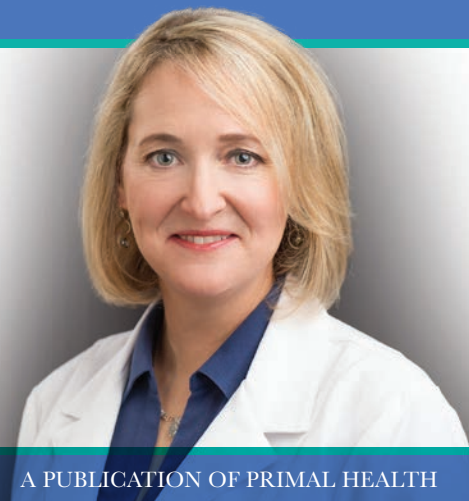


Dr. Marlene's NATURAL HEALTH CONNECTIONS

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3 Big Myths about Weight Loss – and the Facts



Social stereotypes and bathroom scales can be discouraging, but understanding why “just eat less” doesn’t work can lead you to better health.

When I see new patients who are struggling with their weight, they often feel as though it’s due to a moral failing. This simply isn’t the case, but the thought can be debilitating. So, the first thing I want to address is our attitudes toward body weight.

Weight gain is not a sign of some type of character flaw. It has underlying physiological causes that are widely overlooked. Doctors don’t learn about the real causes in medical school and don’t know how to help patients deal with the situation.

At the same time, our prevailing attitudes about weight are based on false ideas that breed prejudice and make life harder for people who aren’t thin. Back in the days when food was scarce for all but the wealthy, a plump appearance was held in high regard because it meant you were affluent. The stereotype of thin people was that they were poor, less desirable members of society.

In more recent decades, the tables have turned. Unhealthy food that promotes obesity is cheap and abundant, and it’s the rich people who are thinner. And thinness has become idealized as a desirable state, even when it’s achieved by unhealthy means.

The stigma attached to weight is shocking. I was at a conference, and a woman who I didn’t know complimented me on a scarf I was wearing. When I mentioned the name of the store where I bought it, her face fell. “Oh, I can’t shop there — nothing fits me.”

When this lady first approached me, she was bright and smiling. The mention of the store was obviously painful. She felt excluded — cast

IN THE NEXT ISSUE:
**Restful Sleep: Simple Ways
to Get Enough**



aside by the fashion industry as someone who was undesirable.

Even though I was already aware that the stigma surrounding weight was a problem, that moment made me realize that it was worse than I had thought. After all, we were talking about a scarf, which has nothing to do with your body size. But this lady's experience of shopping for clothes had been so demeaning that she couldn't even bring herself to walk into the store to look at scarves.

Dr. Marlene's
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My heart goes out to her.

Even doctors can be guilty of harboring negative attitudes toward people who are overweight. Sometimes, this prejudice can even prevent patients from receiving needed medical screenings or care, because they feel so belittled by the way a doctor or office staff look at them that they stay away.

If you're struggling with your weight, I recommend learning more about what really goes on in the human body. And if weight is not a problem for you, the same information will help you stay in good health.

Body Weight Is Only One Health Marker

Before I discuss specific myths, I want to clarify two common words we hear a lot: overweight and obese. What's the difference? It's a matter of degree — how much excess weight someone is carrying and how much it can harm their health.

You've probably heard about body mass index, or BMI for short. It's a number that's calculated using height and weight. Around the world, scientists and healthcare systems rely on these numbers to designate who is overweight or obese. Those with a BMI between 25.0 and 29.9 are considered overweight; those with a BMI of 30 or higher are considered obese.

There's data showing that being overweight (or underweight) increases health risks, and being obese increases them even more. As an example, among Americans with type 2 diabetes, over 27 percent are overweight and over 60 percent are obese.¹ And it's been proven that weight loss can help to prevent or reverse type 2 diabetes.²

However, BMI by itself isn't a perfect method of assessing health risks, because two people with the same BMI number can be in different situations in terms of their health. Blood tests can paint a more accurate picture.

A study at the University of California, Los Angeles, and UC Santa Barbara demonstrated this by evaluating health information of more than 40,000 American adults. Researchers looked at BMI and results of metabolic tests, meaning standard medical tests that indicate risk for diabetes, heart disease, and stroke. The tests included blood pressure, triglycerides, cholesterol, glucose, insulin resistance, and C-reactive protein as a marker of chronic inflammation.

The combination of tests showed this: Nearly half of those who were overweight, and 29 percent of those who were obese, were metabolically healthy. And, more than 30 percent of people with a normal weight were metabolically unhealthy.³

The Obesity Explosion

In the last few decades, the share of American adults who are overweight has not changed much. But the number of those who are obese has skyrocketed.

Percent of American adults who were:

Years	Overweight	Obese
1960–1962	31%	13%
1988–1994	33%	23%
2017–2018	31%	42%

Fryar CD, et al., "Prevalence of overweight, obesity, and severe obesity among adults aged 20 and over: United States, 1960–1962 through 2017–2018." National Center for Health Statistics Health E-Stats. 2020.

