



[MargieUnfollow](#)

Get calcium from your food



[Calcium for strong bones: are supplements better than food?](#) [food4healthybones.com](#)

One question I often hear from my clients is “How much calcium do I need to take every day for my bones?” The hidden assumption in that question is this: “you have to take a supplement to get enough calcium for your bones.” That se

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[Jana Pendragon Bowdish](#), [Connie Laux](#) like this

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[Pramod Vora](#) • Calcium supplements alone do not really help in bone building. Many other nutritional ingredients are required to improve bone density and also reduce the risk of osteoporosis. When we use the words “reduce the risk of osteoporosis” we actually mean “reduce the risk of fracture”. For more info please go to:

<http://www.space-age.com/osteoporosis.html>

Gone are the days, when Calcium deficiency used to cause Osteoporosis / Fractures. Today, we need to preach that Magnesium deficiency causes Osteoporosis and Fractures.

There are three articles I would like to point out which bring out the latest in calcium, osteoporosis and risk of fractures.

http://www.space-age.com/calcium_osteoporosis.pdf .

<http://www.space-age.com/Osteoporosis2007.pdf> .

<http://www.space-age.com/AmIDeficientInMagnesium.pdf>

The whole concept of Bone Mineral Density (BMD) Test to check for risk of osteoporosis needs a revision, since risk of fracture is reduced when bones are flexible and not brittle. Magnesium helps to make bone flexible and actually reduce the risk of fractures. The present BMD Test does not actually test for bone flexibility. It tests for density which could be of brittle bones.

A Case Study done highlights the use of Magnesium to increase Bone Density:

<http://www.space-age.com/BMD01.pdf>

Calcium and magnesium are antagonist. So taking large doses of calcium can prevent the absorption of magnesium which is required to make bones flexible.

The other thing to be noted is that serum calcium levels automatically rise when you take magnesium supplements in the right doses. 60% of magnesium right away goes into bone building.

Blessings,

Pramod Vora

spaceage2008@space-age.com

<http://facebook.com/pramod.vora100> .

<http://www.facebook.com/pages/SpaceAge-Anti-Aging-Center/154567131289336>

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3



[Follow Sandu](#)

[Sandu C.](#) • Good points Pramod. I'd also add "weights lifting" exercise for strong bones... ;)
(and less dairy products!)

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[MargieUnfollow](#)

[Margie King, Health Coach](#) • Thanks, Pramod. I agree that flexibility is key to avoiding fractures and more calcium is definitely not the whole answer for strong bones.

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[Follow Lori](#)

[Lori Kelch](#) • The bone stock mentioned contains some solid amounts of vitamin K2, as do pasture fed egg yolks, cultured dairy, and fermented vegetables. K2 is essential for the appropriate deposition of calcium. Unfortunately, as an essential nutrient it's still under the radar.

<http://www.smart-publications.com/articles/vitamin-k-keeps-calcium-out-of-your-arteries-and-in-your-bones/>

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[Michael J. Unfollow](#)

[Michael J. Gonzalez](#) • I believe in balancing nutrients and synergistic formulations to achieve better results.

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[Margie Unfollow](#)

[Margie King, Health Coach](#) • Thanks so much for that great and very comprehensive article on vitamin K, Lori. So important with all the new studies showing that calcium will calcify organs and lead to heart disease when it's not properly directed into the bones. <http://www.examiner.com/article/how-much-calcium-is-too-much>

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[Margie Unfollow](#)

[Margie King, Health Coach](#) • I agree, Michael. Balance is everything. Too much of a good thing is a bad thing.

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[Pramod Vora](#) • Calcium supplements taken for prolonged periods under the belief that it good for your bones, especially in the absence of other supporting nutrients, principally magnesium, soon reaches a point of toxicity in the human body. It then deposits in the body as kidney stones, heel spurs, osteoarthritis, calcified arteries and heart valves, osteophytes, etc. The trick to removing these deposits is to first stop taking calcium and begin taking therapeutic doses of magnesium in the absence of dairy products, which are rich in calcium. The presence of calcium oxalate crystals in your urine report is the first indication that you are putting in too much calcium into your body and poisoning it slowly but surely.

Most calcium supplements are sold with vitamin D. Excessive vitamin D is also highly toxic and hard to quickly remove, once the level exceed the normal limits. I have seen many cases of patients suffering from vitamin D poisoning and becoming totally non-functional.

Blessings,

Pramod Vora

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[Pramod Vora](#) • Thanks Margie for the Like.
Your encouragement keeps me working hard to write better.
Blessings,
Pramod Vora
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[Follow Ronald](#)

[Ronald V.](#) • If you want stronger bones, then stop drinking FLUORIDATED TAP-WATER , stop using FLUORIDATED TOOTHPASTA and consuming "food" that has been artificially fluoridated

Watch this (pdf) list and Wake up..
You are being massively poisoned with approval of your own government!
"USDA National Fluoride Database of Selected Beverages and Foods"
[\[http://www.nal.usda.gov/fnic/foodcomp/Data/Fluoride/fluoride.pdf\]](http://www.nal.usda.gov/fnic/foodcomp/Data/Fluoride/fluoride.pdf)

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[Michael J. Unfollow](#)

[Michael J. Gonzalez](#) • Pramod brings into the discussion very important issues! As do Ron Marge and Lori! Great discussion guys! Thanks Marge for this Forum.

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[Pramod Vora](#) • Thanks Prof. Michael J. Gonzalez for your encouragement and validation of what I have been telling all my patient for the last over one decade.

My first article on Calcium and Osteoporosis was written in November 2002.

Together we need to join forces to change the course of medicine for the improvement of the quality of life on this planet. Let the truth be told for spreading real health care to the masses.

Blessings,
Pramod Vora

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[MargieUnfollow](#)

[Margie King, Health Coach](#) • Thanks to everyone for sharing your knowledge - this subject is so important and little understood by most people.

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[Ronald V.](#) • @Margie:".....this subject is so important and little understood by most people."

As long as they stay tuned to government agencies for their own health info, yes you are right :-)

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[RupshreeUnfollow](#)

[Rupshree Badwaik](#) • According to a 2007 study from the University of Washington in St. Louis, it may have to do with all the other great things we get from natural foods besides just calcium.

