INTRODUCTION TO FASTING
Note: the term fasting equals "water fasting". E.g. juice fasting should properly be referred to as juice diet. Here are a couple of articles introducing fasting to new-beginners.

For more articles on fasting click here.
For a (water) fasting SUPPORT GROUP - go to http://health.groups.yahoo.com/group/WaterFasting/

ARTICLES:
Dr. Cinque: What to expect on your first fast
Dr. Cridland: Fasting Facts & Myths
Dr. Cridland: The Biochemistry of Fasting
Dr. Shelton: Where is the proper place to fast?
Dr. Haag: Q&A

"Fasting is not the solution to every health problem, but it can have a powerful effect in reversing pathology and establishing a foundation for health."

What to expect on your first fast.
Answers to the most commonly-asked questions!
By Ralph Cinque D.C.

INTRODUCTION: Fasting has been an integral part of Natural Hygiene care for more than 100 years. Many thousands of people have restored their health through fasting. Some, ill and distraught from years of discomfort and discouragement, try fasting as a last resort. Some of the conditions that respond well to fasting and aggressive dietary changes after the fast are headache, rheumatoid arthritis, asthma, heart disease, high blood pressure, diabetes, colitis, psoriasis, lupus, and uterine fibroids. Fasting to heal oneself can mean the difference between living life pain-ridden and dependent on drugs, going from one doctor to another for relief and living a normal, pain-free existence into old age. Health Science (1996) asked longtime Hygienic physician Ralph Cinque, D.C., to describe some of the experiences a person might encounter while considering and, ultimately, undertaking their first fast.

If you have never fasted before, you undoubtedly have many questions about it. Perhaps you have read a book about fasting, and you are hopeful that fasting will help you overcome a particular problem and improve your general health. But since fasting is not yet a regular part of medical practice, it may be difficult for you to seriously consider it. This is unfortunate because fasting can have a powerful effect in reversing pathology and establishing a foundation for health. Fasting is not an all-encompassing solution to every health problem, but it has great promise to bolster the recovery process for many ailing people.

In order to make an intelligent decision about fasting, you need reliable information that is accurate, factual, and scientific. It is good to talk to people who have fasted and to doctors who are experienced in the use of fasting. Dr. Herbert Shelton (1895-1985), who was one of the founders of the American Natural Hygiene Society, probably had more experience with fasting than anyone else who ever lived. It is estimated that he supervised more than 40,000 fasts. Dr. Shelton used to say that “the most vehement objections to fasting are made by those who have never missed a meal in their lives.”

Think twice before accepting condemnations of fasting from those who know nothing about it and have no experience with it, whether they a physicians or lay persons. If you objectively
look at the evidence about fasting, you will see that it has improved health and life for countless people under a broad range of circumstances.

**Benefits of fasting**

The first question you might ask "Why should I fast?" A thorough answer to that question could comprise an entire book. The short answer is that fasting helps the body to normalize itself.

Think about what happens when you go to sleep at night. Your body immediately goes about the tasks of repair and recovery (as much as possible) from the wear and tear of the day's activities. A renovation takes place in your brain and throughout your entire body that enables you to arise refreshed and raring to go the next day.

The restorative power of a night's sleep involves many factors, and the process is not completely understood. But one factor that definitely helps facilitate this process of rejuvenation is your nightly fast. While you are sleeping each night, you are not eating—you are not adding to your body's digestive work. This period of digestive rest allows your body to devote more of its energy to its nightly restoration.

You probably know from experience that eating a heavy meal late at night interferes with the quality of your sleep and leaves you feeling groggy the next day. Heavy eating late at night, much like heavy drinking late at night, can leave you with a hangover.

Abstinence from food at night facilitates the process of biological renewal, allowing your body to proceed with its repairs and restorations. Of course, one does not remain asleep throughout a fast, but when fasting is combined with rest, your body treats it as an extended period of renovation and renewal.

During fasting, your senses become more acute, including taste, smell, and hearing. Even sight has been known to improve during a fast, although that does not always happen.

