

How to Age Gracefully



*Your genes are not your destiny.
They only show a tendency toward
a particular illness.*

Willamette completed three more chest presses pumping 40 pounds and took a long drink of water. She loved working out. She did a strength training workout twice a week and aerobic exercise at least four days a week, sometimes five. She had started this routine two years ago.

She couldn't compete with the sweet, young things that were in their teens and early 20s, but she had dropped 15 pounds. She was more limber and stronger than when she started. She had control of her food cravings and followed a healthier diet. All of this was important to her since her mother was developing progressive symptoms of Alzheimer's disease and she had a demanding home life with two teenage sons and a workaholic husband.

Most importantly, she felt better about herself. She took a multivitamin, fish oil, and recently 2000 IUs of vitamin D a day.

She wanted to know what more she could do, especially with her family history of Alzheimer's disease. She was ready to take the next step. After she cleaned up, she headed over to my office.

I reviewed her history when she arrived. She had high cholesterol and high homocysteine. She continued to have menstrual periods on low-dose hormone replacement therapy at the age of 51. She was on 20 mg of Lipitor a day for her cholesterol. She had almost eliminated grains and sugar from her diet, which had contributed to her weight loss and increased energy. However, she admitted to drinking at least 8 beers per week. She had had her silver fillings removed because of concerns about toxicity from the mercury in amalgam fillings. She had read about its association with an increased risk of Alzheimer's disease.

She said that she had some problems with anxiety and her family history was positive for cancer, diabetes, high blood pressure, high cholesterol, and stroke.

"How can I help you?" I asked. "You wrote down that you wanted an overall health evaluation. Tell me, when was the last time you felt great?" I smiled.

"Well, I feel pretty good with everything that I have done so far," said Willamette. "I want to know what else I can do to help me age more gracefully. My Mom has had memory loss for over 10 years. She is in a nursing home now, and I visit her every day. Sometimes she recognizes me and sometimes she doesn't," said Willamette as she looked down. Then, raising her head, she said, "I don't want to put my family through what my Mom is experiencing. What can I do to reduce my risk of developing Alzheimer's disease?"

"Your genes are not your destiny. They only show a tendency toward a particular illness. You control whether or not those unhealthy genes are turned on. By the time you're 51, over 70 percent of your future health has to do with lifestyle choices. For example, a recent study showed that people who ate a meal consisting of fast food, like McDonald's, turned on approximately 150 different genes that pushed them towards heart disease, diabetes, and hypertension. When the same group was given a healthier meal, none of these genes were turned on. So, for the most part, you're in charge of how you're going to age. What I can do is assess where you are right now and help you fine tune your choices. You've already embraced

the hardest lifestyle changes that most people hate to do. You are exercising regularly and eating healthily. Those are huge, but they're not enough. So let's look at what else you can do to age gracefully," I suggested.

"First, let's look at the various toxins in your life. How often do you use drugs like Mylanta or Pepcid Complete, or Mucinex?" I asked. "These all contain aluminum and raise homocysteine by depleting the body of B vitamins."

"Very rarely. I also stopped using deodorant that contained aluminum, and discarded my aluminum cookware a long time ago," Willamette responded. "I know aluminum can cause Alzheimer's."

"It contributes to it," I said. "Do you take Tylenol or other pain relievers like aspirin, over-the-counter NSAIDs, Aleve and ibuprofen?" I asked.

"A couple of times a week depending on whether I have headaches or muscle aches and pains from working out," said Willamette.

"I suggest that you not use Tylenol more than once or twice a month. It lowers your glutathione, which is a critically important antioxidant for the brain. Also, anti-inflammatories deplete your body of B vitamins which will raise your homocysteine which also contributes to Alzheimer's. Lipitor along with some antidepressants, beta-blockers, and many of the older diabetes drugs such as glyburide all reduce one's levels of Coenzyme Q10, which is also critically important for brain function and health. Do you have any problems with your memory? Are you forgetting where you put your car keys? Are you having trouble remembering names?" I asked.

"Sure, but doesn't everybody as they get older?" Willamette asked.

"To a certain degree, yes. If you find that it is getting progressively worse, especially with your family history of Alzheimer's disease, you want to do whatever you can to do to help support optimal brain function. Do you have any numbness or tingling or loss of sensation in your feet? Any burning at night?" I asked.

