

THE EPOCH TIMES

MIND & BODY

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Tips for a Healthier 2022

These 5 simple practices can help you sustain an upward trend in the year ahead

EMMA SUTTIE

I—and many of you I suspect—use this time of year to decide what we can do to have the best year possible. A new year represents new possibilities with unlimited potential. That said, 2021 was a tough year for a lot of us. So, as we bring in the year 2022, here's a list of things we can do to support our collective health, happiness, and well-being—and

give us the best shot at making it an awesome 2022.

Unplug

When was the last time that you were more than a few feet from your beloved cellphone? How long can you resist the siren sound of a new text message, email, or social media comment?

Continued on Page 6

MADE TO MOVE

You Can't Outrun Your Fork

But that doesn't mean exercise can't help you lose weight or change your diet

CASSANDRA J. LOWE

Every January, millions of people make New Year's resolutions to lose weight, eat healthier, or both. To achieve these goals, many people begin strenuous exercise programs that demand too much exercise too soon, leading to fitness burnout or injury. Overtraining can actually prevent you from losing weight.

As a health neuroscientist, I have been studying the brain and cognitive mechanisms underlying dietary behaviors and the role exercise plays in helping people

The truth is that you simply cannot exercise away a poor diet and expect to lose weight.

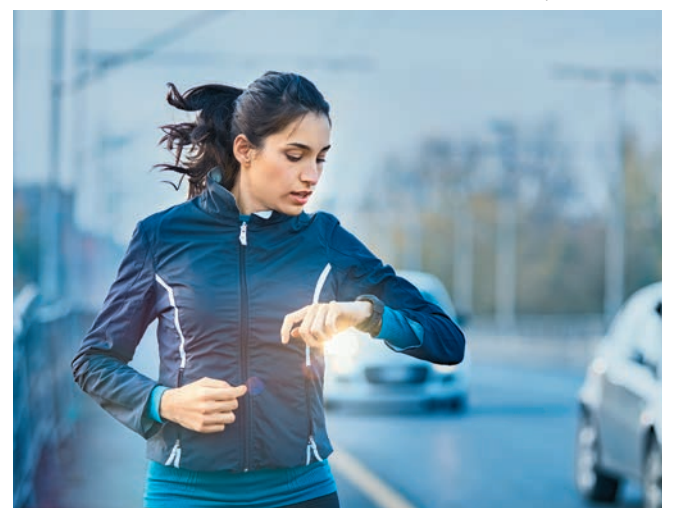
improve their diets for over 10 years.

Energy and Exercise

The truth is that you simply cannot exercise away a poor diet and expect to lose weight (if that is your goal). Humans are very good at conserving energy and will account for any calories burned through exercise by consuming more calories later in the day or by being less physically active throughout the rest of the day.

Continued on Page 5


RIDO/SHUTTERSTOCK



Exercise can trigger several changes in mind and body that will help you resist junk food.

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Spring is the time to grow, and the body shifts to using the energy it has stored during winter to fuel that growth.

CHINESE WISDOM FOR SEASONAL LIVING

It's Time to Shore Up for Spring

Solar Term: 'Major Cold' (Jan. 20–Feb. 3, 2022)

MOREEN LIAO

A solar term is a period of about two weeks and is based on the sun's position in the zodiac. Solar terms form the traditional Chinese calendar system. The calendar follows the ancient Chinese belief that living in accordance with nature will enable one to live a harmonious life. This article series explores each of the year's 24 solar terms, offering guidance on how to best navigate the season.

Solar Term: 'Major Cold'

2022 Dates: Jan. 20–Feb. 3

With the freezing ice storms parts of the country have been having this January, it isn't hard to identify with the current solar term, "Major Cold," which runs from Jan. 20 to Feb. 3.

Ancient Chinese people considered the cold to be critical for agriculture, forestry, fisheries, and animal husbandry. The ancients saw how the extreme cold—when the earth is frozen to its deepest level—was necessary for killing off insects and bacteria, so that when spring came, pest problems were minimized.

Major Cold was also a time to look forward to a very important festival, known as Bodhi Day, which is still celebrated on Jan. 10, according to the traditional Chinese calendar. The occasion marks the day Buddhism's founder, Shakyamuni, reached enlightenment under a bodhi tree.

This was a major commemoration in China after Buddhism was spread there in the early sixth century, and it became an important royal ceremony during the Qing Dynasty (1644–1911). Qing emperors conducted the ceremony at the Yonghe Temple in Beijing, which was completed in 1694 by the great Qing Emperor Kangxi.

One of the main activities of Bodhi Day involved eight days of preparing a giant pot of congee for the celebrations. The congee, a kind of savory rice porridge cooked with plenty of water, would be shared widely among royals and members of the court.

Congee was also eaten on the day of the ceremony in households across the nation. And while this highly nourishing food was symbolic, due to it being a restorative food that helped Shakyamuni reach enlightenment, it also happened to be the perfect type of food to eat during Major Cold.

Seasonal Eating

Major Cold is the last solar term in the Chinese calendar year, and it's also the last chance to supplement our bodies with extra nutrients. During winter, our body stores energy and nutrients to use in the spring. Spring is the time to grow, and the body shifts to using the energy it has stored during winter to fuel that growth.

Thick, warm soups such as congee

are suggested, with purely vegetarian ingredients or lean meats. It's encouraged to avoid overly greasy or fatty foods, as these will block the necessary yang energy from rising in the coming spring or clog the arteries and cause other problems.

Chinese people would also preserve garlic in vinegar on this day, which would take about a month before it would be ready to eat. A little sugar was also added to the vinegar to help it ferment. Fermented garlic is less stimulating, or heat-inducing, which makes it more suitable to consume in the upcoming spring season.

Other good foods for the season are warming foods such as black beans, eggs, duck, lamb, fennel, mushrooms, sesame, walnuts, and yams. The spices anise, cinnamon, fennel, cumin, oregano, and nutmeg are all helpful as seasonings or taken as a tea.

Attune Your Lifestyle

There are three major areas of our bodies that ancient Chinese wisdom advises to keep warm during Major Cold: the respiratory system, neck and spine, and feet. When you're outside, remember to keep both your nose and chest toasty by wearing layers of warm clothing and a scarf.

Your spine and lower back are particularly susceptible to the cold, according to traditional Chinese medicine theory. Wear longer tops and sweaters during this season to avoid imbalances, and if you need to bring heat back into the area of your lower back, apply a heating pad, a hot water bottle, or simply use a hair blow dryer to warm the area nicely.

To protect your feet, wear warm boots and always keep your feet covered. This is especially important for the elderly.

Having a foot bath with very warm water before sleep is also a nice ritual during this time of the season. To boost the effects, add fresh ginger, freshly ground cinnamon, or black peppercorns to the water. You can also place two golf balls in the water, and press the bottoms of your feet firmly onto the balls, concentrating on the center of each foot. This assists in getting good quality sleep and keeping the body warm at night.

Also, it's traditionally understood that it's best to get plenty of sleep and rest during the cold period. Restrain sexual activities to preserve the yang energies of the body for growth in the spring.

Here's to keeping you in your best health for the whole year.

Epoch Times contributor Moreen Liao is a descendant of four generations of traditional Chinese medicine doctors. She's also a certified aromatherapist, former dean of the New Directions Institute of Natural Therapies in Sydney, and the founder of Ausganica, a certified organic cosmetic brand. Visit LiaoMoreen.com

MEDICALLY CORRECT

The History of Anesthesia

The art and science of negating pain has evolved over centuries

PETER WEISS

Anesthesia as pain relief is amazing, and we still have trouble understanding how it really works. What we do know is that it has played an important role in medicine for centuries.

This role was made uncomfortably clear to me more than 35 years ago when I had to perform an emergency cesarean section on a woman using lidocaine as my only anesthetic. There was no anesthesiologist available for this 2 a.m. emergency, and this was before the days of routine epidurals.

I was much younger then and was only one year out of training, and the parents wanted everything done for their baby. We rushed her back to the operating room, hoping the anesthesiologist would show up in time before I had to cut.

There was only one anesthesiologist in the hospital in the middle of the night. He was on another case where the patient was actually coding on another operating table on a different floor. In those days, we didn't have dedicated anesthesiologists for labor and delivery.

The fetal heart tones were dangerously low, into the 60s (normal is 120 to 150). The baby would be severely brain damaged or die if we didn't get the baby within minutes. The only choice we had was to operate using a local anesthetic, lidocaine.

I had only read about using local anesthesia for C-sections before then, and somehow I remembered what the toxic dose was. At least I knew how much I could use. What if she needed more? What if it didn't work?

The seconds ticked off and the fetal heart tones remained in the low 60s. I had to make a decision. The parents begged me to do something. "Save our baby," they pleaded. With a prayer on my lips, I started injecting lidocaine as I went along the layers, waiting a few seconds for it to work at each layer, finally getting the baby out literally in two minutes. With full anesthesia, I could have gotten the baby out in under a minute if needed. I had to wait at each level for the lidocaine to take effect.

My patient didn't feel anything, and the baby did fine after a slow start, thank God. The anesthesiologist did show up about 10 minutes after we started and he was able to give her complete general anesthesia as I finished the surgery.

That situation most likely wouldn't happen today, at least I hope it wouldn't. There are a lot of stories like that, about things we used to do that wouldn't happen today. And there are a lot of stories of what happened in the long past that show how much has changed with pain relief over recorded history.

One of the most impactful discoveries in terms of pain relief comes from the poppy. Early civilizations used poppy and other herbs to alleviate pain. The Sumerians used the poppy as early as 4000 B.C. Over the

centuries, pharmaceutical companies have figured out how to derive more potent pain killers from the poppy. Early use of opium has given way to morphine, heroin, and the semi-synthetic and synthetic opioids of today. While these drugs have been abused by many, their role in pain relief is important to millions.

But the poppy isn't the only herb used for pain relief. The Babylonians, around 2250 B.C., used henbane (Hyoscyamus niger) to treat toothaches.

A very different form of pain management comes from the Chinese use of acupuncture, which was used as early as 1600 B.C. Other pain relievers were also used. The famed Chinese doctor Hua Tuo performed surgery using mafeisan (a wine and herbal mixture) as an anesthetic around A.D. 160. It was believed that this mixture may have been either morphine or opium. Unfortunately, Hua Tuo was executed for political reasons and burned his extensive medical writings beforehand.

In more recent times, 1540 to be exact, Valerius Cordus, a German physician and botanist developed what he called the "sweet oil of vitriol," which was synthesized diethyl ether by distilling ethanol and sulphuric acid.

Dentist William T.G. Morton gave the first public demonstration of ether for surgery in 1846 at Massachusetts General Hospital though it was actually Dr. Crawford Long who first used it in his private surgical practice in 1842 in Jefferson, Georgia.

While a lot of credit is given to Morton, there is plenty of credit to be found around the globe.

Dr. Seishu Hanaoka, in Japan, developed an oral concoction of herbs he called "Tsusen-san." This concoction was given to induce general anesthesia in a patient before he operated to remove a cancerous breast on a 60-year-old woman named Kan Aiya. This was successfully performed on Oct. 13, 1804. It has been documented that Hanaoka spent more than 20 years developing his Tsusen-san and experimented on his wife and 10 other subjects.

Ether was a huge success, and it was Dr. Edward Robinson Squibb who developed a chemically pure form of ether in 1856. Two years later, he founded a pharmaceutical company, Squibb and Sons. Today Squibb is one of the world's largest pharmaceutical companies.

Joseph Priestly is best known for "discovering" oxygen, he was also the first to produce and describe nitrous oxide in 1772. Priestly was an English theologian and a self-taught chemist. Sir Humphry Davy proposed the use of nitrous oxide for pain relief many years later. It was instead used for years as a toy and entertainment as "laughing gas." It was not until 1844 that a dentist, Dr. Horace Wells, used it as pain relief while extracting a tooth.

In 1847, chloroform, similar to ether, was



EVERETT COLLECTION/SHUTTERSTOCK

Dentist William T.G. Morton gave the first public demonstration of ether for surgery in 1846 at Massachusetts General Hospital.



