



Misdiagnosis: What You Don't Know Can Hurt You

When I first developed pain in my ankle, I assumed it was an old injury. I've always been athletic and able to push through pain, but it kept getting worse. I saw my doctor, who diagnosed muscle and tendon issues and sent me to physical therapy for eight weeks.

This only made my ankle worse, so I was sent to a neurologist, who couldn't figure out my crazy nerve issues and referred me to an orthopedist and a rheumatoid arthritis specialist. The orthopedist wanted to operate on my ankle, which wouldn't have helped, and the rheumatologist diagnosed drug-induced lupus, which was incorrect.

By this time, I was also experiencing migrating pains, heart palpitations, extreme skin sensitivity, cognitive problems, and fainting episodes due to low blood pressure. I felt like I had fibromyalgia, the flu, and the worst hangover ever!

This is when I went to Whitaker Wellness and saw Dr. Mark Filidei, who suspected Lyme disease and ordered specialized blood tests. They came back positive, and he started me on antimicrobial drugs, IV therapy, and other nutrients.

I am progressively getting better. My symptoms are less violent, the palpitations are gone, and I don't feel dizzy as often. The nerve pain comes and goes but is manageable. I now feel good enough to walk twice a day, and I'm trying to ride my bike once a week. I am able to think more clearly, and although multitasking is still hard, day-to-day activities are getting easier to manage.

It took way too long to get an accurate diagnosis and treatment. In all that time, the only other doctor who thought I might have Lyme disease was a friend who is a gynecologist and knew someone in medical school with Lyme. She knew me and listened carefully to all my multisystem symptoms. Looking back, Lyme disease was the only diagnosis that made sense." — Debra R., CA

Diagnostic Errors Are Common

Debra was a victim of misdiagnosis—and endured years of needless suffering as a result. She is not alone.

A report released by the Institute of Medicine (IOM) last year concluded, "It is likely that most people will experience at least one diagnostic error in their lifetime, sometimes with devastating consequences." A minimum of 12 million adults, or about 5 percent of outpa-

tients, receive a wrong or delayed diagnosis every year, and misdiagnosis is implicated in 17 percent of hospital adverse events and one in 10 patient deaths.

IOM researchers cited a number of contributors to misdiagnosis: poor judgment or diagnostic skills; a lack of collaboration and communication among doctors, patients, and their families; and weaknesses inherent in the system, including a culture of medicine that "discourages transparency and disclosure of diagnostic errors."

I would add another cause to this list: physician bias. And Debra's experience is a prime example.

continued on page 3



Inside This Issue

- Misdiagnosis 1
- Dear Reader..... 2
- Lovaza, Glucosamine..... 4
- Tea Tree Oil 4
- Works for Me 5
- Reduce Calories in Rice..... 5
- Asthma 6
- Success Story..... 7
- Wellness Medicine 8

Health & Healing

YOUR DEFINITIVE GUIDE TO WELLNESS MEDICINE

Julian Whitaker, MD, has practiced medicine for over 35 years, after receiving degrees from Dartmouth College and Emory University. Dr. Whitaker has long been an advocate of living a healthy life. Dr. Whitaker is compensated on the sales of the supplements he formulates with Healthy Directions, LLC. He is not compensated for other companies' products that he recommends in this newsletter. He is the author of 14 health books including: *The Mini-Fast Diet*, *The Whitaker Wellness Weight Loss Program*, *Reversing Hypertension*, *Shed 10 Years in 10 Weeks*, *The Pain Relief Breakthrough*, *Reversing Heart Disease*, *Reversing Diabetes*, and *Dr. Whitaker's Guide to Natural Healing*.

Dr. Julian Whitaker's Health & Healing® (ISSN 1057-9273) is published monthly by Healthy Directions, LLC, 6710-A Rockledge Dr., Ste 500, Bethesda, MD 20817, telephone 800-539-8219. Please write to us at *Dr. Julian Whitaker's Health & Healing*, PO Box 11, Montoursville, PA 17754, or call if you have a question concerning your subscription. Periodicals postage paid at Bethesda, MD and additional mailing offices. Postmaster: Send address changes to *Dr. Julian Whitaker's Health & Healing*, PO Box 11, Montoursville, PA 17754.

