

OUTLOOK FOR DEVELOPING COUNTRIES

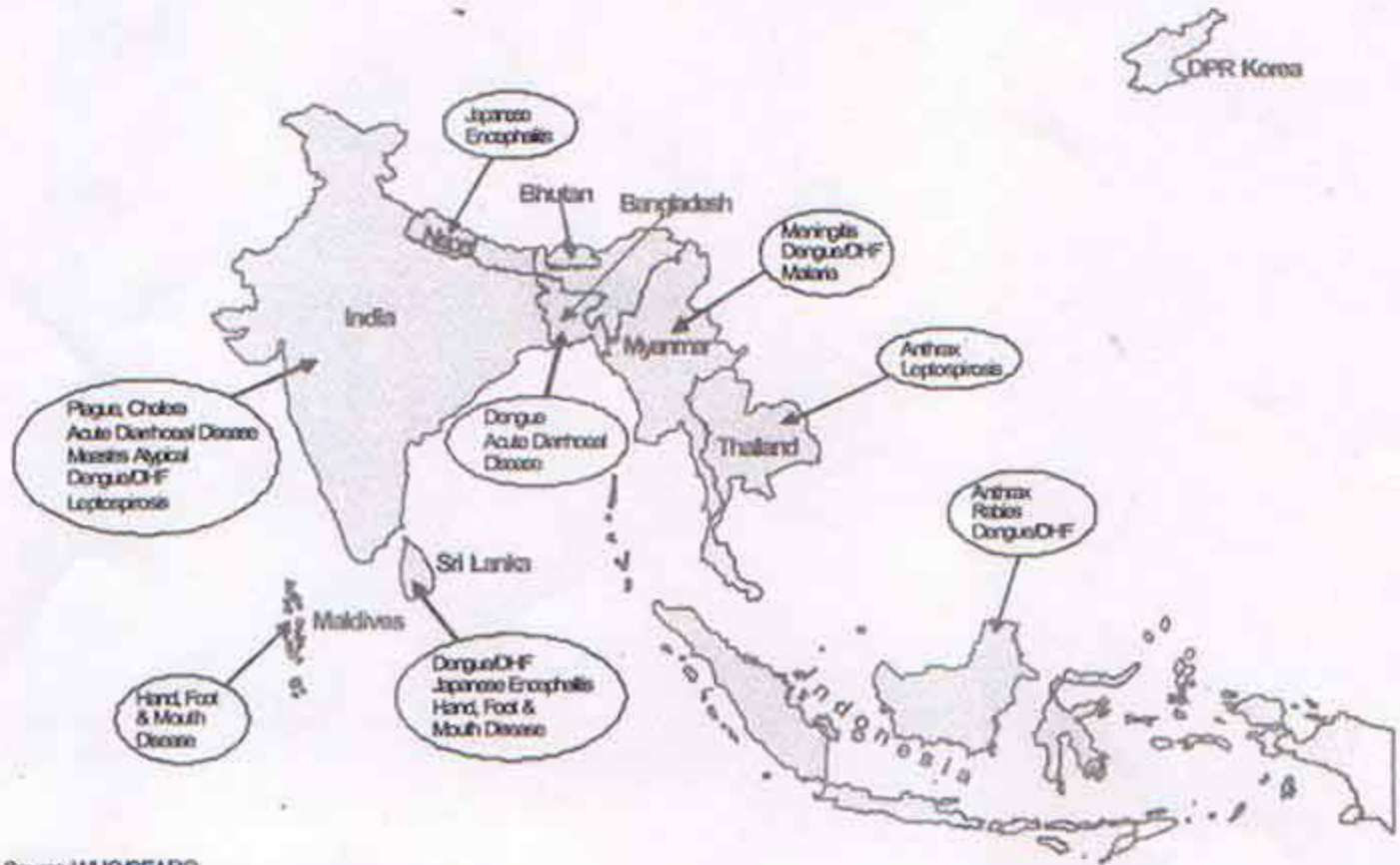
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Nagpur, INDIA



- **NCDs account for 51% of total deaths**
- **Cardiovascular diseases responsible for 29% of total deaths**
- **WHO is providing funds & training for risk factors surveillance and prevention**
- **Imbalanced diet as a risk factor**
- **In their program there is no mention of any possible relationship between nutrient deficiencies and incidence of CVD**

Figure 1.1: Major outbreaks of diseases in the SEA Region



Source: WHO/SEARO

ICMR Programme

→ Evaluate potential role of:

→ Macro & micro nutrients (lipids, polyunsaturated fatty acids, antioxidants, folic acid, iron, zinc and calcium) in the ontogeny of adult diseases and

