

# Alternatives<sup>®</sup>

## FOR THE HEALTH-CONSCIOUS INDIVIDUAL

December 2005

Volume 11, No. 6



Dr. David G. Williams  
circa 2000

## Splitting Headaches

I've written about migraine headaches many times. It would be nice to tell you that there's an ultimate cure, the one technique or tool that would end all migraines. Unfortunately these headaches can result from numerous causes, and I don't think there will ever be a

single solution. As with many health concerns, the solution will depend on the underlying factor actually causing the problem. Consequently, as I uncover new research and/or techniques that you might be able to use to stop your particular form of the problem, I'll pass them along.

Migraines are one problem where some detective work and the guidance of an open-minded doctor can be of great benefit.

It's generally accepted that migraines are a result of changes in blood flow to the brain. The difficulty in eliminating migraine headaches stems from the fact that there are dozens of different "triggers" that can cause these blood flow alterations. These can include stress, skipping meals, lack of sleep, hormone imbalance, temperature or barometric pressure changes, bright lights, loud noise, strong odors, exertion, mineral and/or vitamin deficiencies, and many others. Some very recent research suggests that, in many individuals, migraines may be the result of an opening that never closed between the upper chambers of the heart.

### Closing the Gap

During the development of the fetus there is a natural opening between the top two chambers of the heart so blood can bypass the lungs (which aren't used until after the child is born). This opening is called the patent foramen ovale (PFO), and

it normally closes at about the time of birth. It has been learned that the PFO doesn't completely close in almost a fourth of the population. In those individuals, blood that should be going to the lungs can leak through and make its way to the brain and other parts of the body. This blood may contain chemical gasses and/or air bubbles that would normally be exhaled by the lungs—but when shunted to the brain they can result in stroke.

Usually, individuals are screened for a PFO only after they have had a stroke and the characteristic blockage or vessel damage in the brain can't be found. If the problem turns out to be this residual opening between the heart chambers, it is often repaired in an effort to prevent future strokes. Several recent studies indicate that roughly half of the patients who undergo the repair are cured of their chronic migraine headaches. It seemed to be most effective for migraines that are preceded by auras (sensory signals such as imaginary lights, numbness, or visual disturbances).

Although surgically repairing this opening may be a drastic measure for migraines, it will likely become more common as the safety of the procedure

## In This Issue <sup>20<sup>th</sup></sup> Anniversary

Splitting Headaches.....	41
News to Use: Chewing Gum, Heartburn, Berries & Grapes, Garlic.....	44
Mailbox: Fumaric Acid for Psoriasis.....	46
The Test of Time: Hiatal Hernia.....	48

*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*

improves. The financial opportunity will undoubtedly add support for those pushing this procedure as a cure for migraines. Of the 28 million people in this country with migraines, it is estimated that half have the residual opening between the upper heart chambers.

I think surgery should be considered only for people who have suffered a non-typical stroke caused by the opening between the heart chambers. After all, migraines aren't life-threatening, but this type of heart surgery certainly can be. There are less drastic solutions.

## The Missing Mineral

Another of the most commonly overlooked migraine triggers is a magnesium deficiency. The precise role of this mineral in the development of migraines is still being unraveled, but we do know that magnesium deficiencies allow serotonin levels to flow unchecked. A serotonin increase causes vascular spasms, which then reduces blood flow and oxygen to the brain. It also brings about the release of other pain-producing chemicals—such as certain prostaglandins and the neuropeptide known as substance P.

Studies have repeatedly shown that up to 50 percent of migraine patients have lowered levels of magnesium during an attack, and an infusion of the mineral can provide rapid and sustained relief. Additionally, routine oral use of magnesium can reduce both the frequency and severity of such attacks. (*Clin Neurosci* 98;5(1):24–27) (*Magnesium* 84;3(4–6):195–211)

Magnesium deficiencies are far more common than most people realize. Studies have shown that only 25 percent of people in this country receive even the RDI of magnesium (420 mg) in their diet, and 39 percent get less than 70 percent of the RDI. Magnesium intake at the turn of the 20th century was between 475 and 500 mg a day, but our intake of this mineral has dropped

over the last 100 years. (*J Am Coll Nutr* 05;24(3):166–71) (*Clin Chim Acta* 00;294:1–26)

Foods that help you obtain the recommended intake of magnesium include nuts, whole grains, unpolished rice, legumes, and chlorophyll-rich green vegetables such as spinach. Due to all the processed foods being consumed today, these are exactly the kinds of foods left out of most people's diet.

