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Heart Failure

**Dr. Rath's Cellular Health Recommendations
for Prevention and Adjunct Therapy**

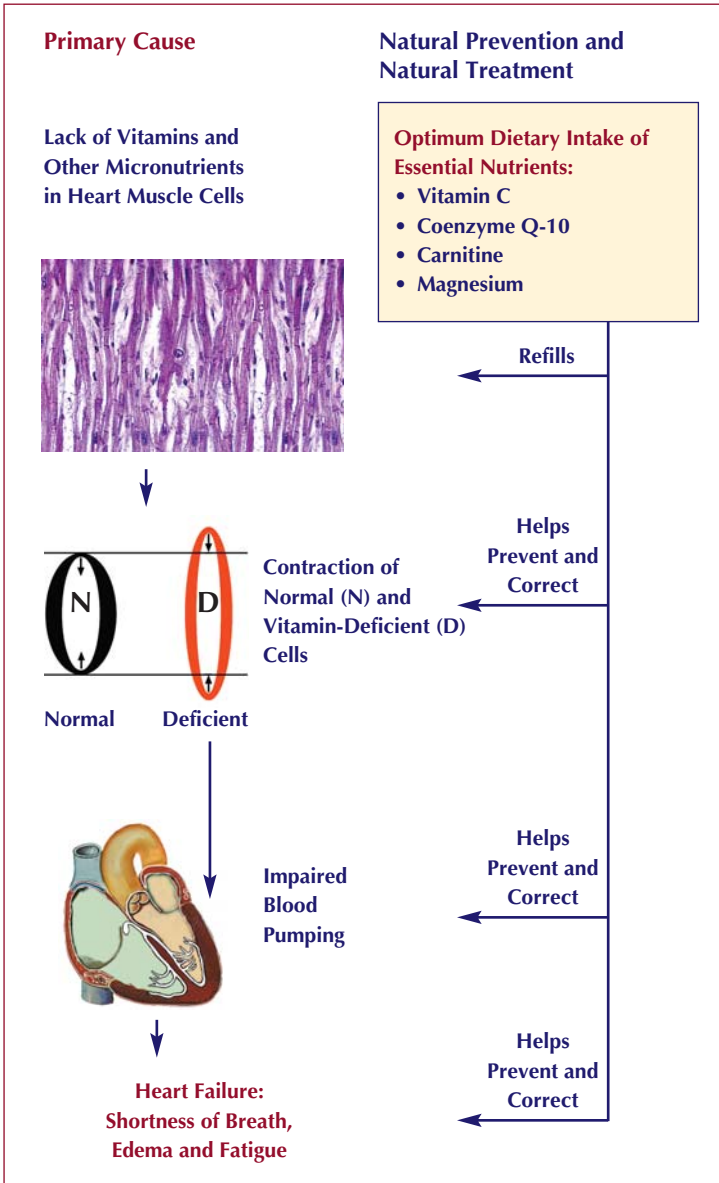
- **The Facts About Heart Failure**
- **The Fatal Consequences of Incomplete Treatment of Heart Failure**
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 - **Documented Health Benefits in Patients**
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The Facts About Heart Failure

Tens of millions of people worldwide suffer from heart failure, which results in shortness of breath, edema and fatigue. The number of heart failure patients has tripled over the last few decades. The epidemic spread of this disease is largely due to the fact that, until now, the causes of heart failure have been insufficiently, or not at all, understood. In some cases, heart failure is the result of a heart attack; in most cases, however, such as with cardiomyopathies, heart failure develops without any prior cardiac event.

Conventional medicine is largely confined to treating the symptoms of heart failure. Diuretic drugs are given to flush out the water that is retained in body tissues because of the weak pumping function of the heart. However, they also flush out water-soluble micronutrients, thereby causing additional health problems. The still insufficient understanding of the causes of heart failure explains the unfavorable prognosis of this disease. Five years after a heart failure condition is diagnosed, only 50% of the patients are still alive. For many patients with heart failure, a heart transplant operation is the last resort. Most heart failure patients, however, die without ever having the option of such an operation.

Cellular Medicine provides a breakthrough in the understanding of the causes, prevention and adjunct treatment of heart failure. The primary cause of heart failure is a deficiency of vitamins and other essential nutrients providing bioenergy to the millions of heart muscle cells. These cells are responsible for the contraction of the heart muscle and for the optimum pumping of blood into circulation. Deficiencies of vitamins and other essential nutrients impair the pumping performance of the heart, resulting in shortness of breath, edema and fatigue.



