



IMAGE AWARENESS WELLNESS INSTITUTE

Alcohol and Nutrition

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MY INTRODUCTION

Many years ago I was talking with a woman who enjoyed entertaining with alcohol. She made the comment that she served her guests one B Complex tablet with every drink of alcohol and her guests told her that they never suffered a hangover the next day.

Several years later I gave a lecture in Santa Barbara at Westmont College. One of the individuals who attended the seminar was a nurse who worked for the pioneering nutritionist Francis M. Pottenger, Jr., M.D. She shared with me a personal anecdote about the good doctor. It seems that he liked to go out and drink, but he would mix up a concoction of raw liver and B vitamins before his drinking escapades to protect himself from the effects of the alcohol.

Alcoholism and malnutrition are intertwined. Renowned nutrition researcher Roger Williams, Ph.D., wrote, “I will, however, herewith positively assert that no one who follows good nutritional practices will ever become an alcoholic. This is obvious, when you think of it. It usually requires seven to ten years of heavy drinking to produce an alcoholic, and during the time of heavy drinking, the alcoholic-to-be is violating the most basic rules of good nutrition by ingesting far too large a proportion of his energy in the form of naked calories.”

“There can be no doubt that a pre-alcoholic--as he passes down the road toward alcoholism--becomes progressively worse off nutritionally month by month. As he consumed more alcohol, he not only gets less good food, but he also gets increased effects of alcohol poisoning.”

The urge to drink can apparently be triggered by deficiency of any one of a number of different nutrients. Dr. Williams wrote,

“We performed many hundreds of experiments in our laboratories, and we established beyond any question the close relationship between diet and the biological urge to drink alcohol.”

“In some experiments we deliberately left out a particular vitamin from the diet of a rat. This would cause him to drink at high levels, but when we put the missing vitamin back into his diet his alcohol consumption dropped dramatically, often overnight, from a high value to a very low one.”



“We conducted experiments of this type (taking a vitamin out of and later putting it back into the diet) with vitamin A, thiamin, riboflavin, pantothenic acid, and vitamin B6. A deficiency of any one of these vitamins caused increased alcohol consumption. When we returned the vitamin to the diet, the alcohol consumption always fell markedly.”

REFERENCES:

Williams, Roger, J., *Nutrition Against Disease*, New York: Pitman Publishing Corporation, 1971, 168-168.

Williams, Roger J., *The Prevention of Alcoholism Through Nutrition*, New York: Bantam Books, 1981, 86-87.

INDIVIDUALITY

Alcohol in large amounts is a toxic substance as revealed by the word *intoxication*. Humorist Ogden Nash said, “Candy is dandy, but liquor is quicker.” Benjamin Franklin said, “Drinking does not drown care, it waters it and makes it grow.”

The ability to tolerate alcohol is highly individual and is influenced by both genetics and diet. In one study some individuals were intoxicated with a blood alcohol level of 0.05 percent while others in the same study using the same criteria were sober with a blood alcohol level of 0.4 percent.

Robert E. Lee said of alcohol, “I like it; I always did, and that is the reason I never use it.” Lee’s rival, Ulysses Grant, actually drank little al-



cohol because he could not tolerate it well. What he did drink was used by detractors to ruin his reputation. He might have been better off to follow Lee's example.

REFERENCE:

Williams, Roger J., *The Prevention of Alcoholism Through Nutrition*, New York: Bantam Books, 1981, x, 5-7.

<http://faculty.css.edu/mkelsey/usgrant/alcohol.html>.

WARNING SIGNS

The chances of becoming an alcoholic are greater if one has alcoholic parents. Everyone is more prone to become an alcoholic if they drink at a young age. Children and teens should not be exposed to alcohol.

Another warning sign is the desire to follow up one drink with another. If alcohol tends to decrease appetite, this is another warning sign. Food consumption protects from some of the more toxic effects of alcohol and tends to slow the absorption of alcohol into the blood stream. Alcohol can derange the appetite control mechanism in the brain leading to a loss of appetite. Heavy drinking without food consumption can lead to death in a very short time.

