Exercise Without Supplementation Is Suicide

By Joel D. Wallach, BS, DVM, ND

Everyone knows the medical dogma that "Exercise is good for you." Now, as Paul Harvey said, "You're going to hear the rest of the story." Exercise without complete and optimal supplementation is self destructive and suicidal!

After dropping this heretical bombshell, I will give you enough food for thought to gauge the value and the hazards of exercise for yourself. For many years, I have crisscrossed America lecturing almost 300 days per year, and I have taken up the daily task of reading five to ten national and local newspapers and magazines (and international when I can get them). Using these information sources as teaching material, I have been able to "connect the dots" and see a true picture of health (or lack of it) in America without having to do thousands of surveys or studies that would bridge hundreds of years of time and squander billions of taxpayer dollars.

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A Brief Background

Growing up in rural Missouri associated with the agricultural and livestock industries, I observed as a teenager that we systematically put vitamins, minerals, and trace minerals in animal feeds to prevent and cure disease; not because we were altruistic but primarily because we were market driven and didn’t have major medical or hospitalization for calves or chickens. (If we were to use a human health care system for them, your hamburger would cost $275 per pound and chicken breast fillets would cost $450 per pound.)

We also learned that “working and producing” animals (e.g., dairy cattle, draft horses, race horses and dogs, and breeding animals) need additional nutrients above and beyond the maintenance level to support them during “production time” to maintain and repair their tissue and organ systems.

As a postdoctoral fellow at the Center for the Biology of Natural Systems (Washington University), I received the benefit of a $7.5 million NIH training grant to cross-educate 30 young scientists from different professions to accelerate the conclusion-making process from existing research. We were taught the language and tenets of each other’s specialties (e.g., math, biology, molecular biology, pathology, medicine, engineering, anthropology, forestry, chemistry, computer science, etc.), at least enough to know where to look for information and how to interpret the studies published in their professional journals.

Invariably, good scientists will generate as many questions as they answer; this leads to more research, which can be an exciting career track as the person doing the studies learns new skills, buys additional equipment and writes more articles; but in the great scheme of things, this wastes time as the question probably has already been asked, answered, and

published by very skilled scientists somewhere before.

We were to be a “strike force” of multi-disciplinary scientists employed to quickly identify and solve major regional and world ecological problems with the published information already at hand.

My job as a veterinary pathologist on the project was to become a comparative pathologist by studying human and animal diseases, and to be able to identify known human health problems in zoo animals. Specifically, I was to do autopsies on animals dying of natural causes in the large zoos of America, and on humans, looking for pollution-related diseases. I was looking for a species that was ultra-sensitive to pollution that could be used as an early warning biological system, much as coal miners once used canaries.

To make a long story short, after having done some 17,500 autopsies on over 454 species of zoo animals and 3,000 humans, I learned that all of the animals and all of the people who died of “natural causes” actually died of nutritional diseases.

As a result of these original studies, I was able to publish more than 70 peer-reviewed and refereed papers on nutritional deficiency diseases and pharmacology; contribute chapters to eight multi-author veterinary and medical texts on the subject; write a tome on the comparative pathology of most of the known species of animals and humans (W.B. Saunders, 1983); and, more recently, write two self-help texts (*Let’s Play Doctor* and *Rare Earths: Forbidden Cures*).

Unable to convince the academic world of the importance of nutrition in the mid- to late ’60s, I became frustrated enough to go back to school for four years and become a primary care physician. I successfully used everything I had learned in veterinary nutrition and in my studies as a postdoctoral fellow on my human patients for more than 12 years.

So, How Can Exercise Be Bad For You?

It was necessary to provide you with an understanding of my academic background to answer your logical question, “Where does this guy come off? Everybody knows exercise is the number one health activity!” The picture that unfolds in this article as I connect the dots for you will now make sense, as you now know that I have had unique training at a great expenditure of your tax money.

During the early ’80s, ominous articles began appearing in the news media, medical and veterinary journals, and pathology journals. These articles brought to light an increase in the frequency and severity of sports injuries (e.g. sprains, strains, degenerative joint problems, fractures, and paralysis), behavioral problems in athletes and coaches (such as sociopathic behavior, fights, uncontrolled rages, drug and alcohol addiction, anorexia, and bulimia), degenerative diseases (e.g. arthritis, diabetes, cancer, and cardiomyopathy), and sudden death (cardiomyopathy and ruptured aneurysms).

It is not surprising that young athletes develop these diseases even though they are “highly conditioned” and have professional trainers, coaches, and nutritionists hovering over them at all times. In fact, unsupplemented high-output athletes, amateur and professional, are more subject to emotional, traumatic, and degenerative diseases than are the classic “couch potatoes.”

The rationale for this unbelievable statement can be illustrated by comparing two Mercedes automobiles: one with no oil and no coolant stored in a garage (the couch potato) and one with no coolant and no oil running at 70 mph (the athlete). Which car, the couch potato or the athlete, will last longer?

