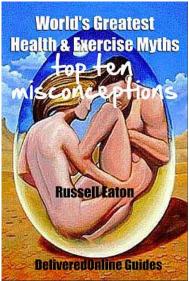
Title Page



World's Greatest Health & Exercise Myths top ten misconceptions

Russell Eaton



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Introduction

This book is for anyone who is interested in protecting their good health. The purpose of this book is to dispel once and for all the ten major myths about health and exercise.

The ten myths that follow are misconceptions that are widely believed throughout the world. But advances in medical science and the latest research is now showing that the myths that follow are just that: myths.

This may be the most important book you ever read because if you currently believe any and all of the myths that follow, you are likely to be harming your health, perhaps seriously. You are urged to fully read this book for the sake of your health and well-being, and if you are not wholly convinced about anything that is stated in this book, then dear reader for the sake of your health you are urged find out more and check the evidence.

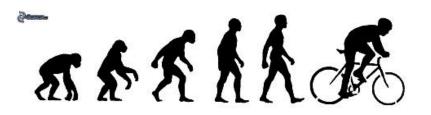
The myths are not listed in any particular order of importance (they are all equally important in their own way). However, it is recommended that you read the ten myths in the order presented.

Please feel free to send any comments about this book to: <u>mailto@deliveredonline.com</u>, making sure that you put just the exact book title in the subject heading of the email (this will ensure we see it).

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Note: don't miss the bonus myth no. 11 which reveals for the first time ever the direct link between exercise and cancer, making exercise a major cause of cancer!



Myth # 1: high cholesterol in the blood is bad for health. Reality: the higher the level of cholesterol in the blood the better for health.

According to the World Health Organization, about 17.3 million people die each year from heart disease and stroke (and many more are permanently incapacitated), making clogged arteries the leading cause of death from disease. Clogged arteries are caused by 'atherosclerosis'. According to Wikipedia, atherosclerosis is a condition in which an artery wall thickens as a result of the accumulation of fatty materials such as cholesterol and triglyceride. It is caused by the accumulation white blood cells that form plaques within the arteries and is promoted by LDL cholesterol."

Put simply, Wikipedia is saying that LDL cholesterol accumulates in arterial plaque. For this reason it used to be thought that a high level of LDL cholesterol in the bloodstream was bad for health. The thinking was that the higher the level of LDL cholesterol in the blood, the greater the chance that some of that LDL cholesterol will end up promoting clogged arteries, i.e. heart disease.

But this is not so. All the latest research is showing that LDL cholesterol does not cause clogged arteries unless it becomes oxidised. The level of LDL cholesterol in the blood does not matter provided it does not become oxidised.

LDL cholesterol particles in the bloodstream act like a microscopic bus fleet, picking up and taking vital supplies to all our trillions of body cells everywhere. So LDL cholesterol particles carry nutrients to body cells where they are used for a variety of essential functions such as providing the building blocks for cellular membranes, and for making hormones that are vital for life.

We want our level of LDL cholesterol to be high because this improves the delivery of vital nutrients to cells throughout the body and the brain. A low level of LDL leads to poor health, brain disease, pre-mature aging of the body and a shorter life span than otherwise.

To be clear: trying to reduce your cholesterol level is not necessary or even healthy because we do in fact need a high level of cholesterol for good health. It is a myth that we need to keep our blood cholesterol level low. The reality is that we want our blood cholesterol level to be as high as possible for both LDL and HDL.

"Cholesterol is not a deadly poison, but a substance that you need to be healthy. High cholesterol itself does not cause heart disease. People who have low blood cholesterol have the same rates of heart disease as people who have high blood cholesterol".

Source: 'The Cholesterol Myths: Exposing the Fallacy that Saturated Fat and Cholesterol Cause Heart Disease' by Uffe Ravnskov (regarded by most as the world's leader on the relationship between cholesterol and human health), Newtrends Publishing, 2000, ISBN-13: 978-0967089706.