The causes, prevention and adjunct treatment of heart failure

The Fatal Consequences of Incomplete Treatment of Heart Failure

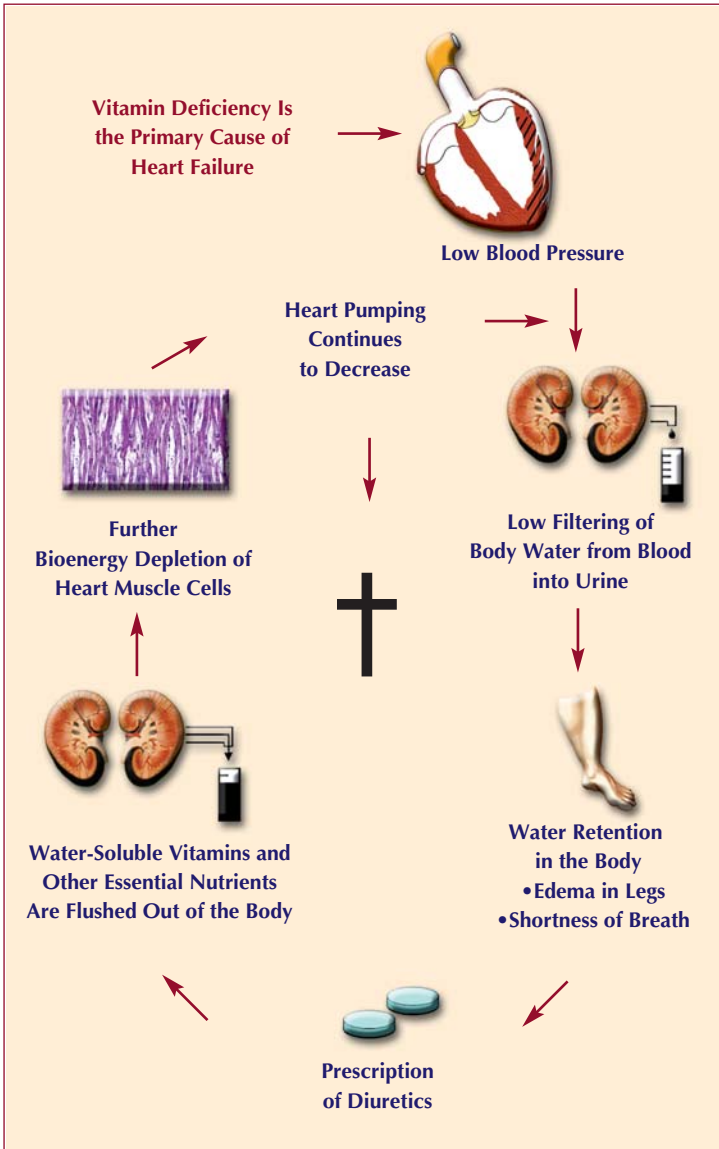
For decades, the focus of conventional medicine on diuretics and other symptom-oriented pharmaceutical drugs has prevented the discovery of the true cause of heart failure. Moreover, the conventional treatment of heart failure patients shows how the lack of understanding about the root cause of a disease leads to a vicious cycle in which therapeutic measures worsen the health problem.

Today, we know that the chronic deficiency of essential cellular nutrients in heart muscle cells impairs the pumping function of the heart. This leads to impaired blood circulation in different organs of the body. For example, the kidneys remove excess water by filtering it from the blood into the urine. With impaired blood flow through the kidneys, water is retained in tissues and causes swelling (edema) of the legs, lungs and other parts of the body.

In order to eliminate edema, doctors prescribe diuretic medications. This measure starts a vicious cycle in the conventional therapy of heart failure. Diuretics remove water-soluble vitamins, such as vitamins C and B, and important minerals and trace elements from the body. Since vitamin deficiency is already the main cause of heart failure, diuretic medications further aggravate the disease.

Now we understand why the prognosis of heart failure is so unfavorable. The future therapy of heart failure is straightforward: the supplementation of vitamins and other essential cellular nutrients. If water has accumulated in a patient's body, diuretics should be given. Irrespective of that, the daily supplementation of essential cellular nutrients must become an essential part of any heart failure therapy.

As a heart failure patient, you should talk with your doctor about these findings. A responsible physician will support this essential nutrient program.



The vicious cycle resulting from the incomplete treatment of heart failure is the reason for the fatal prognosis of this disease.