Joseph Priestly is best known for "discovering" oxygen. He was also the first to person to produce and describe nitrous oxide. PUBLIC DOMAIN

1600 B.C.

► A very different form of pain management comes from the Chinese use of acupuncture, which was used as early as 1600 B.C.

used as an obstetric anesthetic for laboring women. This quickly became very popular after Dr. John Snow used chloroform on Queen Victoria of England while she gave birth to her son in 1844.

Cocaine was originally used as pain relief by Incan shamans, but was later introduced in 1884 as an anesthetic for eye surgery and is still commonly used in ophthalmic surgery. The first spinal block using cocaine as the anesthetic agent was performed in 1898 by Dr. August Bier.

The lidocaine I used on my patient some 35 years ago was developed in 1944 and is still widely used.

Oliver Wendell Holmes is sometimes credited with coining the term "anesthesia" in 1846 after reading about Morton's public display of ether.

Today, we have two basic types of anesthesia.

Local anesthesia, such as lidocaine, is still the most common local anesthetic when placing sutures or staples to close a wound. There are many different versions of types of lidocaine with different specific properties used for specific situations. Simply put, these chemicals block the nerve transmission from the site of the pain to the brain. They work as long as the local anesthetic agent is there to disrupt what is called the sodium channel. When it wears out, the pain returns.

General anesthesia is a different animal. The patient loses awareness of any pain but still maintains (hopefully) all vital functions to stay alive. These substances block synaptic neurotransmission. Exactly how these inhalation anesthetics work isn't fully understood even after more than 150 years of use.

Interestingly, when someone goes under general anesthesia, they don't dream. Today's general anesthesia is a science in which different intravenous medications are used in conjunction with inhalation gases to provide the safest and best anesthesia for patients. Just don't ask an anesthesiologist how it really works. If they try to give an answer, they may just be inhaling some of their own gas.

Dr. Peter Weiss has been a frequent guest on local and national TV, newspapers, and radio. He was an assistant clinical professor of OB/GYN at the David Geffen School of Medicine at UCLA for 30 years, stepping down so he could provide his clinical services to those in need when the COVID pandemic hit. He was also a national health care adviser for Sen. John McCain's 2008 presidential campaign.

FOOD AS PREVENTION

Healthy Eating in Early Pregnancy Lowers Risks for Gestational Diabetes



IVAN KRUK/SHUTTERSTOCK

Researchers suggest pregnant women consume a diet of vegetables, fruit, berries, and whole-grain products to help reduce the risk of diabetes.

SARAH COWNLEY

Pregnant women who consume a healthy diet early in pregnancy have a lower risk for gestational diabetes, new research from Finland reveals. The study focused on the prevalence of pregnant women who are overweight or obese.

Obesity is a significant risk factor for pregnant women developing gestational diabetes, and an increasing number of women are overweight or obese. Diet plays an influential role in obesity and the onset of gestational diabetes mellitus.

The study was conducted at the University of Turku and the Turku University Hospital in Finland. It examined the connection between dietary intake and the onset of gestational diabetes in 351 overweight or obese pregnant women.

All participants had their nutrient intake calculated from food diaries and were grouped into two dietary patterns. There was a healthy dietary pattern group and an unhealthy dietary pattern group. The overall quality of diet was indexed with the inflammatory potential noted. The first author of the study, Lotta Paunonen, concluded, "Our research results show that following a healthy diet in early pregnancy reduces the risk of gestational diabetes."

The study clearly showed that a diet that increases the low-grade inflammatory markers in the body was connected to an increased risk of developing gestational diabetes.

Higher consumption of saturated fats was also linked to gestational diabetes. Researchers noted that the intake of satu-

rated fats is known to increase the body's inflammation.

Researchers suggest consuming a diet of vegetables, fruit, berries, and whole-grain products for pregnant women to help reduce the risk of diabetes. Staying away from saturated fats is also particularly important. Mothers who are overweight or obese may benefit from dietary guidance in early pregnancy.

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

The Changing Landscape of Nondairy

New nondairy milks are finding a following, and offer nutritional pros and cons



MARTHA ROSENBERG

You’ve probably noticed it when you’re in the grocery store—nondairy milks are booming. They aren’t just gaining shelf space in the refrigerated section next to dairy milk, they’re also expanding in the dry goods section next to breakfast cereals. And the choices are growing, too.

Today’s nondairy milks include the familiar soy, rice, oat, coconut, and almond milks, as well as milks made from peas, hemp, flax, cashews, hazelnuts, pistachio nuts, walnuts, peanuts, macadamia nuts, pecans, lupin beans, quinoa, garbanzo beans, sesame seeds, tapioca starch, and even potatoes.

What explains the popularity? According to the Cleveland Clinic, many are embracing nondairy milks because of milk allergies, lactose intolerance, vegan lifestyles, and concerns about “milk’s potential health risks of added antibiotics and hormones.” Others eschew dairy milk because of ethical concerns about the dairy industry’s treatment of animals and its impact on the environment, the Food Institute says. Of course, some just prefer the taste of nondairy milks.

COVID-19 may also have accelerated the switch to nondairy milk because of supply issues in procuring dairy milk or the longer shelf life of many nondairy milks, many of which don’t need to be refrigerated until opened. One factor that doesn’t seem to be at play in the boom is price; almost all nondairy milks are pricier than dairy milk, though you can also make some of them at home with a blender and a cheesecloth or nut milk bag.

Nor do calories seem a factor, since nondairy milks can represent both more and fewer calories than dairy milk.

A Sea Change in Beverage Choices
Despite the entertaining “Got Milk” ads, which often feature celebrities, milk sales have been nosediving for years; the latest sales report from the U.S. Department of Agriculture (USDA) notes that total conventional milk products are down 4.7 percent over the previous year. Dairy Business, a dairy industry magazine, reports that sales bumped slightly during stay-at-home orders during the pandemic but are “again falling into the long-term declining trends.” Conversely, nondairy milks now represent a nearly \$3 billion-dollar-a-year industry.

Nondairy milks aren’t just the choice of young urban dwellers; popularity is growing in non-urban settings and among older people, too, reports the marketing site Morning Consult.

“Interest continues to move inland from the urban coasts,” says Keri Szejda, a food technology scientist. She said people in rural areas “have heard of and tried dairy alternatives.” According to CNN, nondairy milks have made such inroads that as many as half of Americans now drink them, including 54 percent of children under 18 and 68 percent of parents.

In fact, the nondairy milk craze is gaining so much steam—and conventional milk sales are cooling so sharply—that the nation’s largest milk producer, Dean Foods, filed for Chapter 11 bankruptcy in 2019

Alternative milk beverages are growing in popularity, offering consumers an ever-growing selection of nutrients and flavors.

According to the Cleveland Clinic, many are embracing nondairy milks because of milk allergies, lactose intolerance, vegan lifestyles, and concerns about ‘milk’s potential health risks of added antibiotics and hormones.’



Most of the nutrients are lost in the process of turning nuts into milk.

blaming “accelerated decline in the conventional white milk category.”

Originally, the dairy industry tried to fight the nondairy milk trend with lawsuits that claimed the term “milk” can legally only refer to dairy milk (similar to the fight over the use of the term “meat”). But after unsuccessful lawsuits, the industry is now characterizing nondairy milks as “imposters” while some dairies are adding nondairy milks to their product lines, just as some meat producers and burger chains have added plant-based meats.

Downsides of Nondairy Milks

In general, the longer a nondairy milk has been available—think soy, rice, almond, and coconut—the more well-known and popular it is. That also means people are looking more closely at any nutritional or environmental consequences.

For example, soy milk has been widely seen as the closest replacement to dairy milk because of its protein content. Dairy offers 8 grams of protein per cup while soy offers 7 to 12 grams per cup. But the effect of soy’s significant isoflavones, plant estrogens known as phytoestrogens, continues to be a subject of controversy.

According to research published in the journal *Frontiers in Neuroendocrinology* in 2010, soy phytoestrogens have been linked to a “lowered risk of osteoporosis, heart disease, breast cancer, and menopausal symptoms ... but many are also considered endocrine disruptors, indicating that they have the potential to cause adverse health effects as well.” There have been several lawsuits about the negative effects of soy filed by U.S. prisoners whose food often has a high soy content because prisons find it more economical.

Another environmental issue is raised with the equally popular almond milk. According to the website *Edible Brooklyn*, almonds are “grown in California, where serious drought conditions are an ongoing issue. A recent study calculated the total water footprint for one California almond averages 3.2 gallons.” Moreover, the site states, the “process of turning the nuts into milk eliminates most of the nutrients,” so the water use isn’t necessarily justified in terms of the food value produced.

Still, as the website *Statista* points out, almond milk’s water toll is only 60 percent of that of dairy milk; one liter of cow’s milk (about a quarter gallon) uses 165.9 gallons in production. Also, water use is only one factor determining the environmental toll. Transportation—how far a nondairy milk travels to its consumers—is also a factor.

Coconut milk has also become a popular nondairy beverage, but there are some possible clouds over it as well. Environmentally, coconut crops, found in tropical areas, encroach on wildlife habitat, and coconut pickers in poorer countries are often exploited and paid less than a dollar a day.

Nutritionally, unlike almost all other nondairy milks, coconut contains a heavy dose of saturated fat that is plentiful in beef, milk, butter, and margarine, and one reason many people avoid dairy milks. Registered dietitian Julia Zumpano says coconut milk’s saturated fat should be kept “at a minimum if heart health is a concern.”

Protein and Other Nutrients

Many nondairy milks are fortified with ingredients found in dairy milk such as calcium, vitamin B12, and potassium, but if you’re seeking high protein content, prepare to be disappointed. Soy milk may rival dairy milk’s 8 grams of protein, but few other nondairy milks come close. For example, flax milk contains zero protein per cup; coconut milk has only 0.5 grams of protein per cup, and rice milk only 0.7 grams of protein per cup.

While you would think nut milks such as almond, cashew, hazelnut, walnuts, or macadamia would have high protein since the nuts themselves clearly do, their protein content isn’t impressive. In fact, the highest protein content found in the nut milks commonly found in grocery stores is in peanut milk, which has 6 grams of protein per cup.

According to *Healthline*, a cup of hazelnut or walnut milk offers a disappointing 3 grams of protein, macadamia nut and almond milk only 1 gram of protein, and cashew milk less than 1 gram of protein. Pecan milk also only offers 3 grams of protein.

Pistachio milk offers 6 grams of protein per cup, sesame seed milk 6.7 grams of protein per cup, and milk made from lupin beans, a legume, may offer an amazing 26 grams of protein per cup, but these milks have yet to earn an established place on grocery store shelves.

Of course, protein isn’t the only valuable nutrient found in nondairy milks. Though low in protein, cashew milk, for example, offers significant iron and fiber. Oat milk, also not a protein giant, offers beta-glucan, a soluble fiber with possible heart health benefits. “Beta glucan forms a gel-like substance within your gut that can bind to cholesterol and reduce its absorption. This may help lower blood cholesterol levels, especially levels of LDL (bad) cholesterol, which have been linked to heart disease,” says *Healthline*.

Finally, the benefits of pea and hemp milks are getting new attention. Pea milk not only has about 7 grams of protein per cup, it contains desirable omega-3 fatty acids that neutralize inflammation, says *CHI* health. Omega-3 fats reduce triglycerides and slow the buildup of plaque, says the government-affiliated *Medline Plus* website.

Hemp milk also offers omega-3 fats as well as 4 grams of protein, Vitamins A, D, and B12, iron, phosphorus, and zinc according to *WebMD*.

Clearly, the number of nuts and grains that can become nondairy milk is limited only by our imagination. And whether we are seeking a standalone beverage, something to add to our coffee or morning cereal, or a dietary/calorie change, there are many good options.

Martha Rosenberg is a nationally recognized reporter and author whose work has been cited by the Memorial Sloan Kettering Cancer Center, Mayo Clinic Proceedings, Public Library of Science Biology, National Geographic and Wikipedia. Rosenberg’s FDA exposé, “Born with a Junk Food Deficiency,” was widely praised and established her as a prominent investigative journalist. She has lectured widely at universities throughout the United States and resides in Chicago.

MINDSET MATTERS

Got Health Goals?

