

Possibilities

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Folic Acid: Better Mental and Emotional Health in Children

Back in 1998, overwhelming evidence of folic acid's role in reducing neural tube defects (NTDs), in infants, led the U.S. and Canada to have all grain products fortified with folic acid—the synthetic, bioavailable form of folate. The links to reduced NTDs were found when the mother had high enough levels of folic acid during the early months of pregnancy. The most common NTDs include spina bifida and anencephaly.

Preliminary evidence indicates that adding the folic acid to grain products has reduced NTD incidence by 15% to 50%. In Chile, this measure has reduced the number of NTDs by 40%. A total of 51 countries now have some sort of mandatory addition of folic acid to flour.

Now, Dutch researchers have found links that may lead to recommendations to increase folic acid intakes during the early stages of pregnancy to possibly reduce mental and emotional health problems in children.

The researchers reported that the children of mothers who took folic acid supplements during pregnancy were better at internalizing and externalizing problems, compared to the children of mothers who did not take such supplements. The study was published in the *British Journal of Nutrition*.

The study was led by Henning Tie-meier from Erasmus MC University Medical Center in Rotterdam, indicates the behavior of the offspring may also be improved.

The researchers assessed the folic acid supplement use of the mothers of 4,214 toddlers during the first trimester of pregnancy using a questionnaire. The children underwent a behavioral test at 18 months of age.

According to their findings,

“children of mothers who did not use folic acid supplements in the first trimester had a higher — 44%— risk of total problems”.

Children of folic-acid using mothers were protected from internalizing and externalizing their problems, even when the researchers took into account their mothers' characteristics.

Regarding the potential mechanism of how this happens, the researchers noted several potential mechanisms including the role of folates on the direct development of the central nervous system. The vitamin plays a key role in the production of brain cells, and has also been linked to the synthesis of various neurotransmitters.

Another possible mechanism is how folate indirectly effects fetal growth, since folic acid supplements have been linked to heavier babies, and lower birth weights have previously been linked to behavioral and emotional problems.

The researchers concluded that “Folic acid supplementation in early pregnancy, aimed to prevent neural tube defects, may also reduce mental health problems in children”.

Editor: We cannot help but mention, if the FDA had allowed the natural health industry to let the general public know more clearly of the link between NTDs and folic acid needs much sooner than it did, the number of NTDs would likely have been greatly reduced far earlier. This link was widely known in natural circles for many years before the “claim” was allowed to be made. Whenever we see situations like this, we are reminded of how the slowness of recognizing natural benefits damages so many people. We are grateful the acceptance is growing. **Folic Acid is Item No. J-113. ♦**

New Finding For Preventing Skin Cancer

Turns out a certain kind of fish is helpful for your skin. Not clams, shrimp, wall-eye, etc. Once again, salmon is the fish found to have yet another health benefit.

New research found people who ate fish high in omega-3 fatty acids — such as salmon, tuna, or sardines — could decrease their odds of developing potentially precancerous skin growths called actinic keratoses.

The 5-year Australian study found that people who ate those types of fish at least once every 5 days were **almost 30 percent less likely** to develop the troubling skin spots, compared with people who ate little or no fish. Researchers believe it may be because these fish are high in omega-3s, fats that seem to help calm inflammation in skin cells. These fish are also a good source of Vitamins D and A, which are two other nutrients known for either cancer-fighting or age-fighting qualities.

Actinic keratoses result from years of sun exposure and may appear to be as insignificant as a rough or scaly patch of skin that won't go away. Not all of them turn into cancer, but should be checked if you see changes in your skin's texture or appearance.

Editor: We carry a number of choices in the Omega-3 category:

Omega-3 Fish Oil Softgel Capsules come in bottles of 60 softgels (**Item J-391**), or bottles of 120 softgels (**Item J-392**). The 120 capsule bottle is a two month supply.

We also have **Flaxseed Oil Capsules (Item J-77)**.

Flaxseed is an excellent source of omega-3s, especially for people with fish allergies.

Our **Vitamin D3** is **Item No. J-24** — 100 capsules of 1,000 IU each.

And we offer two types of Vitamin A supplements: **Item No. J-16** is called **Extra A Plus**, and the vegetarian version is **Item No. J-17, Extra-A Vegetarian**. Both provide 25,000 units of Vitamin A. ♦

Celiac Disease IS Increasing

Celiac Disease, a digestive disease caused by an immune response to gluten in wheat, barley and rye, is not only growing in prevalence, but is also leading to a higher death rate for people who have it but don't know it.

