

Your Health

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Concerns Grow re: Bill C-51

Are Proposed Revisions to Therapeutic Products Big Pharma's Gain & Patient's Loss?

Proposed federal legislation could change the way complementary and alternative medicine is practiced and available in Canada.

Bill C-51 has caused a stir amongst practitioners, scientists, business people and Canadians at large. In early May there were protest rallies in various Canadian cities, and many people are engaged in distributing petitions as well as sending correspondence to politicians.

Some of the concerns naturopathic doctors have are in respect to changes in terminology and revised definitions. The new bill, which will amend the 40-year old Food and Drugs Act, includes some amendments which are long overdue. However, there are many questions and concerns, particularly in regard to terminology and access.

For example, use of the term "therapeutic product" is unclear and inappropriately places natural health products in the same category as pharmaceutical products. It's true that potentially dangerous drugs, such as Vioxx, require regulations that can ensure patient safety. But the sort of strict, and stringent regulations used for pharmaceuticals are not necessarily applicable to non-drug health products.

Another change in the proposed regulation would alter the way a licensed ND—educated, trained, examined and licensed to use natural health products—could access such products. Limiting access would severely limit patient options, both in

terms of what an ND can provide a patient and where a patient can obtain complementary medicine.

Historically, and in keeping with contemporary practice, NDs compound, sell and dispense natural health products to patients. Bill C-51 has the potential to radically alter that.

But Bill C-51 could have an impact on much more than the practice of naturopathic medicine: It could change the way natural health products are manufactured, sold, and limit over-the-counter availability. The bill includes search, seizure and forfeiture provisions which provide broad powers to inspectors to enter business establishments without a warrant or judge's approval.

On May 10 the Vancouver Sun interviewed a former-MP and biochemist, Lyle MacWilliam, who expressed a number of concerns regarding the bill. "I think there is a lot of good stuff in this legislation that pertains to the pharmaceutical industry," he said. "It's only when you look at it through the lens of a natural health product, which is inherently much safer than a drug product, that you say, 'Holy cow, it's like using a hammer to squash a fly'."

"I think we are seeing the long arm of the pharmaceutical lobby," MacWilliam added. "They are trying to make it as difficult as they can for natural health products to be sold in Canada. Why? Because natural health products are market competitors."

MacWilliam said the proposed legislation, now at second reading, will undo 10 years of hard work started when he was a member of a standing committee on health. The committee recommended creating a separate regulatory category for natural health products that would have more stringent controls than those for food, but be less stringent than what is in place for pharmaceuticals.

The naturopathic profession has always supported the separate regulatory category; it's unfortunate the government has never pursued that option.

In the meantime, we urge you to phone, fax, e-mail or write to your MP and/or the federal Minister of Health, Tony Clement at House of Commons, Parliament Buildings, Ottawa, Ontario, K1A 0A6 (Letters to an MP do not require a stamp.) If you don't know who your MP is, link to: <http://www.parl.gc.ca/> and choose "Senators and Members" in the search string at top.

We have provided a sample letter on page 5, and at our website, www.bcna.ca, as a template and/or starting point for your correspondence.

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Patients Speak Out on Naturopathic Medical Care

The following letter was sent to the BC Minister of Health, George Abbott, in February. A copy was received at the BCNA office.

I am writing to relate a happy health care story ... with a wee dark edge. Very recently, I was looking for help for my troubled teenage daughter. In a nutshell, she began eating less and exercising more, while at the same time she became increasingly quiet and subdued, withdrawing from peers and school activities. Within four months we noticed significant weight loss and then I clued into the fact that she had not had a period in quite a while.

Of course, our first place to look for help was our terrific family doctor. My daughter did not want me to accompany her into the office so she went in on her own. Ten minutes later she came out reassured that nothing serious was amiss and was told to have a wide range of blood tests if she went another two months without a period.

