School Food, or Junk Food?

Eat Your Way to Better Sleep

Healing Within the Family

The Power of Completion

Questioning the Necessity of Vaccines

A Holistic Approach to Colds and Flu

Three Nutritional Energy Building Ingredients for Busy Adults

The Power of the Horse/Human Connection
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CASE STUDY

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The Expectancy of Disease

There are many books in our editorial office, all awaiting review. I looked through some of the titles this morning and picked up Of Monkeys and Dragons: Freedom from the tyranny of disease, and decided to skim through it. I now quote the author, Michele Longo O’Donnell, a former registered nurse, who challenges the belief many of us have of the expectancy of disease.

She writes, “We, as a people, have the idea that disease is a necessary part of life which we must expect to happen at some time or another. We don’t question it. In blind submission we expect it and, yet, we fear it. And we spend all our energy and effort fighting against it. We do all the things that we feel are right and proper, and hope that our efforts will be rewarded by our remaining free of disease.”

It’s true, it seems, that we have expected disease; instead, couldn’t we live lives free from illness and die peacefully when we decide to go? It’s a big question, and if the answer is “yes,” then our lives and our preconceived notions will have to change—and if they do, so will our disease care system. O’Donnell says, “We get immunizations to ward off the possibility of our body getting sick. We go to a doctor and subject our bodies to multiple tests and examinations to see if it is deciding to get sick. We spend a considerable percentage of our salaries buying insurance so we’re at least financially covered when disease finally does happen.” These thoughts about disease dominate our lives, she says.

O’Donnell, from doing so herself, advises the reader to change negative beliefs. (See “Simple Medicine: Resolving Conflicting Beliefs,” page 32, this issue, for a similar story.) She writes that during her nursing career she fully believed that conventional medicine was all that was available to anyone. Then she began to experience a Life beyond herself, one that she says is in all of us and supports healing and well-being, no matter how much anyone might have gone in the opposite direction.

O’Donnell: “Now I see the body as a result of the Presence and flow of Eternal Life.” She says, “I could…actually cease in my expectation of disease.” At first, “it took a tremendous amount of discipline, watching my every thought.” But then she began to “see wholeness and health where there was only evidence of disease” in the moment.

O’Donnell’s book will appeal to the open-minded, as it offers numerous stories of profound healing experiences that occurred when expectancies changed toward well-being despite the appearance of any illness. What a novel idea: Relax and expect well-being. ∆

—Scott Miners, Executive Editor
Feeling blue or anxious? Before you reach for the Zoloft or Xanax consider reaching inside yourself for the answer to what troubles you.

Our bodies are adept at self-healing. This reality is witnessed daily in the broken bones, minor infections, upper respiratory issues, gastroenteritis attacks, minor headaches and other ailments that all seem to resolve on their own.

We cannot negate the need—and the gift—of medical and surgical interventions that help save lives and get us through medical crisis, but we too often overlook this truth: Our bodies are the true source of this healing. The ability to heal is an essential life force that runs through us all.

Our intention to heal, along with a positive outlook, has long been recognized as an essential aspect of healing our physical beings. What is less obvious is that we are also capable of healing ourselves emotionally.

This notion finds its origins in the work of Candace Pert and others in the field of psychoneuroimmunology who found that each and every cell of our body contains receptors, which enables them to bind to peptides circulating in the body. Pert refers to this process as “molecules of emotion.”

In my own medical practice I’ve seen the practical truth of this theory while performing thousands of endoscopic procedures at my surgical center in Edison, New Jersey.

Anesthetics are used in order to ensure patient comfort and safety. It is astounding to observe how rapidly anesthetics can induce a state of sedation similar to sleep. Patients feel no discomfort at all, and quickly awaken when the intravenous drug is discontinued.

This could only occur if the anesthetic interacted with receptors in the cells of the brain that are responsible for awareness as well as the awake state. The binding has to be quick, and rapidly reversible.

This concept holds true with antidepressants and anti-anxiety medication as well. Any drug that works on our moods, emotions and state of mind—such as Valium, Xanax or Klonopin for anxiety, or Paxil, Prozac, Zoloft or Celexa for depression—could have no effect on us if it did not bind to existing receptors in our brains.

If our brains are built with receptor sites that can allow modern medicine to do its job, doesn’t it make sense to
Our intention to heal, along with a positive outlook, has long been recognized as an essential aspect of healing our physical beings. What is less obvious is that we are also capable of healing ourselves emotionally and considering that on the deepest levels we are also equipped to heal our own mental and emotional imbalances?

Clearly, these receptors exist within us for a reason. As the products of millions of years of primate and mammalian evolution we inherited them for a reason. They very likely served to allow our ancestors to calm themselves and become less anxious and even less depressed. Obviously, a calmer state of mind would lead to self-healing abilities.

I believe we are biologically structured to be able to reduce our own emotional distress and to be happier and more content. We have the power within to become our own emotional healers.

**PRESCRIPTIONS**

1. **Beyond physical awareness.** Nurture faith and belief in the biological capacity to heal our own emotional distress.
2. **Physical exercise.** Certain internal chemical compounds such as adrenaline are released by emotional stress, and exercise can “burn” them off.
3. **Meditation.** Learn to calm the chaos of the mind and create peace from within. Brain scanning has proved that this alters the “molecules of emotion.”
4. **Eat right for a clear mind.** Become aware of how your body and mind react to certain foods and chemicals. Carbohydrates, sugars, alcohol, and some wheat products and fats can create emotional imbalances in some people.
5. **Spiritual exploration.** Prayer and connection to a higher reality can empower us emotionally.
6. **Seek and create a soulful community.** As innately social beings we calm each other through expressions of love, compassion and support.
7. **Try therapy.** There is nothing wrong with talking out your troubles to a qualified therapist or analyst.
8. **Medication when needed.** The goal is to tap into our innate ability to heal ourselves through natural and complementary methods. Use medications like antibiotics only as something to temporarily assist your body in its own healing. △


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**A single gentle rain makes the grass many shades greener. So our prospects brighten on the influx of better thoughts. We should be blessed if we lived in the present always, and took advantage of every accident that befell us, like the grass which confesses the influence of the slightest dew that falls on it; and did not spend our time in atoning for the neglect of past opportunities, which we call doing our duty.**

—Henry David Thoreau, chapter 17, *Walden* (1854)
Ultimately, to maintain a normal sleep rhythm, one must maintain a normal eating rhythm. Part of the reason for this linking of eating and sleeping is the body’s cortisol rhythm.

NORMAL CORTISOL RHYTHM—A KEY TO BETTER SLEEP

Cortisol is a hormone produced by the adrenal glands, which are located above the kidneys. Cortisol helps regulate many body functions including activation of thyroid hormone, bone resorption, muscle strength, energy production, resistance to infection and cancer, resistance to auto-immune diseases, and intensity of allergic reactions. Cortisol is a strong determinant in how rejuvenating sleep will be.

Cortisol is produced in a cyclic fashion with the highest levels being released in the morning and the lowest at night. This 24-hour cycle is called the circadian rhythm, and an abnormal circadian rhythm of adrenal hormones can adversely affect multiple critical functions in the body, including energy production and immune surveillance. Any disruption in this rhythm can result in a tendency toward fatigue, easy bruising, infection, osteoporosis, low sex drive, infertility, migraine headaches, adult acne, abdominal bloating, and either low or high blood pressure.

A disruption in the cortisol level during the night will affect the quality of sleep. If the cortisol level is high during the night, an individual will have disrupted rapid eye movement (REM) sleep and will wake up non-refreshed, no matter how many hours of sleep the individual appeared to have.

REM sleep is the stage of sleep during which an individual dreams. It is accompanied by muscle relaxation and an increase in the breathing rate. The intense dreaming that occurs during REM sleep is a result of heightened cerebral activity. The paralysis that occurs simultaneou
High insulin levels have been found to be an underlying culprit in many diseases such as coronary artery disease. (N.B. If you have diabetes and use insulin injections, please do not interpret this statement to mean that you would be well served to cut back inappropriately on your dose. Please discuss interpretation of this information with your physician.)

High glycemic index foods, such as sugar and refined starches, cause cortisol levels to rise. For individuals who start the day with a normal cortisol level, starchy or sugary breakfast food choices can cause the cortisol to overshoot the normal range. The cortisol will likely remain elevated all day—and all night. Intervention with herbs or supplements that lower cortisol can help.

Worse than having a high glycemic meal is having no meal at all. Any time during the day that one does not eat within five hours of the previous meal or snack, the cortisol level tends to rise. A rise above the normal range during the day almost guarantees that the nighttime cortisol will be high and thus disrupt REM sleep.

A single late meal or skipped meal or high glycemic index meal during the day can result in a high cortisol during the early part of the night. A cortisol level higher than it should be during the night results in a disruption of REM sleep and with it non-refreshing sleep.

Low glycemic index foods such as eggs, meats, poultry, fish, and most vegetables tend to lower the cortisol level. If one starts with a normal morning cortisol, eating foods from the low glycemic index category every five hours during the day is needed to keep the cortisol on its normal downward track.

Note that the high glycemic index of sugar or starch, including whole grains, requires consumption of nearly an equal weight of animal protein to maintain glycemic balance. Vegetables usually balance themselves in terms of glycemic index, but vegetables are not of sufficiently low glycemic index to balance grains—at least not grains as they are routinely prepared by most Americans. Note that many cultures around the world have developed a 3-step process of pan-frying, soaking, and steaming rice that lowers the glycemic index of this non-gluten grain.

To prevent the deleterious upward swing of cortisol, one usually does better to balance all sugars and grains, including whole grains, with animal protein. Even given what we know about the various pitfalls of animal protein, it probably remains better to eat animal protein with each meal at which we have sugar, including fruit, and/or grains. If animal protein is not tolerated for medical, religious or social-consciousness reasons, it is probably better to remain vegan than to be carbo-vegan.

Has it always been this way? Perhaps not. Many factors have changed in the past century.

**HIGH CORTISOL CAUSED BY NON-SPROUTED GRAINS**

For example, our grains have been hybridized to contain about half the protein that they contained in 1900. In addition, our failure to sprout our grains in the preparation of the flour used for our commercial breadstuffs has added to the disruption in our cortisol rhythm.

Non-sprouted grains result in an inflammatory response in the gut, causing
the secretion of excess cortisol into the intestinal tract. This hormonal drain of cortisol in the gut deprives other parts of the body of their fair share of cortisol. While allergy and inflammation manifest themselves elsewhere in the body, the gut is a set-up for intestinal dysbiosis (abnormal gut flora), lowered immune protection (due to lowered secretory IgA levels), and metabolic reactivity to foods.

Sprouting removes much of the toxic peptides that are found on the hull of grains. Feed children sprouted grains to avoid or delay gluten- and gliadin-intolerance. Individuals with gluten intolerance are advised to avoid gluten grains. Note that the incidence of gluten intolerance is especially high for those with Celtic, Nordic, or German background. However, travel and intermarriage have led to the dispersion of this gene to virtually every land. In addition, with the introduction of genetically modified grains into our food supply, the incidence of gluten intolerance has risen in populations from all backgrounds.

**THE FALLACY OF CARBOHYDRATE LOADING**

Individuals who have been violating these eating guidelines may have depleted their liver glycogen stores. These individuals may find themselves hypoglycemic in fewer than five hours. It usually requires about three months of consistently eating glycemically balanced meals at regular intervals in order to replenish the glycogen stores.

Glycogen from the liver is necessary to provide energy to allow the brain to continue to function during the night and during periods of skipped meals during the day. Brain cells are injured when glycogen is not available.

A fallacy that led to serious health problems for many athletes in recent decades was the belief that foods high in sugar and starch helped to promote glycogen storage. Carbohydrate-loading leads many athletes to develop profound fatigue and other conditions related to glycogen depletion. It now appears that a balanced intake of protein with non-gluten grains and non-fructose carbohydrates would have been a wiser choice.

**CANCER AND AN ELEVATED MIDNIGHT CORTISOL**

In addition to disrupted REM sleep, an elevated nighttime cortisol suppresses the immune system and with it our resistance to infection and cancer. Researchers have reported that an elevated secretory midnight cortisol is correlated with an increased risk of breast cancer. Individuals who take measures to correct their cortisol rhythm find a better response to the regimens they use not only for recovering from infection but from malignancies as well.

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**Starchy or sugary breakfast food choices can cause the cortisol to overshoot the normal range. The cortisol will likely remain elevated all day—and all night**

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The Importance of Soaking Grains

**All grains contain phytic acid (an organic acid in which phosphorus is bound) in the outer layer or bran. Untreated phytic acid can combine with calcium, magnesium, copper, iron and especially zinc in the intestinal tract and block their absorption. This is why a diet high in unfermented whole grains may lead to serious mineral deficiencies and bone loss.... Soaking allows enzymes, lactobacilli and other helpful organisms to break down and neutralize phytic acid. As little as seven hours of soaking in warm acidulated water [with whey or lemon juice added] will neutralize a large portion of phytic acid in grains....**

During the process of soaking and fermenting, gluten and other difficult-to-digest proteins are partially broken down into simpler components that are more readily available for absorption....

