



The Glutathione Corporation Beacon

October 2002

Cancer Sense



The following e-mail is typical of the concerns faced by many people. It was modified and made "Anonymous" for privacy

To: products@mdglutathione.com

Sent: Monday, October 10, 2002

SUBJECT: Vitamin Regimen

This question is for Dr. Demopoulos

I am a mid-30's female, healthy, fit, no significant past medical history.

Had my first baseline mammogram in March of this year.

The findings were:

Small nodular density is faintly seen on the spot compression films. It is 4 - 5mm in size. This nodular density is presumably solid in nature. No suspicious microcalcifications are shown. There is no distortion of internal breast architecture.

Impression:

Category 3-probably benign findings. Small nodular density.

Follow up mammogram repeated September, 2002,

The radiologist and oncology surgeon reported on the September, 2002 mammogram that there was no growth or change in shape and to repeat again in March 2003.

I am wondering what the best regimen of TGC products would be for me?

Thank you for your time,

Sincerely,

Anonymous

Dear Ms. Anonymous:

The attached regimen is suggested. It is a combination of serious fat restriction, modest in carbohydrates, and high in protein sources that have minimal fat or carbohydrates associated.

Long term studies that are essentially life long, from countries around the world show an irrefutable, direct relationship between fat consumption and risk of breast cancer. The malignant processes in humans begin 30-50 years prior to diagnosis. Therefore, the Harvard nurses study and others are not long enough or large enough to contribute to the question of fat and cancer.

A teenage girl consuming the typical “teen food”, starting around 14, and continuing into young adult-hood with “college food”, and then exciting “first job food” will have started her breast and other cancers. It is not surprising to find breast cancer in the early 30’s, with a first peak at 45 and then a second peak at 65.

Fat, much of it from salad dressings, causes cancer for several reasons:

1. Most ingested fats are already rancid, as in fried chicken, salad oils, and fried potatoes. Rancid fats are termed “oxidized”, and these start toxic free radicals that activate “growth genes” in your DNA, like the Ras genes, and injure normally active “anti cancer genes”, like p53.
 2. Rancid fats also destroy the major protective, signaling antioxidant made by our body, glutathione (GSH). Glutathione normally suppresses Ras and other “growth genes”, and protects p53 against injuries by free radicals that emanate from rancid fats in your diet. But the aberrant quantities of fat consumed overwhelm GSH, and your DNA is laid bare to free radicals from the fat.
 3. Dietary fats, especially the polyunsaturates, and cholesterol blunt your immune system. The “warrior cells” of the immune system need high concentrations of glutathione (GSH) to function in their everyday battles vs. infection and vs. cancer. High fat means low GSH, and an inept immune system.
 4. Dietary fats also produce compounds that directly damage the warrior cells, and also send confusing chemical signals. For the immune system to mount an efficient defense, there is a crucial need for several different types of immune system cells to function in a coordinated manner. They need the right chemical signals, at the right time. Dietary fats “smudge” these vital chemical signals.
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The idea that breast cancer is “genetic” is true for less than 10% of cases. The remaining ~90% develop as a function of:

1. what the person chooses to eat (high fat, high sugar, low fiber, low vegetables and low fruit promote cancer);
2. what body configuration the person chooses to have;
3. what toxic habits are chosen (alcohol, tobacco, marijuana, cocaine and opioids destroy glutathione);
4. what activity level a person has, life long (sedentary promotes fat accumulation; body fat has the ability to transform some precursor substances into estrogens, an excess of which fosters breast cancer);
5. what herbal supplements are consumed (the isoflavones and other “estrogen-like” substances found in soy, and a number of other “feminine supplements” contain sufficient estrogenic activity to help promote breast cancer);
6. neglect of “aggressive” forms of fibrocystic disease, or suspicious masses found on self-examination, or mammography ; failure to keep timely appointments, for follow ups and for biopsies is a mistake.

The lists above are not comprehensive, but provide a guide. Consult your most educated source, your licensed M.D.

Harry B. Demopoulos, M.D.

Attached: Dr. Harry B. Demopoulos suggested program regimen
