The secret killers lurking behind all those pink ribbons

How to take control of the top 3 deadliest women's cancers—starting TODAY

If the term "women's cancers" makes you think of pink ribbons, you're not alone. The amount of attention breast cancer gets leads many people to believe it must be the one women need to worry about most.

But don't be fooled

There's another kind of cancer that actually kills more women every year than breast cancer. But it's not the "darling" of the government political scientists, so you don't hear anything about it. And you don't even have access to the screening you need to catch it early enough to have a chance at a cure.

But I'm going to share with you the best methods for screening the three deadliest women's cancers—and the best strategies for preventing and fighting them—in just a moment. First, let's take a look at the killers hiding behind all those pink ribbons.

The cancer the government doesn't want to treat

So what is the No. 1 deadliest cancer for women? And why isn't it getting more attention? Simple: Because it's not politically correct. Maybe that's why the National Cancer Institute grants it less than half as much funding as for breast cancer.¹

But the fact is, lung cancer kills

more than 70,000 women every year (which doesn't even count all the men), compared to breast cancer's 40,000. But since the government is obsessed with *blaming* lung cancer sufferers instead of *helping* them, we never hear much about it.

Here's the thing, though: Let's put aside the fact that smokers are basically being told they're out of luck. The fact is, tens of thousands of women who never smoked a single cigarette in their lives, and many more who quit smoking at the government's advice, are being diagnosed with lung cancer ever year. What does the government tell them? Don't they deserve to know why?

Unfortunately, the government policy decision 30 years ago to focus lung cancer research on the trendy new "behavioral sciences" of smoking cessation and prevention left studies on the <u>biology</u> of lung cancer frozen.

But if the government refuses to dig deeper into the science of lung cancer, shouldn't they at least be warning women how common it is—that it is the No. 1 cancer killer of women? And telling them to get screened for this deadly disease?

In fact, you don't hear government medical "experts" urging women

to undergo routine lung cancer screening. Despite the fact that an effective and non-invasive screening tool exists for lung cancer. That's right. Recently the National Lung Cancer Screening Trial made an important discovery. The researchers found that screening high-risk smokers and ex-smokers with annual CAT scans would prevent 12,000 lung cancer deaths per year. But still, CAT scans are not routinely offered—even though the American College of Chest Physicians is now recommending them.

Why? Because "experts" at the National Cancer Institute (NCI), insist that smokers don't care enough about their health to get screening (see the *Daily Dispatch* from March 25,

Continued on page 2...

In this issue:

Memo to Washington health
policy experts: Doctors are
people, too!3
Four powerful brain boosters
you can get from your
neighborhood supermarket5
Statin drug recovery plan 7

www.DrMicozzi.com 1

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Copyright © 2013 OmniVista Health Media, L.L.C., 819 N. Charles St., Baltimore, MD 21201. Reproduction in whole or in part is prohibited without written permission of the publisher. 2013, "How the government could prevent 12,000 lung cancer deaths per year, but won't"). Of course, this NCI conclusion is not based upon any science. It's just their prejudice. The last government-sanctioned form of discrimination. And not only is it a slap in the face to smokers—but it also shows blatant disregard for the lives of all the non-smokers who fall victim to this disease.

Compare this negligence to the scientific cartwheels that are turned to determine when, how, and how often, to screen for breast cancer—the second most deadly cancer among women—and the discrimination becomes even clearer.

All eyes on breast cancer

The opposite situation has unfolded for breast cancer. Women now have a much better chance of catching breast cancer early and surviving it. Because of huge investments in breast cancer research, we know a tremendous amount about what causes breast cancer and how to treat it.

The largest risk factors for breast cancer are early age at puberty (menarche), late age at menopause, having no or late pregnancies (over age 30), having fewer pregnancies overall, not breastfeeding, taking birth control pills, and postmenopausal hormone therapy.

