

# MIND & BODY

## Addiction: A Disease of the Soul?

How a wounded spirit  
can trigger compulsive  
behavior **6**



Unlike heroin or  
cocaine, alcohol is  
a legal and socially  
encouraged drug.

THE  
EPOCH  
TIMES

TRUTH and TRADITION

# A CURE FOR FAKE NEWS SYNDROME

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THE EPOCH TIMES  
TRUTH AND TRADITION

### TRADITIONAL CHINESE MEDICINE

## Slow Down for Success

LYNN JAFFEE

I don't like to wait. Put me in a line that's more than three people long, and I am the person tapping my toe and muttering about poor service. I rarely order stuff online because I want it now. And don't even think about putting me on hold. So it's very interesting that I am attracted to and practice Chinese medicine—a system of healing that is essentially ... slow.

If you are looking for a quick fix, Chinese medicine is not for you. It is usually not a one-shot deal. People who come for one session thinking that everything will be good-to-go afterward are often disappointed. It demands patience, and it is not a silver bullet. That said, the benefits of the slow nature of this medicine are many.

**Time to Fully Heal.** Your body is programmed to heal—and that takes time. Chinese medicine involves true healing, not just masking symptoms with a prescription drug. That means your practitioner must understand not only what's going on, but why it is happening. Once the true source of your symptoms are uncovered and treated, real healing can happen.

**Knowing Your Body.** The nature of Chinese medicine insists that you slow down and get in touch with your body. Diagnosis and treatment can only move forward with your input as a patient. For example, you know that your headaches are migraines. But to be effective, your practitioner will need to know more: Is it one-sided? How often does it occur? Does the painful area like pressure or not? Is it related to changes in the weather? What else is going on with your health?

Seemingly unrelated details are frequently big clues, and practitioners can only be effective if they know those details. And for that to happen, you need to pay attention to your body. This is a good thing, as it leads to insights

about your health that you might not have considered otherwise.

**Gentle.** Chinese medicine is not only slow, but it is also gentle. Western medicine offers drugs and surgery. Chinese medicine offers herbs and a half hour or so of relaxation on a massage table during an acupuncture session.

**Natural.** Speaking of Chinese herbs, it's true that the effects are subtle at first and they take longer than a prescription drug to work. In fact, many prescription meds are derived from the same herbs Chinese medicine practitioners use.

However, the difference between the two is that when an actual herb is used, the whole herb is included for the benefit of the synergistic effect of all of the plant's compounds. When a drug is made from an herb, only the active ingredients are extracted and made into a very potent medication—one that may work quickly, but comes with tons of side effects because of its potency.

**Active Participation.** Finally, the nature of Chinese medicine usually means that patients must participate in their own treatment, as lifestyle is often a player in their conditions. If your diet is making you sick, you have a responsibility to change it as part of the treatment process.

If your 80-hour workweek is leaving you exhausted and irritable, acupuncture can only do so much. So if change is part of your treatment plan, you can plan on it taking some time. The upside is that the improvements you feel are very real, not the effect of a medication that has temporarily alleviated your symptoms but left the cause in place.

Lynn Jaffee is a licensed acupuncturist and the author of "Simple Steps: The Chinese Way to Better Health." This article was originally published on [AcupunctureTwinCities.com](http://AcupunctureTwinCities.com)



Chinese medicine's herbal remedies can help cure disease, but slowly.  
KERKANN/SHUTTERSTOCK

### AGE WELL

## Ageism Can Shorten Life Expectancy

Researchers find ageism affects both medical care and psychological well-being

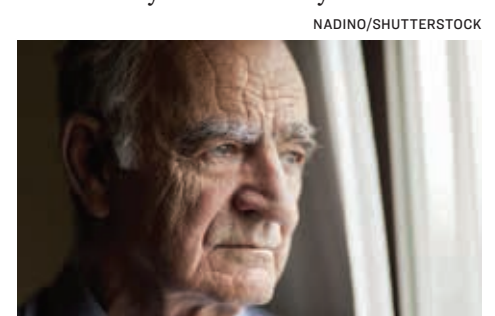
MICHAEL GREENWOOD

Ageism can harm older people's health, a review of research in 45 countries across five continents shows.

The researchers base their analysis on a systematic review of 422 studies around the world that included more than 7 million participants. There was evidence of the adverse effects of ageism on older persons in 96 percent of the studies.

"The injurious reach of ageism that our team documented demonstrates the need for initiatives to overcome ageism," said senior author Becca Levy, a professor at the School of Public Health and the psychology department at Yale University. The World Health Organization asked Levy to lead the analysis as part of its newly launched Global Campaign to Combat Ageism, which 194 countries support.

The study is the first systematic re-



Our culture has a dim view on aging and that can lower our quality of life during our elder years.

view of ageism that simultaneously considered structural-level bias, such as denied access to health care, and individual-level bias, such as the power of stress-inducing negative age stereotypes to affect the health of older persons.

The researchers found evidence that ageism led to worse outcomes in a number of mental health conditions, including depression, and a number of physical health conditions, including shorter life expectancy.

Ten studies showed that when older persons assimilate negative age stereotypes from their culture, they have a shorter life expectancy. Studies in multiple countries including Australia, Germany, and China made this survival finding, which Levy originally identified in previous research.

In the current study, Levy and her team found that ageism adversely affected whether older patients received medical treatment. If they did receive the treatment, they looked at the duration, frequency, and appropriateness of the treatment provided. Researchers found evidence of denied access to health care treatments in 85 percent of all relevant studies. In 92 percent of the international studies of health care students and professionals, there were indications of ageism in medical decisions, and this trend has increased over time, the researchers say.

This systematic review also found ageism affected older persons regardless of their age, sex, and racial/ethnic membership.

"Our research highlights the importance of recognizing the influence of ageism on health," said first author E-Shien Chang, a doctorate candidate in the social and behavioral sciences department at the Yale School of Public Health.

"Policies to improve older persons' health must take ageism into account." The study appears in PLOS ONE.

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### THE ROOT CAUSE

## Research Confirms Common Sense: Pollution Is Bad for Your Brain

2 studies provide similar findings that air pollution has neurodegenerative effects

ARMEN NIKOGOSIAN

We've known the health hazards of air pollution since the dawn of the industrial age, but while its adverse effects on our hearts, lungs, and immunity are well established, researchers have now confirmed a decades-old suspicion—air pollution also damages the brain.

Two recent and independent studies came to very similar conclusions on the detrimental effects of air pollution at opposite ends of the age spectrum.

The first study, done at Cincinnati Children's Hospital Medical Center and published in PLOS One, investigated the effects of traffic-related air pollution on children's brains. They studied a group of 147 12-year-old children who had been exposed to either high or low amounts of air pollution at 1 year of age. The children had been recruited before the age of six months and were a subset of an earlier study looking at the effects of pollution on allergies. Researchers found a 3-4 percent loss in gray matter volume and a reduction in cortical thickness in the brains of children who had higher exposures to air pollution.

Different areas of the brain showed different volume loss and thinning. Using magnetic resonance imaging (MRI), researchers concluded that higher levels of air pollution damaged the development of the sensorimotor cortex, frontal cortex, and cerebellum. These areas of damage were noted in 12-year-old children well over a decade after the period of pollution exposure.

The second study, done at the University of British Columbia and published in Environmental Health, examined the connections between neurodegenerative diseases such as Alzheimer's, Parkinson's, multiple sclerosis (MS), and dementia to how far away the participants lived from major roads and highways. The investigators reviewed the data of more than 678,000 residents of the Metro Vancouver area. They found that participants who lived less than 165 feet (50 meters) from a major road or less than 500 feet (150 meters) from a highway were at higher risk for developing neurodegenerative diseases. They concluded that increased exposure to air pollution was the likely cause of this increased risk.

The corroborating nature of these independent studies illustrates the broad and cumulative



Air pollution has a long-term effect on the neurological development of children, one study found.

effects of air pollution on the brain throughout our lives. Whether it be a narrowly defined period early in life or ongoing exposure later in life, the facts indicate that the more air pollution you breathe, the more brain cells you will lose.

While health-minded people are increasingly aware of the concept of detoxification, not enough focus has been placed on, arguably, the largest source of toxicity we face—the air we breathe.

You can modify most aspects in your lifestyle, but changing the air you breathe is particularly difficult since it requires you to change where you live or work.

Cars are the primary source of air pollution. While eliminating air pollution from cars is ideal, it's also unlikely for decades given that electric cars only comprise one in 250 new car sales.

The next most effective solution would be to avoid high-pollution areas. This is not a huge problem for the 20 percent of Americans who do not live in cities but with 80 percent of the American population living in urban areas, this is easier said than done. Even within an urban area, exposure to air pollution will vary greatly depending on how far your home is from major roads, highways, and other high traffic areas.

Rather than viewing air pollution as something to eliminate or leave, what about considering where in our daily life we are able to control the quality of the air we breathe. You would want to choose an enclosed area where you consistently spend much of your day.

Your bedroom would be an ideal choice. A medical-grade, true high-efficiency particulate air (HEPA) filter with carbon or zeolite would significantly reduce the air pollution you breathe while you sleep. This could be a particularly effective intervention for children under the age of 1 due to the increased sensitivity of their developing brains and their relatively longer period of sleep compared to adults.

Another strategy would be to optimize your body's detoxification potential.

Detoxification is a complex system with hundreds of biochemical pathways. Like any system in the body, it possesses only a finite amount of resources. A metabolism overwhelmed on a daily basis with junk food, artificial ingredients, tobacco, alcohol, and recreational drugs (that's the shortlist) won't have much spare capacity to combat toxins in the air we breathe. By living as cleanly as possible, removing the toxic burdens we can control, we allow our detox pathways to have the resources necessary to clean out the toxic burdens we do not have much control over.

**Researchers found a 3-4 percent loss in gray matter volume and a reduction in cortical thickness in the brains of children who had higher exposures to air pollution.**

That being said, it's worth putting air pollution in America from a historical perspective. Because of the Clean Air Act, the six major air pollutants (particulate matter, ozone, carbon monoxide, sulfur oxides, nitrogen oxides, and lead) have all dropped 72 percent since 1970. This figure is even more impressive when you consider in that same period growth of 200 percent in the economy and 150 percent in the number of miles we drive.

While change at the personal level can do much, with a problem as pervasive as air pollution, that is not enough. Stricter regulations to limit the emissions of the six major air pollutants that we know are damaging us today would improve the health of many people in urban areas.

Armen Nikogosian, M.D., practices functional and integrative medicine at Southwest Functional Medicine in Henderson, Nev. He is board-certified in internal medicine and a member of the Institute for Functional Medicine and the Medical Academy of Pediatric Special Needs. His practice focuses on the treatment of complex medical conditions with a special emphasis on autism spectrum disorder in children, as well as chronic gut issues and autoimmune conditions in adults.

Higher levels of air pollution damaged the development of the sensorimotor cortex, frontal cortex, and cerebellum.



## FOOD IS MEDICINE

# Honey Reduces Risk of Heart Disease

Honey can have an opposite and healthy impact on cholesterol as compared to sugar

Got a sweet tooth that you just can't quash? Relax. Nature has provided a healthy way to satisfy your sugar cravings.

In a cooperative effort between researchers at the medical sciences departments of Iran's Isfahan University and Mashhad University, honey has been shown to aid the body in healthy processing of fats by decreasing the overall amount of cholesterol and fats in the bloodstream. The study was published in August 2018 in the journal of the European Society for Clinical Nutrition and Metabolism (ESPEN), Clinical Nutrition ESPEN.

Researchers were inspired by previous studies that demonstrated honey's beneficial effects on cardiovascular disease symptoms. Their chief aim was to investigate whether the effect of honey consumption on overall lipids in the blood was markedly different than the effects of sucrose, or table sugar, on the blood lipid profiles of 60 young, healthy male subjects.

