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Why Plaque Buildup In Arteries Is Dangerous

BY DR. GAIL VALENTINE

As we age, cholesterol, calcium, and other minerals accumulate on the inside lining, of our blood vessels and, over time, clog them. This process is referred to variously as hardening of the arteries, atherosclerosis, arteriosclerosis, and arterial plaque buildup (see Figure 1). To ignore this process can be exceedingly dangerous.

Atherosclerosis contributes to and accounts for rampant cardiovascular disease in adults of the United States and other developed countries. Examples of such diseases are high blood pressure, angina (chest pain due to poor blood circulation to the heart), heart attack, peripheral vascular disease (poor circulation to the legs and feet), and stroke. Most of these conditions are physically disabling and depressing to the patients.

When plaque builds up in blood vessels, blood flow (carrying oxygen and nutrients) is restricted. It is like water flowing through a pipe clogged with mineral deposits; if the deposits are thick enough to create a complete blockage, the water will stop.

It is no different with your blood vessels. If there is excessive plaque

buildup and the vessels become partially or completely blocked, not enough blood can reach the body's tissues, which become starved for the oxygen and nutrients they need. Consequently, they will not function optimally and may even die. An example is peripheral vascular disease in a diabetic, where there is insufficient blood flow to the lower legs or the feet. Depending on the degree of compromise, the patient may experience pain upon walking, even short distances, or cramping in the legs or feet. Left unattended, gangrene of the feet may ensue, followed by amputation (if one seeks conventional treatment).



Another example is coronary (heart) vessels that become so clogged that there is insufficient blood flow to the heart muscle itself. Symptoms might be a tightness in the chest, chest pain, or discomfort in the jaw or left arm. If the blood supply is restricted for too long, a myocardial infarction, or heart attack, can occur. In

this case, actual muscle tissue of the heart dies. If too much of it dies, the heart will no longer be able to pump blood to sustain life, and death will result.

It is important to recognize that hardening of the arteries is not a localized or segmental disease. It does not affect only one part of the body at a time. If your coronary arteries are filled with plaque or are oc-

cluded, it is a sure bet that arteries in your brain, kidneys, lungs, and other vital organs are in a similar state. Atherosclerosis is a "silent" disease that does its damage throughout the entire body and often does not make itself known until it is too late to do much about it - at least according to the measures of mainstream medicine.

When blood circulation to your vital organs is hindered, the cells of these organs are deprived of the essential nutrients they constantly require, and they are unable to adequately remove the toxic residues of metabolism. In short order, the body gives up, ultimately yielding to organ or tissue disease or death.

HOW EDTA "CLEANSES" THE CARDIOVASCULAR SYSTEM

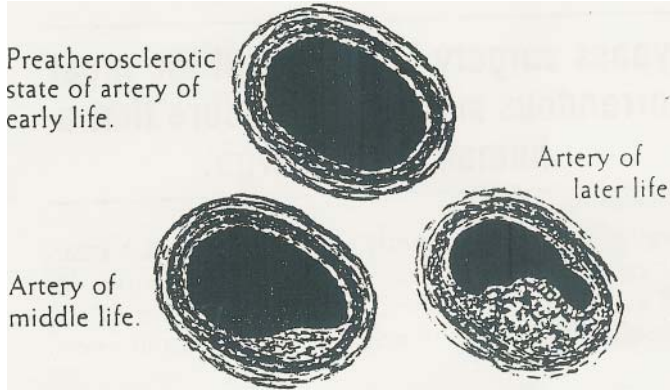
For decades now, EDTA has been shown, through a process called chelation, to improve blood flow safely and relieve symptoms associated with atherosclerotic vascular disease.

This atherosclerotic process is found to be accelerated in some people for various causes.

Although the mechanism is involved in chelation are complex, it can be understood simply as the removal of undesirable calcium and other minerals that promote plaque formation, blood clotting, and athero-sclerosis.

EDTA chelation is a therapy whereby repeated administrations of a weak organic acid (EDTA, ethylenediaminetetraacetic acid) gradually reduce atherosclerotic plaque and other mineral deposits throughout the cardiovascular system by literally

If your coronary arteries are filled with plaque or are occluded, it's a sure bet that arteries in your brain, kidneys, lungs, and other vital organs are in a similar state



heart attack or making the blockage even worse. Many of the blockages return to original severity within a year.

Prescription drugs may be an option for those whose atherosclerosis has not progressed too far. However, drugs do not reverse the condition causing the problem. They often have side effects, including impotence, and can become ineffective as the blockages worsen.

dissolving them away.

