

'Health and Nutrition Secrets that can save your life'

by Russell Blaylock, MD
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'As a neurosurgeon, I have known surgeons, in many sub-specialties, who serve their profession with artistic skill of the most talented artist. They work very long hours at a pace few others in our society could even attempt, and they do this almost every day and night of the week. They sacrifice many of their weekends, lose enormous amounts of sleep, and have little time to spend with their families.

As they are not under enough stress, the government, litigation lawyers, and insurance companies have placed them under a burden that is close to destroying the profession....'

'As a result of all this, patients are also suffering. Because the doctors' expenses have skyrocketed and operating funds dwindled, they have to see twice as many patients as they normally would....'

'To save on expenses, doctors form large groups, which means you may see a different doctor on each visit. The doctor you see knows nothing about you, other than the few notes scribbled by the last doctor. This crazy system was largely created because of the insurance companies and the Medicare / Medicaid system. Medicare pays about forty cents on the dollar and Medicaid about twenty cents. The paperwork necessary for these payer systems costs the doctor a large share of his income....'

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'The problem with the medical profession is not necessarily a lack of dedication or laziness, or arrogance, even though, admittedly, there are doctors with some real personality problems. The problem is with the educational institutions which train doctors, and the AMA which influences them. Medical education underwent a significant change with the discovery of various pharmaceutical drugs used to treat disease. Closely connected with this is an overwhelming faith in science and technology as a means to solve all of our problems.

With the growth of pharmaceutical giants and the development of newer drugs for a variety of previously untreatable diseases, medical education began to incorporate this new knowledge into its educational curriculum. Pharmacology courses became a mainstay and biochemistry and nutrition took a back seat. Biochemistry was looked upon as nothing more than an obstacle when I was in medical school. In fact, some instructors viewed it as nothing more than a way to weed out academically weak students, almost an initiation.

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I single out biochemistry because it is intimately connected with nutrition. Nutrition is a scientific discipline connected with the ways food consumption fulfills the biochemical needs of the body. I remember that most of my fellow classmates just wanted to get through what they called 'the nonsense' and move on to the clinical

material. After all, they wanted to be practicing doctors, not scientists.

Once the basic sciences requirements were fulfilled all of the material we had been exposed to - the biochemistry, physiology, and biophysics - went out the window, forgotten to make room for the really 'usual' stuff. During the clinical years of study, we were taught diagnosis and the treatment of disease. Not surprisingly, all of the treatment was directed towards pharmaceutical medicine and no attention was given to nutritional support or treatments. Everything we had learned in biochemistry was ignored - unless it was useful to explain the mode of action of a pharmaceutical drug.

The pharmaceutical giants saw this as a tremendous opportunity. Using their financial power, they could influence what was being taught to budding doctors. First, they made enormous grants to the medical schools. With federal funding cuts, their money became the lifeblood of the schools, as well as a source of grants to professors for basic research. Who pays the piper chooses the song. Ever looking for a way to enhance their influence, pharmaceutical manufacturers began to entice doctors to participate in expensive paid vacations, either to visit the factory or give lectures and attend meetings in exotic places. In addition, they started paying doctors to conduct tests of their products.

Recently, pharmaceutical companies have launched an even cleverer plan. Whereas, in the past they depended on frequent visits to the doctors' offices by the drug reps to convince doctors to use their drugs, now they've bypassed doctors altogether and advertise directly on television and the radio, urging people to tell their doctors they want to try the advertised drug. Obviously, the plan has worked beautifully.

The problem is that doctors, both academic and those in private practice, are exposed constantly to propaganda from the major pharmaceutical companies. Doctors' entire education has been based on the belief in pharmaceutical agents to treat disease, with no consideration given the role of nutrition. This is not to say that the pharmaceutical companies haven't tried to get in on the nutrition 'business', because they did. The problem was that their products cost infinitely more than a similar product that could be purchased from a local health food store at a fraction of the cost.

