Do Vaccines Do More Harm Than Good?
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People today tend to believe that we are infinitely more intelligent than those who lived 100 or more years ago. We simply assume that our advanced societies, cultures, and technologies make us intrinsically more knowledgeable than prior generations of man.

But if you look closely at what our ancestors knew, you’ll find that the picture isn’t quite so clear. Indeed, you’ll see that our ancestors’ intellects often exceeded modern minds, especially when it came to seeing the bigger picture. And especially when it came to science.

A number of historians have noted that one of the major problems with modern science is that it is too specialized (and, in fact, subspecialized) for its practitioners to effectively see the bigger picture. For example, we have experts who can treat high blood pressure with drugs, yet know little about the consequences of a bad diet or toxic environmental chemicals on hypertension. Other scientists are experts in every aspect of the eye’s lens, but understand little about the retina.

Because of this subspecialization, few scientists understand how enormously complex processes operate. Important questions arise:

- What is the function of natural infections on human health?
- Are we interfering with our bodies’ natural functions by trying to eliminate all infections?
- Are the elderly actually protected by being exposed to infectious diseases when they are young?

Unfortunately, increased vaccination is interfering with natural body functions and serving to weaken our natural immune systems. American citizens get more vaccinations than the people in any other country in the world, and there is growing evidence that we are paying a heavy price for this. Unfortunately, both the medical profession and the general public are being inundated with propaganda about the benefits of, safety of, and need for more vaccines. Yet when one looks objectively at the science, it’s a completely different story.

Chickenpox Vaccination Leaves Adults Vulnerable

The perfect example of the complex interaction between natural body function and vaccination is what has happened with chickenpox.
Recent studies show that many adults carry the live chickenpox virus in their spinal cords. When this virus, which normally is dormant, becomes active in the elderly, it can cause the incredibly painful condition called shingles (herpes zoster).

When the chickenpox vaccine was added to the regular vaccine schedule, preventing large numbers of children from contracting active chickenpox, doctors began to see a tremendous rise in the number of cases of adult shingles, especially the elderly. Today, 1 million cases of shingles are reported in the United States each year, with about half occurring in patients 60 or older.

The explanation appears to be that adults who were exposed to chickenpox when their children and grandchildren were infected developed strengthened immunity that kept them from getting shingles. Proponents of the chickenpox vaccine have admitted that the vaccine caused this increase in shingles. And what was their solution? They created a herpes zoster vaccine — and, of course, made millions of dollars in the process.

**Juvenile Diabetes Linked to Vaccination**

Juvenile, or Type 1, diabetes is a devastating disease with a high mortality rate. It is a disease that health practitioners should be doing everything in their power to prevent and treat. But instead, there is growing evidence that we are protecting our children against relatively mild diseases in exchange for a dramatic and progressive increase in this serious chronic illness.

One study of 114,000 children, conducted in Finland, found that after the introduction of the Hib (hemophilus b) vaccine in 1986, the incidence of juvenile diabetes increased 62 percent among children 2 to 4 years of age. If that data were extrapolated to the United States, out of 4 million children, 2,000 more would be diagnosed with this deadly form of diabetes each year.

In fact, the incidence of diabetes in children 4 years old and younger rose over 50 percent in Pittsburgh after the Hib vaccine was added to the childhood vaccine schedule in 1985. Similar increases in diabetes were reported in the U.K. when the vaccine was introduced. And the problem is not limited to the Hib vaccine, as similar findings were seen with the MMR (measles, mumps, and rubella) and pertussis vaccines.

The problem with the vaccines appears to be that immune stimulation causes the body to form antibodies to the cells in the pancreas that produce insulin (islet beta cells), resulting in their eventual destruction. Ironically, a protein in cow’s milk has also been shown to cause a high incidence of juvenile diabetes. Possibly linked to both causes is the observation that feeding MSG (monosodium glutamate) to diabetes-prone animals also induces juvenile diabetes and metabolic syndrome.
The immune activation by the vaccines and cow’s milk causes an accumulation of glutamate in these same islet beta cells, leading to their destruction. It may be that the common link is immune-triggered immunooxidotoxicity in the pancreas.