**Balance and stability**

Most people are familiar with the term homeostasis, which refers to the body's balancing, centering, and stabilizing mechanisms. Homeostatic mechanisms are what enable your body to adjust to the relentless changes in your external and internal environments. It is easier for your body to maintain homeostasis when you are resting and fasting than when you are eating and engaging in activity. The conservation of energy during such a profound period of rest creates a favorable condition for the biological process of healing. The human body is programmed to always seek normality, and a properly conducted fast supports and encourages that process.

**Absence of hunger**

Your next question might very well be, "Won't I be hungry all the time when I am fasting?" The surprising fact is that after one or a few days of fasting, most people experience little or no desire for food.

The desire to eat is dictated by a combination of physiological and psychological factors. It is thought that hunger is triggered by the activity of certain brain cells within the "appetite center" of the hypothalamus which respond to the blood glucose level.

During fasting, the body begins to burn fat as a fuel, and the appetite center becomes temporarily desensitized to blood glucose. This makes it possible to fast without a gnawing hunger.

Most people report little desire for food while fasting. They do not have a powerful, overwhelming urge to eat. This helps make it possible for most people to fast comfortably for several weeks or longer.

**Psychological factors**

It is important to recognize that psychological factors can affect people differently during fasting. Some people have a habit of thinking and talking about food much of the time — whether they are hungry or not. Some people even dream about food while fasting. But most people experience little or no psychological discomfort about not eating for a period of time. Some even enjoy the feeling of lightness and freedom they get while fasting. Do not assume that you will feel like you are "starving" because you won't be starving. You will be fasting.

**Fasting, not starving**

There is an important difference between fasting and starving. Fasting is a period of abstinence from food during which the body's nutrient reserves are adequate to meet the body's nutritional needs. Starvation can occur only if you abstain from food beyond the point where you have sufficient nutrient reserves.

The differences between fasting and starving are unmistakable to the trained eye, and that
is why it is important that you fast under the supervision of a member of the International Association of Hygienic Physicians (IAHP) who is certified for fasting supervision.

**Will I experience discomfort?**
While fasting, everyone tends to experience some "locomotor weakness," which refers to the withdrawal of energy from the muscular system as the body tries to conserve energy. Sometimes it is surprisingly mild. Some people fast for two weeks without becoming discernibly weak. They move about as easily as they did before they began their fasts. In general, those who are large and heavy tend to remain more energetic than those who are small and light. The body enforces an earlier slowdown of caloric expenditure in those who have the least reserves. Thin people can become weak rather early in a fast. Interestingly, women tend to hold up better energy-wise while fasting than do men. I presume it is because women tend to have greater fat reserves, on average, but hormonal factors also may be involved.

Symptoms may arise during fasting, such as headaches, nausea, vomiting, diarrhea, and skin eruptions. These all are related to the increase in your body's eliminative activities during the fast, and they are considered to be constructive. Dr. Shelton used the term "orthopatbic," which means "right suffering," to describe these events. Nevertheless, they can be uncomfortable and distressing.

The vast majority of people are able to fast for a sufficient period of time without major discomfort. The most frequent complaint I hear from people who are fasting is that they are bored. However, there are instances when a situation arises that may necessitate terminating the fast. That is why it is important that you fast under the supervision of a physician trained in fasting supervision.

**Low blood pressure**
Blood pressure tends to drop during a fast, which is a good thing if your pressure is too high. But if you have normal or low blood pressure, this further drop in blood pressure during fasting can occasion orthostatic hypotension—a sudden feeling of weakness and lightheadedness that occurs when you try to stand up too quickly. While fasting, you must be careful to move around slowly in order to give your body time to adjust to different postures.

There are special receptors in the neck called baroreceptors which regulate the blood pressure to the brain. These baroreceptors tend to respond more slowly during fasting; they take longer to read conditions and elicit a response. People have been known to faint while fasting, but the only danger in fainting is that you may hit your head on something hard or sharp as you fall down. The way to prevent such a mishap is to be slow and careful each and every time you shift positions during fasting. Pause between postures to give your body time to adjust to the effects of gravity.

