

## Harness the Body's Innate Healing Power

I just returned from a spring break trip to the mountains of New Mexico with my 12-year-old son. It was my first and probably last attempt at snowboarding. Even though it was my son's first time around snow, within a few minutes he was snowboard-



Dr. David Williams

ing like a pro. He was doing circles around me every time I fell. He was like a buzzard waiting to pick my carcass clean! Sadly, he didn't have to wait long.

In the beginning, there were a few times when I felt like Superman...faster than a speeding bullet. But, like a bullet, my bouts of speed typically came to an

abrupt and disastrous end. I don't remember how many times I fell, but I do vividly recall the last time.

I was facing down the mountain, and to keep from doing a total face plant on a sheet of solid ice, I raised my forearms to break the fall. A second later, any illusion I had of being "more powerful than a locomotive and able to leap tall buildings in a single bound" was shattered...along with my triceps muscle and the bony prominence of the elbow where it attaches.

I went to the emergency room, but after being told there would be a five to six hour wait, I decided to tough it out, hoping ice packs would return my softball-sized elbow back to normal. That didn't happen. After spending the night in throbbing pain, I returned to the ER the next day.

As I sat for more than four hours in an overcrowded hallway waiting to get X-rayed, I became privy to the stories of at least a couple dozen other patients. I could hear them give the details of their problems and medical histories through the "privacy" curtains. Hardly any of the people were there as a result of trauma. Instead, the vast majority were experiencing heart attacks or transient ischemic attacks (TIAs

or mini-strokes). And rarely was it their first incident.

We undoubtedly have some of the most highly sophisticated procedures for emergency situations, and for that I'm grateful. However, the stories I overheard substantiated the fact that our medical system has become more focused on treating disease than preventing it.

I realize that by the time a patient ends up in the ER, they are in need of treatment and not lectures on prevention. But after listening to their medical histories and what previous doctors had recommended, it was obvious none of these patients had been given the information, tools, or techniques to prevent future problems.

The past three or four decades, there's been a dramatic shift in the roles doctors and the medical system play in our overall health. Disease isn't prevented, it's expected. Disease isn't cured, it's managed (most often with drugs).

Americans are taking more medications than ever before. Overall prescription drug use among US adults rose from approximately 51 percent of the population in 1999 to 59 percent in 2012, and 40 percent of seniors are taking five or more drugs. There's definitely a need for medication, but

### Inside

Benefits of Ketogenic Diets.....5

Alternatives Mailbox:

Banish Brain Fog.....7

*You will observe with concern how long a useful truth may be known, and exist, before it is generally received and practiced on.*

— BENJAMIN FRANKLIN

it seems as though we're trying to solve all of our health problems with drugs while we ignore the fact that our food, exercise, and social habits have changed dramatically in the last several decades. (*JAMA* 2015 Nov; 314(17):1818–31) (*The Nation's Health* 2010 October;40(8):E37)

### Rampant Obesity

Michael Pollen, author of *In Defense of Food*, pretty well summarized the changes that have taken place in our food supply during this period of time:

*"Since 1980, American farmers have produced an average of 600 more calories per person per day, the price of food has fallen, portion sizes have ballooned, and, predictably, we're eating a whole lot more, at least 300 more calories a day than we consumed in 1985. What kind of calories? Nearly a quarter of these additional calories come from added sugars (and most of that in the form of high-fructose corn syrup); roughly another quarter from added fat (most in the form of soybean oil); 46 percent of them from grains (mostly refined); and the few calories left (8 percent) from fruits and vegetables. The overwhelming majority of the calories Americans have added to their diets since 1985—the roughly 92 percent of them in the form*

*of sugars, fats, and mostly refined grains—supplies lots of energy but very little of anything else."*

This caloric imbalance (too few calories expended for the amount of calories consumed) has caused obesity in this country to skyrocket. Since 1980, childhood obesity rates have more than tripled; in adolescents, they've quadrupled. More than 64 percent of adults in this country are either overweight or obese, with 28 percent falling into the obese category.

