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Why Supplement?

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THE PROBLEM

Millions of people are unaware of the importance of adequate nutritional intake and of the dire consequences which befall those with nutritional gaps in the diet. Many others think they are eating a good diet, but in reality they are not. This newsletter addresses the issue of why supplementing the diet is important for virtually everyone. Even the Journal of the American Medical Association has published an article pointing out that suboptimal intake of nutrients is common in the general population, putting people at risk of chronic diseases.

Reference:

Fairfield, Kathleen M., Fletcher, Robert H., "Vitamins for Chronic Disease Prevention in Adults," *JAMA* 2002, 287:3116-3126

AMERICANS DON'T EAT WELL

Americans often have a fairly good idea of what a healthy diet looks like and they tend to think they eat well. They often answer dietary surveys in such a way that their diets look better than they actually are. This is revealed by sneaking into their garbage cans to see if what is in the garbage cans matches the answers they are filling out on dietary surveys.

One of my favorite studies on nutrition was published in the *Journal of the American Dietetic Association*. This study published by those who

have maintained that we can get all the nutrients we need in our foods found that only 22% of 5,884 diets examined contained 2/3 of the recommended intake for 15 essential nutrients and only 14% of the study group was consuming less than 30% fat. Only 2% of the population group studied met both these criteria.¹

The percentages of the population deficient in individual nutrients is staggering. A study conducted in 1980 found the following percentages of the population were not receiving 100 percent of the recommended intake of specific nutrients: vitamin A (50.1%), thiamine (45%), riboflavin (34%), niacin (32.9%), pyridoxine (80.2%), B12 (33.5%), vitamin C (40.8%), calcium (67.9%, iron (57.3%), and magnesium (74.4%).²

It is important to remember that the recommended allowances for nutrients are not designed to be an optimal intake. They are designed to prevent the onset of nutrient deficiency diseases.

Linus Pauling (I had a chance to meet the man and his wife while they were alive) pointed out long ago that the U.S. National Academy of Sciences recommended far more vitamin C to maintain the health of monkeys than it does for human beings. The recommendation is about twenty times what is recommended for a human being. He wrote, "I am sure that the first committee has

worked hard to find the optimum intake for the monkeys, the amount that puts them in the best of health. The second committee has not made any effort to find the optimum intake of vitamin C or of any other vitamin for the American people."³

Loss of a laboratory animal, especially a monkey, can put a big dent in a research budget. If you or I become ill, somebody makes a lot of money!

References:

1. Murphy, Suzanne, et al., *J Am Diet Assoc*, 1992; 92:1352-7.
2. Jaffe, Russell, and Donovan, Patrick, *Guided Health: A Constant Professional Reference*, Health Studies Collegium, 1993, 6.38-9.
3. Pauling, Linus, *How to Live Longer and Feel Better*, New York: W. H. Freeman and Company, 1986, 4.



HEALTH CARE COSTS

Health care costs indicate that we have a nutritional problem. The total cost of health care in 1993 was almost one trillion dollars. The estimate for 2006 is well over two trillion dollars.

Listening to the news the other day I heard that between the years 2000 and 2005 the only sector of the economy that grew and added new jobs (2 million of them) was the health care area. No other sector of the economy has a growth rate anywhere close to the growth rate of the "health" or disease care industry.

SCIENTIFIC STUDIES

Early nutritional studies by Francis M. Pottenger, Jr. and Sir Robert McCarrison indicate that many health problems result from marginal nutrition. Both of these men were physicians researching the cause and treatment of disease.

FRANCIS M. POTTENGER, JR.

Francis M. Pottenger, Jr. conducted a 10 year experiment in which he fed cats 2/3 of their diet heated or cooked foods. The heated foods consisted of pasteurized milk, evaporated milk, sweetened condensed milk, or cooked meat. Control animals were given raw meat and raw milk. All experimental animals received one third of their diet raw meat or milk.

The animals eating the cooked



foods developed allergies, asthma, osteoporosis, glandular problems, neuromuscular problems, and at times dramatic changes in disposition. So profound was the irritability of Pottenger's cats that he named three of them Tiger, Cobra, and Rattlesnake due to their "proclivity for biting and scratching."

The health problems of the animals increased in severity from one generation to another. The health of the cats was so poor in the third generation that none of the offspring could survive.