Sometimes it is necessary to end a fast because of low blood pressure. How low you can allow your blood pressure to drop during fasting before terminating a fast depends upon what your blood pressure was originally, and your size, age, sex, and other factors. An experienced physician can make that evaluation.

**A good and safe experience**
To maximize the benefits from fasting and ensure your safety, obtain professional supervision from a certified IAHP physician. Fasting beyond several days requires professional supervision in order to be safe. Moreover, there are some fragile and delicate individuals for whom even one day of fasting would be ill-advised without an IAHP doctor's approval and supervision. Stability is achieved during fasting because of adaptations the body makes, and individuals vary at how well they make those adaptations.

As I mentioned, the biggest complaint I hear from people who are fasting is that they are bored. Here is where mental discipline can be a major factor. No one will deny that it can be mentally challenging to lie around fasting day after day. But, if you take it just one day at a time (and don't decide ahead of time how many days you will fast), you can get through your first fast without too much difficulty.

ANHS' Health Science, 1996. Ralph Cinque, D.C., is director of Dr. Cinque's Health Retreat in Buda, Texas, and has been certified for fasting supervision by the International Association of Hygienic Physicians. Website www.drcinque.com
"There is more to fasting than skipping a few meals."

QUOTE "The ideal time to fast, the time when we can achieve the most benefit, is when we receive the natural signals from the body to do so. These are the times when we will secure the greatest benefits from fasting. Our body is telling us to stop eating, keep warm, and rest until we feel better. Unfortunately family, community and economic situations often exist that prevent, or at least deter, people from fasting these times. Consequently; many of them simply choose to fast for longer periods on their vacations."

Fasting Facts & Myths
by R. G. Cridland, M.D.

PART 1

Natural hygienists are generally aware of the many beneficial effects of fasting and the vast majority have, at one time or another, fasted for three or more days. The reasons for fasting are many. Some people fast to recover from specific illnesses. Others fast a few weeks each year to improve a chronic condition. Many people fast as part of a recuperative vacation, often trying to make up for their indiscretions of the previous year. A great number fast simply for the experience of it, and an even greater number experiment, at some point in their lives, with the practice of fasting one day a week.

Just about everyone seems to get some benefit from fasting. But the actual therapeutic results of fasting will not be discussed here. Suffice it to say that acute illnesses resolve and most chronic conditions improve or resolve during a well-timed and well-executed fast. This article offers a brief description of the basic biochemistry of fasting, designed to clear up a few misunderstandings.

Fasting is neither a cure nor a treatment. It is a natural, physiological process that is oftentimes the most appropriate way to establish the conditions under which the body is best able to heal itself and recuperate from illness. The ideal time to fast, the time when we can achieve the most benefit, is when we receive the natural signals from the body to do so. (The loss of appetite that occurs when we develop an acute illness is a good example, especially when it is accompanied by fever, chills, or fatigue.) These are the times when we will secure the greatest benefits from fasting. Our body is telling us to stop eating, keep warm, and rest until we feel better. Unfortunately family; community and economic situations often exist that prevent, or at least deter, people from fasting these times. Consequently; many of them simply choose to fast for longer periods on their vacations. Many people who suffer with chronic illness have long passed the acute stage of disease when the body signaled them to fast. They also need to set aside an arbitrary period of time to fast.

On the surface, fasting one day a week seems like a good way to recover from the stresses of the previous six days. But, if you adopt a proper life-style, one that includes adequate rest, appropriate diet, emotional poise, and exercise, there will be no need to arbitrarily set aside one day to recover from your indiscretions. Ideally, a fast day is a rest day. If you can't find time to rest during the week, it is unlikely that you will find the time to rest in bed for a full day on the weekend. What happens if, on the day of the week you have chosen to fast, you awake with a roaring appetite? Should you suppress the natural signals to eat?

