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POTASSIUM DEFICIENCY SCAM KILLS AND MAIMS MILLIONS

Deliberately restricting your potassium intake makes you very ill, and thus vulnerable to hundreds of highly profitable medical "cures"

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The title immediately suggests to the reader that a giant pharmaceutical atrocity has been inflicted on the poor natives of some far off third-world country, by a predictably greedy drug multinational, but this is simply not the case. By far the largest number of deaths and permanent crippling disabilities from potassium deficiency occur in America, Canada, Australia, New Zealand, and several other western nations. How this horrific state of affairs came into being and was perpetuated thereafter, is a very long and frequently confusing story, meaning that we must start at the very beginning if we are to have any real chance of understanding the lethal implications.

We first need to understand what potassium is, how much our bodies need on a daily basis to stay healthy, and what happens to us when our body's critical store of potassium is inadvertently or deliberately depleted. Unlike toxic sodium [table salt], potassium is essential to our health. Potassium is present in all cells and is critical to cardiovascular and nerve function, regulating the transfer of nutrients into cells and facilitating muscle energy. This wonder mineral also regulates water balance, assists recuperative powers, and aids rheumatic or arthritic conditions by causing acids to leave the joints, thereby easing stiffness. At the same time potassium is vital for the elimination of wastes, is a natural pain desensitizer, helps control convulsions, headaches and migraines, and promotes faster healing of cuts, bruises and other injuries. Because of its very high electrochemical activity, potassium is on the move all the time, and we need vast quantities to replenish that lost every day. When we exercise and sweat, we lose potassium through urine. When we are under extreme stress for a variety of other reasons, potassium loss can treble instantly. But as renowned nutritionist Adelle Davis points out, it is toxic sodium that causes the greatest problems. "Persons eating [sodium] salt as they wished excreted nine times more potassium than when their salt intake was limited, and human volunteers kept on diets deficient in potassium retained so much salt that they developed high blood pressure." If Mother Nature was to deprive you of potassium completely, hard scientific evidence proves you would be dead in less than three weeks. But in many ways this would be a merciful release when compared with the infinitely more painful and far slower death caused by slow potassium deprivation, the preferred method of the FDA and AMA. Proper scientists agree the daily potassium requirements of an average adult lie between 3,200 and 4,100 milligrams, but the average potassium intake of Americans through the food chain is only 1,500 to 2,100 milligrams per day, representing an overall average shortfall of 1,850 milligrams. Obviously humans can survive at these savagely depleted levels, because Americans manage to eke out about 70 years each, before this basic potassium deficiency overwhelms them and they finally die, sometimes in great pain from a number of directly related illnesses including arthritis, osteoporosis, hypertension [high blood pressure], angina, strokes and so on. It is scientifically

beyond question that all would live longer and suffer less pain if they received the necessary quantity of potassium each day, which is where the American Food & Drug Administration [FDA] should do a John Wayne job, and ride gallantly to the rescue. Alas, the Food and Drug Administration has not and will not do so, because of sustained lobby pressure by the pharmaceutical multinationals. Despite having full and unrestricted access to the real scientific data providing hard proof of widespread potassium deficiency bordering on a pandemic, the FDA has deliberately avoided specifying a "Recommended Dietary Allowance" [RDA], while simultaneously passing a law restricting the potassium content of all alternative medicines to a mere 100 milligrams.

Far too many of the 'illnesses' we suffer today can be laid at the door of potassium deficiency, though hordes of pharmaceutical and medical apologists will probably reject this, claiming that medical 'research' proved long ago that simple deficiency cannot cause life-threatening conditions. Sadly the apologists will be defeated by historical fact, chronicled long before your local pharmaceutical multinational decided to use your body as a private playground for the benefit of its shareholders.

Scurvy is caused solely by Vitamin C deficiency, and is thus predictably cured quickly by large quantities of Vitamin C. There are thousands of documented cases, especially in the British Royal Navy, where sailors became known as "Limeys" because of the vast amounts of citrus fruit provided free by The Admiralty. Rickets is less well known, but is caused by a deficiency of Vitamin D, rapidly corrected by the generous application of Vitamin D and calcium. Embarrassing though this may be for modern pharmaceutical salesmen and medical doctors, these bald facts are there in the history books for all to see.

