

VitalNews

THE QUARTERLY NEWSLETTER OF VITALREMEDYMD

JULY 2005

Failure to exercise is not an option. How do I convince thee?

WRITTEN BY LAURA DENSON BAUM, M.D.

Let me count the ways... Exercise improves heart and lung function, decreases resting blood pressure, decreases body fat, decreases total and LDL "bad" cholesterol, raises HDL "good" cholesterol, increases energy levels, increases tolerance to stress and depression, and controls or prevents the development of diabetes. Even from the first day, you will feel better if you exercise. Because you feel better, you will look better, and the world will look better to you. With time, your body will respond by increasing muscle mass and tone and

decreasing body fat. You will be thinner, stronger, more limber and flexible, and your body will function better and be less vulnerable to orthopedic injury. You will be healthier and decrease your risk of cancer, heart disease and chronic illness. Did I mention you will feel better? The day will seem more sunny, your tasks will seem more manageable, you might even notice suddenly your "glass is half full." Tell me, where is the down side? Before you even start with excuses, I will point out that they are just that, excuses - transparent attempts at procrastination - and I have used them all myself: "it's too hot, it's too cold, it's raining," or my personal favorite: "I don't have time." Well, a wise man once said, "Those who think they have not the time for bodily exercise will sooner or later have to find time for illness."

Myriad studies have shown the health benefits of exercise and they all sound something like this: Scientists at universities around the country as well as at the Centers for Disease Control and Prevention followed more than 74,000 women ages 50 through 79 for almost five years. What they found was that women who walked briskly (or biked, swam easy laps, or danced) for just an hour and a half to 2 1/2 hours a week were 18 percent less likely to develop breast cancer during that 5-year period than women who were sedentary. That comes to just a half hour three to five times a week. Not too much to ask in order to reduce your risk of dying from cancer. A quick glance at some more recent medical studies included the following titles: *Exercise reduces risk of recurrence and death in early stage colon cancer patients; Exercise and stress management show physiological benefits for heart patients; A new New Year's reason to work out: Exercise improves three measures of heart protection; Exercise helps reduce symptoms of depression...*and on and on it goes.

There are many, many research findings that support the role of exercise in disease prevention. What has occurred to me is that most people know this at least intuitively without quoting studies. They also know that cigarettes cause cancer, and so on. It may just come down to making a commitment to ourselves - breaking old habits and making new choices. I used to play a game with myself when I had trouble getting motivated to go to the gym. I would promise myself that I only had to exercise for 15 minutes, but I had to go. Invariably once I had begun exercising I felt better and wanted to keep going. (I only acted surprised.) I worked through my usual routine and then gave myself a pat on the back; the feeling lasted well through the day. For the person who's just getting started keep this in mind: anything that's more than you did yesterday is good. No, in fact, it's great! Getting started is always the hard part. Enlist a friend or even a personal trainer or make an appointment with yourself that can't be broken. Just do it, and then tell me how you feel.



inside

AGE STRONG/LIVE LONG
Lessons from My Patients

SETH J. BAUM, M.D. FACC
Founder
VitalRemedyMD

Medical News

Current medical insights

**Intelligent
Indulgences**

Did You Know

LAURA D. BAUM, M.D.
Editor in Chief

Lessons From My Patients

“Age Strong, Live Long is a personalized and sane toolbox for your health and happiness. Please open and use—with reckless abandon. Your body will thank you.”

-Dr. Mehmet C. Oz
Director of the Heart Institute,
New York Presbyterian/Columbia
Medical Center and Author
of the national bestseller
You: The Owner's Manual

WRITTEN BY **SETH J. BAUM, MD**

(Excerpted from *AGE STRONG/LIVE LONG: Lessons from My Patients*)

As a child I was constantly on the move. Getting home from school, I'd immediately find some physical activity to support my habit. Whether it was a “formal” exercise like street baseball, box ball, capture the flag, home free all, or simply roaming the neighborhood on foot or bicycle in a vain attempt to create an organized activity; I was in motion. I was thin, and so were most of the children I knew. It was the rare child back then who suffered from obesity.