For instance, we can't get calcium from our intestines to our bones without vitamin D. We can't absorb it from our blood to our bones without magnesium. When we eat whole foods, we're taking in other vitamins and minerals that we need (there are 20!) for strong bones.

Researchers also explained that women who get their calcium from food have stronger bones because our bodies can only absorb about 35 percent of the calcium in most supplements.

Some forms of calcium supplements are worse than others. For instance, calcium carbonate should be taken with a meal so stomach acid can break it down to be absorbed. If you take calcium carbonate between meals or on an empty stomach, you won't be able to absorb as much. One of the best and most frequently overlooked dietary sources of calcium are the bones and shells of fish, fowl and livestock. Try sardines, anchovies, soft-shell crabs and oysters, and don't forget to make a rich stock from chicken or beef bones.

Dark green leafy vegetables are another good source but some are better than others when it comes to calcium absorption. Spinach and Swiss chard contain oxalates which bind to calcium and prevent our bodies from absorbing it. Ragi, Milk n milk products, Rajgeera are other good sources of calcium, but vitamin D is also imp for calcium absorption .

Luckily there are many greens with low levels of oxalates that provide a good source of

calcium. They include kale, collards, bok choy, mustard greens and dandelion greens.

Calcium in your food gives you more bang for your buck, so to speak, because your body can use it more easily.

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[Pramod Vora](#) • A lot of what Ms. Rupshree has written belongs to the old school of thought on calcium.

Only prophylactic doses of minerals including calcium can be administered by inorganic compounds including calcium carbonate. Carbonates neutralize hydrochloric acid in the stomach and interfere with digestion which is the foundation of nutrition. If you do need therapeutic doses of minerals they should be organic in nature like glyconates, ascorbates, ortotates, citrates, etc.

Inorganic compounds are very poorly absorbed and retained in the body. Inorganic compounds like carbonates or sulfates only temporarily alter serum levels and are thereafter quickly excreted from the human body. So long term retention is more important than just absorption. For reversal of osteoporosis you need therapeutic doses of organic minerals (not prophylactic doses) which are not only absorbed but also retained for long periods of time. Only then can you improve bone health.

Calcium is normally required to be replenished as we age. As we age, the hydrochloric acid levels in our body also begin to decrease. So use of carbonates (whether from chemical or natural sources like oyster shells, etc.) can only lower gastric acids and reduce nutrition to the body. This is known as “Gastrointestinal Intolerance to Calcium”. To get around this, one can use organic compounds of calcium with good retention properties in the body.

I have explained all this in greater detail in my article written way back in November 2002. Wow a decade has passed so quickly. The link once again is:

http://www.space-age.com/calcium_osteoporosis.pdf

The information in this article was once again updated in 2007:

<http://www.space-age.com/Osteoporosis2007.pdf>

Incidentally, the NIH reached a consensus on calcium in June 1994 and on osteoporosis in March 2000 basically recommending the use of 1200 mg of calcium for adults.

The links are:

<http://consensus.nih.gov/1994/1994OptimalCalcium097html.htm>

and

<http://consensus.nih.gov/2000/2000Osteoporosis111html.htm>

This consensus was signed by stalwarts of medicine, nutrition and Ivy League colleges – some with Ph.D.s and post doctoral studies in medicine and nutrition.

This consensus has been withdrawn long back. There is a remark in bold red on the above links saying:

“This statement is more than five years old and is provided solely for historical purposes. Due to the cumulative nature of medical research, new knowledge has inevitably accumulated in this subject area in the time since the statement was initially prepared. Thus some of the material is likely to be out of date, and at worst simply wrong.”

I am sure many of our readers are not aware of this change in thinking and many of our health practitioners worldwide are blindly prescribing calcium supplements containing carbonates for osteoporosis to the aged.

Hence, the case study given by me on increasing bone density without calcium supplements on a patient who had progressively reached osteoporosis even though she was very regularly taking calcium supplements (calcium carbonate from oyster shells) for 3 years prior to coming to our clinic makes sense:

<http://www.space-age.com/BMD01.pdf>

Today, magnesium deficiency is the leading cause of osteoporosis. Magnesium enters the lattice structure of bone to not only help increase bone density, but to also help increase bone flexibility to prevent fractures (which is what osteoporosis is all about).

Relying on calcium from diet to serve as therapeutic doses fit to reverse osteoporosis is a bad idea. With the over cultivation of land and the use of synthetic fertilizers the nutritional value of the produce and the food we eat has fallen to less than 25% of what it was just 50 years back. Once we use the right supplements to correct bone health, can we then rely on food with its poor nutritional value today to serve as purely prophylactic doses....

29 days ago

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[Pramod Vora](#) • Above post is continued further due to space limitations:

A paper “Nutritional Farming as Opposed to Organic Farming” was read by me at an international conference in Alternative Medicine way back in 2006 explains all this.

Copy of this paper and its Power Point Presentation can be downloaded from:

<http://www.space-age.com/conference-tnau.html>

This paper explains why the world needs to leap frog from organic farming to nutritional farming and why organic farming cannot really help increase the nutritional value of the produce. This problem is as big if not bigger than “global warming” as it affects billions of people worldwide.

I hope, this along with an in depth reading of the links to the various articles given in this and my earlier posts will help serve as an update to the subject of calcium and bone health.

Please e-mail me for ideas on how this information can be made “viral” to reach the masses.

Blessings,

Pramod Vora

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[Pramod Vora](#) • Hi Margie,

Finally, the US Government agencies are catching up with what I have been telling

doctors for over one decade:

"Healthy Women Advised Not to Take Calcium and Vitamin D to Prevent Fractures"

Please check the write up in the New York Times as to the finding of the United States Prevention Task Force appointed by the Federal Department of Health and Human Services:

http://www.nytimes.com/2012/06/13/health/calcium-and-vitamin-d-ineffective-for-fractures-us-preventive-services-task-force-says.html?_r=1

This report was released on June 12th. Trust you like what the world is slowly finding out.

The truth has to ultimately surface. Still it is just half the information. Soon they will tell the rest of the story.

Let me know if you want to read the complete script of the findings I can e-mail it to you in pdf format.

More truths will come out soon. I am working on it. Wish me Godspeed.

Blessings,

Pramod Vora

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[MargieUnfollow](#)

[Margie King, Health Coach](#) • Thanks, Pramod. I hadn't seen this report. So interesting.