As a result, many abandoned their natural-products line. But a problem arose. While the pharmaceutical industries grew, so did the nutrition industry. Nutritional science has undergone a virtual explosion in the last two decades that in the past were considered incurable. This terrified the pharmaceutical industry.

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Not only was this information appearing in numerous scientific journals and books, it was flowing to the general public through numerous sources: newsletters, popular books and especially the internet. The internet has revolutionized medical care and finding enormous amounts of information, and have access to renowned experts and basic research that before remained obscure.

The problem that has arisen from this trend is that patients are often better informed than their doctors about a particular illness. Most doctors, either consciously or unconsciously, assume they represent the best that medical knowledge has to offer. They firmly believe that medical centers, bastions of research and scientific breakthroughs, are the repository of this knowledge and that since their source of training and continuing education arises from these elitist centers, they should be listened to, and patients should mind the business of being good, unquestioning patients.

As a result of this belief, there is often a clash of wills when knowledgeable patients intervene on the turf of the doctors. The doctor may be thinking, 'Who is this person to dare challenge me? I have the best medical training in the world.' It is also embarrassing when a patient presents the doctor with information he or she is unfamiliar with. Instead of saying, 'I don't know', which would challenge their preeminence in the field, doctors will frequently mumble something about such information either being unproven, or that studies have disapproved it, or there is no evidence of a benefit. In truth, they often know absolutely nothing about what you are talking about. Again, this is a result of years of indoctrination by the medical elite, who, in turn, are under the influence of pharmaceutical companies.

You must also appreciate that doctors have very little time for outside study, especially in a field unfamiliar to them. In order to become knowledgeable in the field of nutrition, they would have to relearn a lot of biochemistry and pore through a tremendous amount of nutritional literature. In their busy lives, they simply don't have the time for it. Most practice medicine based on what they learned in their residency. The only education they receive afterwards is usually sponsored by pharmaceutical companies or medical supply companies.

If you scan most clinical journals, you will see that they are filled from cover to cover with ads from pharmaceutical companies and medical supply dealers. These are very expensive ads. In addition, many of these companies give grants to the journals in which they advertise. Unfortunately, this is also true of many nutrition journals as well. Doctors tend to read the articles that deal with new drugs being developed, new surgical techniques, and advances in diagnosis. The scattered nutritional or biochemical articles are rarely read.

The number of articles about nutrition now published in these journals is growing so fast that pharmaceutical companies are getting worried. As a result, they and their medical center cohorts have launched a drive to scare the public into abandoning nutraceutical treatments. I have discussed this issue throughout the book: most of these scare stories are bogus and should be ignored. ...

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Surviving a Terrorist Attack

It has been a year since a terrorist attacked the U.S. Since that time and in addition to the anthrax attack there continue to be numerous alerts and scares. As individuals, the best we can do in the face of these continued threats is to be prepared. Preparedness and knowledge can save your life if a disaster occurs. Furthermore, knowing that you can help yourself, (rather than relying on the media and government agencies for information and aid) can also relieve feelings of helplessness in our increasingly uncertain world.

My studies in the field of nutritional sciences have convinced me that there are nutritional ways to protect people from the effects of chemical, biological and nuclear weapons. This could mean the difference between surviving such an attack, or dying at the hands of barbarians. What many do not realize is that even should you survive, you may be left severely incapacitated and unable to function for a very long time.

Most chemical agents cause severe damage to the nervous system, resulting in a loss of coordination, damage to the senses, and impairment of cognitive ability. These agents can produce blindness, double vision, impaired hearing, intense vertigo, burning in the extremities, or a loss of feeling in the hands and feet. They can also

damage the immune and endocrine systems, or cause major organ systems to fail.

Biological agents are designed to either kill or incapacitate for long periods of time. Some rickettsia organisms can cause intense pain, such as with breakbone fever. Others can destroy the immune system, produce neurological disorders or result in severe prolonged weakness. It can take as long as a year to recover from some of these microorganisms. Some victims never recover.