"Yes, recently, but I hadn't thought about it until just now," said Willamette.

by Elizabeth R. Vaughan, MD



"That may be a sign of early peripheral neuropathy, which can be caused by B vitamin deficiencies and/or CoQ10 deficiency. It's a very common complication of using Lipitor or other statins. You're not taking any diuretics, are you?" I asked.

"I used to when I had fluid retention before I lost the weight, but I don't now," said Willamette.

"That's good because hydrochlorothiazide, which is a component of many diuretics also lowers your CoQ10.

"The other major concern I have concerning toxins is that you are consuming eight beers a week. Is that all you're drinking?" I asked.

"I wish it were," said Willamette. "Sometimes it's more, sometimes it's less. The alcohol just helps me relax".

"How well are you sleeping at night?" I asked.

"I fall asleep okay, but I tend to wake up in the middle of the night," said Willamette.

"Well, alcohol isn't good for your sleep. It also reduces your glutathione just like Tylenol. It raises your homocysteine, which speeds up the development of Alzheimer's disease and the progression of cardiovascular disease. Alcohol depletes your B vitamins. You'll probably sleep better if you cut back on it," I suggested.

"I'll have trouble doing that," said Willamette. "I've tried, and I just get too anxious".

"Then let's try an amino acid called glycine, which will raise a neurochemical in your brain called GABA that is very calming. I'll put you on some evening primrose oil (EPO) 3000 mg a day, which helps your brain see the GABA once you are making more of it. Many people find that taking these

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nutrients are more effective than taking Xanax, Valium or drinking alcohol," I suggested.

"That's what I want," said Willamette.

CLINICAL EXAMINATION

Slender, short, blond. Ht 5'2", Wt 111 pounds, BP 116/64, P 70, R 16. She had had a lot of dental work and had no remaining amalgam fillings, but she had amalgam tattoos on her gums. Loss of sensation in her feet consistent with peripheral neuropathy. Her balance wasn't good. She was also low on all of her minerals.

"You are in pretty good shape," I said. "Let's do some tests to look for other potential problems. At this time, I know you have homocysteinemia. Let's see how well your multiple vitamins are controlling it. You also have hypercholesterolemia, peripheral neuropathy, menopause, insomnia, and excess alcohol use. I'm concerned about the possibility of your still having a lot of mercury in your body even though you had your amalgams removed. You have amalgam tattoos, which occur when people are

not able to eliminate mercury. Mercury is clearly associated with an increased risk of getting Alzheimer's disease at a younger age.

"I want to get a CoQ 10 level and a high sensitivity CRP to look for signs of inflammation. Also an APO-E gene type to determine how easily your body is able to eliminate mercury and whether or not we need to chelate you. Also growth hormone, B12 level, and some other baseline blood work," I suggested.

"That sounds fine," said Willamette. "I'll try to cut back on my alcohol as I take those other supplements you mentioned."

"I also want to give you a B12 and thiamine shot to see how you respond to that. When you go home check your balance. It takes approximately 8 weeks of taking high dose B vitamins to see an effect on memory, and it may help your mood, your energy level, and your balance within hours," I suggested.

"I'll let you know," said Willamette.

I started her on a good mineral supplement, Coenzyme Q 10 100 mg a day with food and N-acetyl cysteine (NAC) to help raise her glutathione levels since

she was using some Tylenol and consuming alcohol. I also started her on acetyl L carnitine 400 mg once a day and alpha lipoic acid 300 mg daily. Each of these is a critical antioxidant that enhances brain function and increases energy. Lastly, I put her on phosphatidylserine 100 mg each night to help her sleep and to enhance communication within the brain. This critical supplement enhances the health of the membranes of all cells in the body, and especially neurons. It can be very helpful managing stress and early memory problems.

THREE DAYS LATER

Rosa called Willamette and asked how she responded to the B12 shot.

"I felt fabulous after that shot. My balance was strikingly better," said Willamette. "And I already feel a little calmer with the glycine. Can I overdose on that stuff?" she asked.

Rosa laughed and said, "No. Your lab work showed that your homocysteine is moderately elevated at 12.7. This is still within what is considered 'normal range', but Dr. Vaughan considers optimal range between 4 and 6. When your homocysteine is above 9, she says you are at increased risk of brain damage from the homocysteine. Your B-12 is slightly low so she'll call in some B-12 and thiamine shots for you to use for the next several weeks. Lastly, your CRP is nice and low, so you don't have a lot of inflammation at this time. The rest of your values are good, all in optimal range.

