



Is the pneumonia vaccine right for you?

New controversies make prevention more important than ever

We think of this time of year as cold and flu season. But sadly, you have to fight more than these nasty viruses during the winter months. You also have to fend off public pressure to get ineffective and dangerous flu shots.

And if you're an older adult, you're probably getting the hard sell to have a pneumonia vaccine as well.

Should you? I used to say yes. But the picture has become cloudier recently.

First of all, there are questionable new CDC recommendations about the pneumonia vaccine. Then there are the vaccine's serious side effects.

And last but certainly not least, there's compelling evidence that the vaccine *doesn't actually prevent pneumonia*.

Let's take a closer look at what our vaccine-happy government doesn't want you to know.

Don't fall victim to vaccination propaganda

There's no question that pneumonia is a serious—and even deadly—illness. Especially for older adults.

Pneumonia causes a whopping 1 million hospitalizations every year in the U.S.¹ And a jaw-dropping 81 percent of the 55,000 yearly deaths from pneumonia or influenza occur in people over the age of 65.²

That's why it's tempting to believe the government propaganda and uninformed hype from so-called experts about the necessity for

pneumonia vaccines.

But, to quote the Longfellow translation of Dante's *Inferno*: "Midway upon the journey of our life, I found myself within a forest dark, for the straightforward pathway had been lost."

Unfortunately, this seems to be the case with many vaccines today. Too much is unknown, and there is no clear direction about how to proceed—despite the vaccination Kool-Aid the government wants to force you to drink.

Some vaccines are truly warranted, but with the crony-capitalist government's relentless propaganda campaigns, and the unsavory practices that have been revealed around some vaccines, how we know when to trust the government about anything?

That's why I recommend you talk with your primary care doctor and/or a specialist in infectious diseases about whether a pneumonia vaccine might be right for you.

And before you do, I suggest you educate yourself so you can ask the right questions—such as how pneumonia occurs, the issues surrounding the vaccine, key risk factors for pneumonia, and steps you can take to help prevent the illness naturally *and* safely.

Read on, and I'll tell you everything you need to know about pneumonia and the vaccine...and how to keep your respiratory system healthy during the long, cold winter months.

How do you get pneumonia?

Pneumonia is most commonly a complication resulting from a respiratory infection such as the flu. However, there are actually more than 30 different causes of pneumonia.

Pneumonia can affect anyone, at any age, at any time of year. But older adults, young children, people with compromised immune systems, and those with conditions such as asthma or chronic obstructive pulmonary disease (COPD) are more at risk than others.

Pneumonia can vary from mild (so-called "walking pneumonia") to very severe cases that can be life-threatening—depending upon the kind of infection, your age, and your overall health status. That's why it's important to be on the lookout for warning signs.

And those signs can depend on what type of pneumonia you have. The two most common are bacterial and viral pneumonia.

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Symptoms of bacterial pneumonia

Pneumococcus bacteria is the most frequent cause of community-acquired pneumonia—meaning the infection is spread from person to person.

With bacterial pneumonia, you can have a fever as high as 105 degrees. Why? Because bacteria signal the body to increase its temperature—which, in turn, slows down the rate of bacteria reproduction and multiplication. This gives the immune system a chance to catch up and overcome the infection by making more white blood cells.

Other symptoms of bacterial pneumonia include profuse sweating, rapid breathing and pulse rate, chest pain, severe congestion, shortness of breath, bluish discoloration of lips and nail beds, and confusion or delirium—particularly in older people.

Some doctors prescribe antibiotics for bacterial pneumonia. And certainly, if you have not recently had a cold or flu (due to a virus, for which antibiotics don't work), but start experiencing the symptoms listed above, a two-to-three-day course of antibiotics can be life-saving.

But if your symptoms are milder, taking a drug just to lower a fever (like aspirin or ibuprofen—or acetaminophen, which you should never take anyway) may actually slow and interfere with the body's natural ability to fight bacterial infections, like bacterial pneumonia.

No matter what, your own body must still overcome the infection with a healthy immune response. That's why respiratory infections like pneumonia are so dangerous in people with compromised immune systems (such as HIV/AIDS).