Coming back to atherosclerosis, LDL cholesterol is only harmful when it becomes oxidised. So the question is: what makes LDL particles in the bloodstream become oxidised? The answer is that lifestyle factors such as exercise, smoking, stress, air pollution and a poor diet can make LDL particles become oxidised. Exercise, in fact, is a major cause of LDL oxidation.

Such lifestyle factors cause a shortage of oxygen in the bloodstream and this in turn causes a shortage of oxygen for the circulating LDL particles. And this in turn causes oxidation. Oxidative stress is caused from a lack of oxygen, not from too much oxygen.

When the LDL cholesterol particles become oxidized they quickly and easily go directly into the inner-lining (endothelium) of any artery in the body, including the brain, the carotid artery, coronary artery or the arteries that supply your legs and arms with blood. Once there, the oxidised LDL particles become stuck to the inside of the artery/vessel creating a 'damaged area' where inflammatory cells such as macrophages and platelets accumulate.

More macrophages, cholesterol and other lipids begin to accumulate at the site, forming a plaque that begins to grow thicker. Over time, this can slow or completely restrict the amount of blood flow that travels to one or more areas of the body. This can result in a variety of health conditions, including coronary heart disease, peripheral vascular disease or dementia.

A high level of LDL cholesterol does not increase the likelihood or incidence of cholesterol oxidation. On the contrary, a high level of LDL cholesterol promotes good health, mainly by providing the building blocks for strong, healthy cellular membranes (thus preventing cellular decay). This greatly protects the body from aging and general body deterioration.

The amount of cholesterol oxidation that occurs from poor lifestyle factors is the same regardless of whether you have a high or a low level of LDL blood cholesterol. All the recent research is pointing to the fact that we should be worried about the amount of LDL cholesterol that becomes oxidised, NOT the amount of LDL cholesterol circulating in the blood.

Here are just two examples of such research:

"Six of the studies found that total mortality was inversely associated with either total or LDL-cholesterol, or both. This means that it is actually much better to have high than to have low cholesterol if you want to live to be very old. Many studies have found that low cholesterol is in certain respects worse than high cholesterol. For instance, in 19 large studies of more than 68,000 deaths, reviewed by Professor David R. Jacobs and his co-workers from the Division of Epidemiology at the University of Minnesota, low cholesterol predicted an increased risk of dying from gastrointestinal and respiratory diseases".

Source: The Benefits of High Cholesterol, by Uffe Ravnskov, MD, PhD, 2004, www.westonaprice.org.

**

"When examining all causes of death, such as cancer, pneumonia and heart disease, the number of deaths attributable to LDL cholesterol levels exceeding 140 mg/dl is less than people with lower LDL cholesterol levels. According to a eight-year study of about 26,000 men and women in Isehara, Kanagawa Prefecture, the death rate of men whose LDL cholesterol levels were between 100 mg/dl and 160 mg/dl was low, while the rate rose for those with LDL cholesterol levels of less than 100 mg/dl. Cholesterol is an essential component for the creation of cell membranes and hormones. It's not recommended to lower LDL figures by means of dietary intake and medication. When women reach menopause, their cholesterol figures rise sharply, yet do not affect the arteriosclerosis process or development of heart diseases. At the very least, cholesterol criteria is not necessary for women".

Source: Tomohito Hamazaki, Professor at Toyama University's Institute of Natural Medicine, who compiled the new cholesterol levels guidelines for the Japan Society for Lipid Nutrition, 2010, reported in 'High levels of cholesterol said better for longevity', <u>http://phys.org/news203844242.html</u>.

This explains why it is perfectly possible for one person to have a high count of LDL cholesterol and be perfectly healthy, and another person to have a low count of LDL cholesterol and yet die from heart disease.



Myth # 2: Eating high cholesterol foods can be bad for health. Reality: Eating high cholesterol foods is in fact good for health and protects against heart disease.

