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Nine simple, effective ways to safeguard your heart

We've all heard the so-called "standard" risk factors for heart disease: lack of exercise, excess weight, high blood pressure, and "high" cholesterol.

But how accurate are these factors?

Well, if you've been a reader of mine for a while now, then you know cholesterol, for one, really shouldn't be on that list at all—and the other items can be a little complicated.

Plus, there are a number of important heart disease risk factors you *don't* typically hear about from your doctor, such as high homocysteine, low B-vitamin status, and chronic inflammation.

Not to mention, high blood sugar and metabolic syndrome are key risk factors for cardiometabolic heart disease. (You can learn more about this on page 4).

Then, add some well-researched but little-known indicators for cardiovascular disease in general, and it can be hard to keep track of what you *really* need to pay attention to when it comes to heart health.

That's why I'm revealing my nine simple, effective steps to significantly lower your risk of heart disease. And I'll be busting some common myths and misunderstandings along the way.

So, let's get right to the heart of the matter—starting with the "big three" risk factors for cardiovascular disease. And then I'll reveal new research on lesser-known—but important—factors that are key to keeping your heart strong and healthy for years to come.

When it comes to blood pressure, don't be afraid of a little elevation

Truly high blood pressure is always a serious risk for heart disease. But, as you get older, studies show that a moderately "high" systolic (the top number) blood pressure reading of 130 to 150 mmHg can be healthy—and may even be helpful—for optimum blood circulation to the heart and brain.

The *real* danger is that your doctor may not be familiar with (or may ignore) those studies' conclusions, and prescribe dangerous drugs to artificially lower your blood pressure instead.

I've warned before about blood pressure drugs called angiotensin-converting enzyme (ACE) inhibitors, like lisinopril, benazepril, and other medications ending in "pril."

These are terrible drugs that often cause a nasty chronic cough and increase the risks of lung diseases and lung cancer. There's also clinical findings from Europe that ACE inhibitors may worsen respiratory infections like COVID-19 because of their interference with basic lung functions.

Plus, a recent study of 4.9 million men and women in the U.S., Germany, Japan, and South Korea found that the people who took diuretics (old standby drugs used to lower blood pressure) had 15 percent *fewer* heart attacks and strokes compared to those taking ACE inhibitors.[1]

Bottom line: If your doctor wants to prescribe drugs to lower your blood pressure, first find out if it *really* is too high. Then discuss natural approaches like diet, exercise, and dietary supplements to lower your blood pressure—*without* drugs.

(Modern studies show that a systolic reading of 170 mmHg is too high even in older people—and may increase stroke risk. But at the

In this issue:

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same time, 120 mmHg may well be too low in older adults to deliver those much-needed nutrients to the brain and around the body. So, the key is to strike a balance between dangerously high and dangerously low blood pressure. As always, it's a question of moderation.)

Exercise, but don't overdo it

Regular, moderate exercise is important for a healthy heart—physically, emotionally, and spiritually. But the key word, again, is "moderation."

As I've frequently reported, excess exercise (what I call "excess-ercise") can be dangerous for the heart and other organs, especially as you get older. Studies show that a total of 120 to 140 minutes per week of light-to-moderate exercises like walking, swimming, gardening, or housework offers the most benefits for most people.

In fact, a recent review of 22 studies that included more than 320,000 adults found that just 15 to 20 minutes per day of moderate walking is beneficial for the heart. And one of those studies found that people who exercised moderately for just 15 minutes a day lived three years longer than their sedentary peers.[2]

(Interestingly, the study also found that heart-health benefits actually plateau if you walk *more* than 45 minutes a day.)

Bottom line: Exercise is key for heart health, but don't overdo it. Exercising for too long or too intensely may actually damage your heart. So, aim for 15 to 20 minutes of light-to-moderate physical activity daily.

Watch your weight, but don't yo-yo diet

Of course, obesity is unhealthy, but some excess weight as you get older isn't a death sentence. What many people (and doctors) don't realize is that it may be better to just leave well enough alone when it comes to a few extra pounds.

That's because gaining or losing 10 pounds (or more) in a year can actually be dangerous for both your heart and your overall health.

I first studied this type of yo-yo dieting back in the 1980s as a medical consultant to a group called "Diet Watchers," then based in North Carolina. I discovered that the metabolic disruption caused by up-and-down weight loss is quite damaging to your health.