Grains fall into two general categories. Those containing gluten, such as oats, rye, barley and especially wheat, should not be consumed unless they have been soaked or fermented; buckwheat, rice and millet do not contain gluten and are, on the whole, more easily digested. Whole rice and whole millet contain lower amounts of phytates than other grains so it is not absolutely necessary to soak them. However, they should be gently steamed for at least two hours in a high-mineral, gelatinous broth. This will neutralize some of the phytates they do contain and provide additional minerals to compensate for those that are still bound; while the gelatin in the broth will greatly facilitate digestion.

Benefits of Frequent Small Meals
(Including Cortisol Reduction)

NANCY APPLETON, PH.D., a researcher who has specialized in healthy eating and lowering blood sugar levels, notes that an English researcher, Fabry, demonstrated the healthy effects of eating smaller amounts of food more frequently. He found that when we eat one-sixth of our food six times a day rather than one-third of our food three times, there is weight loss for the overweight, as well as reduction in serum cholesterol and an improvement in the glucose tolerance pattern for all who eat so.

Appleton cites another study where seven men each ate 2500 calories a day. For one two-week period, they got their food in three ordinary size meals. For the next two weeks, they received the same amount of calories in 17 daily snacks to be eaten once an hour. After the frequent snack period, researchers found lowered levels (14%) of low-density lipoprotein cholesterol, or LDL. They also found a decline in insulin of approximately 28% and in urinary cortisol levels of 17%. These patients did not receive a low cholesterol diet and yet their lipid profile improved.

In Dublin, Ireland, when subjects followed normal self-selected diets but ate snacks all day rather than three meals, researchers noted a favorable effect on lowering plasma cholesterol and raising the HDL/LDL cholesterol ratio.

(SEX HORMONE BALANCE AND CORTISOL)

Also keep in mind that the body corrects abnormal cortisol levels by “stealing” from the sex hormones. The biochemists call this “pregnenelone steal,” because pregnenelone is the precursor of both cortisol and the sex hormones. Thus, abnormal cortisol by its nature causes derangements in the sex hormone balance.

Imbalances of sex hormones lead to lowered sex drive, balding, prostate enlargement, urinary hesitancy and dribbling, nighttime urination, PMS, uterine fibroids, heavy menstrual flow, and breast tenderness. It is much easier to correct the sex hormone imbalances if the cortisol rhythm is normal. If one fails to correct the cortisol rhythm, long-lasting correction of sex hormone imbalances is unlikely.

It is also important to note that hormone imbalances can rarely be corrected safely simply by taking more of the hormone that is determined to be low. It is imperative that an effort be made to determine why the level is low and to address the primary imbalance whenever possible.

It is almost always necessary to correct dietary indiscretions in order to safely replace and balance hormones. Much of what one reads about the hazards of taking hormones such as progesterone or estrogen is associated with problems from the diet.

Not only can diet modification reduce the risks associated with the use of sex hormones, but also the proper diet can often reduce or eliminate the need for sex hormone replacement at all.

To determine whether it is safe to divert energy from the fight-or-flight system to the digestive system, the body effectively is asked, “Do I have enough of everything?” … Satisfaction with our blessings is key to proper digestion.

The circadian rhythm of cortisol can be disrupted from birth. Contributing factors can include viral infections, birth canal trauma, an abnormal maternal rhythm, and irregular eating patterns. Any cause of disruption of the signals from the hypothalamus and pituitary to the adrenal can contribute to an abnormal cortisol rhythm.

Measures to reverse patterns caused by such diverse factors can include homeopathy, acupuncture, manual therapy such as cranio-sacral or Bowen (a neuromuscular technique), herbs, and diet.

References:

“Love is what we were born with. Fear is what we have learned here. The spiritual journey is the relinquishment—or unlearning—from the fight and the acceptance of love back into our hearts. Love is the essential existential fact. It is our ultimate reality and our purpose on earth. To be consciously aware of it, to experience love in ourselves and others, is the meaning of life.”

PAIN AS A MAJOR CAUSE OF CORTISOL IMBALANCE

Pain, even a simple headache, can elevate cortisol. Pain and the elevated cortisol both contribute to sleep disruption. Dietary measures alone are seldom adequate to overcome the disruption of cortisol caused by pain. Pain management and correction of the underlying causes are primary in these instances.

A single skipped or late meal or a high starch or sugar load is enough to throw off the cortisol rhythm for the upcoming night and make it less likely that the next day will start with a normal cortisol rhythm.

EMOTIONS AS A CONTRIBUTOR TO AGING HORMONE LEVELS

Emotions that arise out of feeling threatened or feeling any sense of lack are associated with the release of specific stress hormones, most notably cortisol. Fear, frustration, anger, and sadness increase cortisol and reduce sex hormones.

In addition, release of digestive enzymes does not occur during a sense of flight or fight. Food will sit in the stomach and decay rather than digest when one eats while feeling stressed.

To determine whether it is safe to divert energy from the fight-or-flight system to the digestive system, the body effectively is asked, “Do I have enough of everything?” Those of us who have adequate food, clothing, and shelter sometimes fail to respond in the affirmative to the questions, “Do I have enough time? Do I have enough respect?” Satisfaction with our blessings is key to proper digestion.

HERBAL MEASURES TO LOWER AN ABNORMALLY HIGH CORTISOL

Measures to help correct an overshoot in cortisol can include herbs such as de-glycerinized licorice (DGL) or phosphorylated serine or phosphatidyl serine. Phosphorylated serine taken at 6 p.m. can help bring a high cortisol down to normal by bedtime. In some individuals, the action occurs in as little as one hour, and these individuals may need to take the phosphorylated serine later in the evening.

HERBAL MEASURES TO RAISE THE CORTISOL LEVEL

Note that whole licorice root extract (Glycyrrhiza glabra) does the opposite of DGL. Whole licorice root extract tends to raise the cortisol level. It is helpful for individuals with morning fatigue due to low cortisol. A cup of licorice tea in the morning can help overcome the lack of appetite experienced by those with low cortisol levels.

ADAPTOGENIC HERBS TO BALANCE THE HORMONES

Among other herbs that affect cortisol are included various adaptogens such as ashwaganda, Rhodiola rosea (Arctic root or golden root), reishi, wild Chinese and American ginseng, cordyceps, Siberian ginseng (Elytrigia sibirica), dong quai, and black cohosh.

Sugar Levels

“A BAKED POTATO AND PUFFED RICE are both 100 percent on the glycemic index, which means that they raise your blood sugar significantly…Your blood sugar rises so quickly and significantly [with processed sugars or high glycemic foods], and it produces more insulin. Since the rate of rise is so rapid, the body tends to overproduce insulin and people get what is called reactive hypoglycemia (low blood sugar). Then they crave to eat sugar to get their blood sugars back up again.”

—Susanna Reid, N.D., in Get Healthy Now: A Complete Guide to Prevention, Treatment, and Healthy Living, with Gary Null, Ph.D., page 649; 2006; Seven Stories Press; paper; index; 1146 pages

What Shall I Eat?

EAT FOOD. Not too much. Mostly plants. These seven simple words of dietary advice are at the heart of journalist Michael Pollan’s new book, In Defense of Food: An Eater’s Manifesto. Pollan questions why decades of nutritional advice have left U.S. eaters fatter and less healthy than ever. His conclusion? In place of real food, Americans today are eating “edible food-like substances” that come largely from factories instead of farms. But we can, in Pollan’s words, “reclaim our health and happiness as eaters.”

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ITEM# WGB01
Gluten-Free Blueberry Pancakes

By Kelly Corbet

Getting to the Perfect, Fluffy, Healthy Gluten-Free Pancake was Not Easy. But Here It Is! (And It’s Full of Antioxidants Too.)

Active Work Time: 5 minutes
Servings: 4 hearty servings
No: dairy, gluten, nuts, soy
• 1 ¼ cups chestnut flour
• 2 cups blueberry juice (plus more later, as desired)
• ½ cup buckwheat flour
• 2 eggs, slightly beaten
• 1 ½ tsp. baking powder
• ¼ cup ghee or butter, melted
• ½ tsp. guar gum
• 1–2 cups blueberries, fresh or frozen
• pinch of sea salt

Optional
• hempseed
• agave nectar or substitutes
• more fruit

How to Make It
1. Preheat your cast iron skillet on a medium-heat stove. Dab some coconut oil or ghee on it, to make it really non-stick.
2. Mix the 5 dry ingredients together in a bowl, with a whisk.
3. Add the juice and eggs, and stir. Now add the melted ghee or butter, and stir a little more.
4. Pour or spoon the batter onto a skillet, and when you see bubbles forming, flip and cook a little longer.
5. When the pancakes are done, add hempseed, agave nectar and a little more fruit for a delicious breakfast!

Helping Hands
I let the kids pour in the juice, initially, and along the way. They can

Continued on next page

The mechanism by which adaptogenic herbs achieve their stress protection activity has been well researched around the world. Adaptogens act by restoring hypothalamic and peripheral receptor sensitivity to the effects of cortisol and other adrenal hormones.

Siberian ginseng stimulates the adrenal gland. Sarsaparilla (Smilax officinalis) contains precursors to progesterone and testosterone. Rhodiola can help improve erectile dysfunction and premature ejaculation in men. Rhodiola activates fat breakdown and mobilizes fats from adipose tissue.

Rose hips and hawthorne berries contain high levels of vitamin C and bioflavonoids. The adrenal gland is one of the highest utilizers of vitamin C in the body.

Adaptogens allow the body to respond to stress with lower amounts of cortisol than may otherwise be needed. Adaptogens help the adrenals recover more quickly.

Steps to Take for a Normal Balanced Cortisol Rhythm
1. Go to bed by 10 p.m.
2. Eat breakfast by 7 a.m.
3. Eat low glycemic index meals every five hours while awake.
4. If you eat gluten grains, use sprouted whole grains.
5. Avoid sugar and excess starch.
6. Maintain erect posture and avoid prolonged periods of sitting or flexion posture such as fetal position during the night.
7. Control pain.
8. Manage emotional stress. Following the first seven guidelines allows us to respond with more stamina and less stress to the challenges of daily life.
9. Confer with a health practitioner familiar with hormone function and therapies that help correct cortisol rhythm.
10. Meditate daily. Know that each of us prays without ceasing. Discover anew that every thought and every word is a prayer. Keep in touch with the True Source of health and healing.

Conclusion
Establishing and maintaining a normal circadian rhythm of cortisol is a worthwhile health priority.

Normal cortisol rhythms go a long way toward tipping the balance away from chronic infections, cancer, fatigue, and obesity. They will even help with easy bruising and stretch marks. Quite importantly, achieving a normal cortisol rhythm may change dragging out of bed in the morning to bouncing out of bed.

A relentlessly positive attitude will do more for your health than any fretting and fuming—even about diet. Smiles to you! △

Pauline Harding, M.D., has degrees in physics (Creighton University, 1972) and medicine (Creighton Medical School, 1976) and is a native of Omaha, Nebraska, where her

“Today I went for a walk and was in awe at the range of blues in the sky as the swirls of clouds crossed above me, the shapes of the trees and the distinct leaves. The sounds of the wind blowing in different directions amid other natural and man-made noises made me feel so alive.”

rural background did much to shape her fascination with, and concern for, nature and our natural resources. She has been in private practice in DuPage County, Illinois, since 1979 where she has served as a family practitioner and as an emergency room and occupational health physician. She has been an instructor in the Department of Family Practice at Rush Medical College in Chicago and a lecturer at the University of Illinois at Chicago College of Medicine. She is devoted to the use of advanced biomedical technology and natural healing techniques to obtain responses in neuromuscular, hormonal and immunologic conditions that do not respond to traditional therapy, and she now resides in Warrenville, Illinois, with her husband, David, a Fermi National Accelerator Laboratory physicist who makes antimatter. Interested readers may contact her at her office at 630-701-1050 or e-mail her for further information at info@ptfm.org.


BOOKS OF INTEREST ON RELATED TOPICS


also sprinkle on the hemp seed and fruit.

NOTES

• The guar gum gives these pancakes the perfect amount of “body.” Xanthan gum is really too heavy for these delicate treats!
• There are lots of antioxidants in these pancakes: the blueberries offer anthocyanidins, and buckwheat flour provides selenium.

This is a Smart Foods Healthy Kids recipe. More healthy, kid-friendly ideas at www.smartfoodshealthykids.com.

Gluten-Free Blueberry Pancakes

Continued from previous page

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Riding into Who and What We Really Are

The Power of the Horse/Human Connection

By Patricia Broersma

For the past 80 years in the U.S., people with a wide variety of disabilities have explored new horizons from the back of a horse. People in wheelchairs have learned to walk because the complex motion of their horses stimulated their nerves and muscles in the same complex rhythmic pattern of walking. Children not speaking by the age of four or five have experienced from that same motion the needed neurological integration for their first spoken sentences. Individuals with autism have connected with a horse as a first step for more connection with others in their environment. This is the world of therapeutic riding, and miracle stories abound in the barns and riding arenas of programs all across the world.

In the past ten years, a new aspect of this work with horses has emerged. Psychotherapists and educators have discovered the unparalleled benefits that horses bring to the hearts and minds of people seeking to live their lives out of a deeper aspect of themselves. A psychotherapist working with adolescents who have committed homicide utilizes work with horses for their remarkable skill in mirroring the teens’ behavior for therapeutic interventions. A consultant in leadership development often takes corporate teams to a nearby horse facility to help them develop teamwork and leadership skills. Therapeutic riding instructors who previously had focused on their students’ physical issues are now addressing emotional and spiritual issues as well.

