



Dr. David G. Williams

ome months ago I wrote a rather lengthy article about depression, in which I went into the connection between that condition and poor function in various glands—particularly the thyroid, pituitary, and adrenals.

I suppose I shouldn't have been surprised at the response from readers, because depression is so common these days. One individual, ML, from Fort Lauderdale, Florida, summed up the situation in a letter:

> "I continue to have several serious health problems (too numerous to go into) and I've been able to cope and overcome most, but my depression seems to get worse. I've tried dozens of natural supplements and a couple of prescription items in the past without any luck. I don't expect you to be able to solve my problem, but maybe you could give me a place to start. I know I'm not the only reader that suffers from the problem, and a little insight might help point me in the right direction of a solution."

I've covered many of the specific causes of depression, and natural ways to correct them, in past issues. Obviously, I would suggest reading those articles. Hormonal imbalances play a huge role. [Editor's note: For a full description of the connection between depression and glandular function, and recommendations for treatment, see the April 2008 issue of Alternatives. For your convenience, I've placed a copy of it in the Subscriber Center of the Alternatives Web site, www.drdavidwilliams.com.]

Having said that, there are a few factors, largely being overlooked in this country, that are contributing to the dramatic increase in depression here.

Put Light in Your Life, Lighten Your Mood

Drugs Can Cause Depression, Not Treat It

First, prescription drug use in this country is higher than it has ever been—and it keeps rising every year. A study by Medco Health Solutions found that 51 percent of children and adults in this country are taking one or more prescription drugs for a chronic condition. They also reported that among seniors, 22 percent of the men and 28 percent of the women take five or more medications regularly. The greatest increase in the use of chronic medications has occurred in the 20- to 40-year-old age group—20 percent in just the last six years.

Not surprisingly, much of the increase in drug use is linked to diseases and problems associated with obesity. Doctors are also treating problems more aggressively with drugs rather than pushing for lifestyle and diet changes. Another strong influencing factor is the unrelenting advertising efforts of the pharmaceutical companies.

I just returned from a trip to Canada. I was stuck in the airport and ended up reading one of the small local newspapers—every single page, including the obituar-

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You will observe with concern how long a useful truth may be known, and exist, before it is generally received and practiced on. — Benjamin Franklin ies. One covered the life of a 107-year-old gentleman who had many times been asked the secret of his longevity. He had two rules: Always try to stay active, and never take any kind of drug. Longevity seems to be dependent on genetics and lifestyle. But I have no doubt this man was onto something.

Prescription drug use is also a major problem when it comes to depression. I would certainly have your doctor re-evaluate every medication you take. Depression and depression-like symptoms (a decrease in appetite, less social activity, sadness, loss of energy, changes in sleep, aches/pains, irritability, et cetera) are among the leading side effects of prescription drugs. Common drugs that can result in depression include those that are intended to relieve anxiety, high blood pressure, high cholesterol, infections, mental disorders, and pain.

And, just as important, if you develop any new symptom, rather than assume you have a new disease or write the problem off to the aging process, consider it to be a possible drug side effect until it's been proven otherwise. I shudder to think how many people gradually deteriorate and are placed under institutional care who could have led normal lives if only someone had taken the time to reassess the drugs they were taking.

No Body's Immune to Depression

Another overlooked factor in depression involves what has been known for centuries among natural healers: Body chemistry directly influences the mind. In just the last few years, details of the connection between our immune system and depression have appeared.

Proteins called cytokines are some of the first responders to an infection in the body. They trigger the classic functions that help our body fight infections: fever or an increase in temperature to help destroy pathogens; swelling to help wall off the invaders; and an increase in blood flow to the area. Newer research shows that cytokines also adjust levels of certain chemicals in an effort to help conserve energy. (*Trends Neurosci 02;25:154–159*) (*Nat Rev Neurosci 08;9:46–56*) For example, cytokines reduce the levels of the neurotransmitter serotonin, a compound that does much more than regulate mood. Among other things, low levels of serotonin can cause irritability, an irregular appetite, temperature fluctuations, increased sleep, and a general lack of energy. All of these are the body's way of slowing down when it needs energy to repair itself.

