HSI Advisory Panel

Medical Adviser, Martin Milner, N.D.
Professor, National College of Naturopathic Medicine; President, Center for Natural Medicine, Portland, OR; www.cnm-inc.com

Jon Barron
International lecturer, researcher, and author, Chatsworth, CA

Erie Berg, D.C., C.R.A.
Founder, Health and Wellness Center, Alexandria, VA

Hyla Cass, M.D.
Orthomolecular physician and psychiatrist, www.cassmd.com, Los Angeles, CA

Professor, University of the Pacific School of Dentistry, San Francisco, CA

M.M. Sree Ganesh, M.D.
Family practitioner, holistic and natural medicine, Petaling Jaya, Malaysia

Ann Louise Gittleman, Ph.D., C.N.S.
Award-winning author, columnist, and media personality, www.anlnouise.com, Hayden Lake, ID

Elson Haas, M.D.
Director, Preventive Medical Center of Marin, www.elsonhaas.com, San Rafael, CA

Kohhei (Tadahiro) Makise, M.D.
Medical director, Kyoto Imadegawa Makise Clinic, Kyoto, Japan

Claus D. Martin, M.D.
Founder, Four Seasons Medical Center and Clinic, Rottach-Egern, Germany

Stephen Morrissey, O.M.D.
Founder, Center for Energetic Medicine and Botanica Bioscience, Ojai, CA

Michael E. Rosenbaum, M.D.
Allergy, immunology, and clinical nutrition, Corte Madera, CA

Al Sears, M.D.
Adjunct professor, Barry University, West Palm Beach, FL

Robert Sinnott, Ph.D.
Biochemical technologies and research, Phoenix, AZ

Allan Spreen, M.D.
Advisor on alternative medicine, Discovery Channel, Phoenix, AZ

Leslie Taylor
Founder and president, Raintree Nutrition, Carson City, NV

Randall Wilkinson, M.D.
Board member, American Academy of Environmental Medicine, Coeur d’Alene, ID

The opinions expressed here do not necessarily reflect the views of every panelist each month. The Health Sciences Institute acknowledges occasional differences of opinion among panelists and welcomes the exchange of differing points of view.

New arthritis formula teaches your painful joints the 4 R’s: repair, rebuild, retrain, relief

by Kathryn Mays Wright

No matter what the advertisements tell you, there are over 100 different reasons for joint problems, so it makes sense that treatments differ just as much. There just isn’t one single joint product that will work for everyone.

HSI panelist Jon Barron understands this problem. Over the past 12 months, he has been working on a new-one-of-a-kind formula called Triple Jointed designed to try to help those of you who still haven’t found relief.

I spoke with Barron about his new product. He explained that it offers a three-pronged approach to systemically relieving chronic joint pain and inflammation by combining three substances—avocado soy unsaponifiables, undenatured type II chicken collagen, and ginger. When used in combination, these substances not only relieve pain, swelling, and stiffness but also help rebuild damaged joints and tissue.

More than just masking the pain

In the August 2003 issue of The Journal of Rheumatology, researchers from the University Hospital in Liege, Belgium, reported that an extract called avocado soy unsaponifiables (ASU), made from the oils found tightly bound to avocado and soybean fibers, could significantly boost cartilage repair.

Aggrecan provides the framework that gives cartilage its shock-absorbing and friction-free properties. ASU has been used by prescription in France for over 15 years as a treatment for osteoarthritis. Since the French prescription form of ASU, Piascledine® 300, has been subsidized by the French government, it has been the subject of a number of clinical studies, and it has been tracked for safety. Barron tells me that the ASU extract used in Triple Jointed is based on the most effective ratio and dosage found in these studies, so we would expect the positive benefits would be comparable.

One study reported that an ASU extract made up of 1/3 avocado and 2/3 soybean unsaponifiables restored aggrecan synthesis, reduced levels of several inflammatory factors, and caused structure-modifying effects in osteoarthritis (OA) by inhibiting cartilage degradation and promoting cartilage repair.1

A clinical trial published in Arthritis & Rheumatism assessed the efficacy and safety of ASU in the treatment of patients with OA of the knee or hip. The results showed that fewer patients in the ASU group required NSAIDs (48 percent, vs. 63 percent in the placebo group) and that overall functional disability was significantly reduced in the ASU group. Improvement appeared more marked in patients with hip OA.2

How to fight back when your body attacks itself

While it’s important to keep your aggrecan levels healthy in order to

(continued on page 2)
new arthritis formula  
(continued from page 1)

maintain healthy joints, the battle against arthritis doesn’t stop there. The fact is for some of you that your own body is actually attacking your joint cartilage. For example, rheumatoid arthritis is a common autoimmune disease in which killer T-cells of the body’s own immune system reprogram themselves to attack joint cartilage, resulting in inflammation and joint destruction.

