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NATURAL MEDICINE

Issue 2: August – November 2011

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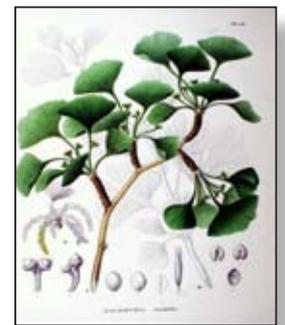
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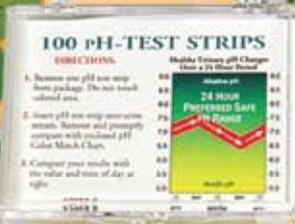
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– Hippocrates



Contents

- 6 Introduction
- 7 Letters to the Editors
- 12 Better Health on a Shoestring
- 13 Health News Alerts: Paracetamol and cancer; Vitamin D in breast milk; Vitamin D and Crohn's Disease;
- 21 Health Freedom Report
- 23 Mental Health Pages
- 34 Does Faith Healing Really Work?
- 36 What's in Your Toothpaste?
- 38 Organic v Conventional Foods – Analysis
- 40 The Vaccine Section
- 55 NZ Native Medicinal Plants: Manuka
- 56 The Case for Meat
- 59 Ginkgo Biloba: The Longevity Herb
- 62 What You Should Know About Fats and Oils
- 67 SCENAR Technology – Something Out of 'Star Trek'?
- 70 How Much Iodine is Enough?
- 71 Did Medical Marijuana Save This Baby's Life?
- 73 Understanding Erectile Dysfunction through Ayurvedic Medicine
- 75 The Top 4 Homeopathic Remedies to Heal Burns
- 76 Traditional Chinese Medicine for Endometriosis
- 81 Is This a Non-Surgical Cure for Cataracts?

83 BOOK REVIEWS

- The Immune System Reconsidered; • **AUTISM**: Good News for the Alphabet Kids: How to reverse learning and behavioural disorders without drugs; • Pesticides and Breast Cancer: A Wake Up Call

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Introduction

Welcome to the second issue of *The New Zealand Journal of Natural Medicine*.

Thank you to everyone who has supported the journal thus far. We have been very encouraged by the positive feedback that we have received from our readers and advertisers, alike.

Since our first issue went to press, it has become clear from media reports that stress levels are rising in New Zealand due, in part, to the effects of the Canterbury earthquakes. While people Christchurch are obviously the worst affected, the ripples from the quake are spreading nationally. For this reason, this issue features information on different therapies that help with stress. It also includes a reader's story of recovery from chronic, disabling depression using nutritional medicine. A must read!

The topic of vaccination also features prominently in this issue, thanks in part to the government's determined effort to push vaccines on nearly everybody for as many things as the pharmaceutical companies "develop" them for – regardless of the fact that they can cause serious chronic disease.

The New Zealand government has now responded to the Report of the Health Select Committee on increasing vaccination completion rates and is considering a range of coercive measures designed to implement this agenda. For more information on this important issue please see page 21 and visit www.no-forcedvaccines.org and sign up to receive regular updates.

Here in New Zealand there are (gosh!) some cases of measles appearing in the community. (As of this writing, there have been seventy-two cases.) One of our cover stories, "What Worse: Measles or the Vaccine?" discusses the potential benefits and risks of both a natural measles infection and the MMR vaccine.

Fear is one of the best ways to sell "security", as we are learning year by year, and fear of the measles (and cervical cancer, etc) has driven the sales of vaccines – at the expense of the health of the people. More vaccines actually equals higher infant mortality, as we show in a peer-reviewed study (See page 49). "Better educated" parents are now seen by the government as an obstacle to increased vaccination rates. Wonder why?

One reason that many parents choose not to vaccinate their children with the MMR vaccine is that they are aware of the link between MMR vaccination and the subsequent regression into autism in some children.

The website of the Ministry of Education states that one in one hundred New Zealanders is now estimated to have an autistic spectrum disorder. Autism can have many causes and some of these causes are treatable – so autism is not always a lifelong affliction. In this issue I review Michael Sichel's book *Good News for the Alphabet Kids* in which he discusses the causes of autism and other neurodevelopmental issues such as hyperactivity – and outlines his therapeutic programme that has resulted in significant improvements in general health and consequently behaviour in many children with these conditions.

In my column "Better Health on a Shoestring" I take inspiration from Hippocrates' immortal adage: "Let thy food be thy medicine and thy medicine be thy food" and include a recipe for a salad that includes common weeds that contain vital vitamins and minerals.

During winter and early spring when a sunny day may be a rare treat, it's important to be aware that your body's stores of vitamin D can become depleted. Vitamin D deficiency can reduce immune system function, increasing vulnerability to infection and is also associated with increased risk of developing some cancers. It is particularly important to ensure adequate vitamin D status during pregnancy and breast feeding, as vitamin D deficiency in babies can put them at risk of developing rickets. I have recently noticed a number of children who were obviously well cared for who were showing early signs of rickets – hence the inclusion of an article discussing the vitamin D content of breast milk.

Chronic pain, especially lower back pain, affects many people at some time in their lives. It is a hazard of certain occupations such as those that involve heavy lifting or working at a computer for long hours with insufficient breaks. We have recently been experimenting with a SCENAR treatment device, using it to treat back pain and found it very helpful. You can learn more about this technology on page 67.

Last but not least, this issue includes an article about a non-surgical treatment for cataracts using eye drops that contain *n-acetylcarnosine*. Given the long waiting list for cataract surgery in the NZ public health system, this appears to be a treatment option well worth considering for anyone who is developing cataracts.

Wishing you all the best of health,

– Katherine Smith, Editor

"The art of pharmacy turned to the production of drugs which could bring the quickest relief of symptoms, ignoring the reason that the symptoms appeared. As we look back perhaps it is time to reconsider the path. The use of substances has spawned a myriad of unexpected problems, such as suppression of the very signals that our bodies produce to alert us to a need of change. Pain itself is a call to action – a call to remedy an imbalance in our lifestyle. The proficient use of herbal therapy is directly connected to our ability to sense that first signal and to adjust our lifestyle accordingly. It is when these signals are continually ignored that disease has a chance to seat itself more deeply within our bodies. The appropriate use of herbs is one of many health alternatives to our medical system."

– From the *Pocket Herbal Reference Guide*, by Debbra St.Clair, MH (Master Herbalist)

TGA in New Zealand?

To the Editor:

Recently the Government has announced plans to regulate the natural and herbal products industry in NZ. John Key our Prime Minister has just signed an agreement in Canberra which will eventually mean that a body in Canberra (ANZFA) will regulate NZ herbals. This is the same body that has banned Ayurvedic medicine in Australia.

http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=10733394

Under the proposed legislation, which will be introduced to Parliament early next year, the Ministry of Health will regulate NZ herbal formulations for five years under a scheme which will be administered by Medsafe (the arm of the Ministry of Health which currently regulates pharmaceutical ingredients). This will differ from the Australian system only in as much as Medsafe will presume an ingredient is safe until it has information to the contrary. (In Australia, an ingredient is presumed unsafe until the applicant proves that it is safe.) The proposed NZ approach sounds a lot softer and it has been marketed to NZ natural products manufacturers as such. When you look into the details there will be little difference between the approaches in Australia and NZ. Both are run by medical professionals whose paradigm is based on chemically reconstructed single active ingredients. They oppose natural medicine as inherently unreliable, unsafe, and unsanitary since whole plants are used.

The actual process of applying the legislation in NZ will be as follows: NZ companies and importers will submit a comprehensive list of ingredients contained in their products to Medsafe. They will be allowed to continue to sell their products while Medsafe conducts its own assessment. Medsafe will compare the ingredients with lists of herbs whose effects are known and rule on their safety. Medsafe will be sharing information with ANZFA in Australia and this is the real danger zone, since ANZFA has already ruled erroneously that many of the common plant ingredients in Ayurvedic supplements are known to be unsafe. In most cases they have derived such information from suspect international databases which classify herbs as unsafe without any scientific testing. Since traditional Ayurvedic formulations contain multiple herbal ingredients,

single herbal ingredients (classified as suspect in error) have been taken as sufficient reason for ANZFA to ban almost all Maharishi Ayurvedic Products (MAP) imports.

Despite submissions to ANZFA and the Australian Ministry of Health, research papers, and onsite visits by Australian officials to our high quality manufacturing facility in India which has achieved ISO standards of purity, attempts by the MAP representatives in Australia to negotiate an import permit for specific products have failed and met a steel wall of opposition. Since the NZ and Australian governments have agreed to share information on this subject, we know that if this legislation goes ahead in its planned form it is only a matter of time before Ayurvedic supplements are effectively banned here. Moreover it is the NZ Government's stated intention to allow ANZFA in Canberra to run the regulatory system for NZ after the initial five year period is up.

Previous attempts by the NZ Government to introduce similar legislation have failed due to public opposition, but this new initiative has somehow co-opted Green support through the use of a professional lobbyist with some persuasive arguments that are big on promises of transparency and fairness, but very short on detail of the actual process. To date Ayurvedic manufacturers and importers have not been involved in substantive discussions. Wayne Perkins and I wrote to a Green MP sponsoring the bill and she wrote back

"Increasingly natural health products are made in China and India and if we have no regulatory system at all then adulterated product could come into NZ and I am sure you wouldn't want that. (Some suggest it already is)."

Which gives you a very real sense of the intent.

We have some real achievements to protect here. There is a growing body of scientific evidence that confirms the remarkable benefits of Ayurveda. Maharishi Ayurvedic Products manufactures Ayurvedic formulations strictly according to traditional methods which have been used safely and successfully for millennia. Ayurveda is the oldest traditional herbal system in the world with a materia medica containing information on the specific action of over 6000 herbs along with information as to how they can be combined and naturally prepared for maximum benefit. The synergistic effects

of these ancient herbal formulations using the whole plant, rather just an chemical copy of the supposed active ingredient, are remarkable. It has taken MAP years to build up an effective system which manufactures and markets traditional Ayurvedic supplements safely, efficiently, and widely using pure tested ingredients in a sanitary facility that meets ISO standards.

The proposed NZ regulation is undoubtedly related to global initiatives to control herbal products, but our previous experience shows that it will be possible to generate public opposition in NZ to this initiative before it is too late. Kiwis are not keen to see the Government regulate what they can do to improve their health. Fortunately all the political discussion on this bill has yet to come and we can act now to influence the process. Why, we ask, is the government trying to regulate a beneficial area of individual life and self-care which has been in use for thousands of years, without any indication that it is causing any harm to anyone?

All the very best,

Guy Hatchard

GM Wheat for Australia?

To the Editors

This may appear to be a 'mere' Oz story; but do remember that Oz is a major exporter of wheat, and most of NZ's bread for several decades has been imported from Oz.

"GM wheat planted, on shelves by 2015 says Government"

<http://www.truefood.org.au/newsandevents/?news=126>

16 June 2011

This year's GM wheat trials have begun, with plantings in the ACT, NSW and WA and claims by the Federal Government that Australians will be eating GM bread by 2015.

GM wheat will be planted in field trials across Australia this year, and our government science body, the CSIRO, plans to have GM bread on supermarket shelves by 2015. This year's field trials are scientific scale trials, which means most are under one hectare in size. But if CSIRO succeeds with their plan for Australia to become the first country in the world to approve GM wheat, we could be facing large-

scale commercial field trials of GM wheat within the next two years.

That means two things; global biotech patents on our daily bread, and inevitable contamination of Australian farmers' conventional and organic wheat crops.

While Australia's GM wheat trials have been dressed-up as "objective", scientific research, a Greenpeace investigation has revealed that global GM companies including Monsanto, Limagrain and BASF are the money behind the trials and are partnered with our so-called public research bodies to push GM wheat approval in Australia.

One of the clearest signs of the power of GM company dollars is the flimsy excuse for a risk assessment that the Australian Government performed before giving the all-clear for corporate scientists and their global biotech partners to release experimental GM wheat into the field. The Government recognises that "Gene technology has the potential to cause unintended effects due to random insertion of the introduced genetic material", but they go on to dismiss the risk of genetic pollution as negligible.

They also dismiss any risk of contamination of non-GM crops from this year's GM wheat field trials, even though all local and international evidence shows that GM can't be contained in the field. The biggest GM contamination event in history started with a small scale field trial of Bayer's GM rice. The single contamination event cost the rice industry \$1.2 billion.

If you don't want GM bread and pasta, if you don't want our farmers to have to fight to prevent contamination of their wheat crop from Monsanto's patented GMOs, tell our Agriculture Minister that you don't want to eat GM bread and will hold his government responsible for any contamination from the GM wheat trials he has approved.

Contact the Minister: senator.ludwig@aph.gov.au to email him, or call his office on (02) 6277 7520

Mental Health?

Dear Jon,

I cannot understand why people don't know what is happening in the mental health system.

Quite often I see or hear from people

whose relatives are pleading for help locked in one of those places or their loved ones have been damaged or committed suicide while on their toxic psychiatric drugs.

Or else I hear from people who used to be on them, have managed to get off the drugs and now are very grateful for their release from the effects. Their lives are much more livable and they are managing nicely but have nothing nice to say about neuroleptics or tranquilisers which made them feel like hell all the time.

While on these drugs they don't act naturally and they give themselves away with their sometimes strange behavior.

Psychiatry talks about shock being called Electro Convulsive Therapy but it is not therapy for the patients. It is merely retail therapy for the pockets of the psychiatrists. I have listened to them talking and they think it is a great joke and the patients are too silly to know what is happening to them or to object if they don't like it. They take advantage of the less fortunate in society.

Patients need advocates to listen to them and stick up for them if they don't want any so called "treatment" of Electro Convulsive Shock Therapy. But the bad laws of this country don't allow for this and don't mention that they can get help. They have to find out for themselves, usually it's too late when all the damage to their brains has been done, so these bad laws need to be changed before anything can be improved or done about it.

Margaret Parry

Radiation and Vitamin C

To the Editor:

Some good news for a change. You can protect yourself. I have been researching this thing for a bit. I found one study from 1974 (radiation and Vitamin C)

<http://www.ncbi.nlm.nih.gov/pubmed/4450227>

Anyway they zapped the rats with gamma radiation (figure this was the standard "double blind", otherwise it would not be published).

Dose rate was 80mg vit c per kg body-weight. The treatment started 1 week before exposure (prophylactic effect). Only 1 rat out of 25 died with vitamin C

being given, while 9 rats died that did not get the vitamin C

Also, this dose of vitamin C is not very high at all: 100 kg person (easy math for me, 220 lbs) would get 8,000 mgs a day That's not much vitamin C for someone weighing 220 lbs...

