The Seven Pillars of Foundational Health -

With over 30,000 named diseases and the list growing yearly it has become apparent that the real answer to these disease processes lies with foundational functions that give rise to health function and correction of abnormal processes resulting in disease.

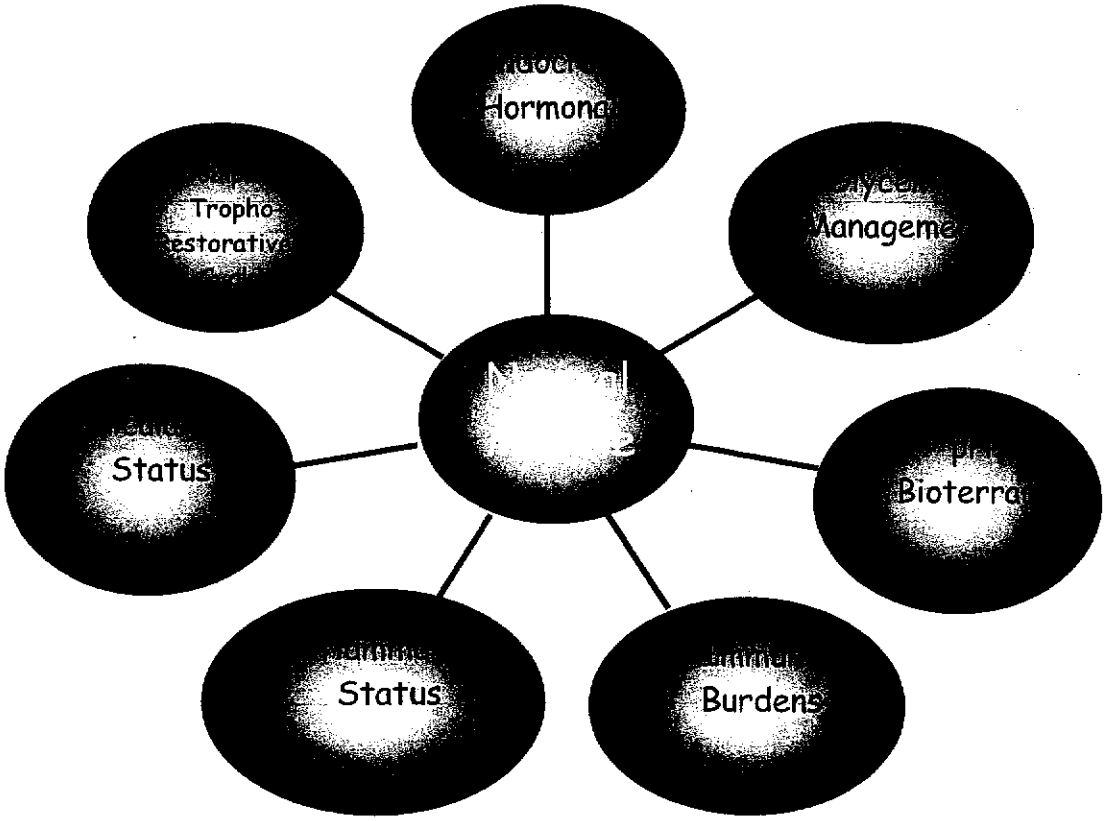
We adhere to a 7 pillar approach to the foundation of health, and from this approach over the past 25 years and experience with over 28,000 different people we have found the body capable of correcting virtually all of the misalignments from healthy function that humans experience. During your care here these 7 pillars of foundational health function will be addressed and balanced as well as possible, while also addressing the specific complaint that may have compelled you to seek care. Most people vastly underestimate the body's ability to successfully achieve change and improvement because they have only tried fighting symptoms and disease while ignoring the underlying functions. This is what we base our success upon.

