

# VACCINATIONS

# IMMUNIZATION

# VACCINATION IS NOT IMMUNIZATION

## Editors, Alternatives Medicine Digest ([AlternativesMedicine.com](http://AlternativesMedicine.com))

We've always been told that vaccines are safe, effective and necessary. We hear how modern civilization has been saved from the ravages of infectious disease by the invention of miraculous vaccines. We hear how important it is for children to get their shots so they'll be safe from disease. And we all agree: Children have a right to be protected from harm. But there's a huge body of information that indicates that vaccinations are dangerous.

There are just too many unanswered questions. Do vaccines put infants at risk of sudden death? Do vaccines really give our children immunity to disease? Are all vaccines really necessary? Are our children unhealthy as a result of vaccination? Are the climbing rates of infectious and degenerative diseases among adult Americans partly attributable to the effects of vaccination?

We're programmed to think of immunization and vaccination as synonyms. That's no accident. It cost plenty to make us think they're the same. The word "immunization" instead of "vaccination" is now pervasive in both medical and mainstream literature, creating a semantic reality that cannot be supported by evidence. There is a big difference between the two. Immunization means to make someone immune to something. Vaccination, by contrast, according to Dorland's Medical Dictionary, just means to inject "a suspension of attenuated or killed microorganisms...administered for prevention...or treatment of infectious disease."

Vaccination does not guarantee immunity. Natural immunity happens only after one recovers from the actual disease. During the disease, the microorganism usually has to pass through many of the body's natural immune defense systems—in the nose, throat, lungs, digestive tract and lymph tissue—before it reaches the bloodstream. As it does, the microorganism triggers many biological events that are essential in building true natural immunity. When a child gets a new disease, he may feel sick for several days, but, in the vast majority of cases, he will recover.

The first vaccines by Pasteur and Koch, and also most modern ones, were and are made up of experimental proteins from rotting, diseased samples of animal tissue (cows, sheep, monkeys and horses) carrying some "weakened" infectious agent. Others are toxic by-products of microorganisms that are neutralized by formaldehyde and aluminum. Most vaccines have components called adjuvants, or helpers. These include human blood and formaldehyde, a carcinogenic liquid, used for embalming. Mercury is used as an adjuvant; it is added in the form of thimerosal, a preservative. It can cause nerve damage, autoimmune disorders and cancer. Another adjuvant, aluminum, is a proven neurotoxin, positively associated with a number of disorders. Do we really get immunity from these concoctions?

The thinking behind vaccination is that if the person gets a "minor" case of the disease under the "controlled" conditions of vaccination, he will produce his own antibodies to the disease agent, and this will confer immunity because his immune system will remember what the "bad bug" looks like. The next time the bug shows up, immune defense cells will be ready to kill it. But there is no general agreement that this truly happens as a result of vaccination.

### **Unproven assumptions**

Researchers like Alan Phillips, author of *Dispelling Vaccination Myths*, say that “natural immunity is a complex phenomenon involving many organs and systems; it cannot be fully replicated by the artificial stimulation of antibody production.” Vaccination by direct injection is based on the unproven assumption that the mere artificial stimulation of antibodies by the sudden presence of a foreign agent in the bloodstream confers immunity. It doesn't.

If the body is allowed to figure out how to fight the disease on its own, without the added confusion and burden of vaccines and drugs, the body can develop natural immunity and will not be susceptible to the same disease in the future. It now has a memory of how to fight the disease.

Artificial immunity from vaccination is often temporary. This helps explain why some individuals still develop the disease they were vaccinated against. This also is the reason for booster shots. Artificial immunity from vaccination has created the modern phenomenon of atypical forms of the original disease appearing during adulthood.

The process of creating a vaccine involves making a disease agent gradually weaker and weaker, disguising it until it is below the threshold of making your body become ill when the vaccine is injected into your blood. That means your immune system does not get triggered normally. By allowing the inoculation of an attenuated (half-killed) virus or bacteria into the body, we have done something nature would never permit.

We have violated the sanctity of the bloodstream. We have tricked the immune system into not mounting an all-out response to a foreign agent. If the vaccine's microorganisms were not attenuated, all the powers of the natural immune system would join together to attack the invader. Harvard Medical School's Richard Moskowitz, M.D., explains that the way vaccines are evolved is to make them weaker, just to the point where they don't produce any immediate inflammatory response. He believes that, in this form, the altered virus or bacteria can penetrate deeper into our tissues than would naturally be possible. They can remain latent for a short time or for years.

Then when something triggers them into action, they can manifest themselves in virtually any place or system of the body, causing major dysfunction, degenerative disease, or even death. There is no convincing scientific evidence that mass inoculation can be credited with eliminating any infectious disease. If vaccinations were responsible for the disappearance of these diseases in the U.S., why did these diseases disappear simultaneously in Europe, where mass vaccinations did not take place?

### **Undeserved credit**

Medical statistician Michael Alderson, author of several classic research texts, has shown how infectious diseases had sharply declined before mass vaccination ever came upon the scene. Many researchers feel from looking at the data that infectious diseases would have largely disappeared without any vaccines, due to improvements in sanitation and hygiene before mass inoculations took place.

Australian medical researcher Viera Scheibner, Ph.D., summarized her investigation of some 30,000 pages of medical literature on vaccination in “Sudden Infant Death Syndrome,” a 1999 letter to Congress: “Immunizations, including those practiced on babies, not only did not prevent any infectious

diseases, they caused more suffering and more deaths than has any other human activity in the entire history of medical intervention. It will be decades before the mopping-up after the disasters caused by childhood vaccination will be completed. All vaccinations should cease forthwith, and all victims of their side effects should be appropriately compensated.”

We Didn't Need to be Rescued This table show how diseases have on their own during this century. The numbers indicate the approximate year that mass vaccinations were introduced. Year

<b>Year</b>	<b>Polio</b>	<b>Smallpox</b>	<b>Diphtheria</b>	<b>Pertusis</b>
1901	6911	48839	33094	-
1906	352	28225	26436	-
1911	354	20350	20285	-
1916	495	15623	21382	-
1921	7229	781	12267	14724
1926	6038	227	7074	13047
1931	4545	51	4388	9850
1936	3666	9	2189	6809
1941	3539	9	1135	4399
1946	799	6	467	1460
1951	3826	0	125	558
1956	1604	0	45	206
1961	1076	0	22	82
1966	928	0	15	32
1971-75	0	5	12	122

<b>Year</b>	<b>Tetanus</b>	<b>Measles</b>	<b>Influenza</b>
1901	28065	1956	15496
1906	16318	10837	10109
1911	11503	7615	7086
1916	8596	7926	54283
1921	7818	4919	13673
1926	6040	3994	17602
1931	4709	2957	11191
1936	3275	1238	8449
1941	2384	1013	4366
1946	1697	469	1736
1951	1093	268	1178
1956	788	203	938
1961	550	162	553
1966	282	44	633
1971-75	22	7	491

The chart below shows when mass vaccinations for these diseases were introduced in the U.S. Disease Year Mass Vaccinations Began:

Polio	1955
Smallpox	1902
Diphtheria	mid-1940's
Pertussis	mid-1940's
Tetanus	mid-1940's
Measles	1963
H. influenzae	1985

Comparing these dates to the mortality rates above, it is obvious that diphtheria, pertussis, influenza, etc., were on their way out long before their respective vaccines were introduced on a mass scale. Jane Orient, M.D., Executive Director of the Association of American Physicians and Surgeons, agrees: “Public policy regarding vaccines is fundamentally flawed...permeated by conflicts of interest. It is based on poor scientific studies that are too small, too short and too limited.”

Dozens of other legitimate researchers and doctors have come to the same conclusion. Alan Phillips adds that the data on vaccines shouldn't really be that much of a secret: “Hundreds of published medical studies document vaccine failure and adverse effects; several dozen books have been written expounding on these and related information condemning vaccines. Yet amazingly most pediatricians and parents are completely unaware of these findings.”

As of December, 2000, 40 vaccinations are currently mandated for children in the American Pediatric Association's immunization (i.e., vaccination) schedule. The word “mandated” doesn't mean the same thing as mandatory, but for all intents and purposes, it might as well. Vaccination is so accepted, is seen as so necessary by most people, that they don't even question it. If they do, the consequences can be ostracism or worse.

Unless parents sign exemption forms, children must be vaccinated before they can get into school. This is the law, and legislation is controlled by lobbying. The second most powerful lobby in Washington is the pharmaceutical industry. We have to ask, then, what is behind the vaccination schedule: proven health benefits for our children or corporate profits?

Since 1986, the U.S. government has paid \$1.2 billion to parents of vaccine-injured and -killed children.

Pharmaceutical companies are inventing new vaccines every year, all with the hope of their being included in the mandated vaccination schedule. It's very big money. And there are more vaccines on the back burner. Yet there are never long-term safety studies before vaccines get approved for mass use. There are also never any follow-up studies about long-term effectiveness of vaccines. This is why vaccines are always being altered and replaced—they cause negative side effects. That is why, since 1986, the U.S. Federal Government's National Vaccine Injury Compensation Program (NVICP) has paid out over \$1.2 billion in taxpayer dollars to parents of vaccine-injured and -killed children. We and our children are “lab rats.”

### **Vaccines and our children's declining health**

Before mass vaccination programs, the term Sudden Infant Death Syndrome (SIDS) didn't exist. Now at least 10,000 American babies mysteriously die each year with the catch-all SIDS diagnosis.

Meanwhile, the declining health of our children is becoming obvious. According to the Centers for Disease Control (CDC), the figures for asthma incidence since 1980 have gone from 6.7 million to 17.3 million cases. Most of the increase is in children. More than 5,000 die each year from asthma attacks. The overall health of American children is pathetic: Asthma, allergies, autoimmune disease and the very infectious diseases for which they were vaccinated—all are on the rise.

Over 15 years ago, the late Robert Mendelsohn, M.D., Professor of Medicine at University of Illinois Medical School, wrote, “There is a growing suspicion that immunization against relatively harmless childhood diseases may be responsible for the dramatic increase in autoimmune diseases since mass inoculations were introduced.” These include certain cancers, leukemia, rheumatoid arthritis, multiple sclerosis, Lou Gehrig’s disease, lupus and the motor neuron disease, Guillain-Barré syndrome. Some of the most frequent complications of vaccinations “gone wrong” seem to be diseases of the central nervous system.

It’s easy to understand why, in the case of children. Their nervous systems are in the process of forming, and nerve tissue is sensitive to minute changes in its biological environment. The insulation around the nerves—the myelin—is not complete yet. The presence in the blood of a diseased vaccine protein, plus the toxins mercury, aluminum and formaldehyde, can trigger processes that contribute to abnormal nerve growth.

