



The little-known—but DEADLY—side effect lurking in some of Big Pharma's best sellers

I've pointed out the shortcomings of government Recommended Daily Allowances (RDAs) numerous times here in *Insiders' Cures* and in my *Daily Dispatch* e-letter (for example, "The RDA to nowhere"). Most RDAs are outdated. And some can be downright lethal (like the RDA for vitamin D, for example, considering today's science).

Despite all the academic posturing and public funding poured into "updating" RDAs, serious nutritional deficiencies are still an alarmingly frequent problem in the general US population. And unfortunately, nutrient deficiency is often the last thing doctors consider when diagnosing patients.

Instead, they typically put patients on countless medications to alleviate symptoms. Then those drugs cause more symptoms (side effects), requiring even more drugs. It's a vicious circle. But a brand new study from the University of Geneva in Switzerland revealed another glaring problem with this "Band-Aid" approach...

Researchers found that **the very drugs doctors rely on to treat millions of patients each and every day may actually be making them sicker**—by depleting their levels of some critical nutrients.

Now, as you know, I'm a firm believer that scientific facts warrant

that some medical conditions merit pharmaceutical intervention. And there are still a few truly effective and innovative medications available by prescription, and over the counter.

But turning a blind eye to the potential negative effects these drugs might have on nutrient levels could make things a whole lot worse in the long run. Especially when the use of these drugs is so widespread. Not to mention, many people take multiple medications.

For instance, 40 percent of residents in long-term care facilities are given 9 or more drugs on a daily basis. When I had my training in gerontology, experienced doctors advised that when an elderly patient came in with new complaints and there was no clear diagnosis, the best course of action is to simply stop all medications for 24 hours. And sure enough, 90% of the time, the patients improve immediately!

So let's take a look at some of the most common drug classes, the nutrients they deplete, and how you can protect yourself—beginning with blood pressure medications.

That bitter taste may be signaling a bigger problem

While many non-drug therapies can help you effectively reduce stress and maintain blood pressure, hypertension isn't something to take

lightly. Elevated blood pressure is the most serious, proven risk factor for heart disease. This is why I generally recommend taking one of the safe, proven drugs to get and keep your blood pressure as low as possible (within a safe lower floor, of course).

But as the new Swiss study points out, even some effective **blood pressure drugs**—the renin-angiotensin-aldosterone axis inhibitors (such as Captopril)—cause zinc depletion.

If you also suffer from congestive heart failure or diabetes, which frequently accompany high blood pressure, these other conditions already compromise your zinc levels.

Continued on page 2...

In this issue:

The simple vitamin "C-cret" to lifelong, strong, healthy muscles4

Ancient mummies help solve one of today's biggest medical mysteries.....6

Relaxation—it's in your genes7

Don't get sick in July8

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

All material in this publication is provided for information only and may not be construed as medical advice or instruction. No action should be taken based solely on the contents of this publication; readers should consult appropriate health professionals on any matter relating to their health and well-being. The information provided in this publication is believed to be accurate and sound, based on the best judgment available to the authors, but readers who fail to consult with appropriate health authorities assume the risk of any injuries. The opinions expressed here do not necessarily reflect the views of the publisher. The publisher is not responsible for errors or omissions.

For questions regarding your subscription, please call reader services at 443-353-4398 (8 a.m. to 8 p.m. EDT Mon.-Fri.)

Copyright © 2013 OmniVista Health Media, L.L.C., 702 Cathedral St., Baltimore, MD 21201. Reproduction in whole or in part is prohibited without written permission of the publisher.

So adding a blood pressure medication to the mix can put you on the fast track to full-blown zinc deficiency.

And zinc deficiency can cause serious problems—from impaired immune function to slow wound healing to abnormal cell division.

Of course, those aren't necessarily problems that you would notice on a day-to-day basis. But there is one telltale sign that's much easier to spot. If you notice a bitter or sour taste while taking these drugs, it's because they have resulted in zinc deficiency. (This taste occurs not when actually swallowing the drugs, or even food, but when your mouth is empty.)

