

CAYENNE PEPPER MAY HAVE SAVED MY LIFE

by Edmond G. Addeo

Without emotion, the cardiologist said, "The treadmill test turned up an abnormality. There's a problem..."

The word "abnormality" is not what I expected to hear in the context of a heart examination. To quote Woody Allen, it is, after all, my "second favorite organ..."

At his desk, the doctor reached for a prescription pad. I started to zone out as I heard the feared words: "Medication...", "Cardizam...", "thallium test...", "T-waves...", "reduced activity..."

And I thought: "Am I now an old man?"

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That was in November of 1991. Since 55 was my father's age when he suffered a series of myocardial infarctions (MIs), when I reached that age I thought it would be eminently intelligent to take a stress test and check the condition of the old ticker. It was very nearly a bad mistake.

I had been relaxed about the prospects. After all, except for a serious bout of viral pneumonia in 1972, my health had always been near perfect. I had been athletic

all my life; usually in better shape in pick-up games than men ten years my junior.

I had only been in the hospital once before in my life, and then only for some cosmetic work on a broken nose after I graduated high school in February 1954. Although I have had a penchant for copious amounts of both wine and pizza at too-frequent intervals, my diet otherwise had been good and my blood work had always been excellent, including liver enzymes. And I was moderately active, physically, although possessed of a slight paunch, a rising but not remarkable cholesterol count, and locked into a sedentary career as a writer.

I considered an MI to be on the horizon genetically, and probably psychologically as well. During my annual birthday physical, I suggested the test to my family physician and he agreed. He referred me to a Dr. Vincent Gilardi (a fictitious name) who had an excellent reputation in the county, had done some pioneering research work, and had years of experience. I called and made the appointment.

It was to my utter surprise that I flunked the test. On the treadmill (so Dr. Gilardi told me later), I lasted far longer than the typical 55-year-old; my blood pressure behaved properly; for all intents and purposes, nothing appeared dramatically wrong.

But there was something erratic about the ST-segments of my EKG, i.e., a specific section of that wavy

line we've all seen. It seems that under heavy exercise, my ST-segments didn't go back to zero before starting to rise again. On the EKG, they were one millimeter away.

I groaned. In lay terms, this meant that some part of my heart muscle wasn't getting any oxygen when my heart rate was elevated (we got it up to 172). Although Dr. Gilardi was only mildly concerned, he thought the symptom justified a thallium test.

A thallium test!

This meant going into the lab in the morning and getting an intravenous shot of radioactive material, spending the day in normal activity, and coming back at five o'clock to sit perfectly still for forty minutes on a cold table while a clicking, whirring robotic contraption rotated around me taking 3-D pictures of my heart.

I flunked this test, too.

Back in Dr. Gilardi's office, he showed me the mysterious 4-color pictures and pointed out a "blot" near the surface of my heart. It was a "dark spot," he said, but that was as far as the explanation went. He said neither he nor any of his six associates had the foggiest notion of what the "blot" was. However, he assured me that he was only mildly concerned and that it simply bore watching. Then he gave me the diet and smoking lecture (I had quit smoking three years before my pneumonia, a decision that may have saved my life, but that's another

story). He encouraged me to come back the following birthday for another stress test. He also suggested I take beta-carotene ("although the evidence is soft," he said) and told me that there was nothing wrong in taking half an aspirin regularly.

(I should point out here that after my pneumonia I investigated the nutritional aspects of health maintenance, read all of the then-new postulations of Dr. Linus Pauling, and looked copiously into immune-fortifying dietary nutrients. Because I have concluded the so-called "balanced diet" is a myth in our soil-depleted, vegetable-boiling, reefer-transport society, for more than fifteen years I have been taking a daily dose of 1000 mg. of ascorbic acid; 25,000 units of vitamin E; 10,000 units of emulsified vitamin A; and a high-mineral multiple vitamin.)

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Medically speaking, it was a long year. Chiefly because of my hypochondriacal tendencies, I couldn't get the Essential Muscle in my chest off my mind. I play softball, I run occasionally, play tennis, chop wood, toss grandsons in the air -- things that cause a certain amount of exertion. A normal person would perform these functions without once thinking about his heart. How many times have you rounded first base trying to beat out a triple and thought about your heart as you headed for second?

On the next birthday, I flunked the test again.

This time, explained Dr. Gilardi, the EKG showed that my ST component turned upward at two millimeters before zero. (For some reason, the "blot" hadn't changed and nobody mentioned it.) "Obviously progressive," he said, and gave me a prescription for medication. He also cautioned me to let up on the heavy exercise, something I thought I would never hear. It was depressing, yes, but for someone who had always considered himself something of a jock, it was also psychologically disconcerting. Not only did I now have my own cardiologist, but also he was telling me I had to start taking a heart pill.

What? Those pills are only for old guys!

This was in early November. Just before Thanksgiving, I received a book in the mail from my mother-in-law. It was about the benefits of cayenne in preventing and treating cardiovascular disease. I won't cite the title or author for obvious reasons.