From a biochemical point of view, neither regular one day a week fasting nor frequent short fasts are a good idea. At the beginning of the fast, you burn glycogen, fat, and protein for energy. After approximately two weeks, you burn mainly fat. When the fast is broken, these reserves are replaced. Unfortunately, if you overeat and do not obtain adequate exercise, you quickly replace your glycogen and fat reserves but not all the protein. The result of months or years of this practice can be a gradual change in your body composition. (See "The Biochemistry of Fasting," below.) You might end at up being the same overall weight, but a greater proportion of your body would now be fat. Less of it would be muscle than at the beginning.

"Fasting is neither a cure nor a treatment. It is a natural, physiological
Fasting is neither a cure nor a treatment. It is a natural, physiological process.

**Weight Loss**
This leads us to the topic of fasting to lose weight. It is acceptable to begin a new lifestyle with a fast to lose weight as long as the fast is broken properly and the individual follows it up with a proper program of diet and exercise.

Fasting to lose weight without making any lifestyle changes is worse than a waste of time. Without the lifestyle changes, the person quickly regains the weight lost during the fast in the form of fat.

**Breaking a Fast**
Fasting to "completion" is generally described as fasting until the appetite returns and the tongue clears. Unfortunately, although these may occur after short fasts for acute illnesses, these classical symptoms occur only rarely in long fasts. They are not good signs to use when determining when to break a fast. There are numerous other signs that indicate when a fast should be broken and long fasts should be conducted under the care of a Professional Natural Hygienist who will be familiar with them.

Fasting for three to four days during mild, acute illnesses can be done on one's own. This period could possibly be extended to a week by those who have previously undergone long fasts without any complications under supervision. Otherwise, fasting should be done under supervision. If, while undertaking a short fast on one's own, unusual symptoms occur, or a situation develops that prevents breaking the fast early, a Professional Natural Hygienist should be consulted. This point is very important. There are all too many examples of people who, thinking fasting is always simple and straightforward, undertake a long unsupervised fast and get into trouble.

**Metabolism**
Not every part of the body undergoes a complete physiological rest during the fast. Although structures such as skeletal muscle, heart muscle and the digestive system, undergo significant rest during the fast (if the person remains quiet and inactive), organs such as liver and kidney are highly active. Bilirubin is a breakdown product of hemoglobin metabolized by the liver. Due to the large demand on the liver for energy metabolism during the fast, bilirubin levels rise initially during the first two days of the fast and gradually fall as the liver adapts to the increased work load.

With the mobilization of the body's fat reserves, serum triglycerides and cholesterol rise during the fast and then return to normal when eating resumes. Persons with elevated triglycerides and cholesterol prior to fasting also develop higher levels during the fast but these also usually come down to normal levels after the fast. Along with the elevation of ketone bodies and mild acidosis of the blood, potassium comes out of the cells into the blood causing mild elevation of serum potassium. This elevation is encouraged by the mild to moderate decreased production of urine associated with the inescapable mild dehydration that occurs during a fast. Both serum potassium, alkalinity of the blood, and urine production return to normal after the fast. Uric acid, a metabolite of tissue breakdown which is elevated in acute gout, also increases initially during fasting due to decreased renal excretion. After a few weeks of fasting, levels usually return to normal. Even in people with a history of gout, elevated uric acid while fasting rarely, if ever, causes an acute gouty attack. The red blood cell count and hemoglobin rise during the fast. This would be good in the case of anemia. Actually, the total red blood cell mass decreases during the fast as the protein in hemoglobin is used for energy. Due to mild dehydration, the red blood cells that remain become more concentrated in the blood thus appearing to elevate the count.

**Injury**
Due to the catabolic process (tissue breakdown process that turns proteins into energy) that occurs during a fast, healing is impaired in the healthy individual. In acute injuries such as major trauma, fasting may be initially indicated due to the loss of appetite associated with shock. When appetite returns, fasting is no longer indicated since it would delay healing of wounds and fractures.