Obesity brings with it a corresponding increase in cardiovascular disease, high blood pressure, stroke, type 2 diabetes, gastrointestinal issues, osteoarthritis, and various forms of cancer.

Our society has become significantly less active over the past 30 years. Unlike when I was growing up, it seems that most kids these days have to be forced to go outside and play.

According to one study I read, in 1969, 48 percent of the children in this country either walked or rode their bike to school. In 2009, that number was down to 13 percent. Many kids now expect to be driven to school, but the change may also be due to schools being further away, increased crime, and heavier traffic. Surprisingly, some schools

actually prohibit kids from walking or biking.

Based on the amount of time we now spend in front of the television and computers, some experts now refer to sitting as "the new smoking," because of its negative effects on health.

### Prescription Drug Use

To add to the mess, most of the public has been brainwashed into believing disease prevention can be accomplished by taking drugs. And the pharmaceutical industry has been working with government bureaucrats to make drugs readily available to the public with little or no out-of-pocket expense.

At a time when the long-term health of this country is circling the toilet, the system has been turned upside down. I'm the first to admit that drugs can at times alleviate suffering and delay death, but they also cause plenty of both as well. They certainly don't take precedence over exercise and nutrition when it comes to disease prevention.

One of the scariest aspects of such widespread prescription drug use is the fact that all them have side effects. Some set the groundwork for other diseases, and many actually lead to death.

Practically everyone knows that heart disease and cancer are the two leading causes of death in the

### Alternatives® Author: Dr. David Williams; Editor: Larissa Long

ISSN# 0893-5025. Published monthly for \$69.99/yr. by Mountain Home Publishing at 6710-A Rockledge Dr. Ste. 500, Bethesda, MD 20817. Editorial Office: 6710-A Rockledge Dr. Ste. 500, Bethesda, MD 20817. Periodicals postage paid at Bethesda, MD and at additional mailing offices.

Postmaster: Send address changes to *Alternatives*, PO Box 11, Montoursville, PA 17754. Copyright © Healthy Directions, LLC All rights reserved. Photocopying or reproduction is strictly prohibited without permission from the publisher.

The approaches described in this newsletter are not offered as cures, prescriptions, diagnoses, or a means of diagnoses to different conditions. The author and publisher assume no responsibility in the correct or incorrect use of this information, and no attempt should be made to use any of this information as a form of treatment without the approval and guidance of your doctor.

Dr. Williams works with Healthy Directions, LLC to develop his unique formulations that supply many of the hard-to-find nutrients he recommends. Dr. Williams is compensated on the sales of these nutritional supplements and health products, which allows him to continue devoting his life to worldwide research and the development of innovative, effective health solutions.



developed world. However, most people wouldn't guess the third cause: "iatrogenic" deaths.

Iatrogenic deaths are caused by adverse drug reactions or infections acquired in hospitals. (Iatrogenic deaths may actually be the number one cause of mortality in this country since many experts say only 5–20 percent of these types of deaths are reported for fear of lawsuits. And in many cases, there aren't established medical codes for reporting deaths from drug side effects or medical errors. Also, actual figures are hard to come by since the underlying cause of many iatrogenic deaths is difficult to trace.)

Although seemingly harmless, over-the-counter medications can be detrimental to your health, too. Cold and flu meds are a prime example. If you haven't heard (and most people still don't have a clue), taking simple painkillers such as acetaminophen, ibuprofen, and aspirin to lower fever and dampen flu symptoms is now believed to cause at least 2,000 deaths each year and increase the transmission of the virus by up to 5 percent.

## The Downsides to Fighting Fever

For decades, we've been suppressing fever without truly understanding the consequences beyond the obvious alleviation of symptoms. Lowering a fever with medication has become routine and extremely prevalent in this country by both parents and doctors alike. It doesn't matter whether it's the sickest patients in the intensive care unit or a sniffing child at home, taking antipyretic

medicine has become the first line of treatment.