In addition to inadequate amounts of magnesium in the diet, a long list of factors tend to deplete whatever magnesium stores you might have. For example, the caffeine found in everything from coffee to colas to asthma medications removes magnesium from your system. Diuretics ("water pills") and many heart and blood pressure medications further decrease magnesium levels. Soft drinks contain phosphates that bind with magnesium and prevent its absorption, and the sweetener aspartame has the same effect. Alcohol and nicotine disrupt magnesium levels; so do many of the current steroid and antibiotic medications, as well as those used to treat asthma, epilepsy, and diabetes. Additionally, diabetics excrete more magnesium than normal—as do people who suffer from chronic diarrhea.

Women are particularly prone to magnesium deficiencies, which helps explain why 75 percent of migraine sufferers are women. Nature gives a woman's magnesium to her offspring during pregnancy and lactation. When that loss is combined with a tendency to diet, re-establishing the magnesium stores in a woman's bones can be a lifelong struggle. Not surprisingly, one of the more common symptoms of a deficiency is constipation—which is also a major problem with women today.

## Fixing the Deficiency

Magnesium deficiencies are largely being ignored—in part because only 10 to 20 percent of those with deficiencies will have low serum magnesium levels (which is the only test most doctors perform). More sophisticated testing checks



### ALTERNATIVES. Author: Dr. David Williams; Publisher: Robert Kroening; Editor: Bill Todd

ISSN# 0893-5025. Published monthly for \$69.99/yr. by Mountain Home Publishing at 7811 Montrose Road, Potomac, MD 20854. Editorial Office: 7811 Montrose Road, Potomac, MD 20854. Periodicals postage paid at Rockville, MD and at additional mailing offices.

POSTMASTER: Send address changes to *Alternatives*, PO Box 2050, Forrester Center, WV 25438. Copyright © 2005 All rights reserved. Photocopying or reproduction is strictly prohibited without permission from the publisher.

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, a division of Doctors' Preferred, LLC and subsidiary of Healthy Directions, LLC, developing his unique formulations that supply many of the hard-to-find nutrients he recommends. Dr. Williams is compensated by Doctors' Preferred, LLC 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.

for intracellular magnesium content or magnesium wasting (excretion through the urine). Unfortunately, these more-accurate tests are not being used. Keep in mind, however, that if you suffer from migraine headaches there's a 50 to 75 percent chance that you have a magnesium deficiency and that supplementing with the mineral could help solve your problem (and many others associated with the deficiency).

There are a lot of different magnesium products on the market, and this variety probably explains why many people have failed to experience migraine relief when using magnesium. Many of the products are poorly absorbed, and the actual magnesium content is questionable in some of them.

Since healthy kidneys tend to flush out any excess, taking magnesium orally is safe as long as the kidneys are functioning properly. (If you have a kidney problem it would be wise to work with your doctor before adding additional magnesium to your diet.) Additionally, the blood vessels in the intestines help control the amount of magnesium that gets absorbed—with too much magnesium often resulting in diarrhea or loose stools. ("Milk of Magnesia" is a form of magnesium commonly utilized as a laxative.) Monitoring your stools is actually one of the easiest methods to help regulate your dosage of magnesium.

The trick is to take enough magnesium without causing diarrhea. The best indicator that you're getting enough oral magnesium to restore body levels and help migraines is the presence of soft, semi-formed bowel movements. The stool may fall apart in toilet water but the water should remain clear and colorless. If the toilet water turns cloudy or colored, then you're having diarrhea and you'll need to reduce your daily dose of magnesium by 10 to 20 percent. If, on the other hand, you remain constipated, then you are most likely still deficient in magnesium and will need to gradually increase your dosage 10 to 20 percent daily until the stool becomes soft and semi-formed. You can also expect to have two to three bowel movements a day, which is perfectly normal.

For migraine relief, the magnesium supplement I recommend is a sustained-release product called Mag-Tab SR. It's available directly from the manufacturer, Niche Pharmaceuticals, 209 N. Oak Street, Roanoke, Texas 76262 at 800-677-0355 or through their Web site at [www.niche-inc.com](http://www.niche-inc.com).

