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VIETNAMESE HERB FIGHTS PROSTATE, OVARIAN CANCER

Anyone who has ever visited the Vietnam countryside or seen pictures of its lush tropical landscape would not be surprised to learn that herbal medicine has been practiced in this southeast Asian country since ancient times.

One of the newer herbs gaining attention is crinum latifolium, a leafy traditional remedy that was first employed by royalty to enhance longevity. Crinum was once known both as the “Medicine for the King’s Palace” and the “Royal Female Herb.”

These days, crinum is being used to treat serious health conditions that include prostate and ovarian disorders such as prostatitis, adenoma, benign prostate enlargement, uterine fibroids, ovarian cysts, and tumors.

Crinum is so well established and widely used in Vietnam as a treatment for prostate and diseases of the ovary that the herb is generally prohibited from being exported.

Most of the research that has been done on crinum focuses on men, but the herb was initially tried as a treatment for ovarian cancer by Dr. Kha Hoang, who was the chief medical advisor for the Vietnamese royal family.

Alternative to surgery
In 1984, Hoang’s daughter had so many cysts on one of her ovaries that surgery was scheduled to remove it. But Dr. Hoang decided to try an alternative. He gave his daughter a tea made with crinum leaves to drink, and six weeks later the cysts were completely gone.

Since that time, the Hoang family has used crinum together with other supportive herbs to successfully treat a variety of prostate and ovarian conditions. Biopsies have confirmed that 16 cases of advanced prostate cancer were completely cured, regardless of the patient’s prostate specific antigen (PSA) levels.

Ken Malik, co-founder and Executive Director of the Prostate Awareness Foundation, a non-profit organization based in San Francisco, chose to take the natural approach in his own battle with prostate cancer.

Malik opted for a therapeutic regimen of nutrition and exercise that included crinum, which he started taking in January 2002. Over the course of the next 10 months, Malik’s PSA actually increased (It is not unusual for PSA levels go up in men taking crinum).

In most cases, this would have been cause for concern. But as it turned out, his biopsy showed only healthy tissue. (Not everyone experiences elevated PSA levels using crinum.)
Many health care experts, in fact, have begun to question whether the PSA test is the best indicator of prostate cancer risk.

Malik was so pleased with his results that he organized an informal trial with 10 members of the Prostate Awareness Foundation. Participants were instructed to take nine crinum tablets a day for three months. All 10 of them reported some form of functional improvement.

**500 cases studies**
Crinum has also been shown to help alleviate the symptoms of benign prostatic hyperplasia (BPH)—otherwise known as an enlarged prostate. The primary symptom of BPH is frequent and sometimes painful urination.

There are more than 500 individual case histories of successful crinum treatment for BPH.

Walter Courtney, age 58, is one of them.

Courtney was diagnosed with prostate cancer and waited so long for treatment that it caused a very large tumor to grow. He had a PSA of 93, and his alkaline phosphate was at 1,962, an indication that the cancer had spread to the bone. It had also spread to lymph nodes and the intestines. Courtney was having difficulty urinating and had quite severe swelling in his legs. He was placed on an aggressive herbal program that included the a crinum formulation.

In just under four months, his PSA was down to .9 and his alkaline phosphate was down to 308. His urination had gone back to normal and his legs were no longer swollen. His energy level, which had been quite low in the beginning, had returned to almost normal.

Along with these case studies, the International Hospital in Vietnam after seven years of research reported that 92.6 per cent of patients had good results using crinum for BPH (confirmed by measurements of prostate size and clinical evaluation by urologists).

**Checks and balances**
Some experts believe that crinum may enhance the cellular communication that is responsible for maintaining the balance between cell proliferation and cell death. The human body contains roughly 70 trillion cells, each of which maintains its own existence and makes a vital contribution to your health.

In order for your body to function properly, all of these cells must constantly work together to regulate how many cells you have—and how healthy they are—at any given time. Without this system of checks and balances, cell death may not happen as it should, and unhealthy cells (even cancerous ones) may be allowed to left to spread unimpeded.

Recent research has shown that crinum encourages cells to produce neopterin, a substance that is responsible for communicating with immune cells—stirring them to act against foreign invaders and unhealthy cells.
If these experts are right, crinum may also be beneficial for conditions other than prostate and ovarian problems.

**Scarce data on females**
Very little clinical research has been done on women taking crinum, but there is a growing body of anecdotal evidence that it has worked for female patients suffering from a variety of ovarian disorders.

For instance, a 52-year-old woman in perimenopause was evaluated by her gynecologist for heavy periods and diagnosed by pelvic ultrasound as having a uterine fibroid tumor and multiple bilateral cysts. Her gynecologist recommended ovarian surgery, but she requested a trial on natural supplements.

The woman was put on a regimen of three capsules of a crinum compound twice a day. Seven weeks later, she had a repeat pelvic ultrasound and there was no evidence of any cysts, so her surgery was cancelled.

Crinum is available in the United States in the formulation Healthy Prostate & Ovary. The recommended dosage is three 600 milligram tablets taken three times a day.

As a precaution, it is wise to consult your doctor before using this product if you’re battling cancer or any other serious illness.

**Simple Vitamin A Beats Anti-Aging Creams**

It’s an alluring idea: Simply rub on a magical cream and say so long to wrinkles. It is so alluring—even at prices as high as $500 an ounce—that women are spending billions of dollars chasing after the promise of younger-looking skin.

Part of the appeal of anti-aging creams such as Anew, Fruition, and Unilever’s Age-Defying Complex—which anticipates sales of $100 million this year—is that they are less invasive than plastic surgery or botox injections.

But do anti-aging creams really work?

“A lot of the claims are beyond-beyond,” says Dr. Ronald Klatz, president of the American Academy of Anti-Aging Medicine, “because very few of these companies show clinical studies.” While anti-aging products may be good for the skin's surface appearance, Klatz says, very few compounds have been shown capable of actually penetrating deep enough into the skin to cause any significant repair or reversal of the effects of growing older.

On top of that, many anti-aging creams contain alpha hydroxy acids (AHAs) that can increase
sun sensitivity by 50 percent. This presents an interesting dilemma: While it appears that alpha hydroxy acids may be able to reverse some of the damage caused by photoaging (aging caused by exposure to the sun), it also appears that they may simultaneously make the skin more susceptible to photoaging.

As far back as 1989, the FDA had concerns about potentially harmful side-effects of AHAs. Consumer complaints have included severe redness, swelling (especially in the area of the eyes), burning, blistering, bleeding, rash, itching, and skin discoloration.

As part of the body’s natural aging process, skin loses its youthful appearance by becoming thinner, looser, and more finely wrinkled, changes most easily observed in the upper portion of the inner arm. These features of intrinsic skin aging are due to a reduction in collagen synthesis with a simultaneous increase in collagen and elastic fiber breakdown by an enzyme system called “matrix metalloproteinase.”

Some experts say that less exotic topical applications of vitamin A mixed with folic acid appear to do a better job of improving the wrinkles associated with natural aging than do high-priced skin creams—and may even help promote the production of skin-building compounds. These kinds of preparations can be found at most compounding pharmacies.

A study at the University of Michigan Medical School at Ann Arbor assessed the effectiveness of vitamin A (retinol) lotion in 36 elderly individuals (average age 87). Researchers applied a lotion containing 0.4 percent retinol to participants' right or left upper inner arms, and lotion with no retinol to the other arm, up to three times a week for 24 weeks. Wrinkles, roughness and overall severity of aging were each graded on a scale from zero (none) to nine (severe) before treatment at intervals of two, four, eight, 16, and 24 weeks after beginning treatment. In addition, 4-millimeter biopsy specimens of skin were taken from both arms at the beginning and end of the 24-week treatment period.

