



THE PHYSICIAN'S CONCISE GUIDE TO:

- 25 -

Parent Essential Oils, & Heart Health *5 Important PEO Studies*



How Much Plaque Does “The Professor” Have?

Dear Friends and Supporters,

Many of you have been questioned by well-intentioned family members and friends when discussing my nutritional recommendation to eat plenty of natural fats and protein along with minimizing your carbohydrate intake — the opposite of what most “experts” say. As if that’s not enough for the well-intentioned but woefully ignorant experts, I drive them over the edge with my recommendation of an *unadulterated* parent omega-6/3 blend with more parent omega-6 than parent omega-3.

As you’d expect, these same naysayers have said that heart disease must be in my future. As my loyal supporters have come to realize over the years, my recommendations are based on solid, state-of-the-art science, not the latest fad or opinion. “Science — Not Opinion” is my motto.

Because of my work, which includes lecturing, traveling with little notice and even less sleep, and of course the commensurate stress, I also have not exercised in over six months. I keep both early and late hours, eat lots of SATURATED fat enjoying lots of cheese and eggs with virtually no fiber, add lots of salt, enjoy a big 16 oz. steak at least every other day, eat few fruits or vegetables (just 1-serving a day (if even that) vs. the “expert’s” recommendation of 5), and even drink alcohol — **I consistently don’t follow the conventional wisdom** on how to be heart healthy. The “experts” would wrongly conclude that I am a heart attack waiting to happen.

Recently, I had a 64-slice MDCT scan to measure the plaque in my arteries by a top Florida radiologist. I was visiting with this expert radiologist, Dr. Kagan, because he contacted me after recently scanning one of his patients that had started following my protocol recommendations within the last year. Even though the patient was *in his 60’s and a smoker, he amazingly had 22% less calcified plaque in his coronary artery walls* than the scan from the previous year. Dr. Kagan was amazed and astounded because plaque rarely decreases in anyone — never in a smoker. So I traveled to Fort Lauderdale to personally meet with this physician. Dr. Kagan kindly offered to scan me. This is a state-of-the-art machine. (NOTE: Yes, there is radiation in the scan (about 3 years worth of ambient, natural outdoor levels) but that is of little concern to me because, as you may recall, I go into great detail explaining why in “The Hidden Story of Cancer.”

Guess what? **The scan couldn’t detect any hard plaque in my artery walls—the lowest possible coronary risk! That’s right—this is where you want a zero—not a 100.**

As stated on the file — I have “a perfect score of 0 — the lowest possible coronary risk.”

A plaque-free scan almost never happens because the average person develops 30% additional volume of plaque in the artery wall each year. (NOTE: If you have 10% plaque this year then just 8 years later you’ll have typically 75% hard plaque volume—a BIG PROBLEM and a big risk for heart attack.)

Please view the following pages to see the results for yourself and also, please pass the PEOs, the steak, the full-fat cheese, and hold the exercise!

Based upon your results our Cardiology Advisory Panel recommend the Clinical Actions below:

Recommendations for all

- ☐ Diet low in fat and low to moderate carbohydrate intake
- ☐ Regular Exercise Program (a total of 30 minutes at least 3 times per week)
- ☐ Stop Smoking (Active AND Passive)
- ☐ Avoid Mental Stress

Recommendations for Zero Score

No action needed apart from a healthy lifestyle.

perfect score!
Zero plaque

Recommendations for Positive Score

Modifiable risk factors

- ☐ If obese- weight reduction program
- ☐ If hypertensive- adequate blood pressure control
- ☐ If diabetic- adequate blood sugar control
- ☐ If hypothyroid- adequate thyroid replacement

If Calcium Score is >400 , or plaque is present in proximal vessel section or plaque is densely concentrated we recommend

- ☐ Stress testing
- ☐ Myocardial Scintigram (Thallium)

If the above is abnormal we recommend

- ☐ Conventional (Catheter-based) Coronary Angiogram
- ☐ CT Coronary Angiogram

Medications

- ☐ Aspirin 300mg once a day after food
- ☐ Enteric-coated aspirin (Cartia) 100mg daily

Antioxidants

- ☐ Vitamin C 500mg once a day
- ☐ Vitamin E 400IU once a day

B Complex Vitamins

- ☐ Folic Acid 5mg 3 times a day
- ☐ Vitamin B6 10mg once a day

Statins

If calcium score is positive give statins accordingly.