Harris Coulter, Ph.D., has chronicled a skyrocketing incidence of post-vaccination neurological disorders, including hyperactivity, learning disabilities, mental retardation, encephalitis and Guillain-Barré syndrome. These statistics are missing in the pediatric profession. Adverse reactions usually don’t get reported and are routinely met with denial: There are many documented examples and case histories of mothers given the brush-off when reporting a vaccine reaction to their pediatricians. Perhaps the reason is basic economics: Vaccinations are the bread and butter of pediatricians.

What kind of money are we talking about here? In 1998, the worldwide market for pediatric vaccines was \$1.8 billion. But a lot more is involved than just the vaccine sales. Vaccines are the very foundation of the “well baby” programs and therefore the livelihood of the entire pediatric industry.

Unbelievably, not until recently was there a centralized U.S. record-keeping agency to which physicians could report vaccine reactions. It wasn’t until 1991 that the Vaccine Adverse Effect Reporting System (VAERS) was set up by the FDA and the CDC. Some 33,000 reactions were reported between 1992 and 1996. Before then, it’s anybody’s guess how many reactions and deaths there were, because no agency was keeping track.

The FDA estimates that doctors still only report a small fraction of these adverse reactions—less than 10%. In 1998 the National Vaccine Information Center did a survey of New York pediatric offices and found out that “only one doctor in 40 reports a death or an injury following vaccination.” Yet this information has not been acted upon by either the FDA or the CDC, even with documented reports of death and neurological damage to infants.

Many of the adverse reactions to vaccination probably haven’t even shown up yet. After all, someone may not get a disease as a result of a vaccine that contained atypical forms of a disease agent or other contaminants until years after vaccination. And for many vaccines, a 48-hour limit has been arbitrarily set for reporting a reaction. This means that if a baby dies 50 hours after a shot, that death is not

reported as an adverse reaction.

Chances are you won't hear any information about vaccines from a pediatrician during a "well baby" visit. After all, an M.D. could be committing career suicide by taking a stand against vaccination. But it's hard not to be angry at doctors and hospitals who so willingly and unquestioningly accept the products of drug companies, and thereby happily share in the billions of dollars being made off vaccines. It makes one wonder: If those in power were faced with a choice between the health of our children and a \$30 billion industry, would they choose health over dollars? And if those involved in the vaccine industry had done the studies and discovered that, beyond all doubt, vaccinations are not only ineffective but are instead the cause of much disease and death, would anyone tell us?

Someone may not get a disease as a result of a vaccine containing an atypical disease agent or contaminant until years after they are vaccinated.

Clarence Darrow, the famous early 20th century lawyer, voiced an oft-quoted objection to mandatory vaccination that's still relevant today. He asked, if vaccinations really work, those vaccinated will be immune to the disease, right? So what does it matter if some people choose to go unvaccinated? What do the vaccinated have to worry about? Aren't they protected? Shouldn't people have the choice whether or not to have their children vaccinated—a choice based on full disclosure of risks and benefits? A lot of medical doctors today know enough to withhold vaccines from their own children, even though they continue to administer them to patients. Others just take the position that "we don't really know enough not to vaccinate people." This is an intellectually impotent position. If a doctor is going to stick a needle into a child's arm and inject something into the bloodstream, they should be certain that they have a thorough knowledge of all the short-term and long-term consequences.

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Before a parent lets a doctor do such a thing, they need to be equally well-informed. The CDC's statistics on adverse reactions show that vaccinations carry significant risk. A parent needs to say to the pediatrician, "Before you inject my child, can you prove to me that vaccines are safe and necessary?"

**Contact:**

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**Recommended Reading:**

*Immunization: The Reality Behind the Myth*, by Walene James. Paperback (2nd ed.; 1995) Bergin & Garvey. Info: [www.whale.to/vaccines/james1.html](http://www.whale.to/vaccines/james1.html)

*The Doctor's Guide to Protecting Your Health Before, During and After International Travel* by W. Robert Lange, M.D., M.P.H. Paperback (1997) Pilot Books

*How to Raise a Healthy Child . . . In Spite of Your Doctor*, by Robert S. Mendelsohn, M.D. Paperback

(1990) Ballantine Books

The Case Against Immunizations, by Richard Moskowitz, M.D. Reprints of lectures on vaccinations given by Dr. Moskowitz available for \$3.00. Write to 173 Mt. Auburn Street, Watertown, MA 02172.

The Vaccine Guide: Making an Informed Choice, by Randall Neustaedter, O.M.D. Paperback (2nd ed.; 1996) North Atlantic Books

Vaccination: The Issue of Our Times, by Peggy O'Mara (Editor). Paperback (1997) Mothering Magazine. Info: [www.mothering.com](http://www.mothering.com)

Vaccines: What Every Parent Should Know, by Paul A. Offit, M.D., and Louis M. Bell, M.D. Paperback (2nd ed.; 1999) Hungry Minds, Inc.

## **DO VACCINES IMPAIR IMMUNE FUNCTION?**

**Dr. Neustaedter, O.M.D., L.Ac.**

A healthy immune system gives us the ability to resist or subdue infection, allergy, chronic illness and degenerative disease. As we mature and age, the immune foundation we develop during our first years of life will remain vitally important.

At birth, certain immune defense mechanisms are already in place. Substances secreted in the skin and mucous membranes serve as the first line of defense, and white blood cells that destroy disease agents by engulfing them (phagocytosis) and other functions are a second line of defense. Although newborns aren't able to produce all the antibodies and other immune defenses they will need, they are already capable of recognizing more than a million different identifying characteristics of foreign substances, or antigens. Infants who are breast-fed receive maternal antibodies and immune-cell stimulating substances from breast milk. For the first few months of life, these maternal antibodies can provide passive immunity against many specific infections.

During the first year of life, babies develop their own antibodies. Other immune defenses also continue to develop as body cells mature and as the child is exposed to numerous bacteria, viruses and fungi in the environment, which stimulate long-term or even lifelong immune-cell memory. The subsequent resistance to a specific antigen is called natural immunity. By contrast, artificial immunity—as conferred by vaccination against diseases such as polio and pertussis—is quite different.

Vaccinated immunity relies only on antibody response to inoculation with specific antigen strains. The hope is that the immune system will be sufficiently stimulated and produce enough antibodies to create immunity to the vaccine antigen. But there are intrinsic problems with vaccination theory. The immune system is not a one-truck fire station: Antibodies aren't the only way to snuff out invading disease agents. There are many, many immune defense mechanisms (including biological response modifiers such as interferon, produced by white blood cells) and different biochemical messengers (including hormones and neurotransmitters). All are involved in maintaining strong natural immunity.

A larger problem with vaccination, however, is that it appears to have an adverse effect on immune function. In the case of childhood vaccination, it is thought that current vaccines cause serious defects in immune development and function. While the assumption has always been that we can have both vaccinated immunity and a healthy immune system, this is apparently untrue. When an immune system, especially a developing one, is bombarded with “inactivated” antigens suspended in solutions of toxic additives, contaminants and solvents, immune function can become impaired. While we might be at reduced risk of contracting the formerly crippling and lethal diseases that we were inoculated against, it's the vaccines themselves that are now the crippers.

Many health professionals are speaking out about their concern that childhood vaccines harm the developing immune system. At the same time, questions are being raised about the skyrocketing rate of chronic illness and disease among children. It doesn't seem likely that processed foods, environmental toxins, psychological stress and overused antibiotic drugs are the only culprits. Do these factors explain, for example, the appalling rise in asthma and diabetes in children?

Randall Neustaedter, O.M.D., L.Ac., CCH, who has practiced homeopathy and traditional Chinese

medicine for more than 20 years, and in 1996 wrote *The Vaccine Guide: Making an Informed Choice*, believes that vaccines can disable the immune system. Observing that illnesses tend to begin when babies are three or four months old—the point at which maternal antibodies are beginning to wear out, leaving babies susceptible to environmental microbes—Dr. Neustaedter asks, “Why aren’t these babies developing their own antibodies in response to the initial viral or bacterial infections?”

“What prevents their immune systems from mounting a vigorous response? And why does this pattern of illness with recurrent ear infections occur so often now, a pattern that was rare prior to 30 years ago? What is weakening the immune function of today’s infants and young children?”

Dr. Neustaedter believes that researchers need to spend more time investigating immune system reactions to vaccines. Two research models have been used to discover possible adverse effects on the immune system. One is designed to study illness patterns preceding and following vaccination. The other looks at whether vaccines have any negative effects on white blood cells, the body’s primary immune defense cells. Dr. Neustaedter says that investigations thus far have produced the same conclusion: Vaccines can trigger immune suppression.

A 1996 study in the *New England Journal of Medicine* revealed that tetanus vaccine disables the immune system in HIV patients. Tetanus vaccination produced a drop in immune T cells, a classic marker of immune deficiency, in 10 of 13 patients, with a rise in viral replication.

Dr. Neustaedter notes that the immune-destructive effect of vaccines can persist over a long period of time, although we don’t yet know how long. In one study, published in the *Journal of Infectious Diseases*, it was shown that the measles vaccine has a long-term depressive effect on interferon production. The vaccination of one-year-olds with measles vaccine caused a precipitous drop in their level of alpha-interferon production. This decline was still persisting one year following vaccination, when the study was terminated.

Researchers are looking at the role vaccines play in childhood asthma and allergy. Results of the Christchurch Health and Development Study in New Zealand, published in 1997 in *Epidemiology*, point to higher rates of asthma and allergy episodes among vaccinated children. And in a study using the Mumps-Measles-Rubella (MMR) vaccine at the Johns Hopkins University School of Medicine, researchers investigated the association between childhood asthma and live-virus vaccines, concluding that “universal childhood vaccination using live viral strains may be contributory to the rise in IgE [antibody]-mediated disorders.”

Other researchers are saying that vaccines are disabling our bodies’ ability to react normally to disease, thereby creating autoimmune conditions. In 1994, a committee of investigators at the Institutes of Medicine directly associated vaccines with the rising occurrence of autoimmune diseases, such as multiple sclerosis, that attack and destroy the myelin sheaths (tubular insulation) of nerves. They said it’s “plausible that injection of an inactivated virus, bacterium, or live attenuated virus might induce in the susceptible host an autoimmune response by deregulation of the immune response, by nonspecific activation of the T cells directed against myelin proteins, or by autoimmunity triggered by sequence similarities of proteins in the vaccine to host proteins such as those of myelin.”

