



Lung cancer: one of the government's biggest betrayals against the American public

Five proven ways to protect yourself without their "help"

Thirty years ago, I became a sad witness to one of modern history's biggest betrayals of the American people by the academic-government-industrial-medical complex. Victims of the nation's No. 1 cancer killer were abandoned in the midst of a great celebratory announcement of pseudo-progress in the endless government "war on cancer."

It's hard to know which came first—putting the wrong people in charge of this particular "battle" of the cancer war, or putting the wrong policies in place. But these two circumstances fed off of each other, creating a perfect storm in which the American people were abandoned and betrayed.

Today, nothing has changed. Lung cancer still remains, by far, the No. 1 cause of cancer deaths in America. The American Cancer Society estimates that nearly 160,000 people will die from lung cancer this year—more than triple the rate of the No. 2 killer, colon cancer.¹

How can this be? Well, annual chest x-rays were abandoned long ago, and according to government "cancer control" experts, nothing has taken their place for screening and early detection of lung cancer (although real doctors beg to differ, as I'll explain in a moment). There also has been little real progress in developing new medical or surgical treatments for this deadly cancer.

The search for effective treatments goes up in smoke

Meanwhile, the government has become obsessed with tobacco. So how is that working out for the American people? Well, bureaucrats may be winning the anti-smoking battle, but they are losing their so-called "war."

The surprising fact is, the majority of people who develop lung cancer today have either *never smoked* (about 20 percent) or are former smokers.² They already complied with the only thing the government has to offer. And yet lung cancer still remains a virtual death sentence and the nation's No. 1 cancer killer.

Sadly, the government attitude toward smoking has also resulted in blatant bias and discrimination against lung cancer victims—which has been widely reported in the medical literature. Younger victims who never smoked a cigarette in their lives actually say they have to pretend to have a different type of cancer to avoid discrimination and shame. Doctors and nurses often admit that they view lung cancer patients differently than other cancer victims.

What a shame that political considerations have overcome medical science, medical ethics, and even human compassion in dealing with this dreaded disease.

But while the government may

have abandoned the American people, I haven't. Before I give you the latest news about what you can do to protect yourself from lung cancer—including surprising data about some of the health benefits of light to moderate cigarette smoking—I'd like to share with you how these shameful attitudes toward lung cancer began.

Clearing the air

In 1984, shortly after I started my research on diet and cancer at the National Cancer Institute (NCI), I was summoned to a meeting to announce a major step "forward" regarding cancer research. The new deputy director of the NCI Division of Cancer Control and Prevention told us that henceforth, funding for lung cancer research would be directed to smoking

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cessation and prevention programs.

Not research on cancer biology (to understand the disease), nor screening, nor treatment. But strictly “behavioral modification.” (The agency even eventually had its name changed to Cancer Control and Population Science, which we might just shorten to “Control of the Population.”)

You see, the political scientists had decided what *the* singular cause of lung cancer was, to the exclusion of all of the medical and historical evidence to the contrary. And the new deputy director was a PhD in, you guessed it, psychology and behavioral science.

Of course, directing all of this money from the war on cancer to smoking cessation was one of the biggest windfalls of the 20th century for behavioral scientists. Most of whom had never treated a single cancer patient nor spent one day in a cancer research lab. And yet suddenly, they were in charge of dealing with the nation's No. 1 cancer killer.

I witnessed these behavioral scientists arriving at their new, cushy jobs at the NCI, taking positions on review committees, and weighing in on research grants. And I was around Washington D.C. long enough to see most of them quietly leave to go back to their ivory towers. Fighting the war on cancer is hard work and was not quite the plum assignment it had seemed. Not to mention general lack of success and results—never a criterion for government work in any case.

State governments fumble just as badly as the Feds

So that's how the federal government has “protected” you against our No. 1 cancer killer for the past three decades.

How about state governments, which received billions of dollars in lawsuit settlement funds from the

tobacco companies? Money that was allegedly intended to help the states cover the costs of dealing with supposed tobacco-related illnesses?

