



THE HEALING POWER OF ENZYMES

Chapter 13

**Pamper Your
Sexuality**

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Pamper Your Sexuality

REVITALIZING YOUR SEXUAL HORMONES

Whenever a medical description is given of something as complex as a part of the human body, something gets lost in translation. And the last thing I want to lose is the interest and attention of my readers! So, in short, your endocrine system is a family of glands that provide hormones for balance in the body. The major members of this gland family are the thyroid, parathyroid, pituitary, adrenals, the alpha and beta cells of the pancreas, and the gonads. The gonads are the sexual glands — testes in the male and ovaries in the female. Your endocrine system is one of only two major control systems in the body. The other one is the nervous system. They are very closely interrelated.

So what do glands do? Glands secrete hormones into your circulatory system, each of which is intended for a specific site within the body. These hormones control the tissues or other glands they reach by regulating the rates of chemical reactions inside the cells. Hormones have a profound effect on important functions such as growth, reproduction, and the elimination of toxins. These chemical reactions must be precisely orchestrated so the targeted glands or tissues perform their tasks at the exact level of activity. If a healthy medium is not preserved, the originating gland or the target gland can be damaged. Some of the major illnesses that plague us arise when too few or too many hormones are released. We covered a few of them in the last chapter. Now we will delve into the subject of hormones most people know about — sex hormones.

An example of this kind of hormonal imbalance is menopause. When this stage of a woman's life arrives, the ovaries cease to produce estrogen. From that point on, she must depend on the adrenals to take up the production for her. Another situation could be when a person is unable to maintain a balance of calcium in his system. The thyroid, along with the rate of metabolism, regulates calcium levels. And if the thyroid has been undermined, our ability to control our weight and our

sleep patterns is adversely affected. When any of these situations take place, we are said to be suffering from a hormonal imbalance.

HORMONE IMBALANCE

A hormone is a substance formed in one gland and carried in the blood stream to another gland or tissue where it serves a specific purpose. Although the total number of hormones the body produces is unknown, we do know that each hormone has its own unique chemical composition. Each gland of the endocrine system manufactures several different hormones. The adrenal gland alone produces more than twenty-five varieties of hormones. Growth, reproduction, sexual attributes, and personality traits are all dependent on hormones. Insulin is a well-known protein hormone that regulates carbohydrate metabolism. The beta glands in the pancreas produce it. William Regelson and Carol Colman did such a wonderful job describing the needs of hormone balance that I will not discuss it in great detail in this book. I suggest reading their book *The Super Hormone Promise* (Simon & Schuster). In it, Dr. Regelson provides complete and comprehensive information about each of the super hormones, including up-to-the-last-minute research on melatonin, DHEA, and pregnenolone.

If we want our bodies to function efficiently, our hormones must be in correct balance. Hormonal imbalances can cause problems ranging from lethargy to excitability. We now know that any significant imbalance in the kind and number of hormones generated must be corrected if we want our mind and bodies to be in a good state of health. I co-authored a book on menopause with a witty friend of mine which we named *The M Club*. For more information, you might want to read that book too. It was fun for me co-authoring with Wendy. She is one delightful lady and is known for designing clothes for the Barbie Doll. That will give you an idea what she looks like. However, like us normal gals, she is in menopause.

PREMENSTRUAL SYNDROME

In some cultures, the female cycle is considered an important time for women. It symbolizes a woman's power to create life. However, if you are a woman who suffers from Premenstrual Syndrome (PMS), you may not feel quite so powerful. While PMS manifests itself differently in different individuals, the most common physical symptoms are headaches, breast tenderness, weight gain, and sugar cravings. Some of the psychological effects include mood swings, depression, irritability, fatigue, and tension. There have been 150 symptoms of PMS reported. Many causes have been proposed for it: estrogen / progesterone imbalance, how the body metabolizes glucose, a deficiency of the brain chemical serotonin, hypoglycemia, candida, etc. Women who are most likely to develop PMS tend to be those who also suffer from sugar imbalance and intolerance.

