

Your Health

VOLUME 16 / NUMBER 2 / SPRING 2010

Standards Skewed for Safe, Effective Therapies Irregularities Burden Natural Health Product (NHP) Regulations

The following letter was sent to the Prime Minister of Canada, Canadian Minister of Health and several Health Canada bureaucrats, in the spring of this year.

As a BC licensed naturopathic physician for 27 years, I watched with interest several years ago the hue and cry over Bill C-51 and refused to lend my support, as my own research indicated that it had nothing to do with the repression of NHPs that was being claimed by industry stakeholders. I honoured the necessity for a better quality of regulation than existed at the time, one which would acknowledge the effectiveness of natural products with intent to preserve access and therapeutic standards. However, more recently I've become deeply alarmed by the road-blocks being placed in the way of NHP imports and I'm now wondering if I was being naive, at least regarding how stated policies regarding NHPs are actually being applied within our federal health bureaucracy.

As a secondary career, I work with an American company whose brilliant and innovative natural products have been extremely difficult to get into Canada. Even a year after their release in the US, they languish for month after month in Canada's bureaucratic paperwork pile-up, and only now are being dealt with piecemeal, with seemingly arbitrary concerns.

For example, one product was recently stopped at the border due to the presence of water soluble cranberry seed oil. I've had outstanding

clinical results with this product and my wife calls it her mother's milk. I've never seen the slightest indication of negative health concerns, yet for now it cannot be obtained in Canada because of water soluble cranberry seed oil.

In two other cases, we see strong suggestion of the same curious and arbitrary attitude. One product with significant cardiovascular benefits has not been allowed into Canada due to what has been deemed an excessive amount of vitamin B. Reading the label, I find that there is 50 mgs. of vitamin B6 in the product. When and where has it been definitively determined that 50 milligrams is excessive? What standard is being applied? Last time I looked, there were scores of products in Canada with this kind of dosage of B6. In a third case, a powdered greens product used safely in Canada for four years was banned until the probiotic it contained was removed from the formula.

Why are these products subject to restrictions on contents and dosage that defy any scientifically justified standard? There has not been one single consumer complaint. No one has been hurt, injured, dangerously altered, or compromised in any way. Why are natural products being treated as if guilty until proven innocent, when the exact opposite should be the case? It is well known that thousands die yearly from pharmaceuticals, yet deaths from tainted or misused natural products are virtually nil.

So the question needs to be asked,

"When does regulation of natural health products cross the line from a quest for safety, efficacy and reliability to obstruction if not repression?" Clearly, safety as an explanation has no credibility in any of the cases I've cited. Despite the assurance that the *Codex Alimentarius* does not apply in Canada, are *Codex* standards regarding nutritional supplements being used nonetheless?

As someone who has attended hearings and listened to regulators discuss the changes and explain their benign intent, I'd love to have a better understanding of exactly how it happens that the face being presented to the public is so much different than the reality that includes absurd and expensive barriers to the importation of safe, effective natural products.

Sincerely,
Neil Tessler, ND, DHANP

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Quick Simple Healthy Recipes

It's no wonder health advocates as well as local food or "locavore" oriented chefs are crazy about kale. It grows all year long in coastal BC and is packed with nutritional goodness. Kale is one of those cruciferous vegetables that contain both indole-3-carbinol (a well-studied substance containing cancer preventative properties) and sulforaphane, an important chemical that helps boost the body's detoxification enzymes to help clear carcinogenic substances and specifically helps stop breast cancer cell proliferation. So get your greens with these delicious recipes!

Arame Kale Avocado Salad with Sesame Vinaigrette

- 1 cup arame* (dried seaweed), loose-packed
- 1 bunch of kale (I like dinosaur or lacinato, but any variety works)
- 1 avocado
- Dressing (recipe below)

(* Arame can be found at specialty food shops, Asian grocers and at chains such as Choices Markets and Capers/Whole Foods)

Prepping veggies:

1. Soak arame in tepid water for about 20 minutes.
2. Drain arame and, as an option, add some salad dressing to cover/marinate it if you are prepping ahead/while you cut avocados.
3. Wash kale and cut into big pieces (I recommend thirds).
4. Steam kale, until just tender, about 3-5 minutes; let cool in a big salad bowl.
5. Make salad dressing as per recipe below (can be done well in advance) in blender—or chop garlic, chives

and herbs separately and mix by hand.

