April 2010 Newsletter

Dr. Hassell’s son Tor hasn’t learned yet about the significance of waistlines, but he is very proud of his spring crops of chives and peppermint.

Mid-line crisis?

Need girth control?

Sometimes you don’t realize your waist has been sneaking out until one day you look down and find your feet have completely disappeared. This Missing Feet Syndrome is especially common among those of us north of the 50th parallel, and it is usually accompanied by the Eat-Less-Weigh-More Paradox. It is very clearly an age-related hate crime, and a strong candidate for a class action suit if we could only figure out who to blame.

Actually, it’s probably not a good idea to dwell too long on that line of thinking. People might start asking awkward questions about our eating habits. No, the smartest move is to first locate the owner of our missing feet and insist they start immediately doing whatever it takes to reverse that inexorable creep of central adiposity.

It is definitely a battle worth fighting, because it looks like missing feet are the least of our worries: carrying too much weight around the middle triples our risk of dying of heart disease (this is an increase in risk similar to that of a smoker) and doubles our risk of dementia. In fact, the weight we carry around our middle is more hazardous for heart disease, diabetes, and some cancers than weight anywhere else on our body. Losing weight around your middle will not only help you feel better, but it will also:

- reduce risk of dementia, stroke, joint disease, and some cancers,
- reduce risk of heart disease,
- reverse or reduce insulin resistance, a major cause of diabetes,
- …and just ten pounds of weight loss can lower risk of developing high blood pressure by 65% and drop blood pressure as much as a prescription drug!

On April 20th Dr. Hassell will be leading a discussion about food and exercise habits for losing weight and keeping it off for a lifetime. He will talk more about the significance of carrying too much weight around your middle, and why a whole food Mediterranean diet, healthy fats included, is an evidence-based approach for sustainable weight loss. If you would like to attend, please call our office to pre-register at (503) 291-1777.

May 18th cancer survivorship class

Join Dr. Hassell on Tuesday, May 18th, for the next class in the 2010 Good Food, Great Medicine class series. He will be discussing lifestyle approaches to the prevention and management of cancer, as well as an overview of some ideas for minimizing side effects from some cancer treatments. There will also be a chance to discuss some common supplements. The class will be at Providence St. Vincent Medical Center in Souther Auditorium from 6 – 8 pm. To register, please call our office at (503) 291-1777.
Got a first edition cookbook?

An alert reader has discovered a first edition of *Good Food, Great Medicine* (‘used, but very good’ condition) on Amazon for $170.94. Quite frankly, we feel that is probably too much. The current, expanded second edition of *Good Food, Great Medicine*, however, is available for a mere $30 at Annie Bloom’s Books at 7834 SW Capitol Hwy. in Multnomah Village, Broadway Books at 1714 NE Broadway, the Providence Integrative Medicine Programs at Providence St. Vincent Medical Center and Providence Portland Medical Center, as well as at our web site, www.goodfoodgreatmedicine.com.

To salt or not to salt?

A visitor to our web site recently asked why we don’t make a point of limiting salt in the recipes in our cookbook *Good Food, Great Medicine*. Here are some thoughts on the subject.

Our approach to the salt issue is briefly mentioned on pages 19-20 of *Good Food, Great Medicine* (2nd edition), but it is immensely helpful to read the first 62 pages of the book in order to understand the bigger picture. There are some patients who do need to restrict their sodium intake, but if we are eating according to the advice laid out on pages 10-15, we are following a diet that is based on the best current medical research we know. Also, the total sodium in each recipe must be measured in the context of how many servings there are for that recipe. We think there is a real risk in emphasizing sodium intake over other evidence-based elements of a healthy lifestyle.

Broadly speaking, two linked points are particularly important:

1. A diet composed primarily of minimally processed whole foods is going to be higher in potassium, and lower in sodium than a diet with a substantial component of processed foods. It is estimated that 75% of sodium in the US diet comes from foods prepared outside of the home kitchen. So, simply eating whole foods prepared at home and adding salt yourself will usually reduce total salt intake substantially.
2. A diet with a high potassium intake appears to protect against the potentially harmful effects of dietary sodium, so the whole issue may become moot. A review of the high, medium, and low sodium subgroups in the DASH studies will demonstrate this to some degree, and a more direct review can be seen in Archives of Internal Medicine. (2009; vol. 169: pages 32-40: N. Cook, et al). Briefly, very low salt diets have shown evidence for both benefit and harm.

*The Journal of the American Medical Association* recently published another important commentary on the caution that should surround the salt reduction debate. (*JAMA* 2010; vol. 303: pages 448-449, M. Alderman).

The case for a very low salt diet for most people is far from strong. Our goal is to provide dietary recommendations and recipes based on approaches that have been demonstrated to save lives, and reduce the incidence of heart disease, diabetes, dementia and cancer. We are also in the fortunate position of seeing the effects of this moderate-sodium-high-potassium dietary approach in our patients on a daily basis.

Telephone consults

Have a problem but don’t think you need to come into the office? For some situations a telephone consultation may be a reasonable alternative to an office visit, and save you a lot of time. Telephone consultations may be scheduled just like office visits, and if they are under five minutes there is no charge. Insurance generally does not cover this type of a service.

Upcoming Speaking Events

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

1 Thess. 5:21 (KJV)