

osteoporosis, chronic fatigue syndrome, varicose veins, hypertension, memory loss, scleroderma, Raynaud's Disease, digitalis intoxication, intermittent claudication, diabetic ulcers, cold hands and feet, emphysema, leg ulcers, venomous snake bite, impotence, emotional difficulties, vision and hearing problems and many other signs of aging?

What else would chelation doctors prefer to keep to themselves? They shy away from saying chelation has a beneficial effect on almost every modern health disaster you can name, from AIDS to tension headaches, from colds to cancer, preferring to focus primarily on conditions stemming from inadequate blood flow due to atherosclerotic plaque.

Before delving into the reasons for their characteristic reluctance, here's a short list of benefits traceable to treatment with EDTA:

- Reduction of liver-produced cholesterol;
- lowered insulin requirements In diabetics;
- lowered blood cholesterol levels;
- Reduced high blood pressure;
- Normalization of cardiac arrhythmias;
- Relief from leg muscle cramps;
- Reduction In allergic symptoms;
- Normalized weight;
- Improved psychological and emotional status;
- Enhanced sensory input: better sight, hearing, taste;
- Fewer excessive heart contractions;
- Lessened varicose vein pigmentation;
- lightened age spots;
- Fewer aches and pains, arthritic and otherwise;
- Less reliance on pain medication;
- Hair loss stopped and reversed;
- Reversal of impotence;
- Alzheimer's Disease symptoms reversed;

- Reduced need for diuretics;
- Cold extremities warmed;
- Chronic fatigue syndrome overcome;
- Memory, and mental concentration improved;
- Post-cataract surgery vision loss is restored;
- Cosmetic changes, including more lustrous hair, added eye sparkle, stronger unsplit nails, better skin color, fewer visible wrinkles and a more * youthful appearance

The longer the list grows, the more discomfort to those in the front lines of the effort to 'mainstream' chelation. Here's why. The current medical paradigm favors an aggressive approach to one disease at a time. Doctors are trained to approach ailments as though they were waging war on each sick organ separately - to conduct search and destroy missions on a target ailment. Throughout their careers, physicians are encouraged to seek out symptom-specific diagnoses and cures, as if it is possible to treat one biological system without affecting all others. Medication for a bladder infection, for example, is prescribed as though the urinary tract is not connected to the rest of the body.

Each year this trend away from generalism and towards specialization grows stronger. From medical school through internship* up and coming doctors have their eye on one goal: finding their niche in a profitable subspecialty. The result is tunnel-vision medicine. As though they wore blinders, doctors see only 'their'¹ chosen portion of the human anatomy • the smaller the area of concentration, the better. Even if specialization were not in vogue, chelation's cure-a-lot reputation would be a detriment. An inevitable stigma dogs any remedy that does too much, making it vulnerable to 'snake oil'¹ devaluation. One of the main reasons for the controversy surrounding EDTA, is the unavoidable evidence that it *is so* successful in a variety of serious conditions. As one image-conscious doctor with a prestigious back-