## Good Fats Are Key to Heart Health

A lipid profile also called a coronary risk panel, is a blood test that measures total blood triglycerides including high-density lipoproteins (HDL), often referred to as "good cholesterol," and low-density lipoproteins (LDL), commonly known as "bad cholesterol." In truth, there is only one "type" of cholesterol, a molecule that is incapable of dissolving in blood. In order to transport cholesterol to the various cells throughout the body, lipoproteins such as LDLs and HDLs act as cholesterol carriers.

LDLs may have earned their bad reputation due to the fact that once they have deposited their cholesterol load, they become small enough to burrow into the linings of arteries where they can oxidize, resulting in damaging inflammation. Conversely, one of HDL's functions is to carry anti-oxidative

enzymes to cells where they may help neutralize potential harm done by depleted LDLs' oxidation. The blood lipid profile is a primary screening tool for assessing an individual's risk of developing coronary heart disease. The word "lipids" refers to fats and fat-like substances that are key regulators of cellular activity, such as the energetic functions of your body.

The effectiveness of this cellular transport system is dependent on having the right amount of healthy fats in your bloodstream. If an imbalance occurs, excess cholesterol may get deposited into the walls of blood vessels, eventually leading to atherosclerosis, or hardening of the arteries, which can cause heart attack and stroke due to blocked blood flow to the heart and brain.

## The main finding of this study, noted researchers, was 'the ability of natural honey to modulate some of the risk factors of cardiovascular disease.'

In the focus study, 60 male subjects between the ages of 18 and 30 were randomly recruited and assigned to one of two groups: honey (experimental) and sucrose (control). Participants were included in the study if they were healthy, non-athletic, and a non-smoker. Participants were excluded if they already consumed a large amount of honey in their daily life, took any sort of medication, or had recently undergone major diet and lifestyle changes.

Body mass index (BMI) was measured and participants' physical activity was self-reported via the International Physical Activ-



Honey has an unprecedented history of use as food and medicine, stemming back as far as recorded history.

ity Questionnaire (IPAQ), a survey that assesses walking time, moderate and vigorous physical activities, and time spent sitting throughout a typical week.

The experimental group received 70 grams of natural honey per day, while the control group received 70 grams of sucrose per day for a period of six weeks. Fasting lipid profile, including total cholesterol, HDL cholesterol, LDL and triacylglycerol, was determined for each subject at the beginning of the trial (baseline) via a 5-milliliter blood sample, which was collected in the morning after a 12-hour fasting period.

The lab tests were repeated after the six-week intervention period was complete. All 60 participants successfully completed the trial, and in the final analysis confounding variables including age, physical activity, and some nutrient intake were adjusted.

## Honey Improves Cholesterol

While Table Sugar Is Toxic Participants' initial baseline measurements for fasting blood sugar, systolic blood pressure, and diastolic blood pressure were not different between the honey and sucrose groups, indicating that there were no significant pre-existing differences between the groups at the beginning of the study. After the final blood lipid profiles were produced, researchers compiled the following findings:

- Consumption of honey decreased total cholesterol and LDL and increased the presence of HDL in the blood.
- Consumption of sucrose had the inverse effect, increasing total cholesterol and significantly raising LDL levels, while decreasing HDL in the blood.

In summary, total cholesterol significantly decreased in the honey group compared with the beginning of the trial, while total cholesterol increased in sucrose group. LDL cholesterol was decreased by honey consumption and increased by sugar intake. Honey also increased HDL cholesterol in the blood, while sucrose decreased the presence of this healthy fat.

The main finding of this study, noted researchers, was "the ability of natural honey to modulate some of the risk factors of cardiovascular disease." According to the U.S. Centers for Disease Control and Prevention (CDC), heart disease is the leading cause of death in the United States with one person dying from cardiovascular disease every 37 seconds. Researchers called for further clinical trials to confirm their promising results.

## Honey: Nature's Oldest Health Food

Honey has an unprecedented history of use as food and medicine, stemming back as far as recorded history. It has been found

in ancient Egyptian tombs, still perfectly preserved, and in cave art dating back some 8,000 years. Honey contains many active biological constituents including polyphenols, which are nutritionally dense phytochemicals that have antioxidant properties.

Many studies have confirmed that polyphenols provide a protective effect against diseases such as heart disease, cancer, diabetes, arterial diseases, and more. There are more than 200 abstracts on GreenMedInfo.com extolling the numerous health benefits of consuming pure, raw honey. Members can access GreenMedInfo's in-depth research tools and learn more about how honey is one of nature's most miraculous foods.

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# VA's Keto Test for Diabetic Patients Raises Warning From Skeptics

Silicon Valley startup promotes high-protein and high fat diet program with known nutritional deficiencies

## JASPER CRAVEN

A partnership between the Department of Veterans Affairs and Silicon Valley startup Virta Health Corp. is focusing attention on the company's claim that it provides treatment "clinically-proven to safely and sustainably reverse type 2 diabetes" without medication or surgery.

The assertion is at the heart of an ongoing debate about the keto diet's effect on diabetes. Some diabetes experts are skeptical of Virta's promise and are expressing concerns that the company's partnership with the federal government is giving the diet too much credence.

The agreement has helped raise the national profile of Virta, a fledgling health company that has developed a proprietary system of remote coaching and monitoring for people with Type 2 diabetes to help them follow the keto diet, which is high in fat and low in carbohydrates.

Despite its strict requirements, the keto diet has gained popularity in recent years with consumers and studies noting it helps shed pounds and can lead to improved health. But the company's claim about reversing diabetes is unusual. Type 2 diabetes is often linked to excess weight, and the company said its studies suggest that significant weight loss through keto can lower patients' blood sugar and their need for diabetic medications.

The diet has won support among some diabetes researchers and patient groups. But other public health advocates are concerned that the science of treating diabetes with a keto diet is not well studied. They worry about keto's effect on the heart and the scarcity of vegetables and fruits generally in the diet.

In a press release announcing the collaboration, VA Secretary Robert Wilkie said Virta's regimen would help the department create "a more comprehensive approach to care."

Under the accord, Virta is providing its services free to about 400 VA patients for a year while federal officials evaluate the service and their health.

In November, Virta announced in a news release that the initial 90-day results were promising. It said veterans reported weight loss, reduced blood sugar, and lower reliance on diabetes medication.

But Virta declined to provide KHN with underlying data, citing the need to protect patient information. It did arrange an interview with its then-chief counsel and vice president of finance, Anand Parikh. He said he expected the partnership with the VA to soon expand. Parikh, who left the company in December, said that future government collaboration will likely involve payment to Virta but that it was too early to estimate a price. The treatment currently costs other patients \$370 per month, plus a one-time \$500 initiation fee.

A VA spokesperson did not respond to detailed written questions concerning the partnership.

The VA runs the country's largest integrated health care system and is considered a leader in diabetes care. Roughly 25 percent of its patients have the disease, which is twice the national average. Inside the VA, diabetes is the leading cause of blindness, renal disease, and amputations.

Virta offers diet coaching, monitoring, and support through a smartphone application. Patients can use the services around the clock and regularly upload their blood sugar readings and other medical details, such as weight and blood pressure.

"One of the most important things about our approach is that we individualize for



The keto diet's focus on fat and protein makes for a tasty breakfast, but lacks complete nutrition.

## Many health experts said there is little evidence the diet can produce long-term results that ameliorate diabetes.



Some studies suggest that low-fat diets with plenty of plant-based nutrition, like the Mediterranean diet, produce similar results and have fewer health risks.

each person," Parikh said.

The VA's work with Virta has raised alarm bells, including on Capitol Hill.

In October, Rep. Josh Gottheimer (D-N.J.) sent a letter to Wilkie saying that the "partnership between the VA and Virta Health Corporation provides tacit approval of the ketogenic diet as a means to reverse the impacts of type 2 diabetes." His letter also added, "Promoting a ketogenic diet for patients with diabetes may put them at increased health risk."

Neither Gottheimer nor his staff returned repeated requests for comment about what prompted his letter.

## Virta's Studies Find Benefits of Keto

Virta officials first floated the idea of a partnership during President Barack Obama's administration. A deal was finalized last year after former Rep. Jeff Miller (R-Fla.), who is now a Washington lobbyist, signed up to work for the company. Miller retired from his seat in January 2017 after serving as the powerful chairman of the House Veterans' Affairs Committee for six years.

The day after registering as a lobbyist for Virta, Miller sent a note to Darin Selnick, then a senior VA political appointee, with proposed language for an agreement between Virta and the VA, according to emails obtained through the Freedom of Information Act. Selnick reviewed it, then passed it along to an official in the VA's research department.

Parikh said the VA thoroughly evaluated Virta's research before the deal was done. The partnership was announced in May.

Virta was founded in 2014 by venture capitalist Sami Inkinen after doctors told him he had signs of a prediabetes condition. Joining him were Dr. Stephen Phinney and Jeff Volek, who researches low-carb diets. The two had written a book about the Atkins diet, which also emphasizes severely limiting carbohydrates and turning to some high-fat foods.

A spokesperson for the American Diabetes Association declined to comment on Virta's treatment regimen but pointed to an article in its magazine that noted some benefits of a keto diet, such as lowering blood sugar and

weight, while listing its potential drawbacks, including missing nutrients, risk of dehydration, and high cost.

Still, many health experts said there is little evidence the diet can produce long-term results that ameliorate diabetes.

Moreover, some studies suggest that low-fat diets with plenty of plant-based nutrition, like the Mediterranean diet, produce similar results and have fewer health risks. The VA's clinical guidelines for diabetes care, while acknowledging potential benefits of low-carb diets like keto, make clear that "the evidence in support of the Mediterranean diet was more uniform and robust than that for the lower carbohydrate dietary approaches."

Proponents of the keto diet note that a vegetarian option is also available.

Virta's website lists six research papers as proof that the company's assistance for diabetes results in significant improvements in various clinical markers of diabetes, including obesity and blood sugar levels.

The papers were peer-reviewed, yet they are all based on a single, non-randomized clinical trial of 262 patients, which was funded by Virta. Among the authors of these papers are Volek and Phinney.

In April, two Virta consultants co-authored a journal article reviewing various studies and said they showed that low-carb diets were "effective in reversing diabetes in the short term."

## Concerns About Missing Nutrients in the Diet

Dr. Randall Stafford, who directs Stanford University's Program on Prevention Outcomes and Practices, reviewed Virta's research and called the results "encouraging." Yet he said the control group was "fairly useless, given that it was composed of people who did not want to change their diets."

Stafford said results don't suggest that Virta's treatment alters diabetes.

"My interpretation is that the keto diet is a temporizing measure, not a cure," he said.

In April, the Physicians Committee for Responsible Medicine, a nonprofit research and advocacy organization that advocates for plant-based diets, urged Wilkie in a letter to cancel the Virta partnership.

"The company's approach is to place patients with diabetes on a low-carb ketogenic diet," the letter reads. "At best, this type of diet may act as a 'Band-Aid' for diabetes, yet it carries serious health risks," including higher cholesterol levels and nutrient deficiencies.

A large study by the European Society of Cardiology published in 2018 found those who ate a low-carbohydrate diet were at greater risk of coronary heart disease, stroke, and cancer.

In an opinion article in the Journal of the American Medical Association, Dr. Shivam Joshi, a lifestyle medicine physician associated with NYU Langone Health, suggested that Virta's April review of studies should "be interpreted with caution" as the group of participants was self-selecting and said the review "presents an overly enthusiastic narrative" that passed over studies critical of the ketogenic lifestyle.

"Any diet can be effective when bundled with intense lifestyle interventions," Joshi said in an interview. "The real question needs to be over the long-term benefits of the diet itself."