So why not admit potassium deficiency? The beginning of the end for obtaining essential minerals from fruit and vegetables happened in the middle of the 19th Century, when German chemist Baron Justus Von Liebig analyzed human and plant ash, and determined that nitrogen, phosphorus, and potassium [NPK] were all the minerals plants needed. He claimed that if fed synthetically to plants, farmers could force plants to grow and support healthy humans. Thus Von Liebig became the father of synthetic manure, which in turn spawned superphosphate, the mother of all deceptive fertilizers. Though NPK and superphosphate are able to create a synthetic soil environment sufficient to stimulate plant growth, the resulting fruits and vegetables are always seriously deficient in trace minerals, with some containing none at all. Baron Von Liebig watched the deficiencies his invention caused with horror, and recanted before he died, but it was all too late. By then, the big investors had moved in for a quick kill. Running in tandem with the depletion of potassium in fruit and vegetables during the 19th Century was an even bigger problem. Until then, salt of any kind had been so highly valued on most continents, that at one point in history it was actually used as money. In Europe, Asia and Africa most of the salt moved by the camel trains over thousands of miles was sylvite, otherwise known as potassium chloride. Great chunks of sylvite were dotted along the trading routes for the beasts of burden to lick at, thereby restoring their electrolytes lost through sweating and other exertion. But when the railroads opened up America from east to west, they started carrying vast quantities of cheap salt produced in giant pans on the two coasts. Unfortunately for Americans this was sea salt, comprised of 98.8% sodium chloride, the favorite of fishes but a deadly enemy of man. And so it was that in less than seventy years, western man had his healthy potassium replaced almost entirely by unhealthy sodium. It was not until the early 20th

Century that medical 'science' started to determine what it considered were healthy 'normal' levels for blood pressure, serum potassium and so on, using data drawn from the population as a whole. The problem is that medical 'science' was by then dealing with seriously damaged human beings, who had already been subjected to the ravages of sodium for nearly fifty years. So what seemed normal to American medical 'researchers' in the early 20th Century, would have horrified the Yanomami or any other self-respecting tribe one hundred years earlier. But because American medicine got off on the wrong foot, it stayed on the wrong foot, and slowly built a giant pyramid of myths based largely on ignorance and fatally flawed biochemistry.

This is your first clue to understanding how it is that we get so ill, and then willingly swallow billions of dollars worth of useless 'patent medicines'. Remember, just to keep up with the average shortfall of 1,850 milligrams of potassium per day, you would need to swallow at least 19 pills from your local health food shop, and no ordinary person could possibly afford that in the long term.

In order to keep their medical doctors in line, both the FDA and AMA have circulated a number of truly frightening stories about potassium. Most common among them is that the potassium will 'react' with one of a wide range of synthetic pharmaceutical medicines, frequently resulting in death. This is actually true, but it is the poisonous synthetic medicine which causes the lethal cross reaction that kills you, not the natural potassium so essential to your health. Then there is the even scarier rumor that 'too much' potassium will kill you by stopping your heart from beating, as in the case of a lethal injection execution. Too much of almost anything will kill you, including simple water and air, especially if applied too quickly or by the incorrect route. When Timothy McVeigh was strapped to a gurney and put to death, the third chemical injected directly into his vein was a 'chaser' containing 50 milliliters of concentrated potassium chloride, which finally stopped his heart. If you are stupid enough to try this at home, you will die just as quickly, and in order to put this deliberate FDA and AMA scare mongering into the proper perspective, it is necessary to explain why. The normal route for potassium to enter the body is by way of the mouth, either in the form of food, or sometimes as a solution made up of 100% water soluble potassium chloride dissolved in fruit juice. As the potassium passes through the digestive tract, the cells extract what they need and any excess is then passed out of the body, partly as solid waste, but mostly through the kidneys as urine. It is a perfectly normal biochemical process that the body itself knows how to handle very well, without any outside help from medical doctors. However, if you inject the potassium directly into a vein, you bypass the body's biochemical safety processes and stop the heart. Exactly the same can be said of concentrated hydrochloric acid, always present in our stomachs in order to digest food, but incapable of harming us because of the body's sophisticated biochemical defenses. However, if you injected this same concentrated hydrochloric acid from the stomach directly into a vein, you would die even more quickly than you would from injecting potassium.