**Tumors**
Tumors often get smaller and even disappear during a fast. The general exception is truly malignant cancers, which may shrink to a degree but often continue to grow after the fast. And, while it is rare, some cancers grow faster during the fast. Fasting may result in the disappearance of a cancer but, unfortunately, the results are often disappointing. This is not to say fasting shouldn't be tried in cancer since it is usually helpful in both slowing the tumor growth and improving the general condition of the patient. It is also useful for pain relief.
Medication
Generally speaking, medications should be gradually decreased and/or eventually stopped, in consultation with a Professional Natural Hygienist, prior to beginning a fast. There are cases where replacement therapy must be continued during a fast. An example would be a person on thyroid replacement following surgical removal of the thyroid. These persons will always require thyroid replacement although the dose may be decreased during the fast. A second example is the person with severe diabetes mellitus on high doses of insulin. The person's insulin dose can often be decreased with proper diet and lifestyle, but this may take a long time or fail to completely remove the need for insulin. In these cases, the person will require insulin while fasting although it may gradually be reduced and eventually stopped during the fast.

"The ideal time to fast is when you receive the natural signals from the body to do so."

PART 2

The Biochemistry of Fasting

Fat is an efficient storage form of excess energy. At 9.3 calories per gram, it contains more than twice as much energy by weight as carbohydrate and protein do (4.1 cal/g each). An average 70 kg (155 lb.) male has about 12.6 kg (28 lb., or 18% of body weight in a slim individual) of fat storing approximately 117,000 calories. This supply of energy could, theoretically, last a resting, fasting person about 70 days at a rate of 1,680 calories (1 cal/kg/hr) per day. (After two weeks, protein provides only about 5% of the calories per day.) With moderate activity, this would last half that time.

During fasting, the body undergoes metabolic and hormonal changes to draw selectively on its extensive supply of energy in fatty adipose tissue and thereby spare breakdown of vitally needed proteins. The body's stores of glycogen and glucose last only a very few hours. Even in death due to starvation, proteins in the central nervous system appear to be spared. Less vital structures such as fat and muscle protein are used first after glycogen stores are depleted.

Fasting can be divided into four phases.

1. Gastrointestinal Phase
The six-hour period following a meal, during which glucose, amino acids, and fat are absorbed into the blood, is the gastrointestinal phase. The hormone, insulin, is released from the pancreas into the blood in response to glucose and amino acids absorbed into the
blood from the intestines. Insulin plays the major role in this phase and causes the liver and muscle to take the blood glucose into the cells and store it as glycogen. Insulin also allows all the other tissues of the body to take up glucose to be used as energy.

In muscle cells, insulin causes amino acids to be taken up from the blood to replace the contractile protein broken down and used as fuel since the previous meal. Proteins in the form of enzymes in other tissues are also replaced in this way. Excess glucose is converted into fatty acids by the liver and adipose tissue.

Those fatty acids formed in the liver are transported to the adipose tissue via the blood stream where they are stored as fat along with the fatty acids produced in the adipose tissue. Fat is absorbed from the intestines into the surrounding lymphatics which run together to form a common lymphatic duct called the thoracic duct which dumps the contents into the venous blood system at a point in the neck. This fat is then taken up from the blood and stored in adipose tissue. The uptake and storage of all these nutrients into the cells is due to the influence of elevated insulin levels in the blood.

2. Glycogenolysis
The period following the gastrointesting phase, which continues for the next two days, is the glycogenolysis phase, during which time the liver and muscle, under the influence of decreased insulin and increased glucogen (a second hormone released by the pancreas), break down their glycogen to glucose. Glucose from the liver is used mainly by the brain, which can use only glucose for energy at this stage. (Red blood cells and the adrenal glands also can only use glucose, but they require much less than the central nervous system.) The liver glycogen supply of glucose lasts about twelve hours.

Muscle glycogen produces glucose for consumption by muscle. This supply may last twelve to twenty-four hours depending on activity. With decreased insulin levels, fat is broken down by the adipose tissue into fatty acids which are released into the blood and used as fuel by liver and muscle cells. After eight to ten hours one-half of muscle fuel is from fatty acids.

