

What Your Doctor Won't Tell You About

HEART ATTACKS

STROKES

HYPERTENSION

*Learn about the CHOLESTEROL SCAM
That Has Bilked The World!*

*Learn why the HIGH BLOOD PRESSURE
MEDICATIONS YOU ARE TAKING ARE
KILLING YOU!*

*CLOTS CAUSE Heart Disease and Stroke.
Cholesterol Does NOT!*

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Published By:
The Donsbach Foundation
1-619-424-9005

CONTENTS

SOMETIMES WE JUST NEED A LITTLE TIME	1
CHOLESTEROL	
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INTRODUCTION	4
WHY AMERICA WORRIES ABOUT CHOLESTEROL	6
CHOLESTEROL – A HISTORY	8
THE FRAMINGHAN STUDY	11
MORE CONTRARY EVIDENCE	13
THE IRELAND-BOSTON STUDY	20
THE MALHOTRA STUDY	21
TWO DANGEROUS CHANGES	22
THE POWER OF ANTIOXIDANTS	23
HOMOGENIZATION OF MILK	30
WHAT EXACTLY IS CHOLESTEROL?	32
THEN WHY...?	33
LOW BLOOD CHOLESTEROL - A BAD IDEA	35
THE DANGERS OF STATINS	36
LOW LEVELS OF CHOLESTEROL AND STROKES	40
OTHER CULPRITS	41

MYTHS AND TRUTHS ABOUT CHOLESTEROL	42
AGAIN...THEN WHY?	53
BLOOD PRESSURE	
<hr/>	
MAJOR MISDIAGNOSES	57
BLOOD PRESSURE? REALLY?	59
CONDITIONS THAT AFFECT BLOOD PRESSURE	61
OVERCOMING STRESS	66
HOW TO STOP SMOKING	67
A SODIUM CHLORIDE SUBSTITUTE	69
ASSISTING THE KIDNEYS	69
OVERCOMING LIVER CONGESTION	71
ATHEROSCLEROSIS & ARTERIOSCLEROSIS	72
REMOVING TUMORS	74
ANOTHER LOOK AT SALT	74
POTASSIUM FOR HYPERTENSION?	79
URINARY POTASSIUM INVERSELY PROPORTIONAL TO BLOOD PRESSURE	81
DIURETIC USE MAY RESULT IN TOTAL BODY POTASSIUM DEPLETION	83
CALCIUM SUPPLEMENTATION EFFECTIVE IN HYPERTENSION	84

MAGNESIUM – AN OVERLOOKED FACTOR	89
MAGNESIUM – MORE EVIDENCE	93
CLINICAL SIGNIFICANCE OF DIURETIC-INDUCED MAGNESIUM LOSS	95
FUNCTIONS OF MAGNESIUM	97
MAGNESIUM DEFICIENCY SYMPTOMS	97
MAGNESIUM AND CARDIAC DYSRHYTHMIAS	99
MAGNESIUM DEFICIENCY AND DIGITALIS	101
DIURETICS – POTASSIUM SUPPLEMENTATION	102
MAGNESIUM AND ARTERIAL HYPERTENSION	104
THE DANGERS OF DRUG TREATMENT	105
NOTHING MORE DANGEROUS THAN DIURETICS	107
AN ALARMING STUDY ON DIURETICS	108
BLOOD PRESSURE MONITORING AT HOME DURING PREGNANCY	110
ALCOHOL AND BLOOD PRESSURE	111
WHAT DOES SIMON SAY?	112
A STEP-BY-STEP APPROACH FOR PREVENTION	116
MEDICINE IS A “PRACTICE”	117
STROKES	
<hr/>	
THE TRUTH ABOUT STROKES	122

HEART DISEASE AND STROKES	124
DIRECT CAUSE OF DEATH	124
HOMOGENIZATION OF MILK	126
FLOUR - WHITE OR WHEAT?	127
GARLIC AND ONIONS	128
MAGNESIUM	129
SECTION SUMMARY	132

HEART DISEASE

HEART DISEASE	133
THE BEGINNING OF CARDIOVASCULAR DISEASE	134
T CELLS	135
WHAT ABOUT PREVENTION?	136
CONSTIPATION	137
CHEMICAL ADDITIVES	138
EGGS -BETTER THAN WE THINK	138
THE DANGER OF SUGAR	139
OTHER THEORIES	140
THE EXERCISE FACTOR	143
THE SIMPLICITY OF CHELATION	145
LIFESTYLE AS A FACTOR	146

SOMETIMES WE JUST NEED A LITTLE TIME

The mind often works with surprising efficiency when we are trying to solve problems. Sometimes it gives clarity, when we've let go of a particular problem or issue. At other times, it works best when we just get a little time to ourselves without interruption. It was during one of those times, on an 18-hour return flight from northern Europe. I had just finished a very satisfactory series of lectures in five different countries, and now I was able to really coalesce my understanding about cholesterol, heart disease, and strokes. Here is what I know and what every cardiologist also knows or should know.

1. Plaque does not occur in the veins. Why?
2. The same cholesterol that flow through arteries flows through veins.
3. Plaque is made up of minerals, lipoproteins, cholesterol, triglycerides and other blood vessels that do not stick to the wall of the, but were trapped in a semi-fluid mass caused by an injury to the wall of the blood vessel.
4. More than 50% of all bypass surgery patients have normal or below normal cholesterol levels.