My wife can probably relate to the actions of increased cytokines as well as anyone. She always had a hard time understanding my behavior when I get sick (which isn't that often, thank goodness). When I'm sick I seem to act more like an injured dog than a needy spouse. I don't want to be rubbed or held or pitied. I just want to crawl up in a corner (actually a bed) and be left alone. I lose my appetite, and I'm not always that pleasant to be around.

Anyone who's spent much time around animals, either wild or domesticated, has seen these same behaviors in sick animals. Veterinary researchers concluded a couple of decades ago that the symptoms were an immune response. This behavior slows activity and allows the animal's energy reserves to be utilized to better fight the infection or illness. New research indicates this same scenario occurs in humans. Some people, apparently, like me, are more susceptible to the effects, and prolonged infection or inflammation in those individuals can lead to deeper depression. (*Brain Behav Immun 07;21:153–160*) (*Harefuah 04;143:* 73–78,83) (*Neurosci Biobehav Rev 05;29:891–909*)

The incidence of depression is as much as ten times higher among individuals with chronic disorders that stress the immune system. This includes dozens of conditions, from cancer to infectious diseases to any of the over 100 known autoimmune diseases, and ranging from bowel, skin, and liver problems to arthritis.

In simple terms, if you're experiencing chronic inflammation anywhere in the body it's highly possible your cytokine levels are increased, which could be contributing to your depression. And it stands to reason that anyone already suffering from depression will only fare worse if they contract an illness.



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Inflaming a Bad Situation

These days, it's reasonable to assume that practically everyone is dealing with some form of inflammation. (I'm not talking about obnoxious relatives and in-laws.)

Chronic or persistent inflammation could come from a thousand different sources: a chronic sinus infection, constipation, indoor or outdoor air pollution, leakage from mercury tooth fillings, chlorinated or contaminated drinking water, household chemicals or pesticides, even your work environment.

The only practical way to minimize the effects and lower the burden on your immune system (and the subsequent cytokine release) is through the consumption of anti-inflammatory compounds. The pharmaceutical companies understand this. They would like you to believe that aspirin and other medications are the best anti-inflammatory agents available. And although they've convinced a large portion of the population of this, it simply isn't true.

Based on this new research, there's a rush within the pharmaceutical community to develop new drugs that block cytokine release. I'm sure there will be more "miracle" antidepressants of this sort in the near future. The problem lies in the fact that cytokines have a purpose. They are a vital part of your immune system. Blocking them compromises your ability to fend off all types of diseases and problems. Having said this, the new drugs will probably be marketed as "selective cytokine blockers." (I should probably trademark that phrase.) Avoid them like the plague when they appear.

Instead, you'd be much better off with nonpharmaceutical remedies for your inflammation. In this instance, the saying, "food is the best medicine" couldn't be more true.

I'll just briefly mention some of these foods. You'll probably recognize them all as being anti-inflammatory; I've written about each of them at one time or another.

- Omega-3-rich foods like fish, flax, and chia seed are some of the most anti-inflammatory foods available. The inflammatory omega-6-rich oils have taken over our diet. Omega-3 fish oil capsules are one of the primary natural therapies for depression.
- Fruits and vegetables are rich in antioxidants that quench free radicals, thereby reducing inflammation. They contain the B and C vitamins, along with various polyphenols and bioflavonoids.
- Curcumin, contained in the spice turmeric, is proving to be one of the more potent and inexpensive anti-inflammatory agents available. It's one of my favorites. Turmeric can be purchased in bulk and taken for only pennies a day.

- Green tea, ginger, and rosemary.
- Bromelain from pineapples is an excellent antiinflammatory agent.
- The herb boswellia has been shown to be as effective as aspirin and other NSAIDs, but without the side effects. It has been used safely for centuries. In the Bible, the fragrant tree resin called frankincense comes from boswellia.
- St. John's wort is well known as an antidepressant, but it has anti-inflammatory capabilities as well.
- The herbs cat's claw, white willow, arnica, and licorice are just a few more.

