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WEEK 46, 2020

The Impact of Loneliness

As social isolation takes its toll, the health effects of loneliness come into sharper focus

CONAN MILNER

Most of us have been under some level of lockdown for a better part of a year, resulting in a drastic drop in our social activities. These restrictive measures are intended to reduce the spread of a potentially deadly illness, but could they be breeding another problem?

Compared to an infectious pandemic, loneliness seems more like an inconvenience than a legitimate concern. But research finds that loneliness can be hard on both the mind and body. In addition to the anxiety and depression that commonly characterizes the social isolation of loneliness, studies find that it also poses a higher risk for heart disease, high blood pressure, stroke, obesity, a weak-

ened immune system, and neurodegenerative diseases such as Alzheimer's.

Youth are often highlighted among those whom loneliness impacts most during this pandemic. In July, the Center for Disease Control (CDC) Director Robert Redfield said that suicides and drug overdoses have far surpassed the death rate for COVID-19 among high school students.

Licensed clinical psychologist Dr. Jodi DeLuca has seen many adolescents in her practice struggling with restrictions due to the lockdown.

"It's because that age is all about socializing," DeLuca said. "They're very depressed."

Continued on Page 6



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A study found that bitter orange and lavender significantly improved the mean sleep score of the first group compared with the second one.

Benefits of Bitter Orange Essential Oil for Anxiety and Sleep

Research-backed benefits on this common essential oil suggest multiple uses with little risk

The rind of bitter orange (C. aurantium) is used to create an important essential oil with benefits that seem particularly helpful for those suffering the stress of these trying times.

Essentials oils have been known since time immemorial for their wealth of health and therapeutic uses. These liquids contain many of the extracted properties of the plants used to create them, particularly scent.

Inhaling this essential oil is effective in reducing anxiety and stress levels in patients undergoing coronary angiography.

Bitter orange (Citrus aurantium) essential oil is popular for its ability to address anxiety and sleep difficulties—issues that are often rooted in a barrage of diet, lifestyle, and stressrelated factors. While this oil may be used to flavor drinks and liquors, it has also garnered interest for its antimicrobial activity.

This essential oil is usually extracted by cold-pressing the peel. It has a yellowish orange to greenish orange hue, thin consistency, and smells like a cross between sweet orange oil's sweetness and grapefruit oil's slight

Bitter Orange and Anxiety

The results of a single-blind, randomized controlled trial published earlier this year found inhaling this essential oil is effective in reducing anxiety and stress levels in patients undergoing coronary angiography.

In the trial, 80 subjects in Iran were randomly divided into two groups: a group that inhaled bitter orange essential oil for 15 to 20 minutes about an hour before angiography and a control group that inhaled distilled water. Their Spielberger State-Trait Anxiety Inventory (STAI) results and vital signs were recorded before and 20 minutes after the intervention.

The anxiety scores and vital signs of the essential oil group—including blood pressure and pulse rate—significantly decreased, while the control group showed no significant change in either area.

In a 2015 trial, researchers tested bitter orange alongside lavender in resolving anxiety in postmenopausal women. Bitter orange significantly reduced anxiety scores of postmenopausal subjects compared with the control group, with no significant difference in performance from the lavender group.

Bitter orange also offered the same benefit and an anxiolytic effect to patients with chronic myeloid leukemia,

who had reduced signs and symptoms linked to anxiety.

Bitter Orange and Sleep

A similar trial in 2015 compared the effects of lavender and bitter orange on sleep quality among postmenopausal women. The first group received 500 milligram (mg) capsules of bitter orange or lavender flower powder, while the second group had 500 mg capsules

Using the Pittsburgh Sleep Quality Inventory, the study found that bitter orange and lavender significantly improved the mean sleep score of the first group compared with the second one. The results suggested that both can be used for enhancing sleep quality in that cohort of women.

Research backing the efficacy of bitter orange essential oil supports the following therapeutic uses:

- Potential healing of the gastric mucosa Management of pain and inflam-
- Antimicrobial and antioxidant properties, serving as a sound ingredient source for food and medicine Reduced fatigue, such as in hemodi-
- alysis patients • Improved symptoms of premenstrual

Safety Value

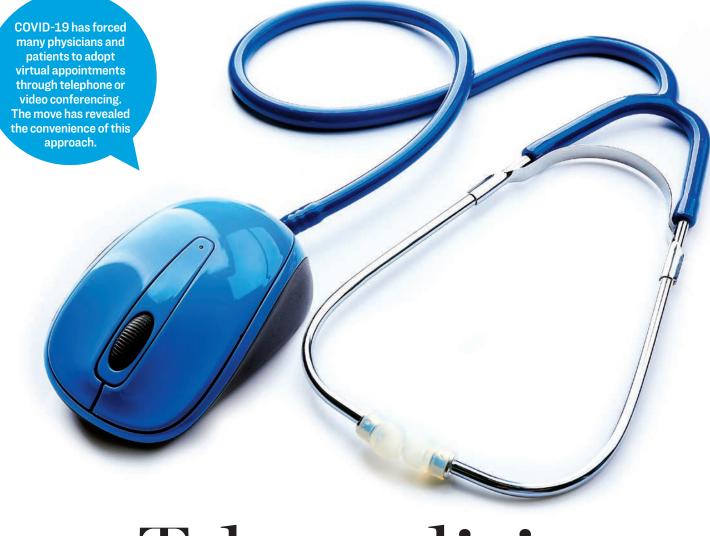
Assessments of bitter orange over the years vouch for the overall safety of the extract, both in food and dietary supplements at commonly used doses. Reviewing the potential dangers of bitter orange extract, a study concluded:

"The data indicate that based on current knowledge, the use of bitter orange extract and p-synephrine appears to be exceedingly safe with no serious adverse effects being directly attributable to these ingredients."

While essential oils can be greatly beneficial to your health, it's always best to be cautious. Always dilute them properly, diffuse them regularly and consume them only under the guidance of a knowledgeable holistic health care practitioner.

If you're looking for a natural, costeffective way to solve your anxiety and sleep problems, then essential oils are worth exploring for their potential to be part of your arsenal of healing tools. The GreenMedInfo.com database is a good place to start with 287 abstracts of essential oils research.

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Telemedicine Surge Likely to Remain

Benefits of telemedicine reveal themselves as doctors and patients forced to new form of appointments

even avoiding

missing work.

a loss in

wages for

BERNARD J. WOLFSON

As COVID-19 took hold in March, U.S. doctors limited in-person appointments—and many patients avoided them—for fear of infection. The result was a huge increase in the volume of remote medical and behavioral health visits.

Doctors, hospitals, and mental health providers across the country reported a 50- to 175-fold rise in the number of virtual visits, according to a report released in May by the consulting firm McKinsey & Co.

The COVID-19-fueled surge has tapered off as patients venture back to doctors' offices. But medical professionals and health experts predict that when the pandemic is over, telehealth will still play a much larger role than before.

Studies show patient satisfaction with telehealth is high. And for physicians who previously were skeptical of remote care, necessity has been the mother of invention.

"There are still a few doubting Thomases, but now that we've run our practices this way for three months, people have learned that it's pretty useful," said Dr. Joseph Kvedar, president of the American Telemedicine Association and a practicing dermatologist who teaches at Harvard

For patients, the advantages of telemedicine are clear: You typically can get an appointment sooner, in the safety of your own home or workplace, saving time and money on gas and parking—in some cases, even avoiding a loss in wages for missing work.

Medical School in Boston.

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James Wolfrom, a 69-year-old retired postal executive in San Francisco, has had mostly virtual health care appointments since the pandemic started. He particularly appreciates the video visits.

"It's just like I'm in the room with the doctor, with all of the benefits and none of the disadvantages of having to haul my body over to the facility," said Wolfrom, who has Type 2 diabetes. "Even after the pandemic, I'm going to prefer doing the video conferencing over having to go there."

Telemedicine also provides care for people in rural areas who live far from medical facilities.

The growth of virtual care has been facilitated by Medicare rule changes for the COVID-19 emergency, including one that reimburses doctors for telemedicine at the same rate as in-person care for an expanded list of services. State regulators and commercial health plans also loosened their telehealth policies.

In California, the Department of Man-

You typically can get an appointment sooner, in the safety of your own home or workplace. saving time and money on gas and parking—in some cases,

state's insured residents, requires commercial plans and most Medi-Cal manpay providers for telehealth at parity with regular appointments and limit cost sharwould pay for in-person visits. Starting Jan. 1, a state law—AB-744—will make that permanent for commercial plans.

Five other states—Delaware, Georgia Hawaii, Minnesota, and New Mexico have pay-parity laws already in effect, according to Mei Wa Kwong, executive director of the Center for Connected Health Policy. Washington state has one that also will begin Jan. 1, 2021.

You can also contact one of those companies directly for a medical consultation if you don't have insurance, and pay between \$75 and \$82 for a regular doctor visit.

If you are one of the 13 million Californians enrolled in Medi-Cal, the state's Medicaid program, you can get telehealth services at little to no cost.

Large medical offices and health systems

aged Health Care, which regulates health plans covering the vast majority of the aged care plans during the pandemic to ing by patients to no more than what they

If you are planning a telehealth appointment, be sure to ask your health plan if it is covered and how much the copay or coinsurance will be. The appointment may be through your in-network provider or a telehealth company your insurer contracts with, such as Teladoc, Doctor On Demand, or MD Live.

usually have their own telemedicine platforms. In other cases, your provider may use a publicly available platform such as FaceTime, Skype, or Zoom. Either way, you will need access to a laptop, tablet, or smartphone—though, for a phone conversation,

Smartphones with good cameras can be particularly useful in telemedicine because high-resolution photos can help doctors see certain medical problems more clearly. For example, a photo from a good smartphone camera usually provides enough detail for a dermatologist to determine whether a mole requires further attention, Kvedar said. Relatively inexpensive apps and at-home

a landline or simple cellphone will suffice.

ALL IMAGES BY SHUTTERSTOCK

tools enable you to measure your own blood pressure, pulse rate, oxygen saturation level, and blood sugar. It's a good idea to monitor your vitals and have the numbers ready before you start a virtual visit.

Be aware that a remote visit isn't right for every situation. In the case of serious injury, severe chest pain, or a drug overdose, for example, you should call 911 or get to the ER as quickly as possible.

Virtual visits also aren't recommended in other cases for which the doctor needs to lay hands on you.

Wolfrom has had only a few in-person health visits this year, one of them with a podiatrist who checks his feet every 6 to 12 months for diabetes-related neuropathy. "That can only be done when you are in the room and the podiatrist is touching and feeling your feet," Wolfrom said.

Face-to-face visits are generally better for voung children. Kids often require vaccinations, and it's easier for doctors to monitor their growth and development in person, said Dr. Dan Vostreis, a pediatrician at Santa Clara Valley Medical Center in San Jose.

In general, telemedicine is effective in cases that would typically send you to an urgent care clinic, such as minor injuries or flu-like symptoms, including fever, cough, and sore throat.

It is also increasingly used for post-surgical follow-ups. Telemedicine can be a godsend for geriatric or disabled patients with reduced mobility.

Among the top telehealth adopters are medical specialists who treat chronic illnesses such as diabetes, hypertension, cardiovascular disease, and asthma, said Dr. Peter Alperin, a San Francisco internist and vice president of product at Doximity, a kind of LinkedIn for medical professionals.

Providers can monitor patients' vitals remotely and discuss lab results, diet, medications, and any symptoms in a video chat or a phone conversation. "If you happen to see something that's awry, you can bring them into your office," Alperin said, adding it's "a better form of triage."

But telemedicine has some serious disadvantages. For one thing, the less formal setting can allow some routine medical practices to slip through the cracks.

In the second quarter of this year, blood pressure was recorded in 70 percent of doctor office visits compared with about 10 percent of telemedicine visits, according to a study published early this month.

