



ANTI-AGING MEDICAL NEWS

SUMMER 2008

OFFICIAL SHOW HANDBOOK

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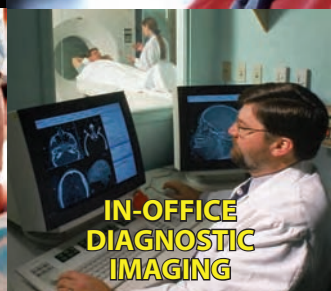
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THE PRINCE GEORGE'S COUNTY COUNCIL

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SAMUEL H. DEAN
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To The American Academy of Anti-Aging Medicine, A4M:

On behalf of my colleagues on the Prince George's County Council, I extend a warm welcome to the 16th Annual World Congress on Anti-Aging Medicine and Regenerative Biomedical Technologies as you host your 2008 Session July 17-19 at the Gaylord National Resort & Convention Center in National Harbor, Maryland, Prince Georges County.

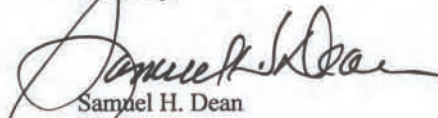
The Prince George's County Council is certain that the more than 3,500 scientific and medical delegates in attendance will find that Prince George's County offers the perfect environment for a productive conference. Your planned discussion about issues related to medical interventions and the treatment of diseases and disabilities associated with the biological aging process sounds exciting, engaging, and groundbreaking.

Prince Georges County also offers a perfectly beautiful backdrop where conference participants can relax, unwind and take in the rich, diverse offerings of culture, entertainment, and food.

We are indeed pleased that the American Academy of Anti-Aging Medicine (A4M) chose to hold its 2008 Summer Session at the County's beautiful Gaylord National Resort and Convention Center.

Welcome and enjoy!!!

Sincerely,



Samuel H. Dean
Chairman

County Administration Building – Upper Marlboro, Maryland 20772

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Welcome



Dear Attendee:

The American Academy of Anti-Aging Medicine (A4M) welcomes you to Washington, DC for the Summer 2008 Session of the 16th Annual World Congress on Anti-Aging Medicine and Regenerative Biomedical Technologies.

Since its founding in 1992, the A4M has served as an advocate for the new clinical specialty of anti-aging medical science. The A4M co-sponsors the world's largest scientific conferences in the area of advanced preventative medicine, and co-supports a wide array of anti-aging educational programs taking place around the world on all continents in 2008, many with the support of governments, ministries of health and international sports federation organizations.

The A4M encourages you to pursue Certification in the Anti-Aging Medical Specialty. Through the American Board of Anti-Aging & Regenerative Medicine (ABAARM) and the American Board of Anti-Aging Health Practitioners (ABAHP), the A4M credentials physicians and health personnel in the anti-aging medical specialty. Today, there are more than 2,000 physicians and health practitioners certified by, or in-process with, the ABAARM and ABAHP programs.

We also invite you to participate in specialty Postgraduate Medical Training. The Fellowship of Anti-Aging Medicine & Regenerative Medicine and The Aesthetic Anti-Aging Fellowship are A4M co-sponsored postgraduate medical education programs that provide intensive, hands-on training from experts in these fields. Today, there are 700 physicians and health practitioners involved in the Anti-Aging Fellowship Program.

Indeed, it is an exciting time to be involved in anti-aging medicine. With your involvement, the anti-aging medical specialty continues to expand and become more widely accessible.

We commend you for attending this premier educational event in the anti-aging medical specialty, where more than 60 of the world's most recognized clinicians and researchers in anti-aging and regenerative medicine present the very latest data and findings that advance a new paradigm of innovations in advanced preventive medicine.

With warm regards,



Ronald Klatz

Ronald Klatz, M.D., D.O.
President, A4M



Robert Goldman

Robert Goldman, M.D., Ph.D., D.O., FAASP
Chairman, A4M

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To restrict this free exchange of thought, both conventional and unconventional, would eliminate true opportunities for breakthrough and discovery vital to our new science. Indeed, freedom of thought is the essential foundation upon which the advancement of health care itself is based.



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Vibration Training:

A UNIQUE TRAINING TOOL FOR ANTI-AGING

By Dr. Joseph F. Signorile

INTRODUCTION

Physical activity is one of the most cost-effective and innocuous tools for maintaining independence, preventing falls and maintaining wellness in older persons. However, the *Health, United States, 2006* report from U.S. Department of Health and Human Services' Center for Disease Control and Prevention reported that less than 30 percent of the adult population in this country regularly engages in leisure-time physical activity and 39 percent does no leisure time physical activity at all.¹ And the picture only gets worse as we age and arthritis, sarcopenia (age-related muscle loss), declining metabolism, reduced mobility and a host of other "age-related" disabilities begin to limit our activity levels. Additionally, lack of transportation, disapproval by family members, fear of looking foolish and lack of program availability also should be included.²

continued on **next page**

But what are the top reasons people give for not exercising? Number one on the list: "I don't have time," followed by "I don't have the energy," "It's painful, boring and inconvenient" and "I just can't make the commitment."^{3,4} It would be wonderful if there were an exercise modality that required limited time commitment, had low perceived exertion levels, was unique and fun, and was accessible even to older persons with disabilities.

Enter whole-body vibration (WBV). Although this training modality may be new to us, it has a history dating back to the mid-1960s, when it was used by Russian cosmonauts to reduce the impact of microgravity on their muscles and connective tissue. Since then, both the technology and the research have been growing in leaps and bounds. Today, we have a plethora of information from controlled scientific studies examining its effectiveness in addressing everything from functional performance to specific disease states. There are a number of different types of plates (vertical displacement, tri-directional displacement and central pivoting). Since results may vary by plate, this article will review only the literature on the impact that tri-dimensional/ multi-planar plates (**Figure 1**) can have health and independence in older persons.

EXISTING STUDIES INVOLVING OLDER PERSONS



Figure 1. Tri-planar whole body vibration platform.

Strength and Power

The literature tells us muscle size and strength decline exponentially after the age of 55 (**Figure 2**). Additionally, faster-contracting muscles "die off," decreasing our movement speed and power (the product of force production and movement velocity; **Figure 3**). Given the fact that the WBV plate moves at very high speeds (25 to 50 Hz), the overload to the muscles incorporates both force and velocity. In fact, WBV training is now commonly referred to as acceleration training in the literature. The nature of

this stimulus is reflected in the neuromuscular responses it produces. For example, Bogaerts, et al.,⁵ compared improvements in muscle mass, isometric strength, and explosive strength (power) due to WBV versus standard fitness training in community-dwelling men over 60 years of age. They found WBV training was as effective as fitness training for increasing muscle mass, isometric strength and power of the knee extensors in these individuals (**Figure 4**). However, the WBV sessions required less than half the time (40 minutes versus 90 minutes) and minimal exertion compared to fitness training sessions.

A similar study by Roelants, et al.,⁶ compared the effect of WBV to progressive resistance training in a group of 89 postmenopausal women. They reported similar gains in isometric and dynamic strength in both groups; however, only the WBV group improved in movement speed, a critical factor for independence and fall prevention.⁷ Once again, the time required for WBV was less than half that required for resistance training.

Mobility and Dynamic Balance

The positive impact of WBV on mobility in older individuals has been demonstrated in a number of studies. Bautmans, et al.,⁸ examined the impact of six weeks of static WBV exercise on a Power Plate® platform in 24 nursing home residents (15 female, 9 male; mean

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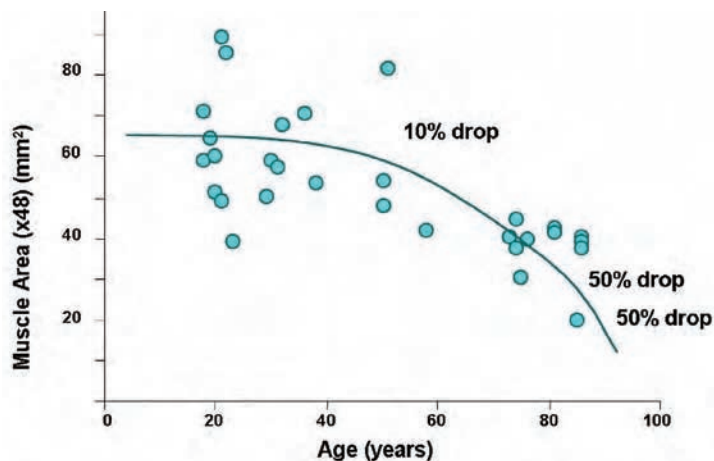


Figure 2. Exponential decline in muscle cross-sectional area with age. After Lexell et al.²¹

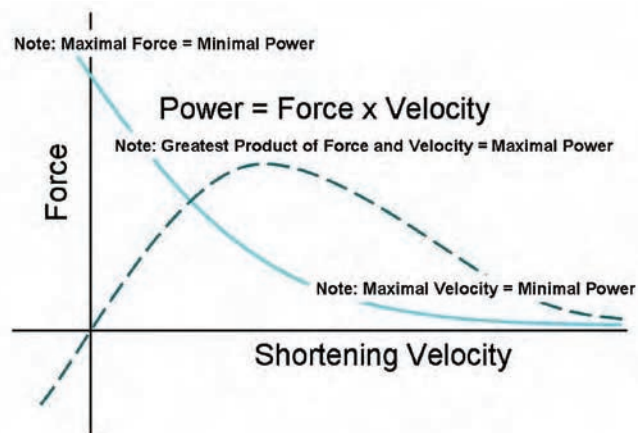


Figure 3. The Force-Velocity and Power curves showing the relationships between force, velocity and power.

age 77.5 ± 11.0 years). They reported significant increases in a timed up-and-go test, and the balance score of the Tinetti gait test (Figure 5).

More recently, Bogaerts and colleagues⁹ examined the impact of 12 months of Power Plate® training on balance in 220 older individuals 60 to 80 years of age. The Power Plate® training group (n=94) showed a reduced frequency of falling on a moving platform when vision was partially impaired and improvements in the response to toes-down rotations at the ankle induced by the moving platform. The fitness group (n=60) also showed reduced falls frequency on the moving surface when vision was disturbed. Thus, whole-body vibration training may improve some aspects of postural control in community-dwelling older individuals.

These studies demonstrate that WBV can positively affect mobility, balance and proprioception, thereby improving quality of life and reducing the risk of injury in older persons.

Bone Mineral Density

Reductions in bone mineral density (BMD) in postmenopausal women and very old men increase the likelihood of serious injury and death following a fall. Vibration training provides a unique stimulus for increasing BMD, as evidenced by both animal¹⁰ and human studies.¹¹⁻¹³ For example, a study by Verschueren, et al.,¹¹ compared the impact of 24 weeks of resistance training or WBV on bone density in 70 women, ages 58-74 years. DXA scans revealed a significant increase in total hip BMD, but not in total-body BMD (Figure 6). Additionally, there were no changes in serum markers of bone turnover for any group. Finally, a preliminary study by Corrie, et al.,¹⁴ demonstrated that WBV increased bone formation in 33 older patients.

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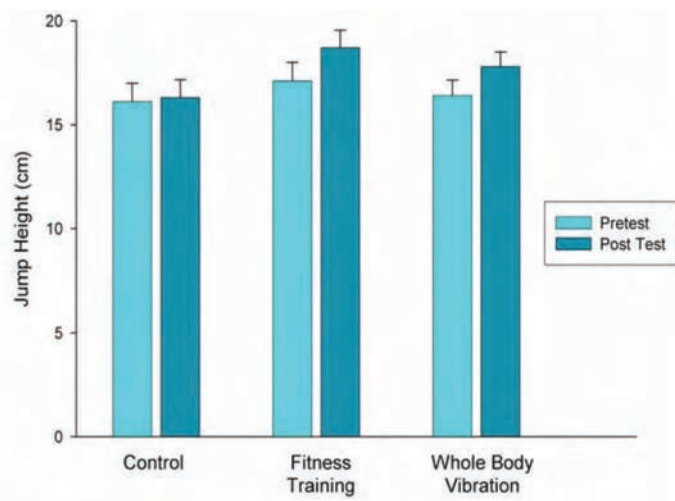


Figure 4. Graph demonstrating similar significant increases in counter-movement jump height for both fitness and WBV training. After Bogaerts et al.⁵

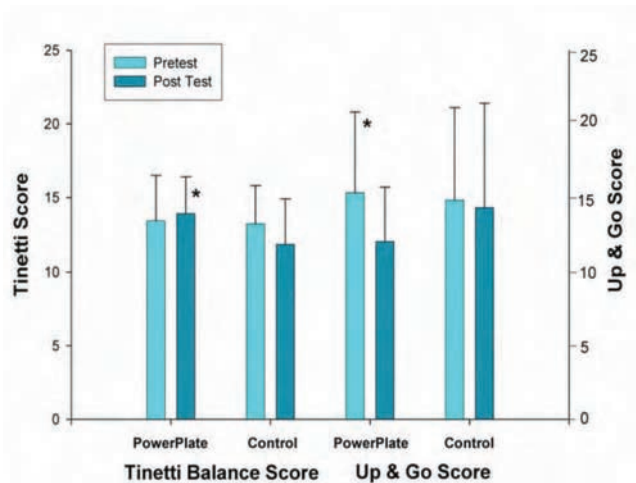


Figure 5. Illustration of significant improvements (*) in both the Tinetti Balance and Up and Go scores due to WBV training. After Bautmans et al.,⁸

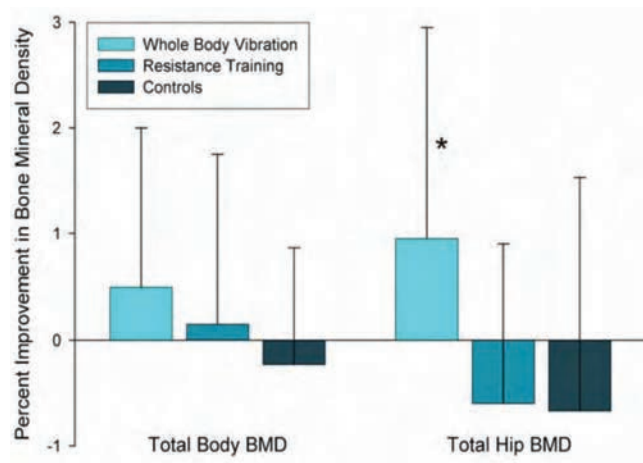


Figure 6. Increases in bone mineral density (BMD) with WBV training. *statistically significant increase. After Verschueren et al.¹¹



Figure 7. Diagram illustrating the negative impact of sarcopenic obesity on functional performance in older persons.

The results of these studies, though limited, are indicative of the potential for WBV to counteract bone loss due to menopause and the aging process.

Sarcopenic Obesity

The combined loss of muscle tissue and increase in body fat with aging is termed *sarcopenic obesity*. As Roubenoff¹⁵ stated in his commentary on sarcopenic obesity, “The ‘fat frail’ have the worst of both worlds as they age – increased weakness due to sarcopenia and a need to carry greater weight due to obesity” (Figure 7). We have already seen WBV can positively affect lean body tissue, including muscle mass. But what about reductions in body fat? The answer to this question is addressed by the results of the study by Verschueren, et al.,¹¹ comparing WBV to resistance training. They reported no significant changes in lean body mass due to either intervention, but a significant decrease in fat mass as a result of each (Figure 8).

HARBINGERS OF FUTURE SUCCESS

Flexibility

A number of studies have demonstrated the positive impact of WBV on flexibility in younger individuals¹⁶⁻¹⁹ (Figure 9). To date, no study has applied a flexibility-specific flexibility program to an older population; however, Bautmans, et al.,⁸ reported no change in the sit-and-



Figure 10. Illustration of hip flexor stretch on WBV.

reach or back-scratch tests following a strength-training WBV protocol. In our laboratory, we have demonstrated that a flexibility training program can improve multiple measures associated with functionality in older persons. Given the results generated with younger participants when protocols designed to increase flexibility were applied (Figure 10), it appears WBV should be further examined as an important training modality for addressing the dramatic losses in joint range of motion associated with the aging process.

METABOLIC SYNDROME (SYNDROME X)

CENTRAL OBESITY (APPLE SHAPE): A waistline of 40 inches or more for men and 35 inches or more for women

HYPERTENSION (HIGH BLOOD PRESSURE): 130/85 mm Hg or higher or on blood pressure medications

HIGH TRIGLYCERIDES: Level above 150 mg/dl

LOW HDL CHOLESTEROL: Below 40 mg/dl (men) or under 50 mg/dl (women)

INSULIN SENSITIVITY: A fasting blood glucose (sugar) level greater than 100 mg/dl or are on glucose lowering medications.

Figure 11. Factors associated with metabolic syndrome.

Cardiovascular Health and Metabolic Syndrome

Another area that has received only limited attention in the scientific literature is the impact of WBV on cardiovascular health and metabolism. We have examined sarcopenic obesity as it relates to functional performance, but there

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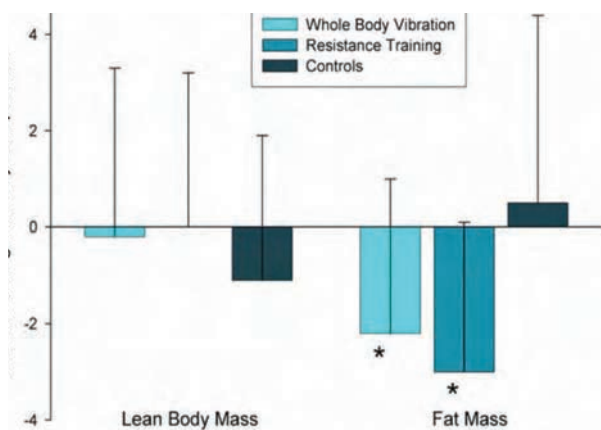


Figure 8. Graph illustrating similar significant decreases in body fat (*) due to resistance and WBV training. After Verschueren et al.¹¹

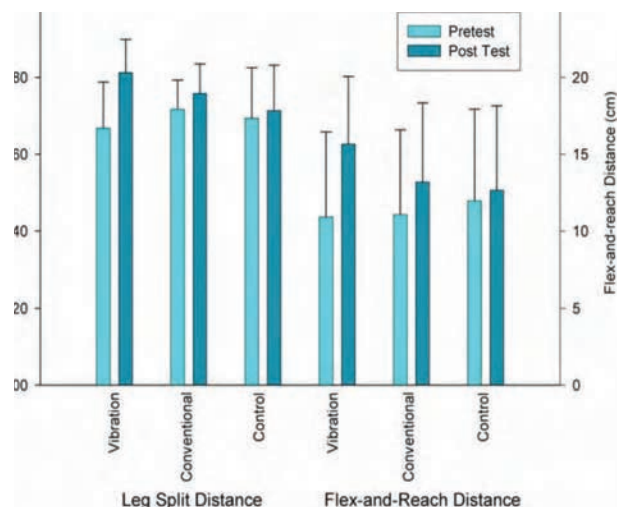


Figure 9. Increases in heel-to-heel split and sit-and-reach distances due to vibration training. After Issurin et al.,¹⁶

is a more insidious concern related to the current obesity epidemic: metabolic syndrome or Syndrome X (Figure 11) and associated health problems (Figure 12). WBV provides an attractive tool to address this problem, since it offers a low-exertion, individualized program without the inherent negative perceptions often associated with formalized exercise. This is especially important for older, obese individuals who may not have the capacity to engage in more rigorous activities, yet still wish to improve their cardiovascular and metabolic health.

Only a single study, to our knowledge, has examined oxygen consumption and caloric output in older persons as a result of WBV. Boegerts, et al.,²⁰ examined the impact of WBV and mixed fitness exercise on oxygen consumption in 220 older adults (WBV group, n=94; fitness group, n=60; control group, n=66). The WBV and fitness groups exercised three times

weekly for one year. The WBV group performed squats, deep squats and lunges. Using a progressive cycle ergometer protocol, researchers showed VO_{2max} and time to exhaustion during the test increased significantly for both the WBV and fitness groups; however, the fitness group had significantly greater improvements in time to exhaustion (Figure 13). These researchers concluded that WBV may provide an exercise alternative that can provide similar improvements in both cardiorespiratory and neuromuscular fitness, with a much lower potential for injury.

To examine optimal protocols for increasing oxygen consumption during WBV, our laboratory recently examined the impact of load (no load, 20% and 40% of body weight) and vibration (0 Hz, 0 mm; 35 Hz, 2-3 mm; 50 Hz, 5-6 mm) on VO_2 during active squatting in 10 physically active males, 27.22 ± 4.79 yrs; 81.41 ± 10.03 kg, not currently training. Our data revealed that for WBV to effectively increase oxygen consumption, an external load was required. When lower loading conditions, such as 20%, were used, low frequencies and displacements were most effective. However, when higher loads were used, higher frequencies and displacements were superior (Figure 14). We are currently recruiting participants for a training study comparing changes in body composition, lipoproteins and inflammatory markers in postmenopausal obese and overweight women.

CONCLUSION

The above-mentioned controlled studies indicate WBV is an effective training tool to increase strength, power, mobility, balance, bone density, and sarcopenic obesity. Additionally, there are strong findings in younger individuals indicating benefits related to flexibility, cardiovascular

continued on **next page**



Other Health Problems ASSOCIATED WITH OBESITY

- Diabetes
- Renal failure
- Atherosclerosis
- Gallbladder disease
- High triglycerides
- Heart attack or stroke
- Cancer

Figure 12. Additional problems associated with obesity.

health and metabolic syndrome. Given the greatly reduced time commitment, lower perceived exertion levels and rapid improvements associated with WBV, this exercise intervention constitutes a significant addition to the tools we have in our anti-aging campaign. ♦

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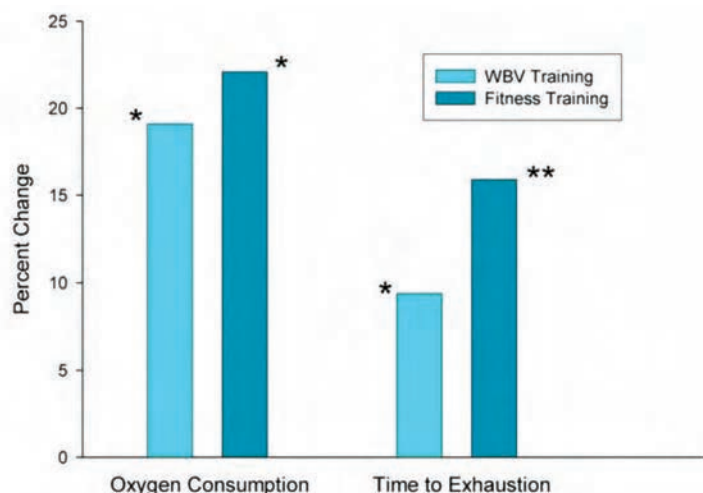


Figure 13. Improvements in oxygen consumption and time to exhaustion following one year of training. *significantly improvement above controls. **significantly better than controls and WBV. After data by Boegerts et al.²⁰

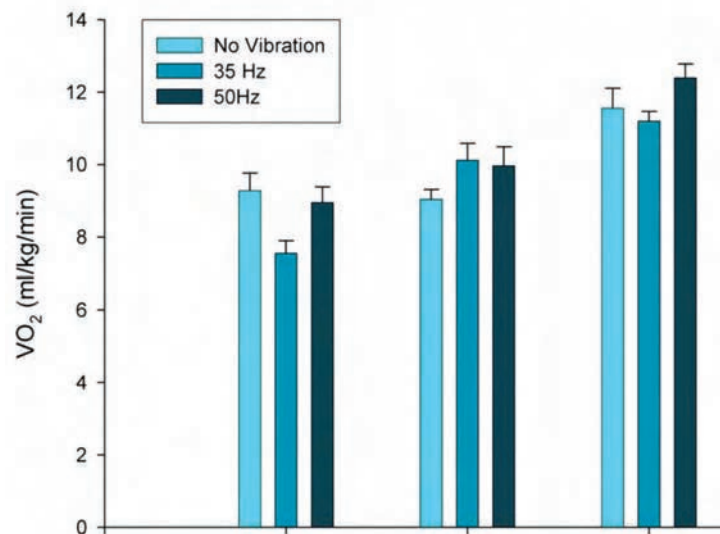


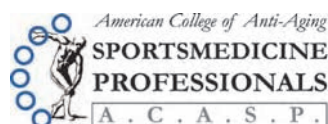
Figure 14. Preliminary data showing the combined impact of external loading and WBV on oxygen consumption. *significantly higher than 35Hz. **significantly higher than no vibration. †significantly higher than 35Hz. (Signorile et al; personal communication).

