

## WATER BABIES

On October 14, three days before the Big Quake, I found myself at San Francisco's Roxie Theater, moved in a very different way, by a video documentary, *Water Baby: Experiences of Water Birth*. Filmmaker Karil Daniels, who lives nearby in the Mission district, was there to answer questions from the audience and tell a little about the five years she spent researching and filming in California, France, and the USSR. Among the individuals whose experiences this intrepid young woman recorded on camera are Igor Charkovsky, the Russian water birth pioneer, at work in Moscow and Leningrad; Dr. Michel Odent, barefoot, with his trousers rolled up, helping a birthing woman in the shallow, round pool in his clinic in the south of France; Marilyn Rodgers giving birth at home in San Francisco in the special 8 ft. x 3 ft. tub given to her and her husband by friends.

Although at the age of nine I sat on the floor next to the box where our cat was having kittens, and cheered her on every way I could; and, at 13, did the same for a very nice mama snake who was busy squeezing out her young ones, I have never seen a human birth, except on film. I didn't see my first child's birth, I only felt it, and I was out cold for the two subsequent Cesarean births. The underwater births in Daniels' video are magical, awesome, indescribable. The women do not appear to be in pain but almost in a hypnotic, surreal state—and suddenly a little head appears underwater!

No, the babies don't drown, and infections for mother and baby have not been a problem in the hundreds of recorded water births. They're not for every woman, however. Dr. Odent finds that entering the pool eases painful labors for many of his patients, but only some of them elect to remain in the water for the actual delivery. All the

advocates of water birth agree, however, that relaxation of a profound kind, rarely seen in labor, seems to envelop a woman as the warm waters support her tired and tense muscles. The first American physician to provide facilities for women who choose to labor or deliver in water, Michael Rosenthal, M.D. of Upland, California, models his center and its philosophy on Dr. Odent's work, but invites the woman in labor to control the birth process. Karil Daniels, in her *Water Baby Information Book*, describes a birth she filmed in his center:

*Janet's water birth was especially unique because she actually delivered her own baby. Dr. Rosenthal was sitting only a few feet away, ready to help if he was needed, but he encouraged Janet to reach down as the baby emerged, and lift her little boy up and out of the water herself. It's impossible to fully describe the many layers of emotion that were written on her face as she birthed her baby. She was delighted, surprised, a little scared, relieved, amazed, empowered, and in love, all simultaneously. Seconds after the baby was out she burst into laughter. Certainly, this was a very different experience than we are accustomed to imagining when we think of childbirth.*



The book contains photos and personal reports by mothers of their water births; deliberations about the safety for mother and child of water births, pro and con; medical reports; discussions by the doctors who are pioneering this approach to "gentle childbirth"; Karil Daniels' own experiences in her filming and travels; and a comprehensive Water Birth Resource List of nurse-midwives, doctors, and other health professionals worldwide who can provide help or information.

To find out how to buy or rent *Water Baby* or order the audio cassette tape with soundtrack of the video, written transcript of the video, the *Water Baby Information Book*, or just the excerpted Resource List, contact Karil Daniels, Point of View Productions, 2477 Folsom St., San Francisco CA 94110. Phone: (415)821-0435. FAX(415)931-0948.

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## UPSTREAM & ONWARD !

I first became interested in omega-3 fatty acids early in 1983. Donald O. Rudin, M.D., writing in non-mainstream medical journals, was suggesting we were experiencing a modern epidemic of physical and mental disorders—a kind of "Pellagra II"—related to dietary losses of certain overlooked required fats. He said these fatty acids normally participated in an intricate, bodywide system that mediated all human functions, including those of the brain. When my interest in his curious theory was piqued enough finally to contact Dr. Rudin by phone, he told me he had headed a research department in a clinical setting for almost 25 years, and had his work consistently published in leading medical journals. Consequently, at first he had been taken aback when these same journals kept turning down the papers he submitted dealing with his new studies on the "missing-link" fatty acids

It was his first encounter with the roadblocks set up by orthodoxy to deal with 'capricious' theories that upset their applecarts. Only a handful of scientists in the late '70s were bucking the tide to explore omega-3 fats. Their work was dismissed as inconsequential or ignored by the hierarchies, who were focusing on the only 'worthy' polyunsaturated fats, the omega-6 group.

Rudin, drawing on the investigations of the rebel scientists, recognized that omega-3 fats (in tandem with omega-6 fats) not only were basic to the body's scheme of systemic regulation, but had been chased out of the diet for about 70 years—facts he documented in his work, the first of its kind. His studies led to his hypothesis, first published in 1980, that ailments such as heart disease, immune disorders, cancer, arthritis, a great many skin disorders, some mental illnesses, etc., might not be unrelated at all. Rather, they could be different manifestations of *nutritionally based*, bodywide 'disregulation,' set in motion in part because of imbalances created by loss of omega-3 fats.

