

NUTRITION & HEALING

Vol. 13, Issue 3 • April 2006

The cancer-fighting vitamin duo that really packs a punch

By Jonathan V. Wright, M.D.

The benefits of vitamins C and K₃ that I told you about last November don't stop with fighting just prostate cancer. Research suggests that those vitamins can also help to combat many other types of cancer when they are used in correct proportions and quantities. The evidence is so strong that even mainstream researchers recommend adding vitamins C and K₃ to more conventional cancer treatments.

I think that's a great idea. In fact, as soon as the vitamin C:K₃ combination became available, we began using it at the Tahoma Clinic, both as an addition to conventional cancer treatments and as a treatment on its own. We've only been doing this for a few months, but we're already seeing some remarkable results.

First impressions

Long before researchers experimented with this vitamin combination, they discovered the individual benefits of each one. In the 1970s, Linus Pauling and Ewen Cameron documented that

cancer patients given 10 grams daily of vitamin C intravenously had a much longer survival rate. But this research never gained credibility because poorly done follow-up research conducted by "reputable" Mayo Clinic researchers was said to disprove Pauling and Cameron's findings. Pauling and Cameron were ridiculed for even imagining that a vitamin could have any effect on cancer. Since that time, even positive research concerning vitamin C's anti-tumor activity has gone unnoted by both mainstream medicine and the media.

To give you an example, vitamin C alone has been found to have "selective toxicity against a variety of malignant cell lines." It's also been found to potentiate (aid and improve) the action of a variety of chemotherapy drugs and anti-cancer radiation.

But vitamin C's effect against cancer never made the news until last fall, when NIH researchers reported that intravenous vitamin C "killed cancer [cells] but not normal cells."¹

Interesting that after only one study from the NIH, the vitamin C cancer connection wasn't so taboo anymore. But whatever the catalyst, it's still an exciting breakthrough in cancer research. The research indicates that it's vitamin C's ability to generate peroxide that makes it so effective against cancer cells. That's right—it's the same peroxide that you douse cuts and scrapes with to kill germs. Actually, human (and animal) white blood cells have always made their own peroxide to kill germs. It's just too bad that it's taken so long for science to learn that hydrogen peroxide can kill more than germs—it can kill cancer cells, too, without harming normal cells.

Typically, you can only get these benefits of vitamin C through an IV, but once vitamin K₃ enters the picture, the situation changes dramatically. Vitamin K₃ helps vitamin C generate peroxide so efficiently that oral dosages can do the same job as an IV. But in order to achieve that effect, it's critical to have the correct ratios (100:1) and sufficient quantities (at least 6 grams of vitamin C and 60 milligrams of vitamin K₃ daily). As of right now, no studies have been done on this combination given intravenously. That being the case, I can't say yet whether the benefits would be even greater in that form.

A safer, more effective way to take chemo or radiation

Vitamin K₃ has its own unique benefits. The authors of the prostate

(continued on next page)

IN THIS ISSUE:

The little-known price of alternative medicine your doctor can't afford to pay	4
Clinical Tip 136: The arthritis miracle that may not be as harmless as it seems—and how to keep yourself safe	5
Lifting the curse of chronic prostatitis	6
Bio-identical hormones under attack	7
"Approved medication" vs. the identical natural substance: the expensive difference	8

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NUTRITION & HEALING

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For questions regarding your subscription, please call reader services at (915)849-4605 (9 a.m.-6 p.m. EDT Mon.-Fri.), fax (410)230-1273 or send an e-mail to service@HealthierNews.com. Send cancellations to P.O. Box 206, Baltimore, MD 21203.

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Nutrition & Healing is dedicated to helping you keep yourself and your family healthy by the safest and most effective means possible. Every month, you'll get information about diet, vitamins, minerals, herbs, natural hormones, natural energies, and other substances and techniques to prevent and heal illness, while prolonging your healthy life span.

A graduate of Harvard University and the University of Michigan Medical School (1969), Dr. Jonathan V. Wright has been practicing natural and nutritional medicine at the Tahoma Clinic in Kent, Washington, since 1973. Based on enormous volumes of library and clinical research, along with tens of thousands of clinical consultations, he is exceptionally well-qualified to bring you a unique blending of the most up-to-date information and the best and still most effective natural therapies developed by preceding generations.