The following 7 pillars of foundational health are listed in order of deemed physiological priority, with the most important described first:

1. Endocrine/Hormonal Health - The hormones are the most powerful control system of the body and must be balanced in order to activate the body's other powerful systems of repair and healing. Most people lead challenging lives complicated by hormonal disruption and glandular depression. Gradually we will detoxify the hormone disrupters that interfere and block normal hormone activation, while also tropically strengthening and repairing the seven levels of glands that comprise the endocrine/hormone system.
2. Glycemic Management - The ability of the body to properly control blood sugar and this regulate insulin and Cortisol levels is essential to reducing stress and promoting longevity. Many longevity considerations seek to limit the typical elevation of Cortisol and insulin spikes that lead to premature aging and the complexity of secondary symptoms like lipid/cholesterol imbalance resulting in heart disease.
3. Bioterrain Status - This principally concerns itself over the body's ability to neutralize the net acid excess that builds up in normal life. When we become too acidic we experience increased inflammation, irritability and emotional intensity. The most powerful effect over this acidity excess if accomplished through the alkalizing effects of certain food and minerals, especially Calcium, Magnesium, and Potassium
4. Inflammatory Status - As we age inflammatory levels increase due to the cumulative repair deficit occurring in our lifestyles. Indeed many believe that an elevated inflammatory level is the entry level doorway to almost all degenerative diseases. Inflammation is powerfully affected by allergens, which act as engines that up regulate our inflammatory mechanisms. Identification and removal of the basic inflammatory engines can reduce inflammation and address the repair deficit.
5. Immune Burdens - Due to incomplete immune process and the use of physiology-interrupting drugs infections, infestations of parasites, and toxicity can be carried in the body as a low grade subclinical burden. Even though we may be unaware of these burdens, they nonetheless exhaust immune functions running down the bone marrow and leaving the body vulnerable to other more lethal issues.
6. Circulatory Status - Recently understanding has expanded to see that loss of circulation can cause tissue weakness and even death (necrosis) resulting in the onset of a complexity of diseases. More and more people are using natural remedies to successfully reverse circulatory blockages and bring renewal and healing to the oxygen/nutrient starved tissues distal to the blockages. In any longevity discussion circulatory status must be addressed.

7. <u>Tropho-Restorative Cycles</u> - The body knows how to repair and correct its' own imbalances, yet so often these normal corrective functions and misunderstood and thwarted with drugs or lifestyle that interrupts the normal process. Fever is an example of a commonly misunderstood process of correction. It is vital that we become familiar with the difference between a healing crisis of repair and a disease crisis so that the normal self-correcting processes can be allowed to complete themselves and complete correction can be realized.

For many health and disease are mysteries that make them uneasy about the stability of life. It is only because they have never understood how this body was designed to maintain itself. If we are health it is because we have employed the laws that occasion health function, which include each of the above 7 pillars. If disease occurs it is always because the foundations that maintain health have been compromised. It is good to stop living in terror with the mystery of who gets sick and why others don't. Health has a cause!



Breast Cancer in the Modern World

Mammograms and Thermal imaging are great tools to aid in the detection breast cancer, but they only find a problem after it has begun and do nothing to detect the risk before the disease begins to manifest itself. It is obvious that waiting until a problem develops before trying to address it is one of the reasons why so many people die of cancer. It is possible to determine your risk of developing breast cancer and therefore to make intelligent diet, lifestyle and nutritional changes that may reduce the likelihood of manifestation.

Breast cancer is the most common cancer in women in U.S. accounting for 32 percent of all female cancers. Breast cancer is responsible for 18 percent of cancer deaths in women, and is second only to lung cancer as the cause of death from cancer among women in United States. In the year 2001 an estimated 192,200 women were diagnosed and 40,600 of these women died from the disease. The older a woman is the greater chances of developing breast cancer with approximately 77 percent of the cases occur in women over 50 years of age. Caucasian, Hawaiian and African-American women have the highest incidence of invasive breast cancer in U.S., four times higher than the lowest group including Korean, American Indian and Vietnamese women.