I suggest many different preventive methods for dealing with PMS. Women suffering from PMS should avoid caffeine, excessive salt, alcohol, and smoking. Abstention from these toxins should always be observed, not just before or during the menstrual period. Increasing your intake of complex carbohydrates, proteins, and exercise helps considerably in the management of stress due to PMS. A good 30-minute walk every day does wonders for reducing susceptibility. Supplemental enzymes can be used as prevention for PMS. I advise women to increase their protease dosage 10 days before their period and make some diet changes as well. Protease enzymes should be taken in the mornings, evenings, and mid-afternoons. It will assist with controlling your inflammation and bloating during this time. A digestive enzyme formulation high in lipase and protease will help sugar cravings to subside.

One of the questions appearing on my standard health questionnaire asks if you have suffered from or if you have PMS. Almost all women answer "yes" to this question. PMS is regarded as a disorder or symptom that makes you feel unwell during the time of menses. Is there a way we can prevent this before we ever experience the first symptom? The answer is "yes," and the preventatives are enzymes. I think it is wonderful that education and information about enzymes is becoming much more widespread than it was several years ago. Since 1986, I have seen young parents starting their children on an enzyme program at early ages. Young girls who have been on enzymes have a significantly lesser occurrence of PMS than others. Even after symptoms are observed, something can be done to alleviate the chaos caused in the body from PMS.

CASE HISTORY

A 16-year-old girl came to see me. About 2 weeks of her month are fairly normal. But the other two are full of mood swings, cramps, and a good case of the "uglies," as she puts it. Her mother had taken her to several OB/GYN doctors and nothing worked except heavy doses of prescription drugs. The mother did not want her daughter to have to endure her teenage years in a drugged stupor, although her father thought that might be a very good idea! I suggested the basic regimen of enzymes, but reminded the girl it was her responsibility to follow the directions. I asked her to make another appointment with me after she had two more periods, during which time she would be using the enzymes.

She reported that her first period under the enzyme program seemed easier. Instead of her usual bloating and depression, her period started before she even realized it. She was sure that it was all in her head. With the second cycle there were no cramps, bloating, or depression. I modified her enzyme dosage and explained to her that she would no longer have mood swings if she gave up soft

drinks and candy bars. I told her to eat more protein foods. She called to cancel her appointment that had been scheduled right after her third period. She said she did not need to come in, that all her symptoms were gone. By learning which foods triggered her anger and other symptoms, she has eliminated them from her diet. Coupled with an increase in her protease, she feels great.

Premenstrual symptoms are reality. Many women suffer from them. I encourage you to do what you can to relieve the symptoms. Often, the solution is to educate yourself and find out what works best for you. When you have a strong sugar craving, this is your body's way of telling you it needs nutrients or wants support. There is a big difference between this perspective and how we mistakenly think our bodies need sugar. The more sugar you eat, the more the brain cries out for nutrients, and you think that means more sugar. Hence, the roller coaster ride never comes to an end. When you fortify your body and give it what it needs, the cravings disappear. Taking carbohydrate-splitting enzymes (the enzymes that break down all the carbs and sugars you crave and eat) will assist you in overcoming irresistible temptations. If you continue to support your system with enough carbohydrate-splitting enzymes, you will discover that even you — yes, you — can give up sugar. I recommend the dosage for protease to be 375,000 or higher units of activity taken at one time. For PMS, you might want to try a good carbohydrate digestive enzyme formula to dispel the yearning for sugars. Foods that break down to a fast sugar or glucose are usually starches and desserts. These are actually part of the reason for your inflammation and bloating.

MENOPAUSE

Menopause, or the “Change of Life,” occurs when a woman's menstrual cycle wanes and gradually stops. Along with this, the ovaries stop functioning. This natural process is the result of the normal aging of the ovaries and occurs when they can no longer generate ovulation and estrogen production. While the first and most obvious sign of menopause is the change in menstrual flow, the gradual cessation of estrogen production causes many physiological changes — the fallopian tubes, uterus, cervix, and vagina all become smaller. The average American woman will experience pre-menopause between the ages of 47 and 51. Almost 75 percent of women will begin peri- or pre-menopause in their forties. In some instances, it can begin as early as 35 or start as late as 55. Menopause should be a late fifties to sixties complaint, and if you are suffering earlier then it is usually due to hormonal imbalance brought on by toxicity or poor digestion. What we eat influences our ability to continue hormone production, such as how properly breaking down fats encourages steroid hormone production and properly breaking down protein assists the thyroid and other peptide-producing hormones.

