



Boost Brain Function With Low-Dose Lithium

Can the water you drink every day affect your mood, memory, and risk of dementia, suicide, and antisocial behavior? A growing body of research suggests it can and does. It all depends on the level of lithium in your local groundwater.

You may be thinking, “But lithium is a psychiatric drug.” You’re right. Approved by the FDA in 1970, it is prescribed in average doses of 900–1,800 mg per day to smooth out manic and depressive episodes and prevent suicide in patients with bipolar disorder, major depression, and other mental illnesses.

However, lithium is also a natural element, #3 on the periodic table, and is found in varying concentrations in soil and groundwater throughout the world. This essential trace mineral is present in vegetables and grains, but the most abundant source is tap water—and here’s where your local water supply comes in. Lithium levels vary considerably, ranging from virtually undetectable in some areas to .170 mg per liter in others.

Although the total daily dose you might get in your water is less than one-thousandth of the drug dosage used to treat mental illness, even minute amounts of lithium have remarkable benefits for the brain.

Guards Against Alzheimer’s

In a study published in *JAMA Psychiatry* in November, Danish researchers examined the patient registries of 800,000 people, aged 50–90, and found distinct relationships between diagnoses of dementia and exposure to lithium in drinking water. People

living in areas with the highest lithium levels in their water were significantly less likely to have developed Alzheimer’s disease or vascular dementia, compared to those with the lowest levels.

These results were bolstered by a 2018 study comparing death rates from Alzheimer’s with average lithium levels in 234 counties in Texas. Counties with the highest levels recorded the lowest increases in deaths attributed to Alzheimer’s over time, while counties with low lithium levels had higher increases. Interestingly, the frequency of obesity and type 2 diabetes was also lower in the high-lithium areas.

Low-dose lithium appears to benefit patients who are already dealing with Alzheimer’s disease as well. In a small clinical trial, taking just 300 mcg of supplemental lithium daily for 15 months reduced disease progression and resulted in improvements in cognitive testing. Patients in a control group continued to decline.

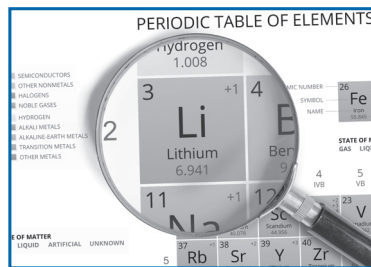
This is big news, folks. All of the recent clinical trials of new drugs for Alzheimer’s have been dismal failures—but an inexpensive natural therapy has the potential of reducing the heartbreak and suffering of this most dreaded disease.

Reduces Risk of Suicide and Violence

Higher levels of lithium in drinking water are also associated with reduced risk of suicide, drug abuse, homicide, and other violent crimes.

Pioneering researcher Gerhard Schrauzer, PhD, obtained hair analyses from 2,600 adults and found

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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*.

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Dear Reader,

How are your New Year's resolutions holding up? If you're still going strong in March, chances are you're on the right track. Why? Because contrary to the popular belief that it takes 21 days to make or break a habit, the reality is that most behavior changes require much longer to really take hold.

To figure out just how long, British researchers asked volunteers to select a healthy behavior they would like to make habitual such as "eating a piece of fruit with lunch," "drinking a bottle of water with lunch," or "running for 15 minutes before dinner." They were told to repeat it daily for 84 days, note whether they actually did it, and rate the "automaticity" of their behavior—whether they did it automatically without thinking.

Although times varied and some behaviors were easier to lock in than others, the average for a new habit to become automatic was 66 days. The researchers found that missing a day here or there wasn't a big problem, but daily repetition and practice dramatically increased the likelihood of success.

Another lesson to be learned from this study is the importance of setting specific goals. Instead of "drinking more water" or "eating more fruit," the behavior was attached to a specific amount and time of day. Rather than vowing to eat healthy or exercise, plan to have a serving of protein and two vegetables for dinner every day or walk or jog for 30 minutes first thing in the morning four days a week—and keep a daily food and exercise journal to monitor your progress. Goals such as these are concrete, measureable, and achievable.