Surely the states put away those funds to provide health care for lung cancer victims, right? Well, as I reported in an October *Daily Dispatch*, it turns out some state governments collected all of their tobacco lawsuit money up front by issuing bonds (the way state and local governments like to do: Spend now, pay later—maybe).

Then these states spent that bond money on balancing their budget deficits, paying public employee unions, etc. So good luck getting state government help if you or a loved one develops lung cancer.

By now, it's clear that we are largely on our own when it comes to preventing lung cancer. So what can you do to protect yourself?

My top five scientifically proven suggestions for lung cancer

1. Cut back on smoking. If you do smoke cigarettes, cutting back will help. But that doesn't necessarily mean you need to quit entirely, according to the real science.

My own research with a top team of investigators at the NCI, using the largest long-term health database in the U.S., showed that the effects of light to moderate smoking are completely different from the results of heavy smoking or chain smoking.

Of course, most careless research lumps all smokers together, no matter how much or what they smoke (cigars, pipes, or cigarettes). But the fact is, moderation applies to smoking, just as it does with every other realm of human biology and health.

Indeed, moderation is appropriate in this case as well. The lungs of most people (except those who have

a specific genetic susceptibility to cigarette smoke) are not defenseless. The normal lung can handle some smoke—as evidenced by the fact that humans have been regularly exposed to smoke since the invention of fire about a million years ago.

My research, which was published in 1989, showed that people who smoke only half a pack of cigarettes per day (or less) have the same health profiles as nonsmokers. In fact, the light smokers were more likely to maintain healthier weights than nonsmokers.

And cigar and pipe smokers actually had lower overall rates of disease and death than nonsmokers. In fact, as I reported in a November 2013 *Daily Dispatch*, some life insurance companies (which are apparently better at actuarial arithmetic than government statisticians) offer discounted rates to cigar smokers.

Amazingly, my data shows that there may be some benefits to sitting back, taking a time out, and *relaxing* with an occasional smoke (especially a cigar or pipe) or alcoholic beverage. Relaxation is key in today's stress-filled world. And, ironically, part of that stress comes from the constant, politically correct finger-wagging about every puff of smoke, bite of fat, or sip of alcohol.

2. Vitamin C. As I explain in my special report *Classified Answers to Cancer*, vitamin C is an anti-cancer powerhouse. Even 30 years ago, the evidence in favor of this vitamin was overwhelming. But the same group of political scientists who shifted lung cancer research exclusively to smoking decided not to study vitamin C any further. Instead (against my and others' advice) they focused on the ill-fated and ill-considered beta-carotene. This set back nutrition and cancer prevention for the rest of the decade.

As a result, we have to look

halfway around the world for real progress on preventing cancer with vitamin C. In China, people get high amounts of C through their diets (as you can too—I'll tell you how in just a minute). So it's no surprise that a new Chinese study of nearly 9,000 people shows that you can reduce your lung cancer risk by 7 percent for every 100 mg of vitamin C that you take.³

Amazingly, no one who participated in the Chinese study got less than 100 mg per day of vitamin C. Yet the U.S. RDA is only 90 mg, an amount which would, according to the study, nearly double your risk of lung cancer.

The RDA is actually based on what it takes to prevent scurvy—not cancer. To help protect yourself against lung cancer, I recommend 1,000 mg of C a day, divided into two doses (the body can best handle 500 mg of the vitamin at a time). This is not a “megadose” that's often derided by mainstream medicine, but instead, what's truly necessary for optimum health.

Along with your daily supplement dose, it's a good idea to get vitamin C from food. Of course, citrus fruits are excellent sources. Along with eating the whole fruit, try adding lemon or lime slices to your drinking water or any other beverage. Citrus fruits also complement many fish, meat, and vegetable dishes, and are a tasty addition to salads.

Green, leafy vegetables are also very high in vitamin C. Dating back to the British Empire Cancer Campaign studies of the 1920s, these veggies have long been associated with a reduced risk of all cancers, including lung cancer. In fact, this is the single most consistent finding in all of the research on diet and cancer.