My findings are backed up by a new study of 485 women: A whopping 73 percent reported they had at least one cycle of losing and gaining weight at some point in their lives.[3]

Those women also had poorer cardiovascular health—in part because this type of weight change can cause slight but permanent increases in baseline blood pressure and blood sugar.

Bottom line: If you're obese, you probably need to lose weight to reduce strain on your heart. But if you're only somewhat overweight, it may actually be healthier for your heart (and the rest of your body) to live with the extra pounds. Especially if you eat a healthy, balanced diet (like the Mediterranean-style diet) and engage in regular moderate exercise..

Three key tests to ask your doctor about

Some doctors only measure your weight, blood pressure, and cholesterol during a heart-health checkup.

But research is increasingly showing

that the following tests are just as critical (and much more important than a cholesterol test).

Homocysteine. This amino acid occurs naturally in your body. But if you have too much homocysteine in your blood, it's a key indicator of early heart disease risk. Researchers aren't entirely sure why, but there's evidence that too much homocysteine can damage the lining of the arteries and also lead to blood clots.

Although no absolutely "safe" level of serum homocysteine has been determined, research suggests that levels should be less than 12 mcmol/L—especially if you have other cardiovascular disease risk factors. Ideally, studies show that homocysteine levels should be kept under 8.5 mcmol/L for "healthy" adults *without* cardiovascular disease risk factors.

But here's the kicker: You probably have no idea if your homocysteine levels are too high, because you generally won't have any symptoms. That's why a simple homocysteine blood test is important—especially as you get older, because homocysteine levels naturally increase with age.

B vitamins. B6, B9 (folate), and B12 naturally decrease homocysteine in your blood. (So does betaine, an amino acid found in beets or in some dietary supplements.)

I don't know of any blood tests for betaine, but there are plenty of tests that can measure vitamin levels in your blood. So, start asking your doctor to test your vitamin B levels—especially if you have any of the following signs of B deficiency: dizziness, weakness, fatigue, pale skin, sore tongue or mouth, or tingling in your extremities.

According to my research, a level of 200 picograms per milliliter (pg/mL) or lower of any B vitamin is deficient. Ideally, you want your levels to be above 500 pg/mL.

C-reactive protein (CRP). This substance, which is naturally produced in your liver, is a general marker for chronic inflammation in the body. Specifically, highly sensitive CRP (Hs-CRP) tests evaluate the health of your coronary arteries, and are a much better measure of heart health than cholesterol tests.

Ideally, your CRP level should be less than 1 mg/L. If it's higher than that, fish oil has been shown to lower the inflammation that can boost your CRP levels. I typically recommend 5 to 6 grams of fish oil a day, unless you eat more than two servings of fish a week.

Plus, as I wrote in the April issue of *Insiders' Cures,* one scientific paper that reviewed nearly 100 studies on sleep and inflammation found that getting less than six hours of sleep a day raises your CRP levels. Of course, following a balanced eating plan like the Mediterranean diet can naturally lower your inflammation and CRP levels, too.

Three little-known risk factors for heart disease

Over the years, I've discovered some interesting indicators for heart disease that many people, including doctors, don't know about. The first one is perhaps the most unusual…

A sign from Frank. When I worked at the National Institutes of Health (NIH) during the mid-1980s, I conducted some collaborations with Dr. Nicholas Petrakis. He was studying simple markers like Frank's sign in men with heart disease.

Frank's sign is a diagonal crease in the earlobes, extending downward. Research shows that this crease is linked to higher risk of cardiovascular disease and metabolic syndrome.

Nick was a strong advocate for epidemiologists understanding the basic biology of the diseases they were studying. (That was before the statisticians took over.) But there was no real interest at NIH in easy, "low-tech" approaches like Frank's sign to help establish heart disease screening and prevention metrics.

However, lately, we're seeing some attention being given to simple assessments like Frank's sign. (Though I'll always think of it as Nick's sign!)

So, if you have Frank's sign, it may be a good heart disease risk indicator that you—and your doctor—should pay closer attention to.

Joint problems. Research shows that people with arthritis have a higher risk of heart disease. This finding fits with the now-recognized role of low-grade, chronic inflammation in heart disease and other common chronic diseases.

Rheumatoid arthritis (RA) is an autoimmune inflammatory disease that has long been associated with inflammation diseases of the cardiovascular system. But newer research is showing that the joint inflammation due to degenerative osteoarthritis is also associated with chronic inflammation in the body, including the heart.

This kind of degenerative arthritis is increasingly common—often due to excess-ercise and running on artificial, hard surfaces—leading to an epidemic of joint disease.