Symptoms of viral pneumonia

When pneumonia is caused by a virus, symptoms are limited

to breathlessness, cough, fever, headache, and muscle pain and weakness.

These symptoms are similar to flu symptoms, but flu is an upper respiratory infection, while pneumonia occurs in the lower respiratory tract.

So how can you tell the difference? Well, on your own, you can't. So if you have the flu and symptoms such as shortness of breath, cough, bloody or yellow-green mucus, severe congestion, and fever higher than 102 degrees that persists for more than three to five days, it is time to consult a physician, who can tell if you do have pneumonia.

Though keep in mind that when pneumonia is caused by a virus, no antibiotic will help. Nor can you really count on “antiviral” drugs like Tamiflu, as I've written about before. Serious viral pneumonia requires supportive care with bed rest, fluids, and electrolytes.

A vaccine won't help either. Pneumonia vaccines are designed only to fight *bacterial* pneumonia. And, as I'll tell you shortly, they're not even very good at that.

Why the pneumonia vaccine is so complicated

The very first pneumonia vaccine was developed in 1911, but it failed due to manufacturing and purification issues.

These problems occurred mainly because the vaccine was designed to fight bacterial rather than viral pneumonia. Vaccines are well suited to prevent infections caused by simple viruses, but they become more complicated when dealing with bacteria, which are more complex microbes.

By 1940, 80 different serologic types of the bacteria that cause pneumococcal pneumonia in adults had been identified. Today, 90

different serologic types are known.

Serologic types identify different strains of the same bacteria, but they all can cause the same infections in the body. Each serologic type has specific antibodies that must be vaccinated against—meaning there would have to be 90 different antibodies in a pneumonia vaccine. And that's difficult, if not impossible, to accomplish.

Dr. Robert Austrian, my former professor at the University of Pennsylvania and colleague at the College of Physicians of Philadelphia, spent his career during the 1950s-80s working on an effective vaccine for pneumonia. By 1977, he had developed a vaccine covering the 14 serotypes that most commonly cause pneumococcal pneumonia in adults.

By 1983, a vaccine covering the 23 most common serotypes had been developed. This vaccine, which is still used today, addresses 88% of the pneumococcus bacterial strains that can be found in the blood.

(In children, there is a different vaccine and different guidelines. It is hoped that vaccinating children over age 2 will eventually produce immunity in the population as a whole...and reduce the number of community-acquired pneumonia infections. But that opens another can of worms regarding the overwhelming number of vaccines young children are already being exposed to today.)

But despite the promising numbers, giving the pneumonia vaccine to adults has also become controversial in recent years for a few important reasons.

4 major issues with the pneumonia vaccine

High risks for certain groups. The CDC recommends that all adults over age 65 get the pneumonia

vaccine.³ It also targets high-risk adults with compromised immune systems (for example, people with HIV/AIDs, or cancer, or who are taking immunosuppressive drugs like corticosteroids). But this recommendation is controversial because the vaccines, and not just the infections, are also more dangerous in these cases.

One shot may not be enough. The CDC guidelines claim that once a person gets a pneumonia vaccination, he or she will never need another. But data shows that a single shot is most likely to produce antibodies in about 75% of adults, leaving the other 25% unprotected.⁴

But two may be too complex. Since June 2015, the CDC has been recommending that older adults receive two different types of pneumonia vaccines.

However, infectious disease experts cite a lack of evidence, along with increased costs and other factors, for the new, two-vaccine approach. Two experts wrote that the new recommendations are "...misguided, complex, and not ready for widespread adoption."⁴

The vaccine *doesn't* work. I saved the worst for last. A review of 22 studies involving more than 100,000 people revealed that the vaccine does not actually reduce the risk of getting pneumonia.⁵

The vaccine was ineffective in the higher-quality, double-blind trials.

The review also noted that some studies show the vaccine is only 60-70% effective in preventing pneumonia from spreading from the lungs into the blood or brain.

