiries@davidwilliamsmail.com).
- To order back issues or reports, call **800-718-8293**.
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