

TRANSFER FACTOR® TESTIMONIES

Transfer Factor Immune System Health - Testimonies

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Heart Disease and High Blood Pressure

HEART & KIDNEY PROBLEMS

I am a school principle and was going to retire in 2 years time. I have fainted 3 times and admitted to Taiping Hospital. I was diagnosed with heart problem, kidney failure, eyes losing visions and both legs not able to bend. My doctor told me that both of my kidneys were not functioning and I would have to go for dialysis. I was introduced to Transfer Factor Advanced by a stranger in hospital. I started taking 3 capsules 2 times a day. After 4 days, I could urinate. My body feels stronger. After two weeks, my visions recovered. Finally I could squat down to do my prayers with no backache. Thank you Transfer Factor. Mustafa Endim, Taiping.

HEART - ISCHAEMIC DISEASE



My mum is 89 years young and suffers from ischaemic heart disease and congestive cardiac failure. Her main complaints were severe shortness of breath on mild exertion, and coughing. She had to be wheeled around whenever we took her for an outing. I took two bottles of targeted transfer factors home to Australia from the 2002 4Life International Convention and started my mum on 2 capsules twice a day. After only three weeks she noticed some improvement in her breathing. After only 5 weeks she said the new capsules we brought back were #1, indicating with her right thumb up. Now she is able to walk further with much less shortness of breath. In mid-October we took her to Werribee Zoo and brought the wheel chair along for her to use. After a short journey in the wheel chair she decided to walk by herself. We tried to dissuade her and told her that the walk would be too much for her heart. She insisted, and so we relented and let her push the wheelchair around the zoo. She completed the walk around the zoo with no shortness of breath! She has derived other benefits from taking targeted transfer factors, both her appetite and weight have increased! We are extremely happy targeted transfer factors has helped her. We strongly recommend targeted transfer factors for anyone with cardiovascular problems. Thank you Transfer Factor. C.K. Benny Foo, MD, Australia.

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ARTERIAL WALLS INFLAMMATION

In November 2002 I had a C-Reactive Protein test (CRP) done to measure the level of inflammation in my arterial walls after having read a number of articles indicating this type of inflammation as being the root cause of heart attacks. My CRP reading was 7.9, with 8.7 being about the highest and

worst score one can have. This test showed I was at a very high risk of having a heart attack. One physician I shared this with commented in front of a large audience that if my CRP reading stayed at that level, I was virtually guaranteed to have a heart attack. From the day I received my CRP test results I have taken Transfer Factor Cardio daily. At the end of February, 2003, I had the CRP level checked again. In just four short months of consuming Transfer Factor Cardio, I am now close to a 1.1 CRP score - the BEST level one could have. The lowest and best reading on the chart is 1.0. I believe Transfer Factor Cardio saved my life. Thank you Transfer Factor.

Richard Helgeland, Washington.

PULMONARY PROBLEM

A 45 year old woman who had been running marathons developed a pulmonary problem and had to use inhalers and many medications to breath. She had used cortisone many times and other brochodialators. She has been using TF for 2 years and has not used medication since she started using TF. She is back running marathons and works out full-time and baby sit her 3 grandchildren after work. Her grandchildren also take TF and they are never sick.

C, CA.

HIGH BLOOD PRESSURE

I had high blood pressure for the past 5 years. In the year 2003 I had gout attack due to high uric acid. I needed to go for injection when I have the attack. I have tried many supplements but none helped. One of my good friends introduced Transfer Factor to me. I started taking 2 capsules 2 times a day. I am now well and healthy. My migraine has also gone. Thank you Transfer Factor.

Steven Cheek, Lukut.

HIGH BLOOD PRESSURE

My own brother and brother - in law had high blood pressure which is now back to normal on TF+.

CY, Malaysia.

HIGH BLOOD PRESSURE

120/80 is normal. I am not a doctor but I have many friends that have had high blood pressure. I searched our database for information on high blood pressure. The following are suggestions given. Keep in mind we are not saying that the following protocol cures high blood pressure. It is our unmedical



opinion that the following protocol has help individuals with the effects of high blood pressure.

