

Heart Disease – Special Report # 4

***Heart Disease
The REAL Cause
The REAL Answer***

***...What Your Doctor Doesn't
Tell You!***

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This Special Report does not intend to diagnose disease, nor to provide specific medical advice. Its intention is solely to inform and to educate. The author intends that readers will use the information presented in this report in cooperation with the advice of a qualified health professional trained in such field.

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Heart Disease - The Real Cause, The Real Answer

....What Your Doctor Doesn't Tell You

Introduction

Heart Disease and Stroke take more people from their life prematurely than any other cause. This number one killer strikes a new victim every 2 seconds!

During the last 15 years, America and many other countries as well, have followed the 'low fat diet'. In fact, almost everything labelled "healthy" is also low fat or non-fat. Yet, despite this fanaticism, Heart Disease has not diminished. Furthermore, one of the number one factors in Heart Disease, obesity, has risen during that same period, in greater numbers, than at any other time in history!

While awareness as to the importance of such factors as diet, stress management and exercise have helped people deal with this killer; these factors have never been fully understood.

One of the areas of greatest confusion must be diet. Atherosclerosis, the cause of most Heart Disease is, itself, caused by diet, but not the factors of diet that we have been told.

Are there answers to Heart Disease other than by-pass surgery? Yes! Like most chronic disease conditions, it's cause lies in an altered biochemistry. When the biochemistry is corrected, the disease process is interrupted and the body is in the best possible position to help itself.

At the heart of this change in biochemistry must be diet. The dietary recommendations of The American Heart Association have failed miserably in curbing the epidemic of Heart Disease; yet this protocol, with its dismal history, is still preached from every medical altar in the world. *'Watch your Cholesterol. Reduce the intake of animal fats. Eat margarine. Eat less protein and eat more starch.'*

It might surprise you to know that Cholesterol, that evil terrible substance, or so we are told, that gets into your arteries and kills you, has NEVER caused one case of heart disease or death! Further, there has never been even one clinical study to show that Cholesterol has ever been at fault. Yet, we are still being brainwashed about this natural, essential fatty substance.

In order to gain control of this runaway horse called Heart Disease, we must look towards its cause. You may be both surprised and disgusted to find out that the real cause of Heart Disease was first identified in 1974. Yet despite this discovery 30 years ago, NOTHING has changed in the programs to prevent or manage this condition.

Through the application of medicine's reactive methods to this Chronic Disease, the bypass operation was developed. While this procedure can save lives in an emergency, it does NOTHING to stop the progression of the illness, leaving most bypass patients facing the same procedure again in five to seven years.

Through this report, we will examine the REAL causes of Heart Disease and how you can intervene, at almost any stage, and begin reversing the process which got you to that point in the first place. As with all Chronic Disease, Heart Disease is best prevented rather than treated. But take heart (pun intended) even if you have been diagnosed with Heart Disease, there is a tremendous amount you can do to help your body heal.

Coronary Thrombosis -The 20th Century Killer

As the twentieth century passes into the history books, it will have to be written that it was the century of the Heart Attack. Prior to the twentieth century, Coronary Thrombosis, or the 'Heart Attack', was virtually unknown. With a bit of luck, this new century will bring a greater awareness of the real causes of this problem and subsequently its return to obscurity.

Death rate from Coronary Thrombosis (an occlusion of one or more of the main arteries, usually surrounding the heart) in 1890 was roughly zero, no recorded cases. Even as late as 1914, the four most common forms of Heart Disease were Rheumatic, Hypertensive, Enlargement, and Syphilitic with no mention of Heart Attack.

In the 1930's, the four most common forms were Hypertensive, Coronary, Rheumatic and Syphilitic. Suddenly, Coronary Heart disease makes its appearance.

By the early 1970's, deaths from Coronary Thrombosis rose to almost 340 per 100,000 people, killing more people than all other forms of disease put together.

Current statistics reflect an interesting phenomenon. By 1996, deaths from Heart Disease dropped to 135 per 100,000, giving rise to the medical industry's claim that they are beating this condition. A closer look at the statistic, however, reveals a much different picture. Death rates have dropped dramatically due to the bypass operation, which can intervene and prevent death.

But we must forever keep in mind that the actual number of Heart Disease cases has risen! This means that the bypass operation, while forestalling the inevitable, does nothing to prevent the problem from occurring!

This is reflected in the 1994 statistics showing that there were 22.3 million cases of Heart Disease reported that year, keeping Heart Disease the number one cause of death (733,834 deaths in 1996.)

The biggest argument against these statistics is that during the 19th century, people did not live as long. This is, however, not the case. If you factor out infant mortality and juvenile deaths from infections, the average life expectancy from 1900 to today is only 8 years longer!

Another argument is that doctors were not trained to recognize the disease. Yet, the Heart Attack is usually not subtle in its symptoms. What physician could overlook severe chest pain and pressure, a dull pain which travels down the neck into the left arm, cold sweats, nausea, a fall in blood pressure, rapid weak pulse and so on?

Yet, even as late as the 1930's, it took a specialist to identify a Coronary Thrombosis because of its rarity. Today most members of the general public would recognize those symptoms for what they are.