Mag-Tab has the advantage of releasing magnesium over a longer period of time—which avoids the laxative effect. Each tablet contains 84 mg of sustained-release magnesium lactate. It's generally recommended to start by taking two tablets a day and then increase by one tablet a day until the stools are soft. (You may prefer to spread the dosage out at different times during the day with meals.) When the stool becomes loose (diarrhea as described above) back off one tablet and stay at that dosage.

## Blocking the Trigger

Another recent study dealing with bright light-induced migraine headaches investigated the use of tinted contact lenses to block certain wavelengths of light.

Thirty-three patients with a history of such migraines were given special red-tinted contact lenses to use during migraine episodes. (Contacts were used for this experiment since glasses would tend to let light enter from the sides.) Thirty-one in the group reported rapid pain relief, and 26 experienced complete relief. In five cases, complete relief was obtained within 10 seconds. For the others, however, improvement started within about five minutes and peaked at 90 minutes. (*Clin Psychiatr News*, Feb. 1, 2005)

Those conducting the study felt that over-stimulation of certain retinal receptors might be triggering the migraines. The deep red color of the contact lenses blocked 90 percent of the short-wavelength light while admitting 90 percent of the long-wavelength light. Migraine patients often report a degree of relief when they retire into a completely darkened room. Based on the results of this study, it appears that there may be more relief by blocking only certain wavelengths of light.

## Building Blinders

Unfortunately, the special contacts used in the study are not yet available to the general public. With a little ingenuity, however, you could make your own goggles that would do the same thing. So, if your migraines are triggered by bright light or you get a degree of relief by retreating into the darkness, making and wearing your own light-filtering goggles may be an effective method of treating your problem—for less than \$20, which would be less than either a trip to the doctor or one of the prescriptions now being given for migraine relief.

*Continued on page 45*





## NEWS TO USE FROM AROUND THE WORLD

### Putting Out the Fire

STOCKHOLM, SWEDEN—It appears that we're not the only country whose population is seeing an increase in problems with heartburn—or acid reflux disease, as it's now being called.

By looking at study surveys, researchers at Karolinska Hospital compared 3,153 individuals who reported problems with severe heartburn or regurgitation to 40,210 people without reflux symptoms. They uncovered several risk factors that have been largely ignored thus far in this country.

The general advice in the US is to avoid spicy foods, don't eat late meals, and don't drink alcohol in the evening. In Norway, they discovered that someone who smokes has almost double the risk of having acid reflux—which isn't a big surprise since smoking is associated with other poor health habits (such as the consumption of fried and fatty foods). What was a little surprising was the finding that individuals who routinely added salt to their meals also had almost twice the risk of experiencing acid reflux.

Reducing your salt intake is a simple solution. If the food seems too bland, then try substituting other herbs, spices, and flavored vinegars. I like the all-purpose, all-natural seasoning powder called Spike that is sold in most health food stores.

Researchers also discovered that those who consumed coffee and high-fiber foods, and who exercised frequently, had a significantly lower incidence of acid reflux. High-fiber diets had one of the greatest influences by cutting the incidence by almost half. (*Gut* 04;3(12):1730–1735)

In addition to these triggers, a hiatal hernia can often cause chronic heartburn. (See "The Test of Time" on page 48 where I've outlined simple steps you can take immediately that will resolve many cases of acid reflux.)

### Pungent Heart Healer

TORRANCE, CALIFORNIA—Research at the UCLA Medical Center has further confirmed the power of using garlic extracts to help prevent heart disease.

In a double-blind study, 19 individuals were given either a placebo or aged garlic extract for one year. Researchers wanted to see if the garlic alone, without any dietary changes, could change the rate at which atherosclerosis (clogging of the arteries) occurred.

At the end of the year, patients supplementing their diet with the garlic extract showed only about one-third as much vascular calcification as those individuals taking a placebo. (*Prev Med* 04;39(5):985-91)

If similar results had been achieved using a pharmaceutical product, it would make headline news and become a number-one seller. It's a different matter, however, when it comes to a natural product like garlic. Earlier this year, scientists from around the world presented research at the American Heart Association meeting in Washington, DC that showed that garlic powder not only reduces calcification of the arteries but also reduces plaque formation by up to 40 percent—and can even dissolve existing plaque by 25 percent. However, the FDA still won't allow manufacturers to state that garlic powder can be effective in the prevention of cardiovascular disease—which remains the number-one killer in this country.