You can only be scared by a medical doctor if you allow yourself to be scared, and you will no doubt gain added confidence where potassium is concerned later in this report, when we examine the extraordinary case of the Yanomami Indians of South America. The Yanomami were fortunate enough to escape the attention of western medical 'science' for thousands of years, and still shun it now. These fascinating people receive virtually no sodium [table salt] at all, but every adult consumes around 8,500 milligrams of potassium every day. They are

incredibly fit and have no history whatever of arthritis, osteoporosis, hypertension [high blood pressure], angina or stroke. We will return to the Yanomami a little later on.

Despite the best efforts of the fledgling pharmaceuticals and medical 'science' in general to belittle the problems, by the nineteen thirties it had become obvious to most Americans that something was seriously amiss with their soils, with their crops, and with their rapidly deteriorating personal health. During the 2nd Session of the 74th Congress in 1936, the United States Senate published Document #264, which really laid the problems facing American nutrition on the line.

Verbatim extracts from Document 264 are provided at the bottom of this page, but for the specific purposes of this report, here are the three most important paragraphs.

"The alarming fact is that foods [fruits, vegetables and grains] now being raised on millions of acres of land that no longer contain enough of certain minerals are starving us - no matter how much of them we eat. No man of today can eat enough fruits and vegetables to supply his system with the minerals he requires for perfect health because his stomach isn't big enough to hold them." "The truth is that our foods vary enormously in value, and some of them aren't worth eating as food...Our physical well-being is more directly dependent upon the minerals we take into our systems than upon calories or vitamins or upon the precise proportions of starch, protein or carbohydrates we consume." "It is bad news to learn from our leading authorities that 99% of the American people are deficient in these minerals, and that a marked deficiency in any one of the more important minerals actually results in disease. Any upset of the balance, any considerable lack or one or another element, however microscopic the body requirement may be, and we sicken, suffer, shorten our lives."

So sixty-eight years ago, the American Government knew full well the problems facing the people, but the stuffed-shirt medical fraternity did absolutely nothing to help. In fact, driven ever onwards by the extravagant fiscal needs of pharmaceutical shareholders, medical 'science' and its subordinate doctors stood reality on its ear, and proceeded to steadily undermine what little good health the general community had left. Learned doctors published papers on the 'potassium-sodium balance needed by all humans', when a quick field trip to almost any Indian Reservation would have reversed their absurd findings in seconds. More and more sodium found its way into every kind of food imaginable, and blood pressures started to rise sharply. By the nineteen-forties, relatively new diseases such as arthritis, hypertension and angina started to climb through the roof, to be met with a veritable shock wave of expensive 'patent medicines' to help with the new 'disease' problems.

A handful of alert doctors recognized the problem for what it really was, and started giving their patients massive doses of potassium [between 5,000 and 20,000 milligrams per day] in order to bring their blood pressures back down to normal, and to relieve problems with angina and other heart complaints. In fact these treatments were entirely successful, but the use of a basic mineral that could not be patented by the pharmaceutical companies was frowned on, and medical research grants in this field mysteriously started to dry up.

By the late sixties such research has been suppressed, as you can see from the [limited] general references provided at the bottom of this page. The pharmaceutical multinationals were by now exerting increasing pressure on the medical fraternity, providing all kinds of 'assistance'

during their university training, with copious quantities of fancy-sounding scholarships and research grants. Both were vital in helping to get medical doctors to "see things the right way", meaning of course that profitable drugs were the answer to all ills. As more doctors peddled more drugs to their patients, pharmaceutical corporate profits rose sharply, allowing perks for the doctors to be extended to include 'training seminars' at luxury hotels and golf complexes, along with other varied forms of discreet bribery. By the seventies, all meaningful references to serious mineral deficiencies had been removed from the curriculum, with medical students taught that patients could obtain all the minerals they needed from a diet rich in fruit and vegetables, although their university tutors knew this was a complete lie. Deficiencies manifesting as cramps, arthritis, osteoporosis, hypertension, angina and strokes etc, became 'diseases' that could be treated by a truly dazzling array of brightly colored and highly profitable pharmaceutical drugs. It was all a terrible illusion of course, but the show had to go on.