Dr. Klenner made repeated claims that Vitamin C would stop all radiation damage if the dose was high enough (including radiation burns).

– Anon

Ed note: The radiation-protection effects from vitamin C are likely due to the fact that it is an antioxidant. Many other nutritional supplements and antioxidant rich foods help reduce damage to the body caused by radiation. This issue is covered in some depth in the first issue of *The New Zealand Journal of Natural Medicine*.

See page 20 of the current issue for an article about how zeolite can assist in removing radioactive compounds from the body.

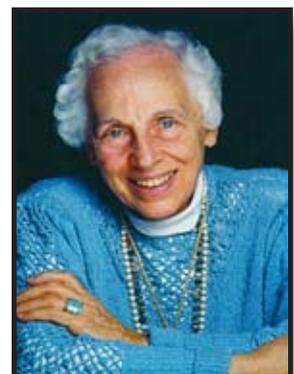
The Gerson Cancer treatment – health and nutrition

To the Editors:

Found this which I thought you and your wife might find interesting... although I guess you probably already know about it? This sounds obvious – almost common sense to me but to many who listen to their doctors, it is new...

<http://www.gersonmedia.com/Books.html>

Kind regards, David Carrera
www.cloud-pod.com



Charlotte Gerson (pictured above) is the Director of the Gerson Clinic, which was started by her father Dr Max Gerson.

Select Committee on Vaccines

Dear Editor:

The working committee re: increasing vaccination compliance in New Zealand has issues for our family and extended family.

In 1994 our 18 month old was taken in for the new MMR vaccine, immediately he had an over reaction to the immunisation – to the point where he had to be hospitalised a day later with soaring temperatures.

What alarmed our family was that although the emergency clinic suspected meningitis, we suspected the MMR vaccine. He was covered with spots and was limp. He had a lumbar puncture, it revealed that there was a viral infection in his spinal fluid, written down as “unspecified Type A Viral infection”.

Two days later we took him home. He regressed over the next three months – sensory overload, lost language, lost socialising – was unrecognisable to his wider family. Six months later he joined the throngs of kids being diagnosed with autism. You can call it what you like, we know it was brain damage caused by the MMR. Throughout our wider family are eight children with an autism diagnosis, and all with similar stories. So throughout our intelligent, all employed, all tax paying New Zealand extended family is a deliberate decision not to vaccinate – we have decided to simply remain healthy and not buy into this belief that simply anyone can catch anything. What we have all come to understand is that disease follows bad hygiene and bad health and that to immunise simply compromises your immune system in an otherwise healthy body.

New Zealand would do to follow the Scandinavian model rather than the American model. What MPs need to be aware of is “that more is not best, when it comes to immunisations” – it’s like believing that “more food is better for you, than the right amount of good food” – countries like the USA, Australia, Canada, UK, New Zealand and others who give “more than 12 shots” to children under the age of 10 years have not improved the overall health of those populations.

The infant mortality rate rises sharply once immunisation rates get over 12 shots, along with this is also the childhood obesity, asthma and many other rates. It may surprise you as it did I that the USA has the highest infant mortality rate in

the Western World, how can this be??? It seems very clear that more and more immunisations is a false god and does more damage than good. Humans are not able to have multiple diseases and substances that are non food related put into their bodies over a short space of time. It’s like the belief that we as humans can skip good health and rely on pharmaceuticals for our heart, our blood pressure, our cholesterol, our joints, our lungs, our bowels, to sleep, for pain. We simply cannot agree with tactics of incentivising doctors or schools for immunisation rates and punishing families who choose health over the disease model.

I am the mother of four children, from 5-18 years, the only days they have off school are wellness days (they simply don’t get sick) and to watch the finals of the NBA – go Texas Mavericks!!!!

The science is bogus, the companies involved have conflicts of interest that make “pushing” a whole new science, we will not be entering into any immunising of our children as we see it as our right to make up our own minds – when the science is better and the overall health of the pediatric population is better then we will look again at this area – we view the increase in immunising as one of the risks for all the other childhood disorders that are on the rise.

The support of this viewpoint is growing – forcing citizens to put things into their bodies is way beyond the Human Rights of citizens. Give folks a choice and provide good evidence – we are all smart enough to sort out the pros and cons and those who can’t be bothered will continue to do whatever the Ministry of Health is promoting.

We never did get offered ACC for our child (now 16), how can this be? He was born normal, this was an accident. We understand that immunising is “a holy grail” and to question it is like questioning the use of antibiotics, however we have all learnt as a population that over use or reliance on anything medical has consequences. The bottom line is our child lives with the side effect of a man-made medical injection to treat something that he may never have got and in that practice he was damaged. How he is now is way worse than any minor or even major childhood disease – but doctors simply believe he picked up a random virus that caused brain damage. No one offered or even thought that the immunisation could have caused this – so no ACC. By increasing more and more shots to kids we simply raise the stats in all the other areas.

– Name supplied, Coatesville-Albany

Vaccine Dangers

To the Editors: Here’s a little something I wrote to the NZ Prime Minister recently:

John Key,
Prime Minister,
Wellington

Dear Sir, These are the publications, articles, book reviews and letters I have read concerning the dangers and hazards to everyone’s health by being vaccinated.

Books: • *Vaccination : A Business Based On Fear* by Dr Gerhard Buchwald.
• *Callous Disregard* by Dr Andrew Wakefield.
• *The Medical Mafia*, by Dr Guylaine Lanctot .
• *The Trial Of The Medical Mafia*, by Joachim Schafer .

Book Reviews: • “Raising A Vaccine Free Child”, by Wendy Lydall, reviewed by Katherine Smith in the *New Zealand Journal of Natural Medicine*, Issue 1 ; May-August 2011.

Articles: • “The NZ Ministry of Health and IMAC Are Concealing The Truth About The Real Risks of Vaccines”, published in *Uncensored Magazine*, Issue 21, September-December 2010, by Katherine Smith.
• “Nations Requiring the Most Vaccines Tend to have the Worst Infant Mortality Rates”, by Neil Miller, published in *Uncensored* magazine, Issue 24, June-September 2011.

Letters: • “Doctors Pushed Smoking – Now Vaccines”, letter to *Uncensored*, Issue 24, by Erwin Alber, Spokesperson, Vaccination Information Network, Warkworth. Ph 09 – 425-8842.

• “Cover-up on Vaccine Risks”, letter to *Nexus Magazine*, April-May 2010, by Jovan, Broken Hill, Australia.

With this well researched knowledge concerning vaccination I therefore am absolutely against forcing the citizens of New Zealand to be compulsory vaccinated, as it should be a matter of personal choice, and for the parents to decide for their children.

When the government has cut down on all Social Spending, including public hospitals and general medical care, one has to ask the question what is the motive behind pushing the agenda for free vaccinations ?

Sincerely, Alan Cash .

Mercola

Hello Katherine,

Just in case you are not aware, there is an excellent medical site from the USA called "Mercola.com".

On the 14th May this year he had an article called "What Happens When Your Government Chooses to Side-Step Scientific Truth".

This article chronicles Dr Shiv Chopra's employment as a former employee of Health Canada – he states just how much interference by unscientific folks there is in deciding the distribution of new drugs, in particular the vaccines!

It's well worth a read and quoting in our argument about freedom of choice with regards to health treatment.

The site also has other articles about other drugs that are 'pushed' onto the public – e.g. Statins!

I have recently refused to let my husband be prescribed Statins, stating that we will

lower his cholesterol naturally by diet and anti-stress methods.

I myself have Multiple Myeloma which Dr Mercola has linked to a Merck Polio vaccine between 1955 -85! I was born in 1956 in the UK.

Since being diagnosed in July 2006, I have had the traditional Chemo treatment, Stem Cell transplant and another 5 months of oral chemo tablets, antibiotics and Dexamethasone towards the end of 2009. The blood indicator finally came to within normal limits after the last treatment but were rising again even while I was still on the treatment!

During my doctor's appointment I told him I wanted to go it alone with diet and supplements. The doctor basically tapped me on the knee and said "if I want to waste my money go for it!" He said he would see me in 6 months May 2010.

I have not had to see him since that November 2009 appointment because I have kept the blood indicator within the normal range by using Natropathy, Homeopathy, Health House supplements (which I actu-

ally took right through my treatments and everyone is amazed that I still have naturally dark hair after losing it three times!) and late last year, I had the mercury fillings removed from my teeth!

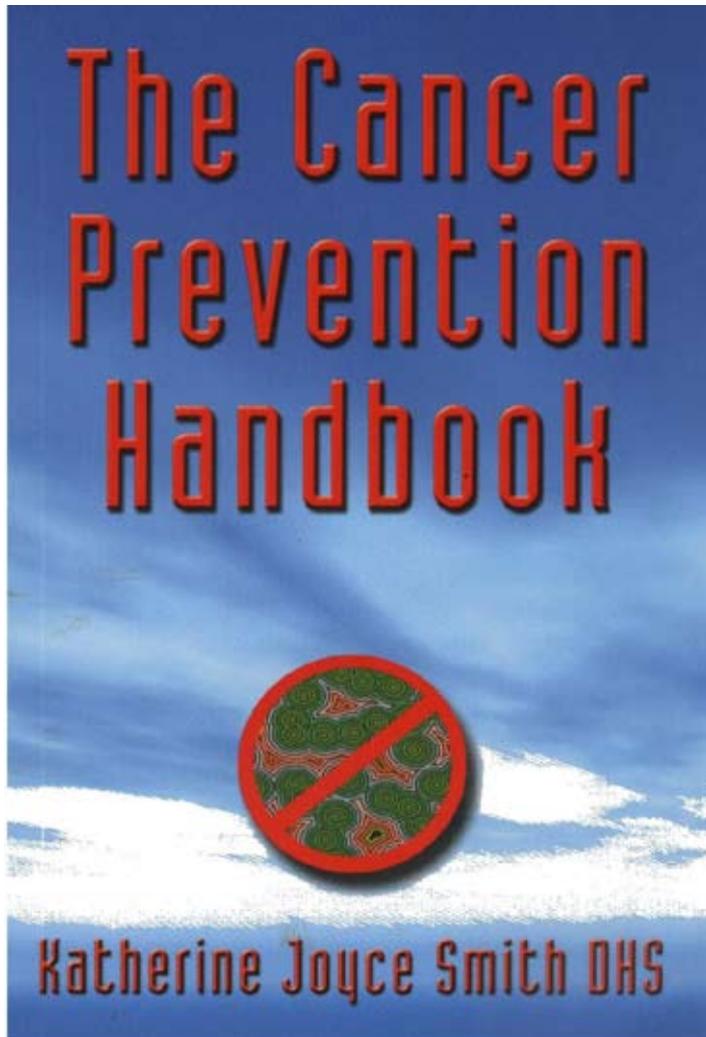
My friends and family have said how brave I have been but I have such a positive attitude I will not let anything get me down, including cancer!

Regards, Andrea, Cancer Survivor

Kudos

I greatly enjoyed reading your fist issue of *The New Zealand Journal of Natural Medicine* and look forward to the next edition. I spend a great deal of time researching natural health information – it is not only interesting it is very empowering to be able to take control of one's health instead of relying on mainstream medicine. I feel that prevention is the key to dealing with chronic disease and the more information out there re natural health all the better.

Thank you, Donna



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Better Health On A Shoestring

Katherine Smith

Eat Your Weeds!

There's a piece of folk wisdom that says that if you need a plant, it will come to you. Many of the weeds that turn up (sometimes literally on our doorstep!) are plants which have helpful healing properties. Midwife Joan Donley, who made impressive contributions to both her profession and women's health in NZ, recognised that common weeds can be an important source of vitamins and trace minerals and popularised the addition of a weed salad to the diet of pregnant women.

The following weed salad recipe is adapted from the one in Joan's book *Compendium for a Healthy Pregnancy and Normal Birth* which is still available from <http://www.birthspirit.co.nz/> in very limited quantities. For this article, I have focussed on commonly available weeds that can easily be identified.

Dandelion (*Taraxacum officinalis*):



Dandelion leaves are bitter so can be an acquired taste. The young leaves are less bitter, so may be preferred. Dandelion leaves provide beta carotene, folic acid, vitamin C, potassium and trace minerals.

The potassium content can be quite high so large amounts may have a diuretic effect. NB: There are a number of plants that resemble dandelions that are not dandelions. Two of them are illustrated with this story.

MORE: <http://www.botanical.com/botanical/mgmh/d/dandel08.html>

Chickweed (*Stellaria media*):



Chickweed is a delightful little plant with tiny white star-like flowers that flourishes in damp spots in the garden, particularly

those that do not get excessive amounts of sun in summer. During winter months in Auckland it will grow quite happily when little else does. According to Joan Donley's *Compendium* It contains calcium, cobalt, iron, iodine, copper, manganese and sulphur, silicon zinc and vitamin C. It has a delicate flavour. In addition to its use in weed salads, it can be used wherever you might use lettuce – such as in sandwiches. As chickweed stems have a somewhat stringy core, it is best to chop it coarsely. NB: Chickweed should not be confused with Scarlet pimpernel which has red flowers and is poisonous.

Puha (Sow thistle) (*Sonchus spp*):



Many people enjoy puha (puwha) cooked. However, the tender young leaves may also be used in salads. Puha is a good source of folic acid and also contains beta carotene.

Purslane (*Portulaca oleracea*):



Purslane is a fleshy plant with red stems and small, deep green juicy, leaves. Once established in a garden

it can be difficult to get rid of it, so it's a good thing that it's edible. Purslane will survive hot, dry conditions, although like most plants, it prefers to receive adequate amounts of water. (I once heard a frustrated gardener refer to purslane as "Never Die".) Purslane has a neutral, faintly salty taste. It can contain large amounts of oxalic acid so should be generally avoided by people who have had oxalate kidney stones. The Wikipedia article on purslane is well worth reading as it includes interesting facts such as that leaves harvested in the morning contain higher levels of malic acid and that the plant is a good source of alpha linolenic acid.

Nasturtium (*Tropaeolum majus*):



Both the beautiful circular leaves and colourful flowers of nasturtium are edible – and the seed pods can be pickled as a substitute for capers. The fresh leaves are high in vitamin

C. Both nasturtium leaves and flowers are quite spicy, so a little bit goes a long way.

Self Heal (*Prunella vulgaris*)

Self Heal is a modest little plant that



grows unobtrusively in pasture, lawns and home gardens. It has purple flowers which bear a passing resemblance to

clover flowers. Containing rutin (which helps to strengthen blood vessels) vitamin C and betacarotene, among other beneficial constituents, it has fairly neutral (although slightly bitter) taste and its leaves make a nice addition to a weed salad.

Recipe:

Pick* and wash your weeds.