There is also evidence that immune stimulation can worsen the neurological damage caused by diabetes. **Diabetes causes the immune system to work at suboptimal levels; stimulating the immune system with vaccines (because of toxic components within the adjuvants used) greatly increases the generation of free radicals and lipid peroxidation.**

Juvenile diabetes is associated with a very high incidence of complications:
- Strokes
- Heart attacks
- Amputated limbs
- Blindness
- Kidney failure
- Brain injury
- Peripheral neuropathy (painful nerves in the arms and legs)

It is also associated with early death. Many of the complications of this form of diabetes are secondary to high levels of free radicals and lipid peroxidation products (oxidized fats) forming throughout the body, including in the brain.

I have treated people with this form of diabetes with high doses of R-lipoic acid and found that a number of them improved, in that they needed less insulin and developed fewer complications. This makes sense because R-lipoic acid acts like insulin by helping glucose enter cells. It is also a very powerful antioxidant, and helps other antioxidants in the body work efficiently. The dose varies from 300 to 600 mg with each meal.

A number of plant flavonoids — especially cinnamon extract, hesperidin, curcumin, quercetin, resveratrol and luteolin — also improve glucose control. These powerful antioxidants can be purchased without a prescription, and can neutralize free radicals and lipid peroxidation products in ways that vitamins cannot.

**Vaccines Worsen Neurotoxicity**

Another frightening discovery is that activation of the immune system — especially for very long periods, as occurs with vaccines — seems to greatly enhance the toxic effect of a number of commonly used pesticides and herbicides. For example, studies have shown that vaccinating and then exposing an animal to very low doses (that would normally cause no harm) of a pesticide called rotenone is very destructive to brain cells associated with Parkinson’s disease. The same increased toxicity linked with vaccination occurs with other brain toxins, including illegal drugs.

If this process also occurs in humans (and many neuroscientists think it does), it would mean that millions are at risk because virtually everyone is exposed to pesticides to some degree, and most people were vaccinated during childhood.

Some people are very sensitive to this combined toxicity. This occurs mainly in people who have defective detoxification mechanisms. These are also
the people who develop full-blown Parkinson’s, and are most rapidly affected by the disease. Others, for a variety of reasons, have variable risk for the disease and severity of symptoms should it develop.

There is also compelling evidence that aluminum, especially in nanoparticles (extremely small particle sizes) causes the brain to become very sensitive to a number of other poisons, such as pesticides and even mercury. Aluminum is used in most vaccines as an adjuvant (immune booster), and the doses included far exceed FDA safety limits. The aluminum dose given to a 2-month-old child receiving his recommended vaccines exceeds the FDA safety limit 50-fold.¹⁰

This nanoparticle aluminum induces an intense inflammatory response, not only at the site of the injection, but in critical areas of the brain.¹¹ And this brain inflammation can persist for decades, if not a lifetime.

It has been shown in both humans and experimental animals that exposure to the level of aluminum found in vaccines can enhance the excitotoxicity of glutamate enormously, triggering immunoexcitotoxicity, a possible central mechanism for a great number of neurological disorders, such as:

- Alzheimer’s
- Parkinson’s
- ALS (Lou Gehrig’s disease)¹²

**How to Protect Yourself From Aluminum**

But there is good news. Growing evidence suggests that the common compound silicon (silicic acid) can neutralize the harmful effect of aluminum. Natural mineral waters from many places on earth contain silicic acid. Studies have shown that this substance binds with the aluminum to prevent its toxic effect on cells.

Dr. Christopher Exley, an authority in both aluminum and silicic acid, has also found that adding silicic acid to drinking water may even help the body rid itself of aluminum and may lower the risk of Alzheimer’s dementia.¹³

There is one study that raises concern about adding nano-sized silicic acid to drinking water. This study found that even with very low concentrations, there was a marked increase in activation of the brain’s immune cells, called microglia. It is microglial activation that has been linked to immunoexcitotoxicity.¹⁴ It may be that there is a significant difference between naturally occurring silica and the nano-sized form. This has been shown for no other metals.

