

THE BETTER HEALTH NEWS

ANTIOXIDANTS, FATS AND CHILD DEVELOPMENT

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Research appearing in the journal *Early Human Development* (Volume 85, Issue 7, July 2009, Pages 421-427) links the levels of antioxidant vitamins in newborns to improved development. Researchers measured levels of vitamins A, C and E in maternal blood and in the blood of the umbilical cord at the time of delivery in 150 sets of mothers and newborns. At age two, the children were evaluated using the Gesell Development Schedules. Children with higher levels of vitamin E at birth had better motor development, as well as language and social skills. Vitamin A levels also had a positive effect on motor development.

Damage from lipid peroxidation can be linked to many complications in the newborn, and is especially problematic in premature babies. Research appearing in the *Archives of Medical Research* (Volume 33, Issue 3, May-June 2002, Pages 276-280) found that preterm infants have lower levels of vitamins A and E than term babies.

The type of fats and oils consumed by children is also important. DHA is an omega-3 fatty acid found in fish oil. It is important for brain development in children. A recent study, published in *Clinical Pediatrics* (2008 May;47(4):355-62) looked at 175 healthy four-year-olds who were supplemented with 400 mg per day of DHA or a placebo. Prior to supplementation and after four months of supplementation, the children were given four tests of cognitive function.

The group given the DHA had blood levels of DHA increase by 300%. Higher DHA levels were associated with improved performance in listening comprehension and vocabulary as measured by the Peabody Picture Vocabulary Test. For each increase of 1% in serum DHA, there was as much as a nine-point improvement in the test score.

WHY IS THERE SO MUCH AUTISM?

According to the US Department of Education, autism is increasing at a rate between 10% and 17% per year. In the decade between 1992 and 2002 the number of cases of autism in the United States increased by over 700%.

These numbers are alarming, especially considering that autism basically did not exist before 1940.

Something is assaulting the nervous systems of our children, and it didn't exist (or was a minor influence) before 1940. Here are some possibilities:

Vaccinations: We are told that studies prove that they do not cause autism. Actually the study that needs to take place has never been performed. We need to look at the health of a large group of people who have never been vaccinated and compare it to a large group who has gotten all of the "necessary" vaccines (including chicken pox). Count the cases of autism in both groups (and while you are at it, count the cases of ADHD, MS, crib death, and autoimmune diseases).

Antibiotics: Prior to 1940 there was no widespread use of antibiotics. By the end of World War II the US

was producing 80 tons of antibiotics each year. By 1990 we were producing 20,000 tons per year. About 1/3 of all pediatrician visits are for ear infections (treated with antibiotics). Antibiotics are also in the food supply; they are fed to animals to fatten them up. Candida, dysbiosis, and food allergy may result from overuse.

The environment: There are 75,000 chemicals produced in the US every year; 3,000 of which are produced in amounts greater than 50,000 tons. The average American has over 116 synthetic compounds stored in his or her body (according to the CDC). Many of these things are neurotoxins; insecticides attack the insect's nervous system.

Heavy metals: Mercury amalgams came into widespread use in 1927 (a child in 1927 would be of childbearing age in 1940). Mercury is also used as a preservative in vaccines. Cadmium is in cigarette smoke. Lead was in gasoline until the 1970s. All heavy metals are neurotoxins.

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Nutrition: The use of food additives, hydrogenated oils and refined foods steadily increased through the 20th century. Sugar consumption increased and the amount of vitamins and minerals in the average diet decreased. Also, sensitivity to regularly eaten foods is increasing.

It turns out that the health care professionals who are actually getting results with autistic patients are looking at it as a multi-faceted attack on the nervous system. Testing for these issues and addressing them nutritionally can produce gratifying results.

Got Health Questions? We've Got Answers!

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CAN ANTACIDS CAUSE GASTRITIS?

The signs and symptoms of radiation sickness depend on the severity of the exposure. The measurement for radiation exposure is done in a unit called the gray (Gy). Symptoms will appear when the entire body receives a dose of 1 Gy or greater (a typical x-ray focuses 1/10 Gy to a small area of the body). A dose greater than 6 Gy is untreatable and usually fatal.

A dose between 1-2 Gy will produce nausea and vomiting within six hours. Within four weeks these patients will begin to experience weakness and fatigue. If the exposure is more severe (between 2-4 Gy), the patient will also experience hair loss, bloody vomit and stools, poor wound healing, infections and low blood pressure usually within one to four weeks. A more severe dose (between 2-6 Gy) will produce nausea and vomiting within two hours; the patient may also experience diarrhea, fever and headache. Severe exposure (8 Gy or higher) will produce nausea and vomiting within 10 minutes. Severe exposure will also immediately produce dizziness and disorientation, weakness, fatigue, hair loss, and bloody vomit.

Treatment starts with decontamination--removing all exposed clothing and washing the skin to remove any radioactive particles. This prevents further distribution of radioactive particles into the body.

Bone marrow damage is one of the long-term problems in radiation exposure. In moderate to severe exposure the patient has trouble with wound healing and infections. Using a protein based medication, called granulocyte-colony-stimulating factor, promotes the growth of white blood cells and helps to offset the damage to the bone marrow.

Some substances are used to reduce the organ damage caused by radioactive particles. These treatments are for *specific* types of exposure. Potassium iodide (KI) is taken to prevent damage to the thyroid from radioactive iodine. Some people have been taking KI prior to exposure to prevent damage should they become exposed; some have the mistaken idea that KI is some kind of panacea. KI cannot prevent radioactive iodine from entering the body; it can protect only the thyroid from radioactive iodine, not other parts of the body. KI cannot reverse the health effects caused by radioactive iodine once damage to the thyroid has occurred. It also cannot protect the body from radioactive elements other than radioactive iodine--if radioactive iodine is not present, taking potassium iodide is not protective. Some people are allergic to iodine and may react poorly to taking it. People with thyroid disease should not take iodine without first discussing it with their doctor.

A wise man should consider that health is the greatest of human blessings, and learn how by his own thought to derive benefit from his illnesses.

Hippocrates

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HOW TO IMPROVE MUSCLE FUNCTION IN THE ELDERLY

Amino acid supplementation may be one way to improve muscle function and exercise endurance in the elderly, according to research appearing in the *American Journal of Cardiology* (Volume 101, Issue 11, Supplement 1, 2 June 2008, Pages S104-S110). The subjects of the randomized, double-blind, placebo-controlled study were 95 senior citizens (aged 65-74) with chronic heart failure. Subjects were given either a placebo or 4 g of a mixed amino acid supplement twice each day. An exercise test was given at the beginning of the study and after 30 days of supplementation. The group receiving the amino acids had a significant improvement in exercise capacity and in peripheral oxygen availability.



Another pilot study appearing in the *American Journal of Cardiology* (Volume 101, Issue 11, Supplement 1, 2 June 2008, Pages S78-S81), showed the value of amino acid supplementation in elderly patients with chronic heart failure. The subjects took 4 g of a mixed amino acid supplement for 12 weeks.

Prior to supplementation the subjects were able to walk an average of 201 meters in six minutes. After 12 weeks of supplementation, the average distance walked increased to 226 meters.