Surprisingly to many women going through forced toxic menopause, when consuming supplemental digestive enzymes, their period begins. They are quick to accuse me of making this take place, but I always encourage them to do what is natural for their bodies rather than to age earlier than necessary.

The length of time it takes to complete menopause varies, but it usually lasts anywhere from 6 months to 3 years. Most women pass right through menopause with little discomfort. Only about fifteen percent experience discomfort and distress. Occasionally during menopause, some existing physical ailments may become exaggerated. Hot flashes, one of the most common symptoms of menopause, are sensations of heat in the face and upper body. I have had many women come through the clinic suffering with premature menopause that goes on for too many years.

Too often, chills follow the heat sweats. Some women feel just a few of these hot flashes over a period of time, while others can experience ten to twenty per day. Those women who do suffer psychological reactions may experience fatigue, crying episodes, insomnia, an inability to concentrate, or lapses in memory. More severe reactions may result in depression. At one time it was thought that the changes in the body's chemistry caused these reactions. Today, many physicians believe that chemical changes that bring on menopause simply trigger reactions to other events that occur at this time of life. We need to be aware that as we age we lose digestive enzymes along with the enzymes that produce DHEA. There is a lot of information available on DHEA, melatonin, and the youth hormones but virtually nothing on the enzymes required for these hormones to work.

CASE HISTORY

Menopausal women who have used enzyme therapy report that their hot flashes and night sweats are things of the past. One 49-year-old woman was experiencing fatigue, hair loss, hot flashes, depression, and insomnia. Although she tried under-the-counter menopausal remedies, she found no relief from these serious symptoms. As soon as she began treating her entire body, especially her endocrine and nervous systems with enzyme therapy, her condition began to improve. Her hair was healthy, her depression and fatigue lifted, and she began to sleep at night, free of hot flashes.

In other cultures and in times past, a woman who gave up her blood (entered menopause) could at last hold in her own energy and power. Known as crones, they were regarded as the most powerful and wisest of women. Within a tribe, clan, or village, they were highly valued and revered. Nowadays, many women in

our culture live for over 80 years. A full one-third of these women's lives are lived after menopause has come and gone. It should not be looked upon as a curse or an illness any more than menstrual periods. It is not an enemy.

SURGICAL MENOPAUSE

If a woman has her ovaries surgically removed, she experiences menopause immediately. This is because most of her natural estrogen production has been terminated. This menopause can be more traumatic because the body was not given time to gradually accept the loss of estrogen production. Enzyme therapy can make this process less emotionally disturbing by supporting the endocrine system. The enzymes aid in helping the body adjust to the estrogen loss. Eventually it will resume production of its own metabolic enzymes and call on the other hormonal organs to produce.

I know this to be a fact since I went through surgical menopause at the age of twenty-eight and did not have to address hormone issues until I was sixty.

HORMONAL REPLACEMENT THERAPY (HRT)

Should you or shouldn't you? Hormonal Replacement Therapy, or HRT, involves taking synthetic estrogen when the ovaries no longer produce it. HRT is certainly not for all women. The decision to take it is very much an individual one. There have been many findings and recommendations published from all the research done on this controversial topic. Estrogen replacement was introduced in Germany in 1896 where ovarian extracts were used. Today, in our own age of chemicals, estrogen is commercially prepared. Synthetic estrogen is the most commonly used medication on today's market. In the '50s and '60s, estrogen therapy was touted as "feminine forever." During the '70s, some studies indicated that the use of synthetic estrogen had cancer-causing effects on the lining of the uterus. Then in 1980 and the ensuing decade we were told if we added progesterone, the harmful side effects of HRT would be easier to control. In the '90s, we started questioning the use of chemicals, pills, patches, creams, injections, implants, and sublingual (under-the-tongue) therapies. Countless books on the subject denote a bewildering array of information. At first glance, it would seem that estrogen replacement is the answer. However, every book I have read ended in doctors cautioning it was not for everyone. No wonder why there are so many confused women struggling with this decision that is critical to their health.