Most doctors

tell patients that you have to supplement because you can't (won't) get enough from your diet. I wonder if this will change anything.

Margie King

Holistic Health Coach & Copywriter

Because Food Changes Everything

* (Cell)

Check out my websites: www.HolisticGhost.com <www.HolisticGhost.com>

www.NourishingMenopause.com
<<http://www.nourishingmenopause.com/>>

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[Follow Yves](#)

[Yves Eljas](#) • Hi, Pramod

You bring really interesting material..

Could help me understand how:

"Calcium and magnesium are antagonist."

But " serum calcium levels automatically rise when you take magnesium supplements in the right doses..."

Thanks

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[Pramod Vora](#) • Hi Yves,

Calcium and magnesium being antagonist has been observed in nutrition and is standard information known for many years. This is how the body treats these two minerals. Too much calcium will result in magnesium being depleted and too much magnesium will result in blocking of absorption of calcium.

Again, the inherent intelligence of the body makes the serum calcium levels rise to counteract the rise in the serum magnesium levels. But this does not mean anything conclusive in terms of health of the bones. Raising serum levels of calcium does not necessarily mean that you are increasing bone health. It is just a statement.

May I request Prof. Michael J. Gonzalez, Ph.D., D.Sc. to give his input on these topics.

Blessings,

Pramod Vora

12 days ago

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[Michael J. Unfollow](#)

[Michael J. Gonzalez](#) • I concur with Pramod. Only thing I would add is that the biologic effect of calcium is determined by the amount of ionized calcium, rather than the total calcium. Also

calcium in the blood is regulated by the parathyroid hormone and calcitonin. When calcium levels drop too low, parathyroid hormone production increases to raise them. When calcium levels raise too high, calcitonin slows the release of calcium from the bones to drop them. In hypercalcemia, this hormone balance becomes disrupted and too much calcium is allowed into the blood. Mineral balance is very important to maintain the healthy state.

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[Pramod Vora](#) • There is another possible cause for rise in serum calcium levels when magnesium supplementation is given. This is especially true for patients with a prior history of having taken calcium supplements, in isolation of other supporting nutrients, for prolonged periods or having taken dairy products (two glasses of milk daily and / or yogurt daily) religiously for numerous years long after having reached adulthood. Excess calcium tends to deposit in the soft tissues, form kidney stones, heel spurs, osteophytes, calcified arteries and heart valves, etc.

All this calcium gets gradually released from their "hiding places" and the serum levels begin to rise gradually when magnesium supplementation is started on these patients. This is not a problem, as under the right conditions, the body will utilize this "hidden source calcium" for bone building. I have referred to one case study done in my earlier post where we increased bone mineral density by 39% over a 22 month period by administering magnesium and totally stopping the calcium supplementation which was taken for 3 prior years. The patient was taken from serious osteoporosis to a not so serious osteopenia. The T-Score changed from -3.1 to -1.75 i.e. 43% in a 22 month period. Please refer case study given at:

<http://www.space-age.com/BMD01.pdf>

In my last post I mentioned about the innate intelligence of the body as a possible cause. Let me explain that further. When the body sees magnesium coming in, it automatically steps up the absorption of calcium from the food we eat, in order to maintain the required ratios of these two minerals in the blood chemistry. This is how we also notice an enhanced serum calcium value after starting magnesium therapy. Again like I mentioned this does not in any way mean improved bone health or density or T Score or Z Scores in your Bone Minerals Density (BMD) reports, unless you also take all the other required nutrients in a synergistic manner, to improve bone density and above all bone flexibility. It is bone flexibility alone that will prevent bone fractures, not bone density alone. The bone density tests today fails to measure bone flexibility which is the crux of the matter for fractures.

In today's world, that we live in, where we suffer from calcium toxicity (reflected by the growing number of calcified arteries, and stents and bypass surgeries being performed) magnesium is the solution to not only calcium toxicity, but to reversal of osteoporosis or osteopenia and calcified arteries and heart valves.

Blessings,
Pramod Vora

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[GeoffreyUnfollow](#)

[Geoffrey Douglas](#) • Food is always better.

An elephant gets only 50mg of calcium per day from its diet. This is sufficient to maintain the largest land based mammalian skeleton. It has been shown that 30mg of calcium rich yeast is better absorbed than 300mg of calcium carbonate. The former goes to bone where it is needed; the latter to kidney where it is excreted. The moral – we are not designed to eat chalk! Perhaps someone should tell the pharmaceutical industry and the medical profession?

However, it is a myth that dairy products are a good source of dietary calcium, because a high consumption of animal protein tends to acidify the blood, and calcium is pulled out of bone to buffer this tendency.

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[Pramod Vora](#) • Hi Geoffrey,

Breast milk in humans has only 87.5 mg of calcium in an 8.0 oz. (250 mL) glass. Cow's milk has 250 mg of calcium per 8.0 oz.

The baby grows rapidly even with so little calcium in human breast milk.

The bone mass in adult females is about 5.0 lbs and in males about 7.5 to 8.0 lbs.

One wonders how the NIH reached a consensus in 1994 recommending 1200 mg per day

of calcium to adults.

It is good the USPSTF wants to finally correct this situation. Lets hope for the best.

Blessings,
Pramod Vora

10 days ago

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[Pramod Vora](#) • Hi Geoffrey,

By the way, I forgot to mention that there are only about 1200 grams of calcium in the human body and no more. So if you are able to put 1200 mg or 1.2 grams of calcium daily into the human body you will be able to reach 1200 gram in 1000 days or say three years. The problem with all these NIH doses and now USPSTF doses is they talk about calcium carbonate (chalk) which is not easily absorbed by the body, also poorly retained, and hence has to be excreted. So bad idea to take carbonates as it going to increase load on the kidneys. Better is to use organic compounds of calcium like gluconates, lactates, citrates, etc. They have a far better better rate of absorption and retention in the body. Just some figures.

Does not mean that I am recommending the use of calcium in isolation of other supporting nutrients for increasing bone density or preventing fractures. I also haven't understood why this old standard of calcium carbonates, which was used for prophylactic doses, is still being pursued for use as therapeutic doses for investigation of reversal of osteoporosis and increasing bone density.

