# **Chit-O-Gram**

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#### **Still Going Strong**

Hi, my name is Hazel Miller. I live in Hawaii. Even though it is "a paradise" because the sun is so close to the equator, the UV light can be very harmful.

In May of 1997 I found out I had Squamous Cell Carcinoma (skin cancer) and had the lesion removed surgically. I was told that I would have to have rechecks every 3 months. On my first recheck, the doctor found 7 new lesions on my arm and leg.

My best friend told me about Chitosan Oligosaccharide. It had helped her, so, I started taking it. At my next 3-month visit, I had no new lesions!

Unfortunately, I ran out of the product for approximately 3 ½ months and when I went back for my recheck, they found 8 new lesions on all 4 limbs! I started back on Chitosan Oligosaccharide and had no new lesions.

It is now 7 years since I first contracted skin cancer. I have always had a busy lifestyle including working two jobs. Using Chitosan Oligosaccharide has eliminated the lesions, allowed me to continue my hectic pace and all of my doctor reports are fine. I highly recommend this product to help your body's immune system remove toxins. I personally will never run out again!

#### Skin Cancer, Nonmelanoma

#### What is skin cancer?

Skin cancer is the most common type of cancer. It destroys and replaces normal skin cells and tissues and, in some cases, can spread to other parts of the body. Most skin cancers start in the outer layer of the skin (epidermis). About 97% of all skin cancer is nonmelanoma skin cancer. More than 1 million cases of skin cancer are diagnosed in the United States each year.

#### How is skin cancer classified?

There are three main types of skin cancer.

- <u>Basal cell carcinoma</u> is a nonmelanoma skin cancer and is usually not life threatening. Basal cell carcinoma is the most common type of skin cancer and accounts for 80% of all nonmelanoma skin cancer.
- <u>Squamous cell carcinoma</u>, also a nonmelanoma skin cancer, is similar to basal cell carcinoma in cell structure and treatment options.
- <u>Melanoma</u> differs from nonmelanoma skin cancer in appearance, cell structure, and treatment options. Melanoma can be life threatening.

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## Diction Know.

Research in humans indicates an increase in bifidobacteria resulting from oligosaccharide ingestion and a reduction in detrimental bacteria. Animal tests have shown anticancer effects of bifidobacteria. These anticancer effects are due to immunity enhancements by the cells, cell wall and extra cellular components of bifidobacteria.

#### THREE CONVENIENT SIZES:

- 100 MG (30 CAPSULES / 3GRAMS)
- 250 MG (30 CAPSULES / 7.5 GRAMS)
- 500 MG (60 CAPSULES / 30 GRAMS)

(SEE YOUR DEALER FOR DETAILS)

#### Skin Cancer, Nonmelanoma

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#### What causes skin cancer?

Skin cancer is caused most often by overexposure to the sun and its <u>ultraviolet (UV) rays</u>. Overexposure includes:

- Occasional intense sunlight exposure during childhood that causes severe sunburn and blistering.
- Extensive sunlight exposure over many years.
- Artificial sources of UV radiation, such as tanning beds or sunlamps.

#### How will I know if I have skin cancer?

Skin cancer appears as a change in the skin, such as a growth, an irritation, or sore that does not heal, or change in a wart or mole. Skin cancer usually affects the head, neck, back, chest, or shoulders.

#### How is skin cancer diagnosed?

Skin cancer is diagnosed by a physical examination of the skin. If skin cancer is suspected, a skin <u>biopsy</u> will be examined by a pathologist under a microscope.

#### What increases my risk of developing skin cancer?

Your risk of developing skin cancer is increased if you have light skin color; freckle easily; have had frequent, severe sunburns; and live near the equator. Fairskinned people with blond or red hair and blue or light-colored eyes have a greater risk of developing skin cancer than dark-skinned people. Other risk factors include an inability to tan and a family history of skin cancer.

#### How will my skin cancer be treated?

Most often, skin cancer is treated with removal of the lesion. Treatment is very successful if done early. Follow-up treatment for people who have a history of skin cancer includes regular examinations by a health professional and frequent skin self-examinations.

#### **Skin protection**

- Limit your exposure to the sun, especially from 10:00 a.m. to 3:00 p.m. (hours of peak ultraviolet (<u>UV</u> exposure).
- Wear protective clothing, including a widebrimmed hat, a long-sleeved shirt, and pants.
- Wear sunglasses that block out UV rays.
- Use a sunscreen that blocks ultraviolet rays (both UVA and UVB) and has a <u>sun</u> <u>protection factor</u> (SPF) of at least 15 every day, all year, even when it is cloudy.
- Avoid tanning booths and sunlamps, which emit ultraviolet radiation and can cause skin damage and increase the risk of skin cancer.<sup>12</sup>

#### **Health-Care Quarterly July 2004**

#### **Medication Errors**

- More than 7,000 Americans die from medication errors yearly, and 700,000 are injured
- ➤ Medication errors kill more people each year than workplace injuries (6000)
- ➤ Deaths due to medication errors increased 257% from the '80s to the '90s
- Two out of ever 100 hospital admissions experienced a preventable adverse drug event.
- ➤ 20% of preventable adverse drug events are life threatening.
- More than 1 million serious medication errors occur every year in US hospitals.
- Medication-related errors for hospitalized patients cost \$2 billion annually.

### For you, your family and your pets!