Only one old study, from the beginning of the current vaccine's development, showed that the vaccine reduced the risk of dying from pneumonia.⁶

4 big risk factors for pneumonia

There are a few things you should be aware of that can increase your risk of pneumonia.

Smoking (tobacco or marijuana).

Your respiratory passages are lined with special cells that help repel invaders like bacteria and viruses. One way the cells accomplish this is through cilia, or little hairs, that constantly sweep contaminants away.

But heavy smokers can lose these hairs—which is a big reason why they can have trouble fighting off colds, flu... or pneumonia.

Heartburn drugs. A recent review of 26 studies found that people who treat heartburn and indigestion with proton-pump inhibitors—like Prilosec, Nexium, Prevacid, and others—have a 1.5-fold increased risk of acquiring pneumonia.⁷

The FDA is currently investigating this link.⁸ Of course, it may take 10 years for the FDA to decide—what with all its government holidays and puntng the problem to some quasi-scientific "committee" for further study.

Allergy drugs. Another drug to pay attention to is Zyrtec, which is used to treat seasonal allergies. But it also has antihistamine effects that some people find useful for symptoms of cold or flu.

However, according to FDA statistics, 3% of people who took Zyrtec reported that they contracted pneumonia.⁹ It's a small number, but it bears watching.

Tonsillectomy or adenoid removal.

There's a special type of tissue in your throat, known as Waldeyer's Ring, that consists of two tonsils, two adenoids, and smaller collections of lymphoid white blood cell tissues. When you get a cold or fight off an infection, immune cells proliferate. That causes the tissues in Waldeyer's Ring to swell so they can better fend off the invaders.

Unless, of course, this tissue has been surgically removed.

So if you have had your tonsils or adenoids taken out, it's a good idea to watch out for pneumonia if you get the flu. And if you're one of the lucky ones and still have your Waldeyer's Ring intact...consider yourself the owner of a valued treasure!

And don't forget the long list of side effects

If you do get the pneumonia vaccine, there are many common side effects. Most serious is an acute allergic reaction, which requires immediate medical help. Symptoms include difficulty breathing; hives; or swelling of the face, lips, tongue, or throat. You should wait about 20 minutes in the doctor's office after receiving a vaccine to make sure you don't have a dangerous reaction.

Other serious side effects include high fever (103 degrees or more); easy bruising or bleeding; swollen glands; skin rash or itching; joint pain and general malaise; pale or yellowish skin tone; dark urine; confusion or weakness; numbness or tingling in the feet; severe lower back pain; changes in behavior; problems with vision, speech, swallowing, or bladder or bowel function; slow heart rate; breathing trouble; and lightheadedness. Contact your doctor immediately if you experience any of these side effects.

Your natural pneumonia-prevention checklist

Practice good hygiene. This includes washing your hands regularly with soap (*not* the dangerous antibacterial kind) and drying them with a paper towel or personal handkerchief—*not* a hand dryer. As I wrote in in the February 2015 *Insiders' Cures* ("The shocking source spreading cold and flu viruses"), research shows these devices just blow bacteria and viruses throughout a restroom.

Boost your immune system. Take a daily high-quality B vitamin complex, 250 mg of vitamin C twice a day, and 10,000 IU per day of vitamin D. And, of course, eat plenty of antioxidant-rich fruits and vegetables.


Fight colds and flu. Because pneumonia can often be a complication of an upper respiratory virus, follow these steps whenever you feel a cold or flu coming on:

- Take 300-400 grams of **echinacea, goldenseal, and/or elderberry** daily. I prefer to take ALL of these herbal remedies in hot infusions (teas) together with honey, lemon, and flu-fighting ginger.
- In addition, I recommend **50-60 mg of zinc** twice a day
- I also recommend **200 mcg of selenium** daily (in organic form, such as selenomethionine).

Less serious but likely to occur are low fever (102 degrees or less); chills; fatigue; headache; nausea; vomiting; and swelling, stiffness, soreness, or redness in the injection area.

But even if you somehow manage to avoid these side effects, it's difficult to ignore the other serious problems with the pneumonia vaccine I outlined above. Which is why it's imperative to discuss with

your doctor or an infectious disease specialist if the pneumonia vaccine is right for you.

