



More Letters

in overall health, among the industrialized nations, according to the U.N. World Health organization. On page 4 of his 1988 report, the Surgeon General says it clearly: "Together, these diet-related conditions inflict a substantial burden of illness on Americans." It is felt by many holistic physicians that following basic RD advice, as taught in schools, has been and is "feeding" patients right into the medical disease pipeline. Delaying medical treatment, which RDs claim happens by the seeking of alternative advice, is convoluted logic since their advice may be a significant part of the cause of the medical problems in the first place. Sort of like the dentists who regularly gave their young patients candy after each treatment. Yet, the Colorado Dietetic Association claims that the public is endangered by nutritionists not certified as registered dietitians.

A realistic way to judge what potential harm natural nutritionists are causing the public is to check with the courts. We live in the most litigious country on earth, with by far more lawyers per capita than any other nation. Recently a video rental store in California was sued by an irate customer who got home and discovered the wrong movie in the case. Americans are off to the races when it comes to liability, and everything seems fair game, no matter how ridiculous. The number of court cases filed against nutritional practitioners is so small that it is hard to find data on it. Most of the extremely rare cases filed are actually filed by local medical societies and the state attorney generals for the practice of medicine without a license, not initially by a consumer who felt abused or victimized. State medical societies have actually sent "stooges" posing as patients to holistic medical offices and other natural health professionals to entrap them into the "practice of medicine" with nutrition. It has been that difficult to find injured nutritional health consumers. On the other hand, medical malpractice suits are so common that six-figure malpractice insurance premiums are not uncommon. Statistics show that most medical doctors will, at some time, be sued for malpractice. The question therefore is: *If harm is being done, where are all the victims and their lawyers?*

It is important for those health professionals using nutrition to be clear that nutrition should not be used to *fight disease* but rather to *promote the causes of*

health and balance in the body. To have healthy people we need healthy food, and to have healthy food we need healthy soil and farming systems.

In their paper to the legislative committee, RDs cited one "giveaway" of health frauds and quacks was the use of the word "alternative." Here, the RDs, perhaps as loudly as they can proclaim, reveal that they would be better off in the pre-Gorbachev communist bloc where the State does not allow any presence or even the concept of "alternatives." Yes, alternative is a particularly American concept, and one that Americans have died all over the world defending. It is the inalienable right of an American to search for a different and perchance better way of doing something. The word "alternative" is a cherished word to lovers of freedom and a hated and frightening concept for anyone who needs the cold monopoly of the State to intervene on their behalf because the free marketplace of goods, services, and ideas is not responding to their advantage. Try to think of a single area of human function where the "alternative" was not the factor that led to the betterment of humankind. Kings and princes do not like alternatives; Americans demand them.

"*Eternal vigilance is the price of freedom*" is a dictum that should be constant in the mind of a free people. James Madison knew that when he forced the delegates to include the pivotal ninth amendment to the Bill of Rights. That's the one that says that the rights that the government obtains through the Constitution cannot be used to take away the rights of the people, enumerated in the Bill of Rights or not. The right to seek the counsel of anyone we choose, in any matter we choose, is the right to be called an American. The filthiest word in the English language, the word that brought down the Communist experiment, is the word "*monopoly*." It fouls the soul and clouds the mind and blinds the people to the betterment that evolves through a free selection of goods, services, concepts, and ideas. At the current rate that ideas and concepts and knowledge are changing on a global scale, everything should be printed in pencil, and textbooks would be most appropriate in a looseleaf form. No, we don't need laws that limit and grant cartels. These times, more than ever, call for an increasingly impartial access to all information that can lead to wise choices.

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Estrogen in 1990

Editor:

The Magic of Estrogen Therapy

A stage magician can produce surprising illusions by directing the audience's attention to where something is not happening, or to a distracting gesture. The billion-dollar estrogen industry has learned the trick of directing the public's attention to where some plausible benefit might be expected, and of politely ignoring the areas where death and destruction are in fact being produced.