This doesn't mean that BMI has no value; it does. The important thing to understand is that it shouldn't be used as the only health indicator.

If you want to check your own BMI and you're reading a digital version of this newsletter, you can calculate it [here](#). If you're reading this in print, you can Google "BMI" to find a simple online calculator. But there's more to assessing your weight and how it may be affecting your health.

Myth #1: All Weight Gain Is Harmful

All weight gain is not created equal. While there's no arguing with the fact that excess weight can put painful stress on joints and contribute to diabetes, heart disease, and other ills, it isn't always the weight that's harmful. Rather, it may be the location of body fat.

The human body has two types of spaces where it can store fat. One type — stored in the belly area — is clearly harmful.

Technically called "visceral fat," it surrounds vital organs in the abdominal area and generates chronic inflammation that triggers chronic diseases. It's the inflammatory power of visceral fat that makes it dangerous. People with this type of fat tend to be apple-shaped, with relatively skinny legs and a large middle, but they can also be thin with a small pot belly.

The other type of fat — peripheral fat, in technical terms — may make it impossible to fit into outfits of years gone by, but it isn't inflammatory. Pear-shaped people have this type of fat. It lives right under the skin — not deep inside, around organs.

So, the bathroom scale does not tell all. Studies have found that measuring only body weight is not the best predictor of health risks. Identifying inflammatory belly fat is more reliable.⁴

In fact, thin people with inflammatory belly fat are more likely to die prematurely than overweight people who are healthy and don't have harmful belly fat. This data

emerged in a study of more than 15,000 American men and women between the ages of 15 and 90.⁵

How do you know if excess body fat is the harmful kind? Find your waist-to-hip ratio; see how below. This is a reliable indicator of health risk, regardless of what a bathroom scale says.

Research also shows that gaining a few pounds every decade as

How to Find Your Waist-to-Hip Ratio

Your waist-to-hip ratio is a good indicator of whether you have inflammatory abdominal fat that increases risk for high blood pressure, diabetes, heart disease, stroke, and other ills. To find your ratio:

1. Get Your Measurements

- Use a flexible tape measure, the kind that tailors hang around their neck.
- Keep the tape measure horizontal, parallel to the floor, as you take each measurement.
- Measure your waist at the narrowest point, after you breathe out.
- Measure your hips at the widest point.

2. Calculate Your Ratio

Grab a calculator and divide the waist measurement by the hip measurement. Here's an example:

Waist: 34 inches
Hips: 39 inches

$34 \div 39 = 0.87$

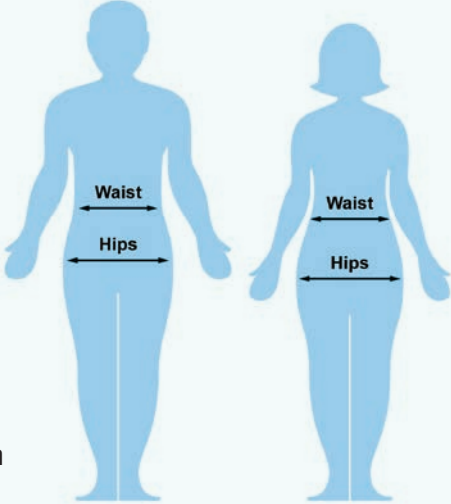
3. See if Your Waist-to-Hip Ratio Is Healthy

This is how the World Health Organization classifies health risks for different ratios:

Health Risk	Waist-to-Hip Ratio	
	Women	Men
Low	0.80 or lower	0.95 or lower
Moderate	0.81–0.85	0.96–1.0
High	0.86 or higher	1.0 or higher

4. Take Action

If your ratio puts you at low risk, follow a healthy diet and get regular exercise to keep it that way. If your ratio shows increased health risks, a low-carb diet can help to correct the underlying causes, shrink belly fat, and lower health risk.



you get older is not necessarily harmful.⁶ A British study of more than 14,000 people over the age of 75 found that those who were thinnest were at higher risk of death.⁷

Just to clarify, I’m not saying that you should throw caution to the wind and pay no attention to weight. Extremes are not healthy. But I do want to give you some context: Some extra pounds are not always dangerous.

Myth #2: You Just Have to Eat Less

While some people will drop a few pounds just by eating a bit less, they aren’t the ones who struggle with their weight. The “cut calories” approach is based on the false idea that the human body is like a furnace: too much fuel leads to weight gain and too little fuel leads to weight loss. Sorry, your body is not a furnace. And treating it as one creates problems.

Simply restricting calories, without paying attention to where those calories come from, will lead to weight loss in the short term. However, it will also lower your metabolic rate — “slow your metabolism” — so much that it’s impossible to keep the weight off.

You might recall *The Biggest Loser*, the TV show where contestants followed severely restricted, low-calorie diets and grueling exercise regimens to lose a lot of weight. A study that followed up on 14 of these people, 6 years later, found that most of their weight had been regained.