Research-based tips for adopting and sticking to new healthy lifestyle behaviors

RYAN RHODES

New Year’s resolutions are an annual ritual of setting intentions for self-betterment. Health behavior goals—such as improving healthy eating and physical activity—are among the most popular resolutions. Unfortunately, failing to stick to those new goals is so common that it has become cliché.

This is backed by research evidence. Studies have repeatedly shown that over half of people who form health behavior intentions fail to enact them.

There are caveats to this statistic, of course. Short-term health behavior goals are more likely to be enacted than long-term, and those who are returning to a pattern of behavior they used to practice are more likely to follow through with their intentions compared to those who are adopting a new health behavior.

It’s important to note that having an intention to change behavior is an essential first step. Few people regularly engage in healthy behaviors without those initial good intentions. Sticking to health behavior goals, however, is the critical factor.

Why Do We Struggle With Health Behavior Goals?

Self-regulation is an extensive research topic in psychology. As a professor of health psychology, my research focuses on understanding the “intention-behavior gap” in physical activity, and testing interventions that may help close this gap.

My own research and studies from my colleagues have shown evidence that difficulty in following through on intentions often comes from two sources. The first is strategic challenges, which are flawed approaches to thinking about goals and behavior. The second is basic human tendencies when faced with what psychologists call approach/avoidance conflict: when something is appealing and unappealing at the same time.

In terms of strategic challenges, the details of the goal itself can be one of the first indicators of whether someone will struggle. For example, the intention to engage in physical activity is often based on desired long-term outcomes (such as weight control, fitness, and reducing the risks of chronic disease)

without due consideration of the time and effort required to perform regular physical activity itself.

Another key strategic challenge is the failure to consider multiple goals, which is likely to underestimate the resources needed to perform other behaviors. Juggling multiple goals is one of the prime reasons why new intentions are often abandoned: New behaviors like exercise must compete with or coincide with all the other things someone needs or wants to do.

Contemporary research also shows that people may have automatic tendencies that, on balance, tend to derail health behaviors. For example, people have a basic underlying tendency to approach experiences that are pleasant and avoid experiences that are unpleasant.

Physical activity can be an adverse experience for many because it requires the body to stop resting and experience some exhaustion and discomfort. This negative experience during the activity is more predictive of future behavior than the positive feelings after one completes a bout of physical activity.

Effective Strategies for Sticking With Intentions

When we understand why we’re not enacting our new health behavior goals, it can help in developing counter-measures. Research in this area is ongoing, with diverse approaches. Strategies can be prospective (i.e. developed before enactment of the goal) or reactive (i.e. used at the point of enactment decision) in their implementation.

To overcome strategic challenges, research has shown the effectiveness of developing detailed plans, such as formulation of what you’re going to do, how, where, and when you’ll do it, followed by contingencies if there’s a conflict with your plan.

Monitoring your goals regularly is also one of the most successful approaches to keeping a behavior on your radar.

In terms of our more automatic tendencies to disrupt health behavior intentions, a focus on the behavioral experience itself is critical. Making the health behavior as pleasant, convenient, and meaningful to you as possible, and performing it at times when you have the most energy (to fight temptations), will help increase the probability of following through on good intentions.

However, in times when you’re faced with a strong urge to abandon your health goal for a more immediately gratifying diversion,



There are strategies you can use to help you stick to a new healthy habit despite internal resistance.

The details of the goal itself can be one of the first indicators of whether someone will struggle.

this is when you want to take a moment to acknowledge your feelings, but enact your valued intentions.

It’s important to keep in mind that most of the health changes people are trying to make with these good intentions are lifestyle behaviors. As such, a few slipped days are inconsequential to the overall goal.

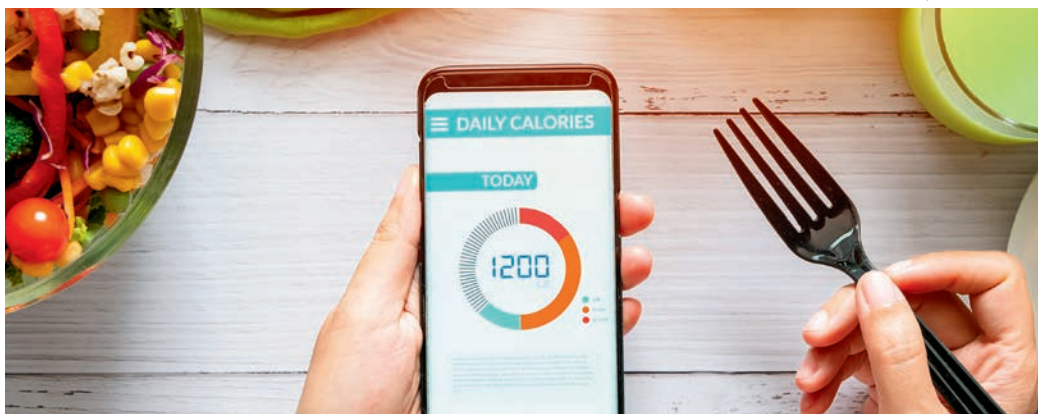
There’s also theory and evidence that self-regulation strategies like the ones above may become less necessary over time. This is because people begin to form habits from repeating these actions, as well as a sense of satisfaction or identity from continual practice that enables them to take ownership of the behavior and categorize themselves in the role. So sticking to those intentions in the short term will likely make it easier to continue over a lifetime.

Ryan Rhodes is a professor in health psychology at the University of Victoria in Canada. This article was first published on The Conversation.

MADE TO MOVE

You Can’t Outrun Your Fork

But that doesn’t mean exercise can’t help you lose weight or change your diet



Regular exercise helps people resist the temptation of junk foods by improving brain function and cognition.

tisements or actual food items (for example, chocolate bars in the checkout lane at grocery stores), brain activity in regions associated with reward processing increases. This reward-related brain activity results in increased food cravings and the drive to eat, even when we’re not hungry.

A brain region known as the dorsolateral prefrontal cortex (dlPFC) helps us limit the consumption of ultra-processed foods by decreasing activity in these reward regions to reduce food cravings and by initiating the cognitive processes needed to exert conscious control over food choices.

When using functional brain imaging to examine brain responses, neuroscientists have shown that increased activity in the dlPFC helps us control food cravings and select healthier food items by decreasing activity in the reward regions of the brain. Conversely, when activity in the dlPFC is decreased, we have a harder time resisting the temptation of appealing junk foods and will consume more snack foods.

Exercise Can Help Regulate Food Consumption

Exercise boosts brain plasticity, which is the brain’s ability to adapt its functions based on new input. Boosting brain plasticity makes it easier to change our habits and lifestyle. More and more evidence has shown that regular

physical activity can increase prefrontal brain function and improve cognition.

These exercise-induced increases in prefrontal brain function and cognition make it easier to regulate or limit our consumption of junk foods. And we can see the effects with as little as 20 minutes of moderate-intensity exercise.

I’ve shown that people consume less ultra-processed food such as chips or milk chocolate after 20 minutes of moderate-intensity exercise. (In our study, this was a brisk walk at around 3.5 miles per hour on a treadmill with a slight incline). Research has also shown that both a single session of high-intensity interval training or a 12-week high-intensity aerobic exercise program can reduce preferences or appetite for high-calorie junk foods. Similar effects are seen when people engage in moderate aerobic exercise or strength training.

The key takeaway here is that regular exercise can reduce how much people want junk foods and improve their ability to resist the temptation of these appealing foods by improving brain function and cognition. This makes it easier to limit the consumption of these foods to achieve healthier eating and weight loss goals.

Exercise Also Helps Reduce Stress

When people are stressed, the body releases a hormone called cortisol, which activates

what is known as the fight-or-flight response. When cortisol levels are high, the brain thinks it needs more fuel, resulting in increased cravings for sugary or salty ultra-processed foods.

Participation in regular exercise or a single bout of exercise reduces perceived stress levels and cortisol levels. Exercise also helps reduce unhealthy drink and food consumption when people are stressed.

Stress can also affect how the brain functions. Research has shown that stress can result in decreased activity in the prefrontal cortex and increased activity in reward regions of the brain when looking at pictures of food. This makes it harder to resist the temptation of appealing junk foods.

By offsetting the impact of stress on prefrontal brain function, exercise makes it easier to maintain your goals of healthier eating or reducing junk food consumption. Twenty minutes of brisk walking can help the prefrontal cortex recover from temporary changes in activity, like the ones seen when people are stressed.

Next time you’re feeling stressed, try going for a brisk 20-minute walk. It could prevent you from stress-eating.

What Exercise Is Best?

Researchers are often asked what the best exercise is and how much exercise to do.

At the end of the day, the best exercise is one you enjoy and can sustain over time. High-intensity interval training (HIIT), aerobic exercise, meditation and mindfulness, yoga, and strength training are all effective in helping improve diet by targeting prefrontal brain function and reducing stress.

If you’re beginning a new exercise routine this new year, ease into it, be kind to yourself, listen to your body, and remember that a little goes a long way.

Cassandra J. Lowe is a postdoctoral fellow at The Brain and Mind Institute in the department of psychology at Western University in Canada. This article was first published on The Conversation.

Tips for a Healthier 2022

These 5 simple practices can help you sustain an upward trend in the year ahead



ALL IMAGES BY ANTONY MAXIM/SHUTTERSTOCK

Continued from Page 1

Don't worry, you aren't alone. In fact, you're in the overwhelming majority.

There's no doubt that technology is a powerful tool that can improve the lives of the people using it.

Unfortunately, as many of us are discovering, it's difficult to find the balance between using technology as a tool or succumbing to it as a crutch. This balance has been especially elusive since the emergence of COVID-19, simply because technology for many of us, has been the only way we've had to communicate and stay connected. There's a growing body of evidence that

too much screen time really isn't good for our physical, mental, or emotional health. There are even studies that show that too much time spent on social media can increase the severity of things such as anxiety and depression, especially in young people whose developing brains are particularly sensitive.

Disconnecting from our cellphones, tablets, and computers helps us manage our addiction to social media, clears the mind, increases focus, lowers stress levels, and encourages us to build real, human relationships. It improves our quality of life, increases our energy by allowing us to recharge, benefits our sleep, and improves

A conscious effort to simplify has a huge impact on improving physical health, mental health, and our ability to live a happier, more contented life.

our interpersonal communication.

Things such as body language, facial expressions, and all the subtleties that we observe and feel when we talk in person are designed to make sure that we communicate clearly. These features of face-to-face connection strengthen the bonds between us. This important information is lost when we communicate online.

In eastern medicine, digital stimuli, as well as all other stimuli, affect the main organs of digestion: the spleen and the stomach. These organs digest not only food and drink, but everything that comes in through our sensory organs as well. Being mindful and focusing on one thing at a time are critical factors for a healthy body and an uncluttered mind.

A good rule of thumb is to disconnect from phones, tablets, and computers for an hour or two before bed and sleep in a dark, quiet room devoid of electronics. This allows our nervous systems and brains to relax in preparation for sleep. Sleep is how our bodies rest and repair and how our minds process all the stimuli from the previous day. Giving yourself more time in quiet, dark spaces before bedtime will help you have a more restful, rejuvenating sleep.

Meditate

For some of you, the word "meditate" may conjure images of monks sitting alone on mountain tops. But rest assured, the meditation I'm talking about doesn't require you to shave your head, wear orange, and move to the Himalayas. Although this is where meditation has some of its origins, it doesn't need to be all-encompassing, and it can be practiced practically for those of us living



Meditation has some benefit for all who do it, without the negative side effects.

Creativity Is Self-Care

Creative expression nurtures the spirit and heals the mind and body

We are all creative.

People who believe they're not creative wrongly assume that if they don't have a creative outlet or are not gifted in a particular artistic expression, they're not creative. In truth, creativity is a human attribute gifted to each of us, though some have cultivated it more fully while others have abandoned it.

Herbert Lui said: "That's why children are creative; they haven't had years of labels applied and stuck to them yet. They don't have a role to play, and thus, just by existing and expressing or playing, they are being creative. In that sense, everybody was a creative person."

Creativity is an often-overlooked aspect of total health: It is self-care. A person's creative outlet may be elusive because they haven't tried new things to find their perfect creative medium. However, exercising our creativity is a significant contributor to our mental health and well-being. Being

innovative, which is often at the heart of creativity, makes us happy.