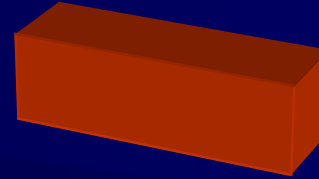
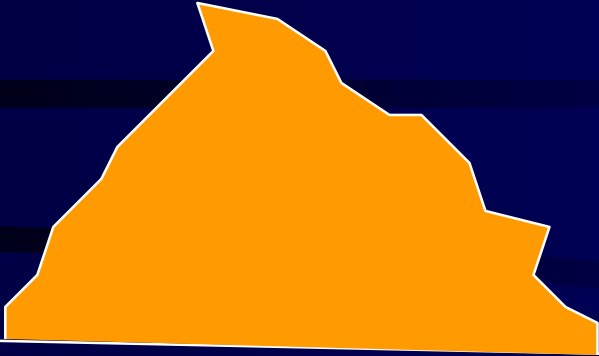
→ Impact of nutrition on gene expression.

IATROGENIC DISEASES

- The disease conditions caused by pharmaceutical preparations prescribed to the patients.
Some prefer to call these as “Adverse Drug Reactions”
- Estimated Patients admitted for various ADRs in 1994 in USA Hospitals: **2216000**
- Estimated Deaths due ADRs in 1994 in USA Hospitals: **106000**

“ Doctor, Big Shit..

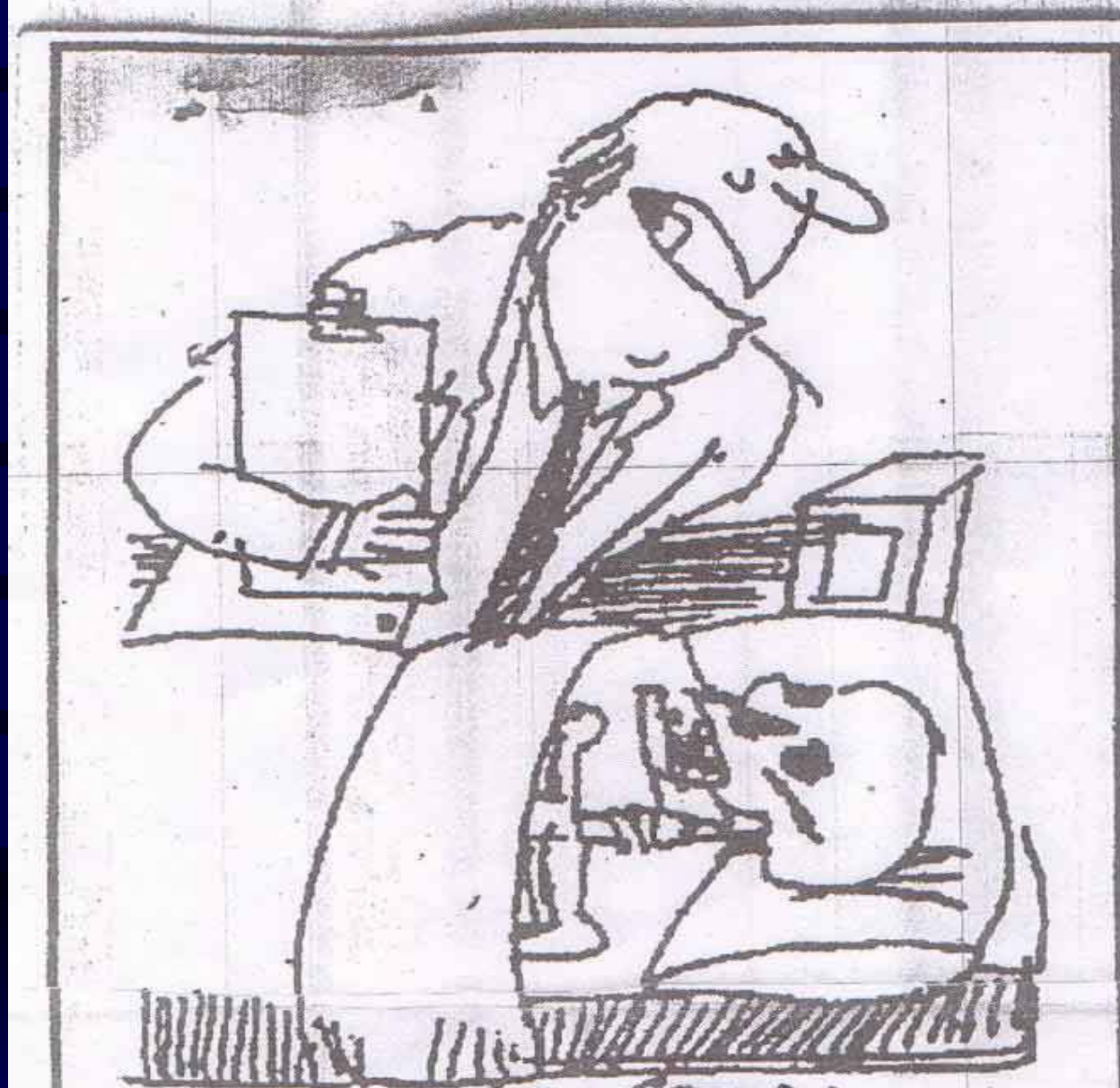
BIG SHIT



----- No Chief "

Doctor's Note: Medicine very efficient

Side effect : death



“The evidence we have Mr Witherington is that the treatment was a success it was you that failed.”