Even when drug treatment isn't directly aimed at lowering a high temperature, fever is still likely to be reduced since the most common medicines used to treat infectious disease symptoms contain an anti-fever component. (*Emerg Med J* 2010 Nov;27(11):829–33) (*Arch Intern Med* 2000 Feb;160(4):449–56)

The commonly held belief in medicine today is that treating a fever does *not* slow the resolution of common viral and bacterial infections. However, neither of these beliefs are true, nor have they always been accepted practice.

As far back as Hippocrates, fever was considered a natural and beneficial part of the healing process. Only in the mid-1800s, after the invention of the mercury-filled clinical thermometer, did it become commonplace to start "fighting" fevers by lowering them.

Fever starts when the immune system detects an infection and produces specific proteins called pyrogens (pyro means fire or heat). Pyrogens act on the part of the brain called the hypothalamus to raise the body temperature's set point. Our normal temperature is considered to be around 98.6° F but, with fever, it can rise to 102° or, in extreme cases, 106–108°.

Several components of the immune system work more efficiently at higher temperatures. T-lymphocytes are better able to locate and accumulate at the site of infections. Higher temperatures moderate the potentially dangerous effects of cytokines, the proteins that coordinate the immune

system's response to infections. We also know that, at higher temperatures, many forms of bacteria can't survive and many viruses find it difficult to replicate.

Researchers in London investigated the effects of fever on the bacterium that causes meningitis (*Neisseria meningitidis B*). They compared number of bacteria in the blood at normal body temperature to the number after several hours at a body temperature of 104°. The bacteria count dropped 90 percent at the higher temperature. (*BMJ* 2010 Jan 26;340:c450)

The ability of the body to lower levels of bacteria in the early stages of infection helps to determine whether the patient will recover or not. Strangely, there aren't very many studies to illustrate this point. My guess is that people have been routinely reducing fevers for more than 150 years, so few have even considered these types of studies. However, the benefits of fever haven't gone unnoticed by many doctors.

Dr. Gavin Barlow, an infectious disease consultant with the Hull and East Yorkshire Hospitals in the UK, recently reported that he was always less concerned about the outcome of pneumonia patients who were admitted with a fever compared to those without a fever. After examining the records of more than 400 patients, it was obvious that the more feverish the patient was on admission, the better their chances of survival. He discovered that, of those with an admitting temperature of below 96.8°, one-third died within 30 days of admission. However, in that same period, just 8 percent of patients with higher than normal temperatures died. And

not a single patient with a fever of 104° or higher died. After reviewing the records of patients with other non-pneumonia bloodstream infections, he found similar results. (*Clin Microbiol Infect* 2013 Oct;19(10):955–60)

In another study, researchers at the University of Miami stopped a clinical trial of 82 critically ill patients who were randomized to get either the standard treatment of fever-reducing drugs if their temperatures rose above 101.5°, or only if temps reached 104°. As the study progressed, there were seven deaths in the standard treatment group but only one among those allowed to have fever. Although it was a small study, the researchers felt the benefits of allowing a fever to run its course naturally were so dramatic that they couldn't risk more deaths by continuing to give the other patients fever-reducing drugs. (*Surg Infect* 2005 Winter;6(4):369–75)

### Fever as Cure

In the late 1920s and 1930s, there was a great deal of success using pyrotherapy—fever as cure. Inducing fever was common practice, for patients with syphilis in particular. Before the development of antibiotics, syphilis was a potentially fatal disease and there weren't any other viable treatments other than artificially induced fevers. Doctors in this country had cure rates of about 80 percent using Kettering hypertherms (cabinets with hot air blowers) that raised the body temperature to around 105°. They found that keeping the body at that temperature for five hours could

stabilize syphilis. Permanent recovery required 50 hours or more.

Around the time pyrotherapy was gaining ground in the late 1930s, antibiotics came on the scene. Pyrotherapy became nothing more than a historical footnote and everyone went back to treating fevers instead of letting nature run its course.