Dietary cholesterol does not affect blood cholesterol. So foods high in cholesterol such as eggs, butter, cheese and some types of meats and fish are okay to eat in moderation and will not give you so-called 'bad' cholesterol. Plenty of research clearly shows this to be so. Here is an example of such research:

"Dietary cholesterol has an insignificant effect on blood cholesterol. If the diet doesn't contain enough cholesterol, the body makes it. It has been known for years that consuming dietary cholesterol does not significantly influence blood cholesterol. The human body [i.e. the liver] produces 3,000-4,000mg of cholesterol each and every day. And it is almost completely independent of how much cholesterol you eat in your diet. Dietary cholesterol (from food) accounts for no more than an insignificant 10% of blood cholesterol". Source: Brian Scott Peskin, The Cholesterol Myth, published by The Cambridge International Institute for Medical Science, www.cambridgemedscience.org.

The irony is that although dietary cholesterol has little effect on blood cholesterol levels, we do in fact want our cholesterol levels to go up, not down, as explained more fully in another part of this book.

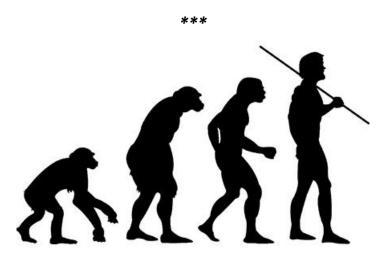
"High cholesterol does not cause heart disease. The insanity of cholesterol-lowering drugs: conventional medicine misses the boat entirely when they dangerously recommend that lowering cholesterol with drugs is the way to reduce your risk of heart attacks." Source: Dr. J. Mercola, www.mercola.com.

The human body makes whatever amount of cholesterol it needs (both LDL and HDL) for good health. The body never makes 'too much' cholesterol to a level that becomes unhealthy. But a poor diet and other unhealthy lifestyle factors can impede the body from making enough cholesterol for good health. We want our levels of LDL and HDL cholesterol to be as high as possible for optimum health.

When your cholesterol levels (of LDL and HDL) are too low your health deteriorates rapidly and drastically in many ways, even leading to death.

You can give your body a big helping hand in making enough cholesterol for good health by consuming a modest amount of saturated fat and cold-pressed mono-unsaturated oil in your diet, as these provide the body with the building blocks to make whatever cholesterol it needs for optimum health. But avoid trans fats and processed polyunsaturated fats such as margarines and cooking oils.

Sally Fallon, the president of the Weston A. Price Foundation, and Mary Enig, Ph.D, an expert in lipid biochemistry, have gone so far as to call high cholesterol "*an invented disease, a 'problem' that emerged when health professionals learned how to measure cholesterol levels in the blood*". Source: Fallon, S. and Mary Enig, Dangers of Statin Drugs: What You Haven't Been Told About Popular Cholesterol-Lowering Medicines, The Weston A. Price Foundation. For the evidence and more information on this subject please see "Beat Heart Disease Now" at DeliveredOnline.com.



Myth # 3: Commercial polyunsaturated oils such as Canola Oil and Rapeseed Oil are better for health than saturated fat such as butter and lard. Reality: All types of commercial polyunsaturated oils are bad for health and much worse for you than saturated fats.

Virtually all commercially processed polyunsaturated oils are made from seeds and sold under names such as Canola Oil, Rapeseed Oil, Safflower Oil, Sunflower Oil, Soybean Oil, Corn Oil and others. They are polyunsaturated oils by virtue of being high in Omega-3, or Omega 6, or Omega 9 oil (or any mix of the three).

To extract and process the oil from seeds, intense heat is used. This has the effect of degrading the oil (the molecular structure is changed), and this in turn makes the oil much more likely to oxidise when stored or consumed. In fact, processed polyunsaturated oil will oxidise (i.e. go rancid) at just room temperature so must always be kept refrigerated.

