

# Physica Radio Field Notes

## Dr. Stephen H. Atkins

Well, Good afternoon everyone! It's Wednesday, it's lunchtime and that means it's time for 'Field Notes'. My name is Dr. Stephen Atkins and as you all know I am your host for this weekly recurring lunchtime segment. It's great to be here and thanks for all tuning in.

Before we start today, I just wanted to mention the *RCCP*<sup>TM</sup> and the relationship of the *Hypo Zymase* (digestive enzyme) to that program, which I spoke about in my presentation last week.

I wanted to clarify that the *Hypo Zymase* is NOT part of the *RCCP* program. The reason being is that *Hypo Zymase* isn't necessarily designed to work at the level of cellular communication restoration. That is definitely accomplished with the *CataZyme-7*. Remember, all the products in the Restoring Cellular Communication Pathways<sup>TM</sup> program are designed to work synergistically together to restore communication between the cells and the deeper levels of the extra cellular matrix (ECM).

*Hypo Zymase* is more often used in the next phase of restoration for example, when we are looking to fortify the adrenals, the liver and gall bladder (biliary tree).

However, we do have patients that really do need HCl and small intestine digestive support.

And this is the beautiful part....you can use *Hypo Zymase* in CONJUNCTION with the *CataZyme-7* in the *RCCP* for this purpose.

So just to keep this straight, you are using the whole *RCCP* program and adding in the *Hypo Zymase* to extend its therapeutic reach. Let me tell you how this works.

As I have mentioned, a high percentage of our patients are lacking in HCl. *Hypo Zymase* is exactly right for them. Remember *Hypo Zymase* is not just HCl. It's dual phasic. The first phase is designed to work at the gastric level utilizing the proper ratios and proportions of betaine HCl, glutamic acid, pancreatin, papain, pepsin, amylase and protease. And it does this without burning or creating a dependence, like the straight forms of HCl more often do. The 2<sup>nd</sup> phase is directed to work specifically with the duodenum through the application of proportional and ratio correct ingredients. Listen to this: lipase, bromelain, bile salts and organic, bitter botanicals; fenugreek, gentian and ginger. I always dose this with meals. So have your patients take this with their meals.

Now here is the cool part; when you are including Hypo Zymase with meals along with the *RCCP* program, many of us have been dosing CataZyme-7 between meals to reduce inflammation in the GI tract. It has anti-inflammatory properties, right? It also tonifies the entire digestive tract. Very important!

Today I want to talk about an interesting article that was brought to my attention to do with the use of omega 3 fatty acids and prostate cancer. This article was in the journal of the National Cancer Institute on July 10<sup>th</sup> 2013 entitled, '*Plasma Phospholipids Fatty Acids and Prostate Cancer Risk in a Select Trial*'. Now I don't know about all of you, but I love to read medical journals. We all need to stay current! Dr. Cass and I were actually talking about this article just the other day and we both said that of course, this "study" is fundamentally flawed for several reasons. One reason is that the "study" was based on a single blood test on plasma fatty acids with a group of about 834 men who were followed for six years to assess their prostate cancer risk. The risk was outlined as from low to high grade disease. And there was also a smaller group of 75 men who were followed for nine years assessing only high grade cancer risk. The results showed that slightly higher omega 3 plasma percentages from the single blood test, were associated from the greater risk of low grade and high grade prostate cancer over a multi year follow up and this turned into

blaring news stories that 'omega 3 fatty acids may raise prostate cancer risk!' Well, you know anything could be further from the truth! What was omitted during the media frenzy was the fact, that this study was not about fish oil supplement users and the authors actually admitted that they did not know how the study participants achieved (what turned out to be) a very low omega 3 plasma percentage in the group.

In fact the omega 3 fatty acid levels of the plasma were only about 40% of what would be expected in health conscious people taking the proper fish oil dose. Interestingly enough, the insignificant levels of plasma omega 3's in all of the study subjects were overlooked by the media. They constantly do this. Do you think there's another agenda here or what!!

Had these very low plasma levels of omega 3's been recognized, it would have been apparent that this report had **no meaning** for those who boost their omega 3 consumption through diet and supplements. But it caused a media frenzy in the attempt to validate the falsehood that if you take fish oil it is going to increase your risk of prostate cancer. This brings me into the great topic of essential fatty acids.

Here's a clinical pearl for you. Anyone with a PSA (Prostate Specific Antigen) over 1.0 can be seen as having prostatitis. Typically speaking the blood value of PSA is .0-4. Two fantastic remedies that I use for this are the *Artemisia Intrinsic* and the *Juniper*

*Intrinsic. Artemisia Intrinsic* contains wormwood in a causal chain base and has been used as a powerful tool to rid the body of pin worms, round worms and other parasitic infections for a long, long time. *Artemisia* is 100% effective against malarial infections also, so if you have a patient who has the ill fortune to develop malaria, get them on very high doses of *Artemisia Intrinsic*. AND it is specific as a prostatic anti-inflammatory.

