YOUR DEFINITIVE GUIDE TO WELLNESS MEDICINE

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Blood Sugar: How Low Should You Go?

here's a feud among doctors who treat type 2 diabetes. It started in March, when the American College of Physicians (ACP, a group of 152,000 internal medicine doctors on the front line of primary care) issued new guidelines recommending less stringent blood sugar targets.

The American Diabetes Association and other professional groups immediately registered strong disagreement, stating the guidelines have "the potential to do more harm than good for many patients." Based on the backlash, you would think they had

proposed treating patients with Cokes and candy bars.

As Yogi Berra famously said, "It's déjà vu all over again." This controversy pops up every few years, and it really boils down to drug use. Driving blood sugar way down requires more intensive medication regimens. Granted, dramatic lowering may reduce risk of complications of the eyes,

nerves, and kidneys. However, aggressive use of medications also burdens patients with more pills and/or shots of insulin, runs up costs—and increases risk of serious side effects such as hypoglycemia (low blood sugar), cardiovascular complications, and premature death.

Overaggressive Treatment Harms Patients

A primary tool used by doctors who treat patients with diabetes is A1C (glycosolated hemoglobin), a blood test that gives an estimate of the average blood sugar level over the previous three months. A normal

A1C for people without diabetes is 4–6 percent, which translates to an average blood sugar of 70–126 mg/dL. The target A1C endorsed by the American Diabetes Association is less than 7 percent, and the American College of Endocrinology's is below 6.5 percent. (Each A1C percentage point represents about a 30 mg/dL increase in average blood sugar.)

The debate erupted when the ACP suggested that a more appropriate A1C for most people with type 2 diabetes is 7–8 percent, and for those over age 80 or with a life expectancy of less than 10 years, no

> specific A1C target at all. They acknowledged the importance of controlling blood sugar but also stressed that overzealous focus on achieving A1C goals with more and more medications causes significant harms.

Drug-induced weight gain is a given with most diabetes medications, and excess weight makes blood sugar control all the harder.

Hypoglycemia, a side effect of many meds, causes confusion, fainting, and falls, and all too often leads to ER visits or hospitalization, especially in older people. Intensive blood sugar control is associated with an increased risk of death from cardiovascular conditions and other causes as well.



The new guidelines also recommend "deintensifying" treatment: using fewer or lower doses of medications when the A1C is below 7 percent—which

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DR.WHITAKER'S

Health & Healing

Julian Whitaker, MD, practiced medicine for over 40 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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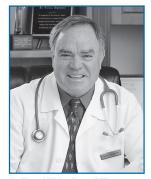
Author: Julian Whitaker, MD Research Editor: Peggy Dace Managing Editor: Larissa Long Associate Research Editor: Ryann Smith Groseclose

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Dear Reader,

Expo West, the health food, nutritional supplement, and natural product industry's leading tradeshow, recently returned to Southern California for the 37th year. At the first Expo in 1981, most of the 3,000 attendees represented small independent stores or food co-ops, and the bulk of the exhibitors were privately owned companies with a handful of specialty foods or supplements.

This year, more than 3,500 exhibitors and 85,000 retailers, manufacturers, and healthcare professionals from 120 countries



Julian Whitaker, MD
America's Wellness Doctor
Founder of the Whitaker Wellness
Institute, Newport Beach, California

crowded into Anaheim's Convention Center for a multiday extravaganza of product exhibits, food tastings, lectures, and networking.

Gone are the days of tofu, brown rice, Adelle Davis books, and momand-pop shops. Customers today are more likely get their organic foods and supplements at mainstream supermarkets and drugstores, health food chains, or online. And although hundreds of new businesses pop up every year, most familiar brands have been acquired by huge publicly traded companies. It is now a \$141 billion-a-year industry.

Broad trends this year as in recent years included organic, GMO- and gluten-free, low-carb, high-protein, plant-based, and sustainable—plus, of course, convenience and good taste. And with products like lentil chips, probiotic ice cream, Paleo waffles, grass-fed buffalo jerky, vegan "chicken," and thousands of nutritional supplements, Expo West did not disappoint.

Protein, including pea protein and low-carb whey for ketogenic dieters, was featured in many products, as were collagen and probiotics, which were added not only to fermented foods and supplements but also to drinks, protein powders, chews, "Pixy Stix" for kids, and Fidobiotics for pets. Turmeric and curcumin were also well represented in joint and brain health supplements as well as in teas, "golden milk," cereal, and crackers.