6. Cut avocados into slices.
7. Toss the dressing/arame and kale all together in that big bowl until well-coated, then sprinkle sesame seeds to distribute over top.
8. Add avocado gently at the end to incorporate without breaking up the pieces too much.

Serve with more sesame seeds sprinkled on top!

Sesame Vinaigrette
Mix together the following ingredients in a small bowl with a whisk, or combine in a blender and puree. Will keep seven days in the refrigerator in an airtight container.

- $\frac{2}{3}$ cup olive oil
- $\frac{1}{4}$ cup rice vinegar
- 1 Tbsp soy sauce
- 1 Tbsp grainy mustard
- 2 cloves garlic
- $\frac{1}{4}$ cup cilantro (optional)
- $\frac{1}{4}$ cup chives or green onions (optional)
- salt/black pepper
- $\frac{1}{2}$ cup toasted sesame seeds (use half of these in dressing itself, and save the other quarter cup for tossing on top)

Another wonderful suggestion for kale as a side or snack are kale chips with dukkah.

Crispy Kale Chips

- 1 bunch kale
 - 2 Tbsp olive oil
1. Preheat an oven to 350°F.
 2. With one hand, hold onto the thick stem at the bottom of the kale and use the other hand to remove the leaves from the central stem by "stripping" them off as you pull your hand along.
 3. Wash and thoroughly dry kale with a salad spinner or clean tea towels.
 4. Tear or cut kale into bite size pieces.

5. Drizzle kale with olive oil and sprinkle with salt/pepper.
6. Bake until the edges brown but are not burnt, 10-15 minutes.
7. Sprinkle with Dukka mix or simply some salt and pepper. Eat within a day—if you keep overnight in the fridge it totally loses it's crisp (but still tastes good on salads, with rice etc.).

Dukka Spice Mix

Toast each whole spice separately in a dry fry pan (I like cast iron). Grind together in a coffee grinder or blender or with a mortar and pestle with salt. Add hemp seeds at the end.

- $\frac{1}{4}$ cup sesame seeds
 - 2 Tbsps coriander seeds
 - 1 Tbsp cumin seeds
 - 1 Tsp black peppercorns
 - 1 Tsp salt
 - $\frac{1}{4}$ cup hemp seeds (save for the end)
- Also good options are $\frac{1}{2}$ tsp fennel and 1 tsp thyme (these spices are great digestive aids). Sprinkle this mix on roasted kale, steamed greens, or salads for a crunchy flavourful protein rich topping. You could also use these as a spice rub for fish or tofu.

Dukkah is a delicious Egyptian sesame seed and spice mixture. Traditionally, it is eaten by dipping fresh baladi bread first into olive oil and then into the spice mixture. Its crunchy texture works well as a topping for salads. It adds a dimension of flavor to steamed vegetables, especially greens. Hints of cumin and coriander in the mix lend a nice flavour to pan fried fish (great on halibut!), tofu, or hearty stews—such as lamb. It could also be used as a mix with yogurt for a zesty dip, incorporated into bread or scone dough for a savoury flavour, or with a bit of butter or tahini to add texture and flavour to a sandwich.

These recipes by BCNA member Dr. Heidi Lescanec. Want to learn more? Heidi will be teaching the Passionate Cook series at Hollyhock this spring and fall. Link to www.hollyhock.ca and search "Heidi Lescanec" at top, or link to www.heidilescanec.com

Q: My naturopathic doctor offers a variety of diagnostic tests. Unfortunately, my blood-work has to be sent out of province. Why can't my ND provide me with a requisition form, like MDs do, and send me down to the local lab?

A: Although diagnostic facilities in BC are privately owned and publicly funded, each lab employs a pathologist. And each pathologist holds his or her licence with the College of Physicians and Surgeons or CPSBC. The College may determine which health practitioners can access labs. We have reprinted the CPSBC viewpoint at right.