But taking 25 mg of zinc each day should easily prevent blood pressure drugs from depleting your levels. (Of course, this amount of zinc is three times higher than the RDA. Which just proves the point, once again, that these recommended allowances are nothing short of useless in most instances.)

And don't forget that certain foods—such as organ meats, red meat, seafood, nuts and certain legumes—are also high in bioavailable minerals like zinc.

Of course, diabetes is close on hypertension's heels, when it comes to potentially deadly diseases that do warrant a prescription drug. Because high blood sugar can be just as much a killer as high blood pressure, I generally recommend patients with Type II diabetes take the drug Metformin. And while Metformin offers the life-saving benefits of reigning in excess blood sugar (while also lowering the risk of cancer, dementia, and other chronic diseases), it's not without its potential drawbacks...

Keep an eye on your Bs

Overall, **Metformin** has the properties of a "good" drug. Its benefits far exceed any toxicity at normal, therapeutic doses. Which is not surprising since Metformin is actually

the ancient natural herbal remedy Galegine (or French lilac—a.k.a. goat's rue). It was well-known and commonly used in ancient Egypt and Rome right through the Middle Ages and Renaissance in Europe. And it enjoyed its own "renaissance" in Europe and the US once drug manufacturers were able to offer it as a patented drug (it has now gone generic).

But anyone taking Metformin needs to be aware of one downside: It depletes vitamin B12.

I told you about this in the December 2012 issue. But it bears repeating. Especially since studies have shown an almost three times increased rate of vitamin B12 deficiency in people taking Metformin. Vegan and vegetarian diets further increase this risk, since these diets are a poor source of B12 (not to mention many other bioavailable vitamins and minerals).

How can you tell if your vitamin B12 levels are low?

Some of the common symptoms include weakness, fatigue, easy bruising or bleeding, and tingling or numbness in your extremities. This last symptom sometimes gets misdiagnosed as diabetic neuropathy. But if you increase your vitamin B12 levels, it may very well go away.

In fact, when my own blood sugar began inching up two years ago, I quickly started taking a low dose of Metformin. Three months later, and 30 pounds lighter (on my "Top-of-the-Food-Chain" diet, detailed in the free bonus reports you received as a new subscriber), my blood sugar was back to normal. But I began noticing numbness in my feet. Fortunately, it wasn't due to diabetes but to simple vitamin B12 depletion. And I was able to reverse it in just three months taking the vitamin B ingredients found

in my Core Brilliance and CoreCell Essentials supplements. (The combination provides an optimal amount of the B vitamins, which are best taken as a complex).

In general, a 2 mg per day dose of B12 should be plenty to get your blood levels above 200 picomoles/Liter—and avoid any potentially dangerous deficiencies. (And, yes, in case you were wondering—this dose is higher than the RDA. By nearly 1,000 times, in fact.) Or you can get a

vitamin B12 injection (usually 1 mg intramuscular injection weekly).

But B12 isn't the only essential B-vitamin that Metformin can interfere with. It can also deplete your folic acid levels. Supplementing with 1 to 5 mg per day should keep blood levels normal. (Once again, these doses are higher than the RDA—up to 20,000 times higher.)

So, yes, even “good” drugs—like proven blood pressure medications

and Metformin—can have their drawbacks. But the Swiss study I mentioned earlier also turned up more bad news about a couple of already questionable “bad” drugs.

Statins go from bad to worse

Cholesterol-lowering statin drugs may be blockbusters for the pharmaceutical industry. But they're an all-around disaster in every other respect. While these are among the

Continued on page 4...

No one is “immune” to nutrient deficiencies

Of course, it's important to note that, common as they are, these four types of drugs aren't the only cause of nutrient deficiencies. And people taking them aren't the only ones who need supplements. In fact, there's increasing evidence that many common diseases and medical conditions—such as age-related eye diseases, depression, heart disease and chronic inflammation—actually occur primarily as a result of vitamin and mineral deficiencies.