I knew there was more going on. A friend referred me to Victoria naturopath Dr. Natasha Montroy. Neither I nor any members of my family had seen a naturopath in the past so I really didn't know what to expect but at this point I was desperate. Before the appointment my daughter had to fill in a detailed five-page questionnaire asking her everything from how our home is heated to a description of the "emotional climate" of our home. The form included a section for any health concern – mental, physical or emotional- she felt had been left out.

I can't say enough about how positive and beneficial our first visit to Dr. Montroy was. Right from the start, Dr. Montroy knew what to zero in on and how to ask questions that bypassed the heavy defenses of an adolescent and brought out the painful but honest answers. She spent an hour and a half with us, gently probing my daughter's fears and anxieties and welcoming my input at the same time. She covered a wide range of emotional and physical concerns in a straight forward and down to earth manner. Finally, she gave my daughter hope, letting her know that she is amenable to working with a range of health care practitioners and that there are a range of healing options available from counselling to lifestyle changes to natural therapeutic agents to pharmaceuticals.

Having identified and articulated the problem, we are on our way to better days. I already note a brightening of my daughter's mood.

My point in writing is to urge you to recognize naturopaths as primary care physicians and include them in primary care reform. We are lucky to have an extended health plan which pays for our visits to Dr. Montroy. But most people don't and MSP does not cover visits to naturopaths. Yet, as I discovered, naturopaths fill a critical gap in primary care.

They perform physical exams, Pap smears, diagnostic laboratory tests and imaging tests similar to family physicians. Most important, they treat patients holistically, giving them a range of therapeutic choices and allowing them the time needed to fully

explore a health concern. No family doctor I know can afford to give a patient an hour and a half visit.

I urge you to give naturopathic medicine the support and recognition it needs to become part of the health care solution. By doing so you will give more British Columbians access to the excellent health care we are so fortunate to receive.

A. Priest, Victoria
by Canada Post

I have to tell someone that a naturopathic doctor (Dr. S. Craig Wagstaff) saved my life when the GPs and medical "specialists" were killing me with medicines that were making me sicker. I will be forever grateful to him. He is presently treating me successfully for bipolar disorder because the meds the psychologist and my GP had me on were killing my liver and they had to take me off it. I recommend naturopathic medicine every chance I get—and in particular Dr. Wagstaff. He is so in-tune and intelligent and knowledgeable and gently natured. I wish there were many more of them.

T.D., Kelowna
by e-mail

Letters to the provincial minister of health can be sent to:

Honourable George Abbott, Minister of Health
Room 337, Parliament Buildings,
Victoria, BC, V8V 1X4.

Mail your BCNA correspondence to:
BC Naturopathic Association, 2238
Pine St, Vancouver, BC, V6J 5G4 or
e-mail bcna@bcna.ca

Osteoporosis, a disorder resulting in inadequate skeletal strength, is one of the most common human conditions associated with advancing age. Both nutritional and hormonal insufficiencies are involved. Extensive research shows that diet modification and supplements can be as effective or more effective than pharmaceutical options. Below are a number of non-drug alternatives to prevent the breakdown and potential fracture of bones.

Avocado: This vegetable source of vitamin D may be as useful with osteoporosis as it is with baldness and skin ailments. One kg of avocado oil can contain as much as 20,000 IU vitamin A, 40,000 IU vitamin D and 300 IU vitamin E. Most NDs recommend 350-400 IU of vitamin D a day; that is obtainable with as little as 10 grams of avocado.

Black Pepper: this might be one of the most pharmaceutically active spices in your kitchen. Black pepper contains at least eight anaesthetic compounds including four anti-aggregant, eight anti-inflammatory, four antioxidant, six anti-ulcer, 14 bactericidal, 21 cancer-preventative, 10 fungicidal, six hypotensive, 23 insect-repellent, 31 pesticidal, seven sedative and eight spasmolytic compounds.

Bugleweed (aka gypsywort): Fluorine is often suggested for osteoporosis. Bugleweed is a dietary source high in fluorine. Other foodstuffs with fluorine content include parsley, nettle, dill, bitter melon, pitted almonds, rhubarb, coconut and currants.

