

MIND & BODY



The WHO described social distancing as “ineffective and impractical” in 2006.
JOSH EDELSON/AFP VIA GETTY IMAGES



Credible evidence suggests COVID-19 may have escaped from a lab, despite previous denials.
HECTOR RETAMAL/AFP VIA GETTY IMAGES



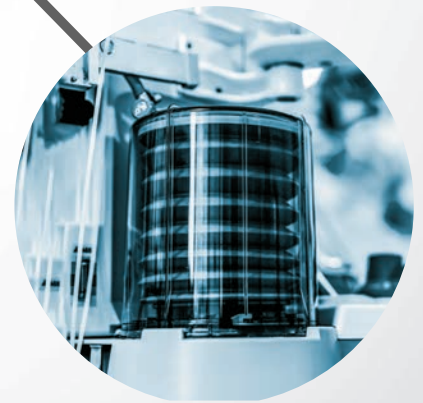
UNSETTLED SCIENCE

Combing Through the Science of COVID

Conflicting research and questionable policies raise questions about pandemic public health response



People are urged to get a new form of mRNA vaccine that has a limited safety record.
JOSEPH PREZIOSO/AFP VIA GETTY IMAGES



Invasive ventilation is more likely to be used on people with low vitamin D.
TERELYUK/SHUTTERSTOCK



Some 53 studies have shown HCQ can treat COVID but it remains prohibited.
LEONARD ZHUKOVSKY/SHUTTERSTOCK

CONAN MILNER

Does wearing a cloth or paper face mask protect you from a virus? Is the PCR test a reliable method for identifying an infection? Do lockdowns help slow the spread? Are there any safe medicines that have successfully treated or prevented COVID-19?

Ask these questions to a random selection of people and you'll probably get very conflicting answers. That's because there's a lot of confusion surrounding the COVID pandemic. Health experts have always emphasized that science guides their pub-

lic health orders, but many doctors, lawmakers, and scientists have challenged these rules on the lack of science that supports them.

Even the origin of the virus has been fraught with scientific controversy. Since the dawn of the pandemic, officials insisted that SARS-CoV2, the virus said to cause COVID-19, emerged from nature, jumping from bat to human in one fell swoop. Despite evidence suggesting that a Chinese virology lab might have been the true source,

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A meta-analysis of 49 trials shows ivermectin can treat COVID but it is not approved.
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ALYONA SHU/SHUTTERSTOCK

Miscarriage: What I Wish I Had Known

Miscarriage rates are skyrocketing but MTHFR gene variants still overlooked

SINA MCCULLOUGH

Women throughout the world are experiencing infertility issues, including miscarriage. Research published in The New England Journal of Medicine estimates 30 percent of pregnancies result in miscarriage, making it the most common adverse outcome of pregnancy. In fact, miscarriage rates are rising at an alarming rate, approximately 1 percent per year according



JOHN FEDELE/AP VIA GETTY IMAGES

Miscarriage rates are rising at an alarming rate of approximately 1 percent per year.

to research published in 2018. Odds are, you or someone you know has experienced a miscarriage.

I experienced five miscarriages. Fortunately, I am blessed with three healthy children; two boys ages 11 and 7 years, and an 8-month-old girl. However, wide gaps exist between their ages because of my many losses along the way. With each miscarriage, I became pregnant quickly, but lost the baby within the first trimester. There were no obvious warning signs; one moment I felt fine and the next moment, I lost the baby.

After my first miscarriage, I tried many strategies in an attempt to prevent a second loss, such as a clean diet, clean water, stress management, positive affirmations,

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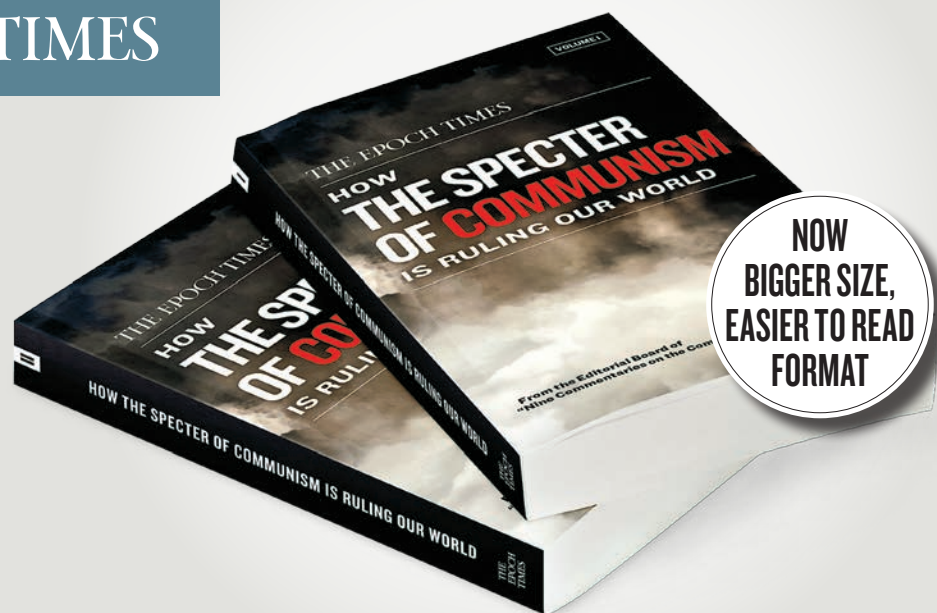
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Data reveals that accidents are down during peak drinking and driving hours thanks largely to ridesharing apps.

SMARTER OPTIONS

Sharing a Ride to Health and Safety

Mounting data reveals that traumatic car accidents are down during peak hours

W. GIFFORD-JONES

We all hope for a breakthrough in the cure for cancer. Thankfully, scientists are making progress in the fight against this and many other devastating diseases. But on occasion, an innovation well outside of the health care sector can make a big difference in matters of life and death. And there is one such innovation where older people are missing out.

New research shows that the introduction of ridesharing services has dramatically reduced trauma stemming from car accidents. This isn't the first such study, but it adds to a mounting collection of studies with findings that allow for better planning and decision-making.

Promoting rideshare programs will help all those with pent-up enthusiasm for social drinking to get home safe and sound.

Ridesharing companies, such as Uber and Lyft and another 88 or so competitors globally, have been in operation for about a decade, and the business model that depends on web applications and mobile app technology has proliferated to nearly every large city around the world.

Since the first studies were conducted to measure the impact of rideshare services on human health, the results have been mixed. The great hope, of course, has been for a reduction in the incidence of drunk driving. Initial studies were inconclusive.

But with the passage of time and the growth of available data, studies from New York City to San Francisco have delved into more detailed analysis, looking not only at traffic fatalities, but also taking into account rates of tourism, access to public transportation, and timing of rideshares and alcohol-related accidents.

Consumer behavior offers another lens. Uber, the largest global company, reports that nearly 80 percent of riders claim to have avoided drinking and driving at least once thanks to the service.

What does the latest research show? A newly released study, conducted by researchers at the University of Texas and published in JAMA

Surgery, used hospital trauma data, rideshare volume, and impaired-driving convictions to compare the seven-year period prior to Uber introduction with a comparable set of years post Uber introduction. It involved data on more than 24 million Uber rides. They found a 23.8 percent decrease in motor vehicle crash traumas. What's most interesting is that this decrease was measured during peak trauma periods (Friday and Saturday nights).

It makes sense, as this is when the younger demographic of rideshare users are heading out to socialize. Promoting rideshare programs will help all those with pent-up enthusiasm for social drinking to get home safe and sound.

But who isn't benefiting from these perks of rideshare programs? Research shows that older adults are uninformed about how ridesharing works. The process of hailing a ride with their smartphones presents a technological gulf that isn't being addressed. In addition, research has found that they are particularly concerned about their safety with regard to unknown rideshare drivers.

As a result, seniors tend to be driving their own cars or not going out—neither of which may be in their best interest.

Will the arrival of fully autonomous vehicles make the difference? Perhaps not for skittish seniors. But driverless cars will solve one of the concerns about rideshare programs—distracted rideshare drivers looking at their phones for information.

As we move ever more boldly into the post-pandemic new era, wouldn't it be nice if we could harness more innovations like ridesharing to make the world a healthier place?

Where is the next big breakthrough?

Uber, the largest global company, reports that nearly 80 percent of riders claim to have avoided drinking and driving at least once thanks to the service.

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Solutions for Small Intestinal Bacterial Overgrowth

SIBO is a complex ailment that often requires all-encompassing treatments

ASHLEY TURNER

In part one of this series, we gave an overview of small intestinal bacterial overgrowth—otherwise known as SIBO. In part two, we discussed how to diagnose it. This third and final installment explores how to treat it.

It's no secret that SIBO can be difficult to treat. Finding true resolution requires an all-encompassing approach that includes dietary and lifestyle changes to balance the gut.

A Quick Refresher

Your digestive system has several sections with specific roles. After you swallow a mouthful of food, it makes its way to your small intestine, where the bulk of the work of drawing out nutrients takes place. What's left passes into your large intestine, where a host of bacteria and fungi help finish the job. Then, waste products make their way out of your body.

While those bacteria are essential in the large intestine, when they proliferate in the small intestine, they cause SIBO and can undermine digestion and cause various ailments.

Dietary Interventions

Likely the most important dietary intervention in treating SIBO is eliminating inflammatory foods. Foods that are full of refined carbohydrates, sugars, preservatives, and artificial ingredients fuel the bacteria that then proliferate throughout the small intestine.

Not only that, but these foods also drive systemic inflammation that can weaken the immune system, which can make one more susceptible to SIBO. Conversely, focusing on real, nutrient-dense foods such as quality protein, vegetables, fruits, and non-inflammatory fats will help to balance the microbiome.

There are many clinicians that prescribe other dietary interventions for SIBO, including the low-FODMAP diet (fermentable oligosaccharides, disaccharides, monosaccharides, and polyols), an elemental diet, the specific carbohydrate diet (SCD), the gut and psychology syndrome diet (GAPS), low fermentation diet (LF), or low/no starch diet. What most of these diets have in common is limiting the types of carbohydrates consumed to avoid feeding the bacterial overgrowth in the small intestine. Many of these diets help heal the gut lining, but sometimes offer incomplete reversal of bacteria in the small intestine.

The most restrictive of these dietary interventions is the elemental diet, which includes several weeks of not consuming food and drinking only a solution of easily assimilated nutrients including vitamins, minerals, amino acids, fats, and certain sugars that won't make it to the small intestine. While this has shown some promise along with other antimicrobial and



When bacteria creep up our digestive tract into the small intestine, it can be tricky to resolve. Doing so often requires overhauling our diet and supporting our immune system.

motility-activating nutraceuticals and/or medications, patient compliance is a consideration. In other words, it doesn't always work because people can't stick to it.

Probably the most utilized diet for SIBO is the low-FODMAP diet, which limits short-chain carbohydrates that are not completely absorbed in the gastrointestinal tract. These short-chain carbohydrates can linger in the small intestine and feed the overgrowth of bacteria, which leads to various gastrointestinal symptoms.

Often times, removing FODMAPS from the diet offers short-term relief because it decreases symptoms. However, this diet doesn't eradicate the overgrowth of bacteria in the small intestine. Also, those who abide by a low-FODMAP diet for a long period of time run the risk of harming the beneficial bacteria in the large intestine that are crucial for overall health. The large intestine needs fermentable carbohydrates to feed the beneficial bacteria in the large intestine.

In fact, beneficial bacteria in the large intestine produce butyrate when adequate fermentable carbohydrates are consumed. Butyrate is a short-chain fatty acid with many health benefits, including having an anti-inflammatory and protective mechanism on the health of the gut, namely the large intestine.

There's a significant distinction between not experiencing symptoms, which some of the diets offer, and actually reversing bacterial overgrowth in the small intestine.

Restore Gut Integrity

It's important to support the health of your intestinal wall to recover from SIBO. Incorporating collagen and bone broth into your diet will help to soothe inflammation within the gut and restore its integrity. In addition, nutrients such as L-glutamine, zinc carnosine, lactose-free colostrum, and various immunoglobulins can help to rebuild tight cell junctions within the gut lining. Additionally, low stomach acid (hydrochloric acid or HCl) can be a contribut-

ing factor to SIBO. Supplementing HCl can be helpful in several ways: to promote gastric motility, support the release of gastric, pancreatic, and gallbladder secretions, and hinder or kill harmful bacterial species.

Please note, probiotic supplementation is controversial for treating SIBO, but if an individual can handle taking them, they can help support the gut.

Support the Immune System

Individuals with SIBO often have compromised immune systems. A healthy immune system is important to prevent illnesses, including a recurrence of SIBO.

Fortunately, compounds such as curcumin (found in turmeric), resveratrol (found in the skin of grapes, blueberries, raspberries, and more), and liposomal glutathione have a profound impact on supporting the immune system.

SIBO patients are often nutrient-depleted and have low vitamin D levels. Low vitamin D levels are associated with low immune function, so supplementing appropriately with vitamin D may be indicated.