Author: Julian Whitaker, MD
Research Editor: Peggy Dace
Managing Editor: Larissa Long
Associate Research Editor: Ryann Smith Groseclose

© Copyright 2016, Healthy Directions, LLC. Photocopying, reproduction, or quotation strictly prohibited without written permission of the publisher. Subscription: \$69.99 per year. *Dr. Julian Whitaker's Health & Healing* is dedicated to providing timely, accurate information by drawing on Dr. Whitaker's expert opinion and experience. *Dr. Julian Whitaker's Health & Healing* cannot offer medical services; we encourage our readers to seek advice from competent medical professionals for their personal health needs. Dr. Whitaker will respond in the newsletter to questions of general interest.

Remember, you can read current and past issues of *Health & Healing* when you create or access your account at drwhitaker.com.

Dear Reader,

I played football all through high school and two years of college. I loved it: the camaraderie, the status, the cheerleaders, the outlet for all that teenage energy and testosterone.

However, if I knew then what I know now, I would have sat on the sidelines. Football is dangerous, and I'm not just talking about bumps, bruises, fractures, and strains. This sport is bad for the brain.

Hard football hits exert G-forces similar to those of a car collision, and many of those hits directly impact the head. Most of us have observed or experienced the immediate aftermath of a concussion—dizziness, disorientation, blurry vision, headache, or blacking out. And the downstream effects have finally come out of the closet. After years of denial, the NFL acknowledged earlier this year that playing pro football is linked with chronic traumatic encephalopathy, a degenerative brain disease that causes memory loss, depression, aggression, and impaired judgment.

Even more disturbing are the potential effects on young, developing brains. A 2013 study found that high school football players are twice as likely to suffer concussions as college players. In addition, researchers at Purdue University discovered changes in brain function in more than half of the boys tested—including those who had never been diagnosed with a concussion. Even worse, retesting the following season revealed that some of the damage to the neurons, glial cells, and blood vessels persisted.

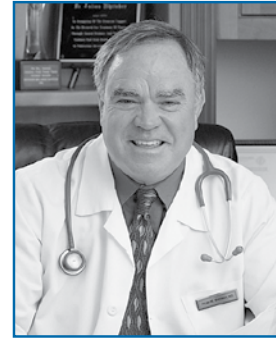
Whether or not playing football in high school will lead to long-term problems is unknown, but my guess is that it will. Observing return-to-play concussion protocols and improving helmet safety may help, but football is a contact sport and getting hit is part of the game.

I'm not so naïve as to believe that this is going to change the behavior of American youth—it probably wouldn't have made a difference to me when I was a know-it-all 14-year-old. But I do recommend that you have a serious discussion with your children and grandchildren. Most football "careers" end in adolescence. Brain injuries last a lifetime.

To your health,



P.S. The best treatment for brain injuries, whether they're due to concussion, repetitive head trauma, catastrophic injury, stroke, or other causes, is hyperbaric oxygen therapy. To learn more, visit whitakerwellness.com or call 800-488-1500. However, prevention is the best medicine.



Julian Whitaker, MD
 America's Wellness Doctor

Director of the Whitaker Wellness Institute, Newport Beach, California

Physician Bias

Chronic Lyme disease has been referred to as the “great imitator” because its symptoms mimic those of other conditions. In addition, standard lab tests are notoriously inaccurate, so this condition is often misdiagnosed. That should be changing, as awareness of the extent of Lyme disease (300,000 new cases every year) and its shifty nature is increasing, and more sensitive blood tests and better treatment protocols are now available. Nevertheless, most doctors overlook it—and some refuse to acknowledge that chronic Lyme infection even exists.

Lyme disease is just one condition that is misdiagnosed due to physician bias. Fibromyalgia and chronic fatigue were long considered to be “all in your head.” Heavy metal toxicity, nutritional deficiencies, hormone imbalances, and food sensitivities are rarely considered as potential causes of physical and mental problems. Statin drug-induced muscle pain, fatigue, and memory problems as well as common side effects of additional medications are routinely chalked up to other causes. Diagnosis and treatment of sleep apnea is simple and obvious, but it too often goes undetected.

Many patients come to Whitaker Wellness after their other doctors have more or less given up on them. We have good success with these patients because we take the time and effort to look beyond the usual diagnoses. When the true cause of any health problem is identified and treated with safe, natural therapies, improvement is predictable.

