

Your Health

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Plants, Clean Air, Better Health

Tackling Indoor Air Pollution in the Winter Months by Dr. Emina Jasarevic

With autumn well underway, people are closing their windows and turning up the heat. The downside is this: the air inside your home, without proper ventilation, can actually be anywhere from three to, in some cases 10 times more toxic than the air we breathe outside. The US Environmental Protection Agency (EPA) currently ranks indoor air pollution as one of the top five threats to public health. The good news is that you can easily do something about it!

Sometimes science needs to catch up with Mother Nature just to prove a point that gardeners have known for ages—plants not only relieve stress and look pretty, but they clean the environment. Bring plants inside for the cold weather season and they will work to clean the air in your home too.

Interesting research from India in 2008 found three basic common green plants that effectively clean the indoor air and increase oxygen in a person's bloodstream. The results published showed a 42 per cent probability of one's blood oxygen levels going up one per cent if the individual stays in a building with green plants for 10 hours. One per cent may not seem significant—but the results demonstrated a reduced incidence of: Eye irritation by 52 per cent, respiratory symptoms by 34 per cent, lung impairment by 12 per cent, headaches by 24 per cent, and asthma by nine per cent.

If you suffer from any of these symptoms, you would benefit from growing a green thumb. Bringing plants into your home will consume carbon diox-

ide and other volatile chemicals and convert it into oxygen, thus improving your environment and overall health.

It's as simple as adding one plant to each room per person living in your home. The following plants were the subjects of the New Delhi Study:

The Living Room Plant, known as "Areca Palm," (*Chrysalidocarpus lutescens*), will consume CO₂ and convert it into O₂.

The Bedroom Plant, known as "Mother-In-Law's Tongue," (*Sansevieria trifasciata*), will consume CO₂ and convert it into O₂ at night.

The Specialist Plant, known as "MoneyPlant" (*Epipremnum aureum*), removes formaldehydes and other volatile chemicals from the air.

The most common indoor air pollutants in an average home tend to be:

Tobacco Smoke: high in cancer-causing chemicals and heavy metals;

Carpet chemicals found in "dust bunnies" consist of 39 toxic chemicals;

Dry Cleaning: tetrachloroethylene in high concentrations persist for 48 hours.

Other sources may include: Thymol in fabric softeners; styrene in plastic, foam rubber, insulation; xylene in paint, tobacco smoke; benzene in dry cleaning, tobacco smoke; isopropylbenzene, styrene in soaps, fragrance, perfumes.

Another study on this subject investigated symptoms of mice exposed to air fresheners for just one hour. The results showed: Increased sensory irritation; increased pulmonary irritation; decreased airflow velocity; and

increased behavioural abnormalities.

In fact, a note on the warning label for Glade Air Fresheners states "Use only as directed. Intentional misuse by deliberately concentrating and inhaling the contents can be harmful or fatal."

In my practice, I recommend Seven Simple Steps to Reduce Air Pollution in Your Home. First, reduce or eliminate carpeting in the home. Second, do not wear shoes indoors. Third, absolutely no smoking indoors. Fourth, no artificial air fresheners, scented dryer sheets or strong cleaning supplies. Fifth, air out any dry cleaning in your garage for at least 48 hours before bringing items into your home. Sixth, change furnace filters every one to three months with high quality pleated filters (purchase those with a MERV rating of seven or more. MERV is a 16 point scale that rates the efficiency of a filter to remove mcgs of e.g., dust, dander, viruses, bacteria, etc.). Finally, add air-purifying plants to every room in your home. Any tropical plant will do!

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H1N1 Hype & Hiccups

Public health officials and journalists have overstated the importance of the swine flu, a former Ontario chief medical officer of health says.

Dr. Richard Schabas, chief medical officer of health for Hastings and Prince Edward Counties in eastern Ontario, said the H1N1 influenza outbreak needs to be put into proper perspective.

About 200,000 people die in Canada every year from all causes combined, including about 4,000 from seasonal flu.

“By the time all the dust has settled on H1N1, somewhere between 200 and 300 people will have died in this country,” Schabas said during a panel on media coverage of H1N1 on CBC News The National.

Schabas criticized the media for not trying to put the story into perspective, and for being “a little too easy to spin sometimes” by public health officials.