Basically, you need just a few milligrams of organic calcium each day to maintain good bone health, provided all other essential nutrients are also present to support bone building. This comes from the diet for most people. Osteoporosis develops when some other cirtical ingredients are missing from the diet or body. This normally is not calcium. We now live in a calcium toxic society with calcified arteries / heart valves, kidney stones, stents and bypass surgeries. The number of people with such problems proves that we have too many undiagnosed cases of calcium toxicity all around us. The great divide between medicine and nutrition has to be brought down like the Berlin wall. Only the consumers can do it by rising to the challenge.

Blessings,
Pramod Vora

9 days ago

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[Follow Kerry](#)

[Kerry Coates](#) • Increasing calcium intake and trying to balance the ratios of Calcium and Magnesium is not the only answer to strong, flexible bones. Recent studies have shown that increasing calcium intake alone did not improve bone calcium density. But something was missing in those tests...

When you were a kid you probably never ate the "yucky white part" of an orange. You probably picked it off of your peeled orange sections and threw it away. That "yucky white part" is called the "mesocarp".

As we all know, calcium is a powder. Your body uses that mesocarp to build collagen which sticks the calcium powder together. Ever had a broken bone that would not heal? Do you have weak bones? Without collagen your bones would turn to dust!

Think of it this way: Have you ever made cement or watched someone mix cement? It starts out as a powder until you add water and then it turns into this strong, hard substance that is so dense you can drive a car over it. Think of the cement dust as the calcium, and think of the water as the collagen...you get the picture.

Read my article:

Eat The Mesocarp Of Citrus Fruits

<http://www.kerrycoates.com/blog/eat-the-mesocarp-of-citrus-fruits/>

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[Pramod Vora](#) • You are still propagating the old school of thought that you only need calcium to build bones. There are many other ingredients like, zinc, boron, manganese, magnesium, vitamin K, progesterone for females, testosterone for males, etc. etc. etc. If any one of these is missing or is not in the right proportions, your body cannot build bones. The NIH withdrew it support for calcium many years back. United States Preventive Services Task Force has come out with a recommendation that calcium is not

required by healthy people for prevention of osteoporosis. All this has been discussed in detail in various posts before and in other posts in the Nutrition Gropu.

I don't understand why you are still harping on calcium.

All around us we see toxicity of calcium, in the form of calcified arteries / heart valves, stents and bypass surgeries, heel spurs, osteophytes, etc. This shows we are a society suffering from calcium toxicity!

So why Kerry are you again taking people back to the stone ages?

Be Enlightened.

Blessings,

Pramod Vora

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Pramod Vora

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[StanUnfollow](#)

[Stan Racansky](#) • Hi Promod,

I am not going to get involved in discussion but one thing I am going to "steal" from one of the post " the great devide between the medicine and nutrition..." for my meeting with local MPP where I want to Start the process to include integrative health professionals in our medical insurance coverage. I believe that use of integrative health professionals will improve health of majority of population and at the same time decese the medical cost.

6 days ago • [Like](#)

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[Pramod Vora](#) • Hi Stan,

You are welcome to "steal" all what you want for the progress of health care and mankind. Thank you for liking the words I use in communicating with people and motivating them to go in the right direction. The "great divide" was probably first visible when Nobel Laureate Linus Pauling faced opposition (about 40 years back) to the use of vitamin C for the treatment of diseases. It is really unfortunate that even today MDs world wide become MDs without the need to study a single textbook on nutrition. One would expect this to change. But it is still not happening. Medicine today is totally drug based. There is no trace of preventive medicine there. That is the sad part. Allopathy is good science that can save lives. But what about preventive health care? Like I wrote once before, an ounce of prevention is worth more than a pound of cure. There is another way of saying it: Why teach people only how to put out fires, when you can also teach them how to not start fires. Once the knowledge of not starting fires (preventive health care) is out there, the need to call the fire brigade (allopathy) will not arise too frequently. This will contribute to better health care, lower medical insurance costs and better quality of life for the masses. May I request Prof. Michael J. Gonzalez, Ph.D., D.Sc. at the University of Puerto Rico, Medical Sciences Campus to throw some light on how the "great divide between medicine and nutrition" can be brought down.

Blessings,
Pramod Vora

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[Pramod Vora](#) • Recently a write up appeared in the New York Times:

"Healthy Women Advised Not to Take Calcium and Vitamin D to Prevent Fractures"

These are the findings of the United States Preventive Services Task Force (USPSTF) appointed by the Federal Department of Health and Human Services. The link is:

<http://www.nytimes.com/2012/06/13/health/calcium-and-vitamin-d-ineffective-for-fractures-us-preventive-services-task-force-says.html? r=1>

this report was released on June 12, 2012.

You can download the USPSTF Fact Sheet and the Draft Recommendation Statement directly by going to my website:

<http://www.space-age.com/osteoporosis.html>

Along with many other landmark articles written and case studies done on this very interesting topic, which is hotly being debated now in various discussion in this and other Groups on LinkedIn.

There is a time limit given to submit Public Comments prior to finalization of this very important draft, which has very far reaching consequences in public health for not only this generation, but for future generations to come. So please forward this information to as many people you know so that the solutions we seek in health care are know to all and do go viral. In this digital world we live in, this is the only way to quickly get the desired changes and results.

I have prepared my comments to the various questions in the draft. Prior to their final submission, I would like to solicit your help to help make this more effective, The responsibility I have undertaken is far in excess of my capabilities to achieve this change, so please pitch and offer your valuable comments soon. Within a week max.

Even simple things like grammar, punctuation, spelling mistakes, ambiguity of language, better language, better diplomacy in language used, better persuasion and motivation techniques, etc. etc. Any sort of help will be highly appreciated and welcome in improving my comments and making them far more effective and result oriented.

Since the comments are long, I will split each question on the Comment Sheet and my proposed response into a different post as per the imposed space constraints.

Since health care affects all of us we must ask ourselves the following questions:

Do we want a change?
Can we change and accept a change?

Yes we can! Yes we can!

Rise; let us unite to struggle for a better system of health care and for not so self-serving and misdirected research in medicine.

Please inform every one to enable this to go viral. Otherwise, we will have to continue living with poor health care for many more decades to come.

Be Enlightened

Blessings,

Pramod Vora

spaceage2008@space-age.com

<http://www.facebook.com/pramod.vora100> .

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P.S.