*Jasper Craven is a freelance journalist. KHN's coverage of these topics is supported by The John A. Hartford Foundation, Gordon and Betty Moore Foundation, and The SCAN Foundation. This article was first published by Kaiser Health News.*

## MADE TO MOVE

# How to Keep Things Moving When Suffering from Joint Pain

## DEVON ANDRE

The last thing you want to do when your joints hurt is exercise. In fact, you might not even want to hear about it.

But it helps. In fact, it might help more than anything.

The right exercises performed properly might be the solution for any type of joint

pain. I'm talking ankle, knee, hip, shoulder, and elbow. And the stuff that works doesn't even have to be specialized. Simply getting more activity can relieve pain and potentially delay or prevent the need for surgery.

There is one caveat to the effectiveness of exercise, and that's consistency. If it's not a regular part of your life, it won't do much

for you. This can be a big problem because the hardest parts of an exercise routine are getting started and making time.

To get your daily dose of exercise, you'll need a plan and a little motivation. Here are four ways to help you include activity into your day to promote healthier pain-free joints.

**Make time:** If you're spending a lot of time in front of the television, start replacing a few of your less enjoyable 30-minute sitcoms with exercise. If sports are your thing, go for a walk during the pre-game show or at breaks in the game. You can also exercise while watching.

If your day is too packed, think about getting up 30 minutes earlier. Using that

extra half hour can allow you some time to get up and at it, or at least clear some space later in the day. If you can't piece together 30 straight minutes, split exercise into three 10 or two 15 fifteen-minute intervals.

**Remove your options:** You can build exercise into your day by electing to make a few sacrifices. Start taking the stairs instead of elevators or escalators, for example. Get off the bus or subway a couple of stops early and walk the rest of the way. Walk to run errands in reasonable distances, or choose a parking space that allows you to walk to multiple locations. When talking on the phone, walk around, or perform movements like ankle extensions.

**Find a buddy:** Working out with a partner can make things more enjoyable and keep you more accountable.

**Find alternatives:** If the weather is a drawback, you don't have to exercise outside. People put off by cold or damp temperatures can drive to the local mall to do laps, find a gym close by, or take an exercise class.

Activity has the potential to relieve joint pain now and into the future!

*Devon Andre holds a bachelor's of forensic science from the University of Windsor in Canada and a Juris Doctor from the University of Pittsburgh. This article was first published on Bel Marra Health.*

## Walk to do errands in reasonable distances, or choose a parking space that allows you to walk to multiple locations.



Walking your grandchild to and from school is a great way to get some gentle exercise.

# ADDICTION: A DISEASE OF THE SOUL?

## How a wounded spirit can trigger compulsive behavior

CONAN MILNER

We naturally want to feel good. But what happens when our favorite method of stress relief becomes destructive?

Serious addictions take an undeniable toll both physically and mentally. But according to Lisa Boucher, author of “Raising the Bottom: Making Mindful Choices in a Drinking Culture,” the 2017 winner of the Best Book Award for women’s health, people often overlook the true root of addictive behavior: a wounded spirit.

“Addiction is a spiritual malady,” said Boucher, a registered nurse who has helped women overcome alcoholism for the past 28 years. “People are just trying to fill the hole of the soul.”

Most addiction counselors acknowledge the spiritual aspect of their clients’ compulsion. “The Big Book” of Alcoholics Anonymous (AA), for example, emphasizes a spiritual awakening as a necessary step in breaking free from alcohol’s grip.

But it’s a notoriously hard lesson to learn. A common theme among the hundreds of addicts Boucher has worked with is that they can take years or decades to even admit they have a problem.

“Pride and ego are what keeps people locked into addiction,” she said. “They don’t want to accept that they can’t control something.”

### The New Alcoholic

We’re all prone to occasional indulgence, but we can be lax at judging when we’ve gone too far. Substance abuse can be even harder to accept when society supports it. Unlike heroin or cocaine, alcohol is a legal and socially encouraged drug. But Boucher says these features can make it even more insidious. She points to an increasingly common

character: the wine mom.

“We have normalized alcoholism,” Boucher said. “The new alcoholic carries a diaper bag and wears designer pumps.”

While recreational drug use, in general, is at an all-time high, alcohol remains the most abused drug in the world after tobacco, and it’s hitting women especially hard. Alcohol-related deaths for white women ages 35–54 have more than doubled since 1999, according to an analysis of federal data by The Washington Post. Researchers studying the spike call it a public health crisis.

According to a 2013 study, the alcohol industry has increased ad spending almost 400 percent since 1971. Ads make a brief nod toward “drinking responsibly,” but the predominant message is that booze is a fun, sophisticated, and socially sanctioned excuse for letting go.

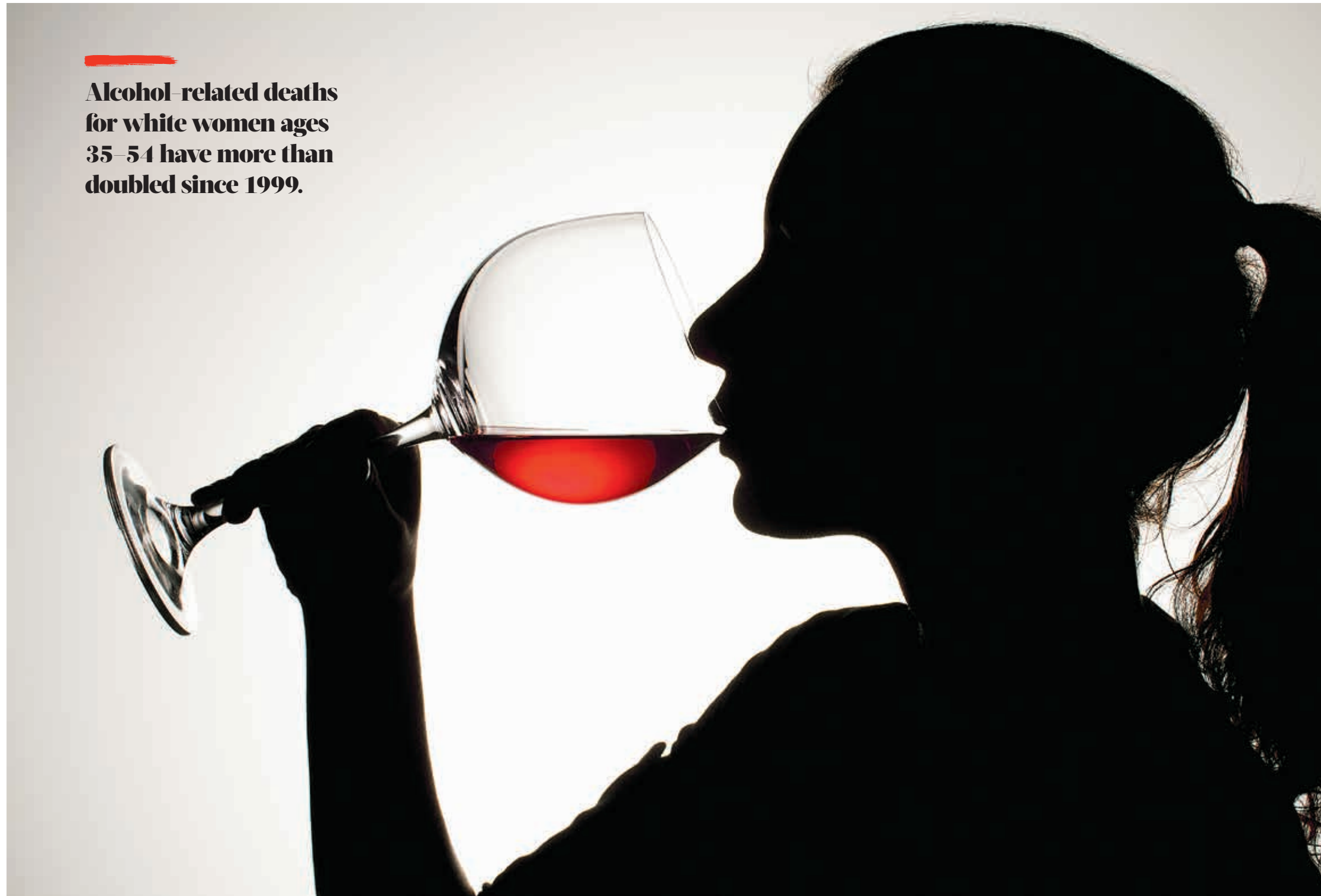
“Pride and ego are what keeps people locked into addiction.”

*Lisa Boucher, author, registered nurse, addiction counselor*

It’s an appealing proposal, especially for those trying to juggle a career and family. But Boucher believes women have become so conditioned to reach for a drink under stress, that they lose touch with their innate coping skills.

“People drink because they can’t handle the way they feel,” Boucher said. “If you’re trying to change the way you feel, you’re not coping with some deeper emotion.”

It’s not just alcohol; all of our most destructive drugs tend to be those that provide a temporary escape from misery. Such substances



Alcohol-related deaths for white women ages 35–54 have more than doubled since 1999.

can be a short-term blessing for serious injuries and illness. But we lose an important part of ourselves when they become our primary coping method.

Chronic reliance on a substance for our sense of well-being can stunt our emotional and spiritual growth, says Boucher, because we never develop the strength of character that comes from facing life’s challenges with a clear mind. A prime example is Boucher’s sister, a successful career woman in her 50s who’s four years sober of a serious meth habit. “This is a woman who never learned to cope with life,” Boucher said. “She has had to go back and relearn how to deal with conflict in an appropriate manner.”

Researchers point to genetic markers that may increase the risk for addiction, but role modeling may seal the deal. Boucher and her siblings grew up resentful of their alcoholic mother who was either in a Valium stupor or drunk for most of their childhood, yet they all followed a similar path.

“Our mother never taught us coping skills,” Boucher said.

### Spiritual Disease

Why would anyone choose to waste money, destroy relationships, and ruin their health? Addiction doesn’t make any logical sense, but we can’t seem to stop the tide. Despite the government spending more than \$1 trillion on the war on drugs over the past four decades, the rates of addiction and overdose deaths in the United States are now higher than ever before. Opioids get the most attention, but in some states, meth may soon claim the highest number of addicts and overdose deaths.

Addiction used to apply primarily to substances. Today, it is found with vices such as pornography, gambling, shopping, excessive smartphone use, and countless other compulsive pleasures.

Researchers believe they may soon uncover a physical fix to our addiction epidemic. Studies are underway to develop treatments that target the chemical imbalances and faulty wiring found in the brains of addicts.

But what if our addiction problem is more complex than any solution science can con-

jure? According to the Rev. Sheri Heller, a New York-based psychotherapist and interfaith minister, addiction may be biochemically based, but the psychological and spiritual aspects of the disease still demand attention.

“You can’t heal emotional wounds intellectually,” she said. Spirit is a concept that is often at odds with contemporary medicine, but it wasn’t always this way. People once looked for meaning in their suffering.

Dr. Carl Jung, the Swiss psychiatrist famous for his descriptions of ancient archetypes residing in our collective unconscious, helped Westerners regain a sense of meaning in their suffering. Jung gave the modern world a vocabulary for the psyche once reserved for myths and legends. He was also instrumental in inspiring the 12-step paradigm found in addiction recovery programs.

“Jung said addiction is really a misguided search for God. It’s an attempt to feel the euphoria one gets from having a sense

of belonging or a sense of being loved,” Heller said.

Of course, each addict has a unique backstory of trauma and pain, but Heller believes a change in society lies at the heart of our growing wave of addiction. Our sense of community, intimacy, and humanity have been replaced by a culture of technology, celebrity, and divisiveness. Isolated and overwhelmed, we reach for anything to fill the void.

### Medicating Addiction

Since people usually do drugs to feel better, there’s a prevailing notion that substance abuse is merely a symptom of depression. But Boucher believes that’s a backward idea.

