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Who's Watching Out for You?

As you probably know, part of my research effort involves reading a small mountain of publications each week, some related to health and some not. The health publications range from obscure foreign newsletters to the latest health statistics from the US government. Many alternative health publications have a very strong bias to their reporting; I expect that from independent, subscriber-financed sources. My newsletter is an obvious example. I'm highly biased toward the use of natural remedies and treatments. Through your subscriptions and support, that's in essence what you pay me to write about. Reports and recommendations from taxpayer-funded agencies, however, should be a different matter.

It might be hard to convince anyone at this point, but agencies like the FDA (Food and Drug Administration) and their employees were established to "work for us." We pay their salaries. Their sole underlying reason for existence is to look out for us and protect our health by ferreting out the truth and making sure we're aware of all the facts regarding health remedies, drugs, foods, and treatments. It stretches the imagination, however, to believe that our FDA could, or ever did, play that role. In reality, they've become nothing more than a heavy-handed mercenary of the pharmaceutical industry's marketing departments.

I've tried to give the FDA the benefit of the doubt over the years, but it seems like every chance they get to do the right thing, they find a way not to. Their stance on fish oil supplements is the latest example.

For years, I've been warning about the dangers of widespread omega-3 imbalances in this country. The research is there, and the "writing on the wall" has been there for decades. The consumption of omega-3 fatty acids must be in balance with our consumption of omega-6 fatty acids if we expect to stay healthy.

As you recall, our bodies need both types of fatty acids, but an overabundance of omega-6 fatty acids promotes inflammation in the body. The health problem you experience depends on where the inflammation takes place. Omega-6-induced inflammation in the bronchial tubes can result in asthma. In the intestinal tract it can result in irritable bowel problems and/or leaky intestinal walls and food allergies. If it's in the joints, one may experience rheumatoid arthritis.

The Heart of the Matter

One of the most common manifestations of an omega-3/omega-6 imbalance is cardiovascular disease. This group of conditions, including high blood pressure and congestive heart failure, rapidly became the number-one killer in this country a few decades ago—largely due to changes in our consumption of fatty acids.

Foods rich in omega-3s, such as grass-fed beef, wild fish, seeds, and eggs, fell out of favor. Cattle were moved from the pasture to the feedlot and fed omega-6-rich corn. Fish farms using omega-6 grains for feed became efficient and popular. And eggs were shunned after being falsely accused of raising cholesterol levels.



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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

Processed vegetable oils (soybean, corn, safflower, sunflower, canola, et cetera), which are high in omega-6 fatty acids, quickly infiltrated the food supply. Not only are they used for cooking and frying at home (with the endorsement of the American Medical Association and American Heart Association), but restaurants, fast food chains, and food manufacturers adopted them as well. Even when these oils aren't hydrogenated, they still upset your balance of fatty acid intake.

Maintaining the proper balance between your omega-3 and omega-6 fatty acids is just as important now as it was 10 or 15 years ago when I first talked about it. Fish oil supplements are one way to help do that. As I mentioned earlier, adding flaxseed, flax oil, fish, grass-fed beef, green algae like spirulina, and eggs, while eliminating the vegetable oils, will go a long way toward achieving a better balance. Fish oil supplements and/or freshly ground flaxseed are good forms of insurance in this area, and I highly recommend both.

The Shark in the Fish Tank

Now, decades later, *after millions of people have suffered and died from a lack of truthful information*, our FDA has recently given approval to one company (Reliant Pharmaceuticals) to sell their particular fish oil product (Lovaza) as a prescription drug to lower triglycerides. These blood fats are a primary risk factor for cardiovascular disease. Keep in mind that the FDA was careful about not approving or admitting that all quality fish oil supplements could successfully lower triglycerides, but only one product. By giving this one company's product prescription status, our employees at the FDA have not only given this company a license to steal, they have once again shown that they have absolutely no interest in supporting the public's health and well-being.

Now if a doctor prescribes fish oil to a patient, the insurance company will pay only if it's for this particular product. The last time I checked, a month's supply of the fish oil "drug," Lovaza, ran about \$200—compared to \$20 or even less for an equivalent high-quality, non-prescription fish oil product.

