Life After A Stroke: A Success Story
Miles Hassell MD

SC is a 56 year old health professional who had a stroke 3 years ago. With the help of the Providence Stroke Center, her initial recovery was excellent, leaving her with only minimal persistent brain damage.

However, her risk factors for a repeat stroke, including elevated blood sugars, abnormal cholesterol and triglycerides, and being overweight, were unchanged. She continued to be at a very high risk of another stroke, perhaps much more disabling than the last one.

So she took charge. First, she identified several parts of her diet that had hidden calories, such as presweetened yogurt, highly refined breakfast cereals, and dried fruit. She started buying plain yogurt and sweetening it herself, using less total sweeteners in the process.

She also started cooking her own whole grain cereal or having eggs and other protein foods for breakfast. She dramatically reduced her use of breads and pasta, and increased her intake of vegetables and protein (including fish and other animal protein) foods. She ate out less.

Another critically important change she made was to exercise every day, such as climbing the stairs at her work, building up to climbing up and down a total of 20 floors of stairs daily.

In other words, she didn't go on a diet or program: she changed her habits.

So far, after 8 weeks, she has lost 15 pounds. She is on fewer medications, and her cholesterol panel looks better overall, with a drop in total cholesterol of 40 points, lower triglycerides, and markedly better total cholesterol to HDL ratio. Congratulations, SC!

Juices Lead To Obesity and Diabetes: Save For Special Occasions!
Miles Hassell MD

As both world wide medical studies and generations of grandmothers have told us, whole fruits and vegetables are associated with a broad range of health benefits. In contrast, juices are strongly associated with increased risks of obesity and diabetes. This means all juice, even those you extract yourself in your own kitchen.

“How can that be?” I hear you cry. “I like juice. My children love juice. Our juice is 100 percent natural, pure, organic, and with no added sugar. And the Surgeon General says it's good for me. So what's the deal?”

It is no surprise that we like juice. Juice is sweet and humans like sweet things. The core of the problem is that when whole fruit is juiced, the healthy fiber that is normally in the fruit, along with much of the vitamins, minerals, phenolics, and other nutrients, is removed. The juice that remains is a nutrient-poor liquid that is high in simple sugar and calories, and devoid of fiber, which is exactly the type of food you should be trying to avoid.

A healthy alternative to conventional juice can be made in a Vitamix-type blender, with the whole fruit and/or vegetable blended into a drink (a slurry, really) which includes the fiber as well as a huge range of important nutrients associated with the fiber. The optimal alternative, for different reasons, is to eat the fruits and vegetables while they are intact. Getting the full complement of fiber is a simple way to reduce your risk of developing obesity and diabetes.

So for the sake of your health and your children's health, keep juices just for special occasions, squeezed at home if possible. Remember that a glass of juice does not count as a serving of fruit or vegetables. And try to include a minimum of five servings of fruits and vegetables (with a goal of nine) each day.


Mediterranean and High Fat Diets Are Healthier Than Low Fat Diets
Miles Hassell MD

It is becoming increasingly clear that the Mediterranean diet is associated with reduced risk of diabetes, heart disease, cancer, and obesity.

A recent trial compared the Mediterranean, low carb/higher-fat-and-protein (Atkins type) diets with low fat diets. What the trial showed is that the Mediterranean and low carb/higher-fat-and-protein diets were superior for weight loss, cholesterol management, and blood sugar levels. This trial seems to confirm that a conventional low-fat diet strategy is fatally flawed.

Our dietary recommendation for most people is based on the traditional Mediterranean diet, which has the best short term and long term outcome data. This means eating food mostly from plant sources, like whole grains, beans, raw
nuts, fruits, and vegetables, with olive oil as the main fat; animal protein in the form of fish, poultry, eggs, and small amounts of red meat; and dairy food like yogurt and aged cheeses. When you look at that list, it represents a perfectly normal diet with minimal restrictions.

Shai, I. Et al "Weight Loss with a Low-Carbohydrate, Mediterranean, or Low-Fat Diet" NEJM 2008;359:229-41

Website
Our website went live last month. Take a look at www.goodfoodgreatmedicine.com and let us know what you would like to see added to the site. Our monthly newsletter is published on the site, so if you are looking for back issues, they will be there.

Research Update
Miles Hassell MD
As we mentioned last month, I am working on a new research project which we are hoping to get off the ground by fall. As part of our research with Providence Cancer Center, and with assistance from the Oregon State University Food Innovation Clinic, we have created a low-cost, non-pharmaceutical whole food product.

The product is a pudding made with yogurt, honey, butter and glutamine powder that can prevent the miserable mouth ulcers experienced by many patients who receive chemotherapy and radiation therapy. These sores are not only painful and interfere with eating, but can also lead to infections and may require suspension of treatment. Our observation in patients treated so far is that the new food product prevents the most serious forms of these ulcers.

The next step is to conduct a formal pilot study to prove whether this approach merits further investigation and adoption by the international cancer community.

I am principal investigator in a clinical trial with 10 patients, and we hope to launch the trial as soon as possible. Should we continue to see favorable results, we can run a larger study. This would be a formula that could benefit cancer patients around the world for a very low cost. The initial study will cost $100,000 and we are working with colleagues in the Providence Foundations to find partners to provide seed funding.

If any of you are interested in supporting this study in any way, please contact Mary Malinski, R.N., my clinical nurse partner in Integrative Medicine. She can be reached at (503)216-4687.

Upcoming Speaking Events


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. Souther Auditorium, Providence St. Vincent Medical Center. This talk is open to the public and free. For more information go to: www.providence.org/integrativemedicine and choose the “classes” link. You may also register by calling the Providence Resource Line @ (503)574-6595.