A study published in the *New Zealand Medical Journal* in 1996 revealed that an epidemic of diabetes followed a massive campaign to vaccinate children against hepatitis B. The study showed a 60%

increase in childhood insulin-dependent diabetes, an autoimmune disease, occurring in the years following the 1989–1991 vaccination program of children aged 6 to 16. Other studies have shown that widespread use of the Haemophilus meningitis vaccine has resulted in diabetes epidemics. Diabetes has also been frequently observed as a consequence of the mumps vaccine: Three European studies reported 22 cases of diabetes that began within 30 days of mumps vaccination.

These are just a very few studies amidst the growing proof, says Dr. Neustaedter, that tampering with the immune system can cause devastating disease.

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## **PREVENTING VACCINE SIDE EFFECTS**

**F. Fuller Royal, MD., H.M.D**

There's a way of determining in advance how likely a child is to react to certain vaccines. This technique is also used to neutralize many vaccine side effects and to remove residuals (such as live viruses).

The technique is electrodermal screening (EDS) combined with homeopathy. EDS is also known as computerized EDS, or CEDS, and is sometimes referred to by an older name, electroacupuncture according to Voll (EAV). It uses a noninvasive probe placed at acupuncture points along the body's energy meridians to read minute electrical signals from these points. The signals are then compared with signals from substances in test reference vials. In the hands of skilled health practitioners, EDS conveys key information for diagnosis. Different acupuncture points as well as organs can be tested to determine a person's response to many substances and then to guide the preparation of the appropriate homeopathic remedies.

"If we are going to vaccinate, we should do it without creating all the side effects." says Harold Whitcomb, M.D., a retired internist in Aspen, Colorado, who specialized in environmental and preventive medicine. Dr. Whitcomb tells the story of a child who had a strong adverse reaction to his second and third DPT shots.

For two years afterwards, the child didn't thrive or grow. Dr. Whitcomb tested him using EDS and prepared a homeopathic antidote to neutralize the vaccine damage. The computerized EDS system can draw on a large database of test substances, all stored as energy signals, which are used to identify a remedy that will reverse or neutralize a particular reaction. "This allowed me to make a remedy that neutralized the pertussis," says Dr. Whitcomb. "The boy recovered and started to grow again."

Perhaps even more important is the ability to prevent certain vaccine side effects by EDS testing. Before giving a DPT vaccine, for example, EDS could be used to assess how a child's system might react—especially to the pertussis component, which should be avoided for high-risk children.

Depending on test results, the pertussis component could be avoided entirely, or the dosage adjusted. (See "Step One in Preventing Illness," by Burton Goldberg, *Alternative Medicine*, No. 32, November 1999. Also see "Reversing Autism with Nutrition," by Patricia Kane, Ph.D., *Alternative Medicine*, No. 19, September, 1997).

F. Fuller Royal, M.D., H.M.D., medical director of the Nevada Clinic and Secretary-Treasurer of the Nevada State Board of Homeopathic Medical Examiners.

# **WHAT ABOUT MERCURY? GETTING THIMEROSAL OUT OF VACCINES**

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**Lisa Reagan**

In his opening statement to the House Committee on Government Reform's hearing on mercury and medicine on June 18, 2000, Congressman Daniel Burton (R-Indiana) stated, "We assume that the FDA would protect our children from exposure to any level of mercury through drugs. But that has not been the case. Thimerosal was first marketed in 1930 and has become the most widely used preservative in vaccines. It is present in over 50 licensed vaccines.

The FDA recently acknowledged that in the first six months of life children get more mercury than is considered safe by the EPA. The truth is that sometimes kids go to their doctor's office and get four or five vaccines at the same time. My grandson received vaccines for nine different diseases in one day. He might have been exposed to 62.5 micrograms of mercury in one day through his vaccines. According to his weight, the maximum safe level of mercury that he should be exposed to in one day is 1.51 micrograms.

This is 41 times the amount at which harm can be caused." Burton's grandson, who was healthy before he received the shots, now suffers from autism. Burton and Congressman Henry A. Waxman (D-California) have written to Secretary of Health and Human Services Donna Shalala requesting that a panel be convened to look at the mercury issue. "If your position is that we should base our policies on good science and good research, then fine. I agree with you 100 percent. But if you are not willing to do the research, if you are not even willing to ask the questions, then we have a real problem on our hands," Burton said in the letter to Shalala. Burton was a keynote speaker at the National Vaccine Information Center's conference in September 2000.

On July 9, 1999, the US Public Health Service and the American Academy of Pediatrics issued a joint statement recommending the removal of thimerosal from vaccines. On May 31, 2000, the FDA notified vaccine manufacturers that its review of mercury compounds in drugs and foods concluded that reducing or eliminating thimerosal from vaccines is merited. "One would think that the FDA would have moved aggressively to remove vaccines that contained mercury from the market immediately. They did not...

The FDA continues to allow the mercury-containing vaccines to remain on the market. Today, over 8,000 children in America may be given a toxic dose of mercury in their vaccines," said Burton. The mercury problem's been investigated in many congressional hearings in the last three years. A number of retailers and hospitals, including Walgreens and Wal-Mart, have begun voluntarily to take products containing mercury off their shelves and inventories. <http://www.mothering.com/10-0-0/html/10-8-0/1> Another speaker at the NVIC conference, Stephanie Cave, MD, said, "Mercury poisoning and autism have nearly identical symptoms: self-injurious behavior, social withdrawal, lack of eye contact, lack of facial expression, hypersensitivity to noise and touch, and repetitive behaviors."

Noting that the EPA safe limit for mercury exposure is .1 micrograms per kilo per day, Cave said, "The mercury has left its mark in the brains and immune systems of these children.... The body gets rid of mercury by secreting bile, but an infant does not produce bile at this age. In the hepatitis B vaccine

alone, we are giving 12.5 mcg at birth, 12.5 mcg at a month, 50 mcg at two months, 50 mcg at four months, and 62.5 mcg at 6 months, and if you do your math, we're giving a load of mercury to these children before they can make bile and can get rid of it."

The FDA, Burton said at the conference, determined that mercury compounds used as active ingredients in over-the-counter drug products weren't "generally recognized as safe." "Additionally, the FDA doesn't consider any mercury-containing compounds to be "generally recognized as safe." On its own website ([www.fda.gov/www.fda.gov](http://www.fda.gov/www.fda.gov)), the FDA states, "Lead, cadmium, and mercury are examples of elements that are toxic when present at relatively low levels." "How is it that mercury is not safe for food additives and over-the-counter drug products, but it is safe in our vaccines and dental amalgams?" Burton asked. He recommended that all parents who choose to vaccinate request monovalent, mercury-free forms of vaccines. To see the transcripts of the congressional hearing on mercury in medicine, you can go to [www.house.gov/reform/hearings/healthcare/00.07.18/index.htm](http://www.house.gov/reform/hearings/healthcare/00.07.18/index.htm)

To view the ARC Research chart listing the symptoms of mercury poisoning and autism, go to [www.autism.com/ari/mercurylong.html](http://www.autism.com/ari/mercurylong.html)

Notes 1. Karen Pallarito, "DC Hospitals, National Retailers Agree to Ban Mercury-Containing Products," Reuters Health Online, September 27, 2000.

Lisa Regan resides in Williamsburg, Virginia, with her husband, Keith, a portfolio manager, and their son, Collins (3). She is the president of Families for Natural Living ([www.FamiliesForNaturalLiving.org](http://www.FamiliesForNaturalLiving.org)), a nonprofit that provides both information to the public and support to families.

# VACCINE NATION

Stephen Marshall, November 20, 2002

In what is shaping up to be one of the most draconian weeks since the Bush Administration took power, Tuesday's Senate ratification of the Homeland Security Act leaves little doubt that corporate interests have a major stake in the post-9/11 re-engineering of American law.

Just one day after the super-secret Foreign Intelligence Surveillance Court's decision to expand the Justice Department's power of surveillance over U.S. citizens, Republican lawmakers squeezed the controversial bill through the Senate with a last-minute promise to moderate that it would later be gutted of "special interest" provisions, one of which shields pharmaceutical companies from liability in vaccine-related injury suits.

As it stands, the American public will now be subject to forced immunization, under the penalty of fine and imprisonment, without the potential of legal recourse against the companies that manufacture them. And, while Republicans were quick to spin the liability protection as necessary for the bolstering of unfettered bio-technological research (in an era of potentially nation-crippling bio-terrorism), one need only read the fine print that retroactively limits the liability of corporations in major class action suits to see that this is one of the most overtly cynical cases of the government's exploitation of the public panic over terrorism to further its political goals and pay back blue chip corporate donors.

But, in order to fully understand the reasons for and implications of this new legislation, we must trace the more recent history of vaccinations and the culture of tacit federal complicity that has, since the 9/11 attacks, sought to further entrench the pharmaceutical interests with those of the Bush Administration and, more specifically, in the domestic fight against terror. What emerges is the troubling scenario of a federal government, which has deliberately and callously chosen to propel the interests of a potentially criminally negligent corporate sector onto the very people it has been elected to protect. Leaving us, it seems, with the now ubiquitous question: for whose interests are they securing the homeland and at what cost to the freedom of its citizenry?

Stepping back to a decade before the specter of forced vaccinations was even conceivable, evidence began to surface that pediatric vaccinations may have some causal relationship to the staggering rise in autism among American and Western European children. What researchers discovered was that Thimerosal, a commonly used vaccine preservative, contained toxic levels of mercury which could have devastating effects on the neural tissue of young children. Alarmed by the geometrically increasing cases of child autism in the United States (the number tripled in the 90's alone), a national coalition of concerned parents and medical practitioners sought to expose the government to scientific data proving the correlation between infant brain injury and mercury-laden vaccine formulas.

But it wasn't until 1997, when a totally unrelated FDA study into federal guidelines on mercury toxicity uncovered evidence that essentially corroborated the coalition's allegations, that the medical establishment began to seriously question the safety of thimerosal-laced vaccinations. Quoting from a recent New York Times Magazine article, illuminatively titled The Not-So-Crackpot Autism Theory: The F.D.A. team's conclusions were frightening. Vaccines added [from 1995 -1999] had tripled the dose of mercury that infants got in their first few months of life. As many as 30 million American children may have been exposed to mercury in excess of Environmental Protection Agency guidelines — levels of mercury that, in theory, could have killed enough brain cells to scramble thinking or hex behavior.

Incredibly, despite a 1999 FDA conclusion that children who received the recommended number of vaccinations were being exposed to unsafe levels of mercury, the core medical establishment elevated its collective denial to nearly psychotic heights.