Horsetail: The isolated silica compounds from horsetail for bone fractures, osteoporosis

and for the repair and/or maintenance of connective tissue, nails and teeth are well documented and commonly recommended by NDs. The recommended intake is five to 10 mg elemental silicon per day.

Jute: Folic acid levels have been shown to reduce levels of homocysteine, which is implicated in osteoporosis. It can be difficult to get high doses of folic acid in everyday foods, but edible jute rates at 32 ppm (higher than spinach, 27 ppm, endive at 25, asparagus at 18 and parsley at 18).

Kale: An excellent source of vitamin K. Many geriatric studies show that vitamin K intake is inadequate among seniors. Supplementation amongst deficient persons can improve osteoblastic cell function. Research also shows that people not consuming enough leafy veggies can build up unfavourably high phosphorous levels proportional to calcium; this can correlate with high parathyroid which may correlate with high bone resorption and hence bone turnover. Excellent sources of vitamin K, aside from kale, include parsley, spinach, green cabbage, watercress, broccoli and brussels sprouts.

Kudzu: Some animal studies show that daidzein and genistein, both

better represented in kudzu root than in soybean, directly stop bone demineralization. Kudzu has been reported to have 950 mg daidzein and 315 mg genistein versus 45 and 15 respectively for one strain of soybean.

Pigweed (purslane): A green leafy plant commonly eaten in Europe but not in North America, pigweed leaves are one of the best dietary sources of calcium. On a dry weight basis they contain 5.3 per cent, or 50,000 mg per kg. Thus, a mere 10 grams would provide the 500 mg supplementation which in studies has shown to yield significantly greater bone content and density in less than 18 months.

Vitamin and mineral supplementation, in addition to various herbs and phytochemicals, can also offer protection and relief from osteoporosis; speak to your naturopathic physician first.

Information in this article modified from Dr. James Duke's Nature's Herbs publication. Dr. Duke, author of *The Green Pharmacy*, *Herb-A-Day*, and many other titles, was a keynote speaker at this year's Northwest Convention. For an audio CD or MP3 of his lectures, contact Tree Farm Tapes: www.treefarmtapes.com

About 75 million people in Canada, the US and Japan suffer from osteoporosis. Osteoporosis affects approximately 1.4 million Canadians, mainly postmenopausal women and the elderly. The prevalence of osteoporosis in Canada is about 16% in women age 50 years or older and approximately 6.5% in men. In Canada, almost 30,000 hip fractures occur each year. 70-90% of these hip fractures are caused by osteoporosis. One Canadian suffers an osteoporosis-related hip fracture every 18 minutes. By the year 2030, the number of hip fractures is expected to quadruple. Osteoporosis affects one in four Canadian women and more than one in eight men over the age of 50 years, with one in four men and women having evidence of a vertebral fracture.

Source: International Osteoporosis Foundation

Reconsidering the Routine Check-up

For most people, a routine medical check-up can be an anxiety-ridden experience. Anticipating being told that something is “wrong” can conjure up stressful feelings. When a check-up comes back normal, we rejoice and, for the most part, continue life as usual.

And why not? My daily health decisions appear to be working, and everything seems OK, we tell ourselves. But is everything OK, and are you really healthy?

When it comes to health, it's important to consider that the absence of disease does not necessarily constitute health. Quite often, I will see patients come to my office and say, “My doctor says I passed my physical. I'm healthy, but I just do not feel right.” Or, “I seem to do all the right things, but I feel really tired.” Or, “There is no explanation for my pain.” Or, “I have been taking these pills, yet my symptoms continue to worsen.” These are just a few examples that indicate declining health in the presence of a normal routine check-up.

An important principle that I tell my patients is that health, or being “healthy,” is a process, not an event. Therefore, the annual routine health check-up, while certainly important for ruling out disease, is not a mechanism for attaining or claiming good health.

A second important principle to understand is that attaining good health requires an individual or customized approach tailored to our body's unique characteristics, strengths and weaknesses. What works for one person may not work for another.

So, how would I work through these general and often vague symptoms to determine health and help to restore it?