HARVARD NURSES STUDY

This was a well-publicized example of hormone replacement therapy and heart attack risks for postmenopausal women. In brief, the observational study gave

misleading answers because the “treatment” and “control” groups differed systematically. In this ongoing investigation, begun in 1976, the researchers examined the impact of long-term HRT use in more than sixty thousand nurses. They looked at length and continuity of hormone use and how this affected the women’s death rates. They also studied women who used estrogen alone or in an estrogen / progesterone combination and adjusted their data to account for smoking, weight, exercise, and other lifestyle habits. Overall, the researchers found that the death rate among HRT users was thirty-seven percent lower than that of women who had never taken hormones, primarily because the hormones appeared to protect women against heart disease. Indeed, the risk of dying of cardiovascular disease was fifty-three percent lower in the HRT group.

Then came the evidence from the Women’s Health Initiative, a randomized clinical trial from the 1990s, that hormone replacement therapy increases the risk of heart attack in older women.

NIH said not to use estrogen plus progestin therapy to prevent heart disease. New findings show that it does not work. In fact, the therapy increases the chance of a heart attack or stroke. And it increases the risk of breast cancer and blood clots.

In 2012, NIH changed their mind saying the study was fundamentally flawed. The analysis found that all three studies failed to meet the majority of the criteria and therefore none of the studies was able to establish whether HRT increases the risk of breast cancer.



GOOD GRIEF . . . READY TO THROW IN THE TOWEL?

Current reports indicate that less than twenty percent of menopausal women choose hormonal replacement therapy. The decision about this treatment is highly personal and depends on a woman's family history, personal habits, and the risk factor she finds the most tolerable. This is not a one-size-fits-all situation. In my work, the question arises: "Can the woman who is a longtime follower of natural health approaches skip HRT without damaging her health?" Dr. Regelson describes the new "designer" estrogens that are being offered. The estrogen needs are different from woman to woman.

I personally choose to use natural ingredients (bio-identical hormones) delivered by enzymes, even though I had a hysterectomy at the age of twenty-eight. I have also experienced hormone pellets, which are put in just under the skin, and they are utilized by blood flow. It is a natural way to have the hormones delivered on need. Some hormones are taken orally, which involves progesterone or pregnenolone and DHEA delivered by the enzyme lipase. I would never tell anyone what to do. This happens to be my personal choice, and it works for me. I am now in my seventies and feel very healthy and vibrant. Again, it must be a personal choice. I believe the important word here is "choice." So, what are your choices?

"Bio-identical hormone" seems to mean different things to different individuals. Bio-identical hormones are hormones that have a compound composition that is identical to the hormones that are created by our bodies. The doctors offering these compounded therapies base them on your hormone panel results. Bio-identical hormones have grown in popularity in recent times, partially due to movie star endorsements and partially in response to reviews of elevated health threats that may be posed by normal hormonal treatments.

Typically they are created from different parts of plants, usually compounds obtained in soybeans or Mexican wild yams, and they are chemically the same as human bodily hormones, to fit precisely the formulation that a woman's own body generates, so that they are recognized by her body to be a naturally occurring substance and thus can be used by the body in a natural and non-intrusive manner.

When you compare bio-identical hormones to the pharmaceutically-created artificial hormone types, or pregnant horse urine, the studies show that very frequently the results obtained by each group are completely different. This along with the total distrust and frustration that many holistic practitioners feel towards the FDA has caused a pretty fiery debate on the safety of these bio-identical hormones. So as one may have anticipated, the use of bio-identical hormone

replacement therapy (BHRT) vs. prescription-based HRT drugs has prompted a large amount of consumer attention in addition to hot debate.

A lot of women encounter estrogen dominance, a common condition in which a woman may have too much estrogen with very little, if any, progesterone to balance its effects within their bodies. There are three forms of estrogen created within the body: estriol, estrone, and estradiol. Progesterone is anabolic steroid hormone produced by the ovaries during the middle of the menstruation period. Progesterone is regarded as the most widely used bio-identical hormone, with more than 30 years of usage in the US.

The human body is a great marvel. The endocrine glands secrete vital hormones which control many bodily functions. Everything is designed to be perfectly synchronized when optimum health prevails. If hormone production is less than adequate, it is because the once reliable glandular systems are unbalanced and weak. One of the miracles of our natural design is the manner in which the body compensates for lost or damaged components. For example, when the ovaries have been surgically removed or cease to function because of menopause, other glands fulfill the need for estrogen. These glands release hormones that perform all the functions of estrogen except sustaining the menstrual cycle. These glands are also a part of the endocrine system.

