April 2008 Newsletter

Vitamin D, New News
We discussed Vitamin D last summer, but thought the subject was worth raising again for two reasons:

1. Dr. Hahn was interviewed on the subject of Vitamin D and its importance to health on KGW last month. (However, since most of our patients appreciate that watching TV is a poor use of time and brain, they may well have missed the only worthwhile thing on that day.)
2. Whereas using nutritional supplements do not provide for better health in most situations, Vitamin D appears to be an exception, and two recent papers are notable in this regard.

In one paper, it was found that having a low blood level of vitamin D is associated with a doubled risk of developing heart disease in those people with high blood pressure.\textsuperscript{1} In the other, it was found that people who take Vitamin D have a significantly lower risk of dying compared to those taking a placebo. The study duration was 5.7 years.\textsuperscript{2} Previous studies have shown that most people in the Pacific Northwest are low in vitamin D, which is associated with:

- 30-50% more colon, prostate and breast cancer
- More multiple sclerosis, rheumatoid arthritis, and osteoarthritis
- More diabetes, both types 1 and 2
- More mental illness
- Weaker bones
- More muscle weakness and falls

Because of these risks, we like to see adequate blood levels of 25-OH Vitamin D in our patients. Typically we aim for a level of over 30ng/ml. The best source of vitamin D during the sunny months is sunlight. This means 10-20 minutes of sunlight, \textit{WITHOUT SUNSCREEN}, on exposed arms and legs between 10 am and 3 pm, two or three times per week. So don’t put on the sunscreen until you have had your dose of Vitamin D!

No amount of sunlight works in the Portland winter, however, so until you start frolicking in the sun in April or May, a supplement is recommended. Most of you need to take at least 1000 IU of Vitamin D3 daily, and many of our patients need to take 2000 IU or more daily.

Typically we use blood levels of Vitamin D to guide our dose recommendations.\textsuperscript{3} \textit{Using food as a source of vitamin D is adequate for some people.} Food sources include fortified dairy foods, sardines, and wild salmon; or 1 tablespoon of cod liver oil daily.

Don’t Take Calcium Supplements if You Don’t Need to
While we are talking about vitamin D, let’s also mention that many of our patients are taking too much calcium. If you are eating two or three servings of dairy foods a day, \textit{you may not need to take a calcium supplement}. In fact, taking calcium supplements when you don’t need to appears to be associated with problems including prostate cancer in men and increased risk of heart attacks in women.\textsuperscript{4}

Myth Buster Resources
Did you attend Miles’ myth bust talk in February? Miles discussed common misconceptions about which health choices matter and which ones do not. For example, are eggs and butter bad for you? Will dietary cholesterol raise your blood cholesterol? These questions and many more are answered in the book written by Miles and his sister Mea called \textit{Good Food, Great Medicine}. The following two sections are excerpted from the book.

For anyone unfamiliar with \textit{Good Food, Great Medicine}, the book is self published and simply presented, and offers an overview of the evidence supporting the case for a Mediterranean-style whole food diet, and suggests ways to translate that information into practical day-to-day living, cooking, and eating.

\textit{Note: for those of you who have asked about buying cookbooks in bulk, they are available in cases of 20, which reduces the price to $15 per book. (The regular price is $20.)}

Good Fat
We \textit{need} good fat. We need it not only for the health of body parts such as skin, hair, and brains, but also to

\textsuperscript{1} Wang, T. Circulation 2008;117:503-511
\textsuperscript{2} Autier, P. Arch Internal Med 2007;167:1730-37
\textsuperscript{3} Holick, M. NEJM 2007;357:266-281
\textsuperscript{4} Bolland, M. BMJ 2008;336:262-6
reduce the risks of diseases like diabetes, heart disease, and cancer. The best fats are probably those found in foods like extra virgin olive oil and foods like fish, raw nuts, seeds, and avocados. For vegetable oils, expeller pressed canola and soy oils are likely a distant second best.

Animal (saturated) fats should not be demonized, but omega-3 fatty acids (found in fish, nuts, and flaxseeds) and extra virgin olive oil (mostly monounsaturated, or omega-9, fats) should be more abundant in the diet than saturated fats. Saturated fat in moderation appears to be fine: modest amounts of eggs (like one or two a day), and aged cheese and small amounts of butter are reasonable. Small servings of meat appear to be perfectly healthy. One piece of advice is to keep servings of animal protein to no more than twenty five percent of your plate.

Cholesterol
It does not appear that eating whole, traditional foods containing cholesterol and saturated fat causes heart disease. Some populations known to eat the largest amounts of saturated fat and cholesterol have among the lowest levels of heart disease, while other population groups with similar dietary fat intake have very high levels of heart disease. This is why we recommend a broad based diet with a high intake of vegetables, fruit, beans, whole grains, and good fat, and worry less about your saturated fat and cholesterol intake.

Can a thoughtful argument be made against eating eggs, for example? Nope. Eggs contain cholesterol but little saturated fat, and they also contain dozens of other valuable nutrients, including protein, and do not appear to be associated with increased risk of disease. This is an important area, and reading *The Cholesterol Myths* by Uffe Ravnskov, MD Ph.D. can be instructive. A very useful analysis is also found in British Medical Journal.

Adding dietary cholesterol to a diet very low in cholesterol, without changing other dietary factors, will typically raise your total cholesterol by a fairly small degree. Adding further dietary cholesterol to a diet with moderate cholesterol will typically have very little effect on total cholesterol level. It has not been shown, despite decades of research, that dietary cholesterol increases risk of heart disease.

For practical purposes, of course, when you eat a diet emphasizing fruits, vegetables, beans, and grains, your consumption of saturated fat and cholesterol will tend to fall naturally. But we would hate to see people avoiding good food simply because of the saturated fat. Finally, avoiding dietary fats and cholesterol will have the adverse effect of lowering HDL (good) cholesterol.

Insurance Reminder
Are you insured by Blue Cross Blue Shield (BCBS)? We are happy to continue billing BCBS for your visits but we ask that you pay at the time of visit, and then keep the check that BCBS sends directly to you. By paying at your time of visit, your bill will be discounted by 15%. Would you like to pay your bill by Visa or MasterCard? Please call our billing department if you have questions.

Spring Cleaning
Think about making a fresh start this spring with your eating habits. No improvement is too small. You may even be surprised to find your tastes changing along with your diet. Eat less fast food. Eat more slow food. Watch TV less. Shut down your computer sooner. Get more sleep. Get more exercise and go outside and play. (It is leap year, after all.)

Upcoming Speaking Events


4/29/2008 – Integrative Medicine Grand Rounds: Miles Hassell, MD and Cindy Reuter, ND, MSOM, L.Ac., RD: *Poison or Panacea: The Healing and Harm of Nutritional Supplements* Providence St. Vincent Medical Center. (This a physician audience)

9/18/2008 – Providence Cancer Center Integrative Medicine Program: Miles Hassell, MD and Cindy Reuter, ND, MSOM, L.Ac., RD: *Making Your Way Through the Supplement Jungle: Vitamins, Minerals and Herbs* Providence St. Vincent Medical Center. (This talk is open to the public and free. To register, call the Providence Resource Line @ (503)574-6595)

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5 British Medical Journal 2001;322:757-63