

17TH ANNUAL WORLD ANTI-AGING CONGRESS **O** N MED ERAT Ξ Ξ HNOL BOM Ξ D



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Dr. Ronald Klatz

MD, DO







Joseph C. Maroon, MD Senior Vice President, A4M Vice President, A4M

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AMERICAN ACADEMY OF ANTI-AGING MEDICINE

16th Annual World Congress on Anti-Aging Medicine & Regenerative Biomedical Technologies

Las Vegas 2008



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Welcome





Dear Attendee:

The American Academy of Anti-Aging Medicine (A4M) welcomes you to Las Vegas for the 16th Annual World Congress on Anti-Aging & Regenerative Biomedical Technologies, Winter 2008 Session.

According to the United Nations Programme on Ageing, one out of every ten persons is now 60 years or above; by 2050, one out of five will be 60 years or older; and by 2150, one out of three persons will be 60 years or older. In addition, the older population itself is ageing. The oldest old (80 years or older) is the fastest growing segment of the older population. They currently make up 13 percent of the 60+ age group and will grow to 20 percent by 2050. The number of centenarians (aged 100 years or older) is projected to increase 14-fold from approximately 265,000 in 2005 to 3.7 million by 2050. ["The Ageing of the World's Population," United Nations Programme on Ageing, http://www.un.org/esa/socdev/ageing/popageing.html, accessed 29 July 2008.]

As a result, many national governments around the world have begun to look carefully at the anti-aging medical model to counteract their nations' mounting social, economic, and medical woes that are otherwise anticipated to arrive with the rapidly growing volume of an aging population.

As one of the fastest growing medical societies in the world today, the A4M co-sponsors the world's largest scientific conferences in the area of advanced preventative medicine, and co-supports a wide array of anti-aging educational programs taking place around the world, many with the support of governments, ministries of health and international sports federation organizations. This educational forum provides the opportunity for you to interact with the world's leading clinicians and researchers specializing in advancements in human longevity. During this session, you will learn of the latest breakthroughs in biomedical and technological advances delivering cutting-edge assessments and therapies for aging-related dysfunctions, disorders, and disease.

With your involvement, the anti-aging medical specialty continues to expand and become more widely accessible. We hope that you enjoy the spirit of educational exchange and dialogue at this conference and that you leave this event with an enhanced knowledge of the diverse array of interventions and therapeutics to promote the healthy, extended human lifespan.

With warm regards,



Ronald .Klatz

Ronald Klatz, M.D., D.O. President, A4M



Robert Goldman

Robert Goldman, M.D., Ph.D., D.O., FAASP Chairman, A4M

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The Exhibition Hall is a separate commercial exposition, held in conjunction with but distinct from the medical education presentation coordinated by the American Academy of Anti-Aging Medicine (A4M).

Exhibitors are invited to participate on a first-come, first-serve basis. Neither the A4M nor Medical Conferences International Inc. has conducted an evaluation of exhibitors, their products, their labels or labeling, or their representations. A4M and Medical Conferences International Inc. do not vouch for the relative worth, safety or efficacy of products or services displayed. A4M and Medical Conferences International Inc. encourage all attendees to conduct their own independent and diligent evaluations.

Be mindful that anti-aging medicine delivers an innovative model for healthcare in which the sanctity of personal freedoms of choice is upheld. It is with a reverence for freedom of thought, ideas and practice in healthcare that A4M refrains from limiting, censoring, or discriminating against those who wish to present their products or ideas in an open forum of medical professionals.

With this open marketplace, however, it is incumbent that you, the Exposition visitor, is aware that participants at this commercial venue are not endorsed and have not been evaluated or approved by A4M. The A4M encourages you to exercise your personal scrutiny, educated and demanding scientific evaluation in assessing the ideas and products presented.

To restrict this free exchange of thought, both conventional and unconventional, would eliminate true opportunities for breakthrough and discovery vital to our new science. Indeed, freedom of thought is the essential foundation upon which the advancement of health care itself is based.