In all of these instances, people are coming to honor the sentient nature of the special horses who work in these settings as skillful and important members of the professional team. Instead of a tool utilized by the instructor, therapist or consultant, horses are increasingly emerging as beings who contribute significant insights for healing interactions. This talent stems from their birthright of exquisite sensitivity to very subtle energy in their environment, which is necessary for their survival as prey animals. Horses are experts, for instance, at detecting when a person is distracted by something that has preceded their arrival at the barn, often when the person is not even consciously aware of their state of dissonance. Or they pick up and respond to hidden feelings like fear or anger that are typically not acknowledged in most social situations.

When people engage in partnership with a horse, with the intention of exploring these subtle talents, they have the opportunity to develop new aspects of themselves.
They can develop a broader palette of communication skills and learn new approaches to utilizing power for collaborative, more effective outcomes.

These benefits of the horse-human connection are not limited to people with disabilities or mental illnesses. They address some of the problematic conditions of modern life that we all confront. Often in today’s world that emphasizes competition, action and outcome, people become disconnected from who and what they really are. They may experience, for example, a sense of self-betrayal by an affluent American lifestyle. They leave their homes early to return late after a long daily commute, their communities resembling ghost towns during the day. These men and women lock themselves into jobs that pay their ever-escalating expenses but ignore the niggling desire to engage in the deeper journey that calls them to live a deeper story.

Instead, the women develop breast cancer and take antidepressants, depending on their psychiatrists for emotional stability, while the men develop prostate cancer and suffer strokes. Yet, affluence continues to have a hold on their imaginations, fed by the media’s encouragement of the acquisitive lifestyle. Stepping into any other lifestyle feels like failure by the standards of our culture. People feel caught between the promise of happiness in buying more and the fear of failure, a place where a sense of desperation quietly tightens its firm grip on their health and their lives. They know that something is wrong, but they do not know what to do about it. The story out of which they live their lives has become outmoded. Knowing that they were called to some adventure long ago and lost their way, they are stuck in the cultural trance of our times, living a story where they set forth with high intentions for life, only to find that the way has been lost.

People in these kinds of situations increasingly are finding their way to horses and discovering that they can reclaim their larger story through a potent connection to their own creative sources. Whether it is through the local riding stable, a friend’s pasture, or volunteer work at a therapeutic riding program, they find a profoundly restorative aspect of their lives emerging. These people are not interested in entering the world of horse show competition. Rather, they are seeking a new perspective on their lives that can return them to places of deep sourcing within, where they can recognize the larger story of their lives begging to be lived.

Partly because horses are associated in our imaginations with heroic tales, Horses are increasingly emerging as beings who contribute significant insights for healing interactions. This talent stems from their birthright of exquisite sensitivity to very subtle energy in their environment.

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**Equine Program Helps Troubled Youth**

A recent article (Associated Press, November 25, 2007, Article #10871), explores another way that horses, among other animals, can be therapeutic for people. A non-profit Louisville, Kentucky, home for neglected and abused youths has a new equine program that uses horses as the backdrop for developing life skills.

Youths who take part in the program join a team that works with a seven-horse Boys’ Haven stable at Churchill Downs’ Trackside Training Center. Administrators have found that those who can take care of a horse and perform all the work related to that can take care of other things in life, such as marriage and raising children.

The equine program provides this therapy and job training for 10 young adults at a time. The program has an annual budget of $200,000, which is used for purchase of a couple of horses, care and feeding of the horses at the stable and staff salaries. Participants learn how to wash feed tubs and water buckets, muck out stalls, safely walk horses around the shedrow, bathe horses and put protective bandages on their legs. They also learn how to time training sessions, saddle a horse and give the exercise rider help up. All of the participants are at least 18 years old and are licensed by the Kentucky Horse Racing Authority.


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To find the universal elements enough; to find the air and the water exhilarating; to be refreshed by a morning walk or an evening saunter; … to be thrilled by the stars at night; to be elated over a bird’s nest, or over a wild flower in spring—these are some of the rewards of the simple life.

just by being in their presence we step into our own larger, mythic lives however briefly. When we pay attention to the innate wonder and excitement that we experience with a horse and allow those seeds to grow in our imaginations, the daily struggles of our day-to-day life become part of the grand drama of our deeper story, our own heroic journey, so to speak, where we have the leading role. Horses become important partners and companions on the journey, keeping us in touch with our mythic selves.

They do this through their particular talents in sensitive, subtle interaction, offering us a more intimate connection with the deeper story of our mythic lives. We can learn skills of compassionate, sensitive communication and other intuitive skills by developing the same attunement to subtle energies that horses demonstrate so well. When we take on the challenges of working in partnership with another species like a horse, we can learn new skills for working in other challenging partnerships and in situations of power. We find that horses evoke our own lives writ large, connected to generative sources of creativity within.

From that place we have the tools to address not only the problems of our own lives but also the core issues that surround global problems, such as fear. From our deeper story we can more effectively develop action addressing world problems like global warming and HIV/AIDS. Many of those engaged in leadership development on a global scale, like Jean Houston in her social artistry work and Monica Sharma of the United Nations, advocate the necessity of enabling people to connect to their creative, generative core selves when working cooperatively in their countries to solve complex, global problems. Programs and initiatives that are based on anything else have consistently failed. Leading people to their commonality that goes beyond religious, cultural, and political differences allows them to create programs of much greater success.

Horses have consented to partner with humans for millennia—for work, competition, and sport. Today, they are taking on a new evolutionary role with mankind, as a new global consciousness emerges that requires us to respond to unprecedented challenges. They take us back to who and what we really are—and to a place where we can source the creativity we need for building a new future. ∆

Patricia Broersma is president-elect of the Equine Facilitated Mental Health Association, a section of the North American Riding for the Handicapped Association, and a registered therapeutic riding instructor.

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Colds and Flu

Arming Yourself with a Holistic Approach

By Eva Urbaniak, N.D.

It is “that” time of year again, and you might be wondering if you will fall victim to that “nasty bug” that always seems to be going around. Colds and flu are both caused by viruses, and they are both spread in a similar fashion, by contact with secretions of the nose and mouth of an infected person. Infection may occur through a handshake with a person who has just sneezed, or by being in the “line of fire” of a sneeze. Sources of viral particles are as numerous as the viruses themselves; there are over one hundred known rhinovirus strains, causing forty percent of all colds. In the workplace, a computer keyboard or telephone can be a source, posing a strong case for frequent hand washing and disinfection of items that come in contact with hands and mouths. Colds usually manifest with a sore and scratchy throat, nasal congestion, and general malaise, which usually subsides in a few days. In contrast, influenza, or the flu, usually begins with a fever and malaise, and can develop into a more serious disease like pneumonia. Exposure to cold and damp conditions doesn’t, in fact, cause colds and flu, but can contribute to a weakened physical condition, which makes one more susceptible to viral or bacterial attack. Stress in any form can also weaken the defenses.

To understand what happens in illness is to explore the phenomenal innate intelligence of the human body system. First of all, symptoms are the body’s way of calling our attention to something and putting us on “alert,” Mucus in the nose is the body’s way of trying to expel the invading organism and protect the membranes from further attack. There are numerous over-the-counter drugs, specifically designed to dry up that mucus, which may temporarily relieve the symptom, but prolong the illness. Fever is also a way that the body attempts to kill a virus. But in order for a fever to do its work, the body must be given rest, fluids, and proper medicine.

The “proper medicine” should address the symptoms but also aid and strengthen the system. In the case of colds and flu, the appropriate remedies are antihistamines (catarrh is the inflammation that usually accompanies mucus production in infectious processes), antimicrobials (which help the body in resisting and/or destroying pathogenic microorganisms), diaphoretics (which promote sweating, helping the skin eliminate waste from the body), and hydrotherapy and aromatherapy in the form of inhalation and bathing. Demulcents (which soothe and protect inflamed tissues) are also very beneficial in helping soften mucus, and expectorants help the body rid itself of excess mucus.

The plant kingdom offers natural answers to many of man’s ills. Herbs can be eaten or used in teas, tinctures, extracts of varying potencies, capsules, and tablets, and in homeopathic form. One of the more beautiful aspects of herbal medicine is that usually if
Inhalation therapy, breathing steam from a pot with eucalyptus oil, can be very helpful in relieving congestion. Hot sea salt baths with lavender oil or oil of bergamot can be very relaxing and soothing.

A diet that is non-mucus-producing is strongly recommended, which means avoiding dairy products, meat, flour products, and sugar in all its forms. One should eat whole grains and cereals, seeds, fresh vegetables and fruits, and a lot of raw garlic. Vitamin supplementation, especially with vitamin C, helps ensure a speedy recovery. Sunlight and fresh air are also important components of healthy living. If after trying any of the above-mentioned remedies, symptoms have not subsided, please visit your naturopathic physician or health care professional.

Green Tea May Reduce Risk of Certain Cancers

Three new studies show that green tea can reduce the risk of oral cancer in women and inhibit the initial stages of intestinal cancer. In the first study, researchers analyzed green tea consumption among 20,550 men and 29,671 women in Japan. The researchers reported that women who consumed five or more cups of green tea per day had a risk reduction of 70 percent for oral cancer, compared to women who consumed between one and two cups per day. No such trend was observed in men.

In another study, researchers administered a green tea polyphenol preparation containing a standardized dosage of epigallocatechin gallate (EGCG), the green tea component thought to be responsible for the beverage’s health effects, to 42 healthy subjects who abstained from consuming tea or tea-related products in the four weeks prior to the study. The findings indicate that EGCG from green tea could help vulnerable individuals strengthen their metabolic defense against carcinogens.

In the third study, researchers found that green tea was ineffective against larger, already formed tumors in mice, but significantly inhibited new tumor formation.

REFERENCES


Issa AY et al., “Green tea selectively targets initial stages of intestinal carcinogenesis in the AOM-ApcMin mouse model.” *Carcinogenesis* 2007 Sep;28(9):1978-84.
Three Nutritional Energy Building Ingredients for Busy Adults

By Shane Ellison, M.Sc.

Millions of Americans suffer from fatigue. When their energy levels are low many take coffee or other stimulants to wake up. Often by afternoon they look for caffeine-rich drinks in order to keep up at work. By evening, exhaustion sets in, and it’s straight to bed—and then most of them repeat the same process the next day. This isn’t how the body was meant to operate.

Massive amounts of energy can be had without the above “fatigue-masking” substances. Once sufficient levels are achieved, your energy will be the fuel behind your life’s most important projects, thoughts, creativity and relationships. This is how the best athletes and entrepreneurs in the world function, but to achieve it, there are three primary energy-building requirements.

First, replace carbohydrate consumption with healthy fats three times per day. I’m not talking about heart-disease-causing trans fats and polyunsaturated vegetable oils. I’m talking about Mother Nature’s energy-boosting fats, found in whole eggs, grass-fed beef, coconut oil, olive oil, avocados, and fresh, raw (and soaked) seeds and nuts, just to name a few. Unlike carbohydrates, healthy fat does not cause a spike in insulin levels, which can cause fatigue and lead to excess fat storage. But even better, it exponentially increases the production of a molecule known as adenosine triphosphate (ATP). ATP is the master energy- and strength-producing molecule within the body. The more you have, the better you perform.

A single fat molecule can produce 129 molecules of ATP. In contrast, if you are not consuming enough healthy fat, the body is forced to utilize an inferior source of ATP production—carbohydrates. A single carbohydrate molecule produces a paltry 38 molecules of ATP! The math proves that fat yields more than three times the energy that carbohydrate does.

Second, begin supplementing with 0.5 to 3.0 grams of acetyl-L-carnitine (ALCAR) daily. This essential molecule acts as a chaperone to fat. It works by carrying it to our energy furnace—the mitochondria. Without ALCAR, fat remains stored—usually in the belly—and you grow tired.

The Archives of Gerontology and Geriatrics recently highlighted the effectiveness of ALCAR supplementation among the elderly. Researchers showed that ALCAR was successful at boosting both mental and physical energy. About 100 participants over the age of 70 showed drastic increases in mental capacity and exercise duration as a result of ALCAR.

Finally, replace sugary drinks with water, or green tea or yerba mate. These health drinks mobilize fat into the bloodstream to ensure energy production. Green tea and yerba mate can also boost mood and serve as great pre- and post-exercise drinks.

As these behaviors become habits, expect a life filled with sustained energy. Say good-bye to the highs and lows associated with the use of fatigue-masking substances like caffeine; say good-bye to energy sources that ultimately fuel mediocrity. And regardless of your age, say hello to a newfound energy that will fuel success in all areas of your life. ∆

Shane Ellison holds a master’s degree in organic chemistry and has firsthand experience in drug design. After abandoning his career as a medical chemist, he dedicated himself to exposing prescription-drug hype. He is an internationally recognized authority on therapeutic nutrition and author of Health Myths Exposed, The Hidden Truth about Cholesterol-Lowering Drugs and The AM-PM Fat Loss Discovery. Complimentary Secret Cures newsletter and controversial Stinky Sulfur Awards at www.thepeopleschemist.com.

