

Your First Steps To Anti-Aging

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Your First Steps To Anti-Aging

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by

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Your Quest For Anti-Aging Ends Here !

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Your Quest For A Perfect Body Ends Here !

Complementary to Mainstream Medicine

The treatments we are going to discuss today are complementary to mainstream medical treatments and serve as both Pre or Post treatment procedures to help enhance and maintain for extended periods the good effects of surgical and other invasive procedures that form a part of mainstream medicine.

What is Aging?

- Overall deterioration in the appearance of the body is observed as aging.
- This is actually because of the aging of organs inside the body, which can be verified by studying the change in their Pathological Profile, during the life of a person.

If Aging Is A Disease....

***We need a
Pathology
to detect Aging***

To Prove Aging Is A Disease....

- We will need to evolve a Pathology to detect Aging
- The basis of Anti-Aging Pathology will be to use the present **Standard Reference Ranges** to derive:
Optimum Values
- A foundation of these **Optimum Values** will help us evolve a subject called:
Anti-Aging Pathology.

First 2 Steps To True Anti-Aging

1) Detoxification

2) Rejuvenation

Detoxification

Of Main Excretory Organs like:

Colon

Kidneys

Lungs

Skin

**(the supporting organ Liver
and Blood)**

Detoxification Will Prevent:

- **Constipation**
- **Colon Polyps & Diverticulosis**
- **Colorectal Cancer**
- **High Serum Uric Acid / Gout**
- **Calcium Oxalate Crystals in Urine**
- **Kidney Stones / Polycystic Kidneys**
- **Allergies**
- **Fatty & Enlarged Liver - Hepatotoxicity**
- **Cirrhosis of Liver etc.**

To give an example, let us take 3 commonly used parameters Creatinine, Blood Urea Nitrogen (BUN) and Serum Uric Acid to evaluate the functioning of the Kidneys.

Renal Function Tests	Standard Reference Range & Units
Serum Creatinine	0.5 to 1.5 mg/dL
Blood Urea Nitrogen (BUN)	4.5 to 21.0 mg/dL
Serum Uric Acid	3.6 to 8.2 mg/dL

Table 1 – Std. Ref. Ranges for Renal Function

Anti-Aging Pathology

Defining Some Optimum Values

Renal Function Tests	Optimum Value & Units	Standard Reference Range	Remarks
Serum Creatinine	0.8 mg/dL	0.5 to 1.5 mg/dL	Helps eliminate Toxins through Kidneys.
Blood Urea Nitrogen (BUN)	12.0 mg/dL	4.5 to 21.0 mg/dL	To prevent Kidney failure / disease. Helps reduce skin discoloration.
Serum Uric Acid	* 4.0 to 5.0 mg/dL	3.6 to 8.2 mg/dL	To help reduce aches and joint pain.

*** Depends upon Daily Protein Intake.**

RDA 1.0 g / Kg body weight ≈ 1.75 oz. for 110 lbs or 2.25 oz. for 170 lbs

Table 2 - Sample of some Optimum Values for Perfect Body

Clinical Studies – Preventing CRF

Patient: Female, Age: 39, Height: 5ft 3 in., Weight: 163.6 lb (74.36 Kg.), Fat = 42.5% (++) , BP = 107 / 71, Pulse = 67, Diet: Meat Eater (Ref: BD)			
Renal Profile	# Std. Ref. Range	* 10/12/2007	** 12/03/2007
Blood Urea Nitrogen (BUN)	4.5 to 21.0 mg/dL	17.0 mg/dL	11.0 mg/dL
Serum Uric Acid	3.6 to 8.2 mg/dL	4.3 mg/dL	4.0 mg/dL
Creatinine	0.5 to 1.5 mg/dL	1.0 mg/dL	0.6 mg/dL
Serum Total Proteins	6.4 to 8.3 g/dL	8.70 g/dL	7.6 g/dL
Serum Albumin	3.4 to 4.8 g/dL	5.4 g/dL	4.9 g/dL
# Correlate with Clinical Symptoms			
Note: 8 weeks Detoxification program was started on 15th of October 2007			
* Prior to starting Detoxification.			
** After 7 weeks of Whole Body Detoxification			