It's no coincidence that the "epidemic" of breast cancer today coincides with the dramatic drop in fertility rate in the U.S. Pregnancy and breastfeeding, as well as avoiding artificial hormones, dramatically reduce breast cancer risks.

Of course, it is not politically correct to recommend getting pregnant early and often. So instead, experts throw out every other generic "lifestyle" factor—like being moderately overweight or having a "high-fat" diet. Even though, in study

after study, try as they might, no one has been able to prove these alleged associations.

Family history (two or more first-degree relatives with breast cancer) is also a very strong risk factor. While there is nothing you can do about this history, it lets you know you should be diligent about screening and early detection.

And as far as screening is concerned, mammograms are still the best option for women over 40. But after much controversy about the risks of mammograms, the optimal screening interval and hundreds of millions of dollars spent on research, the data indicate that it's simply not necessary to get a yearly mammogram. Bi-annually is just fine. However, women should perform frequent breast self-examinations. Of course, thanks to all the "pink ribbon PR," these strategies are already well known. And have already led to many diagnoses—and likely saved many lives.

In fact, breast cancer diagnosis is more common among women than lung cancer. But far fewer women die of breast cancer than lung cancer. Long survival periods—20 years and more—are very common. That's because of the better science, screening, and treatment that has been developed for this highly publicized cancer.

In recent years another cancer that was once largely ignored has begun to receive a lot of attention. And as with breast cancer, some good has come out of it. But again, women are suffering from recommendations made based on politics and profits, and not science. Let's take a look at the third most deadly cancer in women.

The truth about colon cancer

By comparison, colon cancer in

2 www.DrMicozzi.com

women accounts for 9 percent of cancer cases and cancer deaths.² Age is a major risk factor for colon cancer. More than 90 percent of all colon cancers occur in people 50 years and older.³

The mainstream medical establishment would have you believe that all these risks can be avoided with a routine colonoscopy. But the truth is there's nothing routine about a colonoscopy. It baffles me that doctors, and even media celebrities, have made it their mission to push these invasive and dangerous procedures on everyone they see.

Especially when we know that other less expensive, less invasive tests work just as well. Research shows a test called the

immunochemical fecal occult blood test reduces risks, is economical, and is more likely to be used by more people. (For a full discussion of these considerations, read "The hidden, grisly dangers of 'routine' colonoscopies" in this September's issue of *Insiders 'Cures*.)

So it's important to know all your options when it comes to screening. Now let's talk about prevention.

Research has shown for decades that adequate calcium intake is linked to lower colon cancer risk. But doctors are finally paying attention to this association, now that the National Institutes of Health (NIH) has finally given it the green light. The NIH and their "Amen chorus" at the American Association of Retired Persons

(AARP) analyzed the data from almost 300,000 men and 200,000 women and found that higher calcium intake is associated with a 20 percent lower risk of colorectal cancer in men and a 30 percent lower risk in women ⁵

While calcium is best obtained from foods, the other part of the equation for healthy calcium metabolism is vitamin D. Vitamin D is a critical nutrient, and most people need to supplement because of inadequate diet and lack of sun exposure. In fact, increasing numbers of scientists are recognizing that we have a national and worldwide epidemic of vitamin D deficiency. Fortunately supplementing with

Continued on page 4...

NEWS BRIEF

Memo to Washington health policy experts: doctors are people, too!

Healthcare researchers have recently discovered what Adam Smith knew in 1776: Patient outcomes are better when doctors are paid for how well they perform specific medical procedures. This traditional arrangement is better for patients than when everyone gets paid a set amount.

So-called "pay for performance" shifts the focus from just getting the job done to doing a job well. (Of course, when I was in the government, public employees used to tell me, "A job done is a job well done." No wonder Washington is such a mess.)

A new program conducted at University of California, San Francisco and The New York City Department of Health, awarded physicians "extra" pay when they were successful in providing care that reduced the long-term risk of heart attack and stroke. This included incentives for handling more difficult cases complicated by diabetes, coronary artery disease, intractable hypertension, or other difficult-to-treat patients.