Cancer develops at a cellular level for years or decades before something can be identified using modern imaging techniques. While genetics point to breast cancer genes BRCA1 and BRCA2 to be implicated in only three to five percent of breast cancers. Accelerating the onset of menstruation from 16.5 years in 1842 to 13 years in 1995 and to 11 to 12 years old in the year 2003 parallels an increase in degenerative diseases later in life. The Shanghai Breast Cancer Study showed that women who exercised during adolescence and adult experience a 40% reduction of breast cancer. Researchers found two factors increasing risk of developing breast cancer meaning increased abdominal body fat distribution increased weight at age 30. Endocrine disruptors are synthetic or natural estrogens that act on the endocrine system mimicking, blocking or interfering in some manner in the natural instructions of hormones to cells. Well-known endocrine disrupters are the drug DES, dioxin, PCBs, DDT, pesticides, and plasticizers. Humans also reported in 2003 that women with Type II diabetes are 17 percent more likely to develop breast cancer than those without. The sources of estrogen includes endogenous formation from inside the body, xenobiotics from environmental toxins, and hormone replacement therapy. In every case whether one takes it or makes it, the body must metabolize it and this requires a healthy liver capable of methylation and phase I and Phase II liver detoxification. Famous studies indicate that breast cancer is vastly increased in countries where increased milk production per capita is known, the highest of which is in the free world, while Japan has the lowest incidence of breast cancer in the least milk production per person. Thyroid metabolism when reduced has also been shown to negatively effect metabolism of estrogen.

The seventh for citrus vegetables and results in certain metal groups informed the digestive tract which assists can leverage intoxication and reducing estrogen to healthy forms. Studies show a significant reduction in the risk of breast cancer with regular consumption of Brassica vegetables including brussels sprouts, broccoli, cabbage, kale and turnips. Calcium d-Glucarate and DIM (di-indole methionine) are ways to reduce the Bata Glucaronidase from building up in the intestine that is associated with an increase in cancer activity.

To lower the risk of breast cancer simply reduce carbohydrates to stabilize insulin levels, eliminate dairy, reduce red meat and alcohol consumption, increase fiber, increase brassica vegetables, increase exercise, and the reduce exposure to xenobiotic estrogens. Nutritionally it is recommended that Livaplex and Livco with Vitanox be employed to reduce estrogens along with calcium d-Glucarate, and DIM be employed.

It is possible to change the outcome of cancer by understanding what created it. Do not wait for a lump to go bump in the night to awaken to all that can be done to support the health and well-being that may actually prevent all forms of cancer.

Cancer - A Nutritional Strategy

It is said that with cancer in the best strategy is prevention! The truth is, according to Boyd a famous pathologist, the body is in and out of a cancerous state 40 times each day. There is function of the normal body that is able to identify and control the development of cancer on a cellular level. When this function stops working there is the possibility of developing a focus of cancer called a tumor. A tumor is a much more difficult challenge for the body to resolve, than the singular cancer cell.

Prevention can be achieved by reducing the risk factors, especially those which create a chronic immune burden, toxic burden and especially estrogen concentration. This is accomplished by lifestyle modification and by nutrient supplementation to support the body's innate ability to detoxify, specifically phase I and II liver function and lymphatic and immune function. The use of family history review and using the cancer potential survey it is possible to determine an individual's risk tendency and therefore indicate the level of prevention that should be elected.

When cancer does occur there are some basic principles that should be employed. Cancer in it is a primitive tissue that is undifferentiated and therefore it is not very sophisticated in its ability to metabolize, requiring primarily sugar to thrive. Simply by reducing sugar and sugar-forming foods from the diet it is possible to reduce the nourishment of the tumor. As well by moving more into a ketotic fat-burning state it is possible to encourage the body toward a cannibalistic state in which it begins to consume any unnecessary tissue. Ultimately the goal is to get the body to eat the tumor.

One principle of cancer is that the body deals with cancer the same way it deals with infection. Certain principles dictate that by unburdening the immune system of chronic sub clinical or cavitated infections the immune system can be freed to more for potently attend to any tumorous activity. This is especially so with low-grade infestations of parasites, yeast proliferation and cavitated infections carried under the teeth or in body cavities. These infections may be in reduced and eliminated thus liberating the immune system to the greater ambition of attacking any tumor formation.

