

THE BETTER HEALTH NEWS

NUTRITION AND CRP

TO YOUR HEALTH

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C-reactive protein (CRP) is a globular protein that increases in the serum as a response to injury or inflammation. It also turns out to be a good predictor for cardiovascular disease. A study appearing in the *Journal of the American Nutraceutical Association* (2005;8(1):43-44), involving more than 27,000 women, found that CRP was a better predictor of cardiovascular disease than LDL (bad) cholesterol.

High CRP levels are actually associated with increased mortality from all causes. A CRP level greater than 3 mg/L in men was found to increase the likelihood of death by nearly two-fold, according to research appearing in *Clinical Chemistry* (2008 Feb;54(2):335-42). The high CRP levels increased the likelihood of heart attack by a factor of 2.15 and increased the likelihood of cancer by a factor of 1.65.

A recent study appearing in *Free Radical Biology and Medicine* (Oct 10, 2008) randomly assigned 396 non-

smokers to receive either vitamin C, vitamin E or a placebo. Vitamin C lowered CRP in the subjects with elevated CRP, but not in those with normal CRP levels.

Improving the diet and other nutrients can also lower CRP. A cross-sectional study appearing in the *American Journal of Clinical Nutrition* (2006; 84(1): 223-9) looked at 971 Japanese men and women over the age of 70, their intake of omega-3 fatty acids and the effect omega-3 consumption had on CRP levels. The results suggest that high intake of omega-3 fatty acids may be associated with low CRP levels. Consumption of fruits and vegetables can also lower CRP levels. According to research appearing in the *European Journal of Clinical Nutrition* (63, 1345-1352 (November 2009)) CRP levels were inversely associated with the consumption of fruits and vegetables. In the same study, consumption of vitamins C, E and fiber were also negatively associated with CRP levels.

A FEW WORDS ABOUT MAGNESIUM

Magnesium can help with depression, bone strength, cardiovascular health, insulin and blood sugar control, and it is nature's muscle relaxer. An article appearing in *Hospital Practice* (April 30, 1993;79-92) had a few things to say about magnesium. Magnesium is an important cofactor in over 300 chemical reactions in the body. It is important for ATP synthesis (cellular energy), and is found in tissues with high metabolic activity. The heart, liver, brain and kidney all have the highest intracellular concentrations of magnesium.

Magnesium levels are low in diabetics and low levels are associated with insulin resistance. In obese children, the connection between low magnesium and insulin resistance is seen in research appearing in *Diabetes Care* (May 2005;28(5):1175-1181). When type-2 diabetics are given magnesium, it helps decrease platelet aggregation. It ultimately may help protect against coronary artery blockage and heart attacks. It is also useful for bringing irregular heart beats under control. It has been postulated that magnesium deficiency may be responsible for heart damage experienced by endurance athletes. An article appearing in *Patient Care* (January 30, 1984;79-81), states that

magnesium is useful for treating heart arrhythmias. Also, patients given magnesium after cardiac surgery have fewer problems with both arrhythmias, and uncontrolled high blood pressure from coronary vasospasm. An article appearing in the *Archives of Internal Medicine* (November 1992;152:2189-2196) also states that magnesium is cardioprotective.

Magnesium deficiency may play a role in allergies. A study appearing in the *Journal of The American College of Nutrition* (1990;9(6):616-622) found that rats that were magnesium deficient had higher histamine levels than rats that were not deficient. Asthmatics benefit from magnesium supplementation. Magnesium given in an IV has been used to stop asthma attacks. Also, it can reduce bronchial hyperreactivity, according to research appearing in *Clinical Pharmacologic Therapy* (2001;69:365-371).

Magnesium is valuable for treating preeclampsia. In a double-blind study, magnesium reduced blood pressure, not only during the infusion phase, but afterward. An article appearing in *Gynecologica Scandinavica* (1994;73:95-96) shows that magnesium has a beneficial effect on the mother's blood pressure, and on the birth weight of the child. Several studies have shown that magnesium

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may cause vasodilatation, and is probably the reason for magnesium's blood pressure lowering effect in pregnancy-induced hypertension and preeclampsia. In pregnancy-induced hypertension there is an inverse relationship between serum magnesium concentration and blood pressure. Studies have shown that magnesium infusion reduces blood pressure, increases cardiac output and decreases total peripheral resistance.