That's why I recommend what I call my ABCs of joint health (ashwaganda, boswellia, and curcumin). And now, new research on arthritis, inflammation, and heart disease indicates that these natural anti-inflammatories may support not

only your joints, but also your heart.

I recommend 400 to 500 mg of ashwaganda, 400 to 500 mg of boswellia, and at least 200 mg of curcumin a day. (See the sidebar on this page for my complete supplement guide for heart health.)

Meal timing. To help maintain an optimal weight, it's generally recommended that you eat most of your calories during daylight hours. And research is increasingly showing that *when* you eat also influences your risk of heart disease.

A recent scientific statement from the American Heart Association (AHA) linked skipping breakfast with heart disease risk factors such as obesity, high blood pressure, and high blood sugar.[4] The statement cited a 16-year study that found that men who didn't eat breakfast had a 27 percent higher risk of heart disease than those who regularly had a morning meal.

Meanwhile, preliminary research presented at the 2019 AHA Scientific Sessions found that women who consumed more calories after 6 p.m. had poorer heart health compared with those who ate nothing during the evening hours.[5] For each 1 percent increment in calories consumed after 6 p.m., the women had increases in blood pressure, blood sugar, and body weight.

Of course, eating and drinking later in the day is also one of the factors that can contribute to poor sleep quality, which, as I mentioned earlier, is a key risk factor for heart disease. (This reminds me of what my French grandparents used to say: *qui dort dîne,* or "who sleeps dines." Meaning that you don't need to be consuming calories when it's time to sleep).

So, there you have it…nine simple, effective ways to help keep your heart strong and healthy for years to come. (For more about the risk factors I've mentioned above—and all of the natural ways you can help prevent heart disease—check out my *Heart Attack Prevention and Repair Protocol*. To learn more about this innovative online learning tool, **click here** or call 1-866-747-9421 and ask for order code EOV3W900.)

My top recommended heart-health supplements

Ashwaganda	400-500 mg/daily
Vitamin B6	30 mg/daily
Vitamin B9 (folate)	800 mcg/daily
Vitamin B12	1,000 mcg/daily
Vitamin D3	10,000 IU/daily
Vitamin K2	150 mcg/daily
Betaine	500 mg/daily
Boswellia	400-500 mg/daily
Coenzyme Q10	500 mg
Curcumin	200 mg/daily
Fish oil	5-6 g/daily
L-carnitine	500 mg/daily
Magnesium citrate	150 mg/daily

The best-kept secret to slashing your mortality risk

Boost your mental, emotional, and physical health in four simple steps

I recently came across a disturbing study from the *British Medical Journal* about something I began warning about a few years ago. The new study showed that, for the last decade, life expectancy in the U.S. has stagnated compared to other modern, industrialized countries.[1]

In fact, among white, middle-aged, middle-class Americans, mortality rates have actually *increased* in recent years.

Many of these deaths are, sadly, attributable to our nation's opioid *epidemic*. To make matters worse, the government's response to the corona *pandemic* deprived tens of millions of people with chronic pain from access to safe non-drug approaches—as I outline on page 7.

Still, heart disease remains our country's No. 1 killer. But it's also important to look at the impact of mental and emotional health on long-term survival.

Indeed, a handful of new studies show just how crucial this is for older adults. The studies looked at several different aspects of mental and emotional health on longevity, and all honed in on the importance of social engagement as we get older.

So, let's take a closer look at this compelling new research—starting with the health issue that's top of mind for many of us. And then I'll share my simple steps to help decrease loneliness…and increase longevity.

The surprising neurological impacts of coronavirus

A new study from the U.K. reveals the severity of COVID-19 complications on mental and neurological health in older people—including altered mental states, dementia-like syndrome, psychosis, and even strokes.[2]

During the initial growth phase of the pandemic in the U.K., from April 2-26, researchers analyzed just over 150 patients, with a median age of 71, who were hospitalized with COVID-19 symptoms.

Researchers found that a whopping 31 percent of those patients had altered mental status—defined as sudden changes in behavior, cognition, consciousness, or personality.

And because we know so little about the long-term effects of COVID-19, it's anyone's bet whether these symptoms will linger after patients recover from the virus. But let's face it…who wants to find out from his or her own personal experience?

