

Alternatives[®]

FOR THE HEALTH-CONSCIOUS INDIVIDUAL

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Dr. David G. Williams It's certainly taken long enough, but food manufacturers are finally phasing out the use of hydrogenated oils. It wasn't outcries from the public, or a dramatic change in scientific opinion, but rather legislation that finally triggered the change. The general public probably couldn't care less, as long as no one takes their French fries away. Hydrogenated oils, as you know, contain trans fatty acids, which have repeatedly been linked to heart disease and other problems. It took decades for the cutback in hydrogenated oils to happen, and the deaths and suffering caused by consuming these trans fats will never be measured.

Unfortunately, the saga continues. Many food companies, particularly those using baker's shortening and margarine, have substituted what are called interesterified fats for the hydrogenated oils. Just like hydrogenation, the process of esterification produces molecules that are not normally found in nature.

The whole situation is honestly surreal to me. It took decades of clinical studies, and millions of dollars, to finally convince the powers that be that hydrogenated oils were harmful. Now, they are being replaced with another unnatural, chemically altered, fat-like compound that will undoubtedly be just as problematic. Every high school biology student learns that our bodies use dietary fats not only as fuel, but also as building blocks to help form cell membranes, hormones, insulation for nerve cells, et cetera. If you feed your body artificial, fat-like compounds that have never appeared in nature before, there are going to be problems—big problems.

The companies that make these products have to know this. I'm sure their accounting departments have already figured roughly how much profit can be made before these interesterified fats are linked to cardiovascular disease, diabetes, and God knows what else. After all, with hydrogenated fats they sucked the life and money out of

Trading One Poison for Another

generations before that scam came to a halt. All it took to build initial credibility for hydrogenated oil products was a few industry-funded studies and some slick advertising. Remember the ads featuring "heart-healthy" hydrogenated corn oil margarines? I haven't seen any lately.

The Proof Is in the Pudding

There was a recent study in Malaysia that compared the effects of three different diets: a trans fat-rich diet using partially hydrogenated soybean oil; an interesterified soybean oil diet; and a diet rich in natural palm oil.

Both the trans-fat diet and the interesterified-fat diet had a significantly more negative impact on the beneficial HDL form of cholesterol than did palm oil. Additionally, those on the interesterified-fat diet had impaired glucose metabolism and utilization, while the other two diets didn't cause these changes. Both of these problems are associated with increased diabetes risk. (*Nutr Metab (Lond)* 07;4:3)



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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

The study triggered a lot of criticism, particularly from Archer Daniels Midland—a company that sells interesterified fats and other oils. They pointed to other studies that indicate interesterified fats cause less of a cholesterol problem than hydrogenated oils do. Others were also critical that the study didn't compare "apples to apples" since the three diets were so different.

I'm sure this study wasn't perfect. Most aren't. But common sense should tell you this stuff is going to be a problem. Again, with the right studies and slick advertising nobody will be the wiser for probably a couple of decades. With so many other factors contributing to the upsurge in diabetes (high-fructose corn syrup, obesity, sugar consumption, et cetera) it will take that long before anyone cares enough to even look at the connection.

Don't follow the herd on this one. You'll end up just like the hundreds of thousands (or millions) who suffered needlessly or died prematurely after buying into the "crock" that margarine and other hydrogenated-oil products were actually good for the heart.

Stick with natural products that your body can actually utilize. These include oil/fat products such as butter, nut and nut oils like coconut or macadamia nut oil, seeds and seed oil, fish and fish oils, and olive oil. And, believe it or not, the more I research lard, the better it seems when compared to hydrogenated or interesterified vegetable oils. One of the primary problems with lard seems to be the processing and preservatives being used, rather than the fat itself.

Take Two, and You Won't Be Able to Call in the Morning

Over the last couple of decades, aspirin has been promoted as a safe way to prevent everything from heart attacks to colon cancer—all with the blessings of our FDA. As happens eventually with all drugs, though, the truth has finally emerged: aspirin isn't totally safe, and, for many people, the side effects far outweigh any possible benefits.