Even though the Mercedes is engineered to go 300,000 miles

before it needs a major overhaul or new engine, it is obvious that, in our scenario, the “couch potato” Mercedes will last longer, because the basic needs of the “athlete” Mercedes engine running at 70 mph were not met by providing simple oil and coolant.

This simple Mercedes illustration can then be carried back to the human analogy. As always, there are cases of famous athletes dying or developing some health challenge that grabs the public’s attention; however, the cases of the 34-year-old cyclist dying of cardiomyopathy in Florida, or the high school athlete from a backwater town in Missouri who goes berserk, develops diabetes, or dies suddenly on the field of play, are just as valuable in connecting the dots to complete our picture of the underlying problem. For each example of famous athletes that I am about to share with you, there are literally hundreds of thousands and, perhaps, millions of amateur athletes of various ages that will fit the profile.

- Reggie Lewis, the 27-year-old captain of the Boston Celtics, collapsed on the basketball court in April of 1993 during a game against the San Antonio Spurs. He was quite accurately diagnosed with cardiomyopathy, a muscular dystrophy of the heart muscle caused by a selenium deficiency. Twelve world-class cardiologists known as the “Dream Team” of cardiologists were hired by the Celtics to save Reggie, a $65 million contract basketball superstar. Lewis died of his second heart attack on July 28, 1993.
- Hank Gathers, from Loyola Marymount, Los Angeles, died from a selenium deficiency cardiomyopathy heart attack on the basketball court during the “March Madness” playoffs in 1990 at the age of 23.
- Evander Holyfield, the 31-year-old two-time heavyweight boxing champion of the world, suddenly retired from boxing because of the onset of a chronic wasting form of a selenium deficiency known as a “stiff heart.”

Thirty-seven years ago, in 1957, it was proven in animal studies that the trace mineral selenium was essential to life and that a deficiency of selenium produced a variety of diseases ranging from cardiomyopathy (known in animals as “Mulberry heart disease” or “white muscle disease”) to muscular dystrophy. Additional research proved with 100 percent certainty that cardiomyopathy was preventable and, in the early stages of diagnosis, curable with supplementation of selenium.

Historically, a selenium deficiency resulting in cardiomyopathy in humans is known as Keshan Disease. In Keshan Province, China, Keshan Disease once killed 13 out of every 1,000 preschool children, teenagers, and pregnant women. The soil in Keshan Province is almost totally devoid of selenium. In the 1930s, Keshan Disease was thought to be caused by a viral infection. Later, in the ’60s, the cause was thought to be mold contaminants in stored grain. Not until 1972, when a team of pathologists was sent to China by the World Health Organization, was the mystery solved.

On the WHO pathology team was a veterinary pathologist who recognized that Keshan Disease was, in fact, identical to “Mulberry heart disease” in pigs with a selenium deficiency.

To prove the connection between selenium deficiency and the cardiomyopathy of Keshan Disease, the WHO funded a large double-blind study in which 39,000 school children were given selenium as a daily supplement and a control group of 9,000 children were given a placebo. At the end of two years, the rate of Keshan Disease in those children receiving the daily selenium supplement dropped to zero, while the rate of Keshan Disease in the control group remained at 13 per 1,000.

Selenium has a wide variety of functions in the human body including protection of the cellular membranes of cardiac and skeletal muscle fibers from peroxidation (free radical damage to the bilipid layer membrane) and replacement of viable

muscle tissue by fibrous connective tissue.

A selenium deficiency is exacerbated by exercise (athletes) and a high intake of polyunsaturated fats and oils that are found in salad dressings, frying oils, frozen and soft-serve desserts and margarine.

It is a sad fact that the commercially prepared diets of pet, laboratory, and farm animals contain optimal levels of selenium specifically to prevent cardiomyopathy, while humans and, especially, athletes at the behest of their trainers, sports medicine doctors and family doctors are led to believe they can get everything they need from the "four food groups," primarily because of the orthodox health profession's ignorance of, and bias against, vitamin and mineral supplementation. (*Editor's note:* While the four food groups have been reworked into first a food pyramid, then a dinner plate, the premise here remains: you cannot get everything you need by eating the "correct" proportion of food from each group.)

- Buster Douglas, once the heavyweight boxing champion, suddenly developed diabetes and went into a diabetic coma two years after losing the championship. Adult onset diabetes is known to be caused by chromium and vanadium deficiencies.
- Tonya Harding (figure skater) and Jennifer Capriati (tennis player) both became sociopathic (exhibiting aggression and addiction to drugs and alcohol) after years of participating in their respective sports. Deficiencies of chromium, vanadium, and/or lithium are associated with volatile behavior, sociopathic behavior, depression, and addiction to drugs and alcohol (especially if they consume large quantities of sugar).
- Running is often put forth as the universal "fitness" exercise, yet numerous world-class runners have lost their lives by not supplementing. Jim Fixx, the runner who started the whole jogging craze in America with his

bestselling books on jogging and running for fitness, died at the age of 48 following his fifth cardiomyopathy heart attack. He purposely did not supplement because he wanted to prove that running was the pure way to health and longevity.