"I don't have your gene test back yet, but Dr. Vaughan will contact you about the results of that when it is back," said Rosa ending her conversation with Willamette.

SEVERAL WEEKS LATER

I contacted Willamette after reviewing the results of her APO-E test. There are 3 versions of the APO-E gene. An APO-E 2 gene codes for a protein that can efficiently remove mercury from the brain. An APO-E 4 gene codes for a defective protein that is not able to remove mercury from the brain. An APO-E 3 gene is somewhere in between. People with an APO-E 2 gene from each parent can easily remove mercury from their brains and have a very low risk of ever developing Alzheimer's disease. Those

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with an APO-E 4 gene from each parent, which make up 1% of the population, are at markedly increased risk of developing Alzheimer's disease in their 50's. A 3/4 combination increases one's risk of developing Alzheimer's disease in their 60's. Willamette had a 3/4 combination. This in combination with her having the amalgam tattoos in her mouth strongly suggested the possibility of mercury toxicity contributing to her peripheral neuropathy and memory problems. It would also increase her risk of Alzheimer's at an earlier age.

I reviewed these findings with her.

"I am so glad you did that test because I knew, on some level, that I was at an increased risk even with everything I was doing," she said.

"Well, there are a lot of people who do not want to know," I said. "But, this is one of those tests that you can do something about it. This is a very treatable condition and the brain has an amazing ability to heal itself if we remove the toxic influences. In your case, that includes excessive stress, alcohol, Tylenol, some of the anti-inflammatories that you're taking, pesticides and other toxins in the environment, your Lipitor, and probably mercury. Also, you're 51, so you lived in houses built before 1978 that had lead paint, so you may have some lead exposure. It doesn't do your brain any favors, so we'll take a look at all of these things."

"Do you want me to stop my Lipitor?" Willamette asked.

"No, your CoQ10 level was okay, but I do want you stay on the higher dose of CoQ10 that I suggested and see how well your brain functions over the next several months. I also want to see if your peripheral neuropathy gets better with

that and the higher dose of B vitamins I suggested. How are you doing with the B12 and thiamine shots?" I asked.

"The burning in my feet completely cleared up," responded Willamette.

"That's great. Let's get you set up for testing for heavy metals and I'll see you back in the office after I get the results of that test," I suggested.

ONE MONTH LATER

Willamette returned to the office to review the results of her provoked urine test for heavy metals. The results were striking.

"Your mercury level is over 25 mcg per gram of creatinine. That is pretty high. And your lead levels are elevated. Not surprising since you're 51 years old. Did you used to smoke?" I asked.

"Yes, a long time ago," she said.

"Well, you have moderate levels of cadmium and the most common source of cadmium is either cigarette smoking or exposure to secondhand smoke," I explained.

"Well, I'm guilty on both counts. My husband smokes and I used to smoke; although, I never smoked that much," Willamette replied.

"Well, cadmium is a very strong estrogenic carcinogen, so it's important to have your husband smoke outside instead of in the house to reduce your exposure to it. Along with everything else, you don't need it," I suggested.

We talked for a while and designed a chelation schedule to remove the toxic metals from her body over the next several months.

NINE MONTHS LATER

We used a combination of chelating agents and eliminated her mercury and

brought down her lead and cadmium levels on retesting. Also, her homocysteine came down to 4.5 and she was able to stop her Lipitor because her cholesterol came down to optimal range.

"I am feeling so much better after the chelation," said Willamette. "I don't have any problems with my feet any more. My head is clearer. I'm just sharper. You know, I guess I didn't want to admit that I was losing my edge before, but I've gotten it back."

"Well, a lot of the symptoms that conventional doctors tend to attribute to 'getting older' are due to a lack of nutrients and an accumulation of toxins. As I said before, the body has an incredible ability to heal itself if you give it the support that it needs. Good food, the appropriate supplements, and elimination of toxins work most of the time. I'm happy that you have experienced significant improvement. You'll need to continue doing chelation on a less frequent basis for the rest of your life because of your APO-E gene combination. For now, I suggest that you use an oral chelator and we'll retest you in a year to see how much mercury you have re-accumulated from the environment," I suggested.

"I look forward to working with you over the next 51 years," I smiled. Willamette brightened up and said, "Actually, it's 52 years now".

"Well, you can't get to 100 unless you pass through 52," I smiled. "Take care and I'll see you soon".

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