Peppers are also excellent sources of vitamin C—the hotter, the better. And rose hips, which can be brewed in herbal teas, are very high in C.

3. Kava kava. In the April issue of *Insiders' Cures*, I reported the remarkable finding that kava kava is associated with massively reduced lung cancer rates. This natural remedy comes from the root of a plant in the black pepper family that grows in Hawaii, Samoa, and the South Pacific.

Kava supplements were once removed from U.S. and European shelves due to spurious observations that they can cause liver damage. When I was editor of a medical review journal on natural remedies 10 years ago, I asked my colleague in Germany, Jorge Gruenwald, to investigate these claims. He found in every case that kava's so-called liver toxicity was actually due to a drug the patient was also taking, or some other identifiable cause.

The latest finding on the anti-cancer benefits of kava are so startling that the American Botanical Council (ABC) has called on the National Institutes of Health to study it for lung cancer, since there is so little else to offer. This step is unprecedented for ABC but the initial results are so dramatic and the need for any sort of lung cancer treatment is so great, they are trying to get more attention.

At this point, there is not enough research to suggest a kava dose specifically for lung cancer prevention. However, millions of people have found that an effective dose for anxiety or insomnia is 60 to 120 mg of kava per day.

4. Lung cancer screening and early detection. Mainstream medicine universally and scandalously pushes questionable and dangerous screenings like colonoscopies and mammograms on virtually everyone. Meanwhile, the only cancer screening that is as safe and effective as it is promoted to be—the Pap test for cervical cancer—is getting bypassed

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by dangerous, inappropriate, and often ineffective HPV vaccines.

But the biggest scandal of all may be the complete lack of adequate screening for lung cancer—at least according to the NCI “cancer control” experts.

And yet, a new MRI lung-cancer screening test is at least as safe and effective as other screening approaches, according to the American College of Chest Physicians (who actually treat lung patients.) And it can detect lung tumors while they can still be surgically removed, which causes the risk of death to plummet.

But “experts” in the same old division of the NCI that misdirected lung cancer research, and ignored all of the evidence on vitamin C, are now claiming that this new screening test is not appropriate. Simply because it has some issues with false positives and false negatives—like every other screening test now routinely being done for every other cancer!

If that weren't bad enough, one NCI expert betrayed the government's ingrained, politically correct, unethical bias against lung cancer victims by stating that people at risk for the cancer obviously don't care about their health and would not bother to get

the test anyway. All without a shred of evidence to back up his blanket dismissal.

Of course, Medicare doesn't cover this test, even though two-thirds of lung cancer victims are diagnosed while they're on Medicare.

This government negligence is costing not only lives, but also millions of dollars to treat lung cancer that can and should be prevented with the new MRI screening test.

Concerned and informed members of my own family have successfully had this test, which is quick, painless, safe, and effective. And while Medicare dithers and government discriminates, many private health insurance plans are smart enough to cover this safe and effective test. Most insurers know the simple fact that it's far better (and less costly) to prevent lung cancer than to try to treat it.


Check with your health insurance company to see if the new MRI screening is covered. Then ask your doctor to prescribe the test. If you are already on Medicare, write to your congresspeople and senators about waking up the permanent, unelected government bureaucrats “in charge” of lung cancer prevention.

5. Get some fresh air. My final suggestion for combatting lung cancer might or might not be the easiest. I learned in medical school that living in a dense, polluted, urban environment can potentially affect your lungs as much as smoking a pack of cigarettes per day.

So if you live or work in a city, get out into nature and breathe some fresh air as often as possible, but at least once a week.

And if you end up in front of a campfire or just near a fireplace this holiday season, the smoke won't kill you. Quite the opposite, in fact. Sitting by the fire is good for the body and soul.