*Juniper Intrinsic* is great! Listen to what causal chain ingredients it contains: Buchu is anti-spasmodic; Juniper is anti-septic and breaks down calci in the urinary tract and prostate; Pygeum used traditionally to manage benign prostatic hypertrophy (BPH); Nettles for urinary detoxification; Saw Palmetto – specific to BPH as it blocks the formation and binding of DHT receptor cells; Sarsaparilla for sexual impotence; Muira puama bark which is an Amazon botanical used as a central nervous system tonic and for sexual impotence; at last but not least, Pumpkin seed which is high in prostate specific zinc. Pretty amazing. And it works great.

So any time I have patients with a high PSA or either erectile dysfunction, it is usually due (in my opinion) to a parasitic infection or viral, bacterial or heavy metal toxicity. And it may even be that the patient has liver flukes and they make their way to the prostate. That's a common pathway.

Men have a big fear about having an elevated PSA and they really don't need to when there is a very, very simple solution for that problem. I have probably used *Artemisia Intrinsic* and *Juniper Intrinsic* on about 40-50 patients who had prostatitis and they have all brought their PSA's down under 1. Of course you'll want to check for the deeper issues as I indicated. Typically you'll add *Bio-Omega 3*, *Olive Leaf Intrinsic*, *Drainage Milieu*, *Mycelia Intrinsic* and possibly *Adrenal Life Force* and *Licro Intrinsic*. If there are metals you'll want to check the teeth. Particularly the upper and lower front 4 teeth as they are related specifically to the prostate. Root canal teeth especially, as cadmium is an antagonist to the prostate! *Dental-Tox* to the rescue! Fungus problems: add *Myco-Tox*. Candida problems add: *Can-Tox*.

Oh and don't forget the *GREEN LIGHT!!!* We're going through tons of this. In fact, this is fast emerging as a silver bullet for most of the conditions I treat. Read up on it and get yourself on it... and your patients too... but YOU GET ON IT!! Not just for prostatitis of course....

Now, you know when it comes to *prostate cancer*, prostate cancer is a very slow developing malignancy that can actually take decades to manifest as a clinically relevant disease. PSA has been used as a marker for that, however, there is more than just some controversy as to the accuracy of PSA. Regardless, big risk factors for prostate cancer are factors like diet for

instance. It's the number 1 important thing! Body mass, race, family history, the hormone status of the patient and of course, age, etc, are also factors to consider. You may not know this but the unrecognized risk factor with prostate cancer is *coronary heart disease*. It has been found that people who have prostate cancer often have clogged arteries and people who have clogged arteries often have prostate cancer.

As we know coronary artery disease is clearly linked with *osteoporosis* and also a lack of Vitamin K which prevents the calcium binding to the bone. Instead it is allowed to infiltrate and harden in the arteries and then the ensuing bone loss would result in an excessive release of bone derived growth factors. That in itself may be what fuels prostate cancer and assists its propagation and metastasis.

So fortunately we all have tools in our arsenal that can help this, especially when it comes to bone loss. I mean I love the *Solray-D Liposome Spray*. I sell a ton of this in my practice! As most of you know, Dr. Cass has put Vitamin K2 in the *Solray-D Liposome Spray* which will actually push calcium out of the arteries back into the bones. It is a great supplement that I use not only adjunctively with cancer patients, but also as a preventative for osteoporosis and bone loss. In fact it is a very specific and potent anti-viral remedy!

I try to get the Vitamin D levels in my patients to over 70 (I even like it up near 100). The only contraindication with that is that sometimes people think high levels of Vitamin D can cause bone loss, or hypocalcaemia. It actually can, but as I stated before, Dr. Cass has put in the Vitamin K2 MK-7 which actually shuttles calcium out of the arteries and back into the bone! So you don't have to worry about that mitigating circumstance when you use the *Solray-D Liposome Spray*.

You know I had a patient that came to me last week from Nicaragua who was suffering from colon cancer, asking my opinion about options. He'd had his diseased colon resected and now he just wanted to get his life back into balance. And as you all know, I see a lot of people with cancer, I don't treat cancer, but I just put the body back into balance and then the body does what it needs to do to rectify and balance the situation.

So this fella came to me and I tried to explain to him that cancer is a systemic illness that affects the entire system and just 'cause you take the offending organ out doesn't mean that the disease process is gone. We talked about a number of different options and one of the things I counselled him about is how cancer or any metabolic syndrome has at least a viral, a fungal and a bacterial component. I told him that once we got his body back in balance with the *RCCP* and once we'd balanced his liver and adrenals and got his

biliary tree sorted out, we could then get in there and start using some of the homaccord detoxifiers to balance out that system to remove the obstacle to cure.

As a quick aside; if your patient has an irritated bowel as in IBS/IBD, you may want to hold off using the *Nat Colon CLR* for a while. Do, however, increase the *CataZyme-7* or *CataZyme-U* and the Flora Syntropy as the need will be greater for these remedies. Also, as an aside regarding IBD/IBS, you'll want to check the *IBD-Tox* and look for bacteria, parasites, mycoplasmas and the para-tuberculinum signatures, which are almost always there in these cases and in Crohn's.

