

CHAPTER 9

Doctor to Doctor: An Impassioned Plea

THROUGHOUT THIS BOOK, WE'VE THROWN OUT some—ahem—unconventional ideas about health, nutrition and the underlying causes of the diseases that are quite literally shortening our lives.

Everything in this book is based on solid, scientific evidence. There's nothing airy-fairy or mystical about it. Most of the premises in this book come from basic biochemistry, courses every doctor took in pre-med and medical school.

We'll be the first to tell you that these concepts are not well known or commonly accepted. Patients who take them to their doctors are likely to be summarily dismissed or even ridiculed. Doctors who espouse these common sense, solid scientific concepts are likely to be ostracized by their colleagues.

I know. I was a victim of that sort of professional jealousy and jousting. Patients, by all means read this chapter and read it closely. But we have really written this concluding chapter as an open letter to all doctors, an impassioned plea for them to put aside their prejudices and their adherence to The Calcium Lie, The Vitamin Lie and a dozen other erroneous belief systems that are not scientifically based.

We urge you, with our blessings, to copy these pages of this book and give them to your doctor. Make your pleas for your physician to read these pages as impassioned as is our advocacy for you.

We know doctors are busy people, so we are making this chapter short and sweet to economize on valuable time, but doctors, we urge you to buy a copy of this book and read it in its entirety. We think it will change your life, your practice and be of great service to your patients. Who knows? Maybe it'll even help you improve your health and heal yourself. The basic truths in this book are irrefutable.

A LETTER TO ALL DOCTORS

The majority of physicians practicing today are there because they made a choice to help people. I felt the same way. I was a bright-eyed, naïve, idealistic youngster who, at age 19 felt a special calling to the practice of medicine. Almost all of us had those altruistic motives when we entered medical school, but the way medicine is practiced today, those altruistic motives have been largely beaten out of us.

I know, I've been there. It's a lot like being a hamster on a wheel. You have to keep turning that wheel to stay ahead. Despite what most laypeople believe, a license to practice medicine is not a license to print money. In fact, there is absolutely no security in practicing medicine. It is basically a service occupation with high overhead and high risk of legal liability and very little security. Maybe I should call this The Big Bucks Doctor Lie.

Sure, some doctors are earning beaucoup bucks, but the average doctor is confronted with huge debts, big overhead expenses, enormous insurance premiums, no paid time off to rest, vacation and recuperate and no retirement benefits.

And we are expected to be knowledgeable about everything medical, make snap decisions when we are exhausted and always be right. Yes, you can make a

comfortable living, but you have to work hard for it and make sacrifices that most people would never consider.

If you're on that hamster wheel and feeling overwhelmed, go back to those days when you were a bright-eyed med student. It was your choice to become a physician. In my 31 years of practice, I've discovered something that borders on the mystical: Enough money keeps on coming as long as I work hard and make the right choices, even in the hard times, and yes, I have had them too. As long as I keep my sights on my mission to help my patients feel better and get better, all is well.

I have been the victim of professional jealousy, anti-competitive behavior, vicious gossip and professional attacks by colleagues who felt threatened by my success. The behavior I have witnessed and experienced firsthand is despicable, to say the least.

In 1996, I was ready to throw in the towel, stop competing with my colleagues, give up on the insurance companies and quit medicine for good. I had no idea what I would do, but I was just sick of the way many in my chosen profession cannibalize each other over money, with totally uncompassionate and anti-competitive behavior, in the name of good medicine. Sometimes, unfortunately, a physician or group of politically entrenched physicians protect and cover up substandard practice behaviors arbitrarily and capriciously, in the name of peer review and financial gain.

It was on one of my lowest days as a physician that a phone call came informing me that I had been chosen one of the "Best Doctors in America." What an honor! My spirits soared in a conflict of irony and my thoughts of leaving the profession were diminished. Maybe I could make a difference. Maybe I could take whatever criticism and heat my colleagues could dish out as long as someone recognized that I was actually doing what was right, what I had originally set out to do. I was helping my patients get better and it was being recognized nationally. Amazing.