Intense radiation, such as that following a nuclear attack, can produce internal bleeding, severe immune suppression, bloody-mucinous diarrhea, vomiting, intense weakness, loss of hair and teeth, visual loss, and eventually overwhelming infection. Survivors would be at an increased risk of developing several types of cancers, especially those of the bone marrow (leukemia), lymphatic system (lymphoma) and thyroid.

No matter the type of weapon used, it is vital that you maximize your nutritional health. For example, it is known that in all epidemics a certain number of people will survive either totally unaffected or with minimal effects. Careful studies indicate that these people are those in the best health before exposure, especially those with the greatest immune competence. This is also true for individuals exposed to high intensity radiation. The better their antioxidant and cellular health the more likely they are to survive, and do so with the least amount of both short- and long-term ill effects.

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Below is a summary of what you can do to prevent these horrible effects. A more detailed history and background information on some of these agents and their origins can be found in the contemporary booklet, *Bioterrorism: How You Can Survive*. Following is a synopsis of the basic modes of injury and preventive or reparative actions that can be taken.

Radiation

Radiation damages cells by two methods. The most destructive is by inducing the production of large quantities of free radicals, which can damage many areas of the cell. The second method is by direct damage to the DNA of the cell. Under normal conditions, damage to the DNA is fixed by DNA repair enzymes and all is well. When the dose of radiation is extremely large, much of the damage goes unprepared.

Radiation is measured in rads or rem when considering the effects on humans. As with other toxins, the effect is denoted in terms of the LD50. That is, the dose that will kill 50 percent of the people exposed to a particular dose. In man, 450 rads, given over a week or less, is considered a lethal dose. The threshold for radiation sickness is 150 rads within the same time period. Yet, much smaller doses can cause injury as well. Five rads per year has been set as limit of acceptable exposure for industry workers.

The most deadly components of radiation are gamma radiation and beta radiation. Gamma is the most lethal and resembles x-rays. The beta component is composed of negatively charged particles of high velocity. Both can penetrate deep into the body.

Once we reach exposures over four thousand rads, death is instantaneous. Between one thousand rads and four thousand rads, death occurs after about ten days. The probability of death increases rapidly from one hundred to four hundred rads, with corresponding rates rising from 10 to 90 percent.

Should a nuclear device be detonated by terrorists it would most likely be a smaller variety, the notorious 'suitcase nuclear bomb'. A ground blast differs from an air burst (such as those dropped on Hiroshima and Nagasaki) in that there is a lower incidence of

immediate deaths. A surface detonation also lifts a massive amount of radioactive dust which is then deposited, not only on the immediate area, but the portion that rises into the stratosphere will be carried over much of the rest of the nation.

It is important to have a battery-operated radio with you at all times to be aware of the wind direction and the position of the jet stream. Within the stratosphere, the radiation cloud can be carried around the globe, with fallout density decreasing rapidly the further you move away from the burst. Even so, the radiation dose can be sufficient to produce sickness and long-term radiation effects, even hundreds of miles from the explosion.

The fallout from the blast will contaminate rivers, streams and other resources of drinking water. The radiation will contaminate crop fields downwind from the explosion. For this reason, it is vital to keep at least two weeks of food supplies and fresh water available at all times.

A nuclear detonation kills by three effects: shock wave, heat impulse, and radiation. The shock wave carries pieces of buildings and cars with the force of a hurricane, killing and injuring people with millions of debris 'missiles'. The heat impulse incinerates everything within a particular radius and starts fires in surviving structures. Survivors exposed to the heat blast will suffer serious burns.

Those surviving the blast and heat impulse would face intense gamma and beta radiations exposure both from the immediate blast and from the falling radioactive dust and debris. It has been estimated that a small nuclear device can lift twenty thousand tons of evaporated soil.

What sets nuclear weapons apart from conventional explosives is not only their power, but also the effects of radiation exposure over a long period of time. Under such conditions, protecting yourself from the effects of radiation injury becomes paramount. It should be appreciated that our sensitivity to radiation varies widely. This is mainly because of differences in our antioxidant capability, our DNA repair ability, and the strength of our cells, all of which depend on nutrition. Recently, it has been found that chromosome sensitivity to radiation injury is increased during the second trimester of pregnancy and returns to normal immediately following birth, indicating a wide variety of sensitivities during different physiological conditions.