This raises other questions. Why do we need estrogen replacement? And why do we have PMS if other glands produce hormones that seem to replace estrogen? When the organs and systems of the body are in a depressed state, we cannot expect them to do everything they are programmed to do without some external support. This is why women often have to opt for BHRT. In fact, it is an enzyme called telomerase that assists in the making of the hormone that stops aging. If you are missing this enzyme, the whole hormonal cascade unwinds.

Our endocrine system is often referred to as the "body-mind." This will give you a good feel for how vitally important it is. It virtually runs the systems of the body. The hypothalamus in the brain sends signals to the pituitary — the master gland. The pituitary is responsible for distributing this information to all other glands via hormones, moving in the blood stream. This can be likened to a fine quality, state of the art, high tech piece of electronic equipment. Because it is so fine-tuned, no electrical shorts can occur. However, if the endocrine system is not running at maximum efficiency, it malfunctions. It can no longer meet the demands of the body. This system runs on enzymatic action, as does the nervous system. When the glands are undernourished, it takes enzymes to deliver the nutrients from food or from vitamin and mineral supplements. Without enzymes, these nutrients cannot be assimilated.

I have counseled thousands of menopausal women. They all have many things in common. The one ailment we can eradicate completely is hot flashes and the attendant night sweats. These symptoms do not stop immediately. However, with enzyme therapy combined with correct foods for an individual's biochemical type, it is only a matter of weeks before they dissipate. This usually takes 21 days. I have even known some women who experienced remarkable changes in only 3 days.

CASE HISTORIES

A 51-year-old woman came to me for nutritional advice. She did not mention that she was having severe hot flashes because she believed everyone had them — they came with the territory. I helped her determine her biochemical type, and she proceeded with her enzyme therapy. I did not give her the extra enzyme mixture I normally give to menopausal women. I did not ask, and she did not volunteer any information. After 3 days, she called to ask if she was hallucinating. She was amazed that her hot flashes had drastically decreased. It is very rewarding for me to see these changes take place in my clients, especially when there are no expectations involved. Many women survive PMS and its rigors for the same reason. When the body begins to balance, it heals itself. When the glands are well nourished, the body will not suffer from malfunction or malnutrition.

Another lady who came to see me was in the state of great anxiety. She was forty-nine. Her face was breaking out, she was losing her hair, she would wake at two o'clock in the morning, unable to go back to sleep — she was exhausted. None of the menopausal aid products she obtained from the health food store had worked for her. She could not continue; her life was not working. Whatever she tried, relief would not come to her. I told her that she had to feed and fortify her body, and treat it with great love. Although she had taken the creams mixed with different herbs to increase progesterone, there had to be more things done to complete the balance. I knew her endocrine system had been badly undermined. When a woman enters menopause, she can no longer count on her ovaries for hormonal support. She must rely on her adrenal, her thyroid, and the other glands of the endocrine system. This woman, my client, finally understood that she could not get by on over-the-counter quick fixes. She had to treat her body as an interdependent organism. When she began using the enzymes, she made tremendous progress in only 21 days.

There has been a common agreement between those that come to me for counseling and myself. We commit to a program for at least 6 weeks, but preferably 9 weeks. The ideal time is nine weeks. The lady whose case I just

reviewed for you had become so deficient, with a very weak immune system, that I kept her on quite an intense dosage for 4 or 5 months. But what works for one does not work for all. The enzymes always work, but the time frame can vary greatly, depending on an individual's needs. Her need was greater than in the first woman's case. The first step is always to determine where you are in your own healing or enervation process. That way, you can decide how long you need to treat and feed yourself. To expect to turn your state of health around in only 3 days is unrealistic. I would encourage all women who are entering menopause to give themselves time to heal. Remember, educating yourself is the key. Then you can make choices that fit your lifestyle.

Remember . . . the enzymes always work, but the time frame can vary greatly, depending on an individual's needs.