“Antioxidant Supplements Block the Response of HDL to Simvastatin-Niacin therapy in Patients with Coronary Artery Disease and Low HDL”.

(Arterioscler Thromb Vasc Biol 2001;21:1320-1326)

“A time to stop prescribing antioxidant vitamins to prevent and treat heart disease”

(Editorial Comments.

Arterioscler Thromb Vasc Biol 2001;21:1253)

Extracts of our Letter to the editor...

“With some statins withdrawn from the market and some others attracting adverse comments, it is likely that we may have to depend more and more on antioxidants either alone or in combination with lower doses of few selected statins. It is therefore imperative that we should have incontrovertible evidence against antioxidants before we stop using them.

Extracts of the response from the authors...

.... This letter reflects the bias of Dr Rath’s group against proven forms of therapy in favor unproven ones.....

By the way one statin- Cerivastatin-considered as very efficient statin but found to cause toxicity and fatality was withdrawn by the manufacturer –Bayer - from the market earlier in the year.

Acknowledgements

“Study medications were provided by Merck and Co.....”

...to the use of newer,
 ve but not necessarily more
 licines (see page 18). One
 e study by Wazana reported
 which involved a systematic
 dence of how promotion
 ors' behaviour. Recent
 ie US National Institute
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 a subject of great topical
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Other myths spread about vitamin C

Higher intakes of Vitamin C toxic (?)

Many mammals synthesize ascorbic acid. Extrapolation of the amount synthesized to 70 kg body weight indicates that the quantity synthesized range from 3 to 19 g (Linus Pauling).

In human studies as much as 125 g of ascorbic acid by drip over a period of 8 hours have been given. Patients were given 39 infusions over 13 weeks period.

There were no apparent ill effects (Medical Hypothesis 1995;44:207-213, Riordan et al 1995).

In experiments in which human patients were given as high as 10 g vitamin C per day over long period orally, no toxicity was reported (New Eng J Medicine 1985;312:137-141)

So there is no evidence as yet of any vitamin C toxicity even when very large doses are given.

Vitamin C functions as pro-oxidant(?)

“We found compelling evidence for antioxidant protection of lipids by vitamin C in biological fluids, animals and humans both with and without iron co-supplementation” .

(FASEB 1999; 13:1007-1024)

So there is no evidence that vitamin C can act as pro-oxidant.

Higher intake of Vitamin C leads to kidney stones (?)

“.....Intake of high doses of vitamin C does not increase the risk of calcium oxalate kidney stones...”

“Metabolic transformation of AA to oxalate is limited”.

“Older assays for urinary oxalate favored in vitro conversion of AA during storage and processing of samples”

Recurrent stone formers and patients with renal failure should restrict vitamin C intakes to about 100 mg
(Ann Nutr metab 1997;41:269-82)

Project

Use of cellular medicines for reducing healing time of fractures

One group of Patient was given Vitacor Plus and ProlysineC .
The other group got only placebo.

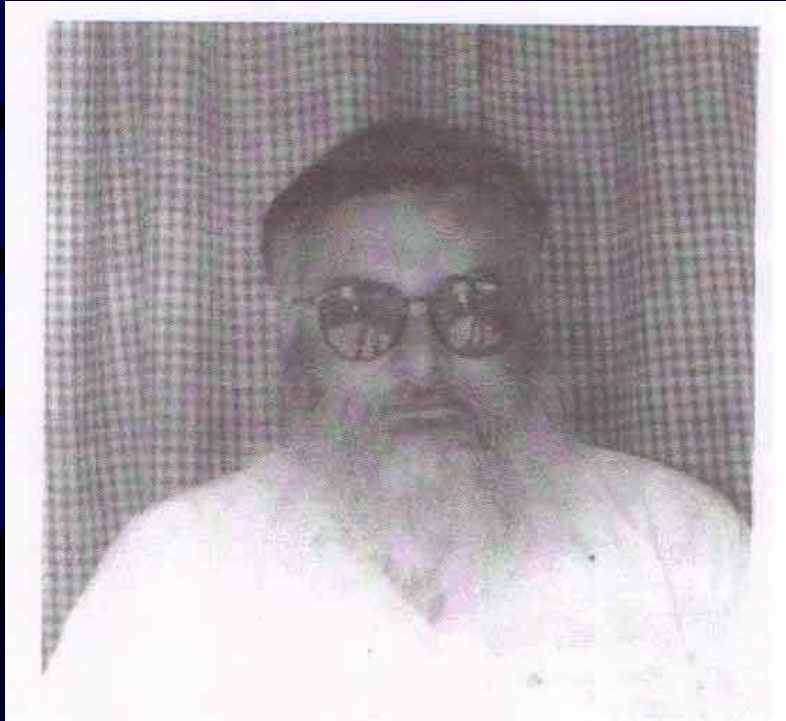
Results

The details of patients and effects of supplementation on the healing time of fracture in the two groups