But no matter what, it should be clear that this vaccine is not a good way to actually prevent pneumonia. Your best way to stave off pneumonia is also the best way to thwart all respiratory infections—avoid the coughing crowds, boost your immune system and practice good personal hygiene. 

Two more science-backed reasons to never take a calcium supplement

Many doctors still do not recommend taking dietary supplements, despite the data showing widespread deficiencies in several key vitamins and minerals among millions of Americans.

But, ironically, most doctors make an exception for calcium and iron supplements. As I've said many times before, these two are among the few supplements you *should not* be taking (unless you have been specifically diagnosed by a doctor with clinical iron deficiency anemia).

Over the years, I've shared several

studies with you showing the dangers of calcium supplements. And today, I have two more.

Calcium capsules may boost your risk of dementia

The first study shows that calcium supplements increase the risk of dementia in older women with cerebrovascular disease.¹

Researchers in Sweden analyzed 700 women, ages 70 to 92, who were all free of dementia at the start of the study. About 14 percent of the women

(98) took calcium supplements.

After five years, the researchers found that the women who took calcium had a whopping 46 percent increased risk of developing dementia, and particularly stroke-related dementia, compared to the non-calcium supplement group.

Why? Well, calcium supplements (but not dietary calcium) appear to increase hardening (calcification) of the arteries, which is well known to be the major cause of strokes.

It also makes sense that hardening of the arteries leads to poor blood circulation throughout the body and brain. And, of course, good blood circulation is an important factor for brain health and preventing dementia.

An “all-natural” heart hazard

The second study found that older adults who supplemented with calcium had an increased risk of hardening of the arteries—a key risk factor for cardiovascular disease.² Researchers studied 5,448 men and women, ages 45 to 84, for 10 years. All of the participants were free of heart disease at the beginning of the study.

The researchers found the people who got calcium from their diet actually had a *lower* risk of atherosclerosis and cardiovascular disease compared to the people who got their calcium in supplement form. But, as I mentioned earlier, the supplement takers had an increased risk.

Bottom line: Getting more calcium from the diet was beneficial for the heart and vascular system, but getting high calcium levels from supplements was detrimental. This is a striking example of the fundamental differences between dietary calcium and supplemental calcium.

To put it another way, calcium is a mineral, and minerals ultimately come from inorganic sources, such as

shells, rocks, and soil. So if you don't have the right organic sources from food, it can be like trying to get your essential minerals from eating rocks.

And, as we've seen from these new studies, calcium supplements actually can turn your blood vessels and internal organs *into* rocks!

Why calcium supplements don't really help fight osteoporosis

So, we've learned that taking calcium supplements is a risk to the health of both your heart and brain—two of the biggest concerns as you get older. And calcium supplements alone appear to do nothing to help prevent osteoporosis (the third biggest concern, especially among older women).

As I reported last year, research shows that osteoporosis is actually a deficiency of vitamins C and D. So taking calcium supplements without adequate supplies of other micronutrients is not the “magic bullet” for this problem.

And there's a bigger problem...

You simply can't fit all of the calcium you need each day into a pill... unless you want to swallow a horse pill. Not only that, but most calcium supplements don't have the bioavailability to actually get into your bones, where they belong. Instead, they head to other parts of

the body, like the arteries and brain.

The calcium supplement marketers like to brag about their marine sources from the earth's oceans. But there is so much hype about these various exotic (and largely meaningless) sources that it drowns out the science (if the marketers even have any).

The best way to get the calcium you need

You should get your calcium from a balanced diet that includes plenty of organic dairy, meat, and seafood.

It's very difficult to achieve optimal levels of calcium and other minerals, such as magnesium, selenium, and zinc (not to mention fat-soluble vitamins like A, D, and E) from a purely plant-based diet.

Which is why you should disregard the government's “all-wrong, all along” faulty advice to avoid dietary cholesterol and saturated fats by limiting your consumption of healthy dairy, meat, and seafood.

