A question I am frequently asked is, “What tests should I get when I have my annual physical?”

First, I am not one who endorses annual physicals. I think they are a bad idea; one that encourages unnecessary testing and ultimately leads to unnecessary treatments. I call such examinations hunting expeditions.

Instead, I think you should have period-of-life exams; one early in life and one as middle age approaches.

Here is the big dilemma: If you, as a physician, find something wrong on a blood test or some other test, what should you do? Should you ignore it or should you pursue it further?

This is not always an easy question to answer. Most doctors know this. That is why so few doctors have regular physicals or testing done on themselves. They are afraid that if they find something they will need more tests, some of which can be quite invasive. An invasive test is one that requires surgery (biopsy, endoscopic exams, etc.) or procedures that require the insertion of catheters or tubes (such as an arteriogram or bronchiogram).

While most of us do not mind giving a little blood, a urine specimen or having an x-ray or scan of some sort, we do not want our bodies invaded by instruments.

This is especially so when the doctor (usually their nurse or assistant) informs us of the long list of complications possible. Most informed consent information is enough to send anyone’s blood pressure soaring.

For example, complications possible with colonoscopy include bowel perforation (tearing a hole in your colon), massive hemorrhaging, shock, pulmonary embolism, paralysis and even death. Pretty scary stuff!

Doctors tend to down play complications and nurses are often cold and hurried when sharing these terrifying tidbits.

All doctors know that when you have invasive procedures done, any-
thing can happen. Things you would never dream of may happen. We have all heard of people who went for a “simple” test and died! This does happen.

It is for these reasons that you should be very careful in agreeing to have an invasive test, no matter how much the doctor assures you that it is a “simple test” that he or she has done a million times with no problems.

This is also why you should always follow a disciplined nutritional program. The better your health, the less likely you will suffer complications, and should they occur, they will be less serious.

For example, a person who takes magnesium supplements every day is less likely to suffer a pulmonary embolism (throwing a blood clot to the lungs) than those who are magnesium deficient.

Likewise, they would also be less likely to have a sudden heart attack, stroke or arrhythmia. Taking vitamin C daily would reduce your risk of having a colon perforation during a colon exam. It would also enhance your healing following an invasive test.

There are advantages of having annual examination after a certain age. Cervical examinations for women and colon exams for both men and women are reasonable.

I would not recommend yearly mammograms for women. Even with the digital radiographs, the x-ray dose can be too high. One thing the radiologists rarely tells people is that radiation damage is cumulative, which means each year it adds up.

Let’s say your risk of developing a breast cancer caused by the radiation from the mammogram is 2% a year. In 10 years your risk has increased 20% by the study alone. It is probably much higher for women with a hereditary risk of breast cancer, since they have impaired defenses against radiation injury.

When I was in medical school, the American Cancer Society had just approved its program of yearly chest x-rays for early detection of lung cancers. It took them a while to appreciate that they were not only radiating the lungs every year, but also the spine, the thyroid, the eyes, the abdominal organs and the breast.

At the same time this X-ray craze was underway, a number of studies found that doctors were finding very few early cancers. Additionally, radiologists often found ill-defined things in the x-rays — what they jokingly call ‘concatenations of shadows’ — that resulted in expensive and dangerous lung biopsies.

The same occurs tens of thousands of times a year with mammograms. Stories of breasts removed for “lesions” thought to look like cancer on mammograms and even biopsies abound.

It is the old dilemma I started off this letter mentioning: if you find something, anything, you always need more tests!

A new fad is the total body CT scan or MRI scan. Recently, medical authorities have put out a call for doctors to discourage their patients from getting whole body CT scans. Studies indicated that such scans doubled cancer risk from the radiation.

I recommend for the Period-of-Life Exam the following tests. I will discuss special testing for men and women separately.

The Physical Exam

It is not necessary, in my opinion, to have a physical examination every year. As for such things as breast exams for women and testicular exams for men, they can be done at home by self-examination.