At about the same time, I realized that I had been developing an increased awareness and intellectual accountability for my pregnant patients who would come in and ask me about the nutritional supplements they were taking. They wanted to use various herbs and supplements, as well as pre-natal "vitamins" and they wanted my recommendations about the best ones to take and how much was safe.

These are the same questions we face as physicians every day concerning drugs. I realized that I needed to practice the same due diligence by educating myself about nutritional concepts and supplements that weren't even in the books when I was in med school or, at least, not in the ones we studied. I also needed to go back to my roots in basic science and biochemistry and apply what I did know to human nutrition and separate fact from fiction. I'm pretty sure your experience in med school was similar to mine: We got four hours or less of instruction on human nutrition out of thousands of class hours. Doctors are not "supposed" to have to know this stuff. Yet this information is quite literally at the heart of how we treat our patients, no matter what our specialties. Virtually every disease process of the human body has a connection to nutritional imbalances, toxicities, shortfalls and deficiencies. Yet we spend so little time learning about nutrition that we have to re-educate ourselves.

I was not only re-energized in my practice of medicine, I felt compelled to research other fields of medicine and nutritional products so I could provide my patients with the best possible care and guide them in what was safe, what works, what doesn't and what not to take. I started to learn more about herbs, supplements and other alternative therapies, including homeopathy.

Before you pooh-poooh homeopathy, think about it. The use of homeopathy or microscopic doses of various toxins or non-toxic substances to trigger an immune or physiological response works because these remedies are water soluble and can be carried into the cells easily. Think about your basic biochemistry and homeopathy will

make sense to you. More importantly, it has been used for over two hundred years, has a scientific basis and, when used properly, it does no harm. If it works, great, use it. If it doesn't work some of the time, try something else. There is ample evidence-based medicine that it works. In my experience, homeopathic remedies work about 80% of the time to treat symptoms. Remember, drugs don't always work either.

I discovered that there was an amazing amount of medical knowledge regarding the use of herbs in medicine which are often the basis for our drugs. They have various effects, good and bad, some even stimulate immune responses, but like homeopathy and drugs, herbs largely treat symptoms but with less toxicity.

That was when I discovered The Calcium Lie and its links to mineral deficiencies and excesses. In a nutshell, The Calcium Lie says that bones are not made of calcium, but of at least 12 minerals, including calcium. Expecting to keep bones strong by giving someone calcium supplements is like expecting that you can make a loaf of bread from yeast alone. It simply won't work and, in the case of calcium supplements, it can do great harm as crystallized excess calcium concretions make their way into arteries and joints and force the adrenals to compensate for calcium excess to their own detriment.

We're not going to re-hash this entire book here, but we're going to repeat The Calcium Cascade from chapter 2 here, since you may have received these copied pages from a patient (with our blessings) and you may not yet have access to the entire book. The chart may help trigger some recollections for you of how the biochemical process we describe in this book is perfectly logical, based on the biochemistry classes you took in medical school.

It leads to a simple conclusion: Almost everyone needs trace minerals, not just calcium, because we simply cannot get all nutrients we need through food grown in minerally depleted soils, picked before ripeness, especially in view of our society's propensity for nutritionally void foods. And most importantly: calcium hardens concrete, not bones. Excess calcium can do severe damage to the human organism.

When I resurrected my old biochemistry textbooks, I discovered The Calcium Cascade. It triggered insatiable curiosity in me. I began to quickly build my knowledge about nutritional supplements, something I am somewhat ashamed to confess I had poo-hooped to my patients before then. I discovered what worked and what didn't. I had to struggle to overcome the brainwashing I had received on The Calcium Lie. I dug deeper and I found out about hair tissue mineral analysis, how reliable testing methods could provide me with a wealth of information about a patient's medical conditions and how to address them nutritionally.