One of aspirin's primary uses has been to "thin" blood. More accurately, it inhibits blood clotting through its effects on blood platelets. Blood that's "thinner" flows more freely. This, in turn, reduces the workload of the heart and allows blood flow to occur at lower pressures, resulting in a lower risk of stroke and heart attack.

A while back I wrote about the dangers of aspirin resistance. [*Editor's note: See Vol. 11, No. 18 for more about aspirin resistance.*] More information is beginning to emerge. A recent review of 17 clinical studies found that the simple act of taking aspirin actually increases the risk of stroke, heart attack, and death in individuals who are "aspirin-resistant."

In the 2,367 individuals reviewed, 618 were found to be aspirin-resistant. Roughly 33 percent of this group experienced a stroke, heart attack, or other vascular incident during these studies. This compares to only 15 percent of individuals who were aspirin-sensitive.

If those numbers aren't frightening enough, then maybe the differences in death rates can help illustrate the problem. During the studies, 5.7 percent of the aspirin-resistant individuals died, compared to only 1.3 percent of those who were aspirin-sensitive. (*International Stroke Conference; Feb 2007; Abstract P405*)

From what we currently understand, men are more likely to be aspirin-resistant. Also, individuals who are aspirin-resistant don't seem to be helped by the blood-thinning drug Plavix (clopidogrel). For some reason, the blood-clotting ability in these individuals is able to overpower the anti-clotting effects of both of these drugs, which compounds the problem and leads to a very significant increase in the risk for stroke, heart attack, and death.

You Do Have Choices

I'm still in shock at this point that this information hasn't become front page news. The public, as well as most doctors, still believe that aspirin is a relatively harmless over-the-counter medication. Millions of people routinely take it on a regular basis, with



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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.

RESOURCE UPDATE—TONGKAT ALI

It's been almost four years since I discussed how the herb *tongkat ali* had been traditionally used to increase testosterone levels and libido. At the time I gave a source in Indonesia where you could order the herb. Several readers reported very positive responses from using the herb, so, as usual, I continued to follow the research and any updates concerning its availability. I'm happy to report that tongkat ali is now much easier to obtain in this country.

The company SourceOne Global Partners is continuing to fund research studies on the herb and has also now introduced its tongkat ali product called ActivAli.

If you recall my earlier article, I discussed that tongkat ali use provided other benefits in addition to increasing libido. SourceOne has completed a study with the University of Malaya in Kuala Lumpur showing that their product significantly increases testosterone levels, and at the same time reduces cortisol—the body's

primary stress hormone. This new research may be the start I was talking about years ago that will give tongkat ali the credibility to be recognized as more than just a sexual-enhancing herb. Traditionally, it has been used to treat numerous other problems such as migraine headaches, labor pain, malaria fever, chronic fatigue, and even various forms of cancer.

If you're interested in trying a quality tongkat ali product without having to travel to Malaysia, SourceOne products should be in most health food stores by now under either the ActivAli or LJ100 Tongkat Ali labels. If you can't find them give the company a call at 800-755-4996.

This is one herb I think we'll continue to hear exciting things about for years to come. Research studies are just beginning to verify in scientific circles what traditional healers in Malaysia, Indonesia, Vietnam, Thailand, and Japan have known for centuries.

their doctor's blessing, in an attempt to prevent stroke and heart attack. Based on the picture that's emerging, this "preventive" aspirin use has probably been responsible for thousands of unnecessary deaths and the trigger for hundreds of thousands of heart attacks and strokes. Can you imagine the uproar that would occur if an herb or vitamin was even remotely linked to such problems?

If you continue to take aspirin routinely, have your doctor test you for aspirin resistance—particularly if you have other risk factors for heart attack or stroke, such as a family history of either condition, obesity, diabetes, or high blood pressure.

And don't forget you have safe, effective alternatives to aspirin. Bromelain is a long-time favorite that provides most of the cardiovascular benefits of aspirin without the side effects. It now looks like resveratrol is another.

And, just recently, researchers have found that certain forms of chocolate (the darker and closer to pure cocoa the better) can provide the same blood-thinning and heart attack protection as aspirin. We're definitely not talking about milk chocolate, which is highly processed and loaded with sugar.