The doctor should do a thorough examination of all systems. By this I mean he or she should: do a complete head and neck exam; examine your eyes (by ophthalmoscope); check all arterial pulses (especially your carotids by both feeling them and listening with the stethoscope); listen to your chest front and back; listen to your heart; feel your abdomen; test muscle strength; do a neurological examination; and check your skin for such things as lesions that are prone to become melanomas. They should also do a rectal examination and women should have a vaginal examination.

There are special instances calling for more frequent examinations, as in the case of following a specific disease or if you are at a high hereditary risk for a disorder. Your doctor will determine this.

Blood Tests

Comprehensive Blood Studies — this is what most doctors think of as a routine laboratory study. Your
blood is examined for a vast array of health markers. It usually includes a complete blood count (CBC), liver enzyme studies, kidney markers (creatinine, BUN), and your blood sugar level.

A urinalysis is also done to look for possible signs of infection. Excess urine protein or traces of blood are typically signs of kidney or bladder problems.

A frequent error doctors make is to assume that normal values mean excellent health.

Liver studies, for example, are rather crude measures of liver function and only tell you that you do not have significant liver problems. It tells you nothing about how well your liver detoxification is working. The same can be said for kidney screening tests.

It is also important to understand the problem with normal value ranges in these tests: Normal ranges are statistical averages based on studies of large populations. If the majority, or even a large number of people have abnormal liver function, the normal values will change and can tell us nothing about health.

For example, the normal values for homocysteine varies from 3 to 16 ug/l, yet values above 10 ug/l are associated with increased risk of heart attacks and strokes. What we should look for is optimal levels of a test.

Iron Levels: It is vital that all adults, preferably by age 21, have a comprehensive test of their blood iron. Excess iron is a major contributor to disease. A number of studies have shown that individuals having iron levels on the high side of the normal range have an increased risk of heart attacks, stroke, diabetes, cancer and neurodegenerative diseases (Alzheimer’s, Parkinson’s, etc.). Higher than normal iron levels are a sure road to disease, especially cancer, heart attack and stroke.

While men begin to store and accumulate iron soon after puberty, women do not start until the beginning of menopause. Excess iron increases the generation of free radicals in tissues and this is what causes disease.

Women usually do not begin to store iron until they stop menstruating. In fact, they are more likely to suffer from low iron, which can lead to anemia. Not all anemia is due to low iron and this is why you should never take iron supplements until these tests have been done.

Another reason to have these iron tests is because some people store excessive amounts of iron; a disease called hemochromatosis. This disease can be fatal, secondary to iron-induced liver cirrhosis (when free radicals destroy the liver’s cells). Because vitamin C greatly increases iron absorption, people with this condition should never take vitamin C supplements, especially with food. Special flavonoids found in teas, grains and vegetables inhibit iron absorption and can cause iron deficiency in certain cases.

The tests should include:

- **Total iron levels** (normal levels-60 to 180 mug/dl-optimal at 75 to 100 mug/dl)
- **Transferrin saturation** (normal values — 20 to 50%)

### Period-of Life Exams

**Tests to be done at age 21 and again at age 45**

- General physical exam
- Comprehensive Blood Studies
- Urinalysis
- Comprehensive Iron Studies
- Comprehensive Cardiovascular Tests
- Comprehensive Gastrointestinal Tests
- Detoxification Profile
- Essential and Metabolic Fatty Acid Profile

**Special Tests for Men**

- PSA Test
- Testosterone levels

**Special Tests for Women**

- Breast Exams
- Female Hormone Testing
- Bone Density Testing
Ferritin (normal levels — 15 to 150 mug/dl)

There are several reasons for an elevated ferritin level without elevated iron levels. These include hepatitis, inflammation (rheumatoid arthritis, lupus, etc) and malignancies. Transferrin saturation is usually used to diagnose hemochromatosis, but a less expensive test called an Unsaturated Iron Binding Capacity test can be used.