Criterion	Supplement Group	Placebo Group
Number of patients	21	36
Age range (years)	15 to 65	12 to 75
Mean age (years)	35	32
Healing time (weeks)	14.0 _± 1.1	16.9 _± 1.2
75 th percentile healing time (weeks)	17	19

Project

Pilot Study on the effect of nutrient supplementation on patients with gastro-intestinal cancer.



**Dr Dhananjay Sharma,
M.B.B.S., M.S., Ph D (GI Surgery), DSc (GI Surgery)
Professor of Surgery
Govt Medical College, Jabalpur, M.P. India**

→ We have 6 patients enrolled till now. Five of these patients are in the studies for about a month. All of them are maintaining their weights.

→ The case of one patient who has been in the studies for 6 months now, is very interesting.

Name : Sheela Age : 69 years

Removed tumor on Nov 15th:

Biopsy diagnosis “Cancer of cecum. Poorly differentiated adeno-carcinoma , ulcerating infiltrative growth, extensive necrotic areas.

Date	RBC count million/cmm	Hb g/100ml	TLC/cmm		CEA (ng/ml)	CA 125 (u/ml)	Body Wt
Jul 7,2002		6.7					
Aug 14,2002		5.3	Blood Transfusion				
Nov 13,2002		6	Blood Transfusion				
Nov 15,2002		11.9	Operated				
Dec 10,2002		Put on supplements		Admitted in the studies			
Dec 26,2002	3.69	8.9	6100	0.6	8.6	105 lb	
Jan 15,2002		10.25					
Mar21,2003	4.01	10.2	5700	0.5	3.54	122 lb	
<i>Normal Range</i>	<i>4.2-5.5</i>	<i>12 to 16</i>	<i>4000-12000</i>		<i>upto 10 ng/ml upto 35u</i>		

Extracts from her letter

I underwent surgical operation in which the affected portion and some surrounding parts were removed. Despite the operation I continued to have poor appetite and felt considerably weak. I had no strength even to sit in the bed. I was lying in the bed all the times even after 3 weeks after the operation. At this time I volunteered for a Pilot Cancer Clinical Trial and was put on “Normal Cell Growth Maintenance Program of Dr Rath’s Cellular Health program”. Within a week I experienced a great and persistent improvement in my condition. Now about 6 weeks after starting the program my hemoglobin is 10.2 %. I feel energetic. I am taking a short walk every day. I am regularly taking my meals and am enjoying them. The quality of life has tremendously improved. Doctor tells me that tumor marker levels in my blood are very low. I am very grateful to Dr Rath for giving me a better life..

Sincerely,
Sheela Pandharipande March 25,2003

PS: It is now 6 months after the operation she continues to be in excellent condition

Project in collaboration with Nagpur University

Investigations on anticancer activities of nutrients - vitamins, amino acids, minerals, oligo-peptides, and other natural food constituents.



**Dr Swati Kotwal, Ph D,
Reader in Biochemistry,**



We are a vibrant democracy still recovering from the ravages of colonialism imposed on us from mid 19th century to mid 20th century.

We have lot of health problems quite a lot of them due to poor nutrition and some of them due to iatrogenic diseases.

We would like to concentrate on:

- Conducting Research Studies in India on use of cellular medicine in treatment of cancer**
- Conducting Animal Studies on how to further improve the efficiency of cellular medicine in treatment of various diseases**
- Keeping people healthy by providing them information about how the use of cellular nutrients can keep them healthy and also can provide relief from most of the disease conditions..**

We do not want to waste our meager resources on any wars.

We do not want colonialism again in whatever form.

**WE WANT PEACEFUL AND
HEALTHY AND
JUST WORLD**

Waging a war to save humanity is a laudable objective.

Destroying the weapons of mass destruction (WMD) can be a worthy cause

BUT

We have to be careful in identifying WMDs

In today's world

Hunger, malnutrition and diseases kill millions of innocent people all over the world.

These are big and powerful WMDs.

War against these wmds will not kill lives, will not burn people alive and will not raise buildings to ground, will not destroy forests.

This is kind of war that will only save lives. There would be no casualties.

By waging only this type of war we will qualify ourselves to be called civilised human beings.

Thanks...