The flavonols in cocoa can help improve blood flow, and the amount needed isn't that much. The candy company Mars has done extensive research into the benefits of cocoa. They now have a line of consumer products called CocoaVia that are rich in beneficial flavonols, but those products still contain more refined sugar than I'd care to recommend.

I never thought I would be recommending chocolate bars. As I've said before, I'm one of the few people on the planet that really doesn't care for chocolate. Many people do enjoy it, though, so you might as well get some health benefit out of your indulgence. Ideally you want a chocolate product that contains at least 60 percent cocoa solids (it'll say so on the label) and that has been minimally processed (alkali or "Dutch" processing removes much of the flavanol content from the cocoa powder).

When you combine the problems associated with aspirin resistance with those of aspirin-induced gastrointestinal bleeding and macular degeneration, it should become apparent that it isn't a drug to be taken lightly, particularly on a routine basis. Just because it's "over-the-counter" doesn't mean it's safe for everyone.

The Mouth Is the Window to the Sole

Whether I'm trying to formulate a more effective supplement, researching the effects of various supplements, or studying the dangers of toxins, one factor always comes into play: the regularity of exposure.

For example, taking a one-time dose of 800 IU of vitamin E might provide some health benefit for a day or even two, but the overall effect would be short-lived. The same holds true for other vitamins, minerals, and supplements; exercise; eating a cleaner diet; et cetera. The greatest benefits are obviously

CANKER SORE CARE

Question: I have problem with canker sores and have checked all of the back issues of *Alternatives* that I have for a solution. My collection doesn't go back that far, but I've yet to find anything. Could you help?

—Marian T.
Austin, TX

Answer: Readers have successfully reported using alum, in the form of either powder (purchased from the drug store) or styptic pencils (the ones used to stop shaving cuts). (Alum, by the way, is the compound added to "mouth puckering" gum you find in magic and fun shops.)

I've seen the best results with two particular items, propolis extract and licorice products.

A drop of propolis extract placed directly on the sore and allowed to dry works most of the time, if you catch the sore immediately. The problem with the propolis is that it's very sticky and messy. It's like putting tar on your lip: It's unsightly, and it's hard to remove—particularly if it gets on your teeth. And, it seems to work best if you catch the canker sore when it first forms. I get my propolis from GloryBee Foods. A one-ounce bottle costs about \$7 and will last forever. You can contact GloryBee at www.glorybee.com or 800-456-7923.

In India, I learned about using a mouthwash made from DGL (deglycyrrhizinated licorice). DGL is the product that works to heal stomach and intestinal ulcers as well. DGL is now readily available in health

food stores and through many manufacturers. To make the mouthwash, simply add about 200 mg of DGL to 200 mL of water. The exact proportions aren't that critical, so you can add a little more if you want. Just rinse your mouth about four times a day, and don't drink anything afterward for several minutes.

A new product I particularly like takes advantage of the healing powers of licorice without the hassles. It's called CankerMelts.

CankerMelts consists of an oral patch that you place directly over the sore, as soon as it starts to form. Unlike some of the other products on the market, it stops the pain within about 10 minutes without numbing the area. The disc dissolves but continues to provide relief for anywhere from 2 to 6 hours. It's a neat product.

A recent study showed that those using the patch had complete pain relief after three days, and most sores shrank to one-tenth their original size after seven days—while untreated sores continued to grow. In another study, it was found that 26 of 27 canker sores healed in three days or less when treated with the product, compared to a normal healing time of 10 to 14 days if left untreated.

CankerMelts are made by Orahealth Corporation, and a box of 18 patches costs about \$10. The product is available in CVS and other pharmacies nationwide, or you can order it online at www.dentist.net.



obtained with consistency. I'm sure this concept is pretty elementary to grasp.

On the flip side of the coin, however, I don't think most people take seriously enough the extreme dangers of constantly being exposed to even minor amounts of toxins. Most research doesn't focus on this problem, because it would require following the subjects for years if not decades. Additionally, hundreds of other possible factors would have to be eliminated from the equation.