Very low iron levels can also cause trouble. Easily fatigued, weakness, lightheadedness and shortness of breath can occur with low iron levels. Low iron, like high iron, can trigger free radical generation and lead to disease. By law, a number of foods have iron added to them, including pasta, breads and cereals. This is bad news for those with existing elevated iron levels.

The Comprehensive Cardiovascular Test

At least once around age 21, everyone should have the following tests for cardiovascular disease risk.

As I discussed in a previous newsletter, over half of all heart attacks and strokes have nothing to do with elevated cholesterol and that the only cholesterol of importance is the small-dense LDL-cholesterol type.

As you approach middle age you should repeat the LDL-cholesterol test, the C-reactive protein and the homocysteine test. As I pointed out in a previous newsletter, C-reactive protein, homocysteine levels, fibrinogen and Lp(a) are more important than cholesterol levels.

The cardiovascular tests should include: Total Cholesterol, HDL-cholesterol, LDL-cholesterol (with a breakdown of small-dense type and large type), Triglycerides, C-reactive proteins, Lp(a) [lipoprotein a], Homocysteine, Fibrinogen level.

The Great Smokies Diagnostic Laboratories offers unique, comprehensive cardiovascular tests that include all of these tests and more. With this information, which comes with an individualized analysis of each test result, you and your doctor will be able to evaluate your real risk of cardiovascular disease.

A number of functional tests are available to your doctor (cardiac isotope scans, cardiac CT and MRI scans, echocardiograms and exercise ECG tests). Most people will not require these tests, since they are used to diagnose specific ailments and generally not used for screening. A conventional ECG (electrocardiogram) is a good idea for most middle-aged people.

Gastrointestinal Tests

Most doctors, other than a gastroenterologist, do not consider GI tests as a routine test, other than stool screening for colon cancer. In fact, there are a number of tests that examine gastrointestinal function of great value. While most labs do not do these tests, several special labs perform some highly valuable tests. I will supply the names of these testing laboratories at the end of this discussion.

I think everyone should have these tests done early in life, around age 21 and certainly by age 45. They not only tell you a lot about your risk of gastrointestinal cancer but also provide a lot of useful information about how well your GI tract is functioning.

One that I used routinely was the Comprehensive Digestive Stool Analysis by the Great Smokies Diagnostic Laboratories. This test package includes analysis of your digestion of proteins, fats and carbohydrates, which is of special concern to those having had chronic ulcer disease, esophageal disorders (GERD) and a loss of digestive ability commonly seen with aging.

In addition, it provides tests for absorption of foods and special metabolic markers. For example, they measure the N-butyrate in your stool, a compound that plays a critical role in preventing colon cancer.

Also included is a test for fecal lactoferrin, which measures inflammation in the bowel. This is important for those having inflammatory bowel diseases such as Crohn’s disease and ulcerative colitis.

Routine tests for occult blood — a sensitive measure for possible colon cancer and mucous which can indicate inflammatory bowel disease — are also included. In my estimation, one of the most important tests included in this analysis is the microbiology study. Most doctors fail to understand the critical
nature of this study and rarely order such a test.

Basically, it is a test that measures, by cultures, the various bacteria growing in your stool specimen, both good and bad.

Normally the colon contains special “good" bacteria whose job it is to protect the lining of the intestine and help metabolize the numerous chemicals entering the colon. A lack of these good bacteria is a major cause of gastrointestinal disease, including Crohn’s disease, ulcerative colitis and irritable bowel disease. Often these diseases can be greatly improved or even cured simply by replacing the missing or deficient bacteria.

I remember one lady who had been to five different doctors, three of which were gastroenterologists without any improvement of her condition. I tested her for these good bacteria and found her to be severely deficient in two species. After two weeks of supplementation with oral capsules containing the missing bacteria, she had a total recovery — the first time she felt normal in over ten years.

These beneficial bacteria include Lactobacillus species, E. Coli and Bifidobacterium species. Capsules containing billions of these live organisms can be purchased from most natural health stores. Always buy high quality supplements and be sure to keep them in the refrigerator.