I would begin with a comprehensive health history that includes several questionnaires designed to spot undesirable stresses. These might include nutritional deficiencies, digestive imbalance, and toxicity issues. Next I would do a complete physical exam tailored to the presenting symptoms. I would then order a comprehensive blood test that measures 40+ health parameters (such as a complete blood cell count, liver and kidney function, risk factors for heart disease, etc) and assess them for abnormal values and for any nutritional implication they might offer. If at this point the patient's findings remain normal, I would begin a detailed functional analysis of the patient as it relates to the symptoms.

Let's take an example. A patient describes symptoms of waking up at night several times with difficulty getting back to sleep (insomnia), fatigue and symptoms of mild depression like an inability to cope at work and withdrawing from social interactions.

An important principle that I tell my patients is that health is a process, not an event. Therefore, the annual routine health check-up, while important... is not a mechanism for attaining or claiming good health.

Symptoms like these can be very confusing and create a chicken and egg phenomenon. Is the depression created by a chemical imbalance in the brain or is it because the person is not capable of properly resting and

is now so run down that they feel depressed? Another possibility is that fatigue may be causing all of the symptoms (insomnia and depression).

Answers to some of these questions may be discerned by the health history but I would definitely want to better understand those organ functions that are so critical to energy in this case. For instance, the adrenal glands are our stress glands, and if they get weakened to the point that they cannot compensate for stress very well, we can get fatigued, or depressed, or have difficulty sleeping due to the high cortisol levels in the blood at night time. This vicious cycle of low energy leading to poor sleep and depression repeats itself. I would order either a 24-hour urine test to ascertain cortisol levels or do an adrenal stress index test that involves the patient collecting saliva four times at specific times throughout the day and night. Dysfunctional adrenal gland function may be determined by this test.

As we know, every human being is unique and the cause(s) of one person's depression or fatigue may be totally different from another. Let's look at the above example further. In addition to looking at organ stresses as we did above, I may have determined that this person consumes very few green leafy vegetables and whole grains and typically enjoys processed breads and meats. Given that green leafy veggies are rich in folic acid and that whole grains are rich in B vitamins, I may be concerned that this individual is not getting adequate B6, B12 and folic acid — all of which are important for healthy serotonin levels in the brain. Serotonin induces sleep and makes us feel good.

To make serotonin, the brain uses the amino acid tryptophan plus vitamins B6, B12 and folic acid. I would either order a blood test for these levels or treat the patient with a more healthy diet plan and prescribe the

Phone, fax, e-mail or write your MP regarding Bill C-51. If you choose to write, consider some of the points below. Letters to an MP do not require a stamp. Mail your letter to House of Commons, Parliament Buildings, Ottawa, Ontario, K1A 0A6.

Dear [MP's NAME],

I am writing to you as one of your constituents to express my concerns about Bill C-51 and the impact it will have on the ability of my naturopathic doctor (ND) to treat my health concerns safely and effectively.

As an informed patient I have chosen treatment from an ND as it focuses on disease prevention and emphasizes overall health, not simply symptom management. I would like some assurances that my choice to see a naturopathic doctor will not be negatively affected by Bill C-51.

I have the following questions:

- Will Bill C-51 exclude my ND from having access to all the products he/she needs to treat all my health concerns?
- Will Bill C-51 result in fewer natural health products being available in the Canadian marketplace?
- Will inspectors have the ability to enter premises under the search and seizure provisions without a warrant or a judge's approval?

I support the need for regulation that ensures that the products recommended by my ND are safe and effective but I do not support legislation that treats natural health products in the same manner as pharmaceutical products. Now would be an excellent time for the government to implement a third category for Natural Health Products as was recommended by the Standing Committee on Health in 1998.

I appreciate your attention to this important matter and would welcome the opportunity to speak to you about my concerns. I can be contacted at (insert phone number).

Sincerely,

Continued from page 4

supplements B6, B12, and folic acid. In addition, if the adrenal stress test comes back abnormal, I would select a treatment to strengthen the adrenal glands, which may include some combination of a homeopathic remedy, a supplement such as vitamin C or pantothenic acid (vitamin B5), or a botanical such as ginseng. Often the best remedy takes into account the entire health status of the patient and that remedy may then help more than one symptom.

