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The simple vitamin cure for one of medicine's most mystifying conditions

I heard an interesting story recently from a colleague about a man whom I'll call Bill.

One night, while watching TV, Bill began to feel nauseated, sweaty, and out of breath. He could feel his heart racing.

Suddenly, his legs began to shake and jerk. Bill rushed to the ER, where he told doctors he had not really felt right for about a year. He'd been dizzy (hint 1), tired (hint 2), and depressed (hint 3). And in the previous two weeks, he had begun to feel off balance when he was standing (hint 4).

Doctors did find that Bill's blood pressure dropped when he stood up. But they didn't take any of the other hints, and sent him home with no answers and no help.

Bill figured that these seemingly unconnected health issues were due to aging and he would just have to live with them. But within a few days, the problems started all over again and he went back to the ER.

This time, doctors observed that Bill walked with an abnormal, flat-footed gait (major hint 5), which could be a sign of a neurological disorder like multiple sclerosis or Parkinson's disease. However, tests for both of these conditions came back normal.

Finally, the doctors did a basic physical exam (when all else fails, examine the patient). They discovered that Bill had impaired sensation in his feet and that he couldn't feel the floor when he was standing. These findings are consistent with peripheral neuropathy—a condition often caused by diabetes. Excess sugar in the blood slowly damages the small blood vessels that supply peripheral nerves in the hands and feet.

But Bill didn't have diabetes. Nor did he have a circulatory problem or a degenerative nerve disease. Finally, after ruling out everything else, doctors concluded that Bill had a simple deficiency of vitamin B12. Correcting it completely cured his neuropathy. And boosting his intake of all B vitamins helped with his dizziness, fatigue, and depression.

Why you probably aren't getting enough essential "neurovitamins"

This sounds simple, right? Scientists have long known that B vitamins are important for every cell in the body. And the effects of B vitamins on brain and nerve tissue are so well-established that in Europe they call them "neurovitamins." In particular, insufficient B12 can first manifest in sensitive nerve cells, which may lead to peripheral neuropathy.[1]

But despite all of this knowledge, Bill's case is not rare. In the famous Framingham Heart Study, researchers found that 39 percent of the nearly 3,000 subjects had B12 levels in the low-normal range. More than 16 percent had below normal levels, and 9 percent had outright deficiency.[2]

All this in the "well-nourished" USA, protected by the government's so-called "experts" on nutrients--and dosages.

Normally, B12 comes from the diet, but the best sources are eggs, meat, and dairy—foods we've all been told to avoid. Yet even if you (wisely) ignore the pseudo-science and eat these healthy foods, research shows that about 10 to 30 percent of all people over age 50 may still have trouble digesting vitamin B12.[3]

Why? First of all, you need a healthy gastrointestinal tract to absorb B12 into your bloodstream. Gastrointestinal surgery can interfere with B12 absorption, as can IBS and other bowel disorders.

Continued on page 2...

In this issue:

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Stomach acids help the body absorb B12, so beware of medications that reduce these acids. A recent study of nearly 210,000 adults found that the people who took proton-pump inhibitor drugs like Prilosec, Nexium, and Prevacid for two years had a 65 percent increase in vitamin B12 deficiency. Other types of antacids—most notably, Tagamet and Pepcid—increased B12 deficiency by 25 percent.[4]

But stomach acid–suppressing drugs aren't the only pharmaceuticals that can hamper B12 absorption. A common example is Metformin, an otherwise safe and effective drug for diabetes[5] (see page 5). That's why I recommend that everyone who takes Metformin also take a vitamin B-complex supplement.

Statins are another culprit. I've warned how these overused anti-cholesterol drugs can cause serious side effects—and one of those is neuropathy.[6]

Even if you don't take any of these medications, a vitamin B-complex supplement is a good

The ABCs of vitamin B

The letters given to vitamins don't really have biological significance—they just reflect their arbitrary order of discovery.