When processed polyunsaturated fat is consumed it oxidises and triggers free radicals inside the body by virtue of having been intensely heated when commercially processed. Free radicals are extremely reactive unstable molecules that start a chain reaction of oxidation in nearby polyunsaturates. This in turn causes significant damage to LDL cholesterol particles which then disappear from the bloodstream to form plaque in arteries and cause cell mutation that can lead to cancer.

"When you consume polyunsaturated fats at body temperature (which is 37 degrees C, a good 15 degrees C higher than average room temperature), they oxidise very quickly. The oxidation of [processed] polyunsaturated fats transported with cholesterol in the bloodstream is likely to play a primary role in the development of heart disease and cancer...It's the oxidative damage to our DNA that's likely to be the link between cancer and polyunsaturated seed oils". Source: David Gillespie, Big Fat Lies, Penguin Books, 2012.

"The new findings support earlier evidence from other research that consuming high amounts of polyunsaturated fat may increase the risk of cancer spreading. The propensity for polyunsaturated fats to oxidise is a risk factor. This leads to the generation of free radicals and eventually to rancidity". Source: Wikipedia.

Anti-oxidants in our body help to shut down the harmful free radical chain reaction, but the damage is done. Our bodies make anti-oxidants, helped by a nutritious diet that provides the raw materials (vitamins) that enable the body to build anti-oxidant defences. But when we consume processed polyunsaturated fats this can quickly exhaust the anti-oxidant defences of the body.

The essential oils from polyunsaturated fats (i.e. omega-3 and omega-6) are best obtained by consuming raw nuts and seeds (or from cold-pressed polyunsaturated oil that has always been refrigerated until consumed). The body only needs a minute amount of omega3/6 for good health.

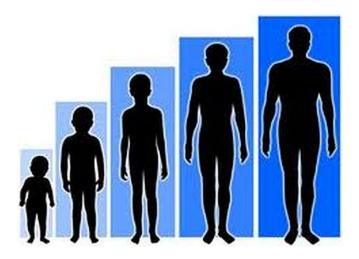
Saturated fats should also be consumed regularly, but in moderation, as they provide the building blocks for the body to make its own saturated fat and cholesterol, both vital for good health. According to Wikipedia, "*examples of foods containing a high proportion of saturated fat include animal fats such as cream, cheese, butter, and ghee; suet, tallow, lard, and fatty meats; as well as certain vegetable products such as coconut oil, cottonseed oil, palm kernel oil, chocolate, and many prepared foods*".

The human body can only make two kinds of fats: saturated and monounsaturated and 97 percent of our body fat is made of these two fats. Research shows that diets that include good amounts of saturated and monounsaturated fats rather than polyunsaturated fats are much better for good health and disease prevention.

In the past it was thought that saturated fat increased the level of harmful cholesterol in the blood. This misunderstanding arose because it was thought that the lower the level of LDL cholesterol in the blood the better for health. It was not realized that the level of LDL is not what counts; it is the amount of LDL that becomes oxidized that counts - the greater the oxidation the worse for health. As mentioned in other parts of this book, we should not be fighting the level of cholesterol, we should be fighting the level of oxidation! The higher the level of blood cholesterol (both LDL and HDL), the better for health.

"Fat intake plays a role in blood-cholesterol levels.... replacing carbohydrates with saturated fat was shown to increase HDL, LDL, and total cholesterol levels". Source: Wikipedia.

"Saturated fat and cholesterol in the diet are not the cause of coronary heart disease. That myth is the greatest scientific deception of this century, perhaps of any century." Source: George V. Mann, MD, Professor of Biochemistry and Medicine at Vanderbilt University in Tennessee, USA.



Myth # 4: A low fat diet is better for health than a high fat diet. Reality: A high fat diet is much better for health than a low fat diet.

We should not be trying to avoid fats in the diet - they are very important for general good health and a healthy heart. Fats provide (among other things) the building blocks for vital cholesterol that we need for good health. With insufficient dietary fat, the body will not be able to make sufficient body fat to maintain and protect the brain, body organs and just about every other part of the body.