To summarize, Heart Attacks have been the leading cause of death for only the last thirty years, killing over 700,000 people annually, compared with the two or three who died of the same cause in 1900.

What is The Real Cause of The Epidemic?

If Cholesterol is the cause of Heart Disease as we have been told, then the last 15 years of the low fat, low Cholesterol diets should have made a marked improvement in the statistics. It has NOT. Diet does play a significant role in the formation of Atherosclerotic Plaque, but not in the way we have been taught. (More on this a little later.)

What then is the real cause of this dreaded disease? Present research shows that deposits form on artery walls, eventually occluding them completely, as a result of a proliferation of cells within the artery walls.

This research, first conducted between 1970 and 1974 by Dr. Earl P. Benditt and his associates at the University of Washington School of Medicine, clearly shows that the cells in the artery wall proliferate because of a mutation in their DNA. This altering of the structure of DNA is caused by a variety of factors such as cigarette smoke chemicals, low-level radiation, epoxides of fatty substances, Chlorine, and most importantly, Free Radicals from certain foods.

These data were confirmed again in 1975 through studies conducted by Dr. Robert Heptinstall of the Johns Hopkins School of Medicine.

It is this mutating of cells which cause them to explosively multiply, eventually creating a lesion which ruptures into the inner wall of the artery.

There are many natural substances, most of them nutrients, which can help to reduce this cellular damage by protecting the artery cell DNA from oxidative and radioactive damage.

It is important to understand that no one single factor can lead to Heart Disease or a Heart Attack. But when two or more of these factors are present at the same time, disaster is a distinct possibility.

For example, autopsies performed on mummies from both Egypt and China show that many of these people had plaque build-up in their arteries, however, none of them showed signs of ever having a Heart Attack.

The lifestyle of the 20th century person with its lack of exercise, poor diet, poor food quality, radiation & chemical poisoning, and excessive stress all add up to the perfect environment for an epidemic of Coronary Thrombosis.

To put this further into perspective, we quote from an article, which appeared in Family Circle magazine in 1971, in which Dr. Paul Dudley White an early cardiologist, stated,

"First of all, I want to emphasize that Heart Disease truly is an epidemic today, a fact that many people seem to refuse to accept...Your generation has become so used to the spectre of heart attacks, you don't even conceive of life free from this danger. But remember, when I was an intern at Massachusetts General Hospital in 1911, there was no Department of Cardiology."

When Dr. White first set up his Cardiology Laboratory in 1920, Coronary Thrombosis was still so uncommon that most medical students did not know of the disease.

What About Cholesterol?

The medical industry, and especially the American Heart Association, has clung to the concept that Cholesterol causes Heart Disease. Therefore, in order to reduce it, less Cholesterol must be consumed.

The problem with this theory is that firstly, it does not stand up to evidence uncovered over the last twenty-five years, and secondly no clinical study has ever proven that Cholesterol causes Heart Disease!

In fact, there are numerous studies, some of them very famous, that prove just the opposite. Namely, that dietary cholesterol has nothing to do with this disease process. Even the famous Framingham Study proved that the Cholesterol concept is a myth. In fact, each of the following studies, a few among many, have shown that low-cholesterol diets do not reduce heart disease:

- St. Mary's Hospital Trial, 1965
- The London Research Committee Trial, 1965
- The Norwegian Trial, 1966
- The London Medical Research Council Trial, 1968
- The National Diet Heart Study, 1968
- The Finnish Mental Hospital Trial, 1968
- The Los Angeles veteran's Trial, 1969
- The Framingham Study, 1970
- The Ireland-Boston Heart Study, 1970
- The Edinburgh-Stockholm Study, 1975

- The UCLA Study, 1976
- The Honolulu-Japanese Study, 1975

Further to that list, the Coronary Drug Project in 1974 was one of the first studies, of many to show that drugs that reduced blood Cholesterol were of no value in preventing Heart Disease.

It is now known that arterial deposits are not caused by Cholesterol. By the time Cholesterol begins sticking to your artery walls, 90 percent of the damage has already been done. It is now well established that how much Cholesterol you eat or don't eat only minimally affects Cholesterol levels in the blood.

Cholesterol is a natural substance, formed in the body to perform a variety of life-sustaining functions. The many duties of Cholesterol include: brain function, (your brain has the greatest concentration of cholesterol in the body), nerve insulation, liver function and many other vital tasks.

In a healthy body, the less Cholesterol that comes from diet the more the body makes and vice versa. If you have elevated Cholesterol, especially if the ratio to HDL and LDL Cholesterol is bad, that is a Liver problem and needs to be addressed from that point of view. A good range for Cholesterol should be somewhere between 165 to 220.

If your Cholesterol is high or the ratios out of line, you need to support your Liver with nutrients like, Choline, Inositol, Methionine, Essential Fatty Acids, and Glandular Extracts with emphasis upon the Adrenal and Liver. Also, be sure and check for Thyroid function as this can alter blood Cholesterol levels as well.

