

## Health Nuggets June 2016

- 1) Low doses of beta-blockers are effective for survival after heart attack: Lower doses are as effective or more so than higher doses of beta-blockers following acute MI, according to the *Journal of the American College of Cardiology*, Sept 21, 2015. There is probably not one right dose for every single patient.”
- 2) High stress jobs are linked to increased stroke risk: A meta-analysis published Oct 2015 in *Neurology* reviewed 6 studies with nearly 140,000 participants who were followed for 3-17 years. All participants with high stress jobs were 58% more likely to have an ischemic stroke.
- 3) Smoking is associated with high risk of type 2 diabetes: This high risk exists among both current smokers and those regularly exposed to second-hand smoke. A meta-analysis of 88 previous studies was published in *Lancet Diabetes & Endocrinology* Sept 2015. There were nearly 6 million participants. It is estimated that nearly 27.8 million cases of diabetes worldwide can be attributed directly to active smoking.
- 4) Guidelines for antibiotic use for acute respiratory tract infections: High-Value Care Advice 1: Clinicians should not perform testing or initiate antibiotic therapy in patients with bronchitis unless pneumonia is suspected.  
High-Value Care Advice 2: Patients with persistent fevers, anterior cervical adenitis (tender lymph nodes under jaw), tonsillopharyngeal exudates (pus) should be tested with rapid antigen test for group A *Streptococcus*.  
High-Value Care Advice 3: Antibiotics for acute rhinosinusitis for patients with symptoms for more than 10 days, severe symptoms, high fever, and purulent nasal discharge or facial pain lasting a least 3 days or worsening symptoms following a typical viral illness that lasted 5 days that was initially improving (double sickening).  
High-Value Care Advice 4: Never prescribe antibiotics for the common cold. There were 23,000 deaths last year for antibiotic-resistant illnesses.
- 5) How effective is aggressive end-of-life cancer care? Families of patients who receive aggressive end-of-life medical care do not perceive the care as high-quality, according to research published online ahead of print Jan 2016 in *JAMA*. When patients received hospice care for longer than 3 days family members reported excellent end-of-life care more often. Family members of patients who died in the hospital were less likely to report excellent end-of-life care than those of patients who did not die in the hospital. This is a powerful argument for the importance of advance care planning. The more information patients have, the more likely they are to receive the kind of medical care they want near death.
- 6) American Heart Association checklist score may predict heart failure: Middle-aged adults who achieve a good score on the AHA’s Life’s Simple 7 checklist may be less likely to develop heart failure, according to a study published online ahead of print Dec 2015 in *Circulation: Heart Failure*. The 7 steps are to manage blood pressure, control cholesterol, reduce blood sugar, become physically active, eat better, lose weight, and stop smoking.
- 7) Past marijuana use linked to decline in verbal memory: For every 5 years of past exposure, verbal memory was reduced by 0.13 standardized units.

- 8) Instant De-Stressor: When you find yourself getting annoyed or frustrated, close your eyes for 4 seconds. When you open your eyes, the world will look different to you.
- 9) One-Minute Immunity Boost: Take a one-minute cold shower to ward off illness. Research at the Thrombosis Research Institute in London has found that cold water simulates immune cell production. Theory: The body tries to warm itself during and after a cold shower, which speeds up the metabolic rate, activating the immune system.
- 10) The best foods for chronic pain: Some dietary changes—eating certain foods and avoiding others—can have a big effect on chronic pain, such as joint, back and neck pain, headaches and abdominal pain.
  - 1) All fruits contain healthy amounts of antioxidants, which are important for reducing inflammation and pain. Inflammation is associated with tissue swelling, pressure on nerves and decreased circulation, which contribute to pain. Cherries, along with blueberries, cranberries, and blackberries are particularly helpful, because they are rich in anthocyanins, chemicals that relieve pain even more effectively than aspirin. Cherries have a short season, but frozen cherries and 100% cherry juice offer some of the same benefits. In a study @ University of California-Davis found that men and women who ate a little more than a half-pound of cherries/day had a 25% reduction in *C-reactive protein* (CRP), a clinical marker for inflammation. Measure out how many cherries that would be—probably not that many. Bonus: The vitamin C in cherries and other berries is used by the body to build and repair joint cartilage, important for those with osteoarthritis. Vitamin C is also a potent antioxidant that can reduce CRP.
  - 2) Give up sugar: Consuming sugar increases pain. It causes the body to produce *advanced glycation end products* (AGEs), which trigger massive amounts of inflammation. And it's not only sugar per se that does the damage. The American College of Clinical Nutrition has reported that foods with a high glycemic index—these include white bread, white rice, and other “simple carbohydrates that are quickly converted to glucose during digestion—increase inflammation even in healthy young adults. For those with chronic pain like arthritis, even a slight increase in inflammation can greatly increase discomfort. Try to eliminate added sugar and processed carbohydrates from your diet. Eliminate candy, soda, baked goods and highly refined grains. But do treat yourself to the occasional sweet dessert.
  - 3) Cooler cooking: Grilling meats and other foods exposed to prolonged, high-heat cooking—on the grill, in the broiler, pan-frying and deep-fat frying—generate high levels of AGEs. Increased pain is just one of the risks—some research has linked AGEs to heart disease, diabetes, and possibly even Alzheimer's disease. You'll do better with cooler cooking such as simmering and sautéing and moderate-heat roasting. Slow-cookers are another good choice. You don't have to give up grilling, etc. all together. Just do it less often—say once/week. Let your pain be your guide.
  - 4) Less alcohol: It's converted to sugar by the body almost instantly with increased AGEs.