I am always on the lookout for new supplement ingredients, and one that's coming on strong is cannabidiol (CBD), a phytonutrient found in cannabis (hemp or marijuana). Unlike THC, the psychoactive compound in marijuana, CBD does not produce a high. Rather, it has significant pain-relieving effects and is used topically in oils or taken orally to treat acute pain, arthritis, neuropathy, and inflammation.

Other promising compounds I am researching include Ayurvedic herbs, medicinal mushrooms, humic acid, and more efficient forms of proven ingredients. Stay tuned, eat healthy, and take your supplements!

To your health,

really got the critics' hackles up. The ACP made it clear that striving for an A1C below 6.5 percent is perfectly acceptable if it can be done with weight loss, diet, and exercise. The problem is not low A1C; it's overaggressive use of drugs.

I applaud this organization for taking an unpopular stance in the face of pressure from their peers, Big Pharma, and likely even some of their patients. I've treated thousands of patients with diabetes at Whitaker Wellness, and when I recommended discontinuing medications, they were sometimes resistant—until they saw what regular exercise, a low-glycemic diet, weight loss, and blood sugar-lowering supplements can do.

When John R. arrived at the clinic from Washington, he weighed 268 pounds and was taking maximum doses of several diabetes drugs. We discontinued the meds at once, which, he said, "scared the heck out of me." But at the end of his two-week stay, he had lost 20 pounds and his blood sugar was near normal. Five years later, he weighed 195, was feeling great, and his blood sugar was still in good control without medications.

Lifestyle changes are selfexplanatory. All it takes is your commitment to walk the walk

and bypass the junk food, so let's focus on supplements.

Can Berberine Beat Metformin?

Metformin is conventional medicine's first-line therapy for type 2 diabetes, although other oral meds and injected insulin are routinely added if A1C creeps up. Metformin is a pretty good drug. It has been around for decades, it's inexpensive and generally well tolerated (although it is linked with rare lactic acidosis), and it does not cause hypoglycemia or weight gain.

Nevertheless, metformin is not my go-to for diabetes. Berberine, a plant-derived nutritional supplement that has been tested head to head against metformin, not only lowers A1C as effectively but also provides additional benefits that the drug does not.

Researchers enrolled patients with newly diagnosed diabetes and randomly assigned them to take 500 mg of either berberine or metformin three times

a day. When they were retested after three months, the A1C was reduced in the metformin group from an average of 9.2 percent to 7.7 percent and in the berberine group from 9.5 percent to 7.5 percent. Other markers of blood sugar control also improved in both groups, leading the researchers to conclude, "The hypoglycemic effect of berberine was similar to that of metformin." There was a difference, however. Berberine alone significantly lowered triglycerides and cholesterol levels.

Berberine is also an effective adjunct therapy. When the same dose of berberine was added to the oral drug regimens of patients with poor diabetes control, A1C decreased from 8.1 percent to 7.3

percent, and lipids improved as well. Additional studies have demonstrated that supplemental berberine also facilitates weight loss, particularly in the abdominal area. Now you can see why berberine is my top recommendation for anyone dealing with diabetes or metabolic syndrome.

My Recommendations

- Talk to your doctor about your A1C level and the possibility of discontinuing or cutting back on medications.
- Get serious about regular exercise, a low-glycemic diet, and weight loss.
- ➤ The suggested dose of berberine is 500 mg 2–3 times a day. Other supplements that help with blood sugar control include chromium 400–600 mcg, cinnamon 1,000 mg, and vanadyl sulfate 100 mg, taken daily in divided doses before meals. A potent daily multivitamin is also recommended to protect against complications.

The Big Picture

One of the greatest tragedies in the treatment of diabetes, or any condition for that matter, is that overemphasis on disease markers shifts focus away from what really matters. Doctors don't treat diabetics—they treat people who are unique individu-

als of varying ages, sizes, and states of health.

Ensuring the best outcome for patients with diabetes requires more than lowering A1C. It requires acknowledging the harms as well as the benefits of medications. It requires helping patients adopt lifestyle changes and optimize their nutritional status to prevent complications. And it requires recognizing that overall health and well-being, quality of life, and longevity are much more important than chasing a number on a lab test.