Those were the conclusions of a Mayo Clinic study. It tested frozen blood samples from Air Force recruits of 50 years ago. The study concluded that the condition is four times more common today than it was in the 1950's.

The researchers also concluded that recruits who had the undiagnosed digestive disorder, had a four-fold increase in their risk of death. Researchers said they don't know why the disease is increasing, but they believe these test results indicate the need for more widespread testing, since those with the condition who don't know it, are more likely to die from it.

They said it may be necessary to do testing like that done for cholesterol or blood pressure.

Celiac disease is often hard to diagnose because it mimics symptoms common to other problems — diarrhea, abdominal discomfort, weight loss, anemia, and others.

The disease occurs when a per-

son's body cannot digest gluten, a protein found in wheat, rye and barley. The undigested protein triggers the immune system to attack the lining of the small intestine, which is what causes the diarrhea, nausea and abdominal pain.

We have noticed more and more customer inquiries for help with celiac disease, which is apparently not surprising, given the increasing numbers of people afflicted with it.

We have a product called **Gluten Ace (Item No. J-63)** which can be used by a person with celiac disease who has accidentally ingested gluten. As always, if having a severe allergic reaction to anything, seek professional help.

In terms of helping those with allergies of various kinds, we always think of the following items, because we've been told by many that they've helped with their allergies:

**Real Willard's Water
Colostrum (H-3; H-5; H-6)
MSM (J-92; J-94; J-99)**

We can't offer any expert opinions (since we are NOT experts!) but given the consistent user reports over many years that all of the above items have been helpful in relieving their allergy problems, they seemed worth highlighting here. ♦

On The Hunt For Germs

With all the talk about avoiding germs to avoid flu, etc., we thought the following list of reminders of where germs may be lurking in your household, and how often to clean them, might be helpful.

1. TV Remote. Bacteria easily left as people "channel surf"... suggested: sanitize regularly.
2. Tub & Shower. Tubs were found to have 100 times more bacteria than the trash can, per one study. Suggested: disinfect both tubs & showers twice a week.
3. Pet Food Dishes. Most stay on the floor and don't get washed regularly as they should.
4. Kitchen cloths and sponges. 70% of kitchen sponges in U.S. homes failed the hygiene test by the Hygiene Council. It suggests running sponges through the dishwasher regularly and washing kitchen cloths on the hot cycle in the washing machine.
5. Microwave touch screen. Germs often on this outside area. Suggested: wipe it down regularly, especially after cooking raw meat.
6. Light switches. Bathroom light switches can have as many germs as the trash bin. Suggested: Disinfect them twice a week.
7. Baby changing table. Clean often since during diaper changes, the wipes container, the diaper packaging, the trash can and anything around the changing areas get contaminated with bacteria through touching after handling a dirty diaper.
8. Kitchen faucets. People typically wash their hands after handling raw meat, but touch the faucet to turn the water on and don't think about the bacteria they leave there. Hygiene Council found more than half of faucets in U.S. homes are covered in bacteria. Clean often.

When you think about the fact that various germs can survive for various periods of time, it makes it more obvious to try to remember to clean the things it's easy to forget to clean! ♦



Trivia & Tidbits . . .

1. Why was Big Bird's nest's address on Sesame Street?
2. Who was Garret A. Hobart in American history?
3. How did Venezuela's Angel Falls (world's highest waterfalls) get its name?
4. What fruits were crossed to produce the nectarine?
5. What part of the human body is named for its resemblance to a sea horse?
6. How old is the average 1-1/2 pound lobster?
7. How long does it take light from the sun to reach earth—a distance of about 93,000,000 miles?
8. Do identical twins have identical fingerprints?

AND THE ANSWER IS...

1. 123-1/2 Sesame Street.
2. Vice President (1897-99) to William McKinley—Hobart died while in office.
3. From American bush pilot Jimmy Angel, who crash-landed nearby in 1937.
4. None—it is a smooth-skinned variety of peach, unlike a cross as many believe.
5. The hippocampus—the ridge along each lateral ventricle of the brain; Latin for sea horse.
6. About 8 years. If not caught can live up to 50 years and weigh up to 35 pounds.
7. About eight minutes.
8. No. No two sets of prints are alike, including those of identical twins.

ON "THE WEB"!