Although there are many facets and phases to cardiovascular disease, the underlying problem generally stems from the accumulation of plaque in the lining of blood vessels. As the plaque increases, it impedes blood flow and can result in heart attack and stroke. Efforts to prevent these problems—either through diet, nutritional supplements, or such drugs as the increasingly popular statins—all attempt to reduce the buildup of arterial plaque. In the constant search for new and better solutions, however, the power of garlic has somehow been lost in the shuffle.

The garlic used in the recent UCLA study was the Kyolic brand of aged garlic extract, and the dosage was 1,200 mg a day.

Kyolic is one of the best garlic brands on the market, and it's readily available at practically every health food store. I've been recommending aged garlic extract for years—not only for the prevention of cardiovascular disease but for lowering high blood pressure, limiting free radical damage, preventing cancer, and more. Garlic is one natural product where dozens of research studies have proven its effectiveness in preventing and/or treating a wide-variety of different problems.

### Chewing Your Way Out of the Hospital

SAN FRANCISCO, CALIFORNIA—At the most recent meeting of the Clinical Congress of the American College of Surgeons, researchers reported that chewing gum after intestinal surgery may be the best way to get out of the hospital sooner.

Following intestinal surgery, one of the most commonly occurring conditions is postoperative ileus—a temporary loss of bowel activity that limits a patient to sipping liquids and consuming ice chips instead of eating. Solid food during this initial period can result in constipation, pain, bloating, vomiting, and dehydration. Patients aren't allowed to go home until they can eat and drink normally and have had at least one bowel

## NEWS TO USE (CONTINUED)

movement. As a result, the patient often requires an extra day or two of recovery before being able to leave the hospital.

Researchers from the University of Texas Southwestern in Dallas monitored 102 patients who had undergone removal of part of their intestine. Half were given a stick of gum to chew for 15 minutes four times a day, and the other half were given only the usual sips of clear liquid.

Bowel movements returned to normal in 2.9 days among those chewing gum—in contrast to 3.5 days in those sipping liquids. They also left the hospital 4.4 days after surgery—in contrast to 5.2 days for the group not chewing gum.

No one is quite sure yet how chewing gum helps the bowel return to normal more quickly. It may be that the chewing process starts a cascade of digestive enzymes and events throughout the entire digestive tract so that the bowel begins to react more quickly than it does when given a liquid diet, which requires no chewing.

One of the researchers put the whole concept into perspective at the meeting. Dr. Harry Papaconstantinou commented, “For 30 cents for a pack of gum and two to three packs of gum for each patient, we’re talking about spending less than a dollar to facilitate discharge from the hospital one day earlier.” Daily hospital cost is estimated to be between \$500 and \$750.

Ever-increasing medical costs place an unprecedented burden on the financial state of our government and our way of life (Medicare is currently this country’s

largest entitlement program). Simple techniques like chewing some gum are definitely only a “drop in the bucket” when it comes to curtailing healthcare costs, but every little bit helps. More importantly, anything that can lessen the time you have to spend in a hospital is worth its weight in gold.

If you or someone you know ever has to undergo abdominal surgery where postoperative ileus is a possibility, don’t forget to take along some gum.

## Some Berry Good Prevention

OXFORD, MISSISSIPPI—It’s been known for a while that grapes and blueberries contain a beneficial compound called pterostilbene (TAIR-oh-STILL-bean).

It was found that pterostilbene’s lipid-lowering ability was superior to both resveratrol (the anti-aging compound also found in grapes) and the prescription drug ciprofibrate. On a cellular level, it works much like resveratrol in regulating fatty acid metabolism and fats in the bloodstream—helping to prevent the deposition of plaque in the arteries. (*J Agric Food Chem.* 2005 May 4;53(9):3403-7)

It becomes more apparent every day that blueberries and grapes are some of the best foods when it comes to protecting your heart and cardiovascular system. I hope you’re taking advantage of these findings by including them in your diet. In their natural form, they are inexpensive, safe, and effective. You can rest assured that the drug companies are actively working on isolating and synthetically creating these compounds to sell as prescription medications to the unsuspecting masses (along with their untold side effects).

*Continued from page 43*

You need just a couple of items: an inexpensive pair of goggles and some filtering material. My local welding shop sells a pair of round-lens welder’s goggles (also called brazing goggles) for less than \$10. Home Depot sells a similar item, although with rectangular lenses, for not much more.