Now things are different. Take a look around you. Two thirds of our nation are overweight, a

third of these, morbidly so. Children comprise a major part of this problem. As a result, diabetes is becoming a prevalent childhood illness. This is not the childhood diabetes that we have all been accustomed to hearing about, the one that afflicts thin children as a consequence of pancreatic failure. This is the diabetes of our grandparents, the diabetes of aging, poor eating habits and obesity.

Our world is now upside down. Children sit at home after school, content to watch TV or play their video games. Neighborhood activities are parents' memories; the only after school activities our children understand are those that require a carpool and formal referee. And so our children enlarge, becoming ill in an untimely, unnatural way. The fault of course lies

medical news and events

Lifestyle Biggest Risk Factor for Diabetes

Diabetes is a global health problem that increases the risk of ill health and shortens life. There are two kinds of diabetes – Type 1 and Type 2. All diabetes is characterized by elevated blood sugar (glucose). In Type 1 diabetes there is an absolute lack of insulin. In Type 2 diabetes, insulin is produced, but the body's tissues are resistant to its action. Type 2 diabetes is strongly related to overweight and lack of physical activity, and accounts for 90% of all diabetes. It usually occurs in middle to older aged adults, but is being found with increased frequency and in younger age groups than previously seen. To reduce the risks of developing Type 2 diabetes it is essential to start leading a healthful lifestyle as early as possible including a healthy, balanced diet and regular physical activity.

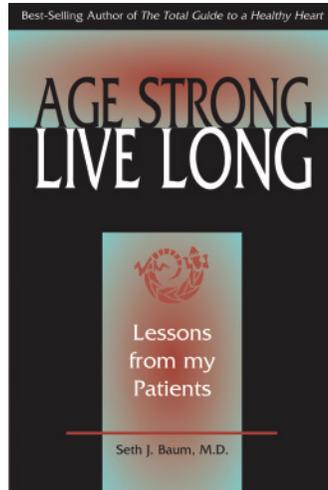
Overweight Men Spend More Money on Prescription Drugs Than Normal Weight Men

Researchers studied 328 male business executives, average age 47, who participated in a health screening at Mayo Clinic's Executive Physical

program between January 2001 and May 2002. Subjects were divided into three weight categories based on their body mass index (BMI) and their pharmacy costs were subdivided into drugs prescribed to treat coronary heart disease (CHD) risk factors and those for other medical conditions related to weight. For normal-weight men, prescriptions for CHD risk factors cost \$9.89 per month, and those for other medical conditions cost \$12.96 per month. For overweight men, CHD-related prescriptions cost \$18.41 per month and other prescriptions \$20.86 per month. For obese men, CHD-related drugs cost \$42.02 per month and other drugs were \$38.29. The cost of obesity as reflected in prescriptions alone was dramatic; these are real and immediate costs, not those associated with an operation or a serious event like a heart attack that might happen in the future. All major CHD risk factors except smoking increased as BMI class increased, as did the prevalence of low back pain/degenerative joint disease, erectile dysfunction, sleep apnea, gastroesophageal reflux, and depression.



not just with them... adults nowadays are too busy running on our rat's wheel to have time to address our children's idleness; neighborhoods are deemed unsafe to roam unsupervised; and children are often overburdened by scholastic demands not present in our youth. Factor in also, the readily accessible, highly processed trans fat-suffused fast foods, and the end result: children are getting fat and sick.



through life's trials. You will be moved from tears to laughter as you take a journey with him as he recounts many of these stories. He then offers "take home points" to assist in a more healthful approach to our inner selves, what we eat, and how we live. You will learn the truth about nutritional supplements, about the need to exercise, how to attack modifiable cardiac

risk factors, and how to approach life in a way that will help you live and age better.

In his new book *Age Strong, Live Long: Lessons from My Patients*, Dr. Seth Baum shares years of experience and real life lessons he has learned from the individuals who have entrusted their care to him; lessons that can only be offered

"It's the next best thing to the fountain of youth. Dr. Baum has put into words my life plan – the plan that has allowed me to remain healthy, active, and live a full and contributing life. Thank you Dr. Baum, for putting my lifestyle into words."