These people’s metabolic rates — how many calories their bodies burn — had dropped by an average of 600 calories per day during their extreme weight-loss program. And

6 years later, their metabolic rates had dropped even further, by an additional 100 calories per day, and they had regained a significant amount of weight.⁸

Do you see how this is a vicious cycle? You lose weight, eat fewer calories, but still regain the weight. It’s a common reason why more people fail than succeed at losing weight and keeping it off.

Why Weight Loss Is Difficult

Our bodies are made to live through feast and famine. A low-calorie diet signals famine and kicks in a self-preservation mechanism of burning as few calories as possible. Part of that process is storing away as much fuel as possible — in fat cells.

At the end of a low-calorie diet, even though there’s no more

famine, that self-preservation mechanism doesn’t turn off. More fuel keeps being stored as fat and weight is regained.

This is not just a barrier to losing and keeping weight off. Studies show that low-calorie diets, despite producing short-term weight loss, lead to *more long-term weight gain*.⁹ And the more excess weight people have at the start of a low-calorie diet, the more calories they store as fat as the diet goes on.¹⁰

In other words, the more overweight you are, the harder it’s going to be to lose weight on a low-calorie diet and keep it off. But there is a solution.

The Type of Diet Matters

I’ve been talking about the harmful effects of low-calorie diets on metabolism — you can’t starve

Is Your Weight Affecting Your Health?

I recommend approaching weight loss with the goal of becoming healthier. Perhaps you already know that losing weight would enhance your health. But if you aren’t sure, these are signs that being overweight is harming your health:

- You are often or always in pain.
- You have sleep apnea.
- You can’t easily move around or exercise comfortably.
- You have visible belly fat or your waist-to-hip ratio indicates health risks.

These are some blood tests that indicate elevated health risks, even if your BMI is in a healthy range:

Test	Risk is elevated if result is:	Units of measure
Fasting insulin	6 or higher	mIU/mL (milli-international units per milliliter)
Triglycerides	100 or higher	mg/dL (milligrams per deciliter)
HDL, the “good” cholesterol	Under 50	mg/dL (milligrams per deciliter)
C-reactive protein (CRP), a marker of chronic inflammation	1 or higher	mg/dL (milligrams per deciliter)

yourself into good health. But a healthy *low-carb* diet doesn't have the same negative effect.

One study specifically tested the effect of low-fat and low-carb diets on metabolism — how much basic calorie requirements decreased on each diet. And a low-carb diet proved to be the best option for lasting weight loss. Study participants burned an average of 300 more calories on a low-carb diet than on a low-fat diet.¹¹

Another study tested different levels of carbs on metabolism. It found that the lower the carbs, the higher the daily calorie burn, which makes it easier to lose weight and keep it off. The biggest improvement was seen in people whose insulin levels were highest at the start.¹²

How a Low-Carb Diet Works

When you eat carbs, they are converted into blood sugar, and insulin is secreted to help your body use the blood sugar as fuel. When you eat a lot of carbs (as is typical in today's diets), more insulin is produced, and if this becomes a habit, insulin stays elevated all the time. Most of my new patients are in this situation.

Insulin promotes fat storage and when it's in your bloodstream, it completely prevents you from burning fat. That's worth mentioning again — you cannot burn fat when you have insulin in your bloodstream. Even if you ate one of those small 100-calorie packs of cookies, the resulting insulin will prevent you from accessing your fat cells for energy. By reducing carbs, you can lower insulin levels and unlock your body's ability to turn food into energy — instead of fat.

Equally important, high insulin is inflammatory, and along with cortisol, which is a stress hormone, this is what leads to belly fat. By lowering insulin levels, a low-carb diet reduces the inflammation and enables harmful belly fat to shrink.

Myth #3: A Diet Has a Beginning and an End

The word “diet” has come to mean a significant change in the way you eat, but only for a temporary period. You probably know that this doesn't produce lasting weight loss.

It's really common sense. If the way someone eats leads to weight gain, and they go back to eating the same way after losing weight, they regain weight. And when researchers combed through various studies, they found that the evidence confirms this.

A better way to view “diet” goes back to ancient Greece. The Greek word *dieta*, the origin of “diet,” means “a way of life.”

In practice, this means that the successful way to lose weight and keep it off is by making *lasting* changes in how you eat.

I encourage you to take a look at the earlier issues of this newsletter, listed in *Related to This Topic* on page 6, which cover details of the diet I recommend. It's low-carb but tailored to your personal tastes and lifestyle, and it's a way of eating that you can sustain and enjoy for the long term.

Your Diet Must Fit You

Gaining control of weight is a process of finding out what works for you. Your taste buds aren't the only thing that's unique — your metabolism is, too.

Each of us has a basic metabolic rate, meaning the number of calories our body burns to stay alive. How physically active you are also affects how many calories you burn, but it doesn't have a huge impact unless you are a

About Dr. Marlene

Dr. Marlene Merritt's passion for natural medicine is fueled by her drive to help others, and her own experience of overcoming a debilitating heart condition, diagnosed at the age of 20. A competitive cross-country cyclist at the time, she suddenly began experiencing severe chest pains. Forced to quit the sport, she suffered from extreme fatigue and constant pain for another 15 years, despite doing everything that conventional, Western medical doctors told her to do.