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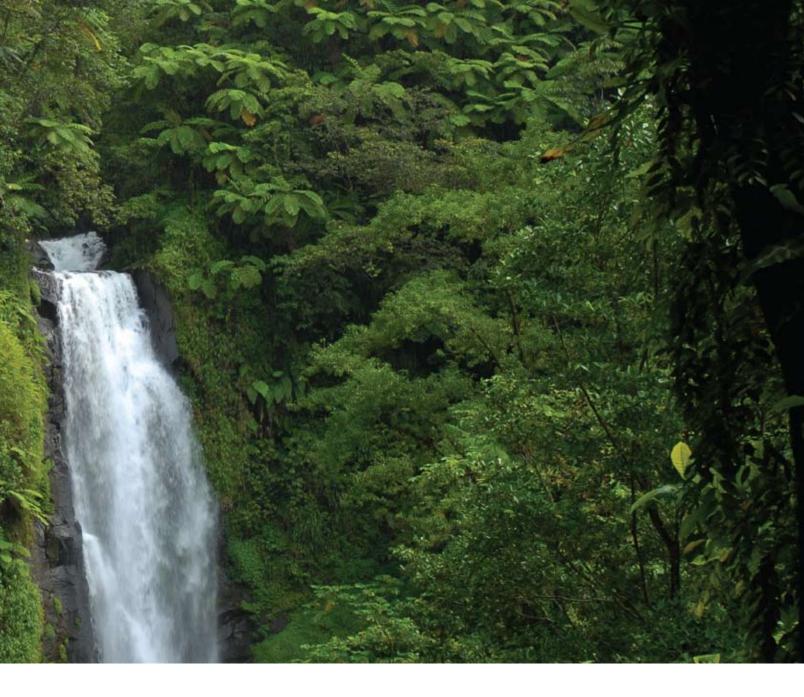


From the Amazon, An Effective New Plant for Weight Loss – Double Blind Study

By Paul Ling Tai DPM, FACFS, ABPS

Of all the alarming statistics to emerge from obesity research, one in particular echoes with ominous urgency: today's children may be the first generation of Americans whose life expectancy will fall short of their parents'.

8 | ANTI-AGING MEDICAL NEWS



The obesity epidemic is believed to reduce average life expectancy by about four to nine months, and if the current trend holds among children and adolescents, expect the figure to drop by two to five years in coming decades.¹ The Centers for Disease Control links an estimated 112,000 deaths a year in the United States to the condition, which now afflicts roughly a third of the population.

Contrary to conventional wisdom, the problem is not restricted to high-income, "land of plenty" countries; obesity rates also are noticeably on the rise in developing countries, exacerbating other medical and economic woes. The World Health Organization projects that by 2015, about 2.3 billion adults will be overweight and more than 700 million will be obese. If some concerned health monitors seem to be carrying the weight of the world on their shoulders, it is because, in many respects, they are.

Researchers have not been able to pinpoint a single, sweeping cause of the epidemic, but the blame usually rests in part on sedentary, cubicle-to-couch lifestyles; Americans' vaunted predilection for "supersized" portions; foods that are deceptively marketed as "low fat"; and diets low in proper nutrients and fiber but larded with trans fats and heavily spiked with sugar.

In fact, Americans annually consume, per capita, an astonishing 156 pounds

of added sugar, according to the U.S. Department of Agriculture, a 20 percent increase from 1987 to 1997. Sugar itself is not inherently unhealthful, of course; it is burned as energy by our muscles, but, unhindered by exercise, it lodges in fat cells. The overload of calories from our insatiable, collective "sweet tooth" undoubtedly ratchets up obesity rates and their accompanying complications -- diabetes, hypertension, and some cancers, along with other ailments.

THE 'TREE THAT MAKES PEOPLE WELL'

Driven by this awareness, we found ourselves in a remote plateau in the rainforest of Ecuador, near the headwaters of the Amazon River, where ancient folk medicine offers a possible solution. After all, more than 100 prescription drugs are derived from plants, and, while tropical rainforests take up only six percent of the Earth's landscape, they account for half of the planet's biodiversity.² Scientists in labcoats are increasingly, and wisely, taking cues from ethnobotany, by way of the village shaman.

"This is the tree that makes people well," said our guide, a "cacique," or leader among the dozen or so indigenous tribes in this fecund landscape. He was indicating the "pata de vaca," a legume that grows about 20 feet high, with leaves that resemble bifurcated elephant ears. To the uninitiated, its unassuming appearance does not stand out in this lush, parrot-haunted tropical jungle, but the tree, formally known to scientists as *Bauhinia forficata*, has been extolled for centuries as a cure-all among people who must rely on botanicals instead of First World pharmacies.