In this example, I have treated insomnia, mild depression, and fatigue holistically, ruled out any obvious causes for the symptoms, and assessed diet, nutritional deficiencies, and organ stresses. I treated the patient with natural therapies respecting that more conventional drug therapy may be necessary in the future. Could there be other causes of these symptoms? Absolutely. You may need to look at protein deficiency such as the amino acid tryptophan, or environmental toxicity burdens in which mercury or lead burdens on the body can significantly affect our mood and energy, or even more general burdens like under-active digestion, food intolerances and psycho-emotional issues. All of these stress our body in a manner that can create these symptoms.

Wellness and optimum health are the goal. To achieve this you need a plan and a commitment that enables your road to wellness. Actively participate in your health and be relieved of a "good check-up," but don't be complacent. You don't have to wait to be unhealthy to utilize the strategies outlined in this article. By engaging in this approach before you feel sick, you'll have a jump start on reaching a goal of optimal health. Remember, health is a process, so enjoy the journey.

This article by Dr. Lorne Swetlikoff, of Nelson BC. This article originally appeared at www.cbc.ca; it is reprinted here with permission of the author.

Vitamin D ♦ Probiotics ♦ Acupuncture

Acupuncture increases the chance of success for couples hoping to have a baby through in-vitro fertilization (IVF). The research, reported in the British Medical Journal, showed that the odds of pregnancy increased by 65 per cent amongst women receiving acupuncture (versus a control group receiving sham treatment or no treatment). Acupuncture has been used in China for centuries as a spur to reproduction. Among the theories put forward as to its efficacy with IVF is that acupuncture stimulates the flow of blood to the uterus, making the lining of the womb more receptive to the implantation of the embryo.

Vancouver Sun, February 8, 2008

Breastfed Kids Have Higher IQs: That was the headline in a recent edition of the Vancouver Sun. The story detailed the largest study of its kind, research which followed 14,000 Russian children, documenting on IQ tests comparative results of those who were exclusively breastfed against those who weren't. As one investigator put it, "prolonged and exclusive breastfeeding makes kids smarter."

Vancouver Sun, May 6, 2008

Cholesterol-lowering drugs, or statins, such as Lipitor, can hurt the brain. Cognitive side effects such as memory loss and fuzzy thinking aren't listed by the manufacturer as a side-effect, but in fact are common. A University of California, San Diego study showed that cognitive effects are the second most common problem with statins, after muscle aches. As one Chair of Medicine at a New York hospital put it, "This drug [Lipitor] makes women stupid."

Although cardiologists tend to favour statins, maintaining that the benefits outweigh the risks, there are many alternatives. One is turmeric, the bright yellow spice used commonly in Indian cooking—or, more accurately, curcumin, which is a key ingredient in turmeric. The Journal of Clinical Investigation recently published a study involving lab mice which showed that curcumin dramatically reduces the chances of developing heart failure. In the mice

study, curcumin reversed the animals with enlarged hearts by attacking the cells and turning off those genes involved in the enlargement, while activating repair genes.

Another "heart smart" supplement is vitamin D. Scientists at a university in New York recently reported that people with low levels of vitamin D in their blood experience an increased risk for a condition known as peripheral artery disease or PAD. In this study, people with the lowest 25 per cent of vitamin D levels were 80 per cent more likely to have PAD than those in the highest 25 per cent.

Globe and Mail, February 22, 2008; Vancouver Sun, April 17, 2008

The strain of long-distance running can take its toll on an athlete's health. Strenuous training can erode an individual's immunity and make them more susceptible to catching colds, leaving them at a health disadvantage. Researchers in the British Journal of Sports Medicine recently reported that "good" bacteria can alter that

disadvantage. In tests amongst healthy runners who ran 100 kilometres per week, those taking probiotics averaged 30 days of respiratory symptoms during the study, compared with 72 days for those on placebo. Probiotics, which provide good bacteria in the gut and can stimulate the immune system, can

improve the health of athletes, infants, active persons and individuals in high stress jobs.

