

African Traditional Herbal Research Clinic

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NEWSLETTER

August 2006

Organic Agriculture Helps Fight Cancer

Professor Joe Cummins

Organic agriculture largely excludes synthetic inputs - pesticides, herbicides and fertilisers – and focuses instead on long-term ecological health. The health benefits of organic foods have now been highlighted by new research: they are richer in anti-cancer chemicals.

Plant phenolics (flavonoids) are plant by-products believed to protect the plant from insect predation, bacterial and fungal infection and photo-oxidation. This same class of plant chemicals has been found to be effective in preventing cancer and heart disease, and to combat age-related neurological dysfunctions.

The main target of these plant chemicals is to protect the cell against damage caused by active oxygen radicals. Oxygen radicals are generated from exposure to oxygen that has in turn been activated by exposure to radiation, heavy metal ions and chemicals. Oxygen radicals cause cancer by damaging DNA, resulting in mutations; by activating enzymes involved in regulating cell growth; and by promoting angiogenesis (invasion of blood

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What is the African Traditional Herbal Research Clinic?

We can make you healthy and wise

Nakato Lewis

Blackherbals at the Source of the Nile, (U) Ltd.

The African Traditional Herbal Research Clinic located in Bukoto, Uganda is a modern clinic facility created to establish a model space whereby indigenous herbal practitioners and healers can upgrade and update their skills through training and certification and respond to common diseases using African healing methods and traditions in a modern clinical environment.

Traditional healers are the major health labor resource in Africa as a whole. In Uganda, indigenous traditional healers are the only source of health services for the majority of the population. An estimated 80% of the population receives its health education and health care from practitioners of traditional medicine. They are knowledgeable of the culture, the local languages and local traditions.

Our purpose is to raise public awareness and understanding on the value of African traditional herbal medicine and other healing practices in today's world. **We are now open.**

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vessels into tumours to allow rapid growth of the tumour). Oxygen radicals are also implicated in cardiovascular disease and age-related nerve cell damage.

Conventional agriculture depends on heavy applications of chemical fertilisers, frequent spraying with chemical pesticides and irrigation. Such practices are believed to inhibit the production of flavonoids. On the contrary, organic agriculture, which eliminates the use of synthetic pesticides and chemical fertilizers, creates conditions favourable to the production of health-enhancing plant flavonoids.

Recent research has been carried out comparing conventional with organic and sustainable production of berries and corn; 'sustainable' designating farm practices that are environmentally sound. The research showed that the plant phenolics were significantly elevated in organic and sustainable produce compared with conventional production.

Earlier studies comparing organic and conventionally grown foods did not examine plant phenolics; but found that the conventionally produced foods had higher levels of nitrates and synthetic pesticides and relatively less total solids than organic foods. Animals preferred organic foods while human preferences were less clear.

A new report by Asami and coworkers published in the current issue of the *Journal of Agricultural and Food Chemistry* provides a long list of studies documenting the health-enhancing attributes of plant phenolics.

For example, the natural compounds had multiple functions in the cell. They affect the signal-transduction pathways of cells, and can kill cancer cells or prevent them from proliferating.

There are good prospects for controlling cancer growth with nutrients and plant chemicals. Combinations of plant chemicals could enhance cure rates for cancer when used in conjunction with standard therapies.

Flavonoids also show protective effects against cardiovascular disease and cancer in some studies, though other studies indicated no effect, and a few suggested potential harm.

Long-term oxidative stress contributes to nerve degradation and age-related diseases of the nervous system such as Parkinson's disease and Alzheimer's disease. And plant chemicals may be effective in combating these age-related neurological dysfunctions.

A very large body of evidence thus suggests that plant phenolics, clearly present in higher concentrations in organic than conventional foods, are effective in the fight against cancer, heart disease and age-related neurological dysfunction. Furthermore, there is increasing evidence that organic agriculture gives high yields, and is more beneficial to the environment and more sustainable.

All this evidence is largely denied or ignored by advocates of genetically modified foods.

http://www.blackherbals.com/organic_agriculture_helps_fight.htm ? ? ? ? ? ?

EU urged to Ban US rice in GE Row

By Tobias Buck in Brussels

August 22, 2006

A Commission spokeswoman said officials were trying to get more information on the GM variety and its potential risks from US authorities and Bayer CropScience, the company that developed the GM rice.

Campaigners urged the Commission to follow Japan's example. "This is a complete scandal. The biotech industry has failed once again to control its experiments and lax regulations in the US have allowed consumers worldwide to be put at risk. The European Union must immediately suspend US rice imports until consumers can be guaranteed protection from untested and illegal foods," said Adrian Bebb, a GM campaigner with Friends of the Earth.

Bayer CropScience said on Friday the traces found in commercial rice samples in the US related to a "pre-commercial rice line, LLRICE601, it had developed that produces a protein conferring herbicide tolerance". The company said the protein was "well known to regulators and has been confirmed safe for food and feed use in a number of crops by regulators in many countries, including the EU, Japan, Mexico, US and Canada".

Mike Johanns, the US agriculture secretary, said last week that both the Department of Agriculture and the US Food and Drug Administration had reviewed "the available scientific data and concluded there are no human health, food safety, or environmental concerns associated with this [genetically engineered] rice".

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AFRIKAN SPIRITUALITY

Nilotic Spirituality and Philosophy - Part I The Sankofa Project

Some of the oldest spiritual beliefs known to man emerge in Eastern Africa along the Nile Valley. To understand the religion of the Nile Valley, where Egypt rose to greatest prominence, Egyptologist E.A. Wallis Budge stated one had to understand Africa. Beyond dress and art, no other relationship stands out more between Egypt and Africa than in the area of spirituality. Many of Egypt's belief systems can be traced back to inner Africa itself. Cheikh Anta Diop wrote, "Negro cosmogonies, African and Egyptian, resemble each other so closely that they are often complementary. Such similarities include the following: the use of zootypes (animals) in religious figures; the veneration of ancestors; the emphasis on cattle cults found throughout Africa, especially East Africa; the notion of the god-king; etc.