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► **DR. SIGNORILE** has been involved in research using exercise to address independence and fall prevention for more than 15 years. He has authored over 50 refereed manuscripts and conducted 175 national and international scientific and 200 industry presentations. He is currently a Professor of Exercise Physiology at the University of Miami and a Research Specialist at the Miami VA Medical Center Geriatrics Research Center.



The American Academy of Anti-Aging Medicine (A4M) created the anti-aging medical movement in 1992, which has since garnered the support of numerous prestigious educational and professional organizations around the world. The American Academy of Anti-Aging Medicine (A4M) wishes to acknowledge the following organizations that have facilitated the global acceptance and availability of anti-aging medicine.





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Accreditation of anti-aging medical clinics and medical spas serves two primary, fundamental purposes: to assure the quality of the institution and its clinical program, and to assist in the ongoing improvement of the institution or program. The A4M/WCCA Anti-Aging Clinic / Medical Spa Accreditation Program features Standards of Excellence that:

- Emphasize your facilities high level of service and safety
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- Encourage patient education & empowerment
- Demonstrate your facility's compliance with the highest governing operational standards of Professional excellence
- Enjoy the enhanced visibility and patient volume heir to A4M INET referrals.

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* Facilities accredited by the A4M/WCCA Anti-Aging Clinic / Medical Spa Accreditation Program must follow codes of professional and ethical conduct set forth by the A4M in display and/or use of the A4M Seal and/or Certificate of Accreditation in marketing, advertising, and promotion. See specifics of terms, details, conditions, and disclaimers at www.worldhealth.net/accreditation



Anti-Aging & Regenerative Medicine 2008-2009 Worldwide Scientific Conference Schedule



July 17-19, 2008
Washington, DC USA^{*, **, †}



December 11-14, 2008
Las Vegas, NV USA^{*, **, †}



September 6-7, 2008
Sydney, Australia^{*, †}



April 2009§
Taipei, Taiwan^{*, †}



September 11-14, 2008
Dusseldorf, Germany^{*, †}



April 22-24, 2009
Orlando, FL USA^{*, **, †}



September 19-21, 2008
London, England^{*, †}



May 2009§
Kuala Lumpur, Malaysia^{*, †}



September 27-28, 2008
Mumbai, India^{*, †}



May 2009§
Estoril, Portugal^{*, †}



October 10-12, 2008
Bali, Indonesia^{*, †}



May 2009§
Bucharest, Romania^{*, †}



Oct. 30-Nov. 2, 2008
Beijing, China^{*, †}



November 7-9, 2008
Dubai, United Arab Emirates^{*, †}



June 2009§
Bangkok, Thailand^{*, †}



November 14-16, 2008
Tokyo, Japan^{*, †}



July 2009§
Singapore^{*, †}



* Written examination of the American Board of Anti-Aging & Regenerative Medicine (ABAARM) and the American Board of Anti-Aging Health Practitioners (ABAHP) to be administered at this venue.

** Oral examination of the American Board of Anti-Aging & Regenerative Medicine (ABAARM) to be administered at this venue.

† Written examination of the American College of Anti-Aging Sports Medicine Professionals (ACASP) to be administered at this venue.
§ Pending.

This depiction is for illustrative purposes only. Find information on upcoming conferences at:
www.worldhealth.net





Conference Program

16th Annual World Congress on *Anti-Aging Medicine & Regenerative Biomedical Technologies*

July 17-19, 2008 | *Gaylord Natuional Resort & Convention Center, Washington, DC*

ACCREDITATION STATEMENT

Up to 44 Hours AMA PRA Category 1 credit

ACCREDITATION: The Medical Educator Consortium, is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

CREDIT HOURS: The Medical Educator Consortium, designates this educational activity for a maximum of 44.0 hours of category 1 in category 1 towards the AMA Physician's Recognition award.

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of MEC and A4M. MEC is accredited by the ACCME to provide continuing medical education for physicians.

FACULTY DISCLOSURE STATEMENT: The Medical Educator Consortium, Inc. in accordance with accreditation requirements will disclose any significant financial interest or other relationship with the manufacturer(s) of any commercial product (s) and/or provider(s) of commercial services discussed in an educational presentation and with any commercial supporters of the activity.



The Medical Educator Consortium

Consult the Show Guide appearing in this issue of Anti-Aging Medical News for information about the Washington DC Anti-Aging Exposition. The Washington D.C. Anti-Aging Exposition is produced and managed by Medical Conferences International Inc.

Refer to the Program Schedule, available on-site at the 16th Annual World Congress on Anti-Aging Medicine's Summer 2008 Session, for the latest available Schedule and related Program information.

SCIENTIFIC CONFERENCE CO-SPONSORED BY:



CERTIFICATION BY:



COMMERCIAL WORKSHOPS & SPECIAL EVENTS

WASHINGTON '08

All Special Events take place at Gaylord National Resort & Convention Center, Washington, D.C.
Consult the Program Schedule available on-site for the room locations.

THURSDAY, JULY 17, 2008

► NETWORKING EVENT FOR ATTENDEES & EXHIBITORS:

Time: 5:30 pm - 7:30 pm

Room: **EXHIBITS OPEN**

► HOW TO OPEN A SUCCESSFUL ANTI-AGING PRACTICE USING: BIO-IDENTICAL HORMONE REPLACEMENT - MARKETING - TAKE SHAPE FOR LIFE WEIGHT LOSS PROGRAM - ANTI-AGING FELLOWSHIPS. MARKETING YOUR PRACTICE. BODYLOGIC MD. REFERRAL PROGRAMS. *These are the latest concepts of adding profit to your practice!*

Time: 7:30 pm - 8:30 pm Speakers: **John Grasela RPH, Pamela Smith MD, Ron Rothenberg MD, Patrick Savage**

FRIDAY, JULY 18, 2008

► THE USE OF ANTI-AGING DIAGNOSTICS TOOLS, INTERPRETATION & CLINICAL INTERVENTIONS

Presented by AGE DIAGNOSTIC LABORATORIES

Time: 6:00 pm - 9:00 pm Speaker: **Bill Anton, Ph.D**

► AESTHETIC MEDICINE: ANTI-AGING THERAPIES AND TATTOO REMOVAL WITH NEXT GENERATION Q-SWITCHED LASERS

Presented by HOYA CONBIO

Time: 3:00 pm - 4:00 pm Speakers: **Dr. Will Kirby from E! Entertainment's Dr. 90210 and Dr. Bruce Saal**

► AESTHETIC MEDICINE: THE FIVE DIMENSIONS OF SKIN REJUVENATION

Presented by SCITON

Time: 6:00 pm - 7:00 pm Speakers: **Barry Citron, MD**

► AESTHETIC MEDICINE: BODY CONTOURING WITH VELA SHAPE

Presented by SYNERON

Time: 7:00 pm - 8:00 pm Speakers: **John Shieh, MD, Janette Daher**

► AESTHETIC MEDICINE: BRIDGE THERAPY

Presented by LUMENIS

Time: 7:00 pm - 8:00 pm Speakers: **TBA**

► IONIC CURRENTS: THE SPARK OF LIFE

Presented by USA PERFECTOR

Time: 6:00 pm - 9:00 pm Speakers: **Xanya Sofra-Weiss, Ph.D**

► NEW LOOK AT ANTI-AGING THROUGH GENOMICS

Presented by AMINOCARE

Time: 6:00 pm - 9:00 pm Speakers: **Azad Rastegar, B.A**

► STEM CELLS AND GROWTH FACTOR HORMONES

Presented by KRS GLOBAL

Time: 6:00 pm - 9:00 pm Speakers: **Ron Rothenburg, MD**

► DYNAMIC AND REAL-TIME THERMAL IMAGING

Presented by MED HOT THERMAL IMAGING, INC

Time: 6:00 pm - 9:00 pm Speakers: **Jeanne Stryke, MD, Jay Mead, MD**

► THE POWER OF THE COMBINED APPROACH - AESTHETIC & ANTI-AGING MEDICINE

Presented by OPTIMAL HEALTH INSTITUTE / DOCTORS EXPRESS

Time: 6:00 pm - 9:00 pm Speakers: **Paul Lin Tai, MD, Alex Desouza, MD**

► SECRETAGOGUES AND THE SOMATOPAUSE: A PITUITARY-BASED APPROACH TO GHRT IN COMPLIANCE WITH FEDERAL LAW

Presented by KRS GLOBAL BIOTECHNOLOGY

Time: 6:00 pm - 9:00 pm Speaker: **Richard F. Walker, PhD, RPh.**

SATURDAY, JULY 19, 2008

► HOW TO OPEN A TURN KEY WEIGHT MANAGEMENT PROGRAM

Weight management is age management. 67% of your patient base is overweight. Where will you send them? Learn the simple steps to incorporate a science-based, highly effective fat loss program into your practice while earning a generous compliance package.

Time: 3:00 pm - 4:00 pm Speakers: **Kim Ruby, CN**

BOARD CERTIFICATION

Establish Your Expertise as a Certified Anti-Aging Health Professional

► CERTIFICATION FROM THE AMERICAN BOARD OF ANTI-AGING MEDICINE /REGENERATIVE MEDICINE (ABAARM)

ABAARM was established in 1997 as a professional physician (MD, DO, MBBS) certification and review board which offers physicians recognition in the form of a specialty based examination in anti-aging medicine.

ABAARM/ABAAHP (Part I- Written) Review Course

July 17, 2008 from 7:00 pm- 9:30pm

Gaylord National Resort & Convention Center,
Washington, DC USA (check with Board Registrar or
A4M Service Area for exact room assignment)



ABAARM (Part II- Oral) Review Course

July 16, 2008 from 7:00 pm – 9:30 pm

Gaylord National Resort & Convention Center,
Washington, DC USA (check with Board Registrar or
A4M Service Area for exact room assignment)

ABAARM Written Examination

July 19, 2008 form 1:00 pm – 5:00 pm

Gaylord National Resort & Convention Center,
Washington, DC USA (check with Board Registrar or
A4M Service Area for exact room assignment)

ABAARM Oral Examination

July 17-18, 2008

Gaylord National Resort & Convention Center, Washington,
DC USA (check with Board Registrar or A4M Service Area
for exact room assignment and to confirm examination time)

► CERTIFICATION FROM THE AMERICAN BOARD OF ANTI-AGING HEALTH PRACTITIONERS (ABAAHP)

ABAAHP, established in 1999, provides recognition and specialty representation for healthcare professionals, including Doctors of Chiropractic (DC), Doctors of Dentistry (DDS), Naturopathic Doctors (ND), Podiatric Doctors (DPM), Registered Pharmacists (RPh), academic researchers (PhD), nurses (RN), physician assistants (PA), and nurse practitioners (NP), Acupuncturists.

ABAARM/ABAAHP (Written) Review Course

July 17, 2008 from 7:00 pm- 9:30pm

Gaylord National Resort & Convention Center, Washington, DC USA (check with Board Registrar or A4M
Service Area for exact room assignment)

ABAAHP Written Examination

July 19, 2008 from 1:00 pm- 5:00pm

Gaylord National Resort & Convention Center, Washington, DC USA (check with Board Registrar or A4M
Service Area for exact room assignment)



SPORTS MEDICINE CERTIFICATE PROGRAM

For Health Professionals Involved in the Sports Medicine Specialty

The American College of Anti-Aging Sports Medicine Professionals (ACASP) Certificate and Workshop Programs are a specialized Certificate program in conjunction with medical organizations to allow health professionals to learn the latest in preventative medicine, integrative medicine, anti-aging medicine, and longevity medicine and integrate this into their sports medicine practice. The first such certificate will be in **Anti-Aging Sports Medicine & Rehabilitation**.

Workshop Program: Takes place in conjunction with the 16th Annual International Congress on Anti-Aging Medicine and Regenerative Biomedical Technologies' Summer 2008 Session:

- July 17-18, 2008 8:00 AM – 5:30 PM



Certificate Examination of The American College of Anti-Aging Sports Medicine Professionals (ACASP):

- July 19, 2008 1:00 PM – 5:00 PM

Gaylord National Resort & Convention Center, Washington D.C., USA (check with Board Registrar or A4M Service Area for exact room assignment).

To learn more about Board Certification/Certificate Programs of the American Academy of Anti-Aging Medicine, visit www.worldhealth.net, click on "Certifications." For inquiries, please call Board Registrar at 773-528-1000 [ABAARM] or (773) 528-4333 [ACASP], or send email to exam@worldhealth.net.

Practice Highlights



HARVEY MONTIJO, M.D

I am Harvey Montijo, M.D., an Orthopedic Surgeon, and my initial premise was to evaluate and learn about hormonal replacement for the management of Osteoporosis. I just happened to stumble on the A4M website and attended the April 2007 conference in Orlando. It was at this conference that I met Heidi Pepper. I enjoyed the conference so much and became very intrigued to pursue this further through joining the Fellowship Program. On a professional basis, the experience and the information learned throughout the different modules has broadened my treatment modalities of my orthopedic patients such as management of chronic pain, fibromyalgia and osteoporosis and perioperative support. I am also able to now initiate a new Anti-Aging and Regenerative Practice concurrent to my existing orthopedic practice. On a personal note, for my own personal health, it has been a dramatic turnaround. I have been able to treat my undiagnosed hypothyroidism and stress management, especially while overseeing and managing a 20 physician orthopedic practice. I have applied the same information learned the past two years from the conferences and the modules for my personal well being. I strongly recommend the Fellowship Program for any physician looking to provide top of the line preventive care to their patients!



GLORIA HAKKARAINEN, M.D., F.A.C.O.G., F.A.S.B.P., F.A.B.A.A.M.

Being a board certified OB/GYN, I was surprised at how difficult it was to recover from severe pre-eclampsia. Motivated to study further, I became boarded in Bariatrics as well as Anti-Aging to help both my patients and myself achieve a healthy lifestyle and reduce risk of disease.

The big leap where vision becomes reality came when I opened Palm Beach Weight and Wellness as an adjunct to my gynecology office. Located in the same building, patients easily converted to our integrative approach of 'total wellness.' We have built a reputation as a progressive, evidence-based medical facility with a comprehensive program for ultimate health.

Whether the patient is seeing a physician, a dietitian, acupuncturist, massage therapist or working toward better fitness in our private fitness studio, the atmosphere is charged with friendly enthusiastic specialists and staff. The IV infusion programs and significant testing we provide enable patients to understand the importance of maintaining good nutrition, reducing toxins and obtaining balanced hormonal levels.

Most importantly, we teach over 40 different classes for patients in our comfortable conference room. The education we provide leads to long term success and wiser choices, spreading our reach well beyond the individual and back to their families, friends and co-workers.



GARY NEWTON, BS PHARM, FACA, MS(CA)

My interest in A4M began when, at PCCA, Dr. Pamela Smith mentioned a Masters Degree program. I had no knowledge of Anti-Aging or of a Module. A call from Heidi Pepper, received while police were dusting our home for fingerprints of a criminal who had broken in an hour previously, soon had me registered for five modules and the beginning of what is the experience of a professional lifetime. Soon, I found myself in a crowded room of medical professionals with Dr. Eldred Taylor the only familiar face. In ensuing months, I have become familiar with prominent speakers/authors in functional medicine, personally asked them questions, occasionally later sent an E-Mail question, and read "lots" of books. The cost in time alone has been monumental but the value of knowledge gained has benefited my personal health more than the expense of any sacrifice. After completing the required modules, I will continue attending conferences for the wealth of knowledge acquired.

Meanwhile at our compounding only pharmacy, I am more confident that I will never need third party. I have been able to help numerous patients, who considered untreatable, were referred by their physician, others who do not want NDC drugs, and want to, with me, live and be healthy for 120 years. I am sponsoring prescribers in A4M and together we are making a difference. Prescription Center staff now includes a ND and a PhD in nutrition, in addition to pharmacists and veterinary pharmacists.



LISA SAFT KOCHÉ, M.D.

In medical school I decided that my true passion was to attempt to prevent diseases (as opposed to treating the symptoms after the fact). Given that my principal interest was in cardiovascular disease prevention, when I completed my residency, I joined a group of cardiologists as an internal medicine physician specializing in prevention with a focus on obesity.

With the assistance of a bariatric surgeon, I developed a state of the art program for medical and pre- and post-surgical care of patients with a team of providers including nutritionists, psychologists, and exercise physiologists. The program later became one of the first JCHACO accredited programs in the country.

I also pursued additional board training in bariatrics. During this bariatric training, I became exposed to pharmaceutical grade supplements and how they may benefit so many different health issues. When I incorporated nutrients in my primary care and weight loss practice, I was intrigued by the results.

Over the next few years I became increasingly disenchanted with traditional medicine. I was, like many internists, tired of seeing patients with multiple problems being put on more and more prescription medications with no long-term benefits. Moreover, I was concerned that certain of my overweight patients, who were compliant with exercise and dietary recommendations, were not losing at the rate I thought that they should without medications. Accordingly, I signed up for the board certification program through the A4M, and needless to say, I was impressed by the amount of data and stimulating information at the conference and I haven't looked back since. My practice has morphed from a weight loss practice into a wellness practice that incorporates lifestyle modification and emerging and alternative treatment methodologies (saliva hormone testing, intravenous vitamin therapy, aggressive thyroid treatment, etc.). I have successfully implemented wellness programs not just for individuals but for some of Tampa's largest corporations.



MICHAEL LEE, M.D.

As an academican for most of my medical career, I had never been exposed to anti-aging medicine. One day a friend, a fellow Ob/Gyn, told me about the A4M. I attended the A4M conference in Orlando with him, and I was intrigued to say the least. This was a whole new world for me. Here I was an Assistant Professor at a major university, and I felt I had been deprived of practicing a type of medicine that could help so many. I was excited and delved head first into an exciting new adventure. I felt that in order to do this right, I should enroll in the Fellowship. Only after completing the fellowship modules and the board certification process did I feel ready to practice the art of anti-aging medicine. So, three years later, as a BodyLogicMD physician, I am practicing the type of medicine that is so exciting and helps so many.



JOSE VAZQUEZ-TANUS, M.D., F.A.C.A., F.A.S.A.

After 15 years of practicing interventional, diagnostic invasive and non-invasive cardiology, and participating in over 30 Phase II, III & postmarketing clinical trials with multiple pharmaceutical companies as principal investigator for Research & Cardiovascular Center in PR, I was favorably impressed by the American Academy of Anti Aging Medicine, especially the quality of the speakers and the highly advanced topics presented in all the conventions. I reviewed the content of the Fellowship program and how the aging process is the real etiology of all the chronic degenerative diseases, then I decided - this is for me! These people have a vision! JOIN THEM! I have now changed the orientation of my practice from an old fashioned patient oriented to a vital, integrative, dynamic, and truly living medical practice projecting QUALITY OF LIFE and offering my patients how to be young again, how to stop the clock and live a mentally, physically and sexually active life. I strongly recommend the 4AM as the leader in Anti-Aging, Regenerative & Functional Medicine.



CARLOS A. BALDWIN, M.D.

Anti-Aging Medicine took me from treating illness to promoting wellness. I felt frustrated by not having much to offer my patients with chronic illness. Now I understand that poor nutrition, lack of exercise, a stressful lifestyle, a weakened immune system and declines in levels of hormones are a few of the contributing factors. However, the greatest gift that Anti-Aging Medicine has given me is my Mother. "I got my Mother back!" She is 85 years old, and she had: osteoarthritis, depression, high blood pressure, Parkinson Disease, and she did not want to go out of her room. She was afraid of being among people. She had no appetite. Since I started Anti-Aging Medicine 4 years ago, I have been using her as my "guinea pig". I started her Anti-Aging Program with: nutrients, diet, exercise, total hormonal replacement therapy with natural bio-identical hormone and I got a new Mother! Now she likes to go out, meet people, she reduced her Parkinson's and blood pressure medications and stopped anti-depressants. Stairs are no longer a problem. She enjoys cooking and brings me new patients, who tell me to give them what I gave my Mother. She is just a different Mom!



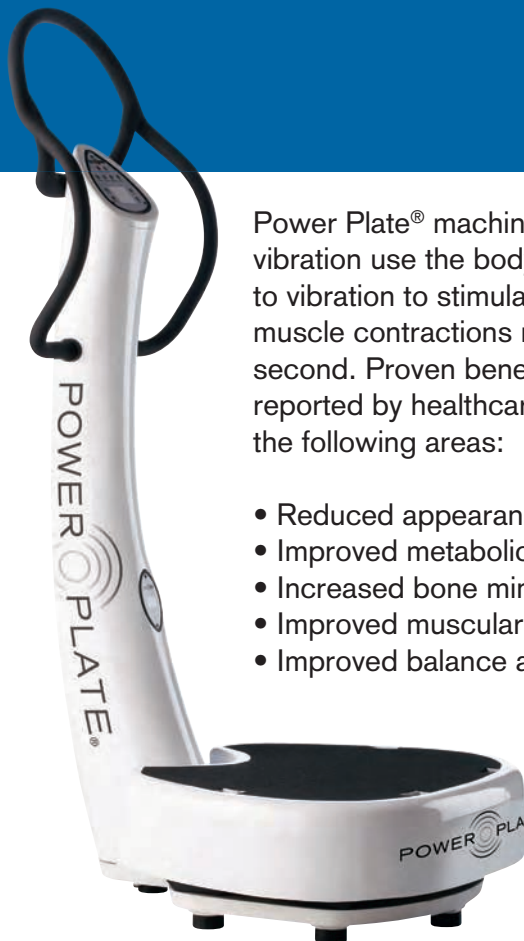
LEE BLACKWOOD, D.C.