The bottom line is the government has abandoned and betrayed us when it comes to today's No. 1 cancer killer. It long ago hoisted the white flag after fighting (but only partially winning) one battle in what should have been a multi-front war on lung cancer

But now you know there are several simple, scientifically sound steps you can take to help prevent lung cancer—and you don't need the government's mindless, politically correct “help” to do so. 

Citations available online at www.DrMicozzi.com

The simple spice that could replace some of big pharma's best-selling “miracle” drugs

Cinnamon, cloves, ginger, peppermint, nutmeg... nothing evokes the holiday season quite like the smell of spices. But while all of these wintertime favorites have potent medicinal properties, new evidence is showing that a steamier spice may be the most medically versatile of all.

Turmeric, the bright yellow spice that flavors Asian curry dishes, is attracting the attention of more than

just chefs. Researchers are finding that when it comes to good health, this popular spice is truly a “gift from the East.”

So far, nearly 6,000 studies show that turmeric and its active ingredient curcumin have the potential to treat virtually anything that ails you. Researchers have uncovered a whopping 175 different ways this spice affects our bodies, as well

as over 600 potential therapeutic applications.

Turmeric has been found particularly effective at fighting cancer, cardiovascular disease, diabetes, dementia, depression, and osteoarthritis.

This simple spice is so powerful, in fact, that I'm starting to believe it should actually be replacing many of today's most popular drug treatments.

Turmeric may very well be the embodiment of the ancient Greek medicinal concept of “panacea,” or “all-heal.”

Pinpointing turmeric's power

Turmeric gets many of its health properties from curcumin, the antioxidant ingredient that is also responsible for the spice's yellow color. In fact, that blaze of color is a clue to turmeric's potent biological properties.

The list of turmeric's “drug-like” actions reads like the entire Physicians' Desk Reference. Of course, we should really read that sentence the other way around.

Human physiology is a product of nature, and plants are the predominant feature of the environment in which humans developed. Therefore, to be effective, a drug would be expected to have properties that are naturally found in plants. Unfortunately, the isolated, synthetic chemical nature of drugs makes them less safe (and often less effective) than plant ingredients.

So maybe we should skip the drugs

and stick with plant sources. Research certainly suggests just that about turmeric and curcumin.

Why is this duo so powerful? One reason is because turmeric is an impressive anti-inflammatory. As I've often noted, inflammation has been shown to be an underlying cause of many chronic, ultimately fatal diseases. Which helps explain why turmeric is effective against cancer, heart disease, diabetes, dementia, and more.

In one study, curcumin was found to be as potent an anti-inflammatory as aspirin, ibuprofen, naproxen (Aleve), steroids, cox-2 inhibitors like Celebrex, and the breast cancer drug tamoxifen.¹

And those are only some of the drugs turmeric can potentially replace.

Whole-body health from the “spice of life”

Let's look at the various health conditions that turmeric has been shown to improve, compared with the harmful drugs used to treat those conditions.

Cardiovascular disease.

Researchers have discovered that curcumin improves the health of the cells that line blood vessels, reducing atherosclerosis, inflammation, and oxidative stress. In essence, the researchers concluded that curcumin does the same thing as the popular statin drug Lipitor, but without all of the crippling drug side effects.²

Like aspirin, curcumin also works as a blood thinner, which can help prevent blood clots that could lead to heart attacks or stroke.

Cancer. Among dozens of natural substances that can treat multidrug-resistant cancers, curcumin tops the list. I mentioned above that it's as effective as the breast cancer drug tamoxifen. And other research shows it compares favorably with the chemotherapy drug oxaliplatin as well.³

Studies also report that curcumin causes cancer cell death or sensitizes drug-resistant cancer cells to chemotherapy and radiation— theoretically reducing the doses of

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Spice up your osteoarthritis remedy

Considering turmeric's potent anti-inflammatory effects, it's no surprise that it's highly effective for joint pain. In fact, research shows that a combination of turmeric and boswellia (frankincense) reduced knee osteoarthritis symptoms more effectively than the popular—and dangerous—drug Celecoxib.⁸

Of course, any NSAID, including osteoarthritis drugs, is associated with significantly increased risks of gastrointestinal bleeding, kidney damage, and heart problems. But no adverse effects were reported with turmeric/boswellia.