Physicians who worked under "pay for performance" had results that were <u>two to eight</u> times better than physicians in the standard flat fee arrangement.

Obamacare mandates that everyone have healthcare insurance and that insurance plans include preventative services. Old-fashioned "major medical" plans that cover only hospitalization (but still protect people from being bankrupted) are strongly discouraged. In fact, these "catastrophic coverage" plans end up costing more than full-service plans under the new schemes.

The concept of preventing diseases in humans is wonderful. But it is a long-term goal. To achieve it health policy experts need to realize that those providing care will do a better job when they are given incentives for success—just like everything else when it comes to people.

You can't "mandate" disease prevention without treating each patient, each physician, and each case individually and providing incentives for it—not just having the government "order it up" the way it tries to force people to comply with their other political and power-grabbing agendas.

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1,000–2,000 IU per day of a high-quality vitamin D is safe and effective for most women.

The untold cancer secret

The bigger question we need to be asking about cancer in women—and in general—is why is it happening? And how can we stop it? Part of the answer, which is still being largely ignored by mainstream doctors, has to do with cutting off cancer's lifeline.

Compared to normal cells, cancer cells grow very quickly. That's how tumors grow out of control. But as they grow, they need an increased blood supply. They get this blood supply from new blood vessels that are formed and extend into the tumor. This process is called angiogenesis.

A promising approach to fighting cancer involves stopping these new blood vessels in their tracks. Some nutrients can actually work against angiogenesis. This observation was made experimentally decades ago. But only a few scientists are actually acting on this knowledge.

Still, despite the lack of research into effective treatments, we do know that certain natural ingredients are effective at combating angiogenesis. Here are a few of the most important ones.

Vitamin E (alpha-tocopherol).

The research on vitamin E in cancer has been mixed, but that's because the people doing the studies don't seem to understand vitamin E. When we talk about vitamin E, it's important to understand that it consists of four tocopherols and four tocotrienols. When testing it, we should be looking at all of those in combination—in the natural state of the vitamin. But the reductionist researchers insist on using just one or two components and then find that "vitamin E" has no anti-

cancer effect. Even still, some studies have shown that alpha-tocopherol can protect against cancer. In one study using breast cancer cells, vitamin E inhibited their growth. A generally recommended dose of vitamin E is 100 IU per day.

The bigger question
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about cancer in
women—and in
general—is why is it
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Selenium. You've probably heard selenium mentioned in connection with prostate health. But it shows promise for fighting angiogenesis in women's cancers as well. A study from the Center for Cancer Causation and Prevention showed that selenium reduced the density of vessels in breast tumors. That is, it stopped angiogenesis.⁶ Other research suggests it could help slow colorectal cancer as well 7 Selenium is a trace mineral and a little bit goes a long way. 100 micrograms of selenomethionine (the organic form bound in an amino acid) is adequate for most people.

Taking selenium together with vitamin E appears to enhance its health benefits.

Resveratrol. Found in the skin and seeds of grapes, and in wine, resveratrol is most famous for its "anti-aging" claims. But it can also act against angiogenesis. In laboratory studies, resveratrol has been shown to inhibit the growth of 12 different types of cancer cells,

including prostate, breast, colon, pancreas, and ovarian. Research also shows it has potential to enhance the effects of standard chemotherapy and radiation.⁸ A generally recommended dose is 500 mg per day.

Genistein. This naturally occurring compound found in soy products and some other legumes has been clearly found to be highly active against many different types of cancer. Population studies have shown that higher genistein intake in the diet is associated with lower risk of cancer—including breast and colon cancers. A good dose is 50 mg per day. I recommend a brand called Bonistein Genistein.