Occasionally, the stool will contain an assortment of "bad" bacteria. Some of these are strongly associated with severe colon disease and can increase one’s risk of developing colon cancer. These include Citrobacter freundii and Klebsella pneumoniae.

Finally, the test includes cultures for the yeast organism Candida albicans. While the colon normally contains a small amount of Candida, larger overgrowths can cause a host of problems, some serious. When these large overgrowths occur the organism can travel up the intestine and can penetrate the wall of the gut, thereby entering the bloodstream. Once in the bloodstream, it can enter any tissue or organ, including the brain. Very few doctors are aware of this.

While suppression of the immune system, as seen in cancer patients and those with HIV infections, is a major cause of yeast overgrowth, there are a number of essentially normal people who can suffer as well. Diabetics are at a special risk because of their high sugar level and immune suppression.

Another common mistake by doctors is to treat yeast infections by just picking an antifungal drug out of thin air. Yeast, as with bacteria, is sensitive to some drugs and not others. This means that the organism must be tested to see which antifungal drugs it is sensitive to. This is done by the same laboratory.

Finally, the laboratory analyses all of the test results and creates a dysbiosis index. Dysbiosis is a condition where the bacteria in the colon are abnormal. A severe dysbiosis index indicates a high risk of developing a gastrointestinal disease, including cancer.

The earlier you evaluate your gastrointestinal function, the less likely you are to suffer such conditions as irritable bowel syndrome, inflammatory bowel diseases, chronic constipation and colon cancer.

Another useful test is the Intestinal Permeability test. This measures the integrity of your intestinal lining. A number of drugs such as ibuprofen and aspirin can produce microscopic holes in the lining of your GI tract, which can allow intact food particles and other substances in your food to enter your bloodstream. This condition is called the “leaky gut syndrome.” It increases the likelihood that you will develop a food allergy or suffer other harmful immune reactions.

The test uses two test substances, lactulose and mannitol, to gauge permeability. You drink a solution of these substances. Normally, these two large molecules (called macromolecules) have difficulty passing through the gut’s barrier. Should, for example, a larger amount of the lactulose pass through the gut lining (between the cells) more will appear in the urine. The same for mannitol, which passes through the cells themselves. Your urine is tested to see how much of each of these molecules passes through your gut lining.

High penetration of lactulose indicates an increased risk of food allergies, inflammatory bowel diseases and arthritis. Excessive penetration of mannitol is associated with abnormal immune reactions which can aggravate autoimmune diseases such as Lupus, rheumatoid arthritis and immune thyroiditis.
Finally, for those who really want a comprehensive GI examination, a test called the CDSA 2.0 is offered by the Great Smokies Diagnostic Laboratories. This really gets into serious scientific testing. It offers such things as Calprotectin, which is a direct measure of gut inflammation and is an excellent way to measure the activity of inflammatory bowel diseases. More involved microbiology testing, testing for parasites and special pancreatic tests are also included.

Detoxification Profile

I would also put this high on the list for tests you need to do sometime in your life; the earlier the better. Most think of the liver when they think of detoxification.

Yet, in fact, all cells carry on detoxification, even brain cells. This is important because every minute of every day our cells are inundated by a large assortment of toxins arising both, from our environment (food, air and water) as well as internal toxins that are produced in the natural course of life.

In addition, as we have seen in previous newsletters, we store a number of powerful toxins — lead, mercury, fluoride, pesticides and herbicides — in our tissues and organs for a lifetime. All of these toxins must be neutralized (detoxified) to prevent ill health.

This test measures both of the systems the body uses for detoxification, called phase I and phase II detoxification. Phase one, which uses a host of enzymes called p-450, is tested by taking a caffeine dose and measuring metabolites in the urine. Phase II detoxification is measured using aspirin and acetaminophen (Tylenol).

We know that our ability to detoxify poisons determines our risk of diseases like cancer, neurodegenerative diseases and sensitivity to things like alcohol, acetamenophen poisoning (which results in a number of liver transplants each year), hepatitis, drug sensitivities, and environmental toxins.