I know a man who combined these two ingredients with the ancient South Asian herb ashwagandha, or winter cherry. He had been scheduled to have both knees replaced earlier this year after living for four years in constant pain.

But after only two months of taking the turmeric/boswellia/ashwagandha combo, he asked his doctor to cancel the knee replacement surgery. And he now feels confident he will *never* need this painful and expensive surgery. (This is especially fortunate since, as I reported in an August *Daily Dispatch*, recent research reveals that only one-third of knee replacements are both appropriate and necessary.)

This man achieved these results by taking 250 mg of boswellia, 300 mg of ashwagandha, and 120 mg of turmeric per day. Based on all available research, for joint health for most people, I recommend a larger dose—450 mg of boswellia (gum extract), 500 mg of ashwagandha (root extract) and 500 mg of turmeric (*Curcuma longa*, or root extract). And make sure to also get nutrients that support the health of the underlying bone: magnesium and vitamins C, D, and E.

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these toxic cancer treatments that would be required.⁴

Diabetes. In the study comparing curcumin to the chemotherapy drug oxaliplatin, researchers also found that the spice was at least *500 times as potent* as the diabetes drug Metformin.

An impressive finding, indeed. But keep in mind this is only one study. As I've explained before, while many herbs show tremendous promise for blood sugar management, the research is still preliminary. No real-world clinical protocols have been established. So, unfortunately, there's simply not yet enough evidence for me to feel confident recommending herbs to control diabetes.

However, curcumin is thought to activate an enzyme that increases muscles' and other tissues' ability to extract glucose from the blood, and suppress glucose production in the liver. Both of these actions can reduce your chance of developing diabetes in the first place.⁵

And, as the saying goes, an ounce of prevention is worth a pound of "cure."

Dementia and memory loss.

Reams of research show that curcumin helps protect brain and nervous tissues. It's also been shown to prevent the clumping of a specific protein in the brain—a process that is considered to be one of the major causes of Alzheimer's disease and age-related dementia.⁵

In addition, a new study shows that curcumin can improve memory, boost attention span, and reduce mental fatigue in people over age 60.⁶

Depression. Animal research shows that curcumin has neurochemical affects on the brain that are similar to antidepressant drugs—but without all of the dangerous side effects.⁷

How much should you take?


Of course you can get turmeric by eating curry dishes. But you need a steady daily diet for best results. A less spicy option is to take turmeric supplements.

Aside from joint health (see the sidebar on page 5), we need more research to determine the optimal daily doses of turmeric for all of the many other health benefits I've discussed

here (especially when it comes to managing diabetes and controlling blood sugar). But a good starting point is 200 mg a day of a turmeric supplement standardized to contain at least 95 percent curcuminoids.

Since turmeric has been used for centuries in food with no negative health effects, there are strong arguments for developing this spice as a safe and effective alternative to a whole host of expensive and dangerous drugs used to treat today's most common medical conditions.

Of course, big pharma has gotten wind of all of this impressive research. And there are reports that some pharmaceutical companies are actually working on turmeric-related drugs. But there's no guarantee that these drugs will be as nontoxic as the simple spice—or that we'll see them any time soon. Or that we'll be able to afford whatever turmeric drug big pharma comes up with.

So in the meantime, consider adding this "spice of life" to your diet or daily supplement regimen. Your mind, body, and taste buds will thank you. 

Citations available online at www.DrMicozzi.com

Alarming new research reveals 93 percent of Americans aren't getting enough of one critical vitamin

And it's taking a disastrous toll on your heart...your immunity...your brain...and more

I have often told you how critical it is to boost your vitamin D intake. And you also know the importance of getting optimal levels of vitamins B and C.

But chances are that you haven't heard as much about vitamin E.

This essential nutrient is often neglected for a variety of reasons. First of all, it's difficult to measure the amount of E that's actually circulating

in your body. So the government is basically clueless about how much of the vitamin humans really need for optimal health.

