

# Reversing Heart Disease with a Vitamin

By Daniel Cobb, O.M.D.

WHAT IS ONE OF THE world's very best treatments for arteriosclerosis (aka hardening of the arteries via plaque deposits)? The treatment doesn't involve drugs or surgery; it requires only commonly available nutritional supplements, and can substantially improve a person's condition inside of a month. This therapeutic treatment has been around for 50-60 years, has been effective in tens of thousands of cases, and was championed by Linus Pauling<sup>1</sup> who was a two-time recipient of the Nobel Prize in science.

The treatment involves supplements that cost less than \$90 per month, and the only side-effect is that you become more resistant to colds and flu.

An important note is that it's a mistake to think of arterial plaque deposits as heart disease itself. The plaque deposits lining the walls of arteries are a downstream effect of what begins as damage to artery walls. Under optimal conditions, this damage would be quickly repaired, because the major arteries – particularly coronary arteries - are under significant mechanical stress and having the blood “break through” a major artery wall could be almost immediately lethal and the body uses plaque to keep that from happening.<sup>1</sup>

The arterial repair process revolves around the creation of new collagen and elastin fibers in the area of the damage. There is a package of nutrients necessary for the creation of these fibers, and almost all of those nutrients are usually available in sufficient quantity in a healthy body. However, one of those nutrients, vitamin C, is often in short supply.<sup>2</sup>

Vitamin C is involved in hydroxylation reactions, and plays a critical cross-linking part in the creation of collagen fibers.<sup>21</sup> The cross-linking is what gives the fibers most of their strength. It is possible for the body to make collagen in the absence of vitamin C, but the resulting collagen, that lacks the cross-linking, will be very weak and fall apart easily.

Vitamin C performs many functions. It is an antioxidant and it is required by the adrenals for best response to stress.<sup>4</sup> Vitamin C plays an important part in the immune system, besides being required to produce collagen fibers, a key component of arterial self-repair.<sup>1</sup> It is also used by the body to chelate, or remove heavy metals bit by molecular bit.<sup>5</sup> It is important to point out that vitamin C is not stored in the body, nor does the human body produce vitamin C on its own.

Fortunately, however, vitamin C can be found in most foods. It is present in every fruit, vegetable, and even in meats. Vitamin C, however, is fragile, and heat used in cooking temperatures compromises it.<sup>6</sup> So, if most of your food is cooked, dried, preserved, processed, packaged, or canned, then it's likely you aren't getting enough vitamin C from your food, thus risking that you might not have enough vitamin C for crucial body functions (such as synthesizing collagen fibers).

When artery walls are damaged and vitamin C is in short supply, your body may not be able to fix the damage optimally, but the body has a plan “B.” As in the story



© iStockphoto.com/dulezidar

of the Dutch boy who sticks his finger in the dike, your body will try to shore up the weak points in the artery walls until they can be repaired. The plaque deposits that heart disease patients have been told to be so afraid of are actually band-aids purposely placed by the body at weak points of the arteries to prevent deadly breakthrough bleeding.

The major problem with Plan B, plaque repair of artery walls, is that until very late stages in this disease process, there is no pain, and the person is usually totally unaware of any problem. When there is a lack of vitamin C, instead of using the remedy of vitamin C to repair the damage to the artery walls immediately, the body has to make more plaque that then accumulates. This results in more deposits, and, in places where the artery wall damage is more concentrated, a thicker and thicker buildup of plaque. Eventually the damage in a particular area of an artery may be so great that the body faces a difficult choice – either risk breakthrough bleeding at the point of the greatest arterial weakness or risk having a blood clot close off the artery entirely. When a person finally gets to this stage, a blood clot is often the last step to closing off the artery and bringing about a heart attack.