Therein is a clue: What makes you happy? What do you like to do or make? Creativity is fueled by curiosity and passion.

"The more you create, the more you discover your likes and dislikes. You realize your desires more fully and develop your own ideas, style, and technique. Your work reflects who you really are," writes Alisha Gratehouse on her creativity-focused blog. The benefit of a creative outlet is that you gain a dedicated practice that is unique to you and that teaches you more about yourself and life. It's a vehicle for self-discovery and expression of your true personality, no matter what acknowledgment it may or may not get from others. Your creative endeavor favorably affects your brain and body with many benefits.

Benefits of Creativity

Human beings have enjoyed the benefits of

creativity for millennia, whether that be in the utilitarian knitting of needed sweaters, or the arguably more refined art of composing orchestral music. Whatever the outlet may be, creative practice imparts its own rewards.

Creativity isn't reserved for artists and performers. Landscaping, knitting, home decor, and journaling all offer an outlet for creative expression.

Increased Feelings of Well-Being

When asked what they like about having a

creative project or hobby, many people say it makes them happy, they love doing it, and they enjoy learning new things about it. Maybe they don't know why it makes them feel so good, but they know it does.

Your creative medium provides a break from the everyday routine and a way to recharge after a tough day. It also helps to build and maintain a positive self-image. Your creative medium offers a chance for you to grow your skills, which is always a plus for your sense of well-being. Learning is a delightful way to gain a sense that we're improving.

Reduced Risk of Chronic Illness

A long-term benefit of creativity is that it reduces the risk of chronic diseases. One of the key contributors to chronic illness is stress, which triggers a biochemical cascade in the body. This is due to the fight-or-flight response, which gears the body to deal with immediate threats and comes

with those aspects of ourselves, learn to

tweak our language, and choose how to respond."

The idea of including mindfulness in your life, in a way, is to remove yourself from the chaos of everyday life, even for just a minute or two. This allows you to focus on the present moment and simply observe what's happening around you, including your thoughts and feelings. Many of our struggles are simply due to how we perceive and judge what we experience, think, and feel. If we're able to gain some calm and clarity and instead of reacting, simply observe ourselves in an objective way, we can get to a place where we can actually choose how to respond.

Once we've acquired this skill, we're better able to make positive changes about how to interpret both external (what's happening in the world around us) and internal (our thoughts and feelings) information. This is a critical step in gaining a better handle on what we're thinking and feeling.

An example of how to put mindfulness into practice is to take an activity that you do every day, such as washing dishes. When you're standing at the sink, doing the dishes, really focus on what you're doing. Wash each plate slowly, watching the soap bubbles create shapes over each surface. Notice the smell of the soap and how the light may be filling the kitchen. Wash the dishes with a relaxed, but focused intention. Start with one activity and add more as you're better able to focus your attention. With time, you'll find that it not only gets easier, but that it's actually intensely enjoyable.

Simplify

Society tells us that we need to always be

wanting, doing, and achieving. As a result, our lives seem to grow more complex with every passing year. Instead of more, more, more, my motto has always been less, less, less. It takes work, but in my experience, a conscious effort to simplify has a huge effect on improving physical health, mental health, and our ability to live a happier, more contented life.

Here are some ways you can simplify your life. This is by no means an exhaustive list, but it will hopefully give you some ideas and get the simplicity ball rolling.

Declutter: Find a place for all those "things" that are sitting on counters, tables, and shelves. This is a great way to create space in your home and in your psyche. You'll feel the difference it makes.

Organize: Create routines for your mornings and evenings, organize your finances, plan your meals, and create a daily schedule for yourself that includes time to recharge.

Purge: Periodically go through your possessions and get rid of anything that you don't really need. This is liberating, and it creates space in your external and internal world.

Say 'No': Be clear about your boundaries and prioritize your time. Try to only take on commitments that you know you're able and willing to fulfill. A 'no' doesn't have to be forever, but it can be a great way to free up time you need for more important things.

Care for Yourself: Because we

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Care for Yourself: Because we

The idea of including mindfulness in your life is to, in a way, remove yourself from the chaos of everyday life, even for just a minute or two.

People who have a strong social support network of friends and family are healthier, happier, and enjoy a longer life.



all have a lot to do on any given day, we also need to take care of ourselves. Make time and space in your life to eat nutritious meals, recharge your soul, and get enough sleep. You're no good to anyone else unless you're healthy, rested, and in good spirits.

Simplifying our lives can also help us all create a more beautiful and more peaceful world.

Find Community

Perhaps the biggest wound we've suffered since the emergence of COVID-19 has been our loss of human connection. Lockdowns and quarantines have isolated us from each other at great cost to our mental, emotional, and spiritual health. Research has proven that the quantity and quality of our relationships increase our lifespan and quality of life. People who have a strong social support network of friends and family are healthier, happier, and enjoy a longer life. The same research shows that a lack of social ties is associated with depression, cognitive decline, and increased mortality.

Finding a way to nurture relationships through a pandemic definitely has its challenges, but if you know that those relationships are an integral part of your health, you can add them to your health care regimen. If you do, you'll notice an improvement in all areas of your life. Humans are social beings, and having strong, loving, and supportive relationships is just as important as food, exercise, and sleep.

Schedule "coffee" with friends a few times per week, even if you have to do it over Skype or Zoom. Try to be able to see each other so you benefit from all the subtleties body language offers us, such as facial expressions, smiles, and laughter. You and your friend will reap the benefits.

As we start the year 2022, no one knows what the future holds. We can only try to create the best life possible with the tools available to us. There's nothing more worthy of our attention. With that, I wish you and the ones you love a happy and prosperous 2022. Keep adding to your toolkit of life skills and practices so that you're better able to build the life that you want and deserve.

Emma Suttie is an acupuncture physician and founder of Chinese Medicine Living—a website dedicated to writing about how to use traditional wisdom to live a healthy lifestyle in the modern world. She has lived and practiced in 4 countries and now works through her consulting practice Thrive Consulting. She is a lover of martial arts, the natural world, and a good cup of tea.

at the expense of the rest and recovery functions of the parasympathetic nervous system. A review article published Behavioral Sciences in 2018 looked at 37 previous studies and found that creativity-based therapies delivered "significant reduction of stress in the participants due to interventions of one of the four arts modalities." Those modalities were art, music, dance/movement, and drama therapy.

Decreased Anxiety

A creative endeavor allows us to work out our thoughts and feelings. Creative writing works exceptionally well here. Painting and sculpting enable us to work out our feelings through storytelling and imagery when we might be unable to give them verbal expression. Music also calms the brain and helps us gain emotional balance, probably because it deals with multiple parts of the brain. From another angle, the stress-reducing impacts of creative expression are a direct counter to anxiety.

Higher Cognitive Function

Creativity affects the brain with a positive impact on its cognitive abilities. A study at the Mayo Clinic showed that middle-

aged and older adults who had a creative outlet such as woodworking or painting had a lower than average risk of cognitive decline. These activities require problem-solving and critical thinking skills that older adults need to maintain for independent living. It's just super impactful for the brain.

Effective Self-Care

Be sure to find your best creative outlet and give yourself the gift of well-being while doing something you enjoy. Your creative practice will also help you feel more engaged in your job, add more excitement to your daily routine, and help to develop your mindset as a creative thinker.

If you need help finding your creative habit, consider those things that inspire you. Maybe it's something you enjoyed in childhood. What made you happy then might be what you need to revisit. I recently rediscovered my childhood hobby of rock collecting. It brings me the great joy of discovery and the delight of creativity as I create beauty with them.

Your creativity must be a priority, something you schedule and document. Your creativity is an expression of who you are. Enjoy your creative self!



RIDO/SHUTTERSTOCK

Creativity is a human attribute gifted to each of us, though some have cultivated it more fully while others have abandoned it.

SERGEY MALKOV/SHUTTERSTOCK



Life will deliver hardship, that's guaranteed. How you deal with it is the variable that changes everything.

Embracing the Art of Resilience in 2022

These practices will help you weather the inevitable storms ahead

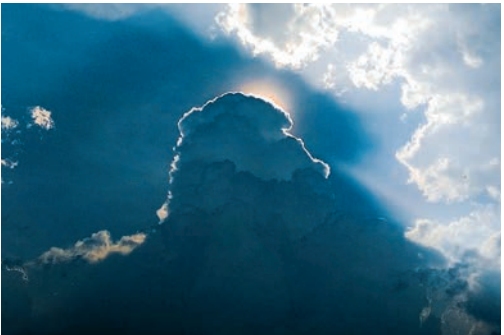
ANN LOUISE GITTLEMAN

Resilience is going to be an overriding theme for 2022. The ability to bounce back from anything—from the ordinary to the extraordinary—is truly an art. It's also a science. So how do we become more resilient?

First, let's understand what it means. Resilience isn't a genetic trait, it's a learned quality. It is a set of coping mechanisms. Research has found that this quality is determined by the people we surround ourselves with, how we take care of ourselves and each other, and the steps we take to find meaning and purpose in our lives, in our relationships, and in the events that happen to us and ultimately define us.

When was the last time you had a traumatic experience? How did you cope with it? If you're a strong, resilient person, you've learned the coping mechanisms needed to help overcome the trauma you've faced. If you've felt stuck and anxious or depressed for longer periods of time than reasonable, there are ways you can build resilience. It's in your control.

KAUSTUBH JOSHI/PEXELS.COM



In these uncertain times, try to find the silver lining. Resolve to find lessons for self-improvement in any situation.

Our overall happiness doesn't simply come from our circumstances, but much more so from our responses to them, and resilience is part of that. There are strategies you can implement now that can help you to bend, not break from the stressful situations that happen to us. Are you ready to flex your resilience muscle?

Eat healthy, high-quality meals. It may seem like the last thing to consider when you are traumatized or grieving, unless you already know you're a stress eater, but in hard times, we often go for the wrong food choices. Either way, your body needs fuel to keep it nourished and strong. Healthy food will heal and give your brain the nutrients it needs to think clearly and find your path moving forward.

Exercise daily to get your endorphins. Nothing quiets negative thinking like going out for a walk in the forest or along the beach. Research has proven that regular exercise improves your thinking by boosting your mood and lifting you from those feelings of depression.

Ask for help. If it's your perspective that needs reshaping, talk to a friend, family member, or a therapist. Being strong and resilient doesn't mean navigating through trauma or grief alone.

Learn to process your emotions. Resilient people need to have space to process emotions, but they don't wallow in them. They stay busy by working out or going to lunch with a friend, and they stay connected.

Write down your feelings. Write your thoughts down to help make sense of them.

Researchers have found that writing down how you feel helps sort through those feelings better than keeping them to yourself.

Write down steps to take. Write down not only how you're feeling, but also write down steps to take that will help you to stay focused on positive tasks.

If you've felt stuck and anxious or depressed for longer periods of time than reasonable, there are ways you can build resilience.

Set daily goals. Look for a path forward by doing one positive thing each day and build up to doing more on your list. Even if you feel paralyzed from the trauma, find a way to overcome it by setting daily goals and making them happen. And be flexible with those goals. Resilient people are flexible and willing to move on to game plan B if A doesn't work.

Sleep on it. It's vital to your health to get enough rest each night. When you're resting, your brain sorts through and files what you were going through the day before, and it allows you to wake up with a fresh perspective.

Tap into gratitude. It may seem futile at first, but having an attitude of gratitude is worth a pot of gold. When you make a list each day of the things you're grateful for,

even though it's hard to see through the smoke and fog at the moment, you'll be amazed at how that clears when you find your grateful heart.

Breathe..... Taking a deep breath can cleanse your heart and soul like nothing else can. Studies suggest that practicing conscious breathing on a daily basis reduces stress and anxiety and changes the electrical activity in the brain. This makes you feel calmer and more alert. Focus on becoming clear and calm in your thoughts and before you know it, you will be.

Ann Louise Gittleman holds a master's in nutrition education from Columbia University, and is certified as a nutrition specialist by the American College of Nutrition. She also has a doctorate in holistic nutrition and has served as the chief nutritionist of the Pediatric Clinic at Bellevue Hospital and is the former director of nutrition at the Pritikin Longevity Center in Santa Monica, Calif. This article was originally published on AnnLouise.com

COTTONBRO/PEXELS.COM



Make a habit of feeling and processing your emotions instead of pushing them away or reaching for the nearest distraction.