But vitamin E is definitely not something to be taken for granted. Research shows this nutrient is crucial for every stage of life—from helping fetuses develop normally to staving off Alzheimer's disease. It's important for your heart, eyes, and immune system, and it's vital for brain health.

So that makes it even more infuriating that misguided government bureaucrats think we get plenty of vitamin E—or even buy into the urban legend that we actually get too much.

Vitamin E deficiency: Subtle but deadly

That's simply not the case. Vitamin E deficiency occurs with alarming frequency both in the U.S. and around the world. In fact, recent research shows that a shocking 93 percent

of Americans don't get enough vitamin E.¹

Part of the misunderstanding surrounding E deficiency is that there aren't readily observable diseases associated with low E intake, as there are for other nutrients. For instance, if you don't get enough vitamin C, you develop scurvy. Too little vitamin A can cause blindness in children. A lack of vitamin D leads to rickets. And

low doses of B vitamins cause exotic diseases like beriberi and pellagra.

The effects of vitamin E deficiency are less obvious. But, in many cases, they're more deadly. Vitamin E deficiency has serious impacts on the brain and nervous system, as well as the body's general resistance to infection.

Let's take a good look at what vitamin E can do for you—and what

the government and mainstream medicine are *not* doing for you in regard to this crucial nutrient.

Why are we so short on E?

As I wrote in the July issue of *Insiders' Cures*, the FDA's view of what even constitutes natural vitamin E intake is flawed. Vitamin E has eight active compounds, but the FDA only recognizes one of those—

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NEWS BRIEF

A cure for Ebola...from the "evil" tobacco plant

Once in a while it's good that the government is so incompetent. If some bureaucratic careerists had had their way, they would have eradicated every tobacco plant in the world, pulling them up root, stock, and branch. (As a side note, the word "eradicate" comes from the Latin word *radix*, or root—meaning to uproot something, which is, in fact, the only way to deal with government bureaucrats.)

But completely eradicating tobacco would have been a real health problem. Because, as it turns out, this poor, maligned plant harbors our only known cure for the dreaded Ebola virus.

(Of course, another kind of government incompetence—coupled with political correctness—is largely responsible for allowing this deadly virus within the borders of the U.S. in the first place, but that's a subject for another day.)

ZMapp, the experimental drug used to treat the American medical missionaries who contracted Ebola in Liberia in October, was actually produced from tobacco plants—in facilities owned by the notorious R. J. Reynolds Tobacco Company.

Although ZMapp hasn't been approved yet in the U.S. for use in humans, it appears to have cured the missionaries of Ebola. And a study published in October showed that it also cured *100 percent* of the Ebola-infected monkeys who were given the drug.¹

ZMapp is produced through pharming—a little-known manufacturing process used to grow plants for drugs. Tobacco plants used in pharming are not genetically modified. They are grown in closed, indoor facilities, often using hydroponics. Tobacco is the ideal plant for this process because it's easy to extract its active components, it's fast growing, and it's well understood botanically.

In fact, scientists have been studying tobacco ever since French and Spanish explorers discovered the plants in the Americas in the 1500s. The explorers found that tobacco was highly prized by American indigenous people for its medicinal properties. Native Americans smoked natural whole leaf tobacco for its relaxing effects (inducing the "peace" of the proverbial peace pipe), and used the rolled leaves as suppositories to treat gastrointestinal ailments.

Tobacco's active ingredient, nicotine, was named after Jean Nicot, a 16th century botanist at the Jardin des Plantes in Paris. Scientists subsequently found that there are nicotine receptors throughout the human body. Today, numerous studies show that nicotine can help prevent the development of Parkinson's disease and effectively treat its symptoms. Nicotine also counteracts the crippling neurologic side effects of many psychiatric drugs.

And now, it may hold the only key for Ebola eradication. Which just goes to show how mindless, unscientific, and superstitious it is to try to label any plant as "bad."