“I’m not letting the media off the hook totally, but I think the real villains of the piece here have been those public health officials who have consistently overplayed and overstated the importance of what is happening,” he said.

“By the time all is said and done, this is not a major public health event, but you’d never know that from what some people are saying.”

“A healthy child in Canada is about 20 times more likely to be killed by a car than by the H1N1 virus”, Schabas said, “but that isn’t going to make the national news.

“Children actually die of flu every year and a few more die of H1N1. This was

not unexpected, and the way it was presented as if this was a sudden bolt out of the blue, some change in our perspective of H1N1 that’s what created the anxiety. It was the way it was presented.”

Source: CBC.ca

The Cost of Vaccinating Canadians for Swine Flu: \$1.5 billion and rising...

Globe & Mail, Nov 12/09

Flu shots could make patients more vulnerable to swine flu.

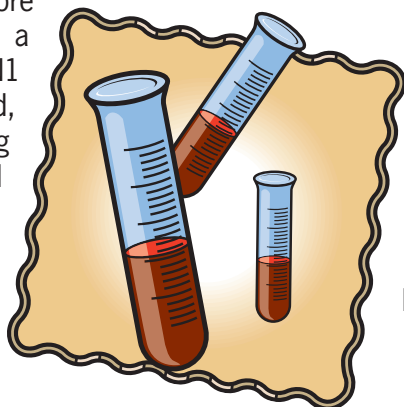
Recent research shows that people who received the standard seasonal flu shot during the 2007-08 flu season remained vulnerable to swine flu well into 2009—an interval that scientists and researchers claim should provide most immune systems ample restoration time.

This from what the Globe & Mail called a “perplexing” Canadian study linking H1N1 to seasonal flu shots is throwing national influenza plans into disarray and testing public faith in the government agencies responsible for protecting the nation’s health.

Distributed for peer review in September, the study confounded infectious-disease experts in suggesting that people vaccinated against seasonal flu are twice as likely to catch swine flu.

Met with intense early skepticism both in Canada and abroad, the paper has since convinced several provincial health agencies to announce hasty suspensions of seasonal flu vaccinations, long-held fixtures of public-health planning.

Source: Globe & Mail, Sept 27/09



Botanicals could best flu shots.

Asafoetida, a flowering Mediterranean plant, smells quite bad. In fact, its nickname is “devil’s dung.”

However, for centuries asafoetida has been used medicinally for a variety of complaints such as whooping cough and measles.

In fact, it was used effectively as a home remedy against the Spanish flu during the epidemic in 1918.

Taiwanese researchers found that asafoetida produces chemicals that are better at fighting influenza viruses than prescription medicines.

source: Maclean’s, Sept 28/09

Indoor Air Pollution, continued from page 1

A fantastic book specifically on this subject by Dr. B C Wolverton called *How to grow fresh air: 50 Household plants that purify your home or office*, provides colourful pictures and a rating scale on each plants capacity to remove chemical vapours from the air.

The National Aeronautics and Space Administration (NASA) began research over 20 years ago to investigate the capacity of plants for indoor air purification. Today, there are over 300 published scientific studies to support this finding.

Remember—You are what you breathe, drink, eat and think!

This article by Dr. Emina Jasarevic, who practices in West Vancouver. For more information, link to www.healthydoc.com/dremina

Primary Care Profiles

Five years spent earning a pharmacist degree coupled with four more years to obtain a naturopathic doctor degree has prepared a Prince George woman well to care for her hometown patients.

Jill Bergen, ND, has been practicing in downtown Prince George since April and her patient load is growing quickly—especially with women—since her main focus is on women's health.

Her practice may offer an alternate way of treatment, "but the focus is always on prevention," she said.

She said the majority of patients come to her after they've exhausted what the doctor has prescribed, and the problem is still there.

"Often they have subtle problems that prescriptions don't help much, such as hormonal balancing with a range of symptoms that come with middle age," said Bergen, who also finds a common patient complaint is of a digestive nature.

"I also see many stress-related issues from insomnia to headaches. People are stretched beyond their physical and mental capabilities due to the economic times we live in and being in a more materialistic society.

"I see many women who spread themselves too thin with work and family. I advise them to get someone to clean their house every two weeks, and become more organized so the work is shared, and the whole responsibility is not on the mother."