REFERENCE:

Williams, Roger J., *The Prevention of Alcoholism Through Nutrition*, New York: Bantam Books, 1981, x, 6-8.

THE ALCOHOLICS ANONYMOUS STORY

Few of those familiar with Alcoholics Anonymous are aware of the fact that Bill W (William Griffith Wilson), the founder of the organization, was a strong proponent of vitamin supplementation. He was particularly fond of vitamin B3.

After discontinuing alcohol in 1934, Bill W. continued to suffer with severe tension, fatigue, insomnia, and discomfort for many years. Despite this he set in motion the work that would result in Alcoholics Anonymous. In 1958 he met Abram Hoffer who introduced him to vitamin B3 and suggested he try it.

A few weeks after Bill W. started taking 1,000 mg of niacin after each of three meals his chronic health problems disappeared.

Hoffer describes Bill's experience as he shared the value of niacin first with colleagues and then with doctors involved with AA. "Bill was not shy about passing on this information, much to the chagrin of the International Board of AA. He had created this board and, many years before, had invited physicians to become members. They were all friends of his, but the doctors on the board were not happy with Bill and accused him of meddling with medical matters, which were none of his business. Bill did not agree--his business was to help as many alcoholics as possible get well, and if vitamins were going to help, he was all in favor of using them. And he knew that vitamins were extraordinarily safe. But this was news to the doctors, who were not aware that vitamins in large or optimum doses had properties they did not have when used in the very low, usual doses then being recommended."

"Bill went even further. One evening when I was visiting him at his downtown hotel in New York, he pulled out thirty files and said,

'Abram, I want to show you the results of my research.' He had given niacin to thirty of his associates and friends in AA after carefully telling them about niacin and its properties, how much to take, and so on. After one month, ten of them were well. After two months, another ten were well. And after three months, the last ten had not responded. I was delighted and impressed, as his response rate was very similar to what I was seeing in my practice. Bill W. was thus the first layperson to repeat out research trials and to confirm our findings, but of course his study was not done according to the clinical 'gold standard' of the double-blind test."

One of the items in my library is *The Vitamin B-3 Therapy: A Second Communication to A.A.'s Physicians* from Bill W., February 1968. In this communication he mentions that sales of niacin went from almost none in 1965 when he first began recommending the vitamin to 24,000 orders in 1967.

Contained in Bill W.'s document is a report by Russell F. Smith, M.D. Smith reports on work with 507 "hard core, treatment resistant, difficult alcoholics."

Smith wrote, "Of these 507 patients, 103 were classified as excellent results, 240 good, 98 fair and 66 poor. On an average of 6 grams of this well-known, common, cheap vitamin a day, 87 percent of our group of hard core treatment resistant alcoholics derived benefit. Even more unexpected was the 20 percent of this group



who maintained complete abstinence where this had been impossible before, despite frequent and often excellent therapy.”

“Comparing these results with other therapeutic agents commonly used in the treatment of alcoholics, B-3 far surpasses them in effectiveness.”

This early history of A.A. strongly suggests that alcoholics suffer from rather severe nutritional deficiencies which should be obvious to anyone with even a little bit of common sense.

REFERENCE:

Hoffer, Abram, and Saul, Andrew W., *The Vitamin Cure for Alcoholism*, Long Beach, CA.: Basic Health Publications, 2009, 23-25.

W. Bill, *The Vitamin B-3 Therapy: A Second Communication to A.A.'s Physicians*, Bedford Hills, N.Y., February 1968, 10.

FETAL ALCOHOL SYNDROME

When a pregnant woman drinks alcohol, the alcohol can move through her blood stream and damage her developing child. The resulting damage has been labeled Fetal Alcohol Syndrome. The damage to the child is characterized by problems with development, learning, behavior and social skills. Fetal Alcohol Syndrome is a common cause of retardation. Alcohol damages the young by killing brain cells.