Table 3 - Case Study No. 1(A) – Kidney Detoxification

Clinical Study – Reducing Uric Acid / Creatinine

Patient: Male, Age: 40, Height: 5ft 6 in., Weight: 170.0 lbs. (77.272 Kg.), Fat = 26.7% (++) BP = 153 / 97, Pulse = 98, BPs = 174 / 99 Pulse = 87 Diet: Vegetarian (Low Protein) (Ref: DP)				
Renal Profile (Std. Ref. Range)	* 03/24/2009	** 04/22/2009	*** 06/24/2009	**** 09/01/2009
Serum Uric Acid (2.1 to 7.8 mg/dL)	7.2 mg/dL	6.5 mg/dL	4.8 mg/dL	6.8 mg/dL
Creatinine (0.5 to 1.5 mg/dL)	1.2 mg/dL	1.2 mg/dL	1.2 mg/dL	1.0 mg/dL ↓
Allopurinol	100 mg	100 mg	100 mg	100 mg
Paracetamol 500mg	X 2	X 2	X 2 on and off	Nil for last 8 weeks
Standard 8 Weeks Detoxification & Rejuvenation Program		Began on 04/04/2009	Special Kidney Detoxification	Special Kidney Detoxification
Herbal Teas for Kidney Detoxification (2 Types)		2 cups per day	4 cups per day	3 cups per day
Special Vitamin C (With Neutral pH)	Nil	Nil	500 mg X 2 from 07/10/2009	500 mg X 2
Serum Uric Acid 10.4 mg/dL on 07/29/2005 when Allopurinol 100 mg once a day and Paracetamol X2 day was started. Left Kidney is seen in Ectopic location in left illiac fossa and is malrotated. Normal high velocity low impedance flow in main renal artery. Patient only on Carbohydrate diet.				
Note: 8 weeks Detoxification program was started on 04 th of April 2009.				
* Prior to starting Detoxification. Condition is pre Gout stage with serious walking difficulty.				
***After 11 weeks of Whole Body Detoxification with extended Kidney Detoxification using Herbal Supplements + Teas				
**** After 21 weeks of Kidney Detoxification. Patient on a restricted diet with 0.3 oz. (10 grams) max. veg. proteins / day. Weight reduced to 157.6 lbs. (71.636 Kg) and Body Fat reduced to 22.4 % (+). A drop of 4.3%.				

Table 4 - Case Study No. 2(A) - Kidney Detoxification

Optimum Values After Liver Detoxification

Liver Function Tests (LFT)	Optimum Value & Units	Std. Ref. Range & Units	Remarks
Serum Bilirubin (Total)	0.8 mg/dL	up to 1.5 mg/dL	For improved Liver Function and Toxin Neutralization
SGPT (ALT) Serum	20 to 24 U/L	0 to 48 U/L	
SGOT (AST) Serum	15 to 20 U/L	5 to 42 U/L	
GGPT (Gamma GT) Serum	20 to 30 U/L	12 to 64 U/L	

Table 5 - Sample of some Optimum Values after Liver Detoxification

Clinical Studies

Patient: Male, Age: 25 years, Height: 6ft., Weight: 162.4 lb (73.8 Kg.), Diet: Vegetarian (Ref: TH)			
	* 02/28/2003	** 03/24/2003	*** 05/23/2003
Total Bilirubin	1.9 mg/dL	1.2 mg/dL	0.9 mg/dL
Direct Bilirubin	1.2 mg/dL	0.7 mg/dL	0.6 mg/dL
Indirect Bilirubin	0.7 mg/dL	0.5 mg/dL	0.3 mg/dL
SGPT (ALT)	28 IU/L	12 IU/L	13 IU/L
SGOT (AST)	20 IU/L	-	-
GGPT (Gamma GT)	18 IU/L	-	-
* Prior to Herbal Liver Detoxification			
** After 4 weeks of Herbal Liver Detoxification			
*** After 8 weeks of Herbal Liver Detoxification			

