

FEMALE HORMONES-- A NEW STUDY

Even though there's a lot more Pollyanna in me than cynic, my lip-curling mechanism keeps getting activated by the medical establishment's regular alarms on the subject of overdosing with vitamins. Indeed, there can be consequences from doing dumb things with any substance, even pure water. It makes sense for vitamin/mineral supplement-takers to stay within a range where the lows are defined by the Recommended Dietary Allowances, and the highs by experienced practitioners of nutritional medicine. But I'm bothered by what I now conceive to be organized fear-mongering about the overblown risks of supplements, while immeasurably bigger problems associated with prescribed drugs are glossed over. How many individuals do you know, as I do, who tell you solemnly their doctor told them to stay away from vitamin C, yet who, every day, swallow medicines that carry a four-page list of side-effects? The human mind works in mysterious ways!

Unfortunately, my textbooks on medicinal chemistry inform me, so do most medications. More often than not, how and why a particular drug achieves its effects in the human system still are a bafflement to clinicians and drug designers alike. We accept the fact that a high percentage of today's hot numbers will end up on the ash heap of pharmaceutical history. Rule of thumb for the industry: When side-effects overtake benefits, it's back to the drawing board, again! Yet, how many of us ask careful questions of our physicians about the usefulness and safety of the medications we're taking?

This August, two played-down stories appeared in the press a few weeks apart. The earlier one reported on a "startling new study" of 23,244 Swedish women, 35 years or older, who received female

hormones. Those who took a combination of estrogen and progestin for more than six years *were 4.4 times more likely to develop breast cancer* than women in the same region who did not receive female hormone therapy.

These hormones are prescribed freely worldwide for menopausal and postmenopausal women in order to minimize uncomfortable symptoms such as hot flashes, and to slow down bone-thinning (osteoporosis). In the 1970s, estrogen was found to be responsible for an increase in cancer of the womb, so progestin was added in the hope of counteracting this "unintended" side-effect. I personally have read the God's-honest recommendation by one M.D. who said hormones were so crucial to the well-being of postmenopausal women that uteruses should be removed routinely to spare estrogen-takers any possible cancer risk! I guess that was his idea of preventive medicine.



Now, 20 years down the road, we find the cancer cases have shifted from uterus to breast. *Breast cancer causes more deaths in U.S. women than any other cancer, except in some states where lung cancer is overtaking it.* How is the medical world viewing the new study? Individual clinicians are doing serious re-assessing. Dr. Jonathan Berek of UCLA's School of Medicine is quoted as saying, "This article hits at the heart of our philosophy that patients should be on estrogen and progestin. This questions the assumption that it is entirely safe, at least from the standpoint of the breast."

On the other hand, several doctors declared the findings were "too preliminary" to recommend a change in practice. Habits, good or bad, die hard.

Three weeks later, on August 25th, a brief newspaper story reported the Centers for Disease Control's latest statistics on breast cancer. *Deaths from breast cancer are steadily rising, up five percent since 1979.* No mention was made in this Associated Press story of the earlier news that hormones prescribed for, by now, hundreds of thousands of women since the 1970s may be quadrupling the risk. **

Better Ways to Ease Menopause

Dear readers, ask your doc tough questions. Just as important for women, ask yourself if any menopausal discomfort, now or in the future, warrants taking chances with your health. You owe yourself a personal research foray into safe ways to minimize it with herbs, exercises, acupuncture, nutrition, etc. Upon reaching menopause, one normally high-spirited woman began to suffer from the dumps, for which she was prescribed hormones. Her moods lightened, but she developed painful lumps in her breasts. When she stopped the hormones for a few months, the lumps went away, but the blues returned. This cycle went on for a long spell before she entered Donald O. Rudin, M.D.'s experimental study. On his program of foods and oils high in essential Omega-3 fats, emphasizing linseed oil and including beans, whole grains, walnuts, vegetables, fruit, and fish, plus added fiber, vitamin/mineral supplements, and reduced meat intake, she found herself with restored spirits and no breast lumps-

** Barbara Seaman & Gideon Seaman, M.D. had the foresight in 1977 to lay out well-documented hazards of hormones (birth control pills included), and to suggest alternatives (WOMEN AND THE CRISIS IN SEX HORMONES). These and similar warnings have been steam-rolled into invisibility by crafty drug industry promotion that has led to complacency by doctors, patients, and media.