Do not think that if you are overweight you can just let the body use up your surplus body fat (i.e. triglyceride fat) for its needs. Unfortunately, body chemistry does not work like that. The vital body fat you need for good health must be *manufactured* by the body from dietary fat; it cannot use stored triglycerides as an alternative to making vital body fat.

So do not try to avoid fat in your diet. The key point is to know what fats to consume and what fats to avoid. Briefly, you need to consume saturated and monounsaturated fat, plus a small amount of polyunsaturated fat in the form of raw nuts and seeds (or cold-pressed polyunsaturated oil that has been refrigerated). You need to avoid all forms of commercially processed polyunsaturated oils (including margarines), and you need to avoid trans fats and hydrogenated fats.

Did you know that a low saturated-fat diet takes away your sex drive? Research shows that a low fat diet lowers your libido. Here is what happens: insufficient saturated fat in the diet translates into low blood cholesterol. But cholesterol is critical in the formation of estrogen and testosterone. Less estrogen and testosterone means loss of libido. Even worse, less cholesterol reduces the body's capacity to process vitamin D. Less vitamin D leads to a host of health problems such as cancer, weak bones, heart disease, poor immunity, and multiple sclerosis, to name but a few (source: Wikipedia).

Furthermore, saturated fat is now known to not be fattening. Fat consumption satisfies feelings of hunger much more so than anything else you could eat, and this prevents overeating. Surplus body fat accumulates as a result of consuming sugar, fructose and refined carbohydrates - this injects a high level of glucose into the bloodstream, which in turn gets stored as surplus body fat. Fat consumption does not elevate the level of glucose in the blood. Here is a technical explanation: For fat to get 'fixed' in the fat cells, a substance known as glycerol is required. Glycerol itself is supplied from a substance known as alpha glycerol phosphate (also known as glycerol-3-phosphate), which itself comes from the metabolism of glucose (carbohydrate). It should also be borne in mind that for sugar to get into the fat cells in the first place insulin is required, and this hormone is secreted most plentifully in response to the ingestion of carbohydrate.

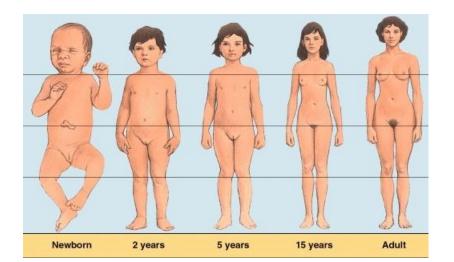
The insulin secreted in response to carbohydrate (but not fat) also affects enzymes in a way which inhibits fat breakdown and enhances fatty deposition in the body.

So eating a glut of carbohydrate (not fat) is what is truly fattening. It's not a new message: most of us will have heard this concept before if we're at all familiar with the work of the late Dr Robert Atkins, and at least some new life has been breathed into this idea through the work of Gary Taubes (author of Good Calories, Bad Calories/The Diet Delusion).

The original Atkins Diet was criticized for being too extreme in cutting out too many carbohydrates and including too much fat. This resulted in a diet that lacked fibre and lacked a wide range of vitamins, minerals, and plant enzymes; long-term, such a diet was not sustainable. However, the Atkins Diet has evolved to be less extreme and is now adopted with great success by many people. The basic Atkins Diet concept that a '*low-fat high-carbohydrate diet is bad for health*' still holds true today, having been thoroughly examined in many studies.

As mentioned, evidence is mounting that saturated fat is not intrinsically fattening. For example a large 2009 study looked at fat intake in 90,000 adult Europeans. Once 'confounding factors' such as dietary and lifestyle factors were taken into account, the authors could find "*no association between total fat intake or intake of any specific type of fat and body weight change. These findings do not support the use of low-fat diets to prevent weight gain*". They concluded that there was no significant association between the amount or type of dietary fat and subsequent weight change in this large prospective study.