After this company received FDA approval to market fish oil as a drug, in the first 9 months of 2007 (through September) they sold \$206 million worth of the product. (It's obvious that the only ones paying these exorbitant costs for fish oil would be unsuspecting patients and insurance companies that are forced to do so because it's the only one classified as an FDA-approved drug.)

There may be no connection, but it certainly seems fishy to me (pun intended) that in December, the drug giant GlaxoSmithKline bought Reliant—which had only three other products besides the FDA-approved fish oil, and old-fashioned products at that—for a whopping \$1.65 *billion*.

Along with giving the company a license to steal, our FDA has allowed them to market their product using these words: **"Dietary supplements are not substitutes for Lovaza. Every other omega-3 product is a dietary supplement, which means it is not approved for the treatment of any specific disease or medical condition, like very high triglycerides."**

(Note the wording here. The statement isn't that dietary supplements don't work, it's that they aren't *approved*. As an *Alternatives* reader, you're certainly not the type of person who needs government approval when it comes to something as important as your health.)

It's a marketer's dream come true to be able to legally imply that only FDA-approved fish oil products lower triglycerides. But knowing that the FDA will bring the full wrath and power of the federal government down upon any competitor that tries to make a similar claim is priceless (or at least worth billions).

It's a shame that in an election year candidates aren't being asked to comment on situations like this. It would be nice to see the politicians squirm, but I doubt much else would happen. As a society, the issue of accountability just doesn't seem to be that important anymore. There's much greater interest in learning the details of someone else's personal life than in substance. I realize that I'm preaching to the choir when I tell you that we can't depend on any person, party, or agency to preserve



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HEALTH HINTS FROM READERS



Goodness, Honey

Since it's cold and flu season, I thought other readers would be interested in my natural cough remedy.

I chop up an onion into very small pieces and place it in a narrow glass or teacup, sprinkle about ½ to 1 teaspoon of sugar over it, and let it sit for a while. Later I smash the onion with a spoon and drain the juice. It makes a great cough syrup and the sugar helps sweeten and cuts the taste.

Rene B., Tuscaloosa, Alabama

You might also try the old remedy of just a teaspoon of honey before bedtime.

Researchers at the Pennsylvania State University College of Medicine conducted a study involving 105 children aged 2 to 18 years with upper respiratory infections and cough. The kids were given a teaspoon of buckwheat honey, no treatment, or honey-flavored dextromethorphan (DM, the most common over-the-counter cough syrup) 30 minutes before bedtime.

Significant differences in coughing and sleep quality were noted using honey. Honey was found to be the only therapy that reduced cough frequency and severity and improved sleep. Honey-flavored DM had no effect whatsoever. (*Arch Pediatr Adolesc Med* 07;16:1140–1146)

I doubt you'll see the results of this study being touted on any cough syrup labels or reported in the news. If these dismal results had come from some study of nutritional supplements, it would have made the evening news.

Basically, this study confirms that DM-based over-the-counter cough medicines are worthless. In a perfect world, the FDA would step in, seize the product, fine the manufacturers for making false claims, and try to put them out of business. But I wouldn't hold my breath waiting for that to happen.

And while I'm on the topic of honey, it's worth noting that studies continue to show it is one of the most effective agents to promote true healing of wounds, burns, surgical cuts, and lesions. Researchers in the United Kingdom found no reports in any of the literature where an infection resulted from the use of honey in treating open wounds. They went so far as to highly recommend the use of honey in surgical wards and stated that patients about to undergo surgery should ask their surgeons if they could apply honey to their wounds postoperation. (*Int J Clin Pract* 07;61:1705–1707)

My dad recently had a weeping wound on his lower leg that refused to heal after several weeks. After having my mother apply a

honey dressing to the wound daily, it healed in just a few days without any problem.

Honey is one of the best healing bargains around. It works safely and effectively for everything from ophthalmic problems to gastrointestinal ones.

The above report also found that honey acted as a wound barrier against tumor implantation in laparoscopic cancer surgery, which is the first report of that kind I've seen. If you recall, this is one of the dangers associated with needle biopsies and laparoscopic surgeries. When the instruments are withdrawn through the small incision hole, there's a risk of spreading the cancerous tissue.

Tumor implantation can be a serious problem, as you'd imagine. It can cause the spread of cancer from a tumor that had been well-contained. Current attempts to reduce the risk involve the use of various drugs and proteins, or placing a barrier around the laparoscopic incision "port."