The concept that dietary fat intake does not raise Cholesterol levels nor does it cause Heart Disease is further evidenced by studies of many populations, which have little or no Heart Disease in spite of the fact that they follow a diet very high in saturated fats and Cholesterol. Some of these groups and studies include:

- The Maasai of Tanzania
- The Samburu and Punjabis of Northern Kenya
- Swiss of the Loetschental Valley
- Benedictine Monks
- The Northern Indians
- Primitive Eskimos
- The Atiu and Mitiaro natives of Polynesia

- Jews living in Yemen
- Sweden (where Heart Disease is less than one-third that of the United States and their fat consumption is almost three times as high!)

In almost all the above cultures and tribes, in addition to a high fat diet, they also consume a diet, which is high in protein, while being naturally low in Carbohydrates.

Fat only becomes a significant negative factor in the presence of sugar or highly refined Carbohydrates. Even then, fat does not cause Heart Disease, but it can make you overweight in the presence of high amounts of sugars. Obesity is a genuine factor in the development of Heart Disease and therefore a diet high in both fat and sugar is very unhealthy.

Low Cholesterol Diets Fail to Reduce Heart Disease

In their desperate attempt to blame Cholesterol for the cause of Heart Disease, the medical industry has been on a fanatic cholesterol-fighting war for decades. To this day, Heart Disease has not been lowered through any of these efforts. Who do we stick to a concept that we know is scientifically unsound?

To find this answer we must look toward whom might have the most to gain from the perpetuation of such propaganda. The food industry has made a multi-billion dollar industry out of the sale of polyunsaturated fats. Their popularity grew rapidly out of the Cholesterol scare and is, to this day, being maintained in order to keep the sales of vegetable oils high. Yet as we will soon see, more than any other single dietary factor, it is the vegetable oils used for our 'good health', and promoted by the American Heart Association, that actually contribute to the pathology involved in Coronary Thrombosis.

What about margarine and hydrogenated vegetable oils? What liquid vegetable oils do to destroy your arteries, these solidified, synthetically combined fats do ten times faster! The Liver must process all fats. When artificially assembled fats are ingested, the Liver cannot recognize them and they are subsequently poorly metabolised.

If everything you have been told about fats is wrong, what should you eat? How about taking a lesson from our grandparents and great grandparents? What did they eat?

Remember before the turn of the last century Heart Disease was virtually unknown, yet their diet was higher in fat than ours. They ate lard, butter and other natural fats. Vegetable oils were not available commercially and margarine had not yet been invented.

It is interesting to note that if you chart the rise in Heart Disease, it increased at the same rate as the consumption of vegetable oils. Should that not be telling us something?

What about eggs? The long-suffering egg has been the staple of human diets around the world for thousands of years. The late Adelle Davis, pioneer nutritionist, often said that the egg was the most perfect food for man. Since Cholesterol doesn't cause Heart Disease, neither does the Cholesterol in eggs. Additionally, eggs contain a substance called Lecithin, which naturally metabolised the fats in eggs including the Cholesterol.

We will now explore the real cause of Heart Disease and show you how you can prevent and even reverse the ravages of Atherosclerosis, thereby reducing your risk of Coronary Thrombosis by at least 80 percent.

If Cholesterol is OK ...What's the Problem?

Since science has proven that Cholesterol doesn't cause Heart Disease, what does? Remember the studies conducted in the 1970's at leading medical centres that we mentioned earlier? Let's take a closer look at what they found:

- Atherosclerosis occurs only in arteries, never in veins
- Atherosclerosis occurs primarily near the junction of two arterial branches and only select arteries are usually involved.
- Cholesterol is the last substance to stick to the artery wall. By the time Cholesterol arrives, 90 percent of the damage leading to the disease process has already occurred.

Let's analyze these findings in order to illustrate the real cause and, subsequently, the method for reversing this problem.

The idea that Cholesterol doesn't cause Heart Disease is further supported by the fact that Atherosclerosis never occurs in the veins but only in arteries.

Yet the same amount of Cholesterol circulates in the veins as in the arteries. The reason why this happens is the answer to the real cause of the condition.

When we look at a vein dissected through the middle, we find that it contains two layers, an inner and outer layer.

An inspection of an artery, however, shows us that it has three layers, the inner and outer layer as with veins, but also a middle layer of muscle tissue.

This muscle layer is responsible for ensuring that blood leaving the heart reaches the furthest extremities while maintaining proper blood pressure. Also, under stress, this muscle wall constricts, increasing blood flow and oxygenation to the body. But, it is this same muscle wall that allows Atherosclerotic plaque to begin to build.

Of all the various types of tissues found in the human body, one of the most susceptible to what we call Free Radical DNA Damage is the muscle cell.

The DNA of each and every cell in your body carries the genetic code. When this DNA is attacked by chemical Free Radicals, they can change or mutate the DNA of specific cells, causing them to multiply out of control.

There are numerous Free Radicals formed in the body under various conditions, but the specific Free Radical action that appears to attack arterial muscle tissue comes primarily from the oxidation of polyunsaturated vegetable oils. This would explain why Heart Disease has risen at roughly the same percentage rate as the consumption of these oils. Further, the heating of vegetable oils accelerates the Free Radical formation from them a thousand-fold.

Once the Free Radical is circulating in the blood stream, it attaches itself to the inside of the artery wall and begins to literally drill a hole into the inner layer of the artery. Once it reaches the middle muscle layer, it attaches itself and begins to alter the structure of the cell.