You can also boost immune function by removing potential exposures to environmental toxins, molds, and other pathogens such as viruses and fungal infections.

Adequate sleep, exercise, and stress management are also critical to an optimally functioning immune system.

Incorporate Herbs

Herbal antimicrobials are powerful tools in helping to rebalance the bacterial colonies in the gut and squelch bacterial overgrowth in the small intestine.

Some common herbal antimicrobials used for SIBO are berberine, oregano, allicin (from garlic), and a couple of herbal compounds called Biocidin and Atrantil.

Since a potential cause of SIBO is the decreased activity of the migrating motor complex or a slowing of the gastrointestinal smooth muscle activity, prokinetic agents are often recommended.

Prokinetic herbs that increase the mus-



Compounds in foods such as turmeric and grapes can help support the immune system.

STAN BODOLIBOV/SHUTTERSTOCK

A Refreshing Summer Superfood

Mango is deliciously packed with vitamins and minerals

MAT LECOMPTÉ

If you're looking for a refreshing, sweet, and juicy treat to enjoy this summer, grab a mango. These tropical fruits are loaded with vitamins and minerals to support your health in several ways.

Mangoes have more than 20 vitamins and minerals and are great sources of vitamin A, C, fiber, potassium, and more. That means they may be good for your heart, eyes, digestive system, and immune system.

Mango is also extremely versatile and can be enjoyed on its own for a sweet snack, or can be easily added to salsas, chutneys, salads, smoothies, or mixed in with other fruits and vegetables. It also makes a great ingredient in any number of desserts.

An entire mango offers about 70 percent of your daily recommended vitamin C serving, which helps beef up antioxidant

support, immune function, and iron absorption. It's also packed with other antioxidants that help your body stand up to free radicals.

You'll get about 3 grams of fiber in a whole mango. That's a terrific serving that can help promote digestive and heart health.

Mango also features potassium and folate, which can both be beneficial to your heart.

If you've never had mango before, you'll need a bit of a primer. First, select one that has a little give when you squeeze it, which means it's ripe and ready to be eaten. It should be a yellow-orange color.

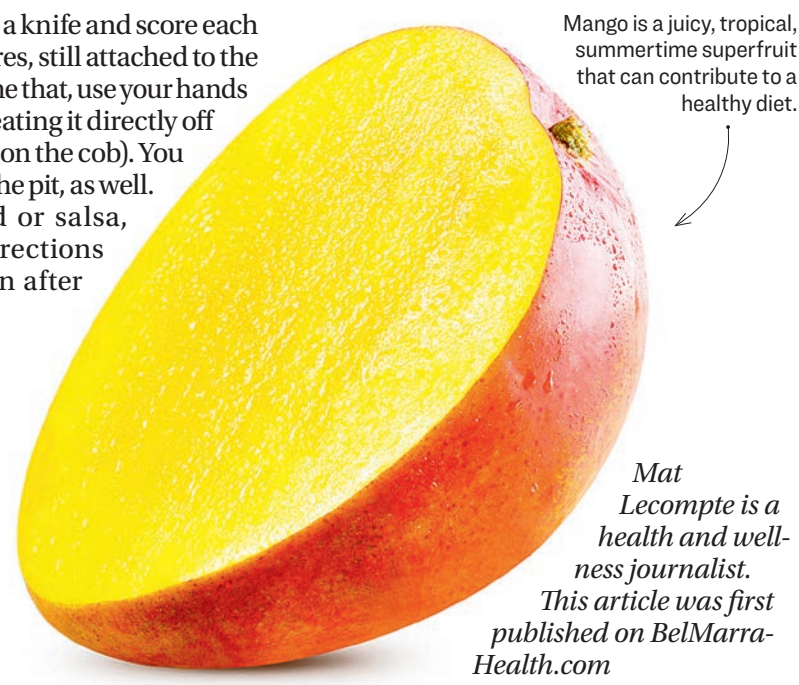
You don't want to bite right into it. It's got a thick, bitter skin that is best avoided. There is also a big pit that runs the length of it, which can be another potential challenge to the untrained eater.

What you want to do is cut the mango in half, lengthwise, moving around the pit.

Once it's in half, take a knife and score each piece into little squares, still attached to the skin. Once you've done that, use your hands to pop the meat up, eating it directly off of the skin (like corn on the cob). You can get the meat by the pit, as well.

To put in a salad or salsa, follow the same directions but remove the skin after scoring.

Mango is a juicy, tropical, summer-time superfruit that can contribute to a healthy diet. Be sure to include a variety of fruits this summer to get the most from the season.



Mango is a juicy, tropical, summer-time superfruit that can contribute to a healthy diet.

Mat Lecompte is a health and wellness journalist. This article was first published on BelMarra-Health.com

MAKS NARODENKO/SHUTTERSTOCK

cular contractions in the small intestine include ginger, globe artichoke, a combination supplement called Iberogast, and various Chinese herbal formulas.

Tone the Vagus Nerve

Known as the wanderer, the vagus nerve is the longest cranial nerve connecting the brain to the gut and the rest of the body. The vagus nerve is responsible for regulating the autonomic nervous system and the involuntary functions of the body such as breathing, blinking, the beating of the heart, organ stimulation, and digestion.

When there is vagal nerve dysfunction, it impairs the migrating motor complex and overall digestion. It's hard to say which came first, the SIBO or the slow migrating motor complex, but there is a direct correlation with vagal nerve tone.

There are various strategies to tone the vagus nerve including singing, humming, gargling, taking cold showers, box breathing, massage, prayer and meditation, mindfulness, and managing stress. Perhaps the most important strategy is managing stress, as stress has a profound impact on gut physiology and function.

Focusing on real, nutrient dense foods such as quality protein, vegetables, fruits, and non-inflammatory fats will help to balance the microbiome.

Medications

Some severe cases of SIBO may require the use of pharmaceuticals, including antibiotics, to reduce bacteria in the small intestine. Rifaximin and neomycin are fairly safe and well-tolerated antibiotics that have been shown to be about 85 percent effective in treating SIBO, depending on what kind of SIBO it is. As mentioned above, prokinetic medications can also help. Common prescriptions, including low-dose naltrexone (LDN) and erythromycin, are often successful in activating the migrating motor complex.

An Important Reminder

As with any health intervention, individualized treatment is far superior to a one-size-fits-all approach. I suggest working with a skilled functional or integrative medicine doctor to come up with a personalized plan based on your unique physiology to resolve gastrointestinal complaints and SIBO.

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

Dr. Ashley Turner is a traditionally-trained naturopath and board-certified doctor of holistic health for Restorative Wellness Center. An expert in functional medicine, Turner is the author of the gut-healing guide "Restorative Kitchen and Restorative Traditions," a cookbook comprised of non-inflammatory holiday recipes.

UNSETTLED SCIENCE

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a February 2020 statement in the prestigious Lancet journal panned the man-made virus conjecture as a wild conspiracy theory. Thereafter, the idea was routinely met with criticism, social media censorship, and worse.

Former CDC Director Robert Redfield told Vanity Fair that he got death threats from fellow scientists after telling CNN he believed COVID-19 had “escaped” from the Wuhan Institute of Virology.

“I was threatened and ostracized because I proposed another hypothesis,” Redfield said. “I expected it from politicians. I didn’t expect it from science.”

But today, the same health experts that once shunned the idea now admit that the lab leak theory is at least a strong possibility.

It’s important to understand the scientific details behind COVID-19, because solid information can help us react better to it. As we’ve all recently experienced, a pandemic doesn’t just bring a new virus, but a whole new lifestyle. The imposed measures hurt or destroyed small businesses, closed schools, and kept our social circles painfully small for more than a year in an effort to contain, or at least slow, the spread of a potentially deadly disease. Officials sold these prolonged inconveniences with an appeal to reason: “Trust the science.”

But did the science end up supporting these sacrifices? Did mask mandates and lockdowns actually save lives as health experts claimed? After a year of real-world experience, and a wealth of studies charting the course, can we come to a clearer understanding of what works and what doesn’t in a pandemic?

Dr. Colleen Huber tackles the question in her new book, “The Defeat of COVID.” Her mission is to educate people on how



Low levels of vitamins C, D, and the mineral zinc are linked to worse COVID outcomes. YBANKO/SHUTTERSTOCK

Significant and plentiful research is being ignored in the battle against COVID.



STUDIO ROMANTIC/SHUTTERSTOCK

our bodies function, methods we’ve used in the past to address infection, and the scientific evidence related to COVID-19 so we can better understand the crisis we face.

“There is so much misunderstanding about so many things related to COVID. The less we know about the human immune system, the activity of viruses in general, the natural interventions that have worked so well for so many of our ancestors for countless generations, then the more that a scary virus story sends people into the deep end of fear,” Huber said. “Fear alone is quite crippling. I find that it makes people agree to things that they would not otherwise agree to.”

Huber’s conclusions consistently oppose much of what is reported in mainstream media. But she cites more than 500 medical studies to make her case.

“For each of the studies that I’ve cited there are quite a few more, especially for the therapeutics. There’s a massive amount more that I could have cited,” she said. “Because this is not the conventional viewpoint, I really wanted to go heavy on the research.”

Her aim is to present the best understanding from quality evidence: studies that involve humans, mostly COVID-19 patients and control groups, and seldom animals.

The distinction is important because, in the realm of science, some research is deemed stronger than others. For example, support for rules such as social distancing came primarily from observational studies and mathematical models that suggested that the measure could slow the spread of disease. However, Huber says that no evidence ever supported the value of social distancing in a preventive way.

Previous evidence also showed that it didn’t work well enough to go through the hassle. The World Health Organization dismissed the idea of social distancing as a public health measure in 2006 as “ineffective and impractical.” Yet health experts decided to revisit the idea for COVID. People were instructed to stay six feet away from each other in 2020. Then in 2021, the new prescribed distance was three feet apart.

Some indoor public spaces still encourage the practice with floor markers as a reminder of the prescribed distance between people. But it may be more theater than science. In a Wall Street Journal article, former U.S. Food and Drug Administration (FDA) Commissioner, Dr. Scott Gottlieb said there was no “scientific basis” for the six-foot guideline and no “randomized controlled trials that show value of this practice.”

The reasoning behind the official demand to space everyone six feet apart under CO-



WESTEND61/GETTY

Officials sold the prolonged inconveniences of their pandemic response with an appeal to reason: ‘Trust the science.’

VID hinged on the concept that people were spreading the virus unknowingly. However, it remains unclear how much damage these asymptomatic spreaders really caused. In a WHO news brief from June 2020, infectious disease epidemiologist Dr. Maria Van Kerkhove stated that the spread of the virus by asymptomatic carriers “appears to be rare.”

A few days later on a Facebook Live video, Van Kerkhove clarified that there were “misunderstandings” attached to her previous statement. She explained that asymptomatic people can in fact spread the virus, though the degree to which they can is unknown.

Huber found no evidence that demonstrated any transmission from an asymptomatic person. The journal Nature published a study of the Wuhan population, involving nearly 10 million people. They found no positive tests among 1174 close contacts of asymptomatic cases.

Masks Save Lives?

Perhaps no aspect of COVID is more controversial than masks, and a lot of this confusion stems from very mixed messaging from the people promoting the practice. First, masks were said not to protect people from viral transmission, then, a month later

they were considered essential daily wear for everyone. Earlier this year, two and three masks were recommended for even more protection.

The message on masks is still all over the place. A few months ago, officials stated that even after receiving a COVID vaccine, masks would still need to be worn until at least 2022 and possibly beyond. But recently, fully vaccinated individuals were permitted to go maskless indoors. However, many who have already received their jabs still choose to keep their face covered in public.

But the perceived safety features of mask wearing haven’t stood up to real-world experience. In March, Texas and Mississippi lifted their state requirements on mask orders, despite warnings that the move would lead to a surge of new coronavirus cases and certain doom. Instead, death counts plummeted.

Huber has researched the mask issue extensively. The conclusion of her research team after publishing four peer-reviewed papers found that the masks “made COVID-19 worse in every way,” due to oxygen deprivation, bacterial pneumonia, and more. Huber points to demographic data showing that mask use also correlated with higher rates of COVID-19, as well as the physics and chemistry of why.

“Masks have quite a hazardous profile,” she said.

What Works?

So what did science show support for? There is evidence that severe and fatal COVID-19 cases demonstrate a close relationship to deficiencies in nutrients known for supporting immune function: specifically vitamins C and D, and the mineral zinc. Low levels



Many doctors and researchers have struggled to understand why important research findings are being ignored. BILLIONPHOTOS/SHUTTERSTOCK

of these nutrients were consistently found with the sickest people. It’s also why many doctors prescribe these nutrients in their COVID treatment protocol.

Some of the best evidence in this regard is for vitamin D. A meta-analysis of several studies published in an October 2020 edition of the journal *Nutrients* correlates vitamin D levels and COVID-19 cases, as well as the mechanisms that may drive the protective process.

