

1. Weight-Loss Programs Need Health Plan Support

John La Puma, MD

Mark Palmer

Insurers can play an active part in helping members change their thinking, and therefore change their lifestyles

Weight-loss programs have dismal success rates. Eleven pounds is the average weight lost after a year in a counseling-based weight-loss program. After two years, 83 percent of participants have gained back more than they lost. Complete regain is the norm after five years.

Most people are better off not going on diets at all.

What is missing is not just an individualized method of sustainable weight loss for health plan members. Health plans' customers are missing out on reduced presenteeism, reduced absenteeism, and reduced short-term and long-term disability claims.

The National Business Group on Health estimates that obesity accounts for 39 million lost work days, 239 million restricted-activity days, and 63 million physician visits. Health insurance costs related to obesity are \$8 billion of the \$13 billion that obesity costs U.S. companies annually.

But obesity is a personal medical problem suffered by an individual, and the only person who can solve the problem is the individual. While the financial impact of obesity is felt at the health plan level, obesity cannot be solved at the health plan level.

But there is something the health plan can do: Support success. If a health plan's weight loss program focuses on helping employees change their thinking, not just what they eat, it helps them today and it gives them a tool for tomorrow.

There are two keys to individualized, sustainable weight loss. The first is qualification: Not everyone qualifies as someone who sincerely desires to lose weight and to prevent

regain. Qualified plan members are ready to change their thinking, motivated to begin a lifestyle change (not a diet), and available to do so.

The second key is a health plan actively engaged in helping qualified members, and educating plan members not yet ready for sustainable weight loss.

Sustainable weight loss is not about dieting, though dieting is the usual strategy of weight- loss programs. It is about consistency: consistency about what, with whom, how, and when you eat; consistent exercise; and consistent care of your body.

Each person's goals, family, and schedule are the keys to success. So is the skill of those people who have kept weight off for years, such as those in the National Weight Control Registry.

Though using these ideas is logical, it takes a health plan tired of seeing its money wasted on usual and customary approaches to try them. It takes willingness to create a supportive environment and to use technology to expand the program's reach within an organization.

Most of all, it takes a company that believes that the time to begin addressing obesity is now.

What does your company believe?

http://www.managedcaremag.com/archives/0711/0711.viewpoint_weightloss.html

2. Private Lives: How Much Should Doctors Account for Behavior Outside of Medicine?

John La Puma, M.D.

The recent Associated Press report that hundreds of physicians nationwide grow 7 million pounds of tobacco in 23 states made me wonder: How much should our private lives reflect our public ones?

Acceptance of professionalism makes physicians different from others who hold themselves out to offer care and treatment. Professions have publicly available codes of ethics. Professions regulate themselves. Professions create, accept, meet and monitor standards of competency.

The greater good

Publicly, professionals say that they will hold the good of those they serve to be greater than their own good. Acceptance of medical professional duties and privileges implies acceptance of the medical ethical principles that underlie them. Medical ethical principles guide how professionals interact with their constituents — patients, other providers, professional associates, business associates — in their professional roles.

Private actions are not the subject of codes or principles of medical ethics, generally speaking. Should some private actions (say, tobacco growing and selling) be ethically foresworn by medical professionals? What makes some private actions seem outrageous and others just disappointing? Which private actions are relevant to the public practice of medicine?

Conversely, are some private actions (say, becoming fit) morally obligatory for medical professionals? Or are these private actions just good things to do and not what good doctors do?

Professionally private?

The obesity management literature demonstrates that physicians who change their own lifestyles spend more time with obese patients and are more often successful at helping those patients change than those physicians who do not. There is overwhelming evidence that increased moderate daily physical activity benefits people, especially older

people, by improving balance, increasing walking speed and reducing cardiovascular morbidity and mortality.

Why should patients pay attention to physicians who insist that they stop smoking, eat less fat and more fiber, exercise adequately and take antioxidants if physicians don't have these habits themselves?

To be more effective with patients and potential patients, physicians should come clean about their private lives. But how clean and to whom? Do we have to apologize to our patients about an affair with a nurse, or for accepting a \$10,000 honorarium merely to attend an "educational" Barbados conference on industry's tab?

Individual physicians still retain the trust of their patients, despite the profit-at-any-price behavior of many managed care organizations over the last decade. Physicians who practice what they preach, and who personally reject anything less, can only be thought of as truthful, honest and persuasive.

As for the leading causes of mortality — drug and alcohol abuse, sedentary lifestyle, high fat/low fiber diets, smoking — our public and private lives should be consistent. Whether we choose to tell our constituents about our private lives — and whether we use those disclosures as therapeutic tools — is an option that each of us as physicians should have.

<http://www.managedcaremag.com/archives/9810/9810.ethics.html>

3. 'Real Age' in Managed Care Means Making Prevention Treatment of Choice

John La Puma, M.D.

America cares about feeling we get a second chance: about leading a life of quality, not just longevity. With simple changes you can actually make. Today.

That's why Oprah loved Michael Roizen's book very first book, Real Age. So did her audience. The same audience that managed care insures, and finances, and delivers care to. Managed care pays dearly for these people because they don't know how to do what they should be doing.

What Roizen insists on, in language bold for a man who heads the Cleveland Clinic's Wellness Institute, is that we can influence how long we live and how well we live by looking at health as more than organ function and diseases. That's a message for the ages, and it's one that managed care should heed as its patients expect more of their providers, and providers look for ways to motivate their patients to take better care of themselves.

Despite the message on some Chicago billboards, patients don't care that their health plan "wants to be your health plan, not your doctor." They do care that they can see who they want to see and get the answers they need. Otherwise, they'll go elsewhere: to the vitamin aisles at Sam's Club, and to the nice fitness club near the health food store. Or, they might go online for information they can't routinely get in their doctor's office about vitamins, minerals, and supplements.

Where we've been

In 1948, what was for breakfast on the American table? Fried eggs sunny side up or over easy. In the middle of the plate,

underneath or just to the side, was bacon or ham. Toasted white bread was spread with creamy butter. For dinner was steak, pot roast, or meatloaf. Creamed tuna and chicken a la king came along in a jiffy.

Deep fryers were the countertop appliance of Christmas choice. Housewives collected milk bottles in the morning delivery, and skimmed the cream for coffee. Many people smoked — 70 percent of men and 30 percent of women. Couch potatoes were few, and the only people who went to the gym to exercise were competitive athletes.

Doctors thought that arteriosclerosis was a natural result of aging. Women were not thought to have the same risk for heart disease as men. No one measured cholesterol levels with an eye towards therapy; in 1938, Osler's Principles and Practices of Medicine noted that a relationship between blood plasma levels and heart disease "seemed improbable in man." The same text, though, notes that diabetes mellitus "is on the increase in all civilized countries, due partly to overnutrition and less exercise, in which the motor car plays a part." The prevalence of obesity was below 20 percent.