OLENA YAKOBCHUK/SHUTTERSTOCK



We can prepare ourselves for inevitable hardships by introducing stressors.

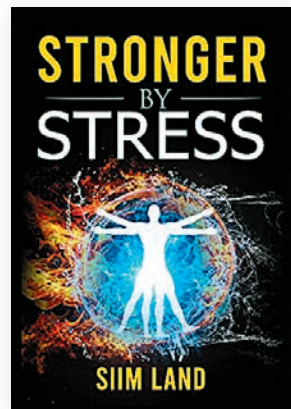
Using Stress to Make You Stronger

When we stress ourselves in the right ways, and in the right amounts, we become antifragile

JOSEPH MERCOLA

As we gain deeper insight into the metabolic pathways that turn food and air into the electrochemical miracle of the human body, we also learn ways to maximize our physiological potential.

That insight becomes particularly relevant amid a global pandemic and the widespread prevalence of chronic disease. The torrent of stress we encounter each day can trigger a low-grade fight-or-flight response via the sympathetic nervous system and



'Stronger by Stress: Adapt to Beneficial Stressors to Improve Your Health and Strengthen the Body'

Author
Siim Land

leave us increasingly fragile. Fortunately, we can also find ways to use certain kinds of stress to strengthen ourselves.

Antifragility is a term coined by economist Nassim Taleb to describe a state that is the opposite of fragility. Antifragility describes how stress makes you stronger rather than breaking you down. Siim Land's latest book, "Stronger by Stress: Adapt to Beneficial Stressors to Improve Your Health and Strengthen the Body," which came out in July 2020, reviews the really important concepts of hormesis and antifragility.

Hormesis describes how low doses of a stressor or toxin can have beneficial results even though higher doses would hurt us. An example would be how jumping around can stress the bones and make them stronger, even though falling from a height can break them. This phenomenon is at the core of antifragility.

"[Antifragility] isn't precisely the same thing as robustness or resilience," Land says. "Something that is robust is something like a piece of stone or a metal. You can heat it, you can drop it on the ground.

It's not going to break, but it's going to stay the same, it's not going to change, whereas something that is antifragile is going to gain from the stress.

"The book itself was meant to create more resilient people in the face of these unavoidable challenges of life, because you can't really avoid them. You can't create this bubble society where everything is perfect. We all come across different kinds of stressors all the time."

Land warns that being unfit or lacking key nutrients, such as vitamin D, which is critical to fighting off COVID, will leave you prone to stress. In that state, even small stressors like traffic are going to seem significant. The result: an overactive sympathetic nervous system.

"On the other hand, if your body has been exposed to the right amount of stress at the right time, then it has also built up this higher level of stress adaptation and resilience. So, the small stressors are becoming literally meaningless. You have a bigger capacity to face even the larger stressors."

Continued on Page 12

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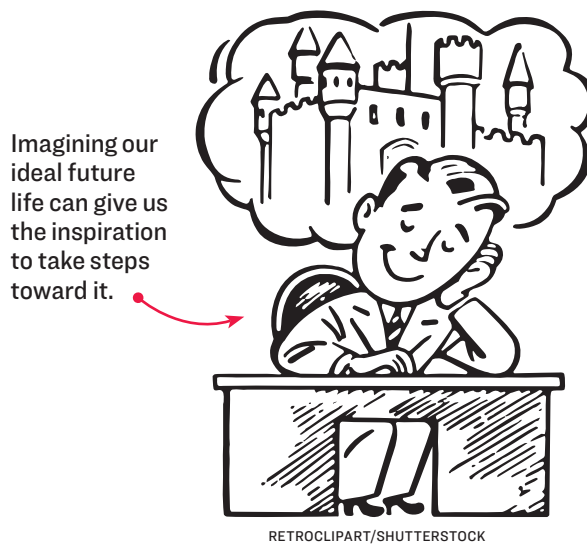
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THE EPOCH TIMES



Imagining our ideal future life can give us the inspiration to take steps toward it.

RETROCLIPARTY/SHUTTERSTOCK

In the New Year, Imagine Your Best Possible Life

Reflecting on your ideal future helps you feel more optimistic and intentional

JILL SUTTIE

When I was in my late 20s, I was living in Santa Barbara, California, and wondering about the course of my life. I had a job that was interesting enough, but it came with a terrible boss who actively sabotaged my work.

I'd been in a few serious relationships, but none of them panned out. I'd enjoyed working at a university, but hoped to use my

Ask yourself, what is the best possible life you can imagine?

science background more and, perhaps, tap into my creativity. I wanted something different, possibly even a new town. But I wasn't sure exactly what I wanted or how to get there.

That's when I came across the book "Creative Visualization," and, for some reason, it spoke to me.

Continued on Page 15

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TRUTH AND TRADITION

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The results with mouthwashes add to the findings of an existing study showing that certain types of oral rinses could inactivate SARS-CoV-2.

Can Mouthwash Kill the Coronavirus?

Researchers test baby shampoo, peroxide sore-mouth cleansers, and mouthwashes on human coronavirus

BARBARA SCHINDO

Certain oral antiseptics and mouthwashes may offer a way to inactivate human coronavirus, according to a new study. The findings indicate that some of these products might help reduce the viral load, or amount of virus, in the mouth after infection and may help reduce the spread of SARS-CoV-2, the coronavirus that causes COVID-19. Researchers tested several oral and nasopharyngeal rinses in a laboratory setting for their ability to inactivate human coronaviruses, which are similar in structure to SARS-CoV-2. The products evaluated included a 1 percent solution of baby shampoo, a neti pot, peroxide sore-mouth cleansers, and mouthwashes. The researchers found that several of the nasal and oral rinses had a strong ability to neutralize human coronavirus, which suggests that these products may have the potential to reduce the amount of virus spread by people who are COVID-19-positive. "The products we tested are readily available and often already part of people's daily routines," said Craig Meyers, professor of microbiology and immunology and obstetrics and gynecology at Penn State. Meyers and colleagues used a test to replicate the interaction of the virus in the nasal and oral cavities—major points of entry and transmission for human coronaviruses—in the rinses and mouthwashes.

The researchers found that several of the nasal and oral rinses had a strong ability to neutralize human coronavirus.

They treated solutions containing a strain of human coronavirus, which served as a readily available and genetically similar alternative for SARS-CoV-2, with the baby shampoo solutions, various peroxide antiseptic rinses, and various brands of mouthwash. They allowed the solutions to interact with the virus for 30 seconds, one minute, and two minutes, before diluting the solutions to prevent further virus inactivation. The outer envelopes of the human coronavirus tested and SARS-CoV-2 are genetically similar, Meyers said, so the research team hypothesizes that exposure to the solution may inactivate a similar amount of SARS-CoV-2. To measure how much virus was inactivated, the researchers placed the diluted solutions in contact with cultured human cells. They counted how many cells remained alive after a few days of exposure to the viral solution and used that number to calculate the amount of human coronavirus that was inactivated as a result of exposure to the mouthwash or oral rinse that was tested. The 1 percent baby shampoo solution, often used by head and neck doctors to rinse the sinuses, inactivated greater than 99.9 percent of human coronavirus after a two-minute contact time. Several of the mouthwash and gargle products also were effective at inactivating the infectious virus. Many inactivated greater than 99.9 percent of the virus after only 30 seconds of contact time and some inactivated 99.99 percent of the virus after 30 seconds. The results with mouthwashes are promising and add to the findings of a study showing that certain types of oral rinses could inactivate SARS-CoV-2 in similar experimental conditions, Meyers said. In addition to evaluating the solutions at longer contact times, the researchers studied over-the-counter products and nasal rinses not evaluated in the other study. As a next step to expand on their results, the researchers will design and conduct clinical trials that evaluate whether products such as mouthwashes can effectively reduce viral load in COVID-19-positive patients, Meyers said. "People who test positive for COVID-19 and return home to quarantine may possibly transmit the virus to those they live with," said Meyers, a researcher at Penn State Cancer Institute. "Certain professions including dentists and other health care workers are at a constant risk of exposure. Clinical trials are needed to determine if these products can reduce the amount of virus COVID-positive patients or those with high-risk occupations may spread while talking, coughing, or sneezing. Even if the use of these solutions could reduce transmission by 50 percent, it would have a major impact." Future studies may include a continued investigation of products that inactivate human coronaviruses and what specific ingredients in the solutions tested inactivate the virus. The results appear in the *Journal of Medical Virology*. Additional coauthors are from Brigham Young University and Penn State.

Mouthwash and nasal sprays are accessible and already a common part of many people's routines.

12 Intervention Trials Show Vitamin C Works for COVID-19

This safe, inexpensive, and essential vitamin has scientific credentials but remains unused or prohibited

Most people know that vitamin C supports the immune system. This finding is backed up by several studies and yet hospitals rarely use it to treat COVID-19. Indeed, a review of 12 studies, including five "gold standard" randomized controlled trials, shows that this simple vitamin saves lives when given in the right dose. The review, which was published in the journal Life, was carried out and funded by VitaminC4Covid, a consortium of vitamin C experts including Dr. Marcela Vizcaychipi from the Faculty of Medicine at London's Imperial College, Associate Professor Anitra Carr, who heads the Nutrition in Medicine group at the University of Otago, and Dr. Paul Marik, chief of the Division of Pulmonary & Critical Care Medicine, Eastern Virginia Medical School. The studies show that COVID-19 patients have depleted vitamin C levels, often to the level found in scurvy. In patients with serious pneumonia, a depleted vitamin C level greatly increases the risk of widespread internal organ damage and death. They need substantial doses of vitamin C to recover and survive. Vizcaychipi, who heads research in intensive care medicine at the Chelsea and Westminster Hospital in the United Kingdom, has been giving COVID and non-COVID patients in its intensive care units up to 6 grams (6,000 mg) of vitamin C intravenously. The dosage is dependent on the severity of the disease and the amount needed to correct a deficiency, as indicated by vitamin C urine test sticks. "Vitamin C is certainly one of multiple factors that contributes to better outcomes and speed of recovery. It should be standard practice. We have not had any safety issues at all," Vizcaychipi says. In the United States, a group of medical doctors, members of the Frontline COVID Critical Care Alliance (www.flccc.net) have more than halved mortality in their ICUs using the MATH+ protocol of steroids (methylprednisolone), vitamin C (ascorbic acid), vitamin B1 (thiamine), vitamin D, and anticoagulants (heparin). This protocol was pioneered by Drs. Paul Marik, Pierre Kory, and Joseph Varon, a critical care expert recognized by the United Nations for his life-saving work. Currently, Marik, director of the intensive care unit at Sentara Norfolk General Hospital, is being prohibited from using this safe and effective life-saving protocol by Sentara Health on the false grounds of a lack of evidence. He is suing them. "This case is about doctors, having the ability to honor their Hippocratic Oath, to follow evidence-based medicine, and to treat our patients the best we know how.

LEONORI/SHUTTERSTOCK
It's an antioxidant, an anti-viral, and an anti-inflammatory with no reported adverse events in published clinical trials. So why not give it to COVID patients?

Studies show that COVID-19 patients have depleted vitamin C levels, often to the level found in scurvy.