I'm certain no surgeon would want to keep an open jar of honey in the operating theater, but it's just a matter of time before specialized (and, no doubt, patented and expensive) honey products become available. The process has already started, with the honey bandages I wrote about recently.

or protect our health. It requires a continuous learning process, and always will. And I thank you for allowing me to be part of that process.

I'm not much on making predictions; they can come back to haunt me. And even though I'm aware of the "perils of prophecy," I do venture out on that limb occasionally. I predicted years ago that the omega-3/omega-6 imbalance would become a major contributor to increasing the rates of cancer, heart

disease, asthma, depression, and even neurological diseases like Alzheimer's. I also was fearful that maternal deficiencies of the omega-3 fatty acid DHA (docosahexaenoic acid) would create deficiencies in newborns, thereby causing an increase in hyperactivity disorders and behavioral problems. Unfortunately, those predictions have come true. I hope you followed my initial suggestions about improving your balance of fatty acids. If you haven't done so already, please start now.



NEWS TO USE FROM AROUND THE WORLD

Sofas, Pro and Con

LONDON, ENGLAND—The largest health club operator in Britain says that a fifth of English adults spend more than 30 hours a week sitting on their sofa. The company, Virgin Active, surveyed more than 2,000 people, and found that when other sitting-down activities are included, such as office work, driving, and mealtimes, the time spent warming a seat added up to well over 60 hours per week. Too much time spent sitting can result in what Virgin Active calls “Sofa Bottom Syndrome.” The survey was taken in England, but I have little doubt that the results would apply here as well.

Beyond the obvious consequences of inactivity, there are some not-so-obvious ones as well.

- ◆ Sedentary men are less fertile than those who are more active. Sitting for long periods during work activities increases the temperatures in the scrotum and testes, and there’s a 40 percent reduction in sperm count and concentration for every degree increase in scrotal temperature. (*Reprod Toxicol* 02;16:209–214, 215–221)
- ◆ Spending over 60 hours a week sitting more than doubles a woman’s chance of having her gall bladder removed. (*N Engl J Med* 99;341:777–784)
- ◆ An inactive lifestyle increases your risk of Alzheimer’s. In fact, an active lifestyle can completely overcome the genetic predisposition created by what’s been called the “Alzheimer’s gene,” the ApoE4 allele. (*Hum Psychopharmacol* 00;15:1–70)
- ◆ Sedentary older individuals are more likely to fall. A Chinese study showed that the leg muscles of inactive people react much more slowly to an “unexpected ankle perturbation.” In other words, those individuals are less able to catch themselves if they stumble or trip while walking. (*Age Ageing* 05;34:439–444)

I’ve written about numerous exercise programs in *Alternatives*. If you have those earlier issues you can review them for ideas. Or you can head to your local gym, community center, or senior center; all of them can provide you with activities.

In the end, though, it’s not about an “exercise program,” it’s about how you live your life. If you go into a panic when the cable goes out, that’s a good indication that you need to get moving. Spend time playing with a pet or working in the yard.

A Good Use for the Sofa

On the brighter side, there’s plenty of research showing that a brief afternoon nap can restore alertness, energy, and task performance. Now, a study out of Flinders University in Adelaide, Australia, has shown just how long that nap should be.

Researchers allowed 24 participants to nap for periods of exactly 5, 10, 20, or 30 minutes, then measured performance on several tasks. A 10-minute nap produced benefits immediately. The subjects awoke without any grogginess, and were immediately more alert and productive than they had been before the nap. The benefits last for as long as 2-1/2 hours. Shorter naps appeared to provide no benefit at all, while the longer naps caused some grogginess upon awakening, and the benefits didn’t last as long. (*Sleep* 06;29:831–840)

Sleep develops in stages. Stage 1 is the drowsy time during which your eyes are closed and you’re settling in for a good sleep. This stage typically lasts about five minutes. Stage 2 is the time when your heart rate slows, your body temperature begins to drop, and your brain waves begin to show some slowing. This is the transition phase between drowsiness and deep sleep. An earlier Japanese study showed that the peak benefits from a nap came after just three minutes of Stage 2 sleep. (*Sleep* 05;28:829–836)

That’s not to say that you should drop onto the sofa for a 90-minute nap every afternoon; a lengthy nap can affect your ability to get to sleep later that night. But if you’re feeling a little sleepy, particularly while engaged in a task that requires attention and concentration, such as driving, operating garden tools, or even playing cards, it may be a good idea to stop what you’re doing and give in to the urge by taking a quick snooze.