While heredity plays a vital role in our ability to detoxify, it is now known that the most important factor is nutrition. Many flavonoids found in fruits and vegetables greatly enhance our detoxification ability. These include curcumin (from the spice turmeric), quercetin, hesperidin and luteolin. In addition, special plant substances, such as indole-3-carbinol (broccoli), glutathione and taurine stimulate detoxification. The omega-3 fats, such as fish oil and DHA, also improve detoxification.

Improving detoxification is especially important for those with chronic diseases and cancer. In such cases, regular measurements of detoxification should be done until normal levels are attained.

Essential and Metabolic Fatty Acid Profile Analysis

You should include this among the tests to do early in life. The sooner you know the level of these critical fats the better.

A balance of these fats can save you a lifetime of misery. They make up all of the cells in your body but do much more. They play a critical role in endocrine function, brain maintenance, cell function, immune regulation and controlling inflammation.

This test includes measures of trans fatty acids, saturated fats and the balance between omega-6 and omega-3 fatty acids. This latter measurement is especially critical. A large number of studies have shown that the balance between these two classes of fats plays a major role in our risk of developing major diseases, such as strokes, heart attacks, cancer, autoimmune diseases, diabetes and the neurodegenerative diseases (Alzheimer’s disease, Parkinson’s disease and Lou Gehrig’s).

In my own personal experience, I have seen a large number of people completely unaware of their extreme abnormalities in this balance of essential fats. A significant number of studies have shown that the typical American diet provides very little omega-3 fats. The normal ratio should be 3:1 omega-6 to omega-3 fats. Most people have a 20:1 to a 45:1 ratio.

Omega-3 fatty acids are especially important for brain function and in the development and growth of the brain in babies.

Other Special Tests

Most of the following tests are optional. They pro-
vide critical information but can be rather expen-
sive when added to the above tests. Throughout my
books and the newsletter I emphasize that excess
free radicals and lipid peroxidation in the body play
a major role in all diseases.

These free radicals can be indirectly measured. The Oxidative Stress Test, which measures these
products in both blood and urine, gives you a good
overall idea as to your level of these harmful sub-
stances. High levels means you need to increase
your antioxidant intake and perhaps change your
diet and toxin exposure.

Another such test is the Comprehensive
Melatonin Profile, which measures your mela-
tonin level, a hormone secreted from your pineal
gland that is critical for sleep and is a powerful
antioxidant for the brain. Recent studies also point
to an anticancer role for this hormone.

In most cases, until age 45 there is little reason to
worry about low melatonin levels. Yet, there are
exceptions. Certain drugs (beta-blockers, ibuprofen,
steroids, sleep aids and Prozac), caffeine, alcohol
and fluoride can lower melatonin secretion. With
the widespread fluoridation of water, use of fluori-
dated medications (such as Prozac) and increasing
fluoride in foods, melatonin deficiencies are becom-
ing more common and occurring earlier in life. Low
levels have even been measured in infants and are
associated with poorer brain function.

Special Tests for Men

Prostate Health

PSA This stands for prostate specific antigen.
When the test first appeared it was considered a
major breakthrough in early detection of prostate
cancer. Recent studies have thrown cold water on
this dream.

More specific PSA test of higher sensitivity also
failed to come through. The problem is that PSA can
be elevated in any condition that causes inflamma-
tion of the prostate and tends to fluctuate widely.

Elevated PSA levels should not be completely
ignored, especially if they continue to increase over
time. For example, if a PSA value goes from 2.5
ng/ml to 8 ng/ml over 3 to 6 months more testing
is indicated. Accepted values for the test are:

→ 0-2.5 ng/ml — low
→ 2.6 - 10 mg/ml — slightly or moderately
elevated
→ 10 - 19.9 ng/ml — moderately elevated
→ 20 or greater — significantly elevated

Some authorities suggest that the values should
be adjusted for age. For example, men below the
age of 50 years should have values less than 2.4
ng/ml, while a man aged 70 years can have a value
of 6.7 and be considered normal.