The liver is considered by all cancer experts to be essential in achieving control over cancer. Phase 1 and 2 liver detoxification can be encouraged with the use of lifestyle and diet modification and nutritional supplementation. This is essential to the body's immune ability to identify abnormal cell growth in and target it with white blood cells. It is proven that proper calcium function is an essential flag to activate union responses. Almost all natural cancer therapy is included intense systemic and liver detoxification.

It is also possible to promote enzymatic functions through enzyme therapy and supplementation, as well as by bio-terrain assessment and support. Some enzymes and antioxidants are respected for their ability to anecdotally reduce tumor activity. While many Western cancer therapies are successful at controlling and killing tumors, it should be pointed out that unless the body is balanced and corrected from its former imbalance it may reproduce the cancer yet again. Many people waste the blessing of remission by not being active during the remission to reduce the likelihood of recurrence.

In general it is evident that the immune system has been overburdened and inundated in this toxic imbalanced world. This is our first and most important responsibility when dealing with cancer. Caring for foundational issues in cancer can be done individually or complement your eye alongside other therapies.

PHYSIOLOGY OF THE CARDIAC MUSCLE

The heart is composed of three major types of cardiac muscle: 1) atrial muscle, 2) ventricular muscle, and 3) specialized excitatory and conductive muscle fibers. The atrial and ventricular types of muscle contract in much the same manner as skeletal muscle fibers. On the other hand the specialized excitatory and conductive fibers contract only feebly because they contain few contractile fibrils; instead they provide an excitatory system for the heart and a transmission system for rapid conduction of impulses throughout the heart.

Cardiac muscle as a "Functional Syncytium." The angulated dark areas crossing the cardiac muscle fibers are called intercalated discs; however, they are actually cell membranes that separate individual cardiac muscle cells from each other. Yet electrical resistance through the intercalated disc is only 1/400 the resistance through the outside membrane of the cardiac muscle fiber. Therefore, ions flow with relative ease along the axes of the cardiac muscle fibers so that action potentials travel from one cardiac muscle cell to another, past the intercalated discs, without significant hindrance. Therefore, cardiac muscle is a *functional syncytium*, in which the cardiac muscle cells are so tightly bound that when one of these cells becomes excited, the action potential spreads to all of them, spreading from cell to cell and spreading throughout the latticework interconnections.

The heart is composed of two separate functional syncytiums, the *atrial syncytium* and the *ventricular syncytium*. These are separated from each other by the fibrous tissue surrounding the valvular rings, but an action potential can be conducted from the atrial syncytium into the ventricular syncytium by way of a specialized conductive system, the *A-V bundle*.

All-or-Nothing Principle as Applied to the Heart. Because of the syncytial nature of the cardiac muscle, stimulation of any single atrial muscle fiber causes the action potential to travel over the entire ventricular muscle mass. This is called the all-or-nothing principle.

EXCITATION-CONTRACTION COUPLING - ROLE OF CALCIUM IONS

The action potential initiates contraction in the cardiac muscle in almost exactly the same way that it does in skeletal muscle. The action potential causes calcium ions to be released into the muscle fiber sarcoplasm from the cisternae of the sarcoplasmic reticulum and to a less extent from the fluid of the T tubules as well. These calcium ions diffuse rapidly into the myofibrils and there initiate the chemical reactions that promote the sliding of the actin and myosin filaments along each other, which promotes the muscle contraction.

Immediately after the action potential is over, the calcium ions are transported back into the sarcoplasmic reticulum or into the T tubules so that within another few milliseconds the muscle relaxes.

Controlling Cholesterol

Cholesterol has become the focus of a great deal of attention in the modern medical world. Many people have thought that cholesterol is something that signifies a tendency towards coronary artery disease and heart disease, and it is generally assumed that is very difficult to bring cholesterol levels down if elevated and that a statin drug would need to be employed to accomplish the reduction. There are a number of factors that should be considered when it comes to considering cholesterol balance.