While some doctors preferred to blame the environment or offer other, equally untenable, theories for the tragic rise in autism, others simply wrote off the oversight as a clinical error without ever turning it back to the pharmaceutical companies who had manufactured the vaccines for public use. Dr. Neal Halsey, chairman of the American Academy of Pediatrics committee on infectious diseases from 1995 to 1999 (the period in which the mercury levels reached their peak) was quoted in the same Times Magazine article:

“My first reaction was simply disbelief, which was the reaction of almost everybody involved in vaccines,” Halsey says. “In most vaccine containers, thimerosal is listed as a mercury derivative, a hundredth of a percent. And what I believed, and what everybody else believed, was that it was truly a trace, a biologically insignificant amount. My honest belief is that if the labels had had the mercury content in micrograms, this would have been uncovered years ago. But the fact is, no one did the calculation.”

It was not until the 1999 FDA recommendation that vaccine manufacturers voluntarily drop Thimerosal from their formulas that anti-vaccine coalitions gained some political traction and public support for their claims against the major pharmaceutical companies. But, for hundreds of thousands of behaviorally impaired children, this realization may have come too late. In what could well be one of the most potentially tragic stories of the last half-century, the medical establishment has acted about as expediently as the Catholic Church in dealing with pedophiliac abuse by its priesthood. In fact, many doctors continued to administer Thimerosal-laced vaccinations right up until the last dosages left the manufacturer plants.

A practice that seems, at the least, professionally negligent when you consider the volume of anecdotal evidence and public outcry that was being leveled at the practice of giving children mercury-inclusive vaccinations.

“It’s outrageous to think that injecting a child with all that toxicity is an acceptable risk,” said Bernard Rimland, director of the Autism Research Institute in San Diego. “It’s also outrageous that despite such compelling evidence of harm, the medical community would subject children to it.” And so it is under this climate of intense scrutiny and potentially devastating class action litigation that the Senate passed the Homeland Security bill, with its future and retroactive liability protection for the vaccine-manufacturing pharmaceutical sector.

Just at a time when mainstream news publications have finally begun to publicly air and corroborate long-standing accusations of a major cover-up by pharmaceutical companies of their guilt in producing mercury-poisoned vaccines to a generation of child immunization patients, many of whom have developed autism and other forms of neural damage as a result. And it may not end there. In a radio interview broadcast after the Senate vote, Dr. Len Horowitz, one of the leading voices for increased public scrutiny of the pharmaceutical sector, warned: “This legislation not only impacts the victims of mercury poisoning, but equally guarantees that other ongoing class action lawsuits, such as those waged on behalf of polio vaccine recipients who developed cancer from monkey virus contaminations, will have no legal recourse.

Nor will those affected by Gulf War Syndrome as a result of drug and vaccine side effects, military personnel recently inoculated who became ill from anthrax vaccinations, and claimants who cite recent studies increasingly proving early hepatitis B vaccines triggered the international AIDS pandemic.” Putting this all into perspective, Big Tobacco could have learned a lot from the pharmaceutical giants.

One of the chief beneficiaries of the Homeland Security provisions is Eli Lilly, a former Thimerosal producer who has become the poster child for mercury poisoning class action lawsuits. When executives of Eli Lilly were interviewed about the last minute provision for a November 16 article in the St. Petersburg Times, they said they were “pleased with the amendment but [had] no idea how it wound up being attached to the homeland security bill.”

And, while the paper did allude to the fact that Lilly had contributed \$1.6 million to congressional candidates before the November 5 election, the most of any pharmaceutical corporation, it did not report that Sydney Taurel the Firm’s Chairman, President and CEO was “...appointed in June 2002 to the President’s Homeland Security Advisory Council, a select group whose members were chosen to provide George W. Bush with advice on homeland security matters.” Nor did it recount the particularly troublesome fact that, in 1977, George Bush Sr. was made a director of Eli Lilly, a position that was offered to him by former Vice President Dan Quayle’s father, who then owned a controlling interest in the company.

The legacy of the Bush family’s ties to U.S. pharmaceutical interests and, specifically, Eli Lilly, is an exhaustive subject of research itself. Suffice it to say, there is ample evidence for us to understand the current Bush Administration’s desire to provide sanctuary for the company from its ever increasing number of alleged victims. What is, perhaps, more alarming than this blatant level of political cronyism is the little known MEHPA legislation and the direct implications it holds for citizens and doctors who refuse to trust the vaccines forced upon them by this government and its allegedly, criminally, negligent pharmaceutical backers.

To backtrack, the Model State Emergency Health Powers Act was first drafted in December, 2001. Four days before Christmas, actually, so we can safely assume that it was not something that was encountered with the most reassuring degree of public scrutiny. But, as with much of the post-9/11 legislation, the Act came into being and was swiftly endorsed by one of the Bush Administration’s seemingly endless entourage of white knights. In this case, Dept. of Health and Human Services Secretary, Tommy Thompson. In describing the new legislation, even the typically bland USA Today Health and Science reporter Mimi Hall could not veil its ominous potential:

A model law developed for the federal Centers for Disease Control and Prevention and provided to state legislatures last year would give authorities the right to enforce quarantines, vaccinate people, seize and destroy property without compensation, and ration medical supplies, food and fuel in a public-health emergency. In other words, the worst-case-scenario interpretation of the legislation is that U.S. citizens living in MEHPA adopting states will: • have a mandatory vaccination or be charged with a crime, • get a mandatory medical exam, or be charged with a crime and, Furthermore, • doctors in those states will give the exam or be charged with a crime • property can be seized if there is “reasonable cause to believe” that it may pose a public health hazard... it can be burned or destroyed and you will not have recourse or compensation. Now, as far as the powers granted to the State Governor under the provisions of the Act, they are what you would expect.

The Governor is granted unrestricted power to declare an emergency at his own discretion. The legislature cannot interfere for at least 60 days and, even after that deadline, a two-thirds vote of both chambers would be needed to block the dictatorial powers.

Since the latest reports regarding the number of states that had passed the law were from last summer, we cannot confirm their accuracy. But, as of late July, USA Today reported that “16 states and the District of Columbia have passed all or parts of the model law. It has been rejected or stalled in 22 states.” One of the first states to pass it was Secretary Thompson’s own Wisconsin (he was formerly the Governor). And, as Barbara Flynn, founder of CHERUBS reported, the criminalization of vaccine-resisters is hardly symbolic:

On February 27, 2002, the Wisconsin Legislature passed a Mandated Vaccination/ Emergency Health Powers Act which calls for a \$10,000 fine and/or nine months in prison for those who refuse vaccinations.

In describing the way that Federal agencies are using monetary incentives to fuel pro-MEHPA legislation, Flynn cited this case from her home state of New Jersey:

In an article in New Jersey’s Daily Record on January 20, 2002, District 21 Assemblyman Dr. Eric Munoz promised to spearhead a Rapid Mass Smallpox Immunization Plan for New Jersey. And in the February 1, 2002 edition of the Star-Ledger we find that the CDC (Centers for Disease Control and Prevention) has offered New Jersey \$26.8 million to “come up with a plan” by April 15, 2002.

So, as you can see, there was a very strong movement coming from the Administration’s core clinical assets for the passage of this Act. And, as history proves, this is not the first time that the American citizenry has faced this kind of authoritarian directive from the medical establishment. Here is a quote from Jamie Murphy’s seminal book on vaccines, *What Every Parent Should Know about Childhood Immunization*:

In 1902, Cambridge Massachusetts Board of Health passed an ordinance that required everyone to get smallpox vaccinations every 5 years or pay a \$5 fine. Henning Jacobsen and his son who had both suffered severe and prolonged reactions to the vaccine refused both the vaccine and the fine. Both were found guilty by the Massachusetts Supreme Court and *Jacobsen vs. Massachusetts* became the first and only vaccination case to reach the highest court. The Supreme Court ignored compelling evidence that the vaccines did not work and were dangerous.

“While we do not decide and cannot decide that vaccination is a preventative of smallpox, we take judicial notice of the fact that this is the common relief of the people of the State, and with this fact as a foundation we told that the statute in question is a health law, enacted as a reasonable and proper exercise of police power.” Incredibly, the Supreme Court was basing its decision on the widely held, public conception of vaccines instead of any empirical, scientific evidence. Which can be a dangerous thing. Especially, as we have seen, when it comes to vaccination.

The new Homeland Security bill has now, once again, pushed the debate over vaccines and their potentially harmful effects outside of the public realm. Reacting to the news of the Senate vote, National Vaccine Information Center president Barbara Loe Fisher summed it up thusly: “Several years ago the

Centers for Disease Control (CDC) commissioned the creation of the Model State Emergency Health Powers Act which would give sweeping new powers to public health officials. They have tried to get that law passed in every state but have failed so far. So now they are going to go federal and get the power they have wanted for years.

This bill is a violation of freedom in the name of protecting freedom. At the very least there should be informed consent protections in the bill to allow exemptions to vaccination and medical treatment for conscientious and religious beliefs as well as quarantine protections for those who exercise them.<sup>2</sup> In his remarks following the Senate vote, President Bush called the new Homeland Security legislation <sup>3</sup>the most extensive reorganization of the federal government since the 1940s.<sup>2</sup> And while there is no doubt about the fact that he is at the helm of a verifiable dismantling of the American socio-political superstructure - a process upon which the citizenry seems to have very little impact - we must not lose sight of the one physical realm that we should, at all costs, remain autonomous over. Our bodies.

If this Administration is allowed to progress, unchallenged, with this new assault on the human right to consensual medical treatment, we will have fallen to the status of guinea pigs... defenseless before the poking and prodding by State practitioners with all manner of biological technologies. If ever there was an issue that should congeal the masses around the protestation of this ever-advancing incursion on our civil liberties, it should form as the last barrier to that final border. Our skin.

And perhaps we should begin by demanding answers to the most basic of questions. Namely, if the vaccines are so effective, then why are those who opt out of them considered such a risk to the immunized populace? Especially to the extent that they are going to be criminalized and fined? And, furthermore, if such drastic measures are being contemplated in respect to the collective health and welfare of the U.S. population, why can't more scrutiny and funding be allocated for an investigation into the rise in autism among child immunization clients, as well as an entire generation's sudden affliction of "attention deficit disorders"?

Otherwise, we may just wake a little too late from our collective political somnambulism... but just in time to hear the benevolent nurse whisper, "Now just bend over... this won't hurt a bit."

Stephen Marshall is co-founder and Creative/Strategic director of GNN.

# HOMEOPATHIC ANSWER FOR VACCINATION

Frank King, Jr., Ph.D.

Evidence is mounting on both sides of the vaccination issue. Minor symptoms to lifelong diseases can occur from either not being immunized, or more frighteningly, from being immunized! The legal ramifications can be equally, if not more, devastating. The truth is the more you study both sides of the issue, the more you see a lose-lose scenario. Actually the results of this vaccination perplexion is a new mental condition called "vaccination anxiety."