“You can’t diagnose depression when they’re smoking pot every day, drinking alcohol, using meth, smoking crack, taking opioids, or whatever that person’s drug of choice is,” she said. “How do you know what that person’s baseline is?”

Alcohol, for example, is a depressant. So

DAN KOSMAYER/SHUTTERSTOCK

if a heavy drinker complains of depression, they may be guzzling the root cause.

Boucher is sympathetic to legitimate cases of depression, but she believes that in order to properly diagnose it, sobriety should come first. In her experience, those who go clean for three to six months often eliminate their need for drug treatment.

“In 90 percent of the cases that I’ve worked with, these women were able to get off their antidepressants,” she said.

### Beyond Willpower

Few people can drop their bad habits cold turkey. But for many addicts, connecting to something larger than themselves helps them work toward recovery. However, adopting this mindset can be a difficult leap, especially since those who turn to drugs often do so because their faith in God or man has been shattered.

Jung himself was reluctant to use spiritual terminology with his patients because he feared they would misinterpret his message. For those resistant to talk of a higher power, Heller suggests more deity-neutral language.

“One could say that the person needs to be able to expand their consciousness to incorporate new ideas,” she said, “but in order for anyone to engage in a process of healing and self-exploration, they have to be able to surrender to something greater than their own will.”

Some insist willpower is the key to recovery—if we’re determined to deny our cravings for long enough, we can be whole again. But according to Kimberly Hershenson, a New York-based therapist specializing in substance abuse, willpower will always fall short.

“If you’re looking at this from a disease model, you are as powerless over addiction as you are with cancer,” Hershenson said. “No matter what you try to do, your brain is going to crave more. And it’s really about accepting that.”

Our addictive impulses are connected to the survival and pleasure centers of our brain, so they react faster and with greater force than the part of our brain responsible for reasoning. This means that cravings surge long before thoughts of consequence kick in. Beating back urges can be a losing battle even for the strongest of wills.

“An addict cannot force themselves into a place of health by soldiering through life,” Heller said. “This is about being willing, not being willful.”

If addiction is a spiritual disease, then the cure has to come from within. There are tools to address the physical aspects of addiction, but experts say we must also cultivate positive behaviors, such as humility, accountability, a sense of purpose, and healthy coping mechanisms.

Life can be cruel, the world can seem crazy, but how we handle it makes all the difference. Boucher urges us to step back, be thankful for what we have, and reconnect with what is essential to our souls.

“We are human beings. We need quiet. We need to reflect. We need to nurture the whole person,” she said.

### MINDSET MATTERS

## Our Emotions Don’t Have to Rule Our Minds

BARRY BROWNSTEIN

“Between stimulus and response, there is a space. In that space is our power to choose our response. In our response lies our growth and our freedom.”—Unknown

A few days ago, my wife said something that stirred an immediate flash of anger. Perhaps you can remember being at a similar crossroads? You can:

1. Express your anger. How did that work out for you the last time you did?
2. Stuff your anger and silently rehearse your grievance. Again, your relationship will suffer.
3. Choose a better way.

That day, I chose a better way. In almost the same moment my anger arose, I noticed the story forming in my mind justifying the anger. I realized anger was pre-existing in my mind and the story I was constructing was a made-up narrative designed to help me drop responsibility. In that moment of realization, the anger was gone; not stuffed, gone.

This realization happened without intellectual processing. In other words, I didn’t do a number on myself.

An hour later, I couldn’t have told you what I thought I was angry about. Something can no longer be a cause (what my wife said) if it has no effects. If the false cause is removed, so are the effects.

I would like to tell you I always choose path 3. I don’t. Path 3 is unnatural to our ego and requires mental discipline and practice, but the rewards are immense.

The process I’m describing can apply to any upset: fear, anxiety, worry, etc.

This is an idea, among several, I will present in my workshop: “Has Your Life Become a Sitcom About Nothing? How to Exit Your Show” at FEEcon in June 2021.

*Barry Brownstein is professor emeritus of economics and leadership at the University of Baltimore. He is the author of “The Inner-Work of Leadership.” To receive Barry’s essays, subscribe at Mindset Shifts. This article is republished from FEE.org*



### BECOMING MINIMALIST

## How Minimalism Can Help You Find Wellness

### Understanding the impact of minimalism through the 7 pillars of wellness

JOSHUA BECKER

I spoke recently at the University of Ottawa to kick off their Health and Wellness Week. It was cold, but a fabulous event to join.

I am thankful for the organizers and their forward-thinking in connecting minimalism to wellness. Our pursuit and collection of physical possessions have a profound effect on the lives we live—and the level of life satisfaction we experience. I was grateful for the opportunity to help make that connection for both students and faculty.

As part of the presentation, I took some time to connect minimalism with the seven pillars of wellness. And I thought it might be helpful to share those connections here as well.

(I know there are different models of human wellness available and

the number of pillars can change from one organization to another. But I’ll use the University of Ottawa model as the basis for this post).

### The 7 Pillars of Human Wellness

**1. Spiritual Wellness:** Fostering a sense of inner peace and harmony while participating in activities that support one’s beliefs and values.

It is important to note, in descriptions of wellness, that spiritual wellness does not necessarily speak to the practice of a specific faith or any faith for that matter. Spiritual wellness is about alignment—aligning one’s activities with their beliefs and values.

Within this definition, minimalism contributes significantly to spiritual wellness. In fact, minimalism is, at its core, about alignment. Minimalism is about promoting your values by removing distractions. Owning less allows us to direct our most finite resources—time, money, and energy—towards those things that matter most to us.

**2. Physical Wellness:** Adopting healthy habits and minimizing risky behaviors that may affect your well-being.

I can’t speak for every person who has adopted minimalism as

a lifestyle, but I can speak for a large number of them. More importantly, I can speak for myself. I am a far healthier person today than before I discovered minimalism.

Intentionality in my possessions sparked intentionality in other areas of my life. As I removed the physical clutter from my home, I began eating healthier and exercising more. This occurred partly because owning less freed up my time to pursue those habits and partly because intentionality in one area of life tends to spark intentionality in other areas.

I am not alone in this experience. Courtney Carver, Joshua Fields Millburn, Leo Babauta, and Francine Jay have all written about similar experiences. Does practicing minimalism make you healthier automatically? No, but it does provide the opportunity and often the initiative to incorporate healthier habits. Minimalism encourages physical wellness.

**3. Financial Wellness:** Understanding your financial situation and your relationship with money, so you can make sound decisions.

The connection between minimalism and financial wellness is not difficult to see. As we own less and buy less, we are able to live on less money. This change in our

financial obligations means any number of things for an individual: perhaps you are able to get out of debt, get ahead financially, give more, or even change your career.

“More money” means different things to different people. But in terms of wellness, having a good understanding of your financial situation and where your money is going (or not going) is a key step to being proud of the life you are living. Minimalism makes that easier to do.

**4. Emotional Wellness:** Being emotionally balanced, understanding yourself and seeking support, if necessary.

Minimalism brings about a greater understanding of ourselves than most people realize.

Minimalism is the intentional promotion of the things we most value by removing everything that distracts us from it. In this way, minimalism forces questions of values upon us. As we begin owning less and identifying those items that support our purpose, we can’t help but ask ourselves where do we find joy, happiness, and fulfillment in life.

Additionally, the process of removing possessions from our lives invites us to dig deep into our hearts as we seek answers to the ques-

tions that inevitably surface: Why did I buy more than I need? What prompted me to waste so much money on physical possessions? Why is this item hard to get rid of? What emotions or fears are making this process difficult for me?

These questions are not easy to answer—and we don’t always like what we discover when we ask them. But they are important and they are questions that many people never ask themselves. Minimalism, without a doubt, brings about greater understanding of ourselves, our purposes, and what inner obstacles are keeping us from realizing them.

**5. Intellectual Wellness:** Inspiring a sense of curiosity by opening your mind to new experiences, concepts, and skills that are mentally stimulating and creative.

For some people, the mere pursuit of minimalism becomes an exercise in curiosity and new experiences. For others, it opens the pathway. Experiences result in greater life satisfaction than possessions. For one reason, as noted above, new experiences result in more intellectual wellness. And the less financial resources we spend on possessions, the more we have leftover for new experiences.

DRAGANA GORDIC/SHUTTERSTOCK

When our lives are wasted chasing and accumulating (and caring for) unneeded possessions, it is our relationships with other people that often suffer the most.



For some, this may mean travel. In fact, many people become minimalist specifically so they can travel more. But there are other experiences that minimalism opens the pathway for: local concerts, cooking lessons, eating out, hiking, new hobbies, volunteering, or local community events.

Minimalism may not force intellectual wellness upon us as it does with emotional wellness. But it does provide opportunity for countless new experiences if we so choose to use our money in that way.

**6. Environmental Wellness:** Making efforts to protect and sustain your surrounding environment to promote health and well-being.

Without a doubt, minimalism contributes to environmental wellness (both as individuals and as a society). As we purchase and consume less, we begin living a life that is better for the environment around us. We are not able to change the actions of our past, but we are able to change the decisions of our future.

And if we remove our excess possessions in a responsible way, we can bring even more good to the environment around us. Our excess

possessions, through local charities, can become a blessing to others as we donate to organizations meeting needs of people in our community. Of course, donating or recycling our excess is not always possible, but the harder we work to discard our possessions responsibly, the more everybody wins.

**7. Social Wellness:** Making meaningful connections with people by taking an active part in your community and maintaining positive relationships.

I was once asked by a journalist if minimalism negatively affected my relationships with other people. I responded, “Absolutely not. Minimalism has had the opposite effect. It has made me a better friend and sparked more meaningful relationships in my life.”

If you know my story, you know that my reason for embracing a more minimalist lifestyle was specifically for the purpose of spending more time with my kids. But minimalism has also brought me closer to my wife and community.

Relationships take time and effort. When our lives are wasted chasing and accumulating (and caring for) unneeded possessions, it is our relationships with other people that often suffer the most.

For some, that may be because we wasted an entire Saturday cleaning a garage rather than playing catch with our son. For others, that might mean missing out on opportunities to spend with friends or loved ones. Will embracing minimalism

automatically make you a better, more positive friend to others? No, absolutely not. But if meaningful relationships are a value of yours, you will be surprised how minimalism frees you to experience more of them.

**Minimalism and Happiness** I am asked from time to time if minimalism leads to happiness.

In short, I believe the answer is, “No. Minimalism does not automatically make a person happier.”

What minimalism does is it frees people to pursue happiness in new ways. It recognizes that lasting happiness and fulfillment can never be found in material possessions. When we remove ourselves from that pursuit, we free our resources to begin pursuing happiness elsewhere. And in that way, minimalism contributes to our happiness, even if it is not our greatest goal in life.

As we reflect on the pillars of human wellness, we are able to see even more how minimalism provides a pathway to happiness and meaning.

While not delivering wellness by itself, minimalism supports and encourages each of the most essential pillars: spiritual, physical, financial, emotional, intellectual, environmental, and social.

*Joshua Becker is an author, public speaker and the founder and editor of Becoming Minimalist where he inspires others to live more by owning less. Visit BecomingMinimalist.com*

## CONNECT TO LEAD

# 'No One Wants to Hear This'

That voice that would leave you silent is the one you need to push back against

SCOTT MANN

One of the most challenging things about my November 2019 TEDx was talking about the depression that I experienced transitioning out of the military.

The darkness and the lack of purpose ultimately landed me in my bedroom closet wondering whether or not I should take my life. That was a very dark, embarrassing moment for me. It's something that I still wrestle with.

Even writing about it has me cringing. I kept telling myself, "No one wants to hear this. No one wants to hear about my challenges with transition or depression. People have enough problems of their own. Go out there and talk about something that lifts them up."