I began to look at the cost effectiveness of the treatments. If one treatment wasn't working, I searched for alternatives and networked with other like-minded professionals to find out if they had any answers. I continue to do so.

I also became acutely aware that I was being forced to label patients with their afflictions. Someone with diabetes became a diabetic and was labeled accordingly. That's how we are trained. But as I began to change my way of thinking, I realized that there are no diseases we are "supposed" to have and that almost all of these labels are related to nutritional deficiencies and imbalances which, when corrected, cause the illnesses to remit. It opened a whole new way of thinking for me, a whole new approach to my patients, and helped them immeasurably. That's so much more like what I'd originally set out to do.

As a little aside, I'll tell you that as soon as I began to change my way of thinking about diabetes and started treating the nutritional and mineral deficiencies and imbalances in patients with Type 2 diabetes and insulin resistance, I began to achieve phenomenal success.

Over the past 12 years, my treatment plan has kept blood sugars normal in more

than 80 patients with diagnosed Type 2 diabetes over long periods of time. It is effective for virtually everyone with insulin resistance if caught and treated early on in the course of the disease. Based on my experience, if the diagnosis has taken place in the past two years, Type 2 diabetes is always reversible. If the diagnosis is five years old or less, Type 2 diabetes is still sometimes reversible. If the diagnosis has been made more than five years in the past, my treatment plan may not be able to reverse the disease, but it can result in improved blood sugar control.

The Calcium Cascade

Excess calcium in the human body begins a cascade of negative effects that have enormous adverse consequences to our health. This process cannot be diagnosed with standard blood tests. It requires a reliable, competent lab to conduct a tissue mineral analysis on a correctly collected hair sample you provide.

You have excess calcium in your body

THAT LEADS TO

Calcium seeking more magnesium to keep your body in balance;
THAT LEADS TO

A relative magnesium deficiency in proportion to calcium that leads to increased muscle tension,
and nerve endings firing erratically and other "electrical" functions of the body malfunctioning;

AND

In its need for more magnesium, your body has to suppress adrenal function in order to retain more magnesium to compensate for the high calcium, causing a loss of sodium and potassium in your urine;

THAT LEADS TO

A continual depletion of the sodium and potassium that are stored inside the trillions of cells in your body;

THAT LEADS TO

A loss of the sodium and chloride you need to produce the stomach acid you need to digest protein;

AND

This increases the incidences of heartburn and other digestive disorders, and the use of prescription drugs that have further destructive effects and impede digestion;

AND

Your body gradually loses its ability to digest protein and absorb the essential amino acids that are the building blocks of protein.

ALSO

the sodium depletion leads to failure of the sodium pump, the mechanism by which our bodies get essential amino acids and glucose into our cells, not including fat cells.

FURTHERMORE,

Potassium levels decline dramatically—this leads to thyroid hormone resistance and slowed metabolism;

SO

All cells (except fat cells) become starved for glucose

RESULTING IN

increased cravings for glucose and for minerals leading to more cravings

AND

deficiencies of sodium, potassium, and essential amino acids, and more cravings.

THE END RESULT IS:

Multiple metabolic malfunctions, including, obesity, heart disease, Type 2 hypothyroidism, Type 2 diabetes, anxiety, migraines, depression, hypertension, and the list goes on and on!

Joe R was one of these patients with recent onset Type 2 diabetes. His fasting blood sugars were from 150 to 250 and post prandial sugars from 250 to 350. With immediate and correct supplementation, within two weeks, all his blood sugars were normal and have remained so for more than 12 years.

For Joe and these other patients, the key was correct supplementation with the appropriate supplements to reduce insulin resistance, not just sensitizing the body to the overproduction of insulin, which increases fat cell glucose absorption. That means treating and reversing the underlying problem with the correct supplements, not drugs. Chromium picolinate doesn't work (see Chapter 5), but chromium polynicotinate (ChromeMate™) does.