Another Problem: Overdiagnosis

The IOM report also mentions overdiagnosis—“when a condition is diagnosed that would otherwise not go on to cause symptoms or death.” The researchers agree it is a challenge to quality health care but don’t call it a diagnostic error. I disagree. Overdiagnosis is a blunder of the worst kind.

Last month, we discussed my concerns about screening tests such as mammography and PSA. But the truth is, every time you consult a doctor, you’re at risk of overdiagnosis. Lower diagnostic thresholds have labeled millions of people with high cholesterol,

hypertension, prediabetes, and osteopenia. Increased use and higher sensitivity of diagnostic tests pick up more and more inconsequential findings. Doctors’ time constraints and legal concerns about missing something—not to mention patients’ desire for a quick fix—also spur overdiagnosis.

Overdiagnosis opens the door for additional testing, unnecessary invasive procedures and drug regimens, and stress and anxiety, which can only lead to poorer health. Of course these interventions are sometimes necessary, but evidence points to an epidemic of overdiagnosis.

There’s just no other explanation for the recommendation that half of adults, most with no history of heart disease, should be taking statins...that one in 10 Americans, 69 percent who have never had major depression, are on antidepressants...that 70 percent of the millions of prescriptions for proton pump inhibitors are inappropriate...or that hundreds of thousands of patients undergo unnecessary angioplasties, knee arthroscopies, and low back surgeries every year.



After countless misdiagnoses, Debra is now much healthier and has a new lease on life

How to Protect Yourself

The IOM recommends urgent changes such as better diagnostic training for physicians, improved collaboration among health care providers and facilities, accurate and timely communication with patients, and more transparency in reporting diagnostic errors.

Patient involvement is also stressed. Insist on access to your own medical records, review them for accuracy, and keep them for future reference. If you don’t get test results back in a timely manner, track them down and make sure you understand their significance. When you see a doctor, be upfront with your concerns. Give a concise but detailed description of your symptoms, how long they’ve lasted, what led up to them, and how treatments you’ve tried worked. Ask questions if you don’t understand something and consider taking someone with you to help. Make notes before and after appointments and add them to your personal file.

You are your own best advocate. Own your health!

Reference

National Academies of Sciences, Engineering, and Medicine. 2015. *Improving diagnosis in health care*. Washington, DC: The National Academies Press.

Dear Dr. Whitaker

Q *I do intensive exercise for an hour five days a week, and although I initially lost some weight and am more toned, I still have excess fat in my hips and belly. What do you suggest? — B.H., CA*

A Make sure you're changing up your exercise routine. If you do the same thing over and over—even vigorously—your body adapts to that form of exercise and doesn't burn as many calories. Resistance training is very important for building muscle and burning fat so if you haven't already, incorporate at least two days of weight lifting into your weekly routine. Finally, be mindful of your diet. It's hard to lose weight with exercise alone, and over-eating will sabotage even the best exercise program.

Q *My doctor has prescribed Lovaza (prescription omega-3s) because I have high triglycerides. I have been taking fish oil, but she says this is safer and more effective than supplements. Is this true? — S.B., CA*

A She's right about fish oil lowering triglycerides. We've been using large doses of omega-3s (up to 4,000 mg of EPA/DHA per day) along with a low-carb diet at the clinic for years to reduce triglycerides. One of our patients came in with a level of 5,300 mg/dL. After two months on this protocol, it fell to 228!

However, there's nothing special about prescription products, which also include Vascepa and Epanova, except for their concentration. Each Lovaza capsule contains 465 mg EPA and 375 mg

of DHA, with a suggested dose of four caps per day. When prescription fish oil first came on the market in 2004, few supplements provided that degree of concentration. Today, many high EPA/DHA supplements are available, and they are equally safe and effective and less expensive. Lovaza costs around \$2 per capsule—\$8 per day! (It may be less at discount stores and through insurance.) Look for supplements in stores, at drwhitaker.com, or order by calling 800-810-6655. To reduce burping and other side effects, take with meals.