For individuals seeking to shed surplus body-fat effectively in the long term, having control of insulin levels is key. This generally means cutting back on carbohydrates, particularly those most disruptive to blood sugar and insulin levels such as foods with added sugar and starchy staples such as bread, potatoes, rice, pasta and breakfast cereals. A huge benefit of adopting a low-carbohydrate diet combined with a high (but not excessive) fat diet is that people often end up eating less, quite spontaneously and, importantly, without hunger.



Myth # 5: It is important to have a good ratio of omega-3 to omega-6 oil in the diet as too much omega 6 is bad for health.

Reality: The ratio of omega-3 to omega-6 oil does not matter, and consuming a higher ratio of omega-6 than omega-3 is not bad for health.

There is a wide-held belief that the essential fatty acids omega-3 and omega-6 should be consumed in a particular ratio for good health, but this is simply not so.

Omega-3 and Omega 6 work together in our body and depend on each other, but the actual ratio of Omega-3 to Omega 6 is unimportant. It is a myth that human beings need to get Omega-3 and 6 in a certain ratio, such as a ratio of 2:1 or 1:1. If you think about it the idea is absurd: our remote ancestors ate a variety of nuts, seeds, berries, grubs, insects, flowers, herbs, roots (and occasional meat) and all these food products had greatly differing ratios of Omega-3 and 6. Furthermore, only some of these items would be consumed on any one day, depending on what could be foraged or caught on a day-to-day basis. Therefore, the ratio of omega3/6 will have varied wildly from day-to-day and week-to-week. It simply cannot be argued that humans have evolved for millennia on any particular ratio of Omega-3/6.

Several studies have looked at the health effects of a diet high in Omega 6 and low in Omega-3 and have rightly concluded that the preponderance of Omega 6 in modern-day diets is a cause of illness. But such studies have falsely concluded that the health problems of such a diet are due to the high ratio of omega 6. Such studies have not taken into account the fact that the harm caused by commercial cooking oils is due to the intense heat used to extract the Omega-3/6 from the seeds. As mentioned, any kind of oil (particularly polyunsaturated oil) that has been heated causes oxidation and free radicals once consumed. It is this oxidation and free radicals that cause illness (not any particular Omega oil ratio).

Providing the diet includes *unprocessed* (i.e. not heated) Omega-3 and 6 (in any ratio), the body will simply use both Omega-3 and 6 for its needs and any surplus Omega-3 or 6 is simply stored or excreted. The crucial factor here is to not consume Omega-3 or 6 from any source that has involved intense heat at any point. Hence, either consume unprocessed

Omega oils from the *original* sources, such as raw nuts and seeds, or ensure that the oil being used has been cold-pressed and has been refrigerated at all times. Any polyunsaturated oil that is not entirely cold-pressed should be completely avoided as the oil extraction process will have involved intense heat.

To be clear on this crucial point: the ratio of Omega-3 and 6 does not matter. What matters is that the Omega-3 and 6 oil should not have been heated at any point prior to consumption. Furthermore, cold-pressed oils should always be kept refrigerated until consumed, as even room heat or sunlight can damage seed oils, even if cold-pressed.

The typical American diet is said to have an Omega-3 to 6 ratio of between 1:18 to 1:25 (in other words much more Omega 6 compared to Omega-3). This is indeed unhealthy, but not because of the ratio itself, but because virtually all the Omega oil consumption will have typically come from processed seed oils that have used intense heat as part of the oil extraction process.

"The idea that this Omega ratio matters is a myth...without any data to support it." Source: Dr. Walter Willett, M.D., American physician and nutrition researcher, Professor of Epidemiology and Nutrition and the chair of the department of nutrition at Harvard School of Public Health.