Just like having a steady supply of vitamins or minerals can have a major role in preventing disease and illness, a steady exposure to toxins plays a major role in causing disease and illness. One of the reasons I favor drinking distilled water is that this simple act lessens your chance of slowly poisoning yourself, constantly stressing your immune system, or breaking down your detoxification abilities. Drinking even very minute amounts of pesticides, herbicides, toxic chemicals, et cetera, can lead to serious problems if done over a lifetime. Obviously, the concentration of tox-

ins are higher, but a decades-long habit like cigarette smoking or a lifetime occupation around pesticides will take its toll.

Your Personal Superfund Site

One of the most under-rated sources of toxins and stress to the body comes from periodontal or gum disease. It's a problem that exists 24/7, and often for decades. If you had a festering sore on the back of your hand for 20, 30, or even 50 years, it would get your attention. Periodontal disease, which releases a constant trickle of toxins and infectious bacteria into your bloodstream, somehow gets totally overlooked. Your body's immune and detoxification systems, however, can't overlook the problem. They face a never-ending battle that strains both their resources and your ability to fight other infections and repair damage elsewhere in the body.

I've reported on, and I'm sure you've read, the studies linking periodontal disease to the number-one killer in this country, cardiovascular disease. That direct link has been well established. [Editor's note: Visit the Subscriber

Center of Dr. Williams' Web site, www.drdauidwilliams.com, to see his program for oral health.]

New research has now confirmed that periodontal disease is a major risk factor for pancreatic cancer.

The health of 51,529 men was monitored over a 16-year period. The study began in 1986 and involved male health professionals ages 40 to 76. By 2002, a total of 216 patients had been diagnosed with pancreatic cancer. Of those, 67 percent had periodontal disease. After adjusting for known risk factors such as cigarette smoking, insulin resistance, type 2 diabetes, and obesity, the researchers determined that periodontal disease increased the risk of developing pancreatic cancer by 64 percent. (*J Natl Cancer Inst* 07;99(2):171–175)

Express Connection to the Teeth

It would be interesting (frightening would probably be a better word) to determine what other cancers and diseases are directly linked to periodontal disease. I'm sure that cardiovascular disease and pancreatic cancer are only the tip of the iceberg. In the early 1900s, the dentist Dr. Weston Price carried out numerous well-documented experiments demonstrating the connection between dental infections and all forms of serious diseases throughout the body.

He suspected that many degenerative diseases were, in fact, directly connected to bacterial infections in teeth. Dr. Price followed a path reminiscent of earlier studies where doctors removed, identified, and cultured bacteria from sick patients and then injected it into healthy animals, to determine if bacteria actually caused the same disease.

Dr. Price took extracted teeth from patients in his practice and placed the tooth under the skin of rabbits. In practically every case, he found that the rabbits would develop the same health problems and degenerative diseases found in the patients. Even more surprising, in many cases he could remove the tooth and the animal's health would return to normal. The number and variety of diseases he found to be involved was amazing. (Dr. Price's 1939 book, *Nutrition and Physical Degeneration*, explains his work and findings in great detail.)

Periodontal disease is one disease that can be effectively treated and kept under control with proper dental hygiene and other procedures. It amazes me just how much some people will spend on various supplements in an effort to "boost" their immune system so they can fight off infections while, at the same time, they allow a chronic infection to exist unchallenged right under their own nose.

Open Wide, and Let's See Your Hip

Periodontal disease can predict health in other areas as well. A group of dentists with the Academic Center for Dentistry in Amsterdam have discovered that dental x-rays can be a diagnostic tool for osteoporosis. As I've written before, the health of your jaw is an early indicator of the health of your entire skeleton. Teeth are living tissue just as bone is, and any process that affects your bones will affect your teeth and the surrounding area, too. Loose teeth, in particular, indicate bone loss in the jaw, but simple gum disease can be the first sign of osteoporosis. [*Editor's note: See Vol. 10, No. 3, for more about the connection between dental health and bone health.*]

Standard screening efforts for osteoporosis tend to be expensive and not readily available for large groups of people. (The heel-measurement devices found in drug stores and used in community screenings are not sensitive enough to give a true reading.) As a result, the tendency is to refer women for testing only if there's some reason to believe that osteoporosis is present.

