



Healthy Life Newsletter November 2014

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Junk food consumption may increase the risk for psychiatric distress and violent behaviors in children and adolescents

Improvement of eating habits toward healthier diets may be an effective approach for improving mental health. Researchers looked at 13,486 children and adolescents to see if eating junk food was related to psychiatric distress and / or violent behaviors. Specifically, junk food included sweets, sweetened beverages and salty snacks. Here's what they found:

- In addition, daily consumption of sweetened beverages and snacks increased the likelihood of self-reported psychiatric distress.
- Violent behavior, which including physical fighting, was 39% more likely in those who had daily consumption of salty snacks.
- This same daily consumption increased the risk of a child being a victim by 19%.
- The odds of a child bullying another child was a concerning 55% higher.

[Read more](#) from Dr. James Bogash

Nutrition Published Online: May 08, 2014 [Read the abstract](#)

The following research reports are taken from The Wellness Report By Donald M. Petersen, Jr. at <http://blog.toyourhealth.com/wrblog/>

No Surgery for Chronic Low-Back Pain

A study published by *The Spine Journal* compared surgery to multidisciplinary care for sufferers of chronic low-back pain. The study compared the outcomes for patients who had spinal fusion with "nonoperative treatment (multidisciplinary cognitive-behavioral and exercise rehabilitation)."

The authors found that "after an average of 11 years follow-up, there was no difference in patient self-rated outcomes between fusion and multidisciplinary cognitive-behavioral and exercise rehabilitation for cLBP (chronic low-back pain). The results suggest that, given the increased risks of surgery and the lack of deterioration in nonoperative outcomes over time, the use of lumbar fusion in cLBP patients should not be favored in health care systems where multidisciplinary cognitive-behavioral and exercise rehabilitation programs are available."

Talk to your doctor of chiropractic if you or someone you know is experiencing chronic low-back pain.

[Read the abstract](#)

Prenatal Meditation for Baby's Health

A study from Hong Kong examined the potential benefits for babies born to mothers who meditated while they were pregnant. The researchers looked to see if they could determine "positive relationships between prenatal meditation and infant health." Based on several outcome measurements, the authors note that the "study concludes the positive effects of prenatal meditation on infant behaviors and recommends that pregnancy care providers should provide prenatal meditation to pregnant women."

[Read the abstract](#)

Magnesium Keeps Senior Women Fit

Vitamin supplementation can be a very important way of maintaining health, especially for older adults. One study examined whether magnesium supplements could help improve physical function for older women. The study found that "daily magnesium oxide supplementation for 12 weeks seems to improve physical performance in healthy elderly women. These findings suggest a role for magnesium supplementation in preventing or delaying the age-related decline in physical performance."

[Read the abstract](#)

Tylenol Ineffective for Low-Back Pain

People use acetaminophen (also known as paracetamol) for all kinds of pain. While some are convinced that it works for them, a recent study demonstrated that this is not the case for low-back pain. In a double-blind, randomized controlled trial, researchers compared a placebo to paracetamol to see if it made a difference in low-back pain. They concluded that "our findings suggest that regular or as-needed dosing with paracetamol (acetaminophen) does not affect recovery time compared with placebo in low-back pain, and question the universal endorsement of paracetamol (acetaminophen) in this patient group."

Paracetamol/Acetaminophen is sold by the brand names: Tylenol, Panadol, Mapap, Ofirmev, Mejoralito, Feverall, Apap, Acephen, Xi-dol, Nortemp, Aypanal, Aphen, Bf-paradac, Ringl, Tempra. Given the potential for side effects, using drugs that are ineffective seems like an obvious unhealthy choice.

[Read the abstract](#)

Vitamin D for Schizophrenia?

There is little doubt that nutrition impacts our mental health. A good example of this is a new study that found "odds ratios indicated that vitamin D-deficient persons were 2.16 times more likely to have schizophrenia than those with vitamin D sufficiency." Researchers concluded that they "found a strong association between vitamin D deficiency and schizophrenia."

[Read the abstract](#)

Suspect Polypharmacy

As people get older, they begin to lose their ability to remember, think and walk. For many this is a natural part of aging. But a growing trend of polymedicating is often the cause.

A case study of an older woman found the following:

“A 68 year-old female patient resorted to the Emergency Room for suspected stroke. According to the husband, in the six months prior to admission, she became progressively disorientated and dependent. She had resorted to various appointments from different specialties and was polymedicated (received prescription from multiple doctors). It was impossible to clarify the exact dosage. On neurological examination she presented disturbance in attention and memory, disorientation, constructional apraxia (inability to perform tasks or movements), myoclonus (involuntary jerking of muscles) and gait imbalance. After the suspension of all chronic medication, she showed gradual improvement. By the time of discharge, her neurological examination was completely normal.”

Fortunately for this woman, the ER doctor recognized that her symptoms were drug-related rather than age related. The frightening question comes to mind, “what if he/she hadn’t?”

The authors of the study noted that “in the elderly there is a high risk of inappropriate medication and adverse effects of polypharmacy. Iatrogenic effect (consequences) of drugs as a cause of reversible dementia should be considered.”