She said she uses traditional Chinese medical acupuncture treatment a lot in her work.

"I look at the tongue, check six different pulses on the arms, and ask 10 questions. That, along with their reasons for attending, helps in coming up with a Chinese medicine diagnosis.

At the Village Health Clinic in Surrey's Panorama Village Shopping Centre, naturopathic doctor Brian Gluvic believes the number of naturopathic physicians in the area has doubled since he started practising nine years ago. "There's been this explosion in research and therefore media attention on the correlation between certain lifestyle choices – eating more fruits and vegetables, increasing exercise, certain nutritional supplements and essential fats – and a reduction in risk of the big killers out there: stroke, heart disease, cancer," said Gluvic. "There's been a big shift in terms of what people are hearing and it is motivating them to make changes."

Instead of prevention, conventional medicine tends to be focused on heroic goals, said Gluvic, with research dollars centred on technology and pharmacological therapy. But there is a void where these have failed.

"What we see is many people with chronic illnesses. That is the majority of what comes into our door. They have already been to a specialist, or half a dozen specialists, and they are looking for other options."

For a smaller percentage of people, there is another rationale, according to Gluvic. "What we do is strive for individual health in the context of greater community, environmental and global health... For example, if someone has a chronic illness, part of their therapy is going to be dietary change, perhaps organic, local, seasonal, less processed, fewer additives. All that ends up in the environment... Reducing dependence on drugs and antibiotics, which end up getting cleared out from the kidney and liver, can have an impact on the individual level, in terms of susceptibility to new infections, but also one on the environment... The ultimate goal is to address these issues within our body so they balance with the whole local ecology the same way we would address issues in forestry or oceans and fisheries."

Vancouver Sun, September 26/09

I determine what acupuncture points will be used along with Chinese herbs," said Bergen, noting, "In China, all general practitioners use acupuncture."

"Studies show they do just as well with the traditional Chinese treatment as western medicine. The Chinese treatment is a gentle prodding of the body into a more balanced state."

Bergen also uses homeopathy remedies, which work with the body to help stimulate it to heal itself. She also uses botanical medicine, which is the use of herbs, and nutritional therapy, which has to do with diet.

She began as a pharmacist, but became very ill with a number of problems, including a tough recovery from surgery of a brain tumour.

"I found that naturopathic medicine did so much for me, guiding me through that recovery."

So she pursued a career as a naturopathic doctor which is quite rare.

Prince George Citizen, September 04/09

“It’s estimated that one dollar invested in early childhood development generates two for the economy.”
BC Healthy Living Alliance

Evidence shows vegetables and fruit have a protective effect against the development of chronic disease and that even a one-serving-per-day increase is linked to a 20 per cent reduction in all causes of mortality. In BC, as in other provinces, there are pronounced differences in healthy eating which are linked to the social and economic determinants of health.

Although the issue is complex, the social gradient is in play and can help to predict populations with the highest risk for unhealthy eating, obesity and food insecurity. Among those with a university degree, 53 per cent of women and 37 per cent of men follow a healthy diet (as indicated by fruit and vegetable consumption). Among those with secondary school or less, the rates fall to 38 per cent of women and 32 per cent of men.

A similar pattern emerges for obesity with rates increasing from 15 per cent of women and 18 per cent among men with university degrees to 30 per cent of British Columbians with less than secondary education. The World Health Organization notes that obesity is often most prevalent in the poorest socio-economic sectors. There is abundant evidence that energy-dense, nutrient-poor foods are chosen because they are cheap, produced safely, widely promoted and readily available.

It is difficult to think that there are families experiencing food shortages and hunger in British Columbia and yet according to Canadian Community Health Survey, in 2005 some 116,104 British Columbians were “food insecure without hunger.” Another 53,480 persons were food “insecure with moderate hunger” and 13,442

were “food insecure with severe hunger.” An over sampling of off-reserve Aboriginal people indicated that one in three off-reserve Aboriginal households were experiencing food insecurity and that just under half of these households included children.

