

THE EPOCH TIMES

MIND &

BODY

END OF LIFE

Aiding Her Dying Husband, a Geriatrician Learns the Toll of Caregiving

JUDITH GRAHAM

The loss of a husband, the death of a sister, and taking in an elderly mother with dementia: This has been a year like none other for Dr. Rebecca Elon.

The 66-year-old Elon has dedicated her professional life to helping older adults. But her experiences over the past year have taught her what families go through when caring for someone suffering from a serious illness as nothing has before.

“Reading about caregiving of this kind was one thing. Experiencing it was entirely different,” she said.

Were it not for the challenges she’s faced during the coronavirus pandemic, Elon might not have learned firsthand how exhausting end-of-life care can be on both a physical and emotional level—something she understood only abstractly through her previous experience as a geriatrician.

And she might not have been struck by what she called the deepest lesson of the pandemic: that caregiving is a manifestation of love, and that love means being present with someone—even when their suffering seems overwhelming.

All these experiences have been “a gift, in a way: They’ve truly changed me,” said Elon, who serves as a part-time associate professor at the Johns Hopkins University School of Medicine and an adjunct associate professor at the University of Maryland School of Medicine.

Elon’s uniquely rich perspective on the pandemic is informed by her multiple roles: family caregiver, geriatrician, and policy expert specializing in long-term care.

“I don’t think we, as a nation, are going to make needed improvements [in long-term care] until we take responsibility for



DR. KRIS KUHN

Dr. Rebecca Elon, an esteemed geriatrician and policy expert specializing in long-term care, saw firsthand what caregivers face when her husband, Dr. William Henry Adler III, was diagnosed with frontotemporal dementia with motor neuron disease in 2017.

Caregiving is a manifestation of love, and that love means being present.

our aging mothers and fathers—and do so with love and respect,” she said.

Elon has been acutely aware of prejudice against older adults—and has been determined to overcome it—since she first expressed interest in geriatrics in the late 1970s.

“Why in the world would you want to do that?” she recalled being asked by a department chair at the Baylor College of Medicine, where she was a medical student. “What can you possibly do for those [old] people?”

Elon ignored the scorn and became the first geriatrics fellow at the Baylor College of Medicine—located in Houston—in 1984. She cherished the elderly aunts and uncles she had visited every year during her childhood and was eager to focus on this new specialty, which was just being established in the United States.

“She’s an extraordinary advocate for elders and families,” said Dr. Kris Kuhn, a retired geriatrician and longtime friend.

In 2007, Elon was named Geriatrician of the Year by the American Geriatrics Society.

Continued on Page 6

Landmark Study Shows Sardines Help Keep Diabetes Away

A simple dietary change discovered by researchers in Spain could help millions avoid diabetes



ANASTASIYA ARTCOMMA/SHUTTERSTOCK

JOSEPH MERCOLA

Researchers found that people with pre-diabetes who ate two cans of sardines each week significantly lowered their risk of developing Type 2 diabetes, lowered their insulin resistance, and lowered their blood pressure as well.

Type 2 diabetes is a metabolic condition that’s affected by several factors, including the foods you eat and the amount of

exercise you get. There are several significant consequences of Type 2 diabetes, including neuropathy (nerve damage), loss of sight, kidney disease, and heart disease. Recent data published in *Clinical Nutrition* in March suggests people who face a greater risk of developing diabetes may want to eat more sardines.

Risk factors for Type 2 diabetes include being overweight, having a family member with Type 2 diabetes, being physically inactive, and having been diagnosed with gestational diabetes—diabetes during pregnancy.

People with metabolic syndrome also have a higher risk of being diagnosed with diabetes. You may be diagnosed with metabolic syndrome if you have three of the five health conditions associated with the syndrome. These include high blood sugar, high blood pressure, high triglycerides, low levels of high-density lipoproteins (HDL), or a large waist circumference.

Continued on Page 4

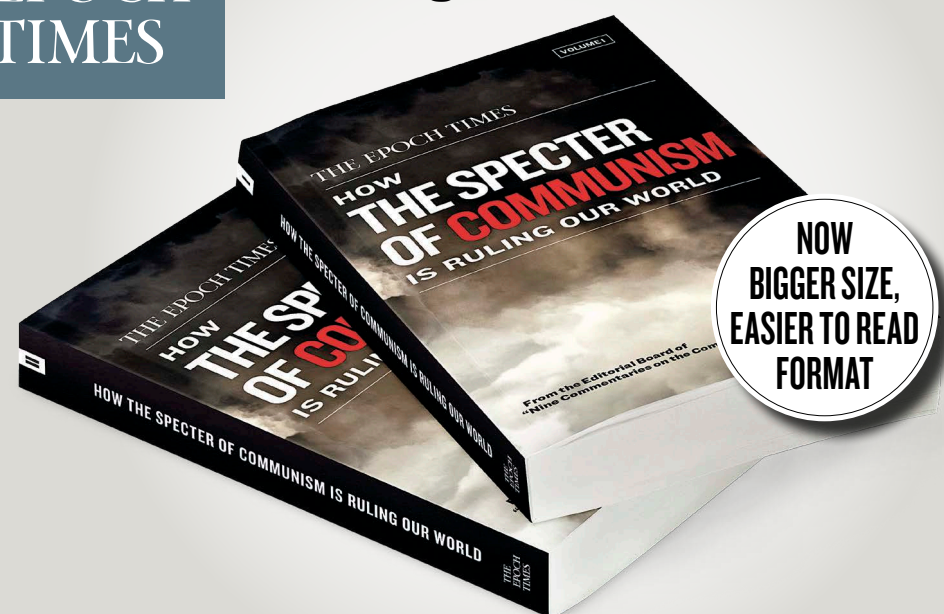


“Sardine” refers to various small, oily forage fish in the herring family.

VIENNETTA/SHUTTERSTOCK

THE EPOCH TIMES

The Book You've Been Waiting for...



“Extremely well researched and true.”

“The Truth, as horrifying as it is, shall set us free. This should be on this country's academia's list of required reading.”

HOW THE SPECTER OF COMMUNISM IS RULING OUR WORLD

The specter of communism did not disappear with the disintegration of the Communist Party in Eastern Europe

ORDER NOW!

Available at **amazon** **EpochShop.com**



Behind the Subscription

Your subscription will not only provide you with accurate news and features, but also contribute to the revival of American journalism and help safeguard our freedoms for future generations.

We aim to tell you what we see, not how to think; we strive to deliver you a factual picture of reality that lets you form your own opinions.

We believe that we live in truly epochal times, where the faithful representation of our current events won't just be important for the people of today, but also for the generations to come. The records we keep now will directly inform the foundations of the history they'll learn and the values they'll cherish—and this knowledge is what drives us.

Learn more at

EpochSubscription.com

THE EPOCH TIMES
TRUTH AND TRADITION

How to Protect Yourself From iPhone Radiation

IPhones are beloved by many but top the charts when it comes to radiation levels

DANIEL T. DEBAUN

Given the iconic status and popularity of Apple's iPhones, there's something of which all consumers should be aware. iPhone radiation, especially in newer models, is the highest among all smartphones—just barely under the legal limit.

All mobile electronic devices, including cell phones, emit a form of energy called Electromagnetic Field (EMF) radiation. Exposure to EMF radiation can become harmful when we constantly use our mobile devices close to our bodies over long periods of time.

Cell phones emit radio frequency (RF) radiation from wireless Internet and cellular connections, while their batteries emit extremely low frequency (ELF) radiation.

Certain parts of the body, such as the head and torso—including the breasts and reproductive area—are much more vulnerable to EMF emissions than the arms and legs.

Studies have found links between EMF exposure to everything from minor health concerns such as headaches and skin rashes, to very serious concerns, such as fertility problems, DNA fragmentation, cell damage,

it emits compared to similar devices.

The SAR rating for phones in the United States typically range from 0.2 at the lowest (thus safest) end of the spectrum, all the way up to 1.60, the legal limit before the phone is considered unsafe for human use.

When all transmitters on the iPhone 6 are on (cellular, WiFi, and Bluetooth), its SAR value is 1.58, and the iPhone 6 Plus reaches 1.59! This is dangerously high, and yet most people aren't aware of the risk that iPhone radiation poses to their health.

If you own an iPhone, we're not saying you should toss it and subject yourself to life with a WiFi-devoid, T9-style clunker phone. However, it's very important to be aware of the amount of iPhone radiation emitted, and to take measures to protect yourself from the damage that EMFs can cause in both the short-term and long-term cumulative use.

Thankfully, there are several easy things you can do to reduce your exposure to iPhone radiation.

Tips for Reducing iPhone Radiation

Distance is one of the greatest forms of protection.

According to basic principles of physics, as distance from a source of EMF radiation increases, intensity of exposure decreases dramatically; in other words, simply putting a few inches between you and your device will considerably reduce the amount of iPhone radiation absorbed by your body. Here are a few ways you can follow this principle:

1. Use the speakerphone function on your iPhone whenever possible.
2. Keep your iPhone in the standard talk mode, but turn the volume up to the highest setting and hold the phone 2-4 inches away from your head. If you're not in a noisy space, you should still be able to hear and be heard normally.
3. Opt for wired headphones or, better yet, radiation-free air tube headphones, especially if the call will be long.
4. When you sleep, keep your iPhone at least four feet away from your bed.
5. If you must be on a call while driving, use Apple CarPlay or an auxiliary cord to direct it through the car's speakers. This has the added upside of promoting safer driving as well as reducing your EMF exposure.
6. Keep your iPhone in a belt holster or in a bag. Better yet, don't keep your phone on you at all if you won't need it. Remember, any extra distance helps.

◀ If your iPhone is far from a tower or has poor reception, it will work harder to grab a signal and emit more radiation as a result.

GPH-FOTO.DE/SHUTTERSTOCK



ANDREA PIACQUADRO/PEKELS

Airplane mode isn't just for flying.

This feature is a simple way to immediately disable all wireless transmissions, thus reducing iPhone radiation. When airplane mode is enabled, your iPhone is no longer connected to WiFi, Bluetooth, or cellular data, meaning it is no longer constantly sending out RF signals to remain connected.

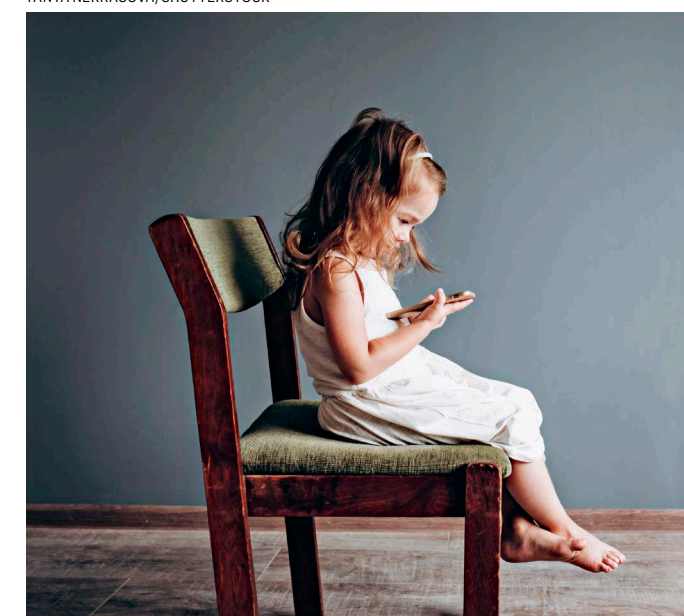
If you frequently carry your iPhone with you, try to primarily keep the phone in airplane mode, and periodically disable it to check for incoming texts or voicemails—or to make a call/send a text. Switch back to airplane mode as soon as you're finished using your iPhone. Airplane mode is also useful for preserving your iPhone's battery life and helping it recharge faster.

To quickly enable airplane mode on older models of iPhones, place your finger on the bottom edge of the screen, swipe upwards, and tap the airplane icon. If you have an iPhone X or later,

Simply holding your phone farther from your face and using the speakerphone function can significantly lower your exposure.

Switch to airplane mode as soon as you're finished using your iPhone. This also preserves battery life.

TANYA NEKRASOVA/SHUTTERSTOCK



Children are more vulnerable to EMF than adults but current radiation safety ratings don't take this factor into account.

swipe down from the upper-right corner to access the Control Center. When airplane mode is on, the airplane icon will be orange.

Cut back on unnecessary transmissions.

When your iPhone is attempting to maintain connections to multiple data sources—for example, having WiFi, Bluetooth, cellular data, GPS, and social media apps simultaneously running, a common state for many iPhone users—iPhone radiation is increased as compared to having just one or two essential functions enabled.

One way to reduce transmissions is to make sure your iPhone isn't constantly running apps like Instagram or location services in the background. Many apps ask for permission to remain constantly synced to cellular data so that we can receive notifications instantly. But how necessary is this? Instead, check your apps manually to see if you have any updates, making sure your iPhone isn't set to automatically connect to WiFi or cellular data.

And as a bonus, checking apps on your own terms also minimizes the constant distraction your phone can sometimes provide. This way, you have knowledge of, and thus control over, when your iPhone is transmitting to and from these sources.

Know when iPhone radiation is at its worst.

There are conditions in which your iPhone must work harder to maintain a good connection to a source. Consequently, it emits more EMF radiation and poses a greater health risk. This is a common occurrence when you're in an area or building with poor reception.

If your iPhone has two bars or less, it's best to avoid making calls until you're in a location where your phone doesn't need to compensate for a weak connection. iPhone radiation is also increased while driving. When you're cruising down the highway at 70 mph, your distance from cell towers is constantly changing, which causes your iPhone to frequently ping as it searches for the most ideal tower or satellite to preserve a strong connection.

Maintaining a connection to a stable data source requires far less energy than repeatedly establishing new connections to constantly fluctuating sources, so it's best to avoid talking on the phone while driving. If you do need to make a call, keep in mind that iPhone radiation is highest when first making a connection, so avoid putting the phone to your ear until the call is connected. The call timer will begin counting once the connection has been established.

Minimize use.

This tip is very simple to follow: Whenever possible, limit your use of your iPhone, especially when it's near your body. Choose texting over calling whenever you can. If you must make a call, keep the conversation brief. Catch up with friends in person instead of over the phone. If you habitually make long calls, consider getting a corded landline phone—yes, they still exist!

Don't keep your iPhone in your bedroom.