Certain religious rituals now extinct in Egypt are still practiced in such regions as Somalia. And these spiritual belief systems form the basis of Egypto-Nubian philosophy. Nubian archaeologist Bruce Williams states, "The way of looking at the world to be found in, say the Hebrew Bible or in Babylonia literature or amongst the Greeks is very different from anything you find in Egypt. And that difference is its Africaness." To fully discuss the cosmological complexities of this region's spiritual system and their relationship to Africa would take volumes. Thus below only a few points will be touched upon.

Understanding the spiritual beliefs that permeated Egypt, Nubia and the Nile Valley must begin with an understanding of their concept of deity. In Egypt there existed a host of deities each of who were thought to affect the universe. Some of these were Auset, Ausar, Ra, etc. However these deities were not exactly thought to be separate from each other. All Deity existed, in conjunction with the other, sometimes even blending or usurping another's role. Take for instance Amen-Ra. Both were "separate" deities whom the Egyptians wasted no time in placing together. The reason deities could so easily be placed together to form a new deity was because of the African law of interconnectedness between deities. The interconnection of these deities easily lent itself in Egypt to the idea of a single God deity. This all- powerful and face less deity was called at times Neter. The manifestations

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The traditional shrine as a symbol of our cultural history

Neter took were called the neteru: Auset, Ausar, Ra, etc. This can be found in a host of African spiritual systems where a supreme being is regarded as the "Creator" or "Chief Deity" among others. The example of Oldumare's supremacy in the Yoruba pantheon is a prime example. The move to a more extreme form of monotheism was attempted under the Egyptian ruler Akhenaton with less than successful results. It would seem the Egyptians, like their African counterparts, liked their many manifestations.

Many of these neteru were thought to have once been rulers or wise men. The "Souls of Neken," legendary predynastic rulers worshipped in Egypt, are now known to have actually existed. This idea of ancestral worship is found throughout Africa. Many African people impute the souls of dead ancestors a godlike ability to bring good fortune or dire consequences. The souls of dead kings are said to be especially important. In Yoruba the Orishas are said to be ancestral spirits, many of them past rulers, who determine human life. In Uganda, kings are believed to continue watching over their people long after death. Special temples are even built through which their spirits can be consulted for advice. In ancient times, the neteru deity Ausar is believed to be the first king of Egypt who ascends to godhood.

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FEATURED ARTICLES

Delivering Good Health through Good Food

Professor Henry Becker

ISIS Press Release,
July 15, 2004

Significantly, a United Nations study in 1999 found the prevalence of overweight and obesity—a strong predictor of chronic ill health and shortened lifespan—to be increasing alarmingly in the developing countries as well as the developed, and particularly among children. A worldwide epidemic of obesity has been recognized, spread by globalisation and penetrating to the remotest corners of the world. The diseases of industrial civilisation have taken hold and health care systems are bending under the load nearly everywhere.

The nature of the beast

During the past century, the common afflictions in Western societies have dramatically shifted from infectious to degenerative diseases. Infectious diseases were subdued largely by public health measures: improvement in housing, provision of clean water and air, sanitary waste disposal, quarantine of the infected, etc. Rise in living standards and education also helped. Medical interventions such as vaccinations and increasingly potent drugs came relatively late, but in today's public imagination, they get the major credit for ridding us of infectious diseases.

Infectious diseases typically strike in unpredictable waves, or epidemics. Degenerative diseases, however, have typically risen from small beginnings and grown nearly exponentially to a level where much of the population is chronically afflicted. Today these diseases are the major burden on our health care system, and their proliferation the main cause of spiralling costs.

We are what we eat

While some degenerative diseases have occurred in various societies throughout history, those which most vex us now, such as cardiovascular disease, inflammatory bowel disease, type II diabetes, asthma and many cancers, were rare or virtually unknown a

mere 80 years ago. Cases of myocardial infarction (heart attack), for instance, began to appear in the 1920s and grew decade by decade to epidemic proportions. Most degenerative diseases are not caused by disease vectors such as micro-organisms or viruses. They are primarily due to 'lifestyle' factors of both the individual and various layers of society and, as such, are highly preventable. These factors include faulty food, dietary immoderation, abuse of harmful substances, physical inactivity, disturbed biorhythms, environmental deterioration, social breakdown and poverty.

The most important determinant of health is food. Just as good nutrition is vital for a healthy immune system, faulty food is implicated in the infectious diseases. In his book *The Wheel of Life*, first published in 1938, G. T. Wrench observed, "The inescapable conclusion is that in a very large number of diseases faulty food is the primary cause. The suspicion is that faulty food is the primary cause of such an overwhelming mass of disease that it may prove to be simply the primary cause of disease [in general]."

Hippocrates taught, "Let thy food be thy medicine". The corollary we must learn is, "Let not thy food be thy sickener!"

Let's remember

It's important to realise there were once whole populations—not just individuals here and there—flourishing in states of robust good health and virtual absence of disease. That is not a utopian myth, but well-established fact. The evidence is compelling that our hunter-gatherer paleolithic ancestors who subsisted mainly on animals supplemented with such wild plant foods as were available—tender leaves and stems, roots, fruits and nuts, but virtually no grains—typically

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had fine physiques and enjoyed remarkable freedom from degenerative disorders. Sea foods appeared to be particularly valuable, and there is a growing school that argues these were pivotal in the special development of the human brain.