And then, the tide turned. A physician trained in naturopathic healing recommended a whole-food vitamin E supplement. A week after starting the supplement regimen, her energy began to return, and the pain began to disappear.

Dr. Marlene is a Doctor of Oriental Medicine, has a Master's in Nutrition, and is an Applied Clinical Nutritionist. She is Board Certified in Bariatric Counseling, and certified in the Bredesen MEND Protocol,[™] a groundbreaking method of reversing Alzheimer's disease. She sees patients at the Merritt Wellness Centers in Austin, Texas, and Santa Fe, New Mexico, trains health practitioners nationwide, and is the author of *Smart Blood Sugar* and *The Blood Pressure Solution*.



serious athlete or perform hours of heavy physical labor every day.

There are mathematical formulas that estimate average calorie needs, based on a person's size and build. But these don't represent individual needs.

A study that used lab tests to measure actual calorie requirements of individuals found enormous differences. For example, in one comparison of two people of the exact same size and build, one burned 700 more calories daily than the other. That's the equivalent of running over 6 miles per day.¹³

This is something to keep in mind. Even if you eat a low-carb diet of nutritious foods, the quantity that's right for you may be quite different from that of other people.

Other Weight-Loss Blocks

For most people, a low-carb diet can be a life-changer. But sometimes, there can be a block that can't be resolved by diet alone, such as stress, low thyroid, chronic inflammation not related to diet, or high levels of toxicity from exposure to mold or other toxins:

Stress elevates cortisol, the fight-or-flight hormone, which triggers a cascade of internal changes that disrupt normal metabolism. The stress needs to be managed.

Low thyroid slows down metabolism and needs to be addressed with the help of a competent health professional.

Chronic inflammation can be triggered by infections. I often see lingering infections in teeth and gums or in the urinary tract, and these need to be treated.

Toxicity from mold or some other type of toxic exposure is another cause of chronic inflammation and often requires professional treatment.

These are some other things that can affect your metabolism: If your grandmother experienced starvation, this can cause leanness or obesity in her children and grandchildren. Whether you were breastfed can affect your tendency to overeat. And if a mother is malnourished during pregnancy, this can lead to prediabetes in young children.

A Final Word

You're probably wondering, what about exercise? I definitely recommend regular exercise for its many benefits, from a healthier heart and a better mood to more flexible joints and stronger muscles. But there is a saying that you can't outrun your fork. Exercise won't make you lose weight.


The food you eat is the basic driver of your metabolism and weight. And healthy weight loss isn't a matter of willpower or starvation, but a process of learning how to adapt a low-carb way of eating to your personal tastes and lifestyle. I encourage you to take a look at the earlier newsletter issues listed on this page and let me know how it goes.

Related to This Topic

These are some earlier issues of this newsletter that address related topics:

Related Topic	Volume	Issue	Title
Low-Carb Diet Basics	1	8	The Guide to Healthy Eating
Healthy Carbs	3	6	The Diabetic's Guide to Eating Carbs
Healthy Meat	3	2	The Diabetic's Guide to Eating Meat
Healthy Fats	4	11	Healthy Fats: Deadly Myths and Life-Saving Facts
Low-Carb Diet Tips	5	1	How to Stick With a Healthy Diet This Year
Keto Diet	4	1	The Keto Diet for Weight Loss, Diabetes Relief, Improved Memory, and More

Access these online by logging in to www.NaturalHealthConnections.com.



1 CDC. "National Diabetes Statistics Report 2020: Estimates of Diabetes and Its Burden in the United States."

2 Diabetes Prevention Program Research Group. "The Diabetes Prevention Program (DPP): description of lifestyle intervention." Diabetes Care. 2002 Dec;25(12):2165-71.

3 Tomiyama, A.J., et al. "Misclassification of cardiometabolic health when using body mass index categories in NHANES 2005-2012." Int J Obes (Lond). 2016 May;40(5):883-6.

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Vicki wanted to lose weight, but she hated exercise – so how the heck did she **drop 32 pounds** in two months?

If you're having trouble losing 15 pounds or more, just see what happened to Vicki...

Like most of us hitting middle age, Vicki started packing on a few extra pounds each year. Her weight crept up so gradually she hardly noticed. But eventually, Vicki, her husband, and her doctor became concerned. As you might imagine, Vicki's self-esteem took a big hit.

Vicki tried to lose weight by depriving herself of all her favorite foods. She forced herself to eat boring salads and tasteless frozen diet meals. And she exercised like crazy (even though she hated it). But the extra pounds just wouldn't budge.

That's when a friend suggested Vicki try **Smash-It!** This nutrient-infused slimming shake was developed by Primal Labs – a leader in nutritional supplementation.