3. Gluconeogenesis
Although it begins a few hours after the last meal, in two days gluconeogenesis, the process of converting amino acids into glucose, becomes the major source of glucose for the brain. Non-essential proteins found in muscle and digestive enzymes are broken down into their individual amino acids which are then transported to the liver. The liver converts amino acids into glucose and urea. Urea is excreted by the kidneys, and the glucose is used mainly by the brain for energy. After two weeks of fasting, the kidney gradually takes on the majority of gluconeogenesis.

4. Ketosis
By the third day, ketosis becomes significant and increases up to the second week of fasting. Due to the low insulin levels and increase release of fatty acids from adipose tissue, the liver, under the influence of high levels of fatty acids, begins converting them to ketones to be used by muscle and brain for energy. As the concentration of ketones increases in the blood during the first two weeks of fasting, more is able to cross the blood brain barrier and supply fuel to the brain. In this way, the brain can use less glucose, and therefore, the demand for gluconeogenesis and breakdown of protein becomes less.

Protein consumption
The consumption of protein decreases from 75 grams per day in the first week to 20 grams per day by the end of the second week. Muscle tends to use mainly fatty acid and saves the ketones for use by the brain. It should be noted that protein is still a required source of energy.

Obese persons with an apparent abundant source of energy as fat would have to be careful not to exhaust their much smaller amounts of non-essential proteins in very long fasts. An average adult male whose ideal weight is 70 kg (155 lb.) would have 30 kg (66 lb.) of muscle tissue which contains 6 kg (13.2 lb.) of muscle protein once water is excluded. Assuming that the majority of the protein used in a fast is from muscle, this man would lose 4kg (8.8 lb.) of muscle tissue in the first two weeks and 0.7 kg (1.5 lb.) every two weeks thereafter. In three months, he would have lost one-half this muscle mass. A moderately obese person, who has fat stores which can easily last longer than three months, would be very weak after three months from loss of muscle mass and would be in danger of using essential proteins such as cardiac muscle.
"the replacement of muscle protein requires time and appropriate exercise"

After the fast
Once the fast is broken, the fasting process is reversed. Blood glucose from the food is taken by liver and muscle and stored as glycogen. Body tissues use glucose as fuel. Excess glucose is converted to fat. Amino acids are taken up by muscle cells to replace proteins broken down during the fast.

It should be noted that the replacement of muscle protein requires time and appropriate exercise. If one over-eats while breaking the fast, they can quickly regain their former weight as fat without completely replacing the lost muscle. (For every 10kg (22 lb.) of weight lost and regained, there results in 10% or 1 kg (2.2 lb.) less protein tissue. If a person goes on three weight loss programs per year during which 10 kg (22 lb.) is lost and regained each time, that would, theoretically, result in the body composition containing 6 kg (13.2 lb.) less protein tissue (mainly muscle) in two years. This calculation would be modified by diet and exercise habits.)

This has important connotations to persons fasting to lose weight or those doing frequent short fasts, such as one day a week.

Summary
In summary there are four biochemical phases of fasting during which the primary energy source changes from glucose to fat. In this way, energy supply is maintained to vital structures, such as the brain, and the use of protein for energy is minimized in the long fast.

For individuals who will rest, there appears to be adequate energy stores, in the form of fat and muscle, to last many weeks.

Conclusion
It can be said, in conclusion, that fasting is a highly useful process when conducted properly and for the right reasons. Biochemical changes that occur during a fast return to normal afterwards. Fasting is neither a "cure" nor a "remedy." It is one ingredient of a healthful and healing lifestyle and, if long term positive effects are to result, must be used in combination with the other requirements for health; natural diet, exercise, emotional poise, and clean environment.

Bibliography
Famine Symposium - Physiology of Acute Starvation in Man, G.F. Cahill; Ecology of Food and Nutrition, Vol. 6, pp. 230-231, 1978
Human Growth, Donald B. Cheek; Philadelphia, Lea & Febiger, 1968
Renal Excretion of Uric Acid During Prolonged Fasting, I.H. Fox, et. al.; Metabolism, Vol. 25 (5), pp. 571-88; May, 1976

Dr. Cridland, ANHS Health Science, 1986
In 1986, R. G. Cridland, M.D., a Professional Natural Hygienist, was practicing in Ontario, Canada, and was a contributing writer for Health Science and a director of the American Natural Hygiene Society. From ANHS' magazine Health Science, 1996.