The BCNA and the College of Naturopathic Physicians of BC have been working closely with government to allow NDs to provide requisition forms for diagnostic tests. We are pleased that the BC Government has agreed to provide that ability and is working towards implementing it.

We expect that this issue will be resolved in the coming months and that patients of naturopathic doctors will be able to use in-province labs. We believe this will help streamline the delivery of high quality primary health care to patients.

The College [of Physicians and Surgeons of BC] continues to receive inquiries from registrants about who can order diagnostic tests (laboratory or diagnostic imaging).

It is the position of the College that it is not appropriate for pathologists and radiologists to accept requisitions from practitioners such as naturopaths [*sic.*] and chiropractors as their philosophical foundation of disease causation and treatment differs significantly and is not compatible with the scientific basis of orthodox, evidence-based medicine. Ordering a test is, in effect, a request for consultation with the pathologist or radiologist. Once a physician accepts a referral, he or she becomes involved in the management of the patient without the assurance that there is justification for the test or that any abnormality found and documented in the report (consultation) will be acted on appropriately.

A parallel issue to consider in such requests is payment. In accordance with section 45 of the Medical and Health Care Services Regulation, the following professionals can order such tests for payment under the Medical Services Plan: medical practitioners, nurse practitioners, dentists, midwives and podiatrists.

Reprinted from the College of Physicians and Surgeons of BC *College Quarterly*, March 2010, Issue 67



In a similar situation in the 1990s, the CPSBC tried to stop licensed naturopathic doctors from providing Pap smears for their patients through the BC Cancer Agency. The College claimed that NDs had insufficient medical training to provide primary care. This was, unfortunately, a gross misconception. And that misconception was emphasized by the fact that in an objective review of Pap smears conducted by NDs and MDs, the BC Cancer Agency found that follow-up amongst NDs with patients was equal to or superior than follow-up amongst MDs with patients. Nevertheless, this was still unsatisfactory for the CPSBC, who wrote to the BC Cancer Agency that "...while the members of the [Executive] Committee accept the fact that there is no evidence of inappropriate follow-up of abnormal Pap smears by naturopaths [*sic.*], the members feel that this only addresses part of the situation. The directive ignores the fact that a Pap smear is only part of a comprehensive pelvic examination and also ignores the fact that naturopaths [*sic.*] have no demonstrable training or proficiency in other important aspects of a pelvic examination." Fortunately, based on the competency of NDs and an exemplary record of follow-up, the BC Cancer Agency did not change their policy. Further, they reiterated the right of a woman to choose her health care provider and to ensure the timely delivery of Pap smears and mammograms was made available to the widest possible group of patients.

HEADLINES

Vitamin D & Pregnancy



Leukemia Prevention

Fruit and vegetables can prevent the onset of leukemia.

A naturally occurring flavonoid, apigenin, in common veggies such as celery and parsley, and fruits such as cherries, can prevent leukemia.

A Dutch university study showed that apigenin halted the development of two kinds of cells in leukemia and cut their survival rate.

The flavonoid, which is also found in tomato sauce and red wine, has been shown in other studies to be beneficial in protecting against ovarian cancer.

Source: Vancouver Sun, January 29, 2010

New Research on Vitamin D

Immunity Integrally Linked to Vitamin D + Pregnancy & Vitamin D

Vitamin D is vital in activating human defences, and low levels in around half the world's population may mean their immune systems' killer T-cells are poor at fighting infection.

Recent findings by Danish researchers could help the fight against infectious diseases and global epidemics.

The researchers found that immune systems' killer cells, known as T-cells, rely on vitamin D to become active, and they remain dormant and unaware of the possibility of threat from an infection or pathogen if vitamin D is lacking in the blood.

"When a T-cell is exposed to a foreign pathogen, it extends a signalling device or 'antenna' known as a vitamin D receptor, with which it searches for vitamin D," said Carsten Geisler of Copenhagen University's department of international health, immunology and microbiology, who led the study.

"This means the T-cell must have vitamin D or activation of the cell will cease. If the T-cells cannot find enough vitamin D in the blood, they won't even begin to mobilize."

Scientists have long known vitamin D is important for calcium absorption, and that there is a link between levels of the vitamin and diseases such as cancer and multiple sclerosis.