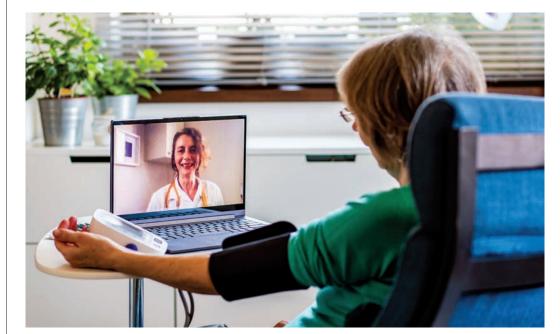
Elsa Pearson, a resident of Dedham, Massachusetts, had a medical appointment scheduled in March, which was switched to a telephone call because of the pandemicinduced lockdown.

"It was honestly the most efficient appointment I've had in my life," said Pearson, 30. But, "I must admit, without the push of having the labs right there when you leave the appointment, I've yet to get

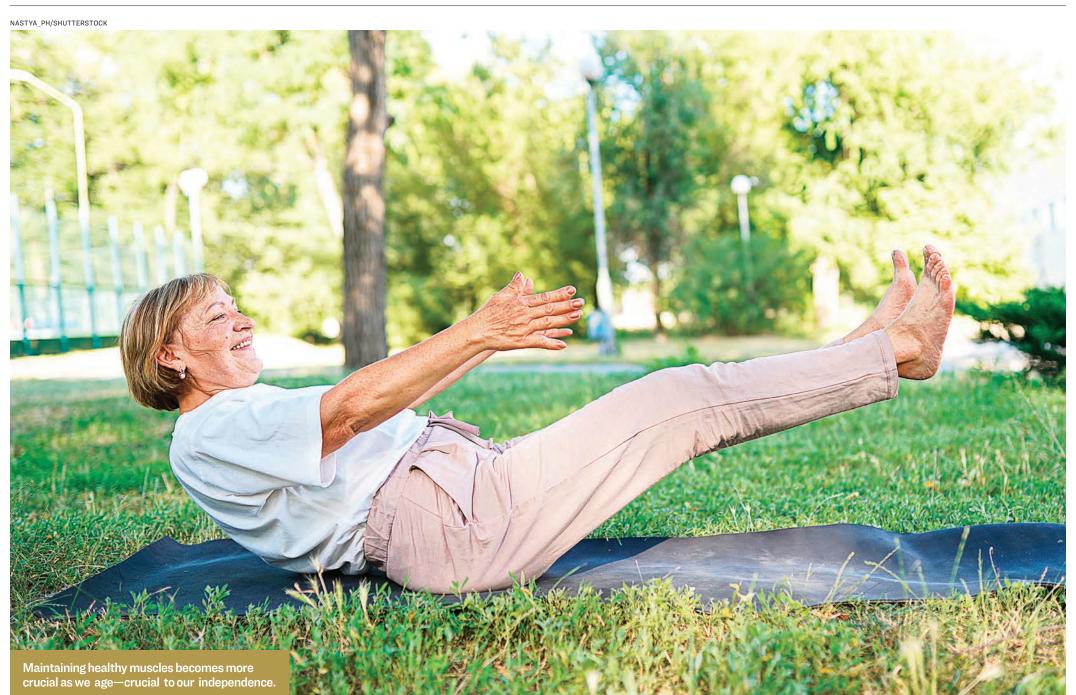
Perhaps the biggest pitfall in telehealth is the loss of a more intimate and valuable doctor-patient relationship.

In a recent essay, Dr. Paul Hyman, a Maine physician, reflected on the times when an unexpected discovery during an in-person examination had possibly saved a patient's life: "A discovery of an irregular mole, a soft tissue mass, or a new murmur—I do not forget these cases, and I do not think the patients do either."

Bernard J. Wolfson is the managing editor for California Healthline, which is published by Kaiser Health News. This article was first published by California Healthline, a service of the California Health Care Foundation.



Doctors, hospitals, and mental health providers across the country reported a 50- to 175-fold rise in the number of virtual visits.



MADE TO MOVE

The Impacts of Muscle Loss

of dying prematurely from all causes.

This tells us that muscle might play a

have something to do with chemical

messengers (myokines) produced by

inflammation throughout the body.

Another major benefit of having

healthy muscles is that they help pro-

digest carbohydrates—such as pota-

toes, bread, or rice—sugar enters our

tect us from diabetes. When we eat and

bloodstream, of which a lot is sent to our

muscles. Our muscles use this sugar for

energy or store it as glycogen in order to

maintain stable blood sugar levels. This

protective role in heart health. Why this

happens, we don't yet know—but it may

healthy muscles, which can help reduce

Preventable muscle loss can cause a range of health problems as we age

RICHARD KIRWAN & CLAIRE STEWART

ere's a sobering fact: You can lose up to 40 percent of your muscle mass between your 20s and your 80s. That might sound outlandish, but it's a natural part of aging. Known as sarcopenia, this is the gradual loss of muscle mass that occurs as we age. Although we can start losing muscle from our 20s, this loss really speeds up once we hit our 60s. At the same time that sarcopenia causes loss of muscle mass, we simultaneously gain fat mass, and see a big drop in strength. All of this can affect how well an older person moves.

Sarcopenia and sarcopenic obesity (the combination of low muscle mass and excess fat), and dynapenia (the loss of muscle strength) is associated with a surprisingly wide range of health conditions, from heart disease and diabetes to frailty and dementia.

Muscle mass plays a huge role in our health. So much so that sarcopenia and sarcopenic obesity (the combination of low muscle mass and excess fat), and dynapenia (the loss of muscle strength) are associated with a surprisingly wide range of health conditions, from heart disease and diabetes to frailty

mass and excess fat In fact, in people who already have are more heart disease, those with the highest levprone to els of muscle mass seem to have the best losing bone chance of living longer. On the other mass and hand, people with the lowest amounts developing of muscle seem to be at the greatest risk osteoporosis.

People with

low muscle

process is an important part of blood sugar control and helps explain why people with less muscle are more likely to develop diabetes. In older people, low levels of muscle are also linked with greater frailty, weakness, and being less able to carry out normal daily activities. This means people can have trouble with regular tasks such as getting out of bed, standing

up from chairs, climbing the stairs, or carrying groceries. All of this can make living independently a lot more difficult. Difficulty moving can also mean people end up moving even less, which speeds up muscle loss. People with sarcopenia who lead sedentary lives are also at greater risk of osteoporosis. This is because active muscles send signals to bones that help

them stay strong. The drop in strength from sarcopenia means people may be more prone to falls and bone fractures. Again, this fear of falling may make some people more sedentary, which may reduce the quality of life and put them at a greater risk of depression. Although sarcopenia is a natural part of

aging, muscle loss is largely accelerated by inactivity. As we get older, we tend to move less. But exercise is one of the key signals that our body needs to keep our muscles strong and healthy. Without that signal, our muscles start getting smaller and weaker over time. Eating protein also acts as a signal to grow and maintain muscle. However, as we age, we tend to have smaller appetites and eat less protein, increasing the risk of muscle

Lower levels of the hormones testosterone and estrogen, higher levels of body fat, insulin resistance (where the body doesn't handle glucose as it should, which can lead to diabetes), and higher levels of inflammation are other reasons why older people lose muscle more easily than younger people. In fact, all of these factors combined lead to something called "anabolic resistance." This means the body doesn't respond as well to the signals that normally cause muscles to grow.

If that isn't enough, current CO-VID-19 restrictions may be making muscle loss even more likely. Data from smartphones has shown that people have been more sedentary than usual during the lockdown. We also know that people's sleep quality has declined and people are probably feeling more stress and anxiety. These factors can also speed up muscle loss by affecting hormones that increase muscle breakdown and encourage weight gain by affecting appetite hormones, causing people to eat more processed foods that have more calories.

Muscle loss can be prevented or at least slowed—with a few lifestyle changes, namely exercise and diet.

This is called a "catabolic crisis"—a brief period of time when conditions come together to make muscle loss much more likely. Another example of a catabolic crisis would be if someone was hospitalized or forced to spend days or even weeks in bed. COVID-19 could very well create a catabolic crisis for many older adults after a lockdown.

Muscle loss can be prevented—or at least slowed—with a few lifestyle changes, namely exercise and diet. Resistance exercise, such as lifting weights or using elastic resistance bands, helps keep muscles strong and healthy, and regular walking can help,

High-protein diets, containing foods such as lean meats, fish, eggs, and low-fat dairy products, can also help to build and maintain more muscle than exercise alone. Getting at least 25 to 40 grams of protein each meal is especially important. On top of that, widely available supplements including vitamin D, fish oil, and creatine (a naturally occurring substance found in the muscles that help them produce energy) may help people hold on to more muscle and improve their quality of life as they age. During this pandemic, when muscle loss is more likely prioritizing regular exercise and a healthy diet can make a big difference to long-term health.

Richard Kirwan is a Ph.D. and researcher of clinical nutrition and physiology at Liverpool John Moores University in the UK. Claire Stewart is a professor of stem cell biology at Liverpool John Moores University. This article was first published on The

Natural Remedies Found in Your Kitchen

Our cupboards contain medicinal foods with a long history of helping to heal us

TATIANA DENNING

"An apple a day keeps the doctor away," at least that was the philosophy of my Grandma Konchesky. Like many of our grandmothers, she swore by a host of home remedies. For my grandma, garlic was the cure for what ailed you, a swig of cod liver oil was a daily ritual for keeping your brain sharp, and Prevention magazine, with its many natural remedies, was a regular on her kitchen table.

While modern medicine has moved away from these traditional, and often ancient, remedies, my grandma was onto something. After all, she lived a very healthy life until she passed away at the age of 93. She even ran her own business until just a few years before she died.

But don't worry, I'm not going to force cod liver oil on you. There are some other great, and fortunately, more palatable home remedies that are known to have several health benefits. And some of these remedies are as close as your own kitchen.

A staple in traditional Chinese medicine for millennia, ginger not only helps improve blood flow, it's one of the best anti-inflammatory foods there are, with some studies showing it even rivals ibuprofen in treating arthritis and menstrual cramps. Ginger is also great for nausea, helps detoxify the colon and liver, aids in digestion, and possesses antifungal, antibacterial, and antiviral properties.

A 2015 study showed ginger improves glucose levels in diabetics, and while further research Apple Cider Vinegar is needed, these preliminary I've had many patients over the eral studies have also shown a (ACV), particularly the raw, unfilsignificant reduction in cholesterol levels, and even benefits in

To reap some of these amazing benefits, try adding some ginger into your next stir-fry or chicken have antimicrobial properties, dish, or steep a few slices in hot and while little research exists

water and enjoy a cup of warm on its benefits, there have been ginger tea. There are also a number of ginger candies on the market aimed at treating nausea.

Honey has been used for centuries for both its medicinal and culinary benefits. While pasteurizing, or heating, honey may increase shelf life and improve color and texture, raw honey is where the real health benefits are believed to be found. Just be sure to purchase it from a reputable source.

This ancient remedy has been used to not only help soothe a sore throat, but studies have even found it's more effective than some over-the-counter cough syrups, especially in children (note, honey should not be used in children under the age of one, so please consult your pediatrician).

While modern medicine has moved away from these traditional, and often ancient, remedies, my grandma was onto something.

Honey contains phytonutrients with anti-inflammatory and immune boosting properties, but cellular communication and immune boosting properties as well. Research has shown that Manuka honey, in particular, can kill a number of common pathogens, including E.Coli, Staph aureus, and H. pylori. For this reason, it's been used to treat cuts, wounds and burns, diarrhea, gastric ulcers, and chronic gastritis.

The next time you have a cough, try taking a teaspoon of honey. A little honey stirred into your favorite tea, or glazed over salmon, is another great way to benefit from

years swear by apple cider vinegar tered form containing the starter bacterial culture known as "the mother," which is full of enzymes and good bacteria.