Piperine (Piper nigrum). The compound that gives black pepper its kick has a long history of use in Ayurvedic and Southeast Asian medicine. Now it's grabbing the attention of some practitioners in the United States. It boosts the body's ability to absorb nutrients from foods and supplements, but it also has direct antioxidant, antitumor, and anti-inflammatory properties. 10 In one study, piperine was shown to inhibit the spread of breast cancer cells. 11 I recommend a daily dose of 20 mg per day, and a brand called Bioperine® Piperine, which is a 50:1 standardized

Women's health in women's hands

It's a shame, given the hundreds of billions of taxpayer dollars spent on cancer research over the years, that the government-industrial-medical establishment doesn't have more to offer women who want to lessen their biggest cancer risks. But with the information you're learning in *Insider's Cures*, you can finally take control of your own health.

Too bad you can't get a refund on all your wasted tax dollars.

Citations available online at www.DrMicozzi.com

Four powerful brain boosters you can get from your neighborhood supermarket

The food-memory connection isn't new. For Marcel Proust, it was the aroma of the Madeleine cookies that brought back his memories. But the notion that certain foods strengthen your brain and don't just jog memories is starting to gain speed. And the timing couldn't be better. Dementia and Alzheimer's disease are threatening to become so huge they are eclipsing all other medical problems put together while the government-industrial-medical complex is asleep at the switch.

Science doesn't know as much as it should about cognitive function and memory, thanks to a history of serious government underfunding. Compare that to the funding for politically correct diseases like HIV/AIDS (which is 100% preventable in the first place) and breast cancer (for which many good screening and treatment approaches already exist).

Unfortunately, the government is not likely to ever catch up because, the era of big government research funding is over and the big medical research bubble is about to burst. As I've mentioned in previous Daily Dispatches, Alzheimer's disease doesn't have the political pull of other conditions. But there are a few things beyond age we do know have a negative influence on memory, including stress, sleep, medications and poor nutrition—and even excessive hygiene. And there are also some things we know can promote better memory and cognitive function.

Three-pronged brainpower boost

Your real "intelligence quotient" is dependent upon three factors:

- 1. Your total number of brain cells
- 2. The effectiveness of the communications between brain cells
- 3. The overall health of <u>individual</u> cells

The brain and every cell in it are highly metabolically active. It needs a constant supply of adequate oxygen and energy (sugar), both of which are carried in the blood. So having a healthy heart and circulation are critical.

One incredibly potent brain protector that everyone who wants to stay sharp should consider is berberine. As I wrote in my report The Insider's Answer for Dodging Dementia, experimental studies have found that berberine can shield brain tissue from the dangerous effects of oxidative damage. But it also attacks the memory-killing enzymes that contribute to Alzheimer's and promotes healthy blood flow to the brain. It's truly a new, breakthrough brain supplement. I recommend a daily dose of 500 mg of berberine, taken two or three times per day to achieve steady levels.

I also recommend lutein, which is best known for its eye-health benefits. One study showed that alone or with omega-3s (which I'll tell you about below), lutein improved cognitive function, verbal fluency, learning ability, and memory in older women. A dose of 12 mg per day of lutein should be effective for keeping the brain functioning at its best.

When it comes to diet, several nutrients and other plant biochemicals get across the blood-brain barrier and help brain cells. The flavonoids anthocyanins and quercetin, which help give plants their red-purple-blue colors—help cognition and memory. They appear to help prevent the breakdown of brain cells. Both are abundant in apples, blueberries, and red onions.

Other important nutrients are the B vitamin folate and omega-3 fatty acids.

All brain and nerve cells (neurons) are protected by a myelin sheath, which acts like insulation on a wire to support effective transmission and communication of nerve cell signals. Healthy fats, such as omega 3s and other essential fatty acids, are critical for brain health.

So beware the knee-jerk recommendations of some "experts" to cut all fats from your diet. You can't be healthy without some fats—just make sure they're the right kind. (Come to think of it, cutting all fats should not be called a "knee-jerk" recommendation, since nerve reflexes can't happen without adequate nutrition from the right fats.)