The original study of cholesterol done in the 1960s on approximately 240,000 subjects found that cholesterol levels above 300 directly associated itself with an increased risk of heart disease. What was also reported in the same study also was that cholesterol less than 130 directly associated itself with an increased risk of cancer. At first it was thought that cholesterol came from animal foods and fats that were consumed in the diet, although it was later discovered that two-thirds of the body's cholesterol is actually fabricated in the liver. Today with our new understanding around healthy fats and the impact of carbohydrates and high glycemic diets it is revealed that elevated triglyceride levels result in a downstream elevation of cholesterol. Chemically when triglycerides are high they automatically cascade downstream into high cholesterol. While the triglycerides lab values for the common American are said to be normal under 200 or 150 (depending on the lab), the truth is that any triglyceride level above 90 will result in unnecessary elevation of cholesterol. Oftentimes simply by limiting the glycemic intake in the diet the triglycerides fall to under 90 and the cholesterol naturally follows into range, optimally to be between 160 and 180.

If the triglycerides are under 90 and the cholesterol continues to be elevated it oftentimes suggests the possibility of some food allergy congesting and slowing the digestive process thus resulting in elevated cholesterol resorption from the gut. The most common allergy in this situation is eggs, and an estimated 30 percent of the population is allergic to eggs (lactalbumin). By eliminating eggs, if one is allergic to them and limiting the glycemic intake, the cholesterol naturally comes to an optimal level. It used to be expected that these changes in cholesterol take months or even years and that therefore legitimizes the employment of certain statin drugs to lower cholesterol. These triglyceride and cholesterol imbalances can actually be corrected profoundly within 7-10 days demonstrated by lab work. It is so simple to limit the glycemic index in the diet and see the triglycerides fall and subsequently the cholesterol normalize. It also is rewarding to discover that we can control our own chemical imbalances without having to use drugs to achieve this.

HDL cholesterol (high-density lipoprotein) is another consideration. HDL's are able to help transport cholesterol through the blood and keep it from plaquing onto the arterial wall. HDL's can be increased through exercise and through certain nutrients including red wine. Recently another factor has become a consideration as the level of Homocysteine protein in the blood acts as Velcro to attach the plaque to the arterial wall. Although normal levels allow up to 12-15, it is optimally recommended that Homocysteine be kept under 7. Interestingly enough Homocysteine is a purely nutritional event and if elevated simply adding vitamins B6, B12, folate and folic acid usually will return it to an optimal level. This is very good predictor of heart risk. Another influence to arterial wall plaquing is C-reactive protein (CRP). CRP represents the state of inflammation in the body and therefore the subsequent stickiness of the arterial wall. By keeping our body free of chronic infection and immune burdens, especially allergies, the C-reactive protein will fall to less than .04 where there is very little likelihood that plaquing will occur.

There are multiple factors that influence the lipid profile of our blood. A few of them have been outlined above so that a person can begin to explore their own capability of controlling their own cholesterol levels. It is a most exciting thing to find that you are in control of your chemistry rather than the genes you inherited determining your destiny. Many people have been skeptical to believe how quickly the lipid profile could be optimized, and many have chosen not to try. When it is possible to see profound change within seven days there is every reason to be encouraged to try experimenting with your own lipid levels.

Fats and EFA's

There is the great deal of controversy around the truth of including fats and oils in your diet. Many people say that fat and oil cause some common degenerative diseases. The final truth is that unhealthy oils create unhealthy people and healthy oils build health in people.

Fats are short, medium and long chain molecules comprised of many essential fatty acids connected together. Just like protein is comprised of amino acids, so fats are comprised of fatty acids. Some fatty acids are essential to our diet, without which life cannot be sustained. This is to say that the essential fatty acid (EFA) cannot be manufactured in the body in sufficient amounts to supply the needs of the body and so is considered essential to diet for health and well being.

Of primary concern with fats and oils is the condition of rancidity. When oxygen and light are allowed to penetrate oil certain bonds in the molecules are caused to break thus changing the integrity of the oil and turning it rancid. Perhaps in this way oil and fat represent the most fragile and delicate aspect of our diet. For this reason great care must be taken with unsaturated fats and oils to prevent oxygenation, heat and light from damaging the molecules. In general rancidity contributes to premature aging and poor skin health, and subsequent loss of membrane health affecting every cellular function in the body.