Table 6 - Case Study No. 3

Clinical Studies

Patient: Female, Age: 38, Height: 5ft 2 in., Weight: 152.6 lb/69.36 Kg. Fat = 39% (++) , BP = 94/69, Pulse = 72, Diet: Meat Eater (Ref: MKh)		
Liver Function Tests	* 04/19/2003	** 04/23/2005
Total Bilirubin	0.8 mg/dL	0.3 mg/dL
Direct Bilirubin	0.1 mg/dL	0.1 mg/dL
Indirect Bilirubin	0.7 mg/dL	0.2 mg/dL
SGPT (ALT)	52 IU/L	20 IU/L
SGOT (AST)	24 IU/L	22 IU/L
GGTP (Gamma GT)	28 IU/L	12 IU/L
Note: 2nd round of 8 Weeks Herbal Detoxification was started in March 2005		
* Prior to 1st round of Detoxification in April 2003		
** After 2nd round of 8 weeks Whole Body Detoxification Program.		

Table 7 - Case Study No. 4

Cystatin - C

Cystatin C (cysteine protease inhibitor) is a serum protein that is filtered out of the blood by the kidneys and that serves as a measure of kidney function. An increased serum Cystatin C corresponds to a decreased GFR (glomerular filtration rate) and hence to kidney dysfunction.

The Cystatin C test helps identify kidney dysfunction at earlier stages, before symptoms appear and Creatinine levels rise.

It also helps predict impending cardiovascular problems such as heart attack, stroke etc, in the elderly.

Reference Range: (Random Blood Sample)

Male & Female: 0.53 to 0.95 mg/L

Optimum Value:

Male & Female: ≤ 0.7 mg/L

Clinical Studies – Preventing CRF

Patient: Female, Age: 39, Height: 5ft 3 in., Weight: 163.6 lbs. (74.36 Kg.), Fat = 42.5% (++), BP = 107 / 71, Pulse = 67, Diet: Meat Eater (Ref: BD)				
Renal Profile	* 10/12/2007	# Std. Ref. Range	** 12/03/2007	**** 04/18/2008
Blood Urea Nitrogen (BUN)	17.0 mg/dL	7 to 18.7 mg/dL	11.0 mg/dL	12 mg/dL
Serum Uric Acid	4.3 mg/dL	2.6 to 6.0 mg/dL	4.0 mg/dL	3.5 mg/dL
Creatinine	1.0 mg/dL	0.6 to 1.1 mg/dL	0.6 mg/dL	0.75 mg/dL
Serum Total Proteins	8.70 g/dL	6.4 to 8.3 g/dL	7.6 g/dL	7.75 g/dL
Serum Albumin	5.4 g/dL	3.4 to 4.8 g/dL	4.9 g/dL	5.07 g/dL
Serum Globulin	3.3 g/dL	1.8 to 3.6 gm%	2.7 g/dL	2.68 g/dL
A/G Ratio	1.64	1.1 to 2.2	1.81	1.89
Cystatin C	1.02 mg/L ↑	0.53 to 0.95 mg/L	0.77 mg/L ↓	0.71 mg/L ↓
C Reactive Protein	2.71 mg/L	Up to 3.0 mg/L	1.95 mg/L	0.93 mg/L
Daily Protein Intake RDA = 1 gram / Kg Body Weight	Unrestricted	Approximately 2.0 oz. / 60 g / day	10 g / day Vegetarian Source	Unrestricted (Avg. 35 g / day)
# Correlate with Clinical Symptoms				
Note: 8 weeks Detoxification program was started on 15 th of October 2007				
* Prior to starting Detoxification. When the program started she was put on restricted protein (only vegetarian) diet of only 10 gms. per day				
**After 7 weeks of Whole Body Detoxification Her protein (mixed) intake was increased to 25gms /day after noting the improvement in renal function				
**** After 24 weeks when there were no restrictions imposed to her protein intake for the last 16 weeks.				

