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THE BETTER HEALTH NEWS

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Eat your vegetables and protect yourself from dementia. Vegetables are high in folic acid; the word "folic' comes from the word "foliage". Adequate folic acid levels may protect you from dementia. The most common form of dementia is Alzheimer's disease, affecting about 13 million people worldwide. By mid century the prevalence of Alzheimer's disease is expected to quadruple.

A study appearing in the *Journal of Neurology, Neurosurgery and Psychiatry* (Published online ahead of print, doi 10.1136/jnnp.2007) found a connection between folic acid levels and the tendency for dementia. Researchers followed 518 elderly individuals (average age 73) for a 2.4 year period. At the beginning of the study, none of the subjects had dementia.

Homocysteine is an amino acid that is associated with various health problems, including osteoporosis and heart disease. The body needs folic acid and vitamin B_{12} to convert it to more useful products. The subjects were tested at the beginning of the study and 20% had high levels of homocysteine, 17% had low vitamin B_{12} levels and 3.5% were deficient in folic acid.

At the end of a 2.4 year period, 45 of the subject developed dementia; 34 of those were diagnosed with Alzheimer's disease. The researchers noted that the development of dementia was much more likely in those subject with low folate levels and high homocysteine levels. So eat your vegetables, get plenty of folic acid and protect your brain.

Vitamin B_{12} is an excellent product to consider as supplementation for elderly people with memory problems. Mark Goodman, Ph.D. is quoted in an interview by Kirk Hamilton that appeared in Clinical Pearls, saying, "I initially suspected vitamin B_{12} limits were too low, when I encountered on consultation, geriatric patients admitted with Alzheimer's diagnosis whose frontal lobe functioning was obviously intact. This is inconsistent with Alzheimer's diagnosis. They were exhibiting other global neuropsychological deficits with a systemic/metabolic profile. Many elderly individuals who are sub clinically B_{12} deficient often have normal blood levels of B_{12}."

DIET AND SUPPLEMENTS TO PREVENT DEMENTIA

Dementia is a growing problem, according to the "Delphi Consensus Study", appearing in the *Lancet* (2005; 366(9503): 2112-7). There is a new case of dementia every seven seconds, and the authors predict that the number of cases of dementia will double in developed countries between 2001 and 2040. Currently there are 23.4 million cases of dementia worldwide, with 4.6 million additional new cases each year.

Diet may, in part, help to prevent dementia. Research appearing in the *Archives of Neurology* (Dec 2006; 63: 1709–17) indicates that the Mediterranean diet may lower the risk of Alzheimer's disease. The researchers analyzed the diets of 194 Alzheimer's patients and 1,790 people without the disease. Subjects were rated on their adherence to the Mediterranean diet on a scale from 0 to 9, and using a 61-item version of Willett's semiquantitative food frequency questionnaire. Strictly following the diet was associated with a decreased incidence of Alzheimer's disease. The risk was lowered between 19 and 24% for each point (on the 0-9 scale used by the researchers). Those in the top 1/3 of dietary compliance had a 68% reduced risk when compared to those not following the diet.

Obesity seems to increase the risk of dementia, according to research appearing in the *British Medical Journal* (2005; 330(7504): 1360). Researchers gathered data from 10,276 men and women over a 27 year period. Between 1964 and 1973, subjects aged 40 to 45 years were given health evaluations. Follow-up exams were performed about 20 years later, between 1994 and 2003. Subjects who were obese at the time of initial evaluation had a 74% greater chance of developing dementia compared to subjects who were of normal weight.

Exercise also may help to prevent dementia. Research appearing in *The Journals of Gerontology Series A: Biological Sciences and Medical Sciences* (63:529-535 (2008)) looked at physical activity in 2263 men aged 71–92 years without dementia. There were 173 incident cases of dementia with a mean follow-up of 6.1 years. The incidence of dementia was lower with increasing physical activity and function. For men with low physical function, high

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levels of physical activity were associated with half the risk of dementia versus men who were the least active. The authors concluded that increasing general physical activity in elderly men with poor physical function can possibly have a protective effect and delay the onset of dementia. Like so many other diseases, diet and exercise play a role in dementia.

Supplementation is always a good idea to help prevent dementia. Also, sometimes when someone is a little forgetful, supplementing with rubidium is helpful. According to Dr. Harry Eidenier, elderly folks who keep their vitality into old age have higher levels of rubidium. Also some of the CRS (can't remember stuff) suffered by the elderly can be remedied with vitamin B_{12} supplementation. These two supplements are a great place to start when an older patient complains about memory. To prevent dementia, antioxidants, fish oil, and phosphatidylcholine

EXERCISE TO PREVENT DEMENTIA

There is evidence that exercise reduces the risk for developing dementia. A prospective, cohort study appearing in the *Archives of Internal Medicine* (2006; 144 (2): 73-81) looked at the exercise habits in 1,740 subjects over the age of 65. Over the course of the study, those who exercised three or more times each week had a lower incidence of dementia.