-Chris Evert

Retired professional Tennis star and member of the International Tennis Hall of Fame, organizer and active principal in Chris Evert Charities

Smoking and Obesity Accelerate Human Aging Researchers looked for evidence of aging at a molecular level in smokers and obese individuals. They analyzed telomeres, which cap the ends of the chromosomes in our cells and protect them from damage. Every time a cell divides, and as people age, their telomeres get shorter. The findings suggest what would be expected; obesity and cigarette smoking accelerate human aging. They found that telomere length decreased steadily with age and the telomeres of obese women and smokers were much shorter than those of lean women and never-smokers. More specifically, the difference in telomere length between being lean and being obese corresponds to 8.8 years of aging; smoking (previous or current) corresponds on average to 4.6 years of aging; and smoking a pack per day for 40 years corresponds to 7.4 years of aging. The results emphasize the potential wide-ranging effects of the two most important preventable exposures in developed countries – cigarettes and obesity.

continued on page 4

intelligent indulgences

Edamame and Bean Salad with Shrimp and Fresh Salsa



INGREDIENTS

- 1 cup frozen shelled edamame
- 1 1/2 cups chopped cooked shrimp
- 1 cup chick peas or cannellini beans
- 1 1/2 cups halved cherry tomatoes
- 2 tablespoons chopped red onion
- 1 tablespoon minced jalapeño pepper
- 2 tablespoons chopped fresh cilantro
- 2 1/2 tablespoons fresh lime juice
- 2 tablespoons extra virgin olive oil
- 1/2 teaspoon salt

Cook edamame according to package directions. Drain and rinse with cold water; drain. Combine edamame, shrimp, beans, cherry tomatoes, onion and jalapeño pepper. Combine cilantro and remaining ingredients, stirring with a whisk. Drizzle over edamame mixture and toss gently to combine. Cover and chill. (Serves four).

\$ | 00 OFF
your purchase of
AGE STRONG/LIVE LONG
Lessons from My Patients

Mention Promo Code #VN705.

Visit www.vitalremedymd.com or call 800-770-4360 to place your order.

Did you know....?

The World Health Organization predicts that the number of people with Type 2 diabetes will more than double over the next 25 years.

Obesity has recently been elevated to the list of major risk factors for heart disease. Others modifiable risk factors include smoking, high blood pressure, high cholesterol, stress, and lack of exercise.

When asked to say how much they ate over a 24-hour period, six out of seven women underreported by an average of 621 calories. Are there more calories in our food portions than we're aware? Or could it be we're trying to delude ourselves? Researchers noted that the further people were from what they considered to be their ideal body weight, the more likely they were to underreport.

medical news and events

continued from page 3

Liposuction Does Not Improve Risk Factors for Coronary Heart Disease Obesity is associated with insulin resistance and other metabolic risk factors for heart disease. The obvious question arose of whether liposuction might be a potential treatment. Results of investigation to date indicate the answer is "no." When body fat is lost through diet and exercise it results in metabolic changes which reduce risk for heart disease and diabetes. The same benefits do not appear after surgical removal of subcutaneous fat. Liposuction does not decrease the size of fat cells that remain throughout the body or the total fat elsewhere in the body in muscles, the liver, and other organs. These fat cells release harmful substances that contribute to insulin resistance and other metabolic changes. Liposuction may have its place, and if it helps jumpstart a commitment to improved lifestyle that's great, but when it comes to your health it can't take the place of healthful eating and regular exercise.

our MISSION
is to enable your
doctor to provide
you with the best
and most appro-
priate nutritional
supplements.

To learn more about our products please ask your physician, or visit our website at www.vitalremedymd.com.

AntioxidantBalance® • Daily2Tab • DailyMultiple • HomocysteineFormula • Dialysist™
JointFormula • N-AcetylCysteine • PureCalcium • StatinGuard® • Vital4Cholest™ • VitalOils™
Telephone: 561-347-6446 or Toll Free 800-770-4360 Outside Florida



6401 E. Rogers Circle, #4, Boca Raton, Florida 33487