I'm not suggesting that all fevers are good. A high temperature after a head injury or stroke can be harmful to the brain due to an increase in inflammation and the release of additional free radicals. Rather, the problem stems from assuming all fevers are bad and need to be treated. Again, at higher temperatures, both bacterial and viral replication is less efficient and our immune systems operate more efficiently.

And there is another factor that is often overlooked. Fever suppression increases the rate and duration of what is called viral shedding. Shedding refers to release of new viral progeny following successful reproduction—an “active” time when the disease is most contagious. Longer shedding time, combined with feeling better after taking fever-reducing meds, contributes to spreading the infection when people return to school or work while they are still infectious. That's why researchers are now estimating that the use of painkillers to treat the flu increases its transmission by 5 percent. It stands to reason that similar transmission increases would occur with other pathogens and contribute to epidemics.

### Immunotherapy

You've probably read about the health problems former President

Jimmy Carter has experienced as of late. At age 91, his melanoma cancer had spread to his liver and brain. But last December, he announced that he was cancer free after taking a newly approved immune-stimulator drug (pembrolizumab, sold as Keytruda). It's the first drug that treats melanoma that has spread.

Unlike chemotherapy and radiation, which kill normal cells along with cancer cells, researchers are focusing on ways to stimulate the immune system to kill just cancer cells and leave normal cells unharmed. Merck's drug Keytruda was used in conjunction with radiation in Jimmy Carter's case, but the side effects were reportedly very mild compared to chemotherapy. While he is not officially cured, at this point there are no signs of any residual cancer. He will continue to undergo drug infusions every three weeks at a cost of \$12,500 per month, or \$150,000 a year. No one is sure how long patients need to continue taking the drug.

Keytruda may be effective in treating other types of cancer as well. There are more than 160 clinical trials underway involving 30 different types of tumors. Melanoma is the cancer with the greatest response so far, with some tumors disappearing within weeks. It was fast-tracked by the FDA after the initial positive results. Some patients have returned to normal lives, cancer free, after being told they only had weeks to live.

What hasn't been reported widely, however, is the fact that these new cancer treatments rely on gut bacteria to help stimulate the immune system to kill the cancer cells. If a patient is given antibiotics prior to taking

these new cancer drugs, they don't work at all. (*Science* 2013 Nov;342(6161):971–6)

The same thing has been found to happen with other cancer drugs. In animal studies, the cancer drug cyclophosphamide was able to stimulate the immune system to specifically attack cancer cells and prolong life, but it didn't work at all when animals were given antibiotics prior to the treatment. (*Oncoimmunology* 2014 Jan;3(1):e27574) (*Science* 2013 Nov;342(6161):967–70)

The research shows these drugs require and rely on commensal gut bacteria to stimulate the immune system. And some of the newest research has demonstrated the underrated, positive influence that probiotics have on immune system

function in regards to actually treating and preventing cancer.

When researchers gave animals the *Bifidobacterium* species of bacteria (the same type I make sure my own probiotic formulation contains), they found that they were as effective as the immunotherapy currently used to control skin cancers. When it was combined with drugs that stimulate the immune system, many of the cancers were cured. (*Science* 2015 Nov;350(6264):1084–9) (*Science* 2015 Nov;350(6264):1079–84)

Immune-stimulating drugs, particularly in the treatment of cancer, are a primary area of focus right now. Working with the body's own innate ability to heal itself has proven to be far more effective and less risky. It's always been an underlying tenet of almost all disciplines of natural health care,

and enhancing the effects of the immune system certainly isn't a new concept. Research has shown it's exactly why natural products like the mushroom extract called active hexose correlated compound (AHCC) or ImmPower is starting to be used as an adjunctive cancer treatment.

Drugs certainly have their place. In many instances they are nothing short of lifesaving. However, they need to be used far more judiciously. The list of problems associated with prescription and over-the-counter drugs just continues to grow. At the same time, each new generation becomes increasingly more dependent and complacent about the use of "preventive" pharmaceuticals. ■

## The Benefits of Ketogenic Diets

There has recently been some very interesting and useful research on ketones and ketogenic diets.