ACV has long been believed to

studies showing it to have antioxidant properties. A review study published in Molecular Nutrition & Food Research in 2016 found it may even help decrease blood pressure and blood sugar levels. Apple cider vinegar has also been shown to decrease hunger and may help promote loss of weight

and belly fat, according to a Japa-

nese study published in 2014. Many patients have said they use 1 to 2 tablespoons of ACV, mixed in a large glass of water, to resolve heartburn. While it may fly in the face of reason to use an acid to treat heartburn, they promise it works. They've also said it works like a charm

It's important to note, because apple cider vinegar is acidic, it should never be used alone, otherwise you risk wearing down your tooth enamel. Instead, use it in a salad dressing, as part of your cooking ingredients, or mix a tablespoon in a large glass of water with a little lemon and honey to taste.

Packed with nutrients, garlic has long been used for both its medicinal and culinary benefits. This well-loved ingredient not only has antifungal, antiviral, and antibacterial properties, but antioxidant properties as well. As part of the onion family,

garlic has a strong taste when consumed raw, but develops a mild, somewhat sweet taste when cooked. While my grandma used it both ways, she swore by raw garlic, just as my husband does. For years, he's used a concoction of crushed garlic soaked in raw honey and raw apple cider vinegar. He drinks a shot glass of strained liquid 1 to 2 times a day, and swears it's the reason he's been able to stave off the chronic sinusitis that once plagued him. He and my grandma would most certainly have hit it off, were she still alive!

Studies have shown that garlic reduces total and LDL cholesterol by 10 to 15 percent, while high-dose garlic extract has proven to be just as effective in reducing blood pressure as the

And if that's not impressive enough, a 2006 review published in The Journal of Nutrition found antioxidant-rich aged garlic extract may even reduce the risk of dementia and heart disease.



Curative foods are hidden away in your cupboards.



Ginger is a great anti-inflammatory. NATALY STUDIO/SHUTTERSTOCK



Honey is full of phytonutrients. KOVALEVA KA/SHUTTERSTOCK



Olive Oil is loaded with polyphenols. BAIBAZ/SHUTTERSTOCK

that doesn't

them a bad

influence on

blood sugar,

Olive Oil

While there are many options to choose from for our last remedy, we'll end with olive oil.

Composed mainly of monounsaturated fatty acids, olive oil has long been touted for its beneficial role in the Mediterranean diet. Loaded with polyphenols, olive oil has powerful antioxidant properties that help fight inflammation. It's because of these properties that studies show olive oil may help prevent cardiovascular disease, cancer, and even stroke.

Olive oil has been shown to decrease the risk of Type II diabetes, and even fight Alzheimer's disease. In combination with fish oil, it has also been shown to improve joint pain and stiffness in rheumatoid arthritis.

With such impressive benefits, making olive oil a staple in your diet just makes good sense.

Conclusion

As with anything, be sure to talk to your doctor first, as even natural remedies can have unintended consequences and may need to be avoided with certain medications or health conditions.

With that caveat, the next time you're looking for relief from that scratchy throat, want to lose a little weight, or boost your immune system, why not check your kitchen? As our grandmothers knew, nature offers many amazing options for improving health. You may just be pleasantly surprised

Tatiana Denning, D.O., is a family medicine physician who focuses on wellness and prevention. She believes in empowering her patients with the knowledge and skills necessary to maintain and improve their own health.

Potatoes Aren't Bad for People With Type 2 Diabetes, Says Study

Long-held assumption about this high glycemic index food don't hold up under rigorous review

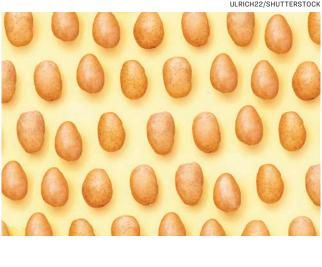
MAT LECOMPTE

New research confirms that potatoes are not as bad as once thought for people with Type 2 diabetes.

The findings challenge a longheld belief that high glycemic index (GI) foods, such as potatoes, should be avoided by those with diabetes because of the way they affect blood sugar levels. However, this new information goes against what experts have suggested for decades.

The findings of the study published in Clinical Nutrition show that when people with Type 2 diabetes ate a mixed meal with skinless white potatoes, they had a better 'nocturnal' GR, compared to when they consumed a macronutrient-matched mixed meal that included basmati rice, a low GI carbohydrate food. A rise in

Potatoes can deliver key nutrients in relatively few calories, which is essential for people with Type 2 diabetes.



blood sugar during the night has long been associated with cardiovascular disease and endothelial dysfunction.

Participants consumed the same breakfast and lunch for the study, but they were randomly assigned to one of four dinners. Each meal included either skinless white potatoes (test meal) prepared in three different ways (roasted, boiled, or boiled then cooled and reheated) or basmati rice (control meal). The meals were repeated with a 9-day break in between each trial to cycle through all test meals and the control.

All participants had blood samples collected immediately after the meal and again every 30 minutes for 2 hours. They were also required to wear a continuous glucose monitor overnight to track changes in blood sugar

levels while sleeping.

After following a rigorous methodology by using a randomized crossover design and measuring glucose levels both immediately post-meal and overnight to obtain a better picture of the potatoes impact on GR, researchers were able to gain a better insight into how potatoes may affect blood sugar levels.

The researchers concluded that no differences were found in the glucose response between meals or following the dinner that contained the potatoes or basmati rice. Participants' overnight GR was also more favorable after eating the evening meal that included any of the high GI potato side dishes compared to the low GI basmati rice.

Other Factors to Consider Dr. Brooke Devlin, Ph.D., the pri-

mary investigator at Australian Catholic University in Melbourne explains, "Despite its frequent use among nutrition researchers, GI is not an appropriate tool for understanding how a meal impacts glycemic control; it is a very specific measurement for foods consumed in isolation, typically conducted under controlled laboratory conditions. It's rare that people eat foods in isolation, and findings from this study demonstrate how other factors, such as the time of day or food pairings, need to be considered when investigating the GR of mixed meals in individuals with Type 2 diabetes."

This research helps to better understand the relationship between food choices and Type 2 diabetes. It challenges dietary guidance and observational research which has previously suggested that potatoes are not an appropriate food choice for those with Type 2 diabetes. This new information helps people to understand that white potatoes can be consumed as part of a healthy evening meal without negatively affecting GR. Potatoes can deliver key nutrients in relatively few calories, which is essential for people with Type

Mat Lecompte is a freelance health and wellness journalist. This article was first published on Bel Marra Health.









The Impact of Loneliness

As social isolation takes its toll, the health effects of loneliness come into sharper focus

Continued from Page 1

Before the pandemic, people over 50 years of age were cited among those hit hardest by loneliness. Big changes to your social circle typically come with advancing age, such as retirement, kids leaving the nest, or the death of a spouse. COVID-19 restrictions have often meant even greater isolation for this age group.

But it isn't just teens and seniors. De-Luca says loneliness is an emotion that can hit any one of us. And when it hits, it can be devastating.

"It's a very overwhelming emotion, because it goes against what we are as human beings," DeLuca said. "It puts us in survival mode—fight or flight. The research shows that what our bodies go through psychologically, physically, and emotionally when we're lonely is the same as when there is a perceived

Conditions for Loneliness

People are, by nature, social creatures. DeLuca says that when we do seek solitude, it's on our own terms.

Loneliness, however, doesn't happen by choice, and the conditions for it vary from person to person. For example, you could be in a room full of people and still feel profoundly isolated. You may also find yourself completely alone yet feel no loneliness.

Licensed clinical psychologist Dr. Bruce L. Thiessen says that one of the biggest surprises he has witnessed during the lockdown is the number of patients reporting a marked improvement in their mental health—a trend which they link directly to the isolation rules of COVID-19.

Instead of closing yourself off out of fear, reach out, and look for opportunities to foster new connections.

"These were generally introverted patients that suffered from anxiety, social phobia, and panic. They were lonely prior to the pandemic, but, oddly, feel less lonely now," Thiessen said. "Most of these individuals attributed their improvement to the sense that their tendency to self-isolate had become normalized through the shelter in place orders. Others emphasized the sense that they no longer felt alone in being overwhelmed by anxiety and panic."

This goes to show how loneliness can manifest in various ways. Licensed therapist Erin Cantor says it goes beyond introverts and extroverts. Cantor says that the root of loneliness is a feeling that you don't belong and you lack true meaningful connection. And this has been a problem since long before the pandemic.

"There may be plenty of friends, but no close ones. There may even be dates or romantic relationships, but the quality and depth of these connections is poor," Cantor said. "When this happens over an extended period of time, chronic loneliness sets in, and this is where the real emotional, mental, and physical damage can set in."

We probably all feel loneliness at some point in our lives, but it's usually temporary. Once we find some connection, the loneliness fades, and we feel whole again.

But Cantor says that people who fail to find meaningful connections for an extended period of time can give up in frustration, cutting themselves off even more. They stop trusting everyone, and experience deep shame over their inability to connect.

"The most devastating impact of intense and chronic loneliness is that a person, quite literally, shuts down," Cantor said. "It may be gradual, more quiet, and less visible to others, but it's happening all around us, especially during COVID. There really is a double pandemic of loneliness and COVID-19, and the long-term mental health effects of our social distancing and isolation are going to be very, very damaging."

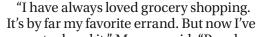
Pain of Separation

Have you ever ached from loneliness? Research validates it, showing a connection between isolation and pain. A UCLA study found the neurological pathways in our brain that light up when we register danger from a physical injury or illness are the same pathways that activate when we feel socially excluded.

Wellness writer Melanie Musson says she felt the "sting of isolation" as she was going through the last couple of months of her pregnancy. It was during her state's imposed shut down. She said her body physically craved human connection. Thankfully, friends came to her rescue.

"Shortly before my baby was born, two friends of mine knocked at the door. I hadn't had in-person interaction with anyone for over a month. I didn't even know how to handle a knock at the door," Musson said. "When I realized it was my friends and they had brought me treats, I asked if I could please hug them. I hadn't touched anyone outside of my immediate family in weeks. I am not a hugger, but I needed human touch."

Where restrictive orders are still in place, we're only permitted to face the public from behind a mask and at a distance of at least six feet. Needless to say,



such conditions make the connection we

crave much more difficult.

come to dread it," Musson said. "People aren't friendly. Masks hide personality so it's harder to even make remarks in passing to other shoppers. I feel like I'm shopping with a bunch of robots."

While there is debate about whether masks effectively slow the spread of the virus, it's clear that these garments erase some of our most expressive features. We may be growing more accustomed to masks as the pandemic wears on, but we feel better when we meet a smiling face, even if we have to get this interaction through a screen.

Social psychologist turned lawyer J.W. Freiberg is an author of three books on chronic loneliness. In a July article, Freiberg gave several tips for lonely seniors struggling to cope with pandemic restrictions. One of his suggestions is to upgrade phone calls to a more visual medium, such as FaceTime or Zoom. Freiberg says it helps the socially starved get a taste of something psychologists call "mirroring."

Mirroring is a trait humans share with many animals. It allows us to read nuances of emotion and intentions of those we interact with. Of course, we can still convey messages without it, but some of the most informative and captivating details of our social exchanges are often lost in translation.

"Think about when you startle a feral animal; how they hold perfectly still, staring at you, concentrating on your body language, desperately trying to determine if you are an active predator," Freiberg writes. "We humans, of course, greatly refine this process, searching to sense subtle details about the other party's inner emotional state. Little children are busy honing these important mirroring skills, and it is critical for them to see your loving smile and evident delight as they describe to you their activities and feelings."

Coping With Loneliness

DeLuca also champions virtual platforms to buffer the pain of loneliness, but she admits these are a poor substitute. What we really need, and thrive on, are genuine in-person connections. And a lack of this vital human interaction may be affecting us more deeply than we imagine.