If you don't need your iPhone at night, there's no need for it to be in your sleeping space. It may be common practice to keep your iPhone on your bedside table as your morning alarm, but digital alarm clocks are very affordable and don't emit harmful wireless radiation.

Charge your iPhone in a different room if possible. But if you must have it in your bedroom at night, place it as far from your bed as possible and enable airplane mode before your head hits the pillow.

Invest in EMF protection gear.

For various reasons, some of us can't avoid using our iPhones frequently. For example, you may have a job that always requires you to be reachable by phone. Whether you use your iPhone a lot or a little, it may be wise to use an iPhone radiation case that puts an EMF shielding barrier between your phone and your ear or other parts of the body. This will reduce your direct skin contact with RF and ELF radiation emissions.

If you use headphones frequently while making calls, or just listening to audio, consider using radiation-free air tube headphones, that transmit sound through hollow air tubes instead of traditional wires, as the latter still allows some EMF to reach your head. If you're a proud iPhone owner, we hope that you adopt these practices to reduce iPhone radiation, but any smartphone user will benefit from these tips.

If you want to live a long, healthy life enjoying the newest developments in communication technology, you must take proactive steps to protect yourself and loved ones from potentially harmful EMF radiation.

Daniel DeBaun is an internationally recognized expert in EMF radiation, EMF shielding, and EMF-related health issues with special focus on the effect of exposure from mobile devices. Daniel's concern regarding the health impact of EMF emissions grew from 30 years of engineering experience in the telecommunications industry, where he held a variety of executive positions at SAIC, Telcordia, AT&T, and Bell Labs. He is the co-author of "Radiation Nation: The Fallout of Modern Technology."

Healing a Lifetime

Illness builds from a thousand choices over many years—and so does health

BRANDON LAGRECA

Sometimes a patient needs to heal an entire lifetime.

Take, for example, the all too typical patient that I see at the clinic: in their 60s, overweight, struggling with high blood pressure, and seeking acupuncture for joint pain. Upon consultation, I listen to the story of a lifetime of poor choices that include eating the standard American diet of nutrient-devoid, toxic food; overconsumption of alcohol; a high-stress job; being sedentary; and getting less than adequate sleep.

This archetypical patient has been deteriorating over the last few decades, culminating in a diagnosis of osteoarthritis in a hip joint. The "solution" is total joint replacement, but the hesitant patient decides to investigate other options. After a tour of the offerings of physical therapy and chiropractic care, the patient hobbles into our office, desperate for pain relief.

I have a lot of compassion for this patient. I tell them—as I tell all my patients—that I'll do my best. Often the response is that they aren't expecting miracles, a curious sentiment because it feels miraculous—at

least to me—to achieve any lasting reduction in joint pain by just sticking tiny pins in different parts of one's body. This feeling doesn't come from a lack of faith in my medicine; rather, I know what I'm up against and what it'll take to turn the tide.

To be abundantly clear, this patient will likely need to quit drinking alcohol, adopt an anti-inflammatory diet, sleep a minimum of seven hours per night, exercise 30 to 60 minutes every day while staying generally active the rest of the waking hours, and—with any hope—engage in some type of regular meditative or contemplative practice.

A highly motivated client may adopt those principles, but the majority display an attitude of making a minimum effort while hoping for maximum results. They may view these suggestions—collectively—to be too radical a change. But, to me these principles are simply the ingredients of the recipe for a healthy life.

Cancer patients are often handed a similar checklist of lifestyle changes, plus a host of other additions to their daily routines. To get to the point where cancer is diagnosed, decades of multiple imbalances have accrued. Detoxification of oneself



ROBERT KNECHKE/SHUTTERSTOCK

A lifetime of unhealthy habits leads to difficult to treat disease.

and one's environment is added to the top of the priority list, as well as deep introspection and a rooting out of unhealthy thoughts, habits, and relationships.

Some cancer contributors, such as trauma, may have occurred decades ago, exerting their depleting influence on the body over a lifetime. Others are gradual and insidious, such as a diet of processed foods leading to multiple nutrient deficiencies. For a cancer patient, my advice is to dig deep. Be alert to recent lifestyle changes and stressors that may underlie a sudden health crisis, but look with a wider lens at the big-picture influences that have been brewing over years and decades.

All forms of healing are an exercise in change. If you want different results, you have to be willing to do something different. Looking over the breadth of a lifetime of destructive choices; sometimes there's much that needs to be done differently.

Brandon LaGrecia, LAc, MACOM, is a licensed acupuncturist in the state of Wisconsin. He's the author of "Cancer and EMF Radiation: How to Protect Yourself From the Silent Carcinogen of Electropollution" and "Cancer, Stress & Mindset: Focusing the Mind to Empower Healing and Resilience." He shares his thoughts at Empowered Patient Blog.

Landmark Study Shows Sardines Help Keep Diabetes Away

A simple dietary change discovered by researchers in Spain could help millions avoid diabetes

Continued from Page 1

Prediabetes is a condition in which your blood sugar level is too high, but not high enough for Type 2 diabetes. Nearly 88 million adults in the United States have prediabetes, and a vast majority of those don't know they have it. Prediabetes also increases your risk of heart disease and stroke.

According to the National Institute of Diabetes and Digestive and Kidney Diseases, there are an estimated 34.2 million people in the U.S. with diabetes. This is 10.5 percent of the population. Nearly 7.3 million of those people don't know they have diabetes. You may help reduce your potential risk of developing this condition by making dietary and exercise changes.

2 Sardines a Day May Keep Diabetes at Bay

Adding sardines to your diet is one simple change you can make that may have a positive impact on your risk for diabetes. The 2021 Clinical Nutrition study, conducted by researchers at the Universitat Oberta de Catalunya (UOC) in Spain, found that eating sardines consistently may have a protective effect against developing Type 2 diabetes.

The researchers enrolled 152 people who had a diagnosis of prediabetes and were at least 65 years old in the study. In this study, they defined pre-diabetes as having glucose levels between 100 and 124 milligrams per deciliter (mg/dL). The whole group was placed on a nutritional program to help reduce the risk of developing Type 2 diabetes.

They were then randomized into a control group and an intervention group, members of which consumed approximately two cans of sardines in olive oil each week. The participants were given instructions to eat the entire sardine without removing the bones and were given a list of recipes.

At the end of the year-long intervention, the researchers compared the risk of developing diabetes from the beginning of the study and the end of the study. In the control group, 27 percent were at high risk of developing Type 2 diabetes at the start of the study, which dropped to 22 percent

The humble sardine is getting some attention.



ALL IMAGES BY SHUTTERSTOCK

Sardines are packed with taurine, omega 3, calcium, vitamin D, and more.



NEARLY
88 MILLION

adults in the United States have prediabetes—and a vast majority don't know.

at the end of one year with nutritional changes.

However, in the sardine group, 37 percent were at high risk of developing Type 2 diabetes before the intervention began. At the end of one year, this dropped to 8 percent. The researchers also found there were other measurable parameters that improved in the group that consumed sardines each week.

These included a reduction in insulin resistance, a rise in HDL cholesterol, and an increase in adiponectin, a hormone that accelerates the breakdown of glucose. They also measured a decrease in blood pressure and triglycerides.

The study's lead researcher, Diana D. Rizzolo, believes sardines should be recommended as a food as opposed to separating the nutritional benefits from the fatty fish, which are rich in omega-3 fatty acids, calcium, vitamin D, and taurine.

"Not only are sardines reasonably priced and easy to find, but they are safe and help to prevent the onset of type 2 diabetes. This is a huge scientific discovery. It is easy to recommend this food during medical check-ups, and it is widely accepted by the population," she said in a statement.

"As we get older, restrictive diets (in terms of calories or food groups) can help to prevent the onset of diabetes. However, the cost-benefit ratio is not always positive, as we found in other studies," said Rizzolo.

But despite the fact that the study was

conducted with older participants, she believed the sardine diet intervention could have equally significant preventive effects in younger people.

Sardines Are High in Omega-3 Fat

Sardines are a fatty fish, high in omega-3 fatty acids. After the data analysis, the UOC researchers stated they planned to study how sardines may affect the gut microbiome. Eating a diet high in omega-3 fats has already demonstrated a protective effect on certain health markers.

“This is a huge scientific discovery. It is easy to recommend this food during medical check-ups, and it is widely accepted by the population.”

Diana D. Rizzolo, study lead researcher

The rise in chronic inflammatory diseases in the past decades is likely associ-

ated with the ubiquitous use of vegetable oils and processed foods high in omega-6 fatty acids. Although omega-3 and omega-6 fatty acids are essential for good health, a correct balance is essential.

Many people consume far too many omega-6 fatty acids found in everything from french fries to frozen meals and salad dressings. Ideally, you want to maintain a ratio of 4-to-1 of omega-6 to omega-3 fats or less. Yet, this can be nearly impossible if you are regularly eating processed foods or restaurant fare.

In my view, one of the most hazardous fats in the human diet is omega-6 linoleic acid (LA). Processed vegetable oils are a primary source of LA, but animal foods such as chicken from concentrated animal feeding operations and farmed salmon also have a high amount thanks to the food they are fed, which is high in LA-rich grains. There is evidence to suggest that an excessive amount of LA plays a role in many chronic diseases.

Omega-3 fats are found in both plants and marine animals. However, they are different types of omega-3 and they are not interchangeable.

Plant-based omega-3 fats are found in walnuts, leafy green vegetables, flaxseed, and chia seeds. They contain short-chain alpha-linolenic acid (ALA) and do not have the long-chain docosahexaenoic acid (DHA) and eicosapentaenoic acid (EPA) found in marine animal-based omega-3.



Sardines offer more diverse nutrition than can be found in a simple vitamin.

Although the body can use ALA to create EPA and DHA, it requires an enzyme to convert. In most people, the conversion rate is exceptionally small, possibly less than 1 percent. While the small amount of ALA you may eat is converted into the long-chain omega-3 fats your body requires, the process is highly inefficient and cannot supply nearly as much as consuming marine-based omega-3 fats high in DHA and EPA.

It is also important to carefully select your fish since only cold-water fatty fish have high levels of omega-3. Some examples include wild-caught Alaskan salmon, sardines, anchovies, mackerel, and herring. It's best to avoid farmed fish altogether for three reasons: first, because there's an exaggerated potential for contamination; second, most farms feed the fish genetically engineered corn and soy; and third, the omega-6 fats fed to these fish are about 90 percent dangerous LA fat.

In other words, consuming these fish does not correct a high omega-6 to omega-3 ratio. In fact, it contributes to it, since farmed salmon have only half the omega-3 of wild salmon and more than 5.5 times the amount of omega-6.

Your Omega-3 Index May Predict Mortality

A deficiency in EPA and DHA can leave you vulnerable to chronic disease. Optimizing your omega-3 levels is a foundational component to good health. However, there is no good way to know your omega-3 level without getting an omega-3 index test.

Your target omega-3 index is 8 percent. This is the typical level of people living in Japan where you'll find the lowest rate of sudden heart death in the world. The highest risk is in people whose index is 4 percent or lower. At this point, there is no evidence to suggest the measurement is different for men, women, or for different ages.

One study, published in January, evaluated 100 individuals' omega-3 index and compared them against their COVID-19 outcomes. The primary outcome measurement was death. When the overall data were analyzed, the researchers found only one death in the group with the highest quartile of omega-3 index.

The research data also confirmed past results that demonstrated the average person in the United States has an omega-3 index near 5 percent, which is well below the measurement that has demonstrated protective effects on overall mortality. The data from this group showed an average index of 5.09 percent and a median of 4.75 percent.

One study published in 2018 confirmed omega-3 fat can reduce your risk of cardiovascular disease, coronary heart disease, and all-cause mortality. The researchers measured the omega-3 index in 2,500 participants and found those in the highest quintile had a total mortality 34 percent lower than those in the lowest quintile.

The Many Benefits of Omega-3 Fats

In addition to protecting your heart, lungs, and mitochondria, omega-3 fats have more health benefits, including:

Reducing inflammation. This can be helpful for those with rheumatoid arthritis by reducing stiffness and pain. Women who suffer from menstrual pain may also experience milder pain.

Optimizing muscle growth and bone strength. Omega-3 fats help your body build healthy muscle mass, including in people suffering from cancer who may experience cachexia (muscle wasting). They can also help improve your bone strength by improving the utilization of calcium in your body. This may lead to a reduction in the development of osteoporosis.

An estimated 7.3 million Americans don't know they have diabetes.

Improving mental health and behavior. Evidence shows benefits for children with attention deficit hyperactivity disorder (ADHD), including reduced aggression, hyperactivity, impulsivity, oppositional behavior, and restlessness.

Protecting your vision. DHA is a major structural element in your eyes and brain. Low levels of DHA may increase your risk for age-related macular degeneration.

Sufficient omega-3 is also associated with lowered risk for other neurological/cognitive dysfunction as well, including memory loss, brain aging, learning disorders and ADHD, autism, and dyslexia. It may also improve metabolic syndrome, insulin resistance, and reduce your risk of kidney disease and colon cancer.

For links to studies mentioned in this article, please see the article online at [TheEpochTimes.com](https://www.theepochtimes.com)

Dr. Joseph Mercola is the founder of Mercola.com. An osteopathic physician, best-selling author, and recipient of multiple awards in the field of natural health, his primary vision is to change the modern health paradigm by providing people with a valuable resource to help them take control of their health. This article was originally published on Mercola.com

Maintain a Healthy Weight With These Natural Antiobesity Agents

Adding these foods into your diet has been scientifically proven to increase your odds of weight loss

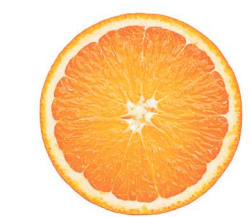
Mother Nature is all about balance, but the pace of modern life can cause you to feel a bit tilted at times. If you're struggling with maintaining a healthy weight—or even if you have only a few pounds to lose—these six natural antiobesity agents can help you shift the scale into equilibrium.

1. Cinnamon

This warm, reddish-brown spice comes from the inner bark of trees from the genus *Cinnamomum* and is used to flavor sweet and savory foods and beverages from all over the world. What you may not know is that cinnamon is also a powerful metabolic catalyst.

A 2019 research paper published the results of a systematic review and meta-analysis of cinnamon's effect on body weight, body mass index (BMI), waist circumference (WC), waist-hip ratio (WHR), and body fat mass. The review encompassed 1,480 participants from 21 randomized, controlled trials and found that cinnamon consumption significantly reduces BMI, body weight and WHR.