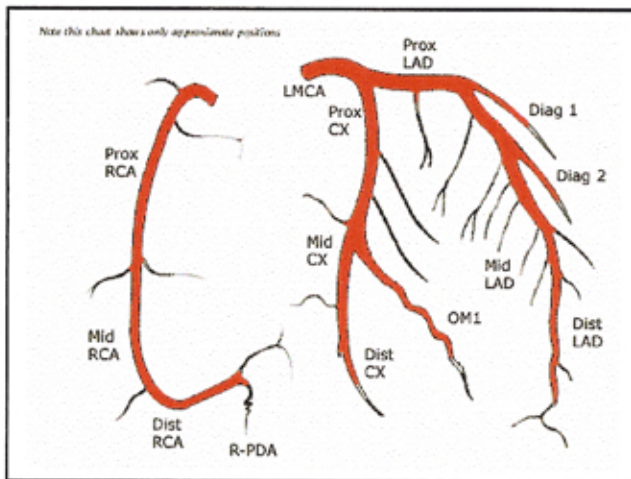
If plaque is proximal or dense- Give Statins even if Cholesterol normal

Repeat CT in ____ Years to measure any change in coronary plaque

The Body View scanning facility is intended as a coronary artery disease risk assessment testing facility only and is not considered a substitute for a physician's examination. All recommendations from our center are based solely upon information supplied by the conventional risk factor questionnaire and by the CT scan results. The patient's own physician is best able to make definitive therapeutic decisions.

Robert L Kagan M.D.

This diagram demonstrates the **LOCATION** of calcified coronary plaque but does **not** necessarily indicate the presence of a significantly narrowed artery.



Key

LMCA= left main
LAD= left anterior descending
CX= left circumflex
RCA= right coronary artery

RESULTS

Calcium Plaque Burden

Artery	# Plaques	Plaque Burden	
		Volume (mm ³)	Calcium Score
Left Main	0	0	0
Left Anterior Descending	0	0	0
Left Circumflex	0	0	0
Right Coronary	0	0	0
Other			
Total	0	0	0

Your Calcium Score is 0

Interpretation of calcium score-

Total Score	Diagnosis	Clinical Interpretation
0	No identifiable atherosclerotic plaque. Very low cardio-vascular disease risk	A 'negative' examination. Greater than 95% chance for absence of coronary artery disease.
1 – 10	Minimal plaque burden.	'Significant' coronary artery disease very unlikely.
11 – 100	Mild plaque burden.	Likely mild or minimal coronary stenosis.
101 – 400	Moderate plaque burden.	Moderate non-obstructive coronary artery disease highly likely.
Over 400	Extensive plaque burden.	High likelihood of at least one 'significant' coronary stenosis (>50% diameter.)



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June 18, 2008

Jonathan Collin, MD
Letter to the Editor
Townsend Letter
911 Tyler Street
Pt. Townsend, WA 98368

Re: Parent Essential Oils (PEOs)
Brian Peskin, BSEE

Dear Dr. Collin:

In addition to my diagnostic radiology practice which includes CT, MRI, PET and Ultrasound examinations requested by healthcare providers for diagnostic purposes, I have a small private practice devoted to preventive medicine. These patients have yearly whole body scans utilizing a 64-slice multidetector CT scanner (MDCT) which includes coronary calcium scoring for detection of coronary artery disease (CAD). Also included is an extensive blood and urinalysis panel. The concept is that the whole body scan will detect anatomic abnormalities prior to their progression to a symptomatic phase and the laboratory testing (blood & urinalysis) will detect functional abnormalities in a preclinical stage. The most common pathology that I find is asymptomatic coronary artery disease (CAD) since the coronary calcium scoring detects hard plaque within the wall of the vessel. This build up of plaque within the wall of the vessel will occur many years prior to any symptomatology.

One of my patients, a 68-year old male, smoker, I have followed on yearly basis beginning in 2005. In addition to the calcium score, the test also provides the volume of plaque, which is the best number for follow up to evaluate of the progression of plaque burden. The score is based on the density of plaque but the volume is the amount of plaque. In spite of all routine conventional treatment which included blood pressure medication, a "statin" drug, high-dose niacin, co-enzyme Q-10, and a daily aspirin, his coronary plaque volume continued to progress, although an acceptable slow rate.

(continued)

Re: Parent Essential Oils (PEOs)
Brian Peskin, BSEE

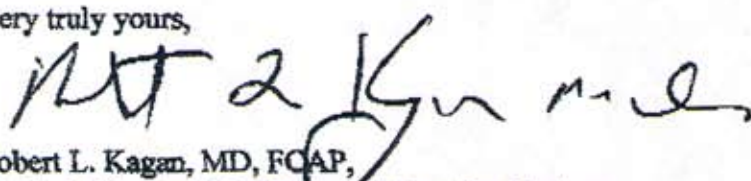
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Date:	Coronary Artery Total Plaque Burden (volume):
04-22-05	26
07-11-06	36
03-05-07	39
04-21-08	30