"Some people will think they have it all together, but they're not sleeping, and they're self-medicating more," DeLuca

When real people aren't available, people often turn to animals. Breeders, rescues. shelters, and pet stores all report that pet adoption has skyrocketed during the pandemic. DeLuca says that caring for another living being, even if it's just a plant or a fish, can make a big difference in our mental well-being.

"We have to feel like we have some reason for being," she said. Some turn to the television when they're alone, either to alleviate boredom, or just to have some voice droning in the background to give the illusion of

Especially when there's no place to go, and nobody to see, television can become a reliable companion. But DeLuca warns that some media can actually worsen our loneliness, because it stirs up our already agitated stress hormones. She says the news in particular can trigger our fight-or-flight response, and it can be particularly damaging if we consume news just before bed.

While there is

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features.

"We think it keeps us knowing what's really going on, but we also have this subliminal recurring concept of death, violence, social injustice, and so forth," DeLuca said. "A lot of what we dream can be the last thing we talked about, saw on TV, read, or whatever. So it's very important that we have selfawareness and are intentional about the information that's being processed in our brains."

Cantor says monitoring our thoughts can go a long way to lessening the impact of loneliness. She says that in a time when our fears and despair are being amplified with the isolation of lockdowns, it can help a lot just to become more aware of your feelings.

Instead of closing yourself off out of fear, reach out and look for opportunities to foster new connections.

"Looking for the good in ourselves and other people, especially in this time of social distancing, politics, and economic instability, is another simple but profound way that we can cope," Cantor said. "There is still so much good out there in the world-either in the faces of our kids, or pets, or neighbors. It's crucial to connect to that and keep it front and center."



Masks Don't Have to Divide Us

Our essential nature is the same, and tolerance is a natural state of being



BARRY BROWNSTEIN

THE EPOCH TIMES Week 46, 2020

ecently, a medical technician observed that some patients are so frightened of ►COVID-19, they have lost their ability to respect her humanity. "All that matters," she said, "is how well you are meeting their demands for safety."

"They treat me like an object, not a human being," the technician continued. "Why can't people respect each other?" she lamented. "We're Americans;

we're supposed to be tolerant." Perhaps the most visible mani festation of intolerance during COVID-19 is the mask issue.

We hear the stories. An "improperly" masked shopper is approached by an angry "properly" masked shopper who moves close, demanding the mask be adjusted. If the improperly masked shopper is such a threat, why would the properly masked shopper get so close as to put themselves in harm's way?

Engage mask advocates and you'll notice they are sincerely (and often angrily) bewildered by anyone objecting to the simple act of wearing a mask; an action they are sure saves lives.

To both sides of the mask divide, the other side seems deserving of rebuke, even scorn. If not evil, those on the other side are

For those sickened by the divi-

We can begin by being better observers of our everyday experience. Psychiatrist Robert Rosenthal in his book "From Loving One to One Love," asks us to look at how pervasive grievances are

in our lives.

"Unless you're born a saint, it is impossible to go through life without at some point holding grievances. These could be about almost anything: the jar with the tight lid that refuses to open, the traffic light that turns red just as you approach, the sports team that humiliates the hometown favorite in the playoffs, traffic backed up on the freeway, the appliance that breaks down at the worst possible moment," writes Rosenthal.

"[T]he grievances that stick with us most are focused on other people," Rosenthal says. "No two people see things exactly the same way." If you're not comfortable with that basic fact of life, you are on the road to continual annoyance, even outrage. CO-VID-19 has exacerbated, not caused, a pre-existing mindset of outrage over differences.

My wife and I were recently hiking on a carriage road; passing hikers had at least a 15 foot wide berth. Yet many hikers maskedup as they passed. Thoughts of irritation entered my mind for the new social norm of masking for momentary outdoor encounters.

Before COVID-19, most people made eye contact and said hello to other hikers in passing. Sometimes a hiker needed trail information or encouragement to continue. Sometimes a brief but enriching conversation began. These days, fewer hikers greet though you are a potential mugger on an urban sidewalk. I miss hiker camaraderie.

I kept my mental complaints to myself, but I had become part of the problem; that day I saw my

66

Holding a grievance is like thrusting a sword through your midsection in order to wound the offender who's

standing

Robert Rosenthal, author, psychiatrist

behind you.

Barry Brownstein is a professor emeritus of economics and leader*ship at the University* of Baltimore. He is the author of "The Inner-Work of Leadership." To receive his essays, subscribe to Mindset Shifts at BarryBrownstein.com. This article was originally published from Intellectual Takeout.

world as masked vs. unmasked. I had engaged in the tribal thinking I often decry. My choice to give relevance to the masking choices of others was nobody's fault but my own.

Paraphrasing a Buddhist teaching, Rosenthal shows that the cost of holding grievances is lost peace of mind:

"[H]olding a grievance is like thrusting a sword through your midsection in order to wound the offender who's standing behind you. You may succeed, but the consequences will prove more deadly for you than for them.

"Another good analogy is that a grievance is like a hot coal that you hurl at the person who wronged you. In order to throw it, you must first grasp it in your own hand."

It is one thing for grievances to arise, but Rosenthal questions why we prefer to hold on to our resentment and "poke at it regularly, turning it over in our minds" again and again, repeatedly harming ourselves. Rosenthal writes, "Grievances truly are double-edged swords, and the edge facing you turns out to be the sharpest."

Reverse the situation. What is our response when someone holds a grievance towards us? In his "Meditations," Marcus Aurelius provides the antidote:

"Someone despises me. That's their problem. Mine: not to do or say anything despicable. Some one hates me. Their problem. Mine: to be patient and cheerful with everyone, including them. Ready to show them their mistake. Not spitefully, or to show off my own self-control, but in an

honest, upright way."

To be in a state of conflict, Aurelius believed, was to act against our true nature: "We were born to work together like feet, hands, and eyes, like the two rows of teeth, upper and lower. To obstruct each other is unnatural. To feel anger at someone, to turn your back on him: these are obstructions."

We're missing the fundamental truth that we are all connected. A hostile mindset is no way to live in peace with others. Significantly, without peace in our heart, we won't find common ground or change minds.

The way out is realizing our hand is tightly gripping the hot coals. Notice how they burn you, disturbing your peace of mind. Notice how you don't want to release the coals because your grievance is a righteous one.

In a possible future, a national mask mandate and other CO-VID-19 policies you oppose may be implemented. Many of your neighbors and family members will cheer. We can oppose policies with vigor without demon-

Aurelius was clear that our essential nature is the same, "I have seen the beauty of good, and the ugliness of evil, and have recognized that the wrongdoer has a nature related to my own not of the same blood or birth, but the same mind, and possessing a share of the divine."

izing others.

If we realize our essential nature is the same, being tolerant of our differences becomes easier. As we release the hot coals we so tightly grip, our voice may be better heard, minds may change, and respect for our common humanity may be restored.

How Stress Affects Blood Pressure

Physiological reactions to help us survive perceived dangers have become a danger in themselves

MOHAN GARIKIPARITHI

f you're watching the news these days, I bet you're feeling stressed. You may feel it even more if you're on social media. For some, leaving home can send stress levels sky-

And it can all be boosting your blood pressure, too.

Stress can affect blood pressure in several ways. One acute effect is vasocontraction. Blood vessels tighten up to concentrate blood in the core of the body. This effect is caused by the release of stress hormones, adrenaline, and cortisol, which also increase your heart rate.

A 2013 study found that stress resulting from work. marriage, social isolation, money troubles, racial discrimination, and more may contribute to lasting high blood pressure.

This "fight or flight" response will fade as the stressful period passes. But that doesn't necessarily mean you're out of the woods. There is data to suggest that chronic stress may have a long-term effect on blood pressure.

Chronic psychological stress may play a role in hypertension. A 2013 study found that stress resulting from work, marriage, social isolation, money troubles, racial discrimination, and more may contribute to lasting high blood pressure.

Living under continued stress may evoke a long-term sympathetic nervous system response, potentially making it an independent risk factor for high blood pressure. However, more work is required to determine if and how long-term stress exposure elicits biological changes to

promote hypertension. Chronic stress may lead to behavioral changes that influence blood pressure. Coping mechanisms like drinking, smoking, eating, and staying in bed can contribute to high blood pressure. These behaviors are associated with inflamma-

a major role in long-term heart health. Thankfully, exercise can reduce both stress and blood pressure.

ful situations. For some, stress-relief may require less time with television or social media. As an alternative, pick up a book that allows you to escape from the constant media barrage. If you don't like reading, find another

productive activity that brings joy. Consider if you really need to learn everything as it's happening. The reality is that you don't. The news of the day will be there tomorrow morning, so consider blocking off time each day for "news time" before leaving it alone.

Unfortunately, for some, stress relief will not be as simple as flicking a switch. If you fall into this category, consider looking into mindfulness or other forms of meditation. A hobby could help. You might also need to consider making bigger changes, such as seeking new employment or leaving a partner.

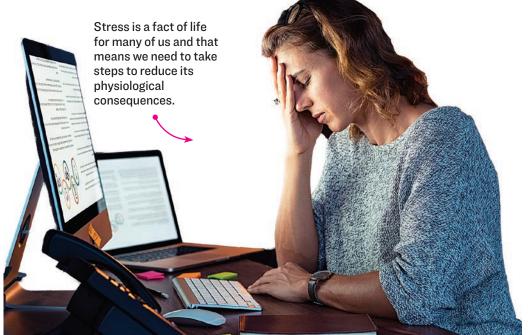
Stress can put your heart at risk. Try finding ways to limit stress to lower

tion and arterial stiffness. Finding ways to treat stress might play

But that won't remove you from stress-

blood pressure and reduce your risk of heart disease.

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.



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Our Minds May Be Wandering More During the Pandemic

Amid lockdowns. many people may be experiencing the benefits of mental downtime and a roaming mind

JENNIFER WINDT

any feel the pandemic has changed not just our evervday lives, but also our inner mental lives. There has been talk of a mental health pandemic, lockdown brain fog, and reports of more frequent, vivid, and bizarre dreams.

We tend to think of our waking and dream lives as separate. But it is striking how deeply they are

Spontaneous thought, or mindwandering, occupies up to 50 percent of wakefulness. Our thoughts and attention frequently drift away from what we are doing and what is happening in our immediate surroundings, with one thought following another along an associative trajectory.

Spontaneous thoughts and experiences are also pervasive in sleep. The clearest example is dreaming, which has been described as an intensified form of the mind wandering that happens when we are

Considering dreaming and mind wandering together suggests the fluctuations in spontaneous experience, the natural ebb and flow of attention and somewhat erratic trajectory of thoughts continue throughout waking and sleep.

In normal circumstances, we mostly remain oblivious to the remember their dreams but can report multiple dreams per night. Like mind wandering, dreaming is also largely (with the exception of certain lucid dreams) beyond our control.

However, attention to our inner lives may be amplified at a time when control over our everyday lives is elusive.

Paying attention to your dreams when you first wake up in the morning drastically increases dream recall. And attempting to harness our thoughts and attention throughout the day can actually make us more aware of our failures, including lapses in attention. If you have been paying more attention to your spontaneous thoughts during the pandem-

I ALSO AFFIRM ALL INFO ABOVE IS COMPLETE AND ACCURATE.



Sometimes it takes a wandering mind to sort out complex issues lurking in the back

ic, you might have become more aware of what was there all along.

Changes in Spontaneous Thought—for Better or Worse

If you have been sleeping more under lockdown, you are probably experiencing more early morning REM sleep. Because REM sleep is typically associated with the most vivid and complex dreams, this might lead to an increase in actual dreaming.

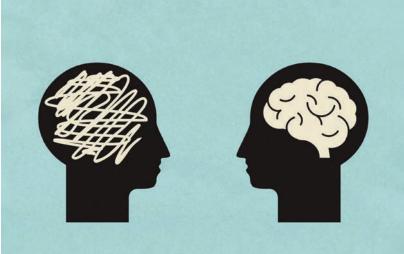
If you have also ditched your alarm clock, you are probably awakening directly from REM sleep, which further increases dream recall.