This misguided advice has been thoroughly debunked for all to see over the past couple of years (although the evidence was plain enough for some of us to see for the past three decades).

So focus on calcium-rich foods, and tell your doctor to skip the nonsensical calcium supplements. **IC**

Eating for a *real* energy boost

Many years ago, my friend Steve Abel, who served as best man at my wedding, asked me if he could take dietary supplements in the morning. He was concerned that if he took them at night, the “extra energy” would keep him awake.

I used to think ideas like that were quaint, given the basic biology

of vitamin and mineral nutrition. Typically, vitamins and minerals act gradually, building up natural support for healthy cells and tissues over time. That's why it usually takes two to three months before you'll experience the full benefits of taking dietary supplements.

But more recently, there's growing

evidence that some foods and nutrients do have short-term, “immediate” effects—especially when it comes to increasing mental and physical energy.

For instance, I often write about the many benefits of coffee. And one of those benefits is an immediate boost in mental energy and cognitive function.

I also continue to be impressed by the immediate energy infusion I experience from the right combination of water-soluble, natural, whole-food extracts such as blueberry, baobab, and rose hips. (The same combination you will find in my CoreForce BioBlend formula. You can learn more about it or order a supply by calling 800-292-5808 and asking for order code GOV2T200.)

But what about the so-called “energy drinks” or “energy bars”? These overhyped, artificial, processed items are both dangerous and counterproductive for natural energy. Instead, follow my whole-food recommendations for both short-term and long-term healthy, natural energy.

How vitamins and minerals give you more energy than sugar and carbs

Like I told my best man Steve, the vitamins and minerals in whole foods don't provide energy, per se. Energy comes from burning down complex macronutrients in foods.

But “vitamins” is just another word for co-factors, which help enzymes in our cells carry out all aspects of cellular metabolism. These vitamin co-factors allow metabolic reactions to occur many thousands of times faster than if they were obeying the old laws of chemistry, physical mass action, and thermodynamics.

That's why for pure energy, you need to pick foods that are rich in vitamins and other nutrients—which help your body make the most of macronutrient food energy.

On the other hand, the short bursts of energy provided by sugar and refined carbs are counterproductive and unhealthy. Low-carb foods with healthy fats and proteins taste better, are more satisfying, and provide more sustainable energy.

Complex, natural, unprocessed foods

like fruits, vegetables, fish, and meat also take longer to digest and metabolize—which helps your body produce sustained energy.

Specific foods and supplements you can take to increase energy

B vitamins are important for both mental and physical energy. If you are deficient in these vitamins, which is increasingly common in the U.S. (especially for vegetarians and vegans), you will likely feel tired.

That's why I recommend taking a high-quality vitamin B complex every day. But don't overdo it. If you take more B vitamins than you need all at once, you won't feel extra-energized. But your urine will be supersaturated with the excess vitamins. Another approach is to ask your doctor about getting B vitamin injections once or twice per week, for sustained energy.

You can also get caloric energy, as well as vitamins and minerals, from nature's “perfect foods”—**organic dairy, eggs, fish, meat, and poultry**.

One of the great tragedies of modern nutrition is that faulty dietary advice has steered people away from these healthy foods. I still see clueless dieticians and nutritionists asking how many eggs “you can get away with” eating.

But in nature, eggs provide all of the nutrients needed for a growing embryo (when fertilized—but people eat non-fertilized eggs today, leaving all those nutrients for them).

I used to have breakfast periodically with former U.S. Surgeon General C. Everett Koop when I worked with him during the 1980s and '90s. He ordered two to three eggs every day and a glass of milk. He said this breakfast was the only way he could get the energy he needed—and in his 70s, he had more energy than most people in their 30s.

Foods and beverages that will give you a good night's rest... and a good day's energy

Many natural foods also help you maintain sleep cycles, which is key for staying energized. **Halibut, salmon, tuna, bananas, and chickpeas** are rich in vitamin B6... which helps the body naturally make melatonin, known as the “sleep hormone.”

Tart cherry juice or extracts also raise melatonin levels.

Yogurt and other dairy foods are natural sources of calcium—which helps you sleep.