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Please Note: We are not health authorities of any kind. This newsletter represents our own views—presenting information we believe to be true and correct, but is "opinion", nonetheless. We also have a vested interest in most of these topics, so don't claim to be impartial. This newsletter, or anything else we publish, is no substitute for a competent health professional. User reports, though published here, don't prove anything—we pass them along because they certainly are of interest to others using the same products, or who have an interest in them.

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PRODUCT HIGHLIGHTS & UPDATES FROM CHARLIE

Drug CAUSES It; HRT & Lung Cancer; Hearing Help

A recent study found that treatment with anti-heartburn drugs known as proton pump inhibitors (PPIs—such as Prilosec, Nexium and Prevacid) for eight weeks brings about acid-related symptoms such as heartburn, acid regurgitation and dyspepsia once treatment is withdrawn, in otherwise healthy people. More than 40 percent of healthy volunteers, who had never been bothered by those problems, developed such symptoms in the weeks after stopping the drug treatment.

Rebound acid hypertension, defined as an increase in gastric acid secretion *above* pre-treatment levels following such drug therapy, has been observed within two weeks after withdrawal of the treatment and can lead to acid-related symptoms and possibly PPI dependency.

All of this reminds us of “Roger” who became a big fan of Real Willard’s Water (“RWW”) because after starting regular use of it, he found he never needed Roloids any more—and he’d always had bottles of them available at all times. Not only did it seemingly end Roger’s need for the Roloids, but Roger’s friend who had been just as dependent on Roloids as Roger, was truly distressed one day when he asked Roger for a Rolaid and Roger didn’t have one. Roger explained he no longer needed them and told his friend about the RWW. The friend wanted some—Roger got it for him and the friend also ended up no longer needed the Roloids.

Sure doesn’t mean RWW would help everyone, or even most people, with such problems. But since RWW can’t hurt anything and might also help a person in other ways, it would seem a reasonable idea to give it a try.

Another product a number of people have told us has helped their heartburn is **Strauss Heartdrops**. (Items S-100 and S-101). We don’t know why they should help, but enough people have said they did, it seemed worth passing along.

More Bad News Re: Hormone Replacement Therapy (HRT) — Hormone Replacement Therapy (HRT) is now said by researchers to have a possible link to lung cancer deaths. Women using HRT were **71% more likely** to die from lung cancer.

The discovery was made in an 8-year follow-up to the Women’s Health Initiative (WHI)—a randomized, controlled study of 16,608 postmenopausal women. The study was stopped early because of the high risks that were discovered. Six years after that study was stopped, patients who used HRT compared to those on placebo, had higher risks of cardiovascular disease, coronary heart disease, stroke and breast cancer, and a lower risk of fracture and colorectal cancers, according to that 6-year follow-up study.

The HRT used in that WHI study was estrogen plus progestin in postmenopausal women. Progestin is a drug which has totally different effects than the like-sounding Progesterone which is a natural substance and has a long track record of benefits.

Dr. Lee’s book “What Your Doctor May Not Tell You About Premenopause” details the differences. Basically progesterone is helpful to the body in numerous ways, while progestins are, like many drugs, seemingly filled with side effects and problems... such as increasing sodium and water in the body’s cells; causing loss of electrolyte; causing edema, increasing birth defect risks; causing loss of scalp hair and facial hirsutism; embolism risk; decreases glucose tolerance; allergic reactions; causes acne, skin rashes; prevents implantation of fertilized ovum, and increases risk of coronary vasospasm, to name a few.

Progesterone on the other hand: Protects against endometrial, ovarian, and breast cancer; normalizes libido; causes reduced hirsutism and regrowth of scalp hair; improved lipid profile; improves new bone formation; decreases risk of coronary vasospasm; facilitate

thyroid hormone action; usually effective in treating PMS; essential for successful pregnancy; essential for myelination of nerves; restores normal sleep patterns; and is also essential for men.

That last notation: also essential for men is a surprise to many. But for the **men** who have used our Progesterone Cream, we hear rave reviews just like we do for the women using it. Men often say it seems to bring a halt to their middle-of-the-night trips to the bathroom.

Women report benefits from help with PMS, Menopause, irregular periods, depression, headaches, etc. etc. etc.

Natural Progesterone is Item No. HP-J and HP-1P.

Hearing Benefits — A study of 300 young, healthy recruits going through two months of basic military training, it was found that magnesium seemed to keep their ears sharper.

The training included repeated exposure to high levels of noise while wearing earplugs. But the recruits who had received a special daily drink supplemented with magnesium showed significantly fewer signs of permanent hearing loss. Researchers said they weren’t sure why magnesium may help protect hearing, but it is noted that the mineral plays an important role in cellular processes and might somehow safeguard the ear from the physical changes that accompany hearing loss.