Interestingly, another billion-dollar industry - the edible oil industry - is using the same prestidigitation to profitably misinform the public. Decades ago, unsaturated oils were found to lower cholesterol. However, studies showed that adding the polyunsaturated oils to the diet didn't prevent death from heart disease, but that it did increase cancer deaths. There were also warnings that the oils could cause problems with blood clotting. There was silence from the industry, the government, and the medical profession in response to the bad news.

When evidence of an association between blood lipids and heart disease was found, the blood tests, rather than actual health, became the focus of publicity. A high ratio of HDL (high density lipoprotein) to LDL (low density lipoprotein) came to be identified with "health," because of its association with lower risk of heart disease, although it was also an indicator of a risk of death from cancer. By ignoring everything but heart disease, it could be argued that "If high HDL equals health, and estrogen and PUFA (polyunsaturated fatty acids) cause HDL to increase, then these things promote health."

Concerning estrogen, similarly twisted reasoning led to its trial in the 1960s to prevent heart attacks in men, but the experiment was stopped when the rate of heart attacks increased sharply.

More Letters



Focus on the positive. Ignore the HDL-cancer association. Ignore the association of estrogen with thrombosis, embolism, stroke, edema, obesity, depression, myocardial infarction, eclampsia, epilepsy, brain damage, and immunodeficiency. Ignore the implications of thyroid suppression.

In her comedy routine, Judy Tenuta describes a most implausible situation, and then belligerently pleads: "It could happen; it could happen." The ignorance or mendacity which allows experts to plead the importance of one possible benefit, in the face of clear evidence of a multitude of serious dangers, defies any sort of conventional scientific response.

The recent corruption scandal involving the FDA's generic drug division might come to mind when I suggest that Tenuta's satire illuminates the attitude of the FDA (and the medical industry), but I believe the indictments are part of the prestidigitation.

Marvin Seife, who was head of the generic drug division, was indicted for perjury. The indicated intent of Congress had been to support generic drugs to break the monopoly of the biggest drug companies; but for the last six years there has been an intense campaign by the monopolies to keep generic drugs off the market, and Seife's indictment must be evaluated in this context.

Earlier, an FDA official who was too friendly toward DMSO and its developer, Dr. Jacob, was exposed for accepting a loan from the doctor. While keeping new entrepreneurs from intruding into the fabulously lucrative drug business, those little prosecutions allow the public to believe that the government is policing itself. (If your corporation could expect an additional \$4,000,000,000 in profits in the next 10 years, but only if a few men would narrow the scope of their judgment, how do you suppose you could encourage those few men to go in the right direction?)

Just One Problem: Clots

Forty-five years ago the Shutes found that estrogen promotes the clotting of blood. At the same time, Knisely was studying the phenomenon of "blood sludging," which occurs under many types of stress. At that time it was recognized that there is an equilibrium between clot formation and clot removal (fibrinolysis).

Vitamin E and magnesium and some substances produced by the body shift the balance away from clots. Estrogen, calcium, altered water content and blood volume, and sluggish flow of blood encourage the formation of clots. Some contemporary

articles acknowledge that estrogen can cause thrombophlebitis or thromboembolism and can exacerbate gallbladder and liver disease and breast cancer, but these warnings are subordinated to praising the benefits of estrogen replacement therapy. (Valery Miller, Veronica Ravnkar, and Chrystie Timmons, "ERT: Weighing the risks and benefits," *Patient Care*, 30-58, June 15, 1990.)

Some quotations from the ERT article by Miller, et al., illustrate current medical attitudes.

"Although the reasons for its apparent protective effect on the heart are not fully understood, oral estrogen does decrease low-density lipoprotein cholesterol and increase high-density lipoprotein cholesterol.