"What we didn't realize is how crucial vitamin D is for actually activating the immune system—which we know now," Geisler wrote in the study in the journal *Nature Immunology*.

Most vitamin D is made by the body as a natural by-product of the skin's exposure to sunlight. It can also be found in fish liver oil, eggs and fatty fish such as salmon, herring and mackerel, or taken as a supplement.

In more good vitamin D news, Canada's first study on "D" and pregnancy concluded that 4,000 IUs daily was important for every pregnant woman.

The study showed that such high doses resulted in absolutely no adverse events, but reduced the risk of premature delivery substantially. Premature birth is the leading cause of newborn deaths in Canada.

Source: Vancouver Sun, March 8, 2010; Vancouver Sun May 1, 2010

Liver Disease

Turmeric is a longstanding botanical used to treat a variety of inflammatory ailments. The active ingredient, curcumin, is a naturally occurring yellow pigment with many healing properties. Unfortunately, despite its common use amongst complementary doctors, turmeric has not been widely studied.

Recently, a team of European and American scientists confirmed findings supporting the use of turmeric for liver disease.

Their study showed that curcumin could delay damage that eventually leads to liver cirrhosis. Curcumin significantly reduced liver scarring, damage to liver cells and reduced bile duct blockage—as compared with non-curcumin counterparts.

Source: Vancouver Sun, March 24, 2010

Cataracts

A Canadian study reports that some drugs, specifically anti-depressants, can increase the risk of cataracts.



Researchers in Quebec, analyzing a database of over 200,000 patients, have confirmed a link between some SSRI drugs (e.g., Effexor, Celexa, Paxil) and cataracts.

The number one risk for cataracts is still aging. In addition, smoking is another common risk factor. Even so, those individuals taking anti-depressant and anti-anxiety medication should consult an optometrist or ophthalmologist for the presence of cataracts.

Vancouver Sun, March 10, 2010

Healing is a matter of time, but it is sometimes also a matter of opportunity.

Hippocrates

Food & Mood

Are hamburgers and heroin akin when it comes to altering brain patterns? A recent study published in the journal *Nature Neuroscience*, that suggests a connection, may have profound implications for the millions of Canadians struggling with diet and weight issues.

The study showed that many items commonly served as fast-food, such as bacon and cheesecake, can alter the brain in ways similar to heroin and cocaine. In fact, high-fat foods can rewire the brain and drive the development of compulsive eating.

In rat studies, no amount of deterrence, even electric shocks, could keep animals “hooked” on high fat foods from indulging. In fact, for those rats addicted to processed high-fat foods such as cake, sausage, and frosting, their body weight increased 25 per cent in only 40 days.

More relevant, though, is that the fattened rats showed addiction-like changes similar to those found in humans addicted to drugs. The researchers noted that the lower D2 receptor levels (a brain receptor that responds to dopamine, the chemical associated with feelings of reward), led the animals to develop habitual feeding behaviour that made them less able to shift their dietary preferences.

Stranger still is that when the scientists removed the high-fat foods, replacing the options with healthy, low-fat alternatives, the rats voluntarily starved themselves.

The study supports the position that dietary choices, for many people, are part will-power but also related to brain chemistry.

As one researcher put it: “It’s incumbent upon people to make sure that they’re more respectful and aware of what they’re eating. Just be aware that there are dangers and risks associated. Enjoy (high-fat) food but make sure it’s occasional and very well controlled. Don’t overindulge repeatedly, because there could be repercussions.”

Source: Vancouver Sun, March 29, 2010

Eating Fresh

Nutrition fast facts: Americans eat 31 per cent more packaged food than fresh food and they consume more packaged food per person than their counterparts in nearly all other countries. A sizeable portion of the American diet is ready-to-eat meals, such as frozen pizzas and microwave dinners, or sweet and salty snack foods.

Processed foods contain large amounts of fat, salt and sugar. Epidemiologic studies have shown that diets with higher levels of fat, salt and sugar lead to higher rates of heart disease, diabetes and obesity.

Conversely, China, Brazil, Japan, Russia and Spain eat the most fresh food.

Source: New York Times, April 4, 2010

Wellness. There’s a word you don’t hear every day.