REFERENCES
A generation ago a meal of fast food and soft drinks was a sometime thing, but today, despite the media coverage of the junk foods given to children and their relationship to obesity and diabetes, it is the daily fare for a continually growing number of children.

OBESITY AND OTHER HEALTH RISKS
The connection between what a child eats in the school’s cafeteria and his or her subsequent behavior and performance in class is perhaps not something many parents and educators understand, but the link between school-sanctioned, government-supported junk food and today’s super-sized children is hard to miss.

Parents, teachers, legislators and concerned citizens in every state in the U.S. are looking for ways to help stem the epidemic of obesity, diabetes and heart disease that they are linking to the foods provided by U.S. public schools. There is also growing interest in other countries. Many headmasters and teachers in British schools have seen how children calm down when junk food is eliminated. Educators in Ontario and British Columbia are calling for the removal of soft drinks and junk food, and the Education Ministry in Thailand has taken action to ban MSG and other synthetic additives believed to pose a health risk for students.

The World Health Organization blames abuse of soft drinks for the worldwide increase in childhood obesity and calls for the removal of vending machines in schools.

THE ORIGINS OF THE PROBLEM
How has fatty, sugary food come to dominate the American marketplace? Susan Linn of Harvard Medical School says, “Essentially kids are inundated with marketing from the moment they get up in the morning to when they go to bed at night, and the two primary products are food and toys, which are often linked.”

(McDonald’s is one of the world’s largest toy distributors, and even Barbie has a fast food line.) Many parents allow children to play a big part in determining which products will sell, and every company hopes to establish brand loyalty at as early an age as possible. Insiders discuss strategies to teach aggressive marketers “how to own kids.”

Even if a child escapes junk food ads on his home TV he must still withstand the school-sponsored advertising, such as Channel One ads for junk foods, and the brand names found on promotional materials including scoreboards, book covers, lesson plans, and even text books. Some parents are beginning to support one another’s attempts to keep refined foods and sugars from their children’s lunches at school. It can be difficult for an
individual family when the child at school sees all of his or her peers consuming refined foods and sugary drinks, but when all the parents agree, there is the power to change to better nutrition.

$50 BILLION A YEAR

The huge profit margin on soft drinks make them a $50-billion-a-year business, and this leaves the industry giants a lot of money with which to buy exclusive “pouring rights”—contracts to have only their product sold at schools, sometimes for as long as 10 years. Even though many schools require competitive bidding for any expenditure, these rules are often ignored.¹

FIERCE RESISTANCE

A consortium of special interests, along with the best PR that money can buy, is hard at work trying to delay positive reforms, in an effort to emulate the years of success the tobacco industry enjoyed. The recently-formed “American Council on Fitness and Nutrition” is leading the charge against school food reform. It is composed primarily of industry trade groups, including the National Soft Drink Association, Sugar Association, Chocolate Manufacturers Association, Snack Food Association and National Automatic Merchandising Association.

The focus of the junk food industry is to claim:

• Children really don’t eat much junk food.
• Their products are an acceptable part of a good diet.
• Children are obese because they don’t get enough exercise.
• Schools should teach nutrition education.
• Removing junk food from school won’t make any difference.
• Obesity is the fault of the parents.
• Beverages are good for you.
• Having junk foods available helps youngsters make choices.
• If schools don’t provide these items, students will leave the school grounds to buy them, and that would be disruptive and/or dangerous.

“Soft drinks are a complement to many types of foods that together form a balanced diet.” —National Soft Drink Association

SOLUTIONS?

While there is a general consensus that a “healthy diet” includes fresh fruits and vegetables, whole grains, less sugar and refined flours, and the removal of many synthetic additives, there are still conflicting opinions, and the answers can seem overly complex. However, parents would do well not to rule out educating their children themselves, training them to read labels and to understand

“OFTEN PEOPLE ATTEMPT TO LIVE THEIR LIVES BACKWARDS: they try to have more things, or more money, in order to do more of what they really want so that they will be happier. The way it actually works is the reverse. You must first be who you really are, then do what you need to do, in order to have what you want.”

the outcome of eating “foods” high in sugar and refined carbohydrates.

Many schools are addressing the issue by removing vending machines. But the machines in and of themselves are not the problem; it’s what is in them that is the problem. Increasing numbers of schools are removing sugar-filled carbonated drinks.

Schools offer milk and flavored milk (the latter containing additives and loads of sugar), but pasteurized milk is nutrient dead and homogenized milk has been shown to be cardiotoxic. (See articles about milk at http://www.wellbeingjournal.com). Many children have dairy allergies, a rise that may be directly correspondent to the era of pasteurization and homogenization.

There is no agreement about what constitutes a healthy diet. Some say foods designed for children should be low in fat, but what kind of fat? Most Americans are getting too few of the important essential fatty acids found in the foods our grandparents ate. America, the land of the low-fat diet, is the land of obesity. Research points to sugar and refined carbohydrates as the fat-producing ingredients, rather than healthy fats.

Should children be given more soy-based foods and less animal foods? Soy is an allergen for many people, and is especially problematic if it is consumed in excess. It is not the ideal food that the soy industry has claimed, and is lacking in important nutrients. Also it is extremely high in manganese and contains estrogen-type chemicals.³

A first step to a solution is offered by the Feingold Association. This simple first step is to remove several of the most troublesome additives:

- Synthetic (petroleum-based) food dyes
- Artificial flavorings, including aspartame
- Synthetic preservatives: BHA, BHT, TBHQ (petroleum-based)

The benefit of taking this approach is that the food can look and taste very much like the foods children are accustomed to eating. There are many snack foods and soft drinks that are free of the above additives. Those additives are not only a poor choice from a nutritional perspective, they have been found to trigger many behavior, learning and health problems. (See www.school-lunch.org and www.feingold.org for documentation.)

Fewer behavior and learning problems will translate to huge cost savings for school systems. But there are also other ways schools can make money. Vending machines can work for schools, not against them. Schools that purchase and stock their own machines can offer only those foods they select, and retain all of the income from the machines; and other food related programs such as special sales and fund-raisers can offer healthier products.

Potato chips, pretzels, popcorn, candy, fruit bars, soft
drinks and chocolate treats are among the items that are available in natural forms. Many of these are made by major food manufacturers. For example, Frito-Lay has natural, even organic, snack food, as well as its old products with synthetic additives.

**CAFETERIA FOOD CAN BE DELICIOUS AND AFFORDABLE!**

The Appleton, Wisconsin, Alternative High School serves fresh, homemade foods that the students and faculty enjoy. The full cost for this transformation was only $20,000 per year—a fraction of what schools now spend to address the learning and behavior problems that are being caused, in part, by junk foods. Programs in two New York schools are getting high marks for fresh, tasty and nourishing foods. The food served in the Ross School and the nearby Bridgehampton Public School are under the direction of a chef who has prepared food for fine restaurants. Children arrive early to enjoy the freshly baked muffins and scones.

Teachers and students eat together in an attractive dining room, and have access to nourishing snacks and beverages throughout the day. The entire cost per student for breakfast, lunch, snacks and beverages is just $3.84.

Another chef is heading up the foods served in Sacramento schools. The 7000 students enjoy natural versions of their favorite foods, including pizza, taco salads and freshly baked calzones. Lunch costs only $2.50, and the food program has gone from losing about $200,000 each year to generating a yearly profit of $300,000. There is plenty of evidence that children will eat good food if it is available, and they will feel better about everything, including learning.

Even more modest changes than those above have shown that children like food that is both healthy and good tasting.

In Muscatine, Iowa, children enjoy free fruit and vegetable snacks throughout the school day, thanks to a federal grant. The principal of the Muscatine High School reported that after the program began, the candy vending machine was removed because there was a 48% drop in sales of candy.

Public schools first began providing food to students to improve the health of children, particularly those whose families were too poor to feed them adequately. Today, this laudable effort has been so drastically altered that it is now the foods in our schools that are creating health problems for children. Δ

For more information about successful nutritional programs and foods without synthetic additives contact the Feingold Association of the United States at 800-321-3287 or www.feingold.org.

**NOTES**

1. Information on how to reverse soft drink monopolies in schools is available at: http://www.californiaprojectlean.org and http://epsl.asu.edu/cemu/
2. Soft drink companies are offering flavored milks. Coke has Swerve; Dr. Pepper has Raging Cow; Pepsi has Love Bus Brew.
4. Additional information is available from the school’s dean, Greg Brethauer: brethauergreg@aasd.k12.wi.us
5. Ann Cooper, Chef, The Ross School, 18 Goodfriend Dr., East Hampton, NY 11937
6. Al Schieder, Folsom Cordova Unified School District, 916-355-1100
7. Dennis Heiman, Muscatine High School, 2705 Cedar St., Muscatine, IA 52761
Profits, Not Science, Motivate Vaccine Mandates

By Kristine M. Severyn, Ph.D.

The Advisory Committee on Immunization Practices (ACIP), a group of individuals hand picked by members of the Centers for Disease Control and Prevention (CDC), recommends which vaccines are administered to American children. Working mainly in secret, ACIP members frequently have financial links to vaccine manufacturers. Dependent on federal CDC funding, administrators of state vaccination programs follow CDC directives by influencing state legislators to mandate new vaccines.

At CDC national immunization conferences, Merck and other vaccine manufacturers wine and dine thousands of attendees who make their living promoting and administering vaccines.

ARE PHYSICIANS BEHOLDEN?
The American Academy of Pediatrics (AAP), a major supporter of mandatory chicken pox and other vaccine mandates across the country, has incestuous financial ties with Merck. When constructing its new headquarters in suburban Chicago, the AAP solicited funds from Merck, and received $100,000 for its building campaign.

Vaccines represent an economic boon for pediatricians. Profitable well-baby visits are timed to coincide with vaccination schedules established by the AAP and the CDC.

TRAVELING CIRCUS?
As a front for Merck’s 1999-2000 campaign to enact a chicken pox vaccine mandate, the company established and bankrolled the Illinois Children’s Health
Coalition. Upon investigation, this group was found to be no more than a public relations gimmick. Merck used a similar campaign in Ohio for the introduction of a senate bill (SB 254). The senator (Grace Drake, R-Solon) who chaired the committee (Health and Human Services) hearings for SB 254 accepted significant campaign contributions from Merck. (Sen. Drake, at the request of a Merck lobbyist, had sponsored a bill in the previous year to mandate hepatitis B vaccine for Ohio kindergartners. To hide the legislation from the public, the mandate language was buried in a hazardous waste bill. The other hepatitis B vaccine manufacturer, Smith-Kline Beecham, lobbied the House Health Committee. In previous years, Sen. Drake had opposed legislation to restore vaccine informed consent to Ohio parents. Despite a 94-3 vote in the Ohio House favoring informed consent, Sen. Drake refused to hold hearings on the bill [effectively killing the bill] after its assignment to her committee).

Further, Merck consultant, vaccine patent holder and ACIP member Paul Offit, M.D., of Philadelphia spoke at an American Legislative Exchange Council meeting in Nashville. State lawmakers from around the country were treated to a well-rehearsed performance extolling the virtues of mandatory vaccination. Similar productions were staged during 1999 hepatitis B vaccine hearings in Ohio and Washington, D.C.

Who should make vaccine decisions for children: parents, doctors, legislators or vaccine manufacturers?

Who should make vaccine decisions for children: parents, doctors, legislators or vaccine manufacturers?

That is the issue. Special interests continue to push for mandatory vaccines for schoolchildren. In Ohio in 2000 and 2004, it was the chicken pox vaccine (varicella). Chicken pox vaccine, manufactured in human fetal tissue, would have been added to the cocktail mix of vaccines required for school attendance.

At the urging of vaccine manufacturer Merck, Sen. Bruce Johnson introduced Ohio SB 254, which would have mandated chickenpox vaccine for schoolchildren in grades K-12. Ohio was only one of Merck’s legislative targets to require chicken pox vaccine in every state—a plan that would guarantee Merck annual sales of nearly $7 million for kindergartners in Ohio alone.

THE FINE PRINT AND INFORMED CONSENT

Chicken pox vaccine is produced in lung tissue obtained from two surgically aborted human fetuses (Exp. Cell Res. 37:614-636, 1965; Nature 227:168-170, 1970). Merck’s own literature states the vaccine contains “residual components” of fetal lung cells. Informed consent, a basic tenet of ethical medical practice, dictates that citizens should have a choice whether or not they are injected with another person’s body cells. [Or anything else.]

BENEFIT LACKING

From the medical and health-care cost perspectives, chicken pox vaccine is a loser. Two studies, one funded by Merck, found that only if lost wages are considered for a parent to stay home with a sick child is there cost advantage to using chicken pox vaccine (JAMA 271:375-381, 1994; J. Ped. 124(6): 869-874, 1994).

While providing lifelong immunity, chicken pox disease [not vaccine] carries a very low risk of complications and death. Writing in the British medical journal the Lancet (343: 1363, 1994), a voice of reason, Arthur Lavin, M.D., Department of Pediatrics, St. Luke’s Medical Center in Cleveland, Ohio, presented concerns that “argue strongly against the licensure of varicella vaccine for healthy children.” Lavin asserted: “[Chicken pox] is not major in the sense of disease mortality or morbidity. Therefore, if healthy children were fully vaccinated it is unclear in what significant way the health of the children or the economic health of their families would be improved.”