A company called Lee makes sheets of filtering material called Primary Red #106 that has about the same filtering characteristics as the contact lenses used in the above study. You should be able to purchase this filter material at theatre supply stores and photography stores, or visit their Web site at [www.LeeFiltersUSA.com](http://www.LeeFiltersUSA.com) to find a list of dealers in your state that carry their products.

Once you have the goggles and the filter, you should remove the lenses from the goggles and use them as a template for cutting out the filter to make your new lenses. Replace the original lenses with the new lenses you cut from the filtering material and

you’re finished. It’s obviously not the ultimate cure for the problem, but the study indicates that it might be a very effective relief measure.

## Diet-Induced Migraines

Finally, keep in mind that food is undoubtedly the major trigger when it comes to migraine headaches. You can learn a lot by keeping a diary of your meals and any headaches that occur over a month-long period.

Watch for delayed reactions, particularly with food additives such as MSG (which might be listed as “natural flavor” or “hydrolyzed vegetable protein” on the label of any processed food), nitrites in cured meats, caffeine, sweeteners like aspartame, chocolate (which contains the chemical phenylethylamine), and alcohol. You should also avoid the amino acid tyramine, which is found in such foods as yeast breads, peanuts, beans (particularly pinto,

*Continued on page 48*

## FUMARIC ACID FOR PSORIASIS

**Question:** I've had a problem with psoriasis for as long as I can remember. It improves during the summer months when I'm out in the sun more, and it gets worse each winter. I've tried all types of creams, diet changes, vitamins, and detoxification steps, but nothing seems to work well. I haven't really noticed any particular foods that make the problem worse, but it's hard to tell. I refuse to take steroids. Can you suggest anything else?

—Julie M. Newark, New Jersey

**Answer:** Psoriasis, a condition in which skin cells grow at an unprecedented rate, is a very tough problem to treat. Under normal conditions, the life cycle of a skin cell is 311 hours—but it is reduced to only 36 hours with psoriasis. Thousands and thousands of new cells are created each day, leading to clumping, scaling, itching, and irritation.

Conventional treatments may provide temporary relief, but they are fraught with problems. They typically include coal tar ointments, drugs such as psoralens combined with long-wave ultraviolet light therapy, topical or systemic steroids, and other investigational drugs—such as methotrexate and synthetic retinoids.

Diet does play a role, but I'll admit it might be difficult to see any immediate cause-and-effect relationship. And, of course, food isn't the only thing that can cause your problem to flare up; stress, fever, smoking, hormone fluctuations, and infections anywhere in the body are others.

### What Goes In Shows on the Skin

When it comes to diet, eating the offending foods seldom causes an immediate flare-up. It might be 12 or 24 hours before a change is noticed. The general rule in this regard says that if you itch today then you probably consumed the offending food or drink yesterday. Keeping a food diary is obviously a good idea to help you determine which foods you can tolerate and which ones you need to avoid. (It's possible that you may be able to resume eating some foods once you have the problem under control, but which foods will vary from individual to individual.)

Some of the foods that have been shown to aggravate the problem include pork, alcohol, strong aromatic spices and seasonings (such as pepper, cinnamon, mustard, nutmeg, caraway, ginger, and cloves), walnuts, and peanuts (including such related products as peanut butter). Some dermatologists even recommend avoiding all nuts and nut products except for coconuts and almonds.

### A Fumaric Solution

Thirty-five years of continuing research coming out of Switzerland, Germany, Japan, and the Netherlands has shown that the natural compound fumaric acid (combined with the proper diet), is very promising in the treatment of psoriasis. In one multi-center European study utilizing fumaric acid, 70 psoriasis patients who completed the

study experienced an 80 percent decrease in severity over a four-month period. In another 285-patient study utilizing fumaric acid and dietary restrictions, psoriasis symptoms were reduced in 80 percent of the patients—with 52 patients experiencing complete and long-lasting disappearance of lesions as long as they adhered to the diet. (*Br J Dermatol* 05;152(4):597–615) (*Br J Dermatol* 98;138(3):456–60) (*Ned Tijdschr Geneeskde* 85;129(11):485–486)



While psoriasis is generally thought of as a disease of the skin, this latest research suggests that it may actually be a metabolic error that interferes with the body's metabolism of fumaric acid. Without going into great detail, fumaric acid is a natural substance present in every cell of the body. It is a by-product of what is called the citric acid cycle—the mechanism through which cells produce energy. A deficiency of fumaric acid leads to the accumulation of half-products or incomplete compounds that cause the skin lesions associated with psoriasis.