I refuse to watch another patient die from COVID-19 knowing that I was not allowed to give them proven treatments that could have saved their life." According to the review, the 12 clinical trials show that "intravenous vitamin C may improve oxygenation parameters, reduce inflammatory markers, decrease days in the hospital, and reduce mortality, particularly in the more severely ill patients." What is remarkable about vitamin C is that it's an antioxidant, an anti-viral, and also anti-inflammatory. It's an impressive three-in-one defender. Not one adverse event has been reported in any published vitamin C clinical trials in COVID-19 patients. The review also shows that high doses of oral vitamin C taken upon infection may keep people out of the hospital because it increases their rate of recovery. According to Carr, "Oral doses of 8 grams per day have been shown to increase the rate of recovery from symptomatic infection by 70 percent. For more critically ill patients, trials using doses of 6-24g a day intravenously have shown positive benefits in terms of increased survival, and reduced hospital stay, improved oxygenation, or reduced inflammation." It takes 20 oranges to provide a total of only one gram of vitamin C, so these doses require supplementation. The review includes several studies showing that "patients with severe respiratory infections have depleted vitamin C status, with the prevalence of deficiency increasing with the severity of the condition." In one study, vitamin C levels predicted who would or wouldn't survive. Plasma levels of vitamin C were reported to be very low in 70 to 80 percent of COVID patients. What is clear is that several grams, not just a glass of orange juice, are needed to correct severe vitamin C deficiency. For over a year, the VitaminC4Covid team has been calling on government advisors to carry out a proper review of the evidence for vitamin C, in order to inform the public and medical profession. Vitamin C is safe, inexpensive, available, and proven to work. You are invited to refer to www.vitaminC4covid.com/recommendations for detailed guidance on what to take for prevention, for early treatment, if severe and hospitalized, and if in the intensive care unit. The ORTHOMOLECULAR MEDICINE NEWS SERVICE is a wire-service-style news feed directed to members of the press, radio and TV news media. Republished from Greenmedinfo.com

Research Suggests Sucralose Won't Help You Lose Weight

LISA ROTH COLLINS

Does the nonnutritive, no-calorie sweetener sucralose really help you lose weight? Many people use low- or no-calorie sweeteners because they want to avoid the calories that natural sugar, aka sucrose, provides. How does sucralose compare with sucrose? Scientists have explored these and other questions in numerous studies, the most recent of which appeared in the JAMA Network Open. First, however, let's learn a little about sucrose and sucralose.

There is evidence that sucralose may elevate insulin and blood glucose levels in some individuals.

What Is Sucrose? Sucrose, also known as table sugar, sugar, or granulated sugar, is a type of carbohydrate composed of glucose and fructose. It occurs naturally in fruits, vegetables, and nuts, and is also made commercially from sugar beets and sugar cane. Sucrose is considered a natural sugar when you consume it from whole foods (e.g., apples, carrots) and an added sugar when it's found in processed or refined foods (e.g., soda, condiments, canned foods).

MELISSAMN/SHUTTERSTOCK
Sucralose may not have calories, but new research finds that it changes dietary patterns in ways that undermine weight loss.

What Is Sucralose? Sucralose is an extremely sweet (600 times sweeter than sugar) nonnutritive sweetener that actually begins its life as sugar. However, through the magic of chemistry, three specific hydroxyl groups on the sucrose molecule are eliminated and replaced with three chlorine atoms. This structural change prevents enzymes in the digestive tract from metabolizing the molecule so nearly all of the sucralose you consume leaves the body in stool while the rest is excreted in the urine. Questions about the safety of sucralose and other artificial sweeteners are often asked. In the case of sucralose, the FDA has stated that it is GRAS (generally regarded as safe). However, there is evidence that sucralose may elevate insulin and blood glucose levels in some individuals. A New Study on Sucrose and Sucralose In a new study published in JAMA Network Open, investigators explored the impact of sucrose and sucralose on healthy young men and women, some of whom were obese, in a randomized, crossover trial. On three separate occasions, the participants were given a drink that contained either sucrose, sucralose, or water. The goal was to look at how individuals' brains responded to sucrose and sucra-

lose and how their eating behaviors might change after consuming these sugars. The authors found that obesity and being female were both associated with greater responses in the brain to food in general as well as sweet food cues when the women consumed sucralose versus sucrose. The men didn't have these responses. Women also consumed more calories in a meal after drinking sucralose when compared with drinking sucrose. Bottom Line Based on the findings of this recent study, it appears that the non-calorie sweetener sucralose may cause women, and obese women, in particular, to be more attracted to food and to consume more calories than they would if they consumer sucrose (e.g., table sugar). While sucrose has calories and sucralose doesn't, this information is important to consider, especially among women who choose to consume sucralose. It's also important to note that it's possible that frequent use of artificial sweeteners such as sucralose may increase your desire for sweet foods in general, which could jeopardize your efforts to lose weight. All of these factors, as well as the health concerns associated with sucralose use, are reasons to pause before using this artificial sweetener. Lisa Roth Collins is a registered holistic nutritionist and also the marketing manager at NaturallySavvy.com, which first published this article.

Using Stress to Make You Stronger

When we stress ourselves in the right ways, and in the right amounts, we become antifragile

Continued from **Page 9**

Stronger by Stress

Beyond maintaining enough key nutrients such as vitamin D, achieving metabolic flexibility can also improve your resilience against stress. Intermittent fasting, or time-restricted eating, is one of the best ways to achieve metabolic flexibility. It can also help you stay insulin sensitive amid a rising tide of diabetes.

Land points to a 2019 study published in the New England Journal of Medicine found that intermittent fasting has life extension benefits and turns on certain key defensive mechanisms inside a body that make it more antifragile while providing additional health benefits.

Land says intermittent fasting also has other benefits, “like increased glutathione, increased NRF2, sirtuins and NAD and many other longevity-boosting and immune-strengthening pathways that get activated when you're fasting that don't necessarily get activated when you are restricting calories.”

One of the key benefits of intermittent fasting is that it can trigger autophagy. Autophagy is the recycling of damaged and old cells so their proteins can be used to create new amino acids to make new tissue. Effective autophagy is essential for the body to keep itself in good repair.

Time-Restricted Eating for Muscle Building

A persistent question surrounding intermittent fasting is what the best strategy is. Should you eat just once a day, or can you get away with two or more meals as long as you eat it all within a certain time window? And, if so, how long can that window be?

The answer to that question depends heavily on what your goal is and a substance called mTOR (mammalian target of rapamycin). mTOR is best described as the master controller of protein synthesis. When you have a lot of mTOR, it promotes growth in the body and can help you build muscle. When it is low, your body shifts to repair and maintenance and increases autophagy.

MTOR production is fueled by glucose, which we get from eating carbohydrates, and amino acids, which we get largely from protein. So when you eat more of these foods, you create more mTOR.

If your intention is to build muscle, having two meals a day within a six- to eight-hour window would make more sense. Having just one meal a day is likely better if you are seeking to lose weight, but might be challenging.

This is likely for the simple reason that you're only going to build muscle when you activate mTOR, and to activate mTOR, you need to introduce protein and leucine or branched-chain amino acids, along with some healthy carbohydrates.

If you eat twice, six hours apart, you can activate mTOR twice a day, thus allowing you to get better muscle-building benefits.

“That's why if someone has the goal of increasing their muscle mass, maintaining muscle mass or preventing sarcopenia [muscle wasting], then for them, it is much wiser to incorporate more frequent meals. For them, I would say that a 16-to-8 type of fasting where they eat twice a day is perfectly suitable, and is actually better than the one meal a day.

“It becomes increasingly more difficult to maintain muscle mass if you're already predisposed to sarcopenia and you're eating once a day, because there's a threshold of how much mTOR you can stimulate per meal, and how much muscle protein synthesis you can create per meal as well. It doesn't have to mean that you start eating six times a day. Increasing the eating window is generally a better idea.

“For most people, I would say that the 16-to-8 type of fasting, where they fast for 16 hours and eat within eight hours, is a really good balance between getting a daily stimulation in autophagy, while, at the same time, also stimulating enough mTOR and being able to build muscle.”

I found this advice personally helpful as I was pushing my eating window to four hours, but after Land related this common-sense strategy, I extended it to six to eight hours, which actually is easier on the kidneys. Also, as noted by Land, pushing your eating window to be excessively narrow can backfire and slow down your metabolism.

In the context of stress adaptation and antifragility, if your body becomes too accustomed to fasting because you're eating only one meal a day all the time, then that can eventually slow your metabolism and lower thyroid functioning. This, in turn, makes you more prone to insulin resistance, which is exactly what you're trying to avoid by eating just once a day.

Carbs Aren't All Bad

While carbs have gotten a bad rap, they are still an important part of your diet. In fact, when you're seeking to stimulate mTOR, carbs may be just as important as protein, because insulin secretion is a powerful activator of mTOR. Insulin secretion is triggered



Age-related muscle loss, called sarcopenia, is a significant threat to health that virtually no one can escape.

One of the best stressors you can introduce or increase to make you stronger is exercise.

Hormesis describes how low doses of a stressor or toxin can have beneficial results even though higher doses would hurt us.

Intermittent fasting is one of the best ways to achieve metabolic flexibility and help you stay insulin sensitive.

by the glucose we get from carbs.

I believe carb cycling, which means eating more carbs on some days and less or none on others, can be highly beneficial in this respect. If you're chronically low-carb, it will provide you with significant benefits initially, but long term, it can backfire. Land explains:

“Carbs can be useful for muscle growth, but they're not a necessary part of it. You can stimulate mTOR and build muscle with protein only ... but the insulin is still a very powerful anabolic hormone and it does help. It is possible to build muscle with a low carb or a ketogenic diet, but at the same time, carbs can be also useful.”

Ketogenic diets focus on eating few or no carbs so that your body switches from getting its energy from glucose to getting its energy from fat—including the fat stored on your waistline.

Being able to swap back and forth from relying on blood sugar for energy to relying on fat for energy is an important aspect of metabolic flexibility. But simply relying on fat for energy isn't the cure-all some people hope it is.

“Chronic ketosis can eventually lead to insulin resistance or some mild forms of it,” Land notes.

“I believe a more flexible approach is better in the long-term because you're able to still use both. You're still able to become a fat burner while, at the same time, you don't become insulin resistant toward carbs either, and you can incorporate both.

“In practice that would mean that people can do some form of cyclical keto diet, where they eat keto on some days but also incorporate some days where they eat more carbs to kick themselves out of ketosis, as well as break this mild insulin resistance that may develop. I myself like to eat keto on days where I'm not working out.

“So, on my rest days where I don't have a lot of physical activity, then it's perfect to stay in ketosis and eat low carb because my body isn't burning that many carbs for fuel either, whereas on days where I do high-intensity training or some resistance training, or on days when I want to really stimulate mTOR, and on those days, I'll just have more carbs because the body uses carbs and glycogen during a workout.

“If you eat carbs after a workout, then the body is already primed to use those carbs more efficiently instead of storing them as fat or instead of developing diabetes from it. So, it's a perfect time to strategize or time your carbohydrate intake around your exercise.

“Your body is the most insulin sensitive after a workout because the muscle contractions activate the glucose transporter GLUT4. Then you don't even need insulin to shuttle carbs into muscle cells either. So that's why having some carbs around a workout itself won't necessarily be harmful as long as you are still metabolically flexible and you have metabolic health.”

Land's explanation above caused me to change my own carb cycling to a more optimal schedule. While nothing is set in stone and listening to your body is important, if you are not insulin resistant, I believe cycling in carbs once or twice a week and remaining low-carb, below 50 grams per day, the rest of the week is a good strategy, as nutritional ketosis has so many profound metabolic benefits.

That said, if you're already insulin-resis-



If you eat a keto diet, carb cycling is important to keep you from becoming insulin resistant.

tant, as 90 percent of the population is, or diabetic, then adding carbs will be counterproductive, so it's important to assess your individual situation. If your metabolic flexibility is already good, then being on a restrictive low-carb diet isn't really necessary anymore.

The Benefits of Heat-Shock, Cold-Shock Proteins

Beyond intermittent fasting, there are also other ways you can introduce minor stressors into your life to help you achieve antifragility.

“Stronger by Stress” also delves into the science of heat-shock proteins and cold-shock proteins, activated by exposure to heat and cold respectively.

Heat-shock proteins repair misfolded proteins and RNA, increase glutathione, and promote autophagy, among other things.

Cold-shock proteins also activate antioxidant defense mechanisms, and lower inflammation and oxidative stress.

Born and raised in Estonia, Land is familiar with the cold, and embraces cold exposure for its physical conditioning and mental toughness benefits.

“If you are habitually engaging in cold exposure throughout the entire year, then the winter itself becomes a piece of cake. It becomes less stressful on yourself and it becomes less damaging. You're able to adapt to it faster than normal people.

“If you're constantly using central heating or you're using the heating in your car and you're never really exposed to the cold for any longer than a few minutes, then you're missing out on the benefits of the cold shock proteins. You're also making your body more vulnerable and more fragile,” he says.