Cinnamon has anti-hyperlipidemic and



anti-hyperglycemic effects, making this common spice a potential ally for individuals with insulin sensitivity who wish to control their weight. Cinnamon may also stimulate the development of brown fat, a type of fat that's considered an essential component to a healthy metabolism.

High percentages of brown fat have been shown to reduce levels of branched chain amino acids (BCAAs), which—although essential for many body functions—are linked with obesity, insulin resistance, and Type 2 diabetes at high levels.

2. Cocoa / Dark Chocolate

Dark chocolate is made from the solids and butter extracted from cacao beans. These prized beans are actually the dried, fermented seeds of the *Theobroma cacao* tree, a small evergreen native to Central and South America.

Food-grade extracts from the beans include powders, nibs, butters, and solids, all packing enormous health benefits. When used in the making of dark chocolate, cocoa, which is made from roasted cacao beans, may even help you fight obesity.

A 2018 review and meta-analysis on cocoa supplementation found that dark chocolate reduces body weight, BMI and waist circumference. Dose and duration were important determinants for favorable effects. When shopping for healthy dark chocolate, it's best to stick with organic cocoa beans with at least 70 percent cacao for optimal health effects.

3. Citrus and Citrus Extracts

A ubiquitous dietary trope is replacing a bacon-and-eggs breakfast with half a grapefruit when you're on a diet. This symbolism was rooted in good sense: Citrus fruits have been scientifically linked to fat-burning. But what is it about citrus that revs up your metabolic engine?

A 12-week study on overweight adults found that supplementation with a citrus extract powder resulted in a significant reduction in body fat compared to placebo. A 2008 study on a citrus-based dietary supplement saw participants lose weight and reduce their overall body fat.

Researchers opined that the weight loss may be attributable to the extract's high polyphenol count, a benefit not available in average grocery store juices. A similar study on healthy women drinking commercial pasteurized orange juice for two months produced no change in body composition.

4. Green Coffee Extract

Green coffee beans are exactly that—coffee beans that haven't been roasted. These raw, nutty beans are developing a following for numerous health-promoting qualities, including a growing reputation as a weight-loss supplement. Loaded with antioxidant compounds called chlorogenic acids, raw green coffee beans may help with your weight loss efforts.

A 2020 review and meta-analysis of studies of green coffee extract (GCE) on anthropometric measures in adults found that the supple-

ment had a beneficial effect on body weight, BMI, and waist size. Researchers determined that GCE could provide a safe, cost-effective alternative in the treatment of obesity.

A separate meta-analysis reviewed 16 randomized controlled trials on GCE and found that the supplement improved obesity indices, including lowering BMI in obese and overweight individuals. To gain the maximum benefit, supplementation periods of at least four weeks are recommended.

5. Soup

Soup may be a broad category, but if you're overweight, including soup in your dietary routine can help turn your metabolism into a fat-burning furnace. A 2020 meta-analysis sought to determine the mechanisms behind this association by reviewing 1,873 scientific articles and seven cross-sectional studies on soup consumption and obesity. Incredibly, all studies in the review indicated a significant inverse correlation between soup consumption and obesity.

For optimal weight-loss and health benefit, focus on soups with fresh, whole ingredients—not processed, canned varieties. Miso, vegetable stock, pastured chicken, and beef broth are all highly nutritious ingredients upon which to base a variety of soup recipes. Don't forget to add vegetables like garlic, onion, carrots, and celery to your soup stock. These sulfur-rich vegetables boost the nutritional profile of your stock and enhance flavors, ensuring your soup is a tasty, vitamin, and mineral-rich lunch or dinner option.

6. Spirulina

Spirulina, or blue-green algae, is a nutritional powerhouse that's cultivated in both fresh and salt-water environments. With its use dating back to the Aztecs, spirulina has withstood the test of time as a nutritional supplement. Modern science has revealed

Three months of regular consumption of spirulina not only improves BMI and weight but also results in improvements in blood pressure and endothelial function.



that it may also be a potent ally in the modern fight against obesity.

There have been numerous studies on the use of spirulina as a weight-loss aid, including a 2019 systematic review and meta-analysis that found spirulina supplementation had a significant effect on body fat percentage and anthropometric indices such as waist circumference. A 2016 study found that three months of regular consumption of spirulina not only improves BMI and weight but also results in improvements in blood pressure and endothelial function.

To effect optimal weight loss and keep it off, any supplementation regimen should be combined with dietary adjustments such as fasting or limiting overall caloric consumption and avoiding foods with excess sugar. In addition, including daily intentional movement will provide a boost to metabolism and may even enhance your mood.

When it comes to achieving and sustaining healthy weight, there is no magic pill. But there are helpful allies in the food-based medicine cabinet that can help you stay on course and feel your best while you watch the pounds melt away.

For links to studies mentioned in this article, please see the article online at [TheEpochTimes.com](https://www.theepochtimes.com)

The GMI Research Group is 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 [GreenMedInfo.health](https://www.greenmedinfo.com)



For optimal weight-loss and health benefit, focus on soups with fresh, whole ingredients—not processed, canned varieties.

END OF LIFE

Aiding Her Dying Husband, a Geriatrician Learns the Toll of Caregiving

Living with emotional, physical demands of caring for a loved one gave an expert new depths of understanding

Continued from Page 1

Her life took an unexpected turn in 2013, when she started noticing personality changes and judgment lapses in her husband, Dr. William Henry Adler III. Adler was a former chief of clinical immunology research at the National Institute on Aging, which is part of the federal National Institutes of Health. Proud and stubborn, he refused to seek medical attention for several years.

Eventually, however, Adler's decline accelerated. In 2017, a neurologist diagnosed frontotemporal dementia with motor neuron disease—an immobilizing condition. Two years later, Adler could barely swallow or speak and had lost the ability to climb down the stairs in their Severna Park, Maryland, home.

"He became a prisoner in our upstairs bedroom," Elon said. By then, Elon had cut back on work significantly and hired a home health aide to come into their home for several days each week.

In January 2020, Elon enrolled Adler in hospice and began arranging to move him into a nearby assisted living center. Then, the pandemic hit. Hospice staffers stopped coming. The home health aide quit. The assisted living center went on lockdown. Not

visiting Adler was unimaginable, so Elon kept him at home, remaining responsible for his care.

"Lost 20 pounds in four months," she said. "It was incredibly demanding work, caring for him." Meanwhile, another crisis was brewing. In Kankakee, Illinois, Elon's sister, Melissa Davis, was dying of esophageal cancer and no longer able to care for their 96-year-old mother, Betty Davis. The two had lived together for more than a decade, and Davis—diagnosed with dementia—required significant assistance.

Elon sprang into action. She, along with two of her other sisters, moved their mother into an assisted living facility in Kankakee. Elon also decided to relocate a few hours away, moving to a continuing care retire-

ment community in Milwaukee. "It was time to leave the East Coast behind and be closer to family," she said.

By the end of May, Elon and her husband were settled in a two-bedroom apartment in Milwaukee, with a balcony looking out over Lake Michigan. The facility had a restaurant downstairs that delivered meals, a concierge service, a helpful hospice agency in the area, and other amenities that relieved Elon's isolation.

"I finally had help," she said. "It was like night and day."

Previously bedbound, Adler would transfer to a chair with the help of a lift—one couldn't be installed in their Maryland home—and look contentedly out their window at paragliders and boats sailing by.

"In medicine, we often look at people who are profoundly impaired and ask, 'What kind of quality of life is that?'" Elon said. "But even though Bill was so profoundly impaired, he still had a strong will to live and retained the capacity for joy and interaction." If she hadn't been by his side day and night, Elon said, she might not have appreciated this.

During this time, her mother moved to an assisted living center outside Milwaukee to be nearer to Elon and other family members.

But things didn't go well. The facility was on lockdown most of the time, and staff members weren't especially attentive. Concerned about her mother's well-being, Elon took her out of the facility and brought her to her apartment in late December.

For two months, she tended to her husband's and mother's needs. In mid-February, Adler, then 81, took a sharp turn for the worse. Unable to speak, his face set in a grimace, he pounded the bed with his hands, breathing heavily. With the help of hospice workers, Elon began administering morphine to ease his pain and agitation.

"I thought, 'Oh, my God, is this what we ask families to deal with?'" she said. Though she had been a hospice medical director, "that didn't prepare me for the emotional exhaustion and the ambivalence of giving morphine to my husband."

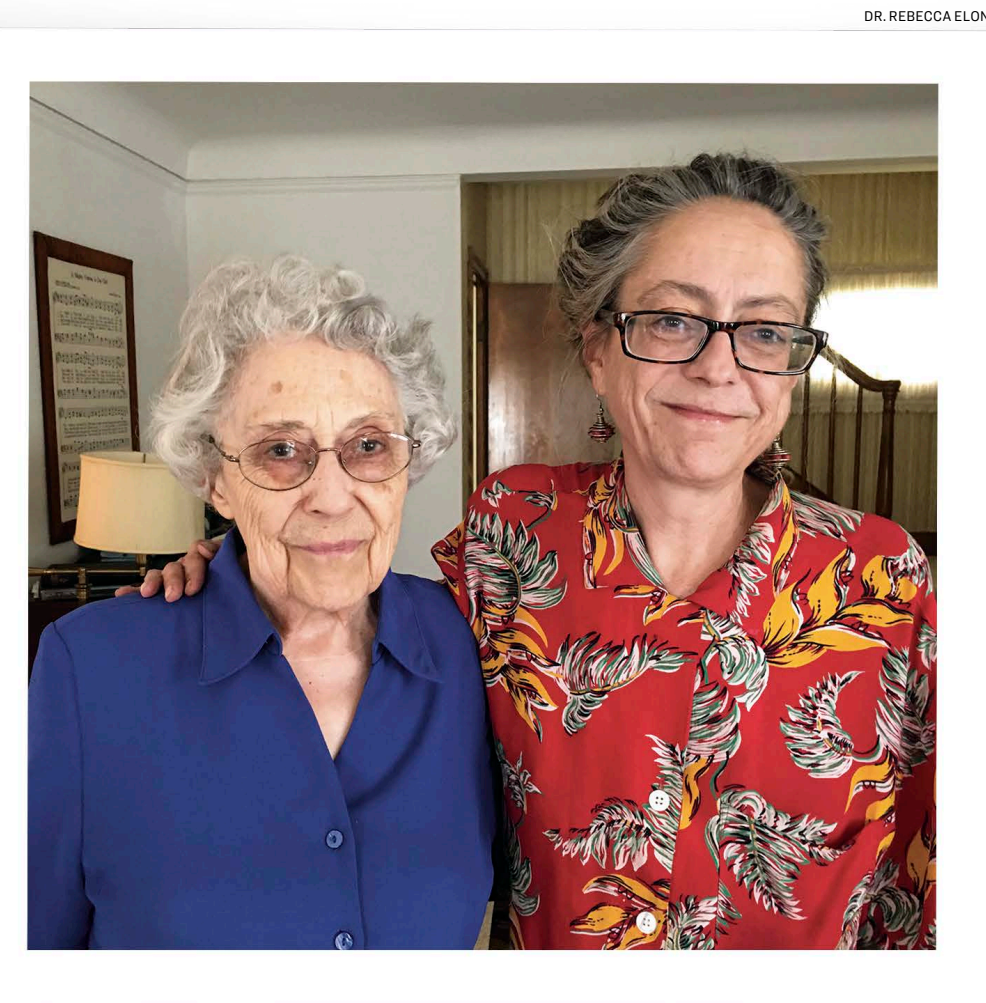
is also no harm. We begin to view them as entirely neutral.

"Sure, possessions won't make us happy," we may think. "but I'm going to buy x anyway, because I have the money. It probably won't make me happy in the long-run, but it's still fun to have."

But excess possessions are not inert in our lives. They do affect our happiness. They become an obstacle and barrier to it. And the more we have, the greater the burden we have to carry.

Everything we own requires a bit of ourselves. Possessions cost us money, time, energy, and focus. They become a physical distraction and mental distraction. Every increased item we own adds increased stress and anxiety into our lives.

I was first introduced to the word minimalism on a Saturday morning while cleaning out my garage. The responsibility of clearing out the clutter, sorting through the piles, hosing down the floor, and returning items in an organized way took hours to complete. All



DR. REBECCA ELON

“Even though Bill was so profoundly impaired, he still had a strong will to live and retained the capacity for joy and interaction.”

Dr. Rebecca Elon

Elon's mother was distraught when Adler died 10 days later, asking repeatedly what had happened to him and weeping when she was told of his passing. At some point, Elon realized her mother was also grieving all the losses she had endured over the past year: the loss of her home and friends in Kankakee; the loss of her daughter Melissa, who'd died in May; and the loss of her independence.

"That, too, was a revelation made possible by being with her every day.

"The dogma with people with dementia is you just stop talking about death because they can't process it," Elon said. "But I think that if you repeat what's happened over and over, and you put it in context and you give them time, they can grieve and start to recover."

"Mom is doing so much better with Rebecca," said Deborah Bliss, 69, Elon's older sister, who lives in Plano, Texas, and who believes there are benefits for her sister as well. "I think having [Mom] there after Bill died, having someone else to care for, has been a good distraction."

And so, for Elon, as for so many families across the country, a new chapter has begun, born out of harsh necessities. The days pass relatively calmly, as Elon works and she and her mother spend time together.

"Mom will look out at the lake and say, 'Oh, my goodness, these colors are so beautiful,'" Elon said. "When I cook, she'll tell me, 'It's so nice to have a meal with you.' When she goes to bed at night, she'll say, 'Oh, this bed feels so wonderful.' She's happy on a moment-to-moment basis. And I'm very thankful she's with me."

We're eager to hear from readers about questions you'd like answered, problems you've been having with your care and advice you need in dealing with the health care system. Visit khn.org/columnists to submit your requests or tips.

Judith Graham is a contributing columnist for Kaiser Health News, which originally published this article. KHN's coverage of these topics is supported by The John A. Hartford Foundation, Gordon and Betty Moore Foundation, and The SCAN Foundation.

Dr. Rebecca Elon's late sister Melissa Davis (right) passed away in May 2020. Davis was the primary caretaker for their mother, Betty Davis (left), for the previous 10 years.

Study Links Eating a Diet Rich in Fruit and Vegetables With Less Stress

SARAH COWNLEY

In today's world, stress is prevalent. Researchers are currently looking for ways to reduce stress through lifestyle interventions. A new study from Edith Cowan University (ECU) has found that eating a diet rich in fruits and vegetables is associated with less stress.