And when it comes to B vitamins, the numbering is also arbitrary. There are eight different types of these vitamins: B1 (thiamin), B2 (riboflavin), B3 (niacin or niacinamide), B5 (pantothenic acid), B6 (pyridoxine), B7 (biotin), B9 (folate or folic acid), and B12 (methylcobalamin or cyanocobalamin).

It's interesting to note how the various B vitamins got their names. For instance, folic acid, which was first isolated from spinach in 1941, was named after *folium*, the Latin word for leaf.

Folic acid must first be chemically reduced (deoxidized) in the body with antioxidants. It's then used in important metabolic processes such as DNA synthesis, cellular reproduction, and homocysteine metabolism—all of which are critical for heart and nerve health.

Folate is a type of folic acid that was developed by the dietary supplement industry. Because folate doesn't have to go through folic acid's deoxidizing process, it's more stable. That's why you'll find that some supplements contain folate rather than folic acid.

Likewise, stability is an important issue for B12. This vitamin comes in two forms, methylcobalamin and cyanocobalamin.

People see the "cyano" prefix and assume it has something to do with cyanide, and indeed, a trace amount of cyanide is present in cyanocobalamin. But it is completely safe and no less healthy than methylcobalamin.

In fact, cyanocobalamin is the most common form of B12 for good reason. Methylcobalamin can be chemically unstable, meaning it can break down before it ever gets into your body. Thus, high-quality dietary supplements are made with cyanocobalamin to ensure stability and potency during manufacturing, shipping, and while they're sitting on your shelf.

idea. Make sure it has at least 5 to 10 mg of B6, 20 to 40 micrograms of B12, and 800 to 1,000 micrograms of folic acid.

The reason you never hear about natural cures like vitamin B12

So what have we learned from Bill's story? First of all, that there is plenty of research showing that vitamins and dietary supplements promote health, prevent illness, and reduce the risk of chronic diseases. But whenever people speak about the ability of vitamins to actually "cure" medical conditions like neuropathy, it is often in hushed tones.

You see, supplement manufacturers are actually not permitted to tell consumers about the health benefits of dietary supplements because of the FDA's bureaucratic regulations designed to "protect" consumers from false claims. Unfortunately, these laws also prevent companies from making claims that are 100 percent true.

But aside from all of the legalities, Bill's story also illustrates the mainstream bias against dietary supplements. After all, drugs are the treatments that are supposed to "cure" diseases, right? Unfortunately, all too often drugs only mask the symptoms that the body uses to tell you something is wrong. Drugs generally don't address the root causes of those symptoms.

Furthermore, drugs often cause side effects of their own. Ironically, these side effects frequently result from a drug interfering with the body's absorption and utilization of critical vitamins and other nutrients.

There is a lot of talk these days about complementary and integrative medicine.

A real and practical example would be to "complement" drug treatments by giving patients the dietary supplements they need to correct the deficiencies caused by these drugs, and to "integrate" this routine procedure into the practice of medicine.

Unfortunately, this very basic step is usually not taken—out of ignorance, arrogance, or perhaps even intention. In fact, as Bill discovered, vitamins and dietary supplements are usually the choice of last resort on a mainstream doctor's diagnosis and treatment list.

Don't let what happened to Bill happen to you. Take your daily B vitamins, and choose doctors who understand the crucial role that vitamins and other nutrients play in keeping you healthy. IC

Citations available online at www.DrMicozzi.com

Big time health benefits from a tiny fruit

Wild cherry isn't just a popular flavor of Smith Brothers cough drops. This tart fruit has become a sweet sensation with savvy healthcare practitioners because of its many medicinal properties.

Traditional healers have known about tart cherries' anti-inflammatory and antibacterial characteristics for centuries. Henry VIII was said to be a fan of the fruit's ability to relieve inflammation of the joints caused by gout. And in later years, a variety of studies have found that tart cherries contain the natural sleep hormone melatonin, making them a good option for insomnia and jet lag.