The plaque deposits are actively engaged in saving our lives – by preventing breakthrough bleeding. Because the fear and hysteria about heart disease is so pervasive, it is useful to point out that the plaque deposits and all their component parts, including cholesterol, lipoprotein(a), calcium (remember the dreaded “calcium score”?), are not enemies. The plaque deposits and all their component parts are where they are on purpose, not by accident. They are serving to keep us alive. As long as we respond in a timely manner, plaque deposits and their components do not need to be attacked by drugs, mechanically removed by balloon angioplasty, or circumvented using bypass surgery. If we follow the logic of the “vitamin C” model of treating heart disease, all we need to do is simply repair the damage to our artery walls. Once we remove the purpose for their existence, these plaque deposits should fall apart and leave without requiring any further encouragement. [See adjoining sidebar.]

The vitamin C theory is still just a theory until we try to test it out on real people with the plaque-deposit blockages type of heart disease. So, the question becomes: what happens when we provide abundant quantities of the nutrients required to fix damaged areas of artery walls. The almost universal result is that, as the arterial damage heals, the plaque deposits are released from the artery wall. Eventually this disease condition can be substantially or even completely reversed.<sup>7</sup>

The unfulfilled potential of this previous statement is that, although there are mountains of anecdotal evidence that the vitamin C approach works, there have been very few controlled scientifically designed studies that come to the same conclusion. In one study, in 1954, Canadian M.D. G. C. Willis showed that doses of 500 mg 3 times per day made very substantial improvements in the arterial blockages of heart patients.<sup>18</sup>

There is one other study that was designed to prove that chelation therapy

---

*We are creatures who look before and after: the more surprising that we do not look round a little, and see what is passing under our very eyes.*

—Thomas Carlyle, *Sartor Resartus*, Oxford World's Classics, 2008 ed., pg. 4

## Calcium and Heart Disease

COMMON SCANS of the heart in heart disease patients involve a “calcium score.” Zero is the best score. Reading these lab test results sometimes gets our competitive juices flowing, and we want to obliterate the “dangerous” calcium. But this is just as misguided as reducing blood cholesterol.

Plaque deposits are primarily a combination of cholesterol and calcium. Where conventional medicine presents the plaque deposits as pathological, I present them as adaptive. The calcium is part of the plaque deposit, and the plaque deposit is part of the adaptive reaction to “band-aid” over weakened artery walls.

Once you accept the idea that the calcium is there on purpose instead of by accident, then less care needs to be paid to how the calcium (and the rest of the plaque deposit) can be removed. When the purpose for the plaque deposit disappears (when repairs are made to the damaged area of the artery wall behind the plaque deposit), then the calcium, along with the rest of the plaque deposit will disappear on its own.

What draws a plaque deposit to the artery wall is the damage/inflammation.<sup>9</sup> As the damage is repaired and inflammation is reduced, the plaque deposit gradually disconnects from the artery wall.

Whereas, it might be true that ascorbic acid will chelate calcium ions from a plaque deposit, it is also true, as long as the plaque deposit is serving a valuable purpose, that whatever calcium is chelated by the vitamin C will be quickly replaced by the body's plaque-forming processes. The bottom line is that the vitamin C does not effectively remove the calcium from the plaque deposit. The vitamin C releases the plaque deposit by repairing the damage that started the plaque deposit in the first place.

—Dan Cobb, O.M.D.

## Omega-3 Fatty Acids Prevent Muscular Deterioration

OMEGA-3 FATTY ACIDS have been shown to promote muscle protein production in the elderly, and to combat the onset of sarcopenia, an age-related condition marked by the decline of lean body mass and strength. The study, led by Bettina Mittendorfer (Division of Geriatrics and Nutritional Science at Washington University School of Medicine, St. Louis), showed that adding four grams of omega-3 fatty acids (DHA and EPA) to the diet for eight weeks produced significant increase in muscle mass. Along with this came an intensified activation of a signaling pathway designated as mTOR-p70s6k, which the researchers identify as an "integral control point for muscle cell growth."