Niacinamide or Vitamin B3 has recently been shown to have powerful neuroprotective properties. A study in 2006 injected mice with toxic levels of alcohol. The alcohol dose was followed by administration of niacinamide within two hours of the alcohol administration. The Vitamin B3 totally prevented alcohol-induced hyperactivity and memory impairment in the baby mice. The results were so positive that the researchers suggested that nicotinamide might be used to prevent the devastating consequences of Fetal Alcohol Syndrome.

The neuroprotective properties



of this vitamin lend support to the work of Abram Hoffer and provide a rationale for why Bill W. and other alcoholics have benefited from niacinamide.

REFERENCE:

Ieraci, Alessandro, and Herrera, Daniel G., Nicotinamide protects against ethanol-induced apoptotic neurodegeneration in the developing mouse brain, *PLOS Medicine*, April 2006, 3(4), e101.

GLUTAMINE

Amino acids have repeatedly shown themselves to be of benefit in addictive problems. Small amounts of the amino acid glutamine appear to offer a powerful protective effect against alcoholism.

The protective effect of glutamine was discovered by Dr. Roger William's colleague William Shive. Shive was studying the poisoning effect of alcohol on bacterial cells. Shive found that something in cabbage, liver and other natural products protected bacterial cells against being poisoned by alcohol. A little glutamine added to a bacterial cell culture allowed the bacteria to tolerate otherwise intolerable concentrations of alcohol.

Painstaking detective work revealed that the protective substance was glutamine. Glutamine allowed bacteria to grow ten times better in an alcohol contaminated medium than they did when the glutamine was

missing.

Williams and Shive had been able to consistently demonstrate that rats on relatively poor diets invariable consumed relatively large quantities of alcohol. When these rats were given glutamine voluntary alcohol consumption dropped by about 40%. Other amino acids did not have this effect.

CABBAGE JUICE AND ULCERS

Research has shown that fresh cabbage juice is a wonderful treatment for ulcers. In one study seven patients with duodenal ulcer given cabbage juice healed in only 10.4 days while average healing time in the medical literature was 37 days. Average healing time for six patients with gastric ulcer given cabbage juice was only 7.3 days while healing time in the medical literature was 42 days.

Cabbage actually contains two anti-ulcer compounds. One of these is S-methyl-methionine which was called Vitamin U by Dr. Cheney who did the original cabbage study of ulcers. The second compound is glutamine which provides the fuel for the cells that line the stomach and intestine.

About one in ten Americans will have ulcers at some point in their life. It is nice to know that there are simple



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dietary measures which can help. Recent research has suggested that bacterial infection may be a contributing factor to some ulcers. Garlic and cruciferous vegetables have been shown to inhibit the H. pylori bacteria which can cause ulcers.

Alcohol is notorious for its ability to damage the digestive tract and the beneficial bacteria which inhabit it. The presence of glutamine in the diet may decrease alcohol consumption by helping to preserve the health and integrity of the digestive tract helping to maintaining nutritional adequacy.

REFERENCE:

Cheney, Garnett, Rapid healing of peptic ulcers inpatients receiving fresh cabbage juice, *Calif. Med.*, January 1949, 70(1), 10-15.

MINERALS

Rats fed a zinc deficient diet consume more alcohol than pair-fed controls with adequate zinc. Zinc supplementation decreases alcohol intake. Alcohol dehydrogenases which make it possible to detoxify alcohol require zinc at the active site of the enzyme. Niacinamide is also required for this action.

Magnesium and vitamin B6 have been shown to prevent and treat de-

lirium tremens when alcoholics quit drinking.

SUPPLEMENTATION

A number of alcoholics I have talked with over the years have benefited by the use of the GNLD Stress 30 multiple. This particular vitamin package has very high levels of B complex vitamins, high levels of chelated minerals, and phospholipids which benefit those who use alcohol.

These individuals have often also benefited from the GNLD pre-digested protein. The low-temperature Protogard predigestion process preserves the integrity of the amino acids making them more available for use by the body by circumventing the digestive process.

Those with serious alcohol prob-



lems will also often benefit from additional supplements of niacinamide and glutamine even though these nutrients are supplied in the two supplements mentioned above in rather generous quantities.

WEB RESOURCES

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