Accessing healthy, affordable food can pose a significant challenge to those on low or fixed incomes. In 2007, it cost a family an average of \$715 a month to purchase a basic healthy food basket in BC—an increase of 9 per cent since 2006. At this amount, a family of four on income assistance would need to spend 42 per cent of their income to buy a healthy food basket. In 2006, 76,514 British Columbians sought assistance from charitable food banks—36 per cent of whom were children. The primary source of income for food bank recipients are income assistance (42 per cent), disability income supports (22 per cent) and employment (12 per cent).

In many low income neighbourhoods, the relative shortage of grocery stores makes access to a variety of healthy foods challenging and often groceries are more expensive in these areas when compared to stores in more affluent neighbourhoods. Studies in Edmonton and Toronto have shown a higher concentration of fast food outlets in low income neighbourhoods. Whether this is true in BC communities remains to be verified; however, there is evidence that where there are higher numbers of fast food outlets per population there are also increased rates of obesity, mortality and admissions for acute coronary syndromes.

Those with the most resources—

high incomes, education, good housing/neighbourhoods/jobs, high personal empowerment, etc.—consistently have the best health and live the longest lives. Those with the fewest resources—with low income, poor education, bad housing and unsafe neighbourhoods, little or no employment, poor early childhood experiences, etc.—have the worst health and the shortest lives. This constitutes a “health gap.”

Data excerpted from Healthy Futures for BC Families, a report by the BC Healthy Living Alliance, September 2009. For a full version, link to www.bchealthyliving.ca

What Canadians Eat	
Item & Maximum score possible on survey	Average Score
Vegetables/Fruit (10)	5.9
Dark green or orange vegetables (5)	1.4
Whole fruits (5)	2.4
Grain products (5)	3.6
Whole grain products (5)	1.6
Milk products (10)	5.5
Meat & Alternatives (10)	7.4
Unsaturated fats (10)	8.3
Saturated fats (10)	6.5
Sodium (10)	5.6
Energy from “other” foods (20)	10.7
<small>Source: Health Reports, Statistics Canada, Vol. 20 no. 3, September 2009</small>	

Chemical Sensitivities

A while ago I was delighted to learn about the airing of the movie “Beethoven’s Hair” on CBC. It is a beautiful documentary on the amazing journey of a lock of Beethoven’s hair that was collected as a souvenir after his death in 1827 by one of his devoted students. 167 years later it was sold at an auction in London to an American couple who collaborated with top forensic scientists to have it analyzed. Beethoven had pleaded with his brothers to find out what was wrong with him and after his death an extensive autopsy was performed without conclusive results. Now, over 200 years later, the analysis of his hair revealed 100 times the average quantity of lead. This had created symptoms in Beethoven, at least 12 years before his death, of digestive distress, abdominal cramping and diarrhea, yellowing of the skin, headaches, erratic behavior and permanent damage to the auditory nerve to cause deafness. In those times cookware, tableware, medicines, foods and wine all contained large quantities of lead.

Hair analysis has long been a method of testing by naturopathic doctors and in years past some MDs who have ordered hair analysis have risked losing their medical license! The level of toxic elements in the hair is a good way to measure an overall body burden. Measuring levels of toxic substances such as lead, arsenic, mercury, aluminum and cadmium is very helpful when evaluating the cause of chronic diseases including: neurological disorders such as Multiple Sclerosis, neuropathies, Parkinson’s Disease, reduced intelligence and lowered school achievement scores; behavior disorders including hyperactivity and autism in children; hypertension and cardiac risk.

Dr. Herbert Needleman, in 1979, documented low level lead exposure contributing to lower IQs in children. Twelve years later his work was attacked by the lead industry as it tried to protect its economic stake in lead products. Ultimately because of his work, unleaded gasoline and restrictions on lead paint have become law. Lead, however, remains the number one environmental threat to children’s health and many old houses and even school buildings are still testing positive for lead today. A four-month naturopathic preconception care program is recommended for all couples planning to have a family to reduce this toxic impact on their children and their healthy development. This includes switching to non-toxic products in the home as well as changing the way the family shops for food.

Early detection of toxic metal accumulation, limiting exposure and appropriate nutritional support of detoxification processes of the body are paramount for the prevention of chronic adverse health effects seen in children and adults today.

This article by Dr. Ingrid Pincott who practices in Campbell River; www.drpincoct.com

What is Chemical Sensitivity? It’s a chronic condition characterized by adverse effects from exposure to low levels of chemicals or other substances in modern human environments (or short exposures to high levels). Symptoms include difficulty breathing, chest pains, fatigue, headache, muscle and joint pain, among others.