“The mental aspect is also really great. I used to take a cold shower every morning, and it really helped me develop more self-discipline and self-control.”

“The rationale for me was that if I'm able to start the day with a cold shower, then anything else for the rest of the day is going to be that much easier because I already climbed over this initial challenge.”

Muscle Building Is Essential to Avoid Sarcopenia

One of the best stressors you can introduce or increase to make you stronger is exercise. In the interview, Land reviews some of his recommendations for high-intensity resistance training, such as doing multiple sets, split training, and other strategies that are also covered in his book. As noted by Land, maintaining muscle and keeping physically active are probably two of the best things you can do to extend both your life span and health span.

Age-related muscle loss, called sarcopenia, is a significant threat to health that virtually no one can escape. Use it or lose it applies here, and muscle is far easier to lose than gain. Especially as you age, muscle is lost much faster when you are inactive.

For this reason, I strongly recommend strength training for all ages, especially the elderly. The good news is you can effectively build muscle without risking injury from heavy loads by using blood flow restriction (BFR) training. In Japan, where the technique was developed, it's known as KAATSU.

BRF is also a minor stressor. It involves exercising your muscles while partially restricting arterial inflow and fully restrict-

When you're seeking to stimulate a substance called mTOR, carbs may be just as important as protein.



Cold-shock proteins also activate antioxidant defense mechanisms and lower inflammation and oxidative stress.

ing venous outflow in either both proximal arms or legs.

Venous flow restriction is achieved by using thin elastic bands on the extremity being exercised. By restricting the venous blood flow, you create a relatively hypoxic (low oxygen) environment in the exercising muscle, which, in turn, triggers a number of physiological benefits, including the production of hormones such as growth hormone and IGF-1, commonly referred to as “the fitness hormones.”

It also increases vascular endothelial growth factor (VEGF), which acts as “fertilizer” for growing more blood vessels and improving their lining (endothelium).

I believe BFR is one of the best strategies available to address the epidemic of sarcopenia, and for most people who aren't competitive athletes, it may be the only form of resistance training they need. Land, like me, is a big fan of the KAATSU system and uses it every day.

“If I'm not doing an actual workout with them, then I'll just use the KAATSU cycle, the on and off pressures. So even if I'm not doing an actual exercise with them, then I'll still do the cycle to pump more blood into the muscle and accelerate recovery,” he says.

“On other days, I'll use [the bands while doing] biceps curls and pushups. With the legs, I'll do squats and lunges, or just regular walking. I really enjoy them and I find that they accelerate recovery. Even if it's not for the exercise performance, I think the cardiovascular effects are still worthwhile.”

It's important to realize that sarcopenia isn't just cosmetic, and it's not just about frailty. Your muscle tissue, which makes up about half of your body's tissues, is a metabolic organ, an endocrine organ. Your muscle tissue makes cytokines and myo-

kines, and is a sink for glucose.

Insulin resistance and Type 2 diabetes accelerate sarcopenia, and research shows glucose fluctuations are independently associated with this condition. As noted in one 2019 study published in the Journal of Clinical Medicine, “glucose fluctuations were significantly associated with a low muscle mass, low grip strength, and slow walking speed.”

The effectiveness of BFR for the prevention and reversal of muscle wasting is directly addressed in an April 2019 study in the Journal of Cachexia, Sarcopenia and Muscle:

“Muscle wasting leads to significant decrements in muscle strength, cardiorespiratory, and functional capacity, which increase mortality rates. As a consequence, different interventions have been tested to minimize muscle wasting.”

“In this regard, blood flow restriction (BFR) has been used as a novel therapeutic approach to mitigate the burden associated with muscle waste conditions.”

“Evidence has shown that BFR perse can counteract muscle wasting during immobilization or bed rest. Moreover, BFR has also been applied while performing low-intensity resistance and endurance exercises and produced increases in muscle strength and mass.”

“Endurance training with BFR has also been proved to increase cardiorespiratory fitness. Thus, frail patients can benefit from exercising with BFR due to the lower cardiovascular and joint stress compared with traditional high-intensity exercises.”

“Therefore, low-intensity resistance and endurance training combined with BFR may be considered as a novel and attractive intervention to counteract muscle wasting and to decrease the burden associated with this condition.”

Conclusion

Life is full of challenges and difficulties. The good news, and a key lesson we can learn from Land, is that we can better prepare ourselves for these inevitable hardships by introducing minor stressors.

“It's important to engage in these small stressors that have a hormetic effect on a regular basis because they're not permanent. You're going to lose them if you don't use them. So, if you don't use the sauna, then you're going to lose your ability to tolerate heat. The same applies to exercise, to fasting,” he says.

“Those things should be a part of your regular lifestyle. They are really beneficial for your overall longevity as well as just resilience against stress. So, I personally feel that doing intermittent fasting, cold showers, heat exposure—all those things have helped me tolerate stress in other areas of life much better.

“I'm able to tolerate stress from work, I'm able to tolerate stress from other people so I don't get triggered or I don't get angry at other people. I'm not stressed out from those things because my stress resiliency is much higher than it is in the average person.”

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



ALL PHOTOS BY SHUTTERSTOCK

Beyond maintaining enough key nutrients such as vitamin D, achieving metabolic flexibility can also improve your resilience against stress.

Strength training is important for everyone but especially for the elderly.



We Need a New Paradigm for Final Wishes

Top experts question the value of advance care planning and call for change

JUDITH GRAHAM

For decades, Americans have been urged to fill out documents specifying their end-of-life wishes before becoming terminally ill—living wills, do-not-resuscitate orders, and other written materials expressing treatment preferences.

Now, a group of prominent experts is saying those efforts should stop because they haven't improved end-of-life care.

"Decades of research demonstrate advance care planning doesn't work. We need a new paradigm," said Dr. R. Sean Morrison, chair of geriatrics and palliative medicine at the Icahn School of Medicine at Mount Sinai in New York and a co-author of a recent opinion piece advancing this argument in JAMA.

"A great deal of time, effort, money, blood, sweat and tears have gone into increasing the prevalence of advance care planning, but the evidence is clear: It doesn't achieve the results that we hoped it would," said Dr. Diane Meier, founder of the Center to Advance Palliative Care, a professor at Mount Sinai and co-author of the opinion piece. Notably, advance care planning has not been shown to ensure that people receive care consistent with their stated preferences—a major objective.

"We're saying stop trying to anticipate the care you might want in hypothetical future scenarios," said Dr. James Tulsky, who is chair of the department of psychosocial oncology and palliative care at the Dana-Farber Cancer Institute in Boston and collaborated on the article. "Many highly educated people think documents prepared years in advance will protect them if they become incapacitated. They won't."

The reasons are varied and documented in dozens of research studies: People's preferences change as their health status shifts; forms offer vague and sometimes conflicting goals for end-of-life care; families, surrogates and clinicians often disagree with a patient's stated preferences; documents aren't readily available when decisions need to be made; and services that could support a patient's wishes—such as receiving treatment at home—simply aren't available.

But this critique of advance care planning is highly controversial and has received considerable pushback.

Advance care planning has evolved significantly in the past decade and the focus today is on conversations between patients and clinicians about patients' goals and values, not about completing documents, said Dr. Rebecca Sudore, a professor of geriatrics and director of the Innovation and Implementation Center in Aging and Palliative Care at the University of California-San Francisco. This progress shouldn't be discounted, she said.

Also, anticipating what people want at the end of their lives is no longer the primary objective. Instead, helping people make complicated decisions when they become seriously ill has become an increasingly important priority.

When people with serious illnesses have conversations of this kind, "our research shows they experience less anxiety, more control over their care, are better prepared for the future, and are better able to communicate with their families and clinicians," said Dr. Jo Paladino, associate director of research and implementation for the Serious Illness Care Program at Ariadne Labs, a research partnership between Harvard and Brigham and Women's Hospital in Boston.

Advance care planning "may not be helpful for making specific treatment decisions or guiding future care for most of us, but it can bring us peace of mind and help prepare us for making those decisions when the time comes," said Dr. J. Randall Curtis, 61, director of the Cambia Palliative Care Center of Excellence at the University of Washington.



Helping people make complicated decisions when they become seriously ill has become an increasingly important priority.

Curtis and I communicated by email because he can no longer speak easily after being diagnosed with amyotrophic lateral sclerosis, an incurable neurologic condition, early in 2021. Since his diagnosis, Curtis has had numerous conversations about his goals, values and wishes for the future with his wife and palliative care specialists.

"I have not made very many specific decisions yet, but I feel like these discussions bring me comfort and prepare me for making decisions later," he told me. Assessments of advance care planning's effectiveness should take into account these deeply meaningful "unmeasurable benefits," Curtis wrote recently in JAMA in a piece about his experiences.

The emphasis on documenting end-of-life wishes dates to a seminal legal case, *Cruzan v. Director, Missouri Department of Health*, decided by the Supreme Court in June 1990. Nancy Cruzan was 25 when her car skidded off a highway and she sustained a severe brain injury that left her permanently unconscious. After several years, her parents petitioned to have her feeding tube removed. The hospital refused. In a 5-4 decision, the Supreme Court upheld the hospital's right to do so, citing the need for "clear and convincing evidence" of an incapacitated person's wishes.

Later that year, Congress passed the Patient Self-Determination Act, which requires hospitals, nursing homes, home health agencies, health maintenance organizations, and hospices to ask whether a person has a written "advance directive" and, if so, to follow those directives to the extent possible. These documents are meant to go into effect when someone is terminally ill and has lost the capacity to make decisions.

But too often this became a "check-box" exercise, unaccompanied by in-depth discussions about a patient's prognosis, the ways that future medical decisions might affect a patient's quality of life, and without a realistic plan for implementing a patient's wishes, said Meier, of Mount Sinai.

She noted that only 37 percent of adults have completed written advance directives, which in her view is a sign of uncertainty about their value.

Other problems can compromise the usefulness of these documents. A patient's preferences may be inconsistent or difficult to apply in real-life situations, leaving medical providers without clear guidance, said Dr. Scott Halpern, a professor at the University of Pennsylvania Perelman School of Medicine who studies end-of-life and palliative care.

For instance, an older woman may indicate she wants to live as long as possible

and yet also avoid pain and suffering. Or an older man may state a clear preference for refusing mechanical ventilation but leave open the question of whether other types of breathing support are acceptable.

"Rather than asking patients to make decisions about hypothetical scenarios in the future, we should be focused on helping them make difficult decisions in the moment," when actual medical circumstances require attention, said Morrison, of Mount Sinai.

Also, determining when the end of life is at hand and when treatment might postpone that eventuality can be difficult.

Morrison spoke of his alarm early in the pandemic when older adults with COVID-19 would go to emergency rooms and medical providers would implement their advance directives (for instance, no CPR or mechanical ventilation) because of an assumption that the virus was "universally fatal" to seniors. He said he and his colleagues witnessed this happen repeatedly.

"What didn't happen was an informed conversation about the likely outcome of developing COVID and the possibilities of recovery," even though most older adults ended up surviving, he said.

For all the controversy over written directives, there is strong support among experts for another component of advance care planning—naming a health care surrogate or proxy to make decisions on your behalf should you become incapacitated. Typically, this involves filling out a health care power-of-attorney form.

"This won't always be your spouse or your child or another family member: It should be someone you trust to do the right thing for you in difficult circumstances," said Tulsky, who co-chairs a roundtable on care for people with serious illnesses for the National Academies of Sciences, Engineering and Medicine.

"Talk to your surrogate about what matters most to you," he urged, and update that person whenever your circumstances or preferences change.

Most people want their surrogates to be able to respond to unforeseen circumstances and have leeway in decision-making while respecting their core goals and values, Sudore said.

Among tools that can help patients and families are Sudore's Prepare for Your Care program; materials from the Conversation Project, Respecting Choices and Caring Conversations; and videos about health care decisions at ACP Decisions.

The Centers for Disease Control and Prevention also has a comprehensive list of resources.

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

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



In the New Year, Imagine Your Best Possible Life

Reflecting on your ideal future helps you feel more optimistic and intentional

Continued from Page 9

Though I thought the main premise of the book was bogus—that all you need to do is figure out what you want, and the universe will provide—I nonetheless found its goal-setting exercise extremely helpful. In it, the author tells readers to imagine their best possible lives, considering many different aspects of life, including relationships, work, leisure time, personal development, the condition of society, and more. Then, they should write about this perfect life, as if everything were just as they wanted it to be.