Changes occur in the outer Lipoprotein layer of the cells first and, over time, slowly change the structure and genetic code of the entire cell. When this cell eventually dies, as all cells do, it will replace itself not as the original but forever more, as the mutated, altered variety.

One of the characteristics of these mutated muscle cells is that, similar to Cancer cells, they multiply at a much more accelerated rate than the healthy cells around them.

This creates a thickening of the middle muscle wall of the artery and over time, ruptures the inner wall of the artery, creating a bulge. This concentration of cells causes an increase in the production of Cholesterol at that site.

The final step in the disease process is what has been called calcification of the artery. Calcium circulating in the blood stream is attracted to the fibrous plaque formed at these damaged arterial sites, and is held to the plaque by an electrical charge. The addition of this alkaline, rocky calcium further hardens the artery.

This plaque building process continues as the Calcium attracts additional material from the blood stream, including Cholesterol, Triglycerides, and Carotene, all naturally present in healthy people. A positive/negative electrical process again creates this attraction. The Calcium is very positive in this divalent form and draws various blood lipids like a magnet. If this process continues unabated, the plaque will grow in size and become thicker and thicker, eventually closing off the blood flow.

It is important to understand that even if the Cholesterol levels in the blood stream are normal or low, it will still be attracted to the Calcium now lining the arteries in strategic places. This is why we say that Cholesterol does not cause this disease and lowering Cholesterol will not prevent or stop it!

Let's review the most common causes for Free Radical formation in the body so that you can begin to avoid them as if your life depended upon it, because it does.

- Consumption of unsaturated oils, especially if they have been heated. Instead, use saturated fats in moderation and for cooking, use only olive oil. This wonderful oil may be used cold or heated in cooking with complete safety. Throw all other vegetable oils away!
- Smoking cigarettes. Chemicals in the tars, which have been added to cigarettes, are the problem, not the nicotine.
- Inhalation of toxic chemicals such as chlorine, carbon monoxides, etc.
- Constipation, which release Methyl Cholanthrene into the blood stream. Be sure your bowel movements are regular and healthy. If not, we suggest a colon-cleansing product.
- Exposure to radiation from a variety of sources.
- Chlorinated water.

With but a few exceptions, most of these points can be addressed and avoided or greatly reduced in our lives with just a little modification of lifestyle. Smoking cigarettes and using vegetable oils, other than olive oil, are the two greatest factors, something all of us can correct if we truly value our health.

There is certainly enough good information regarding the dangers of cigarette smoking that it need not be covered here.

But because the idea of avoiding vegetable oils is so new and contrary to virtually everything we have ever been taught, let's take a closer look at the clinical evidence and find out what these dangerous oils really do in the body.

As early as 1974, the real dangers of Polyunsaturated Oils began to be realized. Studies at the time involved animals and the feeding of various groups of swine. Swine were used because of the similarities in the Cardiovascular System to humans.

The results of the studies were shocking. Researchers found that, overwhelmingly, the pigs fed a diet of margarine and other hydrogenated fats, had the greatest degree of hardening of the arteries. The next greatest group was the one fed a high sugar diet.

Conversely, the group fed butter, as the main fat had almost no arterial damage at all. Further, the group fed a diet high in eggs had virtually clear arteries altogether!

The tests further showed that it was not just Polyunsaturated Oils and Hydrogenated Fats like margarine that were to blame but also egg substitutes. These products became very popular for a time during the height of the Cholesterol scare. Fortunately, their popularity is declining because they can kill you! Studies done on various animals fed egg substitutes showed severe upset in the blood lipid profiles and all were dead very prematurely.

Further evidence against the use of Polyunsaturated Oils comes from studies done on aging and wrinkling of the facial skin. The group of test subjects who consumed high amounts of Polyunsaturated Oils showed marked clinical signs of premature aging, while looking physically older as well.

Yet, another study following patients adhering to the American Heart Association's printed diet, which suggested a 15 percent intake of polyunsaturated oils, showed that they developed a significant increase in Uric Acid in the blood.

Elevated Uric Acid levels are a risk factor in Heart Disease and indicate the destruction of cellular nucleoprotein.

The Sugar Connection

While attention has been fixated upon the Cholesterol Myth regarding Heart Disease pathology, we have totally overlooked increasing dietary factor, which contributes to more Heart Disease than Cholesterol ever will.

The over consumption of sugar and sugar-forming foods in the diet may be linked to virtually every Chronic Degenerative Disease process. Outside of the obvious connection between sugar consumption and such diseases and conditions as Hypoglycemia, Diabetes and Obesity, sugar has been linked to Arthritis, Osteoporosis, and most definitely, to Heart Disease.

Triglycerides, the largest fat molecules in the blood stream, are from excess carbohydrate.