The pandemic has also changed what we daydream and dream about. Waking concerns about fact our minds have wandered. the pandemic seem paralleled by Most people, when awakened in more frequent nightmares and the sleep laboratory, only rarely dreams about topics such as social distancing, contagion, or personal protective equipment.

> Some changes to our spontaneous mental lives can indicate something is amiss. Anxiety and stress are linked to increased repetitive thoughts and rumination, as well as trouble focusing. disturbed sleep, nightmares, and unpleasant dreams, all of which seem to have increased during the

> These repetitive, sticky, and nonprogressive thoughts contrast with the free, meandering movement that characterizes most dreams and mind wandering.

Spontaneous Thought Might Be Beneficial The restlessness of our minds might



Attention to our inner lives may be amplified at a time when control over our everyday lives is elusive.

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also have a silver lining. Mind wandering certainly does compromise how well we perform tasks deand mind wandering can also help us make new connections and see familiar topics in a new light. When our minds wander, our thoughts are often drawn to the future and personal concerns.

Similarly, dreams have the tendency to weave disparate waking experiences and concerns into new and sometimes bizarre narratives. You might encounter a dream character who is a mixture of different people you have been close to at different times in your life.

Or your initially pleasant dream of visiting friends in a faraway city might morph into a nightmare about getting infected, putting your family at risk, and being pursued by the police because you are breaching lockdown.

Spontaneous thoughts in waking and sleep might help us process memories and guide future planning and decision making, for example by enabling us to imagine alternative courses of action. They can also be a source of insight and creativity.

Such thoughts may also contribute to coping and emotional processing. Future-oriented mind wandering is often positive, whereas past-oriented mind wandering tends to be associated with negative moods and emotions.

A Great Escape

Being in the here and now is often lauded as a virtue we should aim to cultivate through mindfulness. But sometimes, distraction can be manding attention. But because useful: Mind wandering can proof their associative nature, dreams vide a welcome break from boring tasks, allowing us to return with refreshed attention.

> Other times, distraction might just be pleasant. In our dreams, we experience alternative realities; we can travel freely, and because dreams are rich in social interactions, we can interact with people we are separated from in waking life.

Given the monotony, restrictions, and social isolation many of us are experiencing, the unruliness and unboundedness of our minds might sometimes be a great

Jennifer Windt is a senior research fellow at Monash University in Australia. This article was originally published on The Conversation.

Metabolic Inflexibility
Is Key Risk Factor for COVID-19 Lifestyle factors that are within our control double and triple the risk of a fatal **COVID** infection Metabolic flexibility refers to our body's ability to adapt to different demands, such as changes in temperature or when we need our metabolism to ramp up while exercising.

JOSEPH MERCOLA

hile SARS-CoV-2 is a rampant virus that can cause severe problems in vulnerable individuals, the real pandemic—the underlying cause that makes people susceptible to complications from the infection in the first place—is poor metabolic health.

Metabolism is the sum total of all the chemical reactions the body uses to maintain a living state. It has two major types: when our body breaks down molecules in the food we eat to provide cells with energy, and when our body synthesizes all the compounds needed by our cells.

Metabolic flexibility is key to our overall well-being. This refers to our body's ability to adapt to different de-

PETERSCHREIBER.MEDIA/SHUTTERSTOCK

A healthy body is much more able to ward off a viral infection.

mands, such as changes in temperature or when we need our metabolism to ramp up while exercising.

When we feed our body problem foods, we undermine all the chemical reactions that make up our metabolism. This can end up undermining our overall metabolic flexibility. Diabetes is an example of metabolic inflexibility, a lack of ability for the body to deal with different energy demands and process food into energy properly.

Type 2 diabetes (insulin resistance) and obesity are two conditions that are almost entirely affected by lifestyle and are also two of the major factors associated with worse COVID-19 outcomes. Obesity has been identified as one of the primary risk factors for being hospitalized with COVID-19—doubling the risk of hospitalization in patients its way to public awareness. under the age of 60 in one study.

Dr. Aseem Malhotra, a British cardiologist and author of "The 21-Day Immunity Plan," explains the role insulin resistance plays in the COVID-19 pandemic. "The real pandemic is poor metabolic health, or metabolic inflexibility," Malhotra says. "I had become aware, as early on as March, when we Continued on Page 10

were getting data from China and Italy, that there was a clear link between conditions related to excess body fat, in simple terms defined as poor metabolic health, [and] worse outcomes from COVID-19.

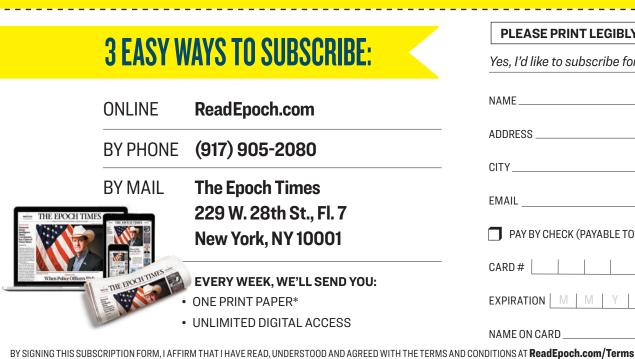
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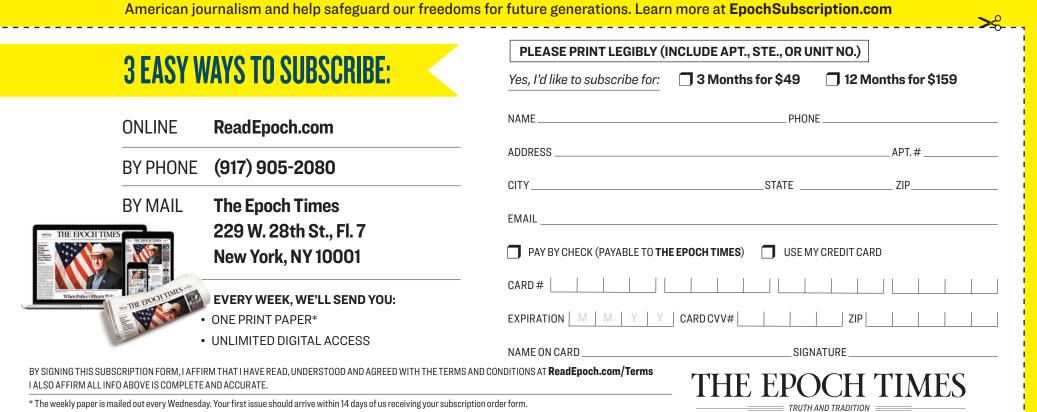
"We're talking about conditions like Type 2 diabetes, high blood pressure, heart disease and, of course, obesity. And that data kept emerging. That link was so clear, and it wasn't just out of the blue."

Malhotra says after two decades as a practicing doctor, it is clear to him and others that people with poor metabolic health have worse outcomes from any infection. "COVID-19 has highlighted it more, and made us think about it more," he said.

And although the data is clear, that information doesn't seem to be making

"I was looking at that data and thought, 'There's something missing out of this mainstream conversation.' [COVID] was getting a lot of immediate coverage across the world, in the UK, in the United States, but no one was talking about lifestyle."





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Metabolic Inflexibility Is Key Risk Factor for COVID-19

Lifestyle factors that are within our control double and triple the risk of a fatal COVID infection

Continued from Page 9

Obesity Is a Significant COVID-19 Risk Factor

Aside from old age, obesity has been identified as one of the primary risk factors for being hospitalized with CO-VID-19—doubling the risk of hospitalization in patients under the age of 60 in one study—even if the individual has no other obesity-related health problems. A French study also found obese patients treated for COVID-19 were more likely to require mechanical ventilation.

One hypothesis for why obesity worsens COVID-19 has to do with the fact that obesity causes chronic inflammation. The body uses inflammation to fight disease and heal itself, but when this reaction goes awry, it becomes a major contributor to disease. Chronic inflammation can lead to having more pro-inflammatory cytokines in circulation, which then increases your risk of experiencing a cytokine storm.

A cytokine storm response is typically the reason why people die from infections, be it the seasonal flu, Ebola, urinary tract infection, or COVID-19. Obesity also makes you more vulnerable to infectious diseases by lowering your immune function.

Insulin Resistance Augments Infection Risks

Obesity is often rooted in insulin resistance, brought on by a flawed diet. Insulin resistance is another top risk factor for COVID-19 that worsens outcomes and increases your risk of death. An April 15 article in The Scientist reviews evidence showing how higher blood glucose levels impact viral replication and the development of cytokine storms.

While the research in question looked at influenza A-induced cytokine storms, these findings may well be applicable in COVID-19 as well. In a Science Advanc-

es press release, co-author Shi Liu said: "We believe that glucose metabolism contributes to various COVID-19 outcomes since both influenza and COV-ID-19 can induce a cytokine storm, and since COVID-19 patients with diabetes have shown higher mortality."

Obesity probably doubles your risk of death, but with metabolic syndrome, it's around a 3.5 times increased risk of death.

Dr. Aseem Malhotra, cardiologist and author

COVID-19 Risk Factors Can Be Rapidly Ameliorated

The good news, as Malhotra stresses, is that the lifestyle factors that make you more prone to severe COVID-19 infection and death can be modified and ameliorated in as little as 21 days, simply by changing your diet. Like me, Malhotra feels this has been sorely missing from pandemic response messaging.

"They should have been saying, 'Listen, there's no better time for you to really think about trying to improve your health and looking into what you eat, [get] moderate exercise, sleep, all those things," Malhotra says. "But it wasn't happening."

To fill the information gap, Malhotra began writing. Initially, he wrote a series of articles for British newspapers. He also got the opportunity to speak about this on Sky News.

"I made it very clear. I said, 'Listen, there's a chance at some point we're all going to get this virus, and we want to make sure that we're in the best position to be able to deal with it, so that we don't they don't count as metabolic syndrome

get sick from it when it happens."

"I think I was probably, maybe, the only doctor who had the opportunity to say that in a mainstream media, probably in the world, at that time; I think no one else had said it."

As more data became available, Malhotra's writings turned into "The 21-Day Immunity Plan." Malhotra also had the opportunity to share information with the United Kingdom's Secretary of State for Health, Matt Hancock. By the time the book was finished, Prime Minister Boris Johnson came out saving something needs to be done, on a policy level, about the obesity epidemic.

That said, we don't have to have government policies in place to personally implement these lifestyle strategies. The information is available. It's well-documented, noncontroversial, and relatively simple to do. Surprisingly, Malhotra's message has been largely well-received, and hasn't been censored to the extent that many others have.

The ideal scenario is to get vitamin D from sunlight because it actually stays in your bloodstream longer.

Dr. Aseem Malhotra, cardiologist and author

Unfortunately, we're still fighting against a tsunami of dietary misinformation and false advertising on a daily basis, which makes it difficult to really "If every day the government was putting out a message saving, 'Metabolic health is the key,' then we would have a really big impact," Malhotra says.

Most People Have Poor Metabolic Health

The central thesis of Malhotra's book is that we have a pandemic of metabolic inflexibility or metabolic ill health. There are five primary parameters of metabolic ill health, which include having:

- 1. A large waist circumference
- 2. Prediabetes or Type 2 diabetes
- 3. Prehypertension or hypertension (high blood pressure) 4. High blood triglycerides

5. Low HDL cholesterol

If you have all of those five parameters within the normal ranges, you are in good metabolic health. Having three or more abnormal parameters is indicative of metabolic syndrome. Metabolic inflexibility can further be divided into two primary subsets: insulin resistance and vitamin D deficiency.

Signs of insulin resistance typically include high blood pressure, high triglycerides, high cholesterol, obesity, and other variables connected with it.

In the United States, NHANES data published in 2016 reveal 87.8 percent of Americans are metabolically unhealthy, based on five parameters. That data is more than four years old now, so the figure is likely greater than 90 percent of the population today.