One study from the Mayo Clinic found that among patients admitted with confirmed COVID-19 “in-hospital mortality and the need for invasive mechanical ventilation” was more common among those with vitamin D levels below the recommended reference range.

For people already familiar with this nutrient, vitamin D’s protection against COVID is expected. Past research has shown significantly improved outcomes of respiratory infections, shorter hospital stays, a lower cost of care, and lower mortality with higher serum levels of vitamin D. Low D levels have previously been associated with increases in inflammatory cytokines, viral upper respiratory tract infections, and blood clots—some of COVID-19’s key characteristics.

Points out that the vast majority of people who died of COVID-19 were either elderly or obese, which just happen to be two populations for which low vitamin D is particularly an issue. Seniors tend to lack the vitamin because they often keep indoors, and their bodies don’t manufacture the vitamin as well as younger people. Obesity adds another obstacle.

“Vitamin D is a fat-soluble vitamin. It is stored in the fat in the body,” Huber said. “All of us have fat. However, the more we get toward obesity, the more that same amount of vitamin D in the body is diluted into peripheral fat, so it’s not really being used by the immune system so much. The reason I mention it is because according to the CDC, 78 percent [of COVID-19 fatalities] were obese.”

Drugs for Treatment

Another big controversy with COVID-19 is whether there are safe and effective drugs to treat it. Health experts and regulators have only endorsed the three or four experimental vaccines authorized for emergency use, and anything else is strongly discouraged. But many doctors say they have successfully treated COVID with remedies that haven’t been approved by regulators. The most controversial of these is chloroquine or hydroxychloroquine (HCQ).

But this controversy is a fairly recent development. In a 2005 article published in the *Virology Journal* from the National Institutes of Health, researchers concluded that chloroquine was a “potent inhibitor of SARS coronavirus infection and spread.” “Chloroquine has strong antiviral effects on SARS-CoV infection of primate cells. These inhibitory effects are observed when the cells are treated with the drug either before or after exposure to the virus, suggesting both prophylactic and therapeutic advantage,” researchers stated.

For COVID-19, however, HCQ was



One of the most scientifically contested pandemic policies has been mask requirements. OLESSEVETUKHA/SHUTTERSTOCK

branded dangerous. The Lancet journal reported that HCQ didn’t help in COVID treatment, but instead worsened outcomes. Regulators quickly condemned the drug, treatment studies examining HCQ were stopped, and hospitals fired doctors for prescribing it. However, the Lancet report failed peer review and the article was quietly retracted. Still, health officials still consider HCQ a dangerous and ill-advised COVID treatment.

But the official response to HCQ doesn’t match the science. In addition to many doctors around the world reporting success in the clinic, research has shown more promise than peril. As of the writing of Huber’s book, 53 studies have shown positive results with HCQ for COVID. In addition to the Lancet article, Huber only found 13 global studies showing neutral or negative results on HCQ and 10 of them were of patents in very late stages of the disease where no antiviral drug is expected to have much effect. The author of two of the negative articles drew his data from an obscure Brazilian study that gave enormous doses of HCQ to extremely ill patients.

Another lesser-known drug that doctors are using to successfully treat COVID is ivermectin, which in addition to HCQ, is on the World Health Organization’s List of Essential Medicines.

Huber points to a meta-analysis of 49 trials of ivermectin treating COVID in humans, all have shown positive results.

Despite safety evidence going back three decades, the FDA discourages ivermectin’s use for COVID. However, the only concern the agency mentions is the risk of overdose. Ivermectin is only available for humans by prescription, but is sold over the counter for veterinary use. The fear is that a sick and desperate individual might bite off too much of a large pill meant for a horse.

“The FDA has received multiple reports of patients who have required medical support and been hospitalized after self-medicating with ivermectin intended for horses,” the agency said in a statement. “The FDA has not reviewed data to support use of ivermectin in COVID-19 patients to treat or to prevent COVID-19; however, some initial research is underway. Taking a drug for an unapproved use can be very dangerous. This is true of ivermectin, too.”

Doctors prescribe ivermectin for COVID all over the world, and a big draw is the price tag. Huber says that in Africa, a full course of ivermectin treatment for COVID costs less than a U.S. dollar. For both safety and effectiveness, she ranks it as the top COVID treatment.

“I think ivermectin shows the most promise of all the therapeutics that I mention. For preventative purposes, people should make sure they have enough vitamin D on board. But in a curative way, nothing beats ivermectin. The spike protein which is the key SARS-CoV2 entry into the human cell has three parts to it. It’s a trimeric protein. I think we would be fortunate if ivermectin blocked only one of those three parts, but it has been found to block all three,” she said.

“Ivermectin was almost made for COVID because it blocks the three parts of the spike protein, and it blocks viral replication and it won’t let it into the human cell. Plus, it has a wonderful safety profile. 3.7 billion doses have been given since 1975, and all ages children were fine. No pregnancies were lost.”

Miscarriage: What I Wish I Had Known

Miscarriage rates are skyrocketing but MTHFR gene variants still overlooked

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and continuing to consume prenatal vitamins. After the fourth miscarriage, I elicited help from the top fertility specialist in the state. He couldn’t help me either. After running a gamut of tests, he concluded there was “nothing wrong” with me. My biological age was 10 years younger than my chronological age, so he advised me to “stop stressing about it” and sent me on my way. Shortly after that visit, I became pregnant again and suffered from a fifth miscarriage.

Fortunately, last year I gave birth to a healthy nine-pound baby girl. However, once again, I almost lost her during the pregnancy. We made it through the first trimester with no obvious health problems, except severe nausea which was dismissed as “normal.” Then, during month four, I began to bleed. Fortunately, the bleeding stopped quickly, but the medical doctors and I were baffled. There were no obvious warning signs that something was wrong; the pregnancy was textbook in

Looking back, the severe nausea I experienced during every pregnancy was a symptom of poor methylation.

terms of the health of my baby and myself. So, what happened?

The mystery of the bleed and my five miscarriages was solved a couple of months after my daughter was born when I elected to test myself for MTHFR gene variants. The MTHFR gene produces the MTHFR enzyme, which is short for methylenetetrahydrofolate reductase. This enzyme turns folate (vitamin B9) into methylfolate, which is the form of folate that is usable by your body. Methylfolate donates a methyl group to other compounds in your body. That process is called methylation. Methylation is

required for proper functioning of nearly all processes in your body, such as:

- Regulating gene expression
- Repairing damaged cells
- Creating neurotransmitters that influence mood, sleep, behavior, cognition, and memory
- Building immune cells
- Antioxidant production
- Processing hormones, such as estrogen
- Producing energy
- Detoxifying the body

In addition, methylation is critical during pregnancy because it is required for making new RNA, DNA, fats, and proteins. In other words, it’s required for the creation of new cells in the growing baby as well as the placenta. Consequently, if the methylation pathway is downregulated, it can lead to miscarriage.

Test results revealed that I have a genetic variant of the MTHFR gene, which means I have a decreased ability to clear toxins from my body. It also partially explains why I suffered from five miscarriages (all during the first trimester) and almost lost my baby girl in month four of pregnancy.

A decreased ability to methylate is an of-



KRISTINA IGUMNOVA/SHUTTERSTOCK

As miscarriage rates climb, more couples experience difficulty conceiving a child.

ten-overlooked explanation for miscarriage. It’s not commonly discussed among medical doctors. In fact, I sought help from many doctors during my struggle with multiple miscarriages and nobody mentioned it—not even the fertility specialist. Yet, it’s estimated that up to 40 percent of the population has a variant in the MTHFR gene.

When you have a variant in the MTHFR gene, the enzyme made from that gene doesn’t work as efficiently. The result is a 30 to 70 percent reduction in enzyme activity. In other words, you produce significantly less methylfolate than someone without the genetic variant. The degree of impairment depends on the specific gene variant, as well as individual factors. For example, impairment of the methylation process can also occur due to deficiencies in certain micronutrients, stress level, and overall toxic burden from

chemicals in the food and water. The bottom line is, the reduced ability to methylate has a profound impact on your health, including increased risk of miscarriage.

To make matters worse, when a woman desires to become pregnant, she is usually instructed by a medical doctor to consume high doses of folic acid in a supplemental form in order to prevent neural tube defects. The problem with that advice is two-fold:

1. Folic acid is the synthetic form of vitamin B9. The body doesn’t metabolize synthetic folic acid in the same manner as naturally produced folate. For instance, folic acid sits on the folate receptor and isn’t metabolized properly into methylfolate. Furthermore, synthetic folic acid can outcompete natural sources of folate, such as folate derived from green leafy vegetables and liver. Consequently, synthetic folic acid can block methylation. In other words, the same supplements that doctors are recommending to prevent neural tube defects could be contributing to miscarriage in women who have a variant of the MTHFR gene.
2. Furthermore, neural tube defects aren’t the result of folic acid deficiency. They are, in fact, the result of a methylation deficiency. Therefore, one can argue that folic acid supplementation may be harmful to some women and unborn babies. Looking back, the severe nausea I experienced during every pregnancy was a



KLAUS VEDFELT/GETTY

The reduced ability to methylate has a profound impact on your health, including increased risk of miscarriage.

symptom of poor methylation. If I knew then what I know now about the MTHFR gene variants, I would have incorporated additional dietary and lifestyle changes to reduce my chance of miscarriage. My overall approach was to lower the toxic burden on my body by consuming clean food and clean water, as well as using nontoxic personal care products and cleaning supplies. However, I would have also included the following steps in an attempt to compensate for the reduced ability to methylate:

- Prior to trying to conceive, I would have

utilized a functional test to determine possible nutrient deficiencies. Based on the results, I would have modified my diet and, if needed, added specific supplements to replenish the missing nutrients.

- I would have increased my consumption of foods naturally rich in folate, including organic leafy green vegetables such as spinach, kale, mustard greens, collard greens, turnip greens, and romaine lettuce, as well as small amounts of liver (from regeneratively raised animals).
- I would have chosen whole foods instead of processed foods with every meal. Many processed foods contain added synthetic folic acid due to government requirements. Therefore, I would have replaced all processed foods with whole foods.
- I would have checked the nutrition label of my prenatal vitamin. If folic acid was listed, I wouldn’t have consumed that particular supplement. Instead, I would have consumed a prenatal vitamin that contains 5-methyl-THF (5-methyl-tetrahydrofolate), which is a form the body can use.

Dr. Sina McCullough is the creator of “Go Wild: How I Reverse Chronic & Autoimmune Disease,” and author of “Hands Off My Food” and “Beyond Labels.” She holds a doctorate in nutrition from the University of California-Davis. She is a master herbalist, Gluten Free Society certified practitioner, and homeschool mom of three.

How We, as Women, Give Away Our Power

We can learn to take back authorship of our own story

NANCY COLIER

Gwen was a working comedian when I first met her. She wasn't famous yet, but it seemed that she was on her way there. I had never met an artist who pushed herself so hard. No matter how tired she was, she showed up at every audition and never said no to any possible opportunity. For her, that just might be the one that would launch her. When Gwen wasn't auditioning, networking, or exercising (to keep herself camera-ready), she was writing material, making videos, and submitting them. And when she wasn't doing that, she was waitressing and bartending to pay rent on her tiny studio apartment in a bad neighborhood.

Gwen was tough on herself, too. If she ever wanted to take a day off or just skip an exercise class, she would attack herself: "How do you expect to get there if you're not willing to do everything it takes? You'll get a day off when you make it."

In her mind, unless she chased every carrot, no matter what it did to her in the process, she would never make it to the top. And worse, she would blame herself for not being willing to do what it took to get there. But living this way was difficult and painful; Gwen wasn't only utterly exhausted and overwhelmed with shoulds, but also suffering at the hands of her own internal critic.

After a decade of pushing, her career had stayed at basically the same level. And yet, her level of exhaustion and suffering had gotten far worse. Ten years of never saying no had left her weary and bordering on bitter. And deeply disappointed. The story she had always told herself, that her time would come, was wearing thin and feeling less believable.



Bartending by night to pursue her dreams by day was one of the tradeoffs Gwen (not pictured above) made.

Most importantly, she was growing tired of the life she was actually living—her real one, not the imaginary one that would launch when she was famous.

With a lot of hard work and tears, Gwen was finally able to admit to herself that she didn't want to keep living such a grueling life, under the whip of an internal slave-driver, or to keep living it on the fumes of a dream. She wanted a life that she wanted to be living—now. Her present experience had finally become something that mattered; she had become someone who mattered. At last, Gwen chose to hang up her comedian's hat and enter graduate school.

For the first time in Gwen's life, she wasn't striving every minute to try to get somewhere else, to become someone else who was more important. She liked herself and felt at peace for the first time. She even discovered that she positively loved putting around doing very little, which, in her previous incarnation, was something she had never known or allowed herself to (not) do. Mostly, she was deeply proud of herself for having had the courage to step off the treadmill of striving for success.

