DR. MICOZZI'S
INSIDERS' CURES
DECEMBER 2012 • VOLUME I • ISSUE VI

Type III diabetes—the brand new, DEADLY epidemic no one saw coming

You've probably heard the old saying "bad things come in threes." And after nearly a century of research, it appears that may be the case with diabetes.

You're likely familiar with Type I and Type II diabetes. But now it looks like there's yet another form on the horizon—Type III diabetes. And it may be the most sinister, dangerous form of the disease yet.

A modern-day disaster 90 years in the making

For centuries diabetes had been known primarily as a condition of excess fluid loss through frequent urination, with sugar in the urine.

But in 1922, two researchers won a Nobel prize when they discovered that diabetes mellitus was a primary deficiency of insulin. Insulin is responsible for moving glucose (sugar) from the blood into the tissues. Without it, the tissues, including the brain, literally starve to death in a sea of plenty.

Since then, there have been many more discoveries regarding this condition. Like the difference between Type I and Type II diabetes.

The Nobel-prize winning researchers discovered what has come to be known as Type I (or "juvenile") diabetes. With Type I, from childhood, the pancreas simply does not make insulin. Type I diabetes is treatable by injecting synthetic insulin over regular time intervals.

But as the 20th century progressed, an initially mysterious new type of diabetes emerged. People with this form of the disease produce adequate insulin. But their tissues become resistant to the actions of that insulin. And, as a result, glucose can't enter the tissues. Instead, it accumulates in the blood. This "insulin-resistant" diabetes became known as Type II diabetes.

Now, I believe we are witnessing a third form of the disease—Type III diabetes. And it may have been masquerading as the No. 1 medical mystery of our time—the modern misery of Alzheimer's Disease.

Elevated blood sugar shrinks your brain

A recent Australian study found that high blood sugar levels appear to actually cause the brain to shrink.[1] Even in people who don't have Type I or Type II diabetes.

This study of 250 men and women showed that high blood sugar levels appear to damage the brain. Specifically, they cause the areas associated with memory, cognitive function, and emotional processing to shrink. And impairments in these areas are the hallmark symptoms of Alzheimer's dementia.

In fact, these researchers found that highly-educated people in their 60s, with even mildly elevated blood sugar, had the brains of unhealthy people in their 70s.

While prior studies have shown that diabetics have higher rates of dementia, this is the first study to show these effects even in people who are not diagnosed as having Type I or Type II diabetes. So, are they suffering from Type III diabetes?

In non-Type I or -Type II diabetics, high blood sugar can result not only from consuming too much sugar in the diet, but from generally poor diet, lack of exercise, and chronic stress. So, blood sugar is a problem for *everyone*, not just diabetics. And now we're seeing just how significantly it can affect your brain (as well as other parts of your body).

I first heard about this link last

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Marc S. Micozzi, M.D., Ph.D., is a worldwide leader in nutritional and complementary/alternative medicine. He has had a distinguished career as a researcher and physician executive at the National Institutes of Health and Walter Reed National Military Medical Center in Washington, DC, and the College of Physicians in Philadelphia PA. He has published over 30 medical and trade books, and founded and edited the first scientific journal, and the first textbook, on complementary/alternative and nutritional medicine, now going into a 5th edition (2014) and continuously in print since 1995.

Dr. Micozzi's *Insiders'* Cures is published monthly by OmniVista Health Media, L.L.C., 702 Cathedral St., Baltimore, MD 21201 for $74 per year ($6.16 an issue).

POSTMASTER: Send address changes to Insiders' Cures, 702 Cathedral St., Baltimore, MD 21201.

Author: Marc S. Micozzi, M.D., Ph.D.
Publisher: Katherine Wheeler
Executive Editor: Amanda Angelini

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September, and have been looking into it ever since. And, indeed, a large body of evidence is now suggesting that Alzheimer's is primarily a metabolic disease, just like diabetes. But different enough from the already well-known Types I and II to warrant its own classification. Type III diabetes.

