

LATE-BREAKING NEWS

Tomatoes may lower stroke risk. *New finding:* Researchers measured antioxidant levels in the blood of more than 1,000 men (ages 46 to 65) and tracked their health for 12 years. Those with the highest levels of the powerful antioxidant *lycopene*, found mainly in tomatoes and foods containing tomatoes, were 59% less likely to suffer ischemic stroke than those with low levels. *Theory:* Lycopene reduces inflammation and blood clotting. *Other good sources of lycopene:* Watermelon, papaya, guava, apricots and pink grapefruit.

Jouni Karppi, PhD, researcher, University of Eastern Finland, Kuopio.

Cataract surgery and car accidents. When the hospital records of 27,827 men and women (ages 60 to 85) who underwent cataract surgery were linked with road-injury records, accidents involving men were found to have dropped 15.3% in the 12 months following surgery compared with the previous 12 months. The accident rate for women didn't significantly change. *Possible explanation:* Men tend to report better outcomes from cataract surgery than women, and women may restrict driving in response to health or vision changes.

Lynn Meuleners, PhD, director, Curtin Monash Accident Research Centre (C-MARC), School of Public Health, Curtin University, Perth, Australia.

Take a coffee break to ease neck and shoulder pain. Researchers asked 48 volunteers (average age 36) to perform a series of physically awkward computer tasks and measured the pain in their shoulders, necks and forearms. *Result:* Volunteers who drank just one cup of coffee about an hour before these tasks reported significantly lower levels of pain—even if they were chronic pain sufferers. *Theory:* Caffeine is an *adenosine receptor antagonist*, a molecule that inhibits pain signals in the nervous system. *If you suffer from aches and pains:* Try drinking a cup of caffeinated coffee or tea.

Vegard Strom, PhD, researcher, National Institute of Occupational Health, Oslo, Norway.

Bottom Line health

WELLNESS STRATEGIES FROM THE WORLD'S LEADING MEDICAL EXPERTS



When Doctors Get It Wrong

Here are the conditions most commonly misdiagnosed...

Joe Graedon, MS, and Teresa Graedon, PhD ■ *The People's Pharmacy*

As the recent outbreak of fungal meningitis has so clearly shown, certain medical conditions are notoriously difficult to diagnose. The first of these patients suffered vague symptoms—including headache, fever, nausea and stiffness of the neck—that were initially misdiagnosed. Fortunately, doctors have now identified the tainted medication that caused the outbreak.

But mysterious symptoms are not always unraveled so quickly.

Startling statistic: Every year in the US, an estimated 40,000 to 80,000 hospital deaths are caused by diagnostic errors, according to a report in *The Journal of the American Medical Association*. When researchers use autopsies to discover discrepancies between diagnosed and actual causes of deaths, the error rate can be as high as 40%.

Conditions often misdiagnosed...

■ **ALZHEIMER'S DISEASE.** It's impossible to diagnose this condition with 100% certainty because the only definitive "test" is an autopsy of the patient's brain after

death. Even though there are fairly accurate ways to determine that a patient *might* have Alzheimer's (see below), mistakes are common.

Examples: Depression is one of the most common causes of Alzheimer's-like symptoms, but doctors often fail to recognize it. Other problems, including nutritional deficiencies and medication side effects—for example, from anticholinergic drugs, such as antihistamines, incontinence medications and tricyclic antidepressants—also can cause symptoms that mimic Alzheimer's.

Surprising fact: It's estimated that 10% to 25% of patients with symptoms of dementia (such as memory problems and/or peculiar behavior) may have a non-Alzheimer's

Bottom Line/Health interviewed Joe Graedon, MS, and Teresa Graedon, PhD, consumer advocates whose first book, *The People's Pharmacy*, was published in 1976. Since then, they have written *The People's Pharmacy* syndicated newspaper column, which discusses various issues related to drugs, herbs and vitamins. Their most recent book is *Top Screwups Doctors Make and How to Avoid Them* (Crown Archetype). www.PeoplesPharmacy.com



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into three daily doses. *Side effects:* Less than 1% of people who take CoQ10 will experience stomach upset or other side effects. Dividing the dose usually prevents this.