Nutrition & Healing cannot improve on these famous words:

"We hold these truths to be self-evident, that all men are created equal, that they are endowed by their creator with certain unalienable rights, that among these are life, liberty, and the pursuit of happiness."

The inalienable right to life must include the right to care for one's own life. The inalienable right to liberty must include the right to choose whatever means we wish to care for ourselves. In addition to publishing the best of information about natural health care, *Nutrition & Healing* urges its readers to remember their inalienable rights to life, liberty, and freedom of choice in health care. This information is published to help in the effort to exercise these inalienable rights, and to warn of ever-present attempts of both government and private organizations to restrict them.

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C:K₃

(continued from page 1)

cancer paper point out that it can fight breast, cervix, colon, liver, lung, and stomach cancers, as well as leukemia and lymphoma.² In fact, vitamin K₃ "has been proven effective against multiple drug-resistant leukemia cell lines and against adriamycin-resistant leukemia cell lines in rats." Like vitamin C, it makes many chemotherapeutic patent medications more effective and increases the sensitivity of some cancers to radiation.

But when vitamin K₃ is used with vitamin C, the combination really packs a punch. In one study, the two vitamins inhibited the growth of breast cancer cells up to 50 times more than either vitamin on its own. And another study showed that when the combination is used with a variety of chemotherapeutic agents, cancer growth inhibition is increased by three to 14 times. The combination has also been found to reduce cancer cell metastasis and to significantly increase the effect of radiation therapy.

The authors pointed to five separate but related ways in which the combination can lead to cancer cell death. They're a bit technical, but I've listed them here in case your doctor is interested in the exact terminology: blockage of "normal" cancer cell cycling, alterations in signal transduction, potentiation of the immune system, reactivation of an enzyme (DNase) which is significantly decreased in cancer cells, and "autoshizic" cancer cell death. The peroxide mechanism isn't even mentioned and appears to be a sixth way in which this combination kills cancer cells.

The combination in action

Dr. Davis Lamson, one of my colleagues, has been working with cancer patients here at the clinic since 1989. Many of the people he works with use conventional treatment (such as chemotherapy, radiation, or surgery). In addition, they often use natural medicine to augment their conventional cancer treatment programs and to protect their bodies as much as possible against the adverse effects of "chemo" and radiation. But a few choose to go the "all natural" route, including treatment with vitamins C and K₃.

In 2002, a 54-year-old man named Tom was diagnosed with non-Hodgkin's lymphoma and was treated with chemotherapy. By September 2003, Tom's cancer had gone into remission, but only eight months later, a biopsy of a lymph node under his left jaw showed that it had returned. His doctors advised him to repeat the chemotherapy, but he declined because of all the adverse effects he'd suffered the first time. In fact, he was still suffering from numb feet and other symptoms brought on by the chemotherapy.

By August 2004, Tom's condition had worsened: He had a baseball-sized lymph node protruding from the left side of his neck and swollen lymph nodes under his right jaw, in his groin, and in both armpits. He refused conventional treatment and instead went to Dr. Lamson, who put him on an all-natural program that he had created over the years.

Over the next year, after a few adjustments to the original program, Tom felt an overall sense of well-being. He no longer had symptoms from the chemo, the node under his right jaw had disappeared, and

the baseball-sized lump under his left jaw had shrunk into three smaller nodes, which, combined, were less than half the original size. The nodes in his groin and in his armpits had shrunk too.

When the C:K₃ combination suggested by researchers became available over the counter in November 2005, Dr. Lamson added it to Tom's program.

Within one month, Tom's right groin node had completely disappeared and two of the three left jaw nodes had shrunk significantly. And just two months after that, only very small pea-sized nodes were detectable in his left and right armpits, and his three left jaw nodes had each shrunk another 40 to 50 percent. Dr. Lamson noted that the shrinkage appeared to be more rapid when he added vitamins C and K₃ to the program.

Around the same time, Dr. Lamson also treated a 61-year-old woman with chronic lymphocytic leukemia whose white blood cell count was 37,000. (Most labs agree that the normal range is from 4,000 to 10,000.) Her cancer specialist told her that this type of cancer usually progresses very slowly, and he advised her to wait and see what would happen.

She decided she didn't want to wait and insisted that Dr. Lamson do something. He advised her to start on the vitamin C:K₃ combination (2,000 milligrams and 20 milligrams respectively, three times daily). One

month later, her white blood cell count was down to 26,000.