Chop the dandelion, puha and nasturtium finely and self heal, chickweed and purslane coarsely. Divide nasturtium flowers (if available) into petals.

Grate carrot equal in volume to your weeds (or use a mixture of 50% grated carrot and 50% grated beetroot.)

Add any other fresh herbs as desired (for instance, chopped fresh parsley, basil or corriander) and any other vegetables that may take your fancy (such as chopped cucumber or tomato).

Dress with lemon juice and cold pressed extra virgin olive oil, flaxseed oil, hempseed oil or sacha inchi oil – which has a slightly nutty flavour.

Sprinkle with New Zealand kelp granules or karengo flakes to add iodine. Serve as a side dish with any savoury meal.

You can beautify the salad by adding petals from calendula flowers (which also contain the antioxidants lutein and zeaxanthin that helps to maintain health eyes) and/or whole borage flowers.

(* NB: If in doubt about weed identification, don't eat it. Also, avoid weeds that

CONTINUED ON PAGE 30

HEALTH NEWS

ALERTS



Common painkiller ups cancer risk

It's the everyday pill that's in everyone's medicine chest – and millions of people pop 'em twice a day or more in a misguided and dangerous attempt to beat life's aches and pains.

It's paracetamol (acetaminophen) and the long list of risks that come from regular use just got even longer: A new study finds that this common painkiller may actually double the odds of blood cancers such as lymphoma.

I don't know about you, but I'll take the headache.

Researchers tracked some 65,000 older Washington state men and women between the ages of 50 and 76 for an average of six years and asked them about their painkiller use during the study and over the previous decade.

As the study unfolded, 577 of the volunteers – less than one percent – came down with hematologic cancers such as lymphoma and myelodysplastic syndrome.

And after adjusting for age, family history and more, the researchers say those who took the painkillers regularly had double the cancer risk.

On a practical level, the researchers say a typical 50-year-old has about a 1 percent chance of getting a blood cancer over 10 years – but if that same 50-year-old pops four of these painkillers a week, the risk shoots up to 2 percent.

That might not sound very high, but those aren't exactly “lightning strike” odds,

either – those are odds that could affect you or someone in your life if you're popping a paracetamol pill too often.

And if that's you, you're hardly alone: Some studies have found that 50 million Americans take a product that contains paracetamol every week – and many of these people may not even realise when they're taking it or even how much they've taken.

That's because acetaminophen isn't just in painkillers anymore – it's in over-the-counter cold relief medications, allergy and sinus drugs and even some versions of Alka-Seltzer.

Plop, plop, fizz, fizz – oh what a risk it is!

In other words, it's easy to load up on paracetamol if you're not careful – and blood cancer isn't the only risk you'll face if you do.

Paracetamol overuse is now the leading cause of acute liver failure in the United States. Overdose sends 56,000 Americans to emergency rooms every year, and leads to hundreds of deaths.

Don't take risks – take action instead.

All pain, from headache to muscle problems, has a cause – and the only real way to beat it is to find that cause and fix it.



Dietitians Are Buying Coke's Line: Sugar, Fluoride, Artificial Colours are SAFE for Children!

Alliance for Natural Health
June 14, 2011

© indowaves.instablogs.com

We wish we could say we are surprised. Registered dietitians are now being given formal education by the Coca-Cola Company on how safe its ingredients are.

The credentialing arm of the American Dietetic Association, the Commission on Dietetic Registration (CDR), has approved a programme created by the The Coca-Cola Company Beverage Institute for Health and Wellness. This covers what it calls “urban myths” about the safety of food ingredients. Participating in this programme will earn registered dietitians Continuing Professional Education unit credits.

“Children's Dietary Recommendations: When Urban Myths, Opinions, Parental Perceptions & Evidence Collide,” tells dietitians that fluoride, sugar, artificial colours and nonnutritive sweeteners have been “carefully examined for their effects on children's health, growth, and development.” The presenter, Dr. Ronald Kleinman, “explores prevalent misconceptions about these food ingredients” and suggests ways the dietitian can help quell unnecessary “concern among parents about their children's health.”

At first glance, Dr. Kleinman should know what he is talking about. He is physician-

in-chief at Massachusetts General Hospital for Children, chief of the Pediatric Gastrointestinal and Nutrition Unit, and Associate Professor of Pediatrics at Harvard Medical School. Couldn't sound better, could it? But he has also received a great deal of money from industry sources - like artificial infant formula manufacturers Mead Johnson and Nestle Ltd. His study on optimal duration of breastfeeding was funded by Gerber Products. He also served as a paid expert witness for Gerber when they were sued for deceptive advertising. And he contributed to a brochure intended for children entitled "Variety's Mountain" produced by the Sugar Association.

Now he's being sponsored by the Coca-Cola Company and telling dietitians that the ingredients in Coke which everyone is alarmed about are safe. The dietitians, in turn, will be telling parents that their fears are unfounded, and Coke can sell more Coke to kids.

Programme materials include gems like "[a] majority of studies so far have not found a link between sugar and behavior in children generally or children diagnosed with attention deficit hyperactivity disorder." This is certainly news to us, since we have seen many studies that say the opposite. Apparently the dietitians are to teach us that any connection between artificial colours and neurotoxicity, or fears of the dangers of fluoride, are imaginary and come from hysterical (or at least unduly concerned) parents.

As we reported recently, sugar and artificial sweeteners are anything but safe. Fluoride poses a significant risk to the kidneys. [Ed: And the brain.] And commonly used food dyes pose risks which include hyperactivity in children, cancer (in animal studies), and allergic reactions. Even the Center for Science in the Public Interest, an organisation that supports nuking food, agrees with this. And the British government and European Union have taken actions that are virtually ending the use of dyes throughout Europe.

The ADA is sponsored by the soda and junk food industries - which we feel greatly tarnishes the organization's credibility. And you may recall that the ADA has mounted a state-by-state campaign to make sure that its Commission is the only one which will be accepted as a credentialing body for both registered dietitians and nutritionists.

There are, of course, significant philosophical differences between nutrition-

ists and dietitians - they represent two different fields of study and practice. By accepting only a single credentialing agency - one run by the dietitians, not nutritionists - state boards are establishing a "one-size-fits-all" standard which removes all competition, essentially handing the ADA a government mandated monopoly over nutritional therapy.

Unfortunately, the Nevada bill we told you about last month passed both the Assembly and the Senate and was signed by the governor on June 5th. While some amendments were made, the most troubling parts of the bill still remain: only registered dietitians can practice "dietetics," which is defined by the law to include nutrition assessment, evaluation, diagnosis, counseling, intervention, monitoring and treatment - everything that a good nutritionist does and should do.

The ADA's power grab is a complete travesty. We will keep fighting it state by state until we restore competition in nutritional counseling and stop gagging PhD-trained nutritionists who don't become dietitians.

SOURCE: <http://www.sott.net/articles/show/229964-Dietitians-Are-Buying-Coke-s-Line-Sugar-Fluoride-Artificial-Colors-are-SAFE-for-Children->

Walnuts

**Looking for nutritional solutions?
Walnuts offer a great source of omega-3s**
http://www.naturalnews.com/032772_walnuts_omega-3s.html

NaturalNews) Walnuts are very rich in Omega-3, an essential fatty acid which most are lacking in their diets. Walnuts have the highest Omega-3 content by far among all tree nuts. This article will explain the importance of Omega-3 contained in the alpha-linolenic acid (ALA) of plant and nut based fatty acids. And you will be treated to a unique walnut pate' recipe near the end of this article.

Why Omega-3 is Important

Omega-3 is an essential nutrient, which means it's vital but the body cannot produce it. It has to come from food sources. Omega-3 from plant foods comes in the form of alpha-linolenic acid (ALA). Ironically, our bodies' cells contain ALA naturally. But we have to supply the Omega-3 from outside. As vital for cellular health as ALA is, more is probably better.

Fatty fish, such as cold water salmon and sea tuna, deliver Omega-3 with eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA). The body partially converts plant and nut based ALA to EPA and DHA. ALA alone is vital to cellular health. With plant or nut Omega-3 ALA, you get it all while avoiding the potential health hazards from farmed fish, GMO franken-salmon, and tuna containing mercury and other toxins.

Even mainstream medicine and, would you believe, the FDA acknowledge the importance of Omega-3 for heart health. That includes stroke prevention as well. Our cells use ALA to help convert glucose into energy. Omega-3 has many other benefits, including anti-aging properties and cancer prevention. ALA is able to cross the blood brain barrier and carry the Omega-3 to your brain.

People with various brain or mental disorders such as ADD and even schizophrenia exhibit low omega-3 content in their blood. ALA and Omega-3 are also important for preventing macular degeneration and other eye problems.

Other studies are mixed regarding osteoporosis, irritable bowel syndrome, and aging. Regardless of those study results, it's safe to assume that all those issues are at least partially addressed with Omega-3 and ALA.

Astaxanthin is a top natural anti-inflammatory

http://www.naturalnews.com/032774_astaxanthin_anti-inflammatory.html

(NaturalNews) Astaxanthin, a substance known to be the most potent known antioxidant, has a natural and scientifically proven anti-inflammatory ability. The fact that astaxanthin is natural and has no side effects makes it very attractive to people as a health supplement. The scandals and deaths associated with leading pharmaceutical anti-inflammatories make it all the more appealing.

Astaxanthin is a red pigment found in different strains of algae, phytoplankton and plants. Because these organisms constitute the base of many food chains, the pigments can also be found in some animals as well. For example, it is astaxanthin that gives salmon and trout their reddish

colour; in fact, the redder the fish are the healthier we can assume they are.

When certain types of algae are under stress, usually caused by a lack of nutrition or too much sun, the cells of the algae accumulate high concentrations of astaxanthin for protection. Due to the protective abilities of the pigment, these algae cells can lay dormant for up to 40 years without food or water and still return to normal under proper conditions.

Inflammation

Inflammation is a first-response defence and healing function that becomes active before our immune system does. If our bodies cannot solve the problem with inflammation, then our immune system takes over. Inflammation can occur within seconds in response to some kind of injury or attack on the body. It is non-specific, which means that it does not matter what the problem is: your body always responds in a similar way.

Specifically, the inflammation process is an extremely complex and highly evolved system. In general, inflammation causes redness, swelling, heat and pain. These effects occur due to the effects of a wide spectrum of inflammation mediators that are released after a detected injury or attack. Some of the known mediators include prostaglandins, tumor necrosis factors, interleukins and nitric oxide. All of these different substances play a role in a complex, coordinated and balanced defence of the body.

One type of mediator, prostaglandins, are chemical messengers that can, for example, regulate the contraction and relaxation of smooth muscle to increase or decrease blood flow. Prostaglandins are generally made from arachidonic acid and two enzymes called COX-1 and COX-2. The biggest-selling pharmaceutical anti-inflammatories are extremely strong COX-2 inhibitors, which means they limit the production of prostaglandins and therefore ease swelling and pain. Part of the reason that these synthetic drugs cause undesirable, and sometimes dangerous, side effects is because it is very unnatural and unbalanced for the body to deal with the extreme suppression of a single mediator (in this case just one of the two COX enzymes) without affecting the balance of all the other mediators. Naturally occurring anti-inflammatories in foods we eat ease inflammation by gently inhibiting several inflammation-causing mediators,

including prostaglandins, thereby calming the process as a whole.

Although astaxanthin is nowhere near as strong as leading pharmaceutical anti-inflammatories, it has been found to be one of the strongest anti-inflammatories found in nature. Several double-blind, placebo-controlled animal and human clinical trials have shown that astaxanthin naturally inhibits many of the known inflammation-mediators and therefore can ease inflammation and pain without any negative side-effects.

The red pigment does, however, have many side-benefits such as being the strongest acting antioxidant known as well as being extremely beneficial for your eyes, central nervous system, brain, skin and immune system and for increasing sports performance & recovery.

[Note: *NaturalNews* is strongly against the use of all forms of animal testing. We fully support implementation of humane medical experimentation that promotes the health and wellbeing of all living creatures.]

Vitamin D and Crohn's Disease

Canadian researchers have found that vitamin D may be able to combat and even prevent symptoms related to Crohn's Disease, a chronic inflammatory bowel disorder associated with diarrhoea, intestinal pain and weight loss.

The study, conducted at the Research Institute of the McGill University Health Center, was originally designed to investigate the nutrient's ability to treat cancer cells, but scientists discovered that vitamin D had a beneficial effect on two genes associated with inflammatory bowel disorders.

Lead researcher John White and his colleagues found that vitamin D supplementation forced a reaction in the beta defensin 2 and NOD2 genes, which alert cells to the presence of invading microbes. If NOD2 is deficient or defective, the gene cannot combat microbial attacks in the intestinal tract.

"This discovery is exciting, since it shows how an over-the-counter supplement such as vitamin D could help people defend themselves against Crohn's Disease," says study collaborator Marc Servant.

Does breast milk contain enough vitamin D to prevent deficiency in breastfed babies?

Vitamin D is needed to build healthy bones and teeth in children, and is vital to prevent osteoporosis in adults. It keeps you healthy in many other ways too: vitamin D helps prevent many cancers, hypertension, type diabetes 1, and is very important for good immune system. Low vitamin D levels are connected with many autoimmune diseases like multiple sclerosis, Sjogren's Syndrome, rheumatoid arthritis, thyroiditis and Crohn's disease. Breast milk tends to have very low levels of vitamin D, usually not enough to meet the needs of an exclusively breastfed baby. American Academy of Pediatrics now recommends supplemental vitamin D for all breastfed babies.

The question that arises is how could breast milk be "deficient", in vitamin D if it is supposed to be the perfect food for babies? Is there a measuring error or some other reason?

Some recent research is now shedding light on this question. True, many many breastfed babies are deficient in vitamin D, and true, their mother's milk does not have enough. But this seems not to be the fault of breast milk per se, but instead is caused by the mother not having sufficient levels of vitamin D. In other words, mothers are deficient too, and that is why breast milk may have low levels of vitamin D! Hollis and Wagner conducted a study where lactating mothers were supplemented with either 2,000 or 4,000 IU of vitamin D daily. The idea was to see if this could increase the vitamin D content in breast milk and hence improve the baby's vitamin D levels. In both groups, the vitamin D status of the infant improved greatly (as did the mother's). In the 4000 IU/day group, the infants' D-vitamin levels normalised after 3 months of breastfeeding.^[1] Note that 4,000 IU a day is ten times the current (woeful) recommended intake for vitamin D (which is 400 IU for adults) by the Food and Nutrition Board!