As a Doctor of Chiropractic and a practitioner in nutritional therapies, there are many educational roads to pursue when I am looking to enhance my skills as a health care professional. What has worked the best for me and my practice is to develop relationships with my patients and to clearly identify their needs.

In practice since 1994, what I have noticed the most about my patients' questions is an increase in their concern for overall beneficial health, not simply pain relief. Chiropractic is founded on creating balance in the body, that includes structural, neurological, nutritional and lifestyle. My patients want to learn, not only how to live a long life, but to live a long life of health, energy and vitality. Teaching patients to make proper lifestyle choices is becoming a larger and larger part of my practice.

By becoming certified through the A4M, I now have access to the information that will build upon the chiropractic philosophy of correct joint alignment, exercise and nutrition, and further enhance the foundation and balance philosophy of health. I now have a higher level of technical excellence based upon state of the art anti-aging protocols and more. Additionally, through my association with the A4M, I am continually introduced to the latest research and technology and like-minded health professionals in anti-aging medicine. This cutting edge education sets me apart, and my patients know this and appreciate what I bring to the table.

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Call For PAPERS

2008 Academic Program



The American Academy of Anti-Aging Medicine (A4M) Conference Program Committee would like to invite you to submit an abstract for poster presentation and/or for speaking at the 16th Annual World Congress on Anti-Aging Medicine & Regenerative Biomedical Technologies.

All abstracts should be focused on clinical interventions and be applicable to the specialty of Anti-Aging Medicine. Those articles that focus on current events in disease and society will be given priority. All content should be absent of commercial statements and/or product endorsement. Please include a minimum of 4 references.

The Conference will be held as follows:

December 11-14, 2008 – Las Vegas, Nevada

SUBMISSION DEADLINE: July 30, 2008

We are currently in the process of completing the program for this internationally acclaimed event that will draw thousands of Participants, 600+ Exhibitors, 110+ Presentations, 75+ International Speakers, 14+ Hands-on/Live Demo Workshops and several free Evening Workshops.

Once received, your abstract and application will be reviewed by the A4M Program Committee and a decision will be communicated to you shortly thereafter.

For submission guidelines please visit our website at [http://www.worldhealth.net /pdf/SpeakerSubmissionGuidelines.pdf](http://www.worldhealth.net/pdf/SpeakerSubmissionGuidelines.pdf). Please send all of the required materials to **program@worldhealth.net**. Please specify the name of the event you are applying for.

Thank you,

A4M Scientific Program Committee

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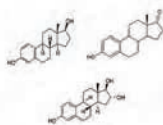
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Medical Director, Millennium Health Centers, Inc.

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Saliva Hormone Testing for Anti-Aging

By Dr. Paul Ling Tai, DPM, FACFS, ABPS

INTRODUCTION

It is absolutely clear the human body produces many different active and powerful hormones. These chemical messengers regulate virtually every body's function, from the organization of thoughts and memory in our brain, to the beating of our hearts, to the production of energy in every cell of our body and the elasticity, health and youthfulness of our skin. In other words, hormones keep us young, full of energy, vitality, sharp and sexy.

Hormone deficiencies affect over 50 million women and over 40 million men in the US alone. As physicians with special attention to Anti-Aging medicine, our therapeutic program generally starts with hormone testing of the patient to establish a baseline or check on follow-up studies keeping track of dosage administration.

As we age, however, our hormones go through a gradual and steady descent. The endocrine and sexual glands gradually produce fewer hormones than they once did, changing us from vital, active individuals to slower, weaker ones. In fact, every 10 years after the age of 20, we lose 15 percent of our hormones. A 70 year-old woman, for example, may lose up to 75 percent of her natural hormones.¹ With 78.2 million baby boomers turning over 60 in mass numbers in the United States alone,² hormone deficiencies may play a larger role in health problems than we previously thought.

DIFFERENT FORMS OF HORMONES IN THE BODY

More than 95 percent of the hormones in our bloodstream are bound hormones, therefore, are biologically inactive and don't help the body stay vital and active as it ages. These are glycoproteins that loosely bound to albumin and tightly bound to cortisol binding globulins (CBG), sex hormone-binding globulins (SHBG), testosterone and all forms of estrogen. The remaining hormones in our bloodstream--a tiny fraction--are called unbound or free hormones, which are readily available for the receptors of organs and tissues. They are, in fact, the only hormones our bodies can use.

PHYSIOLOGY OF SALIVA PRODUCTION

Saliva is produced by three major glands: The parotid gland, the sublingual gland and the submandibular gland. The parotid is located in front of the ears on the lateral portion of the mandible and produces 30 percent to 40 percent of our saliva (70 percent when stimulated). The sublingual is located within the oral cavity underneath the tongue and produces 25 percent of our saliva (50 percent to 70 percent when stimulated with food). The submandibular is located under the jaw and produces only about 5 percent of our saliva. An average person produces about 1.5 liters of saliva per day. But as we age, saliva production decreases to less than 0.5 liters per day,

possibly due to salivary gland atrophy and hormonal imbalance.

Saliva is produced when blood (possessing hormones, both bound and free) and lymphatic components pass through membrane barriers on their way to the glands. According to Vining and McGinley, "Unconjugated plasma steroids, such as estradiol, testosterone, progesterone and other related steroids, are able to cross the salivary gland wall and to diffuse to saliva regardless of the salivary flow rate."³

How can these hormones cross the salivary gland wall? Any hormone less than 1,900 molecular weight (MW) can penetrate the filtration membrane. Hormones, such as testosterone, DHEA, cortisol and melatonin typically weigh 300 MW. The average albumin weighs 66,000 mw, a CBG approximately 50,000 MW and a SHBG sex hormone 115,000 MW. These are much too heavy to breach the membrane barriers, leaving only the free hormones to cross over and enter the saliva with ease. So it's clear that active and free hormones are constantly present in our saliva: Testosterone, Estrone, Estradiol, Estriol, Cortisol, Melatonin, DHEA, and Progesterone.

SALIVA TESTING TECHNOLOGY

Saliva hormone testing is a relatively new technology. It's only been used in the last 20 years and is beginning to be accepted by the medical community. Saliva

continued on **next page**

testing also is not readily available in many laboratories. The good news is that saliva collection is noninvasive, painless, relatively inexpensive and convenient for the patient. Saliva hormone testing, in fact, may increase accuracy by directly measuring biologically active or free hormones, which can be gathered by the patient without the assistance of a professional. Patients should take five samples of their saliva throughout the day to obtain an average of free hormones in the body.

When comparing saliva and serum methods, published studies have shown that a saliva sample is much more accurate than a serum sample.⁴ It is a reliable marker of testosterone bioavailability,⁵ principally for very low levels. (Serum tests are often unreliable in this area.) Saliva testing also can measure hormones, such as testosterone in women or children, and estrogen in men.⁶

In one study, 50 men, 55 women and 11 children were measured for serum testosterone by immunoassays and isotope-dilution gas chromatography spectrometry. None of the serum samples from the women and children were sufficiently reliable, in whom low (< 1.7 nmol/L) and very low (0.17nmol/L) levels of testosterone are common.⁷

8 PRINCIPLES FOR ACCURATE SALIVA HORMONE TESTING

With proper education about the suitable methods of collecting and storing samples, we can ensure the accuracy and reliability of saliva testing.

Principle #1. Hormone Cycles

Be aware of significant natural ebb and flows of hormone production, such as during the menstrual cycle. For example, high estrogen levels occur during ovulation, and high progesterone levels circulate through the body around the 21st day of the menstrual cycle. When measuring hormones, we should always take exercise, medication, illness, and other factors affecting changes in hormone levels into consideration.

Principle #2. Multiple Samples

Hormones are produced in high levels of pulsatility and squirts on regular intervals, usually higher in the morning and dropping throughout the day except for melatonin. Our clinical experience shows that five test samples give us an average of about 80 percent accuracy, while single sample collections at random reflects only a 20 percent

or lower rate of accuracy. The first sample should be collected in the morning exactly one hour after waking, with the remaining four samples collected every three hours after the last sample is collected. For greater hormone testing accuracy, all five samples must be gathered three hours apart.

Principle #3. Proper Sample Gathering Utensils

Cotton swabs should never be used when collecting a sample. Cotton salivettes, which are balls of cotton with cotton strings attached, result in lower cortisol values. Cotton probably contains substances that interact with cortisol and binds hormones. This makes the cortisol unavailable for measuring. Spitting directly into the container using a small straw is preferred.

Principle #4. Contamination in Saliva Sample

Before collecting saliva samples, patients must remember to wash their hands thoroughly with soap and water and use disposable gloves. Possible contamination will affect the accuracy of the test.

Principle #5. Food Contamination

Food contamination in the sample may cause inaccuracy. To avoid this, patients should rinse their mouths with clear water right after eating or drinking, and should not eat or drink one hour before a saliva sample collection. Rinsing the mouth with clear water 15 minutes before a saliva sample is acceptable.

Principle #6. Blood Contamination

Blood in the saliva sample, from bleeding gums to mouth sores, can contaminate the sample. The rejection point of contamination is when blood leaves a red tinge in the saliva specimen. To avoid blood in the saliva, patients should not brush or floss their teeth before collecting a saliva sample.

Principle #7. Proper Sample Collection Containers

A saliva sample can be soiled by improper collection containers--the most common of all contamination mistakes. Because saliva hormones are small molecules and have a static electric charge, they tend to stick to plastic materials that have the opposite electric charge, such as polyethylene. The best plastic material seems to be ultra-pure polypropylene and polystyrene-- not recycled plastic--which does not bind the saliva hormone.

Polyethylene tubes and stoppers highly absorb free hormones, especially progesterone. Therefore, they can absorb up to 87 percent of progesterone on the walls of the

container. Glass seems to be best because it's completely absorption free. But it's not always practical because it can break during transport.

Principle #8. Cortisol Levels Studies

Using a blood test for Cortisol levels may give inaccurate and false report on stress, chronic fatigue, and obesity; the venipuncture itself represents a severe stress factor to many patients and result in false laboratory readings. It is nearly impossible to get a correlation of blood sample Cortisol levels to a physical or psychological stress events because no one can predict when or where these stress events are going to happen, nor will someone be available to draw blood samples during the specific challenge event.

SUMMARY

Saliva testing is unique because it's easy and convenient. Multiple samples are gathered, which improves the chances of accuracy. Furthermore, saliva testing directly measures free hormone levels. It's also more accurate when measuring very low levels of free hormones.⁸

Accurately measuring free hormone levels is essential to diagnosing, planning and maintaining proper treatment, as well as balancing hormones for total health. ♦

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► **DR. PAUL LING TAI** is a trained Podiatric medical physician and Board certified surgeon with expertise in herbal compound engineering, research and development and nine (9) patents credited to his name. A professor in the NYCPM's Department of Integrative Medicine, member of the International Hormone Society, the World Society of Anti Aging Medicine, and faculty member of American Academy of Anti Aging Medicine, Dr. Tai has helped and consulted countless of doctors with his breakthrough technologies in Anti Aging and authored 2 books - "Cordyceps Miracles" and "8 Powerful Secrets to Antiaging".

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ADVANCES IN BODY RADIOSURGERY

Gil Lederman, MD

Often cancer treatment has profound adverse effects on healthy tissues. We report a new approach that is proven, focused, generally well-tolerated and non-invasive.

Standard radiation administers significant doses to the surrounding tissues. In children, this impairs bone growth and development of vital organs. In adults, unnecessary radiation to critical structures can affect blood vessels and function of many diverse organs causing premature aging and damage.

We developed non-invasive Stereotactic Body Radiosurgery in an effort to produce better tumor control in the target site—potentially most anywhere in the body--while minimizing adverse effects and unnecessary radiation to large volumes of healthy tissues. Over the last two decades our group has continued to be a leader in the field of stereotactic radiosurgery, treating newly diagnosed patients with primary and metastatic cancers with high control rates (about 80 to 90%) in the targeted zone, as well as the retreatment of patients for whom chemotherapy, surgery, or standard radiation did not produce the desired control.

Advanced stereotactic radiosurgery for newly diagnosed, as well as recurrent, primary, and metastatic cancers may be suitable for those seeking this technology.

AMINO ACID DETOXIFICATION PROTOCOLS

Jared Skowron, ND

Amino Acids are an essential part of detoxification pathways in the body. Many chronically ill people are deficient in certain amino acids due to poor diet, pharmaceuticals which decrease protein digestion, GI inflammation which decreases absorption, and GI dysbiosis which increases renal amino wasting. Therapeutic protocols will be reviewed to increase patient detoxification, as well as amino acid review to improve other patient concerns which are consequences of toxic burden: depression, fibromyalgia, headaches, insomnia, tremors, cognitive function, chronic fatigue, and IBS.

GOALS AND OBJECTIVES

- Review biochemistry of detoxification pathways involving amino acids.
- Review therapeutics of amino acids in those with toxic burden, IBS, mood issues, CFS, insomnia, and fibromyalgia.
- Review laboratory interpretation of amino acids and metabolites.

ANTI-PHOTOAGING BY ASTAXANTHIN FOR SKIN

Eiji Yamashita

Singlet oxygen quenching activities among common hydrophilic and lipophilic antioxidants such as polyphenols, tocopherols, carotenoids, ascorbic acid, coenzyme Q10 and α -lipoic acid were recorded under the same test condition in DMF:CDCl₃ (9:1). Carotenoids exhibited larger total quenching rate constants than other antioxidants, with astaxanthin showing the strongest activity. α -Tocopherol and α -lipoic acid showed considerable activities, whereas the activities of ascorbic acid, CoQ10 and polyphenols were only slight; these included capsaicin, probucol, edaravon, BHT and Trolox. Three clinical studies examined the external and internal effects of astaxanthin derived from the microalgae, *Haematococcus pluvialis* on human skin. A pilot study, the skin repeated topical application test of the cream containing astaxanthin showed the significant increase of moisture levels (n=11) and the visual wrinkle reduction after four week-application (n=3). A double blind placebo controlled study using a dietary supplement containing astaxanthin and tocotrienol from palm oil for four weeks showed skin moisture increasing and wrinkle improving (n=16). The effects of a dietary supplement containing astaxanthin on human skin condition were also investigated in a single blind placebo controlled study. Astaxanthin supplementation as a daily dosage (n=28) after six weeks significantly improved fine lines/wrinkles, elasticity and moisture content compared to placebo (n=21). These results suggest that astaxanthin can protect the fresh collagen from singlet oxygen induced by UV. In summary, astaxanthin showed a superior protection effect on photoaging by either external or internal administration for human skin.

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GOALS & OBJECTIVES

- Prevention of photoaging by astaxanthin administration
- Evaluation of singlet oxygen quenching activities among common hydrophilic and lipophilic antioxidants, 3. Evaluation of cosmeceutical effects of astaxanthin by topical use on human skin, Evaluation of cosmeceutical effects of astaxanthin by internal use on human skin.

AUTOLOGOUS WHITE BLOOD CELLS TRANSFUSION: TOWARDS A YOUNGER IMMUNITY!

Dominique Charron, MD, PhD

More and more cells and tissues from human origin are considered as a unique medical bioresource and are instrumental in the ongoing development of regenerative medicine. Although a better understanding of the genetic complexity of the major histocompatibility complex has contributed to develop allogeneic hematopoietic stem cell transplantation, the autologous setting was early on only viewed as a mean to overcome myelodepression.

Regenerative medical practice now envisions the infusion of autologous hematopoietic stem cell (HSC) and WBC as the means to enhance the immune response of immunosuppressed patients, including elderly individuals, to regenerate their immunity and improve their survival.

The contribution of the immune system for adoptive immunotherapy was recognized in the 1990's when donor lymphocyte infusion demonstrated an antileukemic effect of the transfused T cells. This led to the foundation and development of adoptive immunotherapy in the treatment and prevention of infectious diseases and cancer.

Autologous WBC, especially T cells and dendritic cells (DC), are increasingly used in adoptive anticancer immunotherapy. In addition, natural killer (NK) cells have been shown to mediate anti-tumor responses in the context of allogeneic bone marrow transplantation, and may be used in autologous settings. Moreover DC and B cells are often used to expand T cells that are subsequently infused for therapeutic purposes.

From a global survey of the literature from 1990 to the present, it has been shown that there is a tremendous increase of reports dealing with the use of immune cells in anticancer trials. (Sadelain, M. et al. submitted). T cell subsets and DC have been confirmed as being the focus of efforts to develop therapeutic protocols. Melanoma, renal carcinoma, lymphoma, leukaemia and gliomas are the most commonly cited cancers targeted in these trials.

The recognition that the immune system is undergoing a progressive decline and deterioration with age introduces a new challenge. Immunosenescence results in a well-documented increase incidence and severity of infections, impaired responses to vaccines and development of cancer.

Nevertheless, only a change in paradigm will lead to view the long-term storage of autologous cells in anticipation of their use in restoring immune function and curing disease later in life. Indeed, the regular decline both quantitatively and qualitatively of the immune system during aging provides a rationale to consider that restoration of immunity would benefit from the availability of younger autologous WBC.

We propose and argue that autologous white blood cells collected and cryopreserved at a young age will represent a valuable bio-resource for the restoration of immunity and the successful development of adoptive immunotherapies in treating infections and cancer and will pave the way to anticipatory medicine.

The availability of cryo-preserved fresh, younger WBC will provide elderly patients with more vigorous immune responsiveness than their current immune cells can achieve. WBC transfusion may well impact health in the XXIth century to the same extent that RBC transfusion did during the XXth century.

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BIOELECTRICS AS CANCER TREATMENT

Stephen Beebe, PhD

Application of intense nanosecond pulsed electric fields (nsPEFs) to melanoma tumor cells in vitro and tumor tissue in vivo.

Cancer treatment requires new approaches beyond the uses of present modalities. A new and novel cancer treatment is a time-domain nanotechnology based on pulse power technology. This treatment generates non-ionizing radiation with nanosecond pulsed electric fields (nsPEFs or nanopulses). They differ from therapies that use drugs such as electrochemotherapy (ECT) or those that depend on temperature effects including cryotherapy or hyperthermia, such as radiofrequency ablation. Nanopulses convey ultra-short, intense electric fields to the tumor mass, but at such low energy density that thermal effects are negligible. Unlike conventional electroporation (EP), nanopulses affect intracellular structures and functions and have unique, non-EP effects on plasma membranes, resulting in activation of intracellular signal transduction mechanisms. These actions cause tumors to self-destruct by inducing apoptosis, a form of programmed cell death, and causing loss of vascular viability contributing to infarctive tumor death. They induce apoptosis by multiple mechanisms that do not necessarily need mitochondrial pathways where many cancer mutations exist and which is commonly required by chemotherapeutic agents. The application of nsPEFs is safe, has no systemic side effects, is non- or minimally invasive, leaves no scars, and provides an inexpensive and effective method to the arsenal for cancer treatment strategies.

GOALS & OBJECTIVES

- To define Bioelectrics as a new discipline with applications in cancer treatment.
- To describe the use of nanosecond pulsed electric fields (nsPEFs) as a new and novel Bioelectrics cancer treatment modality
- To differentiate nsPEFs from conventional electroporation and other modalities that depend on temperature effects
- To define the mechanisms of cancer cell and tumor death including induction of apoptosis and interruption of tumor blood supply contributing to infarctive effects.
- To emphasize the advantages of nanopulses for cancer treatment based on the ability to bypass many cancer mutations that prevent natural cell death by apoptosis

CANCER: MYTHS, MADNESS AND TRUTH, EDUCATION IS THE CURE

David R James ND, PhD

Objective: To provide a snapshot of the myths, madness and Nobel scientific truths,

About cancer, needing to be introduced everywhere, to usher in a new day of health, high productivity and a vibrant economy.

Design: Detailed studies of some key awards in Nobel Prize research, coupled with breakthrough advances in scientific research and instrumentation to abolish the guesswork in medicine.

Methods: By applying the most forward thinking science and research, it has been established that every cancer is a result of stress but needs different therapy in accordance with the history of the patient. By retracing and correcting this information, real health is now universally available.

Results: Information medicine has at last been able to identify the individuality of all people and thus prove that there is no 'cure-all' for all and that balancing factors have to be individually tailored to eliminate cancer as a disease.

Conclusion: Information science including Information medicine is proving to be the most exciting field of research, with so many differing facets, all of which will introduce a new day in medicine and at the same time give mankind a better understanding of matter, energy, life, health and aging.

CHRONIC EFFECTS OF GROWTH HORMONE DEFICIENCY ON QOL AND LEVELS OF DAYTIME SLEEPINESS

Victor Harding, MD, Michael Andrew Fairchild Harding, Victor Hunt Harding MD, Orlando, FL

The experiment was designed to determine the effects of growth hormone on quality of life and daytime sleepiness. This was achieved by first measuring the blood serum levels of Insulin-Like Growth Factor-1, the marker protein of Growth Hormone. The patients were given the Epworth sleepiness scale and the HR Quality of Life Scale during routine visits with their health care providers. The results of the experiment did support the hypothesis; that if the blood serum concentration of biological marker of Growth Hormone, Insulin-Like Growth Factor-1, is at least two-thirds of a standard deviation below the median of the population for an experimental group, then their quality of life shall be lower than that of a control group, and their daytime sleepiness shall be higher than that of the control group. The results of the experiment showed that the control group having the experimental mean of 10.642 \pm 8.482 HRQoL score points, 9.785 \pm 5.833 Epworth sleepiness score points, and 41.6 \pm 23.9 Harding Overall QoL score points while the control group had the experimental mean of 1.857 \pm 3.485 HRQoL score points, 5.714 \pm 2.498 Epworth sleepiness score points, and 15.6 \pm 9.3 Harding Overall QoL score points. The null hypothesis of N_0 treatment effect is supported because the P-Value of N_1 is $P \geq 0.0064$ for the combined Harding overall QoL score, a $P \geq 0.0086$ for the HRQoL score, and a $P \geq 0.048$ for the Epworth sleepiness score.

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CLINICAL RESEARCH DATA ON CORTISOL ABNORMALITY IN OBESITY, STRESS, HYPERTENSION & DIABETES

Paul Ling Tai, DPM, FACFS, ABPS

According to American primary care physicians, 75-90% of patients complain of stress-related disorders, resulting in one million Americans being absent from work every year. Dr. Tai's presentation on cortisol abnormality compares current hormone testing methods and proves that saliva testing is a highly accurate method when measuring cortisol abnormalities. Dr. Tai discusses how stress leads to atypical cortisol, which may lead to sleep abnormality, overweight, and obesity. Specific cortisol abnormalities in sport's overtraining syndrome are also noted. Finally, Dr. Tai reveals numerous studies and clinical data previously unavailable concerning the ability to detect a number of health problems by measuring existing cortisol levels.