Ten steps to keep in mind if you have Chemical Sensitivity Syndrome

Buy organic, biodegradable cleaning products without a fragrance; Keep your house clean. Dust and dander are food for mould; Keep the moisture down; mould likes to grow at 60 per cent humidity or higher; Buy green products for your home, such as carpets, paint and furniture; Put a sign on your door or office saying “This is a fragrance-free zone”; If you need to buy air fresheners, buy organic, essential oils; Keep your stress level to a minimum—meditate; Purchase a good air purifier for your home and office; Buy a vacuum with a HEPA filter and put a HEPA filter on your furnace; Buy only organic, no-fragrance body care products.

What is ElectroSensitivity? An unhealthy sensitivity (or sensitivities) to a particular source of electricity, for example: mobile phones, computers, power lines or even minor electrical equipment. Symptoms are wide ranging and can include skin problems, headaches, fatigue, fainting, heart problems, and much worse. Electrical Hypersensitivity is a name given to those who are severely affected.

Ten steps to keep in mind if you have ElectroSensitivity Syndrome

Create an electrical-free zone in your bedroom by removing all electronics; Unplug appliances not in use in your kitchen and living room; Get rid of the microwave. It destroys food and every microwave leaks; Do not use a cell phone and if you have to, buy a “Guardian”; Keep your stress level to a minimum—meditate; Reduce or eliminate your exposure to Wi-Fi, mobile phones and their masts; Do not keep a laptop on your lap; Eliminate fluorescent lights (even the compact ones) in your home and office; Stay as far back from your computer as possible and use a flat screen monitor; Do not use portable phones, especially a 2.4GHz or higher.

There are many contributing factors and each person may respond differently. Therefore, every situation is unique and requires individual attention.

This article by Kyla Mortil, a Building Biologist Environmental Consultant with Environmental Options.



In the US, kudzu has a nasty reputation as an invasive plant. But researchers may have found a more productive use for the vine, which covers around four million hectares. The root extracts from the plant, they say, show promise as a dietary supplement for a metabolic condition linked to obesity, high blood pressure and problems processing insulin in the human body, and may significantly decrease the risk of stroke and cardiovascular disease.

Source: Maclean's, October 08/09

A recent BC health study has linked acetaminophen with risk of asthma.

The research, involving 425,000 subjects, correlated acetaminophen intake with risk of asthma: Up to a 60 per cent increased risk of asthma amongst children, and 75 per cent higher risk with adults. These statistics were based on comparisons with individuals who did not use Tylenol (which is the brand name of acetaminophen).

One of the researchers noted that asthma has increased, globally, over the last 20 years. Coincidentally or not, this has dovetailed with a reduction in aspirin use—particularly amongst pediatricians—and an increase in alternatives, such as Tylenol.

Tylenol is not the only medicine with acetaminophen. It can also be found in Alka-Seltzer Plus, Anacin, Benadryl, Comtrex, Contac, Dimetapp, Dristan, Excedrin, Modol, NyQuil, Pamprin, Robitussin, Sudafed, TheraFlu, Vicks and various other over-the-counter medications.

Source: Vancouver Sun, November 10/09

Meditation can have a long-lasting, positive impact on brain function.

One of the world's top brain scientists, Richard Davidson, believes that mental exercise, and specifically meditation, can "induce long-lasting" changes on the brain with implications that go beyond the physical.

Science is now beginning to back up the concept that mental attributes (e.g., positive emotions) are skills that can be cultivated and healthy.

Davidson has used MRIs to show that even in short-term practice, meditation can induce significant changes in patterns of brain activity.

Potential implications include non-drug interventions or supplemental treatment for, e.g., depression, behavioural and stress-related ailments.

Source: Vancouver Sun, Sept 26/09

Home births, and the care from midwives, have long been derided by establishment doctors as risky and undesirable. It wasn't without much struggle, and discontent amongst MDs, that midwives in BC received licensure.

But a five-year study based on 3,000 BC births have shown that planned home births attended by midwives are just as safe, for babies and moms, as hospital births.

Research into this area will now continue, looking at the cost-effectiveness of home versus hospital births.