Table 8 - Case Study No. 1(B) – Kidney Detoxification

Clinical Study – Lowering Hypertension

Patient: Male, Age: 40, Height: 5ft 6 in., Weight: 170.0 lbs. (77.272 Kg.), Fat = 26.7% (++) BP = 153 / 97, Pulse = 98, BPs = 174 / 99 Pulse = 87 Diet: Vegetarian (Low Protein) (Ref: DP)				
Renal Profile (Std. Ref. Range)	* 03/24/2009	** 04/22/2009	*** 06/24/2009	**** 09/01/2009
Serum Uric Acid (2.1 to 7.8 mg/dL)	7.2 mg/dL	6.5 mg/dL	4.8 mg/dL	6.8 mg/dL
Allopurinol	100 mg	100 mg	100 mg	100 mg
Paracetamol 500mg	X 2	X 2	X 2 on and off	Nil for 8 weeks
Amlodipine	5.0 mg		5.0 mg	Nil for 4 weeks
Blood Pressure & Heart Rate (P)	153/97 P = 98 ↑	160/100 P = 96 ↑	130/94 P = 80	130/79 P = 78
Blood Pressure + Pulse (Standing)	174/99 P = 87			143/95 P = 89
Heart Rate (Standing)	# P = 87 ↓			P = 89 ↑
Std. 8 Weeks Detox. & Rej. Program		Began on 04/04/09	Sp. Kidney Detox.	Sp. Kidney Detox.
2 Herbal Teas for Kidney Detox.		2 cups per day	4 cups per day	3 cups per day
Special Vitamin C (With Neutral pH)	Nil	Nil	500 mg X 2 from 07/10/2009	500 mg X 2
# Falling Heart Rate on Exercising indicates poor Cardiac Efficiency and a serious Intracellular Magnesium deficiency. High BP not responding to Amlodipine indicates malfunctioning of Kidneys is also a prime cause of Hypertension.				
* Prior to starting Detoxification. Condition is pre Gout stage with serious walking difficulty.				
***After 11 weeks of Whole Body Detoxification with extended Kidney Detoxification using Herbal Supplements + Teas				
**** After 21 weeks of Kidney Detoxification. Weight = 157.6 lbs. (71.636 Kg), Fat reduced to 22.4% (+). Drop of 4.3%.				

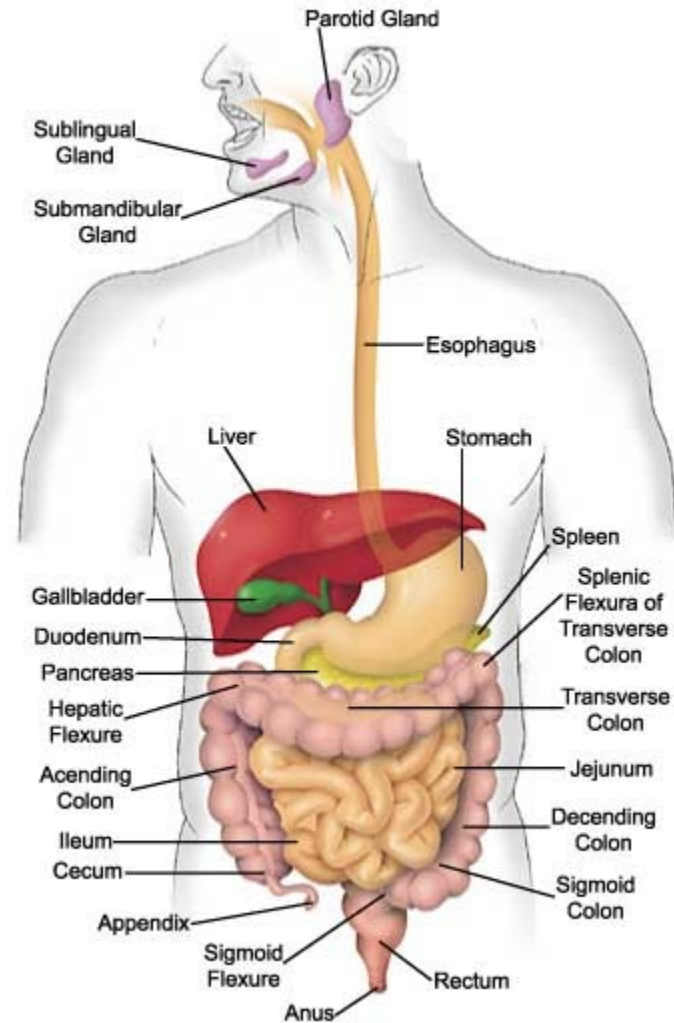
Table 9 - Case Study No. 2(B) - Kidney Detoxification

