## VITAMIN NEWS

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TRUTH vs. PROPAGANDA IN NUTRITION

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This is the eighteenth year of publication of <u>Vitamin News</u>. Your editor has made every effort to offer reliable information on the relation of malnutrition to disease, and in many cases offered information greatly in advance of other sources.

Possibly the most outstanding is the reporting of the value of natural vitamin C complex as a prompt builder of resistance to infection, and its probable action through the promotion of phagocytosis (an opsonic effect), in the issue of September 18, 1933. The confirmation of this statement was reported in Vitamin News of December 1947. Meanwhile, many physicians had reported results definitely confirming our definition of the natural C complex as the "physiological sulfanilamide." The sulfa drugs in fact were later shown to actually do part if not all their work by mobilizing vitamin C from the tissues into the blood stream; and if C is not present the sulfa drug fails in clinical experience to act as a germ killer. (1)

Advance knowledge of this kind is of the highest value to the physician. The doctor who used the vitamin C complex to treat infections had no regrets of poisoning his patient, as many learned to their dismay after seeing the effects of sulfa dosing.

learned to their dismay after seeing the effects of sulfa dosing. Again, in September 1934, attention was called to the fact that the cause of arteriosclerosis is vitamin deficiency and lack of the mineral elements lost in flour milling. Multiple vitamins plus the phytates in orthophosphoric acid solution was recommended as a treatment. Today we find that the only known successful treatment of arteriosclerosis is in the use of inositol (from that same phytate), and in the lipotropic vitamins of the B complex as found in wheat germ. We have had the pleasure, meanwhile, of having hundreds of people tell us how their lives have been extended by this treatment.

In <u>Hygeia</u> for August 1949 appeared an article on this very subject of cardiovascular disease and arteriosclerosis. Our position has been years ahead of the best authorities in reporting progress, for the author, Paul H. Fluck, M.D., heads his article "Natural Causes, the Great Killer." He sees no reason to assume that cardiovascular disease has any possible relation to malnutrition, but is simply the accidental form of the manifestation of the ravages of wear and tear, namely old age.\*

Now, it is somewhat strange that Dr. Fluck is less well informed than the science writer for the American Weekly, G. B. Lal, for Mr. Lal, in the July 1949 issue of that layman's journal, carried a very good article on the use of choline, inositol and methionine for cardiovascular disease. It seems that Dr. Lester M. Morrison and his colleagues at the County Hospital in Los Angeles had reported their success in treating indigent victims of John Barleycorn who had liver cirrhosis and other blood vessel diseases that had been (up to that time) 90% fatal: they were cured if given these food factors that are lacking in our usual foods by reason of refining and processing. This disparity in Dr. Fluck's position and that of your editor is apparently due to the ineptness of the former in keeping abrest of and informed of the latest far-reaching discoveries in medicine and nutrition.

Another writer in the same issue of <u>Hygeia</u> is also frightfully behind the times. He is Dr. Wesley W. Spink, writing about "Today's Knowledge of Undulant Fever," who actually has not heard that undulant fever is a disease caused by trace mineral

deficiency, and has been cured by trace minerals. This has long been known, since Dr. Oscar Erf of the Ohio State University tested the discovery by two spectroscopists (Drs. Irene Levis and F. H. Emery of Cleveland) in 1939 that only cows with deficiencies of manganese, copper, iodine, and cobalt in their tissues were susceptible to the infective agent in brucellosis. Dr. Erf was unable to get cows to become infected if they had proper nutritional supplies of these elements. Since then, Dr. Allison and Dr. Albrecht at Springfield, Missouri, have conclusively proved that the addition of these minerals to the food of animals or human patients ends their disease just as quickly as brown rice can cure beri-beri. (3)

Since Hygeia had reported in September 1947 that undulant fever was a serious matter, being exceeded in importance only by tuberculosis and venereal diseases, certainly a far reaching discovery like this should deserve announcement with headlines and all the trimmings of any major medical scoop. Dr. Spink in other statements exhibits a very antiquated viewpoint, too. He says, for instance, that raw milk is capable of carrying the infection to human victims, in addition to its common avenue of inoculation, through skin abrasions or wounds, from the handling of infected meat or diseased animals. He evidently never heard of the account in Nelson's Encyclopedia of Medicine (Chapter 44, Volume 2, section by Strong), where the raw milk from 2000 cows that had been accidentally inoculated with a live culture of brucella organisms (instead of the killed culture intended as an immunizing agent), had been sold and used for six months without a single milk customer being infected. Most authorities accept the fact that disease germs are in general destroyed in the stomach, with few exceptions (such as typhoid).

Dr. Strong, in his report in this medical encyclopedia, says "Undulant fever is not contagious to man."
Dr. Spink says "People living in...areas where only pasteur-

Dr. Spink says "People living in...areas where only pasteurized milk is sold are not victims of brucellosis except when they travel and drink unpasteurized milk or milk products." This statement has never been supportable by scientific evidence, but is frequently made in such articles. Mrs. Darlington, in her complete exposure of the pasteurization racket that permits the sale of unsanitary and filthy milk without restriction, offers ample proof of the way the undulant fever scare has been used to cover up this unsavory business. (4) Probably the most valuable food principle in milk is vitamin C complex, which activates phagocytes and builds resistance. One authority reminds us that pasteurization destroys more of this vitamin than all the citrus trees in the country can replace with their fruit. (5) So pasteurization, in fact, can make us even MORE susceptible to brucellosis, and cooperate with mineral deficiency in undermining our health.