-all without the use of hormones. (THE OMEGA-3 PHENOMENON by Donald O. Rudin, M.D. & Clara Felix, Rawson Assoc./Macmillan, 1987.)

Some menopausal women have found that ginseng, the herb honored in Asian cultures for at least 5000 years, when taken as tea, powder, or extract has a tonic effect that promotes physical and emotional well-being. Many swear by as much as 2,000 to 3,000 IU of vitamin E daily--a very large dose.

Here are some books with useful ideas:

THE CRISIS IN SEX HORMONES by Barbara Seaman & Gideon Seaman, M.D., Rawson Assoc., 1977.

THE NUTRITION DETECTIVE by Nan K. Fuchs, Ph.D. Distr. by St. Martin's Press, N.Y., 1985.

MEGA-NUTRITION FOR WOMEN by Richard A. Kunin, M.D., McGraw-Hill, 1983.

WOMAN'S ENCYCLOPEDIA OF HEALTH & NATURAL HEALING by Emrika Padus. Rodale Press, 1981.

Although hormones may indeed help to slow down bone-thinning after menopause, the many ifs and buts of this treatment demand caution and an eye peeled for safer alternatives. In future newsletters, I'll describe a number of strategies in the battle against osteoporosis. * *

A VICTORY FOR NATURAL FARMING

Encouraging if not downright miraculous news came by way of a N.Y. TIMES story in September. "The National Academy of Sciences has found that farmers who apply little or no chemicals to crops are usually as productive as those who use pesticides and synthetic fertilizers," it said. The academy recommends reversing federal policies and subsidy programs that have encouraged "heavy use of pesticides, drugs and synthetic fertilizers" for more than forty years, and discouraged farmers from trying natural techniques.

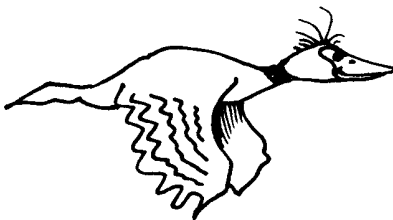
"Since the end of World War II, farmers have been taught by agricultural universities and the Department of Agriculture that the best way to increase output is to use ample amounts of chemical fertilizer and then protect the

harvest with generous applications of pesticides....The study by the nation's pre-eminent body of scientists is perhaps the most important confirmation of the success of agricultural practices that use biological interactions instead of chemicals. Such farming methods that play down chemicals have been invented and developed by farmers over the last two decades almost entirely outside of the Dept. of Agriculture, agricultural universities, and other institutions in American farming.

"Until very recently, farming methods shunning chemicals have been viewed by many farmers and farm policy leaders as unorthodox and incapable of generating harvests that match those produced with chemicals.

"The Dept. of Agriculture, which was suspicious of natural farm practices during the 1980s, greeted the study enthusiastically, saying the 'time was right' to consider changes in the direction of American agriculture."

I had a "pinch me, I'm dreaming!" reaction when I read the article. What a victory for 'our' side! I suspect the folks in the board rooms of the chemical conglomerates, though, may not be sharing my rapture. My hope is that in this era of diversified holdings perhaps they'll focus on a benevolent replacement money-maker, like a speedy cleaning machine for oil spills. After all, if in the face of dwindling cigarette sales, Reynolds Tobacco could buy Nabisco Foods, anything's possible! * *



PROTECTING YOUR EYES FROM WITHIN

A writer friend has developed a vision problem caused by unnatural wrinkling and scarring of the retina in one eye, with a chance it may occur in her other one. Using a flying-by-the-seat-of-my-pants logic, I theorized that supplemental vitamin E might do for the retina what I'm convinced it does for the skin: minimize both wrinkling and scarring. A hunt through current literature on vitamin E and the eyes produced a 1983 study from Israel on young chickens deficient in

vitamin E, whose symptoms included abnormal folding of the retina. As the deficiency worsened, so did the retinal folding.