Here is what my research has found. As you know there are several causations for high blood pressure. There are several avenues through which to approach it.

Theanine- is an amino acid found in green tea. When it is consumed in concentration, it induces relaxation.

Policosanol- Reduces inflammation in the arterial walls. Inflammation of arterial walls can add to high blood pressure.

L-arginine

Hypertension: L-arginine is required for the body to synthesize nitric oxide, which enables the arterial system to retain its youthful elasticity, thus alleviating hypertension in some people. Nitric oxide also helps to produce endothelial relaxation factor, which is needed by the arterial system to expand and contract with each heartbeat. The inability of arteries to expand and contract is a major cause of hypertension associated with aging. If you decide to try L-arginine to lower blood pressure, ask your physician to reduce your antihypertensive medication while you are increasing your intake of arginine. The suggested dose of L-arginine as a blood pressure lowering agent is 4500 mg three times daily. For some people, L-arginine does not lower blood pressure, so it's crucial that your blood pressure be monitored to ensure that it is under control. L-ornithine is not a suitable alternative for this purpose since quick synthesis of nitric oxide is required.

Maitake Mushroom

Also, studies indicate that fruit body of powder of Maitake helps regulated blood sugar, cholesterol, blood pressure and body weight.

CoQ10

Coenzyme Q10 (CoQ10) and garlic provide aid in the reduction of blood pressure. These supplements may also mitigate the underlying disease that may be the cause of hypertension.

In March 1999, the results of a randomized, double-blind trial among patients receiving antihypertensive medication was published. Patients known to have essential hypertension and presenting with coronary artery disease were given 60 mg of CoQ10 twice a day. The doctors conducting the study stated, "Findings indicate that treatment with Coenzyme Q10 decreases blood pressure, possibly by decreasing oxidative stress and insulin response in patients with known hypertension receiving conventional antihypertensive drugs (Journal of Human Hypertension, 1999 [March], 13 [3]:203-8)

Another study using higher doses of CoQ10 concluded: "Patients treated with an average of 200 mg/day of CoQ10 showed improvement in symptoms of fatigue and dyspnea with no side effects noted. Previous observations on the improvement in diastolic function and left ventricular wall thickness through the

therapeutic administration of coenzyme Q10 in patients with hypertensive heart disease prompted the investigation (Molecular Aspects of Medicine, 1997, 18 Suppl:S145-51)

CoQ10 was tested in 109 cardiology patients presenting with hypertension for at least 1 year. An average dose of 225 mg/day orally of CoQ10 was administered along with antihypertensive medication. The aim was to attain blood levels greater than 2.0 mcg/mL (average 3.02 mcg/mL on CoQ10). Rather than being fixed, dosage was adjusted according to clinical response and blood CoQ10 levels. Researchers reported, "A definite and gradual improvement in functional status was observed with the concomitant need to gradually decrease antihypertensive drug therapy within the first one to six months." A remarkable 51% of patients were completely removed from between one and three antihypertensive medications an average of 4.4 months after starting CoQ10 administration. A highly significant improvement was seen in left ventricular wall thickness and diastolic function in those patients (9.4% of total) who were monitored by echocardiogram before and during treatment.

In a study conducted to clarify the mechanism of the antihypertensive effect of CoQ10, 26 patients with essential arterial hypertension were treated with oral CoQ10, 50 mg twice daily for 10 weeks. Plasma CoQ10, serum total and high-density lipoprotein (HDL) cholesterol, and blood pressure were determined in all patients before and at the end of the 10-week period. At the end of the treatment, systolic pressure decreased from 164.5 ± 3.1 to 146.7 ± 4.1 mmHg, and diastolic pressure decreased from 98.1 to 86.1 mmHg. Plasma CoQ10 values increased from 0.64 mcg/mL to 1.61 mcg/mL. Serum total cholesterol decreased from 222.9 mg/dL to 213.3 mg/dL, and serum HDL cholesterol increased from 41.1 mg/dL to $43.1 \text{ mg/dL} \pm 1.5 \text{ mg/dL}$.

Fish Oil

High doses of fish oil concentrate have lowered blood pressure in some people. There are cardiovascular as well as other health benefits associated with taking fish oil.