In another, earlier study from Finland, researchers supplemented mothers with either 1,000 IU or 2,000 IU of vitamin D daily. They found that 1,000 IU was NOT enough to make any significant changes in vitamin D content of breast milk, but

2,000 IU was sufficient so the infants had normal levels of vitamin D.^[2]

There is other evidence too about the fact that normal adults actually need 3,000 - 4,000 IU of vitamin D daily. Another recent study examined how much vitamin D normal healthy males actually use daily. The answer was around 3000-5000 IU cholecalciferol (the natural form of vitamin D) per each day. The study was conducted over winter months, and it seemed that those men got more than 80% of their winter vitamin D need from stores their body had made during the summer months when they were exposed to sunlight.^[3]

The recommendation of 400 IU daily for adults is not based on how much of vitamin D you really need for optimal health, nor on the actual levels of vitamin D in the bloodstream. It has been based on the amount of vitamin D in one teaspoon of cod liver oil, as that kept children from getting rickets.^[1] But, up until recently, no one really knew how much adults or pregnant/breastfeeding mothers would optimally need.

Vitamin D deficiency is getting to be more and more widespread as people are avoiding sunlight. Simple sun exposure is obviously a way for children to get vitamin D, and of course, you can help your baby to get vitamin D by letting her get some sun, just be extremely careful so she won't burn. But it is nice to know from this recent study that breast milk can provide all vitamin D for the infant, say, during winter time, if the mother herself has sufficient stores of vitamin D.

Sources of vitamin D

The best source of vitamin D is sunlight, because your skin makes vitamin D from being exposed to the ultraviolet rays in sunlight. You cannot overdose because if you stay in the sun long enough, the sunlight actually destroys any excess vitamin D made in the skin. Sunscreen and glass windows will block that from happening, however. Indeed, as people have started to fear sunlight because of skin cancer threat, deficiency of vitamin D has become extremely widespread in Australia, in United States, in Europe and other parts of the world – and this includes most pregnant and lactating mothers.

Most foods don't contain vitamin D in any great amounts. You can get some vitamin D from cod liver oil, fish, and fortified dairy products.

If you can't get enough sun, then vitamin D supplements can be the answer. If you think you need to rely mostly on supplements, it is advisable to have a doctor test the level of vitamin D in your blood so you will not overdose.

How much vitamin D do you get from sunlight?

First, no matter what, do not burn yourself! You need to start with small amounts and increase your sunlight exposure carefully till you have a base tan. Some individuals don't tan well because of their skin type and they need to be extremely careful. Fortunately, the maximum production of vitamin D in the skin occurs before skin turns pink (which is a sign of slight burning).

With the whole body exposure (naked), adults can produce typically 20,000-30,000 IU of vitamin D in response to bright summer sunlight in a single sunbathing session. For each 5 percent of body surface exposed, the skin can make about 100-200 IU.

The amount of time depends mainly on how white your skin is, and how intense the UV-B rays happen to be. With totally white skin, 10-20 minutes would be enough – but before the skin turns pink. Black skin has an in-built sunblock, so black individuals need 120 minutes for this kind of vitamin D production. Varying levels of tanned/pigmented skin would need something between those amounts.

When the sun is at a low angle on the sky, the intensity of UV-B rays is greatly reduced. That is why early morning, late afternoon, or winter sun can be too weak to provide optimum levels of vitamin D. In much of the US, which is between 30 and 45 latitude, six months or more during each year have insufficient UV-B sunlight to produce optimal D levels.

Your body stores vitamin D. So if you get enough sun exposure during the summer months, you may have enough for the winter too, but most people in United States would benefit from supplemental vitamin D during winter.

What about skin cancer and sunlight? True, sun exposure is associated with higher skin cancer risk, and people who don't tan well are especially at risk and need to be very careful. But the picture is not so simple as people are led to believe.

Consider these facts:

- Melanoma, the deadliest and most dangerous form of skin cancer, is connected with intermittent, occasional, sun exposure;
- Chronic or constant sun exposure actually reduces risk of melanoma;
- There is good evidence that having a right ratio of omega-6 fats versus omega-3 fats in person's diet is a factor in preventing melanoma;
- Non-melanoma skin cancers are associated with accumulated sunlight exposure but are about 95% treatable;
- Antioxidants applied topically and from diet/orally can greatly diminish the damage that UV light does to the skin;
- Sunlight actually helps to prevent most other cancers, especially breast, prostate and colon cancers;
- Sunlight is useful in preventing/treating multiple sclerosis, depression, seasonal affected disorder, psoriasis and tuberculosis. As with everything, there can be a healthy balance when it comes to sunbathing.

Sources and Resources

[1] Assessment of dietary vitamin D requirements during pregnancy and lactation. Bruce W Hollis and Carol L Wagner. *American Journal of Clinical Nutrition*, Vol. 79, No. 5, 717-726, May 2004.

[2] Maternal compared with infant vitamin D supplementation. *Arch Dis Child*. 1986 Dec;61(12):1159-63.

"In conclusion, a daily postpartum maternal supplementation with 2000 IU of vitamin D, but not with 1000 IU, seems to normalise the vitamin D metabolites of breast fed infants in winter."

[3] Human serum 25-hydroxycholecalciferol response to extended oral dosing with cholecalciferol. *Am J Clin Nutr*. 2003 Jan;77(1):204-10.

For more information and references see this link: <http://www.007b.com/vitamin-d-breast-milk.php>

Editor's note:

The La Leche League offers information about breastfeeding and support for expectant and breastfeeding mothers. The NZ La Leche League site is:

www.lalecheleague.org.nz

The international La Leche League site offers information in a number of languages at www.llli.org/.

Australian readers may like to contact the Australian Breastfeeding association. See: www.breastfeeding.asn.au/

Major Corporations Changing Statements On Safety of Fluorides

April 28, 2011

Ellijay, Georgia, USA – In a stunning development certain to gain the attention of risk managers at water utilities around the world, key toothpaste manufacturers and other organisations are changing how they portray the safety or risks of fluorides and water fluoridation.

Colgate-Palmolive is now selling an unfluoridated toothpaste for infants and toddlers. The label on the brightly colored, child-friendly packaging boldly states, “Fluoride-free. Safe if swallowed.” Orajel toothpaste is similarly now available as a toddler training toothpaste without fluoride. Information at the product website says it is “fluoride-free so it’s safe if swallowed when used as directed.” Glaxo-SmithKline’s Aquafresh brand training toothpaste for babies and children under two years old, depicted in recent television commercials, is labeled “Fluoride-free toothpaste. Safe to swallow.”

Daniel G. Stockin of The Lillie Center Inc. in Georgia, a firm working to end water fluoridation, says, “If these kinds of toothpastes are now advertised as being ‘safe’ without fluoride, what does that say about safety previously for the millions of young children who used toothpaste with fluoride?” He also adds, “Perhaps the bigger question is, “Why are children told to spit out the fluoride in a pea-sized amount of regular fluoridated toothpaste, but the Centers for Disease Control strangely continues to say it’s safe to ingest the same amount and more, every day, in fluoridated city water?” Harm from consuming uncontrolled amounts of fluoridated drinking water is drawing increased attention due to a number of recent developments.

Civil rights leaders in Atlanta have called for a halt to water fluoridation. Cities such as Quebec have stopped adding fluoride to their water. A New York City Councilman has introduced a bill to stop fluoridation in New York City. Consumer advocate Ralph Nader has called attention to concerns about total dosing of fluorides from all sources. In February, Tennessee state legislators from both political parties noted growing calls for Fluoridegate investigations in a letter to the state’s health commissioner.

Other corporations and organizations are also weighing in on the issue of fluorides affecting sensitive populations. Gerber is selling an unfluoridated bottled water so parents of young babies can avoid using fluoridated city water to mix infant milk formula. Gerber’s website openly states that its water, “is not sponsored or endorsed by the American Academy of Pediatrics or the American Dental Association.”

The National Kidney Foundation withdrew its endorsement of water fluoridation in 2008, noting in a new position statement that, “Additional research on the risks and extent of fluoride exposure for the potentially susceptible population of [chronic kidney disease] patients with impaired kidney function is recommended.” The National Research Council’s report on fluorides in 2006 documented that fluoridation commenced decades ago without knowing what fluoridated water would do to kidney patients. The report stated that, “*Early water fluoridation studies did not carefully assess changes in renal function.*”

In addition to new statements on fluo-



An example of “dental fluorosis” caused by fluoride

rides from various organizations, fluoride supplement manufacturers are dwindling. According to the American Dental Association’s website, for undisclosed reasons a number of corporations have discontinued production of fluoride supplements in recent years. According to ADA, fluoride supplements are not recommended for children under six months of age.

The legal implications of all the fluoride-related developments are gaining the attention of law firms. Kentucky attorney Robert Reeves says, “The story from the Centers for Disease Control that water fluoridation is “safe for all” has now been shown to be categorically untrue. Black Americans and other minorities, kidney patients, babies, diabetics, and seniors are all disproportionately harmed by fluoridation. Citizens are ingesting fluorides

from other sources also. The story from fluoride promoters keeps changing. This is why we’re seeing calls for Fluoridegate hearings. We’re witnessing the unraveling of the Fluoridegate scandal and a perfect storm of liability forming here.”

A 1999 criticism of fluoride supplements in the journal *Community Dentistry and Oral Epidemiology* addressed growing amounts of permanent “dental fluorosis” teeth staining, stating: “The risk is that noticeable fluorosis will be perceived by the public as a toxic consequence of fluoride ingestion – which, arguably, it is – and there will be a reaction against all uses of fluoride...”

The article also said, “There does not seem to be scientific evidence to support the widespread use of fluoride supplements by young children, even in the absence of fluoride in water.”

Reference Links / Sources:

- Websites for fluoride-free toothpaste for babies and toddlers:
 1. <http://www.colgate.com/app/Kids-World/US/Kids-Products/Ages-0-2/My-First-Colgate.cvsp>
 2. <http://www.oraljel.com/kids-oral-care/training-toothpaste/Products/orajel-toddler-training-toothpaste-with-little-bear.aspx>
 3. http://www.aquafresh.com/Products_Kids.aspx
 - Unfluoridated bottled water for mixing infant milk formula: http://www.gerber.com/AllStages/products/beverage-ages/gerber_pure_water.aspx
 - National Kidney Foundation statement on fluoridation: http://www.kidney.org/atoz/pdf/Fluoride_Intake_in_CKD.pdf
 - Civil rights leaders’ letters on fluoridation: <http://spotsonmyteeth.com/wp-content/uploads/2010/02/durley-ltr-bw-PDF2.pdf> <http://spotsonmyteeth.com/wp-content/uploads/2011/04/Letter-to-Georgia-Legislators-from-Ambassador-Andrew-Young.pdf>
 - Fluoride supplement manufacturers information on ADA website: <http://www.ada.org/1178.aspx>
 - Fluoridation Litigation Article in American Association for Justice newsletter: http://www.justice.org/cps/rde/xchg/justice/hs.xsl/14815_14817.htm
 - Photos of dental fluorosis: <http://www.SpotsOnMyTeeth.com>
- email: stockin2@yahoo.com
web: <http://www.SpotsOnMyTeeth.com>

Study shows Unicef vaccination programmes cause more deaths, yet UK to pledge £814 million

June 22, 2011

In spite of a study by John Hopkins University showing that more children survived in those parts of Africa where there was NO Unicef vaccination programme, billions are to be spent on a new vaccination programme by Bill Gates with the UK government pledging £814 million.

David Cameron pledged £814 million to GAVI (the Global Alliance on Vaccines and Immunisation) linked to Bilderberg Bill Gates in addition to the existing funds of £680 million between 2011 and 2015 to prevent diarrhoea and pneumonia in the poorest countries.

Read more at: <http://www.telegraph.co.uk/science/8573957/Vaccines-and-foreign-aid-a-shot-in-the-arm-that-will-be-felt-all-over-the-world.html>

Source: <http://news.bbc.co.uk/1/hi/world/africa/8455444.stm>

URL: <http://wp.me/puNtl-ljg>

Processed Meats Declared Too Dangerous for Human Consumption

By Mike Adams

The World Cancer Research Fund (WCRF) has just completed a detailed review of more than 7,000 clinical studies covering links between diet and cancer. Its conclusion is rocking the health world with startling bluntness: Processed meats are too dangerous for human consumption. Consumers should stop buying and eating all processed meat products for the rest of their lives.

Processed meats include bacon, sausage, hot dogs, sandwich meat, packaged ham, pepperoni, salami and virtually all red meat used in frozen prepared meals. They are usually manufactured with a carcinogenic ingredient known as sodium nitrite. This is used as a color fixer by meat companies to turn packaged meats a bright red color so they look fresh. Unfortunately, sodium nitrite also results in the formation of cancer-causing nitrosamines in the human body. And this leads to a sharp increase in cancer risk for those who eat them.

A 2005 University of Hawaii study found that processed meats increase the risk of pancreatic cancer by 67 percent. Another study revealed that every 50 grams of processed meat consumed daily increases the risk of colorectal cancer by 50 percent. These are alarming numbers. Note that these cancer risks do not come from eating fresh, non-processed meats. They only appear in people who regularly consume processed meat products containing sodium nitrite.

Sodium nitrite appears predominantly in red meat products (you won't find it in chicken or fish products). Here's a short list of food items to check carefully for sodium nitrite and monosodium glutamate (MSG), another dangerous additive:

- Beef jerky
- Bacon
- Sausage
- Hot dogs
- Sandwich meat
- Frozen pizza with meat
- Canned soups with meat
- Frozen meals with meat
- Ravioli and meat pasta foods
- Kid's meals containing red meat
- Sandwich meat used at popular restaurants
- Nearly all red meats sold at public schools, restaurants, hospitals, hotels and theme parks

If sodium nitrite is so dangerous to humans, why do the FDA and USDA continue to allow this cancer-causing chemical to be used? The answer, of course, is that food industry interests now dominate the actions by U.S. government regulators. The USDA, for example, tried to ban sodium nitrite in the late 1970's but was overridden by the meat industry. It insisted the chemical was safe and accused the USDA of trying to "ban bacon." Today, the corporations that dominate American food and agricultural interests hold tremendous influence over the FDA and USDA. Consumers are offered no real protection from dangerous chemicals intentionally added to foods, medicines and personal care products.

You can protect yourself and your family from the dangers of processed meats by following a few simple rules:

- Always read ingredient labels.
- Don't buy anything made with sodium nitrite or monosodium glutamate.
- Don't eat red meats served by restaurants, schools, hospitals, hotels or other institutions.

And finally, eat more fresh produce with every meal. There is evidence that natural vitamin C found in citrus fruits and exotic berries (like camu camu) helps prevent the formation of cancer-causing nitrosamines, protecting you from the devastating health effects of sodium nitrite in processed meats. The best defense, of course, is to avoid eating processed meats altogether.