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meaning that many E supplements have *zero percent* of the vitamin's main disease-fighting ingredients.

Furthermore, it takes more than blood measurements to determine if you have adequate levels of vitamin E—or any nutrient, for that matter. To truly discover if your body is getting enough of a nutrient, it's important to find out how much of it is circulating throughout your tissues, organs, and cells—not just your blood.

Of course, that's extremely difficult to measure. And that flaw seems to have caught up with us when it comes to vitamin E. For example, blood levels of vitamin E often rise with age, but that doesn't necessarily mean that all of the E circulating in our blood is being delivered to the cells that need it.

To make matters even more complicated, some critics have raised unnecessary false alarms about “excessive” vitamin E, based upon a flawed study several years ago. This myth has been given more lives than the proverbial cat through endless repetition by “experts” who don't seem to understand basic human nutrition and are not up to date on vitamin E science.

Many of these same “experts” actually believe that vitamin E deficiency does not occur—despite the scientific evidence. Subsequently, the government assumes there are no shortfalls with vitamin E intake in the general population, and has set the recommended daily allowance of E at a dangerously low level.

I'll tell you how much you *really* should be getting in just a moment. But first, let's take a closer look at the critical roles vitamin E plays in the body.

Why you need E

A review of multiple studies published in the September issue of *Advances in Nutrition* revealed

some significant findings about the importance of vitamin E.²

Fetus and child development.

It's critical for pregnant women to consume adequate vitamin E because it's essential for normal fetal development. Lack of vitamin E during pregnancy is associated with anemia, infections, stunting, and overall poor outcomes for both infant and mother. During childhood, not getting enough E can cause neurological disorders, along with abnormalities of skeletal and heart muscles.³

Dementia and Alzheimer's disease. Later in life, vitamin E appears to have an important role in preventing or managing Alzheimer's and dementia. A recent study revealed that taking 2,000 IU of vitamin E per day reduced symptoms of dementia and improved cognitive function in a group of older Americans. The “go-to” Alzheimer's drug, memantine, showed no effect in this study. In fact, the drug even appeared to *negate* the benefits of vitamin E in the people who received both the drug and the nutrient.⁴

Of course, the 2,000 IU of vitamin E used in the study is much higher than the government's recommended daily allowance (which I will address shortly).

Cognition and brain function.

Throughout life, there is evidence that vitamin E is important for supporting the brain and improving cognition. In fact, an interesting study reported that people who have higher levels of vitamin E (together with B, C, and D) throughout their lives not only have better cognitive function—they actually have bigger brains when they're older.⁵

Omega-3 fatty acids. Studies suggest that vitamin E appears to protect the functions of essential omega-3 fatty acids, which are important for brain and eye health,

heart health, and supporting a balanced immune system. One study cited in the *Advances in Nutrition* review showed that people who had the highest levels of DHA—a component of omega-3s—cut their risk of dementia nearly in half.


The right dosage

So now for the million-dollar question: How much vitamin E do you need each day?

The government currently recommends 15 mg per day for adults. But broad surveys show that 90 percent of men and 96 percent of women don't even consume this minimal amount.³ Not to mention that research indicates that the optimal daily intake should be much higher.

Consequently, I recommend 50 mg of vitamin E per day. Of course, this amount is much smaller than the therapeutic dose used in the dementia study I discussed above. However, my recommendation is based on a general dose for optimal health. (If you currently suffer from dementia and are interested in vitamin E therapy, you should consult and work closely with a qualified medical professional who understands nutritional supplementation.)

You can also incorporate more vitamin E-rich foods into your diet. Some of the best sources are nuts, seeds, spinach, and eggs. (Note that the vitamin E in eggs is found in the yolk. So be sure to eat the whole egg—not just the white.) All of these foods (except spinach) are also good sources of essential fatty acids, which, as I mentioned earlier, work with vitamin E to improve health on many levels.

So, this month, go ahead and roast some chestnuts over an open fire. And put all those sweet nutcrackers to good use. Your body and your brain will thank you. 

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