The vaccine industry has corrupted government policy. It’s about time lawmakers say “no” to drug company lobbyists and “yes” to informed consent. ∆

KRISTINE M. SEVERYN, Ph.D., is the former director of the Vaccine Policy Institute.

This article is an updated version of the same originally printed in Well Being Journal, Vol. 10, No. 2 and is now printed online at http://www. wellbeingjournal.com under “Things that Make You Go Hmm.” This section also has other informative articles on vaccines.
Just How Necessary Are Most Vaccines Anyway?

In his book *Searching for Safety*, Aaron Wildavsky (pages 67-68) quotes the respected physician and researcher Lewis Thomas, M.D., for substantiation of the view that health and longevity for humans improved, not because of medical interventions, such as vaccines, but because of better sanitation and living conditions:

“There is no question that our collective health has improved spectacularly in the past century, but there is a running argument over how this came to be. One thing seems certain: it did not happen because of medicine, or medical science, or even the presence of doctors…. Medical care itself—the visits by doctors in the homes of the sick and the transport of patients to hospitals—could have had no more than marginal effects on either the prevention or reversal of disease during all the nineteenth century and the first third of the twentieth. Indeed, during most of the centuries before this one [the twentieth], doctors often made things worse whenever they did anything to treat disease.

“It was not until the early twentieth century that anything approaching rational therapy emerged for human disase, and it was not until the middle of the century that we came into possession of rational and powerful technologies for the treatment and prevention of infection on a large scale.”

Thomas then surmises that if the credit should not go to medical practices, it needs to go to another source. “Much of the credit should go to the plumbers and engineers of the western world. The contamination of drinking water by human feces was at one time the single greatest cause of human disease and death for us; it remains so, along with starvation and malaria, for the Third World.” Thomas also credits “improvement in agriculture and then in human nutrition, especially in the quantity and quality of food available to young children. As our standard of living improved, we built better shelters, with less crowding and more protection from the cold.”

Greg Beattle substantiates Thomas’s view, in *Vaccination, A Parent’s Dilemma* (Oracle Press, Queensland, Australia, pp. 36-57). He writes that the major diseases on the planet declined significantly from the time the link between sanitation and disease was discovered in the mid-1800s. At the time these diseases were almost non-existent, in the mid-1900s, vaccines for them were introduced. Many vaccine advocates thereafter claimed that credit for the decline should be given to vaccines.

It is striking when viewing the charts in Beattle’s book to see the decline in mortality rates for diseases since the mid-1800s, when sanitation and nutrition measures were introduced in Europe, Australia and North America. Generally speaking, by the 1960s, mortality rates had reached very low points. One can see in each mortality graph, such as for measles, that there are no significant changes in the decline rate after vaccinations were introduced in the late 50s and early 60s compared to before.

Measles vaccine was introduced in 1963 in the United States. Prior to 1963, according to the Centers for Disease Control’s own records, deaths per year from measles, which had reached a high of over 10,000 in the early 1920s, had already declined to almost none. Neil Miller writes, in *Vaccines: Are They Really Safe And Effective?* 2nd ed. (p. 27), “In 1957 the number of children who died with measles was about 93 or 94. Children may die ‘with

Vaccines and an Altered Life

*A STOLEN LIFE*, by Marge Grant, reveals how she and her husband, Jim, as conscientious and loving parents, took their healthy infant son, Scott, to their pediatrician for a well baby check up. They describe how they saw him literally wilt before their eyes upon receiving a series of DPT shots, given to immunize against the diseases diphtheria, pertussis (known as whooping cough) and tetanus.

This book is a culmination of many years of folks questioning the reason for Scott’s profound disabilities while looking for accurate and credible answers. The story illustrates a cozy relationship between the pharmaceutical companies that make vaccines, and the government vaccine regulatory agency within the federal Food and Drug Administration (FDA). The book sends a powerful message that children are being forced to take vaccines that are not as safe and effective as many in our government agencies and medical establishment would have us believe.

As the renowned Robert Mendelsohn, M.D., so aptly said of such vaccines: “If this is preventive medicine, I’ll take my chances with disease.” Every parent and grandparent will be interested to read this thought-provoking story, since the same vaccines that altered Scott’s life in 1961, as well as many more, are currently still prerequisites for children to attend school.

Marge Grant is co-founder of Wisconsin Citizens for Free Choice in Immunization, an organization of committed parents who successfully petitioned their state legislators in 1979 and 1980 to make a law that would allow parents the “freedom to choose” whether or not to have their children vaccinated before entering school. She and her husband, Jim, also founded the Wisconsin parent organization, DPT-SHOT, the acronym for “Determined Parents To Stop Hurting Our Tots.” More at www.dptshot.com.
measles’ but not ‘from measles.’ The use of fever suppressing compounds, such as aspirin, raised the death rate ‘with measles.’” Miller states that the proximate cause of measles deaths was really from one or more of the following—unsanitary conditions, improper nutrition, or malnutrition and mistreatment. He also notes that if those patients who died with measles had been given better hygiene, proper nutrition, including vitamin A, and normal parental care, their “complication rates and chances of death” would have been significantly reduced.

Scarlet fever may show the best evidence of being contained because of better sanitation, nutrition and living conditions, rather than a vaccine, as deaths from scarlet fever in 1900 were over 180, whereas since 1950 there have been fewer than ten per year. No vaccine has ever been developed for scarlet fever.

Deaths from typhoid fever are also virtually non-existent today, although in 1910 there were over 500 in the U.S. No widespread vaccination program has ever been in place for typhoid fever.

Beattle’s charts show that there were over 1500 deaths from diphtheria in 1880; by 1920 there were close to 600 deaths, and by 1935 deaths had declined to 400, and this decline continued until the first vaccine was introduced in the late 30s. By the time the second diphtheria vaccine was introduced about 1950, the death rate was fewer than 100.

There were close to 1000 deaths from whooping cough in 1880; by 1920 the rate had declined to fewer than 400, and the rate continued to decline through 1940 (to fewer than 200), when the first vaccine was introduced. By the time the second vaccine was introduced in the late 50s, the death rate was already less than 50.

Polio vaccines were introduced in 1957. By then deaths from polio had declined to almost none (from over 40 in 1951). Death rates actually climbed (in the early 1960s) after the first polio vaccine was introduced. ∆ —S.M.

Get Kids Vaccinated or Go to Jail?

“Hands Off Our Kids” and the AAPS

FOX NEWS, USA Today, and a number of other major media outlets reported news from Maryland in early November 2007 about dozens of parents who were notified by a district court that they had to either vaccinate their children or go to jail (the number eventually increased to 1600 families). The media reports caused confusion among parents who have chosen not to vaccinate their children for certain illnesses based on concerns about possible negative impacts from the vaccines themselves. While the mainstream medical community claims vaccines are safe and effective, some people blame immunizations for a rise in autism and other medical problems. In actuality, there are no federal laws requiring vaccinations. Providing schools with vaccine exemption forms for your child is all that is required by federal law. If you have thoroughly researched the vaccine issue and have decided one or more vaccines may not be right for your children, see this website where you can download exemption forms for your state or county: http://www.vaclib.org/exemption.htm.

“Hands Off Our Kids” is a non-partisan coalition of advocacy groups that joined together to overturn the HPV vaccine mandate in Texas in 2007. This ad hoc coalition includes medical, taxpayer, privacy, civil liberties and health freedom groups. The Association of American Physicians and Surgeons (AAPS) and other members of the “Hands Off Our Kids Coalition” are not anti-vaccine. They do state, however, that vaccines are a personal medical decision—a decision that should be made by parents with the consultation of their physician. The AAPS stated in a November newsletter (www.aapsonline.org) that “a state- or school-mandated vaccine amounts to coerced medical treatment without consent.”

The AAPS, in a statement issued on
November 16, 2007, called for immediate action from its physician members and the “Hands Off Our Kids Coalition” to help stop the imprisonment of more than 1600 Maryland parents in a state “vaccine roundup.” (The AAPS and its physician members last spring spearheaded the reversal of the HPV mandate ordered by the Texas governor, as well as got legislation from Congressman Phil Gingrey (R-GA) to block federal funding for state-mandated HPV programs.)

In November the AAPS focused upon Maryland; specifically, Prince George’s County (PG County), which is close to Washington DC. The AAPS: “In a scene reminiscent of cattle round-ups, the state’s attorney has issued summons to more than 1600 parents of children who have not provided certificates of immunization for their children. These parents were told to appear in Court on a November Saturday, and either subject their children to on-the-spot state-mandated vaccines of up 17 vaccine doses, or face imprisonment.”

Parents who ignored the court’s demands could face a $50 fine for every day their child is out of compliance or up to 10 days in jail. However, according to the AAPS, certain Maryland officials don’t hold their own children to the same mandate:

“We can do this the easy way or the hard way, but it’s got to get done,’ threatened Maryland State’s attorney, Glenn F. Ivey. But Ivey apparently has no problem invoking his own right to informed consent and parental control. In a radio interview, he admitted that he chose to refuse the hepatitis B vaccines for his own children.”

Of particular note is that this mandate applies across the board to all schools, public and private, and even daycare facilities—whether they receive government funding or not. The AAPS called on its members to sign a coalition letter to the governor of Maryland, Martin O’Malley, to ask him to use the power of his office to intervene in the intimidation and threatened prosecution of parents in Prince George’s County who choose not to immunize their children.

(See letter online at www.aapsonline.org/vaccines/gov-omalley-letter.php.) The AAPS summarized the “Hands Off” coalition’s views by saying, “The heavy-handed ‘vaccine roundup’ instigated by PG County State’s Attorney Glenn Ivey obliterates informed consent and parental rights.” The AAPS also organized its members to participate in local talk shows and to attend the hearings. It provided flyers to educate parents about exemptions, their rights, and legal help available. Members from around the country phoned to offer support to the Maryland parents who were threatened by the state.


“FOR MANY OF US, we were hurt not by what was done to us, but by what we did not receive: unconditional love.”
—Susan Lawrence, M.D., in Creating a Healing Society, Elite Books, 2006

Where Does Vaccination Belong in the List?

The editors at the Vaccine Liberation organization website ask:

“If the following factors are effective in controlling contagious disease: sanitation (clean water, clean air, clean food, clean environment); quality nutrition; hygiene; insect control; positive expectation that one can be immune; joy, optimism, thankfulness and confidence, and other factors that lead to happy living, then where does vaccination belong in the list?”


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AIDS Vaccine Could Raise Infection Risk

Reuters reporter Maggie Fox, in another article indicating the need for caution about vaccines, wrote (November 13, 2007) that two international trials of Merck & Co. Inc.‘s experimental AIDS vaccine were stopped after researchers realized the vaccine did not prevent infection with the AIDS virus. On the contrary, there is evidence that the vaccine may raise the risk of infection, even if it cannot cause an HIV infection itself.

Merck has announced that it will “unblind” the study, and let the thousands of volunteers for the vaccine know who among them received the active vaccine and who got a placebo. The AIDS vaccine trials were conducted in the United States, Peru, Brazil, Dominican Republic, Haiti, Jamaica, Australia and South Africa. Researchers have begun counseling volunteers that they could now be at a higher risk of contracting HIV.

Full story: www.reuters.com/article/healthNews/idUSN1362317620071113?feedType=RSS&feedName=healthNews

AIDS Statistics Revised Downward

Recently, the United Nations AIDS agency slashed its estimates of persons infected with the human immunodeficiency virus (HIV) from nearly 40 million to 33 million worldwide. Figures for India were halved, from 5.7 million to 2.5 million infected. The agency warned, however, that AIDS could spike if countries dropped their guard (New York Times 11/20/07).

British cancer specialist Karol Sikora, former head of the World Health Organization’s Cancer Program, cites the overblown earlier

Continued on next page

The Danger of Vaccines—and How You Can Legally Avoid Them

Physician Joseph Mercola, D.O., on his widely read website, states that vaccines can harm, and in some cases even kill (http://www.mercola.com/forms/vaccine_teleconference.htm). Vaccine requirements for admission to schools are a serious problem that many, whether parents of preschool to college students, or college students themselves, will face.

At a recent conference Mercola and fellow physician Sherri Tenpenny, D.O., an authority on vaccines, gave a presentation titled “The Danger of Vaccines, and How You Can Legally Avoid Them,” which was professionally recorded on a 90-minute MP3 audio file. The recording includes a detailed conversation between Tenpenny and Mercola, with select questions from the conference participants in the second half.

The presentation includes steps anyone can take to legally avoid dangerous immunizations and to discern the difference between philosophical, religious and medical exemptions. Many medical exemptions will not stand up in court. The feature also outlines practical methods of improving your child’s immunity so they won’t get the diseases the vaccines are supposed to prevent but frequently don’t.

Health care practitioners and others with a professional interest in health will also find this material invaluable for patients as well as themselves in terms of serious legal dangers they risk if they falsify a medical exemption.

Mercola states, “The damage vaccines inflict on individuals and society far outweighs any potential benefit they may claim. This is not unverifiable hype from the fringes. Indisputable facts support this claim. Countless firsthand stories testify to the pain, damage and death vaccines have caused; a powerful story from a mother who lost her baby to routine vaccination that is currently circulating the Internet is but one example.