Why your brain needs insulin

As I mentioned above, an association between Alzheimer's dementia and Type II diabetes is already long-established. In fact, the risk of dementia among Type II diabetics is *two to three times higher* than in the general population. There are also associations between Alzheimer's and obesity, and Alzheimer's and metabolic syndrome (a pattern of diet- and metabolic-related disorders).

Some researchers first proposed that Alzheimer's was actually another form of diabetes back in 2005.[2] The authors of these original studies investigated the brains of people who had died of dementia. They found that the levels of both insulin and insulin-like growth factors in the brains of Alzheimer's patients were sharply reduced. And insulin levels were lowest in the parts of the brain that appeared most affected by dementia.

Insulin in the brain has a number of important functions in addition to glucose metabolism. It helps regulate transmission of signals from one neuron (nerve cell) to another. And it influences their growth as well as their ability to adapt to changes and survive.

Experiments conducted since then appear to support the link between diet and dementia. As ever, these observations show the biochemistry of dementia to be fantastically complex, involving inflammation, stress, oxidation, the accumulation of a certain brain protein and the transformation of another—among other factors. This is one case where more research does, in fact, need to be done. And this is the kind of research that NIH should really be doing.

However, if current indications hold true, Alzheimer's disease could be yet another catastrophic impact of poor diets.

Perhaps one of the worst thus far

Around 35 million people suffer from Alzheimer's disease worldwide and based on current projections, with the rate at which the population is aging, this epidemic will rise to 100 million by 2050.

But if, as many scientists now believe, it is caused largely by the brain's impaired response to insulin, those numbers could rise much further. In the U.S., the percentage of the population with Type II diabetes has almost tripled in just 30 years. If Alzheimer's dementia—Type III diabetes—acts the same way, the potential for more human suffering is immense.

But while U.S. government research on Alzheimer's flounders around, there are steps you can take to help protect yourself and your family now. In fact, there are some exceptionally effective tools for combating this burgeoning epidemic. Starting with one that I'm particularly excited about.

The latest blood-sugar darling tackles Alzheimer's, too

Berberine is quickly becoming one of the new "darlings" of the nutritional medicine world. And the "buzz" has focused largely on this herbal remedy's ability to balance blood sugar and combat diabetes. But the new research on berberine that caught my eye recently had nothing to do with blood sugar or diabetes—or so I initially thought.

Several new studies have shown

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impressive results using berberine for Alzheimer's.[3,4,5]

But now that Alzheimer's is emerging as Type III diabetes, the link between these two fields of research on berberine makes perfect sense.

But berberine defends against Alzheimer's not only by helping to regulate blood sugar.

3-tiered brain protection you won't find anywhere else

New experimental results have found that berberine protects the brain in at least three more distinct ways:

1. It can safeguard your brain from the dangerous oxidation damage that can "eat away" at brain tissue.
2. It targets and destroys memory-killing enzymes that have long been considered key in the development of Alzheimer's.
3. It promotes healthy blood flow directly to the brain—an essential element to conquering dementia.

Berberine also seems to be able to block certain nerve receptors, which may partly explain its anti-Alzheimer and neurotransmitter-modulating properties.

Add these specific actions to berberine's well-established blood sugar benefits and it appears that this herb may hold the key to preventing and even slowing the progression of Alzheimer's disease (Type III diabetes) like nothing before it.

I recommend 500 mg per day, taken over the course of two or three doses to achieve a steady state.

The first step in avoiding and managing ANY type of diabetes

Of course, no discussion of metabolic disorders is complete without addressing the importance of diet.

The food industry engineers its products to bypass the neurological signals that would otherwise prompt people to stop eating. Filling them with unhealthy fats, sugars, and high fructose corn syrup. Essentially ensuring they're completely devoid of any real nutrients. Which makes processed, packaged foods a disaster not just for your waistline, but also for your blood sugar, your brain—and your health in general.

Cutting out overly processed foods should be the first step in avoiding—or treating—ANY disease, including diabetes (Types I, II, and III).

For many more natural approaches to preventing and treating dementia, refer back to the special report *The Insider's Answer for Dodging Dementia*, which you received with your subscription to *Insiders' Cures*. IC

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NEWS BRIEF

Vitamin D can do wonders for your heart!