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Dear Dr. Whitaker

After following your diet and supplement recommendations, I have lost about 20 pounds, my energy is the best it has ever been, and I never feel hungry. I do have one question about glucomannan. I heard that it should not be taken close to drugs or supplements as it will prevent them from being absorbed. Is this true?

— S.K., via email

Glucomannan is a form of soluble fiber and like all fiber supplements, it slows digestion and may decrease the absorption of some substances. To avoid this, take meds and supplements 30–60 minutes before or two hours after taking glucomannan. If you're using it to curb appetite—it expands in the stomach and makes you feel fuller—take it about 30 minutes before meals. Use only powdered glucomannan (not capsules), and be sure to drink lots of water. The usual dose is half a teaspoon mixed in a cup of water once or twice a day. I'm happy to hear glucomannan is working for you. It also helps lower cholesterol and blood sugar, facilitates weight loss, prevents constipation, and promotes the growth of beneficial gut bacteria.

Is Curaderm BEC5 on your radar? I heard about it on Dr. Oz's show, and my friend used it and it worked on a basal cell lesion. It's made with eggplant extract. I would value your opinion. — Rita. S., Florida

Not only have I heard of this botanical extract, I've had personal success with Curaderm. Years ago, I used it on a non-melanoma skin cancer on my

cheek, and within a few weeks of treatment, the dry, itchy patches sloughed off and healthy, pink skin emerged. To learn more or try it yourself on actinic keratoses, basal cell, or squamous cell carcinomas, visit <u>curadermbec5.com</u>. Another therapy I've used to successfully heal lesions of this type is a paste of DMSO and powdered vitamin C applied topically to the affected area a few times a day. That said, when it comes to suspicious-looking areas on your skin, consult a dermatologist.

I have been reading about candidiasis and believe that it may be the underlying cause of my symptoms. When I asked my family doctor about this, he said it doesn't exist. What are your thoughts?

— T.G., Rancho Mission Viejo, California

I do believe that candidiasis, or overgrowth of *Candida albicans* yeast, is a real condition. Symptoms, which include fatigue, brain fog, bloating and other gastrointestinal issues, frequent vaginal infections, and skin problems, often respond to a multipronged yeast-eradicating approach. I suggest starting with supplements such as garlic, oregano oil, and Candicid Forte (a blend of sodium caprylate, botanicals, zinc, and biotin) to reduce yeast overgrowth. Because yeast feeds on sugars, a low-carb diet is also very important. A course of antifungal medications such as nystatin or fluconazole may also be indicated. To find a physician who is familiar with candidiasis, visit acam.org or call 800-523-3688.

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

New Online: Preventing Arthritis

Osteoarthritis (OA)—the most common type of arthritis—affects more than 30 million Americans and is a leading cause of pain and debility. But what if we could stop it from developing in the first place? Dutch researchers conducted a clinical trial to determine whether a combination of diet and exercise and/or supplemental glucosamine sulfate could do the trick. They enrolled 407 women who had not been diagnosed with knee OA but were at high risk due to their age (50–60) and weight (overweight or obese). They were randomly assigned to one of four treatment groups: 1,500 of glucosamine daily, glucosamine plus a specific diet and exercise program, a diet and exercise program alone, and a control group who received a placebo and no other instructions. When follow-up X-rays were done after two and a half years, the women who had taken glucosamine had significantly less joint space narrowing (cartilage degeneration) and thus reduced risk of OA—whether or not they received diet/exercise guidance. Lifestyle changes alone did not reduce incidence of OA.

If you are at risk of developing osteoarthritis, consider adding 1,500 mg of glucosamine to your daily supplement routine. For more information on what works (and what doesn't) for OA, visit <u>drwhitaker.com</u>.

Works for Me...

► Acne Prevention My daughter had several large clogged pores (whiteheads) across her nose. I had the same as a kid, which permanently scarred my nose. So, I took her to the dermatologist, who said my daughter was dealing with a rush of hormones that happens every few years. She took as much of the sebum out as she could and recommended clay masks, which we did without much luck. Then I happened to run across an article mentioning how milk products can cause excess sebum. I decided to see if bulling dairy out of our diet would do any good. Within about six weeks, I noticed a huge difference. Her nose is almost completely clear—I wish I had taken before and after pictures! Cutting out dairy has also helped with my daughter's digestive issues and led to healthier choices for our entire family. — Rachel B., Texas

Thanks for sharing this great tip. Diet plays a key role in acne and skin health, and changes such as removing dairy and other pro-inflammatory triggers like excess starches, sugars, and refined vegetable oils can make a profound difference.