- Dr. George Sheehan, the longtime medical editor for *Running World* magazine, died at age 74 from prostate cancer even though he ran for 25 years. Dr. Sheehan had no understanding of, or interest in, supplements. "Nutrition, to my mind, occupies an area somewhere between religion and science, and is a confusing amalgam of these great subjects." A National Cancer Institute study showed that faithful daily use of even the small levels of double the American RDA for beta carotene, vitamin E, and selenium together can reduce the rate of cancer by 13 to 21 percent.
- There are literally tens of thousands of people in America in all age groups who die each year while running as a result of a ruptured cerebral, coronary, or aortic aneurysm. Aneurysms were proven to be the result of a copper deficiency in turkeys in 1957.
- Fred LaBeau, 56, founder of the New York Marathon and a world-class runner himself, and Wilma Rudolph, 54, winner of three Olympic gold medals in track and field, both died of brain cancer, which can be produced in laboratory animals placed on a gallium-deficient diet.
- Then there is the spectacular statistic that connects the dots and completes the picture, the last clue needed to clearly show that exercise without supplementation is self-destructive and is, in fact, suicidal: 62 percent of women gymnasts at the university level are anorexic and/or bulimic (a zinc deficiency aggravated by malabsorption, i.e., celiac disease). Is this connection between gymnasts and eating disorders genetic? I believe not.

The Common Denominator

What is the common denominator that connects the dots between the 85-lb. gymnast, the lithe runner, the 220-lb. heavyweight-boxing champion, and the six-foot, eleven-inch basketball player? Sweat!

When we sweat, we sweat out more than just water for cooling our overheated bodies; we sweat out more than just the electrolytes (potassium, sodium, and chloride); we sweat out a mineral soup of 70-plus minerals, 60 of which are known to be essential. (*Editor's note:* an essential nutrient is one that must be consumed every day in order to avoid a deficiency problem.) If we don't consciously replace, through supplementation, the minerals consumed by cellular biochemical reactions and sweated out during exercise, as sure as God made little green apples, we are inviting disaster!

If we sweat out all of our selenium during exercise and don't replace it by supplementation, we are at high risk of developing cardiomyopathy.

If we sweat out all of our chromium and vanadium during exercise and don't replace them by supplementation, we are at high risk of developing low blood sugar, diabetes, depression, and antisocial behavior.

If we sweat out all of our lithium and don't replace it by supplementation, we are at high risk of developing depression, manic depression (bipolar disease), and addictions to alcohol and/or drugs.

If we sweat out all of our copper and don't replace it by supplementation, we are at high risk of developing joint and/or cartilage problems, varicose veins, and a fatal ruptured aneurysm.

If we sweat out all of our gallium and don't replace it by supplementation, we are at high risk of developing a brain

tumor.

If we sweat out significant amounts of calcium, magnesium, manganese, sulfur, boron, and strontium, and we don't replace them by supplementation, we are at high risk of developing joint, cartilage and bone degeneration (arthritis) or injuries (fractures).

Athletes, especially at the university and professional levels, are supposed to have training tables filled with the very best quality food, yet the only guarantee that they can get from their meals are protein, fats, carbohydrates, and calories.

Depending on our food for vitamins, minerals, and trace minerals is, at best, a "crap shoot." Certainly we average weekend athletes, joggers, or aerobics buffs with common sense wouldn't throw our lives away by not supplementing with all 90 essential nutrients (60 minerals, 16 vitamins, 12 amino acids and 3 essential fatty acids). Certainly, then, highly conditioned serious athletes (amateur and professional) who invest considerable time and money in training and fitness programs would not throw their health or lives away by not supplementing with all 90 essential nutrients.

Yet, the majority of people who exercise don't supplement with minerals, let alone all 90 essential nutrients, because they have bought into the dogma that "If you eat right, you don't need to supplement—you can get everything you need from the four food groups"…or, if you supplement… " it only gives you expensive urine." Most Americans have not been told the fact that our farm and range soils are depleted as a result of 100 to 200 years of intensive farming without appropriate mineral replacement—or if they have read the information about depleted soils in America, they don't make the connection that the food on their dinner plate is, in fact, anemic.…[At] the Earth Summit in Rio (June 1992), a report pointed out that American farm and range soils were 85 percent depleted of

minerals compared with the soil mineral levels of 100 years ago. (*Editor's note:* In 1975, the US Department of Agriculture declared that 95 percent of all Americans are minerally deficient.)

There is a clear and present danger and potentially fatal effect to each and every one of us as a result of consuming minerally deficient foods, and that hazard is magnified manyfold by exercise.

This article was originally written in 1995 and is presented here in its entirety. It has been edited for clarity.

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BIO:

Dr. Joel Wallach is a biomedical research pioneer, Dr. Wallach spent decades in the field of veterinary medicine observing and studying the effects of essential nutrients on animal health before becoming a naturopathic physician in 1982. Today he is renowned for his ground-breaking research on the health benefits of selenium and other minerals. An author and radio talk host, he has lobbied the U.S. Food and Drug Administration on behalf of the dietary supplement industry. He lectures worldwide and recently addressed the U.N. General Assembly with his health presentation.