Beans, dark green leafy vegetables, fish, nuts, and seeds are all high in magnesium. This mineral is key for brain function, including the neural sleep center.

It's also important to avoid foods and beverages that can harm healthful sleep. As I mentioned earlier, coffee is a great source of healthy energy in the morning and during the day. But avoid coffee and caffeine at least four hours before bedtime.

Too much alcohol can also keep you awake, as your body works to metabolize it. Drink only moderately (two to three drinks per evening), preferably with food, and avoid alcohol within three hours of bedtime. It is worth staying up a little longer after you've had your last drink to savor the moment. You'll feel better in the morning.

You should also avoid eating big meals late in the evening.

My mother was fond of the old French expression *Qui dort, dine*, or “one who sleeps, eats.” The bottom line is that food is fuel for the body—which translates to cellular effects, mental abilities, physical performance, good health, and plenty of energy...both short-term and long-term. **IC**

Constipation is more than uncomfortable—it can lead to deadly diseases

My simple, laxative-free plan to stay “regular”

For the last two centuries, there has been a concept in natural medicine called “enterotoxigenicity.” It goes back even further in Ayurvedic medicine, in which it’s called “ama.”

The idea is that undigested and poorly digested foods that accumulate in the gastrointestinal tract create toxins that are released into the bloodstream. And these toxins can contribute to a variety of serious health conditions.

Constipation—a very common modern medical condition—is related to poor digestion and incomplete elimination of food and waste products. That’s why natural medicine considers constipation to be a risk factor for many chronic diseases.

Modern mainstream medical science routinely laughs at this idea. But a new study should make them chuckle a little less.

Studies link constipation to kidney disease and breast cancer

Researchers reviewed the medical records of millions of U.S. military veterans and found that constipation substantially increased the risk of chronic kidney disease...and even kidney failure.

I’ll give you the details on that study in a moment—along with an earlier study I co-authored that showed a link between constipation and breast cancer.

But first, let’s look at how our digestive systems help keep us healthy—and how academic-government mainstream medicine refuses to see the link between proper digestion and deadly disease.

And then I’ll share with you my simple, natural ways to improve your digestion...and keep your bowels moving.

The perils of interrupting the delicate balance of the digestive system

Digestion involves three steps. First, your stomach and upper small intestines create fluids that dissolve or break down the food you eat. Then, your lower small intestines extract energy and nutrients from the food.

Finally, the large intestine (colon) removes any remaining water in the food and returns it to the blood. (There is also “enterohepatic circulation,” which is designed to return certain metabolites to the body’s general circulation through the liver.)

It stands to reason that improperly digested food can accumulate in your GI tract—where it can be acted upon by the microbial flora (microbiome) to produce toxic metabolites that are absorbed back into your body. That is the theory behind enterotoxigenicity and ama.

The link between constipation and breast cancer

While I was a research investigator at the National Cancer Institute, a distinguished epidemiologist at the University of California, San Francisco developed a hypothesis supported by clinical observations—that women with constipation have higher rates of breast cancer.

His studies indicated that toxins that accumulate in the GI tract of constipated people are absorbed back into the blood. These toxins are then

concentrated in fluids in different tissues, ranging from cerumen (ear wax) to breast fluid. And he hypothesized that these toxic fluids could cause breast cancer.

But his observations were on small groups of women, so he asked me to study the question using the huge database from the U.S. National Health and Nutrition Examination Survey (NHANES).

We found a strong correlation between the frequency of bowel movements and the risk of breast cancer. In fact, constipated women with the least frequent bowel movements had *double* the risk of breast cancer than those who weren’t constipated.

And that made constipation as big a risk factor as almost any other known cause of breast cancer.

Our article was published in 1989 in the *American Journal of Public Health*.¹ It should have led to more serious investigations about how women can prevent breast cancer by improving digestion and nutrition for “regularity.”

Instead, we were visited by the NCI senior division director and advised that in the future, we should research “serious” topics...such as finding “biomarkers” for breast cancer (which 30 years later have yet to be found).