That's why simple precautions like hand-washing and social distancing, as I always recommend, are important to ward off the continued spread of coronavirus. But, ironically, *social distancing* may have unintended longevity consequences for older people…

Loneliness in the time of coronavirus

A new study out of Israel links loneliness due to corona-isolation in older adults with higher risk of anxiety, depression, and other trauma symptoms.[3]

But the news isn't all bad. Interestingly, the researchers found that the mental health damage due to loneliness was most pronounced among study participants who reported feeling older than their chronological age. Those who *felt* younger actually exhibited no psychiatric symptoms related to loneliness.

Meanwhile, other studies have found that loneliness can make people feel older. So try to do things that make you feel young at heart—even if you're isolated. I personally practice mindfulness mediation—which helps me feel younger than ever!

(To learn more about the benefits of mindfulness meditation, check out my book, *New World Mindfulness*—found under the "books" tab of my website: www.DrMicozzi.com.)

While this study applied specifically to coronavirus-related social distancing, other research shows that the effects of loneliness can have more of a long-term impact on our health…

The four factors that can shorten your lifespan

Researchers analyzed data from nearly 13,615 men and women, average age of 69, who participated in the U.S. Health and Retirement Study.[4] Specifically, the researchers looked at behavioral, economic, psychological, and social factors associated with a higher risk of death and a shorter lifespan.

Out of the top 10 factors the researchers found were most associated with an early death, four can be linked to loneliness or social isolation: a history of divorce, lower life satisfaction, never having been married, and a negative mood.

Now, just imagine if you could erase all four of those factors from your life? Because according to this study, you might be able to substantially boost your longevity. Even just improving your mood lowers your risk of premature death.

Which leads me to two more new studies that reveal a simple way to do just that…

What centenarians can teach us

A study of men and women in Washington state who lived to at least age 75 found that *where* you live is a key factor in *how long* you live.[5]

Researchers analyzed data from 145,000 men and women who died between 2011 and 2015. They discovered that those who lived in highly walkable communities that were made up of people of *all ages* were more likely to live past the age of 100.

While there is a physical dimension to these findings—as people regularly engaged in moderate exercise—it also suggests that these people were not living in social isolation. Instead, they were out walking and communing with their neighbors.

These findings are backed up by a new study from New Zealand, which showed that being socially active actually *decreases* chronic, fatal diseases.[6]

Researchers examined data from over 290 centenarians without chronic diseases such as dementia, diabetes, depression, or high blood pressure. They also looked at health data from another 103,377 people, over age 60.

All of the study participants lived in their own homes in regular communities (as opposed to long-term care facilities or nursing homes). They also had a high degree of social engagement and participation in group activities.

Results of the study showed that the participants' rates of diabetes and depression actually *declined* with *increasing* age. Dementia rates declined after age 80, and high blood pressure rates dropped by nearly one-third from age 60 to 100.

And while all participants had similar levels of physical activity—which is also attributed to better health and longevity—what really seemed to make a difference was their level of social engagement.

My simple solutions to combat loneliness

The common theme here is the importance of social engagement for better health *and* a longer life. In fact, more than one study found that social factors were far more important than the physical factors the mainstream so often stresses.

The bottom line is this: Social isolation works against health and longevity. Whether we're enduring a global pandemic or simply living under ordinary circumstances, there's a greater emotional burden of isolation among older people.

That's why it's important you protect your mental and emotional health during self-isolation. So, here are four simple, effective steps to help you cope with feelings of boredom, emptiness, or isolation…and ultimately, boost your longevity.

Talk it out. Regular conversations with family members, volunteers, and even strangers can head off the onset of deeper loneliness and a sense of isolation. Even if you can't converse in person, phone or online video chats can help you feel more connected.

Share your wisdom. Older people have accumulated a lot of knowledge and wisdom over the years. Sharing your experiences can help you feel more valuable (and, in turn, is quite valuable for younger people).

Get creative. Cooking, reading, listening to or playing music, painting, dancing—any sort of creative activity helps engage your brain and turns off negative thinking. You might also find online groups to join for your newfound hobby.

Take a hike. Recreational activities can be restorative and refreshing. Plenty of studies show that getting out into Nature, water, and green spaces (even while socially distancing) is highly beneficial for your mental, emotional—and physical—health. /C

Simple, natural strategies for keeping those seasonal allergies at bay

As the warm weather winds down, ragweed or "hay fever" season ramps up—with all of its itchy, stuffy, and sneezy symptoms.

It's estimated that as many as 60 million Americans are affected by allergic rhinitis, otherwise known as hay fever.[1] But that doesn't mean you have to suffer silently—or resort to dangerous drugs like antihistamines.