As you can imagine, it went over with the medical establishment like a lead balloon. His theory made a lot of sense to me, however, so I began pursuing it in the newsletter. A few years later, describing Rudin's successful pilot study with 44 patients in which flaxseed oil supplied the missing omega-3 fats, I wrote: "I don't blame anyone—clinicians or laypersons alike—if they're skeptical about the information I've presented. I'm asking for a snake oil label when I describe oils that can overturn major and minor intractable ailments..." [FL 25, 1985].

Well, I guess you know what's happened since then: an explosion—a veritable *glasnost*!—in the medical attitude toward my favorite fats. Fish oil, a major source, is being investigated furiously in medical centers all over the world. Research work with flaxseed oil and flaxmeal is blossoming internationally. Encouraging results already have been documented in such 'unrelated' health problems as angina, high blood pressure, rheumatoid and osteo arthritis, migraine, dry skin disorders, psoriasis, Raynaud's disease, and asthma—for starters! These are human studies; in animal studies, promising results also are being seen in kidney disease, auto-immune disorders, and cancer.

Dean Edell, M.D. had this to say in his column "Medical Journal" in the *San Francisco Chronicle*, November 15, 1989:

*Here's a snake oil tale with a twist. When a curious S.F. physician shipped a sample of snake oil to the lab recently for analysis, he was told that there actually is something to the stuff. Richard Kunin, who has a longstanding interest in nutritional therapy, learned that the oil, extracted mostly from water snakes in China, is almost 20 percent omega-3 fatty acid, the active ingredient in fish oil.*

*A sardine, one of the richest sources of omega-3 fatty acids, contains 21.1 percent. Fish oil has been found to offer some benefits in the treatment of arthritis, heart disease and psoriasis.*

*Western medicine relegated snake oil to the bottom of the charlatan's bag of tricks long ago. But the Chinese have been using it to treat arthritis and skin problems for centuries.*

Kristan Lawson, a canny reader from Berkeley who mailed the news clipping to me, writes: "Clara, I thought this article on snake oil was quite amazing....Those notorious snake oil salesmen were right, after all!"



Richard Kunin, M.D. happens to be an orthomolecular psychiatrist who practices nutritional medicine in San Francisco. He told me on the phone that his article on snake oil on which Edell's column was based appeared in the August 1989 *Western J. of Medicine*. [I'll be reporting on it in a future newsletter.] Kunin was an early supporter of Rudin's concepts and began, early on, to add omega-3 foods and oils to his patients' diet and supplement programs.

Orthomolecular doctors employ nutrients and normal constituents of the body as a basic means of correcting biochemical imbalances, which in many individuals underlie their mental disorders. Antidepressants or tranquilizers also may be employed when needed, but are slowly withdrawn wherever possible, once the patient begins to respond to orthomolecular treatment—the goal being healing, not lifelong dependance on medications.

### Manganese Overlooked

Have you heard of tardive dyskinesia? It's a dreaded side effect of longterm tranquilizer use, characterized by involuntary tremors and movements, sometimes violent and grotesque, of the tongue, face and limbs. A severe form is found in up to 50% of individuals over the age of 60 who have been on phenothiazine or other tranquilizers for over three years, but the disorder may come on sooner to persons of any age. Reflecting the standard medical approach, the current *MERCK MANUAL* (15th ed., 1987) has no remedy to offer, adding the dispiriting note "the problem does not disappear when the drug is discontinued..."

Yet as long ago as 1976, Dr. Kunin reported a major breakthrough in its treatment (*J. Orthomolecular Psychiatry*, 5:4). Abram Hoffer, M.D., Ph.D. writes: He [Kunin] concluded that tardive dyskinesia might be due to manganese deficiency caused by the tranquilizers. The tranquilizers are complex molecules that could chelate with manganese and carry it out of the body...

...The part of the brain which prevents abnormal muscular movements, the extrapyramidal system, should be rich in manganese...Kunin decided to restore manganese levels...Altogether, Kunin reported the results of treating 15 patients. Ten were also given vitamin B3 [niacin]. In four there was a dramatic and almost immediate cure. In nine there was definite improvement in two to five days. Only one patient did not respond....

The combination of manganese and vitamin B3 improved 14 out of 15 (93 percent) of the patients suffering from tardive dyskinesia. This is really a remarkable achievement for a disease generally recognized as irreversible and untreatable. [Dr. Kunin tells me he has seen improvement in 28 more cases.

I'll be writing more about his work in future issues. CF] So far no further reports have appeared in the medical literature. This is due to several factors: (1) few psychiatrists read the *Journal of Orthomolecular Psychiatry* (now called the *Journal of Orthomolecular Medicine*) where Kunin's report appeared; (2) most psychiatrists do not believe reports written by orthomolecular psychiatrists; (3) and once a disease is labeled untreatable by establishment leaders (i.e., the FDA), it becomes impossible to believe that something as simple and benign as manganese and vitamin B3 could be a treatment. Nor will the drug companies have the profit motive to examine these substances, since they are not patentable...