People in their twenties have up to 60% fat-free muscle mass, which drops to under 40% in their seventies. "A major cause for the loss of muscle mass with advanced age is the inability of aging muscle to adequately increase the rate of muscle protein synthesis in response to nutritional stimuli," the authors of the study stated. The study was published in the American Journal of Clinical Nutrition. The exact mechanism by which omega-3s reverse this effect of decreased muscle protein synthesis remains unknown.

From: "Omega-3s May Counter Degenerative Muscle Loss: Study," by Stephen Daniels. 23 Feb. 2011. Pressman. [www.drpressman.com](http://www.drpressman.com)

## CHELATION THERAPY

AN ALTERNATIVE TREATMENT FOR CIRCULATION DISORDERS

Dr. Jonathan Collin, M.D.  
Diplomate, American Board of Chelation Therapy—Two Of Aces:

Kirkland (425) 820-0547  
Port Townsend (360) 385-4555

does not work. The way that the study design was arranged was to make chelation look impotent by giving both the test group and the controls vitamin C and magnesium IV's, and then to look only at the additional benefits derived from using IV EDTA in the test group. The study "proved" that chelation didn't do much good, but what was left unstated in the summaries was that in both arms of the study (test and control) subjects improved their cardiovascular performance in a highly significant way ( $P < .001$ ).<sup>19</sup> Thus, what this study really "proved" was that IV vitamin C and magnesium is absolutely wonderful for cardiovascular function.

Why are the studies so few and far between? Heart disease treatment is a huge industry, and the industry at large does not appreciate competition from a common vitamin that can be produced for a handful of pennies per dose, does not require a prescription, and is effective both as a cure and for prevention. The National Institutes of Health (NIH), and especially the FDA have found a comfortable niche operating as the Washington D.C. branch office of the pharmaceutical industry trade group.

There have been other studies proposed to test the vitamin C theory of heart disease. The latest one, in 2002, was put together by a group affiliated with the Vitamin C Foundation. This study was also rejected by the NIH.<sup>20</sup>

There is another category of studies, such as the Physicians' Health Study II, which examined the effect of vitamin C on heart disease and concluded that vitamin C has no positive effect on heart disease.<sup>22</sup> This study however was funded by pharmaceutical companies that stood to lose big profits if vitamin C gained respect as a heart disease treatment. The skewed study not only used low doses (500 mg / day) but also the worst kind of vitamin C (dl-ascorbic acid with tableting aids and excipients) and distributed the vitamin C only once a year (vitamin C does not age well because it is an unstable molecule). Studies such as this don't really count as a test of the "vitamin C theory" because of their flaws and the fact that the dosages and quality were so far below the recommended levels.

The following, in general terms, is the vitamin C treatment for arteriosclerosis. An optimal heart healthy formula also includes other supplements and nutrients. Here is an example of a full list of optimal supplementation with dosages and intended purposes:

**Vitamin C** – at least 6 grams per day. C is an antioxidant that limits further damage and plays a role in creation of collagen fibers. In lower doses, vitamin C mineral ascorbates (e.g., magnesium, calcium) may be a good choice. However, in higher doses, the amount of mineral intake that comes along

---

*Utterly amazingly, where I am there has been no looting, no pushing in lines. People leave their front doors open, as it is safer when an earthquake strikes. People keep saying, 'Oh, this is how it used to be in the old days when everyone helped one another.' ..I find food and water left in my entranceway. I have no idea from whom, but it is there. Old men in green hats go from door to door checking to see if everyone is OK..."*

—"Ann," in Japan during the March, 2011 earthquake and tsunami, from *Medical News Commentaries*, "Finding Beauty When All the Lights Go Out," Mark Sircus, Ac., OMD, [newsletter@magnesiumforlife.com](mailto:newsletter@magnesiumforlife.com)

This treatment,  
works  
wonders.  
...Heart  
disease is  
easier to treat  
than low-back  
pain...

with the ascorbate vitamin C needs to be taken into account. In some patients, vitamin C dosages may rise as high as 18 grams per day (Linus Pauling's daily dosage), and at that level the mineral dosages in the ascorbate forms of C could cause problems/imbances.