How constipation can lead to kidney failure

Fast forward to 2016, when researchers found that constipation also increases the risk of kidney disease.² They reviewed the medical records of 3.5 million U.S. military

veterans. Those with constipation were ranked by severity, according to how often they used laxatives.

Over seven years, there were 360,541 cases of chronic kidney disease and 7,677 cases of kidney failure in the study participants—whether they were constipated or not. This is in keeping with other findings that suggest that chronic kidney disease affects more than 10% of the population.

But here's the interesting part...

The researchers found that the people with constipation had a 13% higher risk of kidney disease...and a 9% increased risk of kidney failure. Kidney function also deteriorated more rapidly in people with more severe constipation.

The researchers suggested that changes in the microbiome associated with constipation could be responsible. Likewise, toxins produced in the GI tract that are absorbed back into the blood can harm the kidneys (which filter the blood).

It must also be considered that the laxatives the constipated people took have side effects that may be damaging to tissues—including the kidneys.

My all-natural, laxative-free constipation cure

So now we have two studies linking enterotoxicity to chronic, deadly diseases. It's high time that the NCI and others take the concept of enterotoxicity seriously.

But while we sit around and wait for that to happen—or, more likely, not happen—there are simple, natural steps you can take to help prevent constipation.

1. **Stay hydrated.** Drink plenty of water (refer back to July 2015 issue for tips on drinking water safety). And consider including aspal (also known as rooibos or red bush) to help your body stay hydrated at the cellular level. This

also aids in digestion...and helps stop constipation. You can find aspal in powdered extracts that can be mixed into water or any other beverage.


2. **Try peppermint, ginger, verbena, rose hip, or linden teas.** I have personal experience with the digestive benefits of these teas. They've been used to help keep my family "regular" for at least five generations.
3. **Eat plenty of fruits and vegetables.** Their natural fiber keeps everything flowing smoothly through your digestive system. Ripe bananas, papaya, and prunes are particularly good if you're constipated.
4. **Stay active.** Constipation commonly strikes older people because they become too sedentary. Try to get at least half an hour of moderate exercise—like swimming, walking, gardening, or doing housework—every day.
5. **Get your thyroid checked.** Low thyroid function can affect bowel function.
6. **Ditch the opioid painkillers.** These drugs drastically slow down the movements of your GI tract. My Arthritis Relief & Reversal Protocol gives an in-depth explanation of the scientifically demonstrated ways you can relieve pain—without the deadly side effects of opioid pain pills. (To learn more about this protocol or to enroll, [click here](#) or call 866-747-9421 and ask for order code EOVS3T201.)
7. **Toss out the laxatives.** Ironically, taking laxatives regularly can actually lead to constipation—because your body builds up tolerance to them.
8. **Be careful with antacids.** The ones that contain aluminum are thought to contribute to constipation (and potentially other

diseases like cancer and dementia). Instead, fight heartburn naturally with aspal powder (dissolved in mineral water for an added digestive boost).

Peppermint or ginger tea or capsules have also been shown in studies to help reduce heartburn. And good old bicarbonate of soda tablets or powder (available at most drug stores) are another tried-and-true option.

9. **Avoid antidepressants.** These drugs interfere with nerve transmissions that should normally stimulate the bowels to move. Last month, I revealed my 8-step plan to beat depression naturally. If you missed it, log onto www.drMicozzi.com and search for "depression."
10. **Stay away from anticholinergic drugs.** Constipation is one of the side effects of popular allergy drugs like Benadryl, along with the anti-nausea drug Dramamine and the sleep aid Somnex.
11. **Don't take iron or calcium supplements.** As you know, I advise against taking these supplements in all cases. On page 4, I discuss two of the newest reasons why you shouldn't take calcium. And here's another: Both calcium and iron supplements can cause constipation.

Ultimately, don't let the relentless advertising about "regularity" influence you. Many people have regular bowel movements once or twice a day. Others may have them two or three times per week.

As long as you're consistent, and don't have discomfort or experience significant changes, don't worry too much about how often you go. But if you do experience constipation frequently, take it seriously...and take steps to "eliminate" it. 

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