Doing this exercise at that time helped me a lot. It encouraged me to reflect on my values, deepest desires, and goals. And I believe that taking the time to imagine a better, more fulfilled future started me on the path to where I am now. For example, back then I envisioned myself being married to a loving man (check), having a job where I could help foster more compassion in others (check), speaking new languages (check), and playing more music (check).

Did these things magically appear in my life? No, they didn't. But knowing what I wanted helped me set an intention to work toward them. No doubt, my subconscious kicked in, too, and I began to notice opportunities that presented themselves to me or to actively seek out the information I needed. Plus, having a direction to take based on my truest desires gave me impetus to make hard choices that ultimately changed my life—like moving from Santa Barbara and forgiving my alcoholic father's past abuse.

Since that time, I've done this exercise many times over the years, often with good results. Even so, it wasn't until recently that I noticed there is research to support the practice. Much of that research has been collected by Greater Good in Action, a collaborative effort between UC-Berkeley's Greater Good Science Center and HopeLab. Greater Good in Action has synthesized hundreds of scientific studies on the best research-based methods for a happier, more meaningful life and put them in a format that's easy to navigate and digest.

When you imagine your best possible self, the research suggests, you feel more optimistic and positive about life, which motivates you to apply yourself toward fulfilling goals. And being happier can increase your willingness to tackle social problems, too, meaning it can make a difference in the world, not just for you as an individual. It's not just for one type of person, either; it has been tried with different populations to overall good effect.

I can't promise it will work for you, too. But it might make a difference in how you feel about the future—and that could be a good thing to do in the year 2022.

Here is what the "best possible self" practice involves, according to Greater Good in Action:



1. Take a moment to imagine your life in the future. Ask yourself, what is the best possible life you can imagine? Consider all of the relevant areas of your life, such as your career, academic work, relationships, hobbies, and health. Then, write continuously for about 15 minutes about what you imagine this best possible future to be.

2. If you're tempted to think about the ways your life isn't working well right now, or about financial, time, or social barriers to being able to make your best life happen, let that all go for the purpose of the exercise. Instead, focus on imagining a brighter future in which you are your best self and circumstances change enough to make this happen.

3. Be specific and creative. Let yourself imagine as much detail as you can and be as imaginative as you want when it comes to your best life. The more creative and specific you are, the more engaged you will be in the exercise and the more you'll get out of it

Though not mentioned in Greater Good in Action, I've found it helpful to write about this best possible life as if it were already happening—meaning, I write in the present tense. So, for example, I don't write, "I'd like to be able to write a book someday," but "I've finished writing a book on the psychological benefits of being in nature."

When you're feeling stressed or depressed, it can be harder to do this practice—but the research suggests that it can still be beneficial. I last did the exercise in March, when I was feeling particularly down and worried. Things looked grim for some important people in my life and, generally, for people around the world. Yet taking the time to focus on a better, more fulfilling life ahead helped me stay focused on what mattered to me and where to put my energy.

Here are some of the things I wrote then: "I have let go of all resentment, anger, heartache, disappointment, or hopelessness and am resting instead in a place of deep, abiding love, clarity, and conviction."

"I continue to write for Greater Good because I love my work. I'm learning new

When you imagine your best possible self, the research suggests, you feel more optimistic and positive about life, which motivates you to apply yourself toward fulfilling goals.



Taking the time to imagine a better, more fulfilled future can start you on the path to your dreams.

things regularly and finding purpose in helping people to live happier, more meaningful lives."

"I stretch my body, meditate, eat well, and take good care of myself so that I'm in good health. I'm hiking in nature almost every day, which helps me feel calm and connected to the natural world."

"I've planted a vegetable garden in my backyard, and I'm enjoying spending more time at home."

"I'm visiting foreign countries, fulfilling my dream of more travel, adventure, and language acquisition."

"My relationships with friends and family are stronger and closer than ever."

As you can see, some of what I wrote just confirms the value in things I'm already doing—like hiking and finding meaning in my work. Other things were new and gave me ideas of how to change my life for the better.

While not everything I wrote about has come to pass, some of it has. Certainly, realizing that I'd like to have a garden inspired me to put one in my backyard. (Truth be told, my garden didn't do super well ... but I learned some stuff that will help me do better next year, I hope.) I decided to learn a little Greek, because I realized how much I love learning languages, plus I anticipated using it on a fall 2020 trip to Greece with my husband. Unfortunately, the trip to Greece had to be nixed because of COVID. We pivoted and went somewhere closer, fulfilling part of my dream, at least. Obviously, these were personal goals. Yours will no doubt be very different than mine.

Perhaps we all need to imagine our best possible life. We might find that by doing that, we'll have more optimism and figure out how to make the world a better place—not just for ourselves, but for everyone.

Jill Suttie, Psy.D., is Greater Good's former book review editor and now serves as a staff writer and contributing editor for the magazine. This article was originally published by the Greater Good online magazine.

Research Links Frailty to Dementia Risk

Reducing frailty could be an effective strategy to prevent dementia among older adults

SARAH COWNLEY

A new study published in the Journal of Neurology, Neurosurgery, and Psychiatry suggests that seniors with frailty who adhere to a healthy lifestyle could reduce their risk for dementia. Researchers are seeing increasing evidence that taking steps toward healthier actions can significantly affect cognitive health.

Researchers analyzed data from more than 196,000 adults older than 60 from the UK Biobank for this study. Genetic risk was calculated by using a previously developed score for frailty that reflects the accumulation of age-related symptoms, signs, diseases, and disabilities. These were analyzed along with a score on healthy lifestyle behaviors and a percentage of those who developed dementia.

Dementia in the participants was detected

through hospital admission records. Researchers found a total of 1,762 people who had dementia and noted that they were much more likely to have a high degree of frailty before their diagnosis compared with those who didn't develop dementia.

Researchers examined the effect of genetic risk for dementia in people with different degrees of frailty. In the most frail participants, the risk of dementia was high regardless of their genes. For those who were at the highest risk of dementia due to their genes, the risk was lowest in people who were fit and highest in people who were in poor health.

"Our research is a major step forward in understanding how reducing frailty could help to improve a person's chances of avoiding dementia dramatically, regardless of their genetic predisposition to the condition," lead study author Dr. David Ward said. "This is exciting because we believe that some of the underlying causes of frailty are in themselves preventable. In our study, this looked to be possible partly through engaging in healthy lifestyle behaviors."

This research helps to identify ways to reduce the risk of dementia. Overall, participants who reported more engagement in

healthy lifestyle behaviors were less likely to develop dementia. Researchers suggest that this is partly because they had a lower degree of frailty.

Brain Health

Brain health is a common concern as people age. With dementia and Alzheimer's cases rising throughout the population, studies such as this are essential to outline prevention techniques and treatments for the diseases.



A healthy lifestyle includes exercising regularly, eating a healthy diet, and making sure that you're getting all of the essential vitamins and nutrients for healthy brain function.

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

Why Kids Shouldn’t Eat Added Sugar Before They Turn 2

Helping your children develop healthy eating habits starts when they are young, says nutritional epidemiologist

LISA BODNAR

I remember a decade ago sitting in front of my 9-month-old daughter, who was in her high chair, and trying to spoon-feed her a pureed green vegetable. It didn’t matter if it was peas, green beans, or something else, because the outcome was the same: I spooned it into her mouth, and it came right back out.

Compare this with feeding her apple-sauce, for which she would open her mouth after each bite and almost bounce in her chair with pleasure. I nearly danced along with her. This was easier! Let’s just keep doing this! But as a nutritional epidemiologist, I knew that solely satisfying her desire for sweetness wouldn’t benefit her health in the long run.

At the University of Pittsburgh Graduate School of Public Health, I study the consequences of poor nutrition on the health of mothers and children. I recently served on a National Academies of Science, Engineering and Medicine committee that summarized guidelines on feeding infants and children up to age 2. As part of the committee, I helped to write a report about feeding young children added sugars and sugar-sweetened beverages. And—spoiler alert!—experts advise no added sugar for infants and little to no added sugar for children 12 to 24 months old.

Added sugars are sugars and syrups that are added to foods during processing or preparation or later at the table. They can be natural sugars, such as honey, or artificial sweeteners, such as high-fructose corn syrup. Yogurt, baby snacks, fruit drinks, desserts, and sweet bakery products are the most common sources of added sugars in the diets of infants and toddlers.

Unlike sugars that naturally occur in fruits, dairy products, vegetables and bread and other grains, natural sugars and artificial sweeteners added to foods are the ones we should eliminate or limit in the diets of young children. But why?

From birth to 24 months, proper growth and development require calories and nutrients. Foods and beverages high in added sugars provide a lot of calories—referred to as “empty calories”—but not a lot of nutrients. Offering foods with added sugars to children from birth to 24 months is problematic because they eat relatively small amounts of food at this stage. To ensure healthy nutrition, the food they eat must be high in nutrients. If young kids fill up on high-calorie, sugar-laden foods or drinks, it leaves less room for nutritious foods.

Young children need to be exposed to foods 30 or so times before they learn to like them.

Children who are fed diets high in added sugars are more likely than children with lower sugar intakes to have a number of negative health consequences as they develop, including childhood obesity, cardiovascular disease, and tooth decay.

Diet from birth to 24 months also shapes long-term food preferences. People are hard-wired to crave sugar because it built up fat stores and kept our ancestors from starving when food was scarce. But kids can learn to accept bitter foods, such as vegetables, that are high in nutrients if they are offered them repeatedly in early childhood. Setting healthy diet patterns early in life can help children maintain a healthy weight and avoid chronic disease.

Considering that about 85 percent of infants and toddlers in the United States consume added sugar daily, here are some practical tips for parents and caregivers of babies and young children for eliminating or limiting their sugar consumption:



Children instinctively like sweet foods but the prevalence of added sugars can put them at risk.

1. Look on the Food Label
- Check the amount of added sugars on the nutrition facts label on foods and drinks before you buy them. Labels include the amount of “Total Sugars” and, below that, the amount of “Added Sugars.” One eight-ounce serving of chocolate milk contains 15 grams of added sugar, for example, while regular cow’s milk has no added sugar.
2. Switch to Healthier Drinks
- Swap out sugary drinks with water or milk (breast milk, formula, or other milk, depending on the child’s age). Eliminate or limit sugary beverages such as regular soda, flavored milks, Kool-Aid, fruit drinks, juice with less than 100 percent fruit, sports drinks, energy drinks, and sweetened water or tea.
3. Ditch Sugar During Food Prep
- Prepare foods for your young child at home without adding sugar.
4. Know the Different Names for Sugar
- Some packaged foods literally have “sweetened” in their name, such as sweetened applesauces or sweetened peaches. But sugar isn’t always so easy to spot. Often foods we don’t expect to contain added sugars do, such as yogurts. Added sugars go by many different names, such as high-fructose corn syrup, fruit juice concentrates, cane sugar, corn sweetener, lactose, glucose, sucrose, and maple syrup. Always check the ingredient list.

5. Watch for Sugar Lurking in Packaged or Store-Made Foods
- If you offer your child packaged or store-prepared foods and beverages, such as dry cereal, fruit pouches, or jars of baby food, they should contain little to no added sugars.
6. Try Again and Often
- Offer children bitter foods such as vegetables over and over. Young children need to be exposed to foods 30 or so times before they learn to like them.
- As a registered dietitian and licensed nutritionist who has counseled families—and as a mother to three children—I have learned that reducing added sugar isn’t as easy as we professionals often make it seem. In fact, it may not be feasible for many people because of limited access to or the higher price of healthy foods. Some people have pressing needs that may take priority over a healthful diet. And fast-food restaurants and convenience stores seem to be everywhere you look.
- So don’t try to make all of these changes with your child at once. Choose one that seems most feasible, and try that first. Gradually add another. Remember that falling off a healthy habit is normal. The important thing is getting back on the horse and trying again.

Lisa Bodnar is a professor of epidemiology at the University of Pittsburgh Health Sciences. This article was first published on The Conversation.

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