Q *I read that glucosamine sulfate will cause dry eyes. I did not know that was a side effect. Now I am concerned this may be causing my problem. — Arline H., NY*

A I can find no solid research or rationale to suggest that glucosamine would have such an effect. Dry eyes are common in people over age 50—the same age group most likely to have arthritis and take glucosamine supplements—so I suspect this is the link. Rather than avoiding glucosamine, try lubricating eye drops (artificial tears) and targeted supplements. DHA and EPA enhance natural tear production and have been shown in clinical trials to relieve dry eyes. Antioxidants, especially lutein, astaxanthin, and other carotenoids, have broad benefits for the eyes as well. You might also try acupuncture. Patients with dry eyes who were treated three times a week for four weeks reported marked improvements in symptoms.

 Read more Q&As online at drwhitaker.com/featured-questions-and-answers. Send your own questions to drwhitakerquestions@drwhitaker.com.

From My Blog

Widespread Uses for Tea Tree Oil

Tea tree oil (*Melaleuca alternifolia*) has been used by aboriginal tribes in Australia for centuries. This safe, nontoxic antiseptic improves acne, helps with athlete's foot and toenail fungus, puts a stop to body odor, reduces swelling and redness from poison ivy, oak, and sumac, and is even used to treat warts. All these health boons stem from tea tree oil's powerful antimicrobial and antibacterial properties. It's an excellent, time-tested remedy and should be a go-to in everyone's medicine cabinet. A 5–10 percent solution is generally used on the skin and 100 percent on the nails, applied twice a day. However, I recommend doing a skin test and waiting 24 hours before applying liberally to affected areas. Tea tree oil is widely available in health food stores and online. For more information on these and other uses for tea tree oil, visit my blog.

 Get the rest of the story—and share your opinion—by visiting my blog at “Connect with Dr. Whitaker” on drwhitaker.com.



Works for Me...

▶ **Infections** *In the early 90s, I was caught in a round robin of infections and prescriptions. I rarely felt good. Your flyers were coming in the mail and I was throwing them out. One day I decided to find out if your newsletter could help. For the first couple of years I devoured the monthly information, reading them over and over. As I learned more and more, I added vitamins and supplements to address my symptoms. In August I'll be 76, I'm still taking your supplements, and I feel great! Thanks for continuing to send those flyers and most of all, thanks for the education. — N.C., KY, longtime Health & Healing subscriber*

▶ **Low-Carb Diet** *I've been trying to cut back on carbs but I love pasta. I recently found Explore Asian's Organic Edamame & Mung Bean Fettuccine. The only ingredients are organic edamame and mung beans! Each 2-ounce serving has 190 calories, 10 grams of fiber (only 9 net carbs!), and an impressive 24 grams of protein. The texture is similar to regular noodles and after I toss it with my favorite pasta sauce and ground turkey,*

I don't even miss the "real" thing. I bought it from Amazon, but this product is also available in health food stores. — R.S., Ridgecrest, CA

▶ **Stomach Problems** *I don't know what I'd do without my bromelain. I had a GERD attack and that very month you wrote about enzymes for stomach problems. Perfect timing to help me through that. — Don H., via email*

Bromelain, an enzyme from pineapples, aids in the digestion of protein. Digestive enzymes, which include lipase, amylase, and protease, help relieve a number of digestive woes. Look for them online or call 800-810-6655 to order. Use as directed.

▶ **Sleep Apnea** *I had such awful symptoms not understood by Loma Linda that I wrote a will and trust. Then I came to Whitaker Wellness to discover sleep apnea was the major and fixable problem. The clinic is also taking care of a spine injury and other health issues, which will make for a much more agile and healthy grandmother. — M. Bunt, via letter*

This overlooked condition is linked with a boatload of health problems. If you snore or have sleep issues, get tested for sleep apnea.

📧 **Have a Health Tip to share? Send it to worksforme@drwhitaker.com. Read more tips at drwhitaker.com/works-for-me.**

Healing Tip

Want to halve the caloric content of rice? Just combine a teaspoon of coconut oil or other oil per half cup of rice with the appropriate amount of water and bring to a boil. Add the rice, cook as usual, and refrigerate for at least 12 hours. This method converts a good portion of the carbs into resistant starch that the body can't absorb.

📧 **Like my Facebook page at facebook.com/WhitakerMD to receive daily healing tips and join the conversation.**

Monthly Health Quiz

Boning Up on Health: True or False?