But what I came to understand after I gave that talk was that I wasn't alone and I had impacted thousands of people who now felt that they weren't alone, either. It has shown me the power of leading with our scars. By sharing something that I really didn't think people wanted to hear, I overcame my own mindset of self-sabotage. I overcame my own resistance.

As leaders, we have to fight the mindset that what we have to offer isn't good enough. I see this negative mindset at



Sometimes our struggle is exactly the story someone else needs to hear.

every level of leadership, from mid-level managers to the most senior four-star commanders. Our young people struggle with this mindset daily.

And this is a very dangerous mindset to have. This form of self-sabotage allows us to rationalize using distorted logic to talk ourselves out of our higher selves, our higher purpose, and our higher calling.

What if I had listened to that voice in my head right before my TEDx that said, "No one wants to hear this?" The outcome would have been a lot of people in a very dark place that would not have been afforded the opportunity to realize that they are not alone.

Now, that's just one small example. That's just my experience. But what about you? What about your experience? There are people in your life who need to hear from you. Don't let the mindset of "no one wants to hear this" muzzle your voice. When you have the cour-

age to share your own struggles, it has a profound effect on people.

What I've found through my work with Rooftop Leadership over the years is an astounding number of people from different industries and different disciplines who say, "I'm exactly where you are," or "I was exactly where you are now."

They find a connection because we all suffer from the pain of life. It's something that we all relate to regardless of ethnicity or religion or race. We relate to struggle, to scars.

When you hear that little voice that's telling you, "People don't want to hear this," that's an indicator to go the other way, to lean into it, to press your shoulder up against the dragon and push harder. But, it takes courage.

It takes a different kind of courage to share your scars, to overthrow our instinctual mindset that says, "No one wants to hear this." Because the oppo-

site of fear is not courage. It's love, and love informs courage. It's love of the people you're sharing with, people you want to help. And that is the mindset you need to have.

That's the mindset that will carry you through when your knees are buckling and you feel that bile rising up in your throat. That is the mindset that will enable you to push through that little voice that says, "No one wants to hear this," because the reality is there's someone in a dark place that needs to hear exactly that message. And if you don't give it to them, who will?

*Scott Mann is a former Green Beret who specialized in unconventional, high-impact missions and relationship building. He is the founder of Rooftop Leadership and appears frequently on TV and many syndicated radio programs. For more information, visit RooftopLeadership.com*



The flavor of a food or herb doesn't exist merely for our pleasure (or disgust): It can also foretell what the food will do inside the body.

## TRADITIONAL CHINESE MEDICINE

## Finding Balance With the 'Five Flavors'

CONAN MILNER

Think of a well-balanced meal and you'll probably imagine things like vegetables, protein, and sensible portions. But there is another vital variable: taste.

We naturally want food that tastes good, but learning to choose the right flavor, or combination of flavors, can also improve our health.

In all ancient systems of medicine, flavor plays a pivotal role. The flavor of a food or herb doesn't exist merely for our pleasure (or disgust): It can also foretell what the food will do inside the body.

Think of the pucker-inducing nature of a lemon. Your liver and gallbladder react with a similar spasm when hit with a sour note. This stimulates bile, which, in turn, helps your body work better at breaking down fats. Greasy, oily, or deep-fried foods notoriously make for a sluggish liver. A squirt of something sour lends this overburdened organ a helpful jolt.

According to traditional Chinese medicine, there are five basic flavors, and each one has an affinity for a particular organ. Sweet goes to the digestive organs (spleen, stomach, and pancreas); salty to the water-bearing organs (kidney and bladder); sour to the detoxifying organs (liver and gallbladder); bitter to the circulatory organ

(heart); and pungent (or spicy) to the lungs and large intestine—the assimilation and elimination organs for air and food.

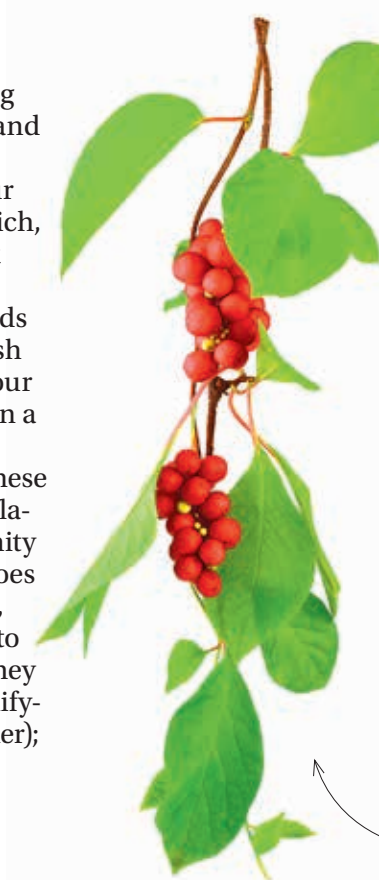
These flavor-organ pairings are based on our body's physiological reactions to taste and the ways our organs operate. This insight is used as a tool to meet the ultimate goal of Chinese medicine: bringing the body into balance. Along with things like meditation, exercise, and acupuncture, food is one of the most accessible ways to find and keep this balance.

The earliest known mention of the five flavors is found in the oldest available text of Chinese medicine, "The Yellow Emperor's Inner Classic." It states that mindful use of the five flavors can ensure a long, healthy life.

However, too much of one taste or not enough of another can result in disease.

For the ancient Chinese, eating the right proportion of flavors is so closely linked to health that they categorized all food according to flavor profile. Some foods, like bananas, are one-note: sweet. But many foods feature two or more flavors—ginseng, for example, is both sweet and bitter. A plum is sweet and sour. One unusual specimen said to contain every flavor is the schizandra berry, known as wu wei zi (five-flavor berry) in Chinese. Today, schizandra is a popular adaptogen because of its ability to stimulate all of the internal organs.

Continued on Page 11



The schizandra berry, also known as wu wei zi (five-flavor seed) in Chinese.

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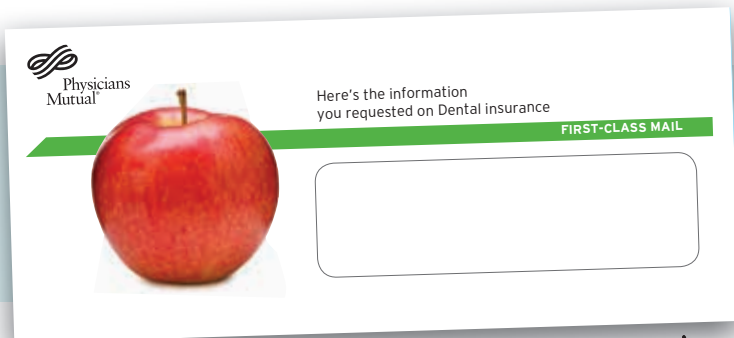
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High in fiber, protein, omega-3 fats, calcium, and iron, walnuts have long been a darling of researchers and other members of the health community.

### FOOD AS MEDICINE

## Walnuts Can Boost Gut and Heart Health

New study affirms the health-boosting powers of this delicious snack

#### MOHAN GARIKIPARITHI

Most snacks aren't doing anything for your health. In fact, most of them contribute to weight gain, poor gut health, and a host of associated problems.

But what are you supposed to do when hunger hits between meals and you're craving that crunch? New research affirms ancient insight and common sense: Grab some walnuts.

Walnuts might do wonders for your gut and heart health. Nuts are already recognized as being a healthy snack to boost energy and satiety. Walnuts in particular, however, might be the superior choice.

High in fiber, protein, omega-3 fats, calcium, and iron, walnuts have long been a darling of researchers and other members of the health community. A new study, however, wanted to see if they were useful in treating specific health conditions.

In a follow-up study to a 2019 experiment in which researchers from Pennsylvania State University found walnuts could lower blood pressure, researchers wanted a closer look. This time they decided to look at gut health.

Researchers used a randomized control trial featuring 42 overweight or obese participants between the ages of 30 and 65. The goal was to see how a daily serving of walnuts might influence gut health.

Each participant was required to follow their standard Western diet for the first two weeks. Then they were randomly assigned to one of three groups: A group that ate a daily serving of whole walnuts; one that ate a diet featuring alpha-linolenic (omega-3 believed to be responsible for some of walnuts health benefits) in the same amount as the walnut group, and a control group taking oleic acid.

Each eating program lasted six weeks and each participant went through one cycle of each. Fecal samples were examined to assess the effects on gut health.

It turned out that eating whole walnuts made a big difference in heart and gut health. They found that when participants ate a three-ounce serving of walnuts per day, they had more diverse, healthier gut bacteria.

Walnuts appeared to enrich gut bacteria populations, particularly those that have a history of health benefits. Some notable strains that were more populous among the nut eaters included roseburia, eubacteria eligens, and butyricoccus.

So next time you're hungry, reach for a handful of walnuts to pick you up. A small serving each day might make a big impact on your overall health.

Mohan Garikiparithi holds a degree in medicine from Osmania University (University of Health Sciences). He practiced clinical medicine for over a decade. During a three-year communications program in Germany, he developed an interest in German medicine (homeopathy) and other alternative systems of medicine. This article was originally published on Bel Marra Health.

When participants ate a three ounce serving of walnuts per day, they had more diverse, healthier gut bacteria.

Walnuts appeared to enrich gut bacteria populations, particularly those that have a history of health benefits.



### TRADITIONAL CHINESE MEDICINE

## Finding Balance With the 'Five Flavors'

Continued from Page 9

#### Flavors in Balance

Sweet is considered the most important flavor, but this doesn't mean Chinese medicine condones a steady diet of doughnuts. Nearly everything that we think of as food—vegetables, grains, and meat—is classified primarily as sweet. Take the time to chew your food thoroughly, and the inherent sweetness will shine through.

To our ancestors, a sweet taste identified safe, easy-to-digest, nourishing foods. And since this flavor is so important to the digestive organs, sweetness predominates our menu.

We naturally crave the comfort of sweetness, but it's easy to get too much of a good thing. The sweet flavor runs the gamut from bland to sickeningly saccharine. While the subdued sweetness of rice or broccoli supports our digestive organs, the intense sweetness of soda and fruit juice can injure them.

According to the "Inner Classic," eating too many sweet foods results in "diseases of the flesh," such as obesity and diabetes.

The other flavors play smaller roles in our diet, yet our bodies need all of them to function properly. However, there is no one-size-fits-all prescription when it comes to taste. While we all have the same basic flavor needs, individual imbalances vary. For example, those with a yang energy deficiency may need more spice in their diet to boost immunity and combat cold or dampness in the body.

When the grounding, nurturing, sweet flavor builds up in the body, pungent herbs such as cayenne pepper, ginger, and mustard can help move things along. That's why stopped-up conditions, like sinus congestion, constipation, or blood clots, can benefit from a pungent punch.

Contemplating the five flavors isn't like calorie counting or any other food metric obsession. There is no math involved. Rather, it's about simple observation: tuning into how you feel, and considering what flavor combinations will put you back on track. There is wisdom in your cravings.

Salt, for example, helps regulate mineral and fluid balance, which also happens to be a major function of the kidneys. That's why Chinese herbal formulas designed to treat kidney problems are often taken with a little salt. The belief is that the salty flavor works as a vehicle to drive the formula to the desired organ. Salt also helps dissolve hardness. That's why salty seaweed has long been a treatment for goiters.

Again, just like with sweet, too much salt also harms the body. The quantity of any flavor is always an important consideration, and so is the person tasting it. According to Paul Pitchford, author of "Healing With Whole Foods: Asian Traditions and Modern Nutrition," salt

must be restricted by those with edema, lethargy, and other "damp" conditions.

Time of year also plays a role in determining what combination of flavors will best suit your body. Each taste is matched with a complementary season. Sour is spring, bitter is summer, sweet is midsummer (harvest time), pungent is fall, and salty is winter. If you're inclined to eat with the seasons, you'll find that many foods naturally feature the taste of the moment.