Stress and Depression

It's important to keep in mind several other factors that trigger the release of cytokines. Inflammation, infections, and wounds may be the most obvious, but stress is probably the most overlooked in our presentday society. Some new research explains exactly how stress can easily be the underlying cause of many cases of depression. (*World J Biol Psychiatry 00;1:17–25*)

The body recognizes actual threats like infections or wounds and responds by releasing cytokines from immune cells. It responds in the same fashion to *perceived* threats. It's part of the "fight-or-flight" mechanism I've discussed several times in the past. In earlier days when threatened by a tiger, as the classic example, there was the option of fighting or running. In either instance, the immune system releases cytokines in order to be prepared for injury. And even though our stress today may come from home, work, relationships, or a dozen other areas, the reaction by the immune system is the same. Unresolved or unrelenting stress can keep cytokine levels elevated and cause depression.

There are dozens of ways to minimize and resolve stress; unfortunately, there's no single answer for every situation that arises. Many people have found that exercise helps break the cycle. As an added benefit, exercise is one of the quickest ways to increase levels of serotonin (the "mood elevator") in the brain. [*Editor's note: For more about ways to relieve stress, see the "More* Alternatives" *section in the Subscriber Center of the* Alternatives *Web site*, www.drdavidwilliams.com.]

Be Careful, Be Aware

Another overlooked contributor to depression involves the use of immune-boosting therapies. The use of interferon drugs in the treatment of cancer, hepatitis, et cetera, is known to lead to depression, which can be severe in those already experiencing the health problem. The interferons are one class of cytokines, so it makes sense that intentionally increasing their levels would raise the patient's risk for depression.

I don't think natural immune-boosting compounds are as problematic, but I haven't seen any research in that area. Potential problems would obviously vary from individual to individual depending on how they react to increases in cytokine levels. From all indications, however, it appears that the continuous or long-term use of strong immune-boosting compounds, synthetic or natural, could lead to depression. Again, if you experience what appears to be a new problem, depression or otherwise, take a closer look at any changes you've made in medication or supplement intake. Listen to your body.

Brighten Your Day, Brighten Your Mood

A couple of other very important factors linked to depression are light exposure and vitamin D levels.

Just recently, a study from the Netherlands tested the effects of bright lights and melatonin on a group of elderly residents of several group care facilities. The study involved 189 residents, 90 percent of whom were female and 87 percent of whom had dementia.

Either bright lights (described as "whole day bright," around 1,000 lux) or dim bulbs (around 300 lux) were installed in the ceilings and left on from 9 a.m. to 6 p.m. each day. Melatonin was randomly assigned to some individuals at a dose of 2.5 mg a day, while others received a placebo.

Over the three-year study, the bright lights alone reduced cognitive deterioration by 5 percent and the symptoms of depression by 19 percent. These changes may seem small, but the therapy worked as well as any of the anti-dementia drugs on the market—without the side effects. And changes like these could easily mean the difference between requiring institutional care or being able to live on one's own.

Melatonin alone actually worsened withdrawn behavior in some individuals. Researchers found, however, that the problem could be resolved simply by using the melatonin in combination with the bright lights. This resulted in improvements like those above, plus it produced both a calming effect and better sleep in these individuals. (*JAMA 08;299:2642–2655*)

Bright light during normal waking hours helps regulate the body's natural circadian rhythm. We weren't made to live in a cave, yet how many homes of older folks do you enter that feel that way? When the sun comes up in the morning, open the shades and the curtains to help keep your internal clock set correctly. You'll be a happier and healthier person in the long run.

A Good Night's Sleep Works Wonders

New research from the University of California at Irvine has uncovered a link between circadian rhythms and metabolism. Proteins that regulate circadian rhythms were found to work in conjunction with a protein (labeled SIRT1) that modulates the amount of energy a cell uses. In this way SIRT1 helps control the aging process throughout the body. An imbalance of the circadian rhythm proteins and SIRT1 results when there is a disruption in our sleep pattern. This explains why a lack of proper rest or sleep results in an increase in hunger, which can lead to obesity and all its related illnesses. (*Cell 08;134:329–340*)

The need for proper sleep habits is largely being overlooked, and the consequences can be dire. Circadian rhythm disruption has already been linked to numerous metabolic disorders, insomnia, depression, cardiovascular disease, and cancer. And it's now estimated that *up to 15 percent of our genes are regulated by our circadian clocks*. Depression won't be the only thing you'll be helping if you open up your house and let the light in.

