



HEALTH BITS & PIECES

By Bill Sardi

◆ The Vitamin-D revolution is underway and when and if the public catches on and begins practicing daily supplementation, mortality rates are sure to decline significantly, seasonal influenza will

be abated, wintertime heart failure diminish, the need for most vaccines and antibiotics would be abolished, autism would likely disappear, the use of anti-depressants would drop, and cancer rates would decline beyond what anyone could possibly anticipate. In fact, Vitamin-D deficiency is implicated in most diseases of civilization, writes Dr. John Cannell of The Vitamin D Council. Natural Vitamin-D levels, those found in humans living in a sun-rich environment, are between 40-70 nanograms per milliliter of blood serum, a level obtained by few modern humans. Treatment of Vitamin-D deficiency in otherwise healthy patients with 2,000-7,000 IUs of oral Vitamin D per day should be sufficient to maintain year-round Vitamin-D levels between 40-70 nanograms per milliliter. [*Alternative Medicine Review*, 2008 Mar; 13(1):6-20] There is so much Vitamin-D research being reported that it deserves to hog this whole column. For example:

Blood Concentration/Disease Prevalence

Vitamin D levels Nanograms/milliliter Nanomole/liter	Lower Less than 20 Less than 50	Medium 20-29 50-73	Optimal Greater than 30 Greater than 74	Percent difference
Coronary heart disease	7.3%	6.7%	5.3%	-28%
Heart disease	3.2%	2.4%	1.5%	-28%
Stroke	3.2%	2.0%	2.5%	-22%
Peripheral artery disease	7.7%	5.0%	3.6%	-54%

Source: American Journal Cardiology Dec 1, 2008 102: 1540-44

It takes about 5000 IUs of Vitamin D3 per day to achieve this optimal range cited above.

Researchers at the Eunice Kennedy Shriver National Institute of Child Health and Human Development, National Institutes of Health in Bethesda, Maryland show that women who develop gestational diabetes (during pregnancy diabetes) have lower Vitamin-D levels. About a third of the pregnant women tested exhibited frank Vitamin-D deficiency. [*PLoS ONE*, 2008; 3(11):e3753]

While Mediterranean lands like Greece are known as sunny countries, the majority of nursing-home patients in southern Greece were found to be Vitamin-D deficient and prone to bone softening (osteomalacia). [*J Endocrinology Investigation*, 2008 Sep; 31(9):784-7]

More disconcerting is the discovery that Vitamin-D deficiency during prenatal and early-life may increase susceptibility to diseases like cancer, osteoporosis, and autoimmune diseases later in life. [*Nutrition Reviews*, 2008 Dec; 66(12):710-20] Vitamin-D deficiency produces profound and permanent changes in the prenatal brain. [*Nutrition Reviews*, 2008 Dec; 66(12):726-9]

◆ Supplemental oral zinc is often employed when anorexic patients are being treated. The idea of using zinc to encourage food intake now has some science behind it. Zinc supplementation causes an increase of ghrelin in animals. Ghrelin is a hormone that is known to increase food intake. [*The Journal of Nutritional Biochemistry early online*, Oct. 15, 2008] This discovery has good and bad applications. Supplemental zinc may be worth putting in baby foods to encourage eating, but added to the food supply of middle-agers, it may promote obesity. Further studies will tell.

◆ A question arises: What should the 1 million-plus adults who experience a heart attack do nutrient-wise after a heart attack? An animal experiment sheds some light on the answer to this question. Rodents were subjected to an intentional heart attack and later circulation to the heart was allowed to resume. Prior to the heart attack, animals received 300 mg of the amino acids carnitine and taurine and the antioxidant Coenzyme Q10, and for the four weeks following. Survival significantly improved from 34% to 60% and reduced the size of dead tissue in the heart from 42% to 30%. [*Nutrition, Metabolism and Cardiovascular Diseases*, 18 (10) 647-706, December 2008]

◆ A study was conducted among 11,135 Northern Italian men, 18-94 years of age, and compared against 1927 men living in New York. Those men who drank 4 or more alcoholic drinks per day were the least educated and had the highest rates of smoking and high blood pressure. However, men who consumed their alcohol with food exhibited far lower rates of high blood pressure. Abstainers had the lowest rate of hypertension. [*Nutrition, Metabolism & Cardiovascular Diseases, early online*, August 3, 2008]

◆ Researchers in Greece examined 1514 men and 1528 women who exhibited no evidence of cardiovascular disease. Five years later these researchers attempted to determine which dietary patterns in this group of adults produced the highest rate of heart disease and strokes. A diet pattern mainly characterized by sweets, red meat, margarine, salty nuts intake, and hard cheese, as well as alcohol intake, was associated with higher cardiovascular disease risk. The incidence of cardiovascular disease was 11.0% among males and 6.1% in females. A dietary pattern characterized by consumption of small fish, whole-grain cereals, biscuits, and olive oil produced a cardiovascular disease nearly half that of the most-risky dietary pattern. [*Nutrition, Metabolism and Cardiovascular Diseases, early online, August 21, 2008*]

◆ It works better and faster than drugs to control blood pressure, cholesterol, and markers of chronic inflammation. And it has been proven in a controlled human study of 111 healthy adults. In just 3 weeks, oral Camellia sinensis capsules lowered blood pressure by 4-5 points. Inflammation dropped by 12%. Men experienced about a 10-point drop in LDL cholesterol. Camellia sinensis is the botanical name for green tea. [*Nutrition, early online, October 9, 2008*]

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ARIZONA HEALTH-FREEDOM PROPOSITION NARROWLY DEFEATED

In the recent American 2008 elections, various States had propositions on their ballots for citizen consideration and voting. In Arizona, one such proposition was Proposition 101 (the "Freedom of Choice in Health Care Act"), which was an initiative on its Nov. 4th ballot proposing to amend the Arizona Constitution to ensure freedom of choice in health plans and the right to pay privately for lawful medical services.

Unfortunately, Proposition 101 did not pass. While Proposition 101 won in 12 out of 15 Arizona counties, it failed to pass on the Statewide popular vote by 1,048,624 to 1,039,585 votes (50.2 to 49.8 percent), a very small

margin. The Proposition's backers, Drs. Eric Novack and Jeffrey Singer, announced, "We regret that we were unable to overcome the significant financial disadvantage we had and the intervention of the Governor and a major state agency in the campaign. Regardless, we are proud of the effort we put forward and are looking forward to continuing to be a part of the health care reform discussion in our state well into the future."

Given the close vote, this proposition will almost certainly be placed back on the Arizona ballot in 2010 for voter approval.