



Dr. Richard Kunin

*THE GENETIC EPIDEMIC:
VITAMIN RELATED MUTATIONS*

Cubberly Community Center
4000 Middlefield Road, Room H1, Palo Alto, California

January 22, 2004 at 7:00 pm

SPECIAL ANNOUNCEMENTS:

1. Phil Jacklin will present a brief 20 minute summary of the major presentations of interest to us that were given at the December 12-14 A4M (American Association of Anti Aging Medicine) meeting.
2. Dr. Robert Cathcart will be honored by Smart Life Forum with a brief ceremony and presentation of a Plaque
3. Stan Field will briefly describe a new technique for reducing prostate enlargement pressures. He just had this Photo Selective Vaporization Procedure done on himself.
4. Smart Life Forum members are invited at a reduced rate of \$150 to attend this year's February 27-29 Orthomolecular Health Medicine conference in San Francisco. This is run by Dr. Richard Kunin and will include 16 prominent doctors such as Robert Rowen, Tom Levy, and Len Saputo. A full program will be available at this meeting.
5. Remember, everyone's dues for 2004 are due in January. Please bring check for \$50 made out to Smart Life Forum. If you can't make the meeting mail to **Dr. Tim Gallagher, 990 W. Fremont Ave, Sunnyvale, California 94087.**

MEET DR. RICHARD KUNIN :

Nutrition-Physician and Pioneer in Orthomolecular Health-Medicine.

Inspired by Dr. Linus Pauling's work with vitamin C and antioxidants in orthomolecular medicine, Dr. Kunin has worked for over 30 years in the development of a physiological approach to medicine. His 1973 discovery of manganese as a cure for drug-induced dyskinesia (muscle-movement disorder caused by drug therapy) was the first orthomolecular research to verify the efficacy of mineral therapy for a disease (other than simple deficiency). His studies on the effects of niacin (1975) were first to identify prostaglandins in the niacin flush and aspirin as an antidote.

Dr. Kunin's clinical research led to The "Orthocarbohydrate Diet", the first diet plan based on individualized carbohydrate-protein-fat effects on mood, energy, and weight. The "Listen To Your Body Diet" popularized this in his best-selling books "Mega Nutrition" (1980) and "Mega Nutrition for Women" (1983) remains one of the most user friendly, safe and effective diet-energy plans.

For the past 30 years Dr. Kunin has promoted a scientific approach to orthomolecular medical practice, based on laboratory testing of vitamins, minerals, amino acids, fatty acids, enzymes, and hormones. These are molecules that fit into the biochemistry and physiology of the body and regulate the process of adaptation for health and resistance to disease. Toxic molecules, including chemicals, pesticides, allergens and microbes, are also measured along with all other appropriate medical tests.

Dr. Kunin founded the Society for Orthomolecular Health Medicine in 1994 to honor Dr. Linus Pauling, and to promote a physiological and health-oriented strategy of medical practice, one that puts nutrition, pollution, and stress first in diagnosis and treatment. Since 1995, Dr. Kunin has engaged in research on the relationship between blood flow and cell nutrition. Pro-coagulant status has been identified in the majority of patients. This causes ischemia, low blood flow, and is a primary cause of symptoms, disease, cell damage, and aging. Megavitamins act as antioxidants and anticoagulants. Bioflavonoids have similar actions. These discoveries support a new rationale for orthomolecular therapies: they protect the blood vessel wall, prevent platelet aggregation, inhibit clotting mechanisms and enhance blood flow.

DNA testing provides access to information about the genetic connection between nutrition and health. It is now evident that mutation is a determinant in health and disease. Genomic testing identifies individual needs that shape the limits of adaptation. It also directs therapy to

offer more specific and individualized support for maximum adaptability.

Dr. Kunin is also director of research of Ola Loa Products, leaders in powdered nutrition supplements.

INTRODUCTION TO ORTHOMOLECULAR MEDICINE

Orthomolecular Medicine began, in historical context, with Casimir Funk's introduction of the word, 'vitamin' in 1911. After nearly a hundred years, the vitamin 'theory' is not fully respected in medicine and science, and the germ theory continues to dominate the thinking of our entire civilization at all levels of information and education. The germ theory holds that disease is due to the presence of germs or toxins. Disease is pathology, damaged cells and tissues caused by pathogens. Treatment leans towards pharmacology and the ideal strategy in medical thinking is: "one drug for one disease." The magic bullet.