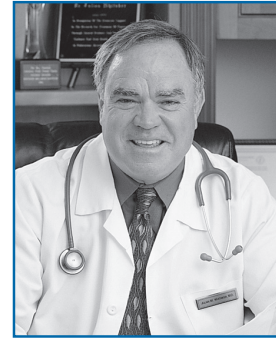
I have found that an exceptionally helpful way to stay on track is to get an accountability partner. Whether it's a family member, friend, or co-worker, find someone who wants to work toward a common goal with you. It's easy to give up on yourself, but when you have to answer to another person, you're more likely to follow through.

Finally, be realistic when setting your goals. You may want to lose 50 pounds or run a marathon, but focus on the behaviors that will lead to these outcomes rather than the outcomes themselves.

To your health,



P.S. Tell me about your health goals for 2018, how you're doing, and tips for success. I'll share your stories in a future newsletter.



Julian Whitaker, MD
 America's Wellness Doctor

Founder of the Whitaker Wellness Institute, Newport Beach, California

that lithium levels were exceptionally low in inmates imprisoned for violent crimes. He also tracked the rates of suicide, murder, and rape in 27 Texas counties and discovered that suicide and violent, antisocial behavior were significantly more common in areas with low levels of lithium in the water. Compared to areas with the lowest concentrations, those with the highest levels had 40 percent fewer suicides!

Similar relationships between lithium exposure and suicide rates have been observed in studies conducted in Japan, Austria, Greece, and Lithuania. Additional research also suggests benefits for drug and alcohol abuse, ADHD, and obsessive-compulsive disorder. In fact, a majority of pertinent studies reveal clear links between higher levels of lithium in drinking water and positive behavioral, legal, and medical outcomes.

A Mood Boost

Low-dose lithium also boosts mood and sense of well-being. When 7-UP was introduced as a patented medicine in 1929, it was called Lithiated Lemon-Lime Soda, and its slogan was, “It takes the ouch out of the grouch.” The active ingredient until 1950 was lithium. In the 1800s, Lithia Springs in Georgia gained a reputation for improving depression and alcohol and opioid addiction. To this day, lithium-rich Lithia Water and Crazy Water from natural springs in Texas enjoy brisk sales.

James Greenblatt, MD, an integrative psychiatrist with years of clinical experience treating patients with low-dose lithium, believes that deficiencies in this trace element underlie a broad range of common psychiatric symptoms. In his recent book *Nutritional Lithium: A Cinderella Story*, he shares a number of patient cases.

Gary, who complained of “never feeling happy” and was often angry and irritable, had profound changes in his mood with 10 mg of lithium daily. Eight-year-old Sam’s ADHD failed to improve on the usual medications, but he had a complete turnaround after starting on low-dose lithium. Patricia, who struggled with sobriety and irritability, had dramatic improvements in overall well-being within six weeks of starting on supplemental lithium.

Protects and Grows New Brain Cells

There is no doubt that low-dose lithium is exceptionally neuroprotective. It stimulates the release of brain-derived neurotrophic factor (BDNF) and other growth factors that enhance the repair and growth of neurons. Scans of patients treated with higher lithium doses actually reveal increases in gray matter!

Lithium also regulates GSK-3, an important enzyme for brain health that has adverse effects when overly activated—including the development of amyloid plaques associated with Alzheimer’s. Many of lithium’s positive effects appear to be related to GSK-3 inhibition in the hippocampus and frontal cortex, areas of the brain involved in memory and behavior.

These broad effects make low-dose lithium a promising adjunct therapy for other neurodegenerative disorders such as Parkinson’s and Huntington’s disease, as well.

A Little Dab’ll Do Ya

The amount of lithium you get in a typical day is 0.6–3.1 mg, but depending on location it could be higher or lower. Daily supplementation with low-dose lithium orotate or lithium citrate simply ensures you’re getting protective amounts of this vital element.

Many doctors are wary of lithium because of its perceived dangers and association with mental illness. High therapeutic dosages do have numerous side effects and require close monitoring. But at the amounts we’re discussing, lithium is safe and nontoxic. In fact, some researchers have suggested adding trace amounts of lithium to municipal water supplies as a public health measure for reducing rates of Alzheimer’s, suicide, substance abuse, and criminal behavior. This isn’t as crazy as it sounds. After all, they add fluoride to protect our teeth. Why not lithium to protect our brains?