GOALS & OBJECTIVES

- To discuss the importance of saliva hormone testing, and to explain saliva gathering techniques for improving hormone testing accuracy.
- To show the established normality of cortisol in the human body.
- To examine cortisol levels and their relationship with stress and burn-out, and how these stress levels are indicators to other health-related issues such as hypertension, fibromyalgia, asthma, and diabetes.
- To observe the link between cortisol levels and psychological stress and note how healthy and non-healthy persons produce and respond differently to cortisol during stress.



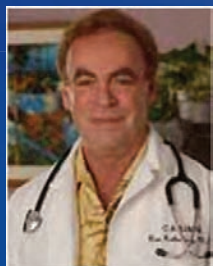
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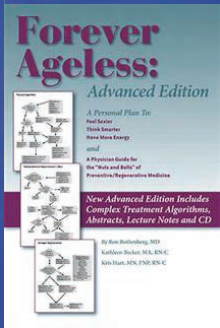
The Ron Rothenberg Protocol is a guarantee that the newest technology and our manufacturing experience working hand in hand will provide you and your patients with the best compounded pharmaceuticals, nutraceuticals and laboratory testing, giving you the results you can count on. Each lot is individually tested by an independent laboratory to ensure the highest quality pharmaceuticals every time.



Ron Rothenberg,
MD FACEP

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Preventive & Family
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Medicine; Board Certified
and former Board Examiner
American Board of Anti-
Aging Medicine; Board
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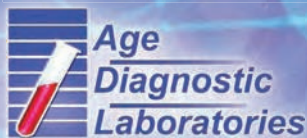


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- To examine the different levels of cortisol in well-trained vs. untrained individuals during physical activity, and the dangers of “every now and again” exercise in relation to improper cortisol levels.
- To note the connection and cause between normal cortisol levels in a healthy individual and the vastly different levels of cortisol in an overweight or obese individual.

DEPLETED URANIUM AND DETOXIFICATION

William Deagle, MD

‘The Good’ News for health span extension are embodied in seven categories of health and life span technologies opening to wellness and life extension providers on Earth. Some are developing now for everyday use, others are in advanced special boutique clinics. Still other technologies offer strong theoretical support for future basic and clinical research as we eliminate fragility in the elderly, extending wellness and health span and multiply life spans in the coming Century of Life. Seven technical hurdles will be overcome including, Cell Structural, Cell Energetics, Cell DNA Epigenetic, Brain and Systemic Neurohormonal, Reversing Sclerosis Fibrosis and Calcification, Stem Cell Mobilization Organ Tissue Rejuvenation, Toxin and Stealth Pathogen Elimination. Details of the three stages of clinical development for use in 2008 and on into a bright future of the remarkable goal of Zero Cellular Aging.

Challenges to Health Span and Life Span Extension include ‘The Bad and Ugly’ of CODEX ALIMENTARIUS WTO Food Rules including Food Irradiation, GMO Frankenfoods, Toxic Pesticides, Halide Biotoxins, Molecular Industrial and War Pollution, ELF Electromagnetic Scalar Epigenetic Pollution and NotSo Depleted Uranium nanoparticulates or “DNA Landmines”. Global Omnicidal Toxins will be discussed with solutions and pathways to resolution for Health and Life Span extension of mankind in a Toxic World.

New protocols and technologies for Health and Life Span Extension include Stem Cell Technologies from Ethical Bone Marrow and Umbilical Cord Stem Cells, Morphogenetic Field and Biophoton Epigenetic Gene Induction and Emergency Rescue and Rejuvenation Technologies.

THE EFFECT OF A COLOSTRUM EXTRACT OF PROLINE RICH POLYPEPTIDES (PRP) ON IMMUNE STATUS IN GUINEA PIGS AND ITS IMPLICATIONS ON THE POTENTIAL OF PRP IN AGING HUMANS

John Maher, DCCN

Proline Rich Polypeptides (PRP) are active immune modulating peptides found in all mammalian colostrum. In particular PRP are thought to modulate thymus function, specifically the T helper 1 / T helper 2 (Th1 / Th2) balance. Th1 and Th2 are classified on the basis of the cytokines they produce. To demonstrate the efficacy of PRP in lessening Th2 over-activity an experiment was performed on guinea pigs sensitized to egg protein. Exposure to egg protein resulted in development of acute phase bronchial spastic reaction in 100% of animals, 50% of whom died from suffocation. The duration of acute phase in the three surviving animals was 5 minutes on average. Introduction of PRP prior to egg protein inhalation resulted in death of only 2 animals out of 7 (28.6%). Development of bronchial spastic reaction on exposure to the antigen was completely blocked in the remaining 5 animals by PRP.

In humans the thymus is very sensitive to stress hormones (cortisol) which promotes Th2 over activity, favoring tumor growth, and lessens Th1 immunity, favoring infection. Cortisol / DHEA ratios favor cortisol over DHEA with aging.

This study supports the hypothesis that an understanding of the potential of PRP from colostrum to modulate thymus / immune function in humans may be of import to the antiaging health professional.

GOALS & OBJECTIVES

- To promote an understanding of the active immune peptides in colostrum called Proline Rich Polypeptides (PRP)
- To demonstrate the immune modulating potential of PRP in the animal hypersensitivity model
- To relate the potential immune modulating power of PRP to the health of humans who experience thymus / immune imbalance related to high cortisol levels found in stress and with aging.

ENERGY MEDICINE/FREQUENCY MEDICINE

James Oschman, PhD

A key to longevity is having a body that is able to respond quickly to inevitable injuries, whether large or small. One of the most significant areas of current biomedical research involves the inflammation hypothesis: the concept that virtually all diseases and disorders, including the so-called diseases of aging, arise because of focal chronic inflammation caused by injury or disease. Methods of resolving chronic inflammation have therefore become a subject of intense and careful investigation. Prolonged inflammatory processes involve the persistence of free radical damage. Free radicals can be neutralized by antioxidants. The presentation will summarize evidence that the ultimate antioxidant is not a molecule, but is the electron itself. Energy medicine involves the application of physical forces to the body: electricity, magnetism, light, sound, heat, and pressure. All of these forces stimulate the movements of free electrons within tissues, and therefore represent primary techniques for resolving chronic inflammation and restoring the body to optimal physiological balance. Moreover, movements of free electrons can stimulate the electron transport chains in mitochondria, resulting in increased synthesis of ATP. This additional effect of electron movements provides immune cells with the energy needed to migrate to injury sites and to destroy pathogens and cellular debris.

GLYCATION: DIABETES AND ACCELERATED AGING

Steven Joyal, MD

As type 2 diabetes, metabolic syndrome, and pre-diabetes reach epidemic levels, patients and physicians alike desperately need innovative strategies for prevention and treatment. In fact, there is an important link between the biochemistry of metabolic disease and accelerated aging. The biochemical phenomenon known as glycation is a critical factor in patients with diabetes as well as aging people interested in minimizing the impact of a key metabolic factor linked to accelerated aging. Unknown to many physicians and patients alike, certain cooking methods are an important, though often overlooked, source of dietary glycotoxins. By enhancing glycemic control with an integrative strategy including controlling both endogenous glycation as well as dietary intake of glycotoxins, we can modulate gene expression to favor metabolic health and minimize the impact of glycation on the aging process.

GOALS & OBJECTIVES

- Recognize the relationship between glycation and aging
- Understand strategies to minimize endogenous and exogenous glycation
- Understand the integrated approach used to reduce risk of diabetic complications (e.g. nephropathy, neuropathy, retinopathy) in diabetes.

HAIR RESTORATION: PRESERVING AND RESTORING THE AGING "FRAME" OF THE FACE

Alan J. Bauman, MD

Intro: Hereditary hair loss, considered by many as an outward sign of premature aging that can be 'seen from across the room,' currently affects an estimated 50 Million men and 30 Million women in the U.S. Approximately 40% of men in their 40's are experiencing hair loss and 50% of men in their 50's with over a billion dollars spent in the U.S. annually on treatments, 'cures' and cover-ups. However, recent advances in medical treatments and procedures offer men and women who suffer from hair loss safe and effective, truly viable methods of maintaining and/or restoring their own natural, living and growing hair. In the battle against visible signs of aging, hair transplantation is one of the most common cosmetic procedure for men according to the American Academy of Cosmetic Surgery (AACS 2005 Procedure Census Data, www.cosmeticsurgery.org) and the American Society of Plastic Surgeons (ASPS 2005 Statistics, www.plasticsurgery.org).

Objective: It is our goal to present an overview of the mechanisms of Androgenetic Alopecia (male pattern hair loss), diagnostic tools and treatment options that address its long and short term management, including non-chemical/non-invasive therapies, FDA-approved medications, and microsurgical hair transplantation

procedures, and future therapies (like hair multiplication / “hair cloning”). The evolution, benefits and limitations of each treatment modality will be discussed. In addition, the new genetic tests for assessing hereditary hair loss risks in men and women will be covered.

Materials/Methods: A hair restoration physician has a multi-therapy armamentarium which includes FDA-approved medical treatments (minoxidil, finasteride/Propecia), ultra-refined follicular-unit hair transplantation, complementary/alternative therapies (nutritional modification, low level laser therapy) and perhaps, eventually, hair multiplication (“hair cloning”). A variety of ‘before’ and ‘after’ photos will be presented.

Discussion/Results: Despite the availability of safe and effective treatments, too often in traditional medical practices (even in many dermatologists’ offices) the sometimes devastating psychological impact of hair loss for men and women is overlooked, ignored or minimized. No matter what the clinical setting and available resources, it is critical to dispense accurate information to patients who are suffering from hair loss and might seek hair restorative treatments.

Conclusion: Identification of those patients who have the motivation and desire to benefit from modern hair restoration treatments and procedures can be highly rewarding. Modern, effective hair treatments and procedures can restore patients’ confidence and self-esteem and have a positive impact on their social and business interactions.

HORMONE REPLACEMENT BY THE BOOK, GET OUT OF LINE

Eldred B. Taylor MD

BHRT is examined based on information found in THE gynecologic endocrine text book. This information will help you feel comfortable with BHRT despite the attacks against it.

Bio-identical Hormone Replacement is not *alternative medicine*. Bio-identical hormone replacement is 100% supported by the unquestioned authoritative textbook on gynecologic endocrine physiology (Clinical Gynecologic Endocrinology and Infertility by Leon Speroff MD et. al) . This lecture reinforces the fact that the restoration of normal balanced physiology will always produce a better long-term biological response than the introduction of non-physiologic drugs. This lecture will encourage you to break out of the line of physicians that are afraid to practice differently than how they were taught in residency or differently from their colleagues. I discovered that what I learned in my residency is *alternative* to normal physiology. I realized that what the leading authorities in my specialty endorsed and encouraged was *alternative* to normal physiology. I discovered that what is accepted as the “Standard of Care” is often *alternative* to physiology. At that point I decided to stop practicing *alternative* medicine and practice physiologic based medicine. I am on a crusade to make physiologic based medicine the central focus of medicine and not an alternative choice.

GOALS & OBJECTIVES

- Understand the definition of bio-identical hormone and their importance in physiology.
- The importance of properly measuring and balancing hormones to achieve the ultimate biological response.
- Show how properly measuring and balancing hormones will treat or cure most common hormone related conditions.

HOW TO CAPTURE THE MEDIA’S ATTENTION

Jackie Silver

How To Capture the Media’s Attention is an informative course on public relations (PR). The presentation will cover the difference between advertising and PR; explain the benefits of PR; and detail ways to obtain media coverage.

In How to Capture the Media’s Attention, you will learn the difference between advertising and public relations (PR) and how to utilize PR to gain visibility as well as credibility for your medical practice and/or product lines. As a television and radio correspondent with almost 30 years of experience, Jackie Silver has insights and information that will help you gain the attention you are seeking. She will provide tips, tools and resources that anyone can start using right away. In addition, she will give detailed explanations of what PR entails, including explanation of the specific type of writing for PR; how to prepare your pitches; how to speak in sound-bites; what goes inside a press kit; how to create a one-sheet that will attract attention; how to contact the

media; how to develop personal relationships with media people; when to contact the media; how to position yourself as an expert and more. You will leave the presentation with resources to make the whole process of PR easier and more rewarding.

GOALS & OBJECTIVES

- Clarify the difference between advertising and public relations
- Explain why public relations can be so important in establishing visibility and credibility
- Provide tips, tools and resources to enable anyone to capture the media's attention

IDENTIFYING AND TREATING THE ROOT CAUSES OF DEPRESSION, FATIGUE, AND MIGRAINE HEADACHE

Cass Nelson-Dooley, MS

Presentation Description Current treatments for depression, fatigue, and migraine headache fail to address the underlying causes of these conditions and usually require long-term medication without full resolution of symptoms. Laboratory testing of a patient's amino acids, neurotransmitter catabolic products, and food antibodies can be extremely helpful in efficiently treating the causes of these conditions. Abnormal amino acids and neurotransmitters have been associated with depression, migraine headache, violence, alcoholism, obsessive compulsive disorder, and fatigue. Foods can trigger migraine headaches and oligoantigenic diets have shown remarkable success in resolving migraine. Restoring immunological and neurological balance in patients relieves depression, decreases the frequency and severity of migraine headaches, and improves energy levels. Clinical cases will be presented with an emphasis on the biochemical patterns commonly seen in patients suffering with migraine headache, depression, and fatigue and how treating these biochemical abnormalities improves clinical outcomes.

continued on page 42

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GOALS & OBJECTIVES

- Identify the underlying causes of depression, migraine headache, and fatigue
- Determine when and why to test your patient's amino acids, neurotransmitter catabolites, or food antibodies
- Effectively interpret lab results and design your nutritional treatment plan for the patient with migraine headache, fatigue, or depression

IONIC CURRENTS: THE SPARK OF LIFE AND ORIENTATION FORCE TO POTENTIALLY PROLONG LONGEVITY

Xanya Sofra-Weiss, PhD

The aging process cannot be conceptualized by examining a single gene or a single pathway, but can best be addressed at the systems level. Aging is not only the sum total of shortened telomeres, denatured proteins and DNA molecules, or oxidative damage in the mitochondria. Aging attacks key regulatory nodes crucial for the biological network stability. It is the dynamic process of increasing imbalances in the systemic organization of degenerating biological processes. DNA and stem cells engineering have successfully reversed certain individual components of time attrition resulting in rejuvenation and aging delay. So far, research has merely followed a sequential process that goes from the part to the whole, identifying aging genes and engineering stem cells, etc. However, discovering pieces of the puzzle still requires identification of the interconnections between matching pieces before the solution emerges. The old, the ill, and the injured all suffer from misarranged patterns of atoms. A single substitution an A for a G in a DNA molecule can cause a significant change in the conductance of the molecule leading to cancer. Such research findings demonstrate how the sequence and interrelations of amino acids in a protein, or the sequence of base pairs in a DNA molecule can become determining factors between health and disease, aging and youth. Gene expression is stronger when the gene is attached to the nuclear envelope (the membrane that surrounds the nucleus) than when it moves away from the nuclear envelope (see image). In other words, cells make use of the nuclear architecture to code epigenetic information. The DNA sequence alone doesn't determine everything. The importance of the spatial organization or nuclear architecture in regulating gene expression begs for scientific observation that does not merely focus on the study of atoms and molecules, (the basic components of a Gestalt); but on the interrelations, sequence, orientation and spatial organization of these atoms and molecules (the dynamic whole or Gestalt). Recent research has shown that DNA, proteins, cells, including stem cells, appear to be electrical in that they demonstrate conductivity or the presence of ionic currents. Since electricity is a dynamic entity emerging out of the interactions of atoms and molecules, we propose that perhaps the simplest way of focusing on the entire system is by decoding the complex electrical signals that map biological interactions with respect to spatial organization. Biological signals must be analyzed in terms of their amperage, frequency, voltage, interactions, orientation, spatial organization. Next will be their translation into electronic signals that comply with the specifications of amperage, frequency, voltage or biological signals. Electronic signals will then be intertwined to orchestrate a Gestalt waveform built on the basis of information attained from observations of biological interactions and architecture – a process similar to that done in Pollock's lab (1990-2004). This Gestalt waveform will act as an electronic diplomat to awaken biological processes that have diminished with aging or disease by signaling the recuperation and activation of biological reparative mechanisms leading to extended longevity.

GOALS AND OBJECTIVES

- To integrate the diverse data on aging genes, cellular oxidative damage, telomere attrition, protein and DNA denaturation and mitochondria damage into a unified theory that addresses aging at the systems level.
- To discuss studies that have successfully reversed aging in certain organisms by eliminating certain aging genes or altering DNA and Protein sequences.
- To postulate that aging might attack key regulatory nodes that are important for the stability of the biological network.
- To propose future research designed to conceptualize and analyze aging as a complex composition or a Gestalt that is greater than the individual degenerative processes that compose it.

LABORATORY TESTING IN ANTI-AGING MEDICINE

Bill Anton PhD

Case Studies in Anti-Aging Laboratory Testing/Monitoring

Anti-Aging is about depletion, inflammation and wear and tear. In this series of workshops we will cover the tests available, when to order them, how to interpret them and how to treat your patients. These are the Standard Tests you need to know about. Now they are available through an A4M Accredited Anti-Aging Laboratory. With Comments & Treatment Protocols as per the Fellowship & Board Certification Training Programs in the USA, Austral-Asia and Europe.

GOALS & OBJECTIVES

Sexual Transmitted Disease

Launching New Patented Laboratory Technology (A spot Urine Test or Swab to screen for STDs with Genetic & PCR technology)

95% of all known STDs identified with ONE test.

Urethritis & Cervicovaginitis, Genital Ulcers, Systemic STD, Standard Screen, HPV, or Comprehensive Screen.

Hormones & Lab Case Studies Serum, Saliva & Urine

Which tests to order, how to correlate to HRT & troubleshooting with hormones. Case Studies in Menopause, Andropause, Somatopause, PCOs, Thyroid, Adrenals, Estrogen Metabolites.

Vitamins & Antioxidants Water & Fat Soluble, Oxidative Damage assessment

Minerals & Metals Trace & Macro, Heavy/Toxics, Post Challenge Tests, RBC, Hair Mineral, Urine, Serum levels.

Amino Acids Essentials & Non-Essentials, Neurotransmitters & Metabolites

Essential Fatty Acids Omega 3, 6, 9 and how to supplement based on lab results.

Organic Acids The first step in Anti-Aging screening - Metabolic Pathways, Environmental Toxins.

Inflammation CRP(hs), Cytokines, AA/EPA, Anabolic/Catabolic Ratio, Gut Functional Assessment

Allergies & Sensitivities Food Allergies, Food Sensitivities, Food Additives, Medicine Sensitivities, Obesity & Food Sensitivities, Metal Allergies & Sensitivities.

Genetics, SNPs and Proteomics Panels Nutrigenomics, Inflammation, Cardiovascular & Hypertension, Bone Health, Dementia, Detox, Male Panel, Female Panel, Metabolic Syndrome, Cancer Panel, Skin & Hair Health Panels.

MANUFACTURING TIME... THE ROLE OF NON INVASIVE COSMETIC PROCEDURES IN ANTI-AGING MEDICINE. A REVIEW OF 50 NON SURGICAL FACELIFT CASES.

Alex De Souza MD; Mariana Lima

The facial appearance is central to human interpersonal perception and very often a testimonial of our aging process. Facial skin aging has been classic divided by biological aging (intrinsic aging) and extrinsic aging factors such as sun and environmental exposure. The clinical translation of that process is laxity, deepness of the expression lines, dryness and flatter of the dermal-epidermal interface with significant changes in the color, texture and overall quality of the skin (1, 2)

Hollander reported in his book *Handbuch Der Kosmetik* published in 1912; a surgery very similar to a face-lift performed as it is performed today. It is very possible that Dr. Hollander did the first face-lift ever performed for a polished aristocrat around 1901. In 1906 Dr. Lexer also reported a facial surgery which was a very revolutionary procedure on an actress. (3)

In the statistics of Aesthetic Plastic Surgery Society, more than 117,000 cases of face-lift are performed every year in the United States alone. (3)

In today's active society and demanding workplace, patients are frequently searching for less invasive procedures with diminished morbidity and more rapid healing to address their cosmetic concerns (4)

A combination of several new non invasive procedures allows significant facial changes and a youth and healthy appearance can be obtained without a traditional surgical procedures.

Non invasive lifts associated with skin restoration technologies: laser, intense pulse light (IPL), radiofrequency, and new skin care delivery systems: OXO Delivery can indeed become the face-lift of the future. (5, 6).

The use of suspension procedures is not new (7,8), but the use of this technique associate to modern devices such as monopolar radiofrequency can provide results very similar to those obtained by classic surgical treatments without the inconvenience and risks of it.

Methods:

Our program is based on two important points: The diagnosis of the aging face and a combination of two or more non surgical, minimally invasive techniques to obtain the desirable result. We have defined seven facial problems and our protocols combine several treatments with focus in the skin appearance but also skin health and restoration.

The center core for the treatment include our Thread lift techniques, monopolar radiofrequency skin tightening, botulinic toxin, and localize fillers injections.

Results:

This study is a follow up study from a previous case report now with a presentation of 50 cases of Non Surgical Facelift using a combination of multiple non invasive procedures. A significant improvement of the aging signs with a natural and young look can be seen in every patient.

Conclusion: We believe that combining a host of new techniques and procedures, for the first time, a truly non-surgical facelift exists. The face-lift of the 21st century is going on the surgiless direction. This quite affordable procedure offers good results, no stitches and cuts, any downtime, allowing the patient to resume normal activities immediately. And unlike traditional surgical face-lifts, the new lift is reversible. This program also addresses the skin health as well. A beauty skin must be a health skin. This review demonstrates that if we can not slow the clock at least we are able to give patients an appearance years young than the patients actually age is, what we call manufacturing time.

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MIND OVER MATTER. NEURAL IMPLANTS AND BRAIN MACHINE INTERFACE

Nitish Thakor PhD

This presentation will review the state of the art of implantable neural technologies. Their most novel and exciting use is in "Neural Prosthesis". The latest technology and approaches to controlling computers and machines, such as prosthetic limbs, will be presented.

GOALS & OBJECTIVES:

- State of the art
- Review neural implant technologies
- Review prosthetics and Brain- Machine interface

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MORE THAN JUST RICKETS

Mayer Eisenstein, MD

The newly rediscovered anti-aging properties of the amazing sunshine Vitamin D.

Recent scientific studies have found that the level of Vitamin D in most people, while adequate to protect against rickets, is not high enough to lower the probability of other medical conditions that may be caused by insufficient amounts of Vitamin D.

At the same time that doctors are discrediting the value of vitamins, minerals and supplements, more and more scientific studies are coming out about their medical and therapeutic values. No vitamin has had more scientific studies recently published than the rediscovered "Sunshine Vitamin" - Vitamin D.