Magnesium can be depleted with certain medications, like diuretics and is low in people who eat a highly refined diet. Magnesium deficiency is fairly common and should be considered with a variety of health problems.

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IS IT SCIENCE OR MARKETING?

An old joke about research likens it to a man looking on the street for his keys. A policeman comes up and asks the man if that is the location he lost them. The man replies, "No, but the light is better here." What we learn from research is dependent on where we look. Those who are opposed to natural therapies, often feel that they are not "scientific", or well researched. Often this is due to the fact that we are not looking in the right places. There is a prejudice against natural health care and a preference for drug therapy in the medical literature that keeps us from looking in the right places. A study conducted at Wake Forest University School of Medicine and published in *BMC Complementary and Alternative Medicine* (April 9, 2008) found that advertising by the pharmaceutical industry creates a bias against non-drug therapies in the journal. Researchers reviewed articles from 11 major medical journals for one year. The amount of pharmaceutical advertising in each journal was tallied and compared the coverage given to dietary supplements and natural health care. Journals with the most drug company advertising were least likely to feature articles about dietary supplements. Articles in journals with lots of drug company advertising, tend to view supplements negatively.

Influencing the information printed in

medical journals has benefited the drug industry. Prescription drug spending increased every year between 1995 and 2000. There was a 20% increase between 1999 and 2000, taking the total to \$132 billion, according to the National Institute for Health Care Management Foundation. In 2005 sales reached \$251.8 billion. According to the *New England Journal of Medicine* (February 14, 2002;346:498-505,524-531), in 2001, 80% of all Americans took at least one drug in any given week; with about half of the population taking a prescription medication. Also, about 7% of Americans take five or more prescription drugs in any given week. Advertising to the public may account for part of this growth in business. Spending on drug advertisements between 1996 and 2000 went from \$791 million to \$2.5 billion annually.

We often view health care as an altruistic, scientific undertaking. For many of us it is. To many, it is a business; and profits matter more than health. It is why our approach to heart disease focuses on cholesterol medication (even though the benefits are marginal), and ignores natural substances like CoQ₁₀, enzymes, gamma tocopherol, carnitine and resveratrol. Statins are patentable and a big business, the natural substances are not. Over 100,000 people die each year because of prescription medication that is properly given and taken. Perhaps some of these deaths are due to our confusion of marketing with science.

Surgeons must
be very careful

When they take
the knife!

Underneath
their fine
incisions

Stirs the
culprit—life!

Emily
Dickinson,
poem #108,
1859

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VITAMIN C, VITAMIN E, CHROMIUM AND DIABETES

Eating sweets and starch causes the body to produce insulin. If the consumption of refined food is excessive and habitual, the body becomes less responsive to the insulin—a condition known as “insulin resistance”. The body produces more and more insulin, but responds to it less. Excess insulin production causes a variety of problems, like weight gain, high cholesterol and high blood pressure. It can eventually lead to type 2 diabetes.

Research appearing in the *Journal of Clinical Biochemistry and Nutrition* (2008 Nov;43(3):191-8) looked at the effect supplementation had on insulin insensitivity. The 30 subjects of the double-blind study were randomly given either a placebo,

chromium, or a combination of chromium with vitamins C and E. After six months the subjects who were taking chromium and the subjects taking chromium with vitamins C and E experienced improved antioxidant status. The groups taking the supplements also had reduced insulin resistance, lower fasting glucose levels and lower hemoglobin A1c levels (a test to measure high blood sugar over a long time). The author of the study concluded, "These findings suggest that chromium together with vitamins C and E was effective for minimization of oxidative stress and improvement of glucose metabolism in type 2 [diabetes] patients."