Currently, unless a woman has broken a bone, the only real indicators for osteoporosis are age and body type (the risk increases with age, and thin women are at higher risk—as are women with slender bone structure). Researchers found that certain measurements from dental x-rays could improve the prediction of osteoporosis by 10 percent or more. In the study, 661 women had their bone mineral density measured by the current standard, DEXA analysis, and the results were compared to those of dental x-rays from the same women. Analysis showed that using the dental x-rays was both sensitive and specific (that is, it detected osteoporosis in women who really had it, and didn't show osteoporosis in women who didn't have it). (*International Association for Dental Research, 85th Scientific Session, March 22 2007 Abstract 0239*)

I can think of two advantages to using dental x-rays in this manner. The first is that nearly everyone has them on a regular basis, so it's not a big deal to add in a check for osteoporosis. The analysis of the x-rays is done by a software program, so the dentist doesn't have to spend much additional time per patient.

The second advantage is that there's little additional expense in the use of dental x-rays. DEXA scans require the use of specialized (and expensive) equipment, and providers of that service charge accordingly. Your dentist would need to make only a nominal investment in the software program.

One simple solution I recommended in the September, 2003 article is xylitol. Two Finnish studies showed that,

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NEWS TO USE FROM AROUND THE WORLD

A Crick in the Neck Can Break Your Heart

CHICAGO, ILLINOIS—A simple chiropractic adjustment could reduce your blood pressure. In a trial conducted at the Rush University Hypertension Center in Chicago, a group of 50 patients received either an adjustment to the upper cervical vertebra, known as the atlas, or a sham procedure designed to imitate the real thing but produce no benefit.

Those who received the real adjustment had an average decrease of 17 points in their systolic blood pressure (the upper number) and 10 points diastolic (the lower number). These results are similar to what can be achieved by typical two-drug combination therapy for hypertension. The decrease in blood pressure lasted for at least the eight weeks of followup in the study. (*J Hum Hypertens* 07;(Mar 2):Epub ahead of print, PMID 17252032)

The researchers said that they didn't know how the adjustment worked, but patients who received an adjustment of the atlas for other reasons had spontaneously reported a decrease in blood pressure. The effect likely is due to the fact that so many parts of the nervous system and cardiovascular system are packed together at that point in the neck. The atlas is the uppermost vertebra, and is held in place by soft tissue such as ligaments and muscles—instead of being interlocked with other vertebrae the way all the others are.

You can check yourself to see if a misaligned atlas could be causing your high blood pressure. Simply lie on your back on a hard surface—the kitchen floor will do fine—in bare feet. Ask a companion to compare the position of your heels. If they're even, then the atlas isn't out of alignment. If they're uneven, then your companion should watch what happens to your heels as you turn your head from side to side. If their relative position changes as your head moves, then the atlas is out of alignment and an adjustment could help.

If you do choose to try a chiropractic adjustment, and you're already taking medication for your blood pressure, make sure your physician knows what you're planning and can adapt your dosage as necessary.

Supplements 1, Surgery 0

NEW ORLEANS, LOUISIANA—Here's another bit of information you won't be seeing many places. Researchers from Buffalo General Hospital, in Buffalo, New York, recently compared the outcomes in patients who received various forms of treatment for heart blood vessel blockages. They compared patients who received percutaneous coronary interventions (PCI) to those who received only various medications—such as aspirin, statins, blood thinners, ACE inhibitors, cal-

cium channel blockers, and beta-blockers. (PCI, also known as angioplasty, is a surgery in which a catheter is snaked into the blood vessels of the heart, usually through an artery in the leg. A small balloon is then inflated to "open" the artery and a mesh tube called a stent is inserted to help keep the artery open.)

After evaluating seven years of results, the researchers found that both groups of patients had practically the same number of heart attacks and strokes. The surgery was also no more effective at preventing future cardiovascular events or at reducing the death rate. The only benefit of the surgery over the medication therapies was that it reduced the amount of angina or chest pains. (*American College of Cardiology 56th Annual Scientific Session 2007*)

If anything, this study further supports the fact that one of the best therapies for cardiovascular disease is to change one's lifestyle (quit smoking, increase exercise), improve the diet, and use proper supplements.