Now that you know what individual nutrients make for better brain health, let's look at the foods that put them all together. After all, people eat foods...not nutrients.

Berries

Berries sit out in the air and sun all day, where they ripen and develop their colors thanks to the active plant pigments that are produced to protect them. It makes sense then that they'd be good sources of "protective nutrients," also known as antioxidants. But as I've explained

Continued on page 6...

before, simply invoking the word antioxidant is oversimplified and incomplete. We have to look beyond this broad and somewhat non-specific term to individual biologically active plant chemicals—like the anthocyanins and flavonoids I just mentioned.

Blueberries in particular have received a lot of attention for their abundance of these plant chemicals, as well as their benefits for the eye. What does that have to do with the brain? Well, the eye is a form of specialized nerve tissue, which means the way nutrients behave there is a good sign of how they'll behave in the brain.

Green, leafy vegetables

Look to green, leafy vegetables like Brussels sprouts, cabbage, collard greens, kale, mustard greens, and turnip greens, for a healthy dose of the right carotenoids. Leafy greens are also a good source of folate (folic acid is the form found in supplements and foods that are artificially fortified). A very clear example of folate's importance in the nervous system is its ability to prevent spina bifida and neural tube deformities during development *in utero*.

Folate lowers homocysteine levels, which is important since high homocysteine has been linked with memory decline. (Not to mention heart disease.) An Australian study found that a diet high in folate was associated with faster information

processing and better recall memory...after just five weeks!

Fish

Since brain cells and neurons are so dependent on healthy fats like omega 3s, it's no surprise fatty fish is important for brain health. Even years ago, when fish consumption was relatively rare in many parts of the United States, people considered fish "brain food." And modern research backs that up: A study in the *Archives of Neurology* found that people with the highest levels of omega-3s have the lowest rates of dementia.² The best sources of omega 3s include herring, mackerel, sardines, and salmon.

An earlier study from the Rush University Medical Center in Chicago followed more than 3,000 men and women for six years and found that those who ate fish at least once a week had a 10 percent slower decline in memory than those who did not eat fish.³ In effect, fish gave them an "extra" three years in terms of memory and cognitive ability compared to other people in their age-group.

Ideally, you should aim for three servings of fish per week. If that doesn't work for you, make sure to take a high-quality fish oil supplements. To find out how to choose a fish oil supplement, check the October issue of *Insiders' Cures*

Coffee

Anyone who has ever tried it can tell you that coffee can quickly and temporarily sharpen memory and focus the mind. What every coffee drinker knows from experience was scientifically proven two years ago. Researchers at the University of Innsbruck in Austria gave volunteers the amount of caffeine contained in two cups of coffee. They then used MRIs to watch for reactions in the brain. The findings? Brain activity was increased in two locations—one of which is critical for memory.

These effects may be even stronger in women. Another study found that women 65 years and older who drank more than three cups of coffee per day (or the equivalent amount of caffeine from tea) had about one-third less memory decline than women who drank one cup or less per day.

Some studies have occasionally found certain health problems with high consumption of instant coffee, as well as boiled coffee and other processes that do not involve filtration. To be safe, stick with filtered coffees. And learn to drink coffee and tea without added milk (and its extra lactose, calories and fats), and without sugar or artificial sweetener.

With all these safe and natural approaches to protecting brain health—as well as the old standbys (keep your brain active, get enough exercise, do the crossword puzzle)—there's no reason to consider memory decline an inevitable part of aging. You can take charge of your brain health, just as you can with any other area of healthy aging.

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6 www.DrMicozzi.com

Statin drug recovery plan

It's one thing when the government-industrial-medical complex pushes drugs that are ineffective. But it's a whole new level of insult when it pushes one that poisons us.

And yet that's what's happening with statin drugs. And more than that, pharmaceutical companies are actually digging in their heels and doubling down on these deadly drugs. Could it be because they're the best-selling drugs in the United States? Or the fact that one of them is the single best-selling drug in all of recorded history?