As you can see, for the first time from 2007 to 2008, the volume of plaque decreased from 39 to 30, which is a decrease of 22% when annualized on a yearly basis. *I have never seen a decrease of coronary artery plaque volume by more than 5% in one year.* My goal is usually just to stop the increase in plaque. Naturally, I was quite curious and called the patient to inquire about what else he was doing in addition to the traditional reduction in cardiac risk factors that I was aware of. He told me the only thing different about his regimen was the "oxygen pills" that he was taking for the past 8 months. Through my investigation, I finally traced the "oxygen pills" to the parent essential oils (PEO) advocated by Professor Brian Peskin. I was able to contact Professor Peskin who sent me a copy of his article recently published in your newsletter called "Vytorin Failure Explained - A New View of LDL". Needless to say, personally, I have stopped taking my "statin" drug (Lipitor) and I have now implemented Professor Peskin's "Parent Essential Oils" (PEOs) recommendation to my therapeutic regimen.

Thank you for publishing this important article. It should be required reading for any physician treating coronary artery disease (CAD) today.

Very truly yours,


Robert L. Kagan, MD, FQAP,
Medical Director, MRI Scan and Imaging Centers
RLK/fm

Do others also have these amazing results? YES...

PEDIATRIC ENDOCRINOLOGY CONSULTANTS, P.A.
AMID HABIB, M.D., F.A.A.P., F.A.C.E.

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June 27, 2008

Professor Brian Peskin, BSEE
99 North Post Oak Lane, #3208
Houston, TX 77024

Dear Brian:

I read, with interest, the article entitled "Vytorin Failure Explained - A New View of LDL" you wrote with Dr. David Sims in the June 2008 issue of Townsend Letter.

My mother and I have been taking your Omega 3 & 6 Protocol for almost 7 years. I had a 70% occlusion of my right carotid artery back in 2000, which required surgical intervention and 7 years later, on your protocol, there is no evidence of any plaque or occlusion. My mother had a 50% occlusion in both carotid arteries 7 years ago and, the occlusion is now down to 15 to 20%. Both of us have elected not to use any statin drugs.

Best personal regards.

Sincerely,



Amid Habib, M.D. F.A.A.P., F.A.C.E.

AH:jw

Appendix IX

TWO CASE STUDIES

David Macphail (02/14/07)

Results of High Omega-3/Fish Oil Supplements vs. Scientifically Correct Parent Omega-6/3 Ratio

When I contacted you prior to converting to your recommended ratio of Omega-6 to Omega-3, you said I would be amazed by the results of the scientifically correct parent omega-6/3 ratio. I am more than amazed.

I have been taking the suggested oil mixture (1 teaspoon per day or four 725 mg. capsules) for about two weeks. The results to date have far exceeded my expectations. A few areas of marked improvement are:

Weight Loss

Since starting on your program I have lost 6.5 lbs and 1.5 inches at my waist.

Cravings

For most of my life I was a “carboholic,” craving sweets and other carbohydrates. I could, and often did, eat large amounts of pasta and bread. This is one of the big factors that brought on type II diabetes (it is also abundantly clear now that I suffered from long-term chronic EFA deficiency, which is common to most, if not all, diabetics). Since starting on the EFA mix, my carbohydrate cravings have mostly disappeared. And my appetite has greatly decreased.

Bruising and Cuts

I noticed that my gums started to bleed profusely a few months after I began taking fish oils. Also, minor cuts did not easily clot.

Surprising to me, after taking the correct EFA mixture for only two weeks, my gums do not bleed at all – not one drop of blood. In fact, I have noticed that I am much more resistant to bruising and minor cuts. I am amazed, just as you said I would be. Note that *The Hidden Story of Cancer* explained precisely why this result would be expected to happen and does happen.

Skin

I have had skin problems most of my life. These became chronic after I was exposed to photo finishing chemicals between 1965 and 1973. During that period I developed weeping eczema on my face and neck. Later I developed chronic psoriasis on my scalp, with the characteristic itching and scaling of the skin. Also, since a teenager I have suffered from chronic dry skin and often heavy flaking in the area of my eyebrows.

Starting in approximately 1975 I have suffered from chronic red blotchy inflammation and irritation of the skin on my face. This was frequently accompanied by small open sores as well as oozing sores on my scalp. Interestingly, high omega-3 oils like flax and fish oils seemed to exacerbate my skin conditions. When taking these oils, I would develop on an intermittent basis a severe inflammation accompanied by a psoriasis-like scaling of the skin around the base of my nose

Specifically, when I started taking fish oils, the inflammation and blotchiness of my face was exacerbated and the skin burned and stung almost constantly.

Amazingly, after taking the correct EFA mixture for only two weeks, my face has almost completely cleared up. The skin now feels like velvet. The constant burning sensation has been replaced by a soothing, cool feeling. When I have a bath, the skin on the back of my hands takes on a pink translucent appearance, like the skin of a new born baby. At times you can now see all the blood vessels through the skin – pink and vibrant.