The good news is the benefits of homeopathy can turn this scenario into a win-win situation for everybody.

## **The Vaccination Perplexion**

In recent years a growing number of doctors, researchers and concerned parents are taking a strong stand against modern medical vaccination procedures. The National Vaccination Information Center (NVIC), located in Vienna, VA, has compiled some eye-opening statistics concerning the efficacy of immunization. The NVIC discovered 54,072 reports of adverse events, including 471 deaths, following vaccination in a 39-month period from July 1990 to November 1993. The NVIC acquired the statistics from The Vaccine Reaction Reporting System (VARRS) operated by the Food and Drug Administration.

Vaccination reactions usually take place within seven days of the vaccination. The symptoms include paralysis, convulsions, nausea, dangerously high fevers, chronic nervous system disorders, acute brain inflammations (encephalitis), diarrhea, learning disabilities, hyperactivity, permanent brain damage, and death. Doctors are required by law to inform parents of the numerous side effects associated with vaccination.

On the other hand, not immunizing can cause equally if not more devastating diseases. The parents must also face the grief and guilt that may come from the choices they made. Then follows the legal issues including the potential of losing all their children to the state and even imprisonment. This may seem radical, yet it could be probable.

Routine questions heard in our offices are, "Should I have my children vaccinated?" or "What do you think of vaccination?" These and other related questions can pose a potentially volatile position for the doctor, a well-meaning friend and especially the parents. There are numerous legal, emotional, and ethical effects with everybody involved.

## **The Best Answer**

Homeopathy has provided the only win-win answer to this dilemma for patient, parent and doctor. A homeopathic formula can be safely and easily used both to prevent and to effectively correct the common side effects of immunizations. With homeopathy, a lose-lose situation can be turned into a win-win solution for this perplexing issue. The patient, the parents and the doctor all end up in the safest, healthiest position. This is quite a rare result to end up with such a positive scenario for everybody involved.

Vaccination anxieties" are more commonly being experienced by both parents of children being vacci-

nated as well as adults being vaccinated for job placement and travel abroad. Parents having to make these tough choices for their children can rest better with homeopathy. There are key homeopathic remedies that have been found over many years of clinical use to be effective in overcoming the side effects of immunizations. These remedies can also be used preventatively to actually reduce the negative side effects of immunizations.

Homeopathy heals in all realms of life including the physical, mental, emotional as well as inherited weaknesses. The homeopathic remedies have proven themselves effective over many years for the common reactions to vaccinations.

The following remedies have proven the most effective for both the prevention and corrections of most common reactions to vaccinations.

**Aconitum Napellus:** First remedy for inflammations and inflammatory fevers. For fear, anxiety, anguish of mind and body. Relieves physical and mental restlessness. For someone who does not want to be touched.

**Apis Mellifica:** A Great remedy for swelling, puffiness, edema, stinging pain, soreness, intolerance of heat, touchiness and red rosy hue of various body parts. For hives with intolerable itching.

**Chamomilla:** Especially useful for children with peevishness, restlessness and colic. For whining restlessness. Child can only be quieted when carried about and comforted constantly. Extremely sensitive to every pain. For vomiting.

**Hypericum Perforatum:** Excessive painfulness is a guiding symptom to its use. For puncture wounds.

**Ledum Palustre:** A specific remedy for puncture wounds produced by sharp-pointed instruments or bites. For general lack of body heat, yet heat of bed is intolerable.

**Pulsatilla:** Temperament and mental state are the chief guiding symptoms. For great sensitivity. For sadness, crying readily, weeps when talking, changeable and contradictory.

**Silicea:** A specific remedy for ill effects of vaccinations. For headaches, spasms, epilepsy and feeling of coldness. Lack of vital heat and prostration of mind and body.

**Thuja Occidentalis:** Another specific remedy for ill effects of vaccinations. Action is on skin, blood, gastro-intestinal tract, kidneys and brain. Has a specific antibacterial action. For skin troubles and neuralgia.

These remedies can be taken individually or found in a formula for a broader therapeutic spectrum against vaccination reactions. These remedies will cover the broad variety of symptoms associated with vaccination reactions, which include inflammations, reactions to punctures, swelling, edema, hives, restlessness, sensitivity, nausea, vomiting, headaches, nervous changes, fear and anxiety.

Although these are the common symptomatic reactions, they are not the only reactions that may occur. If symptoms occur after vaccination, take a formula of this nature. If symptoms persist, see your health-care provider.

Parents, you can rest in having the blessing of both worlds. You don't have political, medical, educational or legal battles to fight. You won't have that underlying grief or guilt wondering if you made the right decision for your children. You can walk in a greater level of peace with a win-win decision. Homeopathy provides a pleasant alternative in a world where there are so many battles in the realm of life.

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**VACCINE WEBSITES**  
**New Vaccine Foru**  
**[www.healthy.net/vaccine](http://www.healthy.net/vaccine)**

This forum is dedicated to questions and discussions about vaccinations.

Parents often have doubts about consenting to vaccines for their children, because of the reported adverse effects from the vaccines or their own philosophical objections to vaccination. This forum provides a place for parents to discuss their concerns and consult with authorities in the field of vaccination.

Topics for consideration include the advisability of giving specific vaccines, legal issues, difficulties that parents have encountered with school and health authorities, and the risks and benefits of vaccines and their corresponding diseases.

The forum is monitored by Dr. Randall Neustaedter, OMD, LAc, (Doctor of Oriental Medicine and Licensed Acupuncturist) author of "The Vaccine Guide: Making an Informed Choice," North Atlantic Books, Berkeley, California, 1996.

**[www.healthy.net/vaccine](http://www.healthy.net/vaccine)**  
**[www.avn.org.au](http://www.avn.org.au)**

- Toxicity of the vaccines, their adverse effects, dangers, and long-term negative consequences.
- Legal requirements, including legal exemptions to vaccines.
- Updated information on the new vaccines, hepatitis, chickenpox, haemophilus, acellular pertussis, and enhanced, inactivated polio.
- Evaluation of alternative vaccines.
- Resources for information about vaccine options.
- Articles, newsletters and books about vaccines.

**Thinktwice Global Vaccine Institute**  
**[www.thinktwice.com](http://www.thinktwice.com)**

Offers the world's largest selection of uncensored vaccine information including up-to-date vaccination laws, vaccine books, and other hard to find vaccine resources from around the world. Also offers numerous alternative health solutions.

**Concerned Parents For Vaccine Safety**  
**[home.sprynet.com:80/sprynet/Gyrene/Home.htm](http://home.sprynet.com:80/sprynet/Gyrene/Home.htm)**

A fabulous grassroots resource link containing what's hot and what's not in the realm of vaccines and immunizations. From basic facts about vaccinations to political action activities and resources, including a meeting calendar and bulletin board, this site is among the best!

**National Vaccine Information Center (NVIC)**  
**www.909shot.com**

Operated by Dissatisfied Parents Together (DPT) this is the oldest and largest national nonprofit educational organization advocating reformation of the mass vaccination system.

**AUTO-INTOXICATION**  
**Death And Health Begins In The Colon**

This realization is the foundation for wholistic medicine which is increasingly being practiced here in the west and has been practiced in the in the orient for thousands of years...

There is an epidemic in our society, and it has to do with the gastrointestinal diseases that we develop within us as a result of the food that we eat. The human suffering and the social, medical, and economic costs of gastrointestinal diseases and disorders that have become so common in the US and Canada are nothing short of enormous, representing a huge share of our annual health care expenditure, as well as being responsible for a large loss of productivity.

Up to 100 million North Americans suffer from intermittent forms of digestive diseases, and the estimated lost work, lost wages, and medical costs comes to over 50 billion dollars per year. It is also estimated that some 200,000 workers miss work every day due to digestive problems.

**Auto-Intoxication**

When the eliminative system of the human body is not in top-notch working order, particularly if it has become sluggish or clogged, it cannot properly process and eliminate food wastes and toxins. Medical science now acknowledges that up to 85% or more of all adult Americans suffer from some form of intestinal stasis [i.e., constipation, sluggish bowels, etc.—Ed.]. This virtually guarantees toxic build-up in the colon which, over time, inevitably results in one or more forms of serious illness or chronic degenerative disease. Intestinal stasis sooner or later causes the wastes and toxic by-products from the foods we eat to build up to such an extent that they start to become putrefactive. In turn, this putrefactive build-up in the colon becomes a veritable breeding ground, encouraging the rapid growth of huge colonies of toxin-producing, disease-causing bacteria (e-coli) along with a host of known toxic chemicals and waste products...

When the digestive and eliminative systems are not properly working to rid the body of this accumulating putrefactive build-up in the colon, the resulting toxins are then absorbed from the colon into the bloodstream, and are carried back into every part of the body. This process of self-poisoning is known as “auto-intoxication”. In a nutshell, because of intestinal stasis, the body ends up chronically poisoning itself with its own wastes and toxins instead of carrying out its designed purpose of eliminating them.

This process of continued self-poisoning inevitably results in candidiasis and a dramatically weakened immune system, which can lead directly to such common ill-health conditions as chronic fatigue and body weakness, nervousness, depression and mood swings, skin disruptions such as acne and eczema, ulcers and other gastro-intestinal disorders, headaches, arthritic joints, swelling of hands and feet, chronic allergies, bronchial problems, cardio-vascular irregularities (arrhythmias, high blood pressure,

etc.), pathological changes in the breasts, premature senility, epilepsy, and many other serious and debilitating problems.

Health statistics also show that more North Americans are hospitalized due to diseases of the intestinal tract than for any other group of disorders. The medical costs of these diseases is estimated to be \$20 billion or more per year.

The annual cost of prescription and over-the-counter drug products used for digestive tract diseases is approximately \$2 - 2.5 billion dollars per year, and has grown at a steady rate of 10% over the last decade.

The following is an estimate of costs, and adequately demonstrates the fact that these diseases present a significant public health problem, which contribute substantially to our overall health care costs:

Laxatives	\$900 million per year.
Antacids	\$1 billion per year.
Antihemorrhoidals	\$250 million per year.
Anriddiarrheals	\$100 million per year.

Cancer of the colon and cancer of the rectum are the second most common forms of cancer in North America, exceeded only by lung cancer. This year alone (2003), there will be approximately 150,000 new cases diagnosed, and approximately 60,000 related deaths. Perhaps as many as one out of every 10 North Americans will die of these two diseases.

The following are some of the other very common diseases and disorders that are directly related to the Colon: Constipation, Appendicitis, Diverticular Disease, Hemorrhoids, Benign Tumors, Irritable Bowel Syndrome, Ulcerative Colitis, and Crohn's Disease.