Dr. Lucia Tomljenovic, another expert on the effects of aluminum in the brain, points out that antioxidants can significantly reduce toxicity, and a new compound called Feralex-G appears to remove aluminum from the nucleus of cells — one of the most difficult areas from which to remove aluminum.¹⁵,¹⁶ Adding vitamin C to Feralex-G makes it work even better.¹⁷ The advantage of Feralex-G is that it can be taken orally and has very low toxicity. (This compound is still in clinical trials and not yet available to the public.)

One study found that N-acetyl-L-cysteine (NAC) — a compound that increases the levels of the antioxidant glutathione within cells — provided tremendous protection against aluminum damage to brain cells.¹⁸ Glutathione is one of the most important cell protectors, especially for brain cells.

Yet incredibly, vitamin C works even better than NAC. Combining the two should give very powerful protection against aluminum toxicity. Always take NAC with food, as it can cause stomach upset. The dose is 900 mg twice a day.

In addition, studies indicate that the damage done by aluminum in the brain is caused by immunoexcitotoxicity. There are many substances that reduce immunoexcitotoxicity and protect the brain against aluminum toxicity:

- Curcumin
- Quercetin
- Resveratrol
- Luteolin

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As always, it is critical to avoid dietary food additive excitotoxins and eat a healthy diet. Vitamins, such as riboflavin, pyridoxal-5-phosphate, niacinamide, and vitamin D3 can play a major role in protecting the brain. Coenzyme Q10 in high doses (600 mg three times a day) also protects the brain.

**Macrophagic Myofasciitis: An Emerging Vaccine-Induced Disease**

In 1998, Dr. Romain Gherardi, a French specialist in neuromuscular diseases, described an unusual new syndrome in which people suffered a gradual onset of a combination of severe muscle pains and debilitating weakness that left many unable to function. Later studies found that in all cases the patients had received 1 of 3 vaccines — most often the hepatitis B or the tetanus vaccine.

Dr. Gherardi’s research team found that the muscles had been infiltrated with inflammatory cells (macrophages) and that those cells were filled with aluminum from the vaccine adjuvant. He named this condition macrophagic myofasciitis, meaning macrophage-induced inflammation of the muscles and fascia (the tissue covering muscles).

After the identification and description of this devastating disorder, doctors in other countries, including the United States, began to see cases, which were always associated with the same vaccines. And a growing number of cases involved children.

Even more frightening than the muscular deterioration is the discovery that all of the macrophagic myofasciitis patients demonstrated some degree of cognitive impairment. Some, including small children, had severe mental and intellectual impairment.

But despite the proof that the aluminum vaccine adjuvant is the culprit, it continues to be used in most vaccines. And more cases of macrophagic myofasciitis are being reported worldwide.

Interestingly, the maximum accumulation of the aluminum-filled macrophages is at around five years after receiving the vaccine, though a small number of people develop symptoms more quickly. Dr. Gherardi noted that the symptoms of macrophagic myofasciitis closely resemble Gulf War Syndrome, a disorder associated with the anthrax vaccine, which contains a very high level of aluminum.

In experiments, animals were injected with aluminum-containing adjuvants into the muscle, and 31 percent were found to have aluminum deposits in their brain. The entry of the aluminum into the brain occurred very slowly, taking as long as a year to accumulate in the cortex.

These findings explain why people were 300 percent more likely to develop multiple sclerosis three years after receiving the hepatitis B vaccine: It takes a long time for aluminum to be redistributed into the affected areas of the brain. However, Dr. Gherardi found that once the aluminum entered the brain it could not be removed.

**The Dangers of Mandating Vaccines**

There is little question that the big pharmaceutical companies have played a powerful role among government, academia, and the media in frightening the public into accepting the proposed vaccine schedule. And now they are expanding that role by attempting to broaden the market for their products.

Recently, we have seen a move toward making vaccines compulsory, with New Jersey, New York, California, and Maryland taking the lead. Texas Gov. Rick Perry mandated the Gardasil vaccine for girls 11 years and older, but was overridden by the legislature after a number of girls died following vaccination.