Chronic Pain and Vitamin D

W. Michael Hooten, M.D., et al., from Mayo Comprehensive Pain Rehabilitation Center in Rochester, Minn. reported that about one in four patients who have chronic pain also have inadequate blood levels of vitamin D, which might contribute to their pain. Patients who did not have enough vitamin D also needed higher doses of morphine for a longer period of time.

Life Expectancy and Vitamin D

Dr. Philippe Autier, et al., found that... Ecological and observational studies suggest that low vitamin D status could be associated with higher mortality from life-threatening conditions including cancer, cardiovascular disease, and diabetes mellitus that account for 60% to 70% of total mortality in high-income countries .

What is the Dose-Response Relationship between Vitamin D and Cancer Risk?

Dr. Garland, et al., combine data from 29 observational studies in their report, which appears in the journal *Nutrition Reviews*. They conclude that in North America, "a projected 50% reduction in colon cancer incidence would require a universal intake of 2,000 IU per day of vitamin D3."

"A similar reduction in breast cancer incidence would require 3,500 IU per day..." [The current recommendation from the Institute of Medicine is 600 IU per day.]

Influenza and Vitamin D

Dr. John J Cannell, et al., found... Compelling epidemiological evidence indicates [that] Vitamin D deficiency is the seasonal stimulus [to activate influenza virus]. (See Figure 1) Furthermore, recent evidence confirms that lower respiratory tract infections are more frequent [in patients receiving less than 2,000 IU of Vitamin D₃ daily], sometimes dramatically so, in those with low 25 (OH) D levels. (See Figure 2)

Decrease in Falls in Seniors and Vitamin D

Kerry E. Broe, et al., did a study "To determine the effect of four vitamin D supplement doses on falls risk in elderly nursing home residents..."

...Participants were randomly assigned to receive one of four vitamin D supplement doses (200 IU, 400 IU, 600 IU, or 800 IU) or placebo daily for 5 months.

...Nursing home residents in the highest vitamin D group (800 IU) had a lower number of fallers and a lower incidence rate of falls over 5 months than those taking lower doses. Adequate vitamin D supplementation in elderly nursing home residents could reduce the number of falls experienced by this high falls risk group.

Conclusion

To increase your protection from cancer, chronic pain, decrease falls, and possibly protect yourself from influenza (without the ineffective flu vaccine) , I recommend a minimal daily dose of 2,000 IU of Vitamin D₃. The scientific evidence points out that even higher doses may be indicated for other medical conditions. This inexpensive, less than 10¢ a day, therapy may be the greatest rediscovery of the 21st century.

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GOALS & OBJECTIVES

- Increase awareness of the difference between Vitamin D₂ and Vitamin D₃
- Educate as to different minimal daily requirements of Vitamin D₃
- Anti-aging effect of Vitamin D₃

THE NUTS AND BOLTS OF ANTI-AGING MEDICINE. “HOW TO PRESCRIBE” HORMONES FOR ALL BIO-IDENTICAL HORMONES THAT ARE USED IN A HORMONE REPLACEMENT PRACTICE*Ron Rothenberg, MD*

This presentation will focus on the practical aspect of hormone replacement therapy for adult hormone deficiencies. The following hormones will be reviewed. Testosterone, Estrogens, Progesterone, DHEA, Growth Hormone, Thyroid, Cortisol.

Each hormone will be presented in a way that the participant can begin to prescribe the hormone with expertise. For each hormone the following will be detailed:

- Delivery method, dosage forms
- Dose, how to select initial dose
- Symptoms of Deficiency
- Symptoms of Excess
- Lab testing
- Downstream metabolites
- Side effects
- Follow up required: lab and clinical
- Controversies: medical, legal, philosophical, informed consent.

GOALS AND OBJECTIVES:

- Learn the symptoms of deficiency and excess of the key hormones
- Learn the doses, side effects and follow up needed to replace the key hormones which may be needed in treatment of adult hormone deficiencies

OPTIMIZING THYROID FUNCTION – A LOOK AT REVERSE T3—THE “BRAKE PEDAL” OF OUR METABOLISM*Riffat H. Qadir, MD*

It is well known that T3, “the accelerator of our metabolism,” is far more active than T4, and is derived mostly from peripheral conversion of T4. T4 can also be converted to Reverse T3 and this little known hormone appears to be the “brake pedal” of metabolism rather than an “inactive metabolite.” The relative balance between T3 and Reverse T3, therefore, is a determinant of the metabolic setpoint. Reverse T3 is increased in physical, physiological and psychological stress as an adaptive response – conserves metabolic energy. Prolonged adaptive responses can become maladaptive and lead to chronic symptoms. Stress is rampant in our society and the majority of our patients are under some degree of chronic stress. This has numerous physiologic implications including a relative imbalance of T3 and Reverse T3. Reverse T3 can be measured as a “total” hormone assay and compared to the total T3 measurement. In our experience, patients feel best at a T3/Reverse T3 ratio of 12+/-2. This optimal ratio can be attained with BID dosing of T4/T3 replacement in hypothyroid patients. Patients without thyroid gland dysfunction, but a poor ratio, can benefit from low dose T3 supplementation.

OPTIONAL

This lecture presents the novel concept of a third “active” thyroid hormone, Reverse T3, which appears to function as the “brake pedal” of metabolism and is increased by stress. Optimizing the balance between T3 and Reverse T3 leads to markedly improved clinical outcomes in hypothyroid and chronically fatigued patients.

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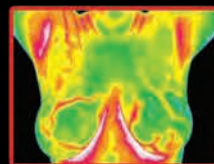
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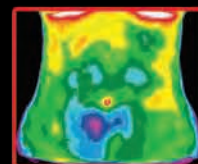
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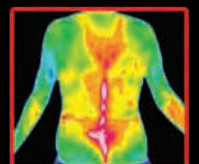
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GOALS & OBJECTIVES

- Review basic thyroid physiology and introduce the third “active” thyroid hormone –Reverse T3.
- Discuss comprehensive laboratory thyroid hormone assessment including the T3/Reverse T3 ratio.
- Discuss optimal thyroid hormone replacement using T4/T3 supplementation on a BID schedule.

PREVENTING BIRD FLU AND OTHER UPPER RESPIRATORY DISEASES

Gordon Pedersen, PhD

Female BALB/c mice were pre-treated with ASAP (Silver Sol) for seven days prior to being challenged with Avian Influenza (H5N1). The results were compared to control mice and Ribavirin treated mice to determine survival and prevention rates of Silver Sol against Avian Influenza (H5N1). Groups of 19 mice were treated by oral gavage (p.o.) with Silver Sol, twice daily for 7 days, then infected intranasally (i.n.) with an LD70 dose of influenza virus, then treated an additional 10 days. As controls, 35 mice were treated with water using the identical schedule. Oxygen saturation (SaO₂), necropsy for lung scores, and lung viral titers were obtained to quantify ongoing tissue damage.

As a result of this experiment, 60% of the infected mice treated with Silver Sol (10ppm) survived compared to the 30% in the placebo-treated controls. This is a 100% increase in the ability of mice to survive an H5N1 Avian Influenza challenge. Results of this study demonstrate suggested inhibitory and preventive effect on H5N1 Avian Influenza infection as seen by either less animals dying in the treated groups than in the placebo-treated controls, delay in mean day to death, lessened SaO₂ decline, modest inhibition of lung consolidation, and/or lessened virus titers in the lung. In addition there was no sign or symptom of toxicity from the sage of Silver Sol in toxicity control mice, even at extreme doses. If the human protection were similar to that found in mice, it could provide a significant advancement in the prevention of a potential pandemic event.

GOALS & OBJECTIVES

- Silver Sol destroys bacteria, viruses and mold.
- Silver Sol prevents Bird Flu H5N1.
- Silver Sol is synergistic with antibiotics.

REJUVENATION THROUGH DETOXIFICATION

Russell L. Kolbo, DC, ND

I have been in medical practice since 1969 in Tacoma, Washington as a Chiropractor and Naturopathic Physician. My interests have always included detoxification, tissue cleansing, and rejuvenation. I have successfully run many different types of detoxifying programs over the years from water fasts to modified eating programs. In addition, I have used electrotherapy, lymphatic drainage massage, far infrared sauna, and colon hydrotherapy.

My discussion today will start with an overview of the toxins that we face everyday in our environment, food chain, and digestive system. I will then refer to various disease processes which may be directly or indirectly related to our external and internal environments. This discussion will flow into not only why we must detoxify, but who should and how to do it.

I will discuss toxicity and autointoxication along with the mechanisms and organs of detoxification and elimination. This discussion will include how detoxifying works as well as the intensity and frequency of detoxifying programs. I will cover various herbs which are useful during this process of detoxification and how long a program should be.

My goal is to attempt to establish the importance of detoxification and the role it has in health care and especially in an antiageing practice as one attempts to reduce the degenerative inflammatory processes and the toxic load ourselves and patients face on a daily basis.

SONODYNAMIC THERAPY FOR THE DESTRUCTION OF MALIGNANT CANCEROUS TISSUE

Tom Lewis, PhD

Described are sonodynamic small molecules that, when activated, selectively destroy malignant tumor cells.

Presented are novel sonosensitizers having optimized properties for destruction of tumor cells. The sensitizers have low toxicity prior to activation as determined in LC50 studies. The agents accumulate in targeted areas of tumor growth and activity including: tumor cells, tumor cell walls, or the neovascular network of the tumor. The compounds are rapidly cleared from non-tumor compartments of the body. These compounds are highly sensitive to activation by ultrasound. When "safe" ultrasound (that is ultrasound in the diagnostic range of frequencies and intensities) is applied these sonodynamic agents rapidly transform to produce singlet oxygen, radicals, and other reactive species. The reactive moieties are short-lived and destroy adjacent tissue only, in this case the targeted tumor cells. Due to the reactivity of the of the moieties, their pathlength is short and thus have minimal side effects to the local, healthy, non-cancerous cells or to the body systemically.

GOALS & OBJECTIVES

- Thoroughly describe sonodynamic therapy as it relates to the treatment of malignant tumors.
- Describe specific sonodynamic agents, their modes of action, efficacy, and properties.
- Describe clinic approaches for the use of sonodynamic therapy

TESTOSTERONE: FOR MEN AND WOMEN AND SEXUAL HEALTH

Ron Rothenberg, MD

This presentation will review the current medical literature on Testosterone Replacement Therapy in men and women and provide practical algorithms for treatment. Symptoms of deficiency will be reviewed. Different methods of replacement will be discussed, lab evaluation reviewed, side effects and downstream metabolites will be covered. The relationship of TRT to cognitive function, cardiovascular function, prostate disease, body composition and quality of Life will be analyzed. Protocols for safety and treatment of side effects will be presented.

GOALS AND OBJECTIVES:

- Learn the symptoms of testosterone deficiency
- Learn the different methods of TRT.
- Learn how to evaluate Serum free, total and bio-available testosterone

THYROID HORMONE

What they did not teach you in Medical School. Thierry Hertoghe M.D. will teach you the importance of T-3 & T-4 and how TSH needs to be looked at differently then what you have been taught

Ron Rothenberg, MD

The influence on the human body of the very small amount of thyroid hormones that it daily produces, is impressive. When the production of thyroid hormones abruptly ceases, an individual in a matter of weeks swell up with myxoedema, loses consciousness and even any feelings, becoming a human "plant", dying in coma.

The partial deficiency in thyroid hormones – hypothyroidism - allows life, but a life often miserable with complaints and physical signs typical for the disease. The increased incidence of age-related thyroid deficiency may explain some of the puffiness of the face of aging adults, dry skin, mild obesity, cold extremities, increased incidence of coronary heart disease, and possibly of cancer. Psychic and mental symptoms such as morning fatigue, depression, slowness, memory loss, etc. are common complaints of elderly adults that may result from the age-related decline of thyroid hormones.

One of the greatest adverse consequences of thyroid deficiency is a decrease in the production of most other important hormones such as growth hormone, testosterone, female hormones, cortisol, DHEA, etc.

This polyhormonal deficiency leads to premature senescence, which is reversed by thyroid treatment.

What is the best thyroid treatment? Despite intensive use and marketing, treatment with thyroxine alone has never been reported to be superior to medications combining both thyroxine (T4) and its much more active metabolite, triiodothyronine (T3). On the contrary, in several studies on human subjects associations of T4 and T3 have been shown to be more efficient.

TURNING STEM CELLS INTO MEDICINE: CURRENT THERAPEUTIC MODALITIES

Six month follow up of Ischemic Cardiomyopathy patients treated with autologous angiogenic and regenerative progenitor cells

Zannos G. Grekos, MD

A background of the science of stem cells, followed by the evaluation of clinical protocols and application to specific disease entities. Data results and case studies will be discussed.

OBJECTIVES

The goal of this study is to investigate the feasibility, safety, and clinical outcome of patients with Ischemic Cardiomyopathy treated with autologous angiogenic and regenerative progenitor cells (ARPC's) in a prospective fashion.

BACKGROUND

Both in world scientific literature as well as our experience in greater than 300 patients there is evidence of sustained improvement in the ejection fractions of patients treated with ARPC's. Animal experiments show not only improvement in cardiac function, but also engraftment and differentiation of ARPC's into cardiomyocytes as well as neo-vascularization in infarcted myocardium. In our human experience the process has shown to be safe as well as effective.

METHODS

We conducted a prospective, non - randomized trial evaluating the effects of ARPC's implantation in eleven patients with chronic ischemic Cardiomyopathy (Ejection fractions < 45%) with congestive heart failure symptoms of at least NYHA class II. ARPC's were implanted via either intra-myocardial injection or intra-coronary infusion. Patients were optimized medically prior to ARPC's therapy with standard medical therapy for CHF as well as revascularization and upgraded to Bi-ventricular defibrillators when indicated. Ejection fractions were recorded at baseline then at 3 and 6 months using MUGA at rest as well as at stress (dobutamine protocol). The primary end points were changes in rest and stress ejection fractions.

RESULTS

Baseline: rest EF was 28% (range; 14% to 42%), stress EF 36% (range; 19% to 52%),

3 months: rest EF increased to 40% and the stress EF was 50%;

6 months: rest EF was 49% (range; 38% to 56%), stress EF 60% (range; 56% to 67%). There was one severe side effect. One patient suffered a CVA during one of the cardiac catheterizations and was therefore excluded from the group. There were no negative side effects associated with the ARPC's, however, several positive side effects were noted. These included improvements in: Diabetic parameters, Hypertension, Mental Acuity, Peripheral Circulation, Reynaud's Symptoms as well as several others.

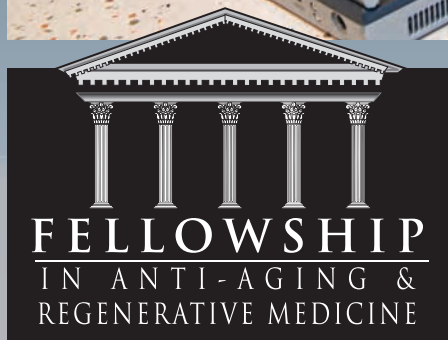
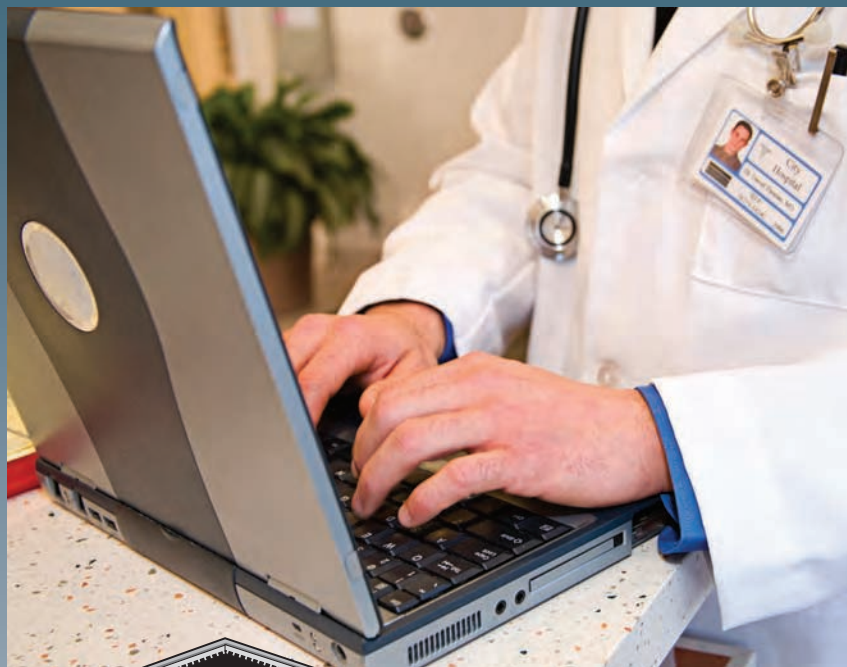
CONCLUSIONS

This study showed that ARPC's can improve the ejection fraction in patients with severely reduced cardiac function with benefits sustained to six months. These patients will continue to be followed in a similar fashion to determine long term outcomes. Other secondary outcomes will also be followed including cardiac events, hospitalizations, mortality, functional class, and cardiac dimensions.

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GOALS & OBJECTIVES

- Understanding the different types of stem cells.
- Identifying the therapeutic benefits of stem cells.
- Applying current treatments to patient populations.

THE BENEFITS OF WHOLE BODY VIBRATION ON HEALTH AND WELLNESS

Trupti Gokani, MD

This presentation will review use of Whole Body Vibration for medical and fitness indications. I will review the mechanism by which WBV facilitates activation of muscles, muscle spindles, reflex arcs and ligaments. By understanding this, we will then move forward into various medical uses such as osteoporosis treatment, along with disorders involving pain, gait and balance. In addition, I will explain how it may be incorporated into an overall “active aging” protocol to maintain fitness and good health. We hope to provide a solid understanding of how this mechanism of therapy can assist patients achieve health outcomes in a non-pharmaceutical fashion. In addition, they will understand how muscle strength and tone can be achieved in a unique way.

GOALS & OBJECTIVES

- Explain the concept of WBV
- Discuss its use in fitness and “anti-aging” (or active-aging)
- Understand potential areas in the medical area for its use, including bone health, pain disorders along with conditions involving weakness, gait or balance disturbances.

GETTING OUT OF THE PHITTEES (POOR NUTRITION, HORMONES, INFECTIONS, TOXINS, TRAUMA, ENERGY, EXERCISE AND STRESS)

Robert DeJonge, DO

How to make most anyone healthy. abstract. Becoming healthy is the goal of this presentation. Traditional medicine which I will call the Name It, Blame It, and Tame It game has failed to remedy many of today's chronic illnesses. For example is hypertension really a deficiency of a drug called a calcium channel blocker or is a combination of deficiencies of minerals such as magnesium and an overload of toxins such as lead?

I use the acronym, PHITTEES, pronounced “PITS”, to assist in solving one's health issues. One might look at this as the Universal Theory of Health similar to the Universal Theory of Physics. The letters of the acronym PHITTEES stand for, P is for poor nutrition, H is for hormones, I is for infections, T is for toxins, T is for trauma, E is for energy, E is for exercise and S is for stress. I will explain step by step how each of the categories will improve the quality of one's life.

GOALS & OBJECTIVES

- Learn how to evaluate a patient using the PITS acronym.
- Learn how to treat a patient using the PITS acronym.
- Learn not to play the name it, blame it, tame it game

“HOW DOES MAGNETISM EXTEND LONGEVITY AND QUALITY OF LIFE?”

Dean Bonlie, DDS

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GOALS & OBJECTIVES:

- Show that enhancement of the earth's magnetic field extends longevity and quality of life.
- Present evidence of biological effects of weak and strong magnetic fields.
- Differentiate effects of bipolar versus unidirectional fields.

HUMAN GROWTH HORMONE TREATMENT OF GROWTH-HORMONE DEFICIENT ADULTS WITH LAB TESTS WITHIN THE REFERENCE RANGE: THE SCIENTIFIC EVIDENCE THAT SUPPORTS IT

Thierry Hertoghe, MD

The main difference between conservative and advanced endocrinology is that in conservative endocrinology only patients with hormone levels under the lower reference limit of the patient's age category are considered to have a deficiency and may get treated, while in advanced endocrinology also patients with hormone tests within reference ranges may get treated.

Reference ranges are not healthy ranges, but mere statistical ranges that help us know what hormone levels other people in the population have. 95 % of a population will statistically have a hormone level within the reference range, while 2.5 % will have a level under the lower reference, and 2.5 % above the upper limit. It remains also so even if a whole population is deficient in the hormone (postmenopausal women for estradiol for example), or whether 10, 30, 50, or 70 % of the population would be sufficient in it.

Here, with the example of serum IGF-1 levels, which reflect growth hormone activity, data are shown that support the view that lower hormone levels within the reference range may be associated with disease and therefore not sufficient and in fact reflect a growth hormone deficiency.

There is no or poor scientific backing to support the claim that only patients with serum IGF-1 levels under the lower reference of a person's age category would be growth hormone deficient, and above that level growth hormone sufficient. On the other hand, there is an important amount of scientific data that shows that being in the lower forth, third, half, two thirds or even lower three quarters of the reference range for serum IGF-1 is associated with an increased risk of disease or disease markers such as increased risks of higher body mass index, high visceral fat mass, obesity, more metabolic syndrome features, low mini-mental state examination scores, high serum triglycerides, higher CRP, increased intima media thickness of carotid arteries and atherosclerotic plaques in them, increased systolic and diastolic blood pressure, arterial hypertension, history of angina pectoris or of myocardial infarction, cardiovascular disease, including ischemic heart disease and heart failure, stroke, cervical cancer including intraepithelial neoplasia, endometrial, pancreatic, rectal cancers, glioma, increased tumor-node-metastasis stage in breast cancer patients, prostate cancer, acute lymphoblastic leukaemia, and, last but not least increased mortality.

Increased risks of breast, prostate and colon cancers have also been reported at higher levels of serum IGF-1, but this may not be due to an excess growth hormone production, but to other causes such as a production of serum IGF-1 by tumour tissue. A higher serum level of IGF-1 is a consequence and not a cause of the cancer. Supports for this view is found in studies that show that reductions of IGF-2 precede the appearance of cancer (in liver cancer for example), increases of IGF-1 during time in progressive prostate cancer, etc.



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- **Supports energy production at the cellular level ***
- **Enhances quality of life ***

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*- Robert D. Milne,
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- Calvert Laboratories, Inc. showed its usefulness in glioblastoma cells.
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GOALS & OBJECTIVES

- Increase in physicians the awareness that patients may be hormone deficient although their lab tests may look “normal”
- Increase in physicians the awareness that there may be an increased risk of disease and possibly mortality in patients who are clinically growth hormone deficient, but with lab tests in the lower half of the reference range

Increased mortality in people with lower serum IGF-1 levels within reference range

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Increased cardiovascular disease and disease markers in people with lower serum IGF-1 levels within reference range

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MEDICAL INFRARED IMAGING: PROS AND CONS AS A PREDICTIVE INDICATOR

Jeanne Stryker, MD

Objective review of the applications and benefits of Thermography.