In the first month alone, Vicki lost 3.5 inches from her belly and 2 inches from her waist, hips, and thighs. And when you hear Vicki tell the story, you'll see why she feels like a different person. "I have so much energy. Oh my gosh, my co-workers noticed within two weeks I was dropping weight," she said. "I was walking around with a big smile on my face."

It's easy to see why Vicki had a big smile. She lost 18 pounds in just 30 days merely by substituting one meal a day with Smash-It! But she wasn't done...

In the second month, Vicki lost an additional 2.5 inches off her belly and waist, and 1.75 inches off her hips. **In only two months, Vicki lost a grand total of 32 pounds!**

What's more, Vicki lost all this weight with only minimal exercise. Which just shows you proper nutrition is 90% of successful weight loss. Because if you're eating the wrong foods, you can't exercise enough to get rid of unwanted fat.

And that's the secret of **Smash-It!**, the delicious meal-in-a-glass that works better than any diet or weight loss program.

Smash-It! has been scientifically formulated to fix the #1 reason most people can't lose weight: **TOXIC FAT CELLS**. Most people get stuck with unwanted pounds, not because of *too much* fat, but rather because of too much of the *WRONG* kind of fat.

This was proven in a landmark study at Temple University. Researchers studied fat cells of overweight people and found them to be toxic, inflamed, and unhealthy. Worse yet, these toxic fat cells "affect blood pressure, blood sugar, triglycerides, and cholesterol," according to *Future Medicine*.

Fortunately, a delicious **Smash-It!** meal replacement shake is an amazing improvement over any meal replacement, protein supplement, or "nutrition shake" you may have tried. In fact, by drinking a daily **Smash-It!** shake, you can:

1. FIX those toxic fat cells for good...
2. FIRE UP your metabolism and supercharge your health...
3. TAKE INCHES AND POUNDS OFF your hips, thighs, and waist, giving you the body you've been dreaming of...

*Discover everything
you will get with
Smash-It! on the
next page!*



Here's What You'll Find in Smash-It!

First, you'll get 21 grams of **quality protein** in a proprietary Quadsource Blend. This includes whey and pea protein, and even cranberry seed protein to help boost your metabolism and give you the nutrition you need.

Next, a patented *Spectra Blend* contains 29 of nature's most powerful, health-boosting fruit, vegetable, spice, and herbal extracts, including green tea, turmeric, broccoli, bilberry, cinnamon, blueberry, acerola, and many more.

You'd have to eat several servings of fruits and vegetables to get the **antioxidant power** you'll find in *Spectra Blend*. As you know, antioxidants fight the free radical damage that comes with aging. Plus, they increase nitric oxide production to support healthy blood pressure levels and brain function.

In **Smash-It!**, you'll also get:

- ✓ 3 grams of gut-healthy **fiber**, including oat fiber, xanthan gum, and blue agave inulin to help support healthy lipid levels
- ✓ 8 special **enzymes** to help you better digest your food
- ✓ 6 special **probiotics** — "friendly" bacterial strains to support regularity and immune function
- ✓ Biotin and chromium to help maintain healthy blood sugar levels
- ✓ Vitamins A, C, E, B, and D for more health benefits, including support for bone and brain health, as well as healthy blood pressure
- ✓ L-leucine, an amino acid that helps minimize the loss of lean muscle tissue — something to guard against as you age (and when losing weight)
- ✓ And many more vitamins, minerals, and other nutrients to maintain your good health

But what about fat? You know you need fat to feel full and satisfied, so you won't be tempted by unhealthy carbs and sweets. But it has to be *good* fat, not the bad fats typically found in fast and processed foods.



Well, **Smash-It!** contains the absolute **best kind of fat** — medium chain triglycerides found in coconut oil that your body easily burns for energy. And as an added bonus, these fats help support cognitive health.

What's more, the Primal Health team knew that if it didn't taste great, you wouldn't drink it. So, **Smash-It!** comes in rich chocolate, strawberry, and vanilla caramel flavors. It's sweetened with monk fruit that's actually sweeter than sugar. **Smash-It!** contains just one gram of sugar per serving. Compare that to Ensure, with its unhealthy 15 grams of sugar.

With **Smash-It!**, you can **safely and easily melt off up to 15 pounds in just one month**. And enjoy all these benefits in just 30 seconds a day — with minimal exercise and NO impossible-to-maintain diet. What's not to love?

And no worries... Try **Smash-It!** completely risk-free with a no-questions-asked 100% money-back guarantee.

Just like Vicki, now YOU can start shedding those unwanted pounds. Imagine looking and feeling years younger... Fitting into your skinny clothes again... Sounds amazing, doesn't it? Say hello to your new life.

TRY IT TODAY! Smash-It! Nutrient-Infused Slimming Shake
GetSmash-It.com/NHC3

For Faster Service, call 1-888-309-0629
Monday-Friday 7 a.m. to 6 p.m. CST • Saturday-Sunday 8 a.m. to 5 p.m. CST

Unblocking Arteries: Is It Possible?