**D**r. Hoffer, a pioneer in orthomolecular medicine since 1955, writes at length about this and other gentle, remarkably effective uses of nutrient therapy in illnesses of the body and mind, as well as of the cold, disbelieving face the medical hierarchy presents towards these achievements, in two books, **ORTHOMOLECULAR MEDICINE FOR PHYSICIANS** (1989) and **COMMON QUESTIONS ON SCHIZOPHRENIA AND THEIR ANSWERS** (1987). Both can be ordered from Keats Publishing, Inc., Box 876, New Canaan, CT 06840. Write for their extensive list of health titles. They open up a lot of closed doors to health. \*\*\*



#### A TREASURE OF A COOKBOOK

Rosetta Schuman sent me her book, **CHILDREN'S LUNCHBOXES & PARTY SNACKS** (Beechwold Clinic) for

review a while back, but it wasn't until I got a gentle note from her that I remembered to haul it out from my towering Better-Late-Than-Never stack. The loss was mine; the book is a gem. Rosetta Schuman is an educator who devises menus for physicians, hospitals, summer camps, etc. and during her quarter-century association with the Beechwold Clinic in Columbus, Ohio, has provided individual nutrition counseling, demonstrated food preparation, and written books that express her and the clinic's philosophy about nutrition as a graceful instrument for building health.

The title is deceptive; the menus work equally well for breakfast and dinners, and for adults as well as children. One could stay healthy for a lifetime on the recipes in this slim volume. (Rosetta Schuman herself is well into her 80s.) They are fresh, creative and SIMPLE. Many require no cooking. She believes children who are nourished along these lines develop instincts that allow them to skip through today's nutritional minefields with little risk of becoming junkfood junkies.

An unexpected bonus is the listing of best food sources (in milligrams per 100 grams of edible portion) separately for each vitamin and mineral, even obscure ones such as choline and molybdenum. The foods appear in descending order of nutrient content, so it's easy for readers to make expert choices about the ones to stick on their shopping lists. Another plus: The sturdy ringbound book is designed to stand upright on your kitchen counter and remain open at the recipe page. (Why don't more cookbook publishers do this??)

The book costs \$14 including postage and can be ordered from Wellington Books, R.F.D. 1 - Box 223, Hillsboro, NH 03244. \*\*\*

From a great, irreverent newspaper coming out of Boonville, California in rugged Mendocino County, **THE ANDERSON VALLEY ADVERTISER**, September 20, 1989:

We were taken to a fast-food cafe where our order was fed into a computer. Our hamburgers, made from the flesh of chemically impregnated cattle, had been broiled over counterfeit charcoal, placed between slices of artificially flavored cardboard and served to us by recycled juvenile delinquents.

Jean-Michel Chapereau, 1975



#### GIVING THE FETUS ITS DUE

The name "folic acid" (also folacin or folate) stems from the word foliage. Green leaves are rich sources of this vitamin; it's water-soluble, which means the body can't store it but has to get it more or less on a daily basis from diet. Our closest cousins on the evolutionary tree, the apes, consume masses of foliage with great relish in their natural forested habitats, but our own intake tends to be trifling compared with theirs. The shredded lettuce on a fastfood hamburger may be as close as many folks get to serious greens.

For a woman at the beginning of her pregnancy, this could be bad news. A landmark study, published in conservative *Journal of the A.M.A.* on November 24, 1989, was set up by Dr. Aubrey Milunsky, director of Boston University's Center for Human Genetics, to learn whether folacin supplements early in pregnancy would protect unborn babies from devastating abnormalities of the brain and spine known as neural tube defects. His group included close to 23,000 women who, at 16 weeks of pregnancy, were having prenatal tests to detect birth defects.

The researchers found the incidence of neural tube defects in fetuses to be nearly **four times higher** in the woman who had **not** taken multivitamins during the first six weeks of pregnancy than in those who had.