"Although no prospective study has yet shown that estrogen protects against cardiovascular disease, other studies show that women who use estrogen or who have ever used estrogen have a reduced risk of heart disease. The only study that has not confirmed these results is the Framingham Heart Study, which contained smaller numbers of older women and classified chest pain - a notoriously poor identifier of heart disease in women - as a cardiovascular end point." (p. 47)

The prospective long-term Framingham study noted above used to be highly praised as a source of reliable information on heart disease. In contrast, some of the studies that are praised in prestigious journals are wildly unscientific. For example, the heart disease in Marin County women receiving estrogen has been compared with

that of women in the East Bay not getting estrogen. Marin County is a rich residential area, which is swept by ocean breezes while across the bay there are more working class people (and working class men are known to have nearly 50% more heart disease than white collar workers), and the wind from one direction blows smoke from a concentration of industries and refineries, from another direction it carries the pollution from San Francisco's traffic, and from another direction it brings the agricultural poisons of the Salinas area.

If enough women die from strokes, pulmonary embolisms, accidents, suicide, cancer, and loss of immunity caused by estrogen excess, it is possible that some competent study will eventually show that estrogen treatment reduces the mortality from heart attacks, but this is not likely.

It is the estrogen in oral contraceptives which correlates with their effects on the clotting system. *In the last 20 years there has been general agreement that increased risk of cardiovascular disease, rather than cancer or immunodeficiency or depression, is the most important concern about the effects of oral contraceptives.*¹⁻¹¹

There are many ways that estrogen can contribute to a hypercoagulable state (leading to cardiovascular disease). Some of these involve altered liver function, including disturbed production or metabolism of 8 different coagulation controlling factors.^{12,13} Since estrogen can stimulate endothelial proliferation (often

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cited as crucial in heart disease) and reduces the rate of venous flow,^{14,15} it is necessary to consider the whole complex circulatory system, and not just the clotting factors.

The thyroid and other hormones such as insulin and adrenalin are influenced by estrogen, and must be taken into account. Although I'm not sure what clinical perceptions led the Shutes to study estrogen's effect on clotting, pregnancy and lactation are notoriously associated with hypercoagulability (eclampsia and thromboembolism, for example) produced by the body's high estrogen production at those times.¹⁶⁻²³ The very high doses of estrogen that were once used to suppress lactation were found to produce clotting problems.²⁴ Postmenopausal use of estrogen causes changes in coagulability.^{13,25,26}

In the mid-1970's when I pointed out that menopause resembles Cushing's syndrome²⁷ I hadn't investigated that disease of cortisol-excess enough to know the full extent of the parallel: for example, hot flushes, night sweats, and insomnia, such common menopausal symptoms, are also common symptoms in Cushing's syndrome. Estrogen's tendency to increase cortisol production should be considered in connection with the brain-aging effects of both estrogen and cortisol.^{28,29}

Both estrogen and cortisol weaken the structural components of tissue, and the bruising which is so commonly associated with the premenstrual syndrome seems to involve the unopposed action of both of these hormones. The women who often have bruised thighs in their twenties are later susceptible to hemorrhages into the white part of the eye, and still later to bleeding into the brain, presumably because there is a hierarchy of protection against the tissue-weakening effects of those hormones, with the brain being the last to lose its resistance.

For example, the brain content of progesterone, pregnenolone and DHEA is normally 20 or 30 times higher than the serum concentration, and these hormones are protective against both estrogen and cortisone. As far as I know, it is possible to have fragile blood vessels at the same time as an excessive tendency to clot, though when the vessels break, the extent of the bleeding will be smaller in the hypercoagulable state. The observation that low cholesterol is associated with

increased risk of hemorrhagic stroke³⁰ suggests that the age-related decline in progesterone, pregnenolone, and DHEA occurs earlier when there is a low level of the precursor substance, cholesterol.

Clotting too easily is just one of the problems that can be caused by an excess of estrogen, and I don't mean to give it too much emphasis, since I consider its toxic effects on the brain, and its acceleration of brain aging to be its worst effects - though its cancer inducing effects on the uterus, the breast, the lung, the bowel and liver, and brain, are certainly serious. But in 1990, estrogen's cardiovascular toxicity is probably the aspect that people need to be reminded of.

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