The mere presence of plaque isn't what makes it life-threatening. The biggest danger is that plaque can rupture — break away from the lining of an artery and become a blood clot that blocks blood flow to the heart. That's a heart attack, and it *can* kill you. Or, the clot can block blood flow to the brain and cause a stroke.

What makes plaque more likely to rupture and become a deadly clot? Inflammation. So, in addition to taking steps to prevent or reduce the growth of plaque, it's essential to reduce inflammation.

Testing Plaque

Sometimes, seemingly healthy and fit people have a mysterious heart attack at a relatively young age, while others who are visibly not physically fit enjoy a long life. Those unlucky fit people had an undetected, ticking time bomb in their arteries. The tests below can help to detect such hidden dangers.

The Coronary Artery Calcium Scan:

Also called a “heart scan,” it detects levels of calcium deposits — a major building block of plaque — in coronary arteries.

The scan is non-invasive, just like a regular x-ray, and takes about 5 minutes. It can detect heart disease more accurately than looking only at blood pressure and cholesterol.¹

Get the scan done once, and then again in 12 to 18 months. One scan is helpful. But two scans will show whether the plaque level is stable or growing. An increase of 14 percent or more shows instability, which is more dangerous.

Blood Tests: Get a C-reactive protein (CRP) test to measure inflammation. And know your “bad” LDL cholesterol level, as it is a big component of plaque.

Older Cholesterol Drugs

In addition to a whole-food, low-carb diet and regular exercise, there is a class of older cholesterol-lowering drugs that are helpful: bile acid sequestrants.² Cholestyramine and colestipol are examples.

I don't prescribe drugs, but if your tests show elevated or growing plaque, you can discuss these with your doctor. Bile acid sequestrants are especially effective at getting your body to eliminate the “bad” LDL cholesterol that makes plaque.

Garlic Protects Arteries

Garlic lowers cholesterol, helps arteries to heal from damage, and reduces the stickiness of platelets that form blood clots. The key active ingredient in garlic is allicin, and it's released when raw garlic is crushed or chopped.³

I recommend eating a clove of chopped or crushed garlic each day, or twice a day for a more aggressive approach. If you prefer to take a supplement, choose one that is “enteric coated.” Allicin easily degrades, and an enteric-coated supplement will prevent it from losing its potency. Studies have used 900 mg per day.

Ginkgo Enhances Blood Flow

Ginkgo is often taken to improve memory and brain health, but it

also offers substantial benefits for arteries. It dilates blood vessels by increasing natural nitric oxide production, reduces harmful blood clotting, and protects arteries against damage.⁴ Doses vary, depending on the product.

Fish Oil Reduces Inflammation

Recent research has found that the omega-3 fats in fish oil help to switch off inflammation in arteries and stimulate repair and healing.⁵ But to benefit, you also need to eliminate inflammatory refined oils from your diet, such as corn, soy, and cottonseed oils, as these will reduce or negate the fish-oil benefit. Take 1,000 to 3,000 mg of fish oil daily.

Other Triggers of Harmful Inflammation

Lingering infections generate inflammation and need to be treated. Gum disease and infections in the urinary tract, bladder, prostate, or sinuses are some common ones. Two other common triggers of inflammation are sleep apnea and insulin resistance, which usually stems from years of carbohydrate overload.

1 Naghavi, M., et al. “Coronary artery calcium testing: A call for universal coverage.” *Prev Med Rep.* 2019 May 2;15:100879.

2 Ross, S., et al. “Effect of Bile Acid Sequestrants on the Risk of Cardiovascular Events.” *Circulation: Cardiovascular Genetics.* 2015;8:618–627.

3 Sharifi-Rad, J., et al. “Therapeutic Potential of Allicin-Rich Garlic Preparations: Emphasis on Clinical Evidence toward Upcoming Drugs Formulation.” *Appl. Sci.* 2019;9(24):5555.

4 Tian, J., et al. “Ginkgo biloba Extract in Vascular Protection: Molecular Mechanisms and Clinical Applications.” *Curr Vasc Pharmacol.* 2017;15(6):532–548.

5 Arnardottir, H., et al. “The resolvin D1 receptor GPR32 transduces inflammation resolution and atheroprotection.” *J Clin Invest.* 2021 Dec 15;131(24):e142883.

Exercise Relieves Dry, Irritated Eyes

Does it sometimes feel like there's sandpaper in your eyes? Do your eyes get red, itchy, or irritated? Dry eye is a common cause of such symptoms, and it's becoming more common. But aerobic exercise — the kind that gets your heart pumping — can help, according to recent research.

One study found that jogging for 30 minutes reduced symptoms of dry eye, and objective tests showed better eye lubrication.¹ Researchers found that exercise promoted more production of tear film, the fluid that keeps eyes moist, and exercise made the fluid more stable and protective.

Another study compared the effects of aerobic exercise on dry eye in two groups of people: athletes who exercised on a treadmill at least five times a week and non-athletes who exercised only once per week.² Both groups experienced some relief, and eye tests showed healthier tear film. But there was significantly more improvement among the athletes.