- 5) Switch to olive oil: It contains *oleocanthal*, which interferes with inflammatory COX-1 and Cox-2 enzymes. Thus it causes lower levels of prostaglandins, the same pain-causing neurotransmitters that are blocked by aspirin. Drizzle some on pasta or salads, or when you saute vegetables or fish.
- 6) Eat seafood twice a week: The omega-3 fatty acids in cold-water fish (such as salmon, sardines and trout) are among the most potent anti-inflammatory agents. Studies have shown that people who suffer from morning stiffness and joint tenderness do better when they consume more omega-3s.
- 7) Drink plenty of water: Between 8-10 glasses a day. It helps the kidneys and liver filter toxins (such as pesticide residues) from the body. Also helpful is green tea. It provides extra water along with *catechins*, antioxidants that reduce inflammation and pain.
- 11) Natural heartburn remedy: Chew one to two teaspoons of uncooked oat flakes before swallowing. Oatmeal may help absorb the stomach acid that contributes to heartburn.
- 12) Drink to lose weight—water, that is. People who drank two glasses of water before each meal lost twice as much weight as those who didn't. Drinking 16 ounces of water before meals resulted in average weight loss of five pounds in 12 weeks.
- 13) Tomato juice relieves menopause symptoms: In a study of 93 women in Japan published in *Nutrition Journal* the researchers found that those who drank about 7 ounces of unsalted tomato juice twice a day for eight weeks reported a 16% improvement in hot flashes, fatigue, and irritability. The reason is that tomatoes contain *lycopene* and *gamma-aminobutyric acid* (GABA). Lycopene reduces stress, and GABA helps ease hot flashes.
- 14) Blood pressure—the largest and most recent study SPRINT: People may need to get their systolic pressure (top number) to below 120. Those who got their blood pressure below 120 were less likely to die from any cause than those who dropped their pressure only to under 140. The results were so dramatic that the researchers stopped the trial early so those in the higher-blood-pressure group could start working with their doctors to bring their BP lower. It's increasingly clear that high BP strains blood vessels—and that wear and tear can attract plaque-forming agents from the immune system that eventually block blood flow. All used medications—up to six in some cases—to bring their numbers down. The discussion is now whether taking so many drugs is a realistic and safe strategy. Medications aren't the only way to decrease BP. Exercising and eating a low-salt diet, as well as controlling stress, can also help.
- 15) Brain-training games do not improve memory: The Federal Trade Commission determined that claims made by the website Lumosity that its games improve memory were not proved, and the FTC also won a judgment against Focus Education, which claimed its Jungle Rangers game could improve school performance.
- 16) Turkey bacon has less saturated fat than pork bacon, but no bacon is nitrate- or nitrite-free.
- 17) Green smoothies are in. But you may not find many greens in them ... or in your wallet. Advice—eat your greens. They're loaded with nutrients, you know what

you're getting, they're cheap, and delicious.

- 18) Coconut oil has more saturated fat than butter. It doesn't speed up your metabolism, protect against dementia, or fight bacteria and viruses. Don't get caught up in the coconut oil craze. Stick with canola or olive oil for cooking.
- 19) Shingles increases stroke, MI risk in elderly: The risk for stroke may be more than double in the first week following a shingles diagnosis, with myocardial infarction (MI) risk also increasing, according to research published December online ahead of print in *PLoS Medicine*. Data was analyzed from 42,954 Medicare recipients who were diagnosed with shingles and a stroke between 2006 and 2011. Also included were 24,237 patients with shingles who experienced an MI in the same time frame. The risk decreased after 6 months.