Keep yourself—and your doctor—informed

So far, I only have enough data to tell you about these two cases. Although they give hope, it's much too early to say anything definite about using vitamin C:K₃ therapy alone for cancer, even though a careful reading of the two research papers noted above indicates that it's a strong possibility, especially when the cancer is caught early.

If you or a loved one is already taking cancer chemotherapy or radiation, I'm not at all suggesting that you quit. But I am suggesting that you and your doctors consider adding vitamins C and K₃ to your treatment program. It's very likely that those vitamins will help your present treatment work better. Whatever you decide to do, it's always important to work with a physician skilled and knowledgeable in nutritional and natural medicine and with an oncologist or a related specialist. And don't let anyone tell you "it's just that vitamin nonsense again." The evidence is much too strong for that excuse to work anymore.

Vitamin C is available in many places, but vitamin K₃ is harder to find. It's presently available only by prescription through compounding pharmacies. However, the combination of vitamin C and vitamin K₃ in the recommended 100:1 ratio is available over-the-counter as

The future of the C:K₃ combination

Dr. Lamson is investigating possible interactions between the vitamin C:K₃ combination and natural substances commonly used in cancer treatment, including quercetin, curcumin, melatonin, and vitamin D. As a professor at Bastyr University, he has supervised initial studies on cancer cell lines and has found that two of those substances greatly enhance the anti-cancer effect of C:K₃ and that two greatly decrease the effect. The results of these studies and those on additional natural substances, such as lycopene and selenium, will be published in the near future for guidance in the use of the vitamin C:K₃ system. I'll keep you posted.

"ProsStay." It's available from Life Enhancement, Inc. (www.life-enhancement.com, 1-800-543-3873), from the Tahoma Clinic Dispensary, and from some natural food stores and compounding pharmacies. (I am an advisor to Life Enhancement and, of course, am affiliated with the Tahoma Clinic Dispensary.)

Dr. Lamson recommends the combination of 2,000 milligrams of vitamin C and 20 milligrams of vitamin K₃ three times daily. But as I explained in November, I recommend taking enough of the combination to reach bowel tolerance, which frequently is between 6 and 20 grams of vitamin C daily (along with 60 to 200 milligrams of vitamin K₃ in that 100:1 ratio, of course), and occasionally more. Whatever the amount, it should be spread out evenly during the day. To read more about bowel-tolerance and vitamin C, see the June 2001 issue of *Nutrition & Healing*. JWV

Citations available upon request and on the *Nutrition & Healing* website: www.wrightnewsletter.com

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The little-known price of alternative medicine your doctor can't afford to pay

If you work with a physician skilled and knowledgeable in natural medicine, chances are that his or her office has respectfully declined to process your insurance claim form. I know that can be a real pain. You're already paying a significant amount of money for health insurance, and now you're expected to pay more out of your own pocket if natural medicine is your choice for non-emergency health care.

If you've found yourself in this situation, I'm sure you've wondered why you can't use the insurance you're already paying for to pay for visits to your natural medicine doctor. Or why he won't take and process your insurance form.

Basically, it's because the doctor doesn't want to risk going to jail. I'm not kidding. Since 1996, doctors working with anything other than conventional techniques (patent medicines, surgery, radiation, etc.) who also accept and file insurance claim forms have had a significant risk of going to jail, even though they're recommending entirely legal treatments, such as vitamins, minerals, bio-identical hormones, herbal medicine, and homeopathy. So rather than take this risk, most natural medicine doctors have decided not to accept and process insurance claim forms.

Here's how it works: In 1996, Congress passed Public Law 104-191, the Health Insurance Portability and Accountability Act of 1996, which you might recognize by its acronym, HIPAA. This law is best known for its so-called "privacy" provisions, which make it incredibly difficult for almost anyone—including your doctor in many circumstances—to obtain the

least bit of information about your medical records. (Unless, of course, the information is requested by one of the approximately 600,000 individuals or organizations "authorized" by *los Federales* to obtain your complete medical records *without* your knowledge or consent. See the April 2001 issue of *Nutrition & Healing* for details.)

But a little-known part of this law declares it fraud to give "medically unnecessary" testing or treatment. It also makes it a federal crime, overriding State authority once again. So guess who gets to define what's medically necessary or unnecessary? You? Your doctor? Of course not: Your insurance company gets to decide! This law empowers private insurance companies to decide what is or isn't a federal crime.