I am especially relying on Dr. Michael Gonzalez, Margie, Lori, Rupshree, Yves, Geoffrey, Sandu, Ronald, Stan, and also all other readers to this discussion as my pillars of strength to help me through this very difficult task.

5 days ago

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[Pramod Vora](#) • Q. How could the USPSTF make this draft Recommendation Statement clearer?

A. There seems to be some ambiguity in the dose which "is associated with a small but significantly increased likelihood of developing painful kidney stones".
If 400 IUs of vitamin D and 1000 mg of calcium "is associated with a small but significantly increased likelihood of developing painful kidney stones", it is clear that 800 IUs of vitamin D and 1200 mg of calcium is going to increase this risk further.
If some thing is harmful at a particular dose, it is common sense, it cannot become a harmless at a higher dose. This is common sense.

It would be highly appreciate if this ambiguity in wording is removed in your draft. It seems to give wrong ideas to people, especially those belonging to the old school of thought on calcium to work at higher doses as these are safer and also it gives a wrong idea to people that 1000 mg of calcium is "low dose". If 1000 mg of calcium is detrimental to the health of the human body, how could this be dose be "low"? It must be "high". Please remove the word "low" from this manuscript. Just call it "high dose".

Next Question answered in the next post.....

5 days ago

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[Pramod Vora](#) • Q. What information, if any, did you expect to find in this draft Recommendation Statement that was not included?

A. 1. Informing people about the Withdrawal of the NIH support to the consensus on calcium of June 1994 and to the consensus on osteoporosis of March 2000 basically recommending the use of 1200 mg of calcium for adults as a safe dose.

The links are:

<http://consensus.nih.gov/1994/1994OptimalCalcium097html.htm>

and

<http://consensus.nih.gov/2000/2000Osteoporosis111html.htm>

The NIH support to both these consensuses has been withdrawn many years back. Yet there is no public awareness about this important change in thinking even though more than five years have elapsed since this change in thinking occurred. There is a remark in bold red on the above links saying:

“This statement is more than five years old and is provided solely for historical purposes. Due to the cumulative nature of medical research, new knowledge has inevitably accumulated in this subject area in the time since the statement was initially prepared. Thus some of the material is likely to be out of date, and at worst simply wrong.”

I am sure many are still not aware of this change in thinking and many of our health practitioners worldwide are blindly prescribing calcium supplements containing carbonates (chalk) for prevention of osteoporosis.

Furthermore, your draft fails to mention that many other nutrients are required in a synergistic manner for bone building besides calcium and that calcium taken in isolation of other supporting nutrients for prolonged periods is also toxic to the human body.

All around us we see toxicity of calcium, in the form of calcified arteries / heart valves, stents and bypass surgeries, heel spurs, osteophytes, etc. This shows we are a society suffering from calcium toxicity!

It is long known and is a part of every textbook of nutrition for undergraduate studies (not post graduate or post doctoral studies!) that Vitamin D is toxic at higher doses and prolonged use even of low doses without proper and periodic monitoring.

Answer continued in the next post due to space constraints.....

5 days ago

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[Pramod Vora](#) • I will reproduce hereunder an extract taken from:
(with my notes in bracket where I found the need to amplify and clarify)

Encyclopedia of Nutritional Supplements - Edition 1996 – Pages 42 and 43
Michael T. Murray, N.D.
ISBN 0-7615-0410-9

Principal Uses of Vitamin D

The principal use of vitamin D is the prevention of vitamin D deficiency.

(Note carefully, the author doesn't say for the treatment of osteoporosis or cancer or any other disease)

Dosage Ranges

The RDA for vitamin D is 200 to 400 I.U. daily. For elderly people not exposed to sunlight for living in the northern latitudes, a daily intake of 400 to 800 I.U. is recommended. Supplementation greater than 400 I.U. per day in most adults, young children, and adolescents, is unwarranted.

(Note the word “unwarranted”. No need to do research at high dose here because the basic tenet of medicine is “do no harm to the patient’s body”. He discloses below that vitamin D is highly toxic to the human body)

Safety Issues

Vitamin D has the greatest potential among all the vitamins to cause toxicity. Dosages greater than 1,000 I.U. per day are certainly not recommended. Increase blood concentration of calcium (a potentially serious situation), deposition of calcium into internal organs, and kidney stones are some of the characteristics of vitamin D toxicity.

(Note it is known all along, since decades, and even a part of standard textbooks, that vitamin D causes kidney stones. This is known to all under graduates in nutrition since last few decades. So the findings of USOSTF are nothing new. He goes not later to say it causes calcification of arteries, heart valves, etc. This all it nothing new. It is an old hat no need to reinvent the wheel)

Many researchers suggest that long-term over consumption of vitamin D in fortified foods contributes to atherosclerosis and heart disease, possibly as a result of decreasing magnesium absorption.⁷

(Note he lays importance to not allowing the removal of Magnesium)

References:

7. Seelig MS, Magnesium deficiency with phosphate and vitamin D excess: Role in pediatric cardiovascular nutrition. Cardio Med 3, 637-650, 1978

(Note: When things are in standard textbooks there already exist numerous reference and there is nothing to report new findings. Our old findings at NIH were not in line with common knowledge which existed in textbooks for decades. How warped and self serving can our research be?)

Answer continued in the next post due to space constraints.....

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[Pramod Vora](#) • It is important that these facts be brought out to the attention of health practitioners and consumers so that they keep their bodies safe and live a long and healthy life. They also stop attempting high dose therapy for cancer treatment. Also if Vitamin D is a known toxic substance, there is no sense in doing research at many different higher IUs of dose in a bid to find out a magical dose at which cancer can be treated. The basic tenet of medicine is that the "doctor will do no harm" to the patients' body". The question of harming the patient and worst still killing the patient to prove the ability of vitamin D to control cancer is just absurd.

Next Question answered in the next post.....

5 days ago

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[Pramod Vora](#) • Q. Based on the evidence presented in this draft Recommendation Statement, do you believe that the USPSTF came to the right conclusions? Please provide additional evidence or viewpoints that you think should have been considered.

A. You are moving in the right direction. But you need to go all the way to tell the whole truth about calcium, osteoporosis and methods for reducing the risk of fractures.

You must also mention that calcification of arteries, heart valve, heel spurs, osteophytes are also deposits due to calcium toxicity in the body. Such deposits need not necessarily come from calcium supplementation but can also come from prolonged use of dairy products rich in calcium and other foods fortified with calcium especially if taken for prolonged period after adulthood when the body stops growing.