Mandating a vaccine means that you and your family will be forced to take a “medicine” that might destroy your health. And many of these vaccines do not come under legal definitions of public health. For example, the tetanus vaccine doesn’t even protect the public from a communicable disease — tetanus is contracted via infected wounds. Likewise, HPV (human papillomavirus) is not a disease, like flu, that spreads...
easily throughout communities. The government has no legal right to mandate such vaccines.

In truth, the case against the present vaccine schedule is very powerful and built on the findings of some of the most accomplished researchers in the world. The problem is that the media is so controlled by the pharmaceutical companies that the general public has no idea that this research even exists.

Researchers now know that even questioning vaccine safety is a career-killer. Researchers who do so can be fired or denied grants, their articles have been rejected by the more “prestigious” science journals, and they are no longer invited to speak at national meetings. The atmosphere of fear is pervasive. And all of that fear is generated by the pharmaceutical companies and their minions.

By destroying reputations and stopping further research, industry-controlled vaccine proponents hope to have a national law mandating that everyone receives every vaccine recommended by the CDC.

**Government Is Negligent on Safety**

Believe it or not, the government does not require vaccine manufacturers to submit to

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**A note from Dr. Blaylock:** Advertisements for various supplements may appear in the newsletter or attached to the newsletter. I have nothing to do with these advertisements and do not endorse them. The only supplements I endorse are those that I list in the newsletter. This is not to say that I object to the supplements; it’s just that I am not familiar with the supplements being advertised.

Please note that this advice is generic and not specific to any individual. You should consult with your doctor before undertaking any medical or nutritional course of action.
independent safety studies; the FDA allows vaccine manufacturers to do their own safety studies. In essence, the pharmaceutical companies are allowed to police themselves, and no follow-up is done to see if those studies are actually carried out.

Most vaccine safety studies conducted by pharmaceutical companies entail follow-up of three days to three weeks at the most. But independent studies have shown that significant harm and onset of vaccine-related diseases can occur years after vaccination. It has also been shown that 10 percent or less of vaccine-related complications, even serious ones, are ever reported to the government reporting system (VAERS), which contains tens of thousands of complaints. That means the real numbers are in the hundreds of thousands or even millions of complications each year.

Every year the CDC, the media, and the vaccine makers parade out promotional ads extolling the virtues of vaccines and, especially, their safety. These ads are obvious frauds. For example, there is no evidence that the Gardasil vaccine prevents cervical cancer, just as there is no evidence that the flu vaccine prevents the flu.

In fact, one of the most careful studies ever done has shown that the flu vaccine has had no benefit in reducing mortality or hospitalization rates, or in preventing pneumonia in the elderly — three reasons the CDC gives for getting the flu vaccine.

In essence, with the flu vaccine you would be getting a vaccine with no benefit, which is, however, associated with deadly conditions such as Guillain-Barre ascending paralysis. Yet it generates $1 billion dollars for the vaccine manufacturers every year.

Likewise, the entire H1N1 “pandemic” scare was fraud on a global scale — compared to which the Wakefield case (see, sidebar, page 6) pales in significance. The very same government, media, and public health representatives who have slandered Dr. Wakefield fashioned a “need” for that vaccine out of whole cloth.

The best protection against infections is not a vaccine, but good nutrition and healthy habits:

- Keep your vitamin D3 level elevated
- Exercise regularly (though not if you are sick)
- Get plenty of sleep
- Avoid stress as much as possible

**Danger: Contaminated Vaccines**

One of the greatest concerns with vaccines is the risk of contamination. Studies have shown that a number of the vaccines given to our children are in fact contaminated with viruses, viral fragments, and mycobacteria, many of which may be associated with cancer, according to Dr. Romain Gherardi.

With many vaccines now being manufactured in China, contamination risks are even greater. In fact, the FDA inspects these plants just once every 12 years, and even then inspectors can’t enter the plant — they simply have to take communist officials at their word that safety standards are being met.