And then she met Brendon. Her new boyfriend was a jet-setter, a successful entrepreneur on the fast track to big things. Filled with ambition and talent, he also never missed an opportunity to attend an event, network, or just go the extra mile—whatever was needed to score the deal. He was always chasing after something and usually getting it. As Gwen described it, Brendon was the male version of her old self, but a winning one.

Shortly into their relationship, Gwen started talking about needing to get back into comedy. She began making casual references to herself as boring. Her coursework, which had been fascinating just weeks before, was now dull and mediocre. For the first time since she had left comedy, she was feeling disappointed in herself. She felt like a failure; inadequate, like a failure. The life that had been enjoyable, hard-earned, and courageous, and most importantly, one that finally belonged to her, was now empty and unexciting—far too average for Brendon. And indeed, she imagined that she herself was far too average for Brendon.

Just two months into her new relationship, the self-worth and pride she had earned in the very difficult process of changing careers, letting go of a dream, and building a new identity, had largely, for the most part, slipped away. Gwen had lost the connection with what her life meant through her eyes and was now seeing it through the lens of what it would look like to her boyfriend. How she felt about herself was now defined by how she imagined Brendon would perceive her. The respect Gwen had built for her own journey was gone, reduced to a few judgments by which



DARIUS BASHAR/UNSPLASH

As women, this is sometimes what we do to ourselves. We ignore, dismiss, and throw away our own experiences.

her new boyfriend would label it.

As women, this is sometimes what we do—to ourselves. We ignore, dismiss, and throw away our own experiences. We ignore what our journeys mean to us, what we know to be true about ourselves, and replace them with other people's definitions and perceptions of our lives. We do this habitually, without even knowing we're doing it.

If we want to break this self-abandoning habit, we have to first become aware of it. We have to become conscious of our willingness and compulsion to sacrifice our own experience in favor of others people's versions of it. Once we can see ourselves giving away our truth, see the suffering it causes us, and see the absurdity of it, then we can stop doing it.

But first, we have to get good and fed up with giving ourselves away.

With awareness and a lot of practice, we can learn to stay connected to our own experience, to stand in our own truth, to define our own journey, even in the face of other people's opinions, and those who see us differently than who we know ourselves to be. For now, start paying attention to how and when you give away your own story, and when you let others write it for you. Practice taking back your own authority, whatever that means to you.

Nancy Colier is a psychotherapist, interfaith minister, author, public speaker, workshop leader, and author of several books on mindfulness and personal growth. She is available for individual psychotherapy, mindfulness training, spiritual counseling, public speaking, and workshops, and also works with clients via Skype around the world. For more information, visit NancyColier.com

Becoming mindful of our self perceptions is critical to honoring who we are, rather than always evaluating ourselves by how others see us.

Believe in Your Child—and Yourself—Before You Believe in Medications

Psychostimulants will work on anyone, and anyone is at risk of developing a dependency

ANTHONY RAO

Many parents that I work with ask the same question: "Should we medicate our boys?" Here are the basics you'll want to consider:

There's no way to predict what being on medications will be like for any particular child. There's also no way to know ahead of time the side effects beyond those that most of us already worry about: sleep problems, attenuated height, decreased appetite, weight loss, possibly mood swings.

Some parents (and older kids) have reported to me a dampening of personality. I've also encountered rare cases in which there was a cardiac concern. I don't say this to frighten or discourage parents, but to make certain we all appreciate that these are significant medications. Always check with a pediatrician, and if possible a psychopharmacologist. Most kids do tolerate side effects well, or the side effects are minimal, but go into this with your eyes wide open.

Keep in mind that psychostimulants are performance-enhancing drugs. That

People should always be working to improve themselves, identifying strengths and weaknesses, and nourishing their development at any age.

If your child is struggling at school, it is nearly always better to explore non-pharmaceutical options, like behavioral training, before resorting to drugs.



IRINA ALI/SHUTTERSTOCK



DAVID SMART/SHUTTERSTOCK

Medications can create dependency.

means, they work on everyone. Kids will likely focus better and be less impulsive on these meds. We would, too, so don't think the diagnosis of attention-deficit/hyperactivity disorder (ADHD) is confirmed because you see a change. Also keep aware of unanticipated problems that might come up down the road. I've seen many young men who started to use medication as a psychological "crutch." That's their word, not mine. They said they came to believe they "needed" meds to do homework, sit in class, to get themselves into college, get through college. Many have had a hard time dealing with the demands of their first job and rely on medications so much that they panic at the idea they won't be able to face work without them. Dependence can happen on any mind-altering substance.

This is why I recommend parents never use meds alone. People should always be working to improve themselves, identifying strengths and weaknesses, and nourishing their development—at any age. Believe in your child and believe in yourself first before you believe in medications.

In fact, the treatments of choice (what is now recommended at the start of an ADHD diagnosis) are non-medical. These are behavioral training/tutoring/organizational types of interventions. All of those work better than meds for the long haul, according to research. Maybe that's because, unlike meds, these interventions develop new skills. They change the brain for the better via learning and new ways of adapting. Pills tend to suppress the unwanted symptoms, in my experience, mainly impulsivity and motor movement. Focus improves, too, but once off meds, kids fall back to where they started from.

If your child takes psychostimulants, you might very well see a sudden boost in their grades. Sounds great, but beware. Evidence shows that a boost in grades may not be about better learning, but rather about kids performing better on tests that don't translate to long-term gains. Also, the way in

which a teacher's grade can be biased, based on behavior rather than true achievement.

Finally, if you try meds for ADHD, always have an exit strategy in place. Try to see this as a time-limited intervention. Try to have time off meds as well (e.g., not on weekends, not on holidays, or not during summers).

I've seen many young men who started to use medication as a psychological 'crutch.' That's their word, not mine.

This is my general (behavioral psychologist's) take on the role of meds. I've seen some kids do better and some worse on meds, and it wasn't entirely predictable ahead of time which would be which.

I do have many other caveats I ask parents to consider. Ask if there's anxiety at play or some other underlying emotional issue that masks as ADHD. Is there an educational problem? Bad school fit? Learning disability? Is there family conflict, parenting stress, marital stress, or is there a dietary/sleep issue that we now know are correlated to ADHD symptoms? And always make certain your kids are getting enough vigorous daily exercise and movement of all sorts—outdoors preferably. These have been shown to substantially lower ADHD symptoms.

Anthony Rao is a nationally-known child psychologist. For more than 20 years, he was a psychologist at Boston's Children's Hospital and an instructor at Harvard Medical School. He is the co-author of "The Power of Agency: The 7 Principles to Conquer Obstacles, Make Effective Decisions & Create a Life on Your Own Terms." This article was first published on AnthonyRao.com

Simple Ways to Bring More Calm into Your Home

JOSHUA BECKER

Work is hectic. Schedules are hectic. The kids are hectic—almost all of life can be hectic. Your home shouldn't be.

Your home should be the antidote to stress. It ought to be a place of rest, respite, and relaxation. So you can spend the rest of your life inside it? No, of course not.

Home is a place of rest, peace, and acceptance that restores us so we can live our best lives out in the world making the biggest difference that we possibly can. That is why having a calm and rejuvenating home is so important.

With that, here are 10 simple ways to bring more calm into your home.

1. Remove 33 percent of your clothing. If you want to change your life immediately, clean out a closet. After decluttering clothes, not only will your mornings be less stressful, you'll find more calm by not having to peer into a cluttered closet first thing when you wake up.

2. Be intentional with the purpose of each room in your home. Our homes serve an important role in our lives and families, and that should mean that individual rooms also serve specific purposes. Take a moment to identify what role each room in your home should perform. And then remove everything from each space that doesn't serve that purpose.

3. Reset your living room every evening. Before you go to bed each night, find 5 to 10 minutes to reset the most lived-in areas of your home. Otherwise, you constantly bring yesterday's mess into today. Of course, this 10-minute reset is easier when you own less stuff, so make that a priority as well.

4. Own fewer toys. Toys are a constant point of stress for

young parents. We buy them because we think they will improve playtime with our children, but many times they just add frustration. You can own less. In fact, there are developmental benefits when you do.

5. Clear your countertops. Don't fall into the convenience fallacy by leaving items on your counter just because you think it is convenient to do so. Every item left out in our home is a form of visual clutter and noise. You don't need to remove every item from your kitchen countertop, you'll just love it if you do.

6. Identify homes for everything you own. Toys live in the bin. Clothes live in the closet or hamper. Bathroom toiletries on the shelf, in the drawer, or the medicine chest. Coats and shoes go in the closet. The remote control lives near the tv stand. When everything has a home, cleaning up becomes easier and your home becomes calmer.

7. Tackle one-minute projects immediately. As I learned from Gretchen Rubin, "If a task can be completed in less than one minute, do it right away." Embrace that concept around your home to create a more calming atmosphere everywhere you go.

8. Choose meaningful decorations. It's easy to go overboard with decorations. Decorations make a house feel comfortable, calm, and relaxing. But too many can make it feel cluttered and busy. To add calm into your home, choose meaningful decorations that tell your story and communicate your values.

9. Keep your garage tidy. Your garage is the first thing you see every time you return home. If it's a cluttered mess, filled to the brim with boxes

There are few things more stress-producing than an unfinished project.

or tools, "a cluttered mess" will always be your first impression of your home when you arrive. Change your mood and attitude by keeping it as tidy and organized as possible.

10. Complete (or discard) unfinished projects. There are few things more stress-producing than an unfinished project. Make a commitment today to either finish your projects or discard them entirely. I admit this final point may not be simple. Although, the more often you declare project bankruptcy and just discard those unfinished projects, the easier it becomes.

If you are just starting on the road to owning less, some of these steps may sound difficult to complete. But you'll be surprised how simple many of them become when you first take the step to minimize the possessions you don't need.

Joshua Becker is an author, public speaker, and the founder and editor of [Becoming Minimalist](http://BecomingMinimalist.com), where he inspires others to live more by owning less. Visit BecomingMinimalist.com



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Make sure your home is a place that can truly restore you to face the stresses of the world.

WISE HABITS

The High Bar of Expectations Can Crush Our Creativity

LEO BABAUTA

I have clients who really set high standards for themselves: They want to write amazing blog posts, create inspiring music and profound works of art, or start a thriving business that reaches hundreds of thousands of people.

These are beautiful aspirations, and I love what we are aiming for. It's amazing! And yet, if you are setting out to create a masterpiece, what does that intent do to you when you're facing a blank page or canvas? It can bring immense fear of underperforming, of falling short of our hopes and dreams.

These expectations can often crush the creativity we start out with. So should we have zero goals or ex-

pectations, no standards, and no hopes and dreams?

I say let yourself show up and create, from a place of aliveness, a place of play, adventure, creativity, and joy.

We don't need to burden ourselves with high expectations. See what flows from your heart, imagination, and joyful being.

At some point, we'll need to bring in our craft, and refine. Edit, toss out, and discern. But not when we're creating—let that be free, abundant, and open!

Leo Babauta is the author of six books; the writer of [Zen Habits](http://ZenHabits.net), a blog with more than 2 million subscribers; and the creator of several online programs to help you master your habits. Visit ZenHabits.net



PUBLIC DOMAIN

We are better able to create a masterpiece if we don't expect immediate perfection.



Writing can help us to look inside and see our traits, feelings, and beliefs.

How Writing Can Improve Mental Health

Dedicated time for self reflection deepens self awareness and offers a cascade of benefits

CHRISTINA THATCHER

Ernest Hemingway famously said that writers should “write hard and clear about what hurts.” Although Hemingway may not have known it at the time, research has now shown that writing about “what hurts” can help improve our mental health.

There are more than 200 studies that show the positive effect of writing on mental health. But while the psychological benefits are consistent for many people, researchers don’t completely agree on why or how writing helps.

Becoming more self aware can increase our confidence and encourage us to be more accepting of others.

One theory suggests that bottling up emotions can lead to psychological distress. It stands to reason, then, that writing might increase mental health because it offers a safe, confidential and free way to disclose emotions that were previously bottled up.

However, recent studies have begun to show how an increase in self-awareness, rather than simply disclosing emotions, could be the key to these improvements in mental health.

In essence, self-awareness is being able to turn your attention inward towards the self.

By turning our attention inward, we can become more aware of our traits, behaviour, feelings, beliefs, values, and motivations.

This ability to look inside has long been considered a key to mental well-being in traditional cultures around the world.

Research suggests that becoming more self-aware can be beneficial in a variety of ways. It can increase our confidence and encourage us to be more accepting of others. It can lead to higher job satisfaction and push us to become more effective leaders. It can also help us to exercise more self-control and make better decisions aligned with our long-term goals.

Self-awareness is a spectrum and, with practice, we can all improve. Writing might be particularly helpful in increasing self-awareness because it can be practised daily. Rereading our writing can also give us a deeper insight into our thoughts, feelings, behaviour, and beliefs.

Here are three types of writing which can improve your self-awareness and, in turn, your mental health:

Expressive Writing

Expressive writing is often used in therapeutic settings where people are asked to write about their thoughts and feelings related to a stressful life event. This type of writing aims to help emotionally process something difficult.