▶ **AirTamer** My husband and I love to vacation, but every single time we traveled on an airplane one or both of us would end up sick. I read about AirTamers in an in-flight magazine and purchased two of them. It's been over a year and we've finally figured out a way to stay healthy while we travel. Now we don't leave home without them! — Jackey H., via email

AirTamers are personal air purifiers that are worn around the neck. I have no experience with them, but they do receive good reviews. If you travel a lot, they may be worth looking into. And don't forget the hand sanitizer and antibacterial wipes.

▶ Back Pain I developed terrible lower back pain after a very long trip, carrying luggage, managing kids, etc. I tried everything, but nothing worked until I was treated with stem cell therapy. — S.S., California

Stem cell therapy is a remarkable regenerative treatment that uses a patient's own stem cells to stimulate healing. It is a godsend for back and joint injuries, pain syndromes, and other conditions. For more information, visit nbstemcell.com or call 949-721-1113.



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

Health Hack: Housecleaning May Be Hazardous to Your Health

A recent study of more than 6,200 participants spanning 20 years revealed that women who regularly used cleaning products in their homes—and especially those who worked as cleaners—had marked declines in tests of lung function. Researchers postulated that long-term exposure to low-grade irritants in sprays and other products caused gradual changes to the respiratory tract that led to compromised function. Protect yourself by using natural household cleaners such as vinegar, baking soda, olive oil, and lemon juice in place of toxic volatile chemicals. For more tips to safely keep your house clean, visit drwhitaker.com.

Monthly Health Quiz:

Fatherhood Quiz: True or False

- A) Males play a significant role in childrearing in 20 percent of mammalian species.
- B) Men experience hormonal changes when they become fathers.
- C) The amount of time fathers provide childcare has doubled since the 1960s.

Answer:

B is true. Studies show that contact with babies and mothers boosts levels of oxytocin, estrogen, and prolactin in men. A and C are false. Only 10 percent of male mammals play an integral role in raising offspring. Childcare hours provided by dads in the US have nearly tripled spring. Childcare hours per week on average.



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Notable Quote

- When you're 20 you care what everyone thinks, when you're 40 you stop caring what everyone thinks, when you're 60 you realize no one was ever thinking about you in the first place.
 - Anonymous (often attributed to Winston Churchill)

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

Memory Loss: Prevention Is the Only Medicine

Pharmaceutical giant Pfizer recently announced it is ending research on new drugs to treat Alzheimer's disease. Despite testing 24 medications in 99 clinical trials over the past two decades, the company has failed to come up with any viable products.

Pfizer isn't the only company that is striking out. There have been no new Alzheimer's drugs in 14 years, and the meds that are available may temporar-

ily improve symptoms but do not cure the disease or stop its progression.

Big Pharma is not giving up—the potential payoff is far too lucrative. But the lack of progress in developing effective treatments for Alzheimer's and other forms of dementia has shifted attention to prevention. And although there is no magic bullet for prevention either, there is a lot you can do to enhance brain function and reduce risk of cognitive decline.

Lifestyle Changes

Regular exercise improves the flow of oxygen- and nutrient-rich blood to the brain and increases levels of

BDNF, a protein that stimulates the growth of new brain cells and neural connections. Restful sleep is required for clearing beta-amyloid, a toxin present in the brains of patients with Alzheimer's. And sleep disturbances—especially sleep apnea—are associated with accelerated cognitive decline.

A healthy Mediterranean-style diet, heavy on plant foods, olive oil, and fish with moderate amounts of eggs, poultry, and dairy and a little red meat and red wine, is neuroprotective, and a handful of supplements provide further nutritional support. Stress reduction, stimulating mental activity, lifelong learning, and social interaction support cognitive reserve, the brain's resilience and ability to function normally even in the presence of pathological changes.

Controlling hypertension and diabetes is important. Elevated blood pressure injures the small vessels in the brain, leading to increased likelihood of microbleeds, strokes, and neurodegenerative changes. Lowering blood pressure has been shown to significantly reduce risk of vascular dementia and Alzheimer's disease.