- Take a multivitamin along with vitamins C and E
- Take immune stimulants, like olive leaf extract and beta-1,3/1,6 glucan, to boost your natural immunity so that you can fight off infections
- NAC (N-acetyl L-cysteine) 900 mg twice a day with meals has been shown to significantly shorten viral infections

I find it ironic that government agencies, both state and federal, never inform the public of these powerful natural health measures, which have been proven to greatly reduce the risk of infection, harm from infection, and even deaths from infection. Instead, the public is lead to believe that their only protection is vaccines — which leaves drug manufacturers grinning from ear to ear.

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Drug Companies Found Guilty of Fraud

In the March 2010 issue of *Life Extension* magazine, editor William Faloon chronicled the issue of massive fraud committed by several pharmaceutical companies. He noted that the pharmaceutical giant Pfizer was required to pay $2.3 billion after the company pled guilty to “felony with the intent to defraud.”

Part of the $2.3 billion fine was based on allegations that Pfizer gave doctors kickbacks to prescribe its drugs such as Aricept, Lipitor, Viagra, Zyrtec, and Norvasc. Compensation to doctors included cash payments, travel, entertainment, and meals. Pharmaceutical companies also paid for doctors’ influence in the form of speaker’s fees, mentorships, preceptorships, and journal clubs.

Pharmaceutical companies not only sponsor many medical meetings, but the company supplies the speakers as well. This greatly expands the influence of pharmaceutical companies concerning physician education, and dictates physicians’ practice behaviors.

But this charge against Pfizer is not a one-time incident; rather, it is the fourth such charge against the company since 2002. And if you think paying $2.3 billion hurts Pfizer, think again. A single change in tax law, enacted in 2004, allowed the pharmaceutical giant to reap $37 billion in profit above its tens of billions in drug and vaccine profits.

Of real concern is the revelation in the *Journal of the American Medical Association* that drug companies have been ghostwriting scientific papers. Pharmaceutical companies have papers written by a professional medical writing firm called Medical Education and Communications Company (MECC); the papers imply that a particular drug or vaccine is better than its competitor. The pharmaceutical company then seeks an academic physician to put their name on the paper, giving the appearance of authority.

MECC is paid anywhere from $13,000 to $18,000 to produce a “fraudulent” paper. The pharmaceutical company then uses its influence to push the paper through the peer-review process so that it will appear in one of the prestigious medical journals. Pharmaceutical companies then buy thousands of dollars worth of reprints so their sales representatives can distribute the journal where the article appears to unsuspecting doctors. The journal can then make millions selling article reprints.

Wyeth, a pharmaceutical company that was acquired by Pfizer in October 2009, was recently charged with using this fraudulent ghostwriting practice to sell the synthetic hormones Premarin and Prempro to women. Doctors prescribed these drugs based on 20 ghostwritten papers.

The entire statin obsession is also based on ghostwritten papers and studies doctored to show significant benefit, when little or no benefit exists.

Low Vitamin D3 Triggers Asthma

There is growing evidence that low vitamin D3 levels in children may substantially increase the risk of asthma and worsen symptoms. In a recent study, lead author Dr. Daniel Searing and his colleagues of the Division of Allergy and Immunology at the National Jewish Health research institute examined asthmatic children up to age 18, and found that 47 percent had insufficient levels of vitamin D3 (blood levels less than 30 ng/ml) and 17 percent were fully deficient (less than 20 ng/ml). Black children had substantially higher vitamin D3 deficiency rates (86 percent). Dark-skinned people generally have lower vitamin D3 levels.

The study reached a number of interesting findings. For example, allergy markers such as immunoglobulin E levels and positive aeroallergen skin test responses, were inversely correlated with vitamin D3 levels. That is, those with blood tests showing very active inflammation had lower vitamin D3 levels. Researchers also found that patients with the lowest lung function also had the lowest vitamin D3 levels.
It appears that vitamin D3 enhanced the inflammation-suppressing effects of corticosteroids, normally used in severe asthma cases. Other studies have shown that isolated white blood cells from asthmatic children were more responsive to steroids when vitamin D3 was present.

I would contend that the vitamin D3 levels being called normal (30 ng/ml) are too low, and perhaps if it were higher, say 50 ng/ml, we would see less asthma altogether and have less need for harmful drugs like steroids.