Now, researchers are discovering that this ruby-red fruit is also a powerful antioxidant that may significantly reduce the risk factors for cardiovascular disease, diabetes, and cancer. Evidence also suggests tart cherries may even help you lose weight (as long as you don't bake them into a pie, of course).

I'll tell you all about the exciting new research on tart cherries in a moment. But first, it's interesting to look at the history and folklore of this popular fruit.

Cherries' surprising family tree

Wild cherries are actually members of the plum family. And we all know that dried plums—better known as prunes—have powerful medicinal properties.

But, of course, the government doesn't like to acknowledge that. At a conference I organized and chaired in Washington, D.C. during the 1990s, I witnessed a dramatic debate between a FDA rep and the world-famous botanist Varro Tyler.

The FDA rep warned that we can never say that prune juice is a laxative. Dr. Tyler dared him to drink a bottle of prune juice there and then, and still try to claim it was not a laxative. Of course, the FDA flack didn't drink the prune juice. But he and his successors all drink the Kool-Aid when it comes to their anti-scientific and anti-common sense regulations.

Prunes don't get "grandfathered" (or "grandmothered") past these ridiculous regulations even though

Continued on page 4...

they've been used as laxatives for a very long time—and are certainly safer than the packaged commercial laxatives relentlessly marketed for "regularity" to people who don't need them.

Like prunes, cherries are one of nature's original dietary supplements. The wild cherry is thought to be a natural hybrid between the sweet cherry and another species grown in or near Persia.

The tart fruit was cultivated around the Caspian and Black Seas and introduced to the Greeks by Alexander the Great. The Romans then discovered it and passed it on to the Britons more than 2,000 years ago.

Around 1640, Massachusetts Bay colonists planted the first cherry tree in America. Of course, by the 1700s, cherry trees had spread south to the Potomac River, where George Washington introduced them into American folklore. However, the famous cherry trees that grow in Washington, D.C. today were actually a gift from Japan before World War II. They are about the only thing that still blooms in that blighted location.

Tart cherry studies show sweet benefits

The most well-known use of tart cherries is to relieve the symptoms of gout. The famous medicinal botanist Jim Duke, PhD, formerly of the USDA Agricultural Research Center, told me that cherry juice is the best treatment for inflammation of the joints caused by gout, and there's plenty of research to back him up.

In recent years, tart cherry research has blossomed even further. Here's a look at the most fruitful findings.

Cardiovascular disease. Mice that were given tart cherry powder for five months had significantly reduced C-reactive protein and hardening of the arteries—risk factors for heart disease and stroke. In addition, the cherry-eating mice lived longer than their counterparts. Researchers believe these effects are due to reductions in inflammation—a well-recognized risk factor for cardiovascular disease.[1]

Insomnia. People ages 59 to 77 with insomnia were given either 8 ounces of tart cherry juice twice a day for two weeks, or another type of fruit juice. Researchers found that the cherry juice drinkers slept nearly an hour and a half longer per night, on average, than the people who drank the other kind of juice.[2]

Obesity. Rats that were fed tart cherry powder for just three months had lower body weight and fat mass than their non-cherry eating counterparts. They also had fewer markers of cancer risk. Because chronic inflammation is linked to obesity, researchers believe the rats' weight loss was due to tart cherries' anti-inflammatory properties.[3]

Diabetes. Rats given tart cherry powder for eight weeks had improved blood sugar and insulin balance—key factors in the prevention of diabetes.[4]

The popular wild cherry varieties grown today ripen in mid to late summer. While it may be getting a little late this year to find the fresh fruit, frozen and dried tart cherries are available year round. So is tart cherry juice, but it's best used in moderation because of its high sugar content. There are some tart cherry juices with no added sugar—dilute them in seltzer if you're not a fan of puckered lips.

However, to get enough of the active ingredients in wild cherries, I suggest not relying on cherry juice alone, but also to use extracts, syrups, and dietary supplements.