The Australian Diabetes and Lifestyle (AusDiab) Study aimed to find a link between fruit and vegetable intake and stress levels. To achieve this, they examined 8,600 Australian participants between the ages of 25 and 91.

The study concluded that people who ate at least 470 grams of fruit and vegetables daily had 10 percent lower stress levels compared to those who consumed less than 230 grams of produce. This amount is slightly more than the recommended consumption from the World Health Organization (WHO), which recommends consuming at least 400 grams per day.

Mental well-being is a subject that's quickly becoming a topic of conversation around the world. It has been found that approximately 1 in 10 people globally live with a mental disorder. With lockdowns and pandemic worries taking effect worldwide over the past year, this number is expected to increase.

While some stress in life is normal, long-term exposure can significantly impact mental health. It can lead to a range

People who ate at least 470 grams of fruit and vegetables daily had 10 percent lower stress levels.



MONTICELLO/SHUTTERSTOCK

of health problems, including heart disease, diabetes, depression, and anxiety. Researchers hope that by finding new links between foods and stress, they can possibly prevent or reduce mental health problems.

The benefits of a healthy diet have been well documented, but very few Americans consume the recommended daily fruit and vegetable intake. This study helps to show the importance of consuming the right foods to keep the body and mind healthy.

Previous studies have shown the link between fruit and vegetables and stress in younger adults. However, this is the first study to find a similar relationship across all ages of adulthood.

How Food Influences Stress

The mechanisms of how fruits and vegetables influence stress remain unclear, so future studies are needed. That said, some mechanisms seem readily apparent, notes the lead researcher of the study. "Vegetables and fruits contain impor-

Researchers have linked eating fruits and vegetables to mental well-being.

tant nutrients such as vitamins, minerals, flavonoids, and carotenoids that can reduce inflammation and oxidative stress, and therefore improve mental well-being," said lead researcher Simone Radavelli-Bagatini. "Inflammation and oxidative stress in the body are recognized factors that can lead to increased stress, anxiety and lower mood."

Researchers can now confirm that eating more fruits and vegetables appears linked to mental well-being. In times such as these, with added stress, it's more important than ever to eat right and get plenty of exercise. Lifestyle choices can go a long way to living a healthy, happy life.

Sarah Cownley earned a diploma in nutritional therapy from Health Sciences Academy in London, and she enjoys helping others by teaching healthy lifestyle changes through her personal consultations and with her regular contributions to The Doctors Health Press. This article was originally published on Bel Marra Health.

MINDSET MATTERS

Changing Our Thinking About Thoughts

An excerpt from the new book 'Can't Stop Thinking: How to Let Go of Anxiety and Free Yourself from Obsessive Rumination'

VARNAK/SHUTTERSTOCK



Chasing positive thoughts can be like trying to reach a rainbow.

NANCY COLIER

Awareness

Tara came to see me when she was in her mid-30s. By her own account, she had devoted the previous 10 years of her life to conquering and eliminating her obsessive and, as she called it, unstoppable thinking.

She had been devoted to self-help for a decade and tried anything and everything to convince her mind to "stop talking" and specifically, to stop telling her she was worthless. Mostly she had used positive thinking methods, which included affirmations and gratitude practices.

She had worked as hard to change the thoughts she heard in her head.

She was a self-help pickle by now—no longer a cucumber and no going back. But here she was in my office, still struggling and stymied by her unceasing inner chatter, feeling hopeless and beaten, powerless over her thoughts and powerless over what they were doing to her. I've met hundreds of Taras—people who have been disappointed by self-help and psychological fix-it strategies. My practice is filled with folks who were unable to find lasting relief from their excessive thinking through the self-help techniques that forever beckon and promise us a new life. If you also have tried everything on the shelf, don't despair. It's not your fault that you haven't found what you need.

Controlling the content of our thoughts is a temporary fix, a shiny hat over dirty hair. It works to some degree when things are running smoothly and we like what's happening in our life. But when the going gets tough and life rolls out the hard stuff—which it always does at some point—the positive thoughts don't stick. The fix-it strategies fail, and we revert back to our old belief systems and historical thinking patterns.

Positive thinking can be helpful, and it feels good, but it doesn't get at the real problem: it's not strong enough to create real change in the beliefs that underlie our negative thoughts. Ultimately, it's just a Band-Aid on a far deeper and more powerful condition.

What makes positive thinking an inad-

equate solution isn't just its unreliability. The real reason it falls short is that it's addressing the wrong problem. When the strategy is to replace negative or unwanted thoughts with positive ones, we're relying on misguided beliefs, assuming the following: We can and should be able to control our thoughts, what our thoughts are saying is important, our thoughts have the power to control us, and finally, we have to get our thoughts under control before we can be okay. All of which are false.

Positive thinking maintains (incorrectly) that our well-being depends upon what our thoughts are saying at any moment, and thus, our successful management and control of the thoughts are the keys to our happiness. In this system, we are still at the mercy of the contents of our thoughts, still dependent on what is not ours to control. Positive thinking claims to empower us but, at the root, it disempowers us.

Self-help sells a kind of cognitive ammunition, an arsenal for winning the war against our unwanted thoughts. But if what you want is to not feel controlled by your thoughts, then the answer is to stop trying to control your thoughts—stop trying to defeat them. What frees us from negative thinking is not winning the war against our thoughts (over and over again, minute by minute, day by day, for years on end), but rather, removing ourselves from the war altogether.

Stepping Out for Peace of Mind

So then, how do we step out of the battle? What is the strategy for surrendering the fight? The process I'm suggesting begins with a radical shift in perspective. The positive thinking system says that in order

for us to be okay, our thoughts have to be okay—to our liking. This suggests that we are reliant upon our thoughts. Essentially, it says we are our thoughts.

But what if this is not true? Stepping out of the battle with your thinking starts by considering that your well-being doesn't depend on correcting thoughts at all, and furthermore, doesn't depend on your liking or even agreeing with your thoughts.

Have you ever noticed, when thoughts are not here, even if it's just for a moment, that you are still here, still awake, still conscious? We remain, with or without thought, which strongly suggests that we aren't made of our thoughts. How can we still be here if what we are is not here?

As you'll experience repeatedly through the exercises in this book, sometimes we can see our thoughts happening, see them actually arising and even passing. The fact that we can see our thoughts and hear what they're saying also tells us that we cannot be our thoughts. We can't be what we can see happening in front of us. It turns out that well-being depends upon our realizing that we are not our thoughts and our thoughts are not us.

Ask yourself: What if I am not my thoughts? What if I am what hears and sees the thoughts, the awareness within which thoughts are appearing?

Let this possibility germinate in you; walk with it, sit with it, shower with it, eat with it. ... notice what happens.

Thoughts appear and disappear within our field of awareness, that much is true. We, however, are not responsible for their content. Thoughts can say what they want and will, and we can still be okay. Our thoughts stop controlling us when we cultivate a separate place inside ourselves from which to observe thoughts and when we stop seeing it as our job to correct and conquer them.

Freedom dawns through awareness, specifically, the awareness to see what's happening inside your own mind, as an observer. And it begins by surrendering the responsibility for controlling what you see.

"Can't Stop Thinking: How to Let Go of Anxiety and Free Yourself from Obsessive Rumination" was released in May and is available from Amazon and other book retailers.

Nancy Colier is a psychotherapist, interfaith minister, public speaker, and author of "Can't Stop Thinking" (2021) "The Power of Off: The Mindful Way to Stay Sane in a Virtual World," and "Inviting a Monkey to Tea." For more information, visit NancyColier.com

BECOMING MINIMALIST

Happiness Can Be Hard to Find Amid Our Possessions

JOSHUA BECKER

There's a common saying in our world and it goes something like this, "Possessions won't make you happy."

Almost everyone agrees with it.

Once our most essential needs have been met, the long-term happiness that can be found in material possessions is fleeting at best. And because nobody wants to admit that they are looking for happiness in their next purchase from the department store or car lot, we generally agree aloud that "possessions won't make you happy."

Studies back up our presumption. But the problem with possessions goes beyond the fact that they won't make us happy. The problem with excess possessions is that they distract us from happiness.

"Possessions won't make me happy," while agreed to by most, only results in thinking that is indifferent to the accumulation of physical items. There may not be long-term benefit in possessions, but there

is also no harm. We begin to view them as entirely neutral.

"Sure, possessions won't make us happy," we may think. "but I'm going to buy x anyway, because I have the money. It probably won't make me happy in the long-run, but it's still fun to have."

But excess possessions are not inert in our lives. They do affect our happiness. They become an obstacle and barrier to it. And the more we have, the greater the burden we have to carry.

Everything we own requires a bit of ourselves. Possessions cost us money, time, energy, and focus. They become a physical distraction and mental distraction. Every increased item we own adds increased stress and anxiety into our lives.

I was first introduced to the word minimalism on a Saturday morning while cleaning out my garage. The responsibility of clearing out the clutter, sorting through the piles, hosing down the floor, and returning items in an organized way took hours to complete. All



RADU BERGAN/SHUTTERSTOCK

Our possessions are not neutral. Overaccumulating has consequences.

the while, my 5-year-old son was begging me to come play catch in the backyard.

As my frustration with the spring-cleaning project began to mount, my neighbor provided the remedy when we struck up a conversation. "That's why my daughter is a minimalist. She keeps telling me I don't need to own all this stuff."

The juxtaposition couldn't be more stark. To the left of me stood a pile of dirty, dusty possessions I had spent the entire morning cleaning and organizing. To the right of me, my son swinging alone on the swing set in the backyard.

In that moment, I began to understand the weight of possessions.

Not only were my possessions not making me happy ... they were keeping me from the very person who did.

This is a very difficult realization. In fact, it's probably what separates those who pursue minimalism from those who don't. Owning less frees us to pursue happiness, joy, meaning, and fulfillment in things that actually matter—how ever we choose to define that.

Our possessions aren't passive. They aren't merely indifferent in our pursuit of happiness and meaning.

They often stand in the way of it.

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

ELLY FAIRYTALE/PEXELS



Having friends and mentors who really understand you can give you support and an antidote to the stress of life.

The Brilliant Tribe

How to avoid burnout by building a tribe

NISHA JACKSON

The human body's sophisticated response to stress is nothing short of a miracle. But the reality is that we overachiever stress junkies spend quite a bit of time being "plugged in" and in fight-or-flight mode, maneuvering strategically between one highly pressurized situation to the next. It's like a time bomb.

Most people have heard of the fight-or-flight response. To put it clinically, fight-or-flight is the way your brain perceives, your nervous system activates, and your adrenal stress system prepares your body to react to incoming danger or threats. However, this multi-system response to grave danger is also the same group of reactions that manage your day-to-day encounters with high stress.

While our bodies are meant to react to perceived stress on occasion, they're clearly not capable of withstanding longer periods of fight-or-flight without going through some sort of breakdown.

This elaborate "stress response"—with multiple internal alarms going off—typically occurs on a regular basis throughout the day for most women. This constant state of activation and overstimulation requires continuous effort in order to preserve and restore your adrenal glands. This is incredibly taxing on them, causing

their entire system to become sluggish.

So here is where the TRIBE comes in to save the day!

Do you have people close to you in your life who "see you?" Do you have a few people who will call you out and set you straight, love you no matter what, and be there for you when you can't go one more step?

Do you have friends who have your back when you can't pull your load, will provide for you when you can't do so for yourself, will prop you up, will defend you, go to bat for you, or cry with you whenever you need it? Do you have someone you can call at the last moment to go out and just laugh with them? You should. You need a tribe that "sees you" exactly as you are, so that when you can't see yourself, they can help you find your way.

Tribes are essential for success and personal sanity when you're busy changing the world. But this support system doesn't just magically appear and can take quite a while to construct. To be clear, your tribe isn't just helping you get work done—their role is much deeper than that. The fact that your tribe "sees you" is, in my opinion, the reason why you need them in your life.

So how do you build your tribe?

Start with a clear intention and desire to have the group you want.

Consider listening to women or men talk, and see how you feel in their presence. For example, do you feel "up," supported, enlightened, or engaged when talking with them? Can you see this person standing strong for you?

Start small and stay focused.

Pace yourself, and don't feel obligated to bring a member into your tribe if you know they will be more work than you have time or energy for. Think of the qualities you want your tribe to have. For instance, start with things like: doesn't judge, has a sense of humor, is an artist, lives with wide-open passion, and is loyal.

Take an inventory of your current friends, family, etc.

This will help you determine if there is already the start of a tribe right in front

of you. Stay true to what you want in your inner circle.

Listen to your inner voice and instincts.

Listen to that "gut" feeling about a person. Your body will tell you. Do you feel drawn to them right away—like you've known them for years—or do they make you put up your guard?

Pay attention to their social media posts.

This is a great way to root out the crazies. Consider doing something you are passionate about, besides working.

Go to a class, join a club, or learn something new that you've always wanted to learn. Doing this might enable you to meet other people with similar interests.

Begin spending time with these people and make it a priority to do so.

Find a common interest between your potential tribe members and you, and invite them over. Keep it purposeful.

If you take these steps, you may reap some fantastic rewards:

- Support when you feel like giving up.
- More energy and strength than you could ever generate alone.
- Enrichment through many life-long relationships.
- An encouraging community that allows you to make your passion your livelihood.
- Feeling like the luckiest person in the world to be surrounded by those who care about you and have your back.
- And perhaps the greatest—and most unexpected—gift is that leading a community will serve as a catalyst for you to become a better human being.

Best of luck to you on your tribal journey!

Nisha Jackson is a nationally recognized hormone and functional medicine expert, renowned lecturer, motivational speaker, radio host, columnist, author of best-seller "Brilliant Burnout," and founder of OnePeak Medical Clinics in Oregon. For 30 years, her approach to medicine has successfully reversed chronic problems such as fatigue, brain fog, depression, insomnia, and lack of stamina.

GEORGE RUDY/SHUTTERSTOCK



MINDSET MATTERS

WHY 'Having It All' IS A BIG FAT LIE

Ignoring that choice includes loss is a delusion that creates unneeded suffering

There are endless things you can do, become, own or experience, but each choice comes at the expense of something else.

NANCY COLIER

I want it all, I want it all, I want it all, and I want it now." These were the words of a television jingle I heard this weekend, just as I was contemplating a piece on the pressure we (both women and men) face to have it all.