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The quicker we get the truth, the sooner we can apply the remedy. Here we need to realize that all our feed for animals susceptible to brucellosis must be fortified with 100 parts per million of manganese, 0.1 of copper, 0.1 of cobalt, 0.1 of iodine, 6.0 of magnesium, and 1.5 of zinc.\*\* That brings up the point that man cannot assimilate cobalt as a salt, but the ruminants can. Man must get his as vitamin B12, now claimed as the main constituent of the anti-anemic complex in the liver. B12 might be better known as the organic form of cobalt required by the human economy.

\* Some columnists on medical subjects tell us that the terrific incidence of cardiovascular disease is not to be worried about; it is simply because more people are getting older now, thanks to the reduced deaths from preventable disease; and because doctors are now classifying more deaths as heart disease formerly classified as nephritis and cerebral hemorrhage. But this is a form of guess work unverified by any conclusive evidence, and amounts to an attempt to "argue away" a very probable increase in cardiovascular deaths, Reliable Federal statistics show a 14% increase

in the death rate from heart diseases between 1900 and 1940 for the ages 35 through 44; a 62% increase for the ages 45-54, and a 72% increase for ages 55-64, during the same period in the U. S. death registration area. (2) (These increases are based on age-specific rates--deaths per 100,000 population in the age group--thus eliminating the argument of "more deaths because of more old people" by placing each age group on a common denominator of 100,000 persons.)

\*\* The Merck Report, July 1949.

Here is one of those cases where a mineral element must be in an ORGANIC form to be useful. And it is of interest that only a few short years ago our best authorities were telling us that no mineral element for nutrition needed to be in an organic form. (Statement of Drs. C. A. Elvehjem, F. E. Bear and E. L. McCollum at the McCollum-Pratt Seminar, Johns-Hopkins University, April 12-13, 1948; reported in The Land, Summer, 1948, page 301.) These men admitted that 99% of the people differed from their opinions, had no evidence to support their own dissenting viewpoints, and  $\underline{still}$  used their professional prestige to promote the pronouncement that no mineral needed to be in an organic form to be nutritionally effective. Within months, the discovery that cobalt had to be in the proper organic form to be useful in the human dietary (as vitamin  $B_{12}$ ), and that man cannot live without it, proved the ridiculous nature of their untenable position.

Again, your editor can modestly claim priority in this idea. Here is a reprinted review of a few ideas on trace mineral activities, originally published in 1947: (6)

We are just beginning to recognize some of the important functions of trace minerals. The activation of enzyme activity of manganese, cobalt and other trace elements is one important feature of trace mineral physiology, but many other minerals, fluorine in particular, may inhibit enzymes. Some stimulate enzyme action at one concentration or hydrogen ion level, and reverse their action at other ranges of concentration or hydrogen ion level. This field is not well explored, but in time may throw light on many obscure reactions, both normal and abnormal.

But the biggest new fact about trace minerals is their distribution in such cell organs as show that they probably are responsible for hereditary characteristics. It seems that the trace mineral in the chromosome is in a way, the "ink on the blueprints." The derangements that follow deficiencies of some trace minerals -- boron, zinc, manganese or copper--show changes that seem to be definitely due to impairment of the hereditary mechanism, changes indicating that somewhere some record is lost, some structure is incomplete. These minerals are undoubtedly attached to protein molecules, and as such very probably assimilated by the higher forms of life only after metabolism by lower forms. Here may lie the secret of ''organic gardening.'' Yeasts, molds, and bacteria act as sub-contractors for plant life, live only where organic compost is available, but obtain part of their mineral nutrition from inorganic soil sources. It is the same partnership in microscopic life we see in all the balances of nature in the higher animal kingdoms. a mutual partnership that the human family has tended to destroy by overcropping the soil and removing too great a proportion of not only trace minerals but also failing to maintain the compost bed that supports these forms of cell life that perform the first step of conversion of inorganic mineral substances to the organic state.

Before we get too enthusiastic about getting our heavy doses of nutritional minerals like manganese, let us check into the clinical experience. We find that inorganic salts of manganese "in small, repeated dosage" to the human patient causes liver cirrhosis. (7) We know that choline and inositol prevent and cure liver cirrhosis. In natural foods, we get manganese, choline and inositol in the SAME COMPLEX, such as cereal germ. Feeding manganese to cows which get plenty of bran and middlings from flour mill by-products is a lot different from feeding manganese to human patients eating white flour. That is the same mistake as fortifying foods with a few synthetic vitamins, expecting to get the same results as leaving in the flour all the natural vitamins. It should be no surprise to find the same result--the result of aggravating the malnutrition instead of relieving it.

Here we see how impairment of tissue integrity by poor nutrition can and does set the stage for the invasion of the infective agent, which is the SECONDARY CAUSE of disease imost cases, the PRIMARY cause being the STARVATION of deficiency--starvation of tissue in the face of an excess of proteins, fats and carbohydrates, especially the latter.

As we write this, Dr. Irene Diller announces at the A.A.A.S. meeting in New York her discovery of various forms of FUNGUS in CANCER tissue.

The same old story. The susceptibility of malnutrition. Did not Dr. Davidson years ago prove that mice could be made susceptible to cancer by imposed malnutrition, and afterward rendered IMMUNE by improving their diet? (8)

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THE STATEMENTS HEREIN MAY NOT AGREE WITH CURRENTLY ACCEPTED MEDICAL OPINION NEVERTHELESS THE PUBLISHER BELIEVES THEM SOUND.

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For more inside information on the danger in sulfa drugs, antibiotics etc. we suggest, "The Other Side of the Wonder Drugs", reprinted from "The American Mercury", magazine and available from us at ten cents per copy.