It didn't convince my friend, who doesn't believe in supplements, but the search was fruitful in other respects because it uncovered first-rate studies on a far more common problem--cataracts.

Ophthalmologists at N.Y.'s Mt. Sinai School of Medicine are among a growing contingent who are suggesting that cataracts arise from damage to the eye by nasty oxygen free-radicals, a common byproduct of oxygen metabolism in our cells. They have observed that vitamin E, which neutralizes free radicals, prevents cataracts in animals. At the University of Maryland, researchers say vitamin E protects the eye against injury from the generation of oxygen free-radicals that's catalyzed by light. They believe their findings apply to cataract formation in older humans and may offer a way to reduce it.

Russian experimenters, who are using supplements of vitamin E, vitamin C, rutin, and glutathione in animal models, suggest these same anti-oxidant (i.e., anti free-radical) nutrients will help to prevent old-age related cataracts in people.

A Possible Cause of Cataracts

Corroboration on the free-radical damage theory comes from medical studies in Italy, Japan, The Netherlands, and Canada. I am impressed, even though my friend isn't! The natural lens of the eye, situated behind the cornea and iris, is as clear as glass at birth, but in one out of five Americans who are 60 and over, it becomes too clouded to let adequate light pass through. Early Greek and Roman physicians believed fluid flowed down from the brain to an area behind the lens and from this came the word *cataract*, meaning waterfall. That's not what happens, but the true explanation for clouding of the lens remained a mystery. The new theory--that light rays generate potentially harmful peroxides and free radicals in ocular tissues--is getting wide confirmation in the current work.

The retina, the photosensitive part of the eye, detects the energy quanta of light. We see because these impulses then go to the brain via the optic nerve. Molecules of highly unsaturated Omega-3 fatty acids, with which the retina is loaded, play a big role in this light-

activated process. *The retina uses up oxygen faster than any other tissue in the body, weight for weight.* Heavy use of oxygen anywhere in the body normally leads to stepped-up production of the wildcat types of oxygen, such as peroxides and oxygen free-radicals. They are so potentially destructive, the body uses them to kill bacteria! But in normal tissues we have a fine-tuned system to neutralize and defuse them. An array of natural defenders is involved, including vitamin E, vitamin C, vitamin A, glutathione (made up of three amino acids: glutamic acid, glycine, and cysteine), and a group of enzymes, one of which requires glutathione and the mineral selenium for its action.

Together, they turn free radicals into tame pussycats.

In what strikes me as a sensible arrangement, a healthy lens will contain a high concentration of glutathione, plus a concentration of vitamin C twenty times higher than in blood plasma. Unlike the retina, it doesn't have a blood supply, but depends on nutrients that diffuse into it from a plasma-like fluid that bathes the lens, the aqueous humor. *That's where our own nutrition can make a difference. We can give retina and lens what they need in the way of anti-oxidant safeguards, via our intake of foods and supplements. Leading the pack should be vitamin E, vitamin C, vitamin A, selenium, and the sulfur-carrying amino acids cysteine or methionine.* **

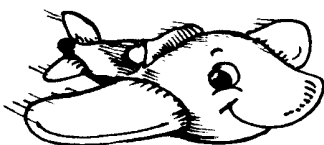


** If we get enough methionine in the diet, the body can use it to help make cysteine—one of three amino acids that form glutathione. I find it interesting that Russian scientists are using glutathione itself in their work on cataracts. I notice that supplements of glutathione are available from some vitamin catalogs and healthfood stores.