We usually talk about boosting the immune system to fend off disease. But to find relief in this case, you may need to retrain your immune system to be more tolerant. Triple Jointed makes use of the unique ability of a type of chicken collagen called UC-II™ to train the body’s immune system to stop attacking joint cartilage.

UC-II is an undenatured (intact) form of type II collagen—the major galactose-containing protein found in joint and connective tissue. It also triggers events that lead to immune tolerance.

According to InterHealth, the supplier of UC-II, human studies suggest that oral ingestion of undenatured type II collagen, the active compound in UC-II, may alleviate symptoms associated with rheumatoid arthritis. Several studies have shown significant improvement in symptoms when patients took undenatured type II collagen, including improved joint mobility and flexibility, reduced joint pain, and in some patients a complete remission of symptoms.

In a pilot clinical study published in the International Journal of Clinical Pharmacology Research, five women between the ages of 58 and 78 who were suffering from significant joint pain were given UC-II (10 mg/day) for 42 days. Pain reduction and improvements in joint flexibility were reported, along with reduced morning stiffness.

Another study, published in the Arthritis and Rheumatism Journal, reported that no side effects were associated with oral type II collagen.

Get immediate relief and long-lasting healing

Barron’s final addition to this new formula was ginger. It gives you a more immediate anti-inflammatory and pain-relieving effect because of its potential as a strong COX-2 inhibitor. This is a welcome addition since the effects of ASU and UC-II are not something you will notice immediately. As Barron put it, ginger is included “so people hang in there.”

But some prefer to stay away from COX-2 inhibitors, like HSI’s medical adviser, Martin Milner, N.D., who says they can potentially increase your risk of heart disease.

Separately, both ASU and UC-II seem to offer hope for an improved quality of life for those of you suffering from inflammation and joint pain. But if you decide to try Triple Jointed, keep in mind that there have not yet been trials on this specific combination. Although it is hard to determine the combined effect of these unique products, they do appear to offer a safe alternative to NSAIDs and the possibility of long-term relief.

For maximum effectiveness, the suggested dosage of Triple Jointed is three capsules before bed on an empty stomach. If you experience any stomach upset, reduce your dose to one capsule and slowly increase the dose over several days.
Groundbreaking plant from the Amazon takes on cancer, skeptics, and controversy

by Kathryn Mays Wright

In 2001, we gave you the exclusive on graviola, a tree from the Amazon with powerful anti-cancerous properties. We reported it had been shown to destroy prostate, lung, breast, colon, and pancreatic cancers. And, perhaps the greatest benefit was that it targeted cancer cells and left the healthy ones alone.

Four years ago, we reported that graviola had gone publicly unrecognized for years as a cancer treatment behind the doors of a certain unnamed pharmaceutical company. When that article first hit, the folks at Raintree Nutrition actually had to cancel vacations and add weekend shifts to keep up with the demands of HSI members. Since then, largely through HSI’s awareness campaign, the public has taken notice of the plant and has begun using Graviola and N-Tense—both made from the Amazon plant.

Unfortunately, the skeptics have also taken notice. And while skepticism does have its place in promoting unbiased truth, it can unfortunately lead to rumors that have the potential to stymie positive momentum. This seems to be the case with graviola. For the most part, people who criticize it do so for three reasons: 1) a lack of research on the plant 2) skeptical reports and 3) aggressive multi-level marketing of inferior products. This month I’d like to take a moment to address these issues and shift the momentum back toward our common goal of advancing the potential of healing.

**Why graviola won’t go on trial**

I contacted HSI Panelist Dr. Leslie Taylor, president of Raintree Nutrition, the distributor of Graviola and N-Tense, to get the real story. I was surprised to find out that since HSI broke the story in 2001, there haven’t been any human trials published on Graviola and haven’t been any clinical trials at all on N-Tense.