Vancouver Sun, February 20, 2008

MRSA, a virulent staph infection, can be deadly. Ironically, the infection itself is relatively common, and most people show no symptoms. The bacteria can be living in the nose and not cause problems. However, if an infected person catches the flu, for example, and that becomes pneumonia, the lungs are weakened and people can infect themselves by inhaling the MRSA they already carry. It's

very common in a hospital setting where patients may have open wounds. London's Daily

Watching a plasma television for three hours every day contributes two hundred and fifty kilograms of carbon to the atmosphere each year; an LCD television is responsible for less than half that number. The carbon footprint of Christmas—including food, travel, lighting, and gifts—is about six hundred and fifty kilograms per person. That is as much as the weight of one thousand Christmas puddings for every resident of England.

New Yorker, February 25, 2008

First call: Your Licensed BC ND
1 800 277 1128
Specialists in disease prevention & clinical nutrition

Mail reported that in 2007 there were over 5400 MRSA deaths in a hospital setting.

Although MRSA is a drug-resistant infection, new research in Arizona has shown that ordinary clay can kill the superbug.

Healing clays have been used for centuries, commonly to soak up toxins produced by bacteria. Scientists are now focussing on whether some forms of clay can kill salmonella, E. coli, MRSA and other superbugs. To date, research in Arizona has found three highly effective clays that killed a broad spectrum of human pathogens.

Vancouver Sun, April 27, 2008

An apple a day does more than keep the doctor away: It's a tool for health and longevity. In fact, people who eat the equivalent of one large apple a day are at lower risk of metabolic syndrome, a cluster of risk factors that increases the number of strokes and Type 2 diabetes among Canadians.

A national US survey showed that adults who eat apples (or apple sauce) daily are 27 per cent less likely to have metabolic syndrome than "non-consumers."

Vancouver Sun, April 9, 2008

2008 Flu Vaccine a Failure: A report this spring from the US Centers for Disease Control and Prevention estimated that this year's flu vaccine was 44 per cent effective. The flu vaccine is formulated based on scientists "guessing" which strains, from which locations in the globe, will be prevalent. Even a correct guess is only about 70 per cent effective.

New York Times, April 20, 2008

Sleep affects a child's overall health. Too little sleep can double a young child's risk of being overweight and raises the chances of later anxiety and depression. Several studies, published in the Archives of Pediatrics, arrived at the same conclusion, adding weight to the already well-documented fact that too little sleep in adults can lead to obesity.

The researchers documented that very young children require over 12 hours per day, noting that there are negative health consequences in later life if a child is sleep deprived in the first two years of its life.

Vancouver Sun, April 8, 2008

The Ortho Evra birth control patch delivers much more estrogen than standard birth control pills. As such, it increases the risk of blood clots and strokes. The maker, Johnson & Johnson, a "family" company, knew the facts, but obscured that evidence for many years. Even the label inaccurately stated the amount of estrogen it released. Now, women who are suing the company due to injury, are finding that Johnson & Johnson is protected by law from being sued. Why? Because the US Food and Drug Administration approved the patch.

The legal term for this protection is pre-emption. In laymen's terms it's a legal shield. It simply means that since the official regulatory body sanctioned the product, that regardless of how dangerous it might have been, and whether the label was misleading or not, and whether the manufacturer withheld pertinent information or not, the parent company is exempt from responsibility.

Over 3,000 women and their families are suing Johnson & Johnson. But it's likely pre-emption will keep them from pursuing their case. Buyer beware!

The flip side is simply that the FDA has been assessed in many third-party studies as poorly organized, scientifically deficient and short of money. Its commissioner even acknowledged that the agency faces a crisis and may not be "adequate to regulate the food and drugs of the 21st century."

The inability for the governmental regulatory body to effectively regulate, coupled with big-pharma's ability to hide facts about its products, creates an untenable situation for many patients.