Can’t help but comment on this mineral’s reputation for helping relieve lower back pain, as well as a myriad of other health benefits. Whole books have been written on the benefits of magnesium, and it truly is essential for good health, in our opinion.

Also, anyone taking calcium is told to also take magnesium. Used to be recommended at half the amount of calcium being taken—now many natural experts suggest equal amount of magnesium and some even say more than half should be magnesium. **Magnesium is Item J-54; Calcium is J-25, J-201 & J-203. ♦**

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SYMBOLIC “COMING HOME” GAVE COMFORT HE’D REALLY GONE HOME...

“They were enjoying the card games that night...a cozy family night. My mother and her parents and an aunt and uncle were all enjoying the nice quiet time together.

“It certainly was a contrast to the events across the globe...with World War II raging, and local boys off in the fighting, feeling peaceful was a rare luxury.

“They all heard it. They heard the front door open when my mother’s Aunt Alice had apparently returned from the movie she’d gone to see. They thought it was funny that she didn’t even say hello, but went immediately upstairs. They heard her footsteps go all the way to the end of the hall and into the far, back bedroom.

“They wondered if she was alright—it really was odd that she hadn’t greeted anyone when she got home. But they didn’t disrupt the card game to go find out.

“The game did get disrupted, however, about 15 to 20

minutes later, when the front door opened, and Aunt Alice came in...and came out to say hello. They asked her why she hadn’t come in before...when she’d come in and gone upstairs. Well, she didn’t know what they’d heard, she said, but it wasn’t her...the movie had just gotten out and she’d just now come home.

“Then, they all went upstairs...wondering what they’d find. They found nothing. Nothing was disturbed. And no one was there.

“Several days later, they read in the local paper that Tom P. had been killed in action *on the night they’d heard the footsteps*. His family had owned their house before they did, and that back bedroom had been his room.

“It was a real comfort to “hear” firsthand, the symbolic return to one’s home, because it somehow conveyed to each of them the assurance that when we leave this earth, we return to our real home, in our Father’s house.” *Reprinted from May 2000.* ♦

Editor: You’re invited to share stories of unexplained help, Forks in the Road & other inspiring stories for this column anonymously, if desired.



E-Mails, Mailbag & Phone Calls. . .



“Since 1967” — That’s when the trouble started for “L.H.”. That’s when she broke her spine in an auto accident. She e-mailed us that she has “lived with **excruciating back pain**” ever since.

She added she has refused “pills, muscle relaxers, etc. Only shark cartilage ever helped and haven’t had that since the FDA made Lane Labs quit making Benefin a few years back.” But, she says now, after getting **REAL Willard’s Water**, into her routine, “I can bend, stoop, vacuum, make beds... all pain free now (along with hyaluronic acid)”. Plus she added that “it (RWW) gives me great energy!”.

She added that she doesn’t think you should take RWW too late in the day since, if she does after lunch, it keeps her awake. This is one of situations where it varies from one

person to another... some people deliberately take it at bedtime to help them sleep, even though they notice the energy increase during their waking hours that many people report, while others, like L.H., find it so energy-boosting they can’t get to sleep if drinking it later in the day.

Nice observation from Japanese M.D. — “R.H.” placed a re-order for our **Activated B-12**

(Item J-20), **Activated B-6** (Item J-1), and **Activated B-Complex** (Item J-2) recently. A note sent with her order spoke volumes... “I love your company’s products... Vitamin B is wonderful!!” We often hear rave reviews on these items, which are already converted to what your body has to convert “regular” B vitamins to, hence the term “Activated”. However, hearing it from an M.D. in nutrition-conscious Japan reminded us again of just how superior these items are. ♦



More Product Highlights & Updates from Charlie

Even Some Mainstream Experts Say This Cancer *ISN'T* Cancer! So Why Is It TREATED with Chemo, Etc?

Reprinted from our September, 2005, issue. We're reprinting this in view of the recent commercial running that features a breast cancer survivor who is afraid breast cancer might be treated less well with health care reform... it might be like in England. We wonder if England may NOT count DCIS as cancer and if that poor breast cancer survivor might have been one of the thousands of women treated for a cancer that isn't.... This story was sparked by the 2005 controversy that erupted over Victoria Gotti's statements that shed had breast cancer and some media reports that what she has wasn't cancer... that lead to additional verification of what Dr. John Lee, M.D. had earlier written about — that that “non-cancer” was actually treated as cancer quite often. Read on.