Because much of the research so far has been done on animals, I can't recommend an optimal daily dosage of tart cherries or cherry supplements. It's best to work with a physician who is knowledgeable about natural remedies to help you determine the best use for your particular needs. IC

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A different kind of "cherry" with powerful healing potential

Winter cherry, also known as ashwagandha, has long been used in India's Ayurvedic medicine tradition.

Winter cherry is not actually a cherry at all. Rather, it's a member of the plant family that includes Chinese lantern and Jerusalem cherry. But that doesn't make it any less medicinal than its wild cherry cousin. In fact, its Latin name is *Withania somniferum*, which implies the same sleep-inducing power as wild cherry.

Winter cherry/ashwagandha has been used for centuries as an effective remedy for joint inflammation. It's so powerful, in fact, that I recommend it instead of the tired old glucosamine and chondroitin supplements, which have never really worked for joints.

To keep your joints at their healthiest, I recommend 500 mg a day of ashwagandha, together with two other Ayurvedic remedies: boswellia (450 mg a day) and turmeric (200 mg a day).

The drug—yes, *drug*—that may actually slow aging

I have long recommended the drug metformin for type 2 diabetes and managing blood sugar. But it turns out this surprising drug can do much more. Metformin can reduce the risk of developing other chronic illnesses like cancer[1] and cardiovascular disease[2], and may also help improve memory.[3]

Even more amazingly, researchers have recently found that this multitasking drug may actually be able to *extend your life*.[4]

It's rare for me to agree with mainstream medicine that a commonly used drug is really safe and effective, let alone the preferred treatment for any type of medical condition. But when I uncovered the well-buried history of metformin, it was a lot less surprising.

As I revealed in the December 2012 issue of *Insiders' Cures*, metformin is actually derived from an ancient herbal remedy known as French lilac, or goat's rue. Herbal historians have traced French lilac-based treatments as far back as ancient Greece, Rome, and medieval Europe, where they were used for people with sweet-tasting urine (a hallmark of excess blood sugar).

In the 1950s, the first French lilac–based diabetes drug was launched in Europe. It migrated to the U.S. in the 1970s under the name glucophage. Now known as metformin, this herb-based treatment is thought to be the most prescribed diabetes drug in the world. It is the only drug that manages blood sugar while also preventing the circulatory complications of diabetes.

So how does this simple herb-based drug actually help you live longer?

The mechanics of aging

Researchers believe metformin's longevity effect is due to a cellular process called hormesis.

In simple terms, hormesis shows that a small to moderate amount of a "bad" thing can actually have positive effects on health and longevity.

In metformin's case, that "bad" thing is reactive oxygen species (ROS)—otherwise known as oxidants or free radicals. Scientists recently discovered that through a complex process, metformin increases ROS.[4] The body's natural antioxidants neutralize the harmful effects of these ROS. But before that happens, the extra ROS trigger protective defenses in the body that help extend lifespan.

This discovery confirms what I've always maintained—that the pop-science antioxidant theory is not so simple. Mainstream Johnny-come-latelys and natural know-it-alls like to throw around the term antioxidant like some kind of magic incantation, without the slightest idea of what it means biologically or chemically.

In reality, body chemistry is much more complicated than just "oxidants are bad" and "antioxidants are good"—as scientists have learned with metformin.

Wouldn't it be amazing if these scientists have actually discovered the all-important mechanism of true antiaging? All from a simple, time-tested drug, which is really an ancient herbal remedy. IC

Citations available online at www.DrMicozzi.com

Don't forget! Metformin's one negative side effect—and how to avoid it

It's important to note that taking Metformin causes your body to absorb fewer B vitamins. So if you use Metformin, you must also take a good B-complex vitamin supplement—as I recommend to everyone. For more information on B vitamins, see page 2.

New research shows blood vessel benefits of vitamin C

Important new research has found that vitamin C can significantly reduce the risk of cardiovascular disease.[1] I can only hope that the government will pay more attention to this scientific finding than it has to the vitamin C anti-cancer studies.