Working with Jane, a mom and physician, I was struck by how tortured she was because she couldn't spend as much time as she wanted to with her young child.

I wasn't struck by the fact that time away from her child was painful, but rather by what seemed to be the real source of her suffering.

Specifically, she felt that she was supposed to be able to have the great career she wanted as a doctor and also be able to be the loving and present mom to her child. As she saw it, she was doing something wrong because she couldn't have both.

Another client, Rachel, told me she wanted to have a more intimate relationship with her husband, to feel more connected. She talked about their less-than-juicy date-night dinners. She shared that her husband was upset because she left her phone on during their dinners in

case the kids called (healthy teenagers).

Apparently, as is usually the case, the tech interruptions were breaking the connection between them. She was in my office because she wanted me to design a strategy or digital program that would make it possible for her to be on call all the time to her family, and also intimately connected to her husband in their private time.

On another front, in just the same week, Peter was telling me about his romantic relationship of nine years. He shared that he was deeply nourished by the unconditional love and stability of their bond and how much he loved his life with his partner.

Simultaneously, he was unable to tolerate the fact that when he went to parties or was surrounded by new women, he couldn't behave like a single person. He was at war internally with the idea that being in a monogamous and committed relationship would mean that his life felt constrained in certain other ways. But underlying his despair, the real suffering was once again coming from his belief that he shouldn't have to give up anything he wanted.

Continued on Page 15



When we don't commit to one choice, we often end up making a mess of both our options.

BLACK SALMON/SHUTTERSTOCK

FOOD AS MEDICINE

Quercetin: What It Is and Why You Need It

This well-known and widely studied flavonoid is a potent antioxidant with several therapeutic actions

Flavonoids are one of nature's many therapeutic gifts. Widely found in fruits and vegetables, these phenolic substances have antioxidant properties that protect cells from free radical damage. One of the most well-known and studied flavonoids is quercetin, a flavonol mostly found in onions, berries, citrus fruits, broccoli, and grapes.

A potent antioxidant, quercetin boasts anti-inflammatory, anti-hypertensive, anti-obesity, and anti-atherosclerotic actions. Since free radicals figure into the development of diseases, quercetin holds promise for benefitting conditions such as high

blood pressure, vascular disorders, and metabolic syndrome, notes an overview published in *Pharmacognosy Reviews* in 2016. Here is compelling evidence of the health benefits of quercetin.

Potential Anti-Diabetes Aid

The development of Type 2 diabetes has been linked to oxidant stress caused by an unhealthy diet. Toona sinensis leaves, which are rich in quercetin, may reduce the risk of diabetes by reducing oxidative stress in the liver.

Continued on Page 10

Quercetin is found in berries, citrus fruits, grapes, and more.



PHOTOBEL/SHUTTERSTOCK

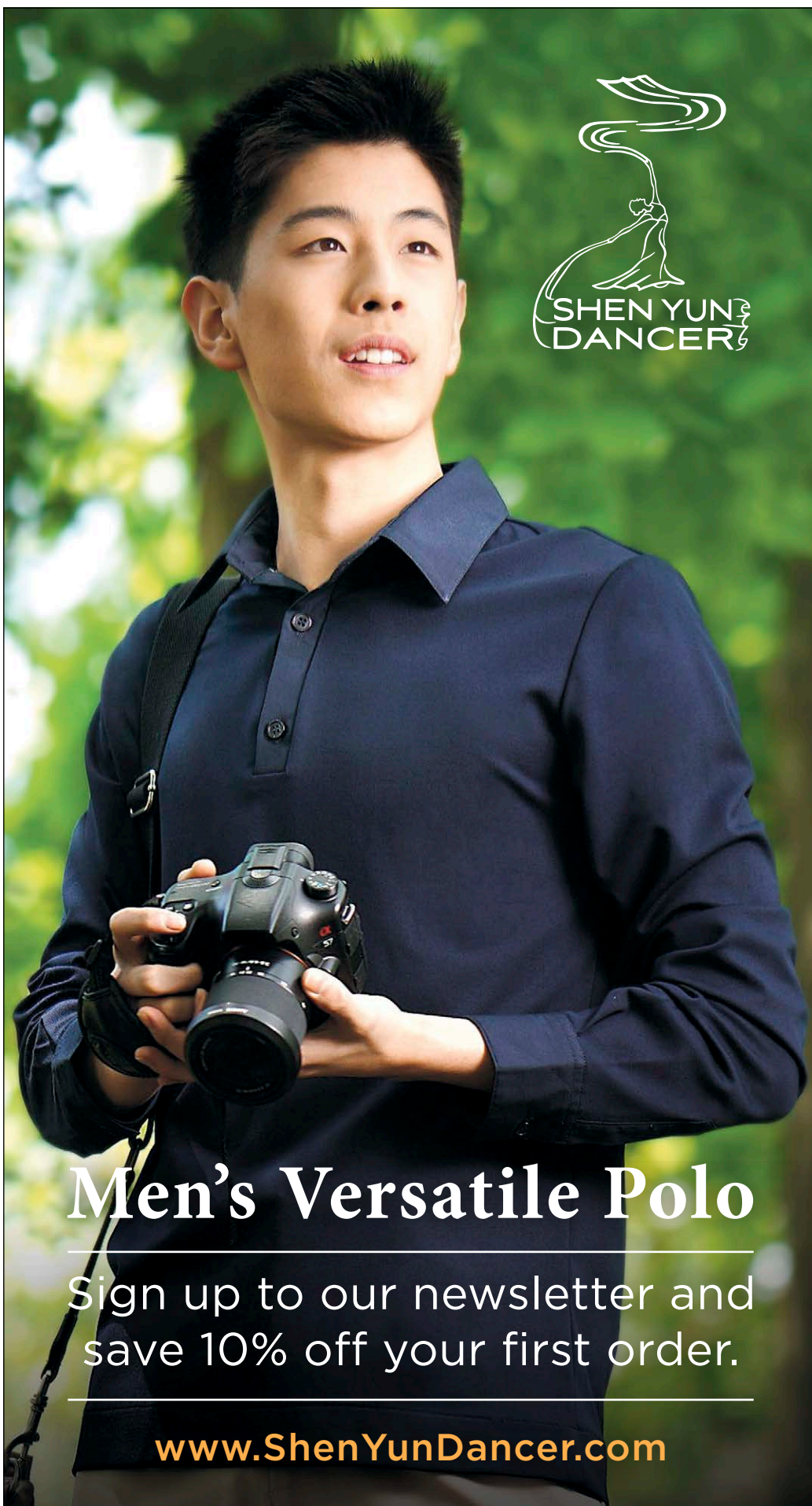
THE EPOCH TIMES

TRUTH and TRADITION

A NEWSPAPER ABRAHAM LINCOLN WOULD READ

SUBSCRIBE TODAY

ReadEpoch.com



SHEN YUN DANCER

Men's Versatile Polo

Sign up to our newsletter and save 10% off your first order.

www.ShenYunDancer.com

FOOD AS MEDICINE

Quercetin: What It Is and Why You Need It

This well-known and widely studied flavonoid is a potent antioxidant with several therapeutic actions

Continued from Page 1

A topical compound containing substances such as quercetin, ascorbyl palmitate, and vitamin D3 was formulated to reduce the oxidative stress contributing to peripheral diabetic neuropathy. A preliminary study in 2005 showed that the compound may safely relieve the symptoms of diabetic neuropathy and enhance quality of life.

Quercetin displayed protective effects in the kidneys and liver of obese animal models with Type 2 diabetes. Together with quinic acid, quercetin also helped ameliorate hyperglycemia, hyperlipidemia, and insulin resistance in diabetic rats.

Protection From DNA Damage

A 2011 study investigated the potential protective effects of quercetin against DNA damage and oxidative stress induced by methylmercury in animal subjects. For over 45 days, animal models were orally treated with methylmercury and the flavonoid with doses reflecting human exposure. The team then measured DNA damage in liver cells called hepatocytes and peripheral leukocytes (white blood cells).

A potent antioxidant, quercetin boasts anti-inflammatory, anti-hypertensive, anti-obesity, and anti-atherosclerotic actions.

The results revealed that methylmercury reduced the concentration of glutathione in the body by 17 percent and caused DNA damage to liver and blood cells. With quercetin, no such effects manifested. "In summary, our results indicate that consumption of quercetin-rich foods may protect mercury-exposed humans against the adverse health effects of the metal," the researchers wrote.

What makes this benefit particularly crucial is that the prevention of DNA damage is involved in preventing cancer via dietary compounds. An aqueous horseradish extract and its main flavonoids kaempferol and quercetin, for instance, demonstrated potential for DNA damage protection likely by acting as antimutagens.

Chemopreventive Properties

Epidemiological studies vouch for the protective effects of phytochemicals against cancer risk. As a ubiquitous flavonoid, quercetin is an ideal candidate to fight cancer due to its antioxidant and antiproliferative actions.

It's known to modulate a plethora of molecules for multitargeted cancer prevention and therapy. Here are examples of quercetin's chemopreventive abilities:

- Incorporated in liposomes along with resveratrol, quercetin may be valuable in treating inflammation or oxidative stress associated with precancerous or cancerous skin lesions.
- Quercetin exhibited a preventive effect on liver cancer in animal models. Hepatocellular carcinoma, the most common form of liver cancer, is on the rise in many countries, with an estimated 905,677 new cases globally in 2020.
- Quercetin inhibited tumor growth and enhanced the sensitivity to chemotherapy, indicating a potential treatment option for hepatocellular carcinoma.
- The combination of quercetin and ionizing radiation might be a promising therapy for colon cancer treatment through targeting colon cancer stem-like cells and inhibiting the Notch-1 signaling.
- Quercetin suppressed the metastatic ability of lung cancer, with potential therapeutic applications for metastatic non-small cell lung cancer in particular.

Prevention and Treatment of Various Infections

Quercetin may protect against the antibiotic-resistant *Streptococcus pneumoniae* infection mainly through inhibiting pneumolysin, a pore-forming protein toxin and a major determinant of virulence. Separate findings previously highlighted quercetin's therapeutic potential in treating sepsis as well.

The flavonoid derivative quercetin-3beta-O-D-glucoside (Q3G) also showed promising antiviral activity against two distinct species of Ebola, outbreaks of which occur frequently in African countries.

Hyaluronic acid, chondroitin sulfate, curcumin, and quercetin taken together were also effective in preventing recurrent urinary tract infections in postmenopausal women, found a 2016 controlled clinical trial.

Read more about scientific proof of the therapeutic value and significance of quercetin across numerous health issues and conditions in the nearly 600 abstracts with quercetin research found on the GreenMedInfo.com database.

The GMI Research Group is 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 GreenMedInfo.health

For links to studies mentioned in this article, please see the article online at

TheEpochTimes.com



Top 10 Reasons to Eat Organic

Industrial agriculture takes a toll on our bodies—and our planet

Eating organic isn't a fad. In fact, a 2019 report from the U.S. Department of Agriculture stated that sales from U.S. organic farms reached \$9.9 billion, a 31 percent increase from 2016 and 2019. Whether you're avoiding pesticides, looking for a healthier diet, or concerned about the environment, there is no shortage of reasons to eat organic foods. So if you've been on the fence looking at those greener organic pastures, wait no more. Here are 10 delicious reasons to take a bite of an organic apple today.

1. Environmental Health

According to Cornell entomologist David Pimentel, it's estimated that only 0.1 percent of applied pesticides reach the target pests. The bulk of pesticides (99 percent) are left to impact the environment. Waterways and farmland are contaminated by chemical run-off from farms. Arguably one of the largest environmental disasters has been the loss of quality soil. Many organic farmers grow bio-diverse crops rather than the industrial monoculture model, which depletes the soil.

Organic management practices, such as crop rotation, substantially enhance soil quality and restore nitrogen and organic components. In short, chemically produced food is damaging our soil.

2. Safe Drinking Water

The more chemicals applied per acre, the greater the challenge in preserving water quality. The Dead Zone in the Gulf of Mexico, an area of low oxygen that can kill fish and marine life, is the most graphic example of the enormous harm caused when farm chemicals, flowing off of millions of acres, congregate in the mighty Mississippi. So, not only is chemically dependent agriculture damaging our drinking water, it's also harming our waterways and oceans.

3. Health Risks

It should be no surprise that the chemical pesticides that kill off pests are also causing harm to your health. But it doesn't just stop with harming you; pesticide, herbicide, and chemical fertilizer usage pose health risks to farmers and farm workers. Pesticides ingested by pregnant women have been linked to birth defects and deformities. Studies have also shown that some herbicides and pesticides stimulate the growth of breast cancer cells and cause mammary cancer in rats.

Organic crops cannot be grown with synthetic persistent chemicals, sewage sludge, irradiation, animal cloning, or genetic engineering. The USDA organic seal guarantees that farmers abide by these standards. By eating organic, you will dramatically reduce the amount of pesticide residue you ingest on a daily basis, thus reducing your risk for diseases.

Reduced reliance on chemical and agri-engineering corporations is good for farmers.

4. Biodiversity

Wildlife, insects, frogs, birds, and soil organisms are able to play their important roles in the tapestry of ecology, and we are able to play ours, without interference or compromise. The decline of birds, bees, and other pollinators has been linked to the synthetic pesticides used by conventional farmers. Organic farms are home to around 30 percent more wildlife species than conventional farms. Researchers from the University of Oxford and from Sweden and Switzerland conducted a meta-analysis of nearly 100 studies which estimates that 75 percent of the genetic diversity of agricultural crops was lost in the past century. Leaning heavily on one or two varieties of a given food is a formula for devastation.

What's more, conventional foods in the past 20 years are produced using genetically engineered seeds. The mixing of genes from different species is what makes GMO crops so unique, and it's why chemical producers have been able to patent these crops. It's impossible to create such transgenic organisms through traditional crossbreeding methods.



Most of the corn grown is genetically modified to withstand higher doses of toxic pesticides.

graze on grass and aren't fed a diet of GMO corn, cottonseed, canola, and soy. Unhealthy and mistreated animals make unhealthy food that accounts for a significant percentage of all food-borne illnesses. To avoid illnesses, and to put a stop to inhumane treatment, purchase certified organic animal products.

Genetically engineered crops haven't been thoroughly tested by independent scientists for long-term health and environmental consequences. Genetically engineered foods also contaminate non-GMO and organic crops, which can wipe out organic and heirloom seeds permanently.