**The concept of food as medicine is just beginning to take hold in the modern world, but it has always been a fundamental part of traditional cultures.**

With the heat of summer, the sour greens of spring give way to more bitter vegetables. Eating bitter foods helps us stay cool inside and out. In Chinese medicine, bitters are recommended for people who suffer from heat-related symptoms: ulcers, mouth sores, anxiety, and insomnia. Extremely bitter herbs—like wormwood and gentian—are used to treat extremely hot conditions. But less severe symptoms can be treated by eating mildly bitter foods like rapini, dandelion greens, bitter melon, and radichio.

#### Food as Medicine

The concept of food as medicine is just beginning to take hold in the modern world, but it has always been a fundamental part of traditional cultures. In ancient Chinese medicine, diet is essential to healing.

"It's a pillar of Chinese medicine. It's the key," said Cindy Mai, owner of a Chinese herbal company called Root & Spring based in Los Angeles. "You don't wait until you're sick to do something to take care of your body. You nourish it and you treat it right, and it will stay healthy for you."

Mai wants to lead people back to this ancient wisdom with comfort food designed to prevent disease. Her vehicle is soup.

"Just like how Americans view chicken noodle soup, the Chinese view herbal soup as healing to the mind, body, and soul," she said.

Mai sells what could be called ancient soup mixes—various combinations of Chinese herbs that are used to make a



Cindy Mai in the kitchen.

rich, therapeutic broth. The mixes are blended with broth and vegetables to promote detoxification, immunity, and other modern health goals, but they're also meant to taste good. They go back to a time when food and medicine were one.

"If you look at the textbooks of Chinese medicine, these are classic, healing soups that, when cooked and brewed, all their essence comes together," said Mai.

And it's not limited to exotic Chinese herbs—widely available Western ingredients like garlic or cilantro have plenty of benefits, she adds.

"When dishes have a strong scent, like those made with fennel, garlic, or cilantro, that tells me they're going to enliven the spleen and stimulate the appetite. They also refresh the mind," said Mai.

There's a whole world of flavors out there, but many of us keep to a narrow window of familiar tastes. Compared to other cultures, many Westerners tend toward a palate that is predominantly sweet and salty. Sour, and particularly bitter, are often missing from the American diet.

If people can learn to include more of these forgotten flavors into their diet, they may see some of their health problems improve, says Mai.

"I'm often asked how to promote bowel movements, proper digestion, and detoxification. It's because their diets aren't balanced. They're getting too much of one or two flavors. Sour foods and bitter foods naturally have these effects on the body," she said.

### IMMUNITY-BOOSTING HERBAL CHICKEN SOUP

SERVES 4

- 2 1/2 pounds chicken, whole or parts
- 5 dried shiitake mushrooms, rinsed
- 1 carrot, sliced
- 4 slices ginger
- 8 cups water
- 15 grams astragalus (4–5 slices)
- 20 grams codonopsis (4–5 pieces)
- 20 grams wild yam (4–5 slices)
- 20 grams goji berries (about a handful)
- 23 grams red dates (3–4)
- 15 grams dried longan (about 4)
- Salt, to taste
- Cooked noodles, optional, to taste

#### DIRECTIONS

Lightly rinse the Chinese herbs under cool, running water. Combine all the ingredients in a pot. Cover.

Bring soup to a boil. Lower heat and simmer for 1 1/2 hours on stovetop, or 3 or more hours in a slowcooker. The longer the soup cooks, the more pronounced the herb flavors will be.

Remove chicken from the soup. Reserve for another recipe, or shred the meat and add back to the soup. Add salt to taste. For a heartier meal, add cooked noodles. Serve soup on its own or as part of a multicourse meal.

Recipe courtesy of Root & Spring

#### THE FIVE FLAVORS

FLAVOR	ORGAN	SEASON
Sour	Liver, Gallbladder	Spring
Bitter	Heart, Small Intestine	Summer
Sweet	Spleen, Stomach, Pancreas	Late Summer
Pungent	Lung, Large Intestine	Fall
Salty	Kidneys, Bladder	Winter



According to Chinese medicine, the flavor of a food or herb doesn't exist merely for our pleasure (or disgust); It can also foretell what the food will do inside the body.

# 'I Feel Like I'm In Jail': Hospital Alarms Torment Patients

As alarms proliferate, hospitals are working to sort through the cacophony that can overwhelm staff



MELISSA BAILEY

When Kea Turner's 74-year-old grandmother checked into Virginia's Sentara Virginia Beach General Hospital with advanced lung cancer, she landed in the oncology unit where every patient was monitored by a bed alarm.

"Even if she would slightly rollover, it would go off," Turner said. Small movements—such as reaching for a tissue—would set off the alarm, as well. The beeping would go on for up to 10 minutes, Turner said, until a nurse arrived to shut it off.

Tens of thousands of alarms shriek, beep, and buzz every day in every U.S. hospital. All sound urgent, but few require immediate attention or get it. Intended to keep patients safe alerting nurses to potential problems, they also create a riot of disturbances for patients trying to heal and get some rest.

Nearly every machine in a hospital is now outfitted with an alarm—inflation pumps, ventilators, bedside monitors tracking blood pressure, heart activity, and a drop in oxygen in the blood. Even beds are alarmed to detect movement that might portend a fall. The glut of noise means that the medical staff is less likely to respond.

Alarms have ranked as one of the top 10 health technological hazards every year since 2007, according to the research firm ECRI Institute. That could mean staff were too swamped with alarms to notice a patient in distress, or that the alarms were misconfigured. The Joint Commission, which accredits hospitals, warned the nation about the "frequent and persistent" problem of alarm safety in 2013. It now requires hospitals to create formal processes to tackle alarm system safety, but there is no national data on whether progress has been made in reducing the prevalence of false and unnecessary alarms.

The commission has estimated that of the thousands of alarms going off throughout a hospital every day, an estimated 85 percent to 99 percent do not require clinical intervention. Staff, facing widespread "alarm

fatigue," can miss critical alerts, leading to patient deaths. Patients may get anxious about fluctuations in heart rate or blood pressure that are perfectly normal, the commission said.

And bed alarms, a recent arrival, can lead to immobility and dangerous loss of muscle mass when patients are terrified that any movement will set off the beeps.

## An 'Epidemic Of Immobility'

In the past 30 years, the number of medical devices that generate alarms has risen from about 10 to nearly 40, said Priyanka Shah, a senior project engineer at ECRI Institute. A breathing ventilator alone can emit 30 to 40 different noises, she said.

In addition to triggering bed alarms, patients who move in bed may set off false alarms from pulse oximeters, which measure the oxygen in a patient's blood, or carbon dioxide monitors, which measure the level of the gas in someone's breath, she said. Shah said she has seen hospitals reduce unneeded alarms, but doing so is "a constant work in progress."

## 'Cry Wolf Phenomenon'

Maria Cvach, an alarm expert and director of policy management and integration for Johns Hopkins Health System, found that on one step-down unit (a level below intensive care) in the hospital in 2006, an average of 350 alarms went off per patient per day, from the cardiac monitor alone. She said no international standard exists for what these alarms sound like, so they vary by manufacturer and device. "It's really impossible for the staff to identify by sound everything that they hear," she said. The flood of alarms creates a "cry wolf phenomenon," Cvach said. The alarms are "constantly calling for help. The staff look at them. They say 'that's just a false

alarm"—they may ignore the real alarm."

Bed alarms, for example, are meant to summon nurses so they can supervise patients to walk safely. But research has shown that the use of alarms doesn't prevent falls. Nursing staff are often stretched thin and don't reach the bedside before a patient hits the ground. Meanwhile, patients may feel immobilized at a time when even a few hundred steps per day could significantly improve their recovery. Immo-

bility in the hospital can create other problems for patients, leaving them with often irreversible functional decline, research has shown.

Bed alarms have proliferated since 2008 when the Centers for Medicare and Medicaid Services declared hospital falls should "never" happen and stopped paying for injuries related to those falls. After that policy change, the odds of nurses using a bed alarm increased 2.3 times, according to a study led by Dr. Ronald Shorr, director of the Geriatric Research, Education and Clinical Center at the Malcolm Randall Veterans Affairs Medical Center in Gaines-

ville, Florida. The alarms have become a standard feature in new hospital beds. But Shorr noted that, in contrast, bed alarms are being removed from other settings: In 2017, CMS began discouraging their widespread use in nursing homes, arguing that audible bed or chair alarms may be considered a "restraint" if the resident "is afraid to move to avoid setting off the alarm."

Barbara King, an associate professor at the University of Wisconsin at Madison School of Nursing, who has interviewed patients about their experience with bed alarms, said patients find them "very restrictive."

"They're loud. For some patients, it's frightening. They don't know where it's coming from. It's a source of irritation," she said. "For some patients, they won't move."

Seeking Solutions Hospitals have turned to "clinical alarm management," bringing in consultants to figure out how many devices have alarms, which go off most frequently and which are the most important for nurses to respond to. Hospitals are also installing sophisticated software to analyze and prioritize the constant stream of alerts before relaying the information to staff members.

The U.S. market size for the management of clinical bed alarms, in hospitals and other settings, has grown from \$21.4 million in 2016 to \$37.4 million in 2018, according to an analysis by MarketsandMarkets. The firm projects the market size will quadruple to \$155.5 million by 2023.

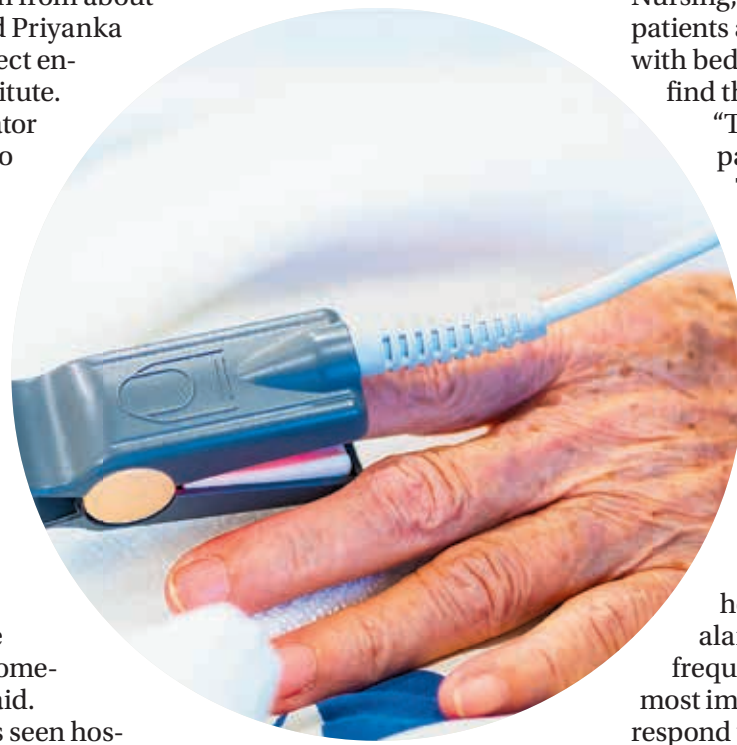
For ventilators, it estimates the U.S. market for clinical alarm management will quadruple from \$19.9 million in 2018 to \$80.2 million by 2023. In Virginia, Kea Turner's grandmother grew so frustrated with her bed alarm that she gave up on sleeping and stayed up late watching television during her hospital stay, said Turner, a researcher at the Moffitt Cancer Center in Florida

“They say ‘that’s just a false alarm’—they may ignore the real alarm.”