[Ed. Note: Mike Adams, the Health Ranger – a leading authority on healthy living – is on a mission: to explore, uncover and share the truth about harmful foods and beverages, prescription drugs, medical practices and the dishonest marketing practices that drive these industries. For his latest findings, click here.]

SOURCE:

<http://www.totalhealthbreakthroughs.com/2007/12/processed-meats-declared-too-dangerous-for-human-consumption/>

Average Drug Label Lists Over Whopping 70 Side Effects

By Dr. Mercola, June 9, 2011

Using a computer program, scientists analysed 5,600 drug labels and more than 500,000 labeled effects. They found that the average drug comes with a list of 70 potential reactions, according to researchers.

In fact, the more commonly prescribed drugs averaged around 100 side effects each, with some drugs containing as many as 525 listed reactions.

MSNBC reports:

"The greatest number of side effects was found in antidepressants, antiviral medications and newer treatments for restless leg syndrome and Parkinson's disease. In general, medications typically used by psychiatrists and neurologists had the most complex labels, while drugs used by dermatologists and ophthalmologists had the least."

Dr. Mercola's Comments

On average, if you take one prescription drug you'll be exposed to 70 potential side effects. If you take one of the more commonly prescribed drugs, the potential drug reactions rise to about 100 – and some drugs even carry over 500! Amazingly, despite this finding researchers told MSNBC that "having a high number of side effects on a drug's label should not suggest that the drug is unsafe"!

What should it suggest, then, is what I would like to know.

Because if a food or a supplement could cause 70 to over 500 side effects, you can bet you'd be hearing about its grave dangers from every media outlet. Instead, the researchers have downplayed the drug dangers, stating that the side effects lists are more about "protecting manufacturers from potential lawsuits" than they are about measuring true toxicity.

But you can rest assured that a drug manufacturer will only list the side effects they absolutely have to ... no more. So the fact that the average drug is disclosing 70 side effects is an indicator of just how many risks there really are.

Prescription Drugs Even Deadlier Than Illegal Drugs

You might not realize that more than 700,000 people visit U.S. emergency rooms each year as a result of adverse drug reactions. And, according to the U.S. Food and Drug Administration (FDA), adverse drug reactions from drugs that are properly prescribed and properly administered cause about 106,000 deaths per year, making prescription drugs the fourth-leading cause of death in the United States.

Compare this to the death toll from illegal drugs – which is about 10,000 per year – and you begin to see the magnitude of the problem that the pharmaceutical industry is propagating. Even more shocking, three years ago an analysis of federal data by the nonprofit Institute for Safe Medication Practices (ISMP) found that in the first quarter of 2008, fatalities from adverse drug reactions accounted for 23 percent of all adverse reaction reports!

Naturally, some drugs are far riskier than others. But often a drug doesn't earn a reputation for being "riskier" until the fatalities have already begun to stack up. Further, even the "average" medication causes potential side effects, which is a steep risk by any measure. Just how many risks should be deemed acceptable by public health agencies and consumers? According to study researcher Dr. Jon Duke, assistant professor of medicine at the Indiana University School of Medicine, on MSNBC:

"... having all these labeled side effects can overwhelm doctors who must weigh the risks and benefits when prescribing a medication ... The Food and Drug Administration has taken steps to discourage

such 'overwarning,' but at present, information overload is the rule rather than the exception."

So the FDA has tried to discourage drug manufacturers from "overwarning" doctors and patients about the risks.

An important issue that is rarely focused on when examining drug side effects is what happens to those who are taking more than one medication? The potential ramifications are mind-boggling, with side effects numbering in the thousands ... too many to ever really pinpoint back to a particular pill.

Polypharmacy Raises Drug Side Effects Exponentially

According to the latest statistics from the Kaiser Health Foundation, the average American aged 19 to 64 now takes more than 11 prescription drugs! The word "polypharmacy" means "many drugs," and essentially refers to these instances where an individual is taking multiple drugs – often because more drugs are prescribed than are clinically indicated.

This situation used to be primarily a concern for the elderly, who generally take more medicines than younger folks – in the United States, the average senior fills more than 31 prescriptions per year. But over the past several years, even children as young as 3 are increasingly being prescribed four or more drugs!

This is a significant problem, as the more drugs you mix together, the greater the chances of serious side effects. And if the average American is taking 11 prescription drugs, and the average prescription drug carries 70 side effects ... do the maths!

That's an average of 770 potential individual side effects but the drug to drug interaction is far higher and is likely one to two orders of magnitude greater. To me, this is simply unacceptable, especially considering that most drugs people take are for conditions that can be better treated, and prevented, using natural methods.

You Can Take Control of Your Health

There's a reason why I titled one of my foundational books *Take Control of Your Health* and that is because by doing so you can avoid falling prey to drug side effects. You can avoid taking most drugs in the first place, and you'll be that much healthier because of it. Currently you carry the greatest burden when it comes to changing the drug paradigm. I don't think we'll see doctors changing their prescribing ways

anytime soon - it's what they're trained to do. In most cases, it's ALL they do! So as a patient, you have to take responsibility for your health, and question the drugs prescribed to you.

- Do you really need that drug?
- Is it prescribed appropriately, or is it being prescribed for an off-label use?
- What are the side effects?
- Is it addictive?
- What are the natural alternatives?
- Did I do a careful search to check for side effects or natural alternatives?

Ultimately, it's your body, and the decision to medicate yourself for an ailment is yours alone. However, I urge you to research any drug your doctor prescribes before you take it. Do not just take your doctor's word for its safety. Most physicians have little information to offer you aside from what they've been told by their drug reps. Remember that no drug is completely safe.

Even under the BEST circumstances – such as with a drug that has gone through unbiased, stringent, long-term testing – anything can happen when a drug is released into the uncontrolled environment of your body. It may interact badly with another drug you're taking, or perhaps a food you eat causes an unforeseen reaction, or maybe your genetic makeup, metabolism or the state of your immune system will cause it to have an unpredictable impact.

So I hope that you will view drugs as a last resort instead of a first choice, and will instead embrace the massive shift in thinking to realise that your body can heal itself if you give it the proper "tools." It is possible to maintain optimal health by simply avoiding unnecessary drugs and understanding the fundamentals of good nutrition and exercise. If you start with just the five steps listed below, you will be embarking on a journey to outstanding health and drug-free wellness:

1. Eliminate fructose and most grains
2. Eat unprocessed, high-quality foods, organic if possible, right for your nutritional type;
3. Eat your food as close to raw as possible;
4. Consume enough animal-based omega-3 fats;
5. Exercise regularly

Resources:

MSNBC May 23, 2011

Archives of Internal Medicine May 23, 2011; 171(10):944-6

SOURCE:

<http://www.sott.net/articles/show/229921-Average-Drug-Label-Lists-Over-Whopping-70-Side-Effects>

Zeolites useful for removing radiation from the body

(NaturalNews) Following the recent catastrophic tsunami that hit Japan, the nuclear reactor explosion from the nuclear power station at Fukushima, Japan and ongoing melt-downs are releasing deadly radiation into the environment and poisoning human bodies. The victims need immediate protection or they can become deathly ill with nausea and vomiting, diarrhea, headache and fever. Even worse, radiation can cause long-term damage leading to leukopenia (cancer), genetic damage (inability to have children) and physical deformity. And the victims extend beyond humans: radiation strikes animals and the environment as well. Food can become contaminated with radioactive isotopes, as



well the water supply that irrigates crops and supplies drinking water.

How can victims of radiation detox from this insidious insult? The answer lies in the use of natural zeolites, a class of natural minerals from volcanic ash that can help the body get rid of heavy metals and radioactive elements. Containing a unique, negatively charged, crystalline structure, zeolite captures these dangerous elements from the body into a molecular cage that the body excretes. Simple and safe to take, zeolite can be taken in liquid with little to no taste and requires little more than a few drops on the tongue at a time.

The use of zeolites to clean up radioactive compounds is not new. At the Hanford Nuclear Facility in Richland, Washington, radioactive strontium-90 (Sr 90) and cesium-137 (Cs 137) have been removed from radioactive waste solutions by passing them through tanks packed with the natural zeolite clinoptilolite. Zeolites have also been used to clean radioactive wastes from the Three Mile Island nuclear power

plant site and elsewhere.

<http://www.chemistryexplained.com/>

And zeolite's uses extend far beyond cleaning up radioactive waste. They are used in crops and pastures for higher yield by making fertilizers more effective and for long term soil improvements. They decrease ammonia levels in ponds and tanks and filtrate water for cleaner tanks by soaking up sulfur dioxide (SO₂), a pollutant produced by burning high-sulfur coal. Coming from waste toxic gases, sulfur dioxide is the major cause of acid rain. In fact, zeolites are the most effective filters yet found for absorbing sulfur dioxide from waste gases and are helping to clean the air of gases coming from energy plants which burn high-sulfur fossil fuel at the Ohio River Valley and other regions, as well as for purifying the air in mines.

For years, zeolites have been used to detox animal waste, and even deodorize litter boxes, and as a water softener to remove calcium. They are also used in hydrogenating vegetable oils.

Moreover, recent uses of liquid zeolite to detox heavy metals from the body have been shown to alleviate *Candida albicans*, to help alkalise the body and to reduce viruses, bacteria and other pathogens from the system making it an effective immune system booster.

SOURCE: http://www.naturalnews.com/032265_zeolites_radiation.html

Zeolites have been used for centuries in ethnic and natural remedies

These minerals have a unique, complex crystalline structure similar to a honeycomb. Since zeolites are negatively charged, they are able to act like a magnet at the cellular level; drawing in heavy metals and toxins and capturing them in their cage-like structure. Once attracted and captured, these nasty substances are naturally excreted from the body.

Price: \$50 (includes shipping in NZ)

Email: manxman@xtra.co.nz

Tel 09 479 1727

www.zeosmart.com/lynda360



Does ovarian cancer screening save lives?

(NaturalNews) There's no denying ovarian cancer is usually a terrible disease. A stealthy malignancy, it's often misdiagnosed as indigestion and by the time ovarian cancer is actually discovered by a doctor, the disease may have spread extensively. According to the National Institutes of Health, ovarian cancer is the fifth most common cancer among women and causes more deaths than any other type of female reproductive cancer.

So it might seem like a potentially life-saving move to have all women 55 and older – the age group that suffers most often from this form of cancer – screened regularly for the disease with transvaginal ultrasound and the blood test that measures serum cancer antigen 125 (CA-125).

“The study came to another surprising – and positive – conclusion, too. It turns out that not all ovarian cancers may be deadly or even need treatment.”

These are expensive tests but, if they could save the lives of women by pinpointing ovarian malignancies early, they are certainly worth it. After all, the screening tests should save countless lives, right?

Unfortunately, according to new research headed by Sandra S. Buys, M.D., of the University of Utah Health Sciences Center, Salt Lake City, that assumption is wrong. What's more, the tests can lead to unneeded surgeries and serious complications in women who actually have no cancer at all.

But the study came to another surprising – and positive – conclusion, too. It turns out that not all ovarian cancers may be deadly or even need treatment.

For the study, which was just published in the June 8 issue of *JAMA*, Dr. Buys and her team investigated studies of almost 80,000 women to compare outcomes between women who received standard health care with no specific testing for ovarian cancer, unless they had overt symptoms, and those who received

Health Freedom Report

regular, ovarian cancer screening. The results showed no reduced risk of death from ovarian cancer for those aggressively screened for the disease when compared to women who received usual care.

However, the study did reveal a big difference between the health outcomes of the women in the two groups. Those receiving the cancer screenings had an alarming increase in invasive medical procedures and associated harms as a result of being screened.

In all, there were 3,285 women who turned out to have false-positive results. And of these, over 1,000 were subjected to surgery (32.9 had their ovaries removed as part of the diagnostic workup). Among these 1,080 women, 163 (15 percent) experienced a total of 222 distinct major complications.

Bottom line: the research team concluded there is no evidence from clinical trials to support regular screening for ovarian cancer at this time. The authors of the study also stated that even an optimised programme of annual screening may be insufficient to detect cancers early enough to prevent deaths.

“Evidence from modeling suggests that aggressive cancers progress rapidly through the early stages, limiting the ability to detect these cancers with yearly screening,” they stated in the paper. “We conclude that annual screening for ovarian cancer...with simultaneous CA-125 and transvaginal ultrasound does not reduce disease-specific mortality in women at average risk for ovarian cancer but does increase invasive medical procedures and associated harms.”

And the researchers ended with this startling news. Apparently, not all ovarian cancers detected may be deadly at all or even need treatment: “In contrast, more ovarian cancers were diagnosed in the screened group than in the usual care group (212 vs. 176), suggesting that some of the additional cancers detected by screenings were not clinically important and, if left undetected, may never have caused any symptoms or affected the women during their life-times (i.e., overdiagnosis).”

For more information:
<http://jama.ama-assn.org/>

SOURCE: http://www.naturalnews.com/032654_ovarian_cancer_screenings.html



By Katherine Smith

Since our first issue there have been some significant developments that impact on our health freedom – both in New Zealand and internationally.

In NZ, the government has now officially responded to the Report of the Health Select Committee following its Inquiry into how to improve [increase] immunisation [vaccination] completion rates.

The government’s response admittedly includes some positive statements such as “While targets are important to reduce vaccine preventable diseases, immunisation is a choice in New Zealand. Efforts to achieve on-target immunisation must respect the individual’s, parent’s, and guardian’s rights to make an informed choice and decision.”

Nevertheless, the government is still considering some of the *coercive recommendations* in the Report of the Health Select Committee, including one which requires parents to produce vaccination information (either a certificate showing that a child is fully vaccinated, or a “declination form” – stating that parents have decided against vaccination).

The government is also considering whether to accept a recommendation from Dr Nikki Turner of the Immunisation Advisory Centre (IMAC) to make eligibility for 20 Hours Free Early Childhood Education *dependent on parents supplying the same documentation*.

The government is also considering a proposal for all parents (or guardians) receiving any “welfare payment” be “required to ensure their children complete the 12 Well Child Tamariki Ora health checks, which include completion of the immunisation schedule, unless they make an informed choice not to. The Ministry of Health is working with the Ministry of Social Development and other agencies to provide advice that will inform the Government’s response.”

If you believe that parents have the right to make the decisions about which vaccines their children receive – if they decide to vaccinate their children at all – and that the government has no business trying to bully parents into making a “choice” between their child having all recommended vaccinations or none at all, please support the campaign against this sort of medical tyranny. For more information on this issue please visit www.noforcedvaccines.org and sign up to be a member for updates.