Source: Vancouver Sun, Sept 01/09

US researchers have successfully transferred gut bacteria from obese humans to germ-free mice, a breakthrough that will allow a more detailed study of the link between gut microflora and obesity.

Research from 2006 reported that microbial populations in the gut are different between obese and lean people, and that when the obese people lost weight their microflora reverted back to that observed in a lean person, suggesting that obesity has a microbial component.

The new study succeeds in showing that the human gut microbiota can successfully be transferred to germ-free mice, and that this can then be passed on from mother to offspring.

The study also shows that "the configuration of the microbiota, its microbiome, and meta transcriptome changes in a rapid, dramatic, and reproducible fashion after switching from a plant polysaccharide-rich, low-fat diet to a high-fat, high-sugar Western diet."

When the researchers transplanted microbes from human faeces into mice bred without any microorganisms in their guts (germ-free mice), and fed them a high-fat, high-sugar, Western-style diet, they recorded a rapid change in the population of gut bacteria present, compared to mice fed a low-fat diet. Furthermore, the mice also showed an increase in body fat.

For more information on the importance of pre- and probiotics and overall health, speak to your naturopathic doctor.

Source: www.sciencemag.org

Michael Jackson took a shocking 10,000 prescription meds in the last six months of his life. At the time of death, Jackson was popping over 50 pills a day. His prescription list included sedatives (diprivan, ramelteon, zalepolon, eszopicolone, zolpidem), painkillers (oxycontin, percocet, palladone), antidepressants (luvox and prozac), stimulants (dexedrine, aminorex, desoxyn, didrex) and various other pills for skin bleaching, blood pressure and bladder control.

Source: London Mirror, July 12/09

“Much of the current debate surrounding the future of health care in America assumes that health care as we commonly know it would address our nation’s health problems, if only we could maximize care and coverage while minimizing costs. But modern health care—physician led, individual focussed, and treatment oriented—is ill equipped to deliver what we’re ultimately after: preventing those problems in the first place. Health promotion and disease prevention are instead the province of public health, which is widely touted as being responsible for the lion’s share of the longevity gains we have experienced during the past century. Yet public health spending is a pittance. We must recognize that health-care reform also requires more than reorganizing how doctors do business.”

Source: New Yorker, June 29/09

“...a new theory by Dr. Karen M Starko, published in an October 12 article of The New York Times, states that overdoses of aspirin used to treat the 1918 flu epidemic could have caused an unknown number of deaths. The doctors—then, as now—thought they knew what they were doing. But of course our generation ‘knows better.’ This is the hubris of every living generation.

We need to become much more skeptical of ‘wonder drugs’ (as aspirin was considered in 1918). We need to become much more skeptical of our entire medical system. We need to reevaluate the necessity for all people to have vaccines. Obviously, for some people, they do more harm than good.”

Source: Vancouver Sun editorial, October 22/09.

The ancient physicians and philosophers, such as Hippocrates and Siddhartha, said exercise is good for you; they correlated a healthy heart with a healthy life. Unfortunately, for the modern-day establishment medicos, the ancients didn’t have research to back up their claims.

That started to change in the 1940s when an English epidemiologist, Jeremy Morris, began researching heart attack rates amongst double-decker bus driv-

ers and conductors. His hunch was that drivers, who sat for 90 per cent of their shift, had very little exercise compared to the conductors, who climbed about 600 stairs each working day. Morris’s data was published in 1953; it showed that conductors had fewer than half the heart attacks of their sedentary colleagues. Basically, Morris invented the field of physical activity epidemiology and gave birth to the aerobics movement.

Over his lifetime, Morris expanded on his research with postal workers, telephone operators, delivery drivers and civil service workers. His data consistently showed that those who engaged in regular aerobic exercise reduced their risk of heart attack by half.

Dr. Morris followed his exercise regime for his entire life, swimming, cycling and walking every day. In October this year Dr. Morris passed away; he was 99½ years old (he always liked to add the half).

Source: New York Times, November 08/09

A milestone in water fluoridation was reached this summer in Lambton, a region in Ontario serving six municipalities with drinking water.