Most everyone these days understands the importance of vitamin D for bone health and to avoid osteoporosis. Unfortunately, the mainstream has a difficult time moving beyond the "minimum" levels required for healthy bones. But vitamin D has many functions beyond bone health. In fact, virtually every organ in the body has receptors for vitamin D. Nature would not put the receptors there if there were not important functions in all cells.

And the simple fact is, you need much higher amounts to reach optimum levels. Ones that offer the broad range of healthy effects vitamin D can deliver.

A new study from Denmark measured levels of vitamin D in the blood (which is more precise than dietary studies that assess nutrient intakes).[1] Researchers followed over 10,000 women and men over 30 years. And they found that those with higher levels of vitamin D cut the risk of developing heart disease nearly in half.

Further, the risk of premature death from all causes was cut by more than half. The number of actual heart attacks was cut by **two-thirds**. And overall death from heart disease was cut by over four-fifths.

While these statistics from Denmark are very impressive, researchers don't yet know how vitamin D manages to have its effects on the heart. It may be that lower vitamin D levels are simply a marker of poor health in general.

Either way, minimal levels that simply help you avoid frank clinical deficiency in terms of bone health just aren't enough. Whether you're trying to support your heart, your immune system, or your general health.

Unfortunately, especially at northern latitudes like Denmark, it is virtually impossible to get optimal vitamin D levels from the diet and sunshine alone. Most people would be well advised to consider a high-quality vitamin D supplement (2,000 IU per day). You can find all the details about doses, dietary sources, sunshine, and supplementation in the October 2012 issue of *Insiders' Cures*.

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The surprising truth about Metformin

The "natural" blood-sugar remedy that had been sidelined for far too long

What I'm about to tell you may be shocking. And it's sure to ruffle the feathers of many of the "natural know-it-alls." But the science is clear, so I'm not afraid to say it:

If you have unmanaged Type II diabetes, you should consider the drug metformin as a first line of treatment.

And you won't get the full story anywhere else, since the natural health industry wouldn't be caught dead recommending a drug. So, please allow me to do the honors here…

Think of it as your emergency "get out of jail free card"

Diabetes is deadly. High blood sugar coursing through your body destroys your eyes, kidneys, heart, brain, and more. So the sooner you bring it down the better. (Just like high blood pressure, for which I also recommend tried and true medications as a first-line treatment for unmanaged hypertension.)

And in this case, the science is clear—the drug metformin has been proven safe and effective for most people. And since it's now a generic drug, it's highly cost effective, too.

Now don't get me wrong…I'm not saying diet and exercise isn't important. In fact, they're the best means for preventing and even reversing Type II diabetes entirely. Something metformin can't do. And there are certainly dietary supplements that can help with maintaining healthy blood sugar (like berberine, as I discussed on page 2).

But Type II diabetes doesn't develop overnight. And let's face it, changing the habits and consequences that got us there in the first place isn't an overnight task either. So if you need additional help, this is one rare instance where you shouldn't be afraid to look at a mainstream therapy.

And when an option this effective comes along to help kick-start your efforts safely (when taken properly), even if it *is* a drug…it's something you should consider seriously.

Indeed, it's rare to find such a safe and effective "drug" as the popular diabetes treatment metformin. In fact, this is one "wonder drug" that is steeped in natural history—like aspirin or digitalis—and was in "historic use" for centuries.

One of Nature's wonder remedies

Originally, metformin was known under the trade name Glucophage. But it's now been around long enough to go off patent and become generic. Which means it meets one of my primary requirements when it comes to taking a drug: Make sure it has undergone the seven-year post-marketing surveillance period required by the FDA. Which means it's been proven safe by the tens of millions of patients who have taken it over at least seven years, and now much longer.

As a drug it was actually first synthesized in the 1920's. However, it was quickly overshadowed by the Nobel prize-winning discovery of the role of insulin in the treatment of diabetes (see page 1). So metformin was swiftly set aside for half-a-century.