Different biochemical types respond differently to estrogen therapy. The Type Four biochemical type, those who are underdeveloped or boyish, responds well to it. This is because their estrogen levels were low in the first place. However, the Type Three biochemical type, or overly developed women, does not respond as well. These women tend to have larger breasts and experience blood sugar problems. Type Three already has high estrogen, as does the Type Two biochemical type. Both Type Three and Type Four seem to be irritated by estrogen replacement therapy. For these latter two types, I make sure they feed and fortify their entire endocrine system. I would never ask a client to stop taking estrogen if her personal physician had prescribed it for her.

Those women who do not do well with HRT have a connection with the way they are built (genetics) and with some of their food cravings. Some of the symptoms that may occur while on estrogen are fatigue, depression, moodiness, bloating, headaches, or irritable bowel movements. I suggest ways to support these problem areas so the client can make her own choice about whether or not she wants to continue with estrogen or try another therapy. One of these choices is wild yam cream with progesterone, which can be purchased from health food stores, some clinical nutritionists, or other health care professionals. For a woman who wants to take the natural path, some suggestions are enzyme therapy, natural hormones, pregnenolone, DHEA, food vitamins and minerals from natural herbs, glandulars specific to the endocrine glands, a biochemical type food plan that specifically suits you, extra protein for insulin control, stress management, powerful thinking, attitude, relaxation, expressing your feelings and needs in an appropriate manner, living in the moment, laughter, visualizing yourself as you want to be, and exercise. Whew!

It needs to be noted that there is a sequential order in the hormonal balancing system. This order is as follows — good insulin balance, which in turn affects healthy DHEA balance, which in turn affects every hormone in the body. Enzymes directly affect this entire sequential order. The precursor to DHEA is the hormone pregnenolone, which ceases to be produced when enzyme production stops. This situation raises the age-old “chicken and egg” question — do we age because our enzyme production stops, or does enzyme production stop because we age? If you desire more information on menopause, I co-authored *The M Club* where you can get more detailed information.

PROSTATE PROBLEMS

The American Cancer Society estimated in 2013 that 238,590 men would be diagnosed with prostate cancer and 29,720 would ultimately die of it. Researchers do not know what causes prostate cancer, although it occurs more frequently in older men, men with a family history of cancer, and Hispanic and African-American men. If detected early, prostate cancer can be treated with radiation, drugs, or surgery. From my own experience, I have observed that most men who have prostate problems enjoy fatty or salty foods, and may also have a sweet tooth. Men who are vegetarians tend to have less susceptibility to prostate cancer.

There have been many breakthroughs in prostate cancer screening and treatments. Swollen prostates do not necessarily mean cancer. However, if swelling is involved, a medical doctor will closely monitor this patient to watch for signs of the onset of cancer. If the prostate is swollen, painful and frequent urination is a symptom. After beginning enzyme therapy, this discomfort will dissipate. Doctors have found that men using this therapy experience reduced swelling in their prostates. I have them take concentrated dosages of protease and lipase enzymes. Protease in massive doses does cause frequent urination, but it relieves the pain caused by the swelling. As in the case of the woman who did not bother to mention her hot flashes, many of my male clients will mention, after the fact, how much better their prostates feel after regular enzyme therapy.

CASE HISTORY

A 55-year-old man with an enlarged prostate began enzyme therapy under my guidance. He added some necessary diet changes to his program as well. His doctor decided not to proceed with the scheduled surgery that had been planned. Instead, the man had begun eating raw foods like salads, fruits, and vegetables, and had cut back on his intake of spicy foods. He eliminated red meat from his diet but continued eating fowl, fish, and organic foods. He took high dosages of protease in the morning, mid-morning, mid-afternoon, and evening. The swelling of his prostate went down along with the urinary discomfort. He is

doing beautifully and has recommended that several of his friends with similar problems come to see me for nutritional counseling.

BALANCING AND STABILIZING YOUR HORMONES

Hormones are very powerful substances, and extremely small amounts are sufficient to accomplish the work for which they are intended. These chemical messengers are released into the blood stream by endocrine glands. Their mission is to travel through the blood stream and lymphatic system as regulators of the physiological activities of cells or organs. When the hormones arrive at their destination, they act as stimulants for certain receptor cells. The ultimate goal is to create and maintain homeostasis, your internal equilibrium, and a balanced body.