Taylor points out that a lack of clinical trials is a given. In medicine, there’s no money to be made from plants. Because you can’t patent a plant, you can’t benefit financially from money spent on clinical trials establishing its efficacy. Small supplement manufacturers, unfortunately, can’t afford the up-front cost of trials, and without the incentive of recouping their investment, it’s next to impossible to find other sources to fund studies on natural products. But even though researchers aren’t studying graviola specifically, they are focusing on the active compounds in it that are called acetogenins (ACGs). ACGs are compounds with the potential to become a new generation of antitumor drugs.

**The future of a cancer treatment growing in an ancient jungle**

Healthy cells have a balance between mitosis (replication) and apoptosis (end of replication, or death). When a cell is out of balance due to a genetic flaw or toxic damage, it loses control of these natural processes. If a cell with damaged DNA replicates instead of self-destructing, the move toward a tumor has begun. Chances are that this unregulated cellular functioning will lead to cancer. The challenge is to regain regulation of the process and to end the unregulated replication of mutant, unhealthy cells.

Triggering death in cancer cells is the goal. And that is the natural activity of ACGs. Uvaricin, the first isolated ACG, was discovered as a new antitumor compound in 1982. Since then, ACGs have been judged as promising candidates for a future generation of drugs to fight against the current chemotherapy-resistant tumors.

A research review published by *Natural Product Reports* in June of this year summarized the knowledge gained about newly isolated acetogenins in the last six years. According to the review, “It seems that as the mechanism of cell death becomes better understood, ACGs become more promising.”

Taylor told me that most of the research shows that these chemicals are selectively toxic to cancer cells and are especially attracted to a specific enzyme found in the cell walls of cancerous tumors. Once there, they inhibit ATP (the substance that gives cells energy). It seems that the increased energy created by the cancer cells is their weak point.

Purdue researchers reported that 14 different ACGs tested thus far (including several found only in graviola) demonstrate potent ATP-blocking properties.

In March of 2002, a group of Japanese researchers tested the main ACG in graviola (one called annonacin). The researchers injected mice with lung cancer cells. One-third of the mice (continued on page 4)
received nothing (the control group), one-third received the chemotherapy drug Adriamycin, and one-third received annonacin (at a dosage of 10 mg/kg).

At the end of two weeks, the Adriamycin group showed a 54.6 percent greater reduction of tumor mass than the control group experienced. However, only one mouse in the untreated control group died while 50 percent of the mice in the Adriamycin group died of toxicity. On the other hand, the mice receiving annonacin were all still alive, and the tumors were inhibited by 57.9 percent, slightly better than the results with Adriamycin—and without toxicity.

### Conflicting evidence crops up

The research on ACGs sounds promising, but there are skeptical reports—apparently linking graviola to neurological diseases—that we need to take a look at.

Most of the skepticism can be traced back to 1998, when a French research team reported that a small isolated population in Guadeloupe, French West Indies, had a “statistically high incidence” of atypical Parkinson’s disease. Suspecting dietary causes or environmental toxins, the researchers interviewed these women on what they were eating. Researchers pointed to graviola as the culprit because they found that the fruit was a common part of the diet and that an herbal tea of graviola was used in traditional medicine there.

I asked Taylor for her take on the skeptical press. She was quick to shoot holes in this theory. She said, “The group afflicted were mostly poor disadvantaged black women from 20 to 35 years old. And while they called it atypical Parkinson’s, it was a catch-all for a bunch of neurological symptoms.” Plus, she pointed out that graviola is in the diets of Peruvians, Mexicans, Belizians, and just about all other people in the tropics, where graviola grows. You can find it in every grocery store or fruit market in Brazil, and there are huge manufacturing plants that process and can graviola juice. Doctors in these areas use graviola leaf teas in herbal medicine just like they do in the West Indies. Yet people in these countries appear to have no higher incidence of Parkinson’s or neurological disorders in general than are found in the U.S. or anywhere else.

A research group at the Texas Health Science Center’s Division of Neurology reviewed the French report and compared the atypical Parkinson’s to some similar neurological conditions that have occurred elsewhere in the tropics. Their take on the story was quite different and much more scientific. They compared what the French were seeing in Guadeloupe to what happened in Cuba from 1991 to 1994, when the largest epidemic of neuropathy in this century (involving about 60,000 patients) was reported. In Cuba, the outbreak of these types of symptoms was caused by reduced nutrient intake due to the country’s deteriorating economy. Oral vitamins given to the Cuban population in 1993 resulted in substantial decreases in the number of cases and ended the epidemic.