According to a January 2019 update by the U.S. Centers for Disease Control and Prevention, more than 122 million American adults have diabetes or prediabetes—conditions which have been shown to increase your chances of contracting and even dying from COVID-19.

Metabolic Syndrome Triples COVID-19 Fatality Risk

While abdominal obesity and insulin resistance are hallmark characteristics of someone with metabolic syndrome,



on their own. That distinction becomes more important when it comes to CO-VID-19. Malhotra notes.

"The data from COVID-19 shows the highest risks of death and hospitalization are in people with metabolic syndrome, not obesity. Obesity probably doubles your risk of death, but with metabolic syndrome, it's around a 3.5 times increased risk of death—more than threefold—and about five times the risk of hospitalization if you get COVID-19.

"So that is the major problem. And the reason why that's important is it also affects many, many people. This is why BMI [body mass index], to be honest, I think should be thrown out; I mean, it's useless, it's outdated."

"We should be looking at metabolic health, because up to 40 percent of people with a socalled normal BMI, who may be told they've got a healthy weight, actually are metabolically unhealthy. That's a huge proportion of people, and there are disparities depending on which ethnicity you're from."

The problem with BMI is that it's based solely on weight and height, without factoring in body fat percentage, muscle mass, or ethnicity, says Malhotra.

"It misses a huge group of people who are probably vulnerable and could institute lifestyle changes to help themselves if they were advised to do so. But a lot of them aren't being advised because they're being told they've got a healthy weight."

"If every body knew their metabolic health markers and were then given advice to do things about it, then, as I point out in the book, within a few weeks you'd probably notice significant changes. Of course, it's going to vary from person to person."

Another crucial factor to immune function is vitamin D. Malhotra says this crucial link is overlooked. Vitamin D deficiency is a well-known and widespread problem in the United States and United Kingdom.

"Most cell receptors in your body have vitamin D receptors, and it is involved in enhancing both innate and adaptive immunity," says Malhotra.

The bottom line is you need to have the five metabolic parameters listed above within the normal ranges, and you need an optimal blood level of vitamin D, which is now thought to be between 40 ng/mL and 60 ng/mL.

"There was a study in Indonesia that showed that in people hospitalized with COVID-19—those who had severe vitamin D deficiency versus those that had normal ranges of vitamin D in their blood—there was a tenfold difference in death rates, which is extraordinary. So, [vitamin D] certainly has a very important role to play," Malhotra says.

"The ideal scenario is to get vitamin

D from sunlight because it actually stavs in vour bloodstream longer. But, certainly, at least through the winter months, you should be taking a supplement. And I think the good thing about that is it's cheap."

"I suspect getting good health actually is going to come from just eating real food, and being out in nature, and doing more exercise, and reducing our stress, and social connection; all of those things, I think, are the key to longevity and good quality of life."

How to Improve Your Metabolic Health

So, just how do you improve those threats to your survival. book, of course. In summary, to optimize your metabolic health and reverse metabolic syndrome, you'll want to mind your diet, activity, sleep, and

WA HUR LANGE

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Another major dietary

issue is the widespread

use of industrially

processed seed oils such

as canola, corn, and

soy oil-most of which

are also genetically

engineered

Dr. Joseph Mercola is

the founder of Merco-

la.com. An osteopathic

physician, best-selling

author, and recipient

in the field of natural

vision is to change the

people with a valuable

resource to help them

health. This article was

take control of their

originally published

on Mercola.com

modern health para-

digm by providing

health, his primary

of multiple awards

Limit or eliminate foods that promote insulin resistance. Topping this list are processed foods high in industrial seed oils, added sugars, and refined carbohydrates (i.e., bread, pasta, and white rice).

"Sugar is probably one of the major dietary culprits," Malhotra says. "It certainly also, beyond its calorie issue, seems to have independent effects and adverse effects on metabolic health.

Malhotra says eliminating sugar is one COVID-19 has to do of the first things he raises with people. Sugar cravings can be difficult for some people, but Malhotra says they pass. "Most people you can break those ad-

dictions usually within 3 to 6 weeks." Another major dietary issue is the widespread use of industrially processed seed oils such as canola, corn, and soy oil—most of which are also genetically engineered. These appear to be a central factor in most—if not all—chronic diseases of the modern world.

Evidence suggests they may be an even greater health threat than added sugar. Malhotra has also addressed this issue in his book, "The Pioppi Diet," published in 2017. Aside from more direct harms, one of the ways in which these oils undermine your health is by skewing your omega-3 to omega-6 ratio, as they're excessively high in omega-6 linoleic acid.

When used in cooking, they also produce toxic, carcinogenic aldehydes. In lieu of seed oils, use healthy saturated fats such as coconut oil, grassfed butter, organic ghee, or lard.

Activity

Be more physically active. This too can ameliorate and reduce metabolic disease risk markers. Just be mindful not to go overboard, as excessive exercise will

actually lower your immune function and put you at increased risk of respiratory infections.

Be sure to optimize your sleep. It is crucial to your body's renewal cycle, and a lack of sleep is linked to increased risk of many diseases.

Manage your stress. Stress spurs the release of the stress hormone cortisol. This reaction is helpful in short-term situations when you need to flee a threat or focus vour attention on immediate

five metabolic parameters? But this reaction brings a host of prob-Malhotra addresses this in his lems to modern life. In the end, the ongoing influence of cortisol leaves the body depleted and vulnerable to a host

Conclusion

As we face the risk of COVID-19, it is critical to be aware that our lifestyle will have a major impact on our risk of a severe infection or possible death from the virus. Taking the steps above will help lower that risk. Tending to these aspects of lifestyle will also ensure overall health.

One hypothesis for why obesity is worsening with the fact that obesity causes chronic inflammation.

"Combining all those together—that synergy of the diet and all the other lifestyle factors—has profound and rapid effects on health. So that's where we need to change the narrative," says Malhotra.

"One of the bits of advice to start with is what you should cut out ultra-processed food and low-quality carbs. At least go cold turkey for a few weeks. You may reintroduce them or have them as occasional treats, but this should not be making up the bulk of your calorie consumption."

"That is really where we need to start." To learn more, be sure to pick up a copy of Malhotra's book "The 21-Day Immunity Plan." It's an easy read that emphasizes and summarizes the core lifestyle basics you need to understand and apply to improve your metabolic health, which in turn will reduce your risk of complications should you come down with symptomatic COVID-19 illness. Social media information for Malhotra can be found on his site at doctoraseem.com.

Beets: Evidence-Based Health Benefits

These taproots offer a colorful mix of nutrients with healing potential

nourishes our

Beets leave behind a

colorful mess but can help

clean up several health

problems.

found in beets

betalains have

been found to

reduce toxicity

known as

associated

blood and

circulatory

system.

lever marketing has transformed exotic There is berries, tubers, and plant extracts from ancient geographically distant wisdom regions into "super foods," ostensibly better—and therefore more exburied in the pensive—than culinary standards found at your local supermarket 'doctrine of such as garlic, onion, and kale. But signatures' true nutritional super heroes are too busy performing anonymous that reveals feats of healing to garner that kind itself so of attention. Which leads us to beets. Anybloodily in the beet: it

thing we can eat that bleeds as red and readily as the beet deserves our immediate respect. In fact, this vegetable often leaves a veritable crime scene on the kitchen counter. There is ancient wisdom buried in the "doctrine of signatures" that reveals itself so bloodily in the beet: it nourishes our blood and circulatory system. Indeed, thanks to the burgeoning growth of food science on the topic, we now know that beets are one of nature's finest cardiovascular tonics.

Beet's Blood-Vessel-Dilating Properties

A 2008 study published in the journal Hypertension found that beets contain pharmacologically significant quantities of blood-vessel-dilating nitrate. Three hours after ingesting 500 ml of beet juice, study subjects experienced a significant drop in blood pressure that could be directly correlated with increased plasma nitrate concentrations.

Beet Back Muscle Fatigue

But beets don't just improve cardiovascular performance but athletic performance as well. In 2009, a study published in the Journal of Applied Physiology found that dietary nitrate supplementation in the form of beetroot juice reduced the oxygen cost of submaximal exercise and enhanced tolerance to high-intensity exercise.

A follow-up study published in the same journal in 2010 found that nitrate-rich beetroot juice also enhanced muscle contractile efficiency during knee-extensor exercise in humans. The researchers hypothesized that the observed beneficial effect may be due to a reduced energy cost of muscle force production.

Beet Back Infections

Consider that beets "live" in the dirt, a place full of microbes that love a free meal. This means that nature has equipped the plant with natural defenses. No wonder that beets have been found to fight off the following infectious organisms:

• Beet pectin has been found to in- ue of vitamin C, keeping in mind hibit the synthesis of types A and B staphylococcal enterotoxins. Beet extract has been found to

and lethality. • Beetroot has been found capable of inhibiting Epstein-Barr virus associated tumor formation.

reduce influenza A infectivity

Undoubtedly, future research will find beet to have a wider range of antimicrobial applications. But beet's powers don't end there. Other already researched properties include:

Liver Damage: A 2006 study found that beetroot has significant dosedependent liver-protective properties against the chemical carbon tetrachloride. More recently, research has found that it also protects against N-nitrosodiethylamine associated liver damage.

Cardiovascular Disease: While the "LDL cholesterol is bad" myth is almost imbecilic in its simplicity, those looking for ways to modulate the lipid ratio naturally in favor of the medical establishment's largely drug-company drafted

that beet can help. A 2000 study found beet fiber was capable of simultaneously

increasing HDL and lowering LDL levels; perhaps far more impressive, the study also found close to a 30 percent reduction in cholesterol plaque accumulation in the aorta of those animals fed beet fiber.

Radiation Exposure: Compounds found in beets known as betalains have been found to reduce toxicity associated with gamma radiation exposure.

Cancer: Beetroot juice has been found to reduce adverse effects caused by DMBA, a chemical associated with mammary cancer risk. Beetroot has also been found to exhibit anti-cancer properties in prostate cancer cell lines at toxicity levels far lower than chemo-agents such as doxorubicin.

Beet Nutrition

Beets, of course, have basic nutritional gifts to offer in addition to their aforementioned medicinal properties. They contain exceptionally high levels of folate at 148 mcg or 37 percent the daily value in just a one cup serving. They also sport an impressive 6.7 mg or 11 percent daily val-

that vitamin C activity expressed through food is very different from its isolate—semi-synthetic ascorbic acid. In other words, that 6.7 mg is worth far more than the story of molecular weight alone can tell. The GMI Research Group is Another way to understand this is if

chemical. For more information on this dynamic, consult contributing writer Dr. Vic Shayne's excellent book: "Whole Food Nutrition: The Missing Link in Vitamin Therapy." For a full list of beet's nutritional components, visit Nutritiondata. com's page on beets here. For a full list of beet's therapeutic properties on GreenMedinfo.com visit

you take a nutrient out of its natural

context as a whole food, it behaves

less like a nutrient and more like a

our Beet Health Benefits page. Fi-

nally, for those looking for beet recipes, visit the FoodNetwork's page on the topic, remembering to substitute organic versions of the ingredients listed whenever possible.

dedicated to investigating the most important health and environmental issues of the day. Special emphasis will be placed on environmental health. Our focused and deep research will explore the many ways in which the present condition of the human body directly reflects the true state of the ambient environment. This work is reproduced and distributed with the permission of GreenMedInfo LLC. Sign up for the newsletter at www. GreenmedInfo.health



with gamma radiation exposure.

New study debunks belief that artificially sweetened drinks healthier than naturally sweetened

Sweet Drinks Linked to Cardiovascular Disease

MAT LECOMPTE

eople who are worried about heart health may want to steer clear of sugary and artificially sweetened drinks. According to a new study, both types of beverages could have a negative impact on cardiovascular health.

The study published in the Journal of the American College of Cardiology has found that artificially sweetened drinks, which have previously been suggested as a healthier alternative, could actually be just as detrimental to health. Researchers came to their conclusions by studying data from the French NutriNet-Santé cohort in order to investigate the relationship between heart health and sugary drinks and artificially sweetened beverages.