Dan Rather in 1979 on 60 Minutes introducing a segment on a “new” health movement called “wellness”

Focus: Sodium

It’s common knowledge that fast-food tends to be high in salt. But the same is true of many regular, off-the-shelf foodstuffs. Consider the following diet of ready-to-eat foods:

Breakfast: Two frozen waffles, 410 mg sodium with one-quarter cup commercial “lite” syrup, 180 mg sodium.

Lunch: Whole wheat pita, 290 mg sodium, with salad, two-tablespoons Kraft fat-free Italian dressing, 480 mg and one-half cup low-fat cottage cheese, 420 mg sodium.

Snack: Two Nature Valley Oats ‘n Honey bars, 160 mg sodium.

Dinner: Half a cup of frozen, roasted chicken, 460 mg sodium, with vegetables and one slice whole wheat bread, 170 mg.

All told: 2,730 mgs of sodium in one day, nearly twice the recommended daily allowance (RDA). Although the RDA for sodium is 1,500 mgs a day, Health Canada recommends that adults do not consume any more than 2,300 mgs per day.

Source: New York Times, April 25, 2010

NDs in the News

For 12 years Vance Schneider had a persistent cough—and not one that was simply an inconvenience.

At times, the coughing was so bad he dislocated ribs from hacking so hard.

He sought conventional medical treatment for his chronic condition and, at one point, was referred to an allergist.

The allergist said Schneider was suffering from asthma.

“I knew that could not be right because I had been tested for asthma several times over the years,” said Schneider, a 44-year-old human resources manager for a local company that, ironically, provides in-home health services.

It was through his company that he learned about naturopathic medicine.

Following a session his company put on about naturopathic medicine, he decided to see a practitioner.

Schneider admits he was skeptical at first. But after six months, Schneider’s chronic cough was gone.

The cause, it turned out, was not asthma but a severe allergy to milk products, something not tested for until then.

“Seeing a naturopath literally changed my life,” says Schneider. “I cannot recommend naturopathic medicine enough.”

While he still has a family doctor and believes conventional medicine has a valid and important place in health care, Schneider also feels naturopathic medicine has a place too.

And he says, despite what some may think about naturopathic medicine, it is not just treating an ailment with “lotions and potions.”

After all, he adds, it found a solution to his problem, one conventional doctors and a battery of specialists over the years were unable to discover.

For many, the attraction of naturopathic medicine is that it’s not just the treatment of symptoms.

This “alternate” form of medical treatment was in the spotlight during national Naturopathic Medicine Week (NMW), an annual health awareness event the first week of May.

Excerpted from a profile of BCNA members Dr. Brent Barlow and Dr. Brett Phillips by Alistair Waters, April 30, in the Kelowna Capital News. For more info, link to www.drbarlownd.com or www.drbrettphillips.com

This year marks the 12th year that Naturopathic Medicine Week (NMW) has been proclaimed in Canada!

NMW is an annual awareness initiative to educate the public on the benefits of naturopathic treatment.

Naturopathic physicians (NDs) are primary health care providers with 7-8 years post secondary education who practice safe, effective, science-based natural health care. NDs diagnose, treat and prevent disease using natural therapies including botanical medicine, clinical nutrition, hydrotherapy, homeopathy, naturopathic manipulation, traditional Chinese medicine/acupuncture and lifestyle counselling.

Across Canada there are more than 1,500 registered NDs, in B.C. there are nearly 350 practicing NDs. This is a far cry from the 40 of us that were practicing in B.C. in 1985 with myself being one of three women at that time. Now half of all BC NDs are women!

Legislation for naturopathic physicians exists in five provinces: BC, Saskatchewan, Manitoba, Nova Scotia and Ontario. Lobbying for regulation is underway in all remaining provinces and the NWT, with Alberta legislation pending passage later this year.

Canadians use complementary medicine to prevent future illness from occurring or to maintain health and vitality widely, spending \$5.6 billion in 2005-6, up from \$2.8 billion in 1997; 49 per cent of the responders to a national poll had visited an ND an average of 5.6 visits in the year 2006.