Research shows that expressive writing can enhance self-awareness, ultimately decreasing depressive symptoms, anxious thoughts, and perceived stress.

Reflective Writing

Reflective writing is regularly used in professional settings, often as a way to help

nurses, doctors, teachers, psychologists, and social workers become more effective at their jobs. Reflective writing aims to give people a way to assess their beliefs and actions explicitly for learning and development.

Writing reflectively requires a person to ask themselves questions and continuously be open, curious, and analytical. It can increase self-awareness by helping people learn from their experiences and interactions. This can improve professional and personal relationships as well as work performance, which are key indicators of good mental health.

Creative Writing

Poems, short stories, novellas, and novels are all considered forms of creative writing. Usually, creative writing employs the imagination as well as, or instead of, memory, and uses literary devices like imagery and metaphor to convey meaning.

Writing creatively offers a unique way to explore thoughts, feelings, ideas, and beliefs. For instance, you could write a science fiction novel that represents your concerns about the environment or a children’s story that speaks to your beliefs about friendship. You could even write a poem from the perspective of an owl as a way to represent your insomnia.

Writing creatively about challenging experiences, like grief, can also offer a way to communicate to others something which you feel is too complicated or difficult to say directly.

Creative writing encourages people to

choose their words, metaphors and images in a way that really captures what they’re trying to convey. This creative decision-making can lead to increased self-awareness and self-esteem as well as improved mental health.



A blank page can open us to ourselves.

Writing for Self-Awareness

Self-awareness is a key component for good mental health and writing is a great place to start.

Why not take some time to write down your feelings about a particularly stressful event that has happened during the pandemic? Or reflect on a difficult work situation from the last year and consider what you have learned from it?

If you prefer to do something more creative, then try responding to this prompt by writing a poem or story:

Think about the ways your home reveals the moment we are currently in. Is your pantry packed with flour? Do you have new objects or pets in your home to stave off loneliness or boredom? What you can see from your window that reveals something about this historic moment?

Each of these writing prompts will give you a chance to reflect on this past year, ask yourself important questions, and make creative choices. Spending just 15 minutes doing this may give you an opportunity to become more self-aware.

Christina Thatcher is a creative writing lecturer at Cardiff Metropolitan University in the UK. This article was first published on The Conversation.

How the COVID Response Is Priming the Next Pandemic

A dramatic rise in antimicrobial overuse is fueling the rise of dangerous new pathogens

JOSEPH MERCOLA

“Antibiotic resistance is one of the biggest public health challenges of our time,” declares the Centers for Disease Control and Prevention (CDC). And while antibiotic resistance and antimicrobial resistance (AMR) took a backseat to the COVID-19 pandemic, the problem hasn’t gone away.

Antibiotic resistance (AR) refers to bacteria resistant to antibiotics. Antimicrobial resistance is a broader term used to describe resistance to drugs among a variety of microbes, including bacteria, parasites, viruses, and fungi.

The tragedy of this problem is that our body depends on many of these microbes for proper function. Current practices are harming these helpful microbes and creating more dangerous ones. The WHO (World Health Organization) says AMR is one of the top 10 global public health threats to humanity, but it rarely makes front-page news, especially now that COVID has entered the arena.

The COVID-19 pandemic—and its unprecedented promotion of hand sanitizer, antimicrobials (including antibiotics), and disinfectants—has even made AMR worse.

“There has been a rapid increase in multi-drug-resistant organisms,” Taiwanese researchers warned in an article published in the International Journal of Antimicrobial Agents earlier this year.

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The use of antimicrobial agents including antibiotics rose during COVID-19. Efforts to disinfect surfaces and treat patients have made many bacteria more dangerous.

THE EPOCH TIMES

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What You Need to Know About Inflammation

This root of many illnesses can be cooled with the help of diet and lifestyle changes

LYNN JAFFEE

What do heart disease, stroke, arthritis, colitis, fibromyalgia, lupus, MS, diabetes, chronic fatigue, and Alzheimer’s have in common? Well, yes, they’re all diseases, but the A-plus answer is that they’re all caused by or associated with inflammation.

Scientists are finding that the common cause in a long list of illnesses is an inflammatory process that’s run out of control. Inflam-

mation is controlled by a group of hormones called prostaglandins. Some prostaglandins promote inflammation, others reduce it. You can affect these hormones through a number of factors, including emotions, lifestyle, and especially diet.

In Chinese medicine, inflammation tends to be associated with heat. This heat can be very apparent when you have an infection of red and warm arthritic joints. The heat, however, may not be so obvious and cause subtler symptoms

such as a mild sensation of feeling warm, chronic thirst for cool drinks, irritability, lots of sweating, restlessness, and constipation.

This inflammatory heat can come from a variety of sources. One is through improper diet, which according to Chinese food therapy includes too many spicy, greasy, or rich foods, as well as sweets. Heat also occurs from stagnation in Chinese medicine.

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The foods you eat can fire up inflammation or cool it down.

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Chair stretching can include reaching for the sky with both arms, breathing, and twisting by turning your head to the right and torso to left.

The Benefits of Seated Exercise

Sitting can contribute to well-being with some low-impact, high-reward exercises

NANCY BERKOFF

We know that staying sedentary can be a major risk factor for many diseases, but that doesn't mean sitting is always a bad thing. Seated exercise is an effective form of exercise, whether for those that may have difficulty with standing exercises, or just those stuck at a desk looking for a quick way to burn a few extra calories.

Seated exercise can be beneficial for cardiovascular and respiratory health, help to strengthen muscles and improve balance, and alleviate joint pain and arthritis. Seated exercise can be done just about anywhere: in the comfort of your own home, in a class format, in the office, on a park beach, or anywhere there is a place to sit.

Long periods of sitting without movement are associated with obesity, cardiovascular disease, and diabetes, according to research from the University of Colorado and elsewhere. Even those with no difficulties standing may find sitting exercises beneficial when there's no time to go for a jog or get to the gym, or for a change of pace. You can burn calories and increase your energy from your own living room. On-the-go people can use chair exercises to fit in a quick workout. In-the-chair exercise can be social—even on Zoom—and multi-generational.

According to the U.S. Department of Health and Human Services, most adults should get 150–300 minutes of moderate cardio activity each week and strength and flexibility exercises two to three times a week. Well-designed seated exercise routines can be complete workouts.

Chair-based exercises have many of the same benefits as other forms of physical activity while being low-impact and gentle on the joints. Aerobic seated exercises can include modified jumping jacks, mimicking marching in place with high knees, simulated jump rope, and a modified football drill done by pumping your arms over your head for approximately 30

seconds, or until fatigued, and then tapping both feet simultaneously on the ground as quickly as you can.

Seated strength exercises can include bicep and tricep curls using weights or water bottles, leg lifts, and body weight lifts (don't do these on a chair with wheels) done by holding onto the arms of the chair and slowly lifting your hips off the chair, with bent or straight legs. Chair stretching can include reaching for the sky with both arms, breathing, and twisting by turning your head to the right and torso to left.

There are many resources for structured seated workouts. Do a web search for chair yoga, tai chi, and "take a seated break" videos to find the one that fits you best. Dust off the rocking chair, as actively rocking can burn calories as well.

Seated exercise can improve cardiovascular and respiratory health, strengthen muscles, and improve balance.

Seated exercises are convenient, easy to fit into a busy schedule, and can be done while watching TV or listening to music. You can do them with or without a partner, and they don't depend on the weather or going to the gym. Select your favorite sturdy chair and indulge in aerobic, cardiovascular, joint, and muscle strengthening and let your furniture contribute to your overall health.

Dr. Nancy Berkoff is a registered dietitian, food technologist, and culinary professional. She divides her time between health care and culinary consulting, food writing, and healthy living.

Here's How to Prevent a Leading Cause of Blindness

Macular degeneration causes blindness as blood vessels in the eye fail—but healthy habits can lower the risk

LANGIS MICHAUD

Jacques was a very active retiree. That ended one November morning as his life was suddenly turned upside down. When he woke that day, he couldn't see out of one eye. Panicked, he came to see me right away.

Jacques had been diagnosed with age-related macular degeneration (AMD) a few years earlier. His condition had been stable, but now, it suddenly progressed to the most severe form of the disease: "wet degeneration." This stage is characterized by the sudden development of a network of new blood vessels that ooze into the deep layers of the retina, causing a rapid loss of functional vision in the affected eye.

An urgent referral to ophthalmology is made in cases like these because the window of opportunity for treatment is narrow. Immediate treatment usually results in the best prognosis. Jacques managed to get treatment within a few days.

The ophthalmologist gave him intravitreal injections of medication, but this only improved his vision slightly. Jacques was depressed and his anxiety was increasing. He felt useless and had lost considerable autonomy.

The loss of an eye is a traumatic event, regardless of the patient's age. While the significant negative psychological effects are well documented for older patients, recent publications also report the same adverse consequences in younger populations.

For example, the rate of depression is six times greater in those with significant vision loss than in the general population (25 percent versus 4 percent).

Hope for Patients

So what can we do to help Jacques? We can't promise that his vision will be fully restored. Although injection treatments can be effective, the basic degeneration won't go away. The best option for Jacques is to refer him to a visual impairment rehabilitation center, where he'll receive help from a variety of professionals.

At this center, he'll be seen by specialists trained to treat visual impairment and its repercussions on the lives of people who suffer from it, and on the people around them. Understanding this reality is the first step toward helping patients address their needs.

The next step, after providing psychological support to Jacques, is to optimize his visual condition. Optometrists who specialize in low vision can prescribe optical aids to help Jacques regain some of his visual function, including magnifiers, vision aids, and specialized glasses that can be provided through a government program designed for this purpose.

Jacques is in Canada, so this part of his experience may be different from that of people in other places. Specialists in visual impairment rehabilitation (VIR) trained at the school of optometry of the University of Montréal (the only institution in Canada that offers a master's program in VIR), will help Jacques learn new strategies to carry out his daily activities. Specialized educators can help him use a computer and specific software. When needed, orientation and mobility specialists teach people methods to safely orient themselves and get around, whether on the street or in an unfamiliar environment.



A social worker, aware that the impacts of a visual handicap go far beyond the person experiencing it, may accompany Jacques during his rehabilitation process and communicate with his family. In short, Jacques will hopefully have a good support system and will be able to regain a certain level of autonomy in his life, which, in turn, will have a positive impact on his morale. Support groups can also help him in his efforts, and if, thanks to effective injections, his visual acuity improves, he will be in a win-win situation.

However, Jacques still has other concerns about his disease. He's worried that his children will develop similar conditions, especially one of his sons.

Several Risk Factors

Age-related macular degeneration is aptly named: its prevalence increases with the age of the patients. In the United States, as many as 11 million people have some form of age-related macular degeneration. In Canada, which has approximately one-tenth the population, nearly one million Canadians—300,000 in the province of Québec alone—suffer from AMD. Of these, 10 to 15 percent have the wet form, like Jacques. AMD is the leading cause of blindness in people over the age of 65.

In addition to aging, other risk factors associated with the development of the disease include family history, ethnic origin (white people are more affected), gender (women are more affected), atherosclerotic and vascular diseases, obesity, and sun exposure (phototoxicity of the retinal cells).

Smoking also plays an important role. Consuming 25 cigarettes per day doubles the risk of severe damage. Exposure to secondhand smoke is also harmful. The chemicals absorbed during exposure to smoke increase the absorption of harmful sunlight by the retina by 1,000 times.

For Jacques's son, the risk of developing AMD is clear, but so are his options. He won't be able to change his genes, prevent himself from aging, or change his ethnicity or chromosomes. However, he can control the modifiable factors: he can

quit smoking, control his weight, and stay physically active.

Diet can play a preventive role. Reducing fat intake in the diet and ensuring adequate omega-3 consumption (forms of triglyceride, 800 mg DHA/EPA per day) are important. However, adding vitamins formulated for eye health to the mix is not recommended in Jacques's case. Vitamins are only effective in treating dry AMD in its middle stages, not for preventing it. However, they are one of the few ways Jacques can reduce the risk of having his other eye affected and losing all his functional vision.

It's imperative for both Jacques and his son to follow the doctor's recommendations on managing vascular problems (hypertension, cholesterol, diabetes). When poorly controlled, these conditions significantly increase the risk of developing wet AMD.

Remember, macular degeneration is first and foremost a vascular disease: The blood vessels are no longer able to nourish the retinal cells and no longer get rid of their metabolic waste efficiently. As a result, the cells die. New blood vessels develop, but they're fragile, and when they break, they flood the retina with fluid.

Finally, both father and son will need to protect themselves from the sun's harmful rays, either with a transparent filter (UV400) in their regular prescription glasses or by wearing good quality sunglasses when they're outdoors. Their eye care professionals will be able to advise them about this.

Jacques's spirits are not high, but I have given him some hope that better days lie ahead. He knows he can count on a team of professionals to support him and that he won't be dealing with his condition alone. There's hope. And hope is the first thing that makes it possible to overcome the impacts of any disease.