I don't expect the dairy and pharmaceutical industries and the supplement companies will like this book much, since it is challenging you to think and move away

from the erroneous belief systems they have so carefully nurtured. No doubt, I will be attacked for my unconventional ideas. It's OK. I have pretty broad shoulders and thick skin.

We have struggled in the writing of this book to put these concepts into simple terms that the average reader can comprehend. If we have oversimplified, we will take responsibility for that. Of course, biochemistry is very complex. There is no doubt that physicians are among the most intelligent people in the world, and we know you can take these simplified concepts and apply what you learned in medical school to acknowledge their truth.

I take intellectual honesty with great seriousness. I cannot have a knee jerk reaction to a patient's question about a supplement, medication, surgery or any type of treatment. That knee jerk reaction would be based on what I think I know and not necessarily on science. I continually take myself back to my roots in med school biochemistry and ferret out the answers based on science, not advertising or drug rep dinners or just "knowing" something.

Before this goes too far, I want to say I don't consider supplements to be a panacea. In fact, many supplements are actually drugs, and as such can be harmful. This is the subject of Chapter 7 of this book, *The Vitamin Lie*. *The Vitamin Lie* says that we've been duped into believing that a single component of an extraordinarily complex molecule that comprises a vitamin is the vitamin itself. Case in point: Vitamin C is not ascorbic acid, although most vitamin C supplements sold on the market today are just that. Unless someone takes in the whole vitamin C molecule made from 100% whole foods, vine ripened and grown in mineral rich soils, your patients won't be getting the benefits of this remarkable vitamin.

This is my plea to you: Remember your roots. Remember who you are and how you were trained. Remember your early education, especially your biochemistry, however painful this may be.

Put aside belief systems about medicine and open your mind to what some may think are "new" ways of thinking, but which are actually just basic, solid science.

I remember a fairly pompous med school professor who told us that only 20% of everything that we were going to be taught was true. The only problem was that he didn't know which 20% was true—and neither did we. Maybe that one caveat contained more wisdom than I realized at the time.

Erase *The Calcium Lie* from your mind. You know that bones are not made of calcium and osteoporosis is the loss of minerals from the bones, not just the loss of calcium. Then treat your patients accordingly. See that they get a complete complement of trace minerals based on basic scientific evidence, and based further on hair tissue mineral analysis from a reputable laboratory. After all, isn't bone mineral density just another way of measuring tissue mineral levels, in this case, in bone? Think about it.

The only lab I trust completely to accurately measure whole body tissue mineral levels is Trace Elements, Inc. (www.traceelements.com or by phone at 800-824-2314 or through my web site at www.calciumlie.com).

Dr. David Watts, founder of Trace Elements, Inc., has developed a database of more than 800,000 hair tissue samples from which he has extrapolated highly accurate predictions of disease risk based upon the basic science of relationships of mineral deficiencies, excesses, imbalances and toxic ratios to known clinical disease and medical science. Find out your patients' mineral deficiencies and imbalances and you'll be able to begin treating them nutritionally with reliable, reproducible and gratifying success.

When you re-arrange your thinking process, you can treat your patients as you did when you were a bright-eyed med student. Begin to question what you think you know.

You can re-energize your practice of medicine, care a little more about your patients and actually help them get better, rather than just treating their symptoms as the pharmaceutical industry would encourage you to do. Not everything that comes from the drug companies is good—nor is it all bad. We need to educate ourselves to discern what is good and what is not. No one else will do it honestly and it is our sworn responsibility as physicians.

We as physicians have great power to help or to hurt. It is our choice how we will treat our patients and how we will, ultimately, make a difference in their lives, our lives and the world. If you use this information with honesty, honor and integrity, you'll attract more patients than you can imagine. My ob-gyn practice has morphed into a practice that is about 50% nutritionally based, with many men and children joining my women patients.

This book is a gift to you. Take and use this information with our blessings for you and your patients.