5. Avoid GMOs

Often referred to as " Frankenfoods," GMOs can be found in more than 75 percent of processed foods sold in America. The United States and Canada stand alone without clear mandatory GMO labeling. There are 64 other countries in Europe and elsewhere that label GMOs and allow consumers to make an informed choice. Many other countries have outright banned GMO farming practices. Since GMOs aren't labeled, the best guarantee in avoiding GMOs is to choose certified organic foods.

Currently, more than 90 percent of all GMO crops are engineered to survive glyphosate spraying, the active ingredient in Monsanto's weed-killing herbicide, Roundup. These Roundup-Ready crops have made glyphosate the most heavily used pesticide in U.S. agriculture. Since GMO corn and soy were first introduced two decades ago, the amount of glyphosate used by farmers has increased 280 million pounds a year. Glyphosate was recently classified as a "probable carcinogen to humans," by cancer experts at the World Health Organization. Because of this extreme dosing of chemicals, GMO crops have led to environmental disasters such as superweeds and superbugs. Organic food cannot be grown using genetically modified seeds, nor can any processed organic foods use GMO ingredients. Organic always means non-GMO.

6. Nutrition

Plants nurtured by healthy soil on organic farms produce crops that often contain higher levels of important antioxidants, minerals, and vitamins. A team led by a Washington State University researcher also found organic milk contains significantly higher concentrations of heart-healthy fatty acids compared to milk from cows on conventionally managed dairy farms. Organic farming is viewed as regenerative agriculture and can actually increase the fertility of the soil, creating more nutritious food.

7. Good for Farmers

Reduced reliance on chemical and agri-engineering corporations is good for farmers. Certified organic food producers adhere to a strict system of government-mandated regulations, verified and certified by third-party inspectors. Farmers must make a financial commitment to growing food under the organic model. Fortunately, the market for organic food is the largest growing agricultural sector in the United States.

Farmers are businessmen and women after all and want to grow food that has a market.

Big box retailer Costco, in 2017, passed \$4 billion in annual sales from organic produce, eclipsing Whole Foods. Now, organic farmers can't grow produce fast enough to supply the warehouse retailer. To help nudge supply in the right direction, Costco is lending money to farmers, allowing them to buy land and equipment to grow more organic produce. Choosing organic food creates a positive ripple effect from farm to table, because supply always meets demand.

8. Animal Welfare

Livestock raised organically must have access to the outdoors and room enough to move, graze, and develop, in a manner that supports their natural behavior. These animals can't be given growth hormones and animals treated with antibiotics can't produce organic products. Conventional animal factories use genetically engineered crops to fatten up livestock ahead of slaughter, whereas organically produced animals cannot ingest genetically engineered feed.

Organically raised livestock have access to



The Department of Agriculture stated that sales from U.S. organic farms reached

\$9.9 BILLION
a 31 percent increase from 2016 and 2019.



Synthetic pesticides used in conventional farming have been linked to the decline of bees, a critical pollinator.

BAISMARTIN/SHUTTERSTOCK

What People Are Saying



I read The Epoch Times daily. I still like hard papers [...] and I still like to grab that paper in my hand, but I get more printed versions of stories than ever before. You guys have done an amazing job, and really—I think there's such a void in media, especially newspapers. They slant so solidly one way that **there are very few papers that I can really feel that I can rely on, and The Epoch Times is one.**

SEAN HANNITY
Talk show host



I congratulate you and The Epoch Times for the work you are doing, especially with regard to keeping the menace of the communist threat in front of us.

DR. SEBASTIAN GORKA
Military and intelligence analyst and former deputy assistant to the president



I rely on The Epoch Times newspaper for factual and unbiased news coverage.

LARRY ELDER
Best-selling author, attorney, and talk show host



The Epoch Times is a great place where you can understand traditional values in a way and in a tone and through content that is accessible. It's smart.

CARRIE SHEFFIELD
Columnist and broadcaster



It's our favorite paper. It's the first one we read. Thank you so much for your reporting of the news.

PAUL GOSAR
U.S. representative for Arizona

Learn more at EpochSubscription.com

THE EPOCH TIMES

TRUTH AND TRADITION

Zuri Star is a citizen activist and vocal advocate for environmental health, human rights, animal rights, and the good food movement. She leads the I Am Zuri Tribe. Zuri is also a singer-songwriter, entrepreneur, mother, and a travel and culinary enthusiast. This article was originally published in NaturallySavvy.com

Mounting Evidence Supports Use of Ivermectin

A growing list of clinical trials suggest millions could have been saved if ivermectin was commonly used to treat COVID

JOSEPH MERCOLA

When it comes to the treatment of COVID-19, many Western nations have been hobbled by the politicization of medicine. Throughout 2020, media and many public health experts warned against the use of hydroxychloroquine (HCQ), despite the fact that many practicing doctors were praising its ability to save patients.

Most have been silenced through online censorship. Some even lost their jobs for the “sin” of publicly sharing their successes with the drug.

HCQ had been approved for use on COVID-19 under an emergency use authorization (EUA) like that used to fast-track the approval of the vaccines now being taken by millions of Americans. But the EUA for HCQ was withdrawn shortly after a high-profile study published in *The Lancet* claimed the drug had no benefit in treating COVID and may be harmful. The *Lancet* study has since been retracted because the datasets used were found to be extremely unreliable.

Other studies had found HCQ could have a beneficial impact on COVID. Another decades-old antiparasitic drug that may be even more useful than HCQ is ivermectin. Like HCQ, ivermectin is on the World Health Organization's list of essential drugs, but its benefits are also being ignored by public health officials and buried by mainstream media.

Ivermectin is a heartworm medication that has been shown to inhibit SARS-CoV-2 replication in vitro. In the United States, the Frontline COVID-19 Critical Care Alliance (FLCCC) has been calling for widespread adoption of ivermectin, both as a prophylactic and for the treatment of all phases of COVID-19. Dr. John Campbell interviewed Dr. Tess Lawrie about the drug and its use against COVID-19. Lawrie is a medical doctor and doctorate researcher who has done a lot of work in South Africa.

She's also the director of Evidence-Based Medicine Consultancy Ltd., which is based in the United Kingdom. She helped organize the British Ivermectin Recommendation Development (BRID) panel and the International Ivermectin for COVID Conference, held on April 24.

Ironically, as a consultant to the World Health Organization and many other public health organizations, her largest clients are the very ones who are now actively suppressing the use of this drug.

Ivermectin Useful in All Stages of COVID

What makes ivermectin particularly useful in COVID-19 is that it works both in the initial viral phase of the illness, when antivirals are required, as well as the inflammatory stage, when the viral load drops off and anti-inflammatories become necessary.

According to Dr. Surya Kant, a medical doctor in India who has written a white paper on ivermectin, the drug reduces replication of the SARS-CoV-2 virus by several thousand times. Kant's paper led several Indian provinces to start using iver-



One scientific review found ivermectin reduced COVID-19 deaths by 75 percent and increased viral clearance, making it a potential game changer in battling the pandemic.

For links to studies mentioned in this article, please see the article online at [TheEpochTimes.com](https://www.theepochtimes.com)

Despite compelling evidence that ivermectin can reduce COVID-19 deaths, the WHO refuses to recommend this drug for the virus.

Ivermectin is on the World Health Organization's list of essential drugs, but its benefits are being ignored by public health officials and buried by mainstream media.



Despite compelling evidence that ivermectin can reduce COVID-19 deaths, the WHO refuses to recommend this drug for the virus.

mectin, both as a prophylactic and as a treatment for COVID-19 in the summer of 2020.

Lawrie bases her recommendation to use ivermectin on several studies and reviews, including her own.

She points to a scientific review by Dr. Andrew Hill at Liverpool University, funded by the WHO and UNITAID and published on Jan. 18. It found ivermectin reduced COVID-19 deaths by 75 percent and increased viral clearance. This finding was based on a review of six randomized, controlled trials involving a total of 1,255 patients.

Lawrie also did her own meta-analysis, published on Feb. 8, which found a 68 percent reduction in deaths. Here, 13 studies were included in the analysis. This, she explains, is an underestimation of the beneficial effect, because they included a study in which the control arm was given HCQ.

Since HCQ is an active treatment that has also been shown to have a positive impact on outcomes, it's not surprising that this particular study didn't rate ivermectin as better than the control treatment (which was HCQ).

Lawrie added two new randomized controlled trials to her February analysis that included data on mortality and published an updated analysis on March 31 showing a 62 percent reduction in deaths.

When four studies with high risk of bias were removed during a subsequent sensitivity analysis, the reduction in deaths increased to 72 percent. Sensitivity analyses are done to double-check and verify results.

WHO Still Refuses to Recommend Ivermectin

Curiously, when the WHO finally updated its guidance on ivermectin at the end of March 2021, they gave it a thumbs-down, saying more data are needed. They only recommend it for patients who are enrolled in a clinical trial. Yet, they backed their negative recommendation on a review that included just five studies and showed a 72 percent reduction in deaths.

Lawrie points out discrepancies in this WHO analysis, such as two studies deemed by Lawrie and outside sources to have a high risk of bias due to issues such as uncertainty in how patients were randomized for the control group. In contrast, these studies were listed by the WHO team to have a low risk of bias.

What's more, in the WHO's summary of findings, they include data from seven studies, which combined show an 81 percent reduction in deaths. The confidence interval is also surprisingly high, with a 64 percent reduction in deaths on the low end, and 91 percent on the high end.

What's more, their absolute effect estimate for standard of care is 70 deaths per 1,000, compared to just 14 deaths per 1,000 when treating with ivermectin. That's a reduction in deaths of 56 per 1,000 when using ivermectin. The confidence interval is between 44 and 63 fewer deaths per 1,000.

Despite that, the WHO refuses to recommend this drug for COVID-19. Rabindra Abeyesinghe, a WHO representative to the Philippines, commented that using ivermectin without “strong” evidence is “harmful” because it can give “false confidence” to the public. As noted by Daniel Horowitz in an April 1 article in *The Blaze*: “That sure sounds a lot like telling people if they wear a mask indoors, they won't get COVID. Tragically, when they invariably do get the virus, the global health elites have nothing to treat them with.”

Doctors Urge Acceptance of Ivermectin to Save Lives In the United States, the Frontline COVID-19

Critical Care Alliance (FLCCC) has also been calling for widespread adoption of ivermectin, both as a prophylactic and for the treatment of all phases of COVID-19. FLCCC President Dr. Pierre Kory, former professor of medicine at St. Luke's Aurora Medical Center in Milwaukee, has testified to the benefits of ivermectin before a number of COVID-19 panels, including the Senate Committee on Homeland Security and Governmental Affairs in December 2020, and the National Institutes of Health COVID-19 Treatment Guidelines Panel on Jan. 6.

As noted in a statement released by the FLCCC in December 2020: “The data shows the ability of the drug ivermectin to prevent COVID-19, to keep those with early symptoms from progressing to the hyper-inflammatory phase of the disease, and even to help critically ill patients recover.”

“Dr. Kory testified that Ivermectin is effectively a ‘miracle drug’ against COVID-19 and called upon the government's medical authorities ... to urgently review the latest data and then issue guidelines for physicians, nurse-practitioners, and physician assistants to prescribe Ivermectin for COVID-19.”

Kory noted that numerous studies—including peer-reviewed randomized controlled trials—verified the significant benefits of ivermectin to prevent or treat COVID in the earlier or later stages of the disease.

Many patients in the United States still struggle to access the drug, as many doctors are unwilling to prescribe it.

After appearing before the National Institutes of Health COVID-19 Treatment Guidelines Panel in January, the group released a statement that noted that with dozens of clinical trials now published around the world, it was possible to reliably assess clinical efficacy.

“Data from 18 randomized controlled trials that included over 2,100 patients ... demonstrated that Ivermectin produces faster viral clearance, faster time to hospital discharge, faster time to clinical recovery, and a 75 percent reduction in mortality rates,” the statement noted.

A one-page summary of the clinical trial evidence for ivermectin can be downloaded from the FLCCC website. A more comprehensive, 31-page review of trial data has been published in the journal *Frontiers of Pharmacology*.

At the time of this writing, the number of trials involving ivermectin has risen to 55, including 28 randomized controlled trials. A listing of all the ivermectin trials done to date, with links to the published studies, can be found on [c19ivermectin.com](https://www.c19ivermectin.com).

The FLCCC's COVID-19 protocol was initially dubbed MATH+ (an acronym based on the key components of the treatment), but after several tweaks and updates, the prophylaxis and early outpatient treatment protocol is now known as I-MASK+ while the hospital treatment has been renamed I-MATH+, due to the addition of ivermectin.

The two protocols are available for download on the FLCCC Alliance website in multiple languages. The clinical and scientific rationale for the I-MATH+ hospital protocol has also been peer-reviewed and was

published in the *Journal of Intensive Care Medicine* in mid-December 2020.

NIH Loosens Restrictions, FDA Warns Against Prophylactic Use

In mid-January, the NIH did revise its guidelines on ivermectin, in large part thanks to the data presented by Kory and others. However, while the NIH no longer warns against its use, they also do not outright recommend it, and they didn't grant ivermectin emergency use authorization.

As a result, many patients in the United States still struggle to access the drug, as many doctors are unwilling to prescribe it off-label against health officials' recommendations.

The U.S. Food and Drug Administration has adopted an even less favorable stance. In March, the FDA issued a consumer warning people to not use ivermectin as a prophylactic. But that warning was unusual in part because it focused on people who were taking forms of the drug intended for horses, which are much larger and need more potent doses. The FDA also hasn't approved ivermectin for prevention of or treatment for SARS-CoV-2.

The International Ivermectin for COVID Conference

From April 24 to 25, Lawrie hosted the first International Ivermectin for COVID Conference online. Twelve medical experts from around the world shared their knowledge during this conference, reviewing mechanism of action, protocols for prevention and treatment, research findings, and real-world data. They also discussed how to treat what has been dubbed “long-hauler syndrome.”

All of the lectures, which were recorded via Zoom, can be viewed on [Bird-Group.org](https://www.bird-group.org). In her closing address, Lawrie stated: “The story of ivermectin has highlighted that we are at a remarkable juncture in medical history. The tools that we use to heal and our connection with our patients are being systematically undermined by relentless disinformation stemming from corporate greed.”

“The story of Ivermectin shows that we as a public have misplaced our trust in the authorities and have underestimated the extent to which money and power corrupts. “Had Ivermectin being employed in 2020 when medical colleagues around the world first alerted the authorities to its efficacy, millions of lives could have been saved, and the pandemic with all its associated suffering and loss brought to a rapid and timely end.”