The presence of calcium oxalate crystals in the urine report is the first indication that you are putting in too much calcium into your body and poisoning it slowly but surely.

The problem with all these NIH doses and now USPSTF doses is they talk about calcium carbonate (chalk) which is not easily absorbed or retained in the human body, and hence has to be excreted. So it is a bad idea to take carbonates as it going to increase load on the kidneys. In addition, carbonates neutralize the hydrochloric acid in the stomach which results in poor digestion and nutrition to the body. Better is to use organic compounds of calcium like gluconates, lactates, citrates, etc. as they do not deplete the hydrochloric acid and do not result in gastrointestinal intolerance to calcium.

This does not mean that I am recommending the use of calcium in isolation of other supporting nutrients for increasing bone density or preventing fractures. I also haven't understood why this old standard of "calcium carbonate / chalk", which was used for prophylactic doses way back in World War I, is still being pursued for use as therapeutic doses for investigation of reversal of osteoporosis and increasing bone density. Organic compounds of calcium are ideal as therapeutic doses and have a far better rate of absorption and retention in the body.

Basically, you need just a few milligrams of organic calcium each day to maintain good bone health, provided all other essential nutrients are also present to support bone building. This comes from the diet for most people. Osteoporosis develops when some other critical ingredients are missing from the diet or body. This normally is not calcium. We now live in a calcium toxic society with calcified arteries / heart valves, kidney stones, stents and bypass surgeries. The number of people with such problems proves that we have too many undiagnosed cases of calcium toxicity all around us. The great divide between medicine and nutrition has to be brought down like the Berlin wall. Only USPSTF can do it by rising to the challenge and making sure that real nutritional experts are a part of the policy making process. When I look at the credentials of the USPSTF members involved in the decision making process, I see majority are all MDs, hardly any Ph.D.s or D.Sc.s in Nutrition. United States has many such fine persons who will be able to guide not only the US but the whole world better. The time has come to have equal representation of medical experts and nutritional experts in health care. Please add a dozen or so more names of Ph.D.s specializing in nutrition to this committee. It is better to delay this project by a few more weeks and do it right this time, than to rush through only to revise it a few months later.

For an update on Calcium please go through the discussion going on on LInkedIn under

"Calcium From Food" in the Nutrition Group. Here you will find a lot more information and the opinion of various people from the nutritional field. The link is:

http://www.linkedin.com/groupAnswers?viewQuestionAndAnswers=&discussionID=118377262&gid=116095&commentID=82626352&trk=view_disc&ut=35ZrYF-IV_plg1

5 days ago

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[Pramod Vora](#) • I am giving below the link for various articles I have written during the last decade on the subject of Calcium & Osteoporosis which appear to be far ahead of what is presently being explained in the present Draft and by the NIH and other government website. The link for all this information is:

<http://www.space-age.com/osteoporosis.html>

Here you will also find a case study where we increased bone mineral density by 39% over a 22 month period by administering magnesium and totally stopping the calcium supplementation which was taken for 3 prior years. The patient was taken from serious osteoporosis to a not so serious osteopenia. The T-Score changed from -3.1 to -1.75 i.e. 43% in a 22 month period. Please refer case study given at:

<http://www.space-age.com/BMD01.pdf>

Again, I will repeat this was done without giving calcium supplementation. It is done by giving magnesium supplementation along with other nutrients in a synergistic manner.

If this information can be brought out in your draft the country will probably move ahead by about 50 years in the understanding of health care.

In one of my articles I write:

" Gone are the days, when Calcium deficiency used to cause Osteoporosis / Fractures. Today, we need to preach that Magnesium deficiency causes Osteoporosis and Fractures."

The importance of magnesium supplementation needs to be brought out in your draft as it very relevant to the topic of fractures. Your draft is totally silent on this. The importance of magnesium has already been a part of nutritional textbooks for the past few decades.

Please involve more experts in nutrition in to your decision making process. I would like

to recommend the name of Professor Michael J. Gonzalez, Ph.D., D.Sc. at the the University of Puerto Rico, Medical Sciences Campus to help you take the health of United States 50 years ahead in time. Three other names of gurus of nutrition come to my mind whose textbooks I have read and referred to very long back and found very useful:

1. Michael T. Murray, N.D. - who wrote the book Encyclopedia of Nutritional Supplements 1996 ISBN 0-7615-0410-9

2. Melvyn R. Werbach, M.D. - Textbook of Nutritional Medicine 1999

ISBN 0-9618550-9-6

He was Assistant Clinical Professor at UCLA, School of Medicine, Los Angeles, CA

3. James F. Balch, M.D. - Prescription for Nutritional Healing 3rd Edition, 2000,

ISBN 1-58333-077-1

All the above 4 experts in nutrition have done considerable work in nutrition and have published many textbooks on this subject.

Perhaps we can motivate them to contribute to USPSTF Draft by incorporating more accurate and relevant nutritional information

Presently there exists a great divide between medicine and nutrition, which is affecting the health of the people worldwide with USA setting a bad example. Allopathy has it own merits as it can saves the lives of people. But preventive health care has it own merits as well as it can prevent a disease from manifesting itself. It is said: An ounce of prevention is worth a pound of cure". Preventive health care is the need of the hour. Why not train people not to start fires, rather than only train them in putting out fires.

A great responsibility rests on the shoulders of USPSTF to bring down the great divide between present day medicine and preventive health care based on nutrition. Let us resolve to propel USA 50 years ahead in medicine and set an example for the rest of the world to follow. USA is supposed to be the world leader. A leader has to lead by setting an example.

The following are links of doc files is given in support of my observations:

http://www.space-age.com/calcium_osteoporosis.pdf .

.

<http://www.space-age.com/Osteoporosis2007.pdf> .

.

<http://www.space-age.com/BMD01.pdf>

Next Question answered in the next post.....

5 days ago

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[Pramod Vora](#) • Q. This draft Recommendation Statement includes a graphic to depict the USPSTF's statements on using vitamin D for prevention. Do you find this graphic helpful? How can it be improved?

Mention that vitamin D taken over a prolonged period is toxic to the human body. Once you exceed the normal limits it is difficult to remove this from the human body.