There are specific hormones such as estrogen, testosterone, cortisone, and insulin that show us beyond doubt how interrelated the endocrine system is with the rest of the body. These miracle substances have amazing powers, effecting dramatic changes in everything from pain control and the sex drive to mood swings. Imbalance can occur when certain tissues and glands become too active or too inactive because the hormone support released from a regulatory gland was either insufficient or excessive. To maintain a healthy body, you must be sure your glands are getting enough proteins. But that is not enough. These must be usable proteins. These proteins must be of a kind that will be metabolized into useful amino acids. The best way to obtain these proteins is through a proper diet and appropriate enzyme supplements so that the body can correctly digest and deliver these proteins. This is certainly where biochemical types become important. When you know your biochemical type, you can determine the best

sources of protein for you to eat. The wrong proteins can interfere with the acid-alkaline balance necessary for good health.

It is not unusual for women to come in for counseling and tell me they have already experienced early menopause. I am very honest with them when I warn them: "Please understand that the body may be in a state of imbalance, and when we begin to give it what it needs, like life-giving enzymes, it is normal for those in 'early menopause' to begin having periods again." This is met with a variety of responses.

CASE HISTORY

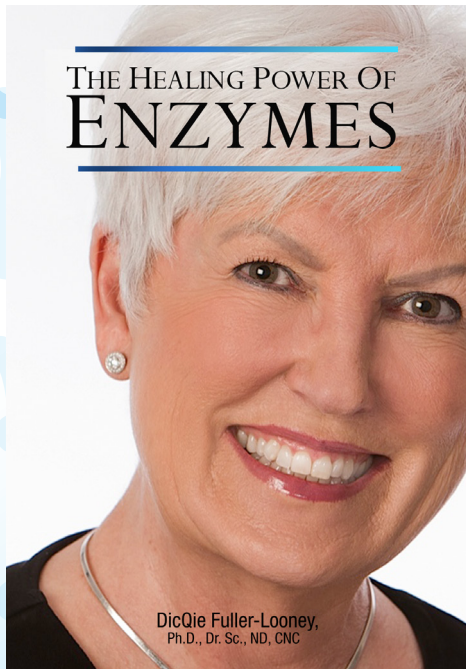
One young married woman who had not experienced regular periods for years came to my office. She had given up on becoming a mother, and at the very least she wanted a healthier life. Several doctors she had seen throughout her married life told her she was unable to conceive. She had not felt well for a long time and wanted something to boost her energy level. Enzyme therapy proved to be exactly what she needed. Her periods started again and began to be regular. Within a few months she was pregnant! I did not promise her or give her hope that pregnancy would occur. I simply pointed out to her that I could advise her on body needs. When life-giving enzymes are taken, the body responds.

Major problems and illnesses can afflict us when our bodies get out of balance. Another way to state this is that certain glands and tissues become too active or too inactive. A healthy network is absolutely essential to good health. The purpose of this chapter is to make you aware that many of the hormonal imbalances that men and women suffer can be arrested, or better yet, prevented. We fear those things we do not understand. Spending time educating ourselves about preventatives is time well spent.

Two big warning signals are sent out in the form of prostate swelling or painful urination. Another signal is ongoing fatigue and a feeling of being out of sync with the rest of the world. These warnings must be addressed, not ignored. This is what prevention is all about. We must learn to anticipate problems by stopping or blocking them. How do we do that? Simply by giving life back to our bodies with living foods and supplemental enzymes. Think about it — what makes the most sense? If every action, including hormonal action, is run by enzymatic activity, does it not make a great deal of sense to keep the body fortified with a continuous supply of supplemental enzymes?

NEWLY REVISED WITH 6
ADDITIONAL CHAPTERS!

THE HEALING POWER OF
ENZYMES



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Dr. DicQie Fuller-Looney has enjoyed and been blessed by her 30-plus years as a clinician, educator, researcher, and author. She has earned two Ph.Ds, one in Health Science and the other in Dietetic Nutrition, and also holds a degree as Naturopathic doctor – Heilpraktiker from Germany Kneipp Heilpraktiker Akademie. Her passion in the last 35 years has been in the realm of Enzyme Therapy along with Biochemical Individualism and their use in bringing balance to the body whether involving our health, thoughts, or harmful beliefs.

*"How exciting! A Must Read For Everyone!!!
What a great educational tool for those
practitioners stuck on the simplicity of our
wonderful enzymes" - Rose Jacobson, CT*

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