Naturopathic Medicine Week is to help educate the public about the extensive expertise of naturopathic physicians in their role of promoting health and preventing disease for the citizens of Canada, using safe and effective therapies.



This article by BCNA member Dr. Ingrid Pincott appeared in a longer form, May 3, in the North Island Midweek newspaper. For more information call 250-286-3655 or visit www.DrPincott.com

Q&A on Homeopathy

All licensed naturopathic doctors are trained and examined in homeopathy. Some use it almost exclusively; most NDs use homeopathy as part of a combination of therapies and healing modalities to support a patient's health.

But what exactly is homeopathy? It's an exceptionally safe form of medicine that's effective in treating a wide variety of acute and chronic problems, including allergies, gynecological conditions, digestive problems, skin diseases, even psychological problems.

It's a system that respects the wisdom of the body, using medicines that stimulate the body's defence systems to initiate healing, rather than simply suppressing symptoms. Homeopathy is based on a set of principles formulated in the late eighteenth century.

"The concept of treating the whole person rather than the disease is perhaps the most important element of homeopathy," writes Miranda Castro, a UK homeopath and former faculty member at Bastyr University. "The basis of this belief is that symptoms, diseases, or pains do not exist in isolation, but are a reflection of how the person as a whole is coping with stress. It is the whole person that counts—not just the physical body but also the mental and emotional 'bodies.'"

A good illustration of the difference between homeopathic and orthodox medicine is how they deal with fever.

"Conventional" medicine advises a patient to take aspirin to reduce fever. But research shows that fevers are actually an effort of the body to try to heal itself. Fevers almost always accompany an infection, either viral or bacterial, and when you have a fever, white blood cell activity, which fights infection, is increased, as is the production of interferon, an antiviral substance. So suppressing a fever may offer temporary relief, but it ignores the deeper problem and interferes with the body's ability to cope with it. Alternatively, homeopathic treatment of fever stimulates the body's own defences to complete the healing process.

Homeopaths, instead of prescribing drugs that counter the symptoms of an illness, believe that symptoms are a healthy reaction to harmful forces—that the body is constantly striving to keep itself healthy. They call this energy, which tries to keep the body in balance, the vital force. Symptoms such as pain or a cough serve an important purpose: to restore the balance. Pain is a warning; a cough expels mucus; etc.

Rather than suppress these symptoms, practitioners who

employ homeopathy believe in supporting them. This is why homeopathy is especially effective in dealing with chronic conditions.

You might look at it this way: If a warning light in your car comes on, you wouldn't just disconnect the light, would you? You'd find out what was wrong.

So what are homeopathic remedies? Where do they come from?

There are over 2,000 homeopathic remedies available, all from natural substances: vegetable, animal, or mineral. They come in various forms—pills, granules, and liquids or tinctures—and different strengths.

Each remedy is prepared by a controlled process of successive dilutions alternating with succussion (shaking), called potentization. The process of dilution can be continued to different strengths, from 3, 6, 9, 12 up to 100,000. If a remedy is labeled 30c, for example, it means that it's been diluted 1:99 and shaken; then this procedure was repeated 30 times. If there is an x instead of a c following the number, it means that the ratio of dilution is 1:9.

These smaller and smaller doses are called potencies: lesser dilutions (under 200c) are called low potencies and greater dilutions (200c and above) are high potencies. This is probably the most difficult concept to grasp in homeopathy: that the smaller the dose, the higher the potency (i.e., 200c is higher than 30c).

The power of this infinitesimal dose is not clearly understood, but there are examples in the way the human body works. For instance, your body manufactures only fifty to a hundred millionths of a gram of thyroid hormone each day, but a small excess or deficiency in this tiny amount can seriously affect your health.



How does homeopathy work to effect healing? This is an area of debate. Critics of homeopathy often point out that any remedy over 24c potency will have no chemical trace of the original substance. Nevertheless, many studies have supported the effectiveness of such dosages. The explanation appears to be in the domain of quantum physics, according to Trevor Cook, who founded the British Institute of Homeopathy. A study using nuclear magnetic resonance imaging showed distinct readings of subatomic activity in 23 different homeopathic remedies, activity that wasn't present in placebos. It's something along these lines: vibrating and diluting a substance hundreds of times leaves an imprint—a frequency or pattern of an illness, thereby stimulating the body's natural healing response. It's similar to the way the body will remember a measles vaccine fifty years after the shot, long after the substance is gone.