Fortunately, we know of several steps that can be taken to significantly reduce the effects of not only the radiation, but also other injuries as well.

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Chemical Warfare Protection

Chemical warfare is one of the most frightening of all when considering its direct long-term effects on humans. Survivors are frequently left with severe neurological problems that are often permanent. Like the biological agents, they are divided into those designed to kill and those designed to incapacitate.

Sometimes there are simple ways to protect yourself. For example, absorption through the skin can be avoided simply by wearing a long sleeve skirt and long pants. Wearing a gas mask alone will not protect you, since contact with a postage stamp size area of skin can result in death.

What You Can Do

Of critical importance when dealing with any poison is to have a fully functional detoxification system. As we have seen before, our detoxification system consists of two components, called phase I and II detoxification. Both are vital. Like most things in the body, these detoxification systems are sensitive to diet.

Most important is to avoid damaging the body's most powerful detoxifying organ, the liver. This means avoiding alcohol and exceeding exposure to drugs like acetaminophen. The toxic metal, such as lead, mercury and cadmium also can damage the detoxification enzymes. Throughout the book I have demonstrated how nutrition can alter the detoxification system. Not only the vitamins, but many phytochemicals found in plants can significantly alter detoxification function.

The major treatments for chemical agents will be pharmaceutical drugs and special chemicals designed to neutralize their effects. Nutrition can enhance the detoxification process, build up the antioxidant defenses, boost immunity and strengthen overall cellular health. It should be appreciated that many of the chemical agents trigger the production of enormous amounts of free radicals and lipid-peroxidation toxins.

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Bioterrorism: What You Can Do To Survive

It is unfortunate that so many people were unprepared for this eventuality during our first experience with bioterrorism. The wrong antibiotic was given, those taking the antibiotic were not followed for possible complications, and hospitals were not prepared to handle such emergencies.

As a student of terrorism for many years, I recognized that it was not a matter of 'if' but rather 'when and where'. Our intelligence community knew that the terror networks were highly organized and sophisticated in terms of logistic planning, finance and weapons development. The fact that terrorist organizations appear so dispersed and disjointed is not a weakness but a strength. Having so many organizations spread throughout the world, without a central head, makes the counter-terrorist's job just that much more difficult.

So what is a biological weapon? Basically, it is the use of collections of viruses, bacteria, rickettsia and special fungi as weapons of war. Because the amount of virus or weaponized bacteria can be easily transported through security, prevention of an attack would be very difficult. We have seen the case with which selected targets were exposed to anthrax via the mail. This means that treatment methods must be devised to deal with the threat.

One of the best books on the subject of terrorism and the threat in America, *America the Vulnerable*, is by Dr. Joseph Douglas, Jr and Dr. Neil Livingstone. It provides numerous details on the origin, financing and methodology of chemical and biological terrorism. In addition, the book provides a unique look inside the workings of the Soviet mechanisms of producing weapons of mass destruction.

How Bioterrorism Differs from Natural Epidemics

Our local news station, after learning of the anthrax, immediately went to the medical university to interview a medical specialist. Unfortunately, they interviewed the chief of the infectious disease service, who had no expertise in weaponized biological agents and merely described the naturally occurring disease. He assured the audience that anthrax would not make a good terrorist weapon because it was unstable.

It is important to know the difference, because many of these weaponized agents have been genetically altered to make them virtually incurable or designed to specifically inhibit the immune system. Others were developed to secrete special toxins. For example, the Soviets attempted to make a bacillus that produced cobra venom as an exotoxin. While this failed, they were successful in making a mycotoxin that would produce paralysis similar to multi-

ple sclerosis. Soviet microbiologist genetically manipulated infectious organisms to make them more virulent and deadly.