Excitotoxins in the diet — such as MSG, hydrolyzed proteins, and natural flavoring — have been shown to significantly worsen asthma attacks, and should be avoided. Studies also have shown that the lining of the air passages in the lung have numerous glutamate receptors.

Our young people live on junk foods filled with excitotoxic additives, and the incidence of asthma in children has increased 400 percent over the past two decades. We can turn that number around with better diet and more vitamin D3.

**Periodontal Disease Leads to Larger Health Problems**

A growing quantity of data indicate that poor dental hygiene is linked to a wide variety of serious diseases. In fact, studies have linked dental hygiene problems to atherosclerosis, diabetes, and pneumonia, as well as heart attack, stroke, premature births, miscarriages, and even neurodegenerative diseases such as Alzheimer’s dementia and Parkinson’s disease.

Periodontal disease increases the risk of a woman having a premature birth by 700 percent — and premature birth significantly increases a child’s risk of neurological disorders later in life. Studies of pregnant women found strong uterine IgM, an antibody response to specific oral pathogens, in those with gum disease. That is, the bacteria in pregnant women’s gums were causing inflammation within their uterus, thus triggering premature birth. Treating periodontal disease in pregnant women reduces the incidence of premature birth four to fivefold. This is profound, yet few women are told this important fact during their pregnancies.

In another study, 67 patients with gum infections were compared to people free of gum disease, specifically looking for the presence of bacteria in their blood after chewing gum 50 times on each side of their mouth. Researchers found that the number of bacteria in test subjects’ blood rose from 6 percent before chewing to 24 percent after. Those with severe periodontal disease had four times as many bacteria in their blood after chewing the gum than those with moderate to no periodontal disease.

This is important for a number of reasons. It is known that cardiovascular disease and difficult-to-control diabetes are linked to periodontal disease. Gum infections have been shown to increase the risk of cardiovascular disease 200 percent. Studies have also shown that there is a direct correlation between infected gums and risk markers for heart attacks and strokes. Levels of risk markers were found to be higher in acute heart attack patients with periodontal disease as compared to those without gum infections.

Another study linked periodontal disease with pulmonary infections in hospital and nursing home patients. Elderly patients with severe periodontal disease will often aspirate (leak fluid from their mouth into their lungs) the infected fluid from around their gums into their lungs, which can lead to pneumonia.

Other researchers found positive lung bacteria cultures from 85 percent of hospitalized patients, and noted that chronic gum infections significantly raised hsCRP levels, a measure of low-grade inflammation. This is the type of inflammation associated with a great number of diseases, including atherosclerosis and neurodegenerative brain disorders.

And even some of the “treatments” for dental hygiene are harmful. For instance, I would caution everyone to avoid fluoride, a known toxin. Mouthwashes with CoQ10 and other natural ingredients are best. Most important is to avoid eating sweets and chewing gum — even unsweetened gum.
**Q:** In your December newsletter, you say to avoid tea (with citrus) as it contains aluminum. Does this include organic tea? How does this happen?
— Vicki L., Hudson Falls, N.Y.

**A:** Tea plants get aluminum from the soil, even if they are organically grown. Tea plants concentrate aluminum in their leaves, so the older the plant, the higher the aluminum level.

White tea is picked and processed earliest, so it has very little aluminum. Green tea is a little older and has a slightly higher aluminum level. Black tea is a fully matured plant; it has very high aluminum levels and a significant part of this aluminum is absorbed by the body.

Black tea also has very high fluoride levels, and when fluoride combines with aluminum it is very toxic, especially to the brain. Worse yet, putting a lemon in your tea increases aluminum absorption as much as 11 times. (It’s the citric acid that does it.)

If you drink black tea, put in 200 mg of calcium and 112 mg of silica. The calcium neutralizes the fluoride and the silica neutralizes the aluminum.

**Q:** My 13-year-old is in remission from leukemia and my 8-year-old has autism. We are currently following an anti-viral protocol for autism. Do you have any thoughts on the protocol? Do you have any specific recommendations on how to reduce my older son’s chance of relapse?
— Donna S., Centreville, Va.