As I've often reported, antihistamines can actually induce dementia-like symptoms. They can also make you drowsy, dizzy, and disrupt your sleep (which can spark a whole host of serious health problems).

Fortunately, there are plenty of simple, effective, and completely natural strategies to avoid or alleviate late-summer, early-fall seasonal allergies.

I'll start with the most effective one…

Stay inside when pollen counts are highest

As much as I advise getting outdoors in Nature (where sunlight kills microbes), one of the best ways to keep allergies in check is to stay indoors as much as possible when pollen disseminates the most—typically from 10 a.m. to 4 p.m.

When you're inside, you can help keep the air pollen-free by closing your windows and doors and relying on high-efficiency air conditioning. Just make sure to clean or change your air conditioner filter regularly, and consider adding a dehumidifier to keep allergy-inducing mold spores out of your household environment.

Of course, as I noted above, this advice temporarily conflicts with one of my top health recommendations: to spend at least 15 to 20 minutes in the sunshine each day to trigger natural vitamin D production in your skin. (Not to mention, spending all of your days like a hermit inside your home has its own health consequences, as I discuss on pages 5 and 6.)

So when you do go outside during peak pollen times, I recommend the following allergy-busting solutions:

- Rub a small amount of petroleum jelly under your nose to trap pollen before it enters.
- Wear sunglasses to keep wind from blowing pollen directly into your eyes.
- Wet a bandana and place it over your nose and mouth, tying it behind your ears to prevent breathing in pollen. You can also wear a cloth mask, a hospital-grade filter mask, or a dust mask from

your local hardware store. (You'll also be following coronavirus-related mask regulations!)

- Cover up as much of your body as possible to keep pollen from collecting on your skin. Then, change your clothing when you come inside.
- Don't hang your laundry outside to dry.
- Change your sheets and pillowcases frequently.
- Wash your hands and face regularly throughout the day—especially after you return inside. You'll not only protect yourself from pollen, but a whole host of viruses and disease microbes, too (potentially including coronavirus).
- Fill your sink or a small basin with lukewarm water and add some sea salt. Submerge your face, up to your ears, in the sink. Blink several times and then blow air out through your nostrils. This will flush pollen from your sinus cavity.

Your allergies are what you eat

There's also a lot you can do from a dietary standpoint to keep your allergies in check.

As with most health conditions, following a balanced diet—with plenty of fresh fruits and vegetables—is key. In fact, some types of fresh produce even have natural antihistamine properties, including:

- Asparagus
- Broccoli
- Cherries
- Garlic
- Kiwi
- Onions
- Pineapples

I also recommend the following foods and beverages to help relieve or even prevent seasonal allergies…

Local honey. Not only is this natural sweetener better for your health than sugar, but studies show eating locally produced honey (within 50 miles of your home) helps lessen your reaction to local pollens. Plus, you'll support local farmers and beekeepers.

Herbal teas and lozenges. Ginger or licorice teas counter respiratory-tract inflammation, soothing the congestion and itchiness that is so common for allergy sufferers. Make sure to steep the teas for at least eight minutes.

If you can't take a hot infusion with you, carry herbal cough drops or lozenges containing natural extracts of eucalyptus, licorice, menthol, and other soothing herbs.

Spices. Some common spices, such as capsaicin (found in hot red peppers), turmeric, coriander, cumin, horseradish, and Japanese wasabi, are all great for clearing sinuses—in addition to all of their other health benefits.

Chinese hot and sour soup (black pepper with vinegar) and Chinese hot mustard have the same effects.

Finally, a key way to fight allergies is to keep your immune system healthy and balanced year-round. Make sure to take a high-quality B vitamin complex (with at least 55 mg of B6), 10,000 IU of vitamin D3, and up to 5 to 6 grams of fish oil every day. IC

My top six dietary supplements for pain

The U.S. government is handing billions more taxpayer dollars to the National Institutes of Health (NIH) for more research on drug alternatives to opioid medications for pain. Some researchers have gone so far as to callously call this cash infusion their "silver lining" of the tragic opioid drug crisis.

Meanwhile, the corona pandemic shutdowns made it impossible for tens of millions of people suffering from chronic pain to get safe, effective, *drug-free* solutions for pain relief—like acupuncture, bodywork, massage, hydrotherapy, or even swimming. And frankly, I'm concerned about what the real statistics are showing on the ultimate consequences of not only opioid abuse—but also missed cancers and heart disease (as I've been reporting in my *Daily Dispatches*), in addition to anxiety, depression, and loneliness (as I report on page 4)—due to months of medical shutdowns.