"Fasting is a highly useful process when conducted properly and for the right reasons."

Where is the proper place to fast?
The health and safety benefits of a properly supervised fast are invaluable!

By Herbert M. Shelton
(1895-1985)

This short piece is excerpted from Dr Shelton's classic book, Fasting Can Save Your Life. Dr Shelton supervised more than 40,000 fasts at his world renowned Dr Shelton's Health
A fast should be carried on amid quiet, peaceful surroundings, where the air is pure, the water fresh and uncontaminated, and the people congenial. As it should also be properly supervised by one experienced in conducting fasts, the best place for fasting is an institution in which fasting is regularly carried out. An Hygienic institution located in the country and headed by an experienced supervisor forms an ideal combination for a fast. Fasting is not merely refraining from eating for a required period. It involves rest, sunbaths, bathing, quiet, peace and the care of the patient through the period of recuperation after the fast is broken. All of this requires knowledge and experience. For most people, fasting is an unusual experience. This is particularly so if it is a first fast. The faster is likely to experience unfounded anxiety, uncertainty, mental perturbation, even fear. In addition, he experiences new feelings and sensations that may disturb him. For these reasons alone, the best place to fast is at an institution, under the guidance of a man of wide experience in fasting.

H.M. Shelton From ANHS' magazine Health Science, 1996.

"Because fasting is not widely understood, people have many questions about it"

BOOKS TO READ:

Free online books
Find FREE BOOKS about fasting, e.g. by DeVries & Fielder, at this [online hygienic & fasting library](http://soilandhealth.org) (Health Library).

Fasting Can Save Your Life
Dr. Herbert M. Shelton
This highly informative book discusses the benefits of fasting in various acute and chronic diseases, including arthritis, colitis, heart disease, and more. It also covers fasting for children and pregnant women. It establishes the difference between juice or fruit diets, and true fasting, which is abstinence.
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Fasting for Renewal of Life
Dr. Herbert M. Shelton
This book was out of print for nearly 10 years. Now it is available again in a new edition. Dr. Shelton had more experience in fasting supervision than any other physician of his generation. Some of the specifics of Dr. Shelton's recommendations have changed over time, but his powerful basic message still rings true today!
314 pp., $12.95

The info about Dr. Shelton's books is from ANHS' magazine Health Science, 1996.

"The vast majority of people fast without serious discomfort"
For more articles about fasting - click here.

Dr. Shelton writes about many diseases and fasting, in his - Orthopathy - "disease encyclopedia"

For a (water) fasting support group - go to
http://health.groups.yahoo.com/group/WaterFasting/

Click here for fasting retreats internationally -- use the website links to find more articles about fasting.

Q&A from INHS email list

Q: I am very interested in fasting, and am going to start tomorrow, August 1, 2005. I am extremely overweight and do not feel very well- stiff joints, tired all the time, unable to do alot because of my weight, high cholesterol, fatty liver, pain in my gall bladder most of the time. I ordered your book, read it and am very excited to try fasting. Thanks, Mary Lou

A: Hello Everybody. This is Dr. Tosca Haag. I've been reading emails for some time but have not had much time to answer. This one struck me that I needed to say something. In regards to fasting with a fatty liver and inflamed gall bladder, please do short fasts of 1 week at a time every 6 to 8 weeks, then maintain a raw food fruit and vegetable diet, low in protein (about 2 ounces of nuts maybe twice a week), for a period of a year before undergoing a longer fast. Fatty liver can cause devastating problems upon re-feeding after fasts. Work through the fatty liver by raw foods first, and when the liver is no longer "sick" then you can take a longer fast.

Dr. Tosca Haag, La Vernia, Texas
Website: royfretreat.com

"Fasting is a good tool - but a poor master." Dr. John Fielder

Note - It is INHS recommendation that all extended fasts beyond 3 days be carried out with supervision!