EDTA OR BYPASS SURGERY?

What may be called the Roto-Rooter® approach is a more suitable metaphor for conventional medical treatments, when you consider invasive surgical procedures such as coronary angioplasty and coronary bypass surgery. When a pipe (artery) is clogged, simply ream it out or flatten the deposits (angioplasty). If that does not work, just cut out the bad section and replace it with a new section taken from somewhere else (coronary artery bypass graft, or CABG for short, pronounced "cabbage").

CABG is just about the most horrendous surgical procedure that a human can undergo. Worse yet, it may even shorten lifespan, according to one study. CABG can also accelerate atherosclerosis following the surgery. Many surgical "victims" must undergo another bypass, and most do not live longer than six or seven years after their first one. This can be explained in part by examining the replacement parts: leg veins. Used for the new heart vessels in the bypass operation, leg veins are not of the same functional caliber as an actual coronary artery. The heart's new artery—the leg vein—begins to wear right away, enduring blood pressures it was not designed for. Additionally, the risk of surgical complications and death due to CABG is not to be taken lightly.

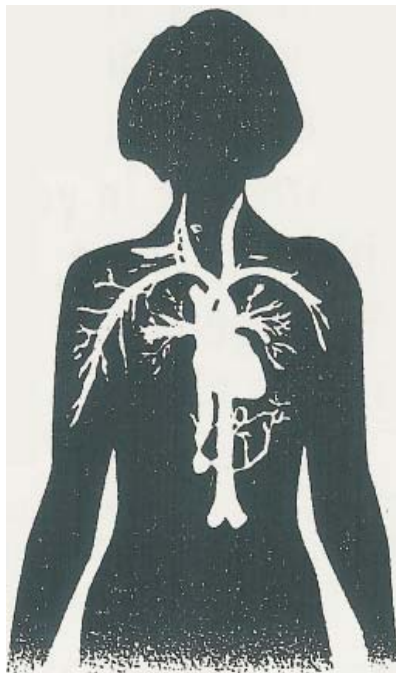
Bypass surgery is just about the most horrendous surgical procedure that a human can undergo.

Angioplasty is only slightly more desirable as a treatment option. This procedure does have some risk for

condition causing the problem. They often have side effects, including impotence, and can become ineffective as the blockages worsen.

PATIENTS CANCEL BYPASS SURGERIES AFTER TRIAL OF EDTA TREATMENTS

It is commonplace for physicians who regularly prescribe EDTA chelation to encounter heart disease patients who



Bypass surgery is just about the most horrendous surgical procedure that a human can undergo.

have failed all the standard treatments but who make remarkable - even unbelievable - recoveries once given EDTA. Many patients on waiting lists for CABG surgery have found they did not need surgery following a series of EDTA chelation treatments.

One particular study found that when

65 patients who had been on the waiting list for CABG surgery for an average of 6 months were treated with EDTA chelation therapy, the symptoms in 89% of them improved so much that they canceled their surgery. In the same study, of 27 patients recommended for limb amputation due to poor peripheral circulation, EDTA chelation therapy resulted in the saving of 24 limbs.

DR. GARRY GORDON HELPS THOSE LOOKING FOR LAST-RESORT HELP

Carry Gordon, M.D., D.O. is considered the father of modern EDTA chelation therapy. He is the founder of the American College for Advancement in Medicine and the International College of Advanced Longevity Medicine. Recently he commented about medicine's different approaches to cardiovascular disease due to atherosclerosis:

Let us look at a group of my patients with any level of stageable disease and simply see how many of them are alive at the end of five years, compared with those on any other standard therapy. I couldn't believe it when I went to the meetings with the big cardiologists and found that they consider the diagnosis of congestive heart failure to be virtually a death sentence, because over 60% of their patients are dead within the first year. I have not lost one patient with congestive heart failure in ten years! It shocks me how big a difference there is, depending on which school of medicine you follow.

A long-time advocate of the effectiveness of oral EDTA alone and of its use as an adjunctive to intravenous EDTA, Dr. Gordon remarked,

I have taken on patients who were inoperable, who had already had every known form of bypass surgery, until there weren't any more veins in their legs to strip out to put in their hearts. They were sent home to die, and I could get those people back to full functioning. I've had doctor friends who wouldn't take the IV at first, but who are now on oral EDTA and are able to pass a treadmill stress test that they couldn't pass for five years. I've seen lots of good things happen with oral EDTA-based supple-

ment programs.