Since the Neolithic (agricultural) revolution 10 000 years ago, many agricultural communities that maintained a sufficient animal component (fish, meat, milk, cheese) in their diets also achieved excellent health. Examples of healthy communities have extended into our own time, though in rapidly diminishing numbers. They have been scientifically observed and documented, most notably by Weston A. Price (Nutrition and Physical Degeneration, first published in 1939), Sir Robert McCarrison (Studies in Deficiency Diseases, 1921; Nutrition and national health, in J. Royal Soc. of Arts, 1936), and Viljalmur Stefansson (The Fat of the Land, 1956; Food and food habits in Alaska and Northern Canada, in Human Nutrition, Historic and Scientific, 1958).

These lessons of the past demonstrate what's possible for human health, and what can be achieved again. The foods eaten by healthy peoples of the past were perfectly "organic", as no others existed before modern industrialised agriculture. They were whole, fresh and completely natural. The genius of industrial civilisation has been to introduce a vast array of highly processed foodstuffs that are anything but whole, fresh or natural. Attention is paid to packaging, appearance, presentation, palatability, uniformity, convenience, transportability, shelf life and—it must be said—addictiveness, while almost wholly ignoring the crucial issues of nutritional value. A gigantic middleman—the processed food industry—now stands between the consumer and the primary producer (the farmers, ranchers, fishers, etc.) and profits richly from added economic value. The consumer buys these products, which are typically heavily promoted, and pays the predictable price of nutritional value subtracted, i.e., degenerative diseases.

The growth of degenerative disease is an economic burden on society as a whole, but enterprising parties have skilfully exploited that as an opportunity for profit. This gave birth to the pharmaceutical industry, another mega enterprise of our times. The main effect of the industrialisation of medicine on degenerative

diseases is painkilling rather than curative, usually with many adverse side effects. As with processed foods, the manufacturers' interest is overwhelmingly the pursuit of profit.

Finally, the "health care" system has come to rest on acceptance of degenerative diseases as inevitable features of life and the medical treatment of symptoms as the normal response to this grim reality. There is, to be sure, an ongoing quest for "cures", e.g., the "war on cancer", but what it mostly accomplishes is to produce ever more drugs that fall well short of the ever-receding goal of cure but succeed at return on investment.

Physicians are indoctrinated into this defeatist set-up by their basic training, and reinforced by their continuing education at the hands of the pharmaceutical companies. Thus, the people we should expect to tackle the plague of degenerative disease at its sources, instead act like firemen who have strategically decided not much can be done to stop fires from happening, so it's best to downplay prevention and concentrate on fire-fighting.

Our lifestyle failings

So how did we get here? These are some in the long list of our 'lifestyle' failings:

1. Excessive intake of carbohydrates, particularly those leading to high blood sugar (sugars, flour, potatoes, white rice, etc.).
2. Excessive energy intake (too many calories), exacerbated by the trend to super-sizing of portions of fast foods, snack foods, soft drinks, etc.
3. Consumption of partially hydrogenated fats and oils; consumption of overheated and rancid fats and oils; excessive intake of omega-6 fatty acids (a major component of many common vegetable oils, excepting flaxseed, olive and some nut oils).
4. Consumption of most processed foods. The main ingredients of many include white flour and sugars, partially hydrogenated oils or fats, which are further compromised by the absence, loss or damage of vital nutrients, impaired digestibility, and incorporation of nutritionally questionable additives (fillers, extenders, thickeners, stabilisers, preservatives, flavourings, dyes, etc.). Most products offered by fast-food outlets rate in this category.

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FEATURED ARTICLES

THE SCIENCE OF AFRICAN BIOCHEMISTRY – PART 1 A Nutritional Guide for Healing, Diet, and Well-Being

Tariq M. Sawandi, M.H., N.D.

There are differences in body physiology between the races of Mankind. Every human has a specific biochemical makeup and therefore requires a unique biochemical diet in order to stay healthy and free from disease.

Nature has programmed every human body-type with certain food parameters which helps to prevent damage to the biochemical nutritional homeostasis (balance). Ancient African health practitioners taught that the human body has a vital force (aura, electromagnetic field) that allows one type of vitamin to change into another type of vitamin/or energy.

It is important to understand that energy is the basic unit of the human body. It is the foundation upon which all the cells, organs, tissues, and chemicals are formed in the body. The body emits a vibratory frequency which reflects the thoughts, foods, and medicines we ingest and contributes to the structure of our vital force.

The Center for Disease Control's 2001 health statistics show that Africans in America are 1.8 times more likely to die from heart disease than non-Hispanic whites; 1.3 times more likely to die from breast cancer; 2.8 times more likely to die from prostate cancer and 1.4 times more likely to die from colon cancer. More than 2.7 million African Americans – 1 in 9 have diabetes. Africans in America are 1.6 times more likely to have diabetes than non-Hispanic whites. About 72,000 African Americans have sickle cell anemia, and the disease occurs in approximately 1 in every 500 African-American births and 1 in every 1,000-1,400 Hispanic-American births. Approximately 2 million African Americans, or 1 in 12, carry the sickle cell trait.

The purpose of the following report is to show that this great human tragedy in our communities CAN

BE STOPPED NOW, entirely on the basis of existing nutritional health knowledge. We will explore the theory that cancer, heart disease, and sickle cell anemia is a deficiency disease aggravated by the lack of an essential food compound in African people's diet, and that its control is to be found simply in restoring this nutrient in our daily diet.