But, in my view, the opioid crisis is not just a cynical supposed "silver lining" for the "we always need more research" researchers. It's more like gold lining the pockets of the same-old mainstream researchers and their government cronies, as they continue pushing the same-old pharmaceutical "solutions" for pain—while repeatedly ignoring the many natural approaches for pain that have already been researched for decades.

In the June issue of *Insiders' Cures,* I wrote about a new study showing that a dietary supplement as simple as vitamin D can reverse low-back pain—the most common cause of pain and disability in working Americans.

And there are thousands of studies on other dietary supplements and botanical remedies for arthritis pain, back pain, degenerative joint disease, and other types of pain.

I've personally researched all of the compelling evidence for dozens of natural remedies, of which six specific dietary supplements have superior beneficial actions for reducing pain and supporting healthy joints. They're also helpful for balancing the immune system and reducing chronic inflammation—both of which help relieve chronic pain.

So let's take a look, starting with my own ABCs for joint support (which studies show have strong synergy when taken together).

1.) Ashwaganda is an ancient Ayurvedic remedy, known botanically as winter cherry. Studies show it effectively reduces pain, stiffness, and promotes joint health.

One study of 60 men and women with knee pain found that those who took ashwaganda for 12 weeks had significant reductions in pain, stiffness, and disability. And the group that took the highest dosage—500 mg a day—saw results after only four weeks.[1]

Recommended amount: 400-500 mg per day

2.) Boswellia is another ancient Ayurvedic remedy, extracted from gum trees that grow in South Asia. Its scientific name honors the British botanist James Boswell, but it's better known as the fragrant resin frankincense. Studies associate boswellia with significant pain reduction and restoration of joint function. It also supports healthy cartilage and reduces chronic inflammation.

A new study of 48 people with osteoarthritis of the knee found that taking boswellia for 120 days significantly reduced knee pain and stiffness. Boswellia also significantly lowered levels of C-reactive protein (CRP), an inflammatory marker associated with knee osteoarthritis (and heart disease).[2]

Recommended amount: 400-500 mg per day

3.) Curcumin, the active ingredient in turmeric, has strong anti-inflammatory properties. Numerous studies show it can reduce pain and joint stiffness.

A review of eight studies found that curcumin/turmeric extracts reduced arthritis pain just as well as pain medications.[3] And, of course, curcumin doesn't have the side effects of pharmaceutical pain relievers—only additional health benefits for your cognition and vision.

Recommended amount: 400-500 mg a day

In addition to my ABCs for joint support, the following natural substances have been found in hundreds of studies to be effective pain relievers as well…

4.) Capsaicin from hot chili peppers shows strong pain relief for joints. There are topical creams containing capsaicin, which can be rubbed into sore joints. Dietary supplements (and hot peppers in cooking) can also be consumed orally.

According to the Arthritis Foundation, many studies show that capsaicin is effective for reducing pain from osteoarthritis, rheumatoid arthritis (RA), and fibromyalgia and chronic fatigue syndrome. And a German study found that after just three weeks of using a capsaicin topical cream, participants' joint pain decreased by nearly 50 percent.[4]

Recommended amount: Add chili peppers to your daily diet—the hotter the better. (Check out the heat index for various types of peppers in the April edition of *Insiders' Cures.*)

5.) Ginger is well known for its gastrointestinal benefits. But it's also a potent pain reliever—especially for joints.

In one study of nearly 250 people with moderate to severe osteoarthritis in their knees, a whopping 62 percent of the participants who took ginger for six weeks reported less knee pain not only when they were standing, but also after walking 50 feet.[5]

Recommended amount: Add ground ginger or fresh, chopped ginger into foods, or make a hot infusion with fresh ginger root. You can also find high-potency ginger supplements. I recommend 150-250 mg a day.

6.) Omega-3 fatty acids, including EPA and DHA from fish oil, are another excellent approach for reducing inflammation and pain.

One review of 18 studies, involving 1,143 people with RA, found that 3-6 grams a day of EPA/DHA reduced the study participants' RA pain.[6]

Recommended amount: Fatty fish like anchovies, mackerel, salmon, and sardines are excellent sources of omega-3s. But if you don't consume fish on a daily basis, I recommend taking 5-6 grams of fish oil supplements per day.

For more details on dietary supplements for easing and eliminating arthritis pain, see my *Arthritis Relief and Repair Protocol*. To learn more about this innovative online learning tool, **click here** or call 1-866-747-9421 and ask for order code EOV3W901. IC

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