Langis Michaud is a professor at the school of ophthalmology with expertise in eye health and the use of specialized contact lenses at the University of Montréal in Canada. This article was first published on The Conversation.

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.

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TRUTH AND TRADITION

Considering Physical Therapy for Your Pain? Here's What to Think About

MAT LECOMPTÉ

Recurring joint pain can drive you crazy, especially if you don't really know the cause. Is it muscular, are bones rubbing, is something off about the tissue in your shoulder, back, hip, or knee?

People can only put up with the pain and the effect on their lives for so long before they want to speak with a professional. If you've been thinking about visiting a physical therapist to help you ease pain and improve functionality, communication is essential. Here are some of the things you'll

want to tell them so they can determine the best rehab routine for you.

The first thing they'll want to know is how the pain is limiting your ability to carry out regular activities and move through life. They'll want to know if you have trouble reaching over your head to grab a dish or bending over to put your socks on.

This information helps your therapist know how they can assist you and what your strengths, weaknesses, and range of motion are like.

Next, they'll want to know what your goals are. This can help them design a program that can help you hit those

targets. If you want to be able to play tennis, go on a hike, or spend more time gardening, tell them.

If you've got an injury that's keeping you from playing tennis, they'll focus on more than just limiting knee pain. They will work on strengthening the muscles around the joint and also work on balance and agility so you can safely get back on the court.

Finally, they'll want to know your commitment to the plan. They need to know if you'll stick with it during therapy and take the initiative to do prescribed exercises at home when needed.

Be straight with them and be upfront if you're not committed. That way, you can work together to find a plan that's more suitable for you and that you're likely to adhere to.

Physical therapy may help get rid of joint pain and restore the quality of life you're looking for. It's one piece of the puzzle, but it's dependent on communication and engagement. Be honest and share with your therapist to get the most out of it.

Mat Lecompte is a health and wellness journalist. This article was first published on BelMarraHealth.com



If you've been thinking about visiting a physical therapist to help you ease pain and improve functionality, communication is essential.

How the COVID Response Is Priming the Next Pandemic

A dramatic rise in antimicrobial overuse is fueling the rise of dangerous new pathogens

Continued from Page 9

The authors call for the “appropriate prescription and optimised use of antimicrobials.” And yet, the fear of COVID continues to overshadow the growing threat of AMR, which will likely surpass the number of COVID-19 deaths by at least threefold, annually, by 2050.

“The scary thing, [AMR is] insidious and silent. The latest figures suggest AMR will cause over 10 million deaths per year by 2050. This is more than deaths from cancer and diabetes combined, and triple the current COVID-19 death toll of 3.4 million deaths worldwide since 2019,” writes Dr. Tina Joshi, a lecturer in molecular microbiology at the University of Plymouth, in an article for *NewStatesman*.

Antimicrobial Resistance Grew During COVID-19

While the world stopped due to COVID-19, the use of antimicrobial agents—for disinfecting surfaces and public spaces and treating patients—increased. The high rates of antimicrobial agent usage in COVID-19 patients are now being blamed for a rapid rise in multidrug-resistant organisms (MDROs), including:

- Extended-spectrum β -lactamase (ESBL)-producing *Klebsiella pneumoniae*
- Carbapenem-resistant *New Delhi metallo- β -lactamase (NDM)-producing *Enterobacteriales**
- *Acinetobacter baumannii*
- Methicillin-resistant *Staphylococcus aureus* (MRSA)
- Pan-echinocandin-resistant *Candida glabrata*
- Multitriazole-resistant *Aspergillus fumigatus*

In many cases, COVID-19 patients have presented with secondary infections with multidrug-resistant organisms. Fungal co-infections in COVID-19 patients are also common, as is antibiotic treatment, with one report from China suggesting that more than 70 percent of COVID-19 patients received antibiotics.

Other research suggested that 84.7 percent of hospitalized COVID-19 patients received intravenous antibiotic therapy, while a report published in the *Journal of Antimicrobial Chemotherapy* stated that up to 95 percent of COVID-19 patients in some hospitals are prescribed antibiotics.

As for why so many patients were excessively treated with antibiotics (which kill bacteria) despite COVID-19 being caused by a virus (SARS-CoV-2), researchers suggested that co-bacterial fungal or secondary infections were only part of the reason. Other reasons included:

- Since the symptoms of COVID-19, such as cough and fever, may also occur in bacterial pneumonia “clinicians empirically add a broad-spectrum antibiotic despite the suspicion of a viral origin.”
- Anxiety and uncertainty regarding COVID-19 and an absence of effective SARS-CoV-2 treatments potentially drove “widespread and excessive prescription of antibiotics.”

Excessive Antimicrobials Affect Environment

AMR has clear toxicological effects on the environment, in part because patients excrete a large proportion of drugs they ingest, which allows drug residues and drug metabolites to be released into rivers and coastal waters.

A team from the University of Plymouth in England conducted a risk assessment to determine the potential environmental

“The latest figures suggest AMR will cause over 10 million deaths per year by 2050.”

Dr. Tina Joshi, lecturer in molecular microbiology, University of Plymouth

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Bacteria adapt to antimicrobials more quickly than more often they are exposed.



Herbicides promote antibiotic resistance by priming pathogens to more readily become resistant to antibiotics.

benefit over existing treatments, with 82 percent of the recently approved antibiotics being derivatives of existing antibiotic classes with well-established drug-resistance. Therefore, rapid emergence of drug-resistance to these new agents is expected.”

Pesticides Make Antibiotic Resistance Worse

The overuse of antimicrobials during COVID-19 is only one piece of the puzzle. Widely used herbicides such as glyphosate (Roundup) and dicamba (Kamba) also play a role.

University of Canterbury researchers revealed that agrichemicals and antibiotics in combination increase the evolution of antibiotic resistance such that bacteria may develop antibiotic resistance up to 100,000 times faster when they're exposed to certain herbicides in the environment.

Herbicides promote antibiotic resistance by priming pathogens to more readily become resistant to antibiotics. This includes Roundup (the actual formulation of Roundup, not just its active ingredient glyphosate in isolation), which was shown to increase the antibiotic-resistance of *E. coli* and salmonella, along with dicamba and 2,4-D.

Rodale News reported: “The way Roundup causes this effect is likely by causing the bacteria to turn on a set of genes that are normally off, [study author] Heinemann says. These genes are for ‘pumps’ or ‘porins,’ proteins that pump out toxic compounds or reduce the rate at which they get inside of the bacteria.

“Once these genes are turned on by the herbicide, then the bacteria can also resist antibiotics. If bacteria were to encounter only the antibiotic, they would instead have been killed.

“In a sense, the herbicide is ‘immunizing’ the bacteria to the antibiotic. ... This change occurs at levels commonly used on farm field crops, lawns, gardens, and parks.”

In the United States, industrial agriculture even uses the antibiotics oxytetracycline and streptomycin as pesticides on agricultural plants, a practice that's banned in the European Union and Brazil due to rising concerns over antibiotic resistance. But in the U.S., the Environmental Protection Agency approved the “maximum level” of oxytetracycline for use in citrus fruits in December 2018—just days after approving residues of the drug on fruit.

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

Agricultural Antibiotics Can't Be Ignored
Industrially raised farm animals living on concentrated animal feeding operations (CAFO) have emerged as another major reservoir of antibiotic-resistant bacteria. Due to poor farming practices, including the use of low doses of antibiotics in animal feed for purposes of growth promotion, antibiotic resistance in farm animals is on the rise, threatening human and animal health along with food

production sustainability.

Worldwide, most antibiotics are used not for human illness but for livestock. Overall, 73 percent of the antibiotics sold globally are used in farm animals raised for food, typically on CAFOs. Researchers explained the glaring role of CAFOs in antibiotic resistance in *Environmental Health Perspectives*:

“This prolonged use of antibiotics, especially at low levels, presents a risk of not killing the bacteria while promoting their resistance by selecting for resistant populations.

“The resistance genes can pass readily from one kind of bacteria to another. Thus, workers in the animal units may become colonized with resistant organisms and can pass them on to co-workers and family members or friends.

“Consumers of meat may also become colonized through mishandling of raw meat or through insufficient cooking. Ultimately, these genes may pass into pathogens, and diseases that were formerly treatable will be capable of causing severe illness or death.”

In addition, most antibiotics ingested by animals are not metabolized but, rather, excreted. This waste is then applied to soil as a fertilizer, which may then be sprayed with herbicide. The antibiotic-resistant microbes can also be carried elsewhere by houseflies.

Pandemic Stretches Limits of Optimal Antibiotic Usage

Increased AMR is yet another fallout of the COVID-19 pandemic, which will combine with the already perilous AMR pandemic in progress, resulting in further deaths and environmental destruction. Writing in the *International Journal of Antimicrobial Agents*, researchers stated, “The ongoing pandemic is stretching the limits of optimal antibiotic stewardship,” and they called for an end to unnecessary use of antimicrobial agents:

“Moreover, unnecessary use of antimicrobial agents would be associated with a significant economic burden on healthcare systems, which could be directly caused by the drug itself and indirectly caused by healthcare costs for the management of drug-related adverse events.”

Beyond this, choosing organic foods, including grass-fed meats and dairy products, can help you avoid exposure to antibiotic residues in the food supply, while also supporting food growers who aren't contributing to AMR. Unfortunately, as the world continues to put all of its attention on COVID-19, the catastrophe of AMR is getting worse instead of better.

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

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FOOD AS MEDICINE

Nature's Best UTI Fighters

Sidestep the issues of antibiotic-resistant urinary tract infections with natural remedies proven to work

Stay a step ahead of urinary tract infections by boosting your diet with some of nature's best UTI-fighting foods.

A urinary tract infection, or UTI, occurs when infection is present in either the upper urinary tract, including the kidneys, or lower urinary tract, involving the bladder. Infections of the lower urinary tract are a more common problem, especially among women.

Lower UTIs typically aren't severe, although they can cause mild to moderate pain and discomfort. Symptoms of a lower UTI may include an urgent or more frequent need to urinate, a burning sensation when urinating, and pelvic pain.

While antibiotics are typically prescribed to combat a urinary tract infection, there are several effective home remedies that can help you relieve symptoms and may even support you naturally in preventing UTIs.

Increase Your Water Intake

Staying properly hydrated is always important, but it takes on extra significance when you're fighting illness. Drinking at least four to six cups of water per day, and two to three cups per hour if you're sweating heavily, is a good general rule for healthy adults, but if you suspect you have a UTI, upping your water intake can support healing in several key ways.

First, urinating more often helps flush bacteria out of the urethra, which can ease symptoms and speed healing. Secondly, increasing your water intake helps to dilute the bacteria in urine that could aggravate UTI symptoms.

For this reason, never resist the urge to pee if you have or suspect you may have a UTI.

Symptoms of a lower UTI may include an urgent or more frequent need to urinate, a burning sensation when urinating, and pelvic pain.

Consume Real Cranberries

The most widely known home remedy for treating a UTI—drinking cranberry juice—is more than just a superstition. This remedy is scientifically proven to support urinary tract health.

The American cranberry bush thrives in the cooler Northern Hemisphere, producing tart, red berries with a sour flavor profile. Known for their bright red color, cranberries are loaded with polyphenols, plant-based nutrients that deliver a potent antioxidant punch. Polyphenols are associated with protection against a host of

health problems, including the development of certain cancers, cardiovascular diseases, and more.

Cranberries, eaten whole or as a natural juice beverage, help prevent UTIs by inhibiting bacteria from attaching to the lining of the urinary tract. The Cranberry Institute recommends drinking eight to 16 ounces of pure cranberry juice daily as a preventative, especially if you are prone to urinary tract infections.

If you opt for whole berries, adding orange peels to the cooking mixture provides a naturally sweet essence that complements these tart berries. You can also toss a handful into your fruit smoothie to balance the sour nature of cranberries and appease even the sweetest of palates.

Eat More Garlic

Garlic is a popular natural remedy used to treat a wide array of physical ailments such as viral, fungal, and bacterial infections. Garlic has even proven effective against *E. coli*, the bacteria most often associated with UTIs.

Garlic's UTI-preventative properties are attributed to the antibacterial activity of allicin, the sulphuric compound that is produced when garlic is pressed or chopped. A 2009 study showed that garlic blocks urinary tract and kidney infections caused by the bacteria *Pseudomonas aeruginosa*, which is associated with the use of catheters.

Garlic is so effective at suppressing bacteria, it has been used by Ayurvedic and Greek systems of medicine as an aid in fighting tuberculosis since ancient times.

Allicin and garlic supplements are considered safe for most people and are available in extract and capsule forms, often without odorous side effects. You can also consume garlic cloves, but make sure to chop or chew them first for optimal benefits.

Supplement With Grapefruit Seed

The over-prescription of antibiotic drugs has led to a public health crisis. The growing problem of drug-resistant UTIs has made what used to be a simple treatment—a short course of a common antibiotic—into a complex health consideration.