However, its history goes back much further…where it was known throughout Europe as a traditional folk medicine for centuries. That's because this drug actually stems from a flowering plant called *Galega officinalis*, more commonly known as French lilac or goat's rue. The active ingredient is a chemical biguanide known as Galegine, after the botanical name of the plant.

As an herbal extract, Galegine was used traditionally to treat people with polyuria (excessive urination due to excess sugar in the urine) and sweet odor on the breath. Today, we recognize these as two leading symptoms of untreated diabetes.

References date as far back as ancient Egypt and it was in common use in Medieval Europe. The herbal treatment was featured in an English medical treatise by Culpepper in the 17th century. And it was studied at the University of Edinburgh, a leading medical center of the 18th century from which the first medical school in America was established in 1765. It has also been used in Asia to treat influenza and is said to have antibiotic, antiviral, antimalarial, and antipyretic (fever) activities.

With such a long history as a potent herbal remedy, it's actually shocking that it took so long to be used for a major modern medical problem like diabetes!

So after languishing during the Great Depression and World War II, the French finally developed Galegine, or metformin, for clinical use in 1957. It was approved the following year in the United Kingdom, and made its way to Canada in 1972. But it was not approved by the FDA in the United

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States until 1994. And that was only after a U.S. drug company (Bristol Myers Squibb) acquired a French firm that manufactured the drug.

Getting to the root of the delay…

One reason for delayed approval in the U.S. was due to concern over a very rare side effect called lactic acidosis. This is a metabolic condition that results in a buildup of lactic acid in the muscles due to changes in levels of sugar and oxygen.

A poorly advised campaign was undertaken by the public advocacy group, Public Citizen, called "Do Not Use Glucophage." But when all the blowing smoke, and smoke-blowing, began to clear, a study found that the risk of this metabolic disorder was actually ten times higher with older diabetes drugs being used at the time (since discontinued). And eventually more studies observed no difference in risk between diabetics using the drug and those not using the drug—because the problem had actually been due to underlying medical conditions among diabetic patients, and not the drug itself.

So what's the final conclusion regarding the risk of lactic acidosis? If you have underlying kidney or liver conditions, then metformin is not for you.

Most side effects are minimal, and easily managed

The risk of lactic acidosis aside, the most common side effects associated with taking metformin are diarrhea and gastrointestinal upset. But this is typically when first starting the drug, and rarely persists. And, because it lowers blood sugar (hence its use for diabetes) it may cause symptoms like tiredness or weakness, unless and until the dose is adjusted and/or the body adjusts on its own.

Relatively speaking, compared to most other drugs, these side effects are minimal for the benefits you may gain. And are easily managed by monitoring and adjusting dosage accordingly as with any medical management for diabetes.

At the same time, metformin is one of the few drugs that are safe for people with congestive heart failure. Though it can interact with certain blood pressure medications, so be sure to check with your doctor.

All that said there are two concerns you need to know:

1. You must supplement with vitamin B12.

Research has found that prolonged use of metformin can cause a deficiency in vitamin B12. Especially in those suffering from peripheral neuropathy. And unfortunately, the NIH and many doctors have yet to catch up to the research on this risk. So to be safe, you can supplement with a high-quality B vitamin daily for as long as you take metformin.

Look for a vitamin B complex that contains 100 mg each of vitamins B1 (as thiamine), B2 (as riboflavin), B3 (as niacinamide), B5 (as pantethene), and B6 (as pyridoxine) and 1,000 mcg of B12 (as cyanocobalamine).

And ask your doctor to check your vitamin B12 levels regularly. If you are unable to absorb sufficient B12, injections may be administered by

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Metformin for "Type III diabetes"?

New research has shown that metformin also stimulates neuron generation and memory, at least in laboratory animal models.[1] Of course, metformin is now being used for its metabolic effects, including healthy metabolism of glucose in diabetes.

But as my professors at the University of Pennsylvania would always reiterate, "any drug can have any effect."

Any substance that can be absorbed by the digestive tract and make its way into the bloodstream, tissues, and cells, and interact with normal metabolic mechanisms indeed has the potential to show many different effects. After all, the body itself has many different active processes going on all the time, all at the same time.