Our cells typically get their energy from glucose, which comes from the carbohydrates we consume. When glucose isn't available, though, our liver breaks down fat into fatty acids and ketones, and the body burns ketones for energy.

You've probably heard about how ketogenic diets (which emphasize high fats, very low carbs, and adequate protein) reduce seizures in individuals with epilepsy. They began being used back in the 1920s but have fallen in and out of popularity since that time.

Most often, the diets are given to children who are unresponsive to conventional medications. In many cases, they have been very effective. The research indicates that about 2/3 of those with severe epilepsy who follow the diet have at least a 50 percent drop in number of seizures. And in some instances, they can gradually wean off the diet and still retain the gains. That's welcome news because one of the biggest problems with a ketogenic diet is that it's difficult to sustain for long periods of time.

### Crazy for Coconuts

Until just recently, it wasn't understood exactly how ketogenic diets stop seizures. Even when

there are high blood levels of ketones, seizures didn't necessarily stop. New research has revealed that the saturated fatty acid called decanoic acid appears to bind to specific nerve receptors and inhibit excitatory nerve transmission, which stops the seizures. (*Brain* 2016 Feb;139(Pt 2):431–43)

This may sound too technical until you understand that decanoic acid is also called capric acid, the fatty acid that's abundant in coconut oil and palm kernel oil. Capric or decanoic acid is responsible for the many health benefits bestowed by coconut oil.

Capric acid is also found in cow's and goat's milk. It provides



that amazing fatty flavor you find in butter and the heavy cream of cow's milk (now separated from whole milk and sold as heavy whipping cream). I love the taste of it. It's used to add flavor to other creams and products like milk chocolate, caramel, toffee, cheese, and even whiskey.

Even though capric acid looks and behaves like a saturated fat, it is actually a medium chain triglyceride (MCT). Chemically, MCTs resemble carbohydrates more than fats. This makes them easier to digest, absorb, and be utilized as energy. Although capric acid isn't an intense "fat burner" like many have professed, it does slightly increase your metabolic rate. It really shines as a source from which your body can produce ketones, giving the brain and nervous system an alternative energy source to glucose. This is important since we all start to develop some degree of insulin resistance as we age.

You won't find many (if any) long-term, extensive studies on coconut oil or decanoic acid because there's no commercial incentive to do so. Researchers have not been willing to spend millions of dollars because there's so little hope of recovering their investment. Plus, coconut oil isn't something that can be patented. I would expect to see some decanoic acid-containing products being touted, however, based on the above studies. It has already been shown that seizures in mice can be reduced by directly feeding them decanoic acid. If those with epilepsy could get the same benefits from such a product,

rather than a strict ketogenic diet, it would be a huge step forward.

### Neurological Conditions, Cancer, and More

On a similar front, other researchers are examining the use of coconut oil for Alzheimer's, Parkinson's, and Huntington's diseases, multiple sclerosis, ALS, and other neurological conditions. Dr. Mary Newport, a neonatologist in Florida, has written a book (*Alzheimer's Disease: What If There Was a Cure? The Story of Ketones*) about the improvements her husband experienced with Alzheimer's after just taking two tablespoons of coconut oil daily.

Some of the most exciting research on ketogenic diets has to do with cancer. Cancer cells are different from normal body cells. Unlike other cells, they derive almost all of their energy from glucose, and they do it very inefficiently. They don't have the ability to switch their fuel needs over to burning ketones. That's why it's often said that "sugar feeds cancer." Knowing this, and the fact that strict ketogenic diets have been shown to effectively influence neurons in the brain, researchers have been testing the effects of ketogenic diets in combination with radiation on aggressive and deadly malignant gliomas (brain cancers). So far, the studies have focused on animals, but there are a few documented cases of individuals who have successfully defeated their brain cancer using this combination.