NATIVES OF THE AMAZON

From its leaves, indigenous tribes make teas and broths, which they drink as a tonic to soothe an upset stomach, or, in the case of graying elders, simply to feel younger. It is regarded as a diuretic with antibacterial, antifungal, and anticandida properties, and its bark is prepared and consumed as an anti-diarrheal agent. The locals use extracts for snakebites and even bathe their babies in it. Significantly, they also employ Bauhinia forficata to fight diabetes; a teabag's worth consumed after a meal purportedly helps to regulate blood sugar levels. Since 1929, several Brazilian studies have affirmed the leaf's reputation as a sort of "vegetable insulin."3

At the moment, about a quarter of Western pharmaceuticals are derived from rainforest ingredients, but fewer than one percent of tropical trees and plants have been tested by scientists.² Could bauhinia, long revered as a rich source of salutary phytochemicals, offer other life-changing gifts? Given its apparent effects on blood sugar, would it also function as a powerful tool in weight loss?

MECHANISM OF LEPTIN

Laboratory tests revealed that bauhinia contains compounds that appear to enhance satiety, the feeling of fullness after a meal.

Too often we overeat because the hypothalamus, or appetite center of the brain, is slow to receive those "stop right there!" signals from hormones such as leptin, which, as a sort of biochemical traffic cop, helps regulate metabolism and energy intake.⁴

Leptin originates in fat cells and circulates at levels proportionate to body fat. Because its receptors respond to sweetness, it affects sugar cravings in a way that, when rewarded, fosters a "learned addiction."5 Excess eating, in turn, raises the blood's level of triglycerides, which can impede leptin from reaching the brain.⁶ So the body is tricked into thinking that it is starving. The overeating that typically ensues then clogs the fat cells even more, signaling the liver to create extra cholesterol.7 The result is that with overeating, the hormone's receptors become less sensitive -- a syndrome known as "leptin resistance."⁶ The hypothalamus, functioning much like a thermostat, gets continually dialed up in a way that further increases appetite. In this way, overeating begets more overeating.

Leptin miscues are one reason we can gorge on a heavy meal, capped off with dessert, and not feel uncomfortably full until the regretful ride home. half an hour later. Like a crackeriack cleaning crew, bauhinia essentially scrubs and tidies up the leptin receptors, enabling them to work with brisk efficiency at fostering a sense of satisfaction to foil phony hunger pangs. The hormonal signals reach the brain with greater alacrity, so metabolism, regulated by the hypothalamus, returns to healthy function. The result is that, suddenly, that second slice of pizza does not beckon so irresistibly.

DOUBLE-BLIND STUDY

Further research confirms this response. Earlier this year, we conducted a placebo-controlled, double-blind study which started as a four-week program⁸ involving 31 patients (18 male, 13 female) and was extended into an eight-week study of eight subjects (three male, five female) from the treatment group.⁹ In the initial pilot program, subjects were randomly divided into two groups and instructed to take five milliliters of the test material -- either bauhinia leaf extract or a placebo solution -- half an hour before each meal. In addition to noting their weight, we measured the circumference of chest, waist, and hips, as well as body mass index and waist-to-hip ratio.

Significantly, the subjects were ordered not to alter their usual diet and exercise regimens in any way.

MEASURABLE RESULTS IN WEIGHT LOSS RESPONSE

At the end of the first four weeks, we compared the subjects and found a statistically significant difference of .008 percent in the change in body mass index between the two groups. On average, the treatment group's weight dropped by 4.661 pounds; waistlines shrank by a little more than an inch and a half; and hips by 1.324 inches. In contrast, the placebo group's measurements essentially stayed the same, except for an average weight gain of half a pound and an increase of .265 inch increase in hip circumference.

Measurable progress continued with the use of this bauhinia extract, which we have named "Skinny Factor*." After eight weeks, the average weight of the participants had dropped from 216 to 204.6 pounds. The average waist circumference was trimmed from 41.625 to 38.125 inches, and hip measurements fell from the mean of 45.625 to 43.8125 inches. The waist-to-hip ratio was reduced by .38 of an inch.

CASE STUDIES

CASE 1

Case 1 is a 59-year-old man from Thomaston, Georgia. Before he volunteered for the study, his eating habits virtually embodied the American obesity predicament, which is notably worse in the South. Consuming double portions of fast food and heaping plates of the local cuisine from all-you-can-eat buffets and church dinners had pushed his weight to 330 pounds. In the course of the initial, month long trial, he lost 14 pounds, and, with the help of Skinny Factor, he has continued to slim down, weighing in at 282 at the time of the writing of this article. He lost four inches from his 58-inch waistline during the study, and since has dropped an additional six inches. During the eight week trial, he lost four inches in hip circumference.