The Western View of Health and Disease

The average doctor today under the Western system of medicine has spent over ten years acquiring training to learn about disease causation. Hence, there is a tendency among many physicians to look for a positive "cause-and-effect" relationship in which something clearly causes something else – a virus, or bacteria must "cause" a disease. The idea that disease is caused by an outside agency, or virus is rooted in the Germ Theory of disease, first proposed by the French scientist, Louis Pasteur in the mid-1800's.

There are many diseases that plague the human family today which modern science has spent many billions of dollars searching for a prevention or cure, but they are no closer to the answers today than they were over a hundred years ago. Perhaps the main reason is that they are still looking for that "something" which causes these diseases instead of the "lack" of something.

The ultimate solution to the scientist's most puzzling medical problem is to be found in a near-primitive concoction of herbs and foods. However, medical doctors have been trained to search for "complex" answers rather than looking to the simple laws of nature. As Dr. Laila Afrika, pioneer of African ethnomedicine put it aptly:

"In health science they (western doctors) believe that the body destroys itself with disease. Therefore, they

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must give toxic, poisonous drugs and vaccines to stop the body from killing itself. In Caucasian medical science, they believe that evil bacteria and virus are trying to kill good bacteria and virus.”

African Health Science

The African system of health disagrees with the idea of germs being the sole source of disease. Historically, African health science was founded upon holistic principles. This science pre-dates Egyptian medical science and is between 20,000 and 100,000 years old. In fact, it is the oldest medical science on the planet. African health practitioners were devoted to teaching individuals to improve their physical, mental, and spiritual health through preventative lifestyles. The African physician and health professional had to first develop their own understanding of how African physiology worked on all levels before they could treat diseased individuals. This wholistic wisdom has been passed down to us as “The Science of African Biochemistry”. This is the African health system according to “Naturopathic” principles. In this system, the patient is given an herb or food that will help the body defend itself. For example, if a patient is suffering from joint pain (arthritis), then this would perhaps indicate that there may be a calcium and/or mineral deficiency caused by a nutritional deficiency in the diet.

The African physician would advise or teach their patient what lifestyle, nutritional, emotional, or dietary changes should be made to alleviate the condition. This philosophy was consistent with the laws of nature and is based upon a belief in the body’s innate God-given, natural ability to heal itself when given the appropriate herbs, seeds, and foods.

The human body contains millions of microorganisms which support and help to keep our immune systems healthy and have enabled us to have healthy lives. The ancient Africans believed that a healthy immune system is responsible for the health and healing of the human body. From this premise, health problems occur as the result of “something lacking” in our nutrition, leaving the human body vulnerable to disease. African medicine is a nutrient based system. A diet and lifestyle deficient in vital nutrients makes us susceptible to opportunistic infections, and cellular disorganization (cancer). This is why some people who are exposed to the cold virus do not get a cold. Or why some people are able to recuperate

from a deadly disease such as cancer and others, cannot. However, many scientists and physicians reject the vitamin deficiency concept of disease until it is proven and tested through clinical trials.

African Physiology and Nutritional Needs

The African health scientists have discovered that many of the intricate biochemical processes that govern the body can be influenced by the presence or absence of certain vitamins, minerals, or nutrients. The ailments that African people suffer from today are based on our improper diet and lifestyle. The science of African biochemistry is based on the melanin molecule which is dominant in Africans. **Western health science is based on white body chemistry, and is incompatible with the African body type.**

According to Dr. Carol Barnes in his book, **Melanin: The Chemical Key to Black Greatness**:

“Melanin is a molecule, but a very large complicated and complex living molecule. It has a very high molecular weight of over 200, meaning that one molecule of melanin is composed of a three dimensional configuration of over 200 individual atoms. It is a living molecule, a life chemical, and it is charged like a battery. In fact, it operates like a battery or super-conductor, yet it is heat-resistant and is characterized by a nice, sweet fragrance.”

Melanin is responsible for manufacturing and sustaining life and it keeps the Black human in constant contact with the natural energies of the Universe. This is because melanin is found not only in the skin, hair, and eyes, but it is also contained in many other vital organs of the body as well. It is in the nervous system, the spinal cord, the glands, the brain, the DNA, the muscles, intestines, heart and liver. Its presence can be found throughout nature and is also found in many of our foods – plants, seeds, fruits, and vegetables. It is also found in animals, in the soil, in the bark of trees, rivers, streams, and seas.

In explaining the importance and significance of melanin in African physiology, Professor T. Owens Moore, in his book “**The Science of Melanin**”, liken melanated people to plants:

“A melanated human body is synonymous with chlorophyll in plants. The chlorophyll functions as a converter of solar energy. Similarly, melanin is a converter of physical energy. We know that such

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FEATURED ARTICLES

Why are Primates in Forests Healthier than Us?

Professor Charles Ssali

[Mariandina AIDS Research Foundation](#)

We should wonder why monkeys and chimpanzees are not dying from AIDS as much as the people that claim to be more advanced in every sense of the word? They have the SV virus equivalent to HIV that they have lived with for generations. The reason is that they eat from the trees and herbs that are the source of life as we have said. Why is Mariandina banned, a preparation made out of herbs and natural products from foods and vegetables. The National Drug Authority and the Minister of Health that are the custodians of the government means of looking after our health interests have failed to give me a satisfactory explanation for maintaining the ban. They have licensed products like AZT that carry severe toxic side effects in preference for that of natural products from herbs that have no toxic effects.

The multinational drug companies that are conspiring to ban the use of vitamins and all herbal medicine with significant medicinal properties are behind the activity and policies of our National Drug Authorities in most of African countries. In Kenya, the National Drug Authority of Kenya banned Dr. Kobel's discovery of Pearl Omega. In South Africa, a recent discovery of an effective drug against AIDS was banned within days of its announcement. In Zambia, the same thing happened. In Uganda, the National Drug Authority banned Mariandina under the pretext that it has a few milligrams of vitamin C more than what you find in a mango. In Ghana, Dr. Drobo was murdered by multinational pharmaceutical companies for his discovery for an effective remedy against AIDS.