“But our government, under the thumb of a traditional medical system grown fat on extreme drug profits, refuses to expose this epidemic. They would still have you believe vaccinations are good. They would still have you believe vaccines for your child are ‘mandatory.’”

“The Danger of Vaccines, and How You Can Legally Avoid Them” dispels that myth and helps parents understand why vaccines are essentially loaded guns aimed at your child’s body.

It also explains ways you can inform or disarm your school nurses and legally avoid vaccines, and natural approaches you can take to immunize your child against disease safely. This is not a “dry” audio presentation, but is very engaging.

Sherri Tenpenny’s articles, such as “‘Expert’ Believes Infants Can Tolerate 10,000 Vaccines” and “Smallpox Vaccines and Heart Disease, No ‘Coincidence,’” give an idea of the range of her expertise and valuable insight. Readers interested in how and why vaccines are dangerous might consider Tenpenny’s new video, “Vaccines: What CDC Documents and Science Reveal.” She outlines how vaccines can cause illnesses including autoimmune diseases, allergies, ear infections, and more. She establishes a link between vaccines and developmental, learning and behavioral disorders in children, and shows how and why vaccine studies are seriously flawed. Tenpenny’s books and DVDs can be found at www.osteomed2.com. Δ

Most Flu Shots Contain Mercury, But Few People Know It

"Experts" say vaccine’s benefits outweigh potential risk

Raquel Rutledge, writing for the Milwaukee Journal Sentinel, states that a record 130 million Americans are expected to get a flu shot this year [2007-2008], and more than 80% of them will also get a dose of mercury. Many choose not to get flu vaccines, instead using natural preventive measures, as some statistics show no significant benefit to those who do get the vaccine. However, for those who do choose the vaccine, there is the option of asking for a preservative-free flu shot.

A typical flu shot contains 25 micrograms—or 50,000 parts per billion—of mercury. The EPA classifies a liquid with only 200 parts per billion of mercury as hazardous waste! A 140-pound adult getting a flu vaccine with mercury as an additive would exceed the EPA’s safety limit by almost four times; a baby by almost 25 times. Many doctors recommend babies and children get two flu vaccines.

About 80% of all flu shots distributed in the United States contain a mercury-based preservative called thimerosal. Rutledge quotes Jeanne Santoli of the U.S. Centers for Disease Control and Prevention (CDC): “Certainly it would be good to have no mercury exposure at all. But there’s no conclusive scientific evidence that the amount of mercury one might get from a flu shot is linked with any neurological development outcome that’s negative.” Hmmmm. The CDC recommends that almost everyone—including pregnant women—get the injection, despite written warnings from the vaccine manufacturers.

Rutledge writes: “A material safety data sheet from Eli Lilly and Co., which no longer makes a flu vaccine, says effects of exposure to thimerosal may include ‘fetal changes, decreased offspring survival and lung tissue changes.… Exposure in utero and in children may cause mild to severe mental retardation and mild to severe motor coordination impairment.’”

Several states, including California, Illinois and New York, have banned thimerosal in vaccines—including the flu shot—given to young children and pregnant women. Yet every day, says Rutledge, “in grocery stores, fast food restaurants, pharmacies, at work and elsewhere, people are bombarded with the message to ‘Shoo the flu’ and repeatedly told ‘the best way to beat the flu is to get a flu shot.’” For whom? Is it profits or science that drives the flu vaccine advertising?

AIDS Statistics Revised Downward

Continued from previous page

statistics as an example of how political correctness influences too much medical spending and can lead to a gross misallocation of resources. “Between the early Eighties and 1993, the [British] Government spent £900 million on advertising, educating about and treating AIDS…. At one stage in the early Nineties, we had the absurdity that the number of people in AIDS counselling, helplines and other jobs exceeded the number of sufferers.” (Daily Mail 11/21/07).

For all the emphasis on HIV, Sikora writes, the biggest killer in the world is dehydration, which is responsible for 12 million deaths a year, mostly in Africa. Simple, cheap improvements in water supplies would greatly diminish that number.

In the U.S., fatalities from methicillin-resistant Staphylococcus aureus (MRSA) could exceed those from AIDS, at an estimated 18,650 annually compared to 17,011 (Lindsey Tanner, Associated Press 10/16/07).

According to the summary of reportable diseases for Pima County (Ariz.) for October 2007, there were 5 cases of HIV, 16 of MRSA, 44 of gonorrhea, and 269 of chlamydia.

ADDITIONAL INFORMATION


“All States to Track HIV Positive Patients by Name,” AAPS News of the Day 6/30/07.


From www.aapsonline.org/nod/newsoday481.php

UPCOMING in the May/June 2008 issue of Well Being Journal: a feature by Harold Foster, Ph.D., on reversing AIDS/HIV with a mineral and three amino acids. See www.wellbeingjournal.com for more from Foster.
Another Vaccine Recall Fuels Parents’ Suspicions

Mike Stobbe, an AP medical reporter, wrote (December 12, 2007) that “more than a million doses of a common vaccine given to babies as young as two months was being recalled Wednesday because of contamination risks, but the top U.S. health official said it was not a health threat.”

The recall was for 1.2 million doses of the vaccine for Hib, which supposedly protects children against meningitis, pneumonia and other infections, as well as a combination vaccine for Hib and hepatitis B. The vaccine is recommended by the Advisory Committee on Immunization Practices (ACIP) for all children under 5 and is usually given in a three-shot series, starting at two months.

The vaccine was contaminated at the manufacturing factory, possibly by a virus or bacteria, according to a company spokesperson. Many parents are becoming more distrustful of vaccines, and this incident further fuels their fires. Nevertheless the state of New Jersey just decided to be the first state to require flu shots for preschoolers, after a health advisory board backed new vaccine requirements over opposition from parents. (See related story, “Most Flu Shots Contain Mercury,” p. 29.)

Rutledge asked David Ayoub, M.D., medical director of Springfield, Ill.-based Prairie Collaborative for Immunization Safety, a group concerned about mercury in vaccinations, what he thought of a 1973 study the CDC uses to support its views. “It’s ridiculous,” he said. “It’s a big, big deception. Half the kids could have died, but the study never would have shown that because they were specifically looking for tumors.” Ayoub is co-author of “Influenza Vaccination During Pregnancy: A Critical Assessment of the Recommendations of the Advisory Committee on Immunization Practices,” published in the Journal of American Physicians and Surgeons in 2006.

Rutledge says that Anthony Fiore, a medical epidemiologist with the CDC, acknowledged that not enough is known about flu vaccine safety. “We would love to have better data on flu vaccine safety in all types of persons,” he said. But at what cost to human health?

To report an adverse reaction to the flu shot, file a report at the Vaccine Adverse Event Reporting System website (vaers.hhs.gov) or call 800-822-7967. Δ


“I needed to draw, to move on the paper, to heal from the inside out. In their book Art and Healing, Samuels and Lane say that ‘art and healing have always been one,’ that we ‘make art to heal, heal to make art,’ and that ‘art, prayer and healing all come from the same source in the body; they are all associated with similar brain wave patterns, mind body changes....’ (Art and Healing, Ganin, 1999, xiii). That’s what I have experienced.”

—Diane Calleson in “I’m Not Harold, but I’ve Got a Purple Crayon,” a personal story of healing to be printed in the upcoming May/June 2008 issue of Well Being Journal.
Energy Medicine (EChT)

Electrochemical therapy shows promise in treating cancer

By Alan E. Smith

The new science of energy medicine is based on the scientific discovery of a circulatory system in the human body for electrical energy. This process is remarkably similar to the meridian concepts of traditional Chinese medicine.

This new physiologic concept was discovered by internationally renowned Swedish radiologist and surgeon Björn E. W. Nordenström, M.D., and published in his Biologically Closed Electrical Circuits (1983). Beginning in the mid-1950s Nordenström noticed radiating patterns around cancer tumors on chest X-rays, and he called these patterns corona structures because they reminded him of the sun’s corona. Additional study revealed fluctuating electrical charges within the tumors. This led to the discovery of a new type of system, an electrical circuit that involves the transportation of ions and electrons throughout the body. This circulating current helps maintain the body’s equilibrium and healing processes by influencing cellular structure and function.

Blood plasma and interstitial fluid are examples of media capable of conducting current, while blood vessel walls, cells and membranes surrounding interstitial spaces provide insulation to the surroundings. In other words, they’re insulated electric cables providing communication within the body through electromagnetic signaling. These flowing electrical charges found in the body resemble the yin and yang concepts and the flow of chi discovered 5,000 years ago in ancient China.

The editor of The American Institute of Stress, Paul J. Rosch, M.D., F.A.C.P., wrote in his review of the book that “… [Nordenström] has demonstrated how specific DC microcurrents that restore ion electricity balance can be utilized to treat metastatic lung cancer and other malignancies with amazing success, and his therapeutic triumphs have now been replicated by others in thousands of patients.” Following a report by Tim Johnson, M.D., M.P.H., on ABC’s 20/20 program, host Barbara Walters expressed amazement at this medical breakthrough. Thousands of cancer patients around the world have now successfully been treated with electrochemical therapy (EChT) using Nordenström’s BCEC concepts.

There are only a few limited trials being conducted in America today. In the midst of what may be one of the most fundamental paradigm shifts in medicine since William Harvey discovered blood circulation 350 years ago, America is taking a back seat in research. Unable to secure funding and support in America, Nordenstrom was welcomed by China to continue his research. The current five-year survival rates for liver cancer are reported to be about 15% in China compared to 5% in the U.S., where they’re treated with conventional therapies. In 2001 Nordenström received the International Scientific and Technological Cooperation Award from the People’s Republic of China for his work.

EChT treatment is available in Germany, China and other countries. Costs are reported to be in the $7,500 (U.S.) range with treatment taking up to two weeks. © Ariel Brasher

The International Association for Biologically Closed Electric Circuits (BCEC) in Medicine and Biology was founded in 1993 for the development of electrotherapeutic, thermotherapeutic and magnetotherapeutic techniques, along with conventional therapies, for the treatment of health problems including cancer. See www.iabc.readywebsites.com/page/page/623957.htm.

RESOLVING CONFLICTING BELIEFS

By Shannon McRae, Ph.D.

RECENTLY OPRAH WINFREY, on her daytime show, made the statements that we are all energetic beings; we are all made up of energy. She was talking with Mehmet Oz, M.D., a regular guest on her shows, who described the energetic workings of the human body and energy fields around the body to her audience.

Not only are our bodies made of energy, they are also influenced by perhaps thousands of subtle energy fields that flow through and around them. These fields could be described as invisible forces that move in and out of all living things. Examples include the energies from the sun, which affect plants, trees and literally every body on the earth; then there are our own powerful feelings and thoughts. All of these affect our health.

I think it is useful to understand how healing takes place primarily on energetic levels. Healing of the physical often comes from unseen energies directed by thought and desire. Neurological impulses are also stimulated when our bodies receive an energetic impact from someone or something, such as a burst of anger from someone close or a feeling of deep love one might have toward another. Because our bodies are not only energetically but also electrically based, they too can influence our feelings; for example, we tend to feel happy when it’s sunny, as well as when someone smiles at us. The sunshine stimulates hormones, and the smile does too.

Thoughts also have power and energy. We’ve all had the feeling of wanting to remove ourselves from someone who is talking about negative things—we may say we don’t want to be “caught up in that negativity.” And when we are with people who are happy and laughing, we are attracted to spending time with them. Thoughts are like magnets, either attracting or repelling. It is therefore important to be aware of thoughts at all times.

Often we can all sense others’ thoughts, even if only at a subconscious level. Some of us are more sensitive to the subtle energy of thoughts than others, but we all are potentially affected in some way. This energy can significantly affect our health, which is something I often address in my work as a medical intuitive.

When I am helping a client I frequently suggest that the person can become healed of physical illnesses, often associated with negative thinking, by changing their thoughts to a more positive energy. Napoleon Hill, in his famous book Think and Grow Rich, wrote that a person becomes what he thinks about all day long. It’s easy to realize the truth that thought produces effects when we look around at the manifestations of thought in the lives of people we know and work with and even ourselves. I know that the notion that we create much of what occurs in our own lives is controversial. Yet I see it play out all the time. I will give just one example here.

My client, Janice, had been worrying about a recurrence of cancer, which had been present in her body, due to an energetic imbalance, for years. She was at her wit’s end when she called me and asked me to scan her body, and then tell her what I “saw” energetically. I told her that I saw her energetically as being healthy at that moment. I didn’t see any pockets where the cancer was supposed to be hiding (according to a recent blood test, there were markers for cancer, and the doctors had told her that illness must be hiding in her body). She pointed out that I had told her the same thing, that she was healthy, six months before and that other energetic healers she had called had also told her that she was basically healthy. Yet the medical community told her she was getting sicker, although they couldn’t find out why. Nothing showed up other than negative markers in her blood tests.

I find this interesting in relation to how thoughts influence the physical body. Earlier in my life, as part of my degree program at UCLA, I did an experiment to see if I could
influence the results of my own blood tests with my thoughts. The first blood test was performed after I deliberately focused on an emotional negative experience I had when younger. The blood drawn during this negative focus showed clumping blood cells and anemia. That same day, in the same lab, I took a second test, but before it I listened to some of my favorite music (Mozart and Chopin) and looked at pictures of places I had experienced with joy and photos of happy faces. When I felt the shift in my thoughts and emotions to a positive outlook, I had more blood drawn. When it was analyzed, the blood was very healthy, with no clumping cells, and I was no longer anemic.

