

## Natural not always best, say scientists

Original article:

<http://www.nutraingredients.com/news/ng.asp?n=65287&m=1NIE123&c=bbimgilqonrtbqy>

My response:

### Who's Fooling Mother Nature?

The authors of this report seem to be unfamiliar (or unsympathetic) with the science of multiple chemical sensitivity, or the concept that at some point the total toxic load upon the body, mainly the liver, may overwhelm the body's ability to detoxify and safely excrete excess chemicals, whether natural or synthetic. The use of certain nutrients to be utilized in these processes - notably antioxidants, minerals and amino acids - are "limiting factors" affecting detoxification capacity and chemical clearance rates.<sup>1-30</sup>

Many synthetic chemicals are toxic "by nature", so to speak, so that their safety profiles are typically worse than natural products. Controlled substances are regulated so tightly precisely because of their potential for causing bodily harm. While natural products may occasionally have this potential, as a general rule they are less toxic than drugs, typically made from synthetic chemicals.<sup>31</sup> This is borne out by statistics from the American Association of Poison Control Centers.<sup>32</sup>

It is not accurate to state that "Although synthetic products may contain substances known to be harmful in large quantities, the amounts contained in consumer products are so negligible that they would not even have an effect when all products are considered."

Who is even investigating these multiple chemical interactions? Adding minute doses of various chemicals together may not reveal the true body burden to an individual. If chemicals are difficult to detoxify and a person has a diminished capacity to do so due to inflammation, illness or nutrient deficiencies, the cumulative toxic effects could be dramatic.

In the case of St. John's wort, the authors are mistaken in saying that, "since the active component responsible for this has not been identified, there is no advice on correct or safe dosage". Quite the contrary, there is a therapeutic monograph on the use of this herb: <http://www.herbalgram.org/default.asp?c=he094>, as well as a good body of science.<sup>33-36</sup>

The fact that St. John's wort may interact with some drugs is not an indictment. A commonly used warning statement on the label of St. John's wort products cautions about these possible interactions.<sup>37</sup> Common foods and spices like ginger, garlic and grapefruit also can interact with drugs, yet where are the researchers demanding warning labels on these products?

The identification of an active component has never been the sole determinant of the use of herbs, even at the point when herbs were the predominant therapeutics listed in medical reference works prior to World War II. The search for an active component is a mindset that's more pharmaceutical than nutraceutical, betraying an institutional bias against unpatentable natural substances. Valuing the native genius of nature means realizing that a whole herb may be gentler and more balanced than is a constituent molecule with a specific drug-like action. Think aspirin versus white willow bark: the herb does not commonly cause stomach bleeding, as the isolated drug –even as the acetylated form - usually does.

For an article coming from a non-profit group that exists to promote evidence-based science, I find the arguments to be unconvincing and partially unrepresentative of the whole body of facts. The presence of nutrients and other compounds, including trace elements, in food and food

supplements is crucial to the process of detoxification. The roles of natural nutrients and the total toxic load are essential to our understanding of the body's detoxification capacity.

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- 31 (Average 1982-1998): According to Canadian researchers, approximately 32,000 hospitalized patients (and possibly as many as 106,000) in the USA die each year because of adverse reactions to their prescribed medications.

Source: Lazarou, J, Pomeranz, BH, Corey, PN, "Incidence of adverse drug reactions in hospitalized patients: a meta-analysis of prospective studies," *Journal of the American Medical Association* (Chicago, IL: American Medical Association, 1998), 1998;279:1200-1205, also letters column, "Adverse Drug Reactions in Hospitalized Patients," *JAMA* (Chicago, IL: AMA, 1998), Nov. 25, 1998, Vol. 280, No. 20, from the web at <http://jama.ama-assn.org/issues/v280n20/full/jlt1125-1.html> , last accessed Feb. 12, 2001.

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36 A total of 11 studies have compared SJW preparations with conventional antidepressants (7 tricyclic; 4 SSRI) concluding that SJW is effective for mild to moderate depression with a low side effect profile (Kasper, 2001). (Herbalgram) Kasper S. *Hypericum perforatum—Review of clinical studies*. *Pharmacopsychiatry* 2001;34 Suppl. 1:S51–5.

37 Warnings: Do not exceed 3 capsules daily, unless directed by a health care professional. Larger amounts may contribute to photosensitizing reactions (skin reddening) in the presence of strong sunlight or tanning beds. If you are presently taking MAO-inhibitors or other antidepressant medication, consult your health care professional prior to use.