Where we are

Now, the picture looks different. We know that smoking is associated most closely with the leading causes of mortality, and that a high-processed food diet and a sedentary lifestyle are close behind. We know that neither high blood pressure nor heart disease must come with aging, and that both can be prevented with diet, exercise, stress management, and psychosocial

interventions. We know that certain cancers are associated with specific lifestyle measures, and that millions of Americans have turned to alternative practitioners to learn about them.

We know to floss our teeth and buckle our seat belts and wear our bike helmets and take our antioxidants and quit smoking and exercise regularly and eat five vegetables and four fruits daily. But do we?

Some of us do. We smoke less and have better treatments than ever — bupropion pills, nicotine patches, support groups. Our average cholesterol levels are down, and so are our blood pressures. The mortality rate from myocardial infarction is declining. Cereals and breads are now fortified with folate to help prevent neural tube defects, though the resulting levels are too low to affect heart disease.

But the prevalence of overweight is 70 percent, and even higher among Hispanic and African Americans. The incidence of heart disease is not declining — it's level, or even rising.

Managed care medical insurance is responsible for some of the progress made in prevention (though it cannot take credit for the death of creamed tuna). Managed care was, after all, promulgated with prevention in mind, in 1973. The fact that it has forced measurement where there was only anecdotal evidence, and discussion about systems where the focus had been only on individuals, is to the public good. That it ignores obesity treatment in favor of treatment of obesity-related diseases is criminal.

Where we're going

We are aiming toward food as medicine, and the myriad ways in which people can prevent the diseases that clinicians spend so much time trying to treat, once developed. Can you imagine prescribed meals on the formulary? Nutraceuticals next to beta-blockers? HCFA or NCQA grading plans and physicians on percentage of patients with a BMI of less than 30?

What should be done is this: Turn managed care from a health insurance program into a health program not disease care. Especially for the Medicare population. What does this mean? Not moving away from vaccinations, Pap smears, mammography, and colorectal cancer screening. It means adding preventive programs to them.

Surveys of managed care patients and providers show that it's chiropractic, acupuncture, and massage that need coverage, and need to be held to peer-reviewed standards.

Managed care medical insurance should pay for exercise, nutrition, and smoking-cessation programs delivered in communities and offer financial incentives for enrollment. People with low risk profiles should pay less.

Is this feasible? Is it cost-effective? These are the questions of the managed care age. They have to be answered. In the meanwhile, I'm going to work on my real age.

<http://www.managedcaremag.com/archives/9904/9904.ethics.html>

4. Smoking, Slimming and Seat Belts: Is Public Health Part of Managed Care?

John La Puma, M.D.

Money doesn't buy health, never mind love. The United States spends more than any other country on health care, but our average lifespan is lower than most of those in Western Europe and Canada. Our major causes of death and disability are related to how much we smoke, how much and what we eat and how much we exercise. Coronary disease, emphysema, diabetes, osteoarthritis and many cancers are largely "life-style diseases."

What changes has medicine made in the past that could support future changes in smoking, obesity and seat belt/helmet use? Can incentives to physicians make public health part of an increasingly private managed care mission?

Changing behavior

To start, we physicians have changed our own behavior. In the 1960s it was still acceptable for doctors to smoke cigarettes; in the 1990s, after millions of cases of chronic bronchitis and cardiovascular disease, nearly all U.S. physicians have quit.

We've also changed our ideas about how to counsel patients. In the early 1960s, for example, 90 percent of physicians in one survey thought it was unethical to tell cancer patients their diagnoses. By the late 1970s, only 10 percent of physicians thought so.

There are three areas in which I believe physicians must now institute further change in what they tell patients: smoking, obesity and seat belts.

Smoking

Rikers Island did something this year that no managed care organization has yet been able to do. The correctional institution induced its population, guards included, to quit smoking. It's apparently illegal to smoke in public places in New York, and that includes jails. How ironic that the only group in America guaranteed access to health care — inmates — is also guaranteed no danger from secondhand smoke.

How toxic cigarettes are, how early teen-agers start and how much tobacco drives up health costs are not at issue. Joe Camel billboards, Marlboro gift catalogues and full-page New York Times ads addressed to Nabisco stockholders work against patients.

Yet patients can quit if they have a plan. Nicotine gum recently went to over-the-counter status, and so will nicotine patches. Together with brief, nonjudgmental encouragement from a doctor and regular support groups, these medical bridges do work. The Rikers story prompts the question: What incentives might persuade patients to quit?

Obesity

In the 1960s, Helen Worth's *Cooking Without Recipes* declared that "canned vegetables offer more food value than market vegetables." In the 1990s, "organic and locally grown" food from farmers' markets suggested quality, safety, health and flavor. In 2013, they still do, plus community conversation.

Most Americans' health problems come from too much food, not too little. Today, 34 percent of adults are 20 percent or more over

ideal body weight. And too many medical schools still teach nutrition simply as vitamin and mineral shortages.

At least one group, Cambridge's Oldways Preservation and Exchange Trust, wants to help. With the World Health Organization, Oldways researches the traditional diets of cultures that spend much less on health care and have much less obesity than we do. Its Mediterranean, Asian, Latin American and vegetarian diet pyramids have all been released and used for 15 years.

A worldwide scientific consensus on what constitutes healthy eating patterns was echoed this year by the revised U.S. Dietary Guidelines. But consensus doesn't control eating habits. The Oldways models are important, and the new dietary guidelines are steps in the right direction. Amphetamine-like drugs that stop working as soon as they are stopped and Olestra's "anal seepage" are steps in the wrong direction. Belviq and others are not far behind Olestra.

What hasn't been tried to treat obesity? Incentives to physicians to counsel, and to patients to take that counsel. Food, cooking and exercise belong in the discussion between doctors and patients as much as do potassium levels for patients on diuretics.

Seat belts

Only two-thirds of the drivers involved in accidents use seat belts, but \$68 million (in 1995 dollars!) would have been saved if all had used them. Hospital costs for unbelted drivers were \$5,000 higher (55 percent higher) than for belted drivers.

Most people are shielded from the cost of accidents as they are from the cost of health care. On average, people pay only about 15 percent out of pocket, according to American Medical News; the rest is picked up by auto insurers and others. Like other patients, accident victims seldom see the real cost of hospitalization, paid by insurers or managed care organizations and ultimately by employers or others in the form of premiums.

Seat belts, too, raise an ethical concern, because in managed care, all members pay for each others' afflictions. Accidents may not be preventable, but if members know their cost will be lower if all members' seat belts and helmets are on, then members and doctors should make sure they're on.

Slimming down, stopping smoking and wearing seat belts would probably have more impact on health care costs and quality of life than any other three behavior changes. Managed care should have the courage and vision to promote them as treatment for the illnesses they engender. Physicians should lead this health effort, because patients listen when physicians counsel about life style. Smoking, food and seat belt choices are power — economic power. We can help patients unleash this power by encouraging personal responsibility, the very foundation of morality.