Thyroid and Your Heart

NEW YORK, NEW YORK—I’ve written many times about the amazing research and work of Dr. Broda Barnes. If you haven’t read his book, *Hypothyroidism: The Unsuspected Illness*, I highly recommend you get a copy. If you recall, Dr. Barnes is the physician who originally helped identify many of the dangers of hypothyroidism decades ago. He pioneered the use of what he called the “basal temperature test” to assess thyroid function. He felt, and I totally agree, that laboratory tests were not accurate enough to detect most thyroid problems. He also believed that at least 40 percent of the US population suffered from an inadequate supply of thyroid hormone. And, although he practiced medicine from the 1930s into the ‘70s, I think his estimate is still accurate today.

Barnes felt that hypothyroidism was a major contributor to, or the actual cause of, many common problems—which I’ve detailed in previous issues. He presented strong evidence that it was one of the leading causes of heart failure. Although clinically he showed in hundreds of patients that improving thyroid function could eliminate heart problems, most doctors and researchers had already accepted the idea that cholesterol was the primary culprit.

NEWS TO USE (CONTINUED)

A new study just presented at the annual meeting of the American Thyroid Association tells the same story Dr. Barnes was telling 60 years ago. This latest study involved 3,065 individuals age 65 or older who were free of heart failure at the start of the study.

Over a 12-year period, those with high levels of thyroid-stimulating hormone (TSH)—meaning their bodies were trying to increase their production of thyroid hormones—had twice the risk of developing heart failure compared to those with normal levels. *In a nutshell, this study found that a thyroid that was even slightly underactive presented just as much of a cardiovascular threat to a patient as diabetes or high blood pressure. (American Thyroid Association, 78th Annual Meeting; New York; October 4, 2007)*

Hundreds of thousands of cardiovascular patients in this country have no idea their problems are a direct result of an underactive thyroid. What's worse is the fact that their doctors are also clueless. More than 50 years after the discovery of the simple temperature test, cardiologists and family practitioners alike routinely write a prescription for cholesterol-lowering drugs but never think twice about treating for hypothyroidism.

An underactive thyroid is one of the easiest conditions to both diagnose and treat. In most cases (95 percent) it doesn't require anything more than Dr. Barnes' simple basal temperature test, supplemental iodine, and possibly an over-the-counter thyroid glandular supplement. Even the more difficult cases (probably 5 percent) would require only a prescription of natural thyroid hormone. Hundreds of thousands of premature deaths could be prevented, millions of depression cases would be cured, and untold suffering could be prevented with this one treatment.

Keep in mind that cardiovascular problems are only one of the symptoms of hypothyroidism. The list of other problems it causes is long and familiar. [Editor's note: For more information about hypothyroidism and its health effects, visit the Subscriber Center of the Alternatives Web site, www.drdauidwilliams.com]

If I had the chance to run one test on every individual in this country, I can't think of any that would be more productive than checking for hypothyroidism. (Adrenal insufficiency and hypoglycemia would be second and third). The test is very simple.

1. Put an oral thermometer by your bedside. If you use a mercury one, shake it down to 96 degrees.

2. Upon awakening, place the thermometer in your armpit and leave it there for 10 minutes before arising.

3. Record the temperature.

Note: Men can take their temperature any time. Women in their menstrual years get the most accurate reading on the second or third day after menstrual flow starts. Before the first menstrual period or after menopause, the temperature may be taken on any day.

Anywhere between 98.2 and 97.2 is considered normal. If your temperature falls below this range, it indicates a sluggish thyroid or hypothyroid condition. (If it's above this range, your thyroid is overactive.)

Lack of energy and chronic fatigue are common complaints these days; both are hallmark symptoms of an underactive thyroid. Another classic sign is an inability to lose weight. I wouldn't recommend even attempting to start a diet until you know your thyroid is functioning properly. Once an underactive thyroid is treated and thyroid hormone levels increase, the metabolic thermostat rises and fat stores begin to burn off naturally. If you've made a New Year's resolution to lose weight, as many others have, first make the resolution to ensure your thyroid is working at peak efficiency.