Before introducing AZT and protease inhibitors in Uganda in 1997, the Minister of Health placed a ban on Mariandina and then staged a party to launch AZT in Sheraton Hotel. (Date 05.11.97)

He assured the whole country that Uganda is fortunate to get a drug that costs 1.5m Uganda shillings a month at a good subsidised price of 600,000 shillings a month, compared to Mariandina that costs 30,000 shillings a month.

The multinational drug companies, in corroboration with UNAIDS, and the local health authorities, are placing a ban on natural herbal products to monopolise the vitamin and herbal remedies as their limitless source of revenue. These same multinational companies have introduced diseases to destroy plants and herbs that we use as source of nutrient so that we can become more dependent on their products. The same people have monopolised the business of producing the pesticides and herbicides that poison the environment and produce changes in our foods so that they score a double purpose of selling their products and reducing our population.

The people who ban locally invented products derived from vitamins and herbs are just the front for these multinational companies. It has become a society of man-eat-man just for the dollar.

First of all - volatile, synthetic pesticide poisons are the largest group of poisonous substances purposefully being added or disseminated throughout our environment. All of the major poison producers are in the "health" pharmaceutical business too - so as you become poisoned/polluted and sicken and begin to die from their allopathic poisons - they will sell you allopathic drugs to "survive". These people are not "guardians" of the environment. They are the destroyers of the environment - they are not in the "chemical or health" industry - they are in the death or poison "industry"

In addition, approximately 250,000 to 300,000 acres of Roundup Ready soybeans were planted in Argentina for

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the 1996/97 season. Since 1995, Monsanto has invested over US\$200 million in glyphosate manufacturing technology, and plans to invest another US\$180million for 1997.

The Nature of the Pharmaceutical Industry

1. The natural purpose and driving force of the pharmaceutical industry is to increase sales of pharmaceutical drugs for ongoing diseases and to find new diseases to market existing drugs.

2. By this very nature, the pharmaceutical industry has no interest in curing diseases. The eradication of any disease inevitably destroys a multi-billion dollar market of prescription drugs as a source of revenues. Therefore, pharmaceutical drugs are primarily developed to relieve symptoms, but not to cure.

3. If eradication therapies for diseases are discovered and developed, the pharmaceutical industry has an inherent interest to suppress, discredit and obstruct these medical breakthroughs in order to make sure that diseases continue as the very basis for a lucrative prescription drug market.

4. The economic interest of the pharmaceutical industry itself is the main reason why no medical breakthrough has been made for the control of the most common diseases such as cardiovascular disease, high blood pressure, heart failure, diabetes, cancer, and osteoporosis, and why these diseases continue like epidemics on a worldwide scale.

5. For the same economic reasons, the pharmaceutical industry has now formed an international cartel by the code name "Codex Alimentarius" with the aim to outlaw any health information in connection with vitamins and to limit free access to natural therapies on a worldwide scale.

6. At the same time, the pharmaceutical companies withhold public information about the effects and risks of prescription drugs and life-threatening side effects are omitted or openly denied.

7. In order to assure the status quo of this deceptive scheme, a legion of pharmaceutical lobbyists is employed to influence legislation, control regulatory agencies (e.g. FDA), and manipulate medical research

and education. Expensive advertising campaigns and PR agencies are used to deceiving the public.

8. Millions of people and patients around the world are defrauded twice: A major portion of their income is used up to finance the exploding profits of the pharmaceutical industry. In return, they are offered a medicine that does not even cure.

www.blackherbals.com/why_are_primates_in_forests_heal.htm

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Two-thirds of US Crops GM Contaminated, Claims Report

By Geoffrey Lean

July 3, 2004

More than two-thirds of conventional crops in the United States are now contaminated with genetically modified material - dooming organic agriculture and posing a severe future risk to health - a new report concludes.

The report - which comes as English ministers are on the verge of approving the planting of Britain's first GM crop, maize - concludes that traditional varieties of seed are "pervasively contaminated" by genetically engineered DNA. The US biotech industry says it is "not surprised" by the findings.

Because of the contamination, the report says, farmers unwittingly plant billions of GM seeds a year, spreading genetic modification throughout US agriculture. This would be likely to lead to danger to health with the next generation of GM crops, bred to produce pharmaceuticals and industrial chemicals - delivering "drug-laced cornflakes" to the breakfast table.

The report comes at the worst possible time for the English Government, which is trying to overcome strong resistance from the Scottish and Welsh administrations to GM maize.

The House of Commons Environmental Audit Committee drew attention to the problem in North America in a report published on Friday, and said the Government had not paid enough attention to it. The MPs concluded: "No decision to proceed with the commercial growing of GM crops [in Britain] should be made until thorough research into the experience with GM crops in North America has been completed and published". It would be "irresponsible" for ministers to give the green light to the maize without further tests.

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Inadequate intake of omega-3 fatty acids (major components of flaxseed oil and of marine fats and oils).