Quercetin, a common supplement, has been
shown to dramatically lower PSA levels and
improve prostate inflammation. DHA, selenium and
zinc also play a role. For resistant cases, I would add
Nettle, pygeum, pumpkin seed oil, resveratrol, cur-
cumin and saw palmetto.

Testosterone Levels

Many men, especially as they approach middle
age, begin to worry about impotence. While there
are many causes for male impotence, falling levels
of testosterone is an easily identifiable cause.

While the idea that men go through a “male
menopause” has gained in popularity, not all scien-
tists agree there is such a thing. I believe there is. It
is accepted that a decline in testosterone occurs in
most men, it just doesn’t fall as fast as a women’s
hormones.

Testosterone, like female hormones, plays a role
in brain protection and in preventing atherosclero-
sis. In addition, it prevents muscle loss associated
with aging and improves drive and energy levels. In
both men and women, testosterone plays a major
role in both sex drive and sexual interest.

Before considering supplementation, you should
have comprehensive testing for testosterone levels.
This should include measures of both free and
bound testosterone, DHEA levels as well as sex hor-
mone binding globulin (SHBG). Sex Hormone
Binding Globulin binds testosterone in the blood
and when excessive, as occurs in some elderly, may
prevent testosterone from working.
Special Testing for Women

Breast Exams

Breast cancer prevention has gone from science and good medicine to a powerful business. High profits are driving the propaganda for mammograms. Capitalism is also driving innovation, something socialized medicine would never consider. Newer methods, such as digital mammography, have significantly lowered radiation doses and the need for extreme compression of the breast.

Recent studies have shown that yearly mammography increases the risk of breast cancer by 1 to 3% per year, depending on the study. This is significant, since the effect is additive as mentioned in the introduction. Even at 1% per year, in 10 years that is a 10% increased risk. For women with a high genetic risk of breast cancer and those with known impaired DNA repair disorders, the risk is even greater.

Safer alternatives include thermograms, ultrasounds, careful self-examinations and MRI scan of the breast. MRI scanning has been shown to provide significantly better examinations of the breast without the use of radiation. It is especially useful for women with dense breast tissue, such as pre-menopausal women and those with significant fibrocystic disease. And no “smashed” breast — which is required for a proper mammogram!

The problem is that most insurance will not pay for MRI breast scans as a routine screening procedure. They will pay if the conventional mammogram suggests a need.

Female Hormone Testing

Routine testing in pre-menopausal women is generally not indicated. For the post-menopausal woman considering hormone replacement, it is essential. Unfortunately, most doctors, even gynecologists, never test these women; they just write a standard prescription and hope for the best.

Most of the hormones used contain estradiol, the most powerful of the estrogens, as the primary hormone. It is also the one most connected with breast cancer. Estriol is much weaker and may even protect against breast cancer.

Before taking a supplement, I would suggest a comprehensive female hormone test that measures all three of the female hormones, testosterone, DHEA, sex hormone binding globulin (SHBG) and the sex hormone metabolic products. From these test results your doctor can better design and adjust your hormone replacement.

Of special importance are the sex hormone metabolic products. These include 2-hydroxyestrone and 16-alpha-hydroxyestrone. The latter of these is associated with a significantly higher risk of breast cancer (and other cancers). This test measures the ratio of 2-hydroxyestrone to 16-alpha-hydroxyestrone. High ratios are protective against breast cancer and vice versa.

Bone Density Measurements

Most people think of bone density studies as involving special x-ray machines. In fact, better measurements can be obtained from blood tests. One of the best involves measurements of pyridinium crosslinks and deoxypyridinoline (DPD).

Pyridinium is a substance found in both bone and cartilage and deoxypyridinoline is found predominantly in bone. High levels of DPD indicate osteoporosis when other bone disorders are not present.

Pyridinium is elevated in a number of conditions including osteoporosis, rheumatoid arthritis, osteoarthritis and chronic alcohol abuse. These tests are very valuable in following responses to treatments.

What About Total Body Scans?