[Read the abstract](#)

Slim Down to Reduce Hot Flashes

A pilot study of overweight and obese menopausal women found that they were able to reduce their hot flashes. The study divided 40 women into weight loss and control groups. The results were that “women randomized to weight loss also showed greater reductions in questionnaire-reported hot flashes than did women in the control group.” The authors concluded that “reductions in weight and hot flashes were significantly correlated.”

One more reason to lose weight and get fit, especially as you get older.

[Read the abstract](#)

Can One Become a Sugar Addict? by Michael Greger, MD

People have chewed coca leaves for at least 8,000 years as a mild stimulant without any evidence of addiction, but when certain components are isolated and concentrated into cocaine, we’ve got a problem. The same may be true of sugar—people don’t tend to binge on bananas. The isolation of sugar from the whole food may be the reason we’re more likely to supersize soda than sweet potatoes, or why we’re less likely to eat too much corn on the cob, but can’t seem to get enough high fructose corn syrup.

The overconsumption of sugar-sweetened diets has often been compared to drug addiction. However, until very recently this parallel was based more on anecdotal evidence than on solid scientific grounds. But now we have PET scans, imaging technology that can measure brain activity. It all started with a publication from the Institute of Clinical Physiology that showed decreased dopamine sensitivity in obese individuals. The heavier they were, the less responsive to dopamine they appeared to be. We see the same reduction in sensitivity in cocaine addicts and alcoholics, which “would suggest that a reduction in dopamine receptors is associated with addictive behavior irrespective of whether it is due to food or to addictive drugs, as seen in substance abusers.”

Dopamine is considered the neurotransmitter primarily involved in the pleasure and reward center of our brain, helping to motivate our drive for things like food, water and sex—all necessary for the perpetuation of our species. It was healthy and adaptive for our primate brains to drive us to eat that banana when there wasn't much food around. But now that fruit is in fruit loop form, this adaptation has "become a dangerous liability." The original Coca-Cola formulation actually included coca leaf, but now, perhaps, its sugar content may be the addictive stand-in.

[Read a little more](#)

<http://www.toyourhealth.com/mpacms/tyh/article.php?id=2047>

Beat the Blues With Exercise

Depression is a serious health issue, whether we're talking clinical depression (major depressive disorder), mild depression, seasonal affective disorder (or appropriately, "SAD" – depressive symptoms that often occur during the fall / winter months) or just "feeling blue." Fortunately, there's a simple, natural solution to help deal with depression: exercise.

When you're depressed, exercise is probably last on your list of priorities; curling up on the couch may seem infinitely more appealing than heading off to the gym for a vigorous workout. Yet an abundance of research suggests exercise is an ideal natural remedy when you feel depressed – and science backs it up.

According to the Mayo Clinic, here are some of the reasons why exercise may be an effective way to combat depression:

- exercise - Copyright – Stock Photo / Register Mark Releases "feel-good" brain chemicals (neurotransmitters, endorphins and endocannabinoids)

- Reduces immune-system chemicals that have been implicated in depression
- Increases body temperature, which may provide a sense of calm, reducing anxiety

- Helps you deal with your depression in a healthy, productive way

- Boosts self-confidence, which can make you feel better about yourself

- May provide for more social interaction, improving your mood

If you're feeling depressed, take it seriously. Talk to your doctor about how you're feeling. But before they prescribe an anti-depressant, which is the common medical strategy whenever someone says they're depressed these days, ask them about natural treatment alternatives, including exercise.

<http://lifecarechiropractic.com/blog/?s=Ibuprofen+Side+Effects%3A+Osteoporosis+Now+on+the+List>

Ibuprofen Side Effects: Osteoporosis Now on the List

By James Bogash

Ok. I'll admit it—I'm no fan of anti-inflammatories. The list of side effects is far longer than most doctors realize.

Despite how long the list already is, there is always room for more negative effects when it comes to drugs that interfere with the way your body functions. (In case you're not familiar with the long list already, feel free to check out my e-book on the dangers of NSAIDs)

This particular [article](#) adds bone density problems to the potential list of side effects of ibuprofen and its ilk. The author is looking at the physiological pathways by which NSAIDs could contribute to bone density problems and not summarizing an actual study linking anti-inflammatory drugs with low bone density. Because of this, we can't say with certainty that ibuprofen side effects will include low bone density, but it certainly makes sense.

Here's how it works:

Inflammation is needed for both new bone formation and old bone breakdown. Bone is essentially really tough soft tissue, and in a [previous blog article](#) I look at evidence linking NSAIDs and poor soft tissue healing after surgery. So it would make sense that NSAIDs would also effect bone healing.

The problem is that we are always breaking down bone and repairing it. Exercise causes microfractures in bone that the body then has to go in and repair. This is one way that exercise improves bone density.

In addition, chronic use of NSAIDs will, ironically, lead to inflammation in the gut. Inflammation in the gut will lead to more serotonin, which, in turn, has been linked to lower numbers of osteoblasts (the cells that build bone).

Pretty crazy web, huh?

Overall, you need to really understand that the use, acute OR chronic, of anti-inflammatory medications comes with a price, and this price is likely to be far greater than what you took it for in the first place.