Let the Sun Shine In

When the light comes from the sun it increases levels of vitamin D and serotonin as well. It should come as no surprise that vitamin D deficiencies are associated with not only depression but diabetes, high blood pressure, rheumatoid arthritis, cancer, and osteoporosis as well. It appears that depression can be a reliable predictor of many, if not all, of these diseases.

A study just released from Holland directly linked low vitamin D levels to depression. The study involved 1,282 individuals ages 65 to 95. Of those, 26 were experiencing major depression and 169 minor depression. Although practically everyone had below-optimum levels of vitamin D when compared to non-depressed individuals, the levels of those with minor depression were 14 percent lower and those with major depression were 33 percent lower. (*Arch Gen Psychiatry 08;65:508–512*)

If you have depression, get plenty of light in your home and life during the waking hours. A dosage of 5,000 IU of vitamin D3 per day is recommended if you totally avoid the sun. (In just 20 to 30 minutes of sun exposure your body can produce as much as 20,000 IU.) To ensure you have adequate levels of vitamin D, you can: 1) take higher doses of vitamin D3 (and have your doctor monitor the situation and dosage); 2) utilize a tanning bed without going to the point of burning; or 3) take the least expensive and most effective method getting regular exposure to the sun for 20 to 30 minutes two or three times a week. When you're dealing with depression, keep a couple of things in mind. It's becoming more common in our society every day. I have no doubt that much of the problem stems from our dietary changes like the dramatic swing from anti-inflammatory omega-3 oils to pro-inflammatory omega-6 oils. There's also no doubt that stress levels are on the rise. Estimates are that as many as one out of every five individuals will suffer major depression during their lifetime. Everyone experiences periodic bouts of sadness and depressed states. As I explained above, this is one way our immune system forces us to rest so our energy resources can be utilized for healing. But there was one very insightful study just released that I found both helpful and interesting, and personally somewhat reassuring.

Researchers at Dartmouth College here in the US and from Great Britain analyzed data from sampling 500,000 randomly selected male and female Americans and Western Europeans of middle age. The data was correlated with data spanning over 35 years of 2 million people in 70 different countries. They found that aging itself is the biggest risk for a midlife crisis, not poor health, income, divorce, or job loss.

Happiness or psychological well-being follows basically a U-shaped curve throughout life—highest at the beginning and end, and lowest in the middle. This pattern is consistent throughout the world regardless of marital status, work changes, offspring, income, and other matters. The pattern of depression and happiness levels is age-related, and we are most unhappy during midlife. After that period, happiness begins an upswing on the other side of the "U."

The peak of depression for both men and women in the UK is around 44 years of age. In the US, women are the most miserable at age 40, and for men it happens around age 50. And this same pattern remains consistent in over 70 different countries around the world. (*Soc Sci Med 08;66:1733–1749*)

It's apparently not uncommon to experience what has commonly been referred to as a mid-life crisis or confusion, and the mild depression that accompanies it.

Chronic depression, however, is different. It's a symptom of a larger systemic problem. It should be considered an "early warning sign" and needs to be resolved. It will require a serious evaluation of the factors I've mentioned above. Regardless of the steps taken, you will be the first to feel the results and any progress. As such, it's important to "listen" to our bodies and learn to gauge our reactions to different situations, foods, supplements, drugs, et cetera.

Watch Your Waistline

ome people may feel that this isn't exactly good news, but the US National Institute on Aging recently analyzed the body mass index (BMI) and the waist circumferences of 154,776 men and 90,757 women ages 51 to 72 and found that waist size was just as important an indicator of longevity as was BMI.

(BMI can be determined by dividing your weight in kilograms by the square of your height in meters. Or, you can get your BMI by dividing your weight in pounds by your height in inches squared and then multiply that by 705. Simple calculators are available on the Web; search for "BMI calculator.")

Individuals whose BMI falls between 25 and 34.9 begin increasing their risk for several health problems such as diabetes, hypertension, and heart disease. A BMI of 30 or more qualifies as being obese, and over 40 signifies being morbidly obese.