A study published in the October 1997 American Journal of Clinical Nutrition stated that "fish oils have been shown to lower blood pressure in hypertensive subjects." According to a January 1999 Journal of Nutrition study, the fatty acid DHA (docosahexaenoic acid, obtained directly from fish oil) was shown to alter the membrane fatty acid composition as well as the amount of ATP released from vascular endothelial cells, and also decrease plasma noradrenaline. The doctors who conducted this study stated that these factors may ameliorate the rise in blood pressure normally associated with advancing age. The Journal of Vascular Research (January 1998) corroborated these findings by showing that the EPA (eicosapentaenoic acid) fatty acid fraction of fish oil, when administered to aged rats, increases the release of ATP from the vascular endothelial cells, leading to repression of the blood pressure rise seen with advancing age. The October 1997 American Journal of Clinical Nutrition stated that "fish oil has a mild blood pressure-lowering effect in both normal and mildly hypertensive individuals."

Fish oil has been shown to reduce high levels of triglycerides by an average of 35%; however, fish oil does not reduce cholesterol as originally thought. Fish oil supplements do lower triglycerides dramatically, however. If your gastrointestinal tract can tolerate high daily doses of fish oil, then you may lower your blood pressure and gain other benefits. One consideration is to start with a half dosage and then slowly increase to the dosage that will be recommended.

The Effects of Garlic on Hypertension

Several studies suggest that garlic may have protective effects against cardiovascular diseases. One cross-sectional observational study reported in *Circulation*, October 1997, tested the hypothesis that regular garlic intake would delay the stiffening of the aorta related to aging. Chronic garlic powder intake was shown to attenuate age-related increases in aortic stiffness. Arterial stiffening with age is one cause of hypertension. The doctors conducting this study stated, these data strongly support the hypothesis that garlic intake had a protective effect on the elastic properties of the aorta related to aging in humans.

As reported in the June 1998 *Journal of Cardiovascular Pharmacology*, garlic preparations have also been shown to have a beneficial effect on lipids, blood pressure, and platelet function. An April 1998 study (*Prostaglandins, Leukotrienes, and Essential Fatty Acids*, Scotland) reported the effect of garlic on blood lipids, blood sugar, fibrinogen, and fibrinogenic activity of 30 patients who received 4 grams of garlic daily for 3 months. The patients were monitored at 1.5 and 3 months when it was determined that garlic had significantly reduced total serum cholesterol and triglycerides and increased the beneficial HDL cholesterol fraction. With regard to fibrinogenic activity, it was determined that the garlic inhibited platelet aggregation.

To analyze the effect of garlic on blood pressure, researchers in Australia reviewed published literature on randomized controlled trials of garlic preparations that were at least 8 weeks in duration. The researchers identified eight trials using Kwai, a dried garlic powder preparation involving 415 subjects. In seven trials that compared garlic to placebo, three showed a significant reduction in systolic blood pressure (SBP) and four showed a reduction in diastolic blood pressure (DBP). The overall pooled mean difference in the absolute change (from baseline to final measurement) of SBP was greater in subjects treated with garlic than in those treated with placebo. In DBP subjects, the corresponding reduction was slightly smaller. The researchers concluded that there may be some clinical use in patients with mild hypertension and recommended that more thorough and rigorously designed trials be conducted.

Another randomized, placebo-controlled, double-blind trial was conducted on 47 nonhospitalized patients using Kwai garlic preparation. The patients who were admitted had diastolic blood pressures between 95 and 104 mmHg after a 2-week acclimatization phase. Blood pressure and plasma lipids were monitored during treatment after 4, 8, and 12 weeks. Researchers found significant differences between the placebo and Kwai groups. Systolic blood pressure fell from 102 to 91 mmHg after 8 weeks and again to 89 mmHg after

12 weeks in the drug group. Researchers also reported a significant reduction in serum cholesterol and triglycerides in the same group. No significant changes were noted in the placebo group.

