

January 2016 Newsletter



Dr. Hassell with his wife Anna and son Tor, boosting their immunity with a beach walk while visiting family on Vashon Island, WA, over the holidays.

Resolution #1: take charge of your health! Ask your medical team to explore *all* your options, including lifestyle medicine

When it comes to your health, **you** are the one with whom the buck stops. Others can advise you but no one is in a better position to maintain your health than you are. If you are serious about wanting to do whatever it takes to be the healthiest you can be, make sure your physician knows it. Our medical culture tends to *treat* disease and tolerate recurrences rather than provide the tools to *prevent* disease or its recurrence. Also, the subject of lifestyle medicine is a longer conversation than a typical appointment allows, and it's generally simpler to prescribe medications or surgery instead. Yet the most powerful disease-preventing tools are almost always in the form of lifestyle choices.

Let's look at diverticulitis, for example

Diverticulitis is the result of infection or inflammation in pockets (*diverticula*) that form in the wall of the colon. I see it often in my practice, and it has the potential for serious complications. When managing the problem, I first rule out the conditions that can mimic diverticulitis: and then initial treatment of acute episodes typically involves antibiotics. It is sobering, however, to realize that studies do not show a clear-cut benefit with antibiotic use in routine uncomplicated diverticulitis.¹ Also, antibiotics carry their own risks, including a nasty infection called *clostridium difficile*. So it's important to recognize the limitations of routine antibiotics, and to consider non-antibiotic therapy such as *mesalamine* or supportive care with probiotics.

Steve defeats diverticulitis!

When patients have recurrent diverticulitis (more than one episode), they are often advised to have major surgery to remove a part of the colon (large intestine). Steve was having several painful diverticulitis episodes each year that were treated with multiple courses of antibiotics, and finally he was told that the next step was abdominal surgery. In the meantime, I prescribed some simple strategies targeting Steve's bowel function and immunity: increasing his liquids and whole foods – especially probiotic foods, fiber, and good fat (see below) – as well as exercise, while sharply reducing sugars and processed grains. As he lost weight and his colon became healthier, he stopped having episodes of diverticulitis and was able to avoid surgery. Seven years later he is still free of diverticulitis!

Lifestyle medicine can help (everyone!)

To think beyond conventional therapy takes more effort (especially when you're sick) but is critical for anyone looking for optimal health outcomes. Below are seven doses of lifestyle medicine that seem to dramatically reduce diverticulitis episodes and allow patients to avoid major surgery. **For that matter, they are lifestyle choices important for *all* of us:** these same steps are associated with less colon cancer, heart disease, stroke, dementia, and diabetes. This is a broad overview which is naturally modified for each individual situation. (The page numbers below refer to the 3rd edition of *Good Food, Great Medicine*.)

- 1. Probiotic foods:** Include daily to help maintain a broad range of healthy bugs in your gastrointestinal garden that keep the colon happy. (See page 32.) For example, ¼ - 1 cup of plain yogurt and/or kefir daily. (Sweeten it yourself!) Other probiotic options are traditionally fermented foods like kimchee and fresh salt-cured sauerkraut, available at many supermarkets in the refrigerated section. It makes much more sense to use probiotic foods that provide a wide range of organisms rather than expensive supplements with only a narrow spectrum of probiotic organisms.
- 2. Vegetables and/or whole fruit:** Include with every meal and snack (see pages 20–21).
- 3. Greens** (such as spinach, kale, collards, cabbage): Eat a large serving each day. (See pages 165–167.)

¹ Chabok, A. et al. British Journal of Surgery 2012;99:532-9

4. **Beans or lentils** (see page 22) and/or **intact cooked whole grains** (like *Easy Crock Pot Cereal* on page 128 and *Breadzilla* on page 252): Include daily. Although fiber supplements have not had a convincing effect on diverticulitis,² fiber-rich whole foods like beans and intact whole grains improve immune function and bowel health, and seem to be necessary to prevent recurrent episodes.

I maintain my usual recommendations for raw nuts and seeds for my diverticulitis patients: blaming these foods is an example of a persistent urban medical myth, something all too common in medicine.³

5. **Hydration:** Drink enough water or other unsweetened beverages to keep your urine very pale. Plenty of water and a whole food diet improve the mechanical and detoxifying function of the colon. (Avoid liquid calories: see pages 74–75.)
6. **Good fats:** Include oil-rich fish, raw nuts, extra-virgin olive oil, and avocado.

An interesting side note is that a Mediterranean-style diet with plenty of good fat (including dairy fat from whole milk cultured dairy like yogurt and cheese), fiber, and probiotics from whole foods produces butyrate, a short chain fatty acid that seems to reduce diverticulitis.

7. **Daily exercise:** Schedule 30 minutes of brisk walking each day. (See pages 50–53.) Exercise improves immune response and lowers markers of inflammation – good reasons to make it a part of your diverticulitis prevention program.



Try this bright and boisterous Black Bean Salad (page 205) as a diverticulitis prevention prescription.

Sign up for this free monthly food and lifestyle newsletter at Goodfoodgreatmedicine.com



Mea putting together Black Bean Salad (page 205) during a class last month for participants in the One-Year Health Intensive Program.

Good Food, Great Medicine classes

The two-part class series targets weight loss, insulin resistance, and type 2 diabetes, and details steps for preventing or reversing them. The classes are based on the 3rd edition of *Good Food, Great Medicine*, which each participant will receive at the first class.

Good Food, Great Medicine class (part 1):

- Review inter-relationship of excess waistline and weight, insulin resistance (common to most cases of type 2 diabetes), and common chronic diseases.
- Discuss the role of the “key three” – a whole food Mediterranean diet, daily activity, and enough sleep.
- Work through the 14 simple steps that target your risk factors and produce effective, lasting change in your waistline, blood sugar, and other health risks.

Good Food, Great Medicine class (part 2):

- Explore practical application of whole food choices and menu planning. Review progress, find solutions to challenges, and fine-tune personal action plans.

Time: 6 – 8 pm Wednesday
Dates: 2/3/16 (Part 1) and 2/10/16 (Part 2)
Location: Providence St. Vincent Medical Center
Cost: \$100 (2-class series)
Registration: Call 503.291.1777 to reserve a spot

Dr. Hassell’s speaking events

1/7/2016 – Alaska Tanker Company: *How to Nourish Our Immune Systems During the Winter.* Beaverton, OR.

1/21/2016 – Claremont Golf Club: *The Lifestyle Prescription for Graceful Aging.* Portland, OR.

2/3/2016 and 2/10/2016 – Good Food, Great Medicine 2-part Lifestyle Change Class Series: Portland, OR. For registration information call our office at 503.291.1777.

3/5/2016 – 2016 Breast Cancer Issues Conference: *Lifestyle Choices for Breast Cancer Survivors.* Portland, OR. <http://komenoregon.org/>

“Prove all things; hold fast that which is good.”

1 *Thessalonians 5:21 (KJV)*

² Peery, A.F. et al. *Clin Gastroenterol Hepatol* 2013;11:1622-7

³ Strate, LL. et al. *JAMA* 2008;300:907-14