The study included records of 104,760 participants who were asked to record 24-hour dietary records every six months. For each beverage category, participants were divided into non-consumers, low consumers, and high consumers. Sugary beverages were defined as drinks containing more than 5 percent sugar, and artificially sweetened drinks were



It turns out those zero calorie drinks take their own toll on heart health, not to mention earlier research linking artificial sweeteners to stroke and dementia.

defined as those containing non-nutritive

During the follow-up from 2009 to 2019, first incident cases of cardiovascular disease were recorded, which were defined as stroke, transient ischemic attack, myocardial infarction, acute coronary syndrome, and angioplasty. Researchers found that overall, 1,379 participants had first incident cases of cardiovascular disease. Both higher consumers of sugary and artificially sweetened drinks had higher risks of cardiovascular disease after accounting for a wide range of confounding factors.

Lead author of the study, Chazelas concluded, "Our study suggests artificially sweetened beverages may not be a healthy substitute for sugar drinks, and these data provide additional arguments to fuel the current debate on taxes, labeling and regulation of sugary drinks and artificially sweetened beverages."

In order to establish a causal link between artificially sweetened beverages, sugary drinks, and cardiovascular disease, largescale replications will be needed. However, this study lays the groundwork to establish the effect sugary and artificially sweetened drinks can have on heart health.

Other Health Issues Reported

Heart health is not the only thing at risk from these sweet drinks. Artificially sweetened beverages have also previously been shown to increase the risk of stroke and dementia. Researchers at Boston University crunched the numbers and found that people who consumed diet soda are nearly three times more likely to experience stroke and dementia.

Cutting back on sugary beverages such as sodas, juice, and fancy coffees may do nothing for your health if you are replacing them with artificially sweetened alternatives. Both sugary and artificially sweetened drinks can be addictive, so starting to cut down the number consumed per day is the best way to cut them out of your diet slowly.

Experts agree that there is nothing better than water when looking for a healthy refreshing drink, so start replacing those sugary drinks with a cold glass of water, and your heart and waistline will

Mat Lecompte is a health and wellness journalist for Bel Marra Health, which first published this article.



SIMON BRATT

n the United Kingdom, it's estimate ed that 86 percent of people who access treatment for alcohol use experience mental health problems. Similarly, 70 percent of people in treatment for drug dependency also have a mental illness. For those people who report coexisting mental health difficulties, depressive and anxiety symptoms tend to be the most common.

In the United States, the National Institute on Drug Abuse (NIDA) estimates that nearly half of those with a substance use disorder also had mental illness and vice versa. The two conditions contribute to each other: those on drugs can develop mental illness and those with mental illness may seek respite in drugs.

Often people with substance use issues find getting help for their mental health is difficult and frustrating—as there's often the view from mental health professionals that patients need to stop using drugs or ings, sadly nothing has changed—if anyalcohol before they can access treatment. thing, things have got worse.

But herein lies the problem because, for many people, using a substance can be the way they cope—or mask mental health difficulties. Asking them to stop using drugs or alcohol means taking away their coping strategy and without immediate support, it's likely that person will return to using substances to cope with psychological distress.

This often leads to a revolving-door scenario, whereby the person will ask for support from mental health services only to be told to stop using substances. They stop using substances but can't get support for months thanks to long waiting lists, so end up returning to substance use to cope.

In the United States, NIDA found those with co-occurring drug and mental illness disorders also struggled to get the treatment they needed. For slightly over half of them, cost was the largest barrier. Of those who got treatment, 34 percent received mental health care only, 9 percent received dual care, and 4 percent only received substance use treatment.

'Dual Diagnosis'

Someone with both a mental illness and substance use disorder is considered to have a "dual diagnosis"—a concept that emerged in 1990. In 2002, the United Kingdom's Department of Health reported that supporting people with dual diagnosis was one of the biggest challenges facing frontline mental health services.

The report highlighted how fragmented care leads to people falling between the cracks in services. It warned that "patients should not be shunted between different sets of services or put at risk of dropping out of care completely."

The report also stated that people with dual problems deserve high-quality, patient-focused, and integrated care, which should be delivered within mental health services. But 18 years on from these find-

Treatment and Recovery

As part of my ongoing doctorate research, I sent a freedom of information request to every mental health trust within England. I wanted to find out if high-quality and integrated care exists for people with a dual diagnosis.

The results show that only 58 percent of the NHS trusts record data about people with a dual diagnosis and that only 28 percent of those trusts had specific teams that offered treatment. The remaining trusts outsourced treatment to voluntary or private-sector substance use services. This means that where you live affects the type of care you will be given—creating a post code lottery for people trying to access support and treatment.

From the data I collected, only 11,486 UK patients were recorded to have a dual diagnosis. Yet it's estimated that 586,780 people

A Crisis on the Frontline the view from There are several reasons why the data colmental health

There's often

that patients

need to stop

using drugs

or alcohol

before they

can access

treatment.

Simon Bratt is a

worker and doc-

toral candidate at

Staffordshire Uni-

versity in the UK.

published on The

Conversation.

This article was first

mental health social

lected isn't a true reflection of the prevaprofessionals

lence of dual diagnosis—and one reason is the term itself. There isn't a clear definition of "dual diagnosis"—and services often develop their own local word or use the term "co-occurring mental illness and substance use" instead.

likely that the real figure is far higher.

Another reason is that people with a substance dependency may not go to the doctors for help with their mental health for fear of being rejected. Hearing the words: "We can't treat your mental health if you are using substances" is becoming the norm for people with substance use. This discrimination and stigmatization puts people's lives at risk.

COVID-19 has presented significant challenges to UK health care systems and public health policies. Disruption has led to community-based services grinding to a halt due to the redeployment of health care workers and quarantine restrictions People with a dual diagnosis not only suffer from their mental health and substance use, but most will also have multiple needs. Some will have experienced significant trauma, live in poverty, may be known to the criminal justice system, and have little or no support in the community.

Research has shown how past crises significantly affected the more vulnerable in society, leading to an increase in substance use. So it would be remiss to think that mental health difficulties and substance use will not increase in the wake of the pandemic. In fact, it runs the risk of overwhelming an already exhausted NHS.

This is why an integrated approach to care is needed, as well as a culture change in terms of how health care professionals work with and treat people with mental health problems and substance use. The stigma must be banished now—before it's too late.

Silencing the Cycle of Pain Lifestyle measures to control pain show

surprising effectiveness

DEVON ANDRE

hronic pain is a cycle affecting an estimated 100 million Americans. It can vary from soreness in the lower back to mental suffering.

Pain and depression go hand in hand. They feed off of each other, making it hard to escape the cycle. This can be destructive on several fronts, leading to high medical costs and potential addiction.

Access to effective, sustainable care can also be a problem. However, a new study shows a useful, affordable, safe, and effective coping mechanism for pain and

mood: mindfulness-based stress reduction, or MBSR.

Mindfulness meditation may promote a sense of calm and clarity that can relieve stress.

Participants in semi-rural Oregon experiencing issues with affordability and access to care

received intensive instruction on mindfulness meditation and mindful hatha yoga for eight weeks.

It worked.

Most participants, 89 percent of them, in fact, reported that the program helped them find better ways to cope with pain. Pain relief, mood, and functional capacity were all improved during the instruction period. Participants were given the tools to continue treatment at home.

The study appeared in the Journal of the American Osteopathic Association.

Yoga and mindfulness can be

taught virtually and practiced by anybody, anywhere. There is other work suggesting these practices can aid pain management and offer effective coping mechanisms.

These lifestyle measures may help combat chronic pain in a few ways. The first is outlook. Mindfulness meditation may promote a sense of calm and clarity that can relieve stress. Stress and depression may exacerbate physical pain, so the calming effects

Plenty of data suggests yoga may improve pain and functionality. The meditative stretching helps loosen muscles and familiarizes

of mindfulness may help.

effective treatment with side benefits-rather than side effects.

We are bombarded with pain

relief ads promoting cure-all

pills but yoga may offer an

various positions to make the

the pain in the process.

body more fluid and adaptable. Managing chronic pain is about getting a handle on physical and mental health. Meditation and yoga can work together to potentially improve your mood and general outlook, helping to quell

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

With so much political division, we may need to practice more modesty to communicate and cooperate

JILL SUTTIE

any Americans worry about the political divide tearing our country apart. A large percentage are unwilling to engage with people who have opposing political views, and that's creating more animosity.

This is especially worrying considering how many issues require cooperation, trust, and solutions a diverse citizenry can get behind. How can we find a way across our divide and come together for common cause?

At Greater Good, we've been studying and writing about various ways to bridge divides, putting together tools to help people connect. But there may be one key character trait that's necessary for applying those tools in a constructive way: humility.

"Humility is a kind of a master virtue that can pull along other virtues if people develop it," says humility researcher Everett Worthington.

Humility, as Worthington defines it, is multifaceted, involving an awareness of our personal strengths and weaknesses, as well as a willingness to acknowledge those weaknesses while working to improve upon them. It requires presenting ourselves in modest ways, while caring about the well-being of those around us.

A growing body of research shows that being humble may be useful in bridging political differences. That's because humility helps people let go of defensiveness, take in information that challenges their political views, and see the humanity in people on the other side of the political spectrum. Though it's not always easy to embrace especially for those who wrongfully equate it with weakness or a lack of conviction humility may be what we desperately need right now in the United States.

Why We Should All Be More Humble Considering the research on perception, it's pretty clear that, when it comes to understanding others, we all have weaknesses that could use improving.

Research suggests we are not always very good at understanding what another person is thinking or feeling, even when trying to "put ourselves in their shoes." Often, we are better off simply asking people about their experience and being open to listening than trying to secondguess anyone.

Cognitive biases may be partly to blame. For example, the fundamental attribution error—attributing others' actions to their fixed character traits rather than considering what outside forces contributed to their behavior—can make us misjudge others or believe they "get what they deserve." This can explain why we label a colleague who falls behind at work "lazy" or "incompetent," instead of realizing they may be managing difficult issues at home or have too many assignments—or why, when we see people fail to evacuate during a disaster, we call them "stubborn," even though they didn't have the means to escape to safer ground.

Our brains often trick us into seeing only what we already believe, too. For example, one study showed that people assigned to watch a demonstration reported different levels of protester violence depending on whether they agreed with the cause being protested. They literally could not see the same events in the same way.

Research has found that people often mistake how large differences are between people without noticing their commonalities. For example, people in different political parties tend to misjudge how far apart they are in terms of their beliefs and hopes for the country. This can create a lot of antipathy, which makes it hard to come together.

As a new book, "Perception," explains, many unconscious factors affect how we feel, think, and make decisions, including our personal energy levels, physical abilities, moods, the company we keep, and more. That means we can't always trust ourselves to see others (or even the world around us) clearly. Seeing our limitations is a good first step in recognizing the need

How Humility Helps Bridge Differences

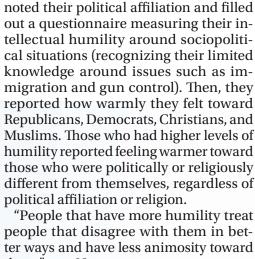
It makes sense that knowing we don't own the corner on truth could help us bridge our differences, lessening our intolerance for diverse opinions and antipathy toward people on the "other side." And scientific evidence bears this out.

Some people have a greater ability to imagine their own ignorance. And this awareness of their shortcomings helps them get along better with others.

Seeing our limitations is a good first step in recognizing the need for humility.



Humility requires presenting ourselves in modest ways, while caring about the well-being of those around us.



them," says Newman. Why would that be? Newman believes

humble people are more likely to think an opponent could know something they don't know or have experienced something they haven't experienced. People with less humility. he adds, would consider people who disagree with them to be suspect, unintelligent, or morally deficient—not endearing qualities.