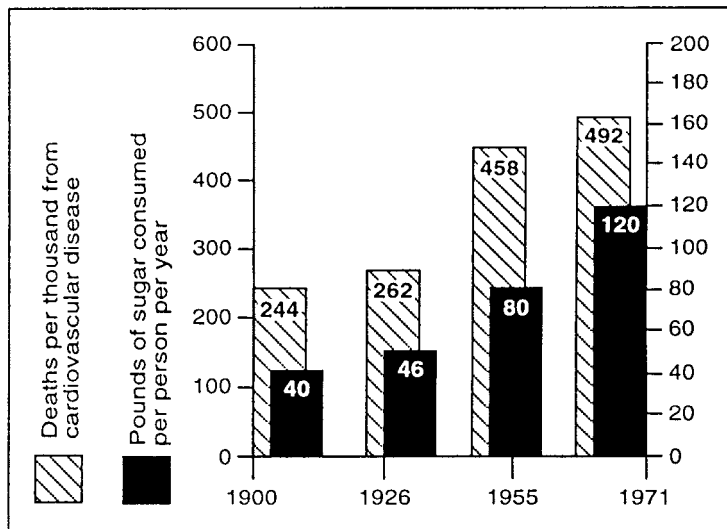
While these fats are normally stored in the fat cells of our bodies, they can circulate in the blood stream and reach dangerously high levels.

Work done by *John Yudkin* and others have, clearly linked the consumption of sugar with an increase in Ischemic Heart Disease as far back as 1957, yet our focus remains on Cholesterol. According to the findings of Yudkin, excess sugar consumption is just as great a risk factor in the progress of Coronary Heart Disease as is the practice of cigarette smoking.

The following graphs illustrate the direction relationship between dietary factors such as an increase in vegetable oil consumption and sugars along with a decrease in egg consumption. The complete misunderstanding of the cause of heart disease caused all of these problems. By making the dietary changes we have actually contributed to a dramatic increase in the incidence of this condition.

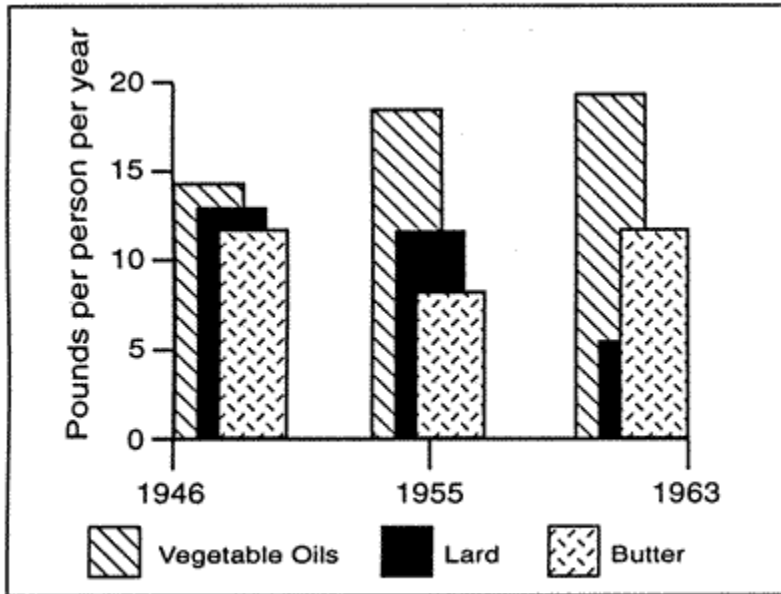
Sugar and Atherosclerosis:

The graph clearly shows that as the amount of sugar consumed per year increased, so did the number of deaths from cardiovascular disease

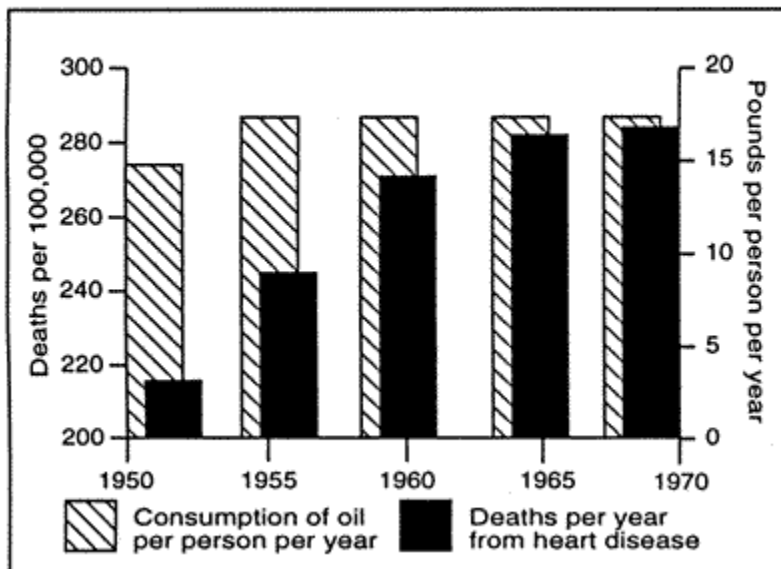


Vegetable Oils vs. Lard & Butter:

These two graphs compare the trend of replacing natural saturated fats like butter and lard with polyunsaturated vegetable oils. You can see, once again, that as vegetable oil consumption increased, deaths from Heart Disease rose almost at the same rate.