MORE HEALTH BENEFITS OF EDTA

EDTA improves heart, brain, kidney, lung, and all organ functions by reducing atherosclerotic plaque in the vascular system. As mentioned above, EDTA is extremely efficient at cleaning out the plaque from the walls of the vascular tree, restoring healthy functioning on a multitude of levels within the body. EDTA is effective for any condition where there is reduction or interruption of blood flow because of plaque. Plaque is not localized in just one area of the vasculature. Therefore, EDTA can "clean house, improving function in all organs of the body. This makes it effective for many degenerative diseases (see Table 1).

EDTA removes toxic metals from the blood. Studies have shown that as people age they continuously accumulate toxic metals: lead, mercury, aluminum, iron, cadmium, and arsenic, among others. The accrual of these toxins invites an increased risk for various diseases, especially heart disease. The less of these metals we have in our bodies, the more likely we are to be physiologically healthy or simply feel good, and the lower our risk for heart disease. Because EDTA is so effective at removing unwanted metals and other minerals from the blood, it has been the standard, FDA-approved treatment for lead, mercury, aluminum, and cadmium poisoning for more than 50 years. EDTA normalizes the distribution of most metallic elements in the body.

EDTA helps prevent heart attack, stroke, varicose veins, and more by inhibiting blood clotting. Because EDTA inhibits blood clotting so well, by tying up calcium, it is routinely added to

blood samples that are drawn for testing purposes. Blood can't clot if the calcium is tied up. Inhibition of

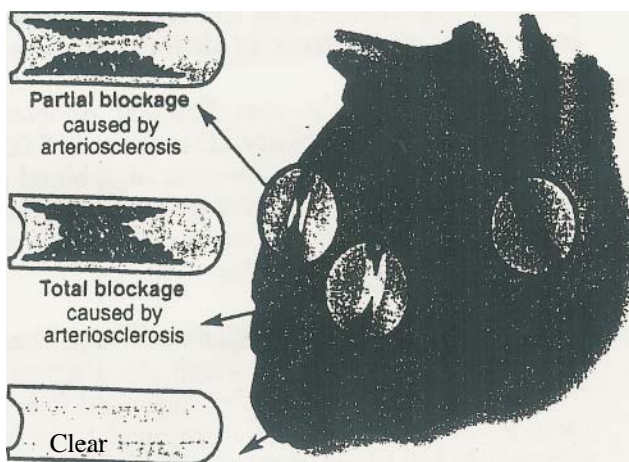


blood clotting can help prevent stroke, heart attack, phlebitis (painful inflammation of a vein), pulmonary embolism (potentially fatal clot to the lung), or varicose veins. Generally, these conditions are associated with aging.

EDTA makes stronger bones and reduces cholesterol by improving calcium and cholesterol metabolism. EDTA can help to lower cholesterol, the principal component of atherosclerotic plaque.

Figure 2. Coronary (heart) arteries

Some people may assume that EDTA depletes the body of needed calcium. However, when EDTA lowers blood calcium, it also stimulates the parathyroid gland to produce a hormone called parathormone. This hormone is responsible for removing calcium from places such as the inside of arteries and depositing it in the right places, such as bone. So, IV chelation makes you



physiologically younger because it moves calcium from your arteries and makes your bones stronger.

Dr. Gordon comments, 'The more chelation we give people, the less osteoporosis they have and the less

calcium accumulation there is in their blood vessels.

EDTA improves skin quality and reduces wrinkles. One further comment by Dr. Gordon: "We can count the crow's feet next to a woman's eyes and show that those crow's feet disappear with IV chelation therapy. So we know that we are reversing cross-linkages. Cross-linking is an aging process caused by the destructive joining of proteins and resulting in loss of function.

ORAL EDTA CHELATION THERAPY: EFFECTIVE, SAFE, CONVENIENT, AFFORDABLE

Oral EDTA, which has been used for at least as long as its IV cousin, is becoming more appreciated by health care professionals and users alike. Clinical experience suggests that oral chelation provides many, but not all, of the benefits of IV therapy. Overall, the differences in benefits are more those of degree, speed, convenience, and cost per dose than of quality.