Present a subjective account and review of historical data including the perception and current level of acceptance by physicians, and the role it has played to date as a medical device. I will share my experience and views as a radiologist regarding the clinical value of modern Infrared Thermal Imaging as a reliable predictive indicator for inflammation based diseases such as breast cancer and cardio vascular disease.

We will review major peer reviewed studies to support the pros and cons of thermography in various applications additionally supported by related case studies. Infrared Thermal Imaging technology has developed significantly as a major science in recent years. The medical applications are becoming evident as the significance of the bio chemical relationship to conditions such as angiogenesis and inflammation are increasingly recognized as accurate predictive indicators of future chronic and difficult to treat conditions. This highly evolved 50-year-old technology is more relative now than ever to the new environment of medicine. This valuable tool risks being overlooked as a result of the history of misunderstanding and medical prejudice from the past. My goal is to rekindle the interest and demonstrate the true and valuable applications of Medical Infrared Thermal Imaging as it applies to functional medicine.

GOALS & OBJECTIVES

- Increase awareness of the benefits of Medical Infrared Imaging (Thermography) to the patient and to the health care provider
- Compare Thermography to other medical imaging techniques
- Review the evaluation criteria of thermal findings

NUTRACEUTICAL WORKSHOP: NATURAL THERAPEUTICS FOR ANTI AGING

Stephen Holt, M.D., Ph.D.

An understanding of the range and properties of dietary supplements, defined as herbals, botanicals and nutrients is important for the physician engaged in anti-aging or recuperative medical practice. However, this information must be complemented by an understanding of the practical application of these remedies of natural origin, when used in a therapeutic context.

While natural therapeutics involves eclectic medical interventions, the mainstay of management is the safe and effective use of dietary supplements. Following the advent of the Dietary Supplement and Health Education Act of 1994 (DSHEA, 1994), there has been an explosion in the use of dietary supplements on a global basis. Some academics have perceived this as reintroduction of the science of pharmacognosy, whereas others have seen natural therapeutic approaches as part of the modern biotechnology revolution. Whatever the perception, the practice of Integrative Medicine has many influences that force a need for an evidence-

base in supplement usage. Arguably, an evidence base may have been, on occasion, deficient in the last decade. There is an enigma in modern medicine where dietary supplements have to be labeled for use that does not involve disease diagnosis, prevention or treatment. This discrimination against natural medicine was made in the DSHEA, 1994 to protect the status of pharmaceuticals or avoid confusion between supplements and drugs. Misguided concepts have emerged in natural medicine, because “natural” does not necessarily equate to safety; and some supplement formulations are sold with meager evidence of benefit. Many dietary supplements are formulated by individuals with no biomedical training and most often no clinical experience of disease or wellness management. Part of the training of therapeutics and clinical pharmacology in a university or medical school teaches the clear responsibility that rests with the healthcare giver to understand the scientific basis, relative safety, cost effectiveness and risks associated with pharmaceutical use. There is every reason to believe that the same responsibility must rest with the natural clinician. Practitioners of natural medicine have reacted adversely to drug marketing gimmicks or “off-label” drug use, together with the over-prescription or over-usage of pharmaceuticals. While the prudent medical practitioner does not respond to the hype of pharmaceutical sales, the practitioner of natural medicine should equally not respond to over-statements of the efficacy or safety of some dietary supplements. In spite of recent hyperbolic growth in natural medicine, there is no generic agreement on an acceptable curriculum that teaches the rational therapeutic use of nutritionals, herbs or botanicals, otherwise known as dietary supplements or nutraceuticals. After four decades of experience in research and development of drugs, dietary supplements and functional foods, I have created a “Primer of Natural Therapeutics” to guide an individual towards an evidence-based approach to the use of dietary supplements. This work is relevant to many people who are involved in the application of dietary supplements for health, including the: MD, DO, DPM, RN, ND, consulting PhD, LAc, nutritional counselor and their support staff in office practice or in a dispensary or retail environment etc. The diploma course that I have created can be used with credits toward a naturopathic degree at a specific institution. The proposals are based upon my own evolution of experience in the use of complex formulations where many natural agents can be formulated in a synergistic manner to access many different cascades of biological events that control the harmony of life. My work is not an attempt to describe another dietary supplement, but it is a sincere attempt to teach people “how to,” when it comes to dietary supplement counseling. This approach is to develop clear therapeutic guidelines that can be applied with natural medicines. While the approach is natural and sparing of drug usage, I have not turned my back on conventional medicine, where it is applied in an appropriate manner. The current practice of allopathic medicine in many societies is not portable and it cannot be subject to cost containment. The only practical approach to make medicine portable is to place knowledge within the hands of individuals who can advise on low cost effective, safe and gentle options for the promotion of health and wellbeing, without the premature use of drugs. My concept has been focused on the idea of “edu-therapy,” where education in itself is the most potent, cost effective way of promoting health and wellbeing in society.

GOALS & OBJECTIVES

- To review the biopharmaceutical potential of nutrients or botanicals with an emphasis on their practical use in anti-aging medicine
- To understand the advantages and potential limitations of the use of multiple remedies of natural origin in synergistic formulations
- To provide an understanding of the safe use of remedies of natural origin and their relative benefit/risk ratios in day to day clinical management
- To understand fundamental concepts of nutritional factors for anti-aging with specific emphasis on safety
- To understand fundamental concepts of nutritional factors for anti-aging with specific emphasis on efficacy or effectiveness
- To introduce the concept and advantage of basic certification programs for dietary supplement counseling
- To stress the importance of holistic approaches to health by combining dietary supplements with lifestyle medicine and other natural medical disciplines



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NUTRITIONAL SUPPORT FOR ANTI-AGING AND AESTHETIC MEDICINE

Stephen Holt, MD, PhD

Natural Medicine has found favor in medical spas and anti-aging practices that focus on beauty and physical appearance. The concept of “inner beauty” has emerged with great strength as modern science defines increasingly the importance of general body health as the key determinant of a youthful, attractive appearance. Oral supplements are quite complementary and perhaps more effective than natural substances used in topical formats. These circumstances have led to advanced nutraceutical technology that has created a range of “beautyceuticals” that are delivered in oral or topical format. The value of REDOX balanced antioxidant treatments is more apparent when antioxidants are given systemically, rather than when they are administered by topical means. Signs of skin aging are promoted by oxidative stress and amplified by physical insults such as excessive sunlight exposure and substance abuse. Carefully defined synergistic formulations of nutrients and botanicals that support skin, hair and nail structure and function are available in innovative nutraceutical formulations. Botanicals, such as Polypodium, have found a special role in the protection of the skin from UV radiation. There is extensive use of thalassotherapy, with the application of topical and oral seaweed-based products. Marine nutrients have been used in body-sculpting and supplements for weight control. Fucoxanthin is a powerful antioxidant found in certain seaweeds. This substance promotes the oxidation of fat by increasing Uncoupling Protein-1 (UCP-1) in white adipose tissue (thermogenesis); and it increases omega-3 fatty acid synthesis in the liver, while exerting important upregulation of glucose transporter 4 mRNA expression of L-6 myotubes, thereby controlling glucose uptake in muscles. These biochemical effects are valuable in the reversal of abnormal metabolism found in the Metabolic Syndrome X which is often present in mature females who seek aesthetic, medical interventions. Anti-aging medicine has incorporated many aesthetic procedures which cause iatrogenic trauma. The use of homeopathic Arnica and supporting nutrients to accelerate wound healing or trauma recovery following aesthetic procedures is now a very important intervention in recuperative medicine. Many individuals seeking aesthetic interventions have engaged in forced dietary restrictions which result in occult malnutrition. Correction of general nutritional deficiencies in individuals who seek surgical or laser techniques is very important and often overlooked in clinical practice. Many patients benefit from multivitamins combined in whole vegetable, fruit, greens and berry powders that contain important phytochemicals. Innovative technology exists for the systemic renewal and replenishment of collagen in the skin, by using synergistic formulations that include hyaluronic acid. The role of body cleansing in aesthetic medicine has become evidence-based when combined with positive lifestyle change including the restoration of restful sleep, aerobic exercise and good general nutrition. Modern concepts embrace the notion that “beauty lies within the body.”

GOALS & OBJECTIVES

- To discuss the role of nutrition and natural medicine in the support of anti-aging medicine with special focus on aesthetic procedures
- To review the evidence-base for specific nutrients or botanicals in the support and anti-aging and aesthetic medicine
- To provide evidence-based examples of intervention that have been supported in peer-review medical literature
- Attendees at this presentation will have developed an understanding of an evidence-based nutritional and botanical approach for the complementary management of medical aesthetic that are used in the practice of recuperative medicine
- Attendees will be given the most recent information on innovative nutritional or botanical approaches for the promotion of a youthful appearance
- Attendees will understand the importance of the promotion of general body health aesthetic medical practice by understanding the concepts of “beauty from within the body”

PATENTED ORAL GLUTATHIONE ACCELERATOR IMPROVES HORMONE VALUES & INFLAMMATION IN AGING AND HIV PATIENTS

R.H. Keller, MD

Glutathione is arguably the most important intracellular antioxidant in humans ⁽¹⁾. It has been shown to decline with aging in human populations and the decline is accelerated in hospitalized age matched groups ^(2,3). In addition, it has been reported that reduced levels of Glutathione are common in HIV infection and represent

an independent predictor of accelerated disease progression and death ⁽⁴⁾. Furthermore, HIV and aging are both associated with decreased hormone and IgF1 levels and increased inflammation ^(5,6). We, therefore, elected to study the impact of Glutathione supplementation with a patented oral Glutathione accelerator on intracellular Glutathione levels, Cortisol/DHEA ratios, IgF1 levels and inflammatory cytokine (TNF alpha) levels in a population of HAART treated HIV patients compared to a group of non HIV infected age matched normals.

Forty HIV subjects (aged 30-65) were compared with 15 age matched non HIV infected subjects. Measurements included intralymphocyte Glutathione levels, Cortisol/DHEA ratios, IgF1 levels and measurement of serum Tumor Necrosis Factor Alpha. All HIV subjects had stable CD₄ counts, were virally suppressed on stable HIV medicines for three months before entry.

Both HIV subjects and normal individuals demonstrated similar improvements. Intracellular Glutathione levels increased more than 200% in each group when baseline values were compared to values after 60 days of supplementation. In HIV patients, the average improvement in Cortisol/DHEA ratios was 44% (range 20-54) and in normals 38% (range 10-80), $p < .05$. IgF1 levels also increased in both groups (HIV 33%) (range 10-48) $p < .05$; (normal 39%) (range 18-49%) $p < .05$. In contradistinction, the inflammatory cytokine TNF alpha decreased in both groups. In HIV subjects the average decrease was 54% (range 20-84%) $p < .001$. TNF alpha was elevated at baseline (9.6 +/- 1.4 ng/dl) (normal <6) in all 41 subjects. In normal subjects, 11 of 15 demonstrated elevated TNF alpha levels at baseline (10.8 +/- 1.8) but the values returned to normal at 60 days. The average decrease in non HIV subjects demonstrating increased TNF alpha was 94% (range 20-250) $p < .0001$ after sixty days of supplementation.

These data suggest that supplementation with a patented oral Glutathione Accelerator improves hormonal balance and reduces inflammation in normals as well as HIV patients. Since increased Glutathione levels are associated with improved prognosis in HIV, these data suggest that improving intracellular Glutathione levels may have anti-aging effects in the general population and warrant further study

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STENT? BYPASS SURGERY? NO THANKS, PASS THE RED WINE! HEART DISEASE PREVENTION WITH THE MEDITERRANEAN DIET & LIFESTYLE

Michael D. Ozner, MD

The Toxic American Diet and Lifestyle

The toxic American diet and lifestyle leads to excessive cardiovascular morbidity and mortality. Our food is contaminated with pesticides and preservatives and contains an excessive amount of trans fat, saturated fat, high fructose corn syrup and sodium. We no longer exercise and chronic stress adversely affects the majority of Americans. The explosive rise in heart disease, stroke, high blood pressure, diabetes and obesity is directly linked to the food we eat and the lifestyle we lead. We have been lead to believe that the solution to this epidemic is to be found with medical or surgical intervention. Unfortunately, despite the billions of dollars we spend on health care, we continue to suffer and die unnecessarily from diseases that can be prevented.

I have been practicing preventive cardiology for more than twenty five years and have helped countless number of patients discover the real secret of long term health – an optimal diet and lifestyle. By following the principles of the Mediterranean Diet and lifestyle, expensive medications can be reduced or eliminated and risky surgical intervention can be avoided.

Why the Mediterranean Diet?

The Mediterranean diet has been shown to be the ideal dietary plan for long term heart health and weight control. I have utilized the principals of the traditional Mediterranean diet in my Miami cardiovascular disease prevention practice and adapted it to our modern lifestyle to successfully treat patients and greatly reduce their risk of heart attack, stroke, hypertension, diabetes and obesity.

How has the traditional Mediterranean diet been adapted? Nutritional science has introduced new and exciting ways to cook and prepare food. For instance, non-hydrogenated buttery spreads have been developed that can replace butter or margarine for cooking and baking. These spreads contain no trans fats and support heart health by providing omega-3 fat and plant sterols and stanols to our diet. Another example is the introduction of pomegranate juice which has been shown to lower blood pressure and help reverse the build-up of atherosclerotic plaque in our arteries. Nevertheless, the basic principles of a traditional Mediterranean diet remains unchanged – a wide variety of fresh whole non-processed food, frequently enjoyed with a glass of wine in a relaxed setting with family and friends.

Multiple clinical trials have demonstrated the beneficial impact of a Mediterranean diet and lifestyle on long term health and weight control. There are many theories which have been advanced to explain the benefit of a Mediterranean diet on heart health. Several popular theories are listed below:

- Scientific studies have linked the intake of saturated fat and trans fat to the development of heart disease. The consumption of saturated fat is limited in the Mediterranean diet and trans fats are not present. This is in stark contrast with the typical Western or American diet which contains an excessive amount of saturated fat and trans fat. Indeed, the Miami Mediterranean Diet offers a wide variety of delicious non processed whole foods that are consumed on a regular basis.

The Mediterranean diet also decreases inflammation. Current research has demonstrated the pivotal role that inflammation plays in the development and progression of heart disease, cancer, diabetes and an increasing list

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of other diseases. Olive oil, fish, red wine and other foods present in a Mediterranean diet have been shown to be anti-inflammatory (decreases inflammation). In contrast, the typical American (Western) diet, with a high consumption of saturated fat, trans fat and omega-6 fat, is pro-inflammatory (promotes inflammation).

Finally a Mediterranean diet provides us with an abundance of antioxidants which help to neutralize free radicals that contribute to the development of cardiovascular and other disease states.

GOALS & OBJECTIVES

- Describe the features of a Mediterranean diet
- Discuss the various ways that a Mediterranean diet leads to reduced cardiovascular disease and improved longevity
- Cite the clinical trials that support a Mediterranean diet for cardiovascular health

COMPREHENSIVE LIFESTYLE AND MODIFICATION ON THE IMPACT OF MENOPAUSE AND ANDROPAUSE

Gary Null, PhD

GOALS AND OBJECTIVES

- To inspire the professional clinicians and scientists in the audience to re-examine the assumptions about aging, menopause and andropause.

EFFECT OF GROWTH HORMONE ON ADIPOSE DEPOTS, METABOLISM AND AGING

John J. Kopchick^{1,2,5}, Gabriel A. Martos-Moreno^{1,3}, Darlene Berryman^{1,4}, Lucila Sackmann-Sala^{1,5} and Dexter W. Blome⁶

Growth hormone (GH) plays a major role in adipose tissue physiology and deposition. Also, GH has a controversial role in aging. To study GH's actions, we have generated mouse lines with either enhanced or defective GH signaling. Mice, in which the GH receptor gene was deleted (GHR^{-/-}), are dwarf, have low serum IGF-1 and insulin levels, and are insulin sensitive (1). They also show a significant increase in life span, opposite to the reduced life span seen in GH transgenic mice (1,2). Additionally, GHR^{-/-} mice are obese with excess adipose tissue mainly located in subcutaneous and retroperitoneal depots (2-4). Given that GH, aging and gender individually impact adipose tissue distribution and accumulation, that adipose tissue is a true endocrine organ that secretes a variety of adipokines and that individual adipose depots are considered metabolically distinct, the study of biochemical differences in adipose depots is important (5,6). As shown for other tissues and disease states (7-9), proteomic approaches constitute a powerful and innovative tool. We therefore set out to generate the 'proteome' of various adipose depots as a function of GH action and aging. Proteomic data will be presented for both mouse and human adipose tissue.

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THE MODULATION OF AGING THROUGH APOPTOSIS

Marvin S. Hausman, M.D.

Apoptosis means programmed cell death. Programmed cell death starts the moment one is born and begins speeding up after age 30. On a daily basis, from birth to death, the human body struggles with two opposing forces – pro-inflammatory versus anti-inflammatory. The inability of the human body to neutralize excess pro-inflammatory molecules leads to oxidative stress and disease, and, in the minds of many clinicians, early aging. The ultimate objective of staying healthy and avoiding early aging requires the maintenance of a state of neutrality or zero balance. This lecture will focus on ways the human body can correct the imbalances between pro-inflammation and anti-inflammation, return to a normal cellular balance, avoid various diseases and slow the aging process.

GOALS & OBJECTIVES

- Raise awareness about the potential to live to a ripe old age while maintaining bodily functions and mental acuity of a much younger person.
- Generate discussion around the question “What is the right age to start thinking about longevity?”
- Provide information on ways the human body can correct inflammatory imbalances and return to normal cell balance based on evolutionary principles.
- Explain the theory of a zero electrical balance to avoid aging.

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PRIMARY LOCUS INTERVENTION: A NOVEL APPROACH TO TREATING AGE-ASSOCIATED HORMONE INSUFFICIENCY

Richard Walker, PhD, RPh

Primary Locus Intervention or PLI therapy is an evidence-based approach to age management that is designed to oppose the primary, biochemical consequences of aging that lead to physiological decay and increased risk for intrinsic disease. The primary biochemical consequences of advancing age are decreased production and secretion of brain derived signaling molecules including catecholamines, serotonin and acetylcholine. As a result of declining neurotransmitter synthesis, production and secretion of essential pituitary hormones are progressively lost. Loss of these hormones contributes to degeneration of body form and function resulting in frailty and increased risk for development of intrinsic diseases such as hypertension, diabetes, cardiovascular disease, cancer, etc.

PLI therapy is designed to oppose age related loss of the neurotransmitters, reduce inhibitory tone of somatostatin, and promote pituitary recrudescence, especially of specific pituitary cells that produce growth hormone or somatotrophin. The therapy meets this goal by providing compounds reported to increase production and breakdown of brain neurotransmitters, inhibitors of pituitary function, and directly stimulate pituitary production and secretion of essential hormones. As a result, health and vitality are sustained during aging, reducing the risk for development of intrinsic disease and increasing chances for reaching maximal longevity with good quality of life.

For over a decade, practitioners of age-management medicine have taken a common approach to therapy. It is based upon the landmark report of Rudman et al.¹ in which administration of human growth hormone restored certain youthful characteristics in older men. Since that time, hormone replacement therapy (HRT) and especially GHRT has been the cornerstone of clinical interventions in aging. While this approach has been effective in reversing some of the degenerative changes of aging upon body form and function, it has never been shown to prevent age-related, intrinsic disease and thereby to prolong life. The reason is that commonly used age-management protocols employ intermediate or end product molecules to replace those that are lost during aging. For example, growth hormone, reproductive steroids, thyroid and adrenal hormones are administered to compensate for the age-related decline in production and secretion of these important molecules. While this approach may seem logical, and in fact is beneficial in restoring some youthful qualities of hormones on the body, it does not treat the primary physiological consequence of aging that leads to internal disorder and increased risk for age-related disease. In fact, in many cases HRT accelerates decline in physiological functions because it “short circuits” essential feedback relationships between the brain, pituitary and the body. In contrast to the pharmacological approach to HRT, a novel, evidence based approach has been developed to sustain youthful physiology during aging. Because this approach provides holistic support for internal order, opposing the primary consequence of aging, it reduces the risk for development of age-associated disease and thereby extends life, health and vitality for as long as possible.

The basic difference between the traditional and novel approaches to age-management medicine is their locus of action. The target for traditional HRT is the body and basically provides a “cosmetic” result. In contrast, the novel approach focuses upon the brain and the pituitary to provide “therapeutic rejuvenation” of these essential regulators of neuroendocrine performance. The protocol for this approach is called “Primary Locus Intervention” because it employs compounds shown to be effective in reducing the risk for age-related, intrinsic disease by supporting brain and pituitary function during aging.

GOALS & OBJECTIVES

- To better understand effects of aging on neurotransmitters responsible for sustaining pituitary function
- To describe between primary and secondary/tertiary order control factors affecting neuroendocrine function
- To differentiate between clinical interventions in aging that employ traditional HRT and those using primary locus intervention or PLI therapy.

1. Rudman D, Feller AG, Hoskote NS et al. Effects of Human Growth Hormone in Men Over 60 Years Old. *New Eng Jour Med* 323 (1): 1-6, 1990.

A RESTORATIVE MEDICINE MODEL THAT WORKS INTEGRATING-HORMONES, NUTRITION, DETOXIFICATION- CASE STUDIES

Sangeeta Pati, MD

The current medical model is oriented towards the alleviation of symptoms and the treatment of disease. If we have high blood pressure; we can use a B-blocker. If we have gastric reflux; we can block acidity. If we have arterial stenosis; we can stent the artery or bypass it. If we have high cholesterol, we can suppress HMG-CoA reductase. If we get cancer, we try to remove it and destroy it. Multiple imbalances that collect over time contribute to these diseases including arthritis, arteriosclerosis, diabetes and cognitive decline. Multiple imbalances contribute to symptoms such as fatigue, weight gain, low sex drive, anxiety, depression and the litany of symptoms that plagues us with age.

In this presentation learn about a model, *through case presentations*, which we have used for 5 years to restore optimal health to those with fatigue, weight gain, low sex drive, depression, anxiety, insomnia, fibromyalgia, rheumatoid arthritis, chronic fatigue and more. Learn how to integrate hormones, nutrition and detoxification to restore optimal function through case presentations.