Here are a few facts about these diseases:

It is estimated that more than 300,000 appendices are removed each year.

Diverticulitis/Diverticulosis is reported to be present in more than one-third of those in our population over the age of 40 - and in up to two-thirds of those who are over the age of 80.

Hemorrhoids are believed to be present to some degree in nearly half of all people over the age of 50.

Benign Tumors are reported to be present in one-third of all autopsies performed on patients over the age of 20.

Evidence suggests that all of these disorders were very rare in the Western world less than 100 years ago, and that each of these has greatly increased during the last 50 years. What's more, for years now researchers such as Cleave, Trowell, Burkitt, and others, have known that all these diseases are almost unheard of in communities which still adhere to their traditional way of life.

In developing countries in Asia and Africa for example, documented evidence has proven the rarity of diseases such as diverticulitis, appendicitis, bowel cancer, adenomatous polyps, ulcerative colitis, varicose veins, hemorrhoids and hiatus hernias. In Africa, this has been the case with appendicitis, ischemic

heart disease, diabetes, obesity, gallstones, varicose veins, venous thrombosis, and hemorrhoids.

As these countries develop and begin to adopt Western ways and customs, a rise in the frequency of these disorders follows almost as surely as night follows day.

They first appear and then become common in the upper socioeconomic groups, which are the first group of people to become westernized. In Africa, this has been the case with appendicitis, heart disease, diabetes, obesity, gallstones, varicose veins, and hemorrhoids. The same kind of thing happened in Japan after World War Two, especially in the urban communities.

In the past it was thought that the large intestine was not really too involved in absorption (the principal absorptive functions being to conserve water and electrolytes secreted into the gut during digestion). However, recent research has demonstrated that, among other things, the colon does in fact participate in protein absorption.

As it turns out, the result of the investigations by many over the years has led to a much more specific conclusion than merely some sort of ambiguous, or mysterious “environmental factor” which is somehow involved in the cause of these diseases and disorders. Rather, many have become far more specific about the cause, supporting what has come to be known as the “F(iber)-Hypothesis”.

This is extremely significant in as much as the colon is the major site of exposure to the bulk of endogenous bacterial proteins, enterotoxins, and breakdown antigens, which may be involved in the pathogenesis of a number of diseases, including ulcerative colitis and Crohn’s disease, food allergies and allergic gastroenteropathy, bacterial enteritis (from toxins produced by *Escherichia coli*, *Shigella*, *Vibrio cholerae*, etc.), and certain extra-intestinal immune-complex diseases.

Even more important than protein absorption is the operation of the Autonomic Nervous System (ANS) in the colon. These are nerve endings that are attached to the colon wall and they provide nerve impulses to stimulate the operation of the various organs and glands within your body. The type of stimulation that the ANS is able to provide to your organs and glands is a direct reflection of the health of your colon

# CANDIDIASIS

Although millions of Americans are infected, the symptoms of candida overgrowth (a yeast infection) are often misdiagnosed as...

- Allergies
- Chronic Fatigue Syndrome
- Diet Disorder
- PMS
- Irritable Bowel Syndrome
- Arthritis
- Depression
- Old Age
- Influenza
- And a host of other maladies

Scientists estimate that 90% of Americans provide a warm home for this yeast-like parasite called *Candida albicans*. Over-utilization of antibiotics, the American diet and a weakened immune system allow these organisms to over-populate, invade various organs and tissues and wreak havoc on normal bodily functions. Early symptoms of “over-growth” include chronic aches and pains, digestive problems, lack of energy, memory loss, depression, foggy thinking and many other conditions wrongly associated with getting older. Scientific testing has shown that a widely prescribed anti-fungal/anti-yeast drug is barely better than a placebo. On the other hand, recent double blind clinical trials now show that a new, safe, over-the-counter herbal remedy cuts to the very heart of this parasite. The results of this study suggest that people no longer need to suffer with the menacing health problems caused by this yeast-like fungus.

## What is Candida?

Candida is a yeast, similar to those that cause bread to rise. *Candida albicans* is the most common and well known yeast, and can become problematic in the body when it proliferates out of control. *Candida albicans* is one of over 80 species of *Candida*. It is technically a digestive mold or yeast. These yeasts are parasites, organisms that live off of us, taking in food from us and putting off toxic waste. Digestive yeasts have been found to produce over 70 known toxins. Yeast is normally present in our intestinal tract in small amounts. In low levels, it is not harmful to the body - It is a source of food for beneficial gut flora (friendly bacteria) that help the body fight infectious disease. As long as the amount of yeast in the body remains small, internal balance is maintained and all is well. The ideal ratio of *Candida* to bacteria in the body is 1:1 million; that is, 1 yeast to 1 million bacteria.

## What causes Candida?

When the critical balance of *Candida* to bacteria in the body is disturbed, with *Candida* gaining the upper hand, we can develop symptoms anywhere in the body as a result of what progressive doctors call systemic candidiasis. This condition develops when the balance between yeast and bacteria is upset as a result of:

Immune dysfunction or disease  
Upset in ratio of good to bad bacteria in the GI tract  
Change in intestinal pH  
A number of factors can cause immune dysfunction:  
Drugs, anti-inflammatories, cortisone, birth control pills, antibiotics, non-steroidal anti-inflammatory drugs

Toxic metals (like mercury, lead, cadmium, nickel and aluminum)

Stress and over-consumption of refined carbohydrates and sugar All of these factors create an imbalance of beneficial gut flora (more bad bacteria than good) called dysbiosis, which can result in reduced immunity. In its fungal form, Candida produces waste products known as mycotoxins. Among the mycotoxins produced by Candida is acetaldehyde, a poison that is transformed into ethanol and converted by the liver into alcohol. As alcohol builds up in the system, symptoms associated with drunkenness develop. This is how Candida can produce “brain fog”. Candida secretes acid that can alter pH (acid/alkaline balance). It also grows very long roots called rhizoids, which actually puncture the mucosal lining of the intestine. When it becomes damaged, we develop a condition called Leaky Gut Syndrome. This means that the mucosal lining of the digestive tract has holes in it, allowing Candida to pass through it into the bloodstream..

### **How does Candida create poor health?**

#### **What are some of the signs & symptoms?**

When undigested food particles penetrate the bowel wall and enter the bloodstream, the body views them as foreign invaders and makes antibodies (chemical bullets) against them. This can result in the development of food allergies or sensitivities, and ultimately autoimmune disease. There are some 80 known autoimmune diseases. The cause for all of them is officially “unknown.”

Among these autoimmune diseases are:

Arthritis (Rheumatoid)	Diabetes
Fibromyalgia	Lupus
Chronic fatigue syndrome	Multiple sclerosis
Crohn’s disease/Colitis	Skin disorders

The cause of these diseases may be unknown to mainstream medicine, but holistic practitioners are well aware of their connection to leaky gut syndrome. Since Candida is often the culprit behind the leak, we can view systemic candidiasis as an underlying condition, if not a cause, of allergies and other autoimmune disorders. Candida toxins are carried through the leaky gut (via the bloodstream) to the liver. From there, they proceed to other organs of the body – the brain, nervous system, joints, skin, etc. If the liver’s detoxification ability is impaired due to inadequate nutrition and toxic overload, these toxins will be stored and can initiate states of chronic disease. I

### **Healing Protocols**

**ELIMINATE** or **MINIMIZE** the use of **ANTIBIOTICS**, steroids, immune-suppressing drugs and oral contraceptives (only after consulting your health care provider or physician).

**CHANGE** your **DIET** to one that will not encourage growth of Candida. Eliminate fruit and fruit juices, sugar and other sweeteners, cheese and commercial dairy products. Soy sauce, mushrooms, breads with yeast, baked goods and peanuts should also be eliminated, as should any refined foods and any foods to which you are allergic or sensitive. Avoid coffee, soda, and alcoholic beverages, as well as any fermented foods or beverages.

**EAT** plenty of vegetables and lean protein. Soups and stews are excellent. Substitute yeast-free millet

bread and gluten-free grains such as corn, millet, quinoa and teff. If a sweetener is desired, use the herbs stevia or lo-han. Snacks should include raw pumpkin seeds and oil-free corn chips. Use raw almond and raw cashew butter. Granny Smith apples are the only fruits permitted.

**DRINK** plenty of water: at least a half (1/2) ounce of water per pound of body weight. (For a 120-pound person, that would mean 60 ounces or about 7 tall glasses.)

**ENHANCE** digestion by eating more raw foods, chewing thoroughly and taking enzymes with every meal.

**RE-ESTABLISH** beneficial flora (good bacteria) in your intestinal tract with acidophilus and bifidus supplements.

**IMPROVE** immune function by stimulating lymph flow through exercise and deep breathing.

**INCREASE** fiber consumption. This will help absorb and sweep out the toxins that are being created as Candida dies off. We need 30-40 grams of fiber per day, most Americans only get 10-12 grams per day. Flax is an excellent source of fiber.

**CLEANSE** your system with herbs that help to reduce Candida.

**STAY ON** a probiotic and fiber supplement as a maintenance. Continue on a maintenance diet – i.e., add back fruits and grains slowly!!!

**TRY** colon hydrotherapy with your detox program.

# WHAT IS DETOXIFICATION?

[www.HealingDaily.com](http://www.HealingDaily.com)

Detoxification is the process of clearing toxins from the body or neutralizing or transforming them, and clearing excess mucus and congestion. Many of these toxins come from our diet, drug use, and environmental exposure, both acute and chronic. Internally, fats, especially oxidized fats and cholesterol, free radicals, and other irritating molecules act as toxins. Poor digestion, colon sluggishness and dysfunction, reduced liver function, and poor elimination through the kidneys, respiratory tract, and skin all add to increased toxicity.

Detoxification involves dietary and lifestyle changes which reduce intake of toxins and improve elimination. Avoidance of chemicals, from food or other sources, refined food, sugar, caffeine, alcohol, tobacco, and many drugs helps minimize the toxin load. Those lifestyle changes are a direct result of choices you make in your life.

## **Colon cleansing**

Bowel movements are the basis of your health. If you don't have at least 1 bowel movement per day, you are already walking your way toward disease. Man's body has not changed very much in the past several thousand years... however man's diet has certainly changed a lot. All the refined sugar, white flour, hormone/antibiotics-filled meats we constantly ingest constitute an assault on our bodies.

We are continuously violating our bodies by eating terrible foods. Colon cancer is the 2nd leading cause of cancer deaths in the U.S. So, all congestion and toxins must be removed, and it must begin with cleansing of the bowel. One of the most frequent bowel problems that people experience today is constipation. A constipated system is one in which the transition time of toxic wastes is slow.