Good food sources of methionine and/or cysteine include all fish and shellfish, poultry, meat, eggs, cottage cheese, natural cheeses, milk, buttermilk, yogurt, mushrooms, soybeans, lima beans, garbanzo beans, black-eyed peas, kidney beans, brazil nuts, cashews, peanuts and peanut butter, sesame seeds, pumpkin seeds, sunflower seeds, wheat germ, oat cereals.

Externally, we can take protective measures as well. The first conclusive evidence that heavy exposure to the sun's rays causes cataracts in humans comes from a study of over 800 men who make their living oystering on Chesapeake Bay. Veterans were found to have three times more cataracts than newer workers. The researchers' recommendations: Safeguard your eyes with sunglasses that cut out most ultraviolet light, especially ultraviolet B rays, *and wear broad-brimmed hats or caps.*

Years ago, I fled from smoggy Los Angeles, where I had lived during my youth and early adulthood, to the pure San Francisco Bay environs. Sure, you guessed it, urban spread and smog caught up with me. On bad days, my head and eyes ache and my good humor crumples. Having reached the age where wisdom and cataracts sometimes arrive in tandem, I'm increasing my E rations from 400 IU to 600-1200 IU daily. A good recent study shows no harm from long-term use of the higher amount. Hydrocarbons and the other industrial gunk in the air are known to produce oxygen free-radicals. If we cannot escape the effluents created by a technological society, we can at least avail ourselves of the defenses it provides! ***



A PROFESSIONAL DIETITIAN'S NATURAL FIBER DIET by Margaret Belais Salmon, M.S., R.D. is a meticulous guide to losing weight and gaining health. It includes easy-to-read tables of calories, fiber, and carbohydrate content, just where you need to refer to them in the text. If you want to choose foods high in vitamin A, they are listed with the vitamin content of typical portions. Same for vitamin C, calcium, iron, and B vitamins. Margaret Salmon, who has worked with clients in hospitals and clinics for 35 years, combines good science with a down-to-earth approach to managing snacking, cravings for sweets, and human discouragement. She devotes eight ingenious pages to lists of commonly eaten foods and their calories, while side by side are the same foods or reasonable substitutes with simple tricks for preparing them so their caloric content takes an impressive nosedive. You can order directly from TECHKITS, INC., P.O. Box 105, Demarest, NJ 07627. The \$7.95 includes postage and packing.



ANECDOTAL EVIDENCE

In the early 1970s, about the time I was up against the "empty-nest syndrome," side-streams from the '60s winds of freedom were stirring up the parents of the liberated generation. The siren breezes whispered "You don't have to be 16 to 'do your own thing!'" My lost girlhood dreams of becoming a biologist or journalist were resurrected. I laid down my secretarial and housewife tools and went back to college (30 years later) for my degree in nutrition science.

It took a hellish four and a half years, but I've been buried happily in biochemistry and medical nutrition texts ever since. As you know, my training and passion lie in uncovering the links between nutrients and aberrations in health. My kids were little when I first felt the stirrings of this obsession. It wasn't enough to bombard family, neighbors, and friends. Oh, no. I needed to share it with our doctors. Fatal mistake. My happy babblings about the wonders of brewers yeast and vitamins! no more tonsillitis for my stepson! hardly any more colds for all the kids! improvement in the dog's mange! etc., etc. were greeted with thunderous apathy or patronizing chuckles. Over the years, I learned to 'cool it' with medical people on the subject of nutritional therapy.

Once in a great while, something special happens in this regard. I was seeing a doctor recently at my health plan's Ear, Nose & Throat clinic. Nothing serious, just an ear-cleaning. When I was five years old, Dr. Julius Lempert did surgery on the infected mastoid bone of my left ear. In those pre-antibiotic, pre-vitamin days, mastoiditis was a serious aftermath of ear infections in children. Untreated, it could spread to the meninges of the brain, causing often fatal meningitis. Dr. Lempert, a slight, intense

man with a shock of black hair, was the reigning monarch in New York City's ENT world. He had devised an ingenious way to operate around the ear drum to break through from the inside to the infected mastoid. While the standard external operation left a large scar behind the ear, Lempert's procedure caused no visible scarring.