As toxic sodium increasingly overwhelmed healthy potassium, the resulting potassium deficiency caused hardening of the cardio vascular system, and 'essential hypertension' [high blood pressure of 'unknown' origin] became the order of the day. Incidences of angina, stroke and heart attack increased dramatically, as did stress, with the latter feeding on the former. Because of a lack of space, this report will only cover the effects of potassium deficiency on the cardio-vascular system. Other directly related horrors such as arthritis, osteoporosis, diabetes etc. will have to wait for another day.

Modern medical 'science' has tried to explain away the critical and frequently lethal human sodium-potassium imbalance with an artfully designed theoretical model generally referred to as the 'Potassium Pump', in which the medical buzzword is 'balance'. To quote one medical article, "Potassium is pumped into the cell by active transport systems, which concomitantly pump sodium out of the cell. The preferential segregation of sodium and potassium across the cell's biological membrane is important in maintaining osmotic balance". What osmotic balance? The Yanomami and other tribes prove that ancient man had no need for toxic sodium, proving to all but a certifiable cretin that the potassium pump is an emergency one-way biochemical protective mechanism, designed to drive toxic sodium out of the cells before it can cause mayhem and premature death.

Despite the Yanomami's overall levels of sodium being incredibly low, researchers who examined more than 10,000 of these cheerful people found that there was a direct correlation between marginally increased sodium intake and increased blood pressure. "... a highly significant statistical relationship was observed between sodium excretion and systolic blood pressure for the 10,079 participants. The higher the urinary sodium excretion [and, therefore, the sodium intake], the higher the blood pressure." The reader should remember that for the Yanomami Indians, normal blood pressure averages out at 95/60 and does not increase with age. Try comparing this with the AMA western 'normal' blood pressure of 120/80, which then goes up in incremental steps as you ingest more sodium and lose more potassium while getting older. Of course, the medical apologists will claim this is because we are more civilized, have evolved, and are thus 'different', but rest assured this is pathetic rubbish. The only significant difference between the Yanomami and Americans or Australians, is that the Yanomami are stuffed full of healthy potassium, while we are stuffed full of toxic sodium.

The researchers also noted that another benefit for the Yanomami related to their lack of obesity. "Adults of industrialized populations have an increase in weight with age. The Yanomami Indians did not increase their weight with age." Short, but to the point. Somebody remind me to add "obesity" to my shopping list of potassium deficiency-related ailments. Those western ladies with a slight weight problem, should resist the temptation to pack their bags and rush off to the headwaters of the Orinoco River. Yanomami husbands are hot on protocol, and do not take kindly to the lady of the house sneaking off into the bushes for a quickie with one of the young bucks. If caught in such a situation, the wife can expect her husband to fire a sharp hunting arrow into the fleshy part of her buttocks. Not enough to kill, but certainly enough to stop her lying on her back for several weeks thereafter. Some choose to call this behavior "barbaric", while others suggest that it merely reinforces strong family values. And oh, yes, before I forget, the favorite supper dish is barbecued frog.

Of course, to prove that any of this Yanomami potassium stuff is relevant to western folk, medical 'science' demands that you must have western guinea pigs for 'controlled trials'. I am one of those guinea pigs, though the trial was controlled strictly by me without independent medical observers, which means that my testimony is suspect at the very least, and I should probably not to be believed. Quite frankly I don't give a damn about that, but the information might be of use to someone out there who either already has cardio-vascular problems, or is seriously interested in avoiding cardio-vascular problems at any time in the future.

For more than 25 years I suffered from 'essential hypertension', in other words high blood pressure that the medical fraternity cannot explain. During that period about eight different medical doctors gave me a staggering variety of 'patent medicines', none of which produced a steady reduction of blood pressure, though on two notable occasions the medicines caused 'bad reactions' which dropped my blood pressure so low and so suddenly, that my wife could barely get a reading. At no time during this 25-year period did any of the medical doctors suggest that it might be a good idea to measure my serum electrolyte levels, in order to check for potassium deficiency. As you might expect, this entire sequence put me off the medical profession in a very big way.

Towards the end of 2003 I started getting the classic signs of 'angina', which, over the next six weeks, rapidly progressed into 'unstable angina', a textbook case involving an accelerating or "crescendo" pattern of chest and back pain that lasted longer than ordinary 'angina'. This was accompanied by acute breathlessness, especially after even moderate exertion or a small carbohydrate meal.