Vitamin C's role in preventing and treating cancer is supported by studies dating back as far as 30 years ago. But, as I revealed in my special report "Classified Cancer Answers," the government has ignored this research.*

Instead, federal bureaucrats embraced a poorly chosen, expensive, drug-industry favorite "anti-cancer" alternative to vitamin C that I predicted would not work. This lab-created Frankenvitamin, known as synthetic beta-carotene, was even worse than I thought. In fact, it actually turned out (after tens of millions of dollars in research studies paid for by your taxes) to increase cancer in some high-risk groups.

But back to the recent findings on vitamin C's role in cardiovascular disease…

Continued on page 6...

This new research involved a review of 44 clinical studies that showed that taking more than 500 mg of vitamin C a day has beneficial effects on endothelial cell function.

Endothelial cells line the internal walls of blood vessels and are critical in helping blood pump throughout the body. Healthy blood circulation is key to preventing heart disease and strokes, as well as other conditions like diabetes, dementia, and neuropathy.

So just imagine—a simple vitamin that you can find in everything from oranges to broccoli can improve the function of the very cells that help protect you from the key diseases associated with aging.

What's even more amazing about this research is that it shows vitamin C actually works even better in those who need it most. Scientists found that the vitamin had a stronger effect on the endothelial cells in people who already had heart problems or metabolic disorders like diabetes.

This observation is important because, as I've consistently warned, the results of studies on nutrients may be meaningless when researchers select participants who are not likely to benefit from that nutrient. Whether it's because the participants are already well nourished and healthy, or they don't actually have the disease that's being studied.

These researchers also avoided studies using low, meaningless "recommended daily allowance" doses of vitamin C. And they also wisely only included studies that analyzed the effects of vitamin C for a long enough period of time to see results. (Many clinical trials on nutrients fail to recognize that nutrients are slower acting than drugs.)

Another interesting aspect of this study is that the researchers revealed how vitamin C works at the cellular level. It adds to the growing body of evidence showing not only that vitamins do work, but also *why* they work.

In light of all of this compelling evidence, isn't it time that mainstream doctors actually learned something about vitamin supplementation for their patients?

That may be too much to hope for. But it doesn't mean you can't benefit from this insightful discovery. Make sure you take at least 500 mg a day of vitamin C. Your blood vessels will thank you.

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Urgent warning for women!

Common drug increases risk of deadly breast cancer

There is now evidence that antidepressants—one of the most common types of prescription drugs—may contribute to one of women's greatest worries. Yes, I'm talking about breast cancer.

Breast cancer affects one in eight women, and unfortunately, depression is also very common in women—in fact, twice as prevalent as in men.[1] And since mainstream medicine has so little else to offer, nearly one out of four women in their 40s and 50s are prescribed dangerous antidepressant drugs[2]—just at the age when their risk of breast cancer begins to climb.

You see, about 70 percent of breast cancers are sensitive to estrogen, meaning that the hormone helps them increase in size.[3] Recently, researchers have found that the SSRI antidepressant paroxetine (commonly marketed as Paxil) has an estrogen-like effect in the body, promoting the growth of breast tumors.[4]

Despite this evidence, last year the FDA approved paroxetine for the treatment of hot flashes and other menopausal symptoms.[5] Amazingly, the FDA's own Reproductive Health Drugs Advisory Panel voted 10 to 4 *against* approval. You read that right—despite an overwhelming rejection by scientific experts, the FDA government bureaucrats went ahead anyway and gave paroxetine the thumbs up for menopause symptoms.

The advisory panel voted against approval because of the severe side effects associated with SSRIs, and only minor benefits (more on this in just a moment). It also cited these drugs as highly addictive.

It is one thing to wait two to three weeks for SSRIs to take effect, but then there is no reasonable strategy for ever getting off them. Sounds like the perfect drug, right? At least for big pharma.