Lawrie criticized politicians and others who have tried to dictate the treatments doctors use, describing it as an attack on the doctor's ability to uphold the Hippocratic oath.

She urged her fellow physicians to uphold their moral and professional duty to do no harm and always do the best for their patients, even in the face of the apparent corruption of various arms of the medical system.

During the conference, Lawrie proposed that doctors around the world join together to form a new people-centered World Health Organization.

“Never before has our role as doctors been so important because never before have we become complicit in causing so much harm,” she said.

Dr. Joseph Mercola is the founder of *Mercola.com*. An osteopathic physician, bestselling author, and recipient of multiple awards in the field of natural health, his primary vision is to change the modern health paradigm by providing people with a valuable resource to help them take control of their health. This article was originally published on *Mercola.com*

Stretching Can Increase Your Tolerance for Pain

The discomfort caused by stretching may trigger a reaction that reduces back pain, research suggests

HUGO MASSE-ALARIE

To stretch or not to stretch?

Should you do it before or after exercise? Does it prevent or heal injuries? Stretching is always a hot topic. However, while it's effective in improving flexibility, its usefulness in reducing pain is being questioned.

Back pain is one of the most prevalent health conditions in our society. Up to 80 percent of the population may suffer from it at least once in their lifetime. Many sufferers don't improve after treatment. What makes treatments work or not? Answering this question could improve the quality of life of millions of people.

Health care professionals, including physiotherapists, often prescribe exercises, such as stretching, to reduce pain. It has long been accepted that stretching provides pain relief by increasing range of motion and decreasing muscle tone or tension, which gives the impression that there is less pain.

However, this perceived pain relief is rarely found to be directly associated with pain reduction. In fact, a recent study showed that increased flexibility was actually associated with a greater tolerance for pain, which occurs during stretching. It's possible that stretching actually impacts pain perception by activating the areas in our central nervous system that modulate pain.

I am a professor in the physiotherapy program at Laval University and a researcher at the Centre for Interdisciplinary Research in Rehabilitation and Social Integration (CIRRSI) at the university. Together with students from Laval University and McGill University, I have just published new research on the effect of stretching on pain sensitivity: “Stretch-induced hypoalgesia: a pilot study” in the scientific journal *Scandinavian Journal of Pain*. Hypoalgesia is a decreased sensitivity to painful stimuli. Hypoalgesia can be induced by drugs, or be something as mild as rubbing a stubbed toe to make it hurt less.

For the study, we recruited 22 healthy adults who didn't suffer from back pain. Each participant was asked to perform a stretch of the lumbar region (lower back), followed by a stretch of the forearm muscles. Participants were instructed to hold each stretch for three minutes to produce a moderate stretching sensation.

Stretching Produces Hypoalgesia

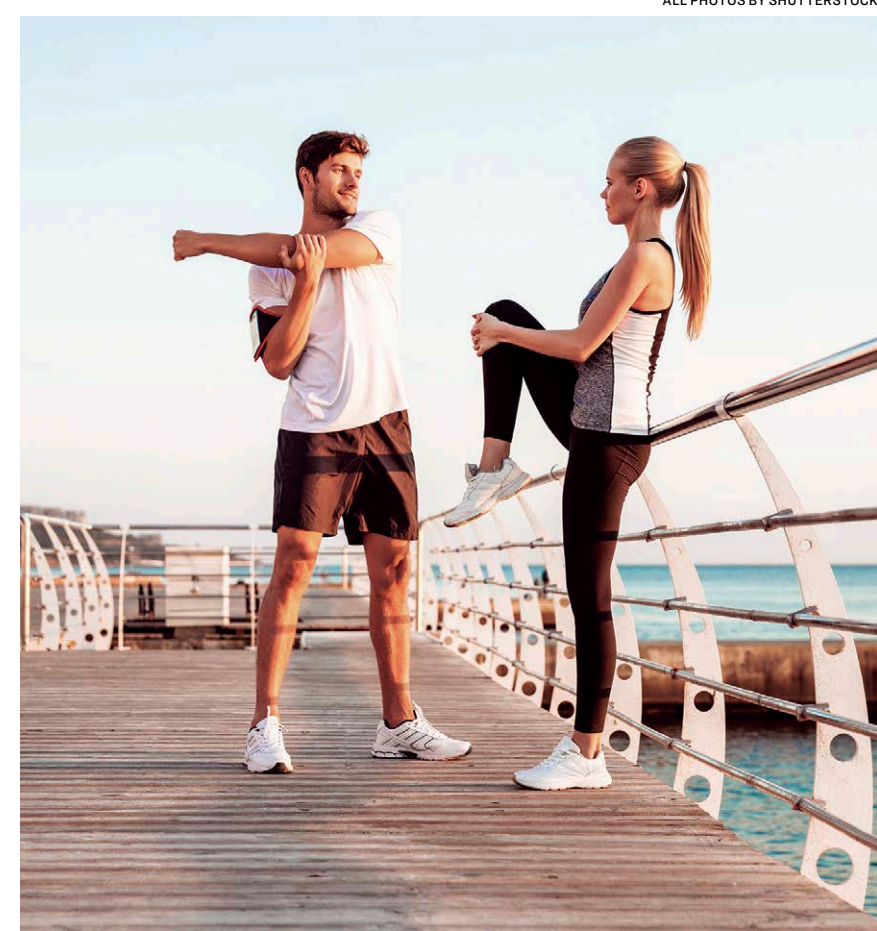
Before and after each exercise, we measured the pain sensitivity threshold for a muscle of the lower back (erectors of the lumbar spine) and a muscle of the forearm (wrist flexors) using an algometer.

An algometer is a measuring instrument equipped with a sensor that calculates the pressure required to produce a sensation we call a pain threshold. This way we can measure the modulation of pain sensitivity, or the change that stretching has on a pain threshold.

We calculated the modulation for each stretch on the extended area and on an area distant from the stretched muscles. A change recorded in an area remote from the stretch would suggest that the regions of the central nervous system that involve pain control were activated, and therefore that the stretch had a systemic effect.

We observed that both stretches produced hypoalgesia. As a result, participants could tolerate more pressure before reaching the pain sensitivity threshold. In other words, after the participants performed the stretches, the experimenter had to apply greater pressure to produce pain.

Following the wrist extension, stretch-



Stretching can induce hypoalgesia, a decreased sensitivity to painful stimuli.

Health care professionals, including physiotherapists, often prescribe exercises, such as stretching, to reduce pain.

induced hypoalgesia was restricted to the stretched area itself, while following the back flex, hypoalgesia was also present at a distance from the stretched area (the forearm).

The Brain Plays a Role?

Stretching isn't the only type of exercise that produces hypoalgesia. Several studies have shown that aerobic exercise and exercise involving sustained muscle contractions also induce hypoalgesia.

These forms of exercise have received much more attention from the scientific community than stretching has, with some groups of researchers attempting to determine what mechanisms are at work. For example, it has been suggested that exercise-induced hypoalgesia involves the activation of—and interaction between—the opioid system (which includes three opioid receptors in the brain) and the endocannabinoid systems, which control pain.

In a recent review of research published in *The Journal of Pain*, the authors suggested that exercise-induced hypoalgesia could be explained by the unpleasant and even sometimes painful effect of these exercises. Indeed, we know that activating nociceptors (pain receptors) induces hypoalgesia by triggering systems that modulate pain, including opioids.

For example, holding a hand in a bucket filled with cold water produces an intense pain that induces systemic hypoalgesia. It's possible that similar mechanisms could also explain our results, since stretching produces a sensation that is sometimes unpleasant and even painful.

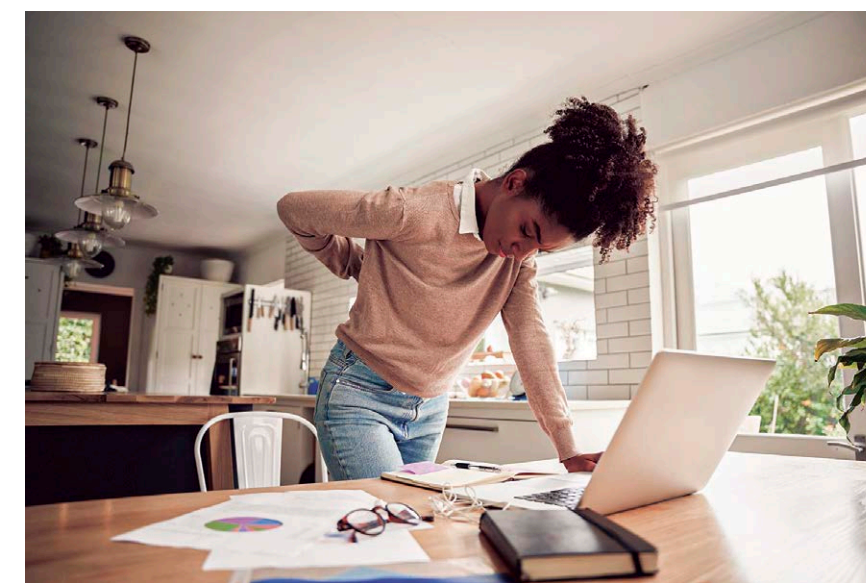
The remote, and therefore potentially systemic effects, were only present following back stretching. We believe that stretching the back could involve stretching a larger mass of structures (muscles, ligaments, tendons, skin) than stretching the wrist, and could therefore produce a greater effect. These hypotheses should be tested in future studies.

Stretching Is Not a Panacea

The immediate benefits of stretching in people with back pain could be explained by the fact that regions in the body involved in pain modulation were stimulated. Exercise can also induce hypoalgesia. However, many people with chronic back pain benefit less from the hypoalgesia that is usually induced by exercise. This could be explained by differences in the functioning of regions in the central nervous system that are involved in pain control.

Back stretches may not benefit everyone who suffers from back pain. Severe back pain that persists over time is usually multifactorial, so general management by a health care professional, such as a physiotherapist, may be necessary to reduce or control the pain. Stretching is only one of the treatment tools available to improve one's health condition and it isn't a panacea.

Hugo Massé-Alarie is an assistant professor of physiotherapy at Université Laval in Canada. This article was first published on *The Conversation*.



Back pain is one of the most prevalent health conditions in our society.

5 Ways to Manage the Emotional Distress of Cancer

A new book provides useful guidance for how to deal with the emotional and social upheaval of cancer

JILL SUTTIE

The National Cancer Institute states that nearly 40 percent of men and women in the United States will receive a cancer diagnosis in their lifetime. Even during the pandemic, cancer was the leading cause of death around the world.

That means many people are dealing with treatment for this worrisome disease—including many of my friends and family members. While new treatments are giving people hope for greater longevity and even full recovery, the social and emotional toll of cancer is still severe. Right when cancer patients need calm clarity and social support for getting through treatment, they can have trouble finding either, compounding their suffering.

While no person's experience of cancer is exactly the same as another's, there are reactions that are common to many, write Elizabeth Cohn Stuntz and Marsha Linehan in the new book "Coping with Cancer." These include difficult feelings such as fear, sadness, anger, and guilt; concerns about how the disease will change one's life, job, or family relationships; and physical symptoms such as fatigue, pain, and loss of sleep. A patient's constantly changing experience can breed uncertainty, too, exacerbating many of these reactions.

Drawing upon decades of research, practice with helping patients, and stories from patients (including the authors themselves), the book gives wise guidance on how to reduce stress, make better decisions, protect important relationships, and increase overall well-being while fighting off the disease—all of which can support a better prognosis, too. Based largely on Linehan's model of dialectical behavior therapy, the authors offer several keys to coping with the physical, emotional, and social strains that cancer patients face. Here are a few of their recommendations.

Be Mindful and Accepting of Your Experience

Though some people believe there's an ideal way to feel or behave when faced with cancer—upbeat, stoic, or defiant, for example—trying to fit someone's ideal of how you should react or denying your own feelings is likely to backfire, write the authors. Instead, you should try practicing mindfulness—paying attention to your experience without judgment. This is a more effective way to understand your experience and your needs in any given moment.

"Your emotions, thoughts, and physical sensations offer valuable information. They can tell you what's wrong and needs to be addressed as well as what's going right that should be pursued," write Stuntz and Linehan.

“The goal is to try to coach yourself with the same warm, patient, and sensitive understanding you would give to a cherished loved one ...”

from "Coping with Cancer" by Elizabeth Cohn Stuntz and Marsha Linehan

At the same time, being mindful can keep you from wallowing in negative emotions or ruminating about catastrophic possibilities. When you increase awareness of the fleeting nature of your thoughts, emotions, and physical sensations, it can create a little distance from them, opening the door to noticing positive experiences (or less bad experiences) when they occur. Savoring happy moments and small victories can provide a good counterpoint to the hard times, helping you to ride the waves of experience without being overwhelmed.

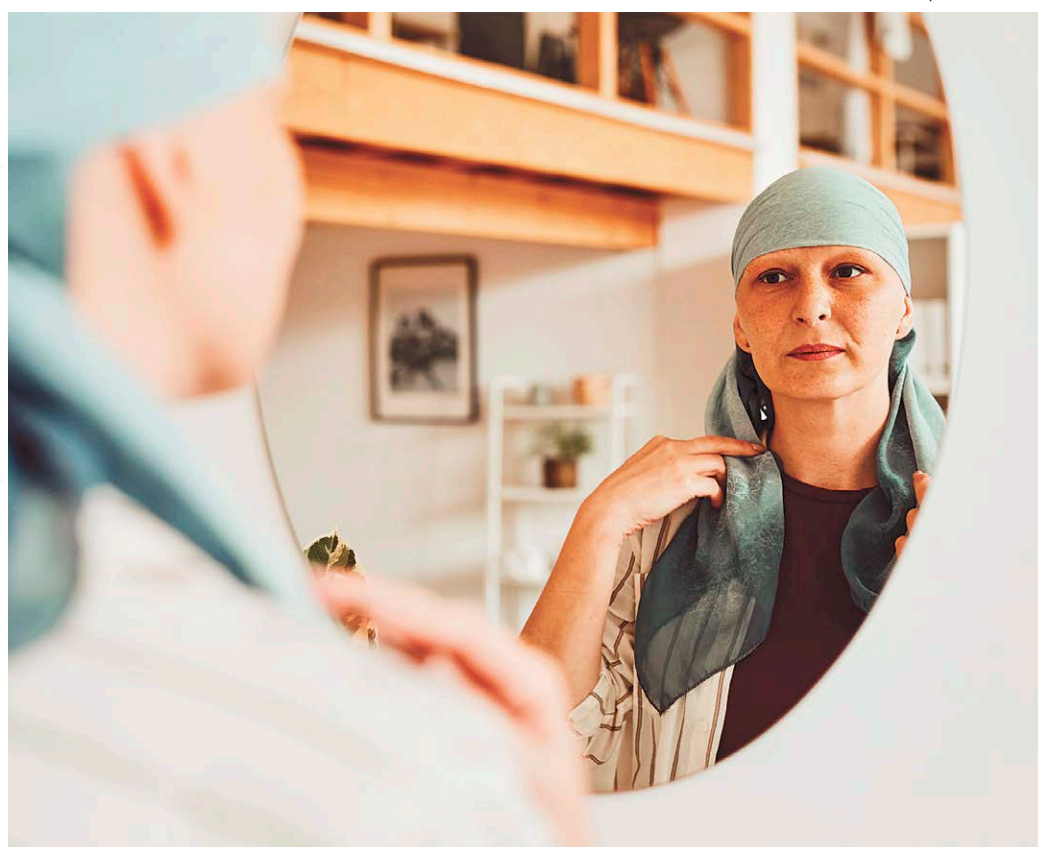
Finding some distance also allows you to notice patterns, including habits that might not be serving you.