My Recommendations

- ▶ Look for lithium orotate or citrate online or in your health food store. Suggested dosages are 1–20 mg per day, with an average of 2–5 mg for younger adults and 5–10 mg over age 40. High-dose lithium is a prescription drug and must be closely monitored by a physician.
- ▶ To learn more, read *Nutritional Lithium: A Cinderella Story* by James Greenblatt, MD, available at Amazon.

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Dear Dr. Whitaker

Q *I bought your book Reversing Diabetes and take berberine, and it has worked. I need to lose more weight and was wondering if you had any thoughts on brown adipose tissue. I've heard that taking cold showers will naturally activate these cells and reverse diabetes.*
— Matthew L., via email

A Unlike most of our fat, the small amount of brown adipose tissue in our bodies burns calories to produce heat. It also affects glucose metabolism and insulin sensitivity, which is why it has generated interest as a treatment for obesity and diabetes. Studies suggest that brown fat is indeed activated and extra calories burned by exposure to cold temperatures. Although it's premature to say this will reverse diabetes, it can't hurt to turn down your thermostat and start your day with a cold shower. Keep me posted on your results.

Q *Are there any natural treatments for head lice? My grandchildren have brought it home from school twice this year, and my daughter is beside herself.*
— J.S., via Facebook

A I'm sure your daughter is familiar with the over-the-counter head lice products. If she wants to go the all-natural route, wet combing with an extremely fine-tooth comb is one of the most effective treatments—but it requires diligence and repetition every three or four days for a couple of weeks after you feel like you've gotten them all. Another

option is “smothering” with olive oil or coconut oil. Completely coat the hair and scalp with oil, comb through, place a shower cap over the head, and leave on for two hours. If you can go out in the sun or heat the hair with a blow dryer a few times during treatment, even better. Then shampoo, rinse, and repeat daily for a week. Certain essential oils such as tea tree, anise, and ylang ylang have also proven effective in clinical trials. Don't forget to sterilize all hair accessories by boiling in water or soaking in alcohol for at least an hour; vacuum well, including furniture; and wash all bedding, stuffed animals, towels, and other items in hot water. Good luck!

Q *I have been adding one tablespoon of coconut oil in my morning coffee because I heard it provides a brain boost. Do you have any information on this?*
— Alice S., via email

A Coconut oil increases the production of ketones, which as we discussed in the February 2018 issue, are readily taken up by the brain and used as fuel. Ketones have been studied as a therapy for improving brain energy in patients with Alzheimer's. However, I'm not sure how much of a brain boost a tablespoon would provide. Adding a spoonful of butter to coffee is another popular trend that's supposed to increase energy and facilitate weight loss. I have to reserve judgment until research supports these claims, but if you think it's helpful, I see no downside.

 Read more at drwhitaker.com, and send your own questions to drwhitakerquestions@drwhitaker.com.

New Online: Study Backs Use of Daily Multivitamins

Daily multivitamin use has declined over the years as people seem to believe that eating a balanced diet will provide all the vitamins and minerals they need for good health. Unfortunately, between nutrient-depleted soils, less than ideal transportation and storage of our food supply, and other environmental variables, diet alone just doesn't cut it—especially considering that most people don't have very good eating habits in the first place. While it is true that some of our regularly consumed foods are fortified with protective micronutrients, the overwhelming majority of people could benefit from taking a high-quality multivitamin supplement.

A recent review of data from the government-sponsored NHANES nutrition survey involving more than 10,000 Americans concluded that daily multivitamins do exactly what they claim to do—prevent shortfalls of essential vitamins and minerals. Yet only 28 percent of the men and women in this survey took multivitamins, and just 20 percent took them at least 21 days a month. This is one health habit I believe everyone should adopt. That said, not all multis are created equal. For more on multivitamins and optimal dosages of specific nutrients I recommend, visit drwhitaker.com.



Works for Me...