GOALS & OBJECTIVES

- How to apply a model that integrates 1) hormones, 2) nutrients, 3) toxins, 4) mind, and 5) body.
- Why hormone therapy alone does not allow a full restoration to an optimal state
- How to help patients come off anti-depressants, anti-anxiolytics, hypnotics, H2-blockers, allergy medications and statins.
- How to integrate homeopathy, acupuncture, chiropractic care, mind and body interventions to affect a better result

continued on page 70

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STEM CELL THERAPEUTICS FOR SKIN REJUVENATION

Kenneth D Steiner, MD

The combination of age, environmental factors and genetic components frequently contribute to changes in appearance of facial skin. While such changes are usually superficial and have no physical impact on the function of the body's major organs, manifestations thereof on the face, neck and to a lesser extent the hands are enduring targets for the application of a myriad of agents in an age-old attempt to effect a dramatic reversal of or at least arresting progression of the ravages of time. Such attempts and agents are frequently superficial, short term and ineffective. This has led to the discovery of the Secreted Matrix.

Secreted Matrix activates specific receptor sites on skin cells that further activate the pathways for the production of type V collagen in human skin. Further, our polypeptides form a complex structure that gives skin firmness and elasticity and surrounds and supports cells found within human tissues. We enhance our Secreted Matrix with molecules required as building blocks for the formation of collagen. Topically applied Secreted Matrix can be absorbed through the skin where it may bond with the existing protein chains in the layers under the skin to increase the appearance of firm and smooth skin.

GOALS & OBJECTIVES

- Understand Derivation and of Stem Cell
- Understand Potential utilization of Stem Cells
- Understand Secreted Matrix

STEM CELLS: TISSUE REGENERATION

Christopher Centeno, MD

Stem cells are capable to differentiating into body tissues that may be damaged or in need of repair. As a result, much attention has been focused on this area. Since the federal ban on new embryonic research, the focus has shifted toward adult mesenchymal stem cells (MSC's). This talk will focus on the use of MSC's for musculoskeletal tissue repair including tendons, ligaments, cartilage, bone, and discs. MRI guided fluoroscopy techniques will be discussed as well as case reports reviewed.

TRANSFORMING MEDICAL BOARDS: THE TEXAS EXPERIENCE

Steve Hotze, MD

Dr. Hotze will speak about the campaign to transform the Texas Medical Board (TMB), and will give an update on the federal lawsuit against the TMB filed December 20, 2007 by the Association of American Physicians and Surgeons (AAPS). Dr. Hotze will advise physicians of what they can do to help reform state boards. The goal is to **eliminate**: 1) anonymous complaints from insurance companies, hospitals, pharmaceutical companies, attorneys and competitors, 2) anonymous "expert" witnesses, 3) Star Chamber proceedings held in secret, 4) prohibition of notes and recordings in hearings, 5) denial of due process to physicians, 6) discipline for menial and trivial records' findings, 7) intimidation tactics, 8) manipulation of assignments to the Informal Settlement Conference (ISC) panels rather than a fair system of random assignments, 9) forced settlements, and 10) conflicts of interest. We are advocating: 1) the sacredness of the patient/doctor relationship, 2) transparency of charges and proceedings, 3) accountability of TMB members for their actions, 4) integrity of the board members in carrying out responsibilities, and 5) the acceptance of and giving equal weight to evaluations of a physician's care by physicians other than those chosen as so called expert witnesses by the TMB.

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BILL ANTON, PHD, BSC (HONS)

Former Lecturer & Course Coordinator Anti-Ageing Medicine, Swinburne University, Graduate School of Medicine, Melbourne, Australia

Bill Anton is a consultant at PathLab (Australia) as a clinical & nutritional biochemist. As a non-clinical endocrinologist (scientist), he has researched and developed reference ranges for hormones in serum, urine and saliva based on gender and age groups for physiological and supplemented levels relative to anti-aging medicine protocols. He has been instrumental in establishing a number of test panels and profiles for Integrative and Anti-Ageing Medicine.

He was a Senior Lecturer and Consultant in Integrative Medicine and the coordinator of the course in Anti-Ageing Medicine at Swinburne University, Graduate School of Medicine, and where he was also involved in Research on Anti-Aging Medicine as part of a PhD. Bill Anton is the Medical Research Director of LifeSource Anti-Aging Clinics in Melbourne and Sydney and has been practicing anti-aging medicine for over 10 years. As a Board Certified Diplomat of the A4M, Bill Anton has been responsible for promoting the field of anti-aging medicine in the USA, Australia, Asia and recently Europe, where he was also appointed as a foundation board member, and a board member of the International Hormone Society and Secretary of the World Society of Anti-Aging Medicine based in Rome. More recently, with the assistance of the A4M, Bill Anton and colleagues established the AustralAsian Academy of Anti-Aging Medicine (A5M). Bill Anton is also a lecturer and examiner for the European Specialization Course in Anti-Aging Medicine and the USA Anti-Aging Fellowship Program.



ALAN J. BAUMAN, MD

Medical Director, Bauman Medical Group

Dr. Alan J. Bauman received his MD degree from New York Medical College and served internship and residency years in Surgery at Beth Israel Medical Center and Mt. Sinai Medical Center in Manhattan, before specializing exclusively in Hair Restoration. As Founder and Medical Director of Bauman Medical Group in Boca Raton—Florida, he has spent the last ten years of his professional career helping his patients maintain, enhance and restore their own living and growing hair using a results-oriented, “Multi-Therapy” approach. Dr. Bauman is a member of the esteemed International Society of Hair Restoration Surgery and the American Academy of Anti-Aging Medicine. Passionate about hair restoration, Dr. Bauman is an avid author, presenter and frequent faculty member at medical conferences and Live Surgery Workshops. His advice and expertise is sought out not only from patients and physicians, but also the media. Dr. Bauman’s hair restoration practice has been featured and profiled in national news stories that have appeared on ABC’s *Good Morning America*, NBC’s *Dateline*, CNN, MSNBC, FOX News Channel, ABC News, as well as in The New York Times, USA TODAY, Men’s Health Magazine, and others.



STEPHEN J BEEBE, PHD

Stephen Beebe received his PhD in Medical Science from Medical College of Ohio, Toledo. He did post doctoral studies at the Howard Hugh Medical Institute, Vanderbilt, and was a Fulbright Scholar in Oslo Norway. He presently is a Research Professor at Old Dominion University and the Eastern Virginia Medical School.



DEAN BONLIE, DDS

Loma Linda University Honor Graduate - 1962
 Invented dental materials/taught in Anatomy Dept.- LLU
 Practiced dentistry
 R&D in magnetism & health – 1990-2008
 Invented/patented unique magnetic sleep pad--restores geomagnetic field
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ERIC BRAVERMAN, MD

Director, PATH Medical, New York NY

Dr. Eric Braverman is the Director of The Place for Achieving Total Health (PATH Medical), with locations in New York, NY, Penndel, PA (metro-Philadelphia), and a national network of affiliated medical professionals. Dr. Braverman received his B.A. Summa Cum Laude from Brandeis University and his M.D. with honors from New York University Medical School, after which he performed post-graduate work in internal Medicine with Yale Medical School affiliate. Dr. Braverman is a recipient of the American Medical Association's

Physician's Recognition Award. Dr. Braverman has published over 90 research papers presented to the medical community. Some of his lectures include topics on "Melatonin, Tryptophan and Amino Acids" given at Los Alamos National Laboratories, "The Core Neurotransmitters and Hormones and How They Affect the Aging Process" given at Brookhaven National Laboratories, and most recently he gave a lecture on P300 Evoked Response as a Predictor of Alzheimer's at Oxford University in England. Dr. Braverman is the author of five medical books, including the "PATH Wellness Manual", which is a user's guide to alternative treatment. He has appeared on CNN (Larry King Live), PBS, AHN, MSNBC, Fox News Channel and local TV stations. Dr. Braverman has been quoted in the New York Post, New York Times and the Wall Street Journal.



CHRISTOPHER CENTENO, MD

Dr. Centeno is board certified in PM and R and pain management. He practices outside of Boulder, Colorado. He has also published on the clinical use of autologous mesenchymal stem cells. He is medical director of Regenerative Sciences, a company improving our ability to use adult stem cells in medicine.



DOMINIQUE J. CHARRON, MD, PHD

University of Paris – Medical School.; Stanford University (USA) 1978-1981 Post Doctoral fellow, Immunology

- Professor of Medicine - Immunology, University of Paris (P7)- France
- Chairman-Department of Immunology/Histocompatibility - Saint Louis Hospital AP-HP Paris
- Head of translational research in Hematology, Oncology, Transplantation CIB-HOG
- Director of Research INSERM 662 "Immune responses : regulation and development" IUH

President: European Foundation of Immunogenetics (efiweb.org)
Former President of the International Histocompatibility Council.

- Over 300 international publications (medline – Pubmed) in the field of Immunology, Immunogenetics, Auto-immune diseases, Cancer, Transplantation in Nature, PNAS, J Exp Med, Blood, J of Immunology, NEJ Medicine, Lancet, Human Immunology...



ROBERT A. DEJONGE, DO

Dr. Robert A. DeJonge is a practicing, Board Certified Family Physician with over two decades of hand-on treatment in : emergency medicine, geriatrics, dermatology, and anti-aging medicine. In addition, he is an international keynote speaker on complimentary medicine and sports medicine and the positive effects realized through the addition of supplementations and detoxifying the body. Dr. DeJonge has always carved his own path through the maze of medical data and misnomers, discarding dalliances while investigating every possible genuine lead to the pursuit of longevity with optimal health in human medicine. Every patient receives a customized program specifically designed for them and their individual needs. He and his very talented staff provide a potpourri of options to achieve optimal health in a friendly and inviting atmosphere. Whether you are facing a medical challenge or want to insure that the good health you are currently experiencing continues-this is the place to be. We are the Longevity Center Of West Michigan and are delighted to support your quest for optimal health!



ALEX DESOUSA, MD

Medical Director Surface Medical SPA of Charleston Physian responsible for the Skin and Wound Healing Services, Roane General Hospital, Spencer WV; Former Chief of Staff Roane General Hospital, Spencer WV; Member of the American Academy of Anti-Aging Medicine; Candidate of the American Society of Aesthetic Plastic Surgery; Member of the Brazilian Plastic Surgery Society; Fellow of the International College of Physicians; Fellowship University of Alabama at Birmingham.



MAYER EISENSTEIN, MD, JD, MPH

Dr. Mayer Eisenstein, MD, JD, MPH, is a graduate of the University of Illinois Medical School, the Medical College of Wisconsin School of Public Health, and the John Marshall Law School. In his 33 years in medicine, he and his practice have cared for over 75,000, children, parents, and grandparents. He is Board Certified by the American Board of Public Health and Preventive Medicine, and the American Board of Quality Assurance and Utilization Review Physicians. He is a member of the Illinois Bar.

He is the author of: *Give Birth at Home With The Home Birth Advantage; Safer Medicine, Don't Vaccinate Before You Educate, 2nd Edition; Unavoidably Dangerous - Medical Hazards of HRT and Unlocking Nature's Pharmacy.* Some of his many guest appearances include: "The Oprah Winfrey Show" and "Hannity and Colmes". His weekly syndicated radio show "The Dr. Mayer Eisenstein Show", airs on XM Satellite Radio as well as multiple affiliates. He has formulated natural pharmaceuticals which can be used to treat many chronic medical conditions. One of his goals is to lower the use of pharmaceuticals in the American population.

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MITCHELL J. GHEN, DO, PHD

Dr. Mitchell Ghen is the Chief Medical Officer for Eden Laboratories, Ltd., Bahamas. He heads the largest stem cell transplant, clinical and research team, in the world. His impressive record includes multiple publications in the field of integrative medicine along with new, cutting edge research in stem cell therapeutic applications. He is a world renowned international speaker and national radio health talk co-host. He has co-authored several textbooks as well.



TRUPTI GOKANI, MD

Trupti Gokani, MD is Board Certified in Neurology with advanced certification in Psychopharmacology. She is the Founder and Medical Director of the North Shore Headache clinic. She graduated from the University of Illinois, where she served as the Chief Resident of Neurology her final year. Her current specialization is Headache and Neuropsychiatry, with special interest in non-traditional approaches to management. Currently she is pursuing supplemental and alternative approaches with or without traditional medications in the management of headache, depression, insomnia, ADHD, perimenopausal and other disorders.



ROBERT M. GOLDMAN, MD, PHD, DO, FAASP

Chairman, American Academy of Anti-Aging Medicine (A4M)

Dr. Robert M. Goldman has spearheaded the development of numerous international medical organizations and corporations. Robert Goldman, M.D., Ph.D., D.O., FAASP has served as a Senior Fellow at the Lincoln Filene Center, Tufts University, and as an Affiliate at the Philosophy of Education Research Center, Graduate School of Education, Harvard University. Dr. Goldman is a Clinical Consultant, Department of Obstetrics and Gynecology, Korea Medical University. He also serves as Professor, Department of Internal Medicine at the University of Central America Health Sciences (Belize). In addition, Goldman presently holds the position of Visiting Professor at Udayana Medical University (Indonesia). Dr. Goldman is a Fellow of the American Academy of Sports Physicians and a Board Diplomat in Sports Medicine and Board Certified in Anti-Aging Medicine.

Dr. Goldman received his Bachelor of Science Degree (B.S.) from Brooklyn College in New York, then conducted three years of independent research in steroid biochemistry and attended the State University of New York. He received the Doctor of Medicine (M.D.) Degree from the Central America Health Sciences University, School of Medicine in Belize, a government-sanctioned, Ministry of Health-approved, and World Health Organization-listed medical university. He received his Doctor of Osteopathic Medicine and Surgery (D.O.) degree from Chicago College of Osteopathic Medicine at MidWestern University. His Ph.D. work was in the field of androgenic anabolic steroid biochemistry.

He co-founded and serves as Chairman of the Board of Life Science Holdings, a biomedical research company with over 150 medical patents under development in the areas of brain resuscitation, trauma and emergency medicine, organ transplant and blood preservation technologies. He has overseen cooperative research agreement development programs in conjunction with such prominent institutions as the American National Red Cross, the US National Aeronautics and Space Administration (NASA), the Department of Defense, and the FDA's Center for Devices & Radiological Health. Dr. Goldman is the recipient of the 'Gold Medal for Science (1993), the Grand Prize for Medicine (1994), the Humanitarian Award (1995), and the Business Development Award (1996).

During the late 1990s, Dr. Goldman received honors from Minister of Sports and government Health officials of numerous nations. In 2001, Excellency Juan Antonio Samaranch awarded Dr. Goldman the International Olympic Committee Tribute Diploma for contributions to the development of sport & Olympism. In addition, Dr. Goldman is a black belt in karate, Chinese weapons expert, and world champion athlete with over 20 world strength records, he has been listed in the Guinness Book of World Records. Some of his past performance records include 13,500 consecutive situps and 321 consecutive handstand pushups.

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Dr. Goldman was an All-College athlete in four sports, a three time winner of the John F. Kennedy (JFK) Physical Fitness Award, was voted Athlete of the Year, was the recipient of the Champions Award, and was inducted into the World Hall of Fame of Physical Fitness. In 1995, Dr. Goldman was awarded the Healthy American Fitness Leader Award from the President's Council on Physical Fitness & Sports and U.S. Chamber of Commerce. Dr. Goldman is Chairman of the International Medical Commission overseeing sports medicine committees in over 176 nations. He has served as a Special Advisor to the President's Council on Physical Fitness & Sports. He is founder and international President Emeritis of the National Academy of Sports Medicine and the cofounder and Chairman of the American Academy of Anti-Aging Medicine (A4M). Dr. Goldman visits an average of 20 countries annually to promote brain research and sports medicine programs.



ZANNOS G. GREKOS, MD

Dr. Grekos is an invasive cardiologist with extensive experience and training in the field of stem cell therapy. Having collaborated with the major treatment centers in Asia, he has been active in both the development of research and treatment protocols. Dr. Grekos actively oversees the entire treatment process and consults with patients throughout the world. He also trains physicians in the evaluation and treatment of patients receiving stem cell therapy. In February 2007, he was invited to Washington DC to brief the United States Senate Health Advisory Staff on the current state of stem cell research and therapy around the world. Dr. Grekos has appeared on National Public Radio and Television programs and he has also been quoted in various other media sources.



VICTOR HARDING, MD

Board Certified: Internal Medicine, Sleep Medicine, Anti-Aging. MD University of Virginia '78, BA Stanford University '74. Residency training: University of Florida, Southern Illinois University, Orlando Regional Medical Center, University of South Florida. Practices in Orlando, FL (MD One-On-One). Married to Deborah Harding, MD since 1976 and father of 6.



MARVIN S. HAUSMAN, MD

Dr. Hausman received his MD degree from New York University School of Medicine in 1967 and is a Board Certified Urological Surgeon. He is currently CEO of Oxis International, Inc. (NASDAQ:OXIS) a company engaged in the research and development of antioxidant compounds and oxidative stress biomarkers and assays. He has 30 years of drug development and clinical care experience at various pharmaceutical companies, including working in conjunction with Bristol-Myers International, Mead-Johnson Pharmaceutical Co., and E.R. Squibb. Dr. Hausman was a co-founder of Medco Research Inc, a NYSE-traded biopharmaceutical company that was acquired by King Pharmaceuticals Inc. He is President of Northwest Medical Research Partners, Inc. a firm specializing in the identification and acquisition of breakthrough pharmaceutical and nutraceutical products. He is also a scientific consultant to Golden Gourmet Mushrooms of San Marcos, CA, and has developed a novel product called Mushroom Matrix, a potent natural organic antioxidant mushroom complex for use in humans and animals.

Dr. Hausman and his wife Deborah own and operate Quailhurst Vineyard Estate in Sherwood, Oregon; a facility devoted to breeding, training and sale of competition dressage horses and growing, producing and bottling premium Pinot Noir wine.

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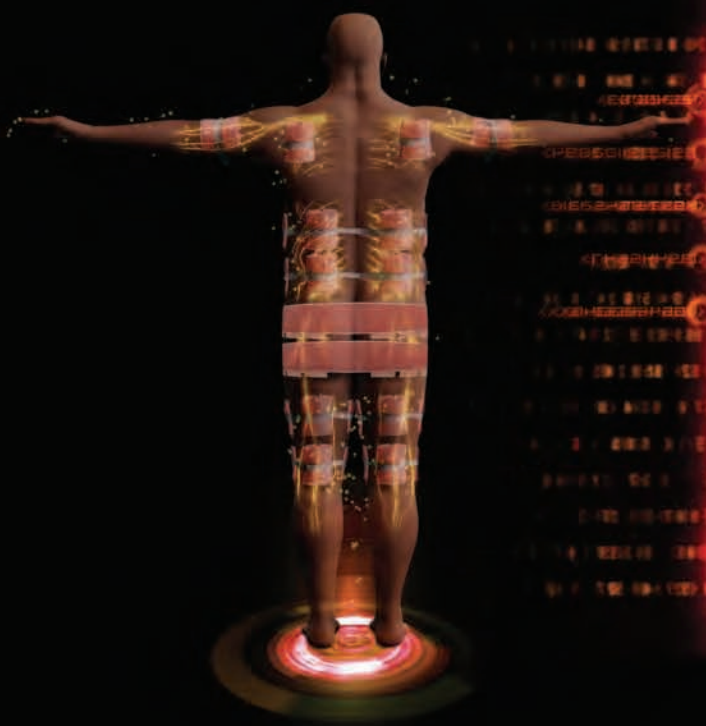
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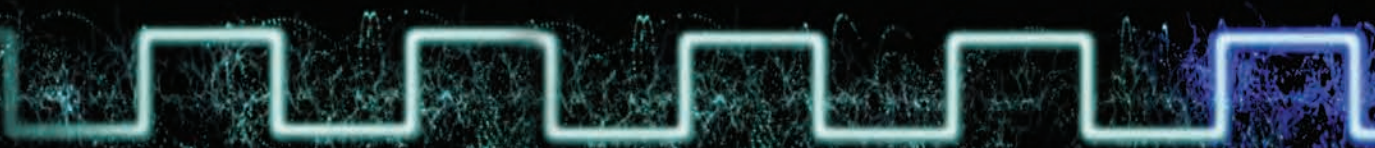


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THIERRY HERTOGE, MD

- President of the World Society of Anti-Aging Medicine (WOSAAM)
- President of the European Academy of Quality of Life and Longevity medicine (Eaqual)
- Scientific coordinator of the International English-speaking and national French-speaking Anti-Aging Medicine Specialization linked to the European Institute of Scientific Anti-Aging Medicine
- Author of various books translated into several languages (Spanish, Russian, Chinese, German, French, Danish, Dutch, etc.) including the Hormone Handbook (International Medical Books) and the Hormone Solution (Harmony books).



STEPHEN HOLT, MD, PHD

Dr. Stephen Holt, MD is a Distinguished Professor of Medicine and a medical practitioner in New York State. He has published many peer-review papers in medicine and he is a best-selling author with twenty books in national and international distribution. He has received several awards for teaching and research. As a full professor of medicine for 20 years and an adjunct professor of Bioengineering for 10 years, Dr. Holt is a frequent lecturer at scientific meetings and healthcare facilities throughout the world.



STEVEN F. HOTZE, MD

Steven F. Hotze, M.D, is an outspoken and tireless advocate for patients' and physicians' access to alternative medicine, particularly BHRT and treatment of subclinical hypothyroidism. Author of *Hormones, Health & Happiness* and founder of the Hotze Health and Wellness Center in Houston, Dr. Hotze is calling for a Wellness Revolution.



DAVID R JAMES, PHD, ND

David R James ND, PhD, has been a highly successful international engineer until 9 years ago (1999) when he turned his many research skills to bear on health and wellness. With his internationally renowned company, Body Conservation LLC, based in Florida since 2006, he is bringing cutting edge scientific and medical research, done throughout Europe over the last 8 years, to benefit the USA.

With his trusted expertise increasingly in demand, Dr James' reputation as an expert in the causes of cancer (as well as heart disease, diabetes, obesity, etc., and how to get the body functioning correctly to rid itself of disease) has been burgeoning.



STEVEN V. JOYAL, MD

Vice President, The Life Extension Foundation, Inc

Steven V. Joyal, MD is Vice President of Scientific and Medical Affairs at the *Life Extension Foundation, Inc.* dedicated to extending and enhancing human life. Prior to joining *Life Extension*, Dr. Joyal was employed by Bristol-Myers Squibb in global clinical cardiovascular-metabolic drug development including obesity, diabetes, and hyperlipidemia. Before joining Bristol-Myers Squibb, Dr. Joyal worked at Abbott Labs/ Knoll Pharmaceutical Company on

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DR. VITO QUATELA

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Meridia®, one of only two FDA-approved long-term weight loss medications. Preceding his leadership responsibilities in industry, Dr. Joyal was in clinical practice in Rhode Island, and he was affiliated with Brown University and Women & Infants Hospital, managing the Internal Medicine service at Butler Hospital and helping to guide member care at the Care New England Wellness Centers in Warwick and East Providence. Dr. Joyal is a graduate of the Dartmouth/ Brown program in medical education, and he was board-certified in Internal Medicine in 1997. His undergraduate degree is in Physics, and while an undergraduate he was awarded membership in Sigma Pi Sigma (national collegiate honor society for physics) and a research grant at Brookhaven National Laboratory on Long Island. He is an accomplished speaker, and he has been published in both peer-reviewed scientific journals and health & wellness periodicals for the general public. His book, *What Your Doctor May Not Tell You About Diabetes*, was published February, 2008 by Warner Books.