	1946	1955	1963
Total Animal Fat	22.3	19.1	13.3
Total Vegetable Oil	14.4	17.7	19.0

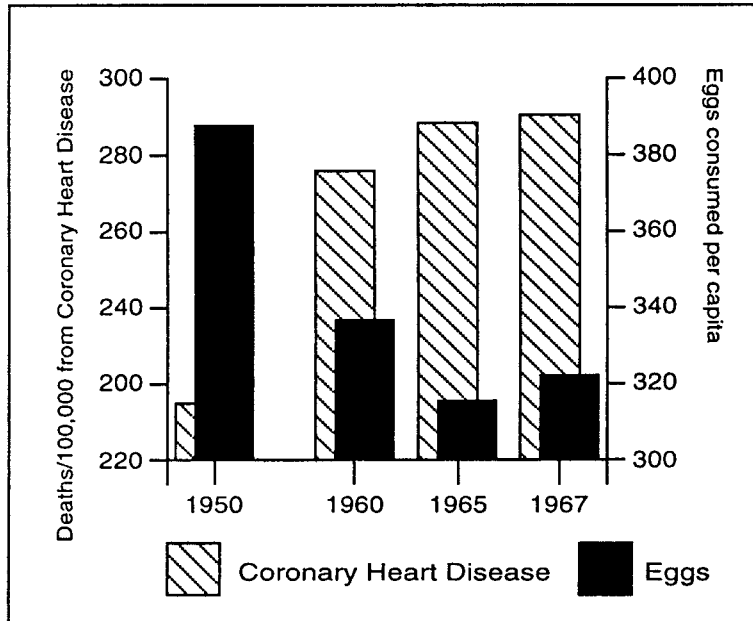


Correlation Between Egg Consumption and Deaths from Heart Disease:

One of the saddest outcomes of the Cholesterol scare was the drop in the consumption of eggs. Eggs are the most perfect food for man. Clinical studies have shown that a diet high in eggs, and other quality protein foods, being low in sugars and sugar-forming foods, can lower

Cholesterol levels in the blood faster than all the leading drugs combined.

You can see by the graph below that as egg consumption decreased, Coronary Heart Disease increased by nearly the same opposite rate.



Now that we have made our case concerning what does not cause Heart Disease, let's take a look at what does.

There are 8 major risk factors, which directly lead to Atherosclerosis.

- **Heredity** – If Heart Disease runs in your family, you have a much greater chance of developing this condition yourself.
- **Calorie Imbalance** – Consuming the wrong type of fats and oils as well as the over consumption of sugar and sugar forming foods.
- **High Blood Pressure** – This condition damages the arteries and inner workings of the heart muscle, making them more susceptible to Free Radical damage and increased site Cholesterol formation.
- **Smoking** – Cigarette smoking, and the chemicals put into most cigarettes; make the tars a prime source of Free Radical formation. Nicotine is not the problem, in spite of what we have been told.

- **Antioxidant Deficiency** – These nutrients protect the cells of the body from Free Radical damage as well as prevent the formation of the oxidative Free Radical in the first place.
- **Vitamin E Deficiency** – In the absence of adequate vitamin E, plaque formation within the arteries leads to Coronary Thrombosis.
- **Lack of Exercise** – A sedentary lifestyle further deteriorates and already damaged cardiovascular system.
- **Stress** – I have often said that stress is the cardinal or major cause of all disease and disorder within the body. We find it as a factor in almost every condition, and here it is again!

Stress can wreak havoc with the cardiovascular system through over stimulation of the Adrenal Glands. This leads to excess adrenalin in the bloodstream, which constricts arteries and accelerates Free Radical proliferation.

Once again, we can see that many of these risk factors may be eliminated or greatly reduced with little impact in our lives. Such steps as taking Full Spectrum nutrition supplements with an emphasis upon the anti-oxidant nutrients, and specialized nutrient combinations designed to help reverse the plaque forming process will help.

(See last section of this Report for specific protocols and recommendations.)

Reducing or managing stress, as well as getting a little exercise, will further improve your odds of beating this number one killer.

What About Cholesterol-Lowering Drugs?

Drugs that have been designed to lower blood levels of specific lipids such as Cholesterol and Triglycerides do not have any effect on preventing Heart Disease, nor have they ever demonstrated a benefit in preventing a recurrent Heart Attack. This, we are told by the United States Department of Health, Education and Welfare through a report from the National Heart, Lung, and Blood Institute's Coronary Drug Project.

Drugs that block the absorption of Cholesterol from foods can be very dangerous since they would prevent the absorption of Fat-Soluble Vitamins, Essential Fatty Acids and other fat-like nutrients.

It is important to remember that the body needs fats for proper metabolism and life function. The fanatical elimination of fats from the diet, combined with drugs that further prevent fat absorption, will lead to a variety of health conditions as time progresses.

Heart Disease Prevention & Management Program

Probably one of the most important nutrients in the prevention of Heart Diseases from many causes is Vitamin E.

For over 50 years, *Drs. Wilfrid and Evan Shute* have been achieving great results in preventing and even treating cardiac patients with a program revolving around the use of Vitamin E. After over 50,000 patients, they believe that Vitamin E is essential in any cardiac program.

Vitamin E provides multi-functional benefits. Tocopherols, the active compounds found in Vitamin E, exercise several important benefits upon the cardiovascular system.