Just as Oldways wants people to "vote with their forks," doctors should vote with their incentives. Financial incentives to physicians should reflect the number of referrals to stop-smoking classes and the documentation of seat belt and helmet advice (even in an unrelated office visit) and of spoken tips about diet, fat and exercise.

Making public health a private business might just include people who have been left out of managed care — the uninsured — for every patient's good.

<http://www.managedcaremag.com/archives/9605/9605.ethics.html>

5. Six low cost, high value, low calorie ways to help boost flavor. (part 1)

John La Puma, MD

The six are:

- Acidify
- Smell
- Spices and Herbs
- Infuse
- Symmetry
- Tubes

Here are the first two:

A. Acidify

If used sparingly, and with a light touch, acids enliven and brighten many foods. We already use this fact in vinaigrettes (classically three-to-one mixtures of oil and vinegar!) and with lemon wedge that accompanies many a seafood salad.

The trick to acidifying is choosing an acid that is already doubly flavorful, so that you are actually adding two tastes: both the tingle and mouth pucker of the acidic solution, and another element. Citrus fruits do this naturally: the sweetness of orange or grapefruit juice contrasts with and tempers its sourness.

When you infuse plain distilled vinegar, you modify its harshness and give it another dimension. Infused cider and wine vinegars take this a step further--you get the fruitiness of the cider, and the mellowed tannin of the wines, plus the pucker of the acid.

Vinegars are the most common type of acid, available in almost every pantry. Distilled vinegars, fruit vinegar, rice vinegar, herb vinegars all have special uses. John uses

distilled vinegars primarily for pickling, and sometimes for chutney. Good fruit vinegars carry the essence of fruit on the tail of their tang, and wake up salads and salsas. Try these on couscous or bulgur or baby lettuces.

Rice vinegar, whether Japanese or Chinese, is often lightly seasoned and mild--just sharp enough to play off the bite of another culture's serrano peppers, and harmonize with Nappa or green cabbage. Herb vinegars are multidimensional, often have wine or cider vinegar as a base, and are easy to make.

My favorite vinegars are high quality balsamic vinegar and sherry. Both are aged and sometimes expensive, so I usually use a few drops at a time. They last a long time, and are worth the money. Try them in cooking liquids for grains, tomato sauces for pasta, sprinkled on top of a vegetable sauté, or on fresh berries and fruits.

S. Smell

Your sense of smell is 80 percent of your sense of taste. When you eat, the aroma of food in your mouth wafts toward your nose and nasopharynx, and with your nose and soft palate working together with your taste buds, you taste.

If you can't smell, it's hard to taste. But if you can't smell, there's a reason, and it's usually allergic rhinitis--inflammation of the nasal and postnasal tissues brought on by dust, pollen or other microscopic particles.

Allergies are common, and their effects really do make a difference in taste and smell.

There are, of course, several other reasons people can't smell, but allergic rhinitis can be treated, often with over-the-counter medication. Better yet, doctors can often help you to identify and avoid whatever it is that clogs up your nose.

If you don't have allergic rhinitis, but just want to smell food better, how can you do it?

One way is just to inhale and recognize the aroma--is it floral? fruity? spicy? Another is to crush fresh herbs to aerosolize their aroma, and bring it out in food. But don't macerate them. Just give them enough a squeeze to raise their perfume. Toast grains to bring out taste--a nuttiness to bulgur, and a light perfume to basmati rice. And toast and grind spices (see below)--all will pay you back in taste, for just a little effort.

Excerpted and adapted from Roizen M, La Puma J. *Cooking the RealAge Way*

(HarperCollins, 2003).

6. Six low cost, high value, low calorie ways to help boost flavor. (part 2)

The six are:

- Acidify
- Smell
- Spices and Herbs
- Infuse
- Symmetry
- Tubes

Here are the second two:

S. Spices

Spices pack more wallop per gram than any other food John uses. They are aromatic wonders--just crush between thumb and forefinger, or in a mortar and pestle, or in a spice grinder--and the whole kitchen seems to fill with scent.

One secret to using spices is roasting or toasting them before grinding or crushing to release their oils. Seeds toast best, and you can use your nose to tell you when they're done. If they blacken or smoke, throw them out and start over.

What are the drawbacks to using spices? If they are over toasted, they can become bitter. Even if they are not over toasted, spices can become bitter if they are cooked too long: thus the reason that freshly ground pepper is added at the end of cooking.

Most spices last about six months in a kitchen cupboard, and lose their punch if not kept air-tight.

Should you throw spices out after six months? If their aroma is musty, toss them. But if it is just faint, sometimes you can rescue them and the dish you're making by toasting them lightly, letting them cool, crushing them, and adding a little extra. Careful, though--taste before serving!

Herbs are leaves; spices are everything else--stems, buds, blossoms, roots. Herbs have the brightest, most delicate tastes when they are fresh, and are more concentrated and potent when they are dried. In fact, the general rule is that one teaspoon of dried herb is three times as powerful as a teaspoon of fresh herb. Dried herbs are usually added at the very beginning of cooking; fresh herbs are most fragrant and usually most delicious at the very end.

Herbs are very rewarding culinary investments. Most are easy to grow, and can survive droughts, neglect and window boxes. They are also very economical. Away from home, and from my herb garden outside my back door, John have recently had to pay \$19 for eight ounces of ruffled opal basil for a demonstration. True, it was a stunning

purple that lent a faint pastel to white wine vinegar and beauty to a garden salad. But in John's own garden, one \$2 plant gives eight ounces around the end of June, and once winter comes, he just moves the planter inside. Growing fresh herbs not only gives you your money's worth, but also can be a year-round joy in the kitchen.

Infusion

I've made and given infused vinegars and oils as presents for years.

Infusing juices, vinegars and oils can be as simple as submerging gently bruised fresh herbs, dried spices, citrus zest or crushed aromatics into the liquid, and letting the bottle rest in a sunny window for a week. Many people then strain the flavoring agent out, and store the liquid in a scrupulously clean covered container, such as a wine bottle, which they keep in the refrigerator until it's ready to use.

Infusions can be made a little more elaborately, and can yield more flavor too. Place your favorite oil and chosen flavoring in the blender, give it a brief whirl, and then, using cheesecloth or a fine filter, let the now infused oil drip, drip, drip into a new, scrupulously clean container. This takes time and patience, but rewards you with a depth of flavor which can otherwise only be accomplished with mild heat and two weeks of incubation.

If you have access to a heating element, there's still another way. Warming both oils and vinegars with the flavoring seems to add just a little more tang. The stems of herbs carry more tannin than the leaves themselves, so if you want pure herbal flavor, strip the leaves, and put the stems aside for another purpose, such as vegetable stock.

Otherwise, just gently warm the liquid on the stove, and add the herbs, stems and all, stewing them just until their color brightens. Do not simmer or bubble--just bathe.