- A) Cola soft drinks increase risk of developing osteoporosis.
- B) Osteoporosis is the cause of 1 million fractures per year.
- C) Nearly 10 percent of osteoporosis-related hip fractures result in death within a year.
- D) A little more than half of the 206 bones in your body are in your hands and feet.

Answer:

B and C are false. Osteoporosis causes 2 million fractures each year in the US alone. And up to 24 percent of the 300,000 people who break a hip die in the year after their injury.



Now Available at drwhitaker.com

- Improve Your Health With Amino Acids
- How to Treat Allergies Without Big Pharma
- What Is Microcurrent Therapy?

Visit today for these articles and more in-depth wellness advice to help you achieve optimal health.

Notable Quote

“One of the first duties of the physician is to educate the masses not to take medicine.”

— Sir William Osler, physician and cofounder of Johns Hopkins Hospital

No computer? Mail your question or health tip to *Health & Healing*, 6710-A Rockledge Dr., Ste. 500, Bethesda, MD 20817.

Asthma: What Works/What Doesn't

The statistics are grim. One in 12 Americans—25 million children and adults—have asthma. Incidence has dramatically increased in the past 15 years, as reflected in rising use of asthma medications. Advair is the second most prescribed drug in the US, and worldwide sales of asthma drugs exceed \$16 billion and are expected to increase to \$23 billion by 2023.

Medications can be lifesaving, and a number of natural therapies help with long-term control. But before we get into treatments, let's discuss a growing concern: "All that wheezes is not asthma."

"All That Wheezes Is Not Asthma"

Misdiagnosis of asthma is not a new problem. This quote, by Chevalier Jackson, MD, dates back to 1865! However, today's "epidemic" makes it particularly relevant.

In a 2016 study, Dutch researchers reviewed the medical records of 656 children diagnosed with asthma and determined that 53 percent had no clinical signs of the condition. Australian researchers found that after thorough testing of kids with chronic cough, half of whom were initially diagnosed with asthma, only 5 percent actually had it. Diagnostic guidelines in the United Kingdom are being revamped based on studies showing that up to a third of adults with asthma have been mislabeled, and Canadian experts believe a similar percentage of children and adults there have been misdiagnosed.

Diagnosis is often made in patients who have respiratory infections, which can cause wheezing, coughing, and labored breathing similar to asthma. Acid reflux irritates the esophagus and throat and may present with asthma-like symptoms. Obstruction of the throat and windpipe, vocal cord dysfunction, COPD and emphysema, heart failure, and side effects of some drugs may also be mistaken for asthma.

If your asthma isn't getting better on your current regimen, rather than automatically increasing your medication dose, ask your doctor to rule out other

conditions. Or if your symptoms are so mild that you rarely require treatment, get a definitive diagnosis.

Drugs Help—and Harm

Of course, asthma can also be a life-threatening condition that requires serious medical management. Everyone with asthma should have a "rescue" inhaler on hand at all times for quick relief of symptoms. Short-acting beta₂-agonists (albuterol, Proventil, Ventolin, ProAir) work within minutes to relax the muscles in the bronchioles, which constrict during an attack, restrict airflow, and cause wheezing, coughing, and shortness of breath.

For long-term control, the most effective medications are inhaled corticosteroids (Pulmicort, Aerobid, Flovent). Inflammation of the airways increases sensitivity to irritants that trigger attacks, as well as swelling and mucus buildup that make breathing more difficult. Regular use of corticosteroids reduces inflammation and helps prevent future flare-ups. These inhalers are much safer than oral steroids, which may be prescribed for severe cases. However, extended or heavy use suppresses adrenal function and growth in children and increases risk of respiratory infections.

Long-acting beta₂-agonists (Serevent, Foradil) are also used for long-term control, often in combination with corticosteroids (combo drugs like Advair, Symbicort). I do not recommend them. These drugs require a black box label warning that they increase the risk of asthma-related death. They are indicated only for serious disease that can't be controlled by corticosteroids alone, and many experts recommend that children avoid them altogether. Nevertheless, massive overuse, spurred by aggressive, shady marketing, has made Advair the world's best-selling asthma medication.

Other prescription asthma drugs include leukotriene receptor antagonists, theophylline, and biologics; all have safety concerns and should be used only if first-line meds don't work.