His reputation was so great in that mastoiditis-riddled city that patients in his giant waiting room had to take numbers for their turn at post-surgical treatments, just like a busy bakery. I remember my mother and I visiting the animals in the little zoo he had created in the courtyard of his building, to enjoy a few minutes of pleasure before my number came up. The treatments were painful and went on for months. As the years went by, his patients discovered they were left with a chronic infectious drainage from the ear. Like most of them, I was never able to go swimming because of danger of further infection. Eventually, his surgical method fell into disrepute and he lost his great status in the profession. My parents loved him, though, because he had saved their kid's life. At home not long after surgery I developed a terrible headache. I remember rolling my head from side to side on the pillow and yelling with pain, while my distraught parents applied cool compresses. Despite his lordly reputation and enormous practice, Dr. Lempert found the time to call every few hours throughout the night. The headache was the first symptom of

impending meningitis. Miraculously, the pain was gone by morning and with it the danger, and the doctor assured my parents that everything would be fine. Today, antibiotics save us from these perils, but all we had in those days was a wing and a prayer.

Years later, this brilliant man made medical history by inventing the breakthrough fenestration procedure in which an artificial "window" is made into the delicate labyrinth of the ear, to relieve certain kinds of deafness. My ENT doctor, a man of my generation, knew all about Lempert. We talked about it while he debrided my ear with a gentle suction device. "You're very lucky," he said, when he'd re-examined the cleaned ear. "The tissues are firm and smooth. You don't show any signs of degenerative bone disease in the mastoid area. You know, most of Lempert's mastoidectomy patients develop it as time goes by."

A Doctor Who Listens

I decided to take the plunge. "I think it's nutrition," I said. "The ear had a discharge from the time I was five to age 33. I got hooked on Adelle Davis' books then and started taking supplements and I've never had any discharge from the ear since, except for a few times when I got water in my ear from [forbidden!] swimming and had to take antibiotics to clear up the infection."

He looked puzzled. "I don't get the connection."

I thought I'd better lay out my credentials. "I'm a nutritionist and I've co-authored a book with a medical doctor that's pretty much about the relationship between disease and diet. I probably suffered from subclinical deficiencies of certain nutrients all my life that prevented the ear from healing. When I finally changed my diet for the better and took enough vitamins and minerals to rev up my immune system, the tissues could rebuild and the ear heal."

"That's amazing!" the doctor said. "Tell me more about it. What kind of supplements did you take? Have you seen this with other cases?" I gave him a quick rundown of the vitamins, minerals, Omega-3 and Omega-6 essential fats, diet, etc. that work to clean up chronic ear

infections and promised to send him a copy of the book.

He was delighted and I was almost in tears. Here was a modest, sensitive man who had been treating ear infections for perhaps thirty years. Nothing in his training or the medical literature had prepared him for the options to standard treatment that I was laying out. He could be expected to react hostilely to the fact that this information was, in a sense, undermining his professional self-esteem, but instead he was deeply interested in this "new" approach to tiresome, chronic medical problems. I loved him instantly and hated the shuttered institutions that keep medical practice in a straitjacket.

"You know, you should write this up for the medical journals," he said. "I want others to know about it. It's wonderful information!"

I thought he was teasing me, but he was sincere. Fat chance, I said to myself. I thought about an article I'd just read by William H.B. Howard, M.D. of Baltimore. He had written with wry humor about the difficulty of reaching the medical establishment with stories, all true, of patient neglect, in the hope of instituting some reforms in the system. "I realize," he wrote, "that such anecdotal evidence is regarded by scientists as the plastic flamingo on the lawn of research..."

Hence my newsletter. **



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