One study published in the *Journal of Neurochemistry* claimed that ACSs are toxic to your brain and could possibly be linked to the occurrence in Guadeloupe. But Taylor has an answer for this as well. She does not believe graviola could have a negative effect on the brain because it doesn’t appear to cross the blood/brain barrier. Because of this, she says the method of administration used in this study was not accurate. The brain cells of mice were exposed...
Cardiorespiratory fitness is its own reward, of course. But according to a five-year study of more than 10,000 subjects, higher levels of cardiorespiratory health were associated with a reduced risk of developing metabolic syndrome, the set of symptoms that includes high blood pressure, insulin resistance, and elevated levels of triglycerides and C-reactive protein. Metabolic syndrome, in turn, has been linked to increased risks of heart disease and Type II diabetes.

Men with prostate cancer may benefit from a daily serving of pomegranate juice. A recent study showed that the division of cancer cells slowed down and prostate specific antigen (PSA) levels rose more slowly when prostate cancer patients drank 8 ounces of pomegranate juice each day. Researchers speculate that the high antioxidant content of the juice and some natural phytoestrogens may be the active ingredients that seem to inhibit progress of the disease.

Elderly people who practice tai chi, the gentle-movement exercise system based on an ancient martial art, have a reduced risk of falling. In a study of people 60 year old or older, researchers found that subjects in the tai chi group had better balance and significantly greater knee strength than those in the control group. Previous studies have shown that tai chi also improves flexibility and cardiovascular fitness.

...Real-life results—even without research

Without the benefit of specific clinical trials, I can’t offer definitive proof that the compounds in Graviola and N-Tense are responsible for the healing benefits so many people have reported over the years. However, I thought it would be valuable to hear directly from some of those people. Let’s start with Daryl S.

In the January 2001 Member’s Alert we reported that Daryl had more than 20 tumors in his prostate. Instead of opting for surgery, he agreed to a far less invasive round of hormonal therapy (to shrink the size of his prostate) and began a rigorous supplement regimen that centered around the graviola-rich supplement N-Tense. Within two months, Daryl’s PSA level had dropped from 4.1 to zero. A sonogram and several other gamma-ray tests later confirmed that all the malignant tumors inside his prostate had disappeared. He’s been cancer free for 6½ years.

He still takes N-Tense for 30 days every six months (two capsules in the morning and two more in the evening) to clear out any possible accumulating dead cells.

Many other testimonials came in reporting good results in fighting prostate cancer as well as other types of cancer. Here’s a small sampling of what people have to say:

“I have to admit “the jury is still out” as far as my experience is concerned… I was diagnosed with “not the fastest growing, but not the slowest growing” prostate cancer following a biopsy performed on Mar 10, 2005. The encouraging thing I have experienced so far is that I feel better than I have in a long time. I have no discomfort whatever, and my bowel functions are much better and more normal. As a side note, my Type II diabetes was greatly helped as my glucose levels dropped below those that very expensive medicines have failed to bring about.”

—Gary K.

“My husband was diagnosed with squamous cell nasal cancer and has been taking Graviola for about two years. No recurrence of the disease has developed. We also know and keep in touch with a few other cancer patients taking Graviola, and they are experiencing similar results. “Great blood work,” the doctor says, “what are you taking?”

—PJ. J.

“I had tumors under my arm, in the back of my neck, and up and down my spine. I have been taking N-Tense for some time now. Since my last blood test the doctors told me to keep doing whatever I am doing because the tumors and lumps are getting smaller, and my blood tests are in the normal range. I have been fighting cancer since December 2000.”

—Lloyd M., Ph.D.

Two products, one goal

Both Graviola and N-Tense are packed with cancer-fighting chemicals. Graviola is made of 50 chemicals that kill cancer in three different ways, and N-Tense con—

(continued on page 6)
graviola update
(continued from page 5)

Graviola, a well-known cancer-fighting herb, contains over 100 chemicals with 22 different mechanisms of action against cancer. It appears to be active against a larger variety of different cancers. (See the Jan. 2001 Member’s Alert for the full story.)