Maria Cvach, an alarm expert and director of policy management and integration for Johns Hopkins Health System

PRESSMASTER/SHUTTERSTOCK

PHOTO: GETTY IMAGES/ALAMY



Alarms have ranked as one of the top 10 health technological hazards every year since 2007.

who studies, among other things, patient safety. Many hospitals, she said, don't seem to have evidence-based strategies to reduce falls and, "in the absence of those, they're using things like bed alarms," she said, which "is not necessarily reducing falls risk and might actually be causing more harm."

Dr. Joel Bundy, chief quality and safety officer at Sentara Healthcare, a not-for-profit health system that includes the Virginia Beach hospital, said nurses in that oncology unit decided to use bed alarms for all patients at night because of a high number of falls. But he said Sentara typically employs bed alarms only for patients who are deemed at a high risk of falling, based on a questionnaire developed at Johns Hopkins.

Meanwhile, some hospitals are trying to quiet the noise. By customizing alarm settings and converting some audible alerts to visual displays at nurses' stations, Cvach's team at Johns Hopkins reduced the average number of alarms from each patient's cardiac monitor from 350 to about 40 per day, she said.

But that's just one device in one unit; other devices and types of care require different customized settings. Still, Cvach said, "a lot more can be done."

Dr. Fred Buckhold, an internist at SSM Health St. Louis University Hospital in Missouri, said one patient's experience spurred his hospital to reduce reliance on bed alarms. A 67-year-old woman was placed on a bed alarm while being treated for a collapsed lung, said Buckhold, who wrote about the case in JAMA.

"I feel like I'm in jail," she protested, Buckhold said. "I can't sit up or go to the bathroom without them coming after me."

"Did the bed alarm help her at all?" Buckhold reflected in a recent interview. "It just made her want to kill us."

Melissa Bailey is a Boston-based correspondent on the KHN enterprise team, focusing on aging and dying. This article is republished from Kaiser Health News.

# To Die Well, We Must Talk About Death Before the End of Life

Honoring end-of-life wishes is only possible if people have conversations about what we want

TAMARA SUSSMAN

I would like to tell you an all-too-familiar story. It begins with a long-term care home resident, Laura, who has multiple chronic conditions and gets an infection that doesn't get any better.

Her health has been declining for months, but no one has talked to her about her preferences for end-of-life care. In the absence of that knowledge, she is sent to the hospital where she undergoes stressful tests.

The story ends with Laura dying in the hospital, alone and frightened. Her family is traumatized, and so are the staff who have cared for her over the past year. It's a simple fact that 100 percent of us will die. Conversations about our future health care and what's important to us—called advance care planning—have shown distinct benefits.

In fact, research shows that as many as one-third of seriously ill, hospitalized older people are receiving invasive treatments they don't want at end-of-life because no one has talked to them about their wishes for future care. This is true even in long-term homes, where the average lifespan is less than two years.

## Pamphlets Help Stimulate Conversation

How do we change those statistics and give our older people the care they want—and deserve? My team's research has focused on answering that question over the past six years.

We recently developed a series of pamphlets and distributed them in long-term care homes to try to get the conversation started.

The pamphlets were disease-specific (for example, focusing on dementia), and included information about life-limiting illnesses, what to expect, and tips for talking about wishes for the future.

In our study, 84 percent of residents and families who received a pamphlet felt encouraged to think about their future care and 70 percent felt clearer about what to talk about.

## Planning Death Is a Great Relief

Moving from thinking to a discussion, however, was a different matter. Family members worried that bringing up the subject would destroy hope. Residents thought they should protect their families from thinking about their death.

And many long-term care home staff indicated that they did not feel trained to participate in these conversations—in fact, only 21 percent handed out the pamphlets, preferring instead for families or residents to take them from a display board.

Encouragingly, the 56 percent of residents and families who did have conversations after receiving a pamphlet expressed great relief. A typical response from families was: "It makes it easier for me right now because now I don't have to guess."

## Care Home Staff Need Training

That means we need to clarify roles and provide the necessary training to support long-term care home staff, especially those who develop strong relationships with residents.

North America has an aging population, and thanks to technological advances, more of us are living longer with frailty and chronic conditions. We need to find ways to communicate what's important to us so that we receive the care that's right for us.

I would like to be able to tell you a different story. It begins with a care home resident, Sam, who gets an infection and is not getting better, even with antibiotics.

Sam has been living with multiple chronic conditions for some time and his family knew frequent infections could be a sign that the end of life was near. The family also knew that he wanted to die in the long-term care home and not in a hospital—because they had talked about this when he was healthier and could communicate his desires.

Sam dies, but with dignity and in peace and, most importantly, in keeping with his own wishes.

Tamara Sussman is an associate professor at the school of social work at McGill University in Canada. This article is republished from *The Conversation*.

on their families. However, due to a lack of end-of-life planning, that is not what happens.

American doctors say they know these conversations are important but half of them don't know what to say, and less than a third say they have had training on talking with patients and their families about end-of-life care, according to research conducted for the John A. Hartford Foundation.

Clearly, talking about death and the end of life is still taboo around the world.

Informational resources such as our pamphlets can be a great first step in helping all parties gain clarity on what to be thinking and talking about. But because residents and families tend to protect one another, staff need to take more active roles in supporting such conversations.

## Most of those surveyed said they would prefer to die a natural death at home without being a burden on their families.

That means we need to clarify roles and provide the necessary training to support long-term care home staff, especially those who develop strong relationships with residents.

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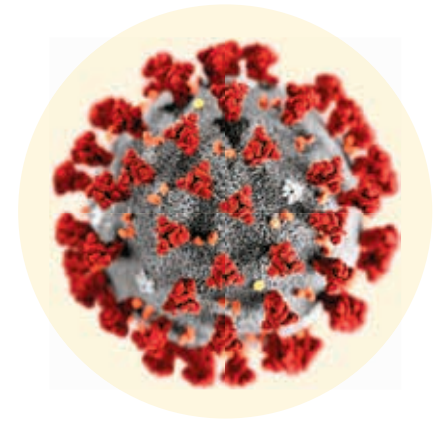
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We need to find ways to communicate what's important to us so that we receive the care that's right for us.



PHOTO: GETTY IMAGES/ALAMY

# Concerned about Coronavirus? Tame Inflammation to Help Reduce the Risk



The overall strength of your immune system plays a major role in the susceptibility and severity of viral illnesses like the flu and coronavirus.

PUBLIC DOMAIN

DEVON ANDRE

Over the past few weeks, there has been growing concern about a coronavirus outbreak. Are you at high risk?

Probably not. Although a handful of North American cases have come to light in the past week, the virus is largely concentrated in Wuhan, China. Other countries in the Far East have reported cases, but that is a long way from here.

At this point, here in America, you have a far greater likelihood of catching the flu. As minor as the flu sounds, it can be very serious.

The overall strength of your immune system plays a major role in the susceptibility and severity of viral illnesses like the flu and coronavirus. So far, reports indicate that coronavirus is taking the lives of the elderly, who generally have a number of health conditions that tax the immune system.

One major influencing factor on immune health and your likelihood of contracting and fighting illness is inflammation. Low-grade, or chronic, inflammation takes up valuable resources from your immune system, resulting in less protection and functionality when an infection does hit.

The best way to reduce your chances of succumbing to a viral illness, therefore, is to focus on building a healthy immune system by limiting systemic inflammation. Some immune-boosting practices include:

- Getting seven-to-nine hours of sleep each night
- Maintaining a healthy weight
- Eating plenty of fruits and vegetables (minimum four servings per day of each)
- Limiting intake of processed, refined, and high-sugar foods
- Drinking adequate fluid (water, tea, coffee, etc.)
- Getting regular exercise/activity
- Limiting alcohol
- Managing stress
- Not smoking

Fruits and vegetables are extremely important for limiting inflammation and promoting immunity. They are nutritionally dense, great sources of valuable antioxidants that equip your cells to fight damage, and they also contribute to weight management.

In addition to these lifestyle factors, you may reduce your risk for flu or other bacterial and viral infections by paying attention to the following:

- Regularly wash your hands with soap and water for at least 20 seconds.
- If you can't immediately wash your hands after touching high-traffic or public surfaces, use alcohol-based sanitizers.
- Avoid touching your mouth, eyes, or nose with unclean hands.
- Avoid close contact with sick people.

Unless you've recently been to Wuhan, China, or have been in close quarters with someone that has, you're at very low risk for coronavirus. If you have a compromised immune system, or other health issues, you may however want to pay more attention to the flu.

Take the above steps to limit systemic inflammation and build a healthy immune system. Doing so can greatly affect your risk and response to illness.

Devon Andre holds a bachelor's of forensic science from the University of Windsor in Canada and a Juris Doctor from the University of Pittsburgh. Andre is a journalist for *BelMarraHealth*, which first published this article.

# Wedded Bliss or Rocky Road?

## What's the State of Your Union?

OLENA YAKOBCHUK/SHUTTERSTOCK



Marriage takes work and it's best to put it in early rather than try to fix things when it's too late

JONI RAVENNA SUSSMAN

With Valentine Day just behind us, what better time to take inventory of what is arguably the most important relationship of your life: your marriage. In India, many marriages are still arranged. Parents pick a suitable mate and then in most cases the union begins coolly but grows into a blaze of passion over time. In the United States, it's often just the opposite, causing us to sometimes question whether we're going about it all wrong.

Dr. Evan Fewsmith, a Southern California-based marriage counselor practicing for 20 years, has helped hundreds of couples, and he's noticed a recurring theme: Spouses don't end up together by chance.

"We pick our partners with exquisite accuracy," says Fewsmith. "We're always playing out the roles that were assigned to us in our nuclear family. But it is possible to re-write that role."

Often times we carry that past into our present relationships.

As a way of avoiding, or at least understanding, the conflicts that arise when couples unconsciously interact in hurtful ways we learned growing up, Fewsmith advises that clients create something he calls a "geneogram." It looks like a family tree, but rather than tracing genealogy, it maps out maladaptive patterns.

"We look at values, philosophies, paradigms and emotional temperatures of each family," he says.

Such a practice can make it easier to see our own behaviors, because while it is often hard to acknowledge our own shortcomings, it is easier to see them in our parents. Recognizing we share these behaviors can be a major step toward changing them.

We may also learn certain character traits but be unaware that they are something markedly different from our partner.

Fewsmith describes what he terms "hot" and "cool" families. "Neither is good or bad, but if someone from a very demonstrative, loud family with a high emotional temperature ends up with someone from a 'cool,' reserved family, that person is going to feel neglected."

Conversely, Fewsmith explains that someone from a "cool" family will feel assaulted by the spouse from a "hot" family.

Being aware of these differences can make it easier not to take certain things personally and instead recognize that this is just a difference in character that we or our spouse learned growing up.

### Marriage Counseling

For those that may not be as proactive about looking inside, or may struggle with healthy communication with their spouse, it can help to involve a skilled third party when persistent problems threaten our marriage.

Anastasia Stern, a mother of three in Beverly Hills, comes from a "hot" family. Her parents divorced by the time she was 2. Because of this experience, she says she's a big believer in marriage therapy and therapy in general.

"It's the holistic part of a good marriage and the most important thing you can do for your relationship," she says.

Stern believes therapy should not be stigmatized as a last resort for a crumbling marriage, but rather something that can help a marriage stay healthy and thrive.

"Harvey and I are madly in love and it's really a gift to have that 19 years later," she says. "But we work at it."

Having had great success over the years with therapy herself and having witnessed the breakthroughs her father and his second wife achieved through ongoing marriage counseling, Anastasia convinced her then-boyfriend to try something new. Today the couple still checks in with their counselor every few months.

"When I'm in therapy with Harvey and I get into my angry, [expletive] mode—which is just a defense mechanism—he responds badly," she says. "But when the therapist helps strip away those layers of defense and I become more vulnerable, Harvey's much more likely to hear and to understand what I'm saying." And she learned another trick in therapy: to communicate her feelings without putting the responsibility on her spouse.