A total of 23 individuals completed the full study and 13 withdrew before the study was completed. Researchers assumed that the skin of those who dropped out of the study did not change after their last measurement. What they found was that wrinkles, roughness, and overall aging severity were all significantly reduced in the retinol-treated arm compared with the arm not treated with retinol. In addition, the skin biopsies revealed that retinol increased the production of glycosaminoglycan and procollagen, both of which are structural components of the skin.

"Topical retinol improves fine wrinkles associated with natural aging," writes Reza Kafi, M.D., one of the authors of the study. The overall conclusion was that topically applied vitamin A improved the thin skin of elderly people by increasing the synthesis of more collagen in subjects whose skin had experienced significant sun exposure, as well as in those who had normal sun exposure. And vitamin A did this without causing significant skin irritation. The research is described in the May issue of *Archives of Dermatology*. 
CREATINE PROVES USEFUL IN TREATING DISEASE

When you think of creatine, a wildly popular supplement among weekend and professional athletes alike, you’re very likely to picture a bodybuilder with bulging muscles. And why not? With its promise of improved sports performance and dramatic muscle gain, creatine has generated more interest and controversy than almost any other dietary supplement on the market.

There is, in fact, plenty of scientific evidence to suggest that creatine can improve performance in exercises or sports that require short, repeated bursts of high-energy activity.

For example, creatine may provide an energy boost to the muscles of a weightlifter during extended repetitions or a point guard repeatedly driving the lane.

In one study of 16 physical education students, those who received 20 grams a day of creatine for about a week were more capable of maintaining their speed during a cycling exercise than those not taking creatine. The students were asked to pedal on a stationary bike for six seconds at a stretch, repeating the exercise 10 times and taking 30-second breaks between each attempt.

A similar study of 14 active men published in the *Journal of the American Dietetic Association* in 1997 looked at creatine supplementation and repetitive, high-intensity resistance exercises involving the bench press and jump squats. The authors reported that taking 25 milligrams a day of creatine for one week not only enhanced muscular performance during the resistance exercises but also increased body mass.

Several studies have found a lower risk of training-related injuries among athletes who used the supplement, and a 2002 European study reported that creatine supplementation could actually speed rehabilitation for injured athletes.

These patients, who were immobilized in a leg cast for two weeks, were given a dietary supplement of creatine before immobilization and then daily throughout their rehabilitation. Every one of them showed faster recovery of strength and muscle mass than the patients who were not receiving creatine.

But apart from its uses in bodybuilding and athletics, creatine may prove beneficial in the treatment of certain diseases involving the muscles or nerves, including Huntington's disease, Lou Gehrig's disease, and congestive heart failure.

A study funded by the Muscular Dystrophy Association and conducted by researcher M. Flint Beal of Cornell University Medical Center demonstrated that creatine was twice as effective as
Riluzole in extending the lives of mice with amyotrophic lateral sclerosis (ALS, or Lou Gehrig's disease). Riluzole is a prescription drug approved by the Food and Drug Administration for treatment of the disease.

In a related study, Canadian researchers Mark Tarnopolsky and Joan Martin of McMaster University Medical Center in Ontario found that creatine can cause modest increases in strength in people with a variety of neuromuscular disorders.

In a review article, Tarnopolsky cited “neuroprotective effects, which have been proposed to be of benefit in Parkinson’s disease, Alzheimer’s disease, ALS, and after ischemia [restricted blood flow].” He concluded that creatine appeared to have the potential to lessen age-related muscle atrophy and strength loss, as well as to protect against nerve disorders.

Shortly after Tarnopolsky’s review, the FDA granted “orphan drug status” to creatine as a treatment for patients with Lou Gehrig’s disease, based on creatine’s demonstrated ability to enhance cellular energy production. In addition, a European patent has been issued for the use of creatine compounds to prevent aging effects and to treat muscle atrophy.

Several studies have reported that creatine supplementation is also associated with improved heart muscle strength, body weight, and endurance in patients with congestive heart failure. Supplementation is also said to increase creatine in skeletal muscle in these patients, helping to increase strength and endurance.

It is important to note that while creatine is not considered a cure for any of these conditions, it may be helpful in alleviating symptoms such as muscle weakness and fatigue or possibly even extending survival.

The primary reason creatine has gained so much attention is that it can increase the amount of energy available to working muscles. Creatine is used by the body to make a chemical compound called adenosine triphosphate (ATP), the immediate fuel source used by muscles during short but intense bursts of activity.

Through its conversion into phosphocreatine, a related substance, creatine appears to delay muscle fatigue by resupplying muscles with ATP. Because creatine can be stored for later use by the cells, consuming extra amounts of it may create a deeper reserve of energy for muscles and other tissues.

Creatine is naturally synthesized in the body from amino acids, primarily in the kidney and liver, and transported in the blood for use by muscles. Roughly 95 percent of the body's total creatine content is located in skeletal muscle. Creatine is also found in meat and fish, with most U.S. adults consuming 1-2 grams daily on average.

For those seeking to enhance their performance via creatine supplementation, a typical dosage consists of a loading dose of 10–30 grams a day (divided into several doses) for four to six
followed by a maintenance dose of 2–5 grams a day.

Some experts contend that the loading dose is unnecessary and that smaller dosages (3 grams a day) will achieve the same effects if taken for several weeks.

The most common side effect of taking creatine is a slight weight gain due to water retention. Nausea, cramping, dehydration, diarrhea, and increased blood pressure have also been reported.

Anyone considering supplementing with creatine should follow these guidelines:

- Do not take it immediately before or during exercise
- To prevent dehydration, drink plenty of fluids (6 to 8 glasses a day) while using creatine
- Taking creatine with large amounts of carbohydrates may increase its effectiveness, but caffeine may decrease the effects of the supplement.
- Creatine should be used with caution in children under age 16, women who are pregnant or Breast-feeding, and people with liver disease
- People with kidney disease should not use creatine without medical supervision

Since most of the research on creatine has been conducted in healthy young men, there is limited information about how age or gender may affect its use.

But the research that does exist is encouraging.

Scientists at the University of Saskatchewan conducted a double-blind study of the effects of creatine and a weight-training program in men over the age of 70 and discovered a significant advantage among those who used creatine compared to those taking a placebo. Those taking creatine had increased lean body mass, a reduction in body fat, and increased muscular strength, and endurance.

A significant amount of research is still needed to determine the long-term effects of taking creatine, as well as what the presence of existing diseases can have on its overall effectiveness.

**HIGH FIBER AND COLON CANCER**

You’d think the debate over whether getting more fiber in your diet can protect you from colon cancer would have been settled by now.

But it isn’t. At least, not in the minds of many so-called experts.

While it’s fairly well established that a diet high in fiber can reduce the risk of heart disease, high blood pressure, and diabetes, some scientists now claim that this same diet does not lower your risk of colon cancer.
In fact, several recent studies have suggested that there is absolutely no connection between fiber and a lower risk of colon cancer—sort of. If you read these studies carefully, you’ll find there’s less there than meets the eye.

For example, a study done at the National Cancer Institute (NCI) put 958 people on a low-fat, high-fiber diet. Another 947 people were given information on how to eat healthy and told to follow their usual diets.

All the participants had had at least one precancerous polyp removed in the six months prior to the study, which meant they had a higher than normal risk of colorectal cancer. After four years, researchers concluded that the risk of developing another polyp was the same in both groups. Fiber had no effect.

Not so fast.

"All it (the NCI study) says is that at one stage over a four-year period of time the diet had no effect," says Dr. Moshe Shike of Memorial Sloan-Kettering Cancer Center. "Cancer, particularly colon cancer, may take 15 years to develop. We don't know the effect of diet on the other stages of the cancer."

The American Institute of Cancer Research (AICR) also reacted to the NCI study, saying that these findings, "should not prompt people to abandon diets that have been consistently linked to reducing the risk of colon cancer."

A second study, conducted at the Arizona Cancer Center, had similar findings. Here, the authors themselves expressed concern that three years may have not been enough time to see a difference in the two groups.