Ideally, you would be able to get all—or at least most—of the nutrients you need from a healthy, well-balanced diet. Unfortunately, it's becoming clear that even if your diet consisted of the healthiest foods available, the average American couldn't possibly eat enough of them for optimal health and nutrition. Some of the essential vitamins, minerals, fatty acids, and amino acids humans need simply cannot be made in the human body, and you can't get enough from foods available today.

In fact, my little old, neighborhood medical school and hospital (Harvard University and Massachusetts General Hospital) just did some research on this topic. They set out to determine whether or not women could possibly eat enough of the recommended foods to get sufficient intakes of the nutrients they need every day.

To make a long study short, the answer is “no.”

The researchers concluded that a woman cannot meet her nutrient needs, even on an “optimal” diet of 1,500 calories per day.

For instance, some researchers have concluded you would need to eat 13 to 14 oranges per day to get optimal vitamin C levels. Meanwhile, the government recommends five servings of fruits and vegetables per day. And now, the FDA is in the process of mounting a new “war” on apples and oranges and other healthy fruits, as I told you in the *Daily Dispatch* “Big brother takes away those tempting apples” back in May (you can read it on my website, www.drmicozzi.com).

So the case for supplements is becoming more and more compelling.

Unfortunately, the dietary supplement industry is full of non-science based sales and marketing firms that promote their products based solely on the latest fads—not on the latest medical and scientific findings.

Information you can trust is the first step. And that's why I began writing *Insiders' Cures* and the *Daily Dispatch*. And why I developed my SmartScience Nutritionals line of nutritional supplements.

Just as the name implies, the products are based on science—not hype. And I'm also proud to be able to say we're working with what I have found to be the highest-quality, science-based dietary supplement formulators and manufacturers in the world (which I found after two decades of searching and due diligence on site).

The bottom line is, if you're going to take supplements—and, based on the mounting evidence, it certainly appears that you should—it is necessary to seek out the highest-quality formulas available. Otherwise, you will not get the results you seek and may come to the incorrect conclusion that nutrients don't work well enough. Which would be a shame...considering the alternatives.

most prescribed drugs in the world, their effects on micronutrients have been rarely studied. It's already relatively well-known that they deplete coenzyme Q10. (In fact, Merck took out a patent on a statin/CoQ10 combination years ago... but never brought that product to the market). But now you can also add vitamin D to the list of statin-depleted nutrients.

Since CoQ10 is critical for muscle health, including the heart muscle, and vitamin D is now proven to lower heart disease and mortality, this is troubling indeed for your heart health.

If you're going to take a statin (and, again, I don't necessarily think you—or anyone—should), then supplementing with 1,500 to 2,000 IU per day of vitamin D should be required. (This is two to three times higher than the government's confused and clearly inadequate recommendations.)

And you'll also need 100 to 200 mg per day of CoQ10 (three to six times higher than the RDA amount).

Problems with PPIs are enough to give you heart burn!

I have always thought **proton**

pump inhibitors (or PPIs), are a bad idea. They're also ridiculously over-prescribed.


PPIs (e.g., Omeprazole) treat heartburn, or "acid reflux," basically by interfering with digestion (reducing acid levels in the stomach). Not surprisingly, they also interfere with absorption of several key vitamins—including vitamin B12 and vitamin C.

PPIs also interfere with the complex metabolism of the key minerals calcium, magnesium, and even iron, causing iron deficiency. They also interfere with the normal flora of the intestine, or the microbiome. This could have potentially far-reaching effects on health (see the December 2012 *Insiders' Cures* cover story).

Anyone taking a PPI should supplement with 2 mg per day of vitamin B12 and 500 mg per day of vitamin C (which is five to six times the RDA). Cranberry juice can also help reverse interference with nutrient absorption caused by PPIs.

Keep in mind many of these common drugs are prescribed in combination, which potentially depletes micronutrients even further. And beware of vegetarian diets,

which put you at a disadvantage in the first place from an optimal nutrition standpoint for many of these micronutrients.