Readers of the *Daily Dispatch* already know of the dangers—and inefficacy—of statin drugs. But there IS some good news amid the whole statin mess. Before I get to that though, let me recap how things got to this point.

The myth behind statin drugs

The body makes cholesterol. That's normal. Cholesterol is a building block of cells and steroid hormones. Statin drugs poison your metabolism to stop your body from making cholesterol.

Not only is this a scary thought, it also doesn't prevent heart disease. In fact, half of the people who die from heart disease have normal cholesterol levels. And worldwide studies comparing different nations actually show lower cholesterol levels are associated with higher mortality rates. A recent study involving virtually the entire population of Sweden saw no decline in heart disease deaths before and after statins were introduced.

Ironically the biggest risk factor for heart disease is high blood pressure. Yet studies show that only half of the approximately 50 million people with high blood pressure in the United States are being treated effectively for the condition. So doesn't that seem like a good place to start fixing,

rather than fixating on cholesterol? After all, safe and effective drugs for blood pressure have existed for decades—but even *those* might not always be necessary. Plenty of mind-body techniques are proven to help mild-moderate blood high pressure. The *British Medical Journal* recently questioned the appropriateness of treating mild high blood pressure (lower than 140/90) with drugs at all.¹

How statins poison the body

The most common problems statin cause are in skeletal muscle. But remember, your heart—the organ statins are supposed to protect—is a muscle also. So while you're taking statins with the hope of keeping your arteries healthy to help prevent heart disease, the drugs may be bypassing that whole process and damaging your heart muscle directly.

This problem is most likely to manifest as muscle pain, fatigue and weakness. In severe cases it can result in a condition known as rhabdomyolysis—actual destruction of muscle tissue. And if the byproducts of muscle destruction reach a dangerous level in the blood they can actually cause kidney failure and brain pathology.

The way statins create this toxic mess is by poisoning a key part of every cell—the mitochondria. Mitochondria are responsible for cellular respiration, which is how cells create energy to fuel every metabolic process and generate the water they need to stay hydrated. Muscles are especially susceptible to this damage. But other organs affected include the liver, kidneys, pancreas, and the heart itself.

But after the muscles, no part of the body is as affected by statins as the brain, which also has a high metabolic need for oxygen and energy. The brain is only about 3 percent of average body weight, but it uses 20 percent of the oxygen and 50 percent of the glucose in the blood circulation. So it too suffers from this metabolic poison.

Now here's the worst part of it: When you stop taking the drug, the damage doesn't just correct itself. And even people who do not report actual muscle symptoms can still show microscopic changes in mitochondrial cellular respiration. Statins have even caused previously "silent" genetic variants of muscular diseases to become expressed.

Turning the ship around

Are you ready for some good news? Some natural ingredients can actually reverse the damage caused by statins. And unlike some natural health "miracle cures," these actually have a lot of research behind them. In fact, there have already been nearly 900 published research studies in the peer-reviewed scientific literature on statin damage and/or recovery.

These results are also available to the public through the National Institutes of Health Public Access. If your doctor tries to dismiss your concerns about taking statin drugs, ask what has he or she been reading (or more likely *not reading*) lately.

The standout in the natural arsenal is **coenzymeQ10** (also called ubiquinone or ubiquinol). CoQ10 acts to reverse effects of statin-induced mitochondrial damage. That's because it "bypasses" a number of problems in cellular respiration. The result is adequate energy production and improved antioxidant status.

The pharmaceutical industry even knows about this important benefit. In fact Merck, the maker of the first

Continued on page 8...

statin drug, actually took out a patent on a statin-CoQ10 combination. However, it never made it available to the public. When a colleague and I asked Merck why not about 10 years ago, we were told that the company never comments on products it doesn't sell.