**A:** There is strong evidence that a genetic defect involving methylation, called methylenetertrahydrofolate reductase (MTHFR), is involved in both disorders. In general, people with this condition require much higher doses of folate and vitamin B12 than normal. Just how much depends on the blood levels of MTHFR markers, such as homocysteine blood levels. Unfortunately, the exact treatment for autism is not well defined. The organization Defeat Autism Now has a fairly successful, scientifically based protocol.

As for your child with leukemia, there is growing evidence that certain flavonoids — such as curcumin, quercetin, and resveratrol — have a powerful antileukemic effect. Luteolin also has potent anti-cancer effects.

These flavonoids can be purchased without a prescription. Curcumin and quercetin are oil-soluble, and are better absorbed when mixed with extra-virgin olive oil. For the best results, take them four times a day to keep the blood levels high.

**Q:** For heart health reasons, I have started a vegan diet. I can’t find information on whether “seitan” (a wheat protein food) is healthy with a strict vegan diet. Can you give me any advice?
— Sarah M., Louisville, Ky.

**A:** From what I understand, I would not eat seitan with a vegan diet. It will be high in glutamate, especially the soy sauce-based products.

However, I see no harm in eating a little meat — especially organically raised chicken or turkey. It should play very little role in heart disease. Animal fats have been shown to have very little effect on atherosclerosis.

The main goal is to reduce blood vessel inflammation and free radical/ lipid peroxidation levels. This means a mixture of powerful antioxidants and anti-inflammatories such as curcumin, quercetin,
ellagic acid, natural vitamin E, buffered vitamin C, hesperidin, and vitamin D3. Magnesium is also essential. It is important to avoid excitotoxins and oxidized oils such as corn, sunflower, safflower, peanut, soybean, and canola oils.

**Q:** My sister-in-law has Alzheimer’s disease. Do you think that taking large doses of vitamin D3 would help control it?

— Bob G., Kettering, Ohio

**A:** While no studies have been done on the treatment of Alzheimer’s with vitamin D3, animal studies and other experimental studies suggest it may be beneficial. Vitamin D3 (really a neurohormone) modulates or reduces excess inflammation in the brain, and inflammation is considered to be a major factor in the disease.

Most elderly people are vitamin D3 deficient, many severely so. Taking 5,000 IU a day of vitamin D3 is considered safe, and one can even go as high as 10,000 IU a day. It is best to have a blood test for vitamin D3 level done to see how low it is, and repeat it after a month to make sure it is at normal levels (around 70 ng/L).

See my previous newsletters on Alzheimer’s disease for more information.

**Q:** My teenager has difficulty remembering. Can you think of anything we can do to help his memory?

— Marie R., Mohegan Lake, N.Y.

**A:** I am seeing more young people with memory problems, which is unprecedented. While there is no absolute proof, I suspect several things: exposure to microwave radiation (cell phones and cordless phones), excessive vaccination, and high exposure to dietary excitotoxins. Correcting these should be done first.

Switching to a healthy diet can often do wonders. Several studies have shown that taking a simple multivitamin often dramatically improves mental function. DHA also improves memory.

If he continues to have trouble, he should have a thorough workup by his physician — especially looking for exposure to heavy metals, such as lead, mercury, and aluminum.

**Q:** A friend has been diagnosed with beginning stages of emphysema. Are there any specific vitamins or minerals that can help eliminate or reduce the problem?

— Frederick G., Boynton Beach, Fla.

**A:** The lung contains a number of glutamate receptors. Dietary excitotoxins overactivate these receptors, accelerating lung tissue destruction. Most of the lung tissue destruction in emphysema is secondary to high levels of free radicals and lipid peroxidation products in the lungs.

Mixtures of antioxidants greatly reduce this damage and slow the process. These antioxidants include vitamin C, natural E, curcurmin, quercetin, ellagic acid, luteolin, resveratrol, R-lipoic acid, and vitamin D3 (5,000 IU to 10,000 IU, depending on blood levels).

Magnesium also protects the lungs from inflammation and glutamate damage. NAC (N-acetyl L-cysteine) increases glutathione levels in lung tissues and provides powerful antioxidant protection. B vitamins and CoQ10 improve lung function.