I don't know how many years it will take before every physician routinely tests their patients for hypothyroidism. Fortunately, although it doesn't show up during standard laboratory testing, it's very easy to check yourself. It also doesn't require expensive prescription medication to treat. Come to think of it, however, that's two strikes against it in today's world—which probably answers my question about when the test will become routine.

The Vitamin D Famine Goes On

We're right in the middle of winter, and even in the warmer areas of the country daylight hours are still short. It's a time when vitamin D levels typically are dropping in everyone; your body can store some D, but not enough to get you through several months without replenishing your stores.

The diet is generally a very poor source of vitamin D, and, as I've said often, routine sun exposure is one of the best sources for the vitamin. Those with darker skin tones, however, still have difficulty making enough vita-

min D even when they expose their skin to the sun. Skin pigment is naturally produced to protect the deeper layers of the skin, but it also blocks vitamin D production.

Researchers at Winthrop University Hospital in Mineola, New York have just released another study highlighting the need for additional vitamin D in African-Americans.

This study followed 208 postmenopausal black women for three years. For the first two years, half the women were given 800 IU per day—double the current RDA (recommended daily amount). Even at that dosage, their

(Vitamin D continued on page 63)

Getting the Most From Your Fruit

Question: My neighbor has been drinking mangosteen juice and swears by it. He says it has strong anti-inflammatory action and has helped his arthritis. He has literature showing that it's also good at curing fatigue, ulcers, high blood pressure, and several other things. It's also supposed to prevent cancer and Alzheimer's. I've tried a sample he gave me. It didn't seem to do much for my arthritic knee, but maybe I need to take it for a longer time. What are your thoughts?

— Richard K., Albany, Georgia

Answer: Personally I wouldn't waste my money, particularly if you're considering drinking it for health reasons. If you enjoy the juice, that's fine, but it is rather expensive, it's high in carbohydrates, and it doesn't have any research indicating that it provides any significant health benefits. There are some animal studies and studies with cell cultures utilizing various components found in mangosteen, but no results that struck me as unusual. Many of the companies selling mangosteen juice and extracts utilize multi-level marketing programs to distribute the product—which further drives up the price and makes things even more suspect to me.

Lately there's been a big push in the exotic fruit juice market. Some juices are beneficial and have the research to prove it. Pomegranate, cranberry, passion fruit, and aloe quickly come to mind. Even with those juices you have to read the labels carefully, though. Keep in mind also that practically all fruit juices are naturally high in carbohydrates; many are practically pure sugar water and can have a negative influence on blood sugar levels. Many companies also further dilute the juice with apple or grape juice or add enormous amounts of sweeteners to make them palatable. The finished product is often no better than a soft drink. This is why sometimes a concentrate or even an extract is recommended.

By the way, I still believe that vegetable juices are a valuable source of nutrients that are easily assimilated—particularly if you make them fresh yourself and drink them right away. For people dealing with digestive problems, or as part of a detox program, vegetable juices are highly beneficial. Fruit juice from a bottle—or, worse, a fruit juice “cocktail” blend—is another story, however.

Dozens of juices from around the world have medicinal properties, and only in the last few years has this information become more widespread. The research is usually sponsored by an organization that represents the farmers of a particular fruit, in hopes of increasing their market potential. I don't always report on such research, particularly when it's difficult to get the processed juice in this country. A prime example is passion fruit juice.

Passion fruit is very common in Australia; the juice and especially the leaves contain certain alkaloids that have been shown to dramatically reduce blood pressure. It would be a great product, but there's no quality reliable source for it here in this country. (I did see a passion fruit juice cocktail from Welch's, but it's mixed with grape juice.)



(If you happen to be a gourmet cook, like my wife, or are just interested in some of the finest concentrates and purees of exotic fruits available, you should check out The Perfect Puree of Napa Valley at (800) 556-3707 or on the Web at www.perfectpuree.com. They carry a wide variety of great products. Their shipping is rather expensive, because everything is shipped overnight, but, then again, the quality and variety of their products is something you can't find elsewhere.)

Another Healthy Drink

If you're looking for a quick, inexpensive drink or concentrate known to improve your overall health, you really don't have to go to the far ends of the Earth. Although its popularity has waned somewhat, the benefits of apple cider vinegar shouldn't be overlooked. For most people it can quickly eliminate the need for antacids or histamine blocker drugs, and remedy a long list of digestive complaints.