5. Lowering cholesterol does not lower death rates from heart attacks or strokes.
6. Consumption of low fat foods damages arteries.
7. Cholesterol is an extremely important and life sustaining substance for the following reasons:
 - a. It converts sunlight to vitamin D.
 - b. It is the basis of sex hormones and all other hormones
 - c. It insulates nerves.
 - d. It is the largest single component of the brain.
8. There is no such thing as “bad cholesterol.” Recent findings show that LDL levels of cholesterol are not a reliable indicator of heart disease.
9. Plaque very rarely, if ever, occludes a blood vessel.
10. The basis of 85% of all heart attacks and strokes is a clot.
11. The other 15% are caused by arterial spasms or cramps due to a lack of magnesium.
12. To avoid heart attacks and strokes, we must do two things:
13. Prevent the injury to the wall of the artery.

-
14. Prevent clots.
 15. Why do we only hear about lowering cholesterol when it is abundantly evident that cholesterol is not the instigator?

It is illegal to kill yourself in a quick and painless way, but if you do it slowly, over a few decades-say, by not exercising –that’s called laziness, not suicide and is completely legal. You might even get credit for being jolly or get a job as a TV chef on a cable network. Then when you die thirty years ahead of the average life expectancy, your obituary won’t say, “Man dies of laziness.” It will say, “Beloved TV chef succumbs to heart failure. He was removed from his bed with a crane.”

Dilbert and the Way of the Weasel, Scott Adams

INTRODUCTION

Check almost any aisle of any grocery store and you will find dozens, if not hundreds, of foods that are said to be low in cholesterol, and are therefore “better” for you. Margarine, for example, is said to be safer than butter. Eggs are said to be bad for you, but fortunately there are egg substitutes. As we’ve all been told, cholesterol is bad for you. So, if you reduce your cholesterol by consuming the low-cholesterol products, so the argument goes, you are taking better care of yourself and will live a longer and more healthful life.

There are, however, some important questions to ask:

1. Is the popular knowledge about cholesterol true?
2. Will reducing cholesterol really reduce your chances of heart disease, strokes, and high blood pressure?
3. Are there really such distinctions as “good” and “bad” cholesterol?
4. Are foods such as eggs and butter high in cholesterol and therefore bad for you?

The answers to these questions might lead to some other questions.

1. Is it possible that reducing cholesterol levels may not be helpful, but in fact harmful?
2. If cholesterol sticks to the arteries, in the form of plaque, which would then lead to inflammation and then coronary heart disease, then why doesn't it also stick to veins?
3. How much of what we believe about cholesterol is based on actual research and how much is based on what has been claimed by others? And are those claims scientifically verified by hard evidence? And what about the research that says otherwise?
4. What about research that says cholesterol is actually good for you and may even help fight cancer?
5. If cholesterol is bad, then why is it produced naturally in the cells?
6. Can the foods we've been avoiding actually be better for people than we've been told? And equally important, are the substitutes for those foods actually more dangerous?
7. What motives would scientists and

pharmaceutical companies have in keeping the truth from the public?

Cholesterol has been touted as one of the major health villains for the last half century. If it is really as harmful as popular knowledge would have us believe, then we need to do everything within our power to reduce or avoid it. However, if what we've been told is erroneous or misleading, and cholesterol happens to be an "innocent bystander,"¹ we need to know the truth.

WHY AMERICA WORRIES ABOUT CHOLESTEROL

America (and much of the western world) worries about cholesterol because medical experts have been telling us how bad it is for people. This knowledge has trickled down to the general populace, which believes that all cholesterol is bad. Emily Kane, N.D. says, "Cholesterol levels have become the source of much national fear, even though cholesterol is one of the most valuable substances in the human body. Cholesterol is needed for strong cell walls, as a precursor for hormone production, and as a coating around nerves, to name just a few of its very important functions."²

Those having regular medical checkups are told that there is actually “good” and “bad” cholesterol and the goal is to keep the good and lower the bad. However, according to the American Heart Association, “Only 50 percent of men and 68 percent of women recognize regular medical checkups as important to staying well.”³ This means that about half of all American men and about a third of all American women get regular medical checkups and so may not even know that there are such distinctions in cholesterol.

Either way, what most people believe is the popular knowledge: Cholesterol is bad for you. More specifically, what people are told is that too much cholesterol in the blood, also known as Hypercholesterolemia, can lead to heart disease, heart attacks, and strokes. The cholesterol that does not come from your body comes from animal products such as meats, eggs, and dairy products. Foods that contain trans fats or saturated fats, junk foods or processed foods, can also raise your cholesterol levels. So the ideal lifestyle is to eat and live in such a way that keeps your cholesterol at a safe level. The best way to do that is to avoid foods that are “high in cholesterol,” according to

the “experts.”

Avoiding high-cholesterol intake and changing lifestyles and eating habits translates into a billion dollar industry of foods, diets, health plans, and most (and worst) of all, medications, all designed to lower cholesterol.

CHOLESTEROL – A HISTORY

Cholesterol first became an issue to scientists in 1958, when Ancel Keys, of the University of Minnesota published the Seven Country Studies. (An interesting man, Keys, in addition to being the nephew of the actor Lon Chaney, also developed the infamous but life-saving K-rations for soldiers during WWII.) His defining challenge was to understand why the death rate from Coronary Heart Disease (CHD) in the United States was four to five times higher than in Italy. Thus motivated, Keys studied 16 communities throughout the United States, Japan, Italy, the Netherlands, Finland, Greece, and Yugoslavia. Studying only men, to avoid any cultural or personal offenses, the work took decades. Some of the groups observed were railroad workers in the United States, Serbians in Yugoslavia, Communist farmers in Italy, and