## **Book Reviews**

Cancer Prevention and Nutritional Therapies by Richard A. Passwater, PhD. Keats Publishing, Inc., 27 Pine St., Box 876, New Canaan, CT 06841-0876. Paperback, 230 pages, US \$14.95.

Dr. Passwater was among the first to describe the connection between the cancers and nutrition. This book is a revised edition of the one published in 1978. In it he reviews the free radical hypothesis of cancer, from which it follows logically that the best treatment for cancer must include the optimum number and dosages of the antioxidants. Antioxidants suppress the formation of free radicals. They are nature's defence against the undesirable effect of too much oxidation, or oxidation which has gone wrong. antioxidant is described. These are vitamin A and beta carotene, vitamin C, vitamin E, other members of the B-complex group, and minerals which play a role in association with the vitamins such as selenium. He also describes the use of a few newer therapies such as shark cartilage. Special attention is given to the major cancers such as breast, prostate, colon. conclusions in this book are based upon previous research Passwater has done as well as the work of others and these works are listed in his literature reviews. Based upon my own experience as a clinician advising over 550 cancer patients since 1960 I can endorse this book as a valuable addition to the growing Orthomolecular medical literature.

**Feed Your Body Right** by Lendon H. Smith, M.D. M. Evans and Company, Inc., 216 East 49th St., New York, NY 10017-1502. Hard Cover, 270 pages, US \$ 19.91.

Dr. Lendon Smith is a remarkable pediatrician and pediatric author, who uses humor as well as erudition in order to present his message to the audiences he addresses and for whom he writes. This book is quite different from most of the books dealing with clinical nutrition. We all know that everyone is different. Children can pick out their parents from a sea of adults. Fingerprints give one away and blood tests do this even more accurately.

Yet too many nutritionists write as if these differences do not occur, and recommend virtually the same diet for almost everyone — panacea diets. The problem is how can we take advantage of our knowledge that we are all different, when there are no generally acceptable measures either biochemical or physiological, which will help us decide? Attempts have been made to use body type, to use blood groupings, acid base balances, pH of saliva and urine, fast and slow oxidizers, but none of these methods have gone after the individual requirements as thoroughly as Dr. Smith.

Dr. Smith has studied what is called the Life Balances Health Program for the past ten years after he learned about it from John Kitkowski, founder of the program. He was skeptical at the beginning, but over the years has become convinced there is a lot of merit to it. He has used it to treat children and adults with more success than he was seeing from the other more simple programs. He shares with us in this book what is done and what results one might expect.

There are two basic principles: (1) the hypothesis that our senses, taste and smell, will be good indicators of our needs for certain foods and supplements; (2) that blood analyses looked upon in a unique way will provide additional information. The first hypothesis is based on a large amount of good data. These senses are the body's antenna for the testing of foods. The most primitive way is simply to ingest everything and hope it will be nourishing. Probably the first protozoa gobbled up every other cell within reach and must have paid a heavy price in mortality since not every other cell is equally nutritious. Later cells would learn to taste the foods (touch them), and even later special senses would develop which would advise the body what is and is not edible. As a rule bitter foods tend to be poisonous. Dr. Smith points out that bitterness also indicates that these nutrients are not needed.

In brief, foods which taste good tend to be nutritious except, of course, for the modern corruption of foods by technology so that even terrible foods taste and smell good. As an example, if you pick up a bottle of niacin and it smells awful to you, according to Smith you don't need it. If it has no particular smell or tastes good, then you do or may need it. I have seen this with the zinc solution used to test for zinc deficiency. This classically deficiency causes disorders of smell and taste. I have seen patients who had to stop eating because of the severe disorganization of these senses. If the zinc solution tastes like water then you have a deficiency. If it tastes like a real stinker you have enough and need take no more. Smith applies this idea to a large number of nutrients, vitamins and minerals included, to determine whether the body is deficient and requires more, or is not deficient and needs no supplementation. The same applies to acid and alkaline foods.

About eight years ago I had a few days severe discomfort from intestinal flu. I lost weight, and felt pretty awful. About three days later I was having lunch with my wife. She was given lemon slices on her plate. Suddenly I developed an intense craving for lemon. Normally I hate the sour taste of lemon and avoid it as much as I can. I ate her lemon slices and asked the waiter to bring me some more. They tasted delicious. A few hours later I began to recover and the next day I was nearly well. I have not had the same craving for lemon since. I still dislike pure lemon as a fruit. I do advise my patients never to swallow or eat anything which their senses tell them is unpleasant, whether it is food or supplements.

The second factor is the blood. This is examined by routine blood tests which are analyzed to determine how far each value varies from the average value. From these average deviations more information is obtained to help determine what are the individual needs. This requires that the values be analyzed by someone, I presume, with a computer. This service is provided by Life Balances Health Program, as described in this book. Other authors are beginning to look at hair analysis in the same way, but this is not incorporated into this Life Balances System.