All of the study subjects who used Skinny Factor during the study and afterward have reported continued, measurable improvement with no unpleasant side effects. The loss of inches, in particular, indicates a marked decrease in the size of fat cells.

CASE 2

Case 2 is a 52-year-old woman, who lost 10 pounds in eight weeks. She describes herself as someone who needs the "immediate gratification of seeing results quickly" to stay motivated on a diet.

"With menopause, I noticed that all of a sudden, I could easily gain five pounds in a weekend if I went on vacation or visited a friend and just ate whatever I wanted," she says. "I was bad to get sugar and salt cravings, especially at night, so my waistline had started to get thick."

Skinny Factor vanquished those midnight snacks, she says, along with two dress sizes, and counting.

"My closet is the kind most women acquire over the course of their lives -- it has sizes in it ranging from four to 12," she says. "Now that I have my shape back with a defined waist, I am officially back in my old 'skinny jeans."

Like many women, too, she is a veteran dieter who has tried other supplements, only to experience "everything from feeling speedy to skin breakouts to diarrhea." All of the subjects in these studies of bauhinia were questioned thoroughly about side effects; none was reported.

"I had more energy, but I also could sleep at night -- it didn't keep me up or make me feel strange and druggy like a lot of diet aids," she says. CASE 3

On the other hand, Case 3, a 59-yearold woman who lost 13 pounds, reported that she was taking fewer naps, which was a "good sign." "I would eat something high in sugar and then crash from it," she says. "I noticed that I didn't have to have my afternoon nap when I took bauhinia."

Other subjects also reported increased energy levels and an enhanced feeling of well-being.

Case 3's waistline was whittled from 43 to 37.5 inches, and she lost an inch in her hip circumference. Her waist-to-hip ratio went from .915 to .815.

INCREASED ENERGY WITHOUT NEGA-TIVE SIDE EFFECT

Although lab measurements were not included in this study, two subjects reported improvement in measurements made outside the study. One reported improvement in lipid levels and one, a subject with rheumatoid arthritis, reported a decrease in her sedimentation rate to the lowest level she had recorded since her initial diagnosis. Also, four of these patients underwent SMA20 chemistry profiles by their primary physicians during the course of this project. All were reported to be within normal limits, which underscores the safety and lack of toxicity in the use of this extract.

Two of these patients (one male and one female) reported darkening of their hair from gray toward their natural color.⁹

HOPEFUL FUTURE FOR BAUHINIA

We recently have packaged Skinny Factor in a convenient, easy-to-use mouth spray. In addition to its satiety effect, its chocolate mint flavor also serves as a pleasant substitute for sweet snacks, users report.

In light of the short duration of treatment and the lack of dietary and exercise interventions in our studies, the changes we recorded are not only statistically significant, but also are clinically compelling, suggesting a variety of benefits on lipid and glucose regulation and blood chemistry with the use of bauhinia. More studies are under way, targeting patients with diabetes, rheumatoid arthritis, and dyslipidemia, and future research with bariatric patients is planned to see if the positive results and lack of side effects seen in these preliminary, short-term studies are maintained in larger, longer, more controlled projects that include dietary and exercise interventions.

This extract from "the tree that makes people well" is not yet commercially available in the United States, but we expect it will be in the near future. ◆

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*Patent-pending. U.S. PP filing 8/18/2008, Inventor Dr. Paul Ling Tai

DR. TAI is a trained Podiatric medical physician. He is a board certified surgeon with expertise in Natural Anti-Aging technologies and has nine patents credit to his name. A professor of Integrative Medicine at NYCPM; member of the International Hormone Society and a speaker at American Academy of Anti-Aging Medicine.

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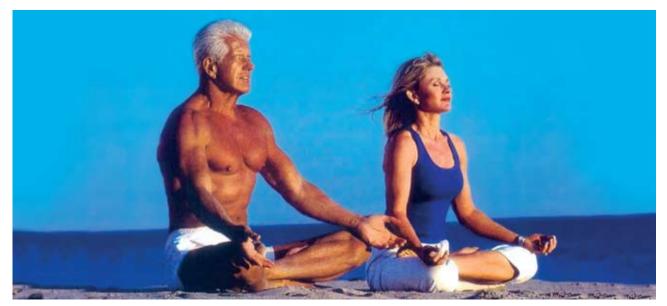
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