Diabetes also damages these blood vessels and the integrity of the white matter, which is responsible for quick and efficient processing and communication within the brain. Weight management figures in as

well, since obesity is linked with both diabetes and hypertension.

My Recommendations

- Protective lifestyle factors include physical and mental exercise, healthy diet, adequate sleep, stress reduction, and blood pressure, blood sugar, and weight management.
- Review your drug regimen and discuss safer options with your doctor. Also, search online for the Pocket Guide to the AGS 2015 Beers Criteria, a list of potentially harmful drugs.
- ▶ Protective supplements include a high-dose daily multivitamin, extra B-complex vitamins, omega-3s EPA/DHA 1,000–2,000 mg, curcumin 400–1,000 mg, vitamin D 2,000–5,000 IU, lithium 5–10 mg, resveratrol 100–200 mg, phosphatidylserine 200–300 mg, coenzyme Q10 100–200 mg, and huperzine A 100 mcg.

Drugs Impair Memory

You also need to take a close look at your medications, as a number of drugs impair cognitive function—and the worst offenders are likely lurking in your medicine cabinet.

Drugs that affect the central nervous system can obviously impact memory and cognition. They include opioid painkillers, benzodiazepines, sleeping pills, antidepressants, Parkinson's drugs, and medications used for seizures, anxiety, and nerve pain.

Cholesterol-lowering statin drugs, which are now recom-

mended for nearly 30 million Americans, have FDA-required warning labels linking them with memory loss and confusion. Insulin and sulfonylurea diabetes drugs can lead to bouts of low blood sugar that cause mental confusion and may contribute to long-term problems.

Avoid Anticholinergics

Anticholinergics—a broad category that encompasses medications used to treat allergies, insomnia, urinary incontinence, nausea, motion sickness, heart disease, and more—may be the worst of the lot. These drugs block acetylcholine, a neurotransmitter that stimulates muscle activity and is involved in attention, recall, encoding of new memories, and REM sleep. Low levels of acetylcholine in the hippocampus, the area of the brain where memories are consolidated for longer-term storage, are a feature of Alzheimer's, and significant losses of this neurotransmitter are common in advanced disease.

Brief use—even a single dose—can worsen working memory, attention, and reaction time, and extended use is associated with overall cognitive impairment. Doctors once believed this was temporary, that brain function would return to normal when the drugs were discontinued. We now know this is not true.

Research makes it clear that anticholinergic drugs can cause permanent brain changes, including reduced metabolism, increased inflammation, and accelerated atrophy (shrinkage) of the brain. They also increase the risk of stroke and the likelihood of developing dementia.

A groundbreaking study that tracked 3,434 older people over a 10-year period found that the higher the cumulative exposure to anticholinergic medications, the greater the risk of dementia. It didn't matter if the drugs had been taken recently or years before—the damage was enduring. In fact, a 2018 study involving nearly 350,000 older people concluded that taking a strong anticholinergic drug for depression, bladder control, or Parkinson's for as little as one year at any time during a 15–20 year period increased risk by 30 percent!

What's Your Anticholinergic Burden?

A boatload of medications have anticholinergic activity, including antihistamines (Benadryl, Chlor-Trimeton, and Clistin); Dramamine and other nausea/motion sickness drugs; and sleep aids and nighttime formulas like Sominex, Advil PM, and Tylenol PM.

Prescription medications for overactive bladder, tricyclic antidepressants, antispasmodics, and a number of drugs for heart, respiratory, gastrointestinal, and other conditions are also anticholinergic. Although some of these medications have less

impact than others, effects are cumulative, and if you're taking more than one, the anticholinergic burden adds up.

Older people are particularly vulnerable to medication side effects, and at greatest risk are those taking multiple drugs. You'd think doctors would be clued in to this and warn their patients. But up to half of older adults, including those with memory impairment, take one or more anticholinergic drugs.

Don't Sweat the Small Stuff

Do you ever misplace your car keys or forget where you parked? Have trouble remembering names or miss appointments? Are you worried these are signs of early dementia? Occasional memory lapses are nothing to be concerned about—they happen to everyone.