- Tocopherol is an anticlotting agent, preventing blood clots throughout the cardio-vascular tree.
- Tocopherol helps dissolve existing blood clots.
- Tocopherol increases the blood's supply of oxygen.
- Tocopherol improves the efficiency of the heart, thereby reducing the demand for available oxygen.
- Tocopherol prevents scarring of the heart muscle after a heart attack and accelerates healing.
- Tocopherol is a vasodilator and strengthens capillary permeability.

Vitamin E has also been shown to be beneficial in the treatment of angina. In a clinical study reported in the New England Journal of Medicine, patients given 400 IU of Tocopherol, four times per day, were able to reduce their need for Nitroglycerin significantly.

Other Anti-Oxidant Nutrients

Since the prevention of Free Radical formation by oxidation is essential our goal, the anti-oxidant nutrients must be a part of our program. In addition to Vitamin E, other nutrients can also offer this much-needed protection.

Vitamin C, an antioxidant, provides protection against Free Radical substances by keeping them in solution, thereby allowing the kidneys to better eliminate poisons. Vitamin C stimulates the production of enzyme Lipoprotein Lipase (LPL), which acts as a cleansing agent against the artery wall. Lastly, Vitamin C is essential in our over-all program as it is a co-factor with several other ingredients in the protocol.

The B-Complex nutrients, Vitamins B1, B-2, Niacin, Pantothenic Acid, B-6 and PABA, are all-synergistic with each other and provide antioxidant benefits in their own right. They all work hard to prevent the formation of Free Radicals within the body.

The mineral, Selenium, is one of the most powerful antioxidants known. It is estimated that it exercises from 200 to 500 times more antioxidant benefit than even Vitamin E. Both Vitamin E and Selenium prevent damage to tissues by Free Radicals.

The Amazing Amino Acids

Recent research into the science of applying isolated Amino Acids to specific disease conditions continues to prove both beneficial and rewarding. Heart Disease and the processes by which it develops are no different.

One of the most well known Amino Acids relating to the cardiovascular system is L-Carnitine. This Amino Acid helps the body to utilize fats at virtually every level. L-Carnitine has been used, clinically, in both the prevention and treatment of Heart Disease and other cardiac related conditions.

It is essential in the management of congestive heart failure because it strengthens the stroke or beat of the heart. L-Carnitine naturally lowers or regulates blood fats as well. One note of caution: Carnitine can be purchased in two forms L and dl. **DO NOT USE THE dl FORM!** Because the dl form of Carnitine is less than one/tenth the cost, most companies elect to use this form, but the bottom line is that only the L form has any effect upon your heart.

Another Amino Acid, much less known than L-Carnitine, is called Cysteine Hydrochloride. This wonderful Amino Acid protects against damages caused from radiation of all types by actually terminating the Free Radicals through ionising the radiation. Further, Cysteine Hydrochloride is a powerful chelating agent, attaching itself to a variety of minerals and carrying them out of the body via the urine.

Other Essential Co-Factor Nutrients

In addition to the Amino Acids and Antioxidants, there are several other nutrients and nutrient co-factors which have been shown to be of benefit in both the prevention and treatment of Heart Disease.

Vitamin A must be both considered and included in any program for Heart Disease and cardio-vascular health. This vitamin protects the mucosal linings, your body's first line of defense against invading microbes. It also increases the size of the Thymus Gland, the center of your immune system, allowing for greater antibody production. Lastly, Vitamin A works with Selenium, and together they are much more powerful than either one alone.

Choline and Inositol are two B-Complex factors, and together with another Amino Acid, Methionine, they form a group of nutrients called Lipotropics. Lipotropics are responsible for metabolising fats in the liver. If you have elevated Cholesterol to an excess, it is a liver problem not necessarily a dietary imbalance. The Lipotropic group will improve liver function and lower blood lipid levels naturally without the side effects of many of the cholesterol lowering drugs. Further, Methionine is needed by the body for its powerful detoxification properties.

Another very effective Free Radical inhibitor, although not an antioxidant, is the mineral Zinc. Vitamin A cannot function in the body without Zinc so they must be present together in order to be effective.

The late JL Rodale, a pioneer in the modern nutrition revolution and a heart patient himself, often said that the greatest heart tonic in the world was Hawthorne Berry. He was so impressed with the ability of Hawthorne Berry to improve cardio-vascular health that he wrote an entire book on the herb.

Gingko Biloba and Dimethylglycine are two compounds, which have the ability to increase the oxygen content of body tissues. The oxygenating benefits of a good exercise program are worthless if the cells of the body cannot absorb the oxygen from the blood stream. Gingko Biloba and Dimethylglycine dramatically increase the cells ability to take up oxygen.

Co-Enzyme Q10 is another nutrient that we feel is vital to cardio-vascular health. CoQ10 actually reduces angina and improves cardiac function. Heart patients taking CoQ10 consistently have better exercise tolerance than those who do not.

For those who already have Heart Disease, increasing available oxygen to the cells of the body is critical. Along with some of the nutrients we already mentioned, Germanium, a rare trace mineral, increases the

oxygen of each cell, thereby decreasing oxygen deficit symptoms such as Angina.

Chondroitin Sulphate, a nutrient known for its benefit to the connective tissues of the body and therefore widely used in the management of arthritis-like problems, is also beneficial to the heart. Chondroitin Sulphate has natural anti-coagulant and anti-thrombogenic properties, which prevents blood fat clumping, while being a natural anti-clotting agent.