Researchers concluded that “increased physical fitness and the duration of exercise might be crucial in the improvement of tear function through aerobic exercise.”

How Exercise Helps to Lubricate Eyes

There are two ways in which problems can develop with the tear film in our eyes: quantity and quality. Too little fluid can be produced, and/or the fluid can break down so that it doesn't stably cover and lubricate the eyes. Exercise helps on both counts.

Exercise improves circulation and dilates blood vessels, which makes it easier for your body to make tear film. And exercise helps with the ongoing removal of waste products that can damage the fluid in the eyes.

Blinking Is Vital

When we don't blink enough, we produce less tear film. This makes our eyes more susceptible to dryness and irritation.



One major cause of our blinking less is looking at the screens of computers and other digital devices. It isn't realistic to continually think about blinking, but you can do this simple exercise:

- Close your eyes for 2 seconds, keeping them relaxed.
- Open your eyes.
- Close your eyes and squeeze them with your eyelids for 2 seconds.
- Open your eyes.

You can go through the above steps one or more times, ideally every 20 minutes. But don't worry if you forget; do the exercise when you think of it, even if your eyes feel fine. It will help them to stay that way.

Buying Food Online? Beware!

You may know that I'm a proponent of fresh, rather than packaged food, but I'm well aware that we don't live in a perfect world. When you do buy food in packages, it's vital to look at the nutritional information. Unfortunately, this isn't always possible if you shop online.

Researchers looked at popular products in nine major online food stores and found that two-thirds of the products were missing some or all of the nutritional information that is required on package labels.³ It turns out that our current laws don't require all the label information to be displayed online.

If you're shopping in an actual store, you can pick up a package and look at all the information printed on the back or side. But if a website shows only a picture of the front of a package, you can't tell what's in it.

What to Do

I recommend always checking the Nutrition Facts — especially total carbohydrates — and the list of ingredients. If you can't find these in one online store, check another store or check the product manufacturer's website. And make informed decisions.

1 Sun, C., et al. "Effects of aerobic exercise on tear secretion and tear film stability in dry eye patients." *BMC Ophthalmol.* 2022 Jan 4;22(1):9. 2 Abokyi, S., et al. "Differential effect of maximal incremental treadmill exercise on tear secretion and tear film stability in athletes and non-athletes." *Exp Eye Res.* 2022 Jan;214:108865. 3 Pomeranz, J.L., et al. "Opportunities to address the failure of online food retailers to ensure access to required food labelling information in the USA." *Public Health Nutr.* 2022 Jan 24;1-9.

Heartburn Relief While You Sleep

If you suffer from heartburn during the night, sleeping on your left side could help. That's the conclusion of a study that tested different sleeping positions in a group of people diagnosed with reflux disease.

The study monitored 57 people who suffered from nighttime reflux, while they slept in different positions: on their left side, on their stomach, on their back, and

on their right side. Of all these positions, sleeping on the left side proved to be most beneficial.

The number of reflux episodes during the night did not change with different positions. However, each episode was significantly shorter when people slept on their left side — much less acid moved up into the esophagus, and it cleared two to three times faster than



when sleeping in other positions.¹

The improvement from sleeping on the left side was a meaningful one. As well as reducing symptoms, less acid in the esophagus reduces damage, so left-side sleeping is also good for long-term health.

Isolation Is Bad for the Heart

We hear a lot about the risks of a poor diet and lack of exercise, and these are very real. But being socially isolated and lonely is also bad for the heart.

A study of older women recently found that isolation and loneliness can significantly increase risk for heart disease, regardless of other factors such as diet, weight, blood pressure, cholesterol, and diabetes.²

All these matter. But staying in touch with and seeing people you care about is really important. Granted, the pandemic has kept people apart. But it's healthier to take precautions — vaccination and wearing masks when called for — and stay close to people who matter in your life.

A Good Reason to Get a Second Opinion

If you need non-emergency surgery or other major treatment, this is something to keep in mind: The quality of care from medical specialists can vary significantly, according to a study of nearly 8,800 doctors in 5 major American cities.

For example, physical therapy is recommended before elective knee or hip surgery. But in practice, it was used in only 4 to 65 percent of cases, depending on the doctor.³

Were some of those surgeries unnecessary? We'll never know.

The study, by researchers from Harvard Medical School and other leading medical centers, examined

care around the country in seven different specialties, including those that treat diabetes, the heart, joints, lungs, spine, and brain. And it found significant disparities in all of them.

This research wasn't designed to account for all the differences in treatment. But it identified an important issue: Specialists don't always follow evidence-based guidelines. This could be due to insurance limitations, policies of healthcare organizations, or doctors' decisions.

Meanwhile, in non-emergency situations, it's a good idea to research your options and get a second (or third or fourth) opinion.

Work-from-Home Air Quality Problem

Working from home saves a lot of commute time, but air quality can be a problem, according to a study by Texas A&M University School of Public Health in College Station. The study compared air quality in an office building and in homes of employees now working from home.