The longer the "transit time," the longer the toxic waste matter sits in our bowel, which allows them to putrefy, ferment and possibly be reabsorbed. The longer your body is exposed to putrefying food in your intestines, the greater the risk of developing disease. Even with one bowel movement per day, you will still have at least three meals worth of waste matter putrefying in your colon at all times.

Disease usually begins with a toxic bowel. Those having fewer bowel movements are harboring a potentially fertile breeding ground for serious diseases. Infrequent or poor quality bowel movements over an extended period of time may be very hazardous to your health.

## **A Proper Colon Cleansing Program Removes the Mucoïd Plaque From the Colon.**

The healthy colon weighs about 4 pounds. One autopsy revealed a colon choked with 40 pounds of impacted mucoïd plaque! A proper colon cleanse and detoxification program prepares your body for optimal health by removing the mucoïd plaque.

Herbal colon cleansing using psyllium, internal cleansing herbs and other natural colon cleansing products, is an essential part of a good detoxification program. A good intestinal cleansing program will help you get rid of pounds of foul-smelling food debris which may be impacted inside your colon. The person on a typical Western Diet holds 8 meals of undigested food and waste material in the colon, while the person on the high fiber diet holds only 3.

## **Every One Can Benefit From A Good Colon Cleansing Program**

As the colon becomes impacted with dry putrefactive waste, its shape and function are affected in numerous ways. It may stretch like a balloon in certain areas, or develop diverticula (pouches on the intestinal wall which may become infected), or fall down upon itself (prolapsed colon). All of these colon malformations greatly impair your large intestine's ability to function, which in turn places severe strain on your digestive organs and glands and affects nutrient assimilation and absorption. The colon is the body's "sewer system", and if not treated properly can accumulate toxic poisons, which are absorbed into the bloodstream. This in turn can cause many diseases.

*Once again here we see the axiom of an ounce of prevention being applied by a growing number of health conscious Americans who are applying their knowledge and taking greater responsibility for their health and the health of their families...*

## **OBESITY**

### **"Starvation In The Midst Of Plenty"**

This pan-epidemic reflects the inherent social ills of contemporary American society... While we are all aware that obesity is primarily caused by lack of exercise and poor nutrition, it is more than this, it is a powerful mirror regarding contemporary American life... We have become a self-indulgent nation... We have trapped ourselves in many ways by technology..glued to our computers/TV sets and compounded by a frantic pace of life. We have lost touch with nature and what is really meaningful and essential for life and thus seek satisfaction from fast foods, meaningless "entertainment" and other distractions... Our mass consumptive, materialistic lifestyles feed by an incessant deluge of negative "news" has created a climate of fear and apathy which is not only threatening our health, it is also threatening our very survival by systematically destroying our planetary eco-system... our life support system...

## **THE SOLUTION(S)**

We are both the "problem" and the "solution"... The bottom line is that we must awakened from our delusional hypnotic state of massive self-denial and fear and take greater responsibility for our selves, our cells and our planetary eco-system... The various methodologies from both a microcosmic and macro-cosmic level are discussed in detail within this document and have been clearly articulated in The Light Party's comprehensive 7 point platform which serves to address and resolve our current socio-economic and ecological challenges ([www.lightparty.com](http://www.lightparty.com))..In addition, we have created a powerful holistic health handbook entitled The Human Ecology Program..A Comprehensive Health Maintenance and Rejuvenation Process... This 78 page manual clearly explains how to activate our creative potential while simultaneously de-stressing ourselves, our cells, and our planetary ecosystem...

## **ARTHRITIS**

Over 30 million Americans suffer from this painful debilitating condition.

### **THE SOLUTION**

- A) dietary change;
- B) detoxification of the blood, lymph, and colon;
- C) enhancing the immune system;
- D) moderate exercise.

Thousands of people here in America and especially abroad have been significantly helped through the naturopathic approach as outlined in The Human Ecology Program.

## **DEPRESSION**

Depression, “the common cold of mental health,” is reaching endemic proportions in all age groups. Depression and other thought disorders (such as schizophrenia) are being successfully treated by orthomolecular (nutritional) physicians.

We know that our state of mind is intimately related to our biochemical status. Prozac, a widely used, controversial, anti-depressant drug, raises the brains serotonin levels, thereby alleviating the symptoms of depression. Better results (no side effects) are obtained through nutritional awareness, exercise and stress reduction techniques.

## **ORTHOMOLECULAR PSYCHIATRY IN THEORY AND PRACTICE**

**Abram Hoffer, MD, PhD Drug Therapy**

Dr. Hoffer is affiliated with the Huxley Institute for Biosocial Research, and is Editor-in-Chief, Journal of Orthomolecular Psychiatry

Orthomolecular psychiatry is one of two branches of psychiatry currently advocating chemotherapy for schizophrenia. The other branch is toximolecular psychiatry. There are vast conceptual differences between the two and great differences in efficacy for the patient. Toximolecular psychiatry advocates the use of sublethal doses of agents not normally found in the body. Their use has not significantly improved patient recovery rate over that occurring naturally, and demands a terrible price from the patient in the form of incapacity to work and irreversible toxicity. Single drugs are used for treating schizophrenics unless additional drugs are needed to control side effects. In this approach, a drug is promoted and required for patient maintenance. Modern psychiatry generally depends on this system of drug use.

Orthomolecular psychiatry, on the other hand, emphasizes a system of treatment, not any one drug or chemical. The schizophrenic is given optimal amounts of materials that are necessary for good nutrition and optimal functioning - vitamins, minerals, fats, carbohydrates, and amino acids. The orthomolecular program requires full patient participation in changing lifestyle and discontinuing faulty eating habits. Thus, sound principles of good nutrition are inherent in the program, and they include adhering to a

diet that provides high nutritional value for the individual and avoiding foods to which one is allergic. In many cases, megadoses of the essential factors are required, and patients are eventually maintained in a normal state by nutritional therapy alone. Such patients relapse much less frequently than those maintained on drugs alone.

### **Orthomolecular Treatment — In Theory**

Effective treatments are not any more effective because one understands why they work. Frequently there is no correlation between rationale and effectiveness. Physicians are more likely to accept a treatment when there is an explanation, even if it is erroneous. For this reason, I consider rationale something to be sought after, but a factor not nearly as relevant as proof of efficacy.

The propositions basic to orthomolecular psychiatry are as follows:

- When the brain is biochemically disorganized, so is the mind.
- There is great interindividual variation in biochemical needs and metabolic processes.
- Some nutrient requirements, especially those for vitamins, may vary up to 100-fold between individuals.

Persons who remain well on average levels of needed nutrients may develop problems if their diets become deficient or they are unable to absorb the nutrients. Others who need larger amounts will develop a dependency and require supplementation. - Deficiency disease can result from lack of, or dependency on, a particular nutrient. For example, vitamin B3-deficient patients develop pellagra. But those who are deficient because they require larger levels of vitamin B3 are actually vitamin dependent and, in my opinion, constitute a major proportion of acute or subacute schizophrenics.

Prolonged malnutrition, as occurred in World War II concentration camps in the Far East, will produce dependency. Dependency may develop any time in life. - Both the biophysical (food, air, water, etc.) and psychosocial environments are important. A normal biophysical environment ensures a normal interaction with the psychosocial environment. - A number of schizophrenic syndromes are caused by different biochemical problems, each requiring a specific treatment. Tranquilizers, like sedatives, are nonspecific. They will allow some control of symptoms for all the schizophrenias, but do not help in determining cause. Obviously, no schizophrenic suffers from a deficiency of any tranquilizer.

### **Orthomolecular Treatment — In Practice**

In general, the “medical model” of orthomolecular psychiatry is the basis for diagnosis and treatment. The prognosis is also discussed in earlier articles.

### **Nutrition**

In nature, food does not exist as the proteins, amino acids, fats, carbohydrates, vitamins, and minerals described by chemists. Food is a complex of living material. When digested, the basic nutritional components in food are released. The most nutritionally valuable foods are the least processed ones.

Unfortunately, 80% of the food consumed today is processed. “Nonfoods” have been stripped of all essential nutrients. To be metabolized, they must “steal” accessory nutrients - proteins, fat, vitamins, and minerals -from other foods. That is why substances containing “empty calories” are so injurious to

the quality of any diet to which they are added.

Such depleted substances are best looked upon as ~junk” and avoided. Therefore, the first rule of nutritional (i.e., orthomolecular) therapy is: Eat no “junk” food to which sugar has been added. This rule excludes from the diet pastry, candy, chocolate bars, soft drinks, ice cream, and processed cereals. Most people will eventually lose the craving for sugar. Adherence to a nodunk food diet ensures that more nutritionally valuable food (fresh fruit, vegetables, fish, meat, etc.) is eaten, constituting a better diet overall.

The second rule is: Avoid foods to which one is allergic. This includes avoiding foods of which one is inordinately fond (craving may be fueled by allergy) or from which one obviously becomes sick.

The third rule is designed to minimize allergic reactions: Eat as wide a variety of foods as possible and do not depend heavily on a few.

## **BAD BEHAVIOR & BIOCHEMICAL IMBALANCES**

**Ronald C. Dishinger**

Ronald C. Dishinger has self-published a unique manuscript to teach parents about the signs and treatment of biochemical imbalance caused by nutrient deficiency. The 124 page book is written to a skeptical “farmer friend” who is struggling with a child who, unlike his other children, behaves badly, making life miserable for everyone. The writer refers to the work of orthomolecular doctors and biochemists such as Eric Braverman, Carl Pfeiffer, and Abram Hoffer, MD, PhD, who wrote an introduction for the book, in order to explain biochemical illness and what to do about it. Dishinger, a music publisher, knows from personal experience how biochemistry affects behavior. Five out of eighteen family members have the “same biochemical behavioral illness confirmed by tests,” and another four or five non-tested members exhibit symptoms.

At the heart of biochemical imbalance is nutritional deficiency. Dishinger explains that growth spurts, during which a child grows 4 - 9 inches within 14 months, can result in biochemical imbalance because of the huge demand for certain nutrients during such growth. Trauma (physical, emotional, or psychological) also alters biochemical balance and increases the body’s need for nutrients (especially vitamin C, B3, B6, and zinc). If deficiencies persist and balance is not restored, early signs that include depression, habitual withdrawal, or outbursts of anger can progress to more severe behavioral manifestations: violence, cruelty to animals, aggression, rage, lack of empathy, obsessive-compulsive behavior, apathy, and schizophrenia. Food allergies (dairy, wheat, and corn), reactions to chemicals in the environment, and heavy metal toxicity can also cause bizarre, inappropriate, and disturbing behaviors.