Pour the liquid-herb mixture through cheesecloth into a scrupulously clean dry bottle, and set aside in a cool, dark place.

Fruit vinegars have the best flavor if fruit and vinegar are simmered for a few seconds together. I'll use a quart of good white wine vinegar, two cups or more of berries, several sprigs of mint or dill, for example, and let it all steep in a covered jar in the refrigerator for two weeks before straining.

Herbs, hot peppers and aromatics lend great flavor to oils. I like canola oil for infusing--because it has a neutral flavor by itself, packs plenty of omega-3 and monounsaturated fatty acids, and absorbs flavor well. To accentuate the color of herbs, and the subsequent oil, microwave any green herb for just a few seconds- the green leaves of sweet basil brighten in an instant! Too much microwaving will dehydrate all herbs, though, so make sure it's brief.

Use the freshest looking herbs you can find, and don't be afraid to use plenty--you'll get more flavor. When you use citrus zest, be sure to crush it gently between your fingers,

releasing the oils embedded. Orange, lemon, lime and grapefruit strands are also beautiful once inside--curling up around spices, or floating lazily through the bottle.

For vinegars, I like to use herbs, spices, and dried fruits. Raisins, figs, berries, mango and papaya all add complexity and sweetness to an otherwise simply puckery taste. Try fig balsamic vinegar with lemon zest. Yum!

For juices, especially fruit juices, John uses whole spices and sometimes filled sachet bags of cheesecloth. Cinnamon sticks, shaved nutmeg, cloves, allspice and juniper berries are among my favorites.

Some of my favorite oil and wine vinegar infusions are

roasted garlic hazelnut oil
rosemary-orange walnut oil
garlic, oregano, and bay olive oil
lemon sesame oil
black, white, pink, and green peppercorn oil
habañero-cilantro canola oil

blueberry-dill vinegar
raspberry-mint vinegar
parsley, sage, rosemary and thyme vinegar
fennel-opal basil vinegar
cranberry-clove vinegar
lemon grass-chili vinegar

I like infused oils made by Consorzio: they have luscious flavor and deep color, and are the next best thing to home-made.

Excerpted and adapted from Roizen M, La Puma J. *Cooking the RealAge Way*

(HarperCollins, 2003).

7. Six low cost, high value, low calorie ways to help boost flavor. (part 2)

The six are:

- Acidify
- Smell
- Spices and Herbs
- Infuse
- Symmetry
- Tubes

Here are the second two:

S. Symmetry

I am often asked how he chooses which tastes go together, and how to pair them. When I cook, I try to balance something sharp with something smooth, and something sweet with something sour. I call this principle "symmetry." It just means recognizing and using all four types of taste buds--sweet, salty, sour, and bitter--and playing one set off another.

The way to pair flavors is just by identifying what you already like. Think about whether it is a clear, single taste (straight black coffee, for example, is bitter), or whether it is more than one taste (coffee with sugar is both bitter and sweet). Fresh mango is sweet; fresh mango with lime is sweet and sour. Fresh jicama is sweet; fresh jicama with lime is sweet and sour; jicama with lime and salt is sweet, sour and a little salty.

If you like more than one taste, adding another taste bud dimension dishes (a little salt or ketchup to crisped potatoes and onions, for example) can bring out both the vegetables' essence, and the mellowed tones brought about with cooking.

Overwhelming the dish with more than a little salt can make it taste just one way--salty--so you get only one flavor. So understanding and using symmetry requires care and a light touch.

T. Tubes

I like tubes. Anchovy, garlic, harissa (a gutsy Moroccan red pepper hot sauce), olive, onion, sun dried tomato, tomato and wasabi (Japanese horseradish) are all available in toothpaste-like tubes with screw tops. Keep them in the refrigerator once open.

Tubes are powerful--I know no one that eats what's inside straight from the tube. They are commonly combined with tiny amounts of olive oil and more generous amounts of salt. They are nearly undiluted concentrates that add an instant boost to a sauce, dressing or marinade. They also enbolden a cooking liquid for grains (but not beans, as the beans toughen with the addition of any salt to their cooking liquids), and add depth to a pizza base or cracker spread.

Tubes are economical, though not inexpensive. One five ounce tube can be \$9, but if you end up throwing out garlic and onions because they sprout, or whole cans of tomato paste (minus 2 tablespoons for last week's pasta sauce), tubes are worth the extra money. They are also space and time-savers: they are smaller than a basket of tomatoes or even packages of sun dried tomatoes or bottles packed in olive oil (for extra lycopene!), and faster than slicing up any tomato.

Use tubes--they are worth their convenience.

Excerpted and adapted from Roizen M, La Puma J. *Cooking the RealAge Way*
(HarperCollins, 2003).

8. Pairing Herbs and Spices with Foods

A RealAge kitchen isn't complete without herbs and spices. Herbs have been used for centuries for culinary and medicinal uses. Chervil is famously associated with French cuisine, garlic is best known for its use in Italian foods, and curry powder means Indian (or Thai) flavor.

But herbs and spices are showing up in every kitchen, no matter where they started out, and for good reason. They provide exciting and powerful flavor to foods. They can make a bland dish into something exciting, and make it a special event you won't forget.

So, what are herbs and spices? A herb is a leaf. A spice is usually a berry, seed, root, flower, stem or pod. Sometimes we use a leaf from Chinese parsley (which is called cilantro) and the seed from the same plant (which is called coriander). They are wonderful together or apart, in the same dish or in separate dishes!

Fresh herbs are usually added at the end of cooking or as a garnish. Choose fresh herbs with a bright color and firm stems and leaves. They should be washed in cold water and blotted dry. To store herbs, cut away 1/2-1 inch from the bottom of them stems and place them in a tall container filled with water in the fridge. You can also store the leaves in a sealed bag in the vegetable compartment of your refrigerator. They should stay fresh for about one week. We hope you'll be using them frequently in your RealAge kitchen--any left over can be quickly chopped and frozen.

Herbs can also be dried for later use and for decoration. Just tie small bunches together and place them upside down in a paper bag that has been punctured with holes. The top of the bag should be tied tight and hung in a warm, airy place. The bag is needed to catch the leaves that drop and prevent light from ruining the leaves. Dried herbs are more potent than fresh ones and generally (but not always) should be added at the beginning of cooking.

Store dried spices and herbs in glass, airtight containers in a dry, cool place. They should last about six months. To substitute fresh herbs for dried herbs, the general rule is to use 1/2 t ground herbs or 1 teaspoon of dried leaves for every 1T finely chopped fresh herb. Buy just enough dried for a six month supply--usually a small jar in the supermarket. (The bigger containers look like they are a better value, but the herbs and spices inside end up going stale if you don't use them.)