The doctors in both of these studies used colorectal adenomas—polyps that can turn into tumors—to gauge the effectiveness of a high-fiber diet. Polyps were used because they appear faster, while colorectal cancer itself can take many years to develop.

A spokesman for the AICR further speculated that because the average age of NCI study participants was 61, the results may simply indicate that dietary changes need to be made early in life.

Compare this with the more convincing evidence produced by two studies published in the same issue of the British medical journal Lancet.

First, let’s look at the European Prospective Investigation into Cancer and Nutrition (EPIC) study, which had more than 500,000 participants.

The aptly named EPIC study enrolled healthy adults ranging in age from 25 to 70 living in 22 different communities in 10 different countries.
Their data included comprehensive dietary information—nearly 2 million person-years of accumulated follow-up since 1992. During that period, more than 1,000 cases of colorectal cancer were confirmed. Results: Those in the highest quintile of fiber intake consistently showed a significant reduction in risk.

Simple, direct, believable.

In the second study, researchers compared the fiber intake of about 34,000 participants in a large cancer screening trial who had no polyps to a second group of about 3,600 participants who were found to have at least one polyp in the distal bowel.

Questionnaires were used to gather demographic information and detailed information about food intake. Total dietary fiber intake ranged from 12.6 to 36.4 g per day.

The risk of adenoma (a precursor to cancer) was found to be inversely related to fiber intake. What this simply means is that those who ate more fiber had a lower risk of developing cancer. They also reported that grains, cereals, and fruit produced the best results.

Both studies recommend increased fiber intake as a preventive measure against colon cancer. The EPIC went as far as to say that a doubling of fiber, say, to an average intake of 35 g of fiber per day could lead to a reduction of 40 percent in colorectal cancer risk.

This is consistent with numerous studies outside the U.S. that have found colorectal cancer rates to be lower in places where people consumed more fruits and vegetables, and higher in people from those same areas who changed to diets higher in fat and lower in fiber.

It’s important that we get this one right because more than 130,000 people in this country are diagnosed with colorectal cancer each year, and 56,000 will die from it.

The National Cancer Institute recommends consuming 20 to 30 grams of fiber per day with an upper limit of 35 grams. Unfortunately, according to recent USDA surveys, the average intake of dietary fiber by women 19 to 50 years of age is about 12 grams; intake by men of the same age is about 17 grams.

You don’t have to live on stewed prunes and oat bran to get the cancer-fighting benefits of fiber. You can find fiber in a wide variety of foods—including fruits, vegetables, nuts, cereals, and beans.

Here’s a yardstick to help you get a handle on how much fiber you actually take in each day: 20 grams of fiber is roughly the amount you’d consume if you ate one bowl of oatmeal, two apples, one cup of broccoli, and two slices of whole wheat bread.

The research—at least, the most credible research—says your colon will thank you.
GETTING RID OF NAGGING PAIN

More than 50 percent of Americans live with chronic or recurrent pain and just under half have experienced pain in the past two weeks, according to a survey by ABC News, USA Today, and the Stanford University Medical Center.

In this national poll, conducted by phone among a random sample of 1,204 adults, large numbers of respondents said that pain interferes with their activities and enjoyment of life, prompting them to try everything from pain meds to prayer in search of relief.

One of the most common ailments is joint pain, and neural therapy—among the most advanced and effective of all holistic healing methods—may be the answer for many people.

Neural therapy is a technique that involves the injection of local anesthetics such as procaine or lidocaine into scars, nerves, and tissues to eliminate pain.

The idea is simple. Nerves work in the body by having a normal electrical nerve flow. When nerves become damaged through surgery, injury, falls, burns, or other means, this vital nerve flow is broken—similar to a short circuit in an electrical appliance. This manifests itself as pain or dysfunction.

**Interference fields**

It is common knowledge that local anesthetics block pain. What’s new here is that local anesthetics also restore normal nerve flow. When the nerve flow is restored, the pain and other sensory problems also instantly improve or resolve entirely.

In the 1940s, Ferdinand and Walter Huneke, both physicians, developed the concept of neural therapy. They believed that injecting local anesthetics could affect distant parts of the body.

The Huneke's came to refer to scars as "interference fields" because they created interruptions of the normal nerve cell electrical balance. Injections of local anesthetics are meant to eliminate the interference and restore the body's natural energy flow. Injections may be given into nerves, acupuncture points, glands, scars, and trigger points.

A course of treatment may involve one or more injections spread over several weeks. Some practitioners use electrical current and lasers instead of injected drugs.

**Gallbladder pain**

Gallbladder attacks can be so scary that it’s easy to see why so many people opt for gallbladder surgery after experiencing even one. But there are a few things you can do short of surgery that can bring relief.
The gallbladder, a little pear-shaped pouch tucked behind the lobes of the liver, exists primarily to store up the cholesterol-rich bile that is secreted by the liver. Bile helps your body digest fatty foods, such as that steak you ate last night. Once the meat reaches your intestines, the gallbladder sends bile to saturate it and help it make its way through the rest of the digestive process.

A gallbladder attack, whether in acute or chronic cholecystitis (inflammation usually due to a gallstone), begins as severe, steady pain, usually in the right upper part of the abdomen. The patient typically feels a sharp pain when a doctor presses on that area. The pain may worsen when the person breathes deeply and often extends to the lower part of the right shoulder blade.

Typically, an attack of cholecystitis subsides in two to three days and completely disappears in a week. If the attack persists, it may signal a serious complication.

The pain of gallstones can be relieved by the application of hot packs or warm, moist pads to the upper abdominal area. If your pain is being caused by constipation, a warm-water enema at body temperature should help.

**Migraine headaches**

Traditional approaches to relieving migraine headaches employ ice, biofeedback, and relaxation techniques, all of which may be helpful in stopping an attack once it has started.

If the pain is very severe and does not respond to other agents, physicians may try painkillers containing opioids (e.g., morphine, codeine, meperidine (Demerol), or oxycodone (Oxycontin)).

Side effects for all opioids include drowsiness, impaired judgment, nausea, and constipation. There is also a risk of addiction, and the powerful painkillers can become ineffective with long-term use for chronic migraines.

Another approach is called prolotherapy. "Prolo" is short for proliferation, which makes perfect sense because the treatment causes the proliferation (formation) of new ligament tissue in areas where it has become weak. Ligaments are the structural "rubber bands" that hold bones to bones in our joints.

Prolotherapy uses a dextrose (sugar water) solution that is injected into the ligament or tendon where it attaches to the bone. This causes a localized inflammation in these weak areas, which then increases the blood supply and flow of nutrients and stimulates the tissue to repair itself.

**Abdominal aches**

Many different conditions can cause abdominal pain. The key is to know when you need to seek medical attention right away. In many cases, you can wait a while, try some home care remedies, and then call your doctor later if symptoms persist.

Possible causes of abdominal pain include chronic constipation, lactose intolerance, stomach flu, irritable bowel syndrome, indigestion, ulcers, diverticulitis, food poisoning, and hernia, to name but a few.
An interesting thing about pain is that its intensity does not always reflect the seriousness of the condition that causes it.

For example, severe abdominal pain can be due to mild conditions such as gas or the cramping of viral gastroenteritis. On the flip side, you may experience relatively mild pain or no pain at all in the face of life-threatening conditions such as cancer of the colon or early appendicitis.

When an inflamed organ in the abdomen ruptures or leaks fluid, you not only have excruciating pain, but your abdomen will also be very stiff and you will likely have a fever. This occurs when you have peritonitis due to an infection spreading in the abdominal cavity from a ruptured organ, like the appendix. This is a medical emergency.

If the pain is high up in your abdomen and occurs after meals, antacids may provide some relief, especially if you feel heartburn or indigestion. Avoid citrus, high-fat foods, fried or greasy foods, tomato products, caffeine, alcohol, and carbonated beverages.