Now, if you forget what car keys are for, get lost in your neighborhood, or have worsening memory problems that are interfering with your usual activities, you need to talk to your doctor. Otherwise, adopt these lifestyle changes, avoid brain-damaging medications, take protective supplements—and remember that although one in 10 people over age 65 have Alzheimer's, nine in 10 do not.

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Subscriber Success Story: "The Salad Sorority"

"I've been focusing on clean eating, but lunch is always my toughest meal. A while back, some friends and I organized a mason jar salad prep party. Each person brings an ingredient, such as dressing, chicken, beans, all sorts of veggies, seeds, lettuce, or other leafy greens, and their own jars. (Pint- or quart-sized jars with wide mouths work best, and we each fill six at a time.) You set all the ingredients around a kitchen table and layer, starting with salad dressing at the bottom, then the heartier ingredients that won't get soggy like beans and less porous veggies, chicken or other protein, and finishing with the lettuce or



The Salad Sorority

greens at the top. Store upright in the fridge and when you're ready to eat, just shake up and pour into a bowl if you're using the smaller jars or eat straight from the jar if you use the bigger one. They keep for up to a week and are a huge timesaver. We call ourselves the salad sorority." — R.S.G., via email

Innovations in Wellness Medicine

Targeted Supplements for BPH

Gentlemen, listen up. If you make frequent trips to the bathroom, experience dribbling or incomplete bladder emptying, are up several times at night, or have any other symptoms of benign prostatic hyperplasia (BPH), a trifecta of supplements may help.

Saw palmetto (*Serenoa repens*) has a long and successful history of treating prostate problems. This botanical reduces inflammation and mitigates testosterone's stimulating effects on prostate cells, reducing proliferation and slowing prostatic enlargement. Additional research suggests that adding selenium and lycopene provides further anti-inflammatory and antioxidant benefits. This trio also appears to reduce prostate weight, which generally increases with age.

I've long recommended that men begin taking 320 mg of palmetto daily in their mid-40s. Adding lycopene 6–10 mg and selenium 200 mcg just makes sense. Additional supplements to consider for prostate support include pygeum 100 mg, beta-sitosterol 130–180 mg, zinc 30 mg, and stinging nettles 200–300 mg. You can find a combination of these ingredients in many prostate health products.

Benefits of White Meat Over Red

I don't want to be a killjoy, especially now that summer is here, but I need to tell you about a study that may have some bearing on what you grill on the barbecue.

Researchers from the National Cancer Institute evaluated the diets of 536,969 men and women who were 50–71 years old at baseline and tracked their dietary habits for 16 years. They found that those who ate the most red meat (beef, pork, and lamb) were 26 percent more likely to have died than those with the lowest intake. Causes of death linked with heavy meat consumption included cancer, type 2 diabetes, stroke, infections, and kidney, heart, respiratory, and liver disease. Heme iron, found in all animal meat but more abundantly in red meat, and nitrates and nitrites in processed meats were also independently associated with increased risk of death.

On the flip side, people who ate the most white meat (poultry and fish) had a 25 percent reduction in risk of death from all causes. You don't have to eliminate steaks and sausage altogether, but cutting back and eating more fish, poultry, beans, and vegetable protein delivers multiple health benefits.

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- Buy Supplements. 800-722-8008 or drwhitaker.com
- Sign Up for My Free E-News drwhitaker.com

Did You Know?

- Excessive use of menthol cough drops is linked with worsening cough duration and severity.
- Estrogen therapy reduces tooth and gum disease in postmenopausal women.
- A 5,000+-year-old bristlecone pine in CA is the oldest living thing on earth.
- Deaths from drug overdose have tripled since 1999 to 63,600 in 2016.
- Store halved avocados in an airtight container with a cut onion. The sulfur compounds prevent oxidation and browning.
- Music lessons at school improve students' reasoning, memory, planning, inhibition, and grades.
- Side effects of the psych drug Abilify include compulsive gambling, spending, eating, and sexual behavior.
- Understanding and recall are better when listening with the right ear.
- The USDA estimates
 Americans will eat 222
 pounds of meat and poultry
 per capita in 2018.
- Closing the lid before flushing prevents "toilet plume," the dispersal of microscopic, potentially infectious aerosols.
- A recent study found that a daily cup of hot tea reduced risk of glaucoma.

Coming In Future Issues:

- Pain: What Your Body Is Telling You
- My Favorite Ayurvedic Herbs
- Summer Health Tips



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