"I stop saying, 'When you do this, I feel that,'" she explains. "Instead I say, 'When I see you do this, I make myself anxious because ...'"

**Being aware of our differences can make it easier not to take certain things personally and instead recognize that this is just a difference in character that we or our spouse learned growing up.**



KODJALIM/SHUTTERSTOCK

**“Don't wait until your marriage has reached the crisis stage before seeking help.”**

Dr. Evan Fewsmith, a Southern California-based marriage counselor practicing for 20 years

**Dr. Evan Fewsmith, a Southern California-based marriage counselor practicing for 20 years, has helped hundreds of couples, and he's noticed a recurring theme: Spouses don't end up together by chance.**

### It's Not Always About You

Oftentimes, we can interpret things our spouse does as having an intention that just isn't there. For example, you might hear your spouse making what seems like a lot of noise in the kitchen and think they are mad because you didn't wash the dishes. But it could just be that the TV isn't on and so you hear those regular noises more loudly.

Other examples may be habits of communication or certain behaviors that can easily be misinterpreted.

Fewsmith warns that you can't personalize everything your partner does, especially when they were doing those things long before your relationship even began.

And when a fight does flare-up, it's important to ensure calmer heads prevail when trying to resolve it.

"It's important not to engage in any further dialogue once the 'fight or flight' response has been triggered by something hurtful your partner has said or done," Fewsmith says.

Our brain can flood the nervous system with strong chemicals in the face of a perceived threat, which can directly affect our rationality.

"And just like the bottle of Nyquil says 'Don't drive or operate heavy machinery' on the back, don't try to explain yourself or try to figure it all out once emotional reactivity has been triggered. Instead, self-soothe. Take a walk or a bath. You're high, you need to take care of yourself."

### Sometimes You Just Know

Of course, every once in awhile, you will find a couple free from childhood issues they are unconsciously bringing into their relationship. Instead, they come together from an abundance of commonality.

Such is the case with Leora and Lance Fogel. Originally from South Africa, Leora came to the United States when she was just 10. Then, on Sept. 21, 1985, at age 17, she attended a family get-together some South African friends were throwing. There she met Lance, who was also from South Africa.

"When I first saw him, I knew," she remembers. "He was gorgeous, on the swim team, with a nice tan."

Leora had just started attending UCLA when she decided to call him. They had their first date shortly thereafter.

Today, the Fogels are as much in love as the day they first met.

"Neither of us had divorced parents so we've had good role models and we love the same things," she says.

And she has one important bit of advice. "Never go to bed angry. In 24 years of marriage, we've slept in the same bed every night except maybe six times."

Strong marriages like the Fogels' and the Sterns' take effort to nurture. A healthy marriage is not something to take for granted.

Don't wait until your marriage has reached the crisis stage before seeking help, warns Fewsmith.

"By that time, there's so much emotional reactivity and so many hurtful things done or said that therapy's efficacy is limited," he says. "Forgive the analogy, but like cancer, if you detect it early, there's a much better chance of survival."

One thing is certain, whether ailing or healthy, every marriage can benefit from a thoughtful gesture like a rose with a sweet note of appreciation, whether it's Valentine's day or not.

Joni Ravenna Sussman is a freelance writer specializing in health and wellness. Her articles have appeared in dozens of national and regional publications over the years. She is also a playwright and TV writer. Contact her at [Joni.Ravenna@gmail.com](mailto:Joni.Ravenna@gmail.com)

WAYHOME STUDIO/SHUTTERSTOCK

THINK WELL WORK WELL

# Understand Your Feelings and How to Deal With Them

Control the flow of your thoughts by taking an optimistic route toward the destination of positive feelings



JEFF GARTON

Although we experience feelings constantly, most people have a sketchy understanding of this subject at best. This is why Ted Talks have attracted millions of YouTube viewers who want to learn how to deal with or prevent their unpleasant feelings.

If you were to condense those Ted Talks into just one sentence that simplifies how your brain's limbic system affects how you feel, here's what it would say: Your thoughts about the events in your life arouse emotions that when processed by your body, provoke the feelings you experience.

This explanation is based on the research of Antonio Damasio, a doctor and one of America's leading neuroscientists. He suggests that emotions precede feelings and are distinct from them. But they're closely related. For example:

- Emotions are physical (neurochemicals) and usually last for several seconds. They're associated with brain activity and can be objectively measured which makes them more predictable than feelings.
- Feelings are not physical. They're associated with how your mind experiences an emotion. They can be confusing and persist for some time based on the stories you tell yourself about the past, present, and unknown future.
- Although emotions provoke feelings, your feelings can also trigger a thought or memory that arouses emotion. If you're not careful, this can result in a recurring cycle of misery where unwanted emotions and unpleasant feelings feed on one another.

Realize that what you've thought about most often has created a neural circuit in your brain that already has an emotion attached. It's waiting for a thought to arouse it. So just the memory of a problem that pops into your head can release the queued-up emotion. This expedites its processing and

without you realizing what's happening, it causes how you unexpectedly feel sad or unhappy.

Researchers from the Netherlands, Matteo Diano, and Allissia Celeghin found that emotion can also be aroused non-consciously or without thinking. Like when driving and a child suddenly runs into the street. You're jolted by the emotion of surprise and slam on the brakes without having time to think. What happens they believe, is that a visual message bypasses how emotions are normally created and it's acted upon by the brain (amygdala) to arouse the emotion of surprise. Then afterward you begin to experience the provoked feeling of relief for not having harmed the child.

Psychologist Joan Rosenbergsays that some of your feelings might last only a few minutes. If they last longer, it's because you're continuing to arouse more of the same emotions that initially sparked the feeling. You're either unaware of your thoughts or not supervising them. It's like outsourcing your emotional self-control and increasing the risk of experiencing an unpleasant feeling.

Just remember that how you feel, be it sad, helplessness, shame, anger, disappointment, embarrassment, or frustration, isn't caused by the events in your life. You cause these feelings yourself by how you think about those events. That you have the ability to choose your thoughts enables you the means to prevent unpleasant feelings. Choose thoughts that give your body positive emotions to think positively when you can. But when this isn't possible or appropriate, don't allow yourself to think negatively. Instead, Seligman suggests that you think non-negatively. You do this by thinking realistically about your situation while infusing greater optimism into the flow of your thoughts.

Like a stream of water, your stream of thoughts flow nonstop regardless if you want them to or not (at least for people that haven't mastered the extremely challenging process of stemming this flow). But since you own your thoughts, you have the option to map out the general route of their flow toward

misery. But according to Caroline Leaf, a communication pathologist and cognitive neuroscientist, there is a way you can break free from this self-destructive way of thinking.

Leaf suggests that because your brain is constrained by its existing neural circuits and queued-up emotions, this can cause your thoughts to become habitual. But your brain can change this habit with input from your mind. She says that by thinking intentionally with your mind, you can train or rewire your brain to avoid habitual thinking that causes the cycle of misery. You create new neural circuits and queue-up better emotions.

Psychiatrist and psychoanalyst Norman Doidge refers to this restructuring of your brain as neuroplasticity. He says that in response to how you stimulate your brain, it can change its own structure and how it functions to improve both your health and mental abilities, including how you think and feel as a result.

But when attempting this, says psychologist Martin Seligman, it helps that you become increasingly aware of the thoughts and beliefs that arouse your emotions and how they make you feel. Then when attempting to think intentionally, don't try to think positively when it's not always rational to do so.

The rational way to deal with and prevent unpleasant feelings is to think positively when you can. But when this isn't possible or appropriate, don't allow yourself to think negatively. Instead, Seligman suggests that you think non-negatively. You do this by thinking realistically about your situation while infusing greater optimism into the flow of your thoughts.

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**Just remember that how you feel, be it sad, helplessness, shame, anger, disappointment, embarrassment, or frustration, isn't caused by the events in your life.**

**Rule 1:** I direct the flow of my conscious and intentional thoughts toward the destination of positive feelings and the avoidance of negative ones.

**Rule 2:** I choose to take the optimistic route of thinking non-negatively as often as I can so to comply with rule No. 1.

**Rule 3:** When a pessimistic thought flows into my head and I become aware of it, I put on the brakes and continue to comply with rule No. 2.

**If you don't own your thoughts and are not responsible for supervising them or your feelings, who is?**

Your thoughts about the events in your life arouse emotions that when processed by your body, provoke the feelings you experience.

Jeff Garton is a Milwaukee-based author, certified career coach, and former HR executive and training provider. He holds a master's degree in organizational communication and public personnel administration. He is the originator of the concept and instruction of career contentment.





You feel like you don't have time because, with that mindset, you are not in control of your time.

## CONNECT TO LEAD

# Too Busy to Succeed

Don't fail to fulfill your opportunities by pushing off preparation

SCOTT MANN

It was the morning of a major leadership conference and I was there early to help the presenters prepare. The stakes for this leadership conference were incredibly high. The presenters only had one day to set the tone for the company's leadership for the upcoming year, so the company president was adamant about everyone being prepared for their talks.

One of the senior vice presidents, however, didn't think that was necessary. She was a very confident woman, very competent, very technically sound, and so she didn't think she needed to prepare.

She thought she had it all figured out.

All she really thought she needed to do was test-fire the slides

from her 60-slide presentation. So she stood up on that stage and clicked through them, one slide at a time. Then she walked off the stage and she was done. She was "too busy" to do anything more than that.

**This is the mindset that keeps us perpetually locked in a 'fight, flight or freeze' state all day, every day.**

When it was time for her to come back up and give her talk to the audience, you can imagine what happened. She got up there and

started stammering and stuttering through her slides. She was obviously unprepared. Within seconds, I watched every person in that audience lose interest and start looking at their phones.

She lost them—she lost the attention of the leaders she was depending on to carry her message and vision down through the entire company.

This is what happens when we think we're too busy to do the work. The "too busy" mindset is a form of self-sabotage that allows us to be dominated by the rat race. We're all running so hard these days. It's the grind. The stakes are high and the pressure is even higher. We're constantly taking care of everyone else, except ourselves. It's easy to feel overwhelmed and easier to repeat the familiar mantra "I'm too busy." Then we let that mindset dictate the tempo of our day. This is the

mindset that keeps us perpetually locked in a "fight, flight or freeze" state all day, every day.

The operational tempo of the rat race will dominate you if you have a mindset that allows it to. You feel like you don't have time because, with that mindset, you are not in control of your time. I can't tell you how many of the senior executives I coach say the same thing to me. "I just don't have time for this right now. I'm too busy to train for this."

Combating this mindset requires deep reflection. Reflect on your goals. What are the tracks you want to leave behind? What's the impact you want to have in your family, community, and business? What big events or opportunities are coming up? Do you want them to be successful? Write your goals down, put them where you can see them, and then share them with someone that's close to you so that you speak them into the world. It's too easy for us to fall victim to the "too busy" mindset when our goals are not clearly defined.

Once those goals are set, you need to train on what it takes to meet those goals. That requires you to stop telling yourself that

you're too busy to train. Those words need to be removed from your vocabulary. Tell yourself you have the time and then make the time to do what it takes to actually prepare. You are not "too busy." You are in control of your calendar and your time. And if you're not in charge of your calendar, strive to get there.

If you're going on the stage that morning, prioritize time for the rehearsals. If you're going into a high stakes negotiation for a deal, make time to rehearse the negotiation.

It's on you to find the time to show up and do what's necessary to win. Commit to changing your mindset from "too busy" to "I have time" and do what you have to do to be relevant and impactful to those that you serve.

We don't have time for anything else.

*Scott Mann is a former Green Beret who specialized in unconventional, high-impact missions and relationship building. He is the founder of Rooftop Leadership and appears frequently on TV and many syndicated radio programs. For more information, visit RooftopLeadership.com*

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