How Dr. Rath's Cellular Health Recommendations Can Help Patients With Heart Failure

Scientific research and clinical studies have already documented the particular value of carnitine, coenzyme Q-10 and other essential nutrients. These components of Dr. Rath's Cellular Health recommendations help improve the function of millions of heart muscle cells, the pumping function of the heart itself and, thereby, the quality of life of heart failure patients.

My recommendations for heart failure patients: Start immediately following these recommendations and inform your doctor about it. Follow them in addition to using your regular medication. Do not stop or alter your regular medication without consulting your doctor.

Prevention is better than treatment. The success of Dr. Rath's Cellular Health recommendations in heart failure patients is based on the optimum supply of "cell fuel" to the millions of heart muscle cells. A natural health program that is able to correct cardiovascular health conditions such as heart failure is your best choice in preventing these problems from developing in the first place.

Documented Success: The following section presents a selection of letters from heart failure patients who are following Dr. Rath's Cellular Health recommendations. With the help of this book, millions of these patients around the world can also now take advantage of this natural medicine breakthrough.

Please share this information with anyone you know who suffers from shortness of breath, edema or chronic fatigue. You may help save a life.

Dear Dr. Rath:

Our sister-in-law was diagnosed with **congestive heart failure**. She was told by her physician to go home and get her affairs in order, sell her home and prepare to move into a nursing home because she was only going to get worse and wouldn't be able to care for herself. **Her chest was full of fluids, she had to sleep sitting up, she was too weak to walk and her legs were swelling.**

She started your Cellular Health recommendations late in February, and in three weeks, she was feeling well enough to go out for dinner, get her hair done and put her house on the market.

She has since moved into a nice retirement home, and she goes everywhere the bus goes. She is so grateful that she has been given her life back and never wants to be without your vitamin program.

Sincerely,
R.A.

Dear Dr. Rath:

I am happy to report that your Cellular Health recommendations have improved my life. **Now I can climb the stairs readily without shortness of breath. I can also resume hiking for 3-4 miles a day without feeling tired and exhausted.** I do have an energetic outlook towards life, and I'm sure it's due to your cardiovascular vitamin recommendations.

Thank you very much for all the research you have done and that you continue to do for people with circulatory problems.

Sincerely,
A.G.

Dear Dr. Rath:

I am a 46-year-old female. Six years ago, I had a severe reaction to a prescription medication. The ultimate result of that was that I had severe congestive heart failure. I was diagnosed as having valvular regurgitation of the mitral, tricuspid and pulmonary valves (leaking of heart valves), as well as mitral valve prolapse. My clinical symptoms were extreme fatigue, shortness of breath, edema, tachycardia and pulmonary edema.

*Since following your Cellular Health recommendations, I am now taking only a beta-blocker for medication. All others have been stopped. My symptoms are now only occasional fatigue. **I do not have severe shortness of breath, I can carry on a conversation without sounding out of breath and I am able to exercise on a daily basis. There is no edema, tachycardia (rapid heartbeat), or pulmonary congestion.***

Your Cellular Health recommendations have given me an entirely new outlook on the future, where at one time I did not feel that there would be a future.

*Sincerely,
J.T.*

Dear Dr. Rath:

For three months now, I have been following your cardiovascular vitamin program.

*I just returned from my usual 4-mile walk at a brisk pace, up two small hills, and around the neighborhood with no discomfort at all. **For the first time, I am absolutely free of distress.***

*Best wishes,
J.H.*

Dear Dr. Rath:

I am a 36-year-old female. **Since my late 20s, I have experienced episodes of arrhythmia and shortness of breath. I also had begun to have edema in my ankles.** My heart rate was usually between 88 and 98. My blood pressure averaged 140/86.

Being a nurse, I knew to discontinue salt and caffeine. Upon doing so, the symptoms improved for a while. The past few years, however, I was beginning to require medication and was about to get further medical attention for my cardiac changes when I was introduced to your cardiovascular vitamin program last February.

Now, four months later, I no longer require medication for the edema, nor do I have any arrhythmia, shortness of breath, or palpitations. I have always continued my aerobic exercise, which I was beginning to have difficulty in sustaining. However, my stamina has improved tremendously over these past few months.

My heart rate now averages 78 and my blood pressure was 112/60 last week. Thank you!

Sincerely and in good health,
V.G.

Dear Dr. Rath:

I started your Cellular Health nutrient program the same week I read your book “Why Animals Don’t Get Heart Attacks, But People Do.”