Although Graviola is by far the better seller, N-Tense gets most of the accolades from users. N-Tense is a combination of graviola (50 percent) and seven other rainforest plants including guacatonga, mutamba, bitter melon, mullaca, vassourinha, cat’s claw, and Espinheira santa. People reported that N-Tense provided better results and fewer side effects, such as diarrhea and nausea (which 20 to 25 percent of Graviola users have a problem with).

What you need to know before taking graviola

If you decide to try a graviola product, you need to understand that there are some things to keep in mind.

First, in the case of prostate cancer, a common experience seems to be a slight increase in PSA numbers when first starting the supplement. This is most likely due to the body’s needing to slough off the dead cells.

Graviola is not to be used at all during pregnancy because the higher energy cells of the fetus may fall victim to the mechanism of this product. This could result in a miscarriage.

It also should not be combined with coenzyme Q10 and other supplements that increase ATP (these include magnesium, vitamin C, and many B vitamins). Since one of the beneficial mechanisms of graviola is to inhibit ATP, these essential nutrients may counteract or disable this mechanism.

Although no drug reactions have been reported, graviola has demonstrated hypotensive, vasodilator, and cardiodepressant activities in animal studies, so people with low blood pressure or those taking antihypertensive drugs should check with their doctors before taking graviola and should monitor their blood pressure accordingly.

If you experience nausea (large single doses may cause this), reduce your dose and take it with a meal. Long-term use of graviola may lead to the dying off of friendly bacteria in the digestive tract, so you should consider supplementing with digestive enzymes and probiotics that will help replenish these healthy bacteria.

If you experience sedation or sleepiness, reduce the amount you’re taking. Also, you should drink plenty of water (at least eight glasses a day) while you’re taking Graviola or N-Tense.

Several ingredients in N-Tense, based only on traditional uses, might be estrogenic in nature. For this reason, women with estrogen-positive cancers should not use N-Tense and should stick with Graviola.

The suggested dose for both Graviola and N-Tense is three to four capsules (700 mg) three times daily.

Before you grab for the Tums or refill your Zantac…
Discover my safe, natural alternatives for GI relief

by Hyla Cass, M.D.

It’s become far too common. A little “heartburn”? Just chew a couple of Tums or Rolaids. Still not going away? Move to the big boys—Tagamet, Pepcid, or Zantac. After trying just about everything else, patients often come to me looking for relief from digestive problems like heartburn, pain just below the rib cage, nausea, and vomiting. Unfortunately, even with mainstream drugs, these digestive complaints don’t just go away—they can potentially become chronic, long-term problems. The reality is that these complaints are often just symptoms of a larger problem—ulcers.

According to the American College of Gastroenterology, over 60 million Americans suffer from heartburn and 20 million Americans will eventually develop an ulcer.1 With numbers like these, I’m not surprised that antacid products (e.g., Tums and Rolaids) and acid suppressors (e.g., Tagamet, Pepcid, and Zantac) are the top-selling drugs in the United States.

But, as with so many other medications on the market, the “solutions” really aren’t solutions at all—they merely mask the symptoms. What’s worse is that in the end, your ulcer will not have been healed, and the antacids will have stripped your stomach of the acid that’s important for digestion, so in turn you’ll need to take even more medication.

And while it may seem convenient to chew one tablet or swal-
low one pill, you won’t find real relief until you go beyond that. After all, an ulcer isn’t just really bad heartburn: It’s often related to a bacterial infection that won’t go away until treated fully.

But there’s an alternative approach that can break this vicious cycle. Zinc-carnosine single-handedly does the job of all these mainstream treatments combined: It relieves symptoms, kills infections, and heals ulcers.

Factors that contribute to ulcers

People used to think that stress was the most common cause of ulcers. Although it’s been known to aggravate them, there are other factors that actually cause ulcers and poor stomach function to occur. The most common factor is the presence of the bacterium Helicobacter pylori (H. pylori). H. pylori is present in about 20 percent of the U.S. population and in over half the population worldwide. The bacterium usually lies dormant until it is aggravated by injury, medication, or lifestyle. A simple blood test can tell you if you have H. pylori.

According to the New England Journal of Medicine, NSAIDs are the second leading cause of ulcers in the United States. One study reports that approximately 50 percent of patients who regularly take NSAIDs have some level of gastric erosion and that as many as 15 to 30 percent of them have ulcers. Pain relievers like aspirin and aspirin-type compounds (such as ibuprofen and naproxen sodium) are examples of stomach irritants. If you remain on these low-level pain medications to treat age-related health issues, you’ll end up causing disruptions and injury to your stomach lining.