As stated earlier, total body CT scan, which use radiation, are associated with a doubling of cancer risk.

You must also consider, if the scan shows something suspicious your doctor is obligated to look further. This could mean surgery, a biopsy, an endoscopic exam or other invasive testing. They do this not just to make more money but because aggressive plaintiff lawyers are always circling overhead.

Total body MRI scans do not use radiation but I worry about having my molecules rearranged (the MRI magnet pulls your atoms into sync and releas-
es them, which produces the energy burst that forms the scan). The MRI is a lot more accurate than a CT scan for most problems. Still, it has blind spots.

Some may have seen advertisements for clinics that, for $3000 to $5000 dollars, will do comprehensive testing. Most do not include an examination of the critical areas I have covered in this letter. Then there is the problem of interpretation and what to do if they find something. Unless the examining doctor is well versed in nutritional medicine as well as conventional medicine, you may be no better off.

While I have only mentioned the Great Smokies Diagnostic Laboratories there are others who do some of these tests. I have had experience with Great Smokies and they are approved by GLIA, the College of American Pathologist and have a Medicare license. A number of their tests are covered by Medicare and conventional insurance plans. I have no financial connection to any laboratory. In addition they have very colorful and easy to read tests results and provide the patient with comprehensive analysis of the tests.

**Laboratories Doing Special testing**

**Great Smokies Diagnostic Laboratories**
www.gsdl.com
800-522-4762

**Great Plains Laboratories**
888-347-2781

**MetaMatrix Diagnostic Laboratory**
www.metamatrix.com
800-221-4640

**Doctor’s Data**

In addition to other tests they have a special water report to test your drinking water for toxic metals including fluoride and a fecal metals test that is best for measuring mercury.

**A final word about cost**

While the total cost of these tests can be significant you will be getting them only twice in your life. It is an investment that is well worth it.

**Nutrition in the News**

Now let us examine a few of the items appearing recently in the news and the world of medicine.

**Cancer News**

A new study provides strong evidence that the same virus responsible for cervical cancer and some neck cancers causes breast cancer. Scientists in this study found human papillomavirus (HPV) in 25 of 29 samples of breast cancer tumors using a very sophisticated technique. Interestingly, infections by the virus are also increased by smoking, family history and female hormones just as we see in breast cancer. Likewise, high levels of 16-alpha-hydroxyestrone are also associated with an increased incidence of...
HPV infection, just as with breast cancer. Another reason to have yourself tested.

Several new studies found that special forms of vitamin E can cause prostate cancer cells to die, yet strengthens normal cells. One of these cancer-killing compounds is called tocotrienol. Several recent studies have shown that the tocotrienol group of compounds are efficient killers of breast and prostate cancers and do so by a multitude of mechanisms.

Tocotrienols are available from natural health suppliers. The dose is 50 to 100 mg a day. It comes in a gelatin capsule so remove the oil from the capsule and mix with a teaspoon of extravirgin olive oil or fish oil. The gamma-type vitamin E (gamma-tocopherol) has also been shown to inhibit the growth of cancers and is the only form of vitamin E that reduces inflammation.

One very interesting study found a 500% reduction in prostate cancer risk in men with the highest blood level of gamma-tocopherol. Selenium and alpha-tocopherol when combined with the gamma-tocopherol offered the greatest protection.

Another interesting study found a strong correlation between low levels of CoQ10, alpha and gamma-vitamin E and cervical cancer. The more advanced the cancer the lower the levels of these antioxidants. The study indicated that low levels of these antioxidants led to the development of these cancers.

Finally, a study found a frightening association between blood glucose levels, IGF-1 and insulin levels and the risk of breast cancer. Women with the highest glucose level had a 280% higher risk of developing breast cancer. Those with the highest IGF-1 had a whopping 310% increased risk of breast cancer. IGF-1 is insulin-like growth factor, a blood marker that indicates high rates of cancer growth and spread.