You may also want to try H2 blockers such as Tagamet, Pepcid, or Zantac, all of which are available over the counter. If any of these medicines worsen your pain, call your doctor right away.

Things to avoid: aspirin, ibuprofen, and narcotic pain medications—unless your health care provider prescribes them. If you know that your pain is not related to your liver, you might also try acetaminophen (Tylenol).

Peppermint, taken as enteric coated capsules or as peppermint tea, can be extremely beneficial for relieving and preventing irritable bowel syndrome abdominal pain.

**Psychology of pain**

Just as there are some people who are "accident prone," psychologists say there are people who are "pain prone."

Mental health professionals have identified a cluster of personality traits that is more common in people who develop chronic pain, including chronic back pain. These include a deeply felt sense of duty and responsibility to others and a strong work ethic of dedication and reliability.

The following conditions are also associated with a pain-prone person: a history of physical, emotional or sexual abuse; recent loss or trauma; acute or excessive and prolonged stress; social isolation or poor support system, poor social and coping skills, or chronic problems of anger, depression, or anxiety.

To counterbalance this, experts suggest developing strategies to cultivate a more positive attitude, manage stress better, and develop a sense of independence in order to lessen pain.
The skin around your eyes is the most fragile skin on your entire body. That’s why it’s the first and most noticeable area to exhibit the signs of aging—wrinkles, bags, puffiness.

Rather than spring for expensive anti-aging creams, there are a number of natural ways to fight the effects of growing older:

**Take your vitamins.**
Vitamin C (ascorbic acid) is essential for synthesizing collagen, a natural protein that makes up 75 percent of our skin. Vitamin C is also a natural diuretic, which helps remove excess water from the body that can cause swelling under the eyes. You might want to consider taking a form of Vitamin C that contains bioflavinoids. At least 500 milligrams (mg) per day is recommended.

Vitamins in the B family are very important for many functions of the body, including helping you deal with stress that can ultimately lead to tired eyes. Finding ways to reduce your stress levels in general can be incredibly beneficial to your overall appearance.

And don’t forget the Vitamin E, which is a good choice because it’s a natural skin moisturizer.

**Pamper yourself**
You can revitalize your eyes simply by laying a slice of cucumber over your closed eyelids while reclining. This can be become part of a brief 15 to 20 minute rest that you take during the day—call it a “power nap” for your eyes. Cucumber contains anti-inflammatory properties to reduce redness and puffiness.

Dermatologist Andrea Kunin, M.D., a coauthor of “The DERMAdoctor Skinstruction Manual,” says green tea contains an anti-inflammatory catechin called EGCG which reduces the fluid buildup that causes wrinkles under the eyes. “Brew two bags, let cool, then use as a compress for 10 minutes,” says Kunin, who recommends using higher quality green tea because it has a lot more EGCG.

Getting enough sleep, at least 8-10 hours a day, can fade out those dark circles around the eyes. Sleeping on your back will help smooth out wrinkles as gravity works to pull the skin backward. If you can’t sleep on your back, at least try to switch sides frequently and elevate your head.

**An ounce of prevention**
Crow’s-feet are wrinkles or tiny lines at the corner of the eyes. Once they appear, it is difficult to make them go away without the aid of injections or cosmetic surgery. Better to prevent them from happening in the first place.
One way to do this is to wear a sunscreen with a sun protection factor (SPF) of 15 or more to avoid the ultraviolet rays that can cause wrinkles. And always wear sunglasses when you go out in the sun.

Consuming antioxidants—such as glutathione, selenium, and zinc—can play part in reducing damage from free radicals, such as the deterioration of the skin's support structures, decreasing elasticity, and resilience.

Antioxidants are readily available in plant and tea extracts. You can also increase your intake of antioxidants with supplements, combining this with plenty of fresh fruit and vegetables in your diet.

Water, a vital part of any health regimen, is terrific for your skin. Drinking lots of water prevents your body from retaining water and helps to keep all of your basic bodily functions working properly. A good rule of thumb is eight to 10 glasses (64-80 ounces) every day.

The simple act of washing your face increases circulation and improves cell regeneration. And splashing cold water on your face after you’ve washed it will close the pores and tightens your skin.

**Put a lid on it**
There are workouts for every other part of your body. Why not workouts for your eyes? Use this exercise to tone and lift your upper and lower eyelids. Your eye sockets will become more defined and they will appear larger.

Place your index fingers on your eyebrows and your thumb a little more than a centimeter below each eye. With your fingers and thumbs resisting the motion, close your eyes and keep them closed while you count to 40. Do this two times a day. Be careful to place only slight pressure with your index finger, because the skin under your eyes is very thin and should be treated gently.

As for commercial skin care products, proceed with caution. This is especially true for products that will be applied around the eyes. At the very least, make sure they are pH balanced and hypoallergenic. And never apply any creams, lotions, or cosmetics over the inside corner of your eye, where the tear duct is. Clogging the tear duct can cause irritation, swelling, and puffiness below the eyes.

Whatever else you do, avoid commercial skin toners like the plague. Roughly 95 percent of these products contain alcohol, which dries out the surface of the skin and strips away the natural oils (Many even contain acetone, the chemical that removes nail polish).
Injectable human growth hormone—otherwise known as HGH—gets a lot of press these days. Hollywood celebrities young and old swear by it as a quick and easy way to fight the inevitable signs of aging. HGH promises younger-looking skin, stronger bones, more energy, greater muscle tone, less fat, and enhanced sex drive—and it usually delivers on those promises.

Unfortunately, the body’s own production of human growth hormone peaks during adolescence before beginning a gradual decline as we grow older. For example, a 20-year-old may secrete four to five times more HGH than a 60-year-old.

Produced in the back of the pituitary gland inside the brain, HGH influences the growth of cells, bones, muscles, and organs throughout the body. A significant amount of research has shown that human growth hormone injections can increase muscle mass and reduce body fat—even in healthy older adults.

On the other hand, taking human growth hormone by injection has been known to cause a number of unwelcome side effects, such as swelling in the arms and legs, headaches, muscle pain, arthritis-like symptoms, bloating, diabetes, high blood pressure, abnormal growth of bones and internal organs, and hardening of the arteries.

The good news is that there are a number of other less-invasive and much safer ways to stimulate the body’s production of human growth hormone, including three amino acids known as L-arginine, L-ornithine, and L-glutamine.

Here’s what each one of them can do in supplement form:

L-arginine is an essential amino acid that causes the production of growth hormone by blocking the secretion of the growth-hormone inhibitor somatostatin. In fact, endocrinologists typically use a 15 to 30 gram intravenous infusion of L-arginine as a standard test to provoke the pituitary gland into releasing growth hormone.

A study at the University of Turin in Italy showed that even though people in their 70s had lower response than children or young adults to L-arginine, the nutrient still was able to boost their blood levels of HGH to triple the average for their age group.

L-arginine also improves exercise performance because it is one of the main ingredients the liver uses to make creatine. Positive claims for L-arginine include increasing fat-burning and building muscle tissue.
Another amino acid known as L-ornithine is necessary for the proper functioning of the immune system. It also helps to elevate levels of HGH and assists in repairing muscles and tissues. And since strenuous workouts actually tear down muscle tissue, this supplement will speed your recovery along.

In addition, L-ornithine decreases body fat, stimulates the pancreas to release insulin, and may be beneficial in overall weight loss.

Insulin is important to athletes because it increases the absorption of amino acids and glucose by the muscles, which helps in both growth and recovery. And it keeps your energy level high by making sure that your blood sugar levels remain constant.

The latest and perhaps most highly touted amino acid to be identified as an HGH-releaser is L-glutamine. This is due in large part to a study done by Thomas Welbourne of Louisiana State University College of Medicine in Shreveport.

Welbourne showed that a surprisingly small oral dose of glutamine raised growth hormone levels more than four times over that of a placebo.