► **Migraines** *I started having migraines around age 12. They really impacted my life. All I could do was lie in a dark room and wait it out. Many years later, a young lady in a health food store mentioned that it could be food related and the main culprits were milk, wheat, chocolate, eggs, and coffee. She recommended eliminating these foods for three weeks, then reintroducing them one by one and observing symptoms. That is how I figured out that milk and bread triggered my migraines. So now I mostly avoid them. This has made a huge difference in my life, and I will always be grateful to that young woman.*
— Bob P., Florida

Elimination diets are a great tool for pinpointing dietary triggers. Food intolerances or sensitivities can cause headaches as well as constipation, bloating, fatigue, rhinitis, and other health concerns. If you have symptoms that you just can't get a handle on, try what Bob did. Eliminate the common culprits listed above for several weeks and then slowly add them back in one by one.

📧 Do you have a Health Tip to share? We'd love to hear it! Send it to worksforme@drwhitaker.com.

Health Hack: Say No to Alcohol-Based Mouthwash

If you're concerned about diabetes, steer clear of alcohol-based mouthwash. Turns out that in addition to killing odor-causing oral bacteria, the alcohol in mouthwash also kills off beneficial bacteria that stimulate the production of nitric oxide (NO). NO plays a crucial role in insulin regulation. In a recent study, using alcohol-based mouthwashes twice a day increased the risk of developing diabetes or prediabetes by a whopping 55 percent. Because NO boasts multiple other health benefits, including relaxing the arteries and improving blood flow, play it safe and choose an alcohol-free brand of mouthwash.

Monthly Health Quiz:

Liver Lore: True or False?

- A) Alcohol is the most common cause of liver disease.
- B) Once the liver is damaged, it cannot be repaired.
- C) Calves' liver is full of toxins and should be avoided.
- D) Three-fourths of the people in the US with hepatitis C are Baby Boomers.

Answer:

A, B, and C are false. Obesity, not alcohol, is the most common cause of liver disease. The liver has the ability to completely regenerate it as little as 25 percent of the organ remains. Though calves' liver is high in vitamin A, it is not full of toxins as many believe.



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Notable Quote

“Truth, like gold, is to be obtained not by its growth, but by washing away from it all that is not gold.”

— Leo Tolstoy, Russian novelist 1828–1910

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

Making Sense of the New Blood Pressure Guidelines

It happened again. Millions of Americans went to bed healthy and woke up with a medical condition that may well require lifelong use of multiple drugs.

No, I'm not talking about a virulent infection or another disease, simply a change in the diagnostic criteria for hypertension. According to new guidelines from the American College of Cardiology and American Heart Association (ACC/AHA), if your blood pressure is higher than 130/80 mm Hg, you have hypertension.

This new definition adds 31 million more people to the ranks of the ailing, raising the number of Americans labeled with hypertension to 103.3 million—almost half of the adult population! Granted, the guidelines recommend lifestyle changes for those on the lower end (130–139/80–89, formerly called pre-hypertension). But when half-hearted advice to diet and exercise fails to produce results, the next step is the prescription pad.

The SPRINT Study

The main clinical trial supporting these new guidelines is the SPRINT study. Researchers randomly assigned more than 9,000 participants with hypertension and high cardiovascular risk to one of two target blood pressure groups: standard (less than 140 systolic) or intensive (less than 120). They were monitored frequently and their medications modified to stay in the target ranges.

The study was stopped early because the intensive control group had 25 percent fewer cardiovascular events and deaths. Reducing risk by a quarter certainly sounds impressive, but let's put it into perspective. Every year of the three-year study, 1.65 percent of the intensive control group and 2.19 percent of the standard treatment group had an adverse cardiovascular outcome. That's the 25 percent difference. Not so impressive when you look at it this way.

Furthermore, SPRINT involved high-risk patients, yet the new ACC/AHA guidelines pertain to everyone—including perfectly healthy people. And there's absolutely no scientific support for that.

Conflicting Research

A more recent meta-analysis, published in January 2018, reviewed 74 clinical trials involving more than 300,000 patients with hypertension. The conclusion was that, for patients with systolic blood pressure higher than 140, treatment reduced risk of major cardiovascular events and death. But for those with no history of heart disease and blood pressure below 140, treatment did not prevent adverse events or save lives. "These results do not support lower BP goals in general..."