Witness, for example, lawsuits over the safety of Zyprexa, the withdrawn pain pill Vioxx, the withdrawn diabetes medicine Rezulin, the withdrawn heatburn medicine Propulsid and numerous anti-depressants. In each case, the companies downplayed risks associated with their product and failed to disclose clinical trials to the public—even as they aggressively marketed their drugs.

Could the same thing happen in Canada? Absolutely. Many, many drugs withdrawn in Canada were because of risks to the patients. Usually this has been prompted by unexpected adverse effects that were not detected during clinical trials or Health Canada's oversight.

Witness the following recalls: Zelnorm, Exanta, Tysabri, Cylert, Palladone, Aderall, Serzone, Raplon, Baycol, Lipobay and Rezulin. And that's only since 2000!

New York Times, April 6, 2008

Plastic Peril in Common Use

Baby Bottles Assessed as Toxic

Bisphenol A, or BPA, can upset the body's hormonal balance and exposure can increase rates of breast cancer, prostate cancer, Type 2 diabetes, early onset of puberty in girls, obesity and behavioural problems. No wonder BPA has dominated health headlines for several months now.

In February, a Canadian study which examined baby bottles sold in Canada and the US showed the plastic leaches significant levels of BPA. BPA is essentially a synthetic estrogen. The researchers tested different bottles from different brands, filled containers with water, left them to sit 24 hours, then tested for BPA levels at both room temperature and after heating them. The study showed very little leaching at room temperature, but significant leaching at high temperatures. Considering that, in the case of baby bottles, they are commonly heated in microwaves and washed in hot water, usually dishwashers, the concern regarding leaching is considerable.

It's not only infants who are exposed to the chemical though. BPA is widely used in polycarbonate plastics—typically baby bottles, water bottles and plastic containers for food and beverages.

In the US, the National Institutes of Health released a statement in April on BPA stating: "There is some

concern for neural and behavioural effects in fetuses, infants, and children at current human exposures. [There is] also some concern for BPA exposure in these populations based on effects in the prostate gland, mammary gland and an earlier age for puberty in females."

In Vancouver, Mountain Equipment Co-op and Lululemon pulled polycarbonate bottles from their shelves in January. In the spring, major retailers did the same. Hudson's Bay recalled all plastic baby bottles, cups and toys in April. Canadian Tire followed suit. Wal-Mart plans to phase out

BPA baby bottles over the coming year. Also in April, Nalgene, one of the largest manufacturers of reusable plastic water bottles, announced it will phase out BPA plastics, focussing on alternatives.

Even though a "dangerous" or "toxic" designation from Health Canada doesn't require the government to ban or force a recall of product, many retailers took the recall action regardless.

There are alternatives to BPA plastic. These include glass bottles, metal containers and polypropylene bottles, liners, nipples and drinking cups. See centre insert.

Vancouver Sun, February 8 & April 16, 2008

Using glass or ceramic food containers is your best alternative to plastics—which can leach chemicals. But if you use plastic, some are reportedly safer than others. The recycling number on the bottom of the container holds the answer.

BPA Alternatives:

1 (known as PETE): Used in soft drink, juice, water, detergent, cleaner and peanut butter containers. Recommended for one-time use only.

2 (HDPE): Used in opaque plastic milk and water jugs. Recommended for one-time use only.

4 (LDPE): Used in grocery store bags, plastic wraps and some bottles.

5 (PP): Used in deli soup, syrup and yogurt containers, straws and other clouded plastic containers, including baby bottles.

Plastics to Avoid:

3 (PVC or V): Used in cling wrap, some plastic squeeze bottles, cooking oil and peanut butter jars.

6 (PS): Used in Styrofoam food trays, egg cartons, disposable cups and bowls, carryout containers and opaque plastic cutlery.

7 (other): Used in most plastic baby bottles, some water bottles, metal food can liners, clear plastic sippy cups and some clear plastic cutlery.

Source: Institute for Agriculture and Trade Policy

Link to our Redesigned
& Updated Website

www.bcna.ca

PHYSICIAN REFERRALS * NATUROPATHIC MEDICAL INFORMATION * EDUCATION LINKS