R H KELLER, MD

After a distinguished academic career at the Mayo Clinic, The Medical College and University of Wisconsin and subsequently industry (Director of Immunology, Coulter Electronics), he founded and continues active involvement in the KBK Institute of Medicine, an integrative Immunologic and Age Management practice; VitImmune for targeted nutraceutical development; and Phoenix BioSciences for ethical drug development in HIV/AIDS and Neurodegenerative diseases.



RONALD KLATZ, MD, DO

Dr. Ronald Klatz, who coined the term “anti-aging medicine,” is recognized as a leading authority in the new clinical science of anti-aging medicine. Since 1981, Dr. Klatz has been integral in the pioneering exploration of new therapies for the treatment and prevention of age-related degenerative diseases. He is the physician founder and President of the American Academy of Anti-Aging Medicine Inc. (“A4M”), a non-profit medical organization dedicated to the advancement of technology to detect, prevent, and treat aging related disease and to promote research into methods to retard and optimize the human aging process. As a world-renowned expert in anti-aging medicine, Dr. Klatz is a popular lecturer at A4M sponsored/co-supported events in anti-aging medicine. He is instrumental in the continuing development of A4M’s educational website, www.worldhealth.net, with an Internet audience exceeding 300,000 viewers, for which he serves as Medical Advisor. In his capacity as A4M President, Dr. Klatz oversees AMA/ACCME-approved continuing medical education programs for more than 30,000 physicians, health practitioners, and scientists from 78 countries worldwide. In addition, Dr. Klatz is Professor, Department of Internal Medicine at the University of Central America Health Sciences. Dr. Klatz is Board Certified in the specialties of Family Practice, Sports Medicine, and Anti-Aging Medicine.

Dr. Klatz co-founded the National Academy of Sports Medicine, which provides medical specialty training in musculoskeletal rehabilitation, conditioning, physical fitness, and exercise to 35,000 healthcare professionals internationally. He is a founder and key patent developer for Organ Recovery Systems, biomedical research company focusing on technologies for brain resuscitation, trauma and emergency medicine, organ transplant and blood preservation.

Dr. Klatz is the inventor, developer, or administrator of 100-plus scientific patents. In recognition of his pioneering medical breakthroughs, he was awarded the Gold Medal in Science for Brain Resuscitation Technology (1993) and the Grand Prize in Medicine for Brain Cooling Technology (1994). In addition, Dr. Klatz has been named as a Top 10 Medical Innovator in Biomedical Technology (1997) by the National Institute of Electro-medical Information, and received the Ground Breaker Award in Health Care (1999) with Presidential Acknowledgment by William Jefferson Clinton from Transitional Services of New York.

The author of several nonfiction bestsellers, including *Grow Young with HGH* (HarperCollins), Dr. Klatz also has authored *Infection Protection: How to Fight the Germs That Make You Sick* (HarperCollins), *Ten Weeks to a Younger You*, *New Anti-Aging Secrets for Maximum Lifespan*, *Brain Fitness* (Doubleday), *Hormones of Youth*, *Seven Anti-*

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Dr. Klatz has served as a contributor, editor, reviewer and advisor to *Archives of Gerontology and Geriatrics, Journal of Gerontology, Osteopathic Annals Medical Journal, Patient Care Medical Journal, Total Health for Longevity, and 50+ Plus magazine*. His columns on wellness and longevity have appeared in *Pioneer Press (a division of Time-Life Inc), Townsend Letter for Doctors and Patients, Spa Management Journal, The Wellness Channel, Fitness & Longevity Digest, Alternative Medicine Digest, Nutritional Science News, Healing Retreats & Spas, Skin Inc., and Longevity SA* (for which he is served as Senior Medical Editor)

Dr. Klatz has co-hosted the national Fox Network television series *Anti-Aging Update* and served as national advisor for Physician's Radio Network. He has appeared in interviews on CNN, USA Today TV, ABC News, NBC News, CBS News, Good Morning America, The Today Show, the Oprah Winfrey Show, Extra Daily TV News (partial list). Dr. Klatz has participated in articles appearing in the *New York Times, USA Today, Chicago Tribune, Newsweek, Harper's Bazaar, MacLean's [Canada], Forbes Magazine, and Investor's Business Daily* (partial list).

Dr. Klatz is highly regarded by scientific and academic colleagues for his continuing medical education lectures on the demographics of aging and the impact of biomedical technologies on longevity. His scientific articles have been published in *Resident and Staff Physician, British Journal of Sports Medicine, Medical Times/The Journal of Family Medicine, Osteopathic Annals, and American Medical Association News* (partial list).

Dr. Klatz is a graduate of Florida Technological University. He received the Doctor of Medicine (M.D.) Degree from the Central America Health Sciences University, School of Medicine, a government-sanctioned, Ministry of Health-approved, and World Health Organization-listed medical university. Dr. Klatz received his Doctor of Osteopathic Medicine and Surgery (D.O.) degree from the College of Osteopathic Medicine and Surgery (Des Moines, Iowa).

Dr. Klatz has held several distinguished teaching or research positions, at Tufts University, the University of Oklahoma School of Osteopathic Medicine, Des Moines University School of Medicine, and the Chicago College of Osteopathic Medicine and Swinburne University (Australia).

A consultant to the biotechnology industry and a respected advisor to several members of the U.S. Congress and others on Capitol Hill, Dr. Klatz devotes much of his time to research and to the development of advanced biosciences for the benefit of humanity.



RUSSELL L. KOLBO, DC, ND

Dr. Kolbo received his Doctorate of Chiropractic degree in 1969 from National Chiropractic College in Lombard, Illinois and in 1971 earned his Doctorate of Naturopathic Medicine from National College of Naturopathy in Seattle, Washington.

He began his practice in Tacoma, Washington in 1970 and maintained a healthy chiropractic/naturopathic practice for over 35 years, where he specialized in cleansing, detoxification and nutritional programs.

Dr. Kolbo retired from active practice in 2000 and moved to Maui with his wife, Cherie. Together they practice colon hydrotherapy as well as train others to become colon hydrotherapists. They own and operate Living In Wellness School for Colon Hydrotherapy.

Dr. Kolbo has taught anatomy and physiology at National College of Naturopathic Medicine as well as lecturing on Colon Hydrotherapy at Bastyr University, both in Seattle, Washington. He has given guest lectures and sat on and chaired various related boards. He is currently the President of the International Association for Colon Hydrotherapy (I-ACT).

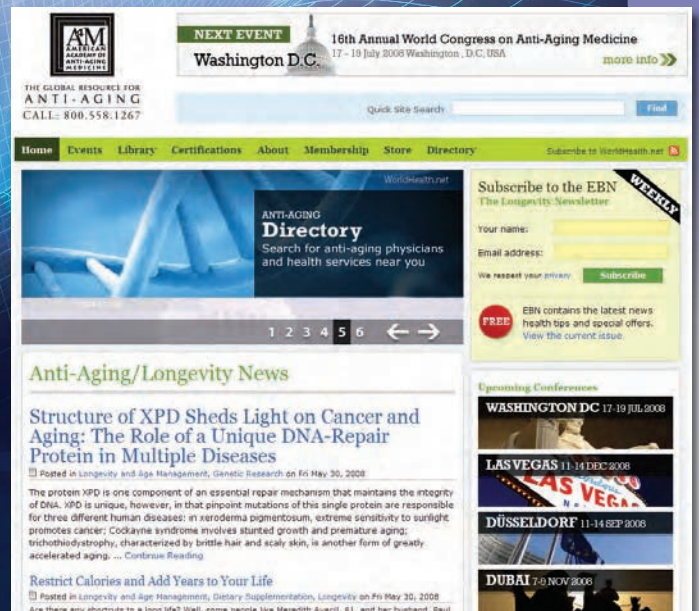


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JOHN J. KOPCHICK, PHD

Dr. John J. Kopchick, the Milton and Lawrence H. Goll Eminent Scholar Professor in Molecular Biology at the Edison Biotechnology Institute, Ohio University in Athens, Ohio. He discovered a GH antagonist that is now a drug, Somavert, marketed for acromegaly. He has published more than 240 scientific articles. He serves on the editorial board of Journal of Biological Sciences and *GH & IGF-1 Research*.



GIL LEDERMAN, MD

Cabrini Medical Center

From his home in Iowa where he attended the University Of Iowa School Of Medicine to Harvard Medical School where he was trained in Medical Oncology at the Harvard Medical School Dana Farber Cancer Center and the Harvard Medical School Joint Center for Radiation Therapy, he has been a thoughtful advocate for innovative treatment for those with cancer. He is Board Certified in Radiation Oncology, Medical Oncology and as well, Internal Medicine. He was trained in Internal Medical at the combined Michael Reese/University of Chicago program. Dr. Lederman is the first physician to perform non-invasive stereotactic body radiosurgery in the western hemisphere and probably has the largest experience worldwide.



THOMAS J. LEWIS, PHD

Dr. Thomas J. Lewis holds a Ph.D. in Inorganic and Physical Chemistry from MIT (1984). His research career focused mainly on kinetics and electron transfer properties of metal centered macrocycles. He has consulted in toxicology to much of big Pharma. Recently he developed several new sonodynamic therapeutic agents for cancer treatment.



JOHN H. MAHER, DC, DCCN, FAAIM

Vice President of Education and Research

Dr. Maher oversees both physician and consumer education for BioPharma Scientific. With Dr. Bruce Howe, he co-founded both "Doctors For Nutrition" and the successful internet based anti-aging research business mentioned above. He has taught nutrition to health professionals nationally for the past 14 years.

He is a regular columnist on health and wellness for *Dynamic Chiropractic*, which enjoys the world's largest chiropractic periodical circulation.

Dr. Maher is past post-graduate faculty of NYCC Academy of Anti-Aging Medicine, a Diplomate of the College of Clinical Nutrition, and a Fellow of the American Academy of Integrative Medicine. Dr Maher, who received his doctorate as valedictorian in 1978, maintained an active complementary medicine practice for 25 years.

Dr. Maher writes regularly on nutrition in publications for health professionals and is a regular columnist on health and wellness for *Dynamic Chiropractic*, which enjoys the world's largest chiropractic periodical circulation.

Dr. Maher has been married to his wife, Linda, for 25 years, and lives with her and their teenage daughter and son, Halle and Lee, in Carmel Del Mar



SHARON MCQUILLAN, MD

Dr. Sharon McQuillan is a Board certified physician who specializes in both Aesthetic and Anti-Aging Medicine.. Dr. McQuillan lectures internationally on Aesthetic Medicine for many organizations. She is also a nationally certified trainer and lecturer for Sciton, Allergan, Medisis, and Bioform Medical.

In 2007 Dr. McQuillan instituted The Aesthetic Anti-Aging Fellowship in conjunction with The American Academy of Anti-Aging Medicine.

Dr. McQuillan owns and operates Ageless Institute in Sarasota, Florida offering Anti-Aging and Aesthetic treatments.. Dr. McQuillan formed The Ageless Aesthetic Institute, the only level 4 ACCME accredited aesthetic training program for medical professionals in order to standardize and elevate the practice of Aesthetic Medicine. Dr. McQuillan has been featured in Dermatology Times, Vogue, Medical Spa Report, Elevate, MedEsthetic, and Healthy Aging magazine.



CASS NELSON-DOOLEY, MS

Cass Nelson-Dooley is the Research Coordinator in the Science and Education Department at Metamatrix Clinical Laboratory and educates clinicians about the use of laboratory data in patient care. She is co-author of, "Nutrient and Toxic Elements" in Laboratory Evaluations for Integrative and Functional Medicine. Ms. Nelson-Dooley completed a Fulbright scholarship and Master of Science in Ethnopharmacology. She has published in journals such as *The Journal of Nutrition*, *Obesity Research*, and *Current Medicinal Chemistry*.



JAMES L. OSCHMAN, PHD

Jim Oschman has published about 30 papers in leading scientific journals, and about an equal number in complementary medicine journals. He has also written two books on energy medicine, and lectures internationally on this subject. Jim's investigations of the living connective tissue matrix provide the basis for powerful anti-aging techniques.



MICHAEL OZNER, MD

Michael Ozner, MD, FACC, FAHA is one of America's leading advocates for heart disease prevention and a well known regional and national speaker in the field of preventive cardiology. Dr. Ozner is a board certified cardiologist, a Fellow of the American College of Cardiology and American Heart Association, medical director of the Center for Wellness & Prevention at Baptist Health South Florida, Clinical Assistant Professor of Medicine and Cardiology at the University of Miami Miller School of Medicine and past Chairman of the American Heart Association of Miami. Dr. Ozner is author of the *Miami Mediterranean*

Diet (2008 Benbella Books). In addition, he is the medical director for the Cardiovascular Prevention Institute of South Florida and symposium director for "Cardiovascular Disease Prevention," an annual international meeting highlighting advances in preventive cardiology. Dr. Ozner is the 2008 recipient of the Humanitarian Award from the American Heart Association.



SANGEETA PATI MD FACOG

*Medical Director for SaJune Medical Center Thx
Diplomat of American Board of Obstetrics and Gynecology;
Diplomat of American Board of Anti-Aging Medicine.*

Sangeeta Pati, M.D. has practiced obstetrics-gynecology in the Washington, D.C., area for 14 years before opening an integrative, evidence-based alternative and conventional medical center in Orlando, FL. She graduated at the top of her medical class at the University of Maryland School of Medicine, Baltimore, and served a residency at Georgetown University School of Medicine, Washington, D.C. She has practiced in the USA and internationally serving as the Medical Director for a 350 employee international organization, Engenderhealth. She has authored numerous evidence-based reviews and articles.



GORDON PEDERSEN, PHD

Dr. Gordon Pedersen is an international best-selling author. He is the formulator of more than 150 nutritional products and is the host of the radio show "Common Sense Medicine". He now serves as the director of the Institute of Alternative Medicine and was nominated to chair the United States Pharmacopoeia Review Board, Natural Products Committee. Dr. Pedersen is an acclaimed scientist and sought after professional speaker and nutritional expert.

Dr. Pedersen received his Doctorate degree in Toxicology with emphasis in Virology from Utah State University, and a Master's degree in Cardiac Rehabilitation and Wellness. Dr. Pedersen has authored a number of important protocols in virology.



RIFFAT H QADIR, MD

Dr. Qadir trained in Otolaryngology at the Johns Hopkins Hospital and practices an Integrative approach to Ear-Nose-Throat disorders and Allergy. She is a fellow of the American Academy of Otolaryngic Allergy and the American College of Surgeons. She is in private practice in Northeast Ohio.



MARK ROSENBERG, MD

Dr. Rosenberg is board-certified in emergency medicine and is active in drug research. He has recently patented a drug for the treatment of obesity that will soon be entering clinical trials. Over the past three years, Dr. Rosenberg has developed and refined a novel protocol for the treatment of advanced cancer.



RON N. ROTHENBERG, MD

*Clinical Professor, Preventive & Family Medicine, University of California, School of Medicine
Founder, California HealthSpan Institute*

As a pioneer in the field of Anti-Aging Medicine, Ron Tothenberg, M.D., was one of the first physicians to be recognized for his expertise to become fully board certified in the specialty. Dr. Rothenberg founded the California HealthSpan Institute in Encinitas, California in 1997 with a commitment to transforming our understanding of and finding treatment for aging as a

disease. Dr. Rothenberg is dedicated to the belief that the process of aging can be slowed, stopped, or even reversed through existing medical and scientific interventions. Challenging traditional medicine's approach to treating the symptoms of aging, California HealthSpan's mission is to create a paradigm shift in the way we view medicine: treat the cause. He received his MD from Columbia University, College of Physicians and Surgeons in 1970. Dr. Rothenberg performed his residency at Los Angeles County-USC Medical Center and is also board certified in Emergency Medicine. He received academic appointment to the USCD School of Medicine Clinical Faculty in 1997 and was promoted to full Clinical Professor of Preventive and Family Medicine in 1989. In addition to his work in the field of Anti-Aging medicine, Dr. Rothenberg is an Attending Physician and Director of Medical Education at Scrips Memorial Hospital in Encinitas, California. Dr. Rothenberg travels extensively to lecture on a variety of topics, which include Anti-Aging Medicine and Emergency Medicine and is the author of *Forever Ageless*. He has recently been featured in the University of California MD TV series in the shows on Anti-Aging Medicine.



BERNARD SIEGEL, JD

Executive Director, Genetics Policy Institute

Bernard Siegel, J.D. is the founder and executive director of the Genetics Policy Institute. He also serves as the co-chair of the Governmental Relations Committee of the International Society for Stem Cell Research. Mr. Siegel is a leader to the Pro-Cures Movement dedicated to expanding stem cell research worldwide.



JACKIE SILVER

Jackie Silver is Aging Backwards and she shares her secrets, tips and shortcuts on her Web site, AgingBackwards.com, in her forthcoming book, on TV, on radio and in person. She is a television correspondent on a syndicated show, the beauty editor for a popular morning radio show and a sought-after speaker.



JARED M. SKOWRON, ND

Jared M. Skowron, ND is faculty at University of Bridgeport. Specializing in amino acid detoxification, he treats a variety of toxic conditions in his private practice, including autism, fibromyalgia, chronic fatigue, and IBS. As Senior Naturopathic Physician for Metabolic Maintenance Products, Dr. Skowron has helped thousands of patients by formulating individualized amino acid formulas to improve their health.



PAMELA W. SMITH, MD, MPH

Pamela W. Smith, M.D., MPH spent her first twenty years of practice as an emergency room physician with the Detroit Medical Center. She is diplomat of the Board of the American Academy of Anti-Aging Physicians and is an internationally known speaker and author on the subject of wellness, anti-aging, and functional medicine. She is currently the owner and director of The Center For Healthy Living and Longevity. She is a member of the American Academy of Anti-Aging Physicians and is a board examiner. Dr. Smith is the Director of The Fellowship in Anti-Aging, Regenerative and Functional Medicine, which is the only fellowship of its kind in the U.S.. She is also the author of the best selling books, "HRT: The Answers", "Vitamins: Hype or Hope" and "Demystifying Weight Loss". Her newest book "What You Must Know About Vitamins, Minerals, Herbs & More" has just been published.



JEANNE STRYKER, MD

Dr. Stryker is a Board Certified Radiologist from Dartmouth & Harvard with Fellowship in Women's Imaging & Interventional Radiology at MUSC. She is A4M Board Certified with a fellowship in Anti-Aging/Regenerative Medicine. She is founder of Rose Clinic in Solana Beach, CA and President of the Institute for the Advancement of Medical Thermology.



PAUL L. TAI, DPM

Dr. Tai is a trained Podiatric medical physician and Board certified surgeon with expertise in Natural Anti-Aging technologies, herbal compound engineering, research and development with nine (9) patents credited to his name, a professor of Integrative Medicine at NYCPM, New York, a member of the International Hormone Society and regular speaker at American Academy of Anti Aging Medicine.



ELDRED B. TAYLOR, MD

Eldred B. Taylor, M.D., is a internationally known lecturer and leading expert in diagnosing and treating hormonal imbalances by using salivary testing. His approach to diagnosing, treating and preventing illnesses is helping to change healthcare in the United States. He and wife, Ava Bell Taylor, M.D. are the authors of the book, *Are Your Hormones Making You Sick*.



NITISH V. THAKOR, PHD

Nitish V. Thakor, PHD is a Professor of Biomedical Engineering with joint appointments in Electrical Engineering, Mechanical Engineering and Materials Science and Engineering. Currently he directs the Laboratory for Neuroengineering at Johns Hopkins University, School of Medicine. His technical expertise is in the areas of neural diagnostic instrumentation, neural signal processing, optical and MRI imaging of the nervous system, micro and nanoprobe for neural sensing. He carries out research on hypoxic-ischemic brain injury and traumatic brain injury in basic experimental models and also directs collaborative technology development programs on monitoring patients with brain injury in neurocritical care settings. He has carried out research sponsored mainly by the National Institutes of Health and National Science Foundation for more than 20 years. He is a principal research scientist in a large multi-University program funded by DARPA to develop next generation neurally controlled upper limb prosthesis. He has published 180 refereed papers and carries out research funded mainly by the NIH and DARPA. He is the Editor in Chief of IEEE Transactions on Neural and Rehabilitation Engineering. He is the Director of a Neuroengineering Training program funded by the National Institute of Biomedical Imaging and Bioengineering, a multi-disciplinary and collaborative training program for doctoral students. He has established a Laboratory for Clinical Neuroengineering at the Johns Hopkins School of Medicine with the aim of carrying out interdisciplinary and collaborative engineering research for basic and clinical neuroscientists. Dr. Thakor teaches courses on Medical Instrumentation and Molecular and Cellular Instrumentation. He has advised 44 pre-doctoral trainees, 24 post-doctoral trainees and currently advises 10 pre-doctoral and 3 post-doctoral trainees. Dr. Thakor is a recipient of a Research Career Development Award from the National Institutes of Health and a Presidential Young Investigator Award from the National Science Foundation, and is a Fellow of the American Institute of Medical and Biological Engineering, IEEE and Founding Fellow of the Biomedical Engineering Society.

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He is also a recipient of the Centennial Medal from the University of Wisconsin School of Engineering, Honorary Membership from Alpha Eta Mu Beta Biomedical Engineering student Honor Society and Distinguished Service Award from Indian Institute of Technology, Bombay, India.



RICHARD F. WALKER, PHD, RPH

Richard F. Walker, Ph.D, R.Ph has held tenured faculty positions at Clemson, UK College of Medicine and was Director of Compliance at USF College of Medicine. Walker is currently Editor in Chief of the MedLine referenced journal, *Clinical Interventions in Aging*, a source of evidence based information for practitioners of age-management medicine.



XANYA SOFRA-WEISS, PHD

Xanya Sofra-Weiss, Ph.D has a Research doctorate in Neurophysiology from London University and a doctorate in Clinical Psychology from the Gestalt founded New School for Social Research in New York City. She is presently the International Research Director of Arasys Perfector, Inc, a company that researches and uses nanotechnology to built artificial intelligence devices designed to resonate the intricate biochemical inter-communications as they occur at the cellular level. Dr. Sofra-Weiss is also working with Gerry Pollock, co-inventor of the Pacemaker who is presently working on advanced neuro-communication technology at Innovations, a research center, funded by the European Union. Dr. Sofra-Weiss has appeared on network news around the country and has been featured and quoted in leading women's magazines.



EIJI YAMASHITA, PHD

Dr. Yamashita is the Global Research & Development Manager for Fuji Chemical Industry Co., Ltd. He completed a pre-doctoral fellowship at the University of Texas Health Science Center and received his Ph.D. from the University of Tokushima. Yamashita's research experience and scientific contributions span nearly 20 years in the study of carotenoids and antioxidants.

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