Dr. Adrienne Scheck at Barrow Neurological Institute in Phoenix, recently published an extremely

promising animal study. (*PLoS One* 2012;7(5):e36197)

Dr. Scheck and her colleagues discovered that mice fed a ketogenic diet had an average survival of five days longer compared to those on a standard diet. Of the 11 mice that were fed a ketogenic diet and given radiation, nine survived without any signs of tumor recurrence, even after they were switched back to standard food for 200+ days. None of the mice on the standard diet/radiation regimen survived more than 33 days.

They are doing further testing, but so far have found that a ketogenic diet affects tumors in several ways. Since the tumor cells are unable to utilize ketones for energy, they are starved, which stunts their growth and improves the survival time of the patient.

Cancer cells have a high rate of metabolism, which creates far more free radicals than normal tissue metabolism. They quickly adapt to free radicals, making them more resistant to treatments like chemotherapy. A ketogenic diet slows their energy use and free radical production, reducing the amount of free radical exposure they are normally used to. This seems to enhance the effects of chemotherapy and radiation.

A ketogenic diet also affects the genetic expression in tumor cells so that it is more like the genetic expression of normal cells.

Once again, the primary downside of the diet is that it is very difficult to maintain and it requires total compliance and careful monitoring. I was reading the story of one patient in the UK who started the ketogenic diet after learning he

(continued on page 8)



## Alternatives MAILBOX

### Banish “Brain Fog”

**Question:** For the last couple of years it seems like my brain is in a fog. I often go from one room to another and then can’t remember why I went there. I’m forgetful about simple everyday tasks and have a hard time concentrating on anything. I know something is wrong, but I don’t know what. Do you have any thoughts or suggestions?

— Kelly J., Phoenix, AZ

**Answer:** I’ve heard very similar descriptions hundreds of times from others. The good news is that you aren’t losing your mind and the situation is correctable. More often than not, instances of brain fog can be attributed to a thyroid that is out of balance and underactive.

#### Brain Cells 101

The brain is made up of two types of cells: neurons and microglia cells.

Neurons are responsible for the transmission of impulses and all of the things we associate with brain activity such as intelligence, directing muscle movement, heart activity, digestion, etc.

Microglia cells are the brain’s immune cells that destroy pathogens, clean up debris and dead cells, etc. Unlike the immune system of the rest of the body, there are no T-suppressor cells to modulate or dampen microglia cells when they initiate an inflammatory response to invading pathogens.

Thyroid hormones are what dampen any overactivity of the microglia cells. With an underactive thyroid gland, fewer thyroid hormones are being produced, resulting in inflammation and even degeneration in the brain.

#### Broda Barnes Temperature Test

There’s a very easy technique to screen for an underactive thyroid. It is called the Broda Barnes thyroid temperature test. Here is how you do it:

1. At night, shake down an old-fashioned mercury thermometer to at least 96° F and place it on your night table.
2. First thing in the morning before getting out of bed, tuck the thermometer in your armpit and lay very still for 10 minutes. (Men and premenstrual and perimenopausal women can take their temperatures on any day of the month. Women in their menstrual years get the most accurate reading on the second or third day after menstrual flow starts.)
3. Record your temperature for a couple of days.
4. Normal axillary temperature should be between 97.2° and 98.2°. If your thyroid is underactive, your temperature will typically be one to two degrees below normal.

If you don’t have a mercury thermometer, an oral digital thermometer under the arm would work, too. But for this particular purpose, I don’t recommend the ear or infrared forehead-scanning thermometers.

#### Balancing the Thyroid

I have used two products with amazing success to help restore normal thyroid function. The first is called Iosol, a liquid iodine from TPCS Distributors (one drop a day). The second is a glandular product called Thyrophin from Standard Process Laboratories (three tablets daily on an empty stomach).

Within a week or less, one of the very first comments usually made by someone taking either of these supplements is “the fog has cleared.” Along with no more brain fog, don’t be surprised if you also experience an increase in energy and a significant improvement in mood.