Bromelain, garlic, vitamins E and C, and omega-3 fatty acids all reduce platelet clotting activity. And a recent study found that tomatoes do so as well.

A tomato extract equivalent to six tomatoes was given to 23 healthy volunteers. Platelet aggregation was reduced significantly in just three hours and the effect persisted for 12 hours. (*Am J Clin Nutr* 06;84(3):570–579)

I wouldn't expect anyone to eat six tomatoes a day, but including tomatoes in your diet—along with products like low-sodium V8 juice, tomato paste, and supplements like the tomato extract Lycomato—plus other foods and supplements that decrease platelet activity is the way to go. And keep in mind that one of the biggest culprits that increases platelet activity and contributes to cardiovascular disease is sugar.

We know that, in the long run, lifestyle changes and proper nutrition are more effective than the use of the drugs listed above—and, more importantly, they address the root cause of the problems instead of just the symptoms. By correcting the cause, the opportunity exists—particularly in cardiovascular disease—to actually reverse the damage that has occurred.

It is estimated that more than one million PCIs are performed each year in this country. Unfortunately, I doubt this study or a hundred more like it will cause that number to drop any time in the near future.

Too Much of a Good Thing

Before I leave this topic, there's one other item that I need to mention.

If you look at the list of medications I mentioned in the first paragraph, you'll notice that several are used

NEWS TO USE (CONTINUED)

to lower blood pressure. It seems that one of the first things doctors do when treating cardiovascular disease is put the patient on drugs to lower their blood pressure. The idea is to lessen the load on the heart to keep it from failing. Many doctors fail, however, to stress the importance of not letting blood pressure fall too low. If you're being treated for cardiovascular disease, this is one thing you need to be aware of.

Many people with high blood pressure—and practically all those who have cardiovascular disease—have some degree of arterial narrowing and/or clogging, which restricts or limits blood flow. In such instances, for your body to maintain adequate blood flow or

oxygen delivery to the tissues (heart, brain, kidneys, et cetera), your blood pressure must be high enough. Research has shown that when your diastolic (the lower or second number) falls below 80, it may not be high enough to properly circulate the blood. In fact, if it falls below this point the chance of having a heart attack and death increases—and when it falls below 70, the numbers increase very significantly. (*Ann Intern Med* 06;144(12):884–893)

When it comes to lowering blood pressure, more is not always better. If you monitor your own blood pressure, keep this in mind and alert your doctor if it begins to fall too low.

(Oral health continued from page 181)

in mice, xylitol could maintain bone mineral density—or even increase it. The dosage of xylitol used in those studies translates to about 40 grams a day. That might seem like a large amount, but it's only three teaspoons. And if you take sugar in your tea, simply replacing it with xylitol will give you a good part of the dosage. Of course, weight-bearing exercise is probably the best preventive. The stress on your bones stimulates biochemical reactions necessary to take old bone away and replace it with new.

That Shower's a Knockout

Years ago, I cautioned against using antibacterial soaps. Hopefully, you listened.

One of the main problems with antibacterial soaps is that they can contribute to the current problems we're having with mutated strains of bacteria that are antibiotic resistant. While you may kill off most of the "bugs," the ones that are able to survive go on to produce a stronger, more resistant new generation. But growing your own crop of antibiotic-resistant superbugs in your own home isn't the only problem.

Researchers have discovered that triclosan, a widely used antibacterial agent, reacts with chlorine in water to form several byproducts—including chloroform.

Chemists at Virginia Polytechnic Institute checked the levels of chloroform exposure from showering or washing dishes with various antibacterial soaps. Using triclosan-containing products increased chloroform exposure to one's airways and/or skin by as much as 40 percent over the allowable concentration in tap water. (If your water is chlorinated, chloroform is formed when chlorine reacts with any organic material in the water.)

Chloroform exposure has been shown to practically double the risk of bladder cancer. And mothers exposed to higher levels of chloroform in drinking water give birth to babies with lower birth weights and an increased number of birth defects, particularly congenital heart defects, than mothers who are exposed to lower levels. It should go without saying that young children, as well as anyone with a compromised immune system, would be more susceptible to potential problems caused by chloroform exposure.