Victoria Gotti's statements that she had been treated for breast cancer, was followed by another newspaper declaring it was a sham and a publicity stunt—that she really didn't have breast cancer. The second article claimed it was all a publicity stunt to promote interest in her television show, “Growing Up Gotti”.

She was interviewed on ABC's “Good Morning America” (GMA) and said it was actually “Ductal Carcinoma In Situ” or “DCIS”. Charles Gibson, one of the anchors of GMA, interjected that DCIS was really “precancerous cells”. Gotti appeared to agree. Which reminded us of the late Dr. John Lee's discussion of DCIS in his book “What Your Doctor May Not Tell You About Breast Cancer”.

But before we get to Dr. Lee's explanation, let us summarize what we found online about DCIS from various sites. The long-and-short of it is that Gotti was correct in saying on GMA “if

you look it up on the internet it is cancer”. Indeed every cancer site we checked, from the American Cancer Society page to the WebMD page, to about.com, which is a part of The New York Times Company, listed DCIS as a type of breast cancer. Often simply defined as a type of cancer that doesn't spread, or as a type of cancer that is “99% curable”.

The more detailed explanations said that it is cancer that is limited to the inside of the milk ducts within the breast... they may multiply within the ducts, but they do not invade through the duct walls or move into the blood or lymphatic systems, as the New York Times about.com site put it. That same site also pointed out that “ductal carcinoma is the most common form of breast cancer”. What we found amazing in the Gotti controversy was that DCIS was finally being reported by mainstream media like “Good Morning America” and a host of print publications as NOT being cancer. That's amazing because, as the New York Times about.com site pointed out, ductal carcinoma is the most common form of breast cancer!

What's even more interesting is what Dr. Lee said in his book previously mentioned.

Dr. Lee said “even experts debate whether DCIS is really a cancer... in situ means... ‘in place’, indicating no penetration of the deeper layers of cells. But invasive or infiltrating carcinoma, by its very definition invades the deeper tissue, while DCIS is contained within the duct. If DCIS becomes even the tiniest bit invasive, then it's automatically no longer considered DCIS.” Dr. Lee continued, “A few years ago there was an editorial in the medical journal *The Lancet* discussing this misuse of words in DCIS. Titled ‘Have Our Pathologists Gone Amok?’ it basically made the above

points in a witty fashion... but the politics of calling this marginally malignant tissue a cancer are also of interest, and the women who receive mastectomies, radiation, and chemotherapy

for a ‘cancer’ that is ‘99 percent curable’ (as many DCIS experts like to say) may not find it amusing.

“The calcium deposits and scattering of abnormal cells found in most DCIS are probably the result of some underlying metabolic dysfunction—the debris of a battle and not a real cancer. If they occur in one breast, they're likely to show up in both breasts. This is another sign that the problem is a systemic metabolic dysfunction and not a random local incident.

“The politics of DCIS are created when it's included as a breast cancer diagnosis, and thus made part of breast cancer statistics. DCIS diagnoses have accounted for 17 to 40 percent of breast cancer diagnoses (depending on the year) over the past two decades, but since only a small fraction of them ever go on to become actual cancer, it makes the ‘cure’ rate statistics look much better. If DCIS weren't included as a breast cancer diagnosis, the cure rate for breast cancer would look significantly worse and the billion-dollar breast cancer establishment, with its surgery, radiation, and chemotherapy treatments, would look incompetent. Thus do politics and money dictate medical diagnosis.” Dr. Lee also pointed out that another aspect of DCIS politics is the recurrence statistics, “which are used to justify treatments such as mastectomy, radiation, and chemotherapy. It makes sense that if DCIS is the result of an underlying

“...the politics of breast cancer... DCIS accounts for 17 to 40% of all breast cancer (depending on the year)... so without it their cure rate would look” far worse...

metabolic imbalance, and the imbalance isn't corrected, it will come back. Statistics clearly show that when DCIS is treated with a lumpectomy and radiation, the recurrence rate is lower than if it is treated only with lumpectomy. However, recurrence isn't a real issue with most cases of DCIS—which is essentially a benign condition—and therefore to risk permanently damaging the body with radiation may be a grievous over-treatment. A recent meta-analysis of studies of radiation for breast cancer clearly demonstrated increased risks of dying from the radiation compared to the breast cancer itself—in good part due to the negative effects of radiation on the blood vessels and heart.”