I also suggest that you make sure your intestinal flora is in balance. Start including fermented foods in your diet and take a quality probiotic every single day. The bacteria in your gut help convert the thyroid hormone T4 to T3. This conversion process in the gut can account for as much as 20 percent of your thyroid function and is definitely a factor that shouldn’t be overlooked. I suspect that a chronic imbalance of the gut microflora is one of the reasons we have an unrecognized epidemic of hypothyroidism in this country. The overuse of antibiotics and other drugs that I talked about earlier is obviously contributing to this problem. ■

had very aggressive brain cancer. Even following the gold standard treatment of surgery followed by chemotherapy and radiation, at best his prognosis was 15 months.

He cut his carbohydrate intake down to less than a single gram a day and started eating lots of oily fish, animal fats, and insect flour, all of which are practically carbohydrate free and rich in fat and protein. To ensure he was getting the micronutrients he needed, he added local organ meats and ordered insects online (pounds of lamb hearts and crickets typically sold in pet stores as reptile food). The highly regimented diet requires that roughly 80 percent of the caloric intake come from fat, less than 1 percent come from carbohydrates, and the remainder from protein. Consuming just a few carbohydrates, such as a small piece of bread, could switch the body back to glucose as an energy source and feed the cancer.

Three years later, there are no traces of the tumor. Even still, he plans to continue on the diet.

Dr. Scheck is designing a two-year study, which will involve 40 to 80 brain cancer patients. The hard part, besides finding enough patients willing to undergo the misery of the diet added to the horrendous side effects of chemo and radiation therapy, will be trying to sort out exactly what part of the therapy is responsible for any results. If it's successful, I'm sure there will be follow-up studies, of which I'll keep you informed.

Currently, decanoic acid isn't readily available as a standalone product. However, the richest

source of capric acid is coconut oil, which contains 10 percent.

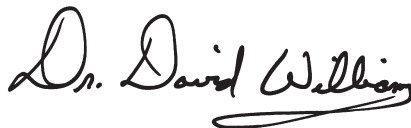
Palm kernel contains 4 percent. But I don't recommend using it since, unlike palm oil, it has to be extracted from the pit using industrial solvents.

(As a side, in the early days, newly discovered compounds were named based on their source. Capric acid came from dairy fat and was found in goat's milk. It was named after caper, which is Latin for goat. Later, a systematic way of naming organic chemicals was established, based partially on the number of carbon groups in the compound. Capric acid is also called decanoic acid because it is a 10-carbon chain fatty acid. Deca means 10.)

When you see negative studies on coconut oil, they invariably involve the use of hydrogenated oils. So, if you want to include coconut oil in your daily program (which I highly recommend) make sure it is natural, cold-pressed, virgin, and non-hydrogenated.

\* \* \* \* \*

That's it for this month. After several hours at the keyboard, my arm needs a rest and an ice pack. I'm going to head for the back porch, elevate my arm, open a cold beer (one of the very few ambidextrous skills I seem to have mastered), enjoy a Texas hill country sunset, and count my many, many blessings.



## This Month Online



Visit my website at **drwilliams.com**, where you'll find information and recommendations for many of your top health conditions, including:

- *Strengthening Immunity*
- *Hiatal Hernia, GERD, and other Digestive Concerns*
- *Cognition and Brain Health*
- *Weight Loss*

Stay in touch between newsletter issues by signing up for my weekly Health E-News. Simply visit **drwilliams.com** and submit your email address.

You can also read articles on a variety of topics of interest to you. Here are just a few of those:

- *A Self-Test for Cognitive Impairment*
- *Lower Blood Sugar Naturally*

**Remember, you can read current and past issues of *Alternatives* when you create or access your account at **drwilliams.com**.**

## Contact Us Here

- To submit a Mailbox question, suggest an article topic, or make a comment about this month's issue, email **feedback@drdavidwilliams.com**.
- For customer service matters such as address changes, to renew your subscription, to order back issues or reports, or to sign up a friend for *Alternatives*, call 800-527-3044 or email **custsvc@drdavidwilliams.com**.