Unlike many things in this world, your presentations are so basic and simple that everyone can understand the principles involved. My hope is that everyone in this country and the world will receive your message and have the same good results that I did.

I have eliminated my diuretic medications completely and cut my blood pressure medication in half since I started following your vitamin program. *I’m now reading 120/78 at age 69, and I feel great.*

My doctor was surprised and pleased, and told me to continue the preventative health care path that started with your program. This program is unique and your patent on the technology to reverse heart disease without surgery is, as you say, like patenting nature — and it works.

Thank you so much for your work and for sharing your research with so many people. The world will be a happier place because of you.

*Sincerely,
B.B.*

Dear Dr. Rath:

Since 1989, I have been suffering from congestive heart failure and to this day, I am still following the originally prescribed medication with good results. However, I noticed that I was unable to perform any small effort or even walk a couple of blocks without suffering chest pain, and I had to alleviate its intensity by ingesting a tablet. It was usual for me to take 3-5 tablets every 24 hours, since the pain would surface sometimes for no apparent reason.

I started following your vitamin program in January. After only four months on your vitamin program, I not only rarely use the nitroglycerin tablets, but I am walking 1.1 miles every morning at a brisk pace, with no shortness of breath and no chest pain.

Please keep in mind that my hometown's altitude is 5,280 feet above sea level. I'll be 75 next October. Thought you'd be interested to read about this.

Yours truly,
F.W.

Dr. Rath's Cellular Health Recommendations Can Render Heart Transplants Redundant

After visiting with a heart failure patient and his cardiologist, I documented the following report about the health improvement of this patient. From now on, heart failure patients around the world can benefit from Cellular Health recommendations that provides essential bioenergy to heart muscle cells. This case is just one example.

*G.P. is an entrepreneur in his 50s. **Three years ago, his life was changed by a sudden occurrence of heart failure**, a weakness of the heart muscle leading to a decreased pumping function and enlargement of the heart chambers. The patient could no longer fully meet his professional obligations and had to give up all his sports activities. **On some days, he felt so weak that he couldn't climb stairs, and he had to hold his drinking glass with both hands.** Because of the continued weak pumping function of the heart and the unfavorable prognosis of this disease, his cardiologist told him, "I recommend you get a new heart."*

*At this point, the patient started to follow the vitamin program I developed. His physical strength improved gradually. **Soon, he could again fulfill his professional obligations on a regular basis and was able to enjoy daily bicycle rides.** Two months after following my recommendations, his cardiologist noted a decrease in the size of his previously enlarged heart in an echocardiography examination, another sign of a recovering heart muscle. One month later, the patient was able to take a business trip abroad, and he could attend to his business affairs without any physical limitations.*

The health improvement of another heart failure patient, Joey B., was even featured on the "CBS Evening News" in Memphis, Tennessee.

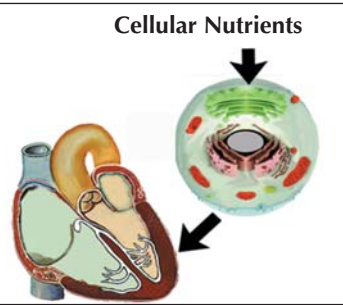
At age 21, Joey suddenly developed a severe form of heart failure and was hospitalized with “cardiomyopathy.” Shortly thereafter, she underwent a heart transplant surgery and received a new heart.



Dr. Rath and Joey

After four years, Joey’s new heart had become so weak that her doctors suggested a second heart transplant. At age 25, the flight attendant was scheduled to receive another new heart.

At that point in her life, Joey learned about my cellular nutrient program, and she started following it. After six months, her cardiologists reassessed the necessity for the second heart transplant operation. To their astonishment, they found that Joey’s heart had recovered so much that there was no need for another heart transplant operation.



Cellular Bioenergy Instead of Heart Transplant

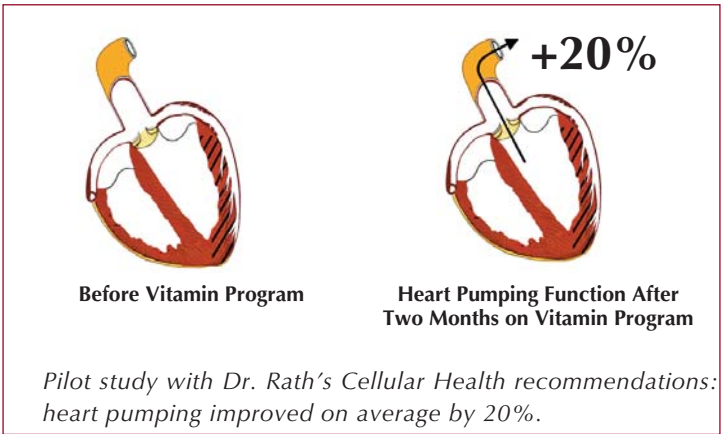
No medical procedure was more celebrated than the first heart transplant operation by the South African physician Christian Barnard, M.D. Now, decades later, we understand that the treatment of heart failure is not the replacement of the organ but, instead, the refuelling of bioenergy to millions of heart muscle cells.