5. Inadequate total intake of high quality fat. Contrary to recent prevailing wisdom, this includes natural animal fats.
6. Inadequate intake of high quality protein. A high carbohydrate, low-fat diet easily becomes a low-protein diet.
7. Inadequate intake of water. Inadequate intakes of various minerals, vitamins and other micronutrients.
8. Many whole foods today are very deficient relative to earlier examples, or compared to good organic products. Diets high in processed foods are likely to be inadequate.
9. Inadequate exposure to sunshine, leading, among other effects, to widespread vitamin D deficiency.
10. Inadequate levels of physical activity.
11. Inadequate rest and disturbed circadian rhythms, due to shift work, long work hours, too much noise, bad habits such as late-night TV, etc.
12. Pollution of soil, water, air and food with agrochemicals, industrial chemicals and various other noxious substances.
13. Immoderate intake of alcohol, use of recreational drugs, etc.
14. Hugely excessive use of pharmaceuticals—both over-the-counter and prescribed.
15. Poverty, particularly when associated with highly uneven distribution of income, which is rapidly growing almost everywhere.
16. Stress of unsatisfying work, or of unemployment.
17. Breakdown of family and community life.

What to do

I shall limit myself here to addressing nutrition, the single biggest determinant of health.

A paradigm change is needed in medicine

"Orthodox" physicians have too long based their practice principally on knowing drugs. To prevent or effectively treat the degenerative diseases, they must know food and

make it their primary instrument. These diseases are largely caused by faulty food, and cures—to the extent possible—depend largely on the prescription of the right food. The education of physicians has too long neglected nutrition. Physicians should, in fact, be thoroughly acquainted with all the lifestyle factors that promote health or precipitate disease. Although still a minority, a growing number of physicians are already committed to prevention and cure by lifestyle modification. Currently, their practice is commonly referred to as "alternative", but it is time for them to become the main stream.

Major changes needed in the field of applied nutrition and nutritional goals

There are many things very wrong today in applied nutrition and the nutritional goals set for citizens by authorities. Standards such as the Food Pyramid are badly skewed and need drastic revision. The obsession with the alleged dangers of dietary saturated fats and cholesterol is a proven but persistent folly. There's nothing wrong with sound natural fats. Nor is there anything wrong with beef and lamb, with all their fat, if the animals are healthily raised and not dosed with antibiotics and hormones. There are, though, truly bad fats that indeed do contribute to degenerative diseases: synthetic fats; partially hydrogenated fats; oxidised and rancid fats; and excesses of omega-6 fatty acids. Carbohydrates have been hugely over-promoted; the healthiest amount of sugar is none, and white flour products aren't much better. Processed foods should be revealed for what they are: mainly junk, dangerous to health, and never a fit substitute for whole, natural foods. Synthetic foods, such as soft drinks, are typically slow poison. I can hardly begin to list all the reforms desirable in nutritional teaching and consultation. It is essential to get the story right according the best knowledge of the facts, and to stay open to correction by new findings. It is also necessary to get the story out so the public is well informed, without kow-towing to industrial interests (processed foods, agrobusiness).

Optimum nutrition must be our aim

Optimum nutrition is especially crucial for good outcomes during conception, pregnancy, infancy and childhood, the whole process in which new humans are moulded for better or worse. We should be vigorous in providing parents with supportive information, programmes, resources and assistance. Lifelong good nutrition is the foundation of a healthy

Continued on page 11

Continued from page 10 - Delivering Good Food through Good Health

and happy old age. But even when many years have been lived in poor nutrition, appropriate changes in diet can still improve much of the damage done and greatly diminish needs for medical treatment. The nutritional quality and adequacy of food served in homes for the aged should be a matter for public concern and government attention.

Optimum nutrition is not uniquely defined, diversity and individuality must be respected

We have citizens with ancestry in all regions of the world: central African and south Asian, Mediterranean, North European, and from recent hunter-gatherer to 10 000-year experience of agriculture. Thus there is a broad range of food tolerances and intolerances that should be taken into account rather than prescribing a one-size-fits-all. For example, the case of Canada's first nations is especially notable for suffering from the foods of industrial civilisation in high rates of type II diabetes, cardiovascular disease, etc. Generally, everyone is an individual with characteristics that may deviate substantially from the average and merit special attention.

One of the jobs of the enlightened physician will be to discover those individual vulnerabilities and needs and help the patient make due adjustments.

Public institutions must set an example

Publicly funded hospitals and institutions of education, and cafeterias and restaurants in government buildings, should lead by behaving as models of excellence in the foods offered on their premises. Currently, a minority of schools, colleges and universities offer their students healthy food and drink. Many, however, have admitted fast food outlets to their halls, with monetary benefit to the institution but a great disservice for the health and food habits of students and staff. Utterly scandalous are the deals with cola companies.

Huge reforms needed in agriculture and animal husbandry

A return to wholly organic operation is needed to put an end to the incidental poisoning of land, water, air, people and most other life forms. Today's high-input "modern" agriculture is simply mining the land, sapping future productivity for the sake of temporary monetary gain. It's not sustainable. Further, the concentration of animal production on factory farms should be stopped and

production re-dispersed over the land. Animals should be raised humanely and in such a way that they are naturally healthy. Grazing animals should be raised largely by grazing; it is part of what gives their meat and milk high quality. Much greater attention should be paid to raising the nutritional quality of farm, ranch and market garden products.

Government must ensure quality in food supply

Government should not hesitate to use its powers of regulation, inspection and stimulation to ensure high quality in the food supply. Quality production should be encouraged. The nutritional implications of any food processing should be evaluated by competent agencies and adjustments required to ensure acceptable nutritional outcomes.

Conclusions

In order to deliver health, we must deliver good food through implementing sweeping changes in medical education and goals, food and agriculture and government policies. We may still need as many physicians, if they indeed become guardians of our health rather than managers of disease. Economies will result primarily from vastly reduced demands for diagnostics, hospital care and other patient services, and medical therapies. Sales of pharmaceuticals may plummet, but the sacrifice of this economic activity will be happily endured as part of the price of better health. The same may be said of major sectors of the processed food industry.