Cancer: Reconsidering Cause and Contaminants Prevention Through Environmental Protection

Cancer isn't just from smoking (and second-hand smoke). Environmental factors play a major role in influencing health.

The US government released a 240-page report in May stating that cancer caused by environmental exposures has been "grossly underestimated." The report goes on to warn of "grievous harm" from chemicals and other hazards and cites "a growing body of evidence linking environmental exposures to cancer."

The report notes that children are especially vulnerable. Recommendations were made to limit exposure to pesticides, industrial chemicals, medical X-rays, vehicle exhaust, plastic food containers and over-exposure to sun.

Despite 80,000 chemicals in common use in the US, only a few hundred have been tested for safety. The report condemns the government's "reactionary" rather than "precautionary" approach—that is, waiting for proof of harm rather than taking preventive steps to avoid harm.

A cover letter with the report, addressed to President Obama, urges him "most strongly to use the power of your office to remove the carcinogens and other toxins from our food, water and air that needlessly increase health care costs, cripple our nation's productivity, and devastate American lives."

The American Cancer Society was quick to criticize the report. It claims the report over-emphasizes environmental factors, that there is no proof to put a high risk on chemicals and toxins, and that it diverts attention away from proven causes of cancer such as smoking.

The report authors made several recommendations in respect to decreasing an individual's cancer risks. They included:

Protecting children by choosing foods,

house and garden products, toys, medicines and medical tests that will minimize exposure to toxic substances;

Filtering tap water and storing water in stainless steel or glass containers, and otherwise limiting exposure to BPA and plastic components;

Buying produce grown without pesticides or chemical fertilizers;

Eating meat free of antibiotics and added hormones.

The report, "Reducing Environmental Cancer Risk: What We Can Do Now" is available online at: <http://deainfo.nci.nih.gov/advisory/pcp/pcp.htm>

Source: New York Times, May 7, 2010

A provocative CBC Marketplace report on cancer, in 2006, riled a lot of feathers by suggesting smoking is not the only cause of cancer.

"I've always been a health nut and I got cancer," said Wendy Mesley, in an interview after the report aired. "I knew there had to be something else."

Mesley discovered a lack of preventative efforts and a growing slew of carcinogens in our everyday lives.

In one dramatic scene, Mesley grills a top administrator at the Canadian Cancer Society on why they aren't lobbying to have carcinogens removed from everyday products, products that most people aren't aware contain carcinogens.

"We went after the Canadian Cancer Society because it's a story about setting priorities," Mesley said. "The woman said to me, 'We could probably get rid of two carcinogens, but what about the other 2000?'"

"It's just a cynical attitude. My generation may not be able to do anything for ourselves, but what about the next, or the one after that?" she said.

Since Chasing the Cancer Answer aired in 2006, Marketplace has received thousands of e-mails from people across the country thanking them.

At the same time, there were those opposed to the "alternative" view.

In an open letter to Mesley, the Physicians for a Smoke-Free Canada wrote, "...rather than being informed, Canadians were left misinformed by only a partial telling of the story."

Your Health is published quarterly by the British Columbia Naturopathic Association, the professional association for naturopathic physicians in

the province. It is compiled and edited by Glenn Cassie. The information provided herein is for educational and reference purposes only; it is not intended as a substitute for consultation and diagnosis nor treatment from a qualified doctor. Views expressed do not necessarily reflect the views of the Board of Directors, staff or members.

VOL 16 / NO 2 / SPRING 2010

BC Doctors Searchable by Name,
City, Therapy, Test, Ailment

www.bcna.ca

The BCNA offers patients, across the province, referrals to licensed naturopathic doctors (NDs) in their area as well as general information on the profession.

Your Health is archived online at www.bcna.ca.

Contact the BCNA online at www.bcna.ca, call us at 604 736 6646 (or toll free in Canada at 1 800 277 1128), e-mail us at bcna@bcna.ca, or write to us at BCNA, 2238 Pine St., Vancouver, BC, V6J 5G4.

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