Questioning your doctor may be your best health care decision

By simply taking the time to think about the right questions to ask, you can encourage your physician to dig deeper and work harder for you. One of my colleagues called me after taking care of a mutual patient who asks a LOT of good questions. The physician said, “That patient of yours is driving me crazy with her questions—but she’s making me a better doctor.” That’s the kind of patient you want to be and the kind of doctor you want to have. We need to avoid holding on to assumptions and be willing to work hard to explore options, including lifestyle changes, to improve long term head-to-toe wellness.

So what are the right questions?

Our health care decisions shape our future quality of life—but they’re only as good as the information we receive. Good information comes from asking the right questions, and the right questions reflect an understanding of what really matters:

- How do I avoid getting something bad like a stroke or cancer in the short or long term?
- If something bad happens, which treatments will give me the best outcome?
- Am I willing to do whatever it takes to achieve the best outcome?

These probably seem obvious, but it is surprisingly easy to forget to apply critical thinking and ask the right questions when the time comes to face the need for medical care. Here are a few common examples:

Critical thinking for critical times

- **Cancer:** Let’s say a patient has a serious cancer. A treatment is recommended that will “shrink the tumor.” That sounds good, but what you really want to know is whether the treatment offers a cure or will significantly improve quality or length of life. We need to reach beyond conventional treatments to add lifestyle choices that can help improve outcomes.

- **High blood pressure or cholesterol:** When we’re prescribed medications to control hypertension or high cholesterol, we should ask: “Does this medication to normalize my blood pressure/cholesterol also normalize my risk of stroke, heart attack or becoming disabled?” As a general rule, those medicines improve lab numbers, but come nowhere near normalizing your risks. The next question should be, “Is there a treatment option that can lower my risk closer to normal and eliminate my need for meds?”

- **Type 2 diabetes:** A common assumption made about type 2 diabetes medications to control blood sugar is that they will also normalize our risk of heart attack, stroke, blindness, kidney failure, nerve damage, cancer, dementia, and so on. The truth is, the medications won’t. The question to ask is: “What are my non-drug options to lower my blood sugar, reverse my diabetes, and preserve my health?”

Need help? The 14-step Risk Reduction Action Plan starting on page 69 in Good Food, Great Medicine, 3rd edition offers evidence-based food and lifestyle choices that do normalize risks and reverse diabetes.

“I want to lose 30 pounds in 3 months.”

At the request of a patient I recently called a weight loss clinic to evaluate (very expensive) hormone injections to “melt fat away.” I asked the doctor promoting these treatments if there was any risk associated with it. He assured me that it was both safe and effective. Yet these particular hormone injections have 50 years of studies showing they are not effective for weight loss and are associated with significant risks. Ouch! No diet, no program, no treatment, regardless of the credentials, sincerity, marketing, or cost is worth risking long-term health.

If you would like help creating a personalized plan for your situation call our office at 503.291.1777 to schedule a consultation.
Mea’s Oven Pancake
German? Swedish? Finnish?

Here is a version of a traditional breakfast dish claimed and loved by at least three European countries. This non-traditional cold-oven method from Cooks Illustrated seems to cook the oven pancake just as quickly while creating a more succulent center. Although the recipe would typically call for twice as much flour, our goal is always to minimize refined grains and celebrate high-quality protein (like eggs) and good fat (like butter) without losing the deliciousness factor. (For more on the issue of whole grains and refined grains, see pages 23-25 and 46 in Good Food, Great Medicine, 3rd edition.)

Serves 4 as a side-dish (or just 2 hungry mothers). You can double the recipe and use a 9x13 Pyrex dish.

½ stick butter, melted (¼ cup)
4 eggs
¾ cups whole milk
1–2 tablespoons sugar
¼–½ teaspoon ground nutmeg
¼–½ teaspoon salt
¾ cups whole wheat flour

Place melted butter in a 8x8-inch Pyrex dish (2-quart) and tip to coat bottom and halfway up sides of dish. Remember, you don’t need to preheat the oven.

1. Beat eggs in a medium bowl, then add the rest of the ingredients (except the butter, of course) and beat until smooth with a whisk.
2. Pour mixture into buttered pan and place in the middle of a cold oven. Turn oven to 425 degrees and set timer for 20 – 22 minutes.
3. Make sure there is an audience when you remove the pancake from the oven – it will be puffy and beautiful at first but will collapse quickly. Best served hot-out-of-the-oven, so serve immediately.

Note:
► Serve with pure maple syrup, homemade berry compote, thinly sliced oranges, or whatever else sounds good. You can even scatter ½ cup blueberries across the top before cooking.
► For a savory option, some top the cooked pancake with sautéed or roasted vegetables and grated cheese, and then stick it back in the oven until the cheese melts.
► With the traditional method both pan and oven are very hot before egg mixture is added. As a result the sides puff up sooner and more dramatically but the center tends to be thin. We like this more custardy version.

Want some real news? Keep up with Dr. Hassell’s Real Medicine posts! Follow us on Facebook! Track us on Twitter! Browse our blog!

What is Dr. Hassell’s one-year health transformation program?

This is a twelve-month patient-doctor partnership designed to deliver a realistic and sustainable action plan for reversing disease, reducing medications, and improving health and long-term quality of life. For stubborn health challenges like type 2 diabetes, excess weight, and heart disease, as well as cancer and cancer survivorship, this personalized intensive health restoration plan may be the answer.

Depending on risk factors and goals, success will look different for each person; here are a few examples of what is possible:

► Within two months of following Dr. Hassell’s lifestyle prescription, Michelle lost 12 pounds, dropped her HbA1c from 12.9% (normal is 4–6%) to 6.4%, and stopped her diabetes medication. (See our April 2015 newsletter.)

► Stephan reversed his type 2 diabetes and lost 60 pounds in 11 months: five years later he is still lean, active, and on no diabetes medications. (Read more about his story on page 65 of Good Food, Great Medicine.)

► Motivated by a heart attack in 2013, Mike lost 65 pounds in one year, lowered his blood pressure to a safe range, and improved his cholesterol ratio dramatically. (See our November 2014 newsletter.)

► Tom began the one-year program at just under 300 pounds (a BMI of 39.1 – normal is 25–30). In six months he was down 40 pounds, and in one year a total of 56 pounds.

Dr. Hassell’s speaking events

6/12/2017 National University of Natural Medicine - Grand Rounds: Friend or Foe? The Role of: Red meat, Dairy, Alcohol, Soy, Gluten, and Caffeine for Good Health. Miles Hassell, MD and Dianna Henson, ND. Portland, OR.

7/19/2017 & 7/26/2017 – Good Food, Great Medicine 2-part Type 2 Diabetes & Weight Loss Lifestyle Change Class Series: Portland, OR. For registration information call our office at 503.291.1777.

*COMING SOON* Providence Heart Institute BASECAMP Cardiac Prevention + Wellness 4-part Series: Good Food, Great Medicine: Portland, OR. Call the Providence Resource Line at 503.574.6595 to join the waiting list.

Sign up for this free monthly medical + lifestyle newsletter at Goodfoodgreatmedicine.com

“Prove all things; hold fast that which is good.” 1 Thessalonians 5:21 (KJV)