Not all physician groups are jumping on the ACC/AHA bandwagon. The American Academy of Family Physicians announced they will stick with earlier recommendations: For the general population with average risk, treatment should be started when blood pressure exceeds 140/90 and for people aged 60 and older, 150/90.

Another disturbing fact about the new guidelines is that they fail to adequately address the harms of intensive blood pressure control. To get blood pressure below 120/80 in the SPRINT study, participants took an average of 2.8 drugs, compared to the standard treatment group's 1.8. This increase in medications was accompanied

by a marked increase in serious side effects such as low blood pressure, fainting, electrolyte abnormalities, and kidney failure. Other common side effects of blood pressure drugs include dizziness, falls, cough, constipation, fatigue, depression, and erectile dysfunction.

The Natural Approach

If you are concerned about your blood pressure, start with diet changes, exercise, weight loss, smoking cessation, alcohol moderation, and stress reduction. The usual diet recommendation is DASH (Dietary Approaches to Stop Hypertension). Low in sodium with an emphasis on plant foods, low- and nonfat dairy, lean meat, fish, and chicken, DASH is not a bad diet. However, because it gives carte blanche to grains, fruit, and starchy vegetables, this diet promotes insulin resistance—the last thing anyone dealing with elevated blood pressure needs.

My Recommendations

- ▶ In addition to diet, exercise, stress management, and other lifestyle factors, the following supplements are recommended for blood pressure support: magnesium 500–1,000 mg, Pycnogenol 50–100 mg, grape seed extract 150–300 mg, olive leaf extract 1,000 mg, fermented/aged garlic extract 800–1,000 mg, stevia extract 800–1,000 mg, reishi mushrooms 500–1,500 mg, and Balance3 2–4 tabs.
- If your blood pressure is over 140/90 (or 150/90 if you're 60 or older) or you are at high cardiovascular risk, you will likely benefit from more intensive treatment.

Fat limitations are also unnecessary and run counter to the most recent research. Even sodium restriction—the Holy Grail of blood pressure control—doesn't apply to everyone. Many people with hypertension are not sodium sensitive, and for those who are, increasing potassium intake is as effective as reducing sodium and a heck of a lot tastier.

A better choice is a higher-fat, lower-carb diet such as the Mediterranean, Paleo, or modified DASH diet, with extra potassium from potassium chloride (Nu-Salt), Low-Sodium V8 Juice, lots of vegetables, and modest amounts of fruit.

Be sure to include daily servings of leafy greens and beets—great sources of nitrates, which convert to nitric oxide, a signaling molecule that dilates the arteries and lowers blood pressure.

Targeted supplements include magnesium, Pycnogenol, and grape seed extract, which relax the arteries, and olive leaf compounds, which inhibit enzymes that constrict the arteries. Fermented or aged garlic extract, reishi mushrooms, Balance3 (a mixture of Chinese herbs), and unrefined stevia extract also have clinically proven blood pressure-lowering properties.

Finally, a high-quality multivitamin, fish oil, coenzyme Q10, and vitamin D are beneficial not only for blood pressure but multiple aspects of cardiovascular health.

“Illness-by-Committee”

Commenting in the January 9, 2018, issue of *JAMA*, John Ioannidis, MD, DSc, of Stanford University wrote, “Expanding the definition of disease to label more people as having medical conditions and in need of treatment has become more common. Many specialties want to increase their volume of patients. Industry also cherishes larger markets for its products through expansive definitions of illness. Guidelines are typically the final step to justify illness-by-committee and treatment overuse.”

Dr. Ioannidis applauds the goal of focusing attention on hypertension and promoting lifestyle modifications. However, he questions whether these new guidelines will fly in the real world.

They won't. We've been here before. Prediabetes, osteopenia, lower cholesterol targets... all ended up slapping disease labels on healthy people and turning them into drug-swilling, side effect-ridden patients who further overburden our healthcare system.