"When you pay careful attention to the interplay between your emotions, your thoughts, and your body, you have the chance to understand your response and see where effective coping may be short-



Cancer is a gruelling experience and how you manage your thoughts can make a world of difference.

RONALD_ANDRADE/SHUTTERSTOCK



SEVENTYFOUR/SHUTTERSTOCK

A cancer diagnosis can prompt us to reconsider what is important, like our relationships or art, and focus our attention there.

circuited and bring yourself back into balance," write the authors.

Try Self-Compassion

If you accept that all feelings are valid, you can start to recognize where they come from and how to soothe them without repressing them. One method for helping with emotional upset is the practice of self-compassion. Showing yourself kindness and understanding for what you are going through, while recognizing that you are not alone in your suffering, can be a boon to your recovery.

According to the authors, "The goal is to try to coach yourself with the same warm, patient, and sensitive understanding you would give to a cherished loved one who is in a distressing situation." That means acknowledging whatever experience you are having (for example, I feel pain in my chest right now and it's worrying me), sending yourself soothing messages (even though this pain is hard, I've been through it before, and I know it will pass), and reminding yourself that you are not alone in your suffering (others have been through this too and survived).

People who are more self-compassionate tend to have less depression, anxiety, and fatigue and better quality of life when facing cancer, and generally tend to cope better under stressful conditions. Self-compassion may be particularly beneficial for keeping us as well as possible in trying circumstances.

Check the Facts and Question Distorted Thinking

When we are worried, it can often cause rumination—repetitive thoughts that disturb us and keep us up at night. This can lead to depression and other problems that can interfere with recovery.

As the authors note, people with cancer can succumb to distorted thinking patterns, such as "black-and-white" thinking or thinking in absolutes—for example, only focusing on bad news and ignoring progress, or telling yourself that you'll never be able to work again and you'll always be sick.

To find a more balanced approach, the authors recommend that you question these types of thoughts by stepping back and examining them and, perhaps, challenging or reframing them. Recognizing the difference between facts and fear-based assumptions can help you interrupt distorted thinking and keep your mind from spinning out of control.

Questioning assumptions can be helpful when talking to doctors, too. For example, some people with cancer are afraid to confront their doctors with fears or doubts about treatment, worried they will offend their doctor and, possibly, lose an important ally in their care. But most doctors are trained to listen and educate patients about their options and expect questions. It's important to express uncertainty while staying open to emerging information—even difficult facts about your care—to maintain a realistic view of your situation.

Ask for What You Want From Others ... in a Kind Way
Support from others is key to healing from cancer. But sometimes cancer patients may

feel reluctant to ask for help, especially if they tend to be "go it alone" types. Or they may fear that medical doctors or caretakers will not listen to them, making them feel angry for having reached out.

It's important to find a balance between requesting help and demanding it from someone—especially from a caregiver who is already burdened. Asking for what you want clearly and confidently, explaining why you need the help, and appreciating the help you receive are all useful strategies for getting what you need from others to help you heal, the authors write.

Given that protecting a relationship with a health provider is paramount to many cancer patients, the authors give special attention to communicating with doctors, including this advice (using the acronym FAST):

- **Be Fair:** Validate your feelings and wishes as well as the other person's.
- **Assert:** Don't apologize for making a request, having an opinion, or disagreeing.
- **Stick to your values:** Make sure you are acting in a morally sound way.
- **Be Truthful:** Don't make excuses, lie, or act helpless when you're not.

Keeping interactions with others kind, honest, and assertive is the best way to preserve relationships through a long treatment.

Connect to Meaning

While no one wants to suffer from cancer, it can be an opportunity to remember what is most important in life. Whether it's your relationships with others, your work or creative endeavors, the beauty of the world around you, or your religious faith, you can take moments to appreciate the things of value to you and embrace opportunities to connect to them.

"Being clear about what sustains and matters to you can help you assess whether you're living the way you want to or decide what if any changes you want to make to promote the more meaningful parts of life," write Stuntz and Linehan.

Meaning in life is central to happiness, and finding meaning in the midst of suffering can help people stay more resilient as they go through trauma. Nurturing meaning in life could involve writing a gratitude letter to someone who made a difference to you, volunteering to help others suffering from cancer, or writing a song or poem. Whatever you do to find meaning, though, remember not to do it because you "should" or to fulfill someone else's agenda, but because it truly helps sustain you.

While none of these strategies are foolproof, they can help people who are going through cancer manage, and that's good to know. On the other hand, I would argue that this advice is useful for anyone going through difficult times, health-related or not. We could all be more mindful, offer ourselves more self-compassion, be better fact checkers, treat our support networks kindly, and search for meaning in life. The book, though geared to cancer survivors, really speaks to us all.

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.



Ignoring that choice includes loss is a delusion that creates unneeded suffering

Continued from Page 9

And then there's MK, a college student who is obsessively angry because of the deep confidence his friends have earned through their mastery in sport or other passions and academic pursuits.

MK acknowledges that he loves to socialize and party and that he's chosen to spend his time doing just that, as opposed to achieving excellence. And yet again, this young man is confused and frustrated by my inability to devise a plan to give him the social life he wants and also the self-confidence that comes with focused hard work, time, and effort.

When we're willing to accept that life includes non-negotiable limitations, then the value of the choices we make increases exponentially.

We're conditioned to believe that we should have it all—everything we want. Having it all in this society also means not having to give anything up.

Technology encourages this belief. With the touch of a button, we can, in fact, get a lot of things we want without

much effort. Media and advertising also support our belief that everything is possible; if we don't have everything we want, we need to try harder.

The powers that be want us to believe that we can have it all because it keeps us chasing the dream, a dream of endless acquiring and achieving. Ultimately, having it all (as an idea) is good for business while accepting not having it all is bad for the bottom line.

If we stop chasing it all, the profit margin shrinks.

When I told Rachel that being available 24/7 to her kids might mean not being as available to her husband, and perhaps not enjoying the intimacy she desired, she was disappointed and seemingly not convinced. Similarly, when I advised Peter that his choice to be in a committed relationship—and enjoy the jewels of such a choice—would mean that his experience of socializing would have to change and be perhaps less exciting than if he were single, it seemed as if he had never considered such a concept.

So too, when I laid out the hours that Jane's career in New York required and juxtaposed that against her young daughter's wake-and-sleep schedule, she seemed to be seeing the information for the first time, as a scientist almost, recognizing the math of her reality, and thus the real truth of her choices.

Life has limitations, which we oddly aren't taught. Accepting this truth, however, frees us from the fantasy that keeps us chasing and suffering.

When we believe that we can and should have it all, we end up paralyzed, stuck between choices, and unable to pull the trigger or settle into any path. We're unwilling to accept the reality that, like it or not, choice involves loss, not occasionally, but always.

When we stick with our storyline that we are the problem, that we are why we can't have everything we want, we actually end up with nothing. Loss and gain go hand in hand.

Furthermore, when we reject the fact that we have to give up something we want in order to get something we want,

There is only enough time, energy, motivation, and attention for some of what we want—not all of it.

we deny ourselves the opportunity for self-compassion. Accepting the loss that comes with choice means also accepting the feelings that come with that loss. It means offering a place for the sadness or disappointment that comes as a result of not being able to enjoy that other path.

With every choice, one door opens and another closes. There is an experience of that door closing, which also needs to be included and treated with empathy.

I often find myself simply saying "yes" to people who come to see me with such dilemmas of choice. Yes, it's true that if you choose this you will not get to have that. The fact that you can't figure out a way to have both doesn't mean there's something wrong with you; it means you're living with the reality of being human.

There is only so much time, energy, motivation, and attention for some of what we want—not all of it. Some wants, by their very nature, eliminate the possibility of other wants.

When I lay it out matter-of-factly in this way, people sometimes look at me as if I have three horns, as if they had never considered such a basic truth.

When we're willing to accept that life includes non-negotiable limitations, then the value of the choices we make, the meaning in the path we do choose, increases exponentially.

Recognizing and being honest about what we get, and what we choose to give up, intensifies how much what we get actually matters to us.

It's not your fault if you can't have it all; it's not a failing on your part. The idea that we should be able to get everything we want, have every experience we desire, is false.

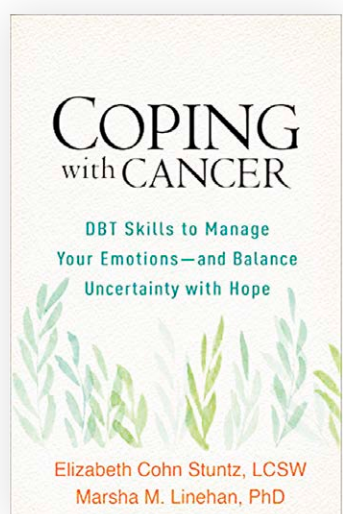
It's an idea that keeps us handcuffed, stuck, and suffering.

Time, energy, and attention are malleable at one level, in that they feel like they can expand and contract. But they're also finite at another level. When we give something our time and attention, it means that we cannot give as much time and attention to something else we may also value.

These are the hard choices that come with life. Approaching our choices with a mature and sober sense of reality, one that takes into account the losses that all choices include, allows us to live a life of deeper intention and meaning. We can feel even more grateful for what we do choose to experience.

When we stop busying ourselves with what we should have and what's wrong with us that we can't have it, we get on with the business of determining what we really want. We can choose what's most important to us. Accepting the reality of choice and its partner, loss, encourages us to get clear about what we really want our life to be about and get on with living it.

Nancy Colier is a psychotherapist, interfaith minister, public speaker, workshop leader and author of "The Power of Off: The Mindful Way to Stay Sane in a Virtual World." For more information, visit NancyColier.com



"Coping with Cancer," helps readers face fear, sadness, and anger without being paralyzed by them.

BRIAN A. JACKSON/SHUTTERSTOCK



Committing to a direction means another direction is left unexplored. This is the reality of our finite resources of time and energy.

BECOMING MINIMALIST

Money Questions to Ask Your Best Friend

Conversations about personal finances can help you—and those you care about—learn and grow

JOSHUA BECKER

“An investment in knowledge pays the best interest,” Benjamin Franklin once said.

The statistics concerning our personal use of money aren't particularly good:

- Nearly 70 percent of Americans have less than \$1,000 in savings.
- Twenty-five percent of Americans have no savings at all.
- The average U.S. household owes \$7,149 in credit card debt.
- Forty percent of Americans spend up to half of their income servicing debt.
- Less than one-third of Americans use a budget.

No wonder money remains the most common conflict for American couples, serving as a leading cause of stress and divorce.

The statistics concerning our personal financial habits are downright sad. And yet, nobody is talking about it—at least not in personal terms.

Money remains one of the least-discussed topics of conversation in our society. It seems as though we've been conditioned from a young age to not talk about it. We fear looking foolish in our personal decision-making. We worry about stirring up envy or comparison among our friends and family. Or we're concerned about how we'll be perceived.

So it seems easier to not talk about it. As a result, we often go at it alone, hoping our own judgment will serve us well in our personal financial decisions.

However, based on the numbers above, it isn't.

Our silence is ruining us. Not having this conversation is negatively affecting us as people, as families, and as a society. Personal finance is a conversation we need to be having with our closest and most-trusted friends. We have so much to learn from one another in all aspects of life—finances included.



COTTONBRO/PEXELS

It can feel awkward to discuss finances with friends, but it can help us learn, and support others in their money management.



Money remains one of the least-discussed topics of conversation in our society.

VETKIT/SHUTTERSTOCK

While many people don't have financial advisers they meet with often, almost all of us have friends and relationships with people we look up to. Next time you're with somebody you admire, bring up the topic of personal finance with a spirit of curiosity and humility. Try asking some important questions.

Here are 10 money questions to ask your best friend.

The conversation will help you—and probably them—make better financial decisions.

1. Can I ask you a money question? About what percentage of your income do you spend on housing? How did you decide on that amount?
2. Do you have a monthly payment on your car? When you bought the vehicle, how did you decide how much you were going to spend?
3. I have a personal question for you if

you don't mind. Are you currently saving money for retirement? Are you happy with how much you're saving? When did you start?

4. Do you have health insurance? Can I ask how much you pay for it?

5. Did you have to take out a loan for school? If so, are you doing anything to pay it off early?

6. Do your spouse and you set a financial budget for your home? Do you have good tips on how to find something that works?

7. Is there a thought process that you use when making large purchases?

8. Do you invest any money into the stock market? Where do you go to find advice?

9. What is the best piece of financial advice you've ever received?

10. Are you doing anything specific to teach your kids about personal finance?

Personal finance is a conversation we need to be having with our closest and trusted friends.

Now, I'm not assuming your friend will have all the perfect answers to these questions. But sometimes, the first step to finding the correct answer is simply beginning the conversation.

What other financial questions do you think would be helpful to ask a trusted friend?

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

Virtue of the Brush in a Time of Chaos

“When things are chaotic to the extreme,
order must be restored.”

- “The four books” by Zhu Xi

亂極當治



The original calligraphy is now available for purchase at
InspiredOriginal.Org

INSPIRED
ORIGINAL