But experts have since told me that Merck probably never made this potentially life-saving combination available because the FDA would have forced them to repeat hundreds of millions dollars of research studies on the combination—even though all the evidence indicates it would have benefited the public! FDA is like any other government bureaucracy, insanely placing the requirements of their own internal bureaucratic processes over and above science, facts, truth, and the public interest.

But you can still reap the benefits of CoQ10. As part of a daily regimen of health promotion and disease prevention, a good dosage is 50 mg daily. For people on statins or recovering from statin poisoning, a recommended dose is in the range of 100 to 200 mg per day.

One concern regarding supplementation is that dietary CoQ10 (Ubiquinone) is not well absorbed. It is better absorbed in the chemically reduced form (called Ubiquinol) especially if taken with food. When buying a CoQ10 supplement, look specifically for one labeled "ubiquinol." If the label doesn't specify the form, it is probably ubiquinone, the less absorbable chemical form.

B vitamins can prevent and reverse neuropathy and certain damage to neurons. Taking a high-quality B complex is a good part of the statin damage reversal plan.

Most B vitamins are readily available in foods, but B12 deficiency is common, especially among older people. B vitamins are found primarily in animal-based food products such as red meat, poultry, eggs, fish, and dairy. The body can't make B vitamins, and plants are poor sources—making animal products necessary. That's why all vegetarians need B supplements.

As I've noted before, human metabolism and physiology are simply not adapted to getting nutrients from a strictly plant-based diet. If you are a vegetarian or vegan, you are more likely to have a vitamin deficiency. If you think you are following such a diet for reasons of health—think again. If you follow such a diet for ethical or moral reasons, then strongly consider supplementation.

Vitamin D production requires cholesterol, so statins interfere with the body's ability to make it normally. It's important to avoid vitamin D depletion, since low levels have been strongly linked with <u>numerous</u> diseases. A daily dose of 1,000–2,000 IU is a safe dose for everyone to prevent deficiency.

From now until March, at latitudes north of Atlanta, the sun never gets high enough in the sky to provide the specific wavelengths of light necessary to activate vitamin D production.

Metabolism of mevalonic acid—which the body needs to synthesize cholesterol—is also damaged by statins. Eating apples and drinking apple cider (in moderation) can help. Apples are the single most abundant source of mevalonic acid among plants eaten as foods. I don't see enough clinical research on this topic to be clear about "dose." But if an apple a day can keep the doctor away, it should also help keep away the poisonous effects of statins.

Finally, after 12 years of doing my own research, I have become convinced that **South African red bush** (like Co-Q10) has a profound effect on supporting cellular respiration, which generates energy and water for proper hydration at the cell level. Red bush is available as a powder that can be used to make a tasty and healthful beverage.

Red bush should be part of any statin recovery plan. (Really, it should be part of everyone's daily health and hydration regimen.) In addition to the hydration benefits, new research shows it has direct benefits to the muscle tissue itself—which further explain its amazing results when its comes to physical performance, as I explained in the September 19, 2013, Daily Dispatch ("Low-T'-men's health or men's hype?"—remember, you can read past Dispatches on my web site anytime!).

While it possesses a lot of beneficial constituents beyond what green tea offers, it does also offer the same profile of antioxidants as green tea, so you can also anticipate the same benefits—but without the caffeine, or acids, that can trouble green tea drinkers.

You can now get Red Joe, a new, superior brand of red bush that I personally helped develop, at www. drmicozzi.com/products/redjoe.

Risk-free heart health

So as you can see, there are some ways to reverse the damage done by statins. But even better would be never taking them in the first place. After all, high blood pressure is a much more serious, clearly proven threat to heart health. Why not start there, with some easy, free, safe, and effective approaches that are proven to lower blood pressure...and therefore really reduce heart disease risk? You can review all your options for managing blood pressure in my special report, The Insider's Secret to Conquering High Blood Pressure and Protecting Your Heart, which you received with your subscription. It's also available at www.drmicozzi.com. <a> I

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