The Food Bill

Another threat to health freedom on the NZ horizon is a proposed Food Bill. The July-August issue of *Organic NZ* reports that the directors of the Koanga Institute Bob Corker and Kay Baxter have obtained “confirmation by lawyers that the Food Bill will criminalise people who exchange seeds, plant material or home-raised produce – even by giving them away – if they cannot afford or are otherwise not granted a license to do so.” This has obvious implications for the future of the NZ food supply – and hence people’s health. The text of the bill may be read here:

<http://www.legislation.govt.nz/bill/government/2010/0160/latest/DLM2995811.html>

There is now a public information site on this issue you can visit for more information. www.nzfoodsecurity.org

Medsafe/TGA Update

Medsafe has also announced that it plans to re-classify red yeast rice capsules as a “pharmaceutical”. Many people use this product which is made by culturing the fungus *Monascus purpureus* on rice grains. Red yeast rice is an ingredient in classic dishes such as Peking Duck and has been used in Traditional Chinese Medicine since the Tang Dynasty (800AD). Red yeast rice is a popular supplement in NZ and is taken by people who want to lower elevated cholesterol levels.

Documents obtained under the Official Information Act show that the decision to re-classify this nutritional supplement as a pharmaceutical has nothing to do with health or safety issues. In fact, red yeast rice will continue to be available in NZ in powder form – it is only the products that are encapsulated that will undergo a “technical adjustment” and be reclassified as prescription drugs. The documents state that the reason for the technical adjustment is because of a request from Australia’s TGA for NZ to “harmonise” its policy regarding red yeast rice with Australia’s.

In fact, “harmonisation” between NZ and Australia has come a lot closer since John Key announced that the New Zealand and Australian government officials have agreed “to immediately begin work on implementing the Australia-New Zealand Therapeutic Products Agency” to regulate pharmaceutical drugs and medical devices.

<http://www.nbr.co.nz/article/trans-tasman-medical-regulation-agency-way-key-ck-95632>

According to *The National Business Review* it will take five years to set up the agency. It also stated that “The New Zealand Government’s review of the proposed separate scheme for natural health products in five years’ time would consider whether or not to maintain a separate scheme for natural health products. Mr Key said both countries had agreed the creation of the joint agency was not dependent on natural health products being part of the joint regulatory arrangements, but that they did not want to exclude the option for the future.”

In my opinion, regulation of drugs and medical devices by a joint trans-Tasman agency is unlikely to be a good thing for the NZ public. Medsafe is clearly far from perfect; however, at least as a business unit of the NZ Ministry of Health it is under NZ government control and therefore subject to political pressure and oversight. Information about its operations can also be obtained through Official Information Act requests, when necessary. The NZ public would have no influence over an Australian-based corporate entity.

Moreover, given the history of the Australian TGA, if New Zealand’s natural products do end up being regulated by an Australian-based Australia-New Zealand Therapeutic Agency, this could be disastrous for New Zealand consumers, practi-

tioners and manufacturers and importers of natural health products. The TGA has caused significant harm to the Australian natural products industry (such as through the unnecessary recall of thousands of natural health products manufactured by Pan Pharmaceuticals in 2003) and has restricted access to many herbal and nutritional products.

Back in the USA

Meanwhile in the USA, the FDA is quietly introducing a new regulatory system that could make many natural health products illegal. Mike Adams explains:

“In 1994, after years of armed raids, oppression and censorship by the FDA, Congress passed a law known as DSHEA. This is the law that essentially forced the FDA to stop regulating dietary supplements out of existence, and groups such as the Life Extension Foundation (www.LEF.org) were instrumental in helping get this law passed in 1994.

“But one of the little-known sections of the law required dietary supplement manufacturers to “notify” the FDA any time they used a new ingredient in their formulations. However, the details on how supplement companies were supposed to abide by these notification guidelines (called “NDI” or New Dietary Ingredient rules) were never published by the FDA, and since 1994, this entire section of DSHEA has remained essentially unenforced (or selectively enforced).

“Now, suddenly, the FDA has decided it wants to enforce NDI, and its enforcement of this technicality would essentially amount to the FDA denying permission to use nearly all dietary supplement ingredients introduced since 1994. So last Friday, the FDA proposed its new rules on NDI – on the Friday before a long weekend, no less, which is a common tactic government uses when it wants to do something that nobody notices – and these new rules run the risk of being adopted as active regulations, threatening virtually the entire dietary supplement industry with an eventual shutdown.”

You can read the Mike Adams’ report here: http://www.naturalnews.com/032912_FDA_dietary_supplements.html#ixzz1SL0SgEQF and there is more information at this link: <http://www.anh-usa.org/fda-new-sneak-attack-on-supplements/>

Tyranny In Europe

If the FDA gets away with this new anti-health terrorism, it will have worldwide effects since the USA is a major manufacturer and exporter of quality natural health supplements, and any restriction on what can be produced in the USA will likely have negative effects on the availability (and price) of nutritional supplements and herbal remedies. The timing of the US FDA move, a couple of months after the EU’s Traditional Herbal Medicinal Products Directive (THMPD) made most herbs in the UK (and indeed the EU) illegal, is particularly concerning. Under the directive, herbs become illegal unless manufacturers are able to license each herb at an estimated cost of 80,000 - 120,000 pounds each. Last year *The Independent* announced that most herbs would become illegal in Britain (and indeed the EU) from May 1, 2011. The the Alliance for Natural Health (ANH), which represents herbal practitioners, told the independent that not a single product used in traditional Chinese medicine or Ayurvedic medicine has been licensed.

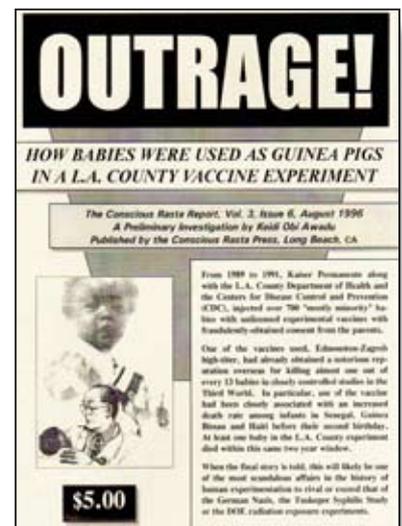
<http://www.independent.co.uk/life-style/health-and-families/health-news/europe-to-ban-hundreds-of-herbal-remedies-2171781.html>

Technically, even registered medical herbalists in the UK are currently legally banned from supplying herbal medicine to their patients.

The Alliance for Natural Health it is preparing to challenge the Traditional Herbal Medicinal Products Directive in court.

<http://www.anh-usa.org/dark-times-for-herbal-medicine-in-europe/>

We will keep you updated with developments.



The MENTAL HEALTH PAGES:

"There will be, in the next generation or so, a pharmacological method of making people love their servitude, and producing dictatorship without tears, so to speak, producing a kind of painless concentration camp for entire societies, so that people will in fact have their liberties taken away from them, but will rather enjoy it, because they will be distracted from any desire to rebel by propaganda or brainwashing, or brainwashing enhanced by pharmacological methods. And this seems to be the final revolution."

– Aldous Huxley, Tavistock Group, California Medical School, 1961

My Recovery from Depression

by Kim Newton

You cannot put a price on health as it affects our moods and how we function in daily life. I am now 46 years old and from the age of about 19 have suffered with chronic low grade depression (dysthymia is the fancy word) for about 23 years. I say I have depression, but I do not say I suffer anymore. I stopped counting two years ago.

I had chronic low grade depression, but this was enough to completely debilitate me and take over my life. It's only been recently that I have been well enough to write a book as my mind is clear enough to express myself more fully. At one time I did not have my health, and if you have ever had a health issue, you will know that my illness is virtually all I thought about every second of the day. Why? Because it sucks the life out of you.

This is my way for speaking up for my friends who do not have a voice. I was lucky in that I wasn't under the mental health system or on medications; I was at home, not in hospital. I was also very fortunate in that I was determined to get better. Without determination you cannot help yourself.

I feel I am the new face of mental health like Autumn Stringam from Canada who cured her own bipolar disorder by taking a nutritional supplement called Empower. We are finally healthy, full of vitality and function so well.

I know of people who have died – partly as a result from adverse effects of medications prescribed to them. Ten people – because of a combination of the medications, fatty and processed foods, lack of exercise, smoking and alcohol. Your liver simply cannot detoxify all this and you have a heart attack. It is alright for businesses to make money, but not at the expense of people losing their health, their

children, and income, and future, because of the drug companies and the mental health system as I have seen with my friends.

Anyway, this story is about the other side of health. I did this on my own as I had no friends or partner, and I had cut off from my family, although I do see them now. They are proud of me as they have seen the changes in me. My father used to tell me to pull myself up by my bootstraps, which although well meaning, showed he never really understood my health issue. He made me feel as if I was lazy and did not want to work, when all I wanted to be was well enough so I could work. I am now well enough six years later! You would not tell someone with cancer or arthritis to pull themselves up by their boot straps.

When I went on Empower in 2004, there was only internet support from Canada and Eric from Strauss Herbs ringing you in N.Z. Now you have someone ringing you once a week or as needed.

A bit about myself:

I grew up in a white middle class family with one younger brother.

When I was growing up my mum fed us cheese, nuts and fruit for snacks instead of sweets which was great. I had milk and fruit juices as well as raspberry drinks, raro, lemonades. We did have red meat and three veggies, but it was more organic then you could taste it. We also ate puddings and biscuits, but they were usually homemade.

My mum was very diet conscious, but in my teenage years unbeknown to her I ate a lot of rubbish such as K.F.C, pizzas, chocolate cakes, ice-cream, and fish and chips.

I had periods of overeating and vomiting because I had just eaten too much. I had some issues with food back then; I went to Weight Watchers, though I wasn't even overweight. I do remember consuming a lot of cows' milk, ice-cream, cheese,

cream as a teenager and I had continuous mucus in my throat. At the time I did not know that these foods were causing this. Many of us can have a hard time digesting cows' milk as it is not designed for human beings. Many food allergies, intolerances and asthma are linked to cows' milk, organic raw unpasteurised, unhomogenised full cream milk (from the farm!) can be better. I now have no cows' milk except the little I have in my yoghurt. Yoghurt is easier to digest than cows' milk, and it contains healthy cultures. I would eat soya yoghurt, but they put sugar in it!

Back in my early twenties I would be sitting and my nose would just start to drip, I couldn't seem to stop this. I was very moody; actually I had been since the age of 17 especially when I had my menses. I was also a loner, but that was about the extent of my health issues at this time. I had cut myself off from my family as we weren't getting along.

At 28 years of age I was fired from my job, and I lost the routine of going to work everyday. I think this was when my depression was triggered; however I did not know what was wrong with me until my only friend pointed this out.

My doctor prescribed five antidepressants which I took over the months. None of them worked, even though I was on each of them a few months or so. The last one I tried gave me a massive bruise on my leg and my friend advised me to stop taking that otherwise I might get a blood clot. Taking medication did not worry me, I was not against medication, but they did not seem to help me. So here I was just really living with my symptoms WITHOUT medications. I would go to the doctors, but they wouldn't be able to do anything to help me. Looking back I wish they had mentioned about nutritional support, so my healing could have started earlier.

Deep down I knew there was not much wrong with me, it was more that I did not have my health than I was "mentally unwell". I used to wonder why, if it was a head problem, I would have physical symptoms as well?

My symptoms

Flu: I continually had the flu or I felt as if I was just two steps away from getting it again. I was always coughing even when I did not have the flu. I have not had a flu or head cold now for over five years. My immune system is so strong it can always fight back.

Dry skin: My skin was dry around my eyes. At one stage my skin had a greyish hue to it, I went and had an iron test done and the reading was 9 (10-30 is the normal range). I started eating more chicken, and my reading went up several points. My skin had no colour to it, with time a healthy glow returned. Another time I had a sore which just wouldn't heal, I instinctively knew this was because I wasn't in good health.

Cramps: I would always have cramps in my legs at night and terrible stomach cramps when I had my menses. Every month on the nutrients these have slowly disappeared. I know that magnesium and calcium are among two nutrients which help with relaxing your muscles.

Brain fog: When my menses came I would go into a brain fog for five days straight. I could not form a sentence or a thought. I had to be on my own then as I was so depressed. Physically this was the same, as I had to tuck up in bed for that whole five days as well. The energy was sucked out of me. Slowly I became better until I used to rest just for parts of the days on the bed. I can remember when I first went for a jog when I had my menses I nearly cried.

I AM CERTAINLY NOT IN BED ANYMORE!

Extreme shyness: Hiding in the house. For approximately 12 years, I hid at home not answering the door or phone for days on end. I would take it off the hook, and hide behind the curtains if people came. I used to go out just for basics and for walks. Some days I was not always like this and would talk to people.

Misery: I walked around for 15 years with my mouth turned down at the corners as I was so miserable.

Exhaustion: I was exhausted all the time, and would have to lean on the hand basin or sink when doing the washing up. I would be exhausted just from catching the bus.

Sometimes when I walked my feet would go "thud, thud", I was so tired. Sometimes it took me three days until I managed to get myself out to bring the washing in. I used to stress at night about putting the rubbish bin out the next day as I knew that was about all I could handle doing in a day. I used to get the bin out, but not bring it in at night. This is hard for me to relate to now as I whip the washing in and out in 5 minutes. I am up and down stairs all day.

Lack of concentration: I could not read more than a few lines of writing, because I was so tired I could not focus.

Trances: Lying on the bed in trances for parts of the day was probably one of my worst symptoms. When awake I felt I was in a walking trance which meant that I could not think straight e.g. I would forget to eat meals, or why I had come into a room.

Emotional outbursts: Stress levels were very high, hence I was always yelling and screaming at people. I was quite aggressive. I was always touching my face and hair, I was a nervous wreck.

Paranoia: I used to think people had stolen my wallet whenever I misplaced it, which was all the time. Whenever I went over the harbour bridge by bus, I used to think the bus was going to go into the water. I was very scared to go in lifts.

Dreams and violent thoughts: I would have dreams of being attacked by animals and people, and nightmares that I was always drowning in water. In my violent thoughts I would think about for e.g. horse's heads being chopped off when awake. I have none of these thoughts now.

Obsessiveness: I was worried about touching objects such as window levers for fear of getting germs. I would wash my hands continuously. I am still a clean freak now, washing my hands longer than normal, but not to the extent I used to before.

Racy mind: My mind would race all over the place, and I would always butt into conversations much to my friends' disdain. I would blurt things out that I know I should not have said. It was as if I could not control my mind. I could not seem to express myself properly and people would misunderstand me.