One should also avoid omega-6 oils in foods and cooking.

**Q:** Three years ago, I was diagnosed with chronic lymphocytic leukemia. I have elected not to do chemotherapy, but I’m trying to avoid sugar so I eat a lot of fruit. Is the sugar in fruit harmful?

— Robert W., Erie, Pa.

**A:** Sugar should be avoided by all people, but should especially be avoided by cancer patients. The most harmful thing is high fructose corn syrup because it generates high levels of free radicals that stimulate cancer growth. Some fruits are fine, especially those that are less sweet.

One’s diet should be composed mostly of vegetables. Recent studies have shown that a number of flavonoids have powerful anticancer effects, especially for leukemia. These include curcumin, quercetin, ellagic acid, resveratrol, and luteolin.
My book “Natural Strategies for Cancer Patients,” goes into the details concerning diet and special supplements for these conditions.

**Q:** I have read that the alternative to an annual mammogram is thermography. Does a mammogram make you more susceptible to breast cancer because of the repeated exposure to radiation? Is thermography better?


**A:** Thermography results vary with the machine used and the skill of the person reading it. What it does that a mammogram cannot do is demonstrate a “hot spot,” which indicates active pathology — either an area of inflammation or a cancer, both of which emit increased heat. If the test comes out positive, one can then get an MRI scan, which has much greater diagnostic accuracy.

The mammogram has been shown to be much less accurate than claimed by its proponents. The real worry is the exposure to radiation year after year, which produces accumulative damage to the breast tissue, increasing the risk of cancer.

It is estimated that yearly mammograms increase one’s risk of breast cancer by 3 to 10 percent per year, depending on family history. Those with a family history of breast cancer are more likely to be in the 10 percent-per-year risk group.

**Q:** I survived breast cancer in 2008, and my doctor has advised me to take a rice protein powder. Your December article said glutamates increase cancer risk and damage brain function. What are your recommendations?

— Jill S., Columbus, Ohio

**A:** There is considerable evidence that glutamate not only promotes the growth of breast cancer, but more importantly stimulates its invasion — that is, causes the cancer to spread.

I would not suggest that any cancer patient eat a protein supplement that is high in excitotoxins. One of the main reasons cancer patients should avoid animal proteins is because of the high iron level. Mixing vegetables with the meat dramatically reduces the iron absorption (mainly do to the flavonoids). Vitamin C also dramatically increases iron absorption and should not be taken with meats.

A small amount of meat, such as turkey, lamb, or pork should be OK as long as it is eaten with vegetables. Blenderized vegetables are even better.

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**About Dr. Blaylock**

Dr. Russell Blaylock is a nationally recognized, board-certified neurosurgeon, health practitioner, author, and lecturer. He attended the Louisiana State University School of Medicine in New Orleans and completed his internship and neurosurgical residency at the Medical University of South Carolina in Charleston, S.C. For 25 years, he has practiced neurosurgery in addition to having a nutritional practice. He recently retired from his neurosurgical duties to devote his full attention to nutritional studies and research. Dr. Blaylock has authored four books on nutrition and wellness, including “Excitotoxins: The Taste That Kills,” “Health and Nutrition Secrets That Can Save Your Life,” “Natural Strategies for Cancer Patients,” and his most recent work, “Cellular and Molecular Biology of Autism Spectrum Disorders,” edited by Anna Strunecka. An in-demand guest for radio and television programs, he lectures extensively to both lay and professional medical audiences on a variety of nutrition related subjects.

He is the 2004 recipient of the Integrity in Science Award granted by the Weston A. Price Foundation. He serves on the editorial staffs of the Surgical Neurology International and the Journal of American Physicians and Surgeons, official publication of the Association of American Physicians and Surgeons. He also serves as an assistant editor-in-chief for the journal Surgical Neurology International. He was also a lecturer for the Foundation on Anti-Aging and Regenerative Medicine. At present, he is a reviewer for the journal Food & Chemical Toxicology and other journals.

Dr. Blaylock previously served as clinical assistant professor of neurosurgery at the University of Mississippi Medical Center in Jackson, Miss.