Between the inadequacy of RDAs and the common use of nutrient-depleting drugs (even ones I generally recommend as a first-line defense against the common killers of diabetes and high blood pressure) it would be wise for essentially everyone to at least supplement with **vitamin B12, vitamin C and vitamin D** as well as the minerals **zinc, selenium, and magnesium.** 

The aspirin warning you haven't heard

Prescription drugs aren't the only medications that can deplete your body of valuable nutrients. Even common, over the counter drugs can have these unintended consequences.

For example, aspirin (acetyl-salicylic acid) can cause vitamin C deficiency over time (after three years or so of treatment). Especially when it's used in high doses, like those typically needed to relieve inflammation or rheumatic conditions.

NEWS BRIEF

The simple vitamin "C-cret" to lifelong, strong, healthy muscles

We've known of the importance of vitamin C for bone and joint health for a very long time. But recent research indicates that vitamin C may also be critical for maintaining muscle mass. So let's extend that thought for a moment to the entire musculo-skeletal system—which accounts for about 85% of the body's weight, mass and size.

Maintaining skeletal muscle mass, as well as healthy bones and joints, is critically important as you age. And unfortunately, the government recommendations for daily meat intake are woefully inadequate to help anyone maintain healthy muscle mass. So it's more important than ever to be sure you're getting enough vitamin C.

And, yes, you have to make a conscious effort to do it.

This nutrient is so important in so many ways—in every cell in the body—that most animals make their own, as part of normal metabolism. In fact, all animals make their own vitamin C except for two—humans and guinea pigs. (This is one reason why guinea pigs originally became such an important laboratory model in scientific experiments.)

A minimum daily intake of vitamin C is 2,000 mg.

Ancient mummies help solve one of today's biggest medical mysteries

What causes heart disease? Perhaps you thought you knew. The government has been feeding us their politically correct, pet theories for decades. But one by one, they are being shot down by real science. From cholesterol, eggs, meat, and saturated fats, to salt.

The government has certainly been happy to spend your tax dollars handing out all kinds of mythological recommendations about diet and heart disease over the years. But it looks like they've been wrong on all counts.

There is no connection between cholesterol in the diet and cholesterol in the blood. And the connection between blood cholesterol levels and heart disease looks weaker all the time. (Although low cholesterol does appear to be associated with higher overall mortality in studies around the world!)

And the smoking/heart disease link appears so flimsy that the government seems to have given up on it altogether. (Instead, getting ever more disgustingly and unrealistically graphic in depicting connections between smoking and cancer.)

The fact is, none of the modern diet and lifestyle issues can really explain heart disease. (Except stress, which can cause high blood pressure. And high blood pressure is—and always has been—the No. 1 known risk factor for heart disease and stroke.)

But now we have new information from the oldest of sources that sheds some more light on this medical mystery.

Science finally begins to connect the dots

Of course, if the results aren't from the latest laboratory using the newest technology from the hottest universities, they're not considered important, and never make the major media outlets. Most of today's idiot-savant medical "super-sub-specialists" know more and more about less and less. And understanding the past is not even on their radar screen.

But as an Insider, you're well aware of the important clues we learn by remembering our medical and health history.

Paleo-pathologists have documented heart disease going back to the Pharaohs of ancient Egypt. (It may not have been just a figure of speech when the Pharaoh of the Exodus "hardened his heart.") And archaeologists have found evidence of inflammation going back to prehistoric dinosaurs.

What has been hiding in plain sight is the line connecting these dots. Linking the occurrence of inflammation with the development of heart disease.

When it comes to inflammation, you probably think of its visible effects—pain, redness, heat, swelling. All of these occur as a result of an acute injury. And, indeed, the inflammatory process is the first step toward self-healing whenever you're injured. But there are many causes, types, and effects of inflammation. And not all of the effects are good.

In fact, some doctors believe inflammation may be at the root of all diseases. And the No. 1 killer,

heart disease, is no exception. And we now have thousands of years' worth of proof.