Fumaric acid is produced in the skin during exposure to sunlight. Individuals with psoriasis appear to have a biochemical defect preventing them from producing enough fumaric acid—which explains why you might notice an improvement in your condition during the summer months when you receive more sun exposure (and why ultraviolet light therapy may help). Unfortunately, as I'm sure you're aware at this point, these improvements are generally short-lived and the problem always seems to return.

I should mention that fumaric acid is considered to be very safe. In most studies where individuals started with smaller doses and worked their dosage up slowly, there haven't been any serious problems. Fumaric acid tablets/capsules lower the pH in the digestive tract, which can result in better digestion of your food. If this extra acidity is a problem for some reason, you can take the product with a little milk or additional water or tea (don't take it with coffee since that will only increase the acidity). In rare cases, fumaric acid may also cause the blood sugar to drop slightly. Diabetics may see an improvement in their diabetes and may need to adjust their medication.

The most common side effects reported with fumaric acid have been a mild, temporary gastrointestinal discomfort and a flushing sensation (a warm, tingling of the skin particularly in the shoulder and neck region that may move up to the ears)—which is similar to, but less intense than, the flushing experienced with niacin. Both of these reactions decrease over time with continued use of the product.

Unlike many therapies, the safety and long-term effects of fumaric acid have actually been studied. Researchers in the Netherlands investigated the



safety and effectiveness of fumaric acid with follow-up periods of up to 14 years. They evaluated 66 patients who either were using the substance or had been using it for an extended period of time. Forty-one had been using the product for a least a year, and twelve had been using it continuously between 10 and 14 years.

Side effects were somewhat common—73 percent of the users reported experiencing some side effect at some time—but they were mild and not problematic enough to warrant stopping the use of fumaric acid. The side effects included: flushing (55 percent), diarrhea (42 percent), nausea (14 percent), and stomach complaints (12 percent). The researchers concluded, “The present study indicates that fumaric acid esters can be considered as a safe, long-term treatment in patients with severe psoriasis.” (*Br J Dermatol* 03;149(2):363–69)

In a recent Italian study, 40 psoriasis patients were treated with fumaric acid for six months. A total of 33 patients (82.5 percent) achieved complete clinical remission—eight patients after three months and 25 after six months. Adverse effects—such as abdominal cramps and diarrhea—occurred in four patients who, for these reasons, interrupted their therapy. It was again concluded that fumaric acid was a safe, effective, and well-tolerated long-term oral therapy for psoriasis. (*J Dermatolog Treat* 04;15(1):23–26)

### The Right Stuff

Practically all of the studies have used fumaric acid esters. (An ester is formed by combining an acid with alcohol). Creating esters is a fairly common procedure in the pharmaceutical industry—either to help make substances more absorbable or to isolate specific components. In Western Europe, esters have been registered as pharmaceutical products. To date, those products aren’t available in the US. However, since fumaric acid itself is a natural compound (and can’t be patented or registered as such), it is readily available. So the recommended dosages I’m going to cover are for straight fumaric acid and not the esterified form being sold in Western Europe.

The generally recommended dosage for fumaric acid is to start with one 500-mg tablet/capsule per day taken in the evening with a glass of water, tea, or milk. Again, you may experience a flushing sensation within 20 to 30 minutes (on rare occasions, it could be as long as a couple of hours later). It will generally only last for 15 or 20 minutes, and it’s certainly harmless—it could even be welcomed as an indication that the product has begun to work.

Stay at the daily 500-mg dose for a week. If you notice improvement in your skin, remain at that dose. If not, then increase the daily dosage by one 500-mg

tablet/capsule. Again, give that dosage a week’s trial. Continue the process until improvement begins, then stay at that dosage level. The maximum daily dosage is 3,500 mg.

An excellent source for fumaric acid is Vitamin Research Products, 4610 Arrowhead Drive, Carson City, Nevada 89706. They can be reached at 800-877-2447, or on the Web at [www.vrp.com](http://www.vrp.com). They currently sell fumaric acid in 500-mg capsules. At last check, a 90-count bottle sold for just under \$30.

In many of the studies I’ve mentioned, it was recommended that the patients also avoid using the antibiotic drug Penicillin VK, which could further aggravate the problem. Other medications that reportedly will prevent skin improvement include beta-blockers and the blood pressure drugs known as ACE inhibitors.