Such substances can act like a drop of oil lubricating all of the complex gears and mechanisms in a clock or fine piece of machinery. We also know the same is true of active natural remedies. We are constantly seeing that modern science finds new benefits from old remedies that have been used historically for various purposes.

One key to metformin's multifarious benefits appears to hinge on the enzyme called "atypical protein kinase." This enzyme is present throughout the body—and is responsible for metformin's primary metabolic effects in the liver. But protein kinase is also active in the brain for transforming stem cells into neurons.

The true miracle here is not necessarily the drug, but that the body uses the same enzyme efficiently and effectively for different critical functions among different tissues. Again, the key to all healing is stimulating the body to find ways to heal itself—as we often find in Nature when we look.

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your doctor. These doses may also help to enhance your immune system.

2. Beware of eating grapefruit.

As with other drugs, as I reported in the November 2012 issue of *Insiders' Cures*, eating grapefruit may interfere with the effectiveness of metformin. So it's best to avoid grapefruit (which you should be doing now, to help reverse the disease in the first place).

Unexpected—and very promising—benefits

Metformin has ultimately gone on to be the most widely prescribed drug for diabetes in the world with over 120 million people taking it today. And with so many people taking the drug, some surprising beneficial "side effects" are now being observed.

In addition to controlling blood sugar, it has now been proven to prevent the common cardiovascular complications of diabetes, such as heart attacks and strokes. It also promotes healthy circulation to the limbs, kidneys, and eyes. And is the only diabetes drug that does not cause weight gain. (In fact, it's now being studied for use as a weight loss drug.)

It also helps reduce LDL cholesterol and triglyceride levels in the blood without the dangerous side effects of statin drugs. These are beneficial effects that are likely associated with metformin's effects on reducing blood sugar and helping to regulate normal metabolism.

But beyond these healthy effects, there is more…

Metformin is now the treatment of choice for the increasingly diagnosed condition of Polycystic Ovarian Syndrome in women of all ages. It also appears to be effective in the treatment of Multiple Sclerosis.

It is even being recommended as an "anti-aging" drug by some. This is likely due to the claims that it helps maintain healthy hormone levels such as estrogen in women and testosterone in men.

MD Anderson Hospital, the largest cancer center in the country, has observed that it lowers the risk of pancreatic cancer (notoriously difficult to treat) by five times. And it reduces overall cancer rates, including cancer of the breast, colon, lung, ovary, and prostate. Most of these cancers can be difficult or impossible to treat by conventional means.

Regarding the remarkable effects on lowering pancreatic cancer, I might speculate that by keeping blood sugar levels low, metformin reduces any effects to stimulate the pancreas to produce ever more insulin in Type II diabetes to try to counter high blood sugar or insulin resistance in the tissues. Thus, it doesn't promote the growth of pancreatic cells, some of which are responsible for producing insulin.

Several mechanisms are being investigated on the anti-cancer effects of metformin. Canada appears to continue to be ahead of the U.S. and is leading the way with clinical trials on using metformin to actually treat (not just prevent) breast, endometrial, pancreatic, and prostate cancers. The National Cancer Institute is playing catch up with trials on colon and other cancers.

And it seems metformin is particularly active against lung and oral cancers. Which adds even more proof that there is more to the story with these cancers than just tobacco.

And beyond all this, metformin has just been found to show promise for the most mysterious and alarming disease of our time—Alzheimer's dementia (see page 5).

So here we have a safe, effective, inexpensive drug that actually treats the condition of diabetes, by lowering blood sugar (and not just "managing" symptoms). It also reduces all the major medical complications commonly associated with diabetes such as cardiovascular diseases. And the main long-term "side effects" are a list of additional health benefits such as reducing the risk of common cancers and probably helping to maintain healthy weight.

So the only mystery is why has it evaded comprehensive investigation of its multiple health benefits for so long?