Excessive vitamin D causes calcium to deposit in various organs / tissues of the body and can also lead to osteoarthritis.

Prolonged use of vitamin D can result in toxicity, body aches and pains and can mimic the symptoms of osteoporosis.

Try to maintain your Vitamin D3 levels around 50 ng/mL. Above 70 ng/mL may be toxic.

The above Notes are a very essential part of the graphic depiction.

Be Enlightened.

Blessings,

Pramod Vora

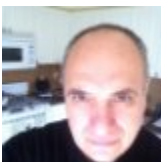
spaceage2008@space-age.com

<http://www.facebook.com/pramod.vora100> .

<http://www.facebook.com/pages/SpaceAge-Anti-Aging-Center/154567131289336> .

<http://www.linkedin.com/pub/pramod-vora/11/89/aa5>

5 days ago



[StanUnfollow](#)

[Stan Racansky](#) • Hello Pramod,

Your discussion points are very interesting but also very complicated. Can you condense the information about relationship between calcium, magnesium and vitamin D into one simpler blog.

I have a question. Isn't 50 mg/ml little bit too much? I had been listening to podcast by Cornell University professor of Nutrition, suggested 20 to 40 ng/dcl.

4 days ago • [Like](#)

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[Follow Kerry](#)

[Kerry Coates](#) • Pramod Vora -- no, I am not "still propagating the old school of thought that you only need calcium to build bones" -- I was just pointing out ONE of the things missing in the calcium studies. THEY only used calcium in their studies. They DID NOT use magnesium, zinc, K2, etc., etc., which should ALSO include the mesocarp of citrus fruits...the point I was trying to make in the article was focused on the mesocarp. Nobody talks about that. If I was to cover the entire issue of calcium it would create a 500 page book -- this was only a short blog pointing out the need for mesocarp. Also in the article it pointed to an egg shell calcium 2 to 1 with magnesium and vitamin D3. It is not a chalk like most other calcium supplements on the market that cause all the health problems you have stated in your posts. GNLD has long promoted the idea of NOT taking isolates, but rather, if you are going to take a supplement, it should contain the complex of nutrients "MOST COMMONLY FOUND" in deficiencies. Supplements are just that -- supplements -- and should not be used to replace foods like a lot of people use them for. Supplements should be designed by the manufacturer as a means of "supplementing" a deficient diet, not replace food. GNLD has been putting magnesium and Vitamin D3 in their egg shell calciums for years -- long before the rest of the world caught on that isolates are bad. Vitamin K2 has a very short half life so must be replenished regularly through diet, not just in a supplement that is taken once a day. If a calcium supplement also contained zinc, etc., with everything else it would eventually be too large to swallow! Another reason why a daily-type multiple vitamin rarely contains calcium and if it does then it is usually the wrong type of calcium ("chalk"). Also, when speaking about Vitamin D, one should not assume the readership, not just saying it is "Vitamin D",

but always specifying whether it is Vitamin D3 or Vitamin D2 -- one being animal-sourced and the latter being vegetable-sourced. Also, trying to get proper calcium levels by eating dairy products daily does not work for the majority of people, particularly the elderly because of the lack of digestive enzyme strength necessary for the breakdown of the fats. Improperly digested calcium is the issue there.

4 days ago • [Like](#)

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[Follow Yves](#)

[Yves Eljas](#) • Yves Eljas • Pramod,

I do not know if you have seen this article from posted in NutraIngredients (NI)

<http://www.nutraingredients.com/Research/New-analysis-slams-calcium-supplements-over-heart-problems>

The NI post discusses an article published in the British Medical Journal.

<http://www.ncbi.nlm.nih.gov/pubmed/21505219>

The argument of the heart toxicity of calcium supplementation is discussed further in an editorial in Heart

<http://heart.bmj.com/content/98/12/895.extract>

quoting:

"...Randomised trials in pre-dialysis patients have demonstrated acceleration of coronary artery calcification,⁵ and some trials have shown increased cardiovascular mortality in patients randomised to calcium...."

Then again there are also studies claiming calcium supplementation as harmless

<http://www.ncbi.nlm.nih.gov/pubmed/20614474.1>

and

<http://www.ncbi.nlm.nih.gov/pubmed/22112804>

I tend to agree with you, Pramod, but what do you say about those vastly divergent results?

4 days ago • [Like](#)

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[Pramod Vora](#) • Hi Stan,

The simplified version is in my articles:

http://www.space-age.com/calcium_osteoporosis.pdf .

and .

<http://www.space-age.com/Osteoporosis2007.pdf>

The Standard Reference Range in most Pathology Reports is in ng/ML (i.e. nanograms per milli Liter). I would say 40 ng/mL is fine for most people. Below 30 ng/mL is a sign of deficiency.

Blessings,

Pramod Vora

4 days ago

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[Pramod Vora](#) • Hi Kerry,

The time has come when we need to stop promoting any supplement containing any form of calcium.

Long back I have written:

" Gone are the days, when Calcium deficiency used to cause Osteoporosis / Fractures.

Today, we need to preach that Magnesium deficiency causes Osteoporosis and Fractures."

The USPSTF has finally caught up with that conclusion in the Recommendations it has released on June 12th. Please read the New York Times at:

http://www.nytimes.com/2012/06/13/health/calcium-and-vitamin-d-ineffective-for-fractures-us-preventive-services-task-force-says.html?_r=1

We now live in a calcium toxic society with calcified arteries / heart valves, kidney stones, heel spurs, osteophytes, stents and bypass surgeries. The number of people with such problems proves that we have too many undiagnosed cases of calcium toxicity all around us.

Once again, I would really appreciate your not promoting Calcium Supplements to the public. This must be stopped by all health conscious people.

Blessings,
Pramod Vora

4 days ago

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[Michael J. Unfollow](#)

[Michael J. Gonzalez](#) • My friend and colleague Pramod dropped me a tough one! I've been fighting the Medicine and Nutrition divide for nearly 30 years! I believe the best way to converge these disciplines is by educating the young health professionals especially the new MDs in a One World, One Medicine concept. One Medicine, the one that works for your patients!

2 days ago • [Like](#)

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[Pramod Vora](#) • Hi Dr. Michael,
I like your slogan for a new medicine “One Medicine”

The Spanish and the Italians say “Numero Uno” the Germans say “Nummer Eins” to say it is the best.