## Neural Tube Defects

**T**hese are relatively common, affecting about one of every 900 infants. Malformations such as missing cerebral hemispheres of the brain; spina bifida in which part or all of the spinal cord has no protective bony encasement; and hydrocephalus in which fluid accumulates in the skull and presses on the brain, are among the variations that may cause paralysis, mental defects, or death. The scary fact discovered through increasingly sensitive prenatal tests is that neural tube defects occur very early in pregnancy, within about six weeks. That means a woman could be developing these problems in her growing fetus just two or three weeks after she misses her first period, *at a time she may not even be aware she's pregnant!*

**T**he link to folate is that it's needed for normal cell division of the fetal brain, spinal cord, and other rapidly forming neural tissues during these early weeks. While the study did not separate folic acid's effects from those of vitamins A, C, D, or E, which also were present in multivitamins taken by the women, Dr. Milunsky, basing his belief on numerous other studies, thinks folate is the critical vitamin in preventing neural tube defects. For instance, an experimental drug that blocks folic acid's action causes the defects in animal fetuses. The message he wants to convey, however, to the medical community and public is that every woman should routinely take over-the-counter multivitamins (including folic acid, of course) not only early in pregnancy, but *well before, when she is just beginning to think about conceiving!*

**N**othing makes better sense. In THE OMEGA-3 PHENOMENON, Donald O. Rudin, M.D. recommends that both the prospective mother and father be on a protective "Omega" diet of health-building foods, including all vitamin and mineral supplements and omega-3 oils, *for at least six months before conception.*

**M**ilunsky's conclusions are evoking beams of approval from the establishment, which may be taking a new tack on the benignity of nutrient supplements for pregnancy, yielding to mountainous evidence. While medical texts indicate neural tube defects tend to run in families, Milunsky suggests that a family predisposition "appears to be triggered by a folic acid deficiency."

In FL 27, 1986, I described a successful study in the U.K., where pregnant women who took folic acid had far fewer infants born with neural tube defects, *even though all the women previously had borne one or more babies with the defects.* At that time I wrote: "Perhaps the genetic aspect lay in the fact that these pregnant women 'inherited' a need for much more folic acid than their substandard diets could ever provide! Deficiencies of even the modest amounts recommended by the generally conservative nutrition establishment appear to be commonplace, not just in England but...in the United States as well." [FL 27 included a table of foods richest in folacin.]

### She Made A Difference

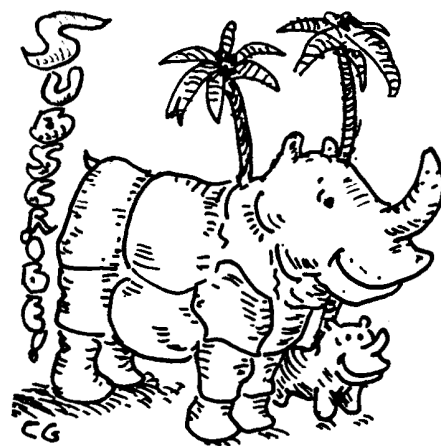
**L**aura Brainin-Rodriguez, R.D., M.S.-M.P.H., currently is the community nutritionist with the health promotion program at the Student Health Center at Stanford University, working to develop nutrition awareness and knowledge for the campus, including the athletic department. Between 1981-1983, when she was providing prenatal nutritional guidance to outpatients at Highland Hospital in Oakland, California, MediCal was not paying for prenatal supplements. Laura, a young woman with a determined bent towards social commitment, told me how she had the nursing students hunt for the cheapest sources, usually generic brands, so that her pregnant patients would be able to afford them. Where she felt that more than the maximum 800 micrograms (mcg) of folacin allowed in nonprescription supplements was needed, she would ask the nurse-midwives to prescribe 2 to 3 milligrams (2000 to 3000 mcg) a day.\*

**L**aura observed that melasma, the blotchy, brownish "mask of pregnancy" often present on the cheeks and forehead of pregnant women, sometimes disappeared in her patients when she added high folacin doses to their other prenatal vitamins and minerals. Meanwhile, of course, she continued instructing the young women

in easy ways to make sure their everyday foods met their own and their infants' nutrient needs. During talks to the medical staff about clinical signs of malnutrition, Laura pointed out the possibility that excess melasma might be related to folacin deficiency. She explained that nonpregnant women taking 'The Pill' undergo a jump in their folacin requirements. In some, a low intake not only shows up as melasma, but as abnormal cells in the cervix of the uterus. Cervical dysplasia, if unchecked, often turns into cancer.

**F**ortunately, there was good evidence, Laura told the medical staff, that 10 milligrams of folacin a day could reverse cervical dysplasia and restore tissues to normal. Through her efforts, Laura was instrumental in raising the 'folacin consciousness' of doctors at Highland and in getting them to put their private obstetric patients routinely on prenatal multivitamin/mineral supplements containing folacin.

**L**ooking back, they must be glad they did, now that Milunsky's study is getting sage nods of approval from the once reluctant orthodoxy. \* \*



*Illustrations are by Clay Geerdes and other artists as noted.*

\* Ten milligrams (10,000 mcg) of folic acid daily are very safe, but the FDA requires the 800 mcg limit because of concern that in cases of undetected pernicious anemia (caused by dietary deficiency of vitamin B12 or its malabsorption), folic acid alleviates the anemia but not the hidden, progressive nerve damage. However, since pernicious anemia is comparatively rare and can be detected with tests, many other countries including Canada allow 5 milligram folate supplements to be sold without prescription.

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