The Soviet observed this when they were working with the deadly Marburg virus. This virus, like the Ebola virus, causes tissues and organs to hemorrhage and liquefy. An accident in one of the labs infected the director, leading to his rapid and very painful death. When they cultured the virus from his corpse, they found it to be even more virulent than the strain that had originally infected him. It was named the Marburg-U virus after the director (Ustinov). It is this virus that the Soviets stockpiled as a biological weapon. It is highly infectious and has a mortality rate as high as 90 percent.

The Soviets used highly sophisticated techniques to enhance the survivability of these deadly agents. This is because many of the organisms found in nature cannot be easily transmitted by dissemination techniques, since they are destroyed by UV light from the sun and by oxygen in the atmosphere. This is particularly true of the plague bacillus, *Yersinia pestis*. According to Dr. Ken Alibek, first director of the Soviet bioweapon laboratories (Biopreparat), they were able to overcome these problems by special microencapsulation techniques developed at the institute of Ultrapure Biopreparations.

I again emphasize, these special organisms have been specially prepared and genetically altered, their stability for dissemination in crop dusters, packages, special aerosols and even thrown into the wind is much more feasible. They can be added to food supplies, cosmetics, and hidden in numerous items without suspicion.

Is our country prepared?

Even the chief of the public health department admitted on the television program Crossfire that America was not prepared for such an attack.

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Despite the fact that the National Pharmaceutical Stockpile has millions of doses of antibiotics available for such emergencies, distribution will not be the only problem. As I pointed out earlier, the Soviets created strains of bacteria that were highly resistant to antibiotics. There is also the problem of chimeric organisms. This is a genetic trick where two or more organisms are genetically fused as Ebola and the smallpox virus. In such a case the health authorities may have effective treatments for one of the organisms, not recognizing there are two.

Detection is also a problem. Some of these bioterrorist weapons are so exotic that most hospital laboratories are unable to identify the organism. In fact, a recent review found that even the anthrax bacillus would be identified as a more common harmless bacillus in most hospitals.

Another issue is that many of these diseases have a prolonged incubation period, the duration of time between exposure to the agent and appearance of the first symptoms. For anthrax, this can vary between ten days to two months. This means that infections may slowly build in the community before anyone recognizes that a real problem exists.

Nutrition as Protection Against Bioterrorism

There is a overwhelming evidence that specifically designed nutritional supplementation can protect you against many of the bioterrorist agents. We have known for centuries that only a part of the population is effected during major epidemics. For example, only half of the people of London contracted the plague during major epidemics of the fourteenth century. The rest were immune or had only mild infections. This is also true for highly virulent diseases such as smallpox. Again, a certain number seem to be either immune to the disease or have only mild courses of the infection.

The health effect of naturally occurring organisms depend on the

state of immunization in those exposed. Frequently occurring viruses, for example, often leave most individuals with some immunity. Likewise, vaccinated individuals are more likely to either escape infection or have very mild disease. This, of course, depends on the state of the immune system and how long ago the vaccine was given.

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Today, there is evidence that poor nutrition actually increases the virulence of microorganisms. It appears that when a person's nutrition is poor, he will develop devastating and often fatal effects from organisms that in well-nourished individuals would cause only mild disease. But, in addition, the previously benign infectious organism will suddenly become highly virulent when in the body of someone who has poor nutrition. That is, it makes the bacteria or virus much more deadly.

During the great smallpox epidemics, it was the very young and the elderly that were at most risk of death. Likewise, anyone with poor immune function would be at greater risk. Today, this would include those taking immune suppressing drugs following organ transplantation, those undergoing chemotherapy and radiation therapy for cancers and those with immune related diseases.

We know that immune incompetence associated with aging is mostly secondary to poor nutrition and proper nutritional supplementation can repair this damage. In fact, with nutritional supplementation, the elderly can have immune systems that function as well as twenty-year-olds. With nutritional supplementation the elderly can avoid flu vaccination altogether. In my own clinical experience, nutritional supplementation dramatically reduces the incidence of all viral infections, and should that person become infected with a particular virulent strain, the course and severity of the illness is dramatically reduced. This protection would also include such disease as smallpox and anthrax infections as well.