Intravenous EDTA chelation has a direct and powerful effect on the body almost instantaneously. Not as convenient as swallowing a few capsules of oral EDTA per day, an IV EDTA session usually lasts about 3 to 4 hours, during which about 1,500 mg to 3,000 mg of EDTA (plus vitamin C and other nutrients) are administered. The number of treatments necessary

Table 1. Many Other Potential Benefits of EDTA Chelation
◆ Lower high blood pressure
◆ Dissolve kidney stones
◆ Reduce intermittent claudication
◆ Improve vision in diabetic retinopathy
◆ Dissolve small cataracts
◆ Manage high blood lipid levels
◆ Prevent osteoarthritis
◆ Reduce rheumatoid arthritis symptoms
◆ Lower diabetics' insulin needs
◆ Reduce Alzheimer-like symptoms
◆ Reverse senility
◆ Improve memory

(generally about 20 to 50 sessions) depends on the individual's condition. Typical candidates for IV chelation are people who have been diagnosed with serious atherosclerosis, heavy metal poisoning, or symptoms of vascular occlusion or significant calcification of tissues. A series of needed sessions of IV EDTA will cost about \$2,000 to \$4,000. Oral EDTA is significantly less, about \$15 to \$40 per month, depending on one's intake.

About 15% of an oral dose of EDTA is absorbed into the bloodstream, compared with 100% of an IV dose. Yet, due to continuous daily intake, the amounts add up and can definitely achieve similar benefits compared with IV chelation. Over the course of 5 or 6 weeks, regular use of oral EDTA can be as beneficial as a single IV EDTA session.

Oral EDTA is appropriate for people whose condition is less serious and does not demand prompt attention. It is especially desirable for preventing or delaying the onset of the many complications of the diseases related to atherosclerotic plaque buildup, including heart disease, heart attack, stroke, high blood pressure, peripheral vascular disease, mental decline, and impotence.

WHY DOESN'T EVERYONE KNOW ABOUT EDTA?

Why would anyone opt for invasive, less lasting options, such as angioplasty or CABG, when a safe and effective alternative for restoring normal or near-normal circulatory functioning of the vasculature exists? It seems that EDTA should be the first line of treatment, with the invasive surgical procedures as the last resort alternative, not the other way around.

Few, if any, would opt for surgical treatment if they were aware and informed about the value of EDTA chelation. However, there are organizations and institutions that see political gain in cloaking the truth about EDTA's benefits and punishing advocates of its use.

Except for abortion, it is unlikely that any other issue in modern medicine has been more highly politicized than that of EDTA chelation therapy. It is clear that most of the opposition to

EDTA is due to the threat that this therapy represents, not to patients' health, but to the bank balances of orthodox physicians (those who specialize in CABG, for example), hospitals, and pharmaceutical companies.

Conventional treatment of cardiovascular diseases is big business in the United States, bringing in tens of billions of dollars each year.

Each CABG might cost \$50,000 or even up to \$100,000; each angioplasty costs about \$15,000, drugs for reducing cholesterol, lowering high blood pressure, and normalizing heart rhythm bring the pharmaceutical industry hundreds of millions of dollars each year. In addition, these are only a few examples.

By contrast, the cost of chelation therapy, cited above, is minimal. The degree to which this therapy reduces the need for conventional therapies, and therefore the incomes of those previously mentioned, is the degree to which they feel threatened by it. Powerful medical societies and government agencies, for example, lobby to keep the knowledge about EDTAs benefits under wraps. They have harassed, vilified, and smeared physicians who have used EDTA chelation to help their patients and, in some cases, have even driven them from their profession. The reason not everyone knows about EDTA chelation therapy is politics (money).

THE REBIRTH OF BLOOD FLOW

The accumulation of atherosclerotic deposits in the cardiovascular tree is associated with aging. It is inevitable that plaque formation will begin in our mid-years - for some, even in their youth - and will progress rapidly, unless healthy interventions are made: diet change, appropriate exercise, and effective supplementation.

EDTA chelation therapy can successfully remove plaque from arteries, veins, and capillaries and restore blood flow to normal or near normal functioning - often even in severe cases. Removing the plaque allows the blood, laden with oxygen and nutrients, to fuel hungry body cells and tissues for optimal functioning.

For those who have not yet reached

the symptomatic stage, preventing the onset of atherosclerotic diseases is a desirable goal. Oral EDTA chelation can be used as a preventive measure, because it can retard the plaque buildup that progresses with aging, and it may even reverse plaque buildup in many cases. Think of it as an insurance policy. EDTA may very well be able to slow, or even reverse, to some extent, the aging of the cardiovascular system.

For those whose atherosclerosis is severe enough that they are experiencing symptoms, EDTA chelation may not only keep them from falling under the horrific CABG knife, but offer them instead the experience of renewed energy, clearer thinking, improved sexuality, warming of feet and hands, ability to walk or hike pain-free, stronger bones, diminished or eradicated chest pain, improved cholesterol, reduced blood pressure, or improved vision, among many other benefits. Restoring blood flow can be like being born again! It can be like a new life for you to enjoy,