Interestingly, a diet high in fruits and vegetables

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About Dr. Blaylock

Dr. Russell Blaylock edits NewsMax.com’s The Blaylock Wellness Report. He is a nationally recognized board certified neurosurgeon, health practitioner, author and lecturer.

He attended the Louisiana State University School of Medicine in New Orleans and completed his internship and neurosurgical residency at the Medical University of South Carolina in Charleston, South Carolina.

For the past 26 years he has practiced neurosurgery in addition to having a nutritional practice.

He recently retired from his neurosurgical practice to devote full time to nutritional studies and research. Dr. Blaylock has authored three books on nutrition and wellness, including Excitotoxins: The Taste That Kills, Health and Nutrition Secrets That Can Save Your Life, and his most recent work, Natural Strategies for The Cancer Patient. An in-demand guest for radio and television programs, he lectures widely to both lay and professional medical audiences on a variety of nutritional subjects.

Dr. Blaylock is a member of the international board of the World Natural Health Organization. He is the 2004 recipient of the Integrity in Science Award granted by the Weston Price Foundation.

Dr. Blaylock serves on the editorial staff of the Journal of the American Nutraceutical Association and is the associate editor of the Journal of American Physicians and Surgeons, official journal of the Association of American Physicians and Surgeons.

He previously served as Clinical Assistant Professor of Neurosurgery at the University of Mississippi Medical Center in Jackson, Miss., and is currently a visiting professor of Biology at the Belhaven College in Jackson, Miss.
has been shown to lower both glucose levels and IGF-1 levels.

Heart Attack and Stroke News

A new study found that the greater one's intake of fish oils the lower the risk of strokes. In this large study they found people eating fish 1 to 3 times a month had a risk of strokes 12% less than those who ate none. Eating fish 2 to 4 times a week reduced risk by 31%. This confirms a number of previous studies showing a dramatic reduction in heart attacks and strokes with increased fish oil consumption.

Since most cold-water fish have high levels of mercury, I would suggest taking high purity fish oils instead. The Carlson Company makes a delicious oil of very high purity. One teaspoon a day supplies all of the healthy EPA and DHA oils you need.

A new study showed a strong correlation between eating fresh fruits and high-density vegetables (squash, onions, garlic, greens, broccoli and Brussels sprouts) and a lower risk of developing a heart attack or stroke. Of particular importance is increasing one's intake of flavonoids, folate and vitamin B12 (not found in vegetables).

In one recent study in which 43,732 men aged 40 to 75 years of age were followed for 14 years it was found that those with the highest intake of folate and vitamin B12 had a 29% lower risk of having a stroke. When you combine omega-3 oils, fruits and vegetables, and increased intakes of vitamin B12 and folate together you see incredible protection against strokes and heart attacks.

Another study of 1,710 men followed for seven years found a strong correlation between a diet high in fruits and vegetables and low in meats and lower blood pressure. Previous studies found a strong correlation between vitamin C intake and lower blood pressure. Aged garlic extract is also known to be very powerful in lowering blood pressure. Elevation in blood pressure (hypertension) is strongly associated with heart attacks and strokes as well as Alzheimer’s disease.

Marijuana and Psychosis

This explosive study should put the damper on the excitement some are voicing over the medical use of marijuana or even its wholesale legalization. German researchers studied young men age 12 to 24 over a four-year period to see the effects of marijuana on developing psychosis.

They found that on average there was a 6% increased risk of psychosis in marijuana smokers. Most important, those with a family history of psychiatric disorders had a 50% chance of developing psychosis during the four-year study. The longer the use and the more they used the greater the risk.

The active ingredient is delta-tetrahydrocannabinol (THC). Ironically, the concentration of THC had increased enormously since the 60s, going from 2-3% to the current 20% used by modern youth. One can quickly see that we would have a nation of dangerous psychotics should marijuana be legalized.

As for medical use (cancer, multiple sclerosis and glaucoma patients), there are safer nutritional alternatives. Likewise, marijuana causes severe damage to DNA and is associated with increased cancer growth and spread and the development of an incurable form of lung and oral cancer.