To get the best results, I recommend Cardio-C from the Vitamin C Foundation. I use it myself. It is a powder, easily absorbed and has no excipients.

The vitamin C portion of this treatment is primarily pure crystalline ascorbic acid. Some people may develop diarrhea from high doses of vitamin C, especially when they are taking pure ascorbic acid. The intestinal problems are usually avoided by dividing the dosage into about four or more smaller doses per day. Dividing the doses is a wise idea even if intestinal problems never occur, because vitamin C has a half-life of about 30 minutes in the blood,<sup>16</sup> and taking the vitamin C several times per day gives you much better "coverage."

*Rutin*—500 mg per day. Works with vitamin C to make it last longer.<sup>8</sup>

*L-Lysine*—6 grams per day. Used to build collagen fibers and also helps disintegrate plaque deposits as repairs are being made.<sup>9</sup>

*L-Proline*—1 gram per day. Helps to disintegrate plaque deposits as repairs are being made.<sup>9</sup>

*Vitamin E*—(should contain all 4 tocopherols and all 4 tocotrienols)—400 to 800 IU / day. Vitamin E is a fat-soluble antioxidant that relieves vitamin C of some antioxidant responsibilities so that the vitamin C can be used to create collagen fibers. Vitamin E is also a mild anticoagulant.

*Magnesium* (as citrate or chelated)—400 mg / day. It promotes healthy heart rhythm. Magnesium is also a mild anticoagulant.<sup>10</sup>

*Co-Enzyme Q10*—100+ mg per day. Enables the heart to function at high energy levels. May be even more necessary because of high blood pressures that commonly accompany occlusive heart disease.<sup>11</sup>

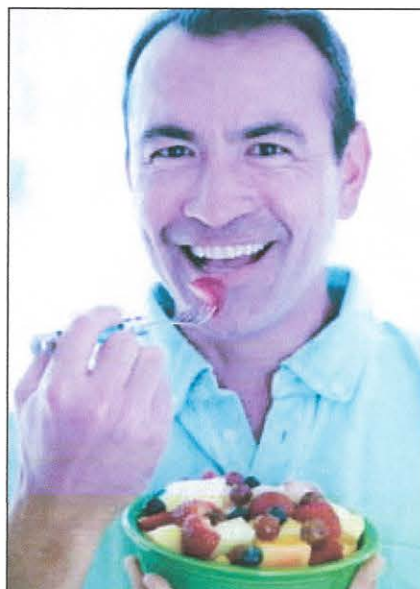
*Vitamin K*—100 micrograms (mcg) / day. K is a natural coagulant to balance the anticoagulant effect of magnesium and Vitamin E, making the blood-thinning effect of the rest of this formula neutral. (K1 and K2 are the natural forms of Vitamin K.)

*Copper*—2 mg / day.<sup>12</sup> Copper is also necessary for the production of collagen fibers.<sup>3</sup> It seldom gets top billing because fewer people are deficient in this mineral than magnesium for example.

*Zinc*—about 20 mg per day. Zinc is used to repair tissues, and also balances the copper.<sup>13</sup>

*B Complex*—use dosage on bottle. Vitamin B6, B12 and Folic acid are useful to reduce levels of homocysteine, which is known to damage blood vessel walls.<sup>14</sup>

*Omega-3 fats*—from fish oil or flaxseed oil. Somewhere between 1 teaspoon and 1 tablespoon per day depending upon your overall fat intake and body size. Highly unsaturated oils can be effective at quickly moving oxygen. The heart is one area where a lot of oxygen needs to be used. Make sure that the oils you use are fresh and refrigerated, because these highly unsaturated oils go rancid easily.<sup>15</sup>