The fact that the medical profession did not know the cause of 'angina' infuriated me, because everything on the planet is caused by something else. My basic knowledge of chemistry indicated that I might be suffering from a sodium overdose, so although in extreme pain and at times barely conscious, I managed to hook up to the Internet and do a few basic Google searches. The only sodium overdoses I could find were those caused by various synthetic drugs, so I reversed my search pattern and tried "potassium deficiency" instead. It was then that I discovered my medical 'angina' symptoms precisely matched those exhibited by a person suffering from an acute potassium deficiency. This information came as no great surprise. On the face of it, I had uncovered the underlying cause of medical 'angina', the latter credited with

the sale of more than a billion dollars worth of synthetic 'patent medicines' every year. The problem was knowing what to do next.

In Australia I was limited to 100-milligram potassium pills from the health food shops, or to a product called "Slow K" available from some pharmacies. Basically Slow K is a slow-release 600-milligram chunk of potassium chloride, which allows a 'non-lethal' dose of potassium to be administered under the direct control of the pill, rather than under the control of its recipient. The problem here is that all chunks of salt are biochemically "hot", meaning that as the sugar coating wears off the outside of the pill, the chunk of undissolved salt is exposed, and can then come into direct contact with delicate internal tissues. In my casual view, this could easily cause some sort of perforation or an ulcer. Clearly what I needed was an industrial quantity of potassium in free flowing 100% water soluble form, which would allow me to first dissolve the potassium in water and fruit juice, thereby ensuring that no salt 'hot spots' could later cause problems in my digestive tract. In the end I settled for a kilogram of AR [Analytical Reagent] grade potassium chloride salt from a chemical warehouse, mercifully not yet under the direct control of the American FDA, or the Australian AMA. Cost wise this was also a plus, because the whole kilogram set me back a mere US\$30.00 including taxes, which is cheap enough when you realize that my potassium chloride purchase contained approximately 620 grams [or 620,000 milligrams] of the same potassium the FDA has restricted to 100-milligrams per dose in the health food shops. You do the math. Pop down to your local health food provider and ask for a quote on 6,200 x 100-milligram potassium supplements. Be ready to write a very large check.

By this stage there was so much pain so often, that I made a personal executive decision to attempt to slowly try to absorb a minimum of 50 grams or 50,000 milligrams of potassium, representing about 1/5th of the 250 grams total that an adult male should contain within his body. Simple common sense suggested that such an acute deficiency, with the extreme symptoms I was suffering, could hardly be caused by a minor reduction in whole body potassium, and, quite frankly, I also wanted to stop the overwhelming pain before it had a chance to accelerate into a fatal stroke or heart attack. With this in mind, I dissolved 4 grams [4,000 milligrams] of potassium chloride in water and fruit juice, slowly swallowed the lot, and then kept grimly repeating this process every eight hours. After about five days [or 60,000 milligrams] most of the pain had gone, but I was still incapable of truly coherent thought. It was not until I was well past the 110,000-milligram mark that my faculties truly returned, though by then I was so exhausted I could no longer write or use the computer. Expressed in the same terms used by the FDA, in ten days I had slowly ingested 68.2 grams of dissolved potassium [68,200 milligrams], or sixty-eight times the maximum quantity permitted under American law. However, it should also be noted that this figure represents only five days of the maximum quantity administered by licensed American doctors to their hypertensive patients during the nineteen forties, before their research funding was mysteriously and abruptly withdrawn. When viewed in the latter context, my actions do not seem unreasonable.

At the end of the ten day period, all of my 'unstable angina' pain and breathlessness had vanished completely, and along with it most of the 'essential hypertension' that plagued me for more than twenty-five years. Nowadays I take a daily maintenance dose of 2,000 milligrams potassium per day [3,200 milligrams of AR grade potassium chloride salt], plus 200 milligrams of magnesium orotate to minimize losses.