None of these problems were evident in animals consuming a diet of raw foods. Pottenger's work suggests that heavily cooked and processed foods will deteriorate health. Pottenger felt that a good deal of the deterioration in his animals could be explained by the destruction of nutrients as a result of the cooking process. Those who think they are eating a healthy diet should ask themselves, "Am I cooking my food, or eating foods which have been heated to high temperatures in the manufacturing process."

Reference:

Pottenger, Francis M., Jr., La Mesa, CA.: Price Pottenger Nutrition Foundation, 1983, 11.

SIR ROBERT MCCARRISON

Sir Robert McCarrison lived and worked in India. He fed rats the same diets people were eating in the different parts of India. He discovered that when he fed his rats the superb diets of the peoples of northern India like the Hunzas they had no health problems. When he fed his rats the diets of other peoples of India, who suffered many health problems, the rats also became ill.

McCarrison probably experienced quite a shock when he fed his rats the typical British diet of the day: potatoes, cabbage, white bread with margarine, tea with milk, and canned meat. The animals developed a variety of intestinal and

respiratory disorders. This was not unusual as the same happened to other malnourished animals. The startling change with the British diet was that the animals began to kill one another. He had to separate the animals (after three murders) in order to complete his experiment.

McCarrison, Robert, *Nutrition and Health: The Cantor Lectures*, London: Faber and Faber, 1936.

ABSENCE OF SYMPTOMS

The typical American thinks he is well if he has no symptoms of disease. There is a problem here. Most people do not even know what the symptoms of the onset of disease might be. This is why I wrote my book *Your Body's Sign Language*.

Most people would not associate weight gain around the middle with abnormal liver function, heart disease, and risk of diabetes. They do not associate mental disorders such as depression, ADHD, anxiety, or irritability with nutrient deficiencies and inefficient delivery of nutrients to the brain.

Another problem with judging health by the absence of symptoms is the fact that diseases begin at the cellular level. Cancer begins with one cell. It can take 8-10 years before a breast cancer in a woman is large enough for easy detection. A person may appear to be the picture of health, yet be suffering with buildup of fats in the arteries and drop dead as the result of a heart attack at any time.

NUTRIENT DEPLETION

The quantity of nutrients in foods has declined for a number of reasons. Artificial fertilizers are used, produce is picked before it is ripe and artificially ripened, foods are processed with heating or frozen. All of these processes alter nutrient values.

An illustration of nutrient depletion is the great B12 robbery. Tests done in the 1960's and 1989/90 show a dramatic decline in vitamin B12 in foods. For example, 100 grams

of beef liver in 1960 had 122 micrograms of vitamin B12. In 1990 none was detected. Similar declines were reported in beef heart, Swiss cheese, egg yolk, chicken breast, and tuna.¹

One of the reasons vitamin B12 is hard to find has to do with artificial fertilizers. We add nitrogen, potassium, phosphorus, and calcium back to the soil, but the trace minerals are rarely added back to depleted soils. vitamin B12 is a cobalt molecule.

A number of years ago Dr. Bob Smith worked for Doctor's Data. He observed the amazing difference in taste between organic and commercial produce which led him to conduct a two year study comparing the trace mineral content of the two food categories. On the average he found that organic produce had much higher trace mineral content and lower toxic mineral residues than did commercial produce.²

The most common cause of nutrient depletion is food processing. The majority of vitamins, minerals, and quality oils are removed from wheat, rice, and soybeans in their conversion to white flour, white rice, and tofu. Sugar cane is a healthy food. Refined sugar, on the other hand, is depleted of nutrients and is a major contributor to the nutritional deficiencies we see so often today.

Reference:

1. Jaffe, Russell, and Donovan, Patrick, *Guided Health: A Constant Professional Reference*, Health Studies Collegium, 1993, 6.33.

2. Smith, Bob, "Organic Foods vs Supermarket Foods: Element Levels, *Journal of Applied Nutrition*, Vol. 45:1, 1993.



ACQUIRED DEPENDENCE

Let's assume that an individual has suffered with a serious lack of a nutrient for a considerable period of time. Abram Hoffer learned many years ago that an individual could develop what he called an acquired dependency for a larger than normal amount of a nutrient as a result of extended deficiency. He learned this with the discovery that he could enable a man who suffered internment by the Japanese during World War II to overcome many of the disabilities with which he suffered for years after the war simply by giving him generous quantities of vitamin B3. Hoffer also observed that dogs required far more vitamin B3 to overcome pellagra, a vitamin B3 deficiency disease, that was required to prevent the problem.