● **5-HTP (5-hydroxytryptophan).**

This is a naturally occurring substance that's produced from an amino acid (*tryptophan*) in foods. The body uses 5-HTP to produce *serotonin*, a neurotransmitter with paradoxical effects—that is, in some patients, elevated serotonin dilates the blood vessels, while in others it causes constriction. This is why 5-HTP prevents migraines in some patients, but not in everyone.

Scientific evidence: In one study, more than half of migraine patients taking 5-HTP reported less pain and frequency of headaches after two months.

Typical dose: 50 mg to 100 mg daily. Take the lower dose for several weeks, then gradually increase it if your migraines aren't improving. Don't take more than 400 mg daily. *Side effects:* In rare cases, sedation and/or strange dreams will occur. 5-HTP should *not* be taken with an antidepressant and may interact with other medications.

● **BUTTERBUR.** This powerful herbal medicine is considered a natural product in the US but requires a doctor's prescription in Germany. Butterbur has compounds that are thought to reduce arterial spasms. It also inhibits the body's production of *leukotrienes*, inflammatory substances that can trigger migraines.

Scientific evidence: A double-blind study of 202 migraine patients found that a twice-daily dose of 75 mg of butterbur decreased the frequency of migraines by an average of 48%.

Typical dose: 50 mg to 75 mg twice daily. *Side effects:* In rare instances, patients may experience burping or stomach upset when taking butterbur. **Important:** Use a butterbur extract labeled PA-free (free of the harmful chemicals *pyrrolizidine alkaloids*). Butterbur may cause allergic reactions in people who are sensitive to plants in the ragweed family. 🍏

Steven P. Weiniger, DC
Logan College of Chiropractic

The Ultimate Knee Workout

You can be free of pain without surgery.

Most people over age 50 can expect to live longer than their parents or grandparents, but many are doing so *without* their original knees.

What's happening: Knee-replacement procedures, known as *total knee arthroplasty*, have become one of the most commonly performed surgeries in the US.

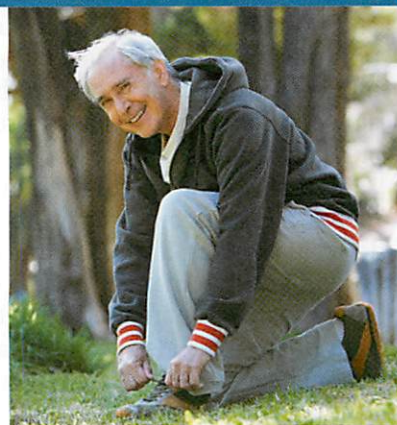
Each year, more than 600,000 Americans undergo knee replacement to help relieve the pain associated with knee osteoarthritis, rheumatoid arthritis or other forms of degenerative joint disease—and the numbers just keep rising. This trend is due largely to an aging population and obesity, a leading cause of joint damage.

But is surgery really the right solution for all these people? Not necessarily.

Here's the catch: Many people who receive knee replacements could have avoided surgery—along with the risk for infection and the painful weeks of postsurgical rehabilitation—with simple exercises that strengthen the knee and help prevent deterioration of the tendons, ligaments and bones.

A HEALTHY-KNEE PROGRAM

In addition to exercise, normal body weight is critical for long-term knee health. If you're overweight or obese, your knees are subjected to unnecessary force. Research has shown that losing as little as 11 pounds can cut the risk of developing knee arthritis by 50%.



But if you're overweight, losing any amount of weight can help. One study, published in the journal *Arthritis & Rheumatism*, found that every pound of lost weight translates into a four-pound reduction in knee stress—with each and every step.

Why exercise helps: Patients who stretch and strengthen the muscles around the knees have better joint support. There is also an increase in *synovial fluid*, a gel-like substance that keeps the joints moving smoothly.

What's more, exercise increases bone density in these patients and results in better range of motion.

4 MUST-DO EXERCISES

Everyone can benefit from knee exercises. Even if you don't suffer from knee pain now, the following exercises may help prevent problems from developing. People who have received surgery to replace or repair a knee also can benefit by strengthening their muscles to help guard against future knee injuries.