I know, therefore, that thoughts influence outcomes. My client hadn’t been challenging herself to focus on anything positive, not even what she’d been told by the healers she called. Yet she was clinging to the results of blood tests that made her believe her body was crumbling. I began to wonder if it was her negative expectation, a nocebo, that had influenced the blood tests.

We talked about her confusing beliefs. She had sought advice from alternative sources, but chose not to put credence in what they said. She had a preconceived belief that the blood tests were more accurate than what she was hearing. We also discussed her fear of being judged if she did succumb to the cancer she feared was eating away at her body. Then we talked of how she could change her thoughts by only accepting those suggestions that supported health. This would be a huge step for her, as she had always listened to others’ advice, and after seeking out so many viewpoints, she didn’t know what to believe anymore.

Her energy fields were muddled, and looked as if they also were taking instructions from a myriad of sources. I suggested that she take a vacation from all the people who were negating any positive outcome, and begin clearing any negative beliefs that she knew didn’t serve her desire for health. I also suggested she begin focusing on the positive input she was receiving from medical intuitives, bodyworkers, holistic nutritionists and others she had been seeing. The negativity that plagued her mind could be banished by consciously monitoring her thoughts and choosing those that were aligned with health, peace, happiness and a deep sense of well-being.

Most of my clients have used illness as a way to get attention from someone else. This was true of this woman as well, and I suggested to her that she might consider that. When this is the case, it gives someone a reason to keep themselves ill. She called me one week later, and told me that I was right. She said she cried for an hour after the session, when she realized she had been using illness as a way to get attention.

It is absolutely essential that a person requesting a healing of body, mind and/or spirit must find some place to retreat, whether it is a healing center or a peaceful room in the midst of daily life where positive energy can be called forward, bringing peace, quiet, reflection, and healing by desire and intention. Most of us have the ability to energetically create a healing place, wherever it is, and to surrender to the healing energies we request. Sometimes lighting a candle, reading a poem, gazing upon a flower or listening to peaceful music can set the stage for our energetic transformation to health. Some people are too weak or sick to create their own healing space, and so it is important to be sensitive to the needs of others and help them find what will bring them a sense of peace, as they begin their healing. △

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Healing Within the Family

By Barry Vissell, M.D., and Joyce Vissell, R.N.

In every family there is some degree of dysfunction. I know that we have ours. Even the families that look like they could win the “Family of the Year Award” have their issues. In our travels doing workshops in the United States as well as Europe we hear many people tell stories about the problems with their families. This element of dysfunction is part of what makes the family unit such a rich ground for personal growth. Some people hide from their families, moving very far away and never visiting. These people are missing out on an amazing growth possibility.

Several years ago my brother’s four grown children all visited from various parts of the United States to help us celebrate my mother’s 88th birthday. My brother’s children are all very funny, and there was much laughter as they told jokes and did their imitations. The last night of their time with us, we announced that we would be doing something different than all the jokes and funny stories. We told them that we would be appreciating each other. One person would take a turn, and the others would all appreciate that person. The groans from them and our three children were audible, when my mother sweetly said, “Oh, I love that idea, let’s do it.” And so we began. Our children are used to this kind of “torture,” but my brother’s children had never done this before. Because my mom wanted this, everyone participated fully. Soon there were tears, as my brother’s children started appreciating each other for perhaps the very first time. There were comments such as, “Oh, I didn’t know you felt that way. It makes me so happy to hear you say that. Thank you for caring so much. I guess I just didn’t know.” My mother loved it all, and even though they might not admit it, I believe all of her grandchildren loved it as well. A sweet healing took place, as appreciation and honesty held court for a wonderful hour.

It takes courage to bring more honesty and vulnerability into a family, but the efforts are well worth it.

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By choosing your thoughts, and by selecting which emotional currents you will release and which you will reinforce, you determine the quality of your light. You determine the effects that you will have upon others, and the nature of the experiences of your life.

—Gary Zukav, Seat of the Soul, p. 94 (Simon and Schuster, 1989)
A miracle happened not long after I made my body-and-soul commitment to my wife, Kathlyn, and I believe the miracle was made possible by that deep commitment. I’d like to tell you what happened, so that you can understand a tool I’ve organized my life around ever since, and put it to work for yourself.

I’d been involved for a couple of years in a struggle over a house. It was a house I didn’t want but couldn’t let go of. In fact, it was a house I’d never wanted to buy in the first place. Carol, the woman I was with at the time, had taken a major fancy to it, but I thought it was ugly and too expensive. I eventually gave in to her wishes, mainly because I wanted her to be happy. In those days I was under the woefully mistaken impression that things like real estate could make people happy. Later I would come to see that buying an ugly house I didn’t want was a way to avoid facing an even uglier truth lurking inside me: I didn’t want to be in the relationship anymore. Finally I left the relationship, but the house became a source of conflict that dragged on and on.

When Carol and I split up we had accumulated an amount of equity well over $100,000 in today’s money. I wanted her to buy my half or sell the house so I could get my money out. She wanted to keep living in the house but only had $10,000 of the $50,000 she needed to buy me out. Stalemate.

And so it dragged on for months, then a year. Each month I’d go through one of life’s least fun experiences: having to make my half of the payment for a house I didn’t like and didn’t live in. I felt the pinch even more as my relationship with Kathlyn deepened. When we began living together, all we could afford was a tiny rental; from the moment we moved in, we couldn’t wait to move out of it. The only person that seemed to be happy was Carol. She got to live in a house she liked and only had to pay for half of it! As time wore on, the minor satisfaction of making Carol happy dwindled and devolved into bitter envy.

Bitterness and envy were two emotions I hadn’t spent much time feeling in my life, and I didn’t wear them well. One day I was full of angry thoughts about Carol and the house, and to soothe my fevered mind I sat down to meditate. During meditation I was visited by a revelation. An image popped into my mind of a river flowing around a boulder. In that image was embedded a powerful insight: money is really only a form of energy. I realized that my attachment to “getting what I was entitled to” was a massive energy block, a boulder in the flow of my river. I was holding onto a house I didn’t want until Carol came up with the full $50,000. By doing that I was blocking my own energy flow and, in a twisted sort of way, staying attached to Carol.

A radical question formed in my mind: What if I simply gave her my half of the house for whatever she could pay? I wondered if this act of giving would free up the en-
The act of completing something, particularly if it has an emotional charge, is a remarkably powerful way to increase your abundance...

USDA Approves Chip Implants That Cause Tumors

The National Animal Identification System (NAIS) would require that all farmers and farm animal owners implant their animals with a computer chip, even those who just own a single cow, horse, chicken or other farm animal. A story in the Washington Post (September 8, 2007) notes that the USDA approved the use of two new types of chips for the NAIS program. These same radio frequency (RF) chips have already been planted in millions of pets and marketed to pet owners as an ID device to help find lost pets. Increasingly, these same chips are being marketed and implanted into humans. Evidence has now surfaced that a significant number of studies done in the 1990s revealed that lab animals implanted with the devices developed tumors. When the FDA approved the use of the chips for human implanting, these reports were never made public. In an interview, Keith Johnson, a retired toxicologic pathologist who studied the chips for Dow Chemical, said, “The transponders were the cause of the tumors.”

The FDA is overseen by the Department of Health and Human Services, which, at the time of the original RFID chip’s approval, was headed by White House appointee Tommy Thompson. Two weeks after the device’s approval took effect on January 10, 2005, Thompson left his Cabinet post, and within five months he was a board member of VeriChip Corporation, the company who designed the RFID chip. He was compensated by VeriChip with cash and stock options. In his public appearances, he continues to claim the chips are completely safe and urges all citizens get the implants for the sake of the health and safety of their families. To date (September 2007), Thompson has not had the chip implanted.

Governments officials around the globe have been coerced, infiltrated, and paid off by agricultural biotech giants. In Indonesia, Monsanto gave bribes and questionable payments to at least 140 officials, attempting to get their genetically modified (GM) cotton approved. In India, one official tampered with the report on Bt cotton to increase the yield figures to favor Monsanto. In Mexico, a senior government official allegedly threatened a University of California professor, implying “We know where your children go to school,” trying to get him not to publish incriminating evidence that would delay GM approvals. While most industry manipulation and political collusion is more subtle, none was more significant than that found at the US Food and Drug Administration (FDA).

The FDA’s “Non-Regulation” of GM Foods
Genetically modified crops are the result of a technology developed in the 1970s that allows genes from one species to be forced into the DNA of unrelated species. The inserted genes produce proteins that confer traits in the new plant, such as herbicide tolerance or pesticide production. The process of creating the GM crop can produce many side effects, and the plants contain proteins that have never before been in the food supply. In the US, new types of food substances are normally classified as food additives, which must undergo extensive testing, including long-term animal feeding studies. If one is approved, the label of food products containing the additive must list it as an ingredient.

There is an exception, however, for substances that are deemed “generally recognized as safe” (GRAS). GRAS status allows a product to be commercialized without any additional testing. According to US law, to be considered GRAS the substance must be the subject of a substantial amount of peer-reviewed published studies (or equivalent) and there must be overwhelming consensus among the scientific community that the product is safe. GM foods had neither. Nonetheless, in a precedent-setting move that some experts contend was illegal, in 1992 the FDA declared that GM crops are GRAS as long as their producers say they are. Thus, the FDA does not require any safety evaluations or labels whatsoever. A company can even introduce a GM food to the market without telling the agency.

Such a lenient approach to GM crops was largely the result of Monsanto’s legendary influence over the US government. According to the New York Times, “What Monsanto wished for from Washington, Monsanto and, by extension, the biotechnology industry got…. When the company abruptly decided that it needed to throw off
the regulations and speed its foods to market, the White House quickly ushered through an unusually generous policy of self-policing.” According to Henry Miller, M.D., who had a leading role in biotechnology issues at the FDA from 1979 to 1994, “In this area, the U.S. government agencies have done exactly what big agribusiness has asked them to do and told them to do.”

Following Monsanto’s lead, in 1992 the Council on Competitiveness chaired by Vice President Dan Quayle identified GM crops as an industry that could increase US exports. On May 26, Quayle announced “reforms” to “speed up and simplify the process of bringing” GM products to market without “being hampered by unnecessary regulation.” Three days later, the FDA policy on non-regulation was unveiled.

The person who oversaw its development was the FDA’s deputy commissioner for policy, Michael Taylor, whose position had been created especially for him in 1991. Prior to that, Taylor was an outside attorney for both Monsanto and the Food Biotechnology Council. After working at the FDA, he became Monsanto’s vice president.

**COVERING UP HEALTH DANGERS**

The policy he oversaw needed to create the impression that unintended effects from GM crops were not an issue. Otherwise their GRAS status would be undermined. But internal memos made public from a lawsuit showed that the overwhelming consensus among the agency scientists was that GM crops can have unpredictable, hard-to-detect side effects. Various departments and experts spelled these out in detail, listing allergies, toxins, nutritional effects, and new diseases as potential problems. They had urged superiors to require long-term safety studies. In spite of the warnings, according to public interest attorney Steven Druker who studied the FDA’s internal files, “References to the unintended negative effects of bioengineering were progressively deleted from drafts of the policy statement (over the protests of agency scientists).”

FDA microbiologist Louis Pribyl wrote about the policy, “What has happened to the scientific elements of this document? Without a sound scientific base to rest on, this becomes a broad, general, ‘What do I have to do to avoid trouble’-type document…. It will look like and probably be just a political document…. It reads very pro-industry, especially in the area of unintended effects.”

The FDA scientists’ concerns were not only ignored, their very existence was denied.

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**THE APPEARANCE OF THINGS CHANGES according to the emotions, and thus we see magic and beauty in them, while the magic and beauty are really in ourselves.**

aware of any information showing that foods derived by these new methods differ from other foods in any meaningful or uniform way." On the basis of this manufactured and false notion of no meaningful differences, the FDA does not require GM food safety testing.

To further justify their lack of oversight, they claimed that GM crops were “substantially equivalent” to their natural counterparts. But this concept does not hold up to scrutiny. The Royal Society of Canada described substantial equivalence as “scientifically unjustifiable and inconsistent with precautionary regulation of the technology.” In sharp contrast to the FDA’s position, the Royal Society of Canada said that “the default prediction” for GM crops would include “a range of collateral changes in expression of other genes, changes in the pattern of proteins produced and/or changes in metabolic activities.”

FAKE SAFETY ASSESSMENTS

Biotech companies do participate in a voluntary consultation process with the FDA, but it is derided by critics as a meaningless exercise. Companies can submit whatever information they choose, and the FDA does not conduct or commission any studies of their own. Former EPA scientist Doug Gurian-Sherman, who analyzed FDA review records obtained through the Freedom of Information Act, states flatly, “It is clear that FDA’s current voluntary notification process (even if made mandatory) is not up to the task of ensuring the safety of future GE [genetically engineered] crops.” He says, “The FDA consultation process does not allow the agency to require submission of data, misses obvious errors in company-submitted data summaries, provides insufficient testing guidance, and does not require sufficiently detailed data to enable the FDA to assure that GE crops are safe to eat.” Similarly, a Friends of the Earth review of company and FDA documents concluded:

“If industry chooses to submit faulty, unpublishable studies, it does so without consequence. If it should respond to an agency request with deficient data, it does so without reprimand or follow-up…. If a company finds it disadvantageous to characterize its product, then its properties remain uncertain or unknown. If a corporation chooses to ignore scientifically sound testing standards … then faulty tests are conducted instead, and the results are considered legitimate. In the area of genetically engineered food regulation, the ‘competent’ agencies rarely if ever [know how to] conduct independent research to verify or supplement industry findings.”

