WHOLEHEALTHWEB.COM

THE BETTER HEALTH NEWS

TO YOUR HEALTH

NO WONDER WE SPEND NEARLY $3 TRILLION ON HEALTH CARE

The cost of health care is on everyone's mind. The debate has proceeded around how we can get people covered and not about why the costs are so high. There is an interesting piece of research that may illustrate why we spend so much for health care. The pain medication Vioxx was taken off of the market because it increased the likelihood of heart attacks. Vioxx was an anti-inflammatory drug known as a cox-2 inhibitor. It is named for the enzyme it suppresses. The cox-2 inhibitors are popular because they offer effective pain relief without creating problems with GI irritation caused by other types of pain relievers. Celecoxib (sold under the brand name Celebrex), which is also a cox-2 inhibitor, also increases the risk for a heart attack. Research appearing in the *Journal of the Royal Society of Medicine* (March 3, 2006) showed that Celecoxib can increase the risk of a heart attack by two fold.

Celebrex is commonly prescribed to seniors with arthritis. It makes you wonder how many trips to the emergency room and how much time in CCU may be due to the fact that this drug is still being prescribed. How much do you suppose the use of drugs add to our health care costs?

Our heath care costs are high for many reasons. The system exists to provide a profitable business for drug companies, medical equipment producers, and insurance companies. Care is secondary to these companies making money. Drug companies control a lot of the information received by doctors. Face it, all of the medical journals sell ads to drug companies. One sure way to corrupt scientific findings is to get money involved. This may be the reason a lot of effective, inexpensive natural therapies are ignored. A lot of the activity that passes for health care is for profit and is neither healthy nor provides care .

As long as we continue along this path, it will not matter whether the government pays the bill or we pay it out of pocket—it will still continue to cripple our economy.

PAIN AND HEALTH CARE COSTS

For some reason doctors and patients seem to think that pain medications treat pain and inflammation. The fact is that they relieve pain. This seems like a subtle difference, but by a slight shift in attitude we can cut our health costs.

An advertisement for a popular pain medication touts that taking it before intense physical activity will reduce the amount of pain caused by the activity. There are some problems with this thinking. Pain medications actually increase oxidative stress, so while they offer temporary relief, they actually promote an environment that favors pain and inflammation. NSAIDs can actually cause cartilage to break down, increasing the potential for injury. Many people take medication for arthritis pain, but they are trading short-term relief for long-term degeneration. One of the popular pain medications (classified as a Cox-2 inhibitor) actually doubles the chance of getting a heart attack. Also, pain medications can lead to a host of other health problems. According to the July 27, 1998 issue of the *American Journal of Medicine*: "Conservative calculations estimate that approximately 107,000 patients are hospitalized annually for nosteroidal anti-inflammatory drug (NSAID)-related gastrointestinal (GI) complications and at least 16,500 NSAID-related deaths occur each year among arthritis patients alone. The figures for all NSAID users would be overwhelming, yet the scope of this problem is generally under appreciated"

The *New England Journal of Medicine* (December 20, 2001;345:1801-1808) published research that linked pain medication to kidney failure (in patients with existing kidney disease). An article published in the *New York Times* (January 29, 2002) states concern of NBA players over the regular use of these medications. This is in the wake of Alanzo Mourning of the Miami Heat developing a kidney disorder and Sean Elliot needing a kidney transplant. Basketball players commonly take large amounts of NSAIDs before a game(the same behavior that is touted in television ads).

Taking pain medication can have an adverse effect on the cardiovascular system. According to the *Archives of*

WholeHealthWeb.com

Whole Health Web is a site designed to teach people about the value of natural health care. Our goal is to inform you and to help you to start a conversation with your doctor about natural health care. Most of our articles are about scientific research. We will also provide opinion pieces provided by natural health practitioners. Visit us often, as we are continually adding new content

Internal Medicine (February 11, 2002;162:265-270), patients who had filled at least one NSAID prescription were nearly 10 times more likely than those who didn't use the drugs to have a relapse of congestive heart failure. According to research published in the *Archives of Internal Medicine* (October 28, 2002;162:2204-2208), frequent use of pain-relief medications may result in an increased risk of high blood pressure in women.

The cavalier attitude our medical system has in treating one of the most common conditions, pain, can lead to further health complications and cost. How much more are we spending on health care because we don't choose natural methods for pain control first?