According to the "Global Prevalence of Dementia: a Delphi Consensus Study", appearing in the *Lancet* (2005; 366(9503): 2112-7), the number of people with dementia in developed countries will double between 2001 and 2040. There are over 23 million people with dementia worldwide, with a new case coming every seven seconds. There are 4.6 million new cases every year.

Other research appearing in *The Journals of Gerontology Series A: Biological Sciences and Medical Sciences* (2008; 63 (5): 529-35) also found that exercise decreased the likelihood of developing dementia. The subjects in this cohort study were 2,263 men between the ages of 71 and 92.

In the *Archives of Neurology* (March 2001;58:498-504) 9,008 men and women over the age of 65 and without any cognitive impairment or dementia were studied. Of that number, 4,615 were available for a five-year follow-up. In the five year follow-up 436 of the subjects were found to be cognitively impaired and 285 were found to have actual dementia. It was found that regular exercise decreased the risk for both cognitive impairment and dementia. Also, the protection was proportional—the greater the amount of activity, the lower the incidence of cognitive impairment or dementia.

Exercise even improves brain power according to a report presented at the annual meeting of the Society of Psychophysiological Research in Montreal, Canada October 18, 2001. The study looked at the thinking ability of 20 subjects between the ages of 18 and 24 after running for a half-hour. After the exercise the subjects were connected to an electroencephalogram (EEG), a device designed to measure brain waves. They were given computer tests before and after the exercise. The brain wave measurements showed that the decision making process was faster after the exercise.

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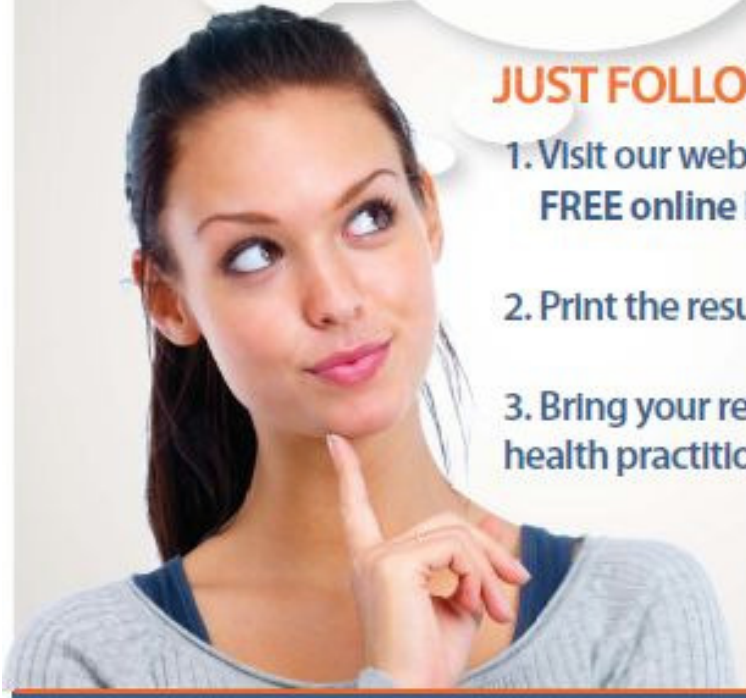

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B_{12} AND COGNITIVE DECLINE

Many earlier studies have linked high homocysteine levels to cognitive decline, and folic acid has some value for protecting mental capacity. It turns out that vitamin B_{12} may be even more important.

Measuring methylmalonic acid is a way of determining a vitamin B_{12} deficiency. Serum methylmalonic acid levels will be increased with a B_{12} deficiency. Research appearing in the journal *Neurology* (2009; 72: 361-367) looked at the rate of cognitive decline as it relates to serum levels of vitamin B_{12} and methylmalonic acid levels. Earlier studies have related homocysteine levels to cognitive decline, but homocysteine is not as specific a marker for B_{12} deficiency as is methylmalonic acid.

This was a prospective study involving 516 subjects from the Chicago Health and Aging Project. The researchers linked vitamin B_{12} status to scores on cognition tests over a period of six years (testing in year three and in year six). High serum methylmalonic acid level was associated with a faster rate of cognitive decline. Similarly, a high level of serum B_{12} was associated with a lower rate of cognitive decline. The researchers concluded that, “Serum methylmalonic acid and vitamin B_{12} concentrations may be the more important risk factors for cognitive decline when compared to serum homocysteine concentrations, particularly in older populations exposed to food fortification and possible supplements containing folic acid.”