I certainly wouldn't call it a “cure-all,” nor an anti-aging miracle as many of the early health pioneers did, but it certainly is an inexpensive and readily available elixir for an aging population. I know people who swear it has eliminated their arthritis problems and those who say it helped them lose weight. It's even been reported to be an effective deodorant (at least once the vinegar smell dissipates).

While not all of the claims attributed to apple cider vinegar have been substantiated through research, several have. Taking 2 tablespoons in a glass of water before bedtime has been shown to lower blood glucose levels in diabetics by between 4 and 6 percent. It can also help lower high blood pressure, and in preliminary animal studies it lowered harmful cholesterol levels as well. (*Diabetes Care* 07;30(11):2814–2815) (*Eur J Clin Nutr* 05;59(9):983–988)

Although I've never seen any problems with patients taking 2 tablespoons a day when diluted with 8 ounces of water, I always suggest starting with only a teaspoon a day and gradually increasing the amount. And whatever you do, make sure you get a good quality, natural apple cider vinegar. Bragg Organic is one of the best; you should be able to find it in many large grocery stores or in any health food store.

(*Vitamin D continued from page 61*)

average blood levels of vitamin D reached only 88 percent of what is considered the minimum level to remain healthy (the target level of the study). Their dosage was increased during the third year, and just to reach the target level required that they be given 2,000 IU per day—five times the RDA. (*Am J Clin Nutr* 07;86(6):1657–1662)

Unrecognized and untreated vitamin D deficiencies are causing untold amounts of suffering and death. A daily intake of 2,000 IU is not only safe, but higher blood levels can significantly reduce the incidence of colorectal, breast, and ovarian cancers, as well as numerous other diseases. (*Am J Prev Med* 07;32:210–216)

A recent study from France analyzed 18 different studies involving over 57,000 individuals, and found that those individuals who supplemented their diet with an average of 582 IU of vitamin D had a 7 percent decrease in mortality from any cause over the average 5.7 years of each study. An editorial that accompanied the report called the results “remarkable.” (*Arch Intern Med* 07;167:1709–1710)

The Scope of the Problem

It seems like the medical world is finally waking up to the problem of vitamin D deficiency. I had hoped it would occur before we were faced with a full-blown epidemic of osteoporosis, rickets, and increased rates of various cancers and multiple sclerosis, but that didn't happen.

Studies have now revealed that probably 80 percent of older women worldwide have a vitamin D deficiency. (*Food and Fitness Advisor*, April 2007)

In North American women of child-bearing age, deficiencies are estimated to range anywhere from 1 to 25 percent in lighter-skinned women and from 29 to 42 percent in darker-skinned women. The wide spread is due to the variation in sunlight exposure during the different seasons.

Deficiencies are also widespread in North American infants, ranging from 21 to 78 percent. (*American Dietetic Association newsletter*, Fall 2007)

One 2005 survey of so-called healthy adolescent girls in Northern Europe found that 92 percent of them were vitamin D-deficient, 37 percent severely so.

D's Physical Effects

Vitamin D is generally thought of as a vitamin, but strictly speaking it's a hormone, based on the fact that it is manufactured in one tissue in the body and then circulates throughout the body and influences other tissues.

The latest research has found vitamin D response elements (VDREs) in every major organ system, as well as our immune system. These are sequences of DNA code influenced by vitamin D to trigger genetic expression. The active form of vitamin D in the body functions as a switch that can turn at least 1,000 different genes “on” or “off.” This strongly suggests that VDREs in muscles are important components to help prevent multiple sclerosis and those in the brain are involved in protecting against diseases like Alzheimer's and Parkinson's.

In a *Scientific American* article on vitamin D last November, Canadian researchers reportedly discovered that VDREs are involved in the formation of natural antibiotics within the body. This latest discovery helps explain how in the early 20th century, sunshine was able to cure tuberculosis, when no other treatments were available.

And newer genetic research is also emerging that helps us understand just how powerful vitamin D's anti-cancer and anti-inflammatory properties are.