We have created three rules of thumb for herbs, spices and food. Use any of the rules. You do not have to use all of them. Pick one rule to try one week, and next week, try another. They are

1. Herbs are best fresh; spices are best dried .
2. Fresh quick fresh; dried slow dried.
3. More of the same color is better.

This is what they mean.

1. If you can find an herb fresh, use it. If you can find spices dried, use them.
2. If your food is fresh and briefly cooked, use fresh herbs. If your food started out as dried (from beans, legumes, soybeans), or is to cook for more than a few minutes, use dried herbs and spices.
3. If you have more than one herb or spice of the same color, and want to use it, go ahead.

That's it. You can't go wrong with herbs, spices and food.

Herbs and spices are also easy to grow--many started out as weeds, were tasted, no one died, and worked their way into cooking. They are some of the first plants to come up in the Spring, and many survive the winter beautifully, without the gardener or cook taking any special precaution. Just sprinkling a few seeds, or dropping a seedling on to nearly any soil will result in a crop of welcoming, flavorful additions to your garden, and to your kitchen. Nearly all herbs freeze well--just cut whole sprigs, and wrap tightly in a double layer of plastic wrap.

Excerpted and adapted from Roizen M, La Puma J. *Cooking the RealAge Way*

(HarperCollins, 2003).

9. Three top cruciferous vegetables to make your RealAge younger: when, what, why and how.

Cruciferous vegetables are so named because if you let them go to seed, their flowers are four-pointed crosses. And they're good for because of their fiber, their ability to detoxify carcinogens in the liver, and because they slow testosterone conversion to estrogen in men.

Here are my top three:
Broccoli

- When: Broccoli is available all year, with a peak season from August through October and even earlier in the South and West. Fresh broccoli has a sweet and mild flavor that makes it perfect for a large variety of dishes.
- What to Look For: Look for slender, firm stalks. The florets should be tight. Avoid stalks with yellow or limp florets and leaves. Size doesn't count with broccoli: small florets are just as likely to be flavorful as large ones.
- Why: Broccoli is rich in flavonoids, so it makes you younger every time you enjoy it. And it is a great source of vitamin C, calcium, potassium, and lutein, so your immune system, arteries, bones, and eyes are all younger because you ate broccoli.
- How to Use: Broccoli can be eaten raw as a snack, with dips, or in salads. It can also be boiled, steamed, sautéed, and added to a teriyaki stir-fry. Toss broccoli florets with garlic oil and sesame seeds and roast them at high temperature just until they begin to darken. Eat the leaves and stem, too: cut off the toughest part of the stem and peel away the remaining rough skin. Then slice the stem into broccoli stars!

Brussels sprouts

- When: Brussels sprouts are available from late August through March but are best in October and November (except in the West, where they're best in winter). Buy Brussels sprouts on their stalk whenever you can, as it's often a good indication they've just been harvested.
- What to Look For: Find Brussels sprouts on the stalk and cook them soon after purchasing. Loose sprouts should not have any yellow leaves or brown butts. The sprouts themselves should be tight and firm. At a farmers' market, ask when they were harvested.
- Why: Thanks to their vitamin C, potassium, selenium, and fiber, Brussels sprouts are a great—not just a good—choice that can make you younger.
- How to Use: Brussels sprouts can be steamed or boiled and are usually not eaten raw unless sliced very fine. They usually need seasoning and cooking to bring out their sweetness and flavor. Try minced leek, fresh dill, and caraway seeds as seasonings.

A favorite way to prepare Brussels sprouts is with freshly grated pecorino or Parmesan cheese: separate the leaves of each sprout (it's easier than it sounds), sauté garlic and onion in olive oil, wilt the leaves in a hot pan, simmer them in chicken stock, and shake on the cheese.

Cauliflower

- When: Cauliflower is another vegetable you can find all year. Its peak season is at the end of summer and the beginning of autumn (except in the South and West, where cauliflower is better in winter and spring, respectively).
- What to Look For: The florets should be close together and smooth. If they've started to separate, the flavor will be stronger, like cabbage. Avoid cauliflower that is turning dark in spots. Pick a cauliflower still slightly covered by its green veil.
- Why: Cauliflower is RealAge-wise. It's packed with vitamin C, folate, and flavonoids, and decreases aging of the immune system. As is true for all cruciferous vegetables, consumption of cauliflower is associated with a decreased incidence of

several cancers, including breast and colon cancer, and a decreased risk of aging of the eyes.

➤ How to Use: Serve raw or steam just until firm; add to soups, stews, salads, and pastas and other grain dishes. Roasted cauliflower—separated into large florets and roasted at a high temperature (start with 450 degrees for 15 minutes, and adjust to taste)—is a wonderful treat. Roasted cauliflower soup is even better; combine roasted cauliflower with roasted chestnuts or chestnut purée.

Excerpted and adapted from Roizen M, La Puma J. *Cooking the RealAge Way*

(HarperCollins, 2003).

10. Going Veg: Do You Need Extra Vitamins to Make Your RealAge Younger?

Many people avoid a vegetarian diet because they're afraid they won't get all the nutrients they need. It's true that if you're not eating meat, you will need to pay special attention to your intake of vitamins, amino acids, and minerals. However, this can be accomplished quite simply with delicious foods, and taking the right vitamins and minerals at the right times. If you eat lots of whole grains (such as wheat and oats and brown rice) and lots of soy (or fish and low-fat dairy products), you'll almost certainly be fine, from a vitamin/mineral perspective.. But for optimum intake of vitamins - to slow aging, not just to avoid deficiency disease - you'll almost certainly need a multivitamin, optimally a small dose, twice a day.

Getting enough protein is another common concern. Soy foods, low-fat dairy products, and many legumes such as lima and kidney beans are all delicious and great sources of protein. If you also include fortified breakfast cereals, spinach, raisins, and other nutrient-rich foods, you'll be making yourself younger while meeting your dietary needs.

Because meat contains zinc, iron, vitamin B₆, and vitamin B₁₂, if you're not eating

meat, make sure you're getting these nutrients in other foods. Wheat germ, wheat bran, crab, tofu, sunflower seeds, almonds, and tuna all contain zinc. Whole grains, nuts, and legumes contain B₆. In addition, vitamin B₆ can be found in peanut butter, green beans, bananas, artichokes, and whole wheat spaghetti. Salmon, shrimp, nonfat yogurt, and eggs all contain vitamin B₁₂.

If you're getting your protein mainly through nonmeat foods, eat a wide variety so you make the most of the nutrients these foods do offer. Strict vegetarians or vegans who eat no meat whatsoever should consult a physician and a dietician to ensure they're getting all the nutrients they need. Taking a daily multivitamin can also help make your RealAge younger and provide the energy you need to make a difference in the world.

Excerpted from Roizen M, La Puma J. *Cooking the RealAge Way* (HarperCollins, 2003).

11. Eating Broccoli & Tomatoes Together May Slow Cancer Growth

Researchers at the University of Illinois have discovered eating broccoli and tomatoes together may help slow prostate cancer growth. Now, this hasn't been tested on humans, but studies in the lab are encouraging.