The many people who regard degenerative disease as an inevitable feature of living are wrong. We've seen these diseases proliferating and appearing earlier and earlier in life, so young children are now succumbing to obesity, Type II diabetes and even cardiovascular disease. However, if the needed reforms are made, onset of such diseases can be retarded and relegated to extreme old age, and indeed most of these diseases need not be commonly experienced at all. The choice is ours.

The author is Professor Emeritus of Chemical Engineering, Queen's University, Kingston, Canada. The above are excerpts from his paper submitted to the Romanow Commission.

[\(http://www.hc-sc.gc.ca/english/care/romanow/\)](http://www.hc-sc.gc.ca/english/care/romanow/)

<http://www.i-sis.org.uk/DGHTF.php>

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Continued from page 2 EU urged to Ban US rice in GE Row

European and US attitudes towards genetically modified plants and organisms have differed sharply in the past. While GM foods are consumed widely in the US, polls show that European consumers remain deeply distrustful of products containing GMOs.

In a ruling handed down in February, the World Trade Organisation found the EU's tight restrictions on GMO imports violated international trade rules.

The EU imported 224,000 tonnes of rice from the US last year, valued at £43m.

<http://www.rawstory.com/showoutarticle.php?>

Editor's Note: Based on the available data and information, the USDA and FDA has concluded that the presence of **LLRICE 601** in the food and feed supply poses no safety concerns. **LLRICE 601** is endowed with bacterial DNA that makes rice plants resistant to a weed killer (herbicide) made by the agricultural giant Aventis. If there no problem, then why did Japan suspended imports of U.S. long-grain rice following a positive test for trace amounts of a genetically modified strain not approved for human consumption?

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Continued from page 3 – Nilotic Spirituality and Philosophy
Ausar, commonly known by his Greek name Osiris, was one of the most famous neteru in Egypt. Heralded as the first king of Egypt it is believed Ausar is a composite of long dead kings who lived in ancient times. He is credited with bringing "civilization" to his people and establishing a code of spiritual laws and moral standards. The story of Ausar is a long and complex one. It is said that he ruled Egypt with his wife Auset, who is better known by her Greek name Isis.

According to legend, Ausar was slain by his jealous half-brother Set, who cut his body into fourteen pieces. He was eventually resurrected and ruled in the underworld. This documents the oldest belief of resurrection and immortality in human history. And similar stories of slain and immortalized god-kings can be found throughout Africa. As old as 2,000BC the Khoi of southern Africa held that Tsui was the first chief who is killed by a nemesis, Gaunab, only to be resurrected repeatedly to retire and rule in the "beautiful heaven." Among the San, Cagn is the god-chief who is killed in treachery but achieves resurrection.

To be continued in September issue

http://www.geocities.com/CollegePark/Classroom/9912/nilotic_spirit.html

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Continued from page 9 - Two Thirds of US Crops GM Foods Contaminated

Peter Ainsworth, the committee chairman, accuses the Cabinet of "great discourtesy" to Parliament by making its decision on the maize last Thursday, the day before the report came out, and plans to raise the issue with the Speaker of the House.

This week's statement by Margaret Beckett, Secretary of State for the Environment, is expected to fall short of authorising immediate planting of the maize, and provide only a muted endorsement for the technology. She will make it clear that the Government wants the GM industry to compensate farmers whose crops are contaminated. This could make cultivation uncommercial. The US study will increase the pressure on her to be tough.

Under the auspices of the green-tinged Union of Concerned Scientists, two separate independent laboratories tested supposedly non-GM seeds "representing a substantial proportion of the traditional seed supply" for maize, soya and oilseed rape, the three crops whose modified equivalents are grown widely in the United States.

The test found that at "the most conservative expression", half the maize and soyabeans and 83 per cent of the oilseed rape were contaminated with GM genes - just eight years after the modified varieties were first cultivated on a large scale in the US.

The degree of contamination is thought to be at a relatively low level of about 0.5 to 1 per cent. The reports says that "contamination ... is endemic to the system". It adds: "Heedlessly allowing the contamination of traditional plant varieties with genetically engineered sequences amounts to a huge wager on our ability to understand a complicated technology that manipulates life at the most elemental level." There could be "serious risks to health" if drugs and industrial chemicals from the next generation of GM crops got into food.

Lisa Dry, of the US Biotechnology Industry Association, said that the industry was "not surprised by this report, knowing that pollen travels and commodity grains might co-mingle at various places".

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[*Herald Feature: Genetic Engineering*](#)

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pigments are essential to maintain the vitality of the plant. Thus, no flora without pigment exists on this planet. White leaves do not exist. The pigment chlorophyll is necessary for all vegetation. Similarly, melanin is important for proper human physiology.”

Yes, the same melanin that gives life to the plants that grow in the soil is a life giver to humans as well. On the molecular level the electrons in melanin molecules orbit and rearrange themselves. They undergo what is called resonance. This rearrangement of electrons causes certain energy shifts in the body. This energy is then used in metabolism and cellular organization. Melanin depends on nitrilosides to keep itself clean. “When we eat synthetic foods, or cooked foods, we don’t get enough B vitamins and a lot of toxins are not removed and end up in the brain,” states Dr. Jewel Pookrum.