Clinical Studies in Heart Failure Patients With Dr. Rath's Cellular Health Recommendations

A. Improved Heart Pumping Function

The Cellular Health recommendations described here were tested in a clinical study with heart failure patients. In this pilot study, six patients ages 40-66 were included. At the beginning of the study, the heart performance of these patients was measured by echocardiography (ultrasound examination of the heart). This test measures how much blood the heart pumps into circulation with every heartbeat (ejection fraction). In addition, the physical performance of the patients was assessed with a treadmill test.

Then, the patients followed my Cellular Health recommendations *in addition to* using their regular medication. After two months on this program, echocardiography and treadmill tests were conducted again. The results showed that with this nutritional supplement program, the ejection fraction and physical performance increased on average by 20%. Thus, by following my Cellular Health recommendations, heart function in these patients improved beyond any result obtained by prescription drugs.



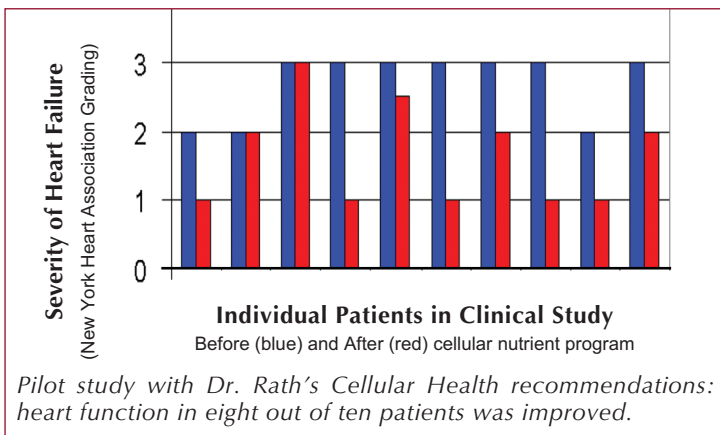
B. Improved Quality of Life

In another clinical pilot study, 10 patients with heart failure followed my Cellular Health recommendations for six months. The regular (pharmaceutical) drugs they had been taking before the study were continued during this time.

The severity of their heart failure symptoms (edema, shortness of breath, dyspnea, etc.) was assessed at the beginning of this study by the standard grading system of the New York Heart Association (NYHA):

1. Any physical activity possible without symptoms
2. Moderate physical activity causes symptoms
3. Slightest physical activity causes symptoms
4. Symptoms present at rest

Considering the fact that conventional medicine has no root cause treatment for heart failure, the results of this clinical study with cellular nutrients were remarkable: eight out of 10 patients improved their health condition by one or more grades on the NYHA scale. After six months, half of the patients could lead normal lives again without any discomfort.

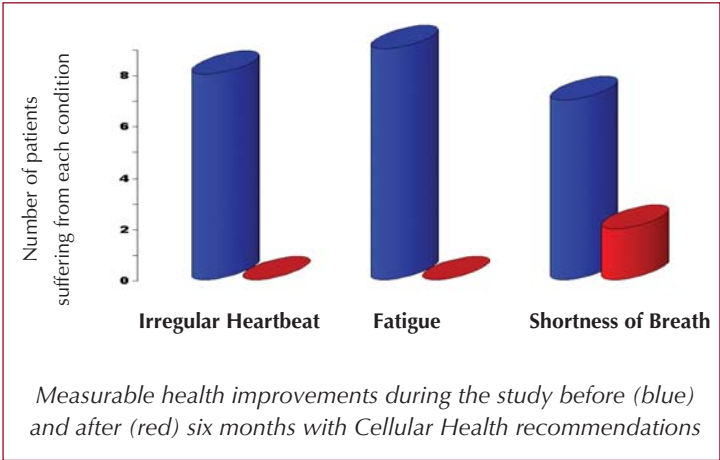


Heart failure affects the entire body, and patients suffer from a variety of health problems that affect their quality of life. In this study, we also assessed the effect of these Cellular Health recommendations on specific symptoms of heart failure, such as irregular heartbeat (tachycardia), shortness of breath (dyspnea) and inability to perform daily work (severe fatigue).