The most effective and economical way of causing this release of human growth hormone seems to be taking 2 grams of L-glutamine in the morning and taking 10 to 30 grams of L-arginine before bedtime. Both of these amino acids must be taken on an empty stomach.

Although there has been only one scientific study showing that L-glutamine causes HGH release, there is a large body of anecdotal evidence from anti-aging physicians and their patients that L-glutamine is actually effective in persons under age 45.

L-glutamine is the most abundant amino acid in the body and can be found in high-protein foods such as fish, beef, chicken, beans, and dairy products. It is the amino acid most used by the body, particularly during times of stress.

In a survey of 33 people over the age of 60, those with the highest blood glutamine levels had fewer illnesses, lower cholesterol, lower blood pressure, and were closer to their ideal weight than people at the bottom of the glutamine scale. The low-glutamine subjects also had higher rates of arthritis, diabetes, and heart disease.

Douglas Wilmore, M.D., of Harvard Medical School, points out that glutamine is a key to the metabolism and maintenance of muscle, the primary energy source for the immune system, and essential for DNA synthesis, cell division, and cell growth, all factors that are enhanced by HGH.

Your immune system and your gut practically live on glutamine, which means that if the body does not produce enough of it, muscle loss and immune dysfunction can occur, which is serious. If your gut should atrophy, then nutrients of all kinds cannot be absorbed as well as before.
PRESSURIZED OXYGEN SHOWS PROMISE

There are a number of reasons you might want to try HBO, but not one of them has anything to do with “The Sopranos.”

In this case, HBO stands for something called hyperbaric oxygen therapy. “Hyperbaric” means occurring at pressures higher than normal atmospheric pressure:

The procedure works like this: Pure oxygen is delivered at a pressure several times greater than the atmospheric pressure found at sea level while the patient is enclosed in a sealed pressurized chamber about the size of a tanning bed. The patient breathes in 100 percent pure oxygen while under a hood or wearing a mask.

Pumping pure oxygen into your system at high pressure is reported to do a number of good things for your body. Proponents say it helps remove free radicals, reduces tissue swelling, bolsters the immune system, and wakes up sleeping (idling) brain cells that are metabolizing enough to stay alive but are not actively "firing.”

HBO may also enhance the body’s ability to fight bacterial and viral infections, deactivate toxins and poisons—for example, as a result of some chemotherapy—and improve wound healing by stimulating the growth of new capillaries into the injured area.

**Improved circulation**

As we get older, we not only get less oxygen into our bodies, but our bodies also lose the ability to use it as efficiently. Disease and injury can also affect how well we use oxygen.

For example, injuries with swelling can cause excessive pressure that cuts off healthy circulation flow. Swollen tissue can cause a loss of oxygen circulation (ischemia) to areas of the body, dropping the oxygen level dangerously low, destroying tissue, and slowing down healing.

In fact, actor Sylvester Stallone, who turned 60 in 2006, reportedly spent a couple of nights in a hyperbaric chamber during the filming of “Rocky Balboa” to recover from some of the intense pounding he was taking in the ring.

Breathing in oxygen at high pressure causes the blood vessels to constrict, which decreases swelling in injured tissues and decreases pressure on the brain. This effect is useful in treating burns and crush injuries, as well as acute brain and spinal cord injuries. The extra oxygen that is delivered in hyperbaric therapy diffuses directly into the plasma and can help patients with blood loss and anemia.
Over the past 40 years hyperbaric oxygen therapy has been recommended and used in a wide variety of medical conditions such as slow-healing wounds, migraines, brain injuries, chronic fatigue, and Cerebral Palsy.

It may even be able to reverse the effects of a stroke.

Since 1971, more than 1,000 cases showing a 40 to 100 percent rate of improvement for stroke victims receiving oxygen under pressure have been reported in scientific journals.

**Starving brain cells**
Flushing the brain's stroke-damaged tissue with pure oxygen, even years after a stroke, can make the difference between disability and healthy functioning, experts say.

"If you can get more oxygen to the brain within the first 24 hours of having a stroke, you can often stop most of the damage and salvage a great deal of brain tissue, eliminating 70 to 80 percent of damage," says David A. Steenblock, M.S., D.O., director of the Health Restoration Medical Center in Mission Viejo, Calif.

Dr. Steenblock, one of the country’s leading practitioners of hyperbaric oxygen therapy to reduce the effects of stroke and brain injury, says that every emergency room in the United States should have a hyperbaric oxygen chamber and that every U.S. physician should learn how to use it.

In the case of a stroke, early treatment is essential for maximum benefit. Even treating a patient within the first three weeks of a stroke can help minimize damage. What is even more amazing, Dr. Steenblock has seen positive results treating people as long as 15 years after their stroke.

Stroke, which is defined as a sudden disturbance of blood flow to the brain, is the third leading cause of death in the United States and the leading cause of adult disability. Approximately 500,000 Americans suffer a stroke each year.

In effect, a stroke is a "heart attack" in the brain. Typically, an artery blocked by a blood clot interrupts the flow of blood and oxygen to part of the brain, causing tissue death by starving the brain cells of oxygen. This is called an ischemic stroke, and it represents about 70 percent of all stroke cases.

There are roughly 1.7 million stroke survivors in the United States, 75 percent of whom are aged 55 to 84. About 10 percent are able to return to work without a disability; 40 percent have a mild disability, 40 percent are severely disabled, and 10 require hospitalization.

**A case study**
Barbara, 62, had a stroke that completely paralyzed her right arm and left her severely bent over, limping, with a pain in her right leg, and unable to control her urination. She underwent
physical therapy and took conventional prescription medications, but nothing helped. She remained in this condition for 42 months before seeing Dr. Steenblock.

He started her on a series of 60 treatments in a hyperbaric oxygen chamber over a period of 12 weeks. She breathed pure oxygen for an hour through an oxygen mask while lying down inside a sealed chamber that resembles a miniature submarine.

In fact, hyperbaric oxygen can deliver eight to nine times more oxygen to the capillaries compared to the amount of oxygen we get breathing normal air, says Dr. Steenblock: “With 100 percent oxygen under pressure, oxygen is dissolved into the red blood cells and into body and brain fluids."

The goal is to get as much oxygen into the brain as possible to revive oxygen-starved brain tissue that was damaged but not entirely destroyed by the stroke (The same principle holds true for traumatic brain injury). Some of the brain tissue is irreversibly destroyed—brain cells deprived of oxygen usually die within 10 minutes— but a larger portion is potentially revivable.

Most of the damage done by a stroke is due to swelling and injury to surrounding brain tissue. This tissue is not dead but dormant, surviving on as little as 15 to 20 percent of its normal oxygen supply. Restoring blood flow and flooding this area with oxygen offers a good chance to return "hibernating" brain cells to function.

But this takes time.

"It may take upwards of two years of this therapy for all these cells to regrow, reconnect, and start to function again," says Dr. Steenblock. “But you're going to keep on seeing improvement."

After one month of treatment, Barbara showed clear signs of progress. Her walking improved noticeably and, instead of shuffling her feet, she could raise her right heel off the ground and move with a smoother gait. Her posture also was more erect. She was able to open and close her right hand, and use it to grip and squeeze objects. She could also raise her arm to chest level.

**Renewed interest**

Hyperbaric oxygen therapy got its start in the early 1900s when Orville Cunningham, a professor of anesthesia at the University of Kansas, noticed that people with some heart diseases did better if they lived closer to sea level rather than at high altitudes.

Cunningham successfully treated a colleague with influenza who was near death, and he went on to develop the hyperbaric chamber. He later failed in his attempts to use this therapy to treat a host of other conditions, and the method was abandoned.

HBO chambers reappeared during the 1940s as a way for the military to treat deep-sea divers who suffered from decompression sickness.
When divers surface too quickly, the partial pressure of nitrogen dissolved in the tissues may cause gas bubbles to form in the blood and the tissues. Breathing oxygen at three times normal pressure helps displace those nitrogen bubbles trapped in the body.