"How I see the infallibility of my own position (and, by implication, an opposing position) determines how willing I am to demonize people that are on the other side," says Newman.

In a second part of their

study, Newman and Krumrei-Mancuso had half of the participants fill out a questionnaire that measured their intellectual humility around the topic of immigration and crime (priming them to consider the limits of their knowledge). Participants were instructed that they would be asked about people who had legally immigrated to the United States. Then, all participants were asked how much they agreed with the statement, "In general, immigrants are more likely to commit crimes than those born in the U.S."

Then, after getting factual information about the topic, half of the people in both the primed and unprimed groups were told they'd be writing an argument for or against the statement about immigrants and crime. The researchers told the other halves of both groups to defend their current position, so they could focus more on evidence that supported it.

Once participants read the int (which explained that, while there is some disagreement among experts, most evidence shows immigrants do not commit more crimes), participants again reported on how much they agreed with the statement. Those who were high in humility and primed to think about it were willing to reconsider the strength of their position when presented with the facts.

"People high in intellectual humility are going to pay more attention to the reasons for their views," says Newman. "That means they are going to notice the limits of their knowledge and the limits of the evidence in favor of their position, and be more receptive to new information."

These findings mirror those of Tenelle Porter and her colleagues, who also found a connection between having more intellectual humility and being open to opposing views. In that study, believing in a "growth mindset" around intelligence—that people aren't naturally intelligent, but can grow in learning through trial and error—was what led to increased intellectual humility, suggesting that adapting a growth mindset could indirectly affect how accepting we are of other views.

According to psychologist Joshua Hook, humility can help bridge differences even when people have strong convictions around their beliefs. In one study, he and his colleagues measured intellectual humility in religious leaders and found that those with higher levels of humility had much more tolerance for religious differences in others than those without humility—regardless of how religious they were or whether they reported being politically conservative or liberal.

"If you have an awareness of the limitations of your own beliefs and how they came to you, maybe you are more in tune with the idea that you don't have the corner on the truth," says Hook.

Even though you might expect that religious leaders surrounded by family and friends of varying faiths would be more tolerant of diverse religions, Hook's findings

Humility helps people let go of defensiveness, take in information that challenges their political views, and see the humanity in people on the other side

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your own beliefs

didn't support that. Instead, having more religious diversity in one's social group only led to more tolerance if someone was also high in intellectual humility.

"It depends on whether or not someone is open for their interactions with people who are different from them that leads to religious tolerance or not," he says.

How to Cultivate Humility in Ourselves If that's true, maybe we need to find ways to increase humility in ourselves and in others. Though the research on how to induce humble states in ourselves is young, there is some evidence that it can be done.

Worthington and his team have developed a do-it-yourself workbook to teach humility that has shown promise. Through various exercises offered in the workbook, people can learn more about what humility is and isn't, use self-reflections and inspirational stories to examine humility in themselves, and engage in practicing humility in their own lives, among other lessons.

The workbook has been tested in randomized controlled trials, along with other workbooks designed to teach forgiveness, patience, or self-control, or to improve mood. In one study, people who completed the humility workbook were found not only to be humbler according to their own report but also scored higher in forgiveness and patience—and they had fewer negative moods.

Unfortunately, Worthington had to suspend a large-scale study of humility and civility when COVID-19 hit. However, he's hopeful that teaching humility could improve political dialogue, as other research has shown that it improves interpersonal interactions in other situations.

Of course, political conversations may be harder to keep civil than other conversations, where there may be more goodwill present. Still, at least one recent study showed that when people are seen as having more intellectual humility, they may help foster better conversations with people who disagree with them on politically charged subjects such as the death penalty, affirmative action, physicianassisted suicide, and genetically modi-

Worthington says there are good reasons to expect more politically humble people to have civil conversations and so bridge divides—even if they are the only ones being humble in a conversation or even if they have very firm convictions. That's because people who are more humble don't need to denigrate others' arguments or denigrate them as people, which helps reduce defensiveness and opens up the possibility of better engagement with one another.

"Anybody who's doing their best to be respectful is going to end up having a more positive interaction than someone calling each other names or being verbally aggressive," he says. "The more politically humble people are able, the more able they are to have civil conversations about political differences, even if they disagree."

Jill Suttie, Psy.D., is Greater Good's book review editor and a frequent contributor to the magazine. This article was originally published by the Greater Good online magazine.

In a study conducted by Elizabeth Krumrei-Mancuso and Brian Newman, participants

WISE HABITS

When Your Task List Is Overwhelmingly Long

Taking the time to review priorities—and why they are priorities—can help you make the 'short list'

LEO BABAUTA

've talked with several people lately who have task lists from the floor to the ceiling, and it just overwhelms them. They're not alone—I can relate, and lots of people have this problem. If we're fairly organized, our task list has everything we could possibly

want to do on it, and it'll get longer and longer. That's the good scenario—most people don't have everything on the list, and the tasks are scattered across different systems and lists, in email inboxes and messaging apps, in browser

tabs and pieces of paper, and in their heads. Either way, it eventually gets so overwhelming that many people will give up whatever system they're doing and start afresh because the old system wasn't working. In truth, they just didn't have a way to deal with the

So what can we do? It turns out, several key things.

overwhelm.

Get Clear on Priorities

Let's call this Step Zero—if you're already clear on what matters to you. you're ahead of the game.

But think about this: If you don't know what matters, how can you focus on anything? Everything will seem urgent and important, and you'll be scattered in lots of directions.

If you know what is most important, you can focus on that. The rest can wait. It's like if you're a doctor in a hospital, and one person needs a life-saving heart operation, and a hundred people have ankle sprains. You'll focus on the heart operation, and let the ankle sprains wait.

Get clear on what matters to you. Make a list. Write out why. It's worth spending 30 minutes on this.

Get clear on what's important this week. And what you need to focus on today.

If you can get clarity on what matters and what to focus on, it will make you so much more effective than jumping around from task to task as if you were putting out a thousand small fires.

Sometimes there are just too many things to do, and sometimes there just isn't enough clarity about why they are worth doing.

Change How You Relate to Your Tasks Think about your list of tasks right now—does it feel stressful? This is a sign that you think of them as burdens, as something stressful, or as a potential way that you're going to let people

> down or fail or look stupid. Or maybe all of the above. How I've often related to my tasks is something like, "If I don't do this task, I will be deficient and let people down." If I have a list of tasks that's full of these kinds of potential failures—of course it

will be stressful. How do you relate to your tasks? Is there a more empowered relationship you can create? Some examples:

- I'm fully committed to this task because it's incredibly important to me, so I'm going to create a sacred space of 30 minutes today to be fully present with it.
- This task is an opportunity for me to serve someone I care deeply about, with love.
- These tasks are training ground for

me to practice presence, devotion, getting comfortable with uncertainty.

- These tasks are an adventure. An exploration of new ground, a learning space, a way to grow and discover and create and be curious.
- This task list is a huge playground, full of ways for me to play today. These are some examples from my life,

but they don't have to be your relationship—what empowered way would you like to relate to your tasks? Find that, and practice it daily.

A Short List

I find it helpful to have a long list of tasks, separated by area (work, personal, finances, etc.) and project, if applicable. But this long list can't be done today.

So I create a short list, of just stuff I'm going to do today. I call it "Today's Joy List." I try to keep it to five or six things, though often I give in to the temptation to add more joy opportunities than I actually have time for.

If I have meetings, those are on the list, and the more meetings I have, the fewer tasks I allow myself to put on the list.

What things have to be done today? What things would be a really powerful use of your day?

Just focus on those. The rest can come later.

Full Focus

With a short list of high-priority tasks, and an empowered relationship to those tasks, the world is yours!

on one thing at a time. If you can practice this regularly, the overwhelm starts to lessen. The opposite of this is constant switch-

ing between tasks. Doing quick emails, working on a task, but 30 seconds into that task you go check your favorite website or messages, etc. Full focus is picking something impor-

tant to work on, and then clearing everything else away. Make this the only thing in front of you. Notice the urge to go do something else, breathe, then bring focus back to the task. Let it be your whole world. Be grateful

to have this task in front of you, this opportunity to serve people you care about, this opportunity to play and be curious, this opportunity to learn and find joy and delight.

Now that I've shared these ideas of working with an overwhelming task list, how would you like to practice?

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MIND & BODY Week 46, 2020 THE EPOCH TIMES

MINDSET MATTERS

The Practice of Surrender

Sometimes the best solution to difficult feelings is to get out of our own way

NANCY COLIER

hen I am confronted with difficult feelings, or any feelings really, my tendency is to try to figure out how they can serve as lessons, make me more aware, and help me grow as a human being. I guess you could say this is my way of keeping feelings at a safe distance and under the control of my mind.

Some people create distance from their feelings by strategizing—focusing on how to change and improve them, or how to hold onto good feelings and stop them from disappearing. Others manage feelings by turning them into a story and continually narrating or describing them to themselves and everyone else.

There are also those who avoid their feelings altogether by projecting them onto others through grand schemes of blame and the like. The point is, whether we're understanding, learning from, examining, manipulating, managing, fixing, projecting, interpreting, or narrating, we are quite clever at finding ways to not feel our feelings directly.

We are taught that we shouldn't get too close to our feelings and certainly shouldn't feel them in the flesh or inhabit them. We don't want to experience suffering, so we keep our feelings a safe distance through countless selfprotective strategies. We believe that if we were to feel them directly, we might never come out on the other side.

But herein lies one of the greatest mysteries of life: Somehow, when we stop trying to change or manipulate our feelings and just experience the raw emotions directly (without any story to go with them), they tend to transform on their own. There is a natural process, a flow of grace that kicks in when we give ourselves permission to actually feel what we feel, without a narrative about what it all means or what to do with it.

I was not confident when I first started practicing this simple (but not easy) teaching. I did not believe any good could come from not analyzing or managing my feelings in some way. It seemed like a waste of time and that feeling what I felt directly would extend the bad feelings. Why would I need to feel it anymore or any more directly than I already did? How would that help?

When I began the practice of embracing my feelings directly, without an accompanying story or strategy, my mind kept telling me that without its help, nothing good would come of it. But in reality, what I experienced when I set the mind's narrative aside was far better than anything I could have thought up.

Getting Out of the Way

Astoundingly, when my feelings were given permission to be experienced, from the inside out, they did change—on their own. As it turned out, the feelings themselves had a wisdom and an energy of sorts. I didn't have to be in charge of changing them or of doing anything with or to them. All I had to do was get out of the way and give them an invitation to be felt. With that, my feelings relaxed and transformed on their own.

Once experienced directly, felt in the body and heart, with no "middle mind," my suffering loosened. Ironically, the feelings could then actually become my teachers (as I had previously hypothesized). This was a revelation—that the feelings could transform on their own, without my pursuit.

Through this practice, I discovered

that I can surrender to life and don't need to vigilantly manage my experience to fit a desired outcome. When I took the risk to let my heart simply feel what it feels, I was able to experience a larger, more magical, and mysterious process at work. I got to experience grace, which moves things forward on its own, me included.

Had I not taken the leap, I would never have trusted the river of life that is pushing us onward, no matter how much our mind tries to convince us that we are in charge. What I learned through this practice is that it is safe to sync up with my experience, to get inside it. Then,

there remains only one entity, one experience, and one self, rather than a separate experience that I am having and must control.

that my feelings

know how and what they need to feel better. They know this better than I ever could. I can then relax and trust life, trust grace, trust the process of change itself all of which is happening on its own.

Nancy Colier is a psychotherapist, interfaith minister, author, public speaker, and workshop leader. A regular blogger for Psychology Today and The Huffington Post, she has also authored several books on mindfulness and personal growth. Colier is available for individual psychotherapy, mindfulness training, spiritual counseling, public speaking, and workshops, and also works with clients via Skype around the world. For more information, visit NancyColier.com

So, too, I discovered **Sometimes** the best way to resolve our difficult thoughts and feelings is to end the pursuit.

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