Natural medicines are sometimes regarded as less strong or effective than pharmaceutical drugs like antibiotics. In the case of grapefruit seed extract, however, it's not only potent, it may even be more effective at treating



The antibacterial activity of allicin in garlic and the antioxidant power of polyphenols in cranberry both offer delicious ways to combat and prevent UTIs.

antibiotic-resistant UTIs.

A 2005 study published in the *Journal of Alternative and Complementary Medicine* observed treatment of three middle-aged men and one female diagnosed with urinary tract infections. All four patients were treated orally with grapefruit seed extract (GSE) for two weeks.

Three of the patients were relieved of symptoms in that timeframe, while the fourth patient experienced the reversal of a pattern of antibiotic resistance after suppressed growth of bacteria that had been resistant to three strains of antibiotics.

Researchers concluded that treatment with GSE at a dosage of five to six seeds or equivalent extract every eight hours is comparable in effect to proven antibacterial drugs.

Boost Vitamin C

Vitamin C is one of the best go-to vitamins when you start feeling under the weather. Consuming citrus and foods that are high in vitamin C has an energizing effect that is useful when you are fighting back illness. But vitamin C's antibacterial properties are another reason to keep oranges and grapefruits—and other vitamin-C-rich foods like kiwi, bell peppers, and broccoli—on standby.

One of vitamin C's functional mechanisms is making urine more acidic, which helps prevent bacteria from growing in the urethra. Vitamin C (ascorbic acid) supplements taken at a dose of 100 milligrams (mg) daily has been clinically shown to significantly reduce the frequency of UTIs among pregnant women, a population group that is especially susceptible to this type of infection.

Vitamin C can be consumed in supplement form, or you can increase the amount of vitamin C-rich foods such as citrus fruits and leafy green vegetables in your daily diet.

*WARNING: Always consult a medical herbalist or your health care practitioner when using both natural and pharmaceutical medicines for any diagnosed condition. This article is for informational purposes only and not intended to be used as medical advice.

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

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What You Need to Know About Inflammation

This root of many illnesses can be cooled with the help of diet and lifestyle changes

Continued from Page 9

This simply means that when things don't move well, it creates a buildup that causes heat. In your body, anything from your energy or digestion to your emotions can stagnate. If you've ever seen someone get hot with anger, that's an emotional stagnation causing a little heat. For example, maybe someone got cut off in traffic. Instead of just letting it go, and letting their mind move on, the person fixated on the offending driver and got angry.

Western scientists have found that the foods you eat can be pro-inflammatory or anti-inflammatory. Fats are strongly linked to inflammation, because your body makes prostaglandins from fatty acids. Similar to Chinese food theory, the fats that promote inflammation include partially hydrogenated oils and fats, and polyunsaturated oils, such as corn, peanut, and safflower. Also, trans-fats, such as margarine or vegetable shortening, and saturated fats, as found in animal products—except fish—promote inflammation.

Now, you may be thinking that there's

nothing you can eat, but there are actually one or two healthy choices you can make. Just kidding! There are a lot. Anti-inflammatory foods include fish, especially deep-sea fish; fish oils; olive oil; nuts, especially walnuts; ground flax seeds or flaxseed oil; and soy foods. Other anti-inflammatory foods include colorful fruits and vegetables, known for their high antioxidant content, which also decreases inflammation.

In addition, ginger and turmeric are both effective in taming inflammation.

There is a blood test that measures the level of inflammation in your arteries called C-reactive protein. However, if your health insurance plan tends to deny more than approve, a fasting blood insulin test is more likely to be covered and is also an indicator for inflammation. In general, higher insulin levels in your blood mean greater inflammation.

Tips to Manage Inflammation

Maintain an appropriate weight. Fat tissue is an accumulation of dampness, which over time will ultimately turn to heat.

Get regular exercise. Exercise gets energy moving and relieves stress, both of which can reduce inflammation. It also improves the health of your heart and lungs. You don't need to sign up for a triathlon; walking for 20 to 30 minutes at least four times a week will do the trick.

If you're a smoker, quit now. Today. In case you haven't noticed, smoking creates heat in your body, inflames your lungs, and inhibits your circulation.

Take processed foods off your shopping list. In most cases, processed foods are made with lots of sugars, trans-fats, and chemicals—all of which can contribute to inflammation. If an item has a long list of ingredients that you can't pronounce, put it back on the shelf and roll your cart to the produce aisle.

Get your stress under control. Take a Yoga class, do some deep breathing, or visualize your happy place—whatever it takes. Stress is a killer in its own right. You can find simple stress relief exercises online and

meditation is a great option.

Floss. That's right, floss. There's a direct relationship between gum disease, inflammation, and heart disease.

Get medical care for any infection that doesn't heal quickly. Again, there's a direct link between chronic infections and systemic inflammation.

Pay attention to food sensitivities. These can cause inflammatory symptoms, not only in your gut, but throughout your body. Some common culprits include grains that contain gluten; dairy foods; and the nightshade plants, such as tomatoes, peppers, and eggplant. If you suffer from digestive problems, you may want to experiment with eliminating those foods that you suspect are causing problems.

Lynn Jaffee is a licensed acupuncturist and the author of "Simple Steps: The Chinese Way to Better Health." This article was originally published on Acupuncture-TuinCities.com



One of the first things a family can do after adopting a minimalist lifestyle and saving money is take young children on more vacations.

VIDAR NORDLI-MATHISEN/UNSPASH

BECOMING MINIMALIST

Things We’ve Never Regretted Spending Money On

Creating memories, giving, and education have been priorities while the kids were at home

JOSHUA BECKER

Some people assume that minimalists never spend any money. And to be fair, some work hard not to. But minimalism, on its surface, isn’t necessarily about not spending money. Minimalism is about redirecting your money toward more important pursuits than physical possessions. Minimalism recognizes that resources are finite and life is a trade-off. Money not spent on material possessions means more money available for other pursuits. And that principle doesn’t just apply to money, but time, energy, and focus as well. Because we have pursued minimalism for the last 12 years and have spent less money on possessions, we have more money for things we found helpful as a family.

Here are 10 things we’ve never regretted spending money on (with kids at home).
Many items on this list exist only because we adopted minimalist principles.

1. Travel
One of the first things we did after adopting

a minimalist life and saving money was to take our young children on an overnight trip to the beach. We explained to them, even at a young age, how owning less freed us to splurge on this trip. It set a wonderful culture for our family, and we’ve gone on many memorable trips since then.

2. New Restaurants
My children, now teenagers, have grown to appreciate new and fine foods. When we travel, and even here at home, we are always on the lookout for new restaurants, new foods, and new menus. Trying a new restaurant always results in an enjoyable evening together.

3. Visiting Family
Kim’s family lives in Omaha, Nebraska. My family lives in Aberdeen, South Dakota. Two times per year, we head back to the Midwest to spend time with them. I love being with my family, and my kids have great relationships with their grandparents and cousins. I’ve never regretted making that a financial commitment.

4. Memorable Experiences
Memorable experiences with our kids still



Family photos are one of the things worth spending some money on.

NATHAN DUMLAD/UNSPASH

Minimalism is about redirecting your money toward more important pursuits than physical possessions.

at home have been one of the most significant payoffs of living a minimalist lifestyle. Travel counts as memorable, so does visiting fun restaurants. But we’ve also made a point to attend local professional sporting events, theater, and museums as well. I’m glad we chose to invest money in those memories.

5. Organized Sports/Activities
My son has played on a number of sports teams growing up, so has my daughter. Alexa has also been involved in dance and theatrical productions. Almost all of these hobbies and activities have required equipment to varying degrees.

I understand the power of minimalism, but I also recognize the importance of being prepared and equipped for your team and coach. So we’ve definitely bought some supplies over the years that we wouldn’t have purchased otherwise, but I don’t regret it. Sports and activities build valuable life skills.

6. Giving
When my kids were in their early teens, we gave away the money from my book contract (“The More of Less” and “The Minimalist Home”) to begin The Hope Effect. I’m thankful my kids were here, at home, so they could see that decision and what it meant for our family and orphaned children around the world.

Generosity is a value I hope they will take forward in life.

7. Education
School requires supplies. There are, obviously, ways to go overboard in purchasing things for school. And I hope we walked that line well. But we consider it important for them to have everything they need to thrive in school and academic pursuits.

8. Celebrating Accomplishments
Kim always pushes me in this direction—spending the time and effort (and money) to properly celebrate milestones and accomplishments in our families’ lives. I am thankful she did.

9. Spending Time With Friends
We want our kids to make memories with friends while they’re young. Hopefully at our home, but also enjoying time out in the world. It’s certainly not always required to spend money to make memories with friends. But when it was, I am thankful that we were able to provide that.

10. Family Photos
We don’t take a lot of family photos, but I am thankful for every time we did. I once received an email from a reader that I have never forgotten. The woman emailed me to mention how financial discipline had paid off for her and her husband. Specifically, she said in the email, “we have reached retirement, and because of fiscal discipline, we have all of our needs cared for.”
But then she concluded with this sentence, “However, if I could have done anything different, I would have spent a little more money when my kids were younger building valuable memories.”
From the moment I read her email, I was touched by it and inspired to make sure I wouldn’t have similar regrets.

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

Screens at Bedtime Rob Young Teens of Sleep

Middle schoolers who spend time on smartphones, laptops, and tablets in the hour before bed are likely to sleep poorly and be more tired the next day, a new study shows.

Researchers looked at the effects of screen time at bedtime among 345 children aged 12 to 14 over a six-month period.

They found that spending time on media devices before going to bed disrupted sleep and had a “bidirectional” effect such that poor sleep led to more bedtime media use.

“So it creates this vicious cycle where engaging in bedtime media use can result in poor quality sleep, which over time fuels more bedtime media use,” said Atika Khurana, an associate professor in the Counseling Psychology and Human Services Department at the University of Oregon and research scientist at the Prevention Science Institute.

“Just having access to screen-based media devices in bedrooms

has been associated with poor sleep quality and quantity among adolescents,” which over time can result in difficulties with attention control, said Heather Leonard, a doctoral student and lead author of the paper in Sleep Health.

Access to devices was pervasive, with nearly 3 out of 4 seventh- and eighth-graders taking part in the study reporting exclusive access to a smartphone.

“That’s pretty high for middle schoolers, but consistent with national trends,” Khurana said. “And it’s tricky for parents to navigate this because of peer pressure.”

Adolescents with access to media devices in the bedroom are more likely to engage in bedtime media use, which can have a negative impact on their sleep and health, the study finds. The time spent scrolling or texting takes the place of time that otherwise might have been spent sleeping.



Bedtime media use leads to poor sleep, which in turn leads to more bedtime media use.

NIKE_SHOTS/SHUTTERSTOCK

Watching videos or playing games might also overstimulate young brains when they should be winding down, as does the blue light of the devices. During the day, students who reported bedtime media use experienced more sleepiness and struggled to maintain attention.

The National Sleep Foundation and the American Academy of Pediatrics recommend eliminating screen time in the hour before going to bed. As for steps parents and guardians can take, Leonard said it helps to establish ground rules for logging on or using a phone and keeping media devices outside of bedrooms.

Restricting media access tends to work better with younger adolescents than older ones, Khurana said.

“I think in those younger years, you have a better chance as a parent to put down some ground rules and consistently enforce them,” Leonard said. “You have an opportunity

to build good habits and establish healthy sleep hygiene early on that they’ll carry forward with them.”

Parents can also model healthy behaviors when it comes to using their smartphone or laptop, as well as sleep hygiene, the researchers say.

“If parents are going to be on their phones in the bedroom, then it’s hard to convince children that they shouldn’t do that,” Khurana said.

Sleep plays a critical role at that age. The potential long-term effects of poor sleep are wide-ranging, contributing to conditions such as chronic inflammation and obesity, among others. Understanding how modern interactive forms of media can affect adolescent health and behavior is an important area of research, Khurana said.

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SOBHAN JOOD/UNSPASH

WISE HABITS

Filter Out the Digital Noise

Are constant smartphone notifications distracting you from what is truly meaningful?

LEO BABAUTA

Without her realizing it, much of our day can be quickly filled with a deluge of distractions from devices. In the moment, they may seem like the most important and satisfying things in front of us, but what if, in fact, they’re keeping us from focusing on what’s truly important?

What if we could filter out all that noise and instead focus on what’s meaningful? What if we could find stillness instead of constant distraction?

I believe that most of us have that power. In my experience, most of the noise is there by choice, but we’ve fallen into patterns over the years, and it can seem like we’re not able to change them.

Let’s talk about ways to filter out the unnecessary noise, then how to find stillness and meaning.

Ways to Filter the Noise

Take the rest of today to notice what noise you find in your life and make a list of moments when you found yourself distracted.

For example, noise in my life comes from email, WhatsApp, Snapchat, Twitter, blogs and other sites I like to read, text messages, Slack, and watching Netflix. You might have other sources, like Facebook, Instagram, Messenger, news, and cable TV.