In 1962, scientists began to report the enormous benefits of hyperbaric oxygen in treating carbon monoxide poisoning, which sparked renewed interest in the procedure. As a result, hyperbaric units were built at Duke University, New York Mount Sinai Hospital, Harvard Children's Hospital, and St. Luke's Hospital in Milwaukee, among many others.

Believe it or not, carbon monoxide is the number one cause of accidental poisoning deaths in America, claiming nearly 500 lives and sending more than 15,000 people to the emergency room each year.

A single session of hyperbaric oxygen therapy will usually reverse the potentially life-threatening effects of carbon monoxide poisoning, but additional treatments may be needed to reduce any delayed impact on the brain and nervous system.

Here’s how it happens: The flooding of the body with any one gas tends to "wash out" all others. This occurs more rapidly under pressure than under ordinary conditions, which makes HBO an great treatment for carbon monoxide and related cyanide poisoning (industrial fires have smoke that often contains cyanide).

Restoring cell growth
An improvement in wound healing after surgery has been observed in patients with irradiated tissue—usually as a result of cancer-related radiation treatments—who received hyperbaric oxygen therapy prior to surgery.

Medical professionals suspect that the higher partial pressures achieved with hyperbaric oxygen may stimulate new growth and healing in damaged irradiated tissue that has lost the capacity for restoring proper cell growth.

In addition, hyperbaric oxygen helps improve outcomes in wounds that might otherwise progress toward amputation.

“Hyperbaric oxygen can indeed save lives and limbs,” says Michael Capria, director of Tampa Hyperbaric Enterprise. Several studies have shown improved healing and a lower incidence of amputation with four to 30 sessions.

The science of oxygen
Some people have compared the experience of being in a hyperbaric chamber to that of being a passenger on an airplane at high altitude—without the movement, of course.

Inside the hyperbaric chamber, pressure is usually increased to about two to three times standard atmospheric pressure, which is equivalent to being 18 to 20 feet under water. Treatments may last anywhere from 45 to minutes to five hours, and patients may receive as many as 40 sessions.
During a session, you will be breathing in double to triple the number of molecules you would ordinarily breathe outside (Hyperbaric pressure makes your breathing more efficient). As a result, you will actually be getting 10 to 15 times your regular amount of oxygen. In just a few minutes, this extra oxygen can build up tissue oxygen levels far above normal.

Under everyday conditions, red blood cells can only deliver a limited level of oxygen to tissue cells—40 mmHg or less. For optimal healing, it’s necessary to raise tissue oxygen tension to 80 mmHg, and this can only be done in a high-pressure environment.

**International acceptance**
Health care professionals in Europe and Asia have embraced this procedure in a big way.

- In Italy, hyperbaric techniques are so widely practiced that some physicians have been disciplined for failing to give hyperbaric therapy in situations where it clearly would have been helpful. Italy has about a third of all hyperbaric installations in Europe.

- Russia is believed to have as many as 1,200 hyperbaric chambers currently in operation. HBO therapy is being employed in almost every branch of clinical medicine in more than 60 medical institutions, either as an extra therapy or as a basic treatment.

- The first Chinese hyperbaric chamber was built in 1964 by Wen-ren Li, M.D, and there are now more than 800 hyperbaric chambers in use in China. The number of people who have been treated with this therapy exceeds 3.5 million.

Generally speaking, as long as pressures do not exceed 300 kPa (kilopascal units) and the length of treatment is less than 120 minutes, hyperbaric oxygen therapy is considered safe. The most common side effect is reversible myopia, which is due to oxygen toxicity on the lens of the eye. This can last for weeks or months.

As a precaution, make sure that someone is monitoring your treatment and that there are facilities available for resuscitation and immediate mechanical ventilation.
A compound based on a licorice extract helps boost verbal memory in older men, according to a study reported in the reference journal *Proceedings of the National Academy of Sciences.*

The compound is called carbenoxolone, which has been widely used to treat stomach ulcers. But when researchers at the University of Edinburgh in Scotland gave it to men aged between 55 and 75, they found that it sharpened their verbal memories in a matter of weeks.

"You get subtle but definite improvements," said Professor Jonathan Seckl, who headed the small study. Verbal memory is necessary for remembering recently received information—for example, recalling the time of an appointment.

The study involved 10 healthy men and 12 men with type 2 diabetes. People who have diabetes are more likely to suffer poor memory or dementia.

The men were given either carbenoxolone or a placebo three times a day for four weeks, after which their verbal skills and memory were tested. Seckl and his colleagues noted a significant improvement in verbal skills and memory among subjects who had taken carbenoxolone compared with the placebo group.

After six weeks, verbal memory had also improved in those men with type 2 diabetes. No side-effects were reported. There was also no indication that carbenoxolone could improve overall brain function, such as raising IQ.

Carbenoxolone works by blocking the activity of a brain enzyme that boosts levels of the stress hormone cortisol, which is believed to be responsible for the decline in memory as a person grows older.

This natural memory decline occurs even among people who are in good health. One explanation is that the stress hormone cortisol gradually causes the brain to “wear out” over the course of a person’s life.

In fact, at least 10 percent of those in their 70s report having severe memory problems, while almost a third of people that age say they have difficulty remembering such routine things as where they left their keys.

The more stress hormones that are present, the more damage there is to the part of the brain responsible for learning and memory, an area with more cortisol receptors than other parts of the brain. If left unchecked, cortisol can destroy some of the interconnections between brain cells. Researchers found that carbenoxolone prevents this from happening.
Because the active component of carbenoxolone can have serious side effects, such as causing high blood pressure, the research team administered another drug alongside carbenoxolone to reduce this adverse effect.

Seckl said that if larger studies proved successful, it could pave the way for carbenoxolone to be used to treat dementia.

In the meantime, licorice root extract continues to be effective in treating stomach ulcers, despite the associated risk of high blood pressure.

Deglycyrrhizinated Licorice (DGL)—which is specifically processed to have the potentially harmful component glycyrrhizin removed—has been shown to improve the natural mucus lining of the stomach and intestinal wall by stimulating protective factors that guard against weakness in these linings.

**REPETITIVE STRESS TAKES TOLL ON TENDONS**

It’s safe to say that the number one tennis player in the world, Roger Federer, has hit a lot more tennis balls in his lifetime than the average Wimbledon wannabe. Hundreds of thousands, if not millions, of shots.

The same goes for Tiger Woods and golf balls.

So why is it that they don’t have tennis or golf elbow—and you do?

One answer is that the muscles they use in their tennis and golf swings have been strengthened over time. The second reason is that they employ proper technique, which puts less strain on the tendons than we hackers tend to do.

Third, they take care of themselves the way top trainers take care of a thoroughbred race horse, making sure they get lots of rest and always warming up sufficiently before they compete.

Unfortunately for the rest of us, tendonitis, the medical term for these elbow problems, is a sports injury that amateur athletes are likely to experience at one time or another. The most common cause is overuse, also called cumulative trauma or repetitive stress.

Anyone who’s ever had tendonitis will tell you it can bring on deep, nagging pain. The pain is caused by inflammation of the tendons, which are tough, fibrous tissues throughout the body that connect muscles to bones. Some people have pain that radiates all the way down the arm, making it difficult to lift or grasp objects.

Along with tennis elbow and golf elbow, tendonitis can affect such areas of the body as the Achilles tendon, rotator cuff, kneecap, and wrist.
In fact, tendonitis frequently happens to new exercisers who try to do too much, too soon without enough down time in between. Normal aging contributes to tendonitis pain as well because tendons lose their elasticity over the years and become more prone to injury.