So why not “One Medicine” the best medicine.

I like it. It will succeed, as it has consumer appeal and support.

Everybody wants the best.

Blessings,
Pramod Vora

1 day ago

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[Pramod Vora](#) • My dear Dr. Michael,

Please don't be overwhelmed with the responsibilities that the Nutritional Group has bestowed upon you. I will hold your hand and we will cross the hurdles as they come. United we all stand, divided we all fall. As I see it, your 30 year struggle has come to an end. We now have the power of the internet, the digital world and information going viral when we decided to serve the citizens of planet Earth. It is always better to have at our command the help of millions of people in the world. That is real power. We need to know how to harness it and use it for the common good of all.

There is another topic being hotly debated in the nutrition group on the effect of salt on blood pressure. I know you have stayed away from offering any comments so far. To resolve this matter, I have taken the participant to an undergraduate course in nutrition and discussed those aspects of nutrition which are relevant to the subject under discussion, I am trying to establish the fundamentals of nutrition, so that we stay within that framework and do not digress from the concepts of good health. The link is:

http://www.linkedin.com/groupAnswers?viewQuestionAndAnswers=&discussionID=125654229&gid=116095&commentID=86043755&trk=view_disc&ut=12G1h85oKw2Bk1

May I request you to kindly express an opinion on the clarifications I have given in this discussion in order to establish the fundamentals and concepts of nutrition. I am sure numerous readers to this discussion will be delighted to hear from you. Just a few lines will do.

Blessings,
Pramod Vora

1 day ago

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[Michael J. Unfollow](#)

[Michael J. Gonzalez](#) • Dear Pramod:

As usually we concur. I appreciate your support and friendship. I had surgery on my left knee yesterday but I promise to take a shot to the assignment you gave me as soon as I get a little better.

Many Blessings!

MJG

1 day ago • [Like](#)

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[Pramod Vora](#) • Dear Dr. Michael,
Wishing you a very speedy recovery.

Blessings,
Pramod Vora

10 hours ago

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[Pramod Vora](#) • Hi Everyone,
Re: Vitamin D and Calcium Supplementation to Prevent Cancer & Osteoporotic Fractures in Adults - USPSTF

Dr. Michael J. Gonzalez, Ph.D., D.Sc. and Professor of Nutrition at the University of

Puerto Rico, Medical Science Campus wrote:

“I’ve been fighting the Medicine and Nutrition divide for nearly 30 years!”

I read the anguish in his voice.

I have promised Dr. Michael:

“I will hold your hand and we will cross the hurdles as they come. United we all stand, divided we all fall. As I see it, your 30 year struggle has come to an end. We now have the power of the internet, the digital world and information going viral, when we decided to serve the citizens of planet Earth. It is always better to have at our command the help of millions of people in the world. That is real power. We need to know how to harness it and use it for the common good of all.”

I request readers to study recommendations given in my earlier posts, and spend a few minutes to complete the Comment Form and submit it to the United State Preventive Services Task Force (USPSTF) well before the July 10th deadline possibly by Friday this week. I am not asking you to blindly agree with my recommendations, or go by the concurrence of Dr. Michael J. Gonzalez, but do what you feel is in the best interest of mankind and the principals of good health care, which also affects you and your dear ones besides all mankind.

I am giving below the links to download the required information to get you going:

1. Quick Fact Sheet

<http://www.uspreventiveservicestaskforce.org/uspstf12/vitamind/vitdfact.pdf>

1. Meta-Analysis

<http://www.uspreventiveservicestaskforce.org/uspstf12/vitamind/vitdart.htm>

1. Draft Recommendation Statement

<http://www.uspreventiveservicestaskforce.org/draftrec3.htm>

1. Comment Form

[http://www.uspreventiveservicestaskforcecomments.org/comments.aspx?dno=VjFFNERUT2dYTUEIM2Q\\$](http://www.uspreventiveservicestaskforcecomments.org/comments.aspx?dno=VjFFNERUT2dYTUEIM2Q$)

The Comment Form can be filled on-line and submitted, once you have drafted the answers to each of the questions. Then all you have to do is copy, cut and paste either from Notepad or Word for Windows.

Please study my earlier posts, where I have indicated some relevant points to completing

the answers to the various questions raised in the Comment Form. Please answer in your own words, please convey what you think is right. Please do not use my harsh and emotional method of writing. I am working on it and will tone it down to ensure full co-operation from the Task Force.

One thing I feel very strongly about, is the lack of adequate nutritional experts on the Task Force Committee. Please insist on equal representation of MDs and Ph.D.s in Nutrition on the Committee. After all calcium and vitamin D are the domain and forte of nutritional scientists. Treatment may be done by MDs on the basis of theory and protocols recommended by nutritional scientists, who have in depth knowledge of the evolving subject of nutrition. These two disciplines must be brought together to begin working closely as one team. Once this correction is done, everything will begin to fall in place. Please also recommend Dr. Michael J. Gonzalez, Ph.D., D.Sc. to be on the committee. Once he is in there, everything will turn out all right.

We need thousands of such Comment Forms going in. It will stall the whole process for some time, and give the existing committee a chance to reconsider and reconstitute a new committee due to public demand and come up with more up to date recommendations. This is how the “Berlin Wall of Medicine” can be brought down and the dream of Dr. Michael J. Gonzalez can be quickly realized.

Mankind needs to move in a time machine to the year 2050 of medicine:
Numero Uno Medicine!
Nummer Einz Medicine!
One Medicine – The Best Medicine!
as Dr. Michael aptly puts it.

continued in the next post due to space constraints

57 minutes ago

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[Pramod Vora](#) • Please also tell your friend and colleagues to also submit more such Comment Forms. This can be done online. Please post my message in as many forums and group discussions to help it go viral. If you have friends and colleagues in the media world please request their help to make this “BREAKING NEWS” to get attention to this problem of a great divide between medicine and nutrition. This is the need of the hour.

Good luck everybody, remember this is collective effort, and we are unleashing the

power of the internet and the media for the common good and to alleviate the sufferings of mankind.

Blessings,

Pramod Vora

spaceage2008@space-age.com

<http://www.facebook.com/pramod.vora100> .

<http://www.facebook.com/pages/SpaceAge-Anti-Aging-Center/154567131289336>

<http://www.linkedin.com/pub/pramod-vora/11/89/aa5>