© iStockphoto.com/monkeybusinessimages

## Lavender Oil: Potent Fungicide

THE RECENT INCREASE of drug-resistant fungal infections, especially among the immunocompromised, has prompted renewed examination of natural remedies. Prominent here is lavender oil. A study by scientists from the University of Coimbra in Portugal, published this year in the *Journal of Medical Microbiology*, demonstrated lavender oil's effectiveness against two important fungal strains: *Candida* species which cause thrush, and dermatophytes, which feed on the keratin in skin, nails and hair, causing athlete's foot and ringworm. Lavender oil attacks these fungi by damaging their membranes. Says study co-leader Lígia Salgueiro: "Lavandula oil shows wide-spectrum antifungal activity and is highly potent. This is a good starting point for developing this oil for clinical use to manage fungal infections." The researchers call for experimental trials in order to see how their laboratory experiments translate when applied to living subjects.

Lavender oil has already proven popular as a topical application to fungus infection of the nails, which, because they have no blood supply, are unreachable by medicines taken internally; such medicines only work if the infection is in the blood.

From: "Lavender Oil Has Potent Antifungal Effect." 16 Feb. 2011. Science Daily at <http://www.sciencedaily.com>, and: "Essential Oils Can Be Used to Cure Toenail Fungus." Anti Nail Fungus. <http://antinailfungus.com>

*Subscribe*

and save \$11/year

[www.wellbeingjournal.com](http://www.wellbeingjournal.com)

## Muscle Building and Aging

A RECENT REVIEW by University of Michigan researchers shows that inactivity for those who are aged 50 or over can mean losing up to as much as 0.4 pounds of muscle per year (this type of loss can begin even earlier if a person is sedentary as a younger adult). However, the researchers note that even if you're someone who is well over 50, you can increase your strength by 25 to 30 percent and add 2.42 pounds of lean muscle in an average of 18 to 20 weeks. The University of Michigan researchers who reviewed the literature pointed out the benefits of progressive resistance training for older adults, and they suggest beginning with squats, modified push-ups and tai chi, Pilates or yoga. They also advise working with a professional who can design a strength training program that evolves to such disciplines as working with weights and machines to build and strengthen muscles. The review mentions that in as little as five months' time significant progress can be made, substantiating once again the fact that the body can regenerate remarkably.

Full story published in the March 2011 issue of *The American Journal of Medicine*.

In my clinic, we have a saying, "Heart disease is easier to treat than low-back pain." This treatment, when done correctly, works wonders.<sup>7</sup> Out of all my heart disease patients, I have had only one who did not improve significantly, and that one patient did not use the recommended type of vitamin C. Another patient last year completely reversed her heart disease in 2 months. Δ


DANIEL COBB, D.O.M., (Oriental Medicine) practices at the Integrative Holistic Healing Center in Santa Fe, New Mexico. He teaches anatomy and physiology at Southwest Acupuncture College and pathophysiology at the New Mexico Academy of Healing Arts, both in Santa Fe. Contact: danielcobb2@yahoo.com.

Daniel Cobb's complete book, *Reversing Heart Disease* can be found at <http://www.lulu.com>