Clinical Studies

Female, Age: 56 yrs, Height: 5ft., Weight: 138.4 lbs. / 62.9 Kg., Fat = 37% (+), Diet: Meat Eater (Ref: BJ)					
	* 09/13/2002	** 09/16/2003	*** 4/11/2004	# 8/6/2004	##02/23/2005
Total Bilirubin	0.56 mg/dL	0.25 mg/dL	0.40 mg/dL	0.29 mg/dL	0.30 mg/dL
Direct Bilirubin	0.23 mg/dL	0.14 mg/dL	0.14 mg/dL	0.12 mg/dL	0.17 mg/dL
Indirect Bilirubin	0.33 mg/dL	0.11 mg/dL	0.26 mg/dL	0.17 mg/dL	0.13 mg/dL
SGPT (ALT)	42.37 IU/L	23.29 IU/L	21.08 IU/L	39.83 IU/L	22.0 IU/L
SGOT (AST)	29.92 IU/L	22.10 IU/L	24.30 IU/L	19.88 IU/L	21.0 IU/L
GGTP (Gamma GT)	42.00 IU/L	27.30 IU/L	41.73 IU/L	52.30 IU/L	27.0 IU/L
TSH Ultrasensitive	1.62 µIU/ml		2.97 µIU/ml		2.01 µIU/ml
TSH = 23.0 µIU/ml in October 2001. Eltroxin / Synthroid / Thyroid Hormone not administered to Patient.					
* Twelve months after first Detoxification					
** After 8 weeks of Whole Body Detoxification					
*** After 8 weeks of Detoxification but with substance abuse resulting in higher GGTP (Gamma GT)					
# Without Detoxification for 1 year but with substance abuse resulting in elevated GGTP (Gamma GT)					
## After 8 weeks of Whole Body Detoxification done annually.					
TSH = 2.27 µIU/ml on Dec 02, 2008 - six years later.					

Table 10 - Case Study No. 5

Rejuvenation of the Digestive Tract



Gastrin Hormone Levels

Gastrin	Standard Reference Range	Optimum Value
Fasting	Up to 90 pg/ml	≤ 15 pg/ ml
Post Prandial 2 hours after meal	Up to 250 pg/ml	≤ 25 pg/ml

Gastrin is inversely proportional to HCl Levels

Table 11 – Optimum Gastrin Levels

Gastric Digestion

- Improper digestion due to poor HCl will result in poor absorption of Nutrition from the food we eat and causes rapid Aging.
- Will also result in Anemia as adequate Gastric Acids are required for absorption of Iron from the food we eat.
- Due to over cultivation of land and depleted soil conditions, iron deficiency is no longer a female dominated disease. Males are also affected especially those on Asprin for “good” cardiac health.
- CBC is no longer sufficient to diagnose Anemia. Check Serum Iron and Ferritin levels along with Hemoglobin. Do an Anemia Profile in order to arrive at more accurate diagnosis of Chronic or Acute Anemia. Treat till Ferritin levels rise to Optimum levels.

Hyperacidity or Hypoacidity !

- Proton Pump inhibitors Pantaprozole, Omeprazole and the like will rapidly age the body and will make you anemic.
- Antacids containing Bicarbonates and even Calcium Carbonate Supplements (natural or otherwise) will neutralize the HCl in the stomach
- Hyperacidity may actually be Hypoacidity in majority of the cases !

Clinical Study – Gastric Acids

Tests (Optimum Values)	Female - I 37 yrs. Meat Eater (Ref. NP)	Female - II 44 yrs. Veg (Ref. PR)	Female - III 43 yrs. Meat Eater (Ref. RK)
Hemoglobin (14.5 g/dL)	12.2	12.6	13.1
Serum Iron (100 µg/dL)	76.00	62.00	141.00
Ferritin (150 ng/mL)	7.21	119.87	39.20
Gastrin (Fast) ≤ 15 pg/ml	95.50	27.10	43.40
Gastrin (PP) ≤ 25 pg/ml	124.00	34.30	196.00
Sodium (142 µmol/L)	138.00	136.00	136.00
Potassium (4.7 µmol/L)	4.2	4.20	4.70
Chlorides (105 µmol/L)	97.00	101.00	107.00
Proton Pump Inhibitors + H ₂ - Receptor Antagonist	Pantaprozole 40 mg	Nil	Ranitidine 150mg (sos)

Table 12 – Hyperacidity or Hypoacidity Case Study No. 6

Digestion

- Sea Salt (mainly NaCl) required in diet.
- NaCl is a rich source of Chlorine and helps to provide ample raw materials for the body to produce Hydrochloric Acid to aid digestion. Where else will your body get large amounts of Chlorine from?
- Sea Salt / Table salt also provides prophylactic doses of Iodine to prevent Hypothyroidism and formation of Goiters.