Suffice to say I was knowledgeable about matters scientific. I had lots of pre-med science in college (I'd be a doctor today if I could have earned anything better than a "C" in chemistry); some informal scientific training in researching the works of Dr. Pauling; and further biochemical, bacteriological and medical orientation in working with the legendary Dr. Virginia Livingston-Wheeler. Without going into the merits of her hypothesis about the microbial origins of cancer, let me

just say that Dr. Virginia did some pioneering work in vaccine bacteriology and the immunological treatment of cancer patients, with remarkable success rates. She worked with autogenous vaccines, BCG (bacillus Calmet-Guerin, the tuberculosis vaccine), monoclonal antibodies, and diet. I wrote a comprehensive book about her and her work (The Conquest of Cancer, Franklin-Watts, 1986). I also worked closely in the '70s with the Orthomolecular Medical Society and ghostwrote a well-received book with Dr. Richard A. Kunin, M.D. on the nutritional aspects of health maintenance (Mega-nutrition, McGraw-Hill, 1978).

The point is, I learned how to tell the difference between certain nutritional claims that are based on pure hokum and those that are based on scientific fact, such as a double blind, placebo-controlled crossover study. I usually approach such claims with a "show me" attitude, and am always wary of what the claimant wants to sell me. I've turned down attractive financial offers to ghostwrite or co-author books of unsound or marginal scientific basis.

The cayenne book claimed that the basis of cayenne and other hot peppers was the chemical capsaicin, and that it worked wonders for the arteries. The capsaicin part is true, the chemical formula $C_{18}H_{27}NO_3$, but the "wonder" part was highly suspect. The book was filled with terms like "as many scientists agree..." and "clinical studies have shown..." without ever citing

which scientists were doing the agreeing or what clinical studies were doing the showing.

In medical terms, the author's personal accounts and his accounts of others' "recoveries" were purely anecdotal.

However -- and this is a big "however" -- I started taking a dose of cayenne twice a day, before lunch and dinner. Sometimes only once a day. I had always enjoyed Mexican, Chinese, East Indian food, any foods that were hot and spicy. I spray a variety of dishes with Tabasco sauce, double-dose my Italian recipes with garlic, and always ask for the "spicy" version of menu items in Chinese and Thai restaurants. So, I opined, how could it hurt?

Strictly unscientific and a purely arbitrary decision.

I had been taking the cayenne for two months when Dr. Gilardi introduced me to an experimental program being conducted by a San Diego pharmaceutical company. In the program, the company's new drug, arbutamine, was introduced intravenously to a volunteer subject, and while the subject was lying stock still on a table, his heart rate was increased and a perfectly clear echocardiogram could be taken. This was opposed to a person moving erratically while running on a treadmill that was creaking and shaking and vibrating at all angles. (Dr. Gilardi reminded me that it wasn't too long

ago that stress-EKG tests were taken by having the patient jump on and off a low stepladder.)

Consultations with the test program director were required, with my wife present. We were given a careful explanation of the details and risks of the experimental test. My wife and I talked it over, and I volunteered.

The test itself was a memorable experience. In a room not more than 15 ft. x 15 ft., there were crowded three representatives of the pharmaceutical company, Dr. Gilardi and two of his assistants, two echocardiogram technicians, the program manager, and me on a table. Because part of the test involved introducing insulin, I experienced a pronounced version of what is called the "fight or flight" syndrome. The best explanation I have is that halfway through the test I felt like I was about to jump out of an airplane. My heart was pounding, I was highly anxious, yet I was lying perfectly still.

My most powerful memory of the entire procedure was when Dr. Gilardi looked at the echocardiogram and said, "Well, I'll be -----! Would you look at that!"

Later, in his office, Dr. Gilardi happily explained that there was nothing whatsoever wrong with me. He said the echocardiogram showed not only a perfectly normal heart, but that if he were writing a textbook about what a perfect heart should look like, he'd use pictures of mine.

Naturally, I was elated. But when I questioned him about the worrisome ST component and the ominous "blot," he dismissed it as a "false positive."

At this writing I've just turned 60, and as part of another eminently intelligent idea, I've had a battery of physical tests, including a new stress-EKG that showed my heart still "perfectly normal."

Now, this is the point of my story: I didn't tell Dr. Gilardi then (or my family physician, for that matter), and I haven't told him now, about the cayenne. I know they would both pooh-pooh it and lecture me about quackery and "unfounded" claims. I don't want the embarrassment.

But it makes one wonder.

In the first place, it seems more than passing strange that I would have two -- two! -- false positives on stress-EKGs a year apart. The odds of that happening are great indeed.

In the second place, the only thing I did differently between the second "flunking" and the experimental arbutamine echocardiogram was to take the daily doses of cayenne.

And in the third place, I've continued to take the cayenne, and passed this recent treadmill test, on the same equipment as before, with flying colors. In fact, my blood chemistry report was the best it's been in years.

I'm not saying it's the cayenne -- I still haven't seen any clinical indications as to its efficacy. But I am admitting that the temptation to make a cause-and-effect conclusion is tongue-biting irresistible.

Let's go back to good science: that the two events -- the cayenne and the total reversal of the diagnosis -- are coincidental, is highly improbable. That's all I'm saying.

Granted, this is just one story. And, yes, it's anecdotal. But isn't anyone testing this stuff?

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