Poisonous plant turned modern wonder "drug"

Ironically, the natural sources of G. officinalis are currently known in the U.S. as "Professor Weed" and the federal government lists it as a "Class A Noxious Weed" in their database of poisonous plants! This French lilac (also used for its fragrance) is just another weed to the U.S. government.

Perhaps the only answer to this modern government nonsense was provided by the 16th century Swiss physician, Philippus Aureolus Theophrastus Bombastus von Hohenheim (better known as Paracelsus), who would have known about the medicinal uses of this remarkable plant: "the right dose differentiates a poison from a useful medicine." Which could be said about many herbal remedies and almost all drugs as well.

Which is what makes the drug version of this herbal remedy—metformin—such a breakthrough. This modern "wonder" "drug" is actually little different from the ancient herbal remedy Galegine, widely known and used in Europe in the Middle Ages. It benefits from chemical simplicity and detailed clinical investigation. And endless drug vigilance has long settled concerns by the FDA and ill-informed public advocacy groups.

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Of course, metformin will only get you so far…

It is possible to actually reverse diabetes through diet and weight loss alone. Last year researchers in the UK completely reversed diabetes in patients who were placed on 600-calorie-per-day diets under direct medical supervision. But the usual minimum caloric levels for healthy weight loss, working on your own, in women and smaller individuals are no less than 1,000 calories per day, and for men and larger individuals 1,200 calories.

These are guidelines you can achieve on your own following a healthy diet of caloric restriction. These are the caloric lower levels for weight loss, not weight maintenance. Healthy weight loss diets include lots of fresh fruits and vegetables and eliminate sugars and processed foods and fats (see your *Insiders' Cures* report *Top-of-the-Food-Chain Cure for Obesity*). Lower body weight and body fat leads to lower blood sugar, cholesterol, and blood pressure.

Some dietary supplements may also help maintain healthy blood sugar levels.

- **Alpha Lipoic Acid (ALA):** 300 mg/day
- **Vitamin B6 (as pyridoxine):** 100 mg/day
- **Berberine:** 400-500 mg/day
- **Cinnamon:** 1 gram/day (food quantity)
- **Coenzyme Q10:** 150 mg/day

There are also some herbal remedies that are being investigated for their effects on maintaining healthy blood sugar. They include the traditional Chinese remedy bitter melon, cinnamon, blueberry leaf, dandelion leaf, as well as various traditional Ayurvedic herbs from India.

Finally, chromium, selenium, and vanadium are minerals and heavy metals that play important roles in managing blood sugar and healthy metabolism. As metals, they have potential toxicities, so check with your health practitioner.

Beyond these dietary supplements, the natural products industry is pushing on other fronts to help with diet and diabetes:

1. Food ingredients that substitute for sugar and starches, so there is simply less sugar in the diet to be absorbed into the blood.
2. Other ingredients that block the uptake of sugars and starches that are already in the diet, thus theoretically stopping sugar from being absorbed into the blood. (Other inevitable effects on healthy digestion must also be addressed.)

Citations available online at www.DrMicozzi.com

From Alpha to Omega: Exposing the truth about the recent fish-oil "controversy"

A new report out of Greece has everyone questioning the health benefits of fish oil. And if you ask me, it's completely irresponsible. Nothing could be further from the truth. But unfortunately, the popular press is too quick to jump on the negative when it comes to natural health. And they often know nothing about real science. So let me set the record straight…

The wide-ranging health benefits of fish consumption, fish oils, and now omega-3 fatty acids have been one of the most consistent findings in all of medical research on diet and health for 40 years.

The real science on the benefits of fish rich in omega-3 fatty acids has been so clear, for so long, that even the American Heart Association and the U.S. government's own 2010 Dietary Guidelines recommend it.

So once again, this new "research" is just another perfect example of science gone wrong. Where statisticians play with numbers in order to garner the spotlight and get published.