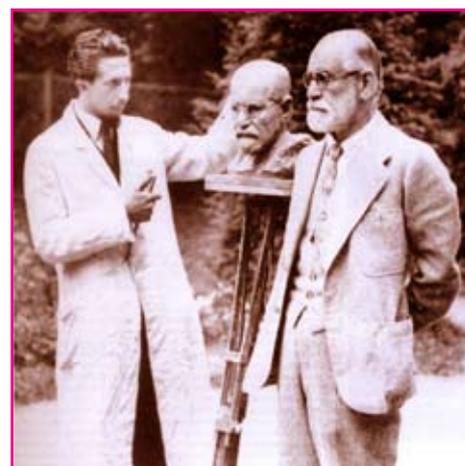
Indecisiveness: I just couldn't make a decision about anything.

Confusion and muddledness: I always got street names and directions completely muddled up and become confused easily.

Lack of appetite: I used to have my subconscious telling me not to eat or to eat very little. One day all I ate was a banana, and I would often go eight hours without food. With time on Empower my appetite seemed to become stimulated and my appetite increased. I know that zinc and B vitamins can help with this. I also did not have any appetite signals; they had completely disappeared, so I had never known if I had eaten too much or not enough. After 20 odd years my appetite signals have now returned. Sometimes I got over stressed and ate too much. However, I find now after being on Empower that this has ceased to be the case previously. Lack of appetite led to the next problem:

Lack of sleep: As I used to often go to bed hungry I could not get to sleep, and I would be up and down all night eating and then trying to get back to sleep. I would have 4, 5 or 6 hours sleep a night. Lack of sleep wears you down after years, – 8 hours was a treat. I was always counting how many hours sleep I had each night. I now sleep 8 hours a night and have energy to spare. I used to shake because of my hunger, but I did not know at the time that was why. One time I thought someone was under my mattress shaking it, but it was me shaking. I would wake in the morning plastered in sweat because I had hypoglycaemia (low blood sugar levels). Of course it wasn't just being hungry that deprived me of sleep, but it triggered it. The nutrients I was deficient in would have been a major problem as well. I had a happy feeling when I did eat. It was as if my blood sugar levels were going up. Again here is an important link between food and mood.

I only hallucinated once and that was because I had done 8 hours hard cleaning one day, (and 4 hours the day before) and



I had not eaten all day. I thought my big black bag on the couch was the shape of a person for a second.

First steps to healing

At the age of 37 I moved to the beautiful Whangaparaoa Coast. By this time I thought my health and life were out of control. I was just plodding along from day to day. I thought to just keep going. I finished my relationship with my only friend and became very depressed. So I went and joined a support group for company up there, not even realising it was a mental health group. There I met Ross a lovely Maori guy who I fell in love with. I weighed 132 kgs; I made an effort to lose weight and got down to 108kgs. I wanted to lose weight to be more attractive to him.

Ross suffered with schizophrenia which I knew nothing about, except for the recent film *A Beautiful Mind* shown on TV, which was a nightmare of a movie in its portrayal of someone suffering with a health issue. Again this is the media for you.

I could not understand why Ross a young man of 38 was lying on the couch like an old person. I went to the library, looking for an answer and I took out a book called *Vitamin B3 and Schizophrenia: Discovery, recovery and controversy* by Dr Abram Hoffer. I could not help Ross as he was too unwell (stimulant use) and under the mental health system. He very soon ended up living on the streets of Auckland under bridges and at the City Mission. This was a real eye opener to me as I did not know people lived like this. I was brought up in Remuera. I walked around for three days trying to find him (and I did) love! He loved me too.

I thought there might be something to the subject of this library book on nutrition which I was reading that could help me help myself. I went to Hardy's Health store and the lovely assistant showed me an American book called *Prescription for Nutritional Healing* by James Balch M.D and Phyllis Balch C.N.C. The chapter "Depression and Diet" recommended eating natural whole foods and taking nutritional supplements. Fascinated, I knew I was on to something. I ran to the supermarket and threw in cans of fish, chicken, eggs, wholegrain oats, soya milk, brown rice and bread, olive oil, fruit and vegetables, pumpkin seeds, nuts, unsweetened yoghurt.

This was a real change from my usual

highly processed and animal fat diet. I usually ate huge pieces of red meat, bacon, butter, cream, cheese, salami, sweetened yoghurt, white bread, rice and pasta, cakes and chocolate, and about two litres of Coca-Cola daily in the summer. I started drinking water, two glasses a day and then increasing it, this was a real shock to my taste buds after all that Coca-Cola! I started eating like this straight away. As it was such a sudden change, in the next day or two I noticed that colours seemed a lot brighter, and my mind felt a lot more alive. Although I have never taken hard drugs, I thought that the nutrients must have been hitting my brain cells with a drug like effect.

Another added bonus was that over the course of a year I lost a further 40 kgs till I was a sprightly 68kgs after an unhealthy 132kgs.

While the weight loss made me psychologically a lot happier, I want to stress I was still chronically biochemically depressed. Even though I was not big anymore, I still was lying on the bed in trances, so I did not have any more energy. At least now though when I walked up a hill I could walk straight up, where before I would be stopping about six times to rest before I could continue, because of the extra weight.

At the Hardy's Health Store the week after my first visit they had had a free in store naturopath who gave me an iridology test (reading your irises). Also a test with a little lap top computer from which they put wires on to you. (I think this was a Rife machine). She said I was lacking in all the B vitamins, magnesium, omega 3, coenzyme Q10 and I had a sluggish liver, which was not surprising considering my diet for the last 20 years. I bought some basic vitamin and minerals tablets and took the receipts to WINZ; alas they would not pay for them.

However, by June 2004 I learned about the supplement Empower and had organised through WINZ a Disability Allowance of \$54 a week, which they approved of because of Empower's scientific backing. Trials of this supplement had been published in five psychiatric journals with very promising results. I was lucky that I did not have any other costs on the D.A e.g. lawns, phone, and I just had to put in \$6 a week of my own money. A bottle costs \$120 and lasts 2 weeks on full loading dosage which I am still on 6 years later. Maintenance dosage is 7-8 a day when you are symptom free, which I am not on yet only because of my menses.

Healing

I remember I was still a little sceptical about whether nutritional supplements could actually make a big difference. I began taking the nutritional support not really believing it was going to work – so this was not the placebo effect.

I took three pills the first day, and quickly built up in a week to the maximum recommended at that time (18 pills a day). (It is now 15 is the recommended amount as it is now more bio available.)

In fact to be honest I did not think Empower was working, as nothing was happening for the first 3 months, and then I noticed small subtle changes such as I did not seem to be so tired or confused anymore. How I really noticed Empower was working for me was with my menses, every month I gained more energy. I do not have a heavy menses, but because of my massive nutritional deficiencies they drain me so much. This was a slow healing process – with time I would start to lie on the bed for just parts of the day, now, not at all. The brain fog over the years has lessened and lessened too, until it's just slight now.

Sharing the knowledge

In October 2007 I had my story on the front page of the *North Shore Times*; I was holding an apple and Empower pills in the other hand. I was very proud of that story, and thankfully the reporter wrote exactly what I had said. I had thirteen people call me; they wanted someone to talk to who understood them. One young woman has become one of my best friends.

I gave a talk in 2008 at an A.U.T psychology department class in Northcote. This was such a buzz for me; I was so excited that they wanted to listen to me. There was a time when I hid from people. The tutor even uses my two page story as a case study.

In 2011, I was interviewed for a TV1 news show relating to mental health issues.

Exercise

I wanted to make a special note of how this has helped me. Although it did not cure me as I have always exercised; once I was on the foundation of nutrients I found going for a walk or jog or dancing took away my feelings of low self-esteem. As well once those endorphins kicked in I felt so happy, and as if I could take on the world for the day.

I heard of a guy who in mania would do really hard physical exercise to exhaust himself. I know that there is nothing better than having a good sleep because you are worn out even if your legs are aching!

The Future

In August 2008 I started at the Framework Devonport Organic Gardens, where I have learnt about organic gardening. Consumers have their own gardens, and bring home our produce. Healthy soil, healthy food, healthy people, healthy planet are the green philosophy there. The staff gives us a lot of support and set goals to help us go back to work. This is not bad considering I have not been well enough to work for 17 years. For ages before I started at the gardens, I wanted to go there, however I just could not initially cope with this work type situation. I am now doing a computer course, volunteering at the hospice shop and I am looking for paid part-time work.

Some Suggestions

Here are some basic facts I suggest you consider:

- Our entire bodies are made from the nutrients we obtain from food. Every single cell – DNA, hormones, neurotransmitters, eyes, teeth, skin; bones are made from proteins, water (nearly 70% of our bodies), carbohydrates, essential fats, enzymes and vitamins and minerals to make everything function properly. A deficiency in any one of these nutrients has serious consequences for us.
- We are told via the drug companies through the media, Ministry of Health and doctors, that genetics is responsible for our health issues. It is only a theory that our genes make us predisposed towards an illness. A stressful life event e.g. divorce, lost of job, exams, drug use; can certainly trigger health issues. Genes account for only about 30% of our health and lifestyle affects us 70%. This is according to Dr Moira Fordyce a geriatrician from the Stanford University's School of Medicine. www.articleslatimes.com2009/febA2007LAtimes. This is good news, because if we control our lifestyle we have a lot of control over our own health.
- Stress depletes many nutrients from our body including zinc, magnesium, vitamin C, and all the B vitamins, which are all vital to the nervous system including of course the brain.

- Our moods e.g. being tired, grumpy are often the first to become apparent, when we have any health issue. This is because our brains, although weighing only 2-3% of our body weight, use up to 40% of the energy from the carbohydrates we consume.

- We have the remarkable ability to heal ourselves if given the right raw materials from which we are made; this is called orthomolecular medicine, (correct molecule) which addresses the underlying cause of our health issue.

When our brain chemistry becomes restored on something like Empower, we need to lower our conventional medications. It is dangerous not to lower medi-



cation levels as brain function becomes restored as we will become overmedicated and suffer adverse drug reactions. It is possible to completely eliminate your conventional medications, and be in excellent health without them when you have corrected your biochemical imbalances.

- We have nutritional deficiencies because of conventional farming practices of depleting soils of nutrients, and not adding them back. Herbicides, pesticides, fertilisers, irradiation (spraying with toxins) and growth hormones, genetic engineering (g.e) are linked to cancers and neurological diseases. Then our food processing methods (e.g. fruit picked unripened and kept for up to 6 months in cold storage) pasteurisation, homogenisation, and canning. Processing food e.g. brown food to make white food e.g. brown to white rice, strips over 77% of nutrients from it. Then toxic chemicals such as preservatives, (salting, smoking and fermentation are more natural) colourings and additives are added. Then we over boil. We should eat raw, lightly stir fry, steam or boil in a little water for just a few minutes. Microwaves can be called cancer boxes. Reference Drs Blanc and Hertel from the Swiss Federal Institute of Technology. www.mercola.com/.../microwave/hazards2htm-UnitedStates.

- For unknown genetic or metabolic reasons some people have a higher need for nutrients than others to function. Empower has a staggering 960mcg of vitamin B12 in it, this is 15,000 times the recommended daily dose. (This is halved for maintenance dosage, so it would be 480mg). My vitamin B12 reading is 1100 HH, 400-700 is the normal range; I need more to function properly. Of course we all need individual dosages and the support of a nutritional psychiatrist or a naturopath or holistic doctor concerning the amounts in relation to your medications.

- In Germany St Johns wort is prescribed as the number one antidepressant over conventional antidepressants. St Johns wort is remarkably safe. Compared with Prozac and other prescription antidepressants, it has a very low incidence of side effects. Reference, prominent psychiatrist Dr Hyla Cass, *St Johns wort: Natures Blues Buster*, pages 83-84. This is funding choices over health choices otherwise countries such as New Zealand would prescribe St Johns wort over antidepressants. St John's Wort has been studied extensively by Commission E, the scientific advisory panel to the German government. www.holistic-herbalist.com/StJohns_wort.

- Antidepressants (S.S.R.I's) recycle the serotonin in your brain, with side effects. The happy neurotransmitter (chemical messenger in the brain) serotonin is made from the amino acid tryptophan which is found in high protein foods such as chicken, fish, eggs, cheese. Also it's worth supplementing with 5-HTP (a derivative of tryptophan, that is one step closer to serotonin) and derived from the African plant *griffonia*. This travels across your brain barrier faster. Tryptophan BUILDS new serotonin factories with no side effects. So is it not better to eat yourself happy?

- The gut produces two thirds of the body's serotonin, the "happy neurotransmitter" so in essence you are feeding two brains. The right foods make you happy, the wrong foods depressed. There is definitely a gut-brain connection. See: Patrick Holford's *Optimum Nutrition for the Mind*, page 13.

- White sugar has around 90% of its nutrients stripped during the refining process. Eating excess refined sugar also uses up all of the B vitamins, magnesium and chromium during the digestion process further depleting you, many nutritionists call it deadly white poison.

Read your food labels, every known illness from asthma to cancer, arthritis, and heart disease are linked to sugar, as it weakens your immune system, and makes you more acidic. We get all the natural complex sugars we need in our diets from fruits and vegetables. Try molasses, (the nutrient rich matter from the first stage of sugar processing of sugar cane) stevia, (a natural plant sweetener) good quality honey, cinnamon, vanilla, ginger, and coconut. Dates, pineapple, plums, bananas, strawberries, kumera, parsnips, pumpkins are other sweet ideas too.

- Food is fuel for your body and mind not something to fill the gap. Fill it with junk food and you won't function. Give yourself organic, natural unprocessed whole foods and you will feel alive and have energy.

Optimum nutrition for optimum health!!!

Vitamin D and Depression

Insufficient levels of vitamin D have been linked to a higher risk of depression in people over 65, in a study conducted by researchers from the National Institute on Aging in Baltimore, USA, and published in the *Journal of Clinical Endocrinology and Metabolism*.

“[Preventing] vitamin D deficiency in the elderly may become in the future a strategy to prevent the development of depressive mood in the elderly and avoid its deleterious consequences on health,” the researchers wrote. “In addition, normalization of vitamin D levels may be part of any depression treatment plans in older patients.”

The study was conducted on 423 men and 531 women who were participating in a study on loss of mobility in the elderly. All

participants were over the age of 65. At the beginning of the study, 18 percent of men and 42 percent of women were depressed. A full 72 percent of those suffering from depression also had insufficient levels of vitamin D in their blood (less than 50 nanomoles per litre.) Among women, insufficient levels of vitamin D were linked to a significantly greater decline in mood during the following six years. In addition, women who were not depressed at the beginning of the study but who had insufficient levels of vitamin D were significantly more likely to become depressed in the following six years than their counterparts with sufficient levels of the vitamin.