I described in past issues how numerous health problems increase significantly during the winter (low vitamin D) months. History has repeatedly shown increases in episodes of schizophrenia, flu, colds, heart attacks, arthritic problems, psoriasis and other skin conditions, behavior problems, et cetera at that time of year. [*Editor's note: See Vol. 11, No. 22 for a fuller explanation of vitamin D and immune health.*]

When You Should Look Out

I've been writing about the problems of vitamin D deficiencies for over 20 years, and warning of a deficiency epidemic for at least 10. It's here. This is one situation you shouldn't take lightly. As with most deficiencies, the damage may not be evident at first. It is occurring behind the scenes, however, and eventually some major event will bring it to light. It might be the fall triggered by osteoporotic weakened bones or failing muscles that results in a fractured hip. Or it might be the gradual onset of severe depression, or cancer, or cardiovascular disease. Unfortunately, even with all the research available most doctors still wouldn't recognize the vitamin D connection following one of these events.

Certain situations and conditions will make it more likely that you're deficient in vitamin D:

- living in the northern latitudes;
- having dark skin;
- being African-American;
- being over age 65;
- being an infant;

- being obese (activated vitamin D gets “locked up” in fatty tissues and can’t be moved to other parts of the body);
- avoiding the sun;
- living in a nursing home or assisted care facility;
- using sunscreen effectively (when properly applied, sunscreens can reduce the amount of vitamin D produced in the skin by more than 98 percent);
- having digestive problems, particularly the digestion of fat (this is almost always a problem for someone who has had their gallbladder removed);
- abstaining from fish, meat, and dairy products (salmon, tuna, sardines, fish oil, grass-fed beef, eggs, et cetera); or
- using any of these drugs: anticonvulsants, glucocorticosteroids, cholesterol-lowering medications.

In addition, quite a few health conditions are a sign that you may be deficient in vitamin D:

- spontaneous fractures (among patients treated at the Hospital for Special Surgery in New York City for orthopedic problems, only 10 percent of the women and 40 percent of the men had normal blood levels of vitamin D);
- chronic pain;
- an autoimmune disease such as multiple sclerosis or Crohn’s disease;
- bladder, breast, ovarian, colon, or rectal cancer;
- Alzheimer’s or Parkinson’s disease;
- heart disease, heart failure, or stroke;
- diabetes;
- depression; and
- osteoporosis, osteomalacia, or rickets.

Make sure you’re getting *at least* 1,000 IU of vitamin D3 from your diet and supplements. Vitamin D3 is the more active form. If you’re African-American I would recommend at least twice that amount. The current recommended daily dosage is still only 400 IU for adults ages 51 to 70, and 600 IU for those over age 70. Every expert and researcher I’ve spoken with agrees that within the next few years the recommendation will increase to at least 1,000 IU—and probably to 2,000 IU. The only reason it hasn’t happened already is that the Recommended

Daily Allowance gets adjusted only once every five years, and the next adjustments come in 2010. Why wait?

Adults can easily handle 5,000 IU daily, and in fact it takes 100,000 IU daily for several months to cause a problem. Infants can handle 40,000 IU for one to four months without experiencing toxicity.

If you get your vitamin D from sunshine, you don’t have to worry about toxicity. For example, a bikini-clad, white-skinned woman will generate about 10,000 IU in 15 to 20 minutes. Any vitamin D created after that will be broken down by UVB light rays. (Somehow, I inherently knew that women who wore bikinis were blessed and somehow protected.)

If you live in the lower latitudes, it really doesn’t take much sun for your body to synthesize vitamin D. Most fair to medium skinned individuals will produce adequate amounts if dressed in a bathing suit and exposed to the sun for 15 minutes or so, until the skin produces a slight pinkness. A sunburn isn’t necessary, and in fact should be avoided.

I know I’ve covered vitamin D before, but it’s a very important topic. And I want to keep you informed as new research becomes available. The conventional media seem to be avoiding the facts, and I’m sure that for years to come they will still be telling you to slather on the sunscreen and avoid the sun like the plague.

(The myth about the dangers of the sun reminds me of all the bad press and publicity surrounding eggs decades ago. Most people still think eggs are unhealthy, but that’s just wrong. I believe eggs are one of the healthiest foods we have.)

You need to fully understand the need for vitamin D and the dangers associated with a deficiency. There’s no doubt that increasing your level of vitamin D and keeping it high will help you live a healthier and longer life.

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.

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