My Recommendations

- ▶ Everyone with serious asthma should work closely with their doctors and take medications as prescribed. If current drugs are not working—or if a rescue inhaler is rarely required—discuss further testing for a definitive diagnosis.
- ▶ Identify and avoid airborne allergens, food sensitivities, and other triggers. Suggested supplements include a daily multivitamin, vitamin D 2,000–5,000 IU, fish oil 1,000 mg EPA/DHA, and magnesium 500 mg.
- ▶ For more information on allergy treatment and LDN, refer to the May 2016 and June 2012 issues, available to subscribers at drwhitaker.com.

Alternative Approaches

Everyone with asthma knows about smoking and airborne allergens, but did you know that food sensitivities can trigger attacks? Or that imbalances in gut bacteria are a risk factor that can be addressed by a healthy diet and probiotic supplements? Another drug-free approach is weight loss. Obesity is linked with asthma risk and severity, and losing weight often leads to improvements. And although exercise is a common asthma trigger, with proper precautions it actually enhances lung function and quality of life.

Vitamin C and other antioxidants, vitamin D, and natural anti-inflammatories such as fish oil have proven benefits for asthma control, but the most important nutrient is magnesium. Magnesium relaxes the muscles of the bronchioles and opens the airways. Studies reveal that high-dose magnesium given intravenously in emergency rooms restores breathing and reduces the need for hospitalization, and a 2016 clinical trial found that nebulized (inhaled) magnesium worked as well as albuterol for acute attacks.

Magnesium supplements are helpful as well. For years, K.M. endured multiple asthma attacks daily, despite using two inhalers and high doses of oral steroids. Then she started taking magnesium for her arthritis. To her surprise and delight, her wheezing,

chest tightness, and shortness of breath gradually disappeared. “I am now completely free of any asthma symptoms. I feel like God has given me a reprieve.”

I’ll close with a little-known prescription drug that is also worth considering. Low-dose naltrexone (LDN) is a safe, inexpensive medication with a multitude of uses because it modulates immune function and reduces inflammation. We treated a nine-year-old boy whose asthma was so severe that he required oral steroids and frequent emergency room visits. Within three months of starting LDN, he was off oral drugs, he rarely uses a rescue inhaler, and his last trip to the ER was more than three years ago.

Asthma is a serious condition, but it’s also often overdiagnosed, relegating millions to unnecessary drug use and a lifetime of worry. That’s why it’s so important to get a definitive diagnosis and appropriate treatment—so everyone can enjoy what most of us take for granted: a breath of fresh air.

References

- Bush A, Fleming L. Is asthma overdiagnosed? *Arch Dis Child*. 2016 Apr 5. doi: 10.1136/archdischild-2015-309053. [Epub ahead of print]
- Looijmans-van den Akker I, et al. Overdiagnosis of asthma in children in primary care: a retrospective analysis. *Br J Gen Pract*. 2016 Mar;66(644):e152-7.
- Sarhan HA, et al. The efficacy of nebulized magnesium sulfate alone and in combination with salbutamol in acute asthma. *Drug Des Devel Ther*. 2016 Jun 9;10:1927-33.

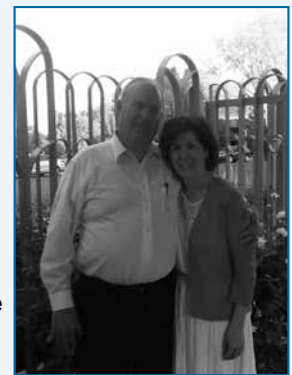
Whitaker Wellness Success Story

“I Was a Prime Candidate for a Heart Attack”

“My father had his first triple bypass surgery when he was 54 and his second when he was 66. My mother also had heart disease, and both of my grandfathers died of heart attacks at ages 62 and 63, so I was a prime candidate.

“By the time I turned 50 I was experiencing severe angina, which continued to worsen until at the age of 56. I could not walk very far without stopping to allow the pain to let up. My father had been reading Dr. Whitaker’s newsletter and suggested that I go to the clinic in California. My wife Elise and I came for a two-week Back to Health Program in 2010, and I was treated with EECP for my heart disease. After receiving EECP treatments for the two weeks I still had severe angina, so we decided to stay for another week of treatment. At the end of the third week it had improved but I still had some pain, so we decided to receive EECP for one more week.