All the homes had central air conditioning, and no one smoked or worked with hazardous chemicals. But air quality in the homes was significantly worse than in the office building. And the majority of at-home employees reported more dry, itchy, or watery eyes; stuffy noses; and dry or irritated skin — symptoms known to be associated with poor air quality.⁴

Where possible, it's best to open windows to keep your home ventilated. If this isn't realistic, consider getting an air purifier with an ultra-HEPA filter such as Air Doctor, which eliminates mold, smoke, viruses, dust mites, and the vast majority of other pollutants.

1 Schuitmaker, J.M., et al. "Associations Between Sleep Position and Nocturnal Gastroesophageal Reflux: A Study Using Concurrent Monitoring of Sleep Position and Esophageal pH and Impedance." *Am J Gastroenterol*. 2022 Feb 1;117(2):346-351. 2 Golaszewski, N.M., et al. "Evaluation of Social Isolation, Loneliness, and Cardiovascular Disease Among Older Women in the US." *JAMA Netw Open*. 2022 Feb 1;5(2):e2146461. 3 Song, Z., et al. "Physician Practice Pattern Variations in Common Clinical Scenarios Within 5 US Metropolitan Areas." *JAMA Health Forum*. 2022;3(1):e214698. 4 Roh, T., et al. "Indoor Air Quality and Health Outcomes in Employees Working from Home during the COVID-19 Pandemic: A Pilot Study." *Atmosphere* 2021;12(12):1665.

Q&A

Q: I just started following your way of eating, and my hardest job is telling my friends “no” to going out to eat, which is their favorite pastime. Do you have any suggestions? — *Ana T.*

A: I don’t mean to stop you from enjoying the company of your friends, but I certainly understand how eating out can be challenging. However, it is possible to choose low-carb options in many restaurants, with a bit of creative menu planning on your part.

Changing your diet is a process of learning and experimenting. It’s easier to do when you have full control of the ingredients in your own kitchen. But as you become more accustomed to eating in a new way, it gets easier to find appropriate things on restaurant menus. And you can request some simple changes to a dish.

As an example, let’s say eggs and bacon come with potatoes and toast. You can request sliced tomatoes instead of the potatoes, and no toast (or offer the toast to your friends). If you also ask for lettuce, you’ll have a bacon-lettuce-and-tomato “sandwich” without the bread, as well as eggs.

Another easy switch is with burgers. Order the burger without the bun, with a salad instead of fries. Grilled vegetables are another possible side dish. Or, if the vegetables are steamed, you can ask for some butter and let it melt on the vegetables.

You could also do this: If you have very few carbs during the rest of the day, you can have your allotment of carbs at the restaurant meal, such as some fries.

While you’re at home, I suggest taking some time to look online at the menus of restaurants where you and your friends have been eating. Look at the restaurant’s website and see what might fit your diet, perhaps with some simple adjustments. I also encourage you to look around for other restaurants that may have some good options and, maybe, suggest a new place to your friends.

Q: I’m 80 and in reasonably good health, but I have a problem with acid reflux. Do you have any magic potions or elixirs? — *Gary B.*

A: I hesitate to call them magic potions, although some of my patients would. The most common acid-reflux trigger that I see comes from low stomach acid. I know that sounds odd, so I’ll explain.

When we smell, taste, and eat food, our bodies naturally produce stomach acid. It breaks down proteins and stimulates production of enzymes that break down all the different components in food. Our natural acid production can be suppressed by antacids and heartburn drugs or by stress, infections, or an overload of starches and sugars. As well, stomach-acid production tends to decrease as we get older.

Low acid leads to heartburn in two ways: As food goes down the esophagus, stomach acid signals a valve (the lower esophageal sphincter) to close to keep food in

the stomach. But low acid levels interfere with this signal, so the valve doesn’t close properly, and stomach juices and gases regurgitate upward. Low acid also slows digestion and keeps food in the stomach longer, building pressure that pushes stomach juices upward.

You can increase levels of stomach acid by taking a supplement of betaine hydrochloride with pepsin. Take it with meals. An alternative, weaker remedy is to mix a tablespoon of apple cider vinegar with a few tablespoons of water or apple juice and drink it just before a meal — and then rinse your mouth because the acid can harm your teeth.

However, don’t use these remedies if you have an ulcer or inflamed stomach. I explain how to deal with such situations, and more details about heartburn, in an earlier newsletter issue, Volume 1, Issue 6, *The 6-Minute Heartburn Remedy*. I encourage you to check it out online.

Do you have a question for Dr. Marlene?

Send your health-related questions to drmarlene@naturalhealthconnections.com. Please include your first name and the initial of your last name. Although she cannot answer each question directly, Dr. Marlene will select a few in each newsletter and will address other questions and concerns in articles in future issues. Answers are intended for educational purposes only and should not be viewed as medical advice. If you need help with your subscription or have questions about Primal Health supplements, email support@primalhealthlp.com or call 877-300-7849.