Also of interest is the change in the tension of the skin in my eyelids. For some years now, the flesh of my eyelids has been somewhat inflexible so that the lids did not open and close properly. Because of this, I was constantly pushing the flesh of my brow back to stretch the eyelids. This problem has disappeared in the past few days.

Hearing

I awakened about 5:00 AM today to an unfamiliar silence. I have had tinnitus (ringing of the ear), sometimes severe, for more than 15 years. When I got up it was gone and has not returned. I am overjoyed.

Pulse

Also of significance is the softening of my pulse over the past few days. For the past four or five years my pulse has felt so strong that I would often feel the flow of blood pulsing in my neck. When lying in bed at night, I could often hear my heart beating. This greatly concerned me. My pulse is now so soft it is hard to detect in the carotid artery.

Exercise

When I was taking fish oil supplements I was getting lactic acid accumulation, causing the familiar “burning” from what I would categorize as minor physical activity. Something as simple as bending over for a prolonged period left my back and thighs aching for hours, sometimes days. Now that I have greatly reduced my carbohydrate consumption and added your suggested EFA supplementation with the scientifically correct parent n-6 to n-3 ratio, I am cycling 40-50 miles most days with good energy, minimal hunger and no lactic acid build-up. My legs may get fatigued, but they do not ache.

Energy

I was “continually dragging” when I was on fish oils. I was constantly tired and fatigued no matter how long I slept.

Wonderfully, after taking the EFA mix for only two weeks, my energy is “off the scale.”

Instead of going to bed at 9:30 or 10:00 PM, I am often wide awake at 12:00 AM or later. Of late I am waking completely alert and rested at 5:00 AM or 5:30 AM.

I am energized all day with no flat spots.

The Hidden Story of Cancer

The problem I am having now is getting to sleep at night. Yep... I now have MANY extra productive hours.

Mental Clarity

On fish oils I often felt sluggish and it was an effort to concentrate. After taking the EFA mixture for only two weeks, my ability to focus for extended periods is fantastic.

Blood Speed

I recently cut myself. I was surprised to see how quickly the blood gushed from the wound and ran down my arm. It was as thin as water and ran just as fast. However, after only a few seconds of pressure applied to the wound the flow of blood quickly stopped.

In Conclusion

With fish oils gaining momentum as the “salvation of mankind,” I imagine you will run into one heck of a fight on all flanks (if you are not already in one). At the end of the day most people are entrenched in a position within their field for one reason—money. So it will be really interesting to see who is really in the health field for humanitarian reasons.

Dr. Warburg could not have made the primary cause of cancer more obvious if he kicked in people’s front teeth. Yet the only response he got was a collective “DUHHH.....we don’t get it” from the medical community. I hope you have better luck.

Your book is a disturbing indictment of the inability, or perhaps more to the point, a conscious and premeditated unwillingness on the part of the scientific and professional community to pursue scientific fact. To paraphrase another philosopher, Thoreau:

“For every scientist and medical professional hacking at the roots of cancer, there are tens of thousands hacking at the branches or even studying the leaves of the tree.”

You have the cancer issue “by the throat” while others are clueless. Thank you for this superb development. I can see why Dr. Vonk said of your work:

“Impeccable research and novel insights of sheer genius. Brian’s accomplishment is singular—no groups, no public money, only elegant science showing how proper use of EFAs is the missing link

for practical application of Otto Warburg's discovery. This knowledge is priceless for your future health."

Brian N. Vonk, MD

Board certified:

Internist, Cardiologist, Radiologist

Tom Sommerfield (05/04/09)

Results of Peskin Protocol PEO Blend in Reducing Both Systolic and Diastolic Blood Pressure

I measure my blood pressure within 15 minutes of getting out of bed each morning. I have normal to excellent blood pressure in the range of 128 over 86. The reading used to go up and down within a range of approximately 126 to 136, but rarely above this. **Since I started on your PEO recommendation, I noticed my BP slowly dropping into the range of 122 over 81.** In addition, it remained almost constant in this range, with a few departures down to 107 over 79. **I have not recorded [excellent] BP like this since I was in my twenties.**

I decided to try an experiment, and stopped taking the PEOs, but continued with minerals and my other regimen of 2000 mg Vitamin C per day. **Within one week of not using the PEOs, my BP went up again** to its old level and again showed some departures, mostly upwards. **Back to the PEOs and within one week, the BP came back down to the new range. I repeated this four times over the last three months, always with the same result.** Knowing the metabolic significance, I was not surprised at the result, but I was surprised at how large the difference was between on and off the EFA's — very interesting to me.

Tom Sommerfield, Singapore

[Note: This is an exceptional yet fully expected result based on vascular tissue physiology and the powerful biochemical action of the PEO recommendation.]