These days attention has come to the proper balance of multiple essential fatty acids, specifically omega-3, 6 and 9 fatty acids. Many products coming on the market present multiple fatty acid blends that provide the array of essential fatty acids needed. This actually makes it easier to achieve proper balance because it does not require so much deliberation in selecting foods as a source of unique essential to fatty acids.

Essential fatty acids are vital especially to hormone production and membrane construction at the cellular level. When we use trans fatty acids that have been hydrogenated (bubbled with hydrogen gas to bond and stabilize all the delicate bonding sites thus eliminating rancidity, but also eliminating the ability of the oil to participate in healthy function) there is a displacement of health EFA's by hydrogenated fats attributed to reducing the surface area of the cellular membrane by as much as 70 per cent. This creates the expression "famine in the midst of plenty" due to a loss of surface area for cellular respiration and exchange to occur across.

In the end simply the naturally occurring oils and fats properly protected from light, heat and oxygen are safe and life sustaining. Olive oil and butter are especially good and renowned for the contribution they provide. Non-food source oils (such as cotton seed, borage, and canola or rape seed) should be second to food source oil, and hydrogenation should be avoided completely.

Breast Cancer Risk Indicator Questionnaire

There are a number of factors (positive and negative) which influence your risk of developing Breast cancer.
Circle the number next to the question if it applies to you.

1. **Do you have any family history of hormone dependent cancers (breast, uterus, prostate)?**	3
2. **Are you of Caucasian, African American, or Hispanic Descent?**	1
3. **Do you use weed killers or pesticides around your home or work? Or have you been exposed to them in the past?**	2
4. **Are you exposed to gas or diesel fumes? If you live or work in Houston you must answer yes**	1
5. **Do you consume Dairy Products?**	1
6. **Do You use sunscreens with: PABA, BP-3, HMS, OMC, 4-MBC**	2
7. **Do you use (or have used) ANY form of synthetic hormones (Premarin, Prempro, Evista, Lo-Estrin, Etc.) or progesterone creams?**	3
8. **Do you wash all fruit and vegetables with a fruit wash?**	1
9. **Do you have any personal or family history of depression, PMS?**	1
10. **Do you consume LOTS of cruciferous vegetables?**	-2
11. **Do you heat food in the microwave in plastic or covered with saran wrap?**	1
12. **Do You Smoke ?**	2
13. **Do you drink alcohol? More than 1-2 glass of wine per day**	2
14. **Do you exercise vigorously at least 3 times per week ?**	-2
15. **Is your body fat over 30%**	2
16. **Do use any of the following medications**: amiodarone: cimetidine (tagamet): fluoroquinolones: fluvoxamine (Prozac): furafylline: interferon: methoxsalen: mibefradil: ticlopidine:	2
17. **Do eat non organic chicken, eggs or beef ?**	1
18. **Are you sensitive to chemical smells?**	1
19. **Are you hypothyroid or suspect you are?**	1
20. **Do you have elevated Beta Glucaronidase levels**	3
21. **Is your E2 to E16 estrogen ratio less than 1.3**	3
22. **Did you have your first child before the age of 30?**	-1
23. **Did or do you suffer from Estrogen dominant conditions like Endometriosis, PMS, PCOS**	2
24. **Did you start menstruating before the age of 13?**	2

TOTAL _____

So What's my risk?

It's easy. The higher your number the higher your risk and the lower your number the lower your risk.
These questions are based upon factors which:

☹ ***Increase your exposure to endogenous estrogens. (The one's you make)***
☹ ***Increase your exposure to Exogenous Estrogens. (The ones you are exposed to)***
☹ ***Your liver and detoxification pathways capacity to properly detoxify all of the estrogens you are exposed to.***
☹ ***Genetic predispositions***
☺ ***The lifestyle and dietary factors that are known to reduce your factors***

While having a low number is no guarantee of not developing Breast cancer a lower number would indicate a lower risk based on known risk factors.