

## March 2012 Newsletter



Here is Tor Hassell with Collette Wieland of KGW TV in an intense discussion about the long term health benefits of oatmeal over Honey Smacks and Twinkies. (This interview aired February 21<sup>st</sup> – see following link.) <http://www.kgw.com/lifestyle/health/Tips-on-helping-kids-get-a-healthy-start-139847123.html>

### Read any good drug inserts lately?

Understanding the risk/benefit ratio of your prescription medications can be just as important as the reasons you're taking them in the first place. I was reminded of this when I recently suggested to a patient that he stop or reduce his daily Prilosec (a heartburn drug). He looked puzzled and asked, "Why would I want to do that?" So, I filled him in on the downside of long term stomach acid suppression using medicines such as omeprazole (Prilosec) and Prevacid, which includes problems like nutrient malabsorption, osteoporosis, pain, pneumonia, and a particularly nasty type of diarrhea. He seemed genuinely shocked. Then I told him that a comparable list of adverse events could be associated with almost every medicine on the rest of his long medication list. This gave me the opportunity to discuss the benefits of food and lifestyle modifications which could help make Prilosec unnecessary for many people.

The fact is, **almost all medications have significant risks associated with them.** Make sure you have a really good reason to take each one, and if there are steps you can take to get off the medicine, then work with your doctor to do so. If you aren't too sure what those steps might be . . . ask!

### Are statins messing with your memory?

There are some new cautions about commonly-used medications that I – along with most other internal medicine doctors – prescribe often.

One was a pair of warnings from the FDA (*FDA Drug Safety Communication February 28 2012*) regarding "statins", a class of medications which includes simvastatin, Lipitor, Crestor, pravastatin, and others. These medications have some very valuable characteristics, including reducing the death rate and lowering the risk of repeat heart attacks in those with known heart disease. The FDA warnings for statins concerned two areas.

The *first* area of concern is that **statin medications can increase the risk of developing diabetes** by as much as 27%, and worsen blood sugar control in those with diabetes. The *second* warning refers to the possibility that some patients may experience **memory loss and confusion when taking statins.** These mental changes seem to go away when patients stop the medication.

However, unless someone – the patient or the doctor – makes a connection between the memory loss and the medication, the patient will probably continue the medication and everyone will just shake their heads sadly and assume Uncle Joe is just "getting old." What might be *really* happening is that Uncle Joe is just experiencing a side-effect from his statin drug.

These FDA warnings are not intended to make you afraid of statins if their potential benefit outweighs their small degree of risk. The warnings *are* a consideration if you are taking statins without strong evidence to support their use. For example, the benefit from statins is slim or nonexistent in many of those without a history of heart disease, even if they have high cholesterol. For those patients the risk may be greater than the benefit.<sup>1</sup>

Vigorous use of lifestyle change, rather than a generic low-fat diet, is associated with striking cholesterol results greater than or equal to that of moderate doses of statins. (For more detail see chapter 4 of *Good Food, Great Medicine.*)

<sup>1</sup> *Statins for the primary prevention of cardiovascular disease.* Cochrane Database of Systematic Reviews 2011

## Are sleeping pills raising your risk of premature death?

Now let's talk about the use of "sleeping pills", typically referred to as "hypnotics". These include common medications like Ambien (zolpidem), alprazolam, benzodiazepines such as lorazepam, clonazepam, Ativan, Valium, Klonopin and so on; as well as sedative antihistamines such as diphenhydramine (Benadryl, Tylenol PM, etc.)

For many decades, studies have associated this group of medications with increased risk of death, and maybe cancer. In fact, for studies in which a hazard ratio could be estimated, 21 of 22 studies suggested at least a trend towards increased risk of death – which brings us to the most recent study,<sup>2</sup> comparing 10,529 people who received hypnotics (sleeping pills) with 23,676 matched controls who did not, followed for an average of 2.5 years.

They found that **people who used sleeping pills had up to a 6.6 times increased risk of death, and even those who used less than 18 sleeping pills per year had a 3.6 times increased risk of death!** Those who used the most sleeping pills also had a higher risk of cancer. These death rate calculations tried to take into account all the risk factors that the investigators could assess, so we don't think it was an accidental or misleading finding.

And before you dismiss this as "just one study", don't forget the background of almost two dozen other studies showing similar trends. Ideally, these apparent hazards would lead to a suitably-powered randomized controlled trial, the gold standard of medical trials. Sadly, this is unlikely to be done.

So what is a person taking sleeping pills to do? First, realize there is solid cause for concern, but not absolute proof. Second, investigate and pursue every lifestyle choice and bedtime strategy you can find that may help you sleep drug-free.

## Do your type 2 diabetes drugs make a long-term difference to your health?

Patients with type 2 diabetes are at strikingly increased risk of heart disease, stroke, kidney and eye disease, and nerve damage. We often use a variety of medications to reduce blood sugars, and patients typically assume that the vigorous use of these medications will lower their risk of diabetes complications. However, that assumption may be wrong. Studies using these medications to intensively lower blood sugars have shown only a

modest effect on common complications such as heart attack, and have been associated with a worrisome trend towards increased death rates.<sup>3</sup>

Three interventions that pack a powerful punch and may reduce or eliminate the need for oral diabetes medicine are:

1. Good food choices, meaning vegetables + protein + healthy fat with every meal
2. If overweight, eat smaller portions and avoid potatoes, corn, and all grains (even whole)
3. Daily exercise

In my practice, patients who are able to do the hard work these three steps require are able to completely obliterate any evidence of type 2 diabetes. When used daily, these are associated with better blood sugar control and weight loss.

## Got Good Food, Great Medicine?

If you have a copy of our book, the first 60 pages present the evidence for the food and lifestyle choices we just talked about. See page 59 for some ideas that might help you get a drug-free sleep. If the subject of cholesterol is a concern, the chapter on heart disease might be helpful too.

## Do you receive our e-newsletter?

You probably do if you're reading this online, but if you're holding a hard copy of this newsletter and would like us to email it to you monthly, simply sign up for it on our website:

[www.goodfoodgreatmedicine.com](http://www.goodfoodgreatmedicine.com)

And as long as you're online anyway, why not visit our *Good Food, Great Medicine* page on Facebook?

## Speaking Events

**3/08/2012 – Making Your Way Through the Supplement Jungle: Vitamins, Minerals and Herbs:** Miles Hassell MD and Cindy Reuter ND, MSOM, L.Ac., RD Integrative Medicine Program, Providence Portland Medical Center, Portland, Oregon. *This talk is free.* Preregister at Providence Resource Line: 503.574.6595.

**3/13/2012 – Grand Rounds:** Miles Hassell MD: *Preventing and Reversing Type 2 Diabetes: What are our patient's choices?* Providence St. Vincent Medical Center, Portland, Oregon. *Physician audience only.*

**4/10/2012 – Grand Rounds:** Integrative Medicine: Providence St. Vincent Medical Center, Portland, Oregon. *Physician audience only.*

*"Prove all things; hold fast that which is good."*

1 Thessalonians. 5:21(KJV)

<sup>2</sup> Kripke, D. et al. BMJ Open 2012;2:e000850

<sup>3</sup> Boussageon, R. et al. BMJ 2011;343:d4169