Other researchers evaluated a garlic preparation containing 1.3% allicin (2400 mg) in nine patients with relatively severe hypertension (DBP 115 mmHg). At peak effect, about 5 hours after dosing, sitting blood pressure fell 7/16 ($\pm 3/2$ standard deviations) mmHg, with a significant decrease in diastolic blood pressure from 5 to 14 hours after dosing. Researchers concluded that the garlic preparation reduced blood pressure with no evident side effects.

Dosage Recommendations

Studies continue in this area, with investigations pointing strongly toward the benefits of garlic, fish oil, and CoQ10 aiding in the treatment of hypertensive disease. The amount of standardized garlic extract needed to lower blood pressure is 1500 to 6000 mg per day. The amount of coenzyme Q10 needed to lower blood pressure is 200 to 300 mg per day.

Potassium, Calcium, and Magnesium

Another report in the *Annals of Medicine* stated that "in certain patients potassium, calcium, and magnesium may be protective electrolytes against hypertension." The report went on to suggest that "with appropriate dietary modifications, it is possible to prevent the development of high blood pressure and to treat hypertensive patients with fewer drugs and with lower doses. In some patients antihypertensive medication may not be at all necessary."

Anyone with elevated blood pressure should be taking 500 to 1500 mg of elemental magnesium per day. About 80% of Americans are magnesium deficient, and low levels of magnesium are associated with hypertension and arterial disease. Even if magnesium fails to lower your blood pressure, it can reduce the risk of complications, such as stroke.

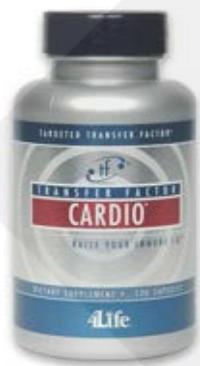
Benefits of vitamin C

In the early 1990s, several large population studies showed a reduction in cardiovascular disease in those who consumed vitamin C. The most significant report emanated from UCLA in 1992, where it was announced that men who took 800 mg a day of vitamin C lived 6 years longer than those who consumed the FDA's recommended daily allowance of 60 mg a day. The study, which evaluated 11,348 participants over a 10-year period of time, showed that high vitamin C intake extended average life span and reduced mortality from cardiovascular disease by 42%. This study was published in the journal *Epidemiology* (1992 3 [3]:194-202).

In 1998, several well-controlled studies showed that vitamin C enables the arterial system to expand and contract with youthful elasticity. Enhancing the elasticity of the arterial system is one method of reducing blood pressure. Cardiologists often prescribe nitroglycerin and longer-acting nitrate drugs to dilate the coronary arteries and relieve angina pain. Nitrate drugs not only improve coronary blood flow but also lower the oxygen demand of the heart by reducing peripheral vascular resistance. Unfortunately, nitrate drugs also

produce negative effects. The main limiting factor to the nitrate drugs is tolerance: the vascular system stops responding to the dilating effects of the drugs, and angina is no longer controlled. Nitrate drugs may also cause a progressive weakening of the heart muscle cells' ability to produce energy. When vitamin C is administered to coronary artery disease patients, the vasodilating effects of the nitrate drugs may be significantly prolonged and the energy-producing capacity of the cells maintained.

A double-blind study published in the Journal of the American College of Cardiology (1998, 31 [6]:1323-29) compared the effects of nitrate drugs in people receiving vitamin C to a placebo group not receiving vitamin C. The doctors administered nitrate drugs to healthy people and patients with coronary artery disease and then measured vasodilation response and cellular levels of cGMP (cyclic guanosine monophosphate), an energy substrate that is depleted by nitrate drugs. At day zero, all participants were measured to establish a baseline. After 3 days of vitamin C administration (2 grams, 3 times daily), there was no change in either group. After 6 days of vitamin C therapy an impressive 42% improvement in vasodilation response was observed and a 60% improvement in cellular cGMP levels was measured in coronary artery disease patients receiving vitamin C compared to placebo. A similar improvement occurred in the healthy subjects taking vitamin C compared to the placebo group. The doctors concluded the study by stating, "These results indicate that combination therapy with vitamin C is potentially useful for preventing the development of nitrate tolerance."



The above suggested nutrients are found in **4Life Transfer Factor® Cardio™**.

(to find out about the **benefits** of 4Life Transfer Factor® Cardio™, click [here](#))

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