Mummies bust long-held heart disease myths

The last week of October 2012, I sent out a *Daily Dispatch* e-letter about some interesting research being conducted on mummies from around the world. Ancient mummies dating from as far back as 4,000 years ago were examined from four different geographic areas: Egypt, Peru, Native Americans of the southwest Pueblo civilization, and hunter-gatherers from the Aleutian Islands in Alaska.

The environmental conditions in these areas allowed preservation of soft tissues (like the heart and blood vessels) and not just the bones. So researchers were able to thoroughly examine their cardiovascular systems.

All of these populations had evidence of strong physical activity. They all ate animal protein of some sort. None of them had high cholesterol, or obesity, or cigarettes. But what they did have was high rates of atherosclerosis (heart disease).

In fact, despite an average age of only 43 years, a third of all the mummies had heart disease.

Researches did note several important differences in diet and lifestyle amongst them. But across this wide range of time and dietary patterns, they found that heart disease was *not* associated with any specific diet or lifestyle. However, infections were a common occurrence. And in the April 6th issue of the medical journal *Lancet*, researchers finally connected the dots.

Continued on page 6...

They determined that the high level of chronic infection—and the inflammation that accompanies it—may have promoted heart disease.¹

They also pointed out that patients with chronic inflammatory, “autoimmune” conditions, like rheumatoid arthritis (as we discussed in last month’s issue), have higher rates of heart disease. This strengthens the case for the link to inflammation.

The good news is, you can control inflammation using safe, natural remedies.

The best way to control inflammation naturally

Of course, there is also a lot of old folklore and new hype about foods that can fight inflammation. But real scientific research on the anti-inflammatory properties of food is still in its infancy. So there’s simply not enough proof to support the claims. At least not yet.

However, there is ample proof that

omega-3 fatty acids have significant anti-inflammatory benefits.

For instance, a new study published in the *Annals of Internal Medicine* found that older adults with higher blood levels of omega-3 fatty acid have a significantly lower risk of dying from heart disease than those with lower levels.²

One type of omega-3 in particular—docosahexaenoic acid (DHA)—lowered the risk of fatal heart disease by up to 45 percent. Researchers also measured two other fatty acids—eicosapentaenoic acid (EPA) and docosapentaenoic acid (DPA).

DPA was most strongly associated with lower risk of stroke death, and EPA most strongly linked with lower risk of having a non-fatal heart attack.

Overall, study participants with the highest levels of all three types of fatty acids had a 27 percent lower risk of total mortality due to all causes.

Fish like salmon and mackerel are

among the best sources of these fatty acids. Two servings a week is a good general “dose.” You can also get some omega-3s from certain vegetables, such as Brussels sprouts, cauliflower, and avocado. And, of course, olive oil is another good source.

But this is one example of an essential nutrient that’s almost impossible to get enough of from diet alone (as I discussed in the article on page 1). So it’s also a good idea to take a fish oil supplement to make sure—at least 1 or 2 grams per day.

The OTHER cause of heart disease

As I mentioned earlier, there is no question that high blood pressure also causes heart disease.

The increased pressure in your arteries causes simple wear and tear to the linings of the arteries and creates damage—which the body then has to repair. This eventually results in occlusion, atherosclerosis and obstruction of the damaged blood vessels, and contributes to the formation of clots in the blood vessels that cause sudden heart attacks and strokes.

The reasons for high blood pressure itself, however, have been elusive to modern medicine. They refer to the vast majority of cases as “essential hypertension”—as if your blood pressure just goes up for reasons of its own as you age. But as you know, stress is a major cause of high blood pressure. And many mind-body therapies that relieve stress also lower blood pressure and keep it low.

There are also very effective blood pressure drugs that have been around long enough to pass the safety test of “post-marketing surveillance” by the drug companies. (For more on this topic, refer to my article, “Survival guide to blood pressure medications,” which you can find on my website, www.drMicozzi.com.)

Balance your immune system, prevent heart disease

In the 1990s, Dr. Bennett Lorber, my colleague and author and editor of a leading textbook on the immune system, presented a “textbook” catalogue of all the modern chronic diseases that appear to have inflammation at their base—from A to Z.