Nutrition physicians believe in physiological mechanisms, such as

- immune complement, antibody and cellular responses to kill microbes and parasites,
- lytic enzymes to remove dead and damaged cells,
- surface protection by means of mucus or rapid excretion,
- neutralizing of toxins by chemical reactions with sulfates and phosphates, and
- walling off invaders by means of fibrous tissue or waxy tubercles when all else fails.

All our defenses depend on an adequate supply of physiological molecules, nutrients. Nutrients are a means to fight back because they optimize adaptive mechanisms that have evolved over the millennia to cope with all manner of environmental stressors. Lack of even a single nutrient for long leaves one vulnerable and at increased risk of adaptive failure, disease, and death. Malnutrition is the single biggest factor in acute and chronic illness, inflammation, infection, injury, and exhaustion.

- Fasted rats die from poisons fed rats can tolerate. Glutathione declines in 36 hours of fasting.
- Zinc deprivation in pregnancy led to immune deficiency for 7 generations after in Pottenger's experiments with cats.
- Vitamin A deficient human children die from measles. Supplementation prevents death.
- Does chemotherapy kill cancer patients, especially those with anorexia, faster than the cancer does?

And then there is the matter of genetics: mutation adds another mechanism to our understanding of health and disease--biochemical individuality. Roger Williams used that term to explain the remarkable variation in reaction rates and nutrient needs already documented 50 years ago. Bio-chemical individuality was a cornerstone of Linus Pauling's explanation of the benefits of megavitamin therapies for schizophrenia. But genetic mutations were still thought to be rare at that time. At least that was the impression that he took away from his medical education. It remains a common misconception to this day.

But that is changing. Now that we have deciphered the human genome and begun to survey mutations, it is obvious that mutation is not just common, it is universal. We are all mutants! That is the basis for our individuality—our uniqueness. And that is also the reason to challenge the concept of disease as we know it. It is more accurate to refer to syndromes rather than diseases. Syndromes are symptom complexes that reflect physiological systems shaped by environmental conditions and limited by genetic chemistry. Scientific and technical advances reveal these mechanisms in ever clearer detail but the concepts and conclusions are new and tentative. Disease concepts on the other hand have developed over thousands of years, complete with their language, errors and distortions, which change reluctantly and resist new ideas. Consider the institutionalized resistance to nutrition and orthomolecular medicine, still regarded as controversial though linked from the outset to physiology and clinical empiricism, the traditional bedrock of clinical medicine.

MAIN FOCUS OF PRESENTATION

His lecture will focus on two mutations on chromosome 12 that affect production of a flavoprotein required for full utility of the vitamin, folic acid. The mutation affects the enzyme, MTHFR, acronym for Methyl-Tetra-Hydro-Folate-Reductase. Mutation of alleles 677 or 1298 has been identified by DNA testing in about 90 percent of his patients in the past two years. That is the starting point for this discussion and there are far-reaching implications. At the least it supports the use of individualized doses of nutrients, including megavitamin therapy and more respect for generous antioxidant support than is now recommended. It is predictable that once the medical world notices that MTHFR mutation affects almost all of their degenerative disease patients, they will be forced to acknowledge folic acid therapy. And that will open the door to a new respect for nutrition and orthomolecular medicine.

In conclusion, amongst chronically ill people, vitamin-related mutation is the rule and not a rarity. This discovery requires a new paradigm for medical diagnosis and therapy, including genetic testing and a practical strategy for documentation of Malnutrition, Pollution, and Stress. These

are the organizing precepts of Orthomolecular Health-Medicine.

According to Dr. Kunin the knowledge of this heretofore unrecognized genetic epidemic changes medicine as we know it. He will be elaborating on this during the presentation.

Future Speakers:

February 12 (2nd Thursday) James Wilson on Optimizing Immune Functions

March 18 (3rd Thursday) Kelly et al (Kaiser Hospital) on Theory and Practice of Accupuncture

April through December 2004 will be on the 3rd Thursday of each month.