So how does it work? Well, researchers aren't really sure, but they believe it has something to do with the unique interaction of glucosinolate in broccoli with lycopene in tomatoes, as well as the hundreds of other nutrients present in both. Cruciferous vegetables like broccoli contain nutrients called glucosinolates. They support your body's normal detoxification processes, which men need to maintain healthy levels of

both male and female hormones. And, prostate cancer is essentially the result of a hormonal imbalance.

Lycopene is a carotenoid, a natural antioxidant coloring found in fruits and vegetables like tomatoes. In the body, lycopene is normally concentrated in the prostate and testes, and its consumption is associated with a lower prostate cancer risk. So bottom line, the lower your blood levels of lycopene, the higher your risk for prostate cancer.

It doesn't take a rocket scientist to figure out that the combination of phytonutrients in tomatoes and broccoli may have a significant impact on prostate cancer growth.

To get the benefits of the tomato-broccoli one-two punch, here's what you need to eat every day:

1.4 cups of raw broccoli

2.5 cups of fresh tomato (or substitute one cup of tomato sauce or 1/2 cup of tomato paste)

Enjoy the health benefits of tomatoes and broccoli together, today!

Try my ChefMD®-approved recipe for veggie stuffed pizza.

http://www.chefmd.com/news_read.php?id=1

<http://cancerres.aacrjournals.org/cgi/rapidpdf/0008-5472.CAN-06-3462v1.pdf>

12. All nuts are not created equally!

Almonds help reduce heart disease and diabetes risk, and maintain your desired weight.

A high-fat food that's good for you? It's not an oxymoron, it's almonds. A one-ounce, 160-calorie handful is rich in monounsaturated "healthy" fats, the same liquid fat found in olive oil. They're also an excellent source of vitamin E and magnesium, and a good source of protein and fiber, as well as potassium, calcium, phosphorous and iron.

Over the years, several studies have demonstrated almonds help lower LDL "bad" cholesterol, and contribute to the prevention of diabetes and heart disease. And now researchers are learning almonds may also help maintain your desired weight.

Despite the addition of a handful of almonds to a daily diet, people do not gain weight. New preliminary research presented at the Experimental Biology (EB) Annual Meeting in Washington, D.C., on May 1, looked at why that is. Bottom line, it seems that calories absorbed by the body are less than predicted, and it may have something to do with how quickly these tasty nuts are chewed.

It could very well be that the calories listed on the food label are more than the amount actually available in our bodies.

And that's great news for everyone trying to maintain their ideal weight, and concerned about heart disease and diabetes. So get more almonds into your diet today, either as a snack or part of a meal.

http://www.chefmd.com/news_read.php?id=7

<http://www.ssib.org/FullAbstract.asp?ID=236>

13. Popeye Was Wrong: Spinach has more folic acid than iron, and its flavonoids can help lower ovarian cancer risk.

Everyone knows spinach is loaded with iron, right? A recent study indicates eating more spinach may lower ovarian cancer risk. The flavonoid kaempferol found in spinach and some cabbages is associated with a 40 percent reduced risk of ovarian cancer. The study was led by Margaret Gates from Brigham and Women's Hospital and Harvard Medical School in Boston.

Calorie for calorie, leafy green vegetables like spinach provide more nutrients than any other food. Spinach is a great source of six crucial nutrients: vegetable pre-vitamin A (beta carotene), vitamin B6, folic acid, potassium, zinc and magnesium. Spinach is a

rich source of folic acid, which decreases the risk for neural tube defects such as birth defects of the brain and spina bifida.

So get more cancer-fighting spinach in your diet today.

It's not just for salads anymore! Try cooked spinach and sandwiches with spinach instead of lettuce. Or add a few bright jade colored leaves to your favorite soups and stews. Or try a ChefMD®-approved recipe for sun-dried tomato and mushroom muffuletta sandwiches, with lots of leafy, green spinach stuffed inside whole wheat pita pockets. Your kids will love it, and they'll never know it's good for them! You'll like it, too. Enjoy.

http://www.chefmd.com/news_read.php?id=8

<http://www3.interscience.wiley.com/cgi-bin/abstract/114230474/ABSTRACT>

14. Calming Kids with ADHD: Omega-3 fatty acids help improve behavior.

There's great nutrition news for approximately 2 million children in the US who have ADHD. Consuming foods and supplements rich in omega-3 fatty acids may produce significant improvements in ADHD-related behavior, including inattention and hyperactivity symptoms.

That's the conclusion of researchers led by Barry Sears from the Inflammation Research Foundation, Massachusetts. In a controlled study, nine ADHD children (aged 8 to 16) received eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) concentrates (16.2 grams per day: 10.8g EPA, 5.4g DHA) for eight weeks. At the end of the study, the researchers reported blood levels of EPA and DHA were significantly increased, and behavior was greatly improved, as assessed by a psychiatrist.

Unlike saturated fats found in butter and beef, omega 3 fatty acids are polyunsaturated. Unsaturated fats, unlike saturated fats, are liquid at room temperature and remain liquid when refrigerated or at room temperature. They are incorporated into cell membranes, where they help produce anti-inflammatory chemicals and reduce chronic inflammation.

The three most nutritionally important omega 3 fatty acids are alpha-linolenic acid,

eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA). Fish is a rich source of omega 3 fatty acids, especially EPA and DHA. A four-ounce serving of salmon has 83% of the daily value of omega 3 fatty acids.

Try this ChefMD™-approved recipe for sesame salmon with mango-avocado salsa.

http://www.chefmd.com/news_read.php?id=12

<http://www.nutritionj.com/content/6/1/16>

15. Rev Up the Pinto: Beans are good for your heart.

Looking for something to drive down Good Health Boulevard? Try a Pinto. No, not the much-maligned self-immolating vehicle made famous in the 1970s. Pinto Beans!

A brand new study published in the Journal of Nutrition found that adults who consumed at least one serving of pinto beans every day for 12 weeks had significant reductions in cholesterol.

A key portion of the study dealt with people suffering from metabolic syndrome, which has been linked to an increased risk for type-2 diabetes. Metabolic syndrome affects an estimated 32% of adults in the US and about 15% in Europe.

The cholesterol decrease among pinto bean-eaters was primarily the LDL (lousy) cholesterol, which is great news. Pintos also reduced the HDL (good) cholesterol, but that loss can easily be recovered with other foods in your diet. The study concluded that eating pinto beans can improve lipid profiles, which means a lower risk of cardiovascular disease.

Various beans, including the pinto, are good for you on so many levels.