In the "for what it's worth" category, I recently saw a Japanese study which found the most sociable people (extroverts) tend to be more overweight, with a BMI over 25. And those with anxious personalities (worriers) were twice as likely to be underweight, with an average BMI of under 18.5. (*J Psychosom Res 08;64:71–80*)

The waist size is obviously much easier to figure than the BMI. And this study found that men with a waist size of over 40 inches and women with one over 34.6 inches had a 20 percent increased risk of dying sooner than those with smaller waists. (*Am J Epidemiol 08;167:1465–1475*)

As I've discussed on several occasions, waist size is largely dependent on belly fat or visceral fat. This is the fat that surrounds the organs, as opposed to subcutaneous fat that lies between the skin and the muscles. Just by looking at belly fat, you can pretty well predict the possibility of future problems with type 2 diabetes and cardiovascular disease.

Unfortunately, as we age there are a number of contributing factors that make us prone to the development of belly fat.

After the age of about 20, our metabolic rate decreases by about 3 percent each decade. Yo-yo dieting can make this percentage go even higher. This reduction in our metabolic rate is nature's way of letting us go further on the same amount of food.

Our hormone levels also change. Levels of growth hormone and testosterone decrease dramatically after (Body fat continued on page 119)



NEWS TO USE FROM AROUND THE WORLD

Finally, Some Responsibility

WASHINGTON, DC—There's a huge change about to take place starting October 8, 2008. Medicare will stop paying hospitals for several conditions and infections that are acquired after a patient is admitted. This change in policy was mandated by Congress under the Deficit Reduction Act. And under this policy *the costs can't be passed on to the patient*.

The idea is to make doctors and hospitals more responsible. It is felt that many problems are preventable and shouldn't be occurring in the first place if proper procedures are being followed. The initial list of what won't be covered includes:

- pressure ulcers,
- objects left in the patient following surgery,
- air embolism,
- blood incompatibility from tranfusions,
- catheter-associated infections,
- mediastinitis (infections that occur after coronary artery bypass graft surgery),
- surgical site infections, and
- falls and trauma.

As you can imagine, this is causing quite a stir among hospitals and the AMA in this country. Medicare expects to save millions of dollars and force changes that could save thousands of lives. Next year Medicare officials are considering adding ventilator-associated pneumonia, *Staphylococcus aureus* septicemia (blood poisoning), and deep vein thrombosis/pulmonary embolism to the list as well.

If they can effectively enforce these rules, I think the public will be far better served in the long run. Private insurance companies will be watching this policy change very closely, and I suspect they will probably follow suit if it proves to be successful.

In a somewhat related development, researchers in Finland have found that a primitive therapy works far better to treat pressure ulcers than the standard therapy of using polymer gauze dressings. When they treated the pressure ulcers (bed sores) with tree resin from the Norway spruce, the results were far more positive.

The 6-month study involved 13 patients using the resin and 9 using the conventional dressings. All of the ulcers in 12 of the 13 healed (92 percent) compared to only 4 of the 9 (44 percent) in the other group. They also discovered that the resin cleared any infection while the standard treatment did not. (*Br J Dermatol 08;158:1055–1062*)

Since hospitals will soon have to foot the bill for pressure ulcers, maybe (I'm dreaming) they will start to look for less costly, effective natural treatments like tree resin or sugar/iodine dressings. When the government simply picks up the tab for their negligence and mistakes, there's very little incentive to utilize or investigate the alternatives. Maybe safer alternative therapies will start to play a bigger role in conventional health care.

Tree pitch has been used in folk medicine for thousands of years. I personally keep several bottles around. It's wonderful stuff. I use a product called Super PAV from NATRhealth in Eureka, California. They can be reached at 800-422-4716 or at *www.natrhealth.com*. Super PAV is an excellent product that I found years ago and have continued to recommend and use ever since. It has a shelf life that will outlast us all, and it's great for all kinds of cuts, scrapes, rashes, burns, fungal infections, stings, and bites.

Get a Honey of a Complexion

DRESDEN, GERMANY—If you've been reading *Alternatives* for any length of time, then you know how highly I value the therapeutic characteristics of honey and other bee products such as propolis and royal jelly. Honey in particular seems to be one of nature's all-purpose healers, especially when it comes to the skin. Applying honey bandages (similar to the use of tree pitch in the previous item) can promote healing in a wound or sore that has previously refused to close.