Your diet and lifestyle can also contribute to digestive problems and stomach ulcers. Consuming too many fatty or acidic foods, drinking coffee and some fruit juices, smoking, and drinking alcohol can all be significant factors.

Build a wall of protection… and stop ulcers before they start

The typical drug for stomach ulcers works by suppressing or neutralizing stomach acid. But this very acid is actually part of the stomach’s defense mechanism. The stomach defends itself with a lining of mucus-secreting cells that protect against irritation and other challenges. But when the stomach’s protective lining is weakened, a hole can form in the lining. Then the natural acid that’s still left in the stomach gets into the sensitive lining underneath, causing an ulcer to form.

Another problem with acid blockers is that they can’t single-handedly inhibit H. pylori, which means you’d also have to take antibiotics. Unfortunately, symptoms often return after stopping treatment, and you could end up undergoing years of drug therapy. Until now, prescription and OTC drugs (and all the side effects that go with them) were the only options available for treating stomach ulcers. But I know many of my patients would rather not risk the health consequences that go along with taking drugs that alter the normal digestive process.

That’s why I tell them about zinc-carnosine. It does more than treat the symptoms: Zinc-carnosine dissolves in the stomach and adheres to the ulceration or wound on the stomach lining.
And another thing...
(continued from page 7)
from carpal tunnel syndrome, and enhance brain function by assisting in neurotransmitter development.

...Green tea has become a Big Kahuna of alternative health care in the past few years. But if you love your black tea and just don’t want to give it up, don’t be concerned that you’re making an unhealthy choice. In a recent study from Japan, researchers used ultrasound technology to reveal improved elasticity in the lining of blood vessels among subjects who drank black tea.

...Have you ever heard that raisins are bad for your teeth? Turns out that the opposite may be true. Any food that’s sweet and sticky might seem like a potential cavity culprit, even if it’s a whole food like raisins. But research has revealed that raisins contain phytochemicals that kill bacteria that cause tooth decay and gum disease. As an added bonus, some phytochemicals also prevent bacteria from sticking to the surface of teeth.

To your good health,
Jenny Thompson

For FREE access to urgent health information, sign up for the HSI e-Alert update service. The e-Alert is delivered to your e-mail inbox five days a week and covers the late-breaking health news too urgent to wait until the next issue.

GI relief
(continued from page 7)
more effectively than other forms of zinc complexes. It does this by promoting mucus secretions and supporting the mucosal barrier, the stomach’s natural defense mechanism. It’s also been shown to inhibit the presence of the H. pylori bacteria. This means that zinc-carnosine not only is beneficial for treating ulcers but also for preventing them.

Zinc-carnosine is a combination of the nutrients L-carnosine and zinc. Both of these molecules have been shown in lab tests to help prevent ulcers. Most importantly, a recent study on laboratory animals showed that when these two substances are chemically joined together the unique properties of the new molecule actually have greater benefits than if they were just physically mixed together.

Zinc-carnosine, a prescription product in Japan since 1994, can boast both human and animal trials demonstrating its safety and efficacy. One of the human clinical trials reported “remarkable improvement” of symptoms in as many as 70 percent of subjects after eight weeks of use. This includes symptoms like heartburn, belching, and bloating.

But I was most excited about the trials that reported a 65 percent improvement in ulcers after only eight weeks of use.

The bottom line is that zinc-carnosine has been shown to promote the health and integrity of the stomach lining by addressing all of the issues that cause ulcers in the first place.

Studies have shown that the optimal dose of Zinc-carnosine is 150 mg per day, taking 75 mg twice daily, generally right after breakfast and at bedtime. Take this for 8 weeks, then reduce the dose to 75 mg a day as a maintenance dose to prevent recurrence.

Citations available upon request and on HSI website

MEMBER SOURCE DIRECTORY


N-Tense. Raintree Nutrition, Inc. Ph. (800)780-5902 or (775)841-4142; fax (775)841-4022; www.rain-tree.com. A 120-capsule bottle costs US$25.00 plus shipping.


Please note: HSI verifies all product information when the Members Alert is written; however, pricing and availability can change by the time the issue is delivered. We regret that not all products are available in all locations worldwide.

The above statements have not been evaluated by the U.S. Food and Drug Administration. These products are not intended to diagnose, treat, cure, or prevent any disease.