The goal of knee exercises is to work the muscles *around* the joint. These include the quadriceps (on the front of the thigh)...the hamstrings (back of the thigh)...and the muscles in the calves. Strength

Bottom Line/Health interviewed Steven P. Weiniger, DC, a postgraduate instructor at Logan College of Chiropractic, outside of St. Louis, Missouri, and a managing partner of BodyZone.com, a national online health information resource and referral directory to chiropractors, physical therapists and Certified Posture Exercise Professionals (CPEPs). He is the author of *Stand Taller, Live Longer: An Anti-Aging Strategy* (BodyZone). www.StandTallerLiveLonger.com



and flexibility in these areas support the knees and help keep them aligned. Alignment is critical because *asymmetry* increases pressure and joint damage.

Perform the following regimen daily—it can be completed in about 15 to 30 minutes. If you have an advanced knee problem due to a condition such as rheumatoid arthritis, your doctor may also prescribe additional exercises that are targeted to address your specific issues.

Important: All of the exercises described in this article should be performed within a range of motion that does *not* cause pain. If a slight strain occurs with the first repetition, that is acceptable, as long as the pain diminishes with subsequent repetitions. If the pain worsens with subsequent repetitions, stop the exercise.

Four must-do knee exercises...

■ **Knee-to-Chest Stretch.** This exercise improves flexibility in the lower back, hips and hamstrings. People who do this stretch will notice an opening of their hips, allowing them to stand taller. This improvement in posture is important for reducing knee stress.

Bonus: You can use this movement to *diagnose* knee problems. If the knee you're bending doesn't come straight toward your shoulder and stay in line with your foot, you'll know that you have an alignment problem that needs to be corrected.

This knee exercise can be performed in bed if that is more comfortable than doing it on a carpeted floor or on a padded surface.



What to do...

- Lie on your back with your knees bent and your feet flat on the floor (or bed).

- Using both hands, slowly pull one knee toward your chest. (To avoid straining the knee, grip behind it, not on the front.) Go as far as you can without discomfort—you should feel a stretch in your lower back, but *no* pain.

Hold the position for 15 to 30 seconds, then slowly lower the leg. Perform the movement eight to 12 times. Repeat with the other leg.

■ **Knee-to-Chest Stretch with Resistance.** This is similar to the exercise described above, except that you use a latex exercise band (such as Thera-Band) to increase resistance and strengthen muscles.



- Lie on your back with your legs straight. Loop the latex band around the bottom of one foot. Grip the loose ends of the band with both hands.

- Use the band to pull your knee toward your chest.

Hold the position for 15 to 30 seconds, then straighten the leg while pushing against the band—hold the band taut to increase resistance. Do this eight to 12 times, then repeat with the other leg.

■ **Standing One-Leg Balance.** This move is more challenging than it looks because you're using the weight of your body to strengthen your legs as well as the "core" muscles in the abdomen. These muscles, which connect the torso and pelvis, help control motions in your whole body. Core weakness is a common cause of asymmetric motion, which often leads to knee problems.



- Stand next to a wall, with your right shoulder just touching the wall.

- Lift your left knee until the foot is off the floor. If you can, keep raising it until the thigh is about parallel to the floor. Make sure that your posture is upright at all times.

Hold the position for about 15 seconds, then lower your foot. Repeat eight to 12 times, then turn around and do the same thing with the other leg.

Important: If you can't balance for 15 seconds—or if you find yourself using the wall for support

or moving your arms or dancing around to balance on one foot—your legs are weaker than they should be. This means you should definitely also do the next exercise.

Note: Even if you can easily perform the one-leg balance above, it's a good idea to do the one below to maintain your strength.

■ **Standing One-Leg Balance with Resistance.** This is similar to the exercise that's described above, except that you use a latex band to strengthen muscles in the thighs and hamstrings.



- Stand with your right shoulder barely touching a wall. Loop a latex band under your left foot. Hold the loose ends of the band in each hand.

- With your hands at waist level, raise your left foot until your thigh is about parallel to the floor. Shorten the band by wrapping it around your hands to keep some tension on the band.

- While holding the band taut and your knee elevated, slowly press your foot forward, as though you're taking a big step. Keep the band taut to increase resistance. Maintain your balance!

- Now, pull on the band to return to the bent-knee position. Repeat eight to 12 times, then turn around and repeat with the other leg. 🍏

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