Vitamin D deficiency is known to increase the risk of fractures and osteoporosis, and may also increase the risk of infection, autoimmune disorders and chronic diseases such as cancer and heart disease.

Dyes Linked to Hyper Kids

Kids don't need much help getting hyper – they're bundles of energy, and they don't come with an “off” button.

But some foods can put them into overdrive, turning an already amped-up child into a full-blown monster – and there's one ingredient in particular that parents need to watch out for: artificial colouring.

Finally, an FDA panel has agreed that food dyes are responsible for rotten behavior and even ADHD-like symptoms in at least some kids... but don't expect them to actually do anything about it.

Instead of calling for warning labels or even an outright ban on artificial colors as some scientists and parents groups want, the panel called for more research.

That's code for “we're getting uncomfortably close to upsetting our pals in the food industry, so let's stop right here.”

But we don't need more studies, because researchers have been chasing the artificially coloured rainbow for years – and there's no pot o' gold on the other side... just some of the rottenest little leprechauns you've ever seen.

For example, two studies out of the U.K. found that kids given foods that contain artificial dyes and the preservative sodium benzoate start to climb the walls.

Those studies and others like them helped move Europe light years ahead of us-- and foods with artificial colours sold there now carry labels that say they “may have an adverse effect on activity and attention in children.”

That's a frightening thought when you consider that some foods can have up to nine different artificial colourings – and they're

not all in cereals and Jell-O.

You might know that cheese isn't normally day-glo yellow... but you may not realise that artificial colours are used regularly in everything from pickles to salmon.

That's right, salmon: Farm-raised fish are fed dye pellets to give them the nice pink color their wild brethren have naturally.

Of course, there's a much larger issue here and that's the fact that dyed foods are almost always processed foods – and you and your kids shouldn't be eating them anyway, no matter what kinds of colors are in them (or even if they contain no colours at all).

As bad as dyes are, there are plenty of other ingredients that are far worse – including the sugars and starches that make up the bulk of the modern American diet. Give this junk to a kid, and he could end up so nutritionally deficient that you're bound to see problems ranging from mood disorders to ADHD-like symptoms – even if the foods they eat contain no dyes at all.

SOURCE:
healthrevelations.com/2011/04/28/food-dyes/



“Top Psychiatrist Trashes His Own Work”

by Jon Rappoport

Headlines you won't see:

- *All Psychiatric Drugs Banned; Too Toxic*
- *Psychiatric Profession Judged Unstable, Unscientific*
- *Foundation of psychiatry discovered to be a fantasy*

I recently learned about a teen whose life was turned inside out and ripped from him. A psychiatrist had diagnosed him at a young age with ADHD, given him Ritalin...and then the parade of newer diagnoses followed—Clinical Depression, Bipolar, Oppositional Defiance Disorder – and the boy ended up on Valproate and Risperdal, two powerful toxic drugs that dropped him over the cliff into psychosis.

Does this seem impossible?

What lies behind the story, one that is happening with increased frequency all over the world—every day?

Psychiatrists are *carte blanche* members of an elite club with “diplomatic passports” of the medical variety.

Protected by governments and the press. Protected by colleagues. Protected by the public, yes, who blithely accept psychiatric diagnoses as rigorous science.

So let us start here. There is a book called the *DSM*, and it is the bible of the profession. *DSM* stands for *Diagnostic and Statistical Manual of Mental Disorders*. In it are listed all the names and descriptions of these disorders. The latest edition, the *DSM-4*, offers no less than 297 separate psychiatric conditions.

How are the disorders discovered? Well, “discovered” is not the correct word. COMMITTEES of professionals hash over ideas and definitions and reports, and

they issue the verdicts. They name the disorders. They describe them.

It's all committee work. NO disorder finds its way into the *DSM* through a clear-cut organic biological or chemical test. Those tests DO NOT EXIST. The tests do not exist for ANY so-called mental disorder or disease.

Is this possible? Conceivable?

The latest edition of the *DSM*, the *DSM-4*, was led by Dr. Allen Frances. In a January 2011 article in *Wired*, by Gary Greenberg, Dr. Frances is quoted as saying, astonishingly:

“There is no definition of a mental disorder. It's bullshit. I mean, you just can't define it.”

This is on the level of stating, “You know,

“There is no definition of a mental disorder. It's bullshit. I mean, you just can't define it.”

we were quite sure bloodletting was a wonderful way way of treating all illness, and we had all sorts of reasons for recommending the procedure, but then after we sent out the report by horseback and mule all over the land, we met again for an informal chat and realized the entire notion of draining blood from the patient was completely insane.”

But Dr. Frances is not the only psychiatrist to point out the emperor has no clothes.

The late Dr. Loren Mosher, psychiatrist, former chief of the Center for Studies of Schizophrenia at the National Institute of Mental Health, in his resignation letter sent to the American Psychiatric Association (APA), wrote:

“Finally, why must the APA pretend to



know more than it does? *DSM-4* is the fabrication upon which psychiatry seeks acceptance by [the profession of] medicine in general. Insiders know it is more a political than a scientific document.”

Thomas Szasz, Professor Emeritus of Psychiatry, State University of New York, states:

“The designation ‘disease’ can only be justified when the cause can be related to demonstrable anatomical lesion, infection or some other physiological defect. As there is no such evidence for any mental disorder, the term disease is a misnomer; in fact, it is fraudulent.”

Dr. Peter Breggin, psychiatrist, author of *Toxic Psychiatry*, former staff member at the National Institute of Mental Health and faculty at Johns Hopkins University, writes:

“No causal relationship has ever been established between a specific biochemical state of the brain and any specific behavior, and it is simplistic to think it is possible.”

Yes, people of all ages and backgrounds have problems.

But recognizing that is a far cry from codifying these difficulties under titles and including them in a professional guidebook – and claiming they are actual disorders demanding powerful medication.

However, *DSM-4* is out there and it is the Bible. Therefore, for example, its new and improved (and looser) definitions of ADHD, autism, and bipolar disease have allowed for many more diagnoses – and THAT means more widespread use of highly powerful and toxic drugs. Risperdal, Valproate, and yes, even Ritalin, a cheap form of speed.

And the *DSM-5* is on the way. It's due out in May of 2013. So far, the panels of deliberating committees have come up with three new suggestions for disorders:

Psychosis Risk Syndrome (PRS)

Apparently, this is a “pre” diagnosis, an early-warning signal from the inner landscape that alerts the psychiatrist to impending disaster. Of course, the very real possibility that the drugs he is already prescribing to the patient are the cause of “PRS” is out of the question—because such an admission would amount to professional suicide.

Temper Dysfunctional Disorder (TDD)

A child blows up now and then. Could this have something to do with the pound of sugar he’s ingesting every day with his high-speed sports drink? Could he be reacting to the load of artificial colours and dyes in his processed meals? Couldn’t be the kid’s alcoholic father who beats him once a week – certainly not. Or any of a hundred other reasonable causes. A TDD diagnosis simply means he’s very angry, so medicate him to within an inch of his life.

In fact, if PRS and TDD are listed in the new DSM-5, untold numbers of new children will be on heavy drugs every day.

Minor Neurocognitive Disorder (MND)

This one is for the old folks. Well, probably anyone over 50. Find yourself failing to remember a detail here and there? Can’t find your keys? Boom. You could be at risk for Alzheimer’s. And even though there are no meds that can cure the big A, we’ll give you drugs for MND, and we’ll say this will delay the onset of Alzheimer’s, although we have no idea whether that’s true. In fact, we have no idea whether you are going to experience senility and dementia at any point in your life. But just to be on the safe side...

Adverse effects of Valproate (given for a bipolar diagnosis) include:

- Acute, life-threatening, and even fatal liver toxicity;
- Life-threatening inflammation of the pancreas;
- Brain damage.

Adverse effects of Lithium (also given for a bipolar diagnosis) include:

- Intercranial pressure leading to blindness;
- Peripheral circulatory collapse; stupor and coma.

Adverse effects of Risperdal*

(given for “bipolar” and “irritability stem-

ming from autism”) include:

- Serious impairment of cognitive function;
- Fainting;
- Restless muscles in neck or face, tremors (may be indicative of motor brain damage).

In 1986, *The International Journal of the Addictions* published a most important literature review by Richard Scarnati. It was called “An Outline of Hazardous Side Effects of Ritalin (Methylphenidate)” [v.21(7), pp. 837-841].

Scarnati listed a large number of adverse affects of Ritalin and cited published journal articles which reported each of these symptoms.

For every one of the following (selected and quoted verbatim) Ritalin effects, there is at least one confirming source in the medical literature:

Paranoid delusions
Paranoid psychosis
Hypomanic and manic symptoms, amphetamine-like psychosis
Activation of psychotic symptoms
Toxic psychosis
Visual hallucinations
Auditory hallucinations
Can surpass LSD in producing bizarre experiences
Effects pathological thought processes
Extreme withdrawal
Terrified affect
Started screaming
Aggressiveness
Insomnia
Since Ritalin is considered an amphetamine-type drug, expect amphetamine-like effects
Psychic dependence
High-abuse potential DEA Schedule II Drug
Decreased REM sleep
When used with antidepressants one may see dangerous reactions including hypertension, seizures and hypothermia
Convulsions
Brain damage may be seen with amphetamine abuse.

A recent survey revealed that a high percentage of kids diagnosed with bipolar had first received a diagnosis of ADHD. This is informative, because Ritalin and other speed-type drugs are given to kids who are slapped with the ADHD label. Speed, sooner or later, produces a crash. This is easy to call “clinical depression.” Then comes Prozac, Paxil, Zoloft. These drugs

can produce temporary highs, followed by more crashes. The shrink notices this up and down pattern – and then comes the diagnosis of bipolar (manic-depression) and new drugs, including Valproate and Lithium.

In case you hadn’t noticed, the profession of psychiatry has recruited numbers of celebs and politicians who are dedicated to “removing the stigma attached to a diagnosis of a mental disorder.” These supporters frankly have no idea what they’re talking about. In love with the idea of appearing to do good, they go on and on about how mental illness is no different from diabetes, and we should all give great amounts of love and support to those who...well, you know the script. Some actual knowledge might help everybody concerned.

In the US alone, there are at least 300,000 cases of motor brain damage incurred by people who have been prescribed so-called anti-psychotic drugs (aka “major tranquilizers”). Risperdal is one of those drugs. (Source: *Toxic Psychiatry*, by Dr. Peter Breggin)

This psychiatric drug plague is accelerating across the land, and gullible adults and children under their roofs are taking the pills.

Where are the mainstream reporters and editors and newspapers and TV anchors who should be breaking this story and mercilessly pounding on it week after week? They are in harness.

About the Author

Over the last 35 years, Jon Rappoport has gained a reputation as one of the most relentless medical investigative reporters in the world. Nominated early in his career for a Pulitzer Prize, Jon has written for CBS Healthwatch, *LA Weekly*, *Spin Magazine*, *Stern*, and other newspapers and magazines in the US and Europe. His is currently the associate producer on a film in progress, *American Addict*, detailing the effects of pharmaceuticals on the US population.

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CAUTION: Do not stop taking psychiatric drugs without first consulting with your physician as withdrawal effects can be dangerous. – Ed.

* Risperdal = Risperidone

Meditation can cut heart attacks by as much as half – Study

June 28, 2011

Transcendental meditation, the relaxation technique made famous by the Beatles, can cut heart attack and stroke death rates by up to 50%, new research has found.

The practice, which involves the continual repeating of a mantra, was found to reduce high blood pressure, cholesterol and thickening of the arteries. It is also protects against diabetes.

"This is a seminal finding," said Dr Norman Rosenthal of the American government's National Institute of Mental Health.

"The prevention of heart attack and stroke and actual lengthening of lifespan by an alternative treatment method is exceedingly rare, if not unprecedented.

"If Transcendental Meditation were a drug conferring so many benefits, it would be a billion-dollar blockbuster."

Stress is a major factor in heart disease and meditation experts say the technique can help control it. Researchers at the Medical College of Wisconsin followed 201 men and women with an average age of 59 who suffered from the narrowing of arteries in their hearts for nine years.

Half of the group were taught Transcendental Meditation along with their normal treatment while the others just received advice on how to modify their diets and exercise routines. They found that those who regularly meditated reduced their chances of dying or having a heart attack or stroke by 47 per cent compared with those who received traditional care.

In those who were particularly enthusiastic about the meditation or unusually susceptible to stress, the results were even stronger. They showed a two-thirds reduction in chances of dying during the trial. Professor

Theodore Kotchen, the co-author of the £2.5 million trial, said: "These findings are the strongest documented effects yet produced by a mind-body intervention on cardiovascular disease.

"The effect is as large or larger than major categories of drug treatment for cardiovascular disease."

"This study builds on previous research findings showing that the Transcendental Meditation program reduces high blood pressure, high cholesterol, insulin resistance, psychological stress, and atherosclerosis, and takes it to the next step — lower rates of death, heart attack, and stroke," explained Dr Robert Schneider, co-author.

The research was carried out in the African American population but there is no reason that the same results would not be repeated in the wider world.

Cardiovascular disease is Britain's biggest killer accounting for almost 200,000 deaths a year.

The researchers said that meditation technique should be used as a compliment to the usual drug treatment and not as an alternative.

Transcendental meditation which is based on an ancient tradition of enlightenment in India, involves sitting quietly and concentrating to focus the mind inwards by silently repeating a mantra – a word or phrase.

The practice, which is carried out for 20 minutes, twice a day, is said to induce inner peace by allowing thoughts to flow in and out of the mind.

It was popularised in the 1960s through the Beatles who learnt the technique through their guru Maharishi Mahesh Yogi. The study was due to appear in *Archives of Internal Medicine* but last night its editor said publication was being delayed while last minute data provided by the research team was analysed.

Source: Telegraph.co.uk

(CONTINUED FROM PAGE 12)

from areas that could be contaminated such as those growing around the perimeter of homes built before 1980 as these could have been painted with lead paint which may flaked off the house. Also avoid those from fence lines in case neighbours decide to get "spray happy" and the weeds are contaminated by spray drift.)

Dandelion-like plants that are not dandelions:



Cats ear (*Hypochaeris radicata* or *Hypochaeris radicata*)



False dandelion (*Pyrrhopappus carolinianus*) also known by the common names Carolina Desert-chicory, False-dandelion and Carolina False Dandelion.



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Many many thanks for your prompt service in sending my Juicer. It did arrive early Saturday and with much excitement I got right into juicing. What a difference the Oscar is. Far better tasting juice with all the nourishment we require. Quiet - no waking up the house now when I juice early in the morning and what a breeze to clean and of course looks great on my bench top. I can't wait to get some of that wheat grass sown and start really getting healthy.

Carla, Wellington