They lower cholesterol, deliver fiber and vitamins, and serve as a good source of protein, especially for vegetarians. That's why my ChefMD®-approved recipe for Two Bean Chili with Onions is so healthy - and it's a hearty, tasty meal, too! So get the Pintos going and head in the direction of a happy, healthy heart!

http://www.chefmd.com/news_read.php?id=15

<http://jn.nutrition.org/cgi/content/abstract/137/11/2391>

16. Tall, Dark and Good for You: Improved coronary blood flow is the latest health benefit of dark chocolate.

Researchers are finding more and more reasons why dark chocolate is good for you. A new study from Japan recently delivered to the American Heart Association confirms that dark chocolate helps improve coronary circulation.

How does dark chocolate do this? It turns out that the flavonoids in dark chocolate can help your coronary arteries to dilate and let more blood flow. This helps to keep your circulation healthy, making things a little easier on your heart. In scientific terms, this is known as keeping your CFVR up—your coronary flow velocity reserve. Aren't you glad you asked?

Now remember, we didn't say any chocolate: the beneficial flavonoids in dark chocolate, which are a type of plant chemical called cacao polyphenols, are not present in significant amounts in milk or white chocolate.

Dark chocolate, with all its goodness, is a key ingredient in this ChefMD®-approved recipe for Chipotle Mole, which spices up any dish with a Mexican flair!

It's a terrific slightly sweet, rich and spicy sauce that goes great with lean pork, fish or turkey. So let the dark chocolate make both you and your heart smile!

http://www.chefmd.com/news_read.php?id=16

http://circ.ahajournals.org/cgi/content/meeting_abstract/116/16_MeetingAbstracts/II_369?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&fulltext=dark+chocolate&searchid=1&FIRSTINDEX=0&resourcetype=HWCIT

17. Folate for Fatherhood? A new study finds benefits for potential dads, too

You've heard about the benefits of folate for women trying to conceive and deliver a healthy baby, right? Well, it turns out folate might help men with this quest for kids as well.

A new study tracking 89 healthy, non-smoking men has found that better than vitamins C or E, it was folate that dialed up their sperm and dialed down aneuploidy—meaning too many or too few chromosomes. Men with the highest levels of folate—over 700 mg daily-- had up to 30 percent less aneuploidy, which means less chance of failure to conceive, miscarriages, Down's, Turner's and Klinefelter's Syndrome, and more chance of a healthy baby.

So dads-to-be, prepare by eating the ChefMD® way with foods rich in folate.

Green leafies are famous for folate, but you can find it elsewhere too. I recommend a nice twist on an Italian favorite. Substitute smooth and slightly crunchy golden spaghetti squash for traditional pasta and add juicy, thick tomato sauce to create Roasted Spaghetti Squash with Rich Tomato Sauce. It looks, feels and tastes like the pasta you know without all the extra starches in wheat noodles. So make this satisfying dish and have plenty of pep for after-dinner activities. Abbondanza!

http://www.chefmd.com/news_read.php?id=22
<http://humrep.oxfordjournals.org/cgi/content/full/den036v1>

18. Your liver won't whine when you drink wine

We've read about so many benefits of red wine, haven't we? How it helps your heart and blood pressure? Well, a new cross-sectional study looked at over 12,000 people and added your liver to the list of things red wine benefits in your body.

The study found that people who drank up to one glass of wine per day saw their risk of liver disease stop by about half. Specifically, they examined NAFLD, known as Non-Alcoholic Fatty Liver Disease, which is the most common form in the US. The resveratrol (a polyphenol and anti-fungal chemical) present just under the skin in red wine grapes is believed to be the major reason for this benefit. The same study confirmed that beer and other forms of alcohol can harm the liver, just as we figured all along, so remember, this is just wine we're talking about here.

So when your red wine is in a soup, no less, how can you resist?

Blend the goodness of lentils, curry, yogurt and vegetables with that red wine to make my pungent, hearty ChefMD®-approved Curried Lentil Soup. It'll fill you up and help your liver love life—just as you will!

http://www.chefmd.com/news_read.php?id=29

<http://ucsdnews.ucsd.edu/newsrel/health/05-08WineLiverHealth.asp>

19. Read the Tea Leaves for Healthier Gums

It's written in the tea leaves. You will have healthy gums.

Japanese researchers <http://www.ncbi.nlm.nih.gov/pubmed/19254120> analyzed the green tea consumption of more than 900 middle-age men and found the participant's gum health improved with each cup of green tea daily.

Researchers believe the compound catechin in green tea reduces inflammation and helps keep your gums healthy. And gum disease is associated with kidney disease, heart disease and even pregnancy problems. That's serious stuff.

So, drink to a healthy future, and cook with green tea. Try my ChefMD®-approved easy, healthy and quick Butternut Barley Risotto with Goat Cheese and Toasted Almonds. It's a filling dish with lots of good taste and healthy ingredients, including green tea!

http://www.chefmd.com/news_read.php?id=32

20. Immune Boosters: Sunshine and Salmon

Some people call vitamin D "the sunshine vitamin" since we produce it when sunlight hits our skin. Researchers at the University of Pittsburgh call it an immune booster, but most people in the US are vitamin D deficient.

In a new study of pregnant women in their first trimester, researchers found those with low vitamin D levels had more bacterial vaginosis. That's the most common vaginal infection in women and very dangerous to the health of the unborn child. Vitamin D protects the immune system and helps you fight infection, including less bacterial

vaginosis.

Cod liver oil is one of your best food sources of vitamin D, but we won't go there, and not just because it has too much vitamin A for you. Instead, consider vitamin D fortified dairy and nondairy products or salmon. Both taste good, have vitamin D inside and will give your immune system a boost!

If you're looking for a great dish with lots of vitamin D, try my ChefMD-approved easy, healthy and quick Sesame Salmon with Mango-Avocado Salsa. The salmon gives you a good dose of vitamin D, not to mention heart healthy omega-3 fatty acids. And the mango gives this dish a sweet, fresh, tangy flavor. Try it, you'll like it!

http://www.chefmd.com/news_read.php?id=34

<http://jn.nutrition.org/cgi/content/abstract/139/6/1157>

21. Diabetics can get better blood flow with cocoa

Do you have type 2 diabetes? Then there's a good chance you may have, or develop, impaired blood vessel function. So why not reach for some delectable, dark chocolate? It can help!

Recent research has found further evidence that the flavanols in cocoa (no, flavanols don't "flavor" the chocolate—they're beneficial phytochemicals) have a beneficial effect on the FMD of your blood vessels. FMD stands for flow-mediated dilation, and measures the ability of your blood vessels to relax and just let things, well, go with the flow. The researchers compared diabetic people, all on medication, drinking cocoa beverages with different flavanol levels. Those consuming more flavanols had larger increases in FMD.

Remember, some chocolate and cocoa processing removes flavanols, so go with cocoa powder that is not Dutched when you put it into recipes

Want to kick off your day with a sweet treat that boosts your energy and keeps that blood flowing and keeps your blood pressure under control?