Smith describes a large number of patients that he has treated with this system and how they responded to it. He writes "The LB program teaches people to rely on their own cravings. If it sounds, looks and smells good, you need it. The vitamins and minerals used as part of the program

will balance the individual's diet on a daily basis. Supplements are meant to supply the nutrients our wimpy foods do not provide. LB teaches participants to change or vary their diet to rely less on the vitamins and minerals and supply the nutrients by the use of appropriate, wholesome foods, whenever possible."

The hypothesis behind this system is a good one, meaning it can be tested easily. The clinical data is very suggestive as the observations were made by a skillful experienced physician. Now all that remains is for other clinical nutritionists to try it out on their own patients. Anyone wishing to improve their own health should read the book and follow the guidelines which are presented.

## **Herbal Medicine**

The origin of herbal medicine probably arose from our need to eat. Over millions of years animals learned which foods were edible, i.e. safe to eat and nourishing, and which foods had best be avoided. This depended upon our senses of taste, smell and touch, and upon the outcome of eating. Foods which are sweet are generally safer than foods which are bitter. Out of thousands of plant species fewer than 100 are edible, and over the long haul our ancestors did a pretty good job in discovering what they were. Many plants have survived because by becoming bitter they became less attractive to their enemies, the animals. Foods which make animals sick are after a while avoided. Animals learn by their own response and by watching other animals and their response. In a similar way, animals learn that some foods have beneficial effects and use them in ways which may indicate that they are aware of their therapeutic properties.

Herbs are plants which for thousands of years have been used for their therapeutic properties. The first medicine women and men, the first physicians, were learned observers who knew how to apply these herbs to the problems that were brought to them. Modern pharmaceutical science arose from the use of these herbs and of course many efficacious modern drugs have been first extracted from plant components. Until about 100 years ago the only really effective medicines were herbs. Physicians used toxic metals such as mercury,

but not much can be said for their efficacy compared to their remarkable toxicity. Over the last century chemists have discovered how to synthesize chemicals, called xenobiotics, which are much less toxic and much more efficacious, and the tendency is for these drugs to become more and more selective in their activity so that we have specific medicines for most of the diseases which can be diagnosed. But the promise of the wonder drugs, so widespread about 50 years ago, has not been fulfilled and today they are still too toxic, still not efficacious enough when used for long periods of time. There has therefore been a gradual reawakening of interest in the use of herbs, an interest that had been sustained for many years by herbalists, naturopaths and other natural healers, and of course by an ancient folklore.

Part of this new movement to consider herbs in medical practice is promoted by a number of recent books. I have recently had a chance to see three of them. These are:

- 1. **Herbs That Heal** *by MA. Weiner, PhD. & J.A. Weiner,* Quantum Books, 6Knoll Lane, Mill Valley, CA 94941. Paperback, 436 pages, US \$18.95, 1994.
- 2. **Herbal Tonic Therapies** *by D.B. Mowrey, Ph.D.*, Keats Publishing, Inc., 27 Pine St. (Box 876), New Canaan, CT 06841-0876. Paperback, 400 pages, US \$14.95.
- 3. **Chinese Herbs** *by Dr. Hong-Yen Hsu*, Keats Publishing, Inc. Paperback, 296 pages, US \$12.95.

I found the first two books the most valuable. The third book is probably much more helpful to therapists who already know a good deal about herbs and how they are used. The Weiner and

Weiner book provides a therapeutic index from A to Z, starting with Abdominal pain and winding up with Yeast infections. Under each disease the herbs that are useful are listed, and each herb is described by giving its scientific name, the recommended dosages, the traditional uses and recent scientific findings. References are given at the end of the book. I discovered that Indian Ginseng is known as Ashwagandha.

The Mowrey book is organized differently. It is arranged by systems such as the immune system, cardiovascular system, nervous system down to a Whole Body Tonic Concept. The way these systems operates is described followed by the herbs that have been used. Each herb is discussed under several headings. These describe the physiological effect of these herbs, toxicity, and then a list of references for each one. I have had the Mowrey book much longer than the other two and am more familiar with it. I would expect the first two books to be very helpful. I keep them in my office, and when I have a patient who is not responding to the usual Orthomolecular regimen, or who prefers to use herbs and vitamins instead of drugs, I will consult the book with the patient and we then both decide if they should try them out. I have not observed so far any objection from any of my patients. For years patients have questioned me about herbs following their hypothesis that if I knew something about nutrition and supplements I should also know something about herbs. My usual reply was that I was ignorant of herbs. Now I follow that by looking into these herbal books. I am gradually becoming less ignorant.

A. Hoffer, M.D., Ph.D.