Once we’re aware of the noise, how can we filter it out? First, we have to decide that our desire for more quiet and meaning in our lives is greater enough for us to “miss out” on some of the things in those noisy channels.

Then we can take action:

- Turn off app notifications, including the unread-messages count for each app on your phone.
- Unsubscribe from notifications from Twitter or any other apps where you’re “following” people, blogs, or websites. If you use an RSS reader, unsubscribe from as many feeds as possible. Leave only a handful that give you meaning.
- Unsubscribe from email lists and notifications you don’t read or only glance at.
- Decide to check on some communication channels or apps (like Facebook, Twitter, and Instagram) just once a day. Others you can check more often, twice or three times a day, if needed (like email). But set a limit.
- Delete apps or accounts that aren’t giving you real meaning (I deleted my Facebook account years ago).
- Tell people that you’re only checking your messages once a day, to set the expectation. Don’t use an autoresponder, if you can help it. Instead, just send a message to the people who matter most, and ask that they be understanding.
- Set a time each day when you watch TV or movies (if at all). Set a time of day when you read news or blogs (if at all). If you say, “I only watch TV after 7 p.m.,” then you’ve limited how much space this takes up in your life.
- If there are some communications



What if we could find stillness instead of constant distraction?

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such as email or text messages that you need to stay connected to for work, try to negotiate with your boss or team to have periods of time when you can disconnect. For example, ask if you can take a couple of hours in the morning or a couple in the afternoon to be disconnected from email so you can focus on important tasks.

If you take these actions, you’ll filter out most of the noise. What’s left? Time for quiet, stillness, focus, and meaning.

Finding Stillness and Meaning

Once you’ve filtered out the noise, you’re left with a few interesting problems:

1. Changing your habits of busyness and constant movement.
2. Figuring out what’s meaningful.
3. Learning to stop and stay still.

I think those are wonderful problems to be faced with. Most people never even consider them. Find gratitude that you can work on this at all.

Take some time to notice your constant need for busyness or distraction. For example, if you have a moment when you’re not doing anything—you’re waiting in line, you’re alone at your restaurant table while your friend goes to the bathroom, you’re sitting on your couch—what do you do to fill the time, out of habit? This is your pattern of busyness and movement.

Now see if you can let go of those patterns. Catch yourself, and instead opt for stillness and quiet. Try to just sit there and notice your surroundings. Soak it all in. Savor the moment. Meditate on your breath. Reflect on your day. Ask yourself what you’re grateful for right now.

Start building new patterns of stillness. For example, try meditating every morning, even if it’s just for a few minutes, focusing on your breath. Try going for a morning or evening walk, without your phone. Try turning the phone and computer off and write in a journal instead.

Start finding activities that are more meaningful to you. This doesn’t have to be done in one day—you can slowly experiment to figure out what’s meaningful to you. You might start writing a book or screenplay, for example, or taking photos, or drawing, or making music. You might start learning something that’s meaningful or teaching something to others. You might decide to start a business or charity that helps bring positive change to the world.

Find ways to help others and make the world a better place. Keep a journal, meditate, declutter, exercise, prepare healthy foods, and make dates with people who are important to you.

When you notice yourself running to distraction, pause. Turn instead toward stillness and your meaningful activities.

Build a life around stillness and meaning, and notice the difference it makes in you.

Leo Babauta is the author of six books and the writer of Zen Habits, a blog with over 2 million subscribers. Visit ZenHabits.net

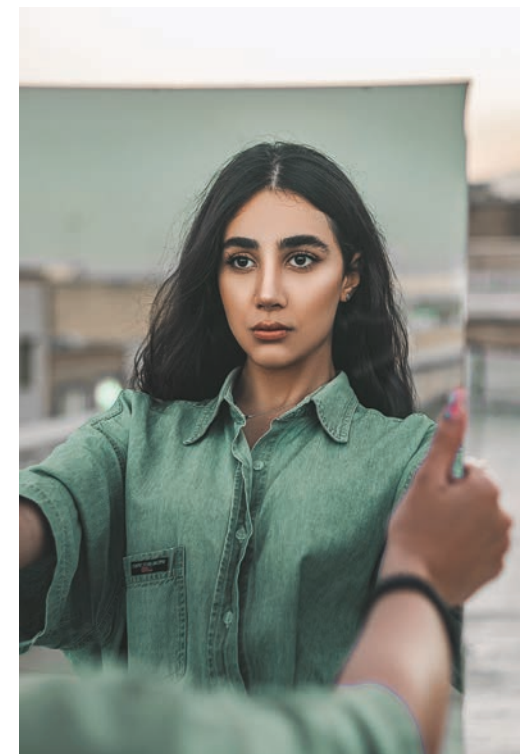


Delete any apps or accounts that eat your time but provide little value.

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Those who experience radical healing do so because they’re ready.

The Readiness Is All: How to Know When You’re Ready for Change

KELLY BROGAN

Consider something courageous that you’ve done in your life: a difficult conversation initiated with a sibling, ending an all-too-cozy-but-hyper-toxic relationship, quitting your job, breaking a habit (phone, smoking, soda, candy, alcohol), coming clean on a long-held secret. Now ask yourself, how did you know it was the moment to act?

Over the years that I have had the privilege of witnessing health transformation and spiritual awakening, I have spent much of the time marveling at this elusive ingredient: readiness. In fact, the energy of these reclamation processes has felt more like a volcano that needed permission to explode than an underdog fighter being pushed into the ring. Those who experience radical healing do so because they’re ready.

We are each traveling this highly personal path, exploring what we’re strong enough to look at, turning the blind eye of denial at what we aren’t.

Despite my capacity to inspire, coerce, or even manipulate (shadow material I’m working on!) others to walk the path of personal empowerment, I have found that readiness is not something I can generate in another. In fact, a psychiatric medication taper attempted without that readiness is likely to end in a return to medication.

The readiness continuum is not a linear path, but a spiral one. We touch opportunities for expansion and growth, and if we’re ready, we engage the shift, and if not, we may contract until the opportunity presents itself again. We are each traveling this highly personal path, exploring what we’re strong enough to look at, turning the blind eye of denial at what we aren’t.

I’ve come to prefer this perspective to the emerging dualism of those who are awakened, conscious, or spiritual versus those who are asleep, ignorant, and materialist. We all have all of it within us. Perhaps what distinguishes us is our intentionality, our choices, and our access to love of self. From this vantage point, we are all simply ripening over time, in our own way, at our own pace. In fact, I’ve read that evil has origins in the world unripe. Could it be that what we are calling bad is simply incompletely nurtured?

For links to the source studies that this article draws on, please visit our website for the online version or visit KellyBroganMD.com

Kelly Brogan, M.D., is a holistic women’s health psychiatrist and author of the New York Times bestselling book “A Mind of Your Own,” the children’s book “A Time for Rain,” and co-editor of the landmark textbook “Integrative Therapies for Depression.” This work is reproduced and distributed with the permission of Kelly Brogan, M.D. For more articles, sign up for the newsletter at www.KellyBroganMD.com

Steve Jobs, Albert Einstein Applied Concept of ‘No Time’ to Boost Their Creativity: What Does It Entail?

According to neuroscience, taking a break from our busy schedules and devoting some time to doing absolutely nothing is key to fostering creativity

An essential element to achieving success is implementing a proper routine on a daily basis, as science and history point out.

Although your daily routine might be healthy and productive, it can also be hectic and kill creativity, an article in Inc. magazine notes.

The magazine also points out that many successful people have dedicated a large part of their lives to “no time.”

Steven Kotler, author of the book “The Art of the Impossible” and a TED speaker, pointed out that “no time” has to do with a quiet moment in which a person can isolate himself or herself from the noise and demands of the world.

It’s no wonder that the internet is full of articles related to the morning routines of important and famous figures giving suggestions on how to add positive activities to your day-to-day life.

In order to have a beneficial and satisfying life, it’s advisable to take into account gratitude practices, nature walks, and connection with oneself, since they are backed by research that confirms that all these activities are good for people. Likewise, science indicates that “no time” is much needed in such a routine, because if you spend most of your day with all of these existing habits, it is unlikely you will have time for yourself.

You Don’t Have Enough Time for ‘No Time’ in Your Schedule

“No time” is also known as “a quiet time, alone, isolated from the noise and demands of the world,” as Kotler describes.

“The ‘no time’ is the term for that vast stretch of emptiness between 4 a.m. (when I start my morning writing session) and 7:30 a.m. (when the rest of the world wakes

up). This ‘no time’ is a total darkness that does not belong to anyone but me,” he writes. “The urgent concerns of the day have not yet arrived, so there is time for that supreme luxury: patience. If a phrase takes two hours to get right, who cares?”

Kotler says that neuroscience shows that disconnection time blocks have a large influence on creativity. Without these blocks of down time, pressure takes a toll.

“The pressure forces the brain to focus on the details, activating the left hemisphere and blocking the whole picture. Worse yet, when we are pressured, we are often stressed. We are unhappy with the rush, which embitters our mood and further restricts our focus. Being limited in time, then, can be kryptonite for creativity,” he explains.

In other words, “no time” helps us relax enough to see the big picture and allow innovative ideas to come to light. The hustle and bustle brought on by everyday life, even your well-intentioned morning yoga class, can chase away the timid and ungainly ideas of emerging thoughts.

Jobs and Einstein Agree on ‘No Time’

Despite the fact that Kotler considers himself an expert on the neuroscience of creativity, many successful figures have also understood the same truth. Albert Einstein accepted that many times the most valuable ideas occurred to him while doing nothing and enjoying his own “no time.” Steve Jobs was also a “famous bum.”

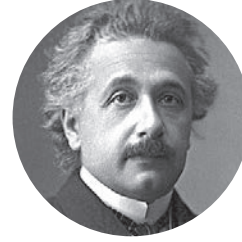
“The time Steve Jobs procrastinated and pondered the possibilities was time well spent letting more divergent ideas emerge,” Wharton professor Adam Grant once told Business Insider of Jobs’s long periods of aimless inactivity.

It’s worth mentioning that both genius-



Steve Jobs, business magnate, co-founder of Apple.

PUBLIC DOMAIN



Albert Einstein, physicist, developed the theory of relativity.

PUBLIC DOMAIN

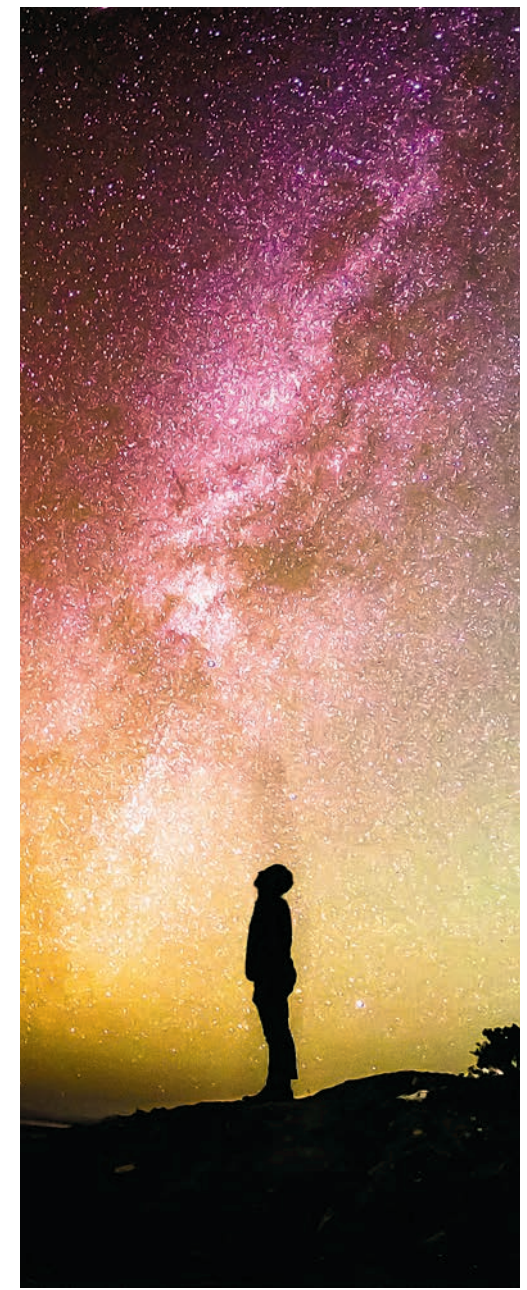
Albert Einstein accepted that many times the most valuable ideas occurred to him while doing nothing and enjoying his own ‘no time.’

es—Einstein and Jobs—managed to do a great job of putting their ideas into practice.

Not only is “no time” enough to be able to change the world, it’s an essential ingredient and a part of the whole. When you’re planning the perfect morning routine, it’s easy not to give “no time” the attention it deserves, but you should definitely always include it in your everyday life. You will see a change in the way you think and create, and you may even achieve a more successful version of yourself.

This article was translated from Entrepreneur magazine’s Spanish edition, which originally published this article.

GREG RAKOZY/UNSPLASH



When we make time for nothing, we create time for infinite possibilities.

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

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