Having said that, I have used the *Nat Colon CLR* on patients with severe IBD and IBS to great advantage. Why would that be? Well first there aren't abrasive factors like psyllium husks in the *Nat Colon CLR*. And secondly, the biodynamically grown botanicals are designed to feed, nourish and decongest the colon – not force it to evacuate!

Where there have been reactions to the *Nat Colon CLR* in an irritated bowel situation, it almost always had to do with accompanying other long standing complications. The vast majority of the time you're going to be fine using it, however if there is IBS or IBD, etc, you'll want to monitor it.

Some docs have felt they didn't want to use the *Nat Colon CLR* as there patients were having regular bowel movements. That's

understandable. However, insofar as restoring the cellular communication pathways is concerned, it is an important feature in the program. Just dose it very low. But use it, as we still need to keep the peristaltic action in sync with the shifting terrain.

Remember this: this elegant little program not only serves our patients' biochemistry well, it also saves them a ton of money down the road. "At first do no harm".....to which Dr. Cass adds, "At second – be specific (!) and save our patients' pocket books!"

It is critically important if you guys are dealing with people with any kind of metabolic type diseases, or actually any disease for that matter I suppose, that you incorporate the *BioToxicosis*. I have talked about this in the past and really can't tell you how vitally important it is! If the lymphatic system is not draining and is not free flowing of toxins, then the cells are bathing in a toxic waste land. A sick cell can never become healthy. And a healthy cell will become sick. Disease is always the result of the compromised terrain of the extra cellular matrix (ECM). Don't short change yourself or your patients. Use those lymphatic remedies; *Lymph 1 Acute*, *Lymph 2 Matrix* or *Lymph 3 Chronic*. If you don't know how to test for it, grab onto somebody who does. You can call the people at Physica Energetics both in the States and Canada. They are all well versed in how to do the *BioToxicosis* check. So

please utilize them and learn how to do this. It is the single most important thing you can do for your patients. If you don't clarify the terrain the patient cannot get healthy and won't get better.

We talked before about the goofball articles about the pseudo-prostate risk and the omega 3 fatty acids. Let's put all that nonsense aside and dig into the power of clean, and I emphasize CLEAN, fish oil concentrates.

I love the *Bio-Omega 3* and the *Omega GOLD* that Dr. Cass has developed in the Nutritional Matrix line. I don't know if you guys are aware of this, but these oils are Supercritical Co<sup>2</sup> extracted. So what that means is this; the fish oil is infused with carbon dioxide (CO<sup>2</sup>) and then it is pulled out very quickly in a vacuum. This pulls out ALL the heavy metals that might be in the fish oils. All fish have some form of toxicity as we know given the current state of our messed up environment. Supercritical Co<sup>2</sup> extraction is applied three times to make sure that there are no heavy metal residues in that fish oil. This is a bit of an overkill frankly, but this process insures a clean result and that's what we want. Outside, third party, testing certificates of analysis shows that to be accurate and true. Most fish oils that are on the market do not take the time to do this process. So you could spend a lot of money on fish oils, but what you end up doing is taking a mouthful of heavy metals. Dr. Cass, as you know, has made his concerns very clear relative to

sustainability and I know personally, that he takes great care in sourcing his raw materials and also is very specific with his manufacturing procedures. He only uses anchovies and sardines for his oil extractions. Look – tuna, salmon, mackerel, etc, are all being fished out and those that aren't are farmed! People ask me why I don't use Krill Oil. Well there are more than a couple of reasons. Krill is whale food. Greedy human beings love to rip off nature. Predictably we're now going after the krill because someone said it's "good" for us. I'm not willing, and I'm sure you're not either (!) to be responsible for potentially causing the loss of another great species. I'm talking about the whales. We don't need krill oil. Let's think beyond the world of corporate marketing!

OK enough of that rant....

One more thing; you have to be careful that the softgel capsule is clean and pure. People tend not to think about the capsule...

Dr. Cass has painstakingly made sure that his capsule is free from any heavy metals, solvents and chemicals. These particular softgel capsules also ensure the integrity of the product too! You know it is a real shame when you have patients who are spending a lot of money, a lot of time and taking a lot of supplements (and they would not know this), but many, many times those supplements are toxic, or the casings of those supplements are toxic.

This is also true with veggie caps as most veggie caps contain mercury. And mercury is the most toxic non-radioactive metal on the planet and we don't need to increase our levels of mercury. Labelling laws don't require manufacturers to disclose the ingredients of the capsules... Dr. Cass' veggie caps are not only free of mercury but free of PCPs and other nasty chemicals!

So that is one of the many, many reason I love the Physica Energetics line. I know you do too!

And that's all the time we have today.

REMEMBER: *In a New York minute, everything can change.*

*Hopefully this will get you started or at least remind you of what you may have already known, but forgotten.*

*I'm Dr. Stephen Atkins and this has been Field Notes and I'll see you next week.*