Insurance companies play dodge ball

Before 1996, deeming a case "medically unnecessary" was just a way for private insurers to avoid reimbursing enrollees. Over the years, I've seen nearly every medical testing procedure done in natural medicine labeled "medically unnecessary," including, for example, tests for gastric acidity, food allergies, lead, arsenic, mercury and other heavy metals, and gluten-gliadin sensitivity.

The list of treatments I've seen labeled medically unnecessary is even longer. It includes saw palmetto for prostate enlargement, vitamin B₆ and magnesium for prevention of calcium oxalate kidney stones, vitamin B₁₂ injections for bursitis and fatigue, high-dose intravenous vitamin C injections to speed recovery from viral illness, magnesium injections for relief of spasm—you get the idea.

It doesn't matter if there's ample evidence supporting the test or treatment, or even if the individual improves with natural medicine testing and treatment after years of ineffective conventional testing and treatment. If the private insurance company calls it "medically unnecessary," it doesn't pay.

But since HIPAA passed in 1996, private insurance companies can do more than dodge the payments—they can give the information to *los Federales* as the basis for criminal prosecution.

Insurance companies don't "turn doctors in" to *los Federales* for criminal fraud prosecutions very often. Usually, they just use the label to escape paying and then move on. But it has happened on occasion—including one time here in the Seattle area.

So when it comes right down to it, your natural or alternative medicine doctor won't accept and process insurance claim forms because he doesn't want any risk at all of going to jail for recommending tests or treatments routine in natural medicine. Even if he could prove to a jury that there's been no actual fraud (as it's defined by the dictionary, not by the private insurance company), it would cost the doctor a minimum \$50,000 to \$100,000 in legal defense fees. Then there's the matter of having his name in the newspapers for months to years as a target of a federal "health care fraud" investigation.

Don't expect a change in the law from Congress: Insurance companies like things the way they are, and they make much bigger campaign contributions than you or I. But if you buy health care insurance mostly to guard against incredibly expensive hospitalizations, and if

you see natural medicine practitioners for routine matters, you should investigate switching from regular health care insurance to a health savings account (HSA). An individual or family HSA could save you money since it's typically much less

expensive than other insurance plans.

The primary drawback of an HSA is that, in the event of an emergency, you will be responsible for paying a much higher deductible than other insurance plans require—usually between \$2,000 and \$5,000.

But, when it comes to this sort of care, as high as that sum sounds, a few thousand dollars is still a minor fraction of the overall cost, which (for emergencies requiring hospitalization) often cost hundreds of thousands of dollars. **JVW**

CLINICAL TIP 136

The arthritis miracle that may not be as harmless as it seems —and how to keep yourself safe

Many people use MSM (methylsulfonylmethane) to treat arthritis. And although the effectiveness does vary, most of the people who use it have experienced relief from their arthritis symptoms.

From all outward appearances, MSM seems to be effective and completely safe. A recent study confirmed that it reduces arthritis pain and lessens functional impairment.¹ Studies also show no side effects when it's used for relatively short time periods, such as a few months to a year. Researchers do caution about the safety of long-term MSM use, but as of yet there's no evidence to indicate that it could be harmful. Even people who have used large doses (4 to 8 grams daily) for more than 20 years haven't reported any problems.

But MSM might not be as totally harmless as it seems.

There's at least one long-term effect that is theoretically possible: the depletion of the essential trace element molybdenum. Molybdenum is essential to safe, complete processing of sulfur in human and animal bodies.

MSM contains nearly 30 percent sulfur. Typically, high-sulfur foods like meat, fish, poultry, eggs, milk, and legumes are balanced by nature to contain the essential nutrients needed to completely metabolize the sulfur content.

But unlike natural foods, MSM supplements don't contain any other key nutrients needed to metabolize MSM's high sulfur content. So, in a way, MSM's sulfur is "naked" because it doesn't have a rich complex of vitamins and minerals built in.

A century ago this wouldn't have been a big concern because you would have gotten sufficient molybdenum from the other foods you ate to completely metabolize the sulfur from MSM. But that's not the case today. Although beans, whole grains, nuts, and a variety of other foods can all be good sources of molybdenum, their molybdenum content depends on the amount of this mineral in the soil. Unfortunately, most agricultural soils are much lower in molybdenum and other essential

trace minerals than they were 100 years ago.