The FDA trumpeted its decision to approve paroxetine, marketed under the name Brisdelle, for menopausal symptoms as a "non-hormonal, non-estrogen alternative." The idea is that since estrogen-like hormone treatments for menopause cause breast cancer, Brisdelle can be given to lower the risk of getting breast cancer. Too

bad Brisdelle acts like estrogen and promotes breast cancer anyway! The truth about Brisdelle can be found in just four of its letters: s-e-l-l.

But the FDA also apparently ignored testimony citing another serious risk associated with antidepressants like Brisdelle/Paxil...

More harm than good

Sadly, research shows that antidepressants potentially benefit only about one in seven people with depression.[7] And doctors have no idea how to screen patients to determine in advance those few who might really benefit. So they just prescribe different antidepressants using the trial and error approach.

But unfortunately for women, your doctor's error is potentially your breast cancer…or even your suicide.

That's right—scientific evidence shows these drugs can lead to suicidal behavior in menopausal women.

"The data clearly show that the women taking paroxetine were more likely to have suicidal thoughts and behaviors than the women taking placebo. This was true even on the small dose of 7.5 mg," said Mary Carol Jennings, MD, of the National Research Center for Women & Families, in FDA testimony. "The CDC tells us that women between the ages of 45-54 have the highest rates of suicide in the country. That is the same age group most likely to take a drug for hot flashes."[6]

In my former forensic medical practice, I personally investigated several cases of suicide in depressed people who were living, working, and somehow getting along okay. Until they went to a psychiatrist and were "helped" by being prescribed SSRI antidepressants. Then they suddenly committed suicide.

Of course, that's not the case with everyone. Some women do benefit from antidepressants. But why take the risk when there's a safe, effective, natural alternative?

The perfect non-drug solution for depression and breast cancer prevention

There's compelling recent evidence that vitamin D can help fight depression and breast cancer in older women. In fact, if mainstream doctors were not so focused on drugs, they might actually see that vitamin D—rather than antidepressants—makes a strong case for being the "magic bullet" for women.

One new study of nearly 82,000 women ages 50-79 found that women who consumed 800 IU daily of vitamin D—primarily from food sources like meat, fish, dairy products, and eggs—were 20 percent less likely to become depressed over a three-year period than the women who got just trace amounts of the vitamin.[7]

Another new research review looked at the results of 25 separate studies that measured vitamin D levels in 17,332 people at the time of their cancer diagnosis. Higher vitamin D levels were linked to significantly better survival rates for people with breast or colon cancer or lymphoma. There was also a positive effect for lung, stomach, prostate, and melanoma skin cancers, as well as leukemia.[8]

In addition, back in May I sent out a *Daily Dispatch* about a recent study that showed that women with breast cancer who had higher vitamin D levels had double the survival rate of women with lower levels.

It's important to note that all of these studies were in populations where the "high" vitamin D group of women actually just had "sufficient" levels of the vitamin. Imagine if all women were at the truly optimal levels shown by research to be most beneficial to their health?

I recommend a dose of 5,000 IU per day of vitamin D for all women. For those who don't want to add more pills and capsules to their daily routine, vitamin D is available in potent, liquid forms that can be conveniently added to low-fat milk or juice—or taken directly, as the dosage is usually just a few drops, depending on the product. IC

Citations available online at www.DrMicozzi.com

Shocking new research: Tylenol is worthless for pain

You may have heard the joke about the mother who takes her son to the good ol' country doctor and asks what's wrong with the boy. The doctor says, "Well, ma'am, I'm sorry to say, but he's just not very bright."

The outraged mother says, "I demand to get a second opinion!"

The doctor thinks for a moment, then replies, "To tell the truth, he's kind of homely too."

Well, researchers have come up with a similar second opinion on acetaminophen (better known by the brand name Tylenol). Although this second opinion isn't so subjective, it's just as ugly. And it's no laughing matter.

Experts have already long concluded that excess doses of this toxic drug are the No. 1 cause of acute liver failure in the U.S.[1]

Continued on page 8...