Besides repetitive movements found in other sports, such as swimming and bowling, many movements occur in the workplace that produce tendonitis pain in the elbows, knees, hips, shoulders, and fingers. The best known of these is carpal tunnel syndrome, often a result of spending too much time at a computer keyboard.

**Treatment options**

Traditional methods of treating tendonitis generally begin with resting the stressed tissues. Reducing the intensity, duration, or frequency of a particular activity will sometimes be all that’s needed to get relief. Icing the injury can help reduce inflammation and pain.

Nonsteroidal anti-inflammatory drugs (NSAIDs)—such as indocin (by prescription) and ibuprofen (over the counter)—may help reduce pain and inflammation. An alternative is to get Lidocaine or corticosteroid injections directly into the tendon (These injections cannot be used for weight-bearing tendons because of risk of rupture).

Occasionally, there is an underlying mechanical reason that someone will develop tendonitis. In these cases, an orthopedist may recommend surgery to realign or smooth the area the tendon slides over.

**Creating collagen**

A frayed tendon can be repaired by a nonsurgical procedure called “prolotherapy,” which is short for "proliferation therapy." As the name suggests, prolotherapy rapidly produces collagen, a naturally occurring protein in the body that is necessary for the formation of new connective tissue—such as tendons.

Prolotherapy helps make collagen through a series of injections of mild chemical or natural irritants (such as dextrose-sugar) that stimulate the immune system's healing mechanism to produce collagen naturally (see www.getprolo.com).

Another nonsurgical approach to tendonitis is a soft-tissue therapeutic massage technique called Bowen therapy, named after its creator. Australian Thomas Bowen developed a series of gentle moves over muscle and other tissues that work primarily through the nervous system to stimulate the body to heal itself (to learn more, visit www.bowtech.com).

Supplementing your daily diet with 1,500 mg of calcium and 750 mg of magnesium will aid the healing of connective tissues and muscles. Bromelain, an enzyme found mostly in the stems of pineapples, is also available as a dietary supplement. Anywhere from 250 to 750 mg (three times a day between meals) can help reduce swelling.

Curcumin (Curcuma longa), the pungent yellow spice found in both turmeric and curry powder, can help reduce inflammation. Curcumin can be used in capsule form (200 to 400 mg three times a day between meals) or as a tea. Put 1 to 1.5 grams of dried root into a cup of boiling water for 15 minutes and drink twice daily.
Willow bark tea, an ancient Chinese remedy, works like aspirin to relieve pain. Two to three teaspoons in a cup of boiling water three times a day should do the trick. (Caution: If you are allergic to aspirin, do not take willow bar or other aspirin-like herbs.)

**Vitamin K Improves Bone Health**

When the subject turns to bone density, men usually stop listening.

But while osteoporosis affects a far larger number of women, there are approximately 2 million men in the United States who have this disease and another 12 million who are at risk.

Typically, a person—male or female—reaches maximum height during the teen years, and bones continue to grow more dense until about age 30. After that point, bones will slowly start to lose density (strength). Men have larger, stronger bones than women, which is part of the reason why osteoporosis affects fewer men than women.

Many experts say that osteoporosis in men is one of the most underdiagnosed, underreported, and inadequately researched areas of health care.

In an interesting study conducted in France, scientists examined the effects of prolonged space missions on bone formation in two Russian cosmonauts. What they found was that eating broccoli—which is a prime source of vitamin K—can help to keep bones healthy and could be vital in helping astronauts to survive in space.

Researchers from Jean Monnet University in Saint Etienne made their discovery after studying two men who had been on different missions to the Russian space station Mir and had spent months living in an environment without gravity.

The French scientists found that an essential ingredient needed to promote healthy bone growth was seriously reduced in both cosmonauts within days of their arrival in space.

This active ingredient, which is called osteocalcin, needs vitamin K to promote growth. The researchers determined that the body was unable to retain this vitamin in any sizeable quantity in space—resulting in bone loss.

However, when one of the cosmonauts took daily doses of vitamin K, the problem disappeared and his body was able to maintain proper bone strength.

These findings have major implications for astronauts, as there have been fears that humans
would be unable to spend long periods in space because of the effects of a lack of gravity on bones.

A related U.S. study reported that living in conditions of near zero-gravity places less stress on bones, causing them to weaken. This exposes astronauts to severe bone loss which, in turn, leaves them extremely vulnerable to major bone fractures.

Even if you aren’t planning to join the space program, vitamin K—or the lack of it—has been increasingly shown to play a significant role in human health that goes far beyond its well-established function in blood clotting.

Numerous studies have demonstrated that vitamin K can not only increase bone mineral density in osteoporotic people, but also actually reduce fracture rates.

It is also clear that Americans of both sexes are not getting enough of this key nutrient.

The recommended dietary intake of vitamin K is 90 micrograms a day for women and 120 micrograms a day for men. But only 27 percent of people in the United States consume that amount, according to a food consumption survey analysis done by the U.S. Department of Agriculture’s Human Nutrition Research Center on Aging at Tufts University in Boston.

The researchers studied vitamin K consumption data drawn from 14-day food intake diaries of a nationwide sample of about 2,000 households. From those figures, they concluded that people age 18 to 44 rarely get enough vitamin K.

One reason is that relatively few Americans have a daily diet that includes vegetables such as spinach, broccoli, kale, asparagus, lettuce, cabbage or others high in vitamin K. Other ways to get more vitamin K include supplements, both in tablet form and via injections.

A lack of vitamin K is not the only factor in determining who will develop osteoporosis. The first step in preventing this disease is to find out whether you are at risk, since not everyone is.

Risk factors for osteoporosis include:

- **Age:** Bones get weaker and less dense as you age.
- **Gender:** Women have less bone tissue and lose bone more rapidly than men due to menopause.
- **Family History:** Susceptibility to fracture may be hereditary. A history of fractures as an adult also increases your risk.
- **Race:** Caucasian and Asian women are more likely to develop osteoporosis, although African American and Hispanic women also face significant risk.
- **Bone Structure/Body Weight:** Small-boned and thin women (under 127 pounds) are more likely to get osteoporosis.
- **Menopause/Menstrual History:** Normal or early menopause increases your risk. Also, women who stop menstruating before menopause due to anorexia or bulimia may lose bone tissue and develop osteoporosis.
- **Lifestyle:** Cigarettes, alcohol, inadequate calcium, and getting little or no weight-bearing exercise increase the odds of developing osteoporosis.

- **Medications:** Certain meds for chronic conditions—rheumatoid arthritis, an underactive thyroid, seizure disorders, and gastrointestinal diseases—may have side effects that damage bone. One class of drugs, glucocorticoids, is particularly damaging to bones.

If you notice a loss of height, a change in posture, or sudden back pain, it is important to report this promptly to your doctor.

### WATER FASTING LOWERS BLOOD PRESSURE

Existing on nothing but water for long periods of time has been widely practiced for thousands of years.

The Bible notes that, among others, Jesus and Moses fasted for 40 days. They did it for spiritual reasons. Gandhi fasted for 21 days to make a political point. Even as far back as ancient Greece, great minds such as Socrates and Plato had a notion that water fasting was a path to better health.

Modern science has provided solid evidence that they were right.

In fact, according to a study published in the *Journal of Manipulative Physiological Therapy*, water fasting offers significant benefits for people with high blood pressure.

This is welcome news because high blood pressure (also known as hypertension) is the leading contributing cause of death in the industrialized world. It is also the leading reason for trips to the doctor and for the use of prescription drugs. The human and financial costs are staggering.

**Dramatic data**

The study, conducted by Dr. Alan Goldhammer, Director of the True North Health Center in Romert Park, California, enrolled 174 participants who had been diagnosed with hypertension. A diagnosis of hypertension occurs when a patient’s systolic pressure (the upper number) exceeds 140 mm Hg, or the diastolic pressure (the bottom number) exceeds 90 mm Hg.