Other Nutrient Factors To Consider

In addition to adding nutrients for their cardiac benefits, we must consider one of the most important factors in the progression of Atherosclerosis, namely Calcium build-up on the artery walls. One of the most effective ways of assisting the body in the removal of this unwanted form of Calcium is to increase the acidity of the body and to, temporarily, reduce the available Calcium.

Under this condition, the body is able to take the Calcium off the artery wall and put it back into solution in the blood stream. Once the Calcium has been 'chelated' off the inner artery wall, the Cholesterol and other blood lipids can no longer adhere to the site. Since Copper and Manganese are necessary for the absorption of Calcium, they too must be included.

Because the immune system of the body is important in the management of abnormal cell formation, and since the explosive multiplication of cells is at the root of the Atherosclerosis problem, supporting the immune system is important. Two ways in which we can further stimulate the immune function naturally is through the use of extracts of Spleen and Thymus nucleoprotein.

Lastly, we must not forget the role that Fatty Acids, especially the Omega-3 group, play in maintaining good blood chemistry. Also, Fatty Acids from marine lipids act to prevent blood fats from sticking together to form clots.

It may easily be seen that while the science of nutrition can offer many things to help prevent and manage modern society's most deadly killer, the program can be a bit overwhelming. Because of the many factors that both directly and indirectly affect cardiovascular health and well being, the list of nutrients and nutrient co-factors is rather complex.

If you were to go out and try to purchase all of the nutrients we have discussed, it would be challenging, time consuming and costly. Further, ratios are extremely important in any program wherein we hope to create a chelating environment.

Too much or too little of certain nutrients can dramatically reduce the effectiveness of this program. For this reason, we have assembled a Master Protocol, which reflect what we believe to be the ideal diet and nutrient combination in the management and promotion of cardiovascular health.

Dietary Protocol for Cardio-Vascular Support

The following steps should be taken to alter your dietary habits as soon as possible.

1. Eliminate ALL polyunsaturated vegetable oils from your diet. This includes restaurant foods cooked in these refined oils
2. Eliminate the use of all `plastic' fats such as margarine, hydrogenated oils and other synthetic products, which are rapidly becoming popular.
3. Limit the calories from fat to no more than 25 or 30 percent unless you are very active.
4. Use olive oil for both cold and hot food applications.
5. Eat fruits and vegetables as close to their raw, natural state as possible.
6. Ensure that you get at least 60 grams of high quality protein every day.
7. Avoid the over-consumption of processed protein foods such as cold meats, cheeses and other foods containing nitrates.
8. Reduce the amount of refined carbohydrates and sugars in the diet.

Lastly, while not dietary in nature, begin a regular exercise program according to your fitness level and physical condition. If you have not

exercised for some time, consult a professional to start you on the right foot.

Nutrient Protocol for Cardio-Vascular Support

Full Spectrum Nutrition

Every day the body needs at least 120+ nutrients, including amino acids, fatty acids, vitamins, minerals, phytonutrients and antioxidants. These essential nutrients should form the base line of nutrition for everyone. Those suffering from heart disease are certainly no exception.

We suggest that these base line nutrients be supplied in a highly absorbable liquid delivery system.

Specific Targeted Nutrition

Vitamin C	1200 mg
Vitamin E	200 IU
Niacin	50 mg
Vitamin B6	25 mg
Folate	800 mcg
Vitamin B12	600 mcg
Calcium	300 mg
Magnesium	300 mg
Choline	450 mg
Cysteine	450 mg
Taurine	200 mg
Gingko Biloba	30 mg
Carnitine	100 mg
Dimethyl Glycine	50 mg
Coenzyme Q10	20 mg
EDTA	400 mg

This combination should be taken daily. In cases of a more acute nature, we often use the above, twice per day for the first 3 months.

The preceding formulation is the exact combination, which has been tested and used with excellent response, since 1979. It represents what we feel to be a good preventive dosage. For those who have a more acute cardio-vascular problem, we recommends using 50 percent more for the first 90 days to accelerate the positive benefits. These nutrients, in the above rations, may be found in several formulas.

Additional nutrient support to enhance overall cardio-vascular health would include:

- Omega 3 and Omega 6 fatty acids supplied in air-tight gel capsules only.
- Male or female glandular extracts
- Liquid plant-derived trace minerals
- A colon cleanse if constipation is a problem, or toxicity has been a concern.

Each of the formulas and protocols detailed in this Special Report are available exclusively from Phoenix Nutritionals.

Contact www.PhoenixNutritionals.com or by telephone at 1-800- 440-2390 or 858-217-2412 or email Questions@PhoenixNutritionals.com

Conclusion

As with all chronic degenerative diseases, Heart Disease can be prevented and once developed, the condition may be greatly improved. But we must take action.

Medicine has been approaching these conditions in a reactive manner, failing to seek and understand the implications of their cause.

Every degenerative disease, without exception, is the result of an imbalance of the body's internal biochemistry over years or even decades of time. Through providing the raw materials needed by the body for health, and through eliminating the artificial and excessive factors provided by a modern junk food diet, we can reverse the tide towards degenerative disease and concentrate on a focus, which will result in optimal health.

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