All honeys have some antibacterial activity, due to their ability to generate hydrogen peroxide. In a study performed at the University of Waikato in New Zealand, researchers washed the hydrogen peroxide out of several different types of honey, and found that honey from the manuka tree retained much of its antibacterial activity. More recent studies have shown that the active antibacterial component is a compound known as methylglyoxal. (*J Pharm Pharmacol 91;43:817–822*) (*Mol Nutr Food Res 08;52:483–489*)

So far, most of the research on manuka honey has focused on repairing severe skin damage. There's evidence, however, that manuka honey can also help repair more subtle problems, including the dryness due to exposure to the sun and weather. Part of the benefit may be due to the fact that honey is hygroscopic—that is, it attracts moisture. Cosmetic companies have spent millions of dollars researching artificial compounds such as propylene glycol that will do the same job that honey does. (The technical term for these ingredients is "humectants," no matter what their source.)

While it might be too messy, not to mention sticky, to apply honey directly to your face, a few companies are beginning to use manuka honey as an ingredient in skin care products of all types. As-yet-unpublished research shows that these products aid in the repair of a wide variety of types of skin damage.

NEWS TO USE (CONTINUED)

Improving Sleep Quality

LOUISVILLE, KENTUCKY—In the earlier article about depression, I mentioned the importance of proper sleep habits—an area that has been overly neglected in this country. Snoring and sleep apnea are two associated problems that readily come to mind. There are hundreds of thousands of individuals who suffer from sleep apnea without knowing how much better they could sleep and feel by using a CPAP (continuous positive airway pressure) machine. A new study has also shown that green tea extract can reduce many of the negative consequences associated with sleep apnea.

Researchers at the University of Louisville subjected rodents to intermittent hypoxia (periods of low oxygen levels) during their sleep similar to what occurs during sleep apnea. They then tested the animals' ability to navigate a water maze to test for brain and nerve deficits commonly associated with sleep apnea. Some of the animals were given green tea extract in their drinking water and some weren't.

Animals given the green tea extract performed significantly better than those who didn't receive it. The untreated animals also showed high levels of markers for aging and oxidative damage to their brains. Those getting the green tea extract showed a 40 percent reduction in these oxidative markers. (*Am J Respir Crit Car Med 08;15:177:1135–1141*)

Green tea extract and green tea have lots of research showing benefit in both the prevention and treatment of dozens of diseases. I recommend regular use of either. Green tea extract obviously has the ability to help protect brain and nerve cells during periods of hypoxia or

(Body fat continued from page 117)

puberty, the teens, and early 20s, causing excess food to be stored as fat rather than used for spurts of growth. The body's response to the thyroid hormone, which controls the metabolic rate, decreases as well.

The only safe, realistic way to compensate for these changes is to increase your activity and reduce your food intake...just the opposite of what normally happens.

One of the best and easiest ways to lose visceral fat is through walking. Research has shown that significant reductions in waist circumference can be quickly achieved simply by walking 30 minutes a day.

Even greater progress can be obtained by eliminating HFCS (high fructose corn syrup) sweeteners from the diet. These sweeteners impair your ability to recognize when you're full, and they're hidden in practically every food nowadays, from ketchup to cereals. low oxygen states. Not only could it be a godsend to those with sleep apnea, but it stands to reason it could also benefit anyone with circulation problems, athletes competing in strenuous sports, or even soldiers on the battlefield.

I mentioned snoring earlier, and it is one of the hallmarks of sleep apnea, but snoring can occur independently of sleep apnea as well. Oftentimes it is due to blocked nasal passages, which necessitates breathing through the mouth. When this happens at night, snoring is often the result. It may not be a noticeable problem to the snorer, but it can be a nightmare for the spouse or anyone else in the immediate area.

There's a great little gadget called the MegaVent from Sweden that opens up the nasal passages and can help prevent this type of snoring. It's one of those items I wish I would have invented. It's practically invisible, very easy to use, and works great. All you do is slide the small plastic device into the nostrils. It comes in two sizes. Your choice is determined by the "rule of thumb": If your thumb will fit into your nostril then you need the large size. If yours won't fit into your nostril you need the medium size.