Though medical doctors might rave about me illegally 'giving medical advice without a license', I am doing no such thing. In the first place potassium is a naturally-occurring mineral essential in our diets for normal development, which places it firmly in the 'nutrition' rather than 'medical' basket. Secondly there is no way that any government agency can prevent determined people from getting their hands on potassium chloride if they really wish to do so. The material is produced in bulk and used for hundreds of applications. For example, about every third oil rig drilling in the Rocky Mountains probably has about 25,000 pounds of the stuff, neatly stacked in sacks at the edge of the rig site.

There are less difficult ways of obtaining potassium, especially in America where there are a range of "No Salt" products, most of which simply replace sea salt with potassium chloride. Fruit and vegetables grown in strict organic rotation on properly maintained soil will probably contain significant quantities of potassium, though it is very difficult to check precisely. Although I have the necessary knowledge required to test for potassium in a range of different substances, I lack the laboratory equipment needed to do so consistently.

On a closing note, try not to believe the advertising garbage that keeps telling you the banana has the highest level of potassium known to man, because it is a lie. If grown side by side on suitable soils, the humble jacket potato has more than four times as much potassium as the banana, weight for weight. This might bring a wry smile to the face of many an Irishman, whose ancestors were forced to live on a 'poor' diet of potatoes in Ireland more than a century ago. The reality is that those potatoes, so very high in potassium, gave the Irish the huge strength and endurance they needed to build bridges and lay railroads half way round the world. Looking back briefly on the Yanomami Indians, it is not hard to see why.

Scroll down page for Senate quotes and further references.

Verbatim Unabridged extracts from the 74th Congress 2nd Session, Senate Document #264, 1936 :

"Our physical well-being is more directly dependent upon minerals we take into our systems than upon calories or vitamins, or upon precise proportions of starch, protein or carbohydrates we consume."

"Do you know that most of us today are suffering from certain dangerous diet deficiencies which cannot be remedied until depleted soils from which our food comes are brought into proper mineral balance?"

"The alarming fact is that foods (fruits, vegetables and grains) now being raised on millions of acres of land that no longer contain enough of certain minerals are starving us - no matter how much of them we eat. No man of today can eat enough fruits and vegetables to supply his system with the minerals he requires for perfect health because his stomach isn't big enough to hold them."

"The truth is that our foods vary enormously in value, and some of them aren't worth eating as food...Our physical well-being is more directly dependent upon the minerals we take into our systems than upon calories or vitamins or upon the precise proportions of starch, protein or carbohydrates we consume."

"This talk about minerals is novel and quite startling. In fact, a realization of the importance of minerals in food is so new that the textbooks on nutritional dietetics contain very little about it. Nevertheless, it is something that concerns all of us, and the further we delve into it the more startling it becomes."

"You'd think, wouldn't you, that a carrot is a carrot - that one is about as good as another as far as nourishment is concerned? But it isn't; one carrot may look and taste like another and yet be lacking in the particular mineral element which our system requires and which carrots are supposed to contain."

"Laboratory test prove that the fruits, the vegetables, the grains, the eggs, and even the milk and the meats of today are not what they were a few generations ago (which doubtless explains why our forefathers thrived on a selection of foods that would starve us!)"

"No man today can eat enough fruits and vegetables to supply his stomach with the mineral salts he requires for perfect health, because his stomach isn't big enough to hold them! And we are turning into big stomachs."

"No longer does a balanced and fully nourishing diet consist merely of so many calories or certain vitamins or fixed proportion of starches, proteins and carbohydrates. We know that our diets must contain in addition something like a score of minerals salts."

"It is bad news to learn from our leading authorities that 99% of the American people are deficient in these minerals, and that a marked deficiency in any one of the more important minerals actually results in disease. Any upset of the balance, any considerable lack of one or another element, however microscopic the body requirement may be, and we sicken, suffer, shorten our lives."

"We know that vitamins are complex chemical substances which are indispensable to nutrition, and that each of them is of importance for normal function of some special structure in the body. Disorder and disease result from any vitamin deficiency. It is not commonly realized, however, that vitamins control the body's appropriation of minerals, and in the absence of minerals they have no function to perform. Lacking vitamins, the system can make some use of minerals, but lacking minerals, vitamins are useless."

"Certainly our physical well-being is more directly dependent upon the minerals we take into our systems than upon calories of vitamins or upon the precise proportions of starch, protein or carbohydrates we consume." "This discovery is one of the latest and most important contributions of science to the problem of human health."

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