And now, a large new study reports that acetaminophen is actually worse than placebo sugar pills at relieving pain.[2]

Tylenol prolongs pain

The new research involved 1,643 people with lower back pain—the most common cause of pain and disability in working age Americans and something that nearly two-thirds of Americans have experienced at some point in their lives.[3]

The study participants were divided into three groups. For four weeks, the first group took six 500-mg acetaminophen pills a day, and could potentially take another two pills on an "as-needed" basis for pain. (500 mg of acetaminophen is the dosage in one Extra Strength Tylenol tablet.)

The second group also took six 500-mg acetaminophen pills daily, but their "as-needed" pills were actually placebo sugar pills. The third group was given only sugar pills.

The researchers found that people in both of the acetaminophen groups suffered an average of 17 days before recovering from a bout of disabling back pain. But patients taking a sugar pill took only 16 days to recover.

You read that right—people taking the drug actually spent an extra day in pain. And if you are one of millions who have had back pain, you know that every day of suffering can seem like an eternity.

So in the end, all you get for the trouble and expense of taking Tylenol is the risk of liver failure—and less pain relief than a sugar pill.

But why is Tylenol so ineffective when it comes to relieving pain? Well, I suspect acetaminophen is a metabolic poison that actually interferes with your body's normal ability to heal naturally and safely.

And yet, universal medical practice guidelines scandalously call for this toxic, ineffective drug as a first-line treatment for low back pain. You have to wonder where that idea came from. In fact, as the researchers of this new study point out, there has never been any good evidence to support using Tylenol for back pain—despite the "universal" acceptance.

So, as the good ol' country doctor from that joke might say, using acetaminophen is just plain dumb—as well as ugly.

But unfortunately, avoiding acetaminophen isn't always as simple as bypassing the bottles of Tylenol on the grocery or drugstore shelves.

Sneaky sources increase your risk

Acetaminophen also hides out in numerous combination prescription pain relievers.

The theory seems to be that a pharmaceutical company can sell a worthless pain reliever like acetaminophen by adding it to a second ingredient that should actually have some pain-relieving potential. Then, when the combination works (based on the other ingredient) the company can claim the product is effective.

The problem is, people can easily end up getting "too much" Tylenol when it's hiding out in these prescription drugs. (Although, of course, any amount of this toxin is too much in my book.)

The FDA, which is supposed to regulate drugs so that they are safe and effective, has finally seen fit to try and stop this practice.

In January, the FDA recommended that doctors stop prescribing combination pain relievers that contain more than 325 mg of acetaminophen per tablet or capsule.[4] (Some of these drugs contain as much as 750 mg of acetaminophen.)

The FDA first asked manufacturers to reduce the acetaminophen in these combination pain relievers back in January 2011, and gave them three years to comply. But as of January 2014, only about half of the manufacturers had done so. Hence the new recommendation. The FDA also issued a warning that it intends to initiate proceedings to remove approval of these combination drugs in the "near future."

Of course, Congress asked the FDA for new good manufacturing procedures for dietary supplements in the "near future" back in 1993. It took 13 years for those procedures to be finalized. Hopefully it won't be another unlucky 13 years for consumers before these combination pain relievers are finally banned.

But regardless of how long it takes the government authorities to do their job, you can start protecting yourself and your loved ones today.

If you're suffering from low back pain, the best relief doesn't actually come from a drug—or a supplement—at all. Research has proven that spinal manual therapy (SMT) administered by skilled chiropractors and physical therapists is the most effective therapy for low back pain. SMT is safe, doesn't have any side effects, and is widely available. And, best of all, it really works, and works fast.

There are also better, safer ways to relieve other types of pain. These options are natural, effective, and won't cost you an arm and a leg (not to mention your liver—or your life). I discuss all of these safe, natural alternatives in detail in my report, *The Insider's Ultimate Guide to PILL-FREE Pain Cures*. If you don't already own a copy, you can purchase it on my website, www.drmicozzi.com.

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