Pancreatic Enzymes

Pancreatic Enzymes	Standard Reference Range	Optimum Value
Lipase	8 to 78 U/L	≥ 50 U/L
Amylase	25-125 U/L	≥ 90 U/L

Table 13 – Optimum Pancreatic Levels

Natural Body Sculpting

Ms. Professional Model / Actress

Female, Age: 24 years, Height: 5ft. 5 in. Weight: 114.4 lb (52 Kg)

	2/15/2007	3/20/2007	4/5/2007	5/15/2007	10/9/2007
Breast	34.0"	34.75"	34.75"	34.5"	34.5"
Waist - I (navel)	27.0"	26.0"	26.0"	27.5"	26.75"
Waist - II (2" ↓ navel)	34.0"	32.0"	29.0"	29.0"	29.75"
Hips	36.5"	36.0"	35.5"	36.0"	36.0"
Full Thigh	22.0"	21.5"	21.5"	22.0"	22.0"
Mid Thigh	19.0"	19.25"	19.5"	19.25"	19.0"
Mid Arm	9.25"	9.5"	9.5"	9.5"	9.5"
Weight	52.818 Kg	52.00 Kg	52.00 Kg	53.454 Kg	52.272 Kg
Fat	18.8% (-)	18.0% (-)	18.0% (-)	19.4% (-)	15.3% (-)
Hydration	56.10%	56.60%	56.40%	55.70%	58.50%
Bone Mass	4.8 lbs	4.8 lbs	4.8 lbs	4.8 lbs	5.0 lbs
Metabolic Age	12 years	12 years	12 years	12 years	12 years

Table 14 - Case Study No. 7

Abdominal Distention

- **Improper Digestion**
 - a) Gastric - Acids
 - b) Liver - Bile
 - c) Pancreatic – Enzymes
- **Enlarged and / or Fatty Liver**
- **Chronic Constipation**
- ***Cannot be corrected by any amount of Gym Work or Surgical Intervention***

Detoxification & Rejuvenation Benefits

- Healthy Glow on your face
- Look and Feel years younger than your physical age
- Experience higher Energy levels and improve mental clarity, memory retention and recall
- Lighten complexion by a few shades
- Clear Skin Pigmentation – dark spots

Cleansing Excretory Organs like the Colon and Kidneys

- Dark patches / Skin Discoloration removed
- Severity of pimples / Acne can be reduced
- Constipation can be eliminated
- Complete Bowel evacuation each day
- Improved Serum Uric Acid resulting in reduced Body Aches and Pains / Risk of Gout
- Lowering of Blood Pressure / Heart Rate

Anti-Aging Medicine

A Valid Medical Science

- Proving anti-aging of the organs through before and after Pathology has for the first time has proved the reversal of the Aging Process beyond all doubt and has firmly established Anti-Aging Medicine as a Valid Medical Science.
- Last traces of controversy surrounding Toxins, is removed once and for all, by showing change in Pathology after Detoxification (removal of toxins from the body).

Our Website

For more information go to:

www.space-age.com

Detoxification – Myth or Reality? A Pathological Evaluation

For the:

Abstract

Complete Text of the paper and

Frequently asked Questions (FAQs)

Visit our website:

www.space-age.com/detox.html

Standard References Ranges in Pathology Reports are Antiquated

Modern Method of Reading & Analyzing Pathology Reports

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**(Article appeared in
My Doctor Magazine February 2006 issue)**

Complementary to Mainstream Medicine

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Website Co-ordinates

- For the complete text of this presentation please visit:
 - <http://www.space-age.com/AntiagingSanJose.pdf>
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