"The optimal quantity and type of omega-3 fatty acid, and the optimal ratio of omega-3 to omega-6 fatty acid (if such an optimal ratio exists), remain undefined". Source: Wang C, et al, Effects of Omega-3 Fatty Acids on Cardiovascular Disease, Evidence Report/Technology Assessment No. 94, prepared by Tufts-New England Medical Center, Publication No. 04-EOO9-2, March 2004.



Myth # 6: Fish oil and oily fish are good for health and help prevent heart disease.

Reality: Fish oil and oily fish are bad for health and actually promote heart disease, cancer and diabetes.

Many people have been brain-washed into believing that fish oil supplements and the consumption of oily fish are somehow beneficial. Nothing could be further from the truth.

All kinds of fish oil supplements give you an overdose of DHA many times over. Too much DHA is bad for health - it gives you cancer, heart disease, poor immunity and general bad health. For the same reason all kinds of oily fish should be avoided in the diet.

"Oily fish have oil in their tissues and in the belly cavity around the gut. Examples include sardines, herring and anchovies, and other larger pelagic fish, such as salmon, trout, ilish and mackerel." Source: Wikipedia.

To understand why fish oil is so bad for health we first need to understand that there are three types of omega-3 oil: ALA, DHA and EPA. ALA is found in plant oils. DHA and EPA are found in marine oils. The body can use all three types of omega-3 oil to make the essential fatty acids that we need for good health, but the body only needs to make minute amounts. At most 3 percent of all fats consumed need to be omega-3 and less than 2 percent is used and converted to the derivatives EPA/DHA because that is all that is needed for optimum health.



Omega-3 ALA is the parent omega-3 and is the ideal type of omega-3 to consume because this enables the body to make just the right amount of DHA and EPA needed for optimum health. When you consume fish oil you are consuming the derivatives DHA and EPA that the fish has acquired by consuming other fish, or that the fish has made by consuming ALA from marine plant food.

Omega-3 ALA is available in small amounts from many berries, seeds and nuts, and trace amounts are found in some fruits and vegetables. Rich sources of omega-3 ALA include seabuckthorn seed, berry seeds and oils, flaxseeds and chia seeds (and their oils), Sacha Inchi oil, Echium oil, and hemp seeds/oil. ALA allows the body to make the right amount of essential fatty acids that it needs for good health without providing any kind of overdose. By just consuming a modest daily amount of raw nuts and seeds (or using a *cold-pressed* polyunsaturated oil that has always been refrigerated) you will acquire sufficient omega-3 ALA for optimum health. Now we come to omega-3 DHA and EPA. Small amounts of DHA/EPA are good for health, particularly if ALA is lacking in the diet. Small amounts of DHA/EPA can be obtained from sweetwater fish (i.e. freshwater fish from lakes and rivers) as they only contain small amounts of DHA/EPA; not enough to overdose the human body when consumed.

Also, small amounts of DHA/EPA can be obtained from whitefish, "which contain oil only in the liver, and much less overall than oily fish. Examples of whitefish are cod, haddock and flatfish. Whitefish are usually demersal fish which live on or near the seafloor, whereas oily fish are pelagic, living in the water column away from the bottom". Source: Wikipedia.



The question you may be asking at this point is: Does fish oil (and oily fish) truly overdose the body with DHA/EPA? And if so, is it really so bad for health? The answer is YES and YES, and the evidence for this is plentiful. Here is just a small sampling:

A. "Men with the highest levels of DHA, a type of omega-3, were 2.5 times more likely to have developed aggressive, high-grade prostate cancer over a seven-year period compared with men who had the lowest levels of DHA". Source: Theodore M. Brasky, et al, Serum Phospholipid Fatty Acids and Prostate Cancer Risk: Results From the Prostate Cancer Prevention Trial, Am. J. Epidemiol., (2011).