To make matters worse, processing and refining foods removes most of the remaining molybdenum (and other trace mineral) content. So unless you're eating a mostly organic diet, you're getting much, much less molybdenum than your grandparents or great-grandparents.

If you're taking large quantities of MSM, the molybdenum needed to completely metabolize its sulfur must be "stolen" from an already relatively low-molybdenum diet. Fortunately, there's likely to be enough molybdenum already present in your body to metabolize MSM over shorter time periods, such as weeks or months.

You're probably wondering why I'm still concerned about MSM safety. Once again, I'm not concerned if you're planning to use MSM for just a few months. But if you start using it at age 50 or 60, and it helps relieve your pain, you're likely to take it for another 20 to 30 years or so. So the question is whether there will be enough molybdenum in your food to handle all that extra "naked" sulfur over the years. I can't say for sure, but I expect that in most cases the answer will be no.

So if you plan to take MSM for many years because it helps your joints (or for any other reason), you should try to eat an entirely organic diet to make sure you're getting enough molybdenum to offset the sulfur in the MSM. I know that organic foods can be very expensive, so if eating an entirely organic diet isn't possible for you, look for one of the brands of MSM that contains at least 50 micrograms of molybdenum for every 1,000 milligrams of MSM.

At the very least, I recommend working with a physician skilled and knowledgeable in nutritional and natural medicine and monitoring your molybdenum levels over the years.

Citation available upon request and on the Nutrition & Healing website: www.wrightnewsletter.com

Lifting the curse of chronic prostatitis

By Kerry Bone

If you suffer from chronic prostatitis, chances are pretty good that your doctor has prescribed antibiotics. And chances are even better that they haven't done a bit of good. That's because with chronic prostatitis (also known as chronic prostatitis/chronic pelvic pain syndrome, or CP/CPPS), bacteria are hardly ever involved. Even on the rare occasion that bacteria are involved, the prostate gland is notoriously difficult to treat with antibiotics.

When it comes right down to it, no conventional treatments are effective for CP/CPPS because no one knows for sure what causes it. Over the years, though, I have found a number of not-so-conventional treatments to be successful with my patients.

Gathering evidence

CP/CPPS is the most common form of prostatitis, a condition that's characterized by inflammation of the prostate gland. The main symptom of CP/CPPS is chronic pain or discomfort in the genital and urinary organs, which may or may not include difficulty in urinating. But possibly more disturbing are the long-term effects: Preliminary evidence suggests that chronic prostatitis may be associated with an increased risk of prostate cancer, as well as enlargement of the prostate (a condition known as benign prostatic hyperplasia, or BPH).

Although no one really knows the exact cause of CP/CPPS, many relevant factors have been identified that could all contribute to the problem. My patients say that prolonged sitting or riding a bicycle can make it worse, which suggests that poor circulation to the prostate is a probable factor. Many also

complain that their pain flares up when they drink alcohol.

Published research indicates that an autoimmune reaction could be a big factor in the chronic inflammation. Biopsy tissue that has been taken from the prostates of men with chronic prostatitis often has signs of significant inflammation that is apparently caused by a reaction from the immune cells.¹ Another probable factor is stress: A study in Finland found psychological stress to be common in men with CP/CPPS.²

Putting the pieces together

With these factors in mind, I recommend a variety of herbs to my patients based on their individual cases. I'll give you a list of the herbs, but keep in mind that you should work with a physician skilled and knowledgeable in natural medicine to find the specific combinations and dosages that work best for you.

One of the key herbs I use for CP/CPPS is saw palmetto. I know I told you last month that saw palmetto does not improve CP/CPPS symptoms specifically, but I like to use it in combination with other treatments because it improves the overall health of the prostate gland. I also use my favorite herb, Echinacea, because it balances out the immune system and helps the body resolve any low-level bacterial presence that might be driving the autoimmune response. Other options include nettle root (another herb that supports the prostate), plus cramp bark and chamomile (for pain and spasms). When bladder symptoms are also involved, I use the Ayurvedic herb Crataeva, which is the best herb I know of to support bladder function. In especially difficult cases, I include more immune herbs, such as the

mushrooms Ganoderma and shiitake.

The following case histories are excellent examples of how these herbs can promote long-term healing even when conventional treatments come up short.