### REFERENCES

1. Tower Laboratories Corporation, *The Pauling Therapy: Is It a Cure for Heart Disease?* [http://www.hearttechnology.com/pauling\\_therapy.html](http://www.hearttechnology.com/pauling_therapy.html)
2. Supplements Store, *Vitamin C (ascorbic acid) Review*, <http://www.vitamins-supplements.org/vitamin-C.php>
3. Natural-Health-Information-Center.com, *Copper, Essential to Zinc, Iron and Vitamin C Function*, <http://www.natural-health-information-centre.com/copper.html>
4. Luzia Braun, *Vitamin C and Your Adrenal Glands*, <http://ezinearticles.com/?Vitamin-C-And-Your-Adrenal-Glands&id=840883>
5. Ronald L. Hoffman, *Chelation*, <http://www.drhoffman.com/page.cfm/90>
6. Kristie Leong, M.D., *Does Cooking Destroy Vitamin C?* [http://www.associatedcontent.com/article/2660233/does\\_cooking\\_destroyzz\\_vitamin\\_c.html](http://www.associatedcontent.com/article/2660233/does_cooking_destroyzz_vitamin_c.html)
7. Owen Fonorow and Sally Snyder Jewell, *Practicing Medicine Without A License*, Lulu Press (Lulu.com), 2008, p. 145
8. Weight Control Room, *Rutin: Vitamin C's Best Friend*, <http://www.weightcontrolroom.com/articles/rutin.htm>
9. Jim English and Hyla Cass, MD, *Linus Pauling's Collagen Connection*, <http://www.vrp.com/heart-health/vitamin-c-and-heart-health-linus-paulings-collagen-connection>
10. Wayne Martin, BS, ChE, *Reducing Deaths From Hearts Attacks and Cancer*, [http://www.second-opinions.co.uk/martin\\_chd.html](http://www.second-opinions.co.uk/martin_chd.html)
11. Darrell M., *Co-Q10 and L-Carnitine*, <http://www.disabled-world.com/artman/publish/l-carnitine.shtml>
12. Laurie Warner, MA, CNC, *Copper-Zinc Imbalance: Unrecognized Consequence of Plant-Based Diets and a Contributor to Chronic Fatigue*, <http://curezone.com/forums/fm.asp?i=1452006>
13. Wikipedia, *Wound Healing*, [http://en.wikipedia.org/wiki/Wound\\_healing](http://en.wikipedia.org/wiki/Wound_healing)
14. Harvard School of Public Health – *The Nutrition Source*, "Three of the B-Vitamins: Folate, Vitamin B6, and Vitamin B12," <http://www.hsph.harvard.edu/nutritionsource/what-should-you-eat/vitamin-b/index.html>
15. Dr. Robert Jay Rowen, *You Don't Have To Get Cancer*, <http://brianpeskin.com/soapr07-2-4-pgs-1.pdf>
16. *New World Encyclopedia*, "Vitamin C," [http://www.newworldencyclopedia.org/entry/Vitamin\\_C](http://www.newworldencyclopedia.org/entry/Vitamin_C)
17. Owen Fonorow and Sally Snyder Jewell, *Practicing Medicine Without A License*, Lulu Press (Lulu.com), 2008, p. 83-86
18. G. C. Willis, MD; A. W. Light, MD; W. S. Gow, MD, *Serial Arteriography in Atherosclerosis in Human Beings*, <http://www.internetwks.com/pauling/study.htm>
19. Fonorow, Owen R., *Vitamin C and Magnesium Used as Placebo in Chelation Study*, <http://www.internetwks.com/owen/ETHICSPAPER.htm>
20. Vitamin C Foundation, *Major Articles*, <http://www.vitaminfoundation.org/page2.shtml>
21. Pauling, Linus, *How to Live Longer and Feel Better*, <http://www.vitaminfoundation.org/collagen.html>
22. Physicians' Health Study webpage, <http://phs.bwh.harvard.edu>

WHOLESALE/RETAIL



US Agent/Distributor for  
**AJEBINE™**  
*(Funtumia Elastica)*  
 AVAILABLE IN CAPSULES OR POWDER  
 Nature's Gift for the relief of Allergies,  
 Asthma & other Respiratory Ailments  
 A food supplement used for hundred of years in West Africa to eradicate asthmatic symptoms

Available now in the USA from:  
 (FORMERLY SELLING YAMOA - FUNTUMIA ELASTICA)  
**Ojibwa Tea of Life/Herb Resources**  
 PO Box 200041, Denver, CO 80220  
**WWW.OJIBWATEA.COM**  
 Tel: 303-322-7930 Fax 303-316-3971  
 Want to sell Ajebine™ in your store or clinic?