“At the end of the fourth week it was completely gone. It has now been six years, and I still have no angina. Before I was treated with EECP, I could only swim one lap before having to stop, but now I can swim and exercise without chest pain. I have also lost about 50 pounds since my first visit to Whitaker Wellness. I am back at the clinic again to treat my diabetes and have another series of EECP while I am here.” — Gary W. Hostetter, La Jara, CO



Gary Hostetter with wife Elise

To make an appointment at the Whitaker Wellness Institute, call 800-488-1500 or visit whitakerwellness.com.

Innovations in Wellness Medicine

Diet Changes for IBS

If you are suffering with abdominal pain, cramping, diarrhea, bloating, gas, or other symptoms of irritable bowel syndrome (IBS), a low-FODMAP diet could help. FODMAPs (fermentable oligo-di-mono-saccharides and polyols) are carbohydrates such as fructose, lactose, and galactans that are not well digested or absorbed by some individuals. As they pass through the intestinal tract, they are fermented by gut bacteria and pull in water, producing gas, diarrhea, and other symptoms of IBS.

In a recent six-week study, 90 people with IBS were divided into two groups and followed either a sensible diet (no big meals or irritants such as caffeine and alcohol) or a low-FODMAP diet (avoidance of dairy, legumes, wheat, onions, honey, sugar alcohols, many fruits, and some vegetables). The low-FODMAP group had a 50 percent reduction in abdominal pain and a 61 percent improvement in quality of life, compared to the control group's 20 and 27 percent, respectively. For complete lists of appropriate foods, search FODMAP online, consult a nutritionist, or consider coming to see us at Whitaker Wellness.

Supplements for Improved Adolescent Behavior

Anyone who has raised teenagers will tell you it can be a tumultuous time. Connie and I have eight kids between us, so we have firsthand experience. I have good news for parents: Nutritional supplements just might help calm things down. Several studies have shown that correcting nutritional deficiencies with supplements improves ADHD, aggression, and antisocial behavior, but Oxford researchers recently found that supplements also positively influence conduct in "typically developing" teenagers.

They gave a group of 13- to 16-year-olds a daily multivitamin/mineral and a fish oil supplement, while another group took placebo pills. When the teens were reassessed after 12 weeks, those who were taking the supplements had marked improvements as measured by disciplinary records, teacher ratings, and "disruptive behavior scales." Behavior of the most obnoxious kids decreased by 50 percent in the supplement group. Before-and-after tests of the participants who agreed to blood tests revealed initially low levels of key vitamins, minerals, and fatty acids, which improved significantly with supplementation. This should come as no surprise, considering the typical teenager's diet. Solution? Fill in nutritional gaps, expect better behavior.

Did You Know?

- Chewing half a teaspoon of fennel seeds after overeating is a traditional remedy for indigestion.
- Exercise reduces risk of 13 different types of cancer.
- The appendix has a purpose after all; it stores healthy gut bacteria that help recovery from infections.
- Two-thirds of American adults take supplements, but nearly half don't tell their doctors.
- Just 15 percent of adults are smokers, compared to 25 percent in 1997.
- More than half of employers believe smartphones interfere with productivity and quality of work.
- Moderate coffee drinkers have a 12 percent lower risk of death than non-drinkers.
- You produce 90–100 gallons of saliva every year.
- One in four women in the US are obese.
- Surveys report that over half of doctors would discourage their children from going into medicine.
- Treating zinc deficiency, which is common in older people, with supplements increases immune function and reduces risk of infection.

Health & Healing Resources

- **Renew Your Subscription** 800-539-8219 (M–F 9 AM–5 PM EST)
- **Buy Supplements** 800-722-8008 or drwhitaker.com
- **Sign Up for My Free E-News** drwhitaker.com
- **Make an Appointment at Whitaker Wellness** 800-488-1500 or whitakerwellness.com

Coming In Future Issues:

- Memory Loss: What Works/What Doesn't
- Does Berberine Cause Weight Loss?
- Supplements for Flu Prevention



Become a fan on Facebook at facebook.com/WhitakerMD



Follow me on Twitter at twitter.com/WhitakerMD



Watch me on YouTube at youtube.com/user/drwhitakerinfo