And the onset of the inflammation that later results in full-blown disease is often a short-term infection.

So one of the first steps in preventing heart disease is to keep your immune system balanced and in good working order (“modulated”), so it can effectively fight off infections—but also to know when to stop fighting. (Just like blood pressure needs to know when to come down again). And one of nature’s best balanced immune modulators is garlic

In a recent study published in the *Clinical Journal of Nutrition*, men and women who ate 2.56 grams of garlic daily (essentially the amount you’d get in a serving of homemade pasta sauce) showed significant increases in the production of immune cells, compared to the placebo group.

Of course, garlic is also widely proven and used for the treatment and prevention of heart disease. Given this newfound connection between infection, inflammation/immune modulation, and heart disease, chances are good those two benefits are related.

Citations available online at www.DrMicozzi.com

While there are good drug and non-drug therapies to control blood pressure, unfortunately, studies show that up to half of all people who should be treated for hypertension aren't actually being treated. Mainly because they're not even being diagnosed. Despite the NIH and CDC multi-decade, multi-million dollar campaigns to control the epidemic of hypertension in America.

So let me tell you how to get it right...

The American Heart Association recommends taking two measurements while standing, two while sitting, and then taking the averages.

Has any doctor or nurse ever done this with you?

Not likely. But don't be afraid to ask. This is your health at stake. And you're entitled to a few extra minutes of time to get it right.


And to rule out "white coat syndrome," (that is, the stress of just going to the doctor) it's a good idea to take a few blood pressure readings at home or away from the doctor's office for comparison.

Also, keep in mind that blood pressure naturally varies over the course of the day and night (something called "diurnal variations"). Try taking measurements at different times of day to find out when your own blood pressure tends to be highest and lowest.

And avoid stimulants (caffeine,

tobacco, exercise, and stress) before taking your blood pressure. A fever or sudden changes in body temperature can also affect your blood pressure, so avoid taking your readings while sick, after strenuous activity, or after being in the heat or cold.

Remember our ability to raise blood pressure when warranted (increased physical demand, high altitude, etc.) is critical for effective performance and good health. You just don't want it to stay high all the time.

After all of that...if it turns out you DO have high blood pressure, don't hesitate to get it under control immediately. 

Citations available online at www.DrMicozzi.com

Relaxation—it's in your genes

As I've described in our books *Your Emotional Type* and *New World Mindfulness* (available at www.drmicozzi.com) meditative techniques, such as deep breathing, yoga, or even prayer, can help relieve many medical conditions. Since stress is really the great killer of our time (not eggs, meat, salt, saturated fats, or other commonly misidentified government culprits), it makes sense that relaxation—which counters that stress—is a great healer.

We already have a large inventory of clinical research showing that relaxation lowers stress levels and reduces blood pressure. But now, new research reveals the "genetic mechanism" behind these benefits. And this is how the modern medical establishment now judges all therapies.

My colleague, physiologist Dr. Herb Benson at Harvard Medical School led this new, breaking research. Dr. Benson is actually the one who coined the term "relaxation response."

He told me 20 years ago that he didn't want his work to be associated with the arbitrary term "alternative/complementary" medicine because he insists it is just human physiology and good medicine.

Indeed, his latest findings should prove it once and for all.

Dr. Benson and his team of researchers found that relaxation actually causes the genes in your cells to switch to a different mode. In other words, by meditating, you can regulate your genes to kick-in to counteract the toxic effects of stress. (This effect may finally explain the long-observed profound control that experienced yogis develop over all their vital functions, for example.)

The researchers noted four specific types of gene responses. The first involved genes related to mitochondria, which power the cells. This response resulted in better mood,

energy, and sleep in the subjects who meditated.

The second gene response was seen in genes linked to insulin. This effect also boosts energy in the cells by regulating all-important blood-sugar metabolism. So responses one and two together influence the most basic energy processes of the body: oxygen through cellular respiration in the mitochondria, and carbohydrate metabolism for useful calories.