In the 1800s, chloroform was routinely used for anesthesia. The practice stopped when it was discovered that the chemical could cause liver dysfunction and heart failure, among other things. If you have respiratory or heart problems, long showers in heavily chlorinated water probably aren't something you should be doing.

Get rid of the antibacterial soaps. We used to be satisfied with merely washing germs off our skin, a perfectly adequate strategy—and one that can be accomplished with ordinary soap. If you're looking for more protection, I recommend the occasional use of soap made from the neem tree. This plant is a native of Burma and India, but it's been transplanted to other tropical areas such as Central America. People in India use neem for everything from insect repellent to toothpaste. While neem isn't specifically an antibacterial, it does clean your skin without stripping away the protective oils that keep bacteria from invading in the first place. Neem soap is available from the Ayurvedic Institute, at www.ayurveda.com or 505-291-9698.

Ideally, don't drink chlorinated water. Distilled or natural, clean, deep, uncontaminated well water would be my choice, if available. Carbon filtration also helps. You can also add some powdered vitamin C to chlorinated water and let it sit for a while before drinking to help get rid of the chloroform.

As for showering, besides filtering the water, the most practical thing to do is at least run the bathroom exhaust fan, if there is one. Running it during the shower and for a time afterward was shown to decrease chloroform inhalation by as much as 30 percent.

It's not surprising that cancer rates and various neurological problems have been on the rise in this country, considering just how much exposure we have to various chemicals and pollutants these days. I certainly don't think constant paranoia is the answer, but we should be more aware of our surroundings and the routines we develop. And the use of antibacterial soap is one routine that needs to be eliminated.

Alternatives for a Changing World

I've said at times that I feel like *Alternatives* is as much a survival letter as it is a health publication. Strangely, this seems to become more true every year. You would think that with increased medical technology, the Internet, and "advances" in pharmaceuticals, this wouldn't be the case. But if you read between the headlines, it's really not hard to understand why things have turned out this way.

Medical technology is focused on treating problems, not on preventing them. The greatest profit potential definitely lies in treatment. The Internet has been a godsend in the dissemination of health information. Separating the substance from the advertising and propaganda, however, is an ever-increasing chore.

A few weeks ago, *60 Minutes* did a damning exposé on the pharmaceutical industry that probably didn't shock anyone. Although the pharmaceutical business is corrupt, it seems to have full support up to the highest levels of our government. Everyone seems to know about the problem, yet accepts it as normal. Our own government agencies that were formed to help protect the public's interest and be the watchdogs over the drug companies have literally sold out to the pharmaceutical industry.

The survival aspect comes into serious play when we become the sole protectors of our health. That has certainly become the case today.

Our available food supply becomes more contaminated and modified each and every year. The interesterified fat research I mentioned earlier is just the latest example.

Our country is one of the few civilized ones that long ago abandoned their civil defense shelter program and has no plans to reinstate one. Back when I was in school, the program consisted mainly of what's known as "shelter in place," where people would be hidden away with a supply of food and water—hopefully enough of both to last until the hazard had passed.

Now, a vital part of a comprehensive civil defense program, one that was likely not even considered back in the 1960s, is protection against outside agents. Two drugs, one proven to successfully treat radiation exposure from a nuclear blast and the second, an anthrax vaccine, were to be purchased and stockpiled by the US government for possible civilian use under Project BioShield. Acquisition of both have been unexpectedly dropped in the last six months.

These are only some of reasons I report on such a wide variety of health concerns and try to provide exacting details on what you can do to protect yourself and those you love.

Now, more than ever, is the time to improve your diet (shop organic or start a garden if you're able), start an exercise program, and stay informed. In most cases, it's what my dad would call "cheap insurance." And probably the most positive aspect of being better informed and taking steps to preserve and protect your own health is knowing that these same steps that improve the length of your life will also improve its quality.

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.
- If you are a licensed health professional and would like to learn how to begin reselling MHN supplements to your patients, please e-mail practitionerinquiries@davidwilliamsmail.com.
- For back issues or reports, call **800-718-8293**.
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