Most Americans have never experienced optimal nutrition due to the processing and refining of modern food. One would expect a properly formulated nutritional supplement to provide tremendous benefit for many people.

Reference:

Hoffer, Abram, *Putting It All Together: The New Orthomolecular Nutrition*, New Canaan, CT: Keats Publishing Co., 1978, 147.

NUTRITIONAL ANTAGONISTS

The modern world is awash with nutritional antagonists. For example, lack of vitamin B6 has been associated with increased risk of heart disease, depression, PMS, a difficult pregnancy, diabetes, carpal tunnel syndrome, kidney stones, arthritis, and a number of other problems.

Numerous substances, especially common hydrazine compounds, can interfere with our ability to obtain adequate vitamin B6. It can be antagonized by rocket or jet fuel (hydrazine), medications (isoniazid, hydralazine [blood pressure], the birth control pill), FD&C Yellow No. 5 (found in most pickles), herbicides, plant growth inhibitors, PCB's, but-



ton mushrooms, flax, alfalfa sprouts, caramel color, and ripening agents.

One potential vitamin B6 inhibitor is maleic hydrazide used as a sprouting inhibitor on potatoes. A mere 2 ounces of potato chips can provide 8 milligrams of the chemical. Many people consume more of this chemical in a day than they do vitamin B6. Dr. Alan Gaby wrote, "A hydrazine compound might, for example, bind 100 times more tightly than vitamin B6. Consequently, it would take many B6 molecules to counteract the effect of a single antimetabolite molecule."

Almost every nutrient has its antagonists. Fluorine and bromine antagonize iodine. Cadmium is antagonistic to zinc. Aspirin lowers body levels of vitamins C, K, and folic acid.

These antagonists have proliferated in the diet subsequent to the chemicalization of life which followed World War II. Recommended intakes of nutrients do not take into account the numerous nutritional antagonists in the environment today.

Reference:

Gaby, Alan, *The Doctor's Guide to Vitamin B6*, Emmaus, Penn.: Rodale Press, 1984, 8-17.

TOXIC EXPOSURES

One of our family friends for many years until his death in December of 2005 was Dr. Arthur Furst. Dr. Furst was largely responsible for the banning of the food dye butter yellow. For many years this coloring agent was used to color margarine so it would look like butter.

Dr. Furst once shared with me that he learned two lessons from



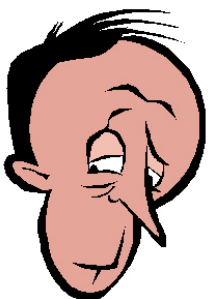
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his research on butter yellow, yet only one of them ever received media attention. The first lesson was that he could feed his laboratory animals butter yellow and all of them would develop cancer. He could predict the day the animals would develop cancer and the kind of cancer they would develop.

The second lesson almost everyone missed. He learned that he could supplement the diets of his laboratory animals with a variety of different nutrients and the animals could consume butter yellow their entire lives and never develop cancer. The nutrients enabled the animals to detoxify the toxic coloring agent. The nutrients which Dr. Furst found effective in preventing cancer evolved into a GNLD product called Betagard.

FAULTY DIGESTION



Decline of digestive ability due to aging, overeating, malnutrition, consumption of excess fat, or use of antacid medi-

cations can seriously interfere with nutrient utilization. Low stomach acid inhibits absorption of calcium, magnesium, iron, and vitamin B12.

Dr. Jonathan Wright tests depressed individuals for amino acids in the blood. He finds they often have from three to all eight of the essential amino acids missing. He feels this is most often due to inability to digest protein due to a decline in stomach acid.

Dr. Wright found that over half of his depressed patients will respond to generous amino acid supplementation. He points out that this is as good as or better than most of the medications used to treat depression.

Reference:

Wright, Jonathan, and Lenard, Lane, *Why Stomach Acid is Good for You: Natural Relief from Heartburn, Indigestion, Reflux & Gerd*, New York: M. Evans and Company, 2001, 172.

WHY SUPPLEMENT?

As we have seen there are many reasons to supplement. Many people believe they should supplement, but they do not. Why this disconnect? One of the common reasons for this is they have tried different supplements and they notice no difference. The supplements often

appear to fail to provide benefit.

For this reason, my next newsletter will address the issue of the best means of supplementation to obtain optimal nutrition, or "How Should We Supplement."

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