When melanin becomes toxic, it adversely affects the biochemistry, and the individual with toxic melanin becomes susceptible to a host of diseases. How does melanin become toxic? When we eat certain foods that are not compatible with our physiology, melanin is blocked from making the energy exchanges that are needed and this has resulted in dysfunction and disease. Dr. Laila Afrika states in his book, **African Holistic Health:**

“Blacks have specific nutritional and dietary needs. These nutritional needs arise because we have specific bodily differences as compared to other races and cultures. For example, over 70% of Black people (worldwide) cannot digest cattle milk. In addition, the intestinal florae (bacteria, virus, fungus and yeast) that naturally live in Black people’s intestines are unique to Blacks. Subsequently, Blacks assimilate food in the intestines differently. Also, despite centuries of living in countries outside of Africa, their intestinal florae are the same as it was in their ancestor’s stomachs 2,000 years ago in Africa . Melanin (black color pigment) is obviously most abundant in Blacks. This melanin aids in protecting Blacks from the ultraviolet rays of the sun. It also increases the speed of nerve and brain messages which are transmitted between the left and right hemispheres of the brain and all nerve signals transmitted throughout the bodily nerve network...Black people’s blood crystallizes differently from Caucasian’s blood. These are some of the many reasons why Blacks have unique nutritional, medical, and dietary needs.”

After African people were transported into the cities of America and Europe during slavery, their eating habits were changed drastically and suddenly. The result has been chronic , degenerative and metabolic diseases of all kinds.

A brief look at the African-American diet tells the story. The food shelves of Black Americans are now lined with high carbohydrate foods that have been processed, refined, synthesized, artificially flavored, and loaded with chemical preservatives. To compound this problem, most of the vitamins, trace elements, and enzymes are completely removed through the manufacturing process, mostly so as to render the food more durable. We are told by the food processors that the vitamins and minerals are put back into the food before sending it to the market. And so we see the word “enriched” on our bread, milk, and other foods. But make no mistake about it; nothing is left but raw starch which has little nutritive value. These starch synthetic chemicals are injected, which form only part of the missing vitamins, and are not properly ingestible by human beings because they are not “in balance”.

Most African-Americans assume that it makes little difference what they put into their stomachs as long as they are full. And one of the leading culprits in the way of poisonous foods eaten by Black Americans is soul food – Ham, potato salad, French fries, pork chops, chitterlings, collards, pig feet, cornbread, black-eyed peas, and hog maws. All of these foods are cooked in or laced with pork fat, lard, milk, eggs, butter, salt, spices, and lots of refined sugar. These foods are not compatible with our bio-chemical makeup, and are responsible for the many diseases that we suffer from today.

Let us pause, then, and reflect on the significance of this knowledge. Is it possible that hypertension, heart disease, cancer, diabetes, rheumatic diseases, much of our gastrointestinal disorders, sickle cell anemia, and skin disorders all are related directly or indirectly to a deficiency in our diet? Let us return to the main topic – African Bio-chemistry, and to the realm of those questions for which we do have answers. *To be continued next month in the September issue.*

Tariq Sawandi is a Master herbalist, nutritionist, and consultant on holistic health. Dr. Sawandi is renown for his in-depth knowledge of African holistic medicine, including Chinese and Japanese medicine, Ayurveda, Naturopathy, and North American Indian herbology.

www.blackherbals.com/science_of_african_biochemistry.htm

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Mission Statement

Our aim at **The African Traditional Herbal Research Clinic** is to propagate and promote the awareness in Afrikan peoples at home and abroad of their health, biodiversity, history and cultural richness. We gather pertinent information on these issues and disseminate these freely to our people in Uganda, the rest of the continent, and anywhere in the Diaspora where Afrikans are located.... One of the main ingredients for increasing poverty, sickness, exploitation and domination is ignorance of one's self, and the environment in which we live. Knowledge is power and the forces that control our lives don't want to lose control, so they won't stop at anything to keep certain knowledge from the people. Therefore, we are expecting a fight and opposition to our mission. However, we will endeavor to carry forward this work in *grace and perfect ways*.

“Where there is no culture, there is no indigenous knowledge. Where there is no indigenous knowledge, there is no history. Where there is no history, there is no science or technology. The existing nature is made by our past. Let us protect and conserve our indigenous knowledge.”

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CALENDAR OF EVENTS

SPECIAL EVENT: CLINIC OPENING

PLACE: AFRIKAN TRADITIONAL HERBAL RESEARCH CLINIC

Afrikan Traditional Herbal Research Clinic
1175A Mukalazi Road, P.O. Box 29974
Bukoto, Kampala, Uganda East Africa
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ADDRESS CORRECTION REQUESTED

Herb of the Month

Finger Millet

Eleusine coracana L

Common Name: African millet, koracan, ragi (India), wimbi (Swahili), bulo (Uganda) and telebun (Sudan)

Milletts have been important staples in the semi-arid tropics of Africa and Asia for centuries. These crops are still the principal sources of energy, protein, vitamins and minerals for millions of the poorest people in these regions. Milletts grow in harsh environments where other crops grow or yield poorly. They are grown with limited water resources by a multitude of small farmers in many countries, usually without the application of fertilizers or other inputs. Consumed by disadvantaged groups, they are often referred to as "coarse grain" or "poor people's crops".

It is an important staple food in parts of eastern and central Africa and India. It is the principal cereal grain in northern and parts of western Uganda and northeastern Zambia. The grains are also malted for making beer. Finger millet can be stored for long periods without insect damage and thus it can be important during famine. It is believed that Uganda or a neighbouring region is the centre of origin of *E. coracana*, and it was introduced to India at a very early date, probably over 3,000 years ago. Though finger millet is reported to have reached Europe at about the commencement of the Christian era, its utilization is restricted mostly to eastern Africa and India.

Finger millet is tasty, with a mildly sweet, nut-like flavor and contains a myriad of beneficial nutrients. It is nearly 15% protein, contains high amounts of fiber, Bcomplex vitamins including niacin, thiamin, and riboflavin, the essential amino acid methionine, lecithin, and some vitamin E. It is particularly high in the minerals calcium, iron, magnesium, phosphorous, and potassium. The seeds are also rich in phytochemicals, including Phytic acid, believed to lower cholesterol, and Phytate, which is associated with reduced cancer.

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