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Special Nutritional Immune Stimulants

While there is much talk about vaccination for protection against these bioweapons, one of the world's real experts, Dr. Ken Alibek, cautious against this. During the existence of the Soviet Union he was the first head of the Soviet's Bioweapons laboratories, some forty in number. In these labs, hundreds of tons of genetically engineered microorganisms were prepared and made suitable for weapons of mass destruction. Workers in these labs were required to take vaccinations against all the microorganisms they were working with. He states that the vaccines ruined his health. Now he proposes non-specific immune stimulation instead of vaccination for several reasons.

First, there is no way to know the 'when, where and what' concerning the attack. That is, when it will occur, where it will occur and what specific agent or agents will be used. But non-specific immune stimulation doesn't matter; your body is ready no matter the agent used. Vaccination prepares your body for a specific type of attack. non-specific immune stimulations heightens your immune system's alertness, shortens its response time and increases its strength.

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If the immune defense is inadequate, the organism continues to proliferate quickly overwhelming the immune system. It should be appreciated that at this stage, nutrition is critical. Because of the tremendous outpouring of immune cells, trillions in number, critical nutrients are consumed in large quantities. These immune cells have a very high metabolic rate, so they need lots of nutrition to maintain their metabolism.

Another observation to consider is that these immune cells kill the invaders by producing enormous numbers of free radicals (called respiratory burst). If the antioxidant system is inadequate,

these free radicals begin to accumulate, killing the white blood cells as well. In addition, the flood of free radicals begins to destroy surrounding cells and tissues. This is why we need an increased supply of antioxidant during serious infections.

In case of viral infections, especially in the brain, it is the body's own immune system which does most of the damage and not the virus. This is especially the case when critical parts of the immune system are not functioning correctly. When cellular immunity is weak, the virus will persist leading to prolonged free-radical damage. Several recent studies have shown that antioxidant supplements improve resistance to many types of infections. In fact, the supplement N-acetyl L-cysteine (NAC) has been shown to significantly lessen the severity and course of flu virus infections.

Echinacea purpurea, also called snakeroot, is a herb that contains high molecular weight polysaccharides that act as immune stimulants. It appears to activate all portions of the immune system, but especially phagocytosis by white blood cells. This is the process by which white blood cells gobble up organisms. Extract of the plant have been shown to inhibit the influenza virus, herpes virus and the vesicular stomatitis virus. It has not specifically been tested against the smallpox virus.

In the case of anthrax exposure, the tincture of echinacea may be helpful as nasal and oral spray. However it contains alcohol, it may cause burning of the nasal mucosa.

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recommendations, treatments

Smallpox
Anthrax

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During an epidemic, such as smallpox, plague, or Marburg virus, avoid going to the hospital or your doctor's office unless absolutely necessary. Most things can be handled over the phone. Avoid crowded places, such as shopping malls, stores, and other populated places.

Keep objects in your house clean by using a disinfectant such as Lysol, diluted bleach or alcohol. Most of the viral epidemics are spread by droplets in the air, but many can persist on inanimate objects for long periods of time- even weeks.

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Antibiotics

Each antibiotic has a specific set of complications, restrictions, sensitivities and ways to take it. It would be a good idea to get a copy of the Physicians' Desk Reference (PDR). This book lists most of the prescription drugs available and includes a considerable amount of information about each drug concerning indications, dosages, side effects and special precautions. Taking antibiotics is not something you should take lightly, especially over a long period of time.

We have seen that prolonged antibiotic usage can result in a loss of the friendly bacteria in the colon and a resulting overgrowth of harmful or pathogenic organisms. This includes yeast as well. Most are familiar with the yeast organism, *Candida albicans*. Prolonged use of antibiotics, especially that broad-spectrum antibiotics such as Cipro, frequently result in an overgrowth of *Candida albicans* in the colon, urinary tract or vagina. If such an overgrowth of yeast occurs, it may eventually enter the blood stream, where it can invade any organ or tissue, including the brain.