SCIENTISTS AND BUMBLE BEE WATCHERS

In the 1960s we were told that it was impossible for a bumble bee to fly, according to all of the knowledge available in aerodynamics at the time. When you measured the size of the bumble bee's wings, computed the speed of the wings and weighed the bumble bee, mathematically it was impossible for the creature to fly.

An old saying says that there two kinds of people in the world, researchers and bumble bee watchers. There was an old chiropractor, who know that research stated that he could not make asthmatics better. Yet his office was full of asthmatics that had gotten better. He would say, "I don't pay much attention to research; I watch bumble bees."

It turns out that after some advances in high speed photography new calculations were able to be made. Scientists were able to see that the wings of the bumble bee fill up like a parachute on the down stroke—greatly increasing the surface area of the wing. They were able to plug the new surface area into the calculations and declared that the bumble bee could indeed fly—much to the relief of bumble bees all around the planet.

Working in natural health care is an exercise in following research and looking at bumble bees. In asthma, for example, there is a fair amount of research that shows that a good diet, antioxidants, magnesium and omega-3 fatty acids can all help improve symptoms. Many of us are getting results with giving betaine HCl, improving digestion, adrenal support and chiropractic adjustments, even though there is not a lot of research to support it.

People who are locked into the medical model are fond of saying things like, "The research just isn't there; you really need to be more scientific." The implication being that natural health care is unscientific. That is not the case. In many ways, natural health care is more scientific than standard Western medicine.

Most of the medical journals sell ads to drug companies, so you are not going to see a lot of research that says natural health care is good and drugs are dangerous. Take statins, for example. Statin medication is a $25 billion per year industry. Yet if you look at the research, the drugs really don't do a lot to prevent heart attacks. In most studies, the death rate in the placebo group and the statin group is about the same. One interesting development is the dramatic increase in the number of people developing heart failure. The drugs destroy coenzyme Q 10, and we know that low coenzyme Q 10 levels are related to heart failure. We also know that one of the side-effects of statins is muscle destruction. Since the heart is a muscle, it is obvious to the bumble bee watcher that the medication is at least contributing to this problem. The researchers just haven't gotten there yet; it may be unfair to say that the presence of statin ads in the journals keep this from happening.

There is a difference between science and research. Anecdotal information, clinical observations, statistics and other information are part of science. Science forms theories based on earlier observations. If you know that research shows a strong correlation between oxidative stress and asthma symptoms, and you know that poor digestion leads to oxidative stress, it is not much of a stretch to expect that improving digestion will get your asthma patients better. Research is a way of focusing on a single thing and determining if your observations mean anything. Science incorporates lots of sources of information, including (but not limited to) research. Truth is truth, whether the research has caught up or not. Bumble bees flew long before we could prove it was possible.

HOW HEALTHY ARE YOU?

FINDING OUT IS EASY AS 1, 2, 3!

Right Now, You Can Take Advantage Of Our Free Online Health Assessment Tool.

JUST FOLLOW 1, 2, 3!

1. Visit our website to take the FREE online health assessment.
2. Print the results.
3. Bring your results to your natural health practitioner.

TAKE OUR FREE ONLINE HEALTH ASSESSMENT NOW!

Visit: www.WholeHealthWeb.com

And Take Your Free Health Assessment Now!

WholeHealthWEB
Learning to Feel Better...Naturally!

WholeHealthWeb.com

Visit often as we are continually adding new content

INFLAMMATION AND VITAMIN E

An article printed in the journal *Arthritis and Rheumatism* (September 1991;34(9):1205) discussed the anti-inflammatory role of vitamin E. The article cites a study where vitamin E was used in a placebo in a study examining the anti-inflammatory effects of fish oil in patients with rheumatoid arthritis. In that study, the group receiving the placebo also enjoyed a decrease in pain and inflammation; c-reactive protein (a substance found in the blood that indicates the presence of inflammation) was reduced by 1/3 in the placebo group. Another small study where osteoarthritis patients were given either 600 mg/ day of vitamin E or a placebo found that a significant portion of the group receiving the supplement experienced improvement in symptoms.

A recent study done on mice appeared in the journal *Experimental Physiology* (2008 Dec;93 (12):1263-72). The mice were injected with a substance from bacteria that produces inflammation (*E. coli* lipopolysaccharide). Three days prior to the injection they were divided into two groups, with one group receiving a vitamin E injection and the other receiving a placebo. Chemical markers indicating inflammation were measured after the injection (specifically cytokines, interleukin-1-beta and interleukin-6). The cytokine levels were much lower in the mice that received the vitamin E.