You should also avoid the problem foods mentioned earlier until the lesions have cleared completely, you can then begin to systematically re-introduce one food at a time to see which are specifically problematic.

Also, when the skin clears completely, you may slowly begin to reduce the number of fumaric acid tablets/capsules. If you notice your skin itching again, you will have to return to the dosage that kept the problem in check. Keep in mind that it’s a metabolic disorder that may need long-term treatment to help keep it under control.

### Completing the Picture

Additionally, you may benefit by making sure you are consuming more omega-3 oils (flaxseed, fish oil, etc.). Some studies show that evening primrose oil is beneficial. The omega-3 oils, as I’ve discussed in the past, have anti-inflammatory properties, and most people have far too little of the omega-3s in their diet and too much of the omega-6s.

You might also benefit from including a combination of the amino acids that help detoxification through the liver. I’ve seen significant benefits by using 2 to 4 capsules daily (1 to 2 grams) of a blend of L-arginine, L-citrulline, and L-ornithine. The specific product is called Formula H/7, and it’s available from Jo Mar Laboratories, 583-B Division St., Campbell, CA 95008. Their number is 800-538-4545 and their Web site is [www.JoMarLabs.com](http://www.JoMarLabs.com).

Finally, there is no known deficiency of fumaric acid in the general population. In other words, if you don’t suffer from psoriasis, there’s no need for you to supplement your diet with fumaric acid.

# The Test of Time: *Hiatal Hernia*

20<sup>th</sup>  
Anniversary

**T**here is a big dome-shaped muscle called the diaphragm that separates the organs in the top part of your chest from the stomach and the other digestive organs in the bottom half. If there wasn't, we would be listening for the heart somewhere in the area of the bellybutton after working on our feet all day. Well, in the back part of the diaphragm, there's a button-sized hole that allows the esophagus to go from the throat to the stomach. Sometimes this hole gets enlarged for one reason or another and, if it does, the stomach can worm its way up into the hole—a condition known as a hiatal hernia.

There is something that can be done! It's not a foolproof test, but some doctors who screen for a hiatal hernia have their patients take a deep breath and hold it for 40 seconds. If you can't hold your breath for that long, and there are no other problems, a hiatal hernia is a possibility.

If the stomach is stuck up in the hole of the diaphragm, then the first order of business is to get it out. This can be done in two ways. I've had my patients with this problem drink about a glass of either room temperature or slightly warm water when they get out of bed first thing in the morning. (No coffee, no tea, no juice, no cold water—just warm water.)

While standing, bring your arms straight out from your sides and bend your elbows so your hands are touching your chest. Then stand up on your toes as high as possible and drop. You should get a pretty good jolt. Drop down like this 10 times in a row. Then, while standing with your arms up, pant short quick breaths for about 15 seconds. That's it.

The warm water acts like a weight in the stomach. Being warm, it doesn't cause the stomach to cramp. Instead, it relaxes it. Spreading your arms stretches the diaphragm and opens up that hole in the back. Dropping down on your heels jerks the stomach out of the hole and the panting tightens up the diaphragm muscle to close the hole.

If you have a hiatal hernia, you need to do this exercise every day—not just until everything feels normal. It will also strengthen the area, and make the hiatal hernia less likely to come back. [Since I first wrote this article, I have learned of one case where a woman was able to hold her breath for longer than 40 seconds even though she had a hiatal hernia. She used this technique, which solved the problem immediately.]

*Tip from Vol. 1, September 1985*

*Continued from page 45*

lima, navy, and Italian), aged cheeses, chicken livers, pickled herring, canned figs, and seeds (particularly pumpkin, sesame, and sunflower).

Also be wary of perfumes, shampoos, hair conditioners, hair sprays, deodorants, and other personal products. I know a woman who always experienced extremely serious migraine headaches three or four hours after being exposed to a particular hair conditioner at the salon where she had her

hair done. I know of others who failed to make the proper connections because the triggering agent was a perfume or other product that they had used repeatedly for years. As I mentioned at the beginning of this article, a migraine headache is one ailment where it pays to be a good detective.

Take care,

*Dr. David Williams*

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**.
- To sign a friend up for *Alternatives*, call **800-219-8591**.
- Sign up for free e-mail dispatches at [drdavidwilliams.com](http://drdavidwilliams.com).

Service Code  
45358S