Never take antibiotic unless you also take a probiotic. Probiotics are friendly bacteria found in the colon, usually consisting of four types of *Lactobacillus* species and four of the *Bifidobacterium* species. As discussed in the supplement section, these bacteria require special nutrients for their growth and survival. This includes the sugar compound, fructo-oligosaccharides (FOS), or the special

blend called NT Factor (tm). I prefer the latter.

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While the 'experts' are downplaying the exposures to anthrax, you should be aware that giving people powerful antibiotics for two months is not a benign thing to do. It will wipe out their intestinal flora of 'friendly bacteria' and in a certain number, result in a serious condition called pseudomembranous colitis that can be fatal.

Vaccinations, likewise can have very serious complications including encephalitis and ascending paralysis- especially in those with poor nutrition. During the swine flu scare, the government forced vaccinations on thousands of trusting people only to have over three hundred develop an ascending paralysis. We can expect the same or worse with mass vaccination campaigns against smallpox or anthrax.

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The number of infectious organisms that have been weaponized is staggering, and includes hemorrhagic fevers (Ebola, Marburg, Crimean-Congo hemorrhagic fever, Machupo, and Jumin), Q-fever, tularemia, brucellosis, Venezuelan equine encephalitis, smallpox, typhus, melioidosis, plague, and several genetic mutant viruses. Several different organisms may be released at the same time to confuse healthcare workers and frustrate public health control methods. All of these microorganisms are capable of causing a massive infectious outbreak that could result in millions of deaths.

If an attack of this magnitude occurs, and the likelihood is very high, there would be a breakdown of communications, water purification, traffic control, food distribution, transport, police and fire protection, most important of all, medical care. Riots and roving gangs of thugs would further add to the chaos.

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Because of the virulence of many of these weaponized agents, non-specific immune stimulation alone may not give full protection, but it will dramatically improve your chances of surviving such an attack with far fewer complications. It will also dramatically enhance the effectiveness of any antibiotics and vaccines that may be necessary, and reduce the risk of complications associated with these treatments.

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Even when doctors want to provide the best care that medical science can offer, insurance companies and government payers (Medicare / Medicaid) often will not let them. What little decision-making is left to them entails jumping through seemingly endless, infuriating bureaucratic hoops. As a result, many find it's a lot easier to avoid even *attempting* to treat you.

Due to this abysmal state of affairs, your health is dependent on your own determination, ingenuity, and hard work.

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In addition, modern medicine has all but ignored the effects of various additives used in processed foods, especially the problems associated with accumulated, synergistic effects. The same is true of environmental toxins. As we have seen, the most neglected area of all is the effect of these toxins on the nervous system. Tens of thousands of such chemicals have never been tested to determine their combined, long-term effects.

Another serious problem is widespread use of vaccines. The medical Hierarchy has assumed that vaccines are much safer than actual experience has shown, and the connection to learning disorders, such as ADD/ADHD and autism, has been virtually ignored by these elitists. There is overwhelming evidence that over-vaccination and vaccination under conditions of immune impairment can have substantial deleterious effects on the developing nervous system. As with so many problems, medical elitists have simply refused to objectively examine the issue.

I also hope that you now realize that nutritional medicine is not outside the scope of science and that so called 'orthodox' medicine is not the only true and scientifically based medical model. The nutritional basis of disease is just as scientific as orthodox medicine, which I have attempted to demonstrate throughout this book. What makes orthodox medicine 'orthodox' is that its leaders have wrested control from nutritional scientists, who actually have more complete and scientific based methods of treating disease and maintaining health. Despite the fact they frequently stand on very shaky scientific ground, the 'orthodox' medical industry has also wooed the favor of the main media outlets in this country so they always get the last word in any argument. (bold typeface added)

...Nutrition is essentially biochemistry, and medical care devoid of nutritional considerations is like a car without wheels. It goes nowhere.

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