As to how many cases of DCIS develop into invasive breast cancer, Dr. Lee said the statistics are mixed, but “for all except the severe, inflammatory types of DCIS, they show either a normal risk of breast cancer (the same as if a woman didn't have DCIS), or, in some cases, even a reduced risk. One study published in the *Journal of the American Medical Association* in 1996 took all women diagnosed with DCIS between 1983 and 1991, regardless of treatment (or no treatment), and found that their survival rates were ranged from 100 to 104 percent. This meant that these women were less likely than the general population to die of breast cancer *or* other causes.”

Dr. Lee went on to say that since DCIS calcifications tend to be scattered around in breast tissue, and therefore were difficult to remove surgically, in the 1980s women were often prescribed a mastectomy “for treatment of this non-cancer”. Dr. Lee said it has become much less common to do mastectomies for DCIS, however, “it's still done with women who have a lot of calcifications”.

Dr. Lee said that how a woman chooses to treat DCIS “should be based on a thorough analysis of its severity, which can be done by biopsy. DCIS that is low grade, small celled, and without necrosis (dead and dying tissue) is less likely to become invasive, especially if you correct the underlying imbalance that caused the problem in the first place.

On the other hand, the more aggressive types of DCIS, which are high nuclear grade, large celled, and with comedo-type necrosis, have more potential to become invasive, and you should have them removed. The types of analyses can only be done in partnership with a trusted physician or oncologist, and preferably with a second opinion.”

Dr. Lee said he believed “the underlying metabolic disorder that leads to the cell changes and calcifications that create DCIS is likely to be estrogen dominance and progesterone deficiency, and that when balance is restored by progesterone supplementation, the cells will return to normal. The calcifications are often permanent, but they aren't the disease, merely the result of past imbalance.

“If DCIS lesions are found to be low grade, we recommend using progesterone cream, following an overall hormone-balancing lifestyle as outlined in *What Your Doctor May Not Tell You About Premenopause*, and following the breast condition with mammograms (or some of the newer types of diagnostic tests such as ultrasound) every six months or so for the next few years. If there's no change, then it makes sense to continue with progesterone. If, for some reason, there is a change indicating more lesions, then it may be time to consider surgery. Optimally, women need to participate in their treatment decisions and become as fully informed as they can about the nature of their disease. Again, it's important to consult with a physician whose judgment you trust.”

Editor: So was Victoria Gotti lying? We'd guess not. We'd guess she WAS told she had cancer... DCIS. Since, up until this controversy broke we never heard any mainstream medical or media group refer to DCIS as anything *but* cancer. Why isn't the mainstream medical cancer industry coming to Gotti's defense? We certainly don't know. Maybe there's a deliberate decision to stay out of it, or maybe the media simply isn't asking the medical people for an explanation. Or maybe, since there has

The JAMA article reported the study found women who'd had DCIS were LESS likely to die of breast cancer than those who'd never had DCIS...

been much said about DCIS not being cancer, only precancerous cells, the medical people don't want to get into those details. We don't know. But we're more convinced than ever that people need to better inform themselves, *before* they have to make any decisions regarding cancer.

That's why we urge everyone — women and men — to read Dr. Lee's books ... *What Your Doctor May Not Tell You About Menopause; What Your Doctor May Not Tell You About Premenopause*, and *What Your Doctor May Not Tell You About Breast Cancer*. We sell them and so do most bookstores. We also urge everyone to familiarize themselves with cancer options by reading Tanya Harter Pierce's book, “Outsmart Your Cancer” (from us or online at outsmaryourcancer.com) regarding alternative treatments that, according to the author's research, work. Why? Because people who have dealt with cancer have told us mainstream doctors often want to start treatment *immediately*, and if they haven't read up on their options before, they may not be given much time to do so after diagnoses.

Progesterone creams are Items HP-J, and HP-1P. ♦

➡ **Update: 2ND EDITION:**
Tanya Harter Pierce recently released her **Second Edition** of “**Outsmart Your Cancer**” and we are surprised to admit it “out-does” the first! We didn't see how she could improve it. It's \$26.95 from us, or online at outsmaryourcancer.com.

Pierce was a retired clinical psychologist when she began researching alternative cancer treatments due to a family member being diagnosed with cancer. As she says, she is not a doctor, but her background in reading and reviewing scientific and academic research certainly helped. The end result is a very detailed and helpful summary of some of the most well-established natural treatments for cancer with the best “track records” she could find. Certainly a treasure for those dealing with cancer, and also for everyone else to be aware of options **before** they really need them. ♦