Let's start with Bill, a 53-year-old man who suffered from CP/CPPS for 20 years. His symptoms included constant pain, a burning sensation while urinating, and cramping and pain during sex. Although Bill had been treated with antibiotics over the years, they never had any effect.

I gave Bill an herbal liquid combination containing cramp bark, chamomile, nettle root, and Crataeva. I also recommended saw palmetto extract capsules and Echinacea root tablets. After two months, Bill said he was feeling better than he had in years. He was relatively free of symptoms and was able to enjoy sex once again. He still takes the above herbs from time to time, but after five years his CP/CPPS gives him little trouble.

Another patient, James, suffered from CP/CPPS for seven years. I recommended a blend of herbal liquid extracts containing Echinacea, nettle root, Crataeva, and saw palmetto as well as a tablet containing cramp bark, wild yam, and ginger for his spasms. James has taken herbal treatment for his problem off and on for eight years. When he is consistent with his herbal treatment, he experiences consistent relief from his symptoms. However, when he stops his treatment, the symptoms return.

Depending on your individual case, you may need to supplement with these herbs either on a regular basis or just from time to time as your symptoms flare up. **KB**

Citations available upon request and on the Nutrition & Healing website: www.wrightnewsletter.com

Bio-identical hormones under attack

In the last year or two, bio-identical hormone replacement for women has “gone mainstream.” Thanks to increasing requests from women to their doctors, and propelled by Suzanne Somers’ books, news of the movement (started mostly by the late Dr. John R. Lee and me) has spread to millions of women nationwide.¹ But along with all that mainstream attention comes a progression of events that has become fairly predictable for natural medicine: *Los Federales* have opened an “official inquiry” into it—and that’s almost never a good sign for the subject of investigation.

The official complaint came from the Wyeth Company, the supplier of Premarin, one of the most popular “hormone” replacement therapies (HRTs) on the market. In the fall of 2005, they filed a “citizen’s petition” with the FDA, complaining that bio-identical hormones prepared by compounding pharmacists (all of which are State-licensed, regulated, and supervised) are unsafe and ineffective and should be subjected to Federal (not State) regulation. Wyeth asked that the FDA penalize compounding pharmacies with actions such as seizures, injunctions, and warning letters.

Los Federales cooperated with Wyeth’s effort by promptly opening a complaint docket. Of course, *los Federales* aren’t doing anything special for Wyeth, are they? Why, if you or I, also “citizens,” had filed a citizen’s petition complaining about the possibly life-threatening dangers of statin drugs unaccompanied by co-enzyme Q₁₀ (hazards known to all statin producers—one of them actually has a patent on the

combination of a “statin” and CoQ₁₀), the FDA would have promptly opened a docket for you or me, wouldn’t they? But I digress.

The title on the complaint docket doesn’t exactly show impartiality. Here it is, taken directly from the FDA website:

Docket: 2005P-0411—
Seeking FDA Actions to counter Flagrant Violations of the Law by Pharmacies Compounding Bio-Identical Hormone Replacement Therapy Drugs that Endanger Public Health.

This gives us a clue about which way the Federal wind may be blowing, doesn’t it? So it’s up to you to change the direction. Otherwise, your ability to purchase the safest available hormone replacement therapy, bio-identical hormones, may be regulated away completely. Or it could be so heavily restricted that the price would skyrocket above the price of the more dangerous horse hormones or other patentable pseudo-hormones.

Why would Wyeth do this now? According to the *Communication Agents Journal*, an online journal covering news you’re not likely to find in the regular media, money seems to be the motivating factor.² (Isn’t it always?) Certainly seems like Wyeth must be experiencing some night sweats of their own from this unexpected competition.

You probably remember the “Women’s Health Initiative” report of 2002, which demonstrated the potentially devastating effects of conventional HRT. Since then, Wyeth’s sales of products in the “Premarin family” declined from \$2.072 billion in 2002 to \$1.275

billion in 2003 to “only” \$880 million in 2004.³ (The Premarin family principally includes Premarin, a horse estrogen product, and Prempro, horse estrogen combined with the patented “space alien” molecule medroxyprogesterone.)

Make your voice heard

One of the purposes of an FDA docket is to invite public comment. If you have access to the Internet, *please* go to <http://www.iacprx.org/saveBHRT.html> to file your opinion of Wyeth’s efforts with the FDA. Do it now, and encourage all your friends to do the same. The closing date for public comment is **April 4, 2006**.