Third, the researchers found that people who meditated had less activity in genes that turn on the inflammatory response. In other words, their immune systems were better modulated, or balanced. As you read earlier in this issue, an unbalanced immune system and chronic inflammation may very well be the primary cause of persistent chronic problems such as heart disease and cancer.

Continued on page 8...

Finally, meditation also influenced genes related to telomeres in cells. Telomeres cap off the ends of chromosomes and protect your cells' genetic material (DNA), especially during cell division and multiplication. And cells are continually dividing and multiplying in order to replace older, worn-out cells with newer, healthy cells. So, they're directly related to longevity. This means that meditation can actually extend your life span (as has been well observed in the aforesaid yogis, or meditators, for over a century).


And just 10 to 20 minutes per day can have profound benefits.

Of course, there was one thing missing from this research—the personalized, or individualized,

“emotional type” factor. This concept was initially developed just across the river from the Harvard group, by Dr. Ernst Hartmann at Tufts University. And my co-author, Mike Jawer, and I described its importance for a dozen of today's most stress-related and baffling illnesses in our book *Your Emotional Type*. The basic premise is that the “mind-body therapy” that works best for each individual is based upon your “personality boundary” or emotional type. Without knowing this parameter, these research results just represent generalizations in terms of helping to manage actual medical conditions.

You can learn which techniques will work best for you by taking the on-line quiz at www.drmicozzi.com or getting a copy of *Your Emotional Type* at your local bookstore.

Until very recently, I was concerned that all of today's multi-billion, high-tech genetic research was leading us away from safe, inexpensive, proven approaches to health and healing. So it's nice to see so much of it (as I've shared in this newsletter, as well as *Daily Dispatches* over the past two months) is revealing how age-old approaches of nutrition and natural healing actually work at the cellular, genetic, and metabolic levels.

Maybe now those great Mandarins of Medicine at the National Institutes of Health can all finally accept that natural medicine does work, because they can finally see how it works—in their own, thoroughly modern terms—on the molecular genetic level. 

Citations available online at www.DrMicozzi.com

NEWS BRIEF

Don't get sick in July

Speaking of relaxation (see page 7)... This is the time of year when many people take some time off—maybe go on vacation—and unwind a little.

Let's hope the health benefits from all that relaxation help keep you out of the hospital—especially in July!

You see, July is the month when newly graduated medical and nursing students go to work in hospitals for some on-the-job training. And it's when experienced hospital staff begin to take off on summer vacations.

This might sound like paranoia, but it's actually a full-blown medical phenomenon. It's called the “July effect.”

And in a recent issue of the respected medical journal *Annals of Internal Medicine*, one astute researcher likened it to having rookies replace veteran football players during “a high-stakes game, and in the middle of that final drive.”¹

One problem, for example, is that new doctors, un-tempered with their own experience, allow themselves to be intimidated by government-tainted views of adequate pain relief (a problem I presented last summer in the very first issue of *Insiders' Cures*). So while the seasoned “pros” are away, patients are more likely to linger or die in agony due to inadequate prescription of effective, opioid pain killers.

But it's not just painkillers. Inexperienced doctors have trouble administering appropriate dosages for all kinds of drugs. They also spend more time hemming and hawing over which lab tests to order and when... when and which specialists to consult... and whether a patient needs to be transferred to intensive care or another service in the hospital.

Yes, it's good for doctors to be thorough and to be certain of their professional medical decisions. But not at the expense of precious time that some patients simply don't have.

So, again, unless you absolutely have to go to the hospital this month—DON'T. Let the “newbies” get some experience—and confidence—under their belts first.

Besides, as I mentioned above, summer is the perfect time to try out the benefits of a “nature cure.” One that includes relaxation, sleep, clean air and water, healthy physical activity, and sunshine—and as far away as possible from the modern hospital!

During the 19th century, these approaches cured about half the people half the time. No drugs—or hospitals—required.

Citations available online at www.DrMicozzi.com