After six months with Dr. Rath’s Cellular Health recommendations, the following improvements were documented and compared to the start of the study when the patients were on prescription drugs only:

- Irregular heartbeat disappeared in all eight patients who initially suffered from this condition (100% improved).
- Severe fatigue was eliminated in all nine patients who initially suffered from this condition (100% improved).
- Shortness of breath was no longer present in five out of seven patients with initial dyspnea (70% improved).

In addition, these health improvements were achieved without any side effects. The results are summarized in the following graph:



Further Clinical Studies With Selected Cellular Nutrients in Heart Failure

In numerous independent clinical studies, compounds of my Cellular Health recommendations have been documented to greatly help people with shortness of breath, edema and other heart failure conditions.

Clinically Proven Health Benefits of Essential Nutrients for Heart Failure Patients

- **Improved Pumping Function of the Heart**
- **Normalization of Enlarged Heart Chambers**
- **Less Shortness of Breath**
- **Less Edema**
- **Improved Physical Performance**
- **Significantly Longer Life Expectancy**

Coenzyme Q-10:

The most comprehensive clinical studies tested coenzyme Q-10 and carnitine, carrier molecules of bioenergy in the millions of heart muscle cells. For example, Peter Langsjoen, MD and Karl Folkers, MD and their colleagues at the University of Texas at Austin showed that heart failure patients taking coenzyme Q-10 in addition to their regular medication could significantly improve their survival chances. After three years, 75% of those patients who took coenzyme Q-10 in addition to their regular medication were still alive, whereas of those patients who took only their regular medication, only 25% were still alive. In other words, every second patient in this study owed his or her life to coenzyme Q-10 supplementation.

Thiamine (Vitamin B1):

In a clinical study published in the *American Journal of Medicine*, Dr. Shimon and his colleagues studied the health benefits of vitamin B1 supplementation in heart failure. Thirty patients with heart failure, receiving diuretic and other conventional

drug therapies, were tested over a period of six weeks. The effects of this cellular nutrient on heart function were measured by echocardiography. Vitamin B1 supplementation increased the cardiac pumping function (left ventricular ejection) of the heart failure patients by 22%. Moreover, the improved heart function also had a natural diuretic effect and decreased water retention (edema) in patients.

Carnitine:

In a clinical study conducted by Dr. Rizos and published in the *American Heart Journal*, 80 patients with heart failure were studied over a period of three years. Half of the patients received daily carnitine supplementation in addition to conventional therapy, and the other half of the patients received a placebo only.

At the end of the study, in the placebo group 18% of the patients had died from heart failure complications. In contrast, in the carnitine treated group only 3% of the patients had died. This clinical study showed that carnitine can statistically increase the chances of survival in patients with heart failure.

Cellular Nutrients Tested	Reference
Coenzyme Q-10	Folkers and Langsjoen
Carnitine	Rizos and Ghidini
Vitamin B1	Shimon



The conventional approach to heart failure is summarized in this cartoon. Treating a heart failure condition with a heart transplant operation is like replacing your car engine when you simply ran out of fuel. Cellular Medicine provides the cellular energy for the “motor” of your body.

Cellular Health Recommendations for Patients With Heart Failure

In addition to my Basic Cellular Health recommendations described in Chapter One, I recommend that patients with shortness of breath, edema and chronic fatigue take the following cellular bioenergy factors in higher dosages:

- **Vitamin C:** supplies energy for the metabolism of each cell and supplies the bioenergy carrier molecules of the vitamin B group with lifesaving bioenergy
- **Vitamin E:** provides antioxidative protection and, especially, protection of the cell membranes
- **Vitamins B1, B2, B3, B5, B6, B12 and Biotin:** bioenergy carriers of cellular metabolism and, particularly, for the heart muscle cells, improved heart function, heart pumping and improved physical endurance
- **Coenzyme Q-10:** the most important element of the "respiratory chain" of each cell; plays a particular role in improved heart muscle function because of the high bioenergy demand of the heart muscle cells
- **Carnitine:** improves supply of bioenergy for the "power plants" (mitochondria) of millions of cells
- **Taurine:** a natural amino acid whose lack in the heart muscle cells is a frequent cause of heart failure

Notes

WHY ANIMALS DON'T GET HEART ATTACKS – BUT PEOPLE DO!