But don’t stop there. Since *los Federales* probably won’t pay much attention to regular citizens like you and me, it’s important to contact your congressmen. They’re much more sensitive to citizen complaints—particularly if there are enough of them. And there certainly are enough women using bio-identical hormones to make their voices heard.

Please write, call, fax, or e-mail your congressmen and senators now and often—even after April 4. Continue to send them frequent reminders until *los Federales* leave the regulation of bio-identical hormones where it belongs—with the individual States.

To find the names, addresses, and telephone numbers of your congressmen, visit the United States House of Representatives website www.house.gov. To locate contact information for your state senators, visit the Senate website, www.senate.gov. For a one-stop resource for locating

(continued on page 8)

“Approved medication” vs. the identical natural substance: the expensive difference

Soon, “mainstream” doctors will be prescribing a product called Prasterone. It’ll likely cost \$100 to \$150 per month, but you’ll be told it’s worth it because of all the wonderful things it can do for you. This may shock some of you, but I agree that Prasterone is a treatment with enormous potential when it’s properly used. It reduces many problems associated with insulin resistance, improves bone mineral density, alleviates depression in older individuals, helps the immune system function better, lowers cancer risk, and the list goes on and on. Plus, the potential side effects are minimal, in fact nearly zero, when the doses are correct.

But I’ll also tell you what you won’t hear from the manufacturers of Prasterone: You can get exactly the same benefits with a much less expensive substance that’s available in just about any natural food store. That’s because Prasterone is a trade name for DHEA, something I’ve been telling you about for years. The difference? If Prasterone is approved, it’ll be covered by health insurance and “approved” by Medicare, and DHEA won’t be.

And if past experience is any guide, when Prasterone comes close to FDA “approval,” *los Federales* will likely mount a campaign to make the less expensive DHEA illegal or at least much harder to

obtain, driving the cost of health care much higher in the process.

Think I’m being overly cynical? Bills have already been introduced in prior Congresses to outlaw the over-the-counter sale of DHEA, making it a Federal crime to sell it without a prescription. Fortunately, those bills didn’t pass. But you can bet they’ll be back again once Prasterone is “approved.”

And what about raising the cost of health care dramatically, simply by “approving” a natural substance? It’s happened before. Just check out Carnitor. By this name, it’s FDA “approved” for use by kidney dialysis patients. A bottle of 90 tablets, 330 milligrams each, is listed at drugstore.com for \$81.89. It’s “covered” by Medicare, Medicaid (funded by your taxes and mine), and private insurance companies (funded by your insurance premiums and mine).

Yet Carnitor is nothing more and nothing less than the amino acid L-carnitine under its FDA-approved name. At vitacost.com, a bottle of a good brand of L-carnitine, 120 capsules, 500 milligrams each, is available for \$21.92. That’s more capsules and a higher dosage for nearly \$60 less. Of course, it’s not eligible for Medicare, Medicaid, or private insurance “coverage,” even though it’s exactly the same material at less than one-quarter the price.

Somehow, I don’t think that the “authorities” are really all that serious about reducing the cost of health care. Do you? **JVW**

bio-identical hormones under attack

(continued from page 7)

and writing to your representatives, visit www.congress.org, a website run by a group called Capitol Advantage.

If you don’t have access to a computer, you can find out the contact information for your State’s members of Congress by calling the United States Capitol switchboard at (202)224-3121. **JVW**

Citations available upon request and on the Nutrition & Healing website: www.wrightnewsletter.com

Find out what your fellow readers are saying!

Now, with the Healthier Talk Forum, you can check out other readers’ comments and questions, offer any information you might have to help them, and even post your own questions. To visit the Forum, go to the *Nutrition & Healing* website and click on the “Health Forum” option at the top of the page.

ALTERNATIVE HEALTH RESOURCES

American College for Advancement in Medicine (ACAM)
Phone: (888)439-6891
www.acam.org

American Academy of Environmental Medicine
Phone: (316)684-5500
www.aem.com

Tahoma Clinic
Phone: (425)264-0059 for appointments only

Tahoma Clinic Dispensary
Phone: (888)893-6878 to order supplements and products only
www.tahoma-clinic.com

American Association of Naturopathic Physicians
Phone: (866)538-2267
www.naturopathic.org

Meridian Valley Laboratory
Phone: (425)271-8689
www.meridianvalleylab.com