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Do Not Be a Victim of False Diagnosis

The last time you had your blood pressure checked in a doctor's office, were you seated in a quiet room five minutes beforehand and told to keep your legs uncrossed and your back supported? Did the nurse avoid chatting with you while testing? If not, your blood pressure readings were probably wrong. A positive aspect of the new ACC/AHA guidelines is a renewed emphasis on getting accurate blood pressure measurements. Here are their recommendations:

1. Do not exercise, drink caffeine, or smoke for at least 30 minutes prior to testing. Empty your bladder.
2. Sit in a chair with your back supported, feet on the ground, and legs uncrossed for at least five minutes before your blood pressure is measured. Do not sit or lie on an exam table.
3. Roll up your sleeve so the cuff is on bare skin. Make sure your arm is supported on a desk or table, not dangling or resting in your lap.
4. Do not talk and ask that the nurse refrain from talking during testing.
5. If your blood pressure is high, ask for a reading in the other arm after a one to two minute rest. The arm with the higher reading should be checked on subsequent visits.

A diagnosis of high blood pressure should be made only after averaging two or more readings taken on at least two separate occasions. If white coat hypertension (elevated blood pressure caused by nervousness of being in a doctor's office) is suspected, home self-monitoring with a validated device or 24-hour ambulatory monitoring is recommended.

If your doctor doesn't follow these protocols, speak up. Far too often patients are measured quickly and inaccurately and stuck with a false diagnosis and a lifetime of unnecessary drugs.

Innovations in Wellness Medicine

Hyperbaric Oxygen for Diabetic Wounds

Hyperbaric oxygen therapy (HBOT)—breathing 100 percent oxygen in a pressurized chamber—allows oxygen to infiltrate tough-to-reach areas with poor circulation. This massive influx of oxygen stimulates the growth of new blood vessels and increases blood supply to the affected area. It also creates an inhospitable environment for anaerobic bacteria and wards off infection. That’s why HBOT is such a remarkable therapy for non-healing wounds such as diabetic ulcers, a common complication of diabetes and leading cause of amputation.

In a recent study, patients with non-healing diabetic foot ulcers were divided into two groups. All participants received standard wound care, but one group also underwent a course of HBOT (five treatments per week for four weeks). Twenty-five percent of the patients treated with HBOT had complete closure of their wounds, compared to just 5.5 percent of the standard treatment group. HBOT also reduced amputation rates by more than half (5 versus 11 percent). Improvements in inflammation, blood flow, quality of life, and A1C levels were noted as well. To locate an HBOT center near you, visit hyperbariclink.com.

Vitamin D for Burns

Vitamin D builds strong bones, protects against autoimmune flare-ups, wards off colds and flu, and, according to a new study, plays an integral role in recovery from severe burns. Researchers from the UK followed patients who had sustained serious burns and noted that their vitamin D blood levels significantly impacted the healing process. Patients with the highest vitamin D concentrations experienced faster healing, fewer infections, and less scarring than those with lower levels. The researchers concluded that although most doctors overlook this vitamin, “Supplementing with high doses of vitamin D... may greatly improve health outcomes in burns patients.”

It stands to reason that minor burns would also benefit from increasing vitamin D intake. In fact, most everyone should optimize vitamin D status. To maintain a protective level of 40–60 ng/mL, start with 2,000–5,000 IU of vitamin D3 daily, have your blood level tested after three months, and adjust your dosage accordingly. Other recommendations for minor burns include topical aloe and honey or sugar dressings.

Did You Know?

- More than 80 percent of centenarians are women.
- Coffee reduces risk of premature death in people with chronic kidney disease.
- Ten percent of people in Ireland are carriers of a gene mutation for hemochromatosis (iron overload disorder).
- Women who work night shifts have an increased risk of breast, gastrointestinal, and skin cancers.
- Children whose moms took a multivitamin or folic acid before or during pregnancy are less likely to develop autism.
- In 2017, 44% of online sales and 4% of all retail sales in the US were from Amazon.
- The FDA approved an Apple Watch EKG app that monitors arrhythmias.
- Compounds in cinnamon may increase fat burning.
- The world’s largest organism is a honey fungus in Oregon that spreads over a 3.5 mile-wide area.
- Pfizer announced they are giving up researching drugs for Alzheimer’s and Parkinson’s disease.
- Applied to the underarms, Milk of Magnesia is a pretty good deodorant.

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