We can thank researchers at the University of Ioannina in Greece for this latest misguided misdirection. They recently completed a "study" that questioned the heart benefits of omega-3 fatty acids. And unfortunately, these findings were actually published by the *Journal of the American Medical Association.*

Flawed methods lead to flawed results

These Greek researchers claim they found that a higher intake of omega-3 fatty acids is not associated with lower risk of heart attack, stroke, or sudden death. But the finding is not based on original research or new observations. Rather, it's based on the outcome of a meta-analysis. These types of analyses combine data from many different studies and run it through various statistical manipulations (often involving the kind of shenanigans I warned you about in the special report you received with your subscription, *Secret to Spotting the Truth Behind the Headlines*).

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And many experts agree: the design of this Greek study is particularly flawed.

First of all, they included a lot of poorly designed, smaller studies in their analysis. For example, some studies didn't look at whether the placebo groups themselves had sufficient or insufficient intakes of omega-3s to begin with. This would make comparisons meaningless. Others didn't fully consider the sources—omega-3s come from fish as well as supplements.

And those are just two examples of the shoddy research. Lumping data together from a lot of small, flawed studies can never yield a valid result, despite whatever fancy statistics may be used (as I explained in my *Daily Dispatch* "Garbage In, Garbage Out.")

Also, many of the studies included in the analysis used inadequate doses of omega-3s (only about one-quarter to one-half of heart-healthy recommended intakes). This is critical when it comes to research involving dietary supplements—and is often done wrong. You wouldn't expect any drug to work if taking only half the effective dose. The same is true for dietary supplements.

And, since the heart benefits of omega-3s were first discovered during the 1970's, more and more heart medications have come on the market. Now, typical heart patients with actual heart disease are also on multiple drugs. This makes it more and more difficult to pinpoint the specific effects of any one drug or supplement unless the original study was carefully designed to do so. (This, by the way, can be done by using a factorial design. This is a study design I helped develop while working at the National Cancer Institute. It's used to test numerous nutrients simultaneously in a manner that might simulate actual diets.)

And now a study in the *European Heart Journal* shows that powerful statin drugs, for example, actually mask the effects of gentler, natural approaches such as omega-3 fatty acids. With the huge number of people with only "elevated" cholesterol (without any actual heart disease) already taking statin drugs, you can bet that statins were a factor in the Greek meta-analysis. Yet the researchers never bothered to address it.

I could go on. But I think you get the point. This meta-analysis is a classic case of pseudo-science verses real science.

REAL research backs decades of findings on the benefits of omega-3s

Ironically, the negative findings from Greece come on the heels of an analysis at Harvard University that found that thousands of deaths can be prevented each year from adequate intake of omega-3 fatty acids.

And in the *European Heart Journal* study I mentioned above, researchers found that omega-3 fatty acids did help those patients not already being treated with statins. In fact, the omega-3 fatty acids reduced major cardiovascular events across the board. Even in lower doses.

These statistical "results" from the University of Ioannina, to borrow a phrase from Shakespeare, are literally all "just Greek to me." Don't pay attention to these "Ioan-ninnys." Instead, listen to the decades of proven evidence from knowledgeable nutrition researchers who don't need statistical shenanigans to see the obvious truth.

Stick with me for the real science. And be sure to take at least 1 to 2 grams per day of omega-3 fatty acids from fish oil. IC

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NEWS BRIEF

Back pain? Skip the MRI

Last month, I told you about 10 medical tests you may be better off without. Number seven on that list was radiologic screening for back pain.

Now a new study from Seattle shows that getting an MRI may actually prolong back pain—and even increase "disability"! How does doing a useless test actually become harmful?

Well, besides the obvious problem of having to wait longer for treatment, researchers suggest that the MRIs may be uncovering other "conditions." Conditions that then "require" treatment—whether or not they're causing symptoms (essentially "false positives"). So then patients are subjected to further useless tests and counter-productive procedures, potentially getting trapped in a vicious cycle. Still with no help for the original—and REAL—problem of back pain.

Meanwhile, hospitals and health systems that have actually paid attention to the studies on back pain over the past 15 years (as I noted last month) are skipping the MRIs—and sending patients for spinal manual therapy or physical therapy—the very same day.

If you experience back pain go directly to the nearest good physical therapist or chiropractor for spinal manual therapy. You will most likely be walking, or running, out of there in no time.

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