Dishinger repeatedly emphasizes to the reader: “It is your responsibility to correct your child’s biochemical imbalance. Humans do want and desire to succeed at adventure, whatever that adventure may be. Humans do not choose failure and pain. Biochemical imbalance allows pain and confusion, and it clouds many desires for success or adventure.” He encourages readers to give the child zinc, vitamin B6, niacin, and vitamin C (the nutrients most often deficient in behavioral illness) and then find an orthomolecular doctor. Dishinger has compiled a list of doctors who practice orthomolecular medicine in North America. He also includes a bibliography and encourages readers to do their own research.

As media, lawmakers, and experts try to explain the unreasoning, violent shootings among students, biochemistry is rarely, if ever, mentioned. Yet, *Bad Behavior and Illness are Caused by Biochemical Imbalances* clearly links hyperactive and anti-social behavior to nutritional deficiencies and toxicity. The personal, story-telling quality of this book creates an impassioned message about biochemistry and behavior.

*Bad Behavior and Illness are Caused by Biochemical Imbalances* is available free-of-charge at the website: [www.biochemimbal-behavior.com](http://www.biochemimbal-behavior.com) or by contacting Medici Music Press, 5017 Veach Rd., Owensboro, Kentucky 42303 (Phone 502-684-9233). Mr. Dishinger requests that "if you have been helped by this book please contribute (by sending a check to Medici Music Press) what you feel it is worth to you so that others can be helped with free books and tapes."

## **THE NUTRITION MIND CONNECTION**

**Dr L Gerald Olarsch N.G.  
& Susan Stockton, M.A., CR. C**

'OThe fact that Johnie can't read and that we have a \$200 billion annual national medical bill both stem from the same cause a poor delivery of elements from the soil in both quality and balance." John Hamaker

The statement above was made in 1979 by John Hamaker. It remains true today, except that our national medical bill is now closer to one trillion dollars per year. Despite the vast resources of our nation, our health status is deplorable. We rank on a par with Third World nations in this regard due to a virtual plague of degenerative disease. The situation today is that every third person is allergic to something. Every fifth person is mentally ill. Every 30 seconds someone dies of a heart attack, and every 55 seconds someone dies of cancer, which has now become our number one childhood killer, baffling accidents.

### **Academic Decline**

In 1981, Hamaker wrote, "Along with the rest of the country, Michigan's scholastic achievement scores have been dropping steadily for two decades." The downward spiral continues, and it is linked to nutrient deficiency. It is an established and accepted fact that impaired mental function results from nutrient deficiency. The brain requires a vast array of nutrients, including vitamins, minerals and amino acids, to produce neurotransmitters (brain chemicals that pass messages from cell to cell) and other important brain compounds. Altered brain chemistry can result from deficiency of just a single nutrient, giving rise not only to diminished mental capacity, but also to mental/emotional disturbances and behavioral disorders such as hyperactivity, attention deficit disorder, anxiety, depression, eating disorders (anorexia and bulimia), drug and alcohol addiction, autism and violence.

If impaired mental function results from nutrient deficiency, then improving nutritional intake ought to result in improved mental function. The fact that it does indeed do so was demonstrated in a study described in a reprint entitled, "The Impact of a Low Food Additive and Sucrose Diet on Academic Performance in 803 New York City Schools." In 1980, 1981 and 1983, major "dietary policy revisions" were made with regard to the use of sucrose, fats and food additives. During the four year period in which these food factors were reduced in the diet of the school children, the mean national academic

performance of the 803 schools rose from 41 to 51 percentile. This resulted in New York City schools moving from 11 percent below the national average to five percent above it. A “reduction in malnutrition” was cited by the researchers as the cause of the rise.

School lunches, like hospital meals, are notoriously inadequate. Yes, they’re planned by a dietitian. Realize, however, that it is the job of the dietitian to know how many cans of #2 beans it will take to feed 382 mouths. It is not her job to assure that nutrient dense foods go into those mouths. Most institutions (and households) today make widespread use of processed foods. Food processing procedures like refining, pasteurizing and irradiating seriously deplete foods of their nutrient content. What’s worse is that the foods are already seriously depleted before they ever get into the hands of the food processors.

### **The Bottom Line**

This brings us back to John Hamaker’s point: Poor soil quality is the bottom line common variable responsible for widespread physical and mental deterioration. Poor soil quality makes for nutrient deficient crops, which in turn creates weak bodies and minds. Diets lacking in nutrients especially trace minerals lead not only to physical maladies and impaired learning, but also to antisocial behavior and even violence. It’s no coincidence that both degenerative disease and crime are escalating, as IQ and nutritional status decline. These things are connected. At the bottom of the chain is the connecting link of impoverished soil.

### **Minerals Rule**

Minerals rule over all other nutrients. Vitamins, enzymes and amino acids, as well as fats and carbohydrates, require them for activity. Trace minerals (such as zinc, copper, chromium) are needed in small or trace amounts by the body. They are no less important than macro minerals (calcium, magnesium, potassium, sulfur and chlorine), which are needed in larger amounts.

There are 84 known minerals, 17 of which are considered to be essential in human nutrition. If there is a shortage of just one of these, the balance of activity in the entire system can be thrown off. A deficiency of a single mineral can negatively impact the entire chain of life, rendering other nutrients ineffective and useless.

According to state document #264, which was published 63 years ago, 99 percent of Americans are mineral deficient. The situation is even worse today, as minerals continue to disappear from our soils.

### **Where Have All The Minerals Gone**

Modern agribusiness farming methods, including widespread use of N P K fertilizer, over farming, loss of protective ground cover and trees, and lack of humus, are some of the factors that have made soils vulnerable to erosion. The result is a reduced nutrient content of crops.

N P K fertilizer is highly acidic. It disrupts the pH (acid/alkaline) balance of the soil, as does acid rain. Acid conditions destroy soil microorganisms. It is the job of these microorganisms to transmute soil minerals into a form that is usable by plants. In the absence of these microbes, these minerals become locked up, unavailable to the plant. Stimulated by the N P K fertilizer, the plant grows, but it is deficient in vital trace minerals. In the absence of trace minerals, plants take up heavy metals (such as aluminum, mercury and lead) from the soil. These toxic metals are then passed on to us through the food

chain and they are readily assimilated in the body, deficient in protective nutrient minerals.

When trace minerals are scarce in plant bodies, they're scarce in human bodies, and we then hold on to toxic minerals and traces of agricultural chemicals. Also, plants deficient in trace minerals tend to be deficient in vitamins and in protein, as well. It is primarily the amino acid component of protein from which neurotransmitters are made. These neurotransmitters have a huge amount to do with our mental functioning, as well as our physical health. Mineral deficient plants are also protein deficient plants. Between 1950 and 1975, the calcium content in one cup of rice dropped 21 percent, and iron fell by 28.6 percent. Protein content dropped nearly 11 percent. In 1945, wheat was 17 percent protein; by 1985, its protein content dropped to 9 percent.

Tables showing the nutrient content of foods can no longer be relied upon, for minerals are disappearing faster than updated charts can be published. There is also great variation in mineral content of foods grown in different locations and under different conditions.

Trace minerals, rapidly disappearing from our soils, play a major role in electrolyte formation in the body.

### **Electrolyte Loss**

Electrolytes are mineral salts which conduct electricity when dissolved in solution. In the body, the bloodstream provides the fluid medium for electrolyte formation. Electrolyte deficiency or imbalance results in energy loss and fatigue. The disruption of balance, or homeostasis, that results leads invariably to disease.

Nature forms electrolytes through a transmutation process wherein inorganic colloidal minerals are changed into a more usable crystalloid form. This occurs when water cascades over rocks, picking up minerals from the soil, tumbles over the terrain, and forms vortices. Most of us today, however, cannot look to our drinking water as a source of electrolytes. We drink, by and large, from stagnant, polluted sources. Such water is not only mineral deficient, but the minerals it does contain remain in the difficult to use colloidal form. Therefore,

our best bet for obtaining unpolluted water that contains usable (crystalloid) electrolyte minerals is to purify our water mechanically (preferably through reverse osmosis) and return the electrolytes. Be sure to select a true electrolyte formula, one that contains trace minerals in crystalloid form.

Replacement of electrolytes will balance pH and stabilize osmotic pressure (the force on the inside and outside of cell walls). This will result in significantly lowering the risk of infection, increasing digestive efficiency, restoring peristaltic action, increasing oxygen to the cells, reducing water retention, correcting neuromuscular imbalances, improving enzyme production, regulating blood sugar levels and hormonal production, chelating (removing) heavy metals from the body, and increasing energy levels.

### **The Ultimate Solution**

The ultimate solution to the demineralization problem does not, however, lie in supplementation. ***It lies in soil remineralization.*** We must abandon the use of chemical fertilizers and pesticides that lock up soil minerals and poison both the soils and our bodies. According to a 1993 study conducted by the

Environmental Working Group, by age 5, children in this country consume more pesticides than is considered safe for a lifetime. While we're harming ourselves gravely with the use of pesticides, we don't seem to be making much of a dent in the insect population; over 500 species have now become pesticide resistant. The answer to the pest problem is to change the terrain of the soil from one that produces sick, nutrient deficient plants to one that produces healthy, nutrient dense ones, for insects only feed off sick plants.

An escalating crime rate, social unrest, failing IQs they all relate to the disappearance of soil microorganisms, which is the result of man's attempts to conquer and control the Earth rather than to honor her and work in harmony with her laws.

Dr L. G. Olarsch is a widely published, retired naturopathic physician who has practiced holistic medicine for almost 40 years. He has worked and studied at Earps Labs, and has studied under Dr Bernard Jensen, a world expert on nutrition and iridology.

Susan Stockton is the author of several popular health books and teaches alternative health classes.

### **Summary**

To summarize Depression, "the common cold of mental health," is reaching endemic proportions in all age groups. Depression and other thought disorders (such as schizophrenia) are being successfully treated by orthomolecular (nutritional) physicians. We know that our state of mind is intimately related to our biochemical status. Prozac, a widely used, controversial, anti-depressant drug, raises the brain's serotonin levels, thereby alleviating the symptoms of depression. Better results (no side effects) are obtained through nutritional awareness, exercise and stress reduction techniques.

### **INSOMNIA**

Over 30 million Americans suffer from some type of sleep disorder. Insomnia is the result of free floating anxiety - unresolved/unaccommodated stress. It is vitally important that we have deep restful sleep since it is in the dream state that we resolve many of our day-to-day problems.

### **SOLUTION**

Through the use of herbs, natural biochemical substances and psycho-cybernetic tapes we have a non-addictive technology which promotes deep restful sleep.