You can order MegaVents directly from the company, either by calling 866-434-8685 or on the Web at *www.megavent-stop-snoring.com*. Use coupon code "David" when you place your order and they'll give you free shipping. (Be sure to tell them what size you need.) Please be aware that this is a small company, so placing your order online is the surest way to get through to them. The cost is \$24.95 and you get three reusable devices with each order. My wife swears they make her sleep so much better (when they're in my nostrils).

Flush Your Brain Clear

couple of weeks ago I received a frantic call from a family friend who, after taking his Daily Advantage, started experiencing all the symptoms of a "niacin flush." The tingling, hot sensation, and redness on his face, chest, and arms was something he'd not experienced before, and it frightened him. I assured him everything was fine and it would subside within 15 or 20 minutes. If you've never experienced the sensation, it can be a little unnerving, especially if you don't know what's happening. (Personally, I like the flushing.)

Daily Advantage contains only 20 mg of niacin which, under most circumstances, won't result in a flush, particularly if taken with food. I originally wanted to increase the amount to at least 100 mg, but thought the sensations resulting from taking that much niacin might make some people avoid taking the product. Most people require at least 100 mg to experience a flush in the beginning. After a few days their body becomes acclimated to that amount, and greater doses are required to produce the effect.

Niacin is one of the least expensive nutritional miracles available today. It obviously opens blood vessels and improves circulation throughout the body. I've written entire articles in the past on its many benefits, and more news seems to be surfacing every year. The latest information suggests that niacin intake may be instrumental in preventing memory problems-and probably Alzheimer's disease.

Researchers with the Veterans Administration recently discovered how niacin is able to raise HDL, the "good" form of cholesterol. Apparently niacin blocks the liver from removing HDL from the blood, allowing the body to maintain higher HDL levels. (*J Lipid Res* 08;49:1195-1201)

Good Cholesterol Makes a Healthy Brain

Researchers in the UK and France just released another piece of the puzzle.

HDL cholesterol levels were measured along with short-term memory in 3,673 individuals (one quarter being women) between 1995 and 1997 and again between 2002 and 2004. Those individuals whose HDL levels decreased during the five years between tests had a 61 percent increased risk of declining ability to remember words. (Arterioscler Thromb Vasc Biol 08;28:1556–1562418–1420)

Memory loss during middle age is one of the symptoms of Alzheimer's. (It's also a sign of other forms of early dementia.) In Alzheimer's patients, beta-amyloid plaques form in the brain and interrupt nerve transmissions. HDL cholesterol is instrumental in helping to slow down this process. HDL has numerous other positive functions, one of which is to stop LDL cholesterol deposits from forming in arteries and causing blockages.

We've had earlier studies comparing niacin intake and the risk of developing Alzheimer's disease. One study found that individuals with an average daily intake of 12.6 mg per day were 80 percent more likely to be diagnosed with Alzheimer's than individuals taking 22.4 mg per day. (J Neurol Neurosurg Psychiatry 04;75:1093–1099)

These new studies, however, give us both the mechanism and more solid data to show just how helpful niacin can be. Alzheimer's and other forms of dementia are a growing problem in this country. They are frightening and debilitating diseases. Niacin is an extremely inexpensive way to combat them, and this is exactly the type of answer the pharmaceutical companies would rather the public not know. One of the easiest methods of raising/maintaining higher HDL levels is by taking niacin.

Sure, you may experience the flushing sensation in the beginning. It can be minimized by starting out with smaller doses and gradually increasing them and, as your body gets used to it, the flushing will generally subside altogether. And, if you're a little strange like me, you might actually learn to like it.

(It's worth mentioning here that we're talking about the niacin form of vitamin B3. The other common form, niacinamide, has its own set of benefits, which I've written about many times before.)

The other issue you always hear about with niacin is that it can cause liver problems. I haven't seen this effect in people I've given it to, and neither have hundreds of other doctors that utilize niacin therapy. It can occur in "time-release" forms of niacin, but I'd never recommend those. It also appears that high doses of niacin can produce confused results on liver function tests, but that appears to be the extent of it.

For severe cardiovascular problems, dosages of 2 to 3 grams a day have been recommended with great success (taken in divided doses throughout the day). If you have no serious problems, a good maintenance dose would be anywhere from 200 to 1,000 mg a day. And it's still one of the best bargains around.

Take care,

Dr. David Wellie

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