As with most Canadian water supplies, Lambton began adding fluoride to its water 40 years ago to, ostensibly, ward off tooth decay. But opposition to fluoridation has persisted. Last year, Health Canada published a report stating that adding too much fluoride to water has adverse health effects and recommended a decrease in “allowed” levels.

In 1996, Health Canada recommended fluoridation levels at 1.5 mgs per liter. Revised guidelines this year recommend levels between .08 and 1 mg per liter.

Christopher Bryson’s thorough investigative report in water fluoridation, *The Fluoride Deception*, is an excellent resource for individuals wanting to know more about the politics of and health risks associated with water fluoridation.

Although about 22 communities in BC, serving roughly 11 per cent of the population, fluoridate public water, Metro Vancouver and Victoria do not add fluoride.

Source: Maclean’s June 29/09

Tons of active pharmaceutical ingredients dumped into the environment by medical-supply companies since 1988: 421,500

Projected percentage change by 2050 in the amount of mercury in the Pacific Ocean: +33

Estimated number of cars that it takes to produce as much CO₂ as a single large cargo ship: 10,000

Ratio of the average number of microbes living in or on a person’s body to the average number of human cells: 10:1

Percentage of human genes that have been patented so far: 34

Estimated chance that one of these genes is owned by a private company: 1 in 4

Chance that a red lipstick tested by a Washington advocacy group last fall contained dangerous levels of lead: 1 in 3

Source: Harpers Index

North American Epidemics Blame, Boycotts, Scapegoats

1892: Cholera

Transmission: Gastrointestinal; usually contracted from contaminated food or water.

Number of sick or dead: Two million deaths worldwide; in New York City there were 11 cases and nine deaths.

Scapegoats: Several thousand Russian Jewish immigrants were quarantined at Hoffman and Sinburne Islands, near Staten Island. Several hundred first-class cabin passengers were restricted to the Surf Hotel on Fire Island.

1900: Bubonic Plague

Transmission: Fleas carried by rats.

Number of sick or dead: By 1904 there had been 121 cases and 113 deaths; of the dead 107 were Chinese, 4 were Japanese and 2 were Caucasian.

Scapegoats: Chinese immigrants; many protested and some brought successful legal suits against mandatory vaccination laws.

1917: Typhus Fever

Transmission: Body lice carrying rickettsia bite humans; when they scratch themselves, tainted feces enter the bloodstream.

Number of sick or dead: Three cases.

Scapegoats: Thousands of Mexican day workers crossing the border were subjected to daily kerosene baths; in one case an explosion occurred, killing 28 men and severely burning 25 to 30 more.

1918: Spanish Influenza

Transmission: Respiratory; highly contagious and easily spread.

Number of sick or dead: Estimated at 650,000 deaths in the US, and 25 million to 100 million worldwide.

Scapegoats: Pandemic was too widespread for any one group to be blamed.

1947: Smallpox

Transmission: Respiratory or physical contact with infected person; highly contagious.

Number of sick or dead: Three cases.

Scapegoats: There was not enough vaccine produced for every American, causing panic among those turned away.

1952: Polio

Transmission: Gastrointestinal; victims ingest the virus, which infects the lymphatic glands and nerves until it reaches the spinal cord and possibly brain.

Number of sick or dead: Approximately 58,000 cases and 3,145 deaths, primarily children.

Scapegoats: None.

1976: Swine Flu

Transmission: Respiratory.

Number of sick or dead: One death and fewer than 200 confirmed cases.

Scapegoats: The government officials involved in the widespread vaccination program; the head of the Centers for Disease Control lost his job and President Gerald Ford was accused of using the crisis for political gain.

1982: HIV/AIDS

Transmission: Sexual activity, blood transfusions, needle sharing among drug abusers, blood exchange between mother and baby during pregnancy, breastfeeding.

Number of sick or dead: More than 32 million people have died worldwide; 33 million others are now infected.

Scapegoats: Gay men; intravenous drug abusers, Haitians.

2003: SARS

Transmission: Respiratory.

Number of sick or dead: 8,427 cases, 916 deaths worldwide; 74 probable cases in the United States (one health worker; all others had traveled to SARS-afflicted areas abroad).

Scapegoats: Asians and those who had traveled to affected parts of Asia. University of California at Berkeley briefly banned Asian students from visiting the campus.

Source: New York Times

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City, Therapy, Test, Ailment

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