At the end of the consultation, the FDA doesn’t actually approve the crops. Rather, they issue a letter including a statement such as the following:

“Based on the safety and nutritional assessment you have conducted, it is our understanding that Monsanto has concluded that corn products derived from this new variety are not materially different in composition, safety, and other relevant parameters from corn currently on the market, and that the genetically modified corn does not raise issues that would require premarket review or approval by FDA…. As you are aware, it is Monsanto’s responsibility to ensure that foods marketed by the firm are safe, wholesome and in compliance with all applicable legal and regulatory requirements.”

The National Academy of Sciences and even the pro-GM Royal Society of London describe the US system as inadequate and flawed. The editor...
The FDA and other regulatory agencies are officially charged with both regulating biotech products and promoting them—a clear conflict. Suzanne Wuerthele, a US EPA toxicologist, says, “This technology is being promoted, in the face of concerns by respectable scientists and in the face of data to the contrary, by the very agencies which are supposed to be protecting human health and the environment. The bottom line in my view is that we are confronted with the most powerful technology the world has ever known, and it is being rapidly deployed with almost no thought whatsoever to its consequences.”

Canadian regulators are similarly conflicted. The Royal Society of Canada reported, “In meetings with senior managers from the various Canadian regulatory departments … their responses uniformly stressed the importance of maintaining a favorable climate for the biotechnology industry to develop new products and submit them for approval on the Canadian market…. The conflict of interest involved in both promoting and regulating an industry or technology … is also a factor in the issue of maintaining the transparency, and therefore the scientific integrity, of the regulatory process. In effect, the public interest in a regulatory system that is ‘science based’—that meets scientific standards of objectivity, a major aspect of which is full openness to scientific peer review—is significantly compromised when that openness is negotiated away by regulators in exchange for cordial and supportive relationships with the industries being regulated.”

The pro-GM European Commission repeats the same ruse. According to
France Bans Genetically Engineered Crops

The French have announced a ban on the planting of genetically engineered crops until the safety of the crops can be further assessed. French president Nicolas Sarkozy said that the decision was based on the desire to err on the side of safety. “I don’t want to be in contradiction with EU laws, but I have to make a choice,” he said. “In line of the precautionary principle, I wish that the commercial cultivation of genetically modified pesticide GMOs be suspended.” More at www.reuters.com/article/companyNewsAndPR/idUSL2583436220071025.

EVALUATIONS MISS MOST HEALTH PROBLEMS

Although the body of safety studies on GM foods is quite small, it has verified the concerns expressed by FDA scientists and others.

- The gene inserted into plant DNA may produce a protein that is inherently unhealthy.
- The inserted gene has been found to transfer into human gut bacteria and may even end up in human cellular DNA, where it might produce its protein over the long term.
- Toxic substances in GM animal feed might bioaccumulate into milk and meat products.
- Farmer and medical reports link GM feed to thousands of sick, sterile, and dead animals.

But there is not a single government safety assessment program in the world leaked documents obtained by Friends of the Earth, while they privately appreciate “the uncertainties and gaps in knowledge that exist in relation to the safety of GM crops … the Commission normally keeps this uncertainty concealed from the public whilst presenting its decisions about the safety of GM crops and foods as being certain and scientifically based.” Further, in private, “they frequently criticize the European Food Safety Authority (EFSA) and its assessments of the safety of GM foods and crops, even though the Commission relies on these evaluations to make recommendations to member states … [and] to justify its decisions to approve new GM foods.”\[19\] For example, the Commission privately condemned the submission information for one crop as “mixed, scarce, delivered consecutively all over years, and not convincing.” They said there is “No sufficient experimental evidence to assess the safety.”\[20\]
that is competent to even identify most of these potential health problems, let alone protect its citizens from the effects.21

A review of approved GM crops in Canada by professor E. Ann Clark, for example, reveals that 70% (28 of 40) “of the currently available GM crops … have not been subjected to any actual lab or animal toxicity testing, either as refined oils for direct human consumption or indirectly as feedstuffs for livestock. The same finding pertains to all three GM tomato Decisions, the only GM flax, and to five GM corn crops.” In the remaining 30% (12) of the other crops tested, animals were not fed the whole GM feed. They were given just the isolated GM protein that the plant was engineered to produce. But even this protein was not extracted from the actual GM plant. Rather, it was manufactured in genetically engineered bacteria. This method of testing would never identify problems associated with collateral damage to GM plant DNA, unpredicted changes in the GM protein, transfer of genes to bacteria or human cells, excessive herbicide residues, or accumulation of toxins in the food chain, among others. Clark asks, “Where are the trials showing lack of harm to feed livestock, or that meat and milk from livestock fed on GM feedstuffs are safe?”22

Epidemiologist and GM safety expert Judy Carman shows that assessments by Food Safety Australia New Zealand (FSANZ) similarly overlook serious potential problems, including cancer, birth defects, or long-term effects of nutritional deficiencies.23

“A review of twelve reports covering twenty-eight GM crops—four soy, three corn, ten potatoes, eight canola, one sugar beet and two cotton—revealed no feeding trials on people. In addition, one of the GM corn varieties had gone untested on animals. Some seventeen foods involved testing with only a single oral gavage (a type of forced-feeding), with observation for seven to fourteen days, and only of the substance that had been genetically engineered to appear [the GM protein], not the whole food. Such testing assumes that the only new substance that will appear in the food is the one genetically engineered to appear, that the GM plant-produced substance will act in the same manner as the tested substance that was obtained from another source [GM bacterial], and that the substance will create disease within a few days. All are untested hypotheses and make a mockery of GM proponents’ claims that the risk assessment of GM foods is based on sound science. Furthermore, where the whole food was given to animals to eat, sample sizes were often very low—for example, five to six cows per group for Roundup Ready soy—and they were fed for only four weeks.”24

Since GM foods are not properly tested before they enter the market, consumers are the guinea pigs. But this doesn’t even qualify as an experiment. There are no controls and no monitoring

HIDDEN INFORMATION, LACK OF STANDARDS, AND BREAKING LAWS

Companies claim that their submissions to government regulators are “confidential business information,” so they are kept secret. Some industry studies that have been forced into the public domain through Freedom of Information requests or lawsuits have been appalling in design and execution. This is due in part to the lack of meaningful and consistent standards required for assessments. Gurian-Sherman says of the FDA’s voluntary consultation, “Some submissions are hundreds of pages long while others are only 10 or 20.”25 A Friends of the
Earth report on US regulation and corporate testing practices states, “Without standardization, companies can and do design test procedures to get the results they want.” Regulators also reference international standards as it suits them. According to the Centre for Integrated Research in Biosafety, for example, FSANZ “relaxed adherence to international standards for safety testing when that better suited the Applicant’s submitted work, and imposed international standards whenever that was a lower standard than we recommended.”

Regulators also break laws. The declaration of GRAS status by the FDA deviated from the Food and Cosmetic Act and years of legal precedent. In Europe, the law requires that when EFSA and member states have different opinions, they “are obliged to co-operate with a view to either resolving the divergence or preparing a joint document clarifying the contentious scientific issues and identifying the relevant uncertainties in the data.” According to FOE, in the case of all GM crop reviews, none of these legal obligations were followed.

HUMANS AS GUINEA PIGS

Since GM foods are not properly tested before they enter the market, consumers are the guinea pigs. But this doesn’t even qualify as an experiment. There are no controls and no monitoring. Without post-marketing surveillance, the chances of tracing health problems to GM food are low. The incidence of a disease would have to increase dramatically before it was noticed, meaning that millions may have to get sick before a change is investigated. Tracking the impact of GM foods is even more difficult in North America, where the foods are not labeled. Regulators at Health Canada announced in 2002 that they would monitor Canadians for health problems from eating GM foods. A spokesperson said, “I think it’s just prudent and what the public expects, that we will keep a careful eye on the health of Canadians.” But according to CBC TV news, Health Canada “abandoned that research less than a year later saying it was ‘too difficult to put an effective surveillance system in place.’” The news anchor added, “So at this point, there is little research into the health effects of genetically modified food. So will we ever know for sure if it’s safe?”

Not with the biotech companies in charge. Consider the following statement in a report submitted to county officials in California by pro-GM members of a task force. “[I]t is generally agreed that long-term monitoring of the human health risks of GM food through epidemiological studies is not necessary because there is no scientific evidence suggesting any long-term harm from these foods.” Note the circular logic: Because no long-term epidemiological studies are in place, we
have no evidence showing long-term harm. And since we don’t have any evidence of long-term harm, we don’t need studies to look for it.

What are these people thinking? Insight into the pro-GM mindset was provided by Dan Glickman, the US secretary of agriculture under President Clinton.

“What I saw generically on the pro-biotech side was the attitude that the technology was good, and that it was almost immoral to say that it wasn’t good, because it was going to solve the problems of the human race and feed the hungry and clothe the naked…. And there was a lot of money that had been invested in this, and if you’re against it, you’re Luddites, you’re stupid. That, frankly, was the side our government was on. Without thinking, we had basically taken this issue as a trade issue and they, whoever ‘they’ were, wanted to keep our product out of their market. And they were foolish, or stupid, and didn’t have an effective regulatory system. There was rhetoric like that even here in this department. You felt like you were almost an alien, disloyal, by trying to present an open-minded view on some of the issues being raised. So I pretty much spouted the rhetoric that everybody else around here spouted; it was written into my speeches.”

Fortunately, not everyone feels that questioning GM foods is disloyal. On the contrary, millions of people around the world are unwilling to participate in this uncontrolled experiment. They refuse to eat GM foods. Manufacturers in Europe and Japan have committed to avoid using GM ingredients. And the US natural foods industry, not waiting for the government to test or label GMOs, is now engaged in removing all remaining GM ingredients from their sector using a third party verification system. The Campaign for Healthier Eating in America will circulate non-GMO shopping guides in stores nationwide so that consumers have clear, healthy non-GMO choices. With no governmental regulation of biotech corporations, it is left to consumers to protect themselves.


JEFFREY M. SMITH is the author of the newly released book, Genetic Roulette: The Documented Health Risks of Genetically Engineered Foods. He is the director of the Institute for Responsible Technology and the Campaign for Healthier Eating in America, the international bestselling author of Seeds of Deception, and the producer of the DVD Hidden Dangers in Kids’ Meals.

BOOK NOTE: The newly released Genetic Roulette: The Documented Health Risks of Genetically Engineered Foods contains research from more than 30 scientists over two years, and it presents 65 health risks of GM foods and tells why current safety assessments are not competent to protect people from most of them. The book documents lab animals with damage to virtually every system and organ studied; thousands of sick, sterile, or dead livestock; and people around the world who have traced toxic or allergic reactions to eating GM products, breathing GM pollen, or touching GM crops at harvest. It also exposes many incorrect assumptions that were used to support GM approvals. Organizations worldwide are presenting the book to policy makers as evidence that GM foods are unsafe and need to be removed immediately.
Concerned citizens don’t need to wait for governments to step in. Individuals can make healthier choices for themselves, their families, and their schools now, and together they can inspire the tipping point for healthier, non-GM eating in America. To learn how to opt out of eating GMOs and to find non-GM alternative brands, visit www.responsibletechnology.org.

The GM crops sold in the US include soy (including soy lecithin, used in chocolate and thousands of other products as an emulsifier), corn (including high fructose corn syrup), cottonseed and canola (both used in vegetable oil), Hawaiian papaya, and a small amount of zucchini and crook-neck squash. There is also alfalfa for cattle (the sale of which was halted by a federal judge on March 13, 2007), GM additives such as aspartame, and milk from cows treated with GM bovine growth hormone. There is not yet any GM popcorn, white corn or blue corn. And the industry is introducing GM sugar from sugar beets this year. To learn more, for online shopping guides and to find out how to get involved, go to www.responsibletechnology.org.

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4. See Federal Food, Drug and Cosmetic Act (FFDCA)
6. See Smith, Seeds of Deception; and for copies of FDA memos, see The Alliance for Bio-Integrity, www.biointegrity.org
7. Steven M. Druker, “How the US Food and Drug Administration approved genetically engineered foods despite the deaths one had caused and the warnings of its own scientists about their unique risks,” Alliance for Bio-Integrity, http://www.biointegrity.org/ext-summary.html

“It FINALLY DAWNED ON ME that managing money is simple, so simple that even someone like me can do it. You just need to find a way to make more than you spend—this was a new and foreign concept to me at the time—and then keep doing it consistently, so that over time you build wealth....”

—Marc Allen in his new book The Greatest Secret of All: Moving Beyond Abundance to a Life of True Fulfillment (New World Library, 2007)

15. See for example, “Good Enough To Eat?” New Scientist (February 9, 2002), 7


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