The treatment program consisted of a short pre-fasting period (two to three days on average) during which the patients’ food consumption was limited to fruits and vegetables. This was followed by medically supervised water-only fasting (10 to 11 days on average).

During the fasting period, the physically activity of the patients was limited to conserve energy. After the water fast, patients were given a low-fat, low-sodium vegan diet (eating only foods that come from plants) for six to seven days.
The results were nothing short of amazing.

By the end of the treatment program, almost 90 percent of the subjects had blood pressure readings of less than 140/90 mm Hg. The average reduction in blood pressure was 37/13 mm Hg, with the greatest decrease being observed for subjects with the most severe hypertension.

Water fasting worked best for patients whose systolic blood pressure was greater than 180 mm Hg or whose diastolic blood pressure was greater than 110 mg Hg (or both). These subjects had an average reduction of 60/17 mm Hg at the conclusion of treatment.

What was even more astonishing was that all of the subjects who had been taking hypertension drugs before the study began (about 6 percent of the sample) were able to successfully stop using these medications.

Water fasting actually delivered roughly five times the pressure-lowering effects of medication alone.

“Medically supervised water-only fasting appears to be a safe and effective means of normalizing blood pressure,” the study’s authors concluded.

To try to determine whether these impressive effects would last, researchers collected follow-up data 27 weeks later on 42 of the original 174 subjects. What they found was that the mean blood pressure for these subjects was 123/77 mm Hg. This strongly suggests that water fasting may indeed have sustainable benefits.

**Give it a rest**

It has long been accepted that fasting is a powerful natural therapy that can help people recover from a variety of mild to severe health conditions. Some common ones include asthma, allergies, chronic headaches, irritable bowel syndrome, diabetes, arthritis, uterine fibroids, benign tumors, and lupus.

It is not uncommon for people to experience a significant improvement in their health from fasting anywhere from three to 30 days. The idea is to fast as briefly as possible, but as long as is necessary to allow the body to restore health.

Fasting is not a cure for any health condition. But it does give the body a prolonged period of rest. During a water-only fast, all of the body's resources are channeled towards the body’s self-healing mechanisms.

During a fast, blood levels of cholesterol and uric acid tend to elevate, a result of the body stirring up stores of undesirable materials and expelling them into the circulation to eventually be eliminated from the body. Shortly after the fast concludes, these levels tend to be lower than they were before the fast, indicating a cleaner system.

As a part of this detox process, some people experience vomiting, diarrhea, headaches, dizziness, skin rashes, and other unpleasant symptoms.
That’s why you should never undertake a water fast of more than one day without medical supervision. A health professional who is trained to distinguish healing responses from harmful ones can help a person "ride out" the uncomfortable symptoms of detoxification.

(Caution: Fasting isn’t for everyone. Certain liver and kidney disorders, some types and stages of cancer, states of extreme weakness or malnutrition, and pregnancy are examples of conditions that are not conducive to fasting.)

**Addressing the cause**

The scientific data showing that water fasting helps lower blood pressure means there is an attractive natural alternative to taking hypertension drugs, some of which have been linked to increased risk of heart attacks and strokes. In addition, high blood pressure drugs can affect quality of life, often causing fatigue, depression, and impotence in men.

One of the biggest problems with these drugs is that they don’t address the principle cause of high blood pressure—which is too much salt in the inner lining of the blood vessels.

Water fasting can help remove excess salt from your body, and give your digestive some badly needed time off. A healthy digestive tract helps protect the blood and inner organs against a variety of environmental and metabolic toxins.

Many people have been eating highly salted and sweetened foods for so long that they’ve forgotten what natural, unprocessed food tastes like. After fasting, they are often surprised to discover how delicious a fresh pear is or how tasty a piece of lettuce can be (minus the ranch dressing, croutons, and bacon bits, that is).

Fasting is also a natural way to reset the nervous system, providing an effective means of overcoming dependencies on caffeine, nicotine, and alcohol.

Typically, a person on a water-only fast loses about a pound per day. Weight loss may even approach two or even three pounds per day for the first few days if a person is retaining a significant amount of sodium and water.

**A sweet alternative**

A variation of the water-only fast—the juice fast—will offer many of the same benefits. During a juice fast, you can consume any variety of fruit or vegetable juice you like.

The main difference (aside from the taste, of course) is that the body will detoxify and heal more quickly with a water fast than with a juice fast. That’s because when you drink only water, your digestive passageway and organs are able to rest completely, which allows all your body’s energy to go toward cleansing and repair of damaged tissues.

With a juice fast or a cleansing diet of fruits and vegetables, your body is forced to use energy to digest the nutrients, leaving less energy for detoxification and healing.
This is an especially important point in cases where a person's health condition is related to a weak or damaged digestive system, because recovery may hinge on fully resting them, which can only be accomplished through water fasting.

If your main goal is to lose weight, you should be aware that more fat tissue is burned during a water fast, as your body must rely exclusively on fat reserves to supply its energy needs after the first 1-3 days of water fasting (Your fat reserves are where your body stores the bulk of incoming toxins).

As these reserves are burned for energy during a fast, any stored toxins will be eliminated through various channels—such as your urine and your respiratory tract. This same detox mechanism occurs with juice fasting, but at a much slower pace.

There is one practical reason to choose a juice fast over a water fast: In order for a water fast to be most effective, you must be able to get a lot of physical and emotional rest during the fasting period. If your life is full to the brim (and whose isn’t these days), juice fasting may be a more realistic choice.

A fresh start
Lots of people choose to fast simply because they know that a period of complete physiological rest can allow the body to rejuvenate itself.

But if your primary goal—your goal is to get off of blood pressure meds, you have to understand that a water-only fast—by itself—is not a long-term solution. As indicated in the study cited above, you will need to make some changes in your diet and lifestyle (that doesn’t mean you have to exclude meat, fish, and dairy, as the study participants did).

Remember, the most important part of a fast is how a person lives after the fast ends. Like rebooting your computer, water fasting can provide a foundation you can build on.

And who among us wouldn’t welcome a fresh start?
WINE’S HEALTH BENEFITS TIED TO STATUS AND SMARTS

Everybody knows that drinking wine in moderation is good for you. But are the health benefits we routinely attribute to wine a direct result of drinking wine, or are they actually due to other factors?

That’s what the findings from a series of Danish studies suggest. To no one’s surprise, the researchers found that moderate wine drinkers are healthier than those who drink other alcoholic beverages or those who abstain from alcohol entirely. But they also discovered an important link between a person’s drinking habits and his or her social and psychological characteristics, which may account for the apparent health benefits of wine that have been reported in other studies. These findings were reported in the Archives of Internal Medicine.

Erik L. Mortensen, PhD, of the Danish Epidemiology Science Center in Copenhagen, Denmark, and June M. Reinisch, PhD, of Indiana University, Bloomington, and colleagues studied 363 Danish men and 330 Danish women between the ages of 29 and 34 years. The subjects were selected from the Copenhagen Perinatal Cohort on the basis of perinatal records.

The purpose of the study was to determine whether there were other factors associated with the health benefits of wine consumption. Researchers examined a wide spectrum of social, cognitive, and personality characteristics related to both beverage choice and health in young Danish adults.

What they found was that wine drinking was consistently associated with a higher IQ, higher parental educational level, and higher socioeconomic status. On the other hand, beer drinking was significantly associated with lower scores on all of the same variables.

On scales concerning personality, psychiatric symptoms, and health-related behaviors, wine drinking was associated with optimal functioning and beer drinking with suboptimal functioning.

The researchers concluded that wine drinking, in and of itself, is a general indicator of higher social, intellectual, and personality development in Denmark. These findings are easily translatable to other countries because similar social, cognitive, and personality factors have also been associated with better health in a number of populations.

What this means is that the association between drinking habits and social and psychological characteristics, in large part, may explain the apparent health benefits of wine. And it may also mean that the wine itself, contrary to popular belief, is not responsible for better health.