B. "The study looked at men who developed prostate cancer and 1,393 randomly chosen men who did not have cancer. They found that men who had the highest levels of omega-3 fatty acid compounds had a 71 percent increased risk of high-grade prostate cancer and a 43 percent increase for all prostate cancer. A high percentage of omega-3 fatty acids in the blood is linked to an increased risk of aggressive prostate cancer." Source: A study funded by 'The National Cancer Institute' which also involved researchers from the University of Texas Health Science Center at San Antonio, USA. The Study was published by the Fred Hutchinson Cancer Research Center in 2011, www.fhcrc.org.

C. "Fish-oil supplementation in pregnancy does not reduce the risk of gestational diabetes or preeclampsia." Source: Shao J Zhou, Am J Clin Nutr 2012;95:1378–84.

D. "Evidence does not support a beneficial role for omega-3 fatty acid supplementation in preventing cardiovascular disease (including myocardial infarction and sudden cardiac death) or stroke." This conclusion was reached by two sources: (i) Evangelos C. Rizos, et al, Association Between Omega-3 Fatty Acid Supplementation and Risk of Major Cardiovascular Disease Events A Systematic Review and Meta-analysis, JAMA 308 (10): 1024–1033, 2012. (ii) Kwak, SM, et al, Efficacy of Omega-3 Fatty Acid Supplements in the Secondary Prevention of Cardiovascular Disease: A Meta-analysis of Randomized, Double-blind, Placebo-Controlled Trials, Archives of Internal Medicine 172 (9): 686–94, 2012.

E. "Fish oil supplementation has not been shown to benefit revascularization or arrythmia and has no effect on heart failure admission rates". Source: Kotwal, Sradha, et al, Omega-3 Fatty Acids and Cardiovascular Outcomes: Systematic Review and Meta-Analysis, Circ Cardiovasc Qual Outcomes 5 (6): 808–18.

F. Japan has one of the highest rates of cancer (per capita) in the world. The Japanese population have consumed daily intakes of approximately 700-1200 mg of DHA/EPA daily for decades, and it is interesting to note that they "*have much higher rates* [compared to many other countries] *of cancer of the esophagus, stomach, liver and pancreas*". Source: Harras, Angela (ed.), Cancer Rates and Risks, National Institutes of Health, National Cancer Institute, 1996, 4th edition. Every third death in Japan is caused by cancer (source: Japan Board of Cancer Therapy, www.jbct.jp).

G. "DHA and fish oil are shown as completely worthless in the treatment of Alzheimer's and other brain degenerative diseases. All marine-based (from the sea) oils like krill, squid, mussels, and fish oil actually increases risk of colon cancer. Fish oil weakens your immunity and is worthless in preventing heart disease in Type I diabetic women. Fish are worthless in decreasing abnormal heart rhythm (called atrial fibrillation, or AF) and fish oil supplements increase sudden cardiac death in those with coronary heart disease. Fish oil does not slow atherosclerosis". Source: excerpts taken from 'Fish Oil Fallacies: Debunking the Fish Oil Myth', by Professor Brian Peskin, Bsc., and Robert Rowen, MD, 2011, www.brianpeskin.com.

H. Krill oil is often touted by supplement manufacturers as good for health. The reality is the opposite. While krill oil often has lower amounts of EPA (approximately 130 mg) and DHA (70 mg) per capsule compared to fish oil, that dosage is still excessive and potentially harmful. Furthermore, krill oil is particularly prone to going rancid when consumed, causing oxidation and free radicals which lead to illness: "*Krill decompose very quickly, so the current thinking is either to dry them aboard the vessel and bring the powder back to a land-based plant for oil extraction or to enzymatically digest the krill and then separate the oil."* Source: Anthony P. Bimbo, Raw material sources for the long-chain omega-3 market: Trends and sustainability, part 2, 2009, www.aocs.org.

Fish oil and oily fish are bad for health for two main reasons:

1. Fish oil overwhelms the body with a dramatic and damaging overdose of DHA. "In fact fish oil supplements overdose the body with from 20 times to 400 times more EPA/DHA than your body would ever produce on its own. This is a formidable pharmaceutical overdose and very

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