Let some unsweetened, not Dutched cocoa powder complement smooth, creamy strawberry kefir and sensuous silken tofu in my ChefMD®-approved Dark Chocolate, Dark Coffee Strawberry Breakfast Smoothie, a great way to get going in the morning!

http://www.chefmd.com/news_read.php?id=25

<http://content.onlinejacc.org/cgi/content/abstract/51/22/2141>

22. Mothers-to-be: eat salmon for the omega-3s

Salmon is often referred to as "brain food," and that extends to babies too. Researchers in Canada studied 109 Inuit infants in Quebec, followed them through development during pregnancy and then tested them at the ages of 6 months and 11 months. Their tests indicated just how strong the link is between the omega-3 fatty acids - found in abundance in salmon - and the healthy development of babies.

Exposure to omega 3s during infant development raised levels of DHA, an omega-3 fatty acid, in the umbilical cord. The kids with highest cord DHA levels had better vision at 6 months, and better cognitive development, motor development, and coordination at 11 months.

So, moms-to-be, be sure to include some salmon, which delivers plenty of cognitive and coordination-building omega-3s for your little bun.

A truly delectable way is with my ChefMD®-approved Pan-Grilled Citrus Salmon over Asian Slaw, which also adds the crunch and nutrition of cabbage and peapods. It's a savory, nourishing meal for both of you!

http://www.chefmd.com/news_read.php?id=23

<http://www.cfsan.fda.gov/~dms/admehg3.html>

23. Roasting Tomatoes Helps Increase Lycopene Absorption and Reduce Cancer and Heart Disease Risk

So, this big burly beefsteak tomato's walking through the vegetable patch with a petite cherry tomato. The cherry tomato can't keep up with the speedy big boy, so the

beefsteak says, "Hey, cherry tomato—catch up!"

Comedy club material? Not really. But there's nothing funny at all about the health benefits of tomatoes. Lycopene in tomatoes helps protect not only against prostate cancer, but breast, pancreatic and intestinal cancers, especially when eaten with fat-rich foods, like avocado, olive oil or nuts.

Scientists have a fancy term for lycopene absorption: bioavailability. I always tell my patients that they can get the most nutritional benefit from tomatoes by eating them cooked, in sauces, soups, stews and salsas. Cooking some high-lycopene foods zaps the nutrient, but tomatoes are different. Cooking actually increases the lycopene content bioavailability to your system.

Tomatoes are a very good source of potassium, niacin, vitamin B6, and folate. Diets rich in potassium have been shown to lower high blood pressure and reduce the risk of heart disease. And niacin can be used to raise your healthy cholesterol (HDL).

Take full advantage of the health benefits of lycopene.

Here's a refreshing and good-for-you ChefMD®-approved recipe featuring roasted plum tomatoes.

http://www.chefmd.com/news_read.php?id=3

[http://jnci.oxfordjournals.org/cgi/content/full/91/4/317?](http://jnci.oxfordjournals.org/cgi/content/full/91/4/317?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&fulltext=lycopene&searchid=1&FIRSTINDEX=0&resourcetype=HWCIT)

[maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&fulltext=lycopene&searchid=1&FIRSTINDEX=0&resourcetype=HWCIT](http://jnci.oxfordjournals.org/cgi/content/full/91/4/317?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&fulltext=lycopene&searchid=1&FIRSTINDEX=0&resourcetype=HWCIT)

24. Enjoy the Health Benefits of Wine, Without Drinking a Drop!

Great news for people who don't like wine! The latest studies show you can get almost the same benefits from grape juice. The reason? Purple grape juice contains powerful disease-fighting antioxidants called flavonoids that give wine many of its heart-healthy benefits.

Heart and vascular problems develop when endothelial cells that line blood vessels don't work properly. Researchers recently found that flavonoids in Concord grape juice activate the endothelial cells to produce nitric oxide. Nitric oxide helps protect against cardiovascular disease and helps maintain healthy blood vessels and blood pressure.

Bottom line, grape juice is a terrific way to get many of wine's potential health benefits. When you go for the juice, choose the purple kind, which is far richer in antioxidant flavonoids than red or white.

Enjoy a four-ounce glass with breakfast or for an afternoon snack, and your heart can realize almost the same benefits your wine-drinking friends like to brag about. Or uncork one of the fine nonalcoholic red wines on the market and enjoy with dinner or with appetizers. They're loaded with antioxidants and wonderful flavor -- and you can drink all you like without worrying about the drive home!

Enjoy the health benefits of grapes, today.

Try my ChefMD®-approved recipe for warm spinach salad with chicken, grapes and toasted pecans.

http://www.chefmd.com/news_read.php?id=2

<http://www.ncbi.nlm.nih.gov/pubmed/12083471>

25. Going "Green" after a workout can help you to a "Tea"

When you're in your workout mode, you might imagine that water or a specially-formulated sports drink (generally ending in "-ade") is the best beverage to have on hand. You may want to "bag" that idea... it turns out that green tea may provide a true wealth of health benefits athletes need when they're undergoing resistance training.

A recent study followed 14 healthy men, half of whom drank six ounces of green tea three times a day. They—and their blood samples—were followed for a week and tested after performing four sets of bench presses, a prime example of resistance exercise. For

all the benefits workouts provide, they can cause the body to undergo oxidative stress—in excess, not a good thing for your cells and tissues. Green tea can help counteract that.

Athletes who drank the green tea had less damaging lipid hydroperoxide and more protective polyphenols in their blood before and after exercise. Another key finding was a 37 percent higher post-exercise level of a protein called glutathione, which helps protect the body from oxidative stress caused by damage from free radicals. The researchers concluded that green tea provided significant benefits for sports participants.

So go ahead, pump that iron and then enjoy a nice cup of green tea. Better yet, enjoy your green tea as just one of many flavorful, healthful ingredients in my ChefMD®-approved Butternut Barley Risotto with Goat Cheese and Almonds.

With hearty barley, succulent squash, toasty almonds and a medley of flavors, it'll fill you up, give you energy and prep you properly for the next workout.

<http://content.nejm.org/cgi/medline/pmid;18337059?FIRSTINDEX=3380&andorexactfulltext=and&andorexacttitleabs=and&excludeflag=TWE E...&searchid=1&FIRSTINDEX=3380&resourcetype=HWCIT>

http://chefmd.com/news_read.php?id=24

26. Fish Oil Doses Hard to Swallow?

Think the best way to get your omega-3 health benefits for your brain and your heart is through a supplement? Not necessarily! Let your food work as medicine. In most cases, food works better than supplements to deliver healthy ingredients that keep you going. Plus, your favorite foods fill you up and deliver nutrients that work together.

Most recently, a new 16-week study among pre-menopausal women revealed that eating fish increased their red blood cell levels of omega-3 fatty acids faster and as well as taking a supplement. Just 2 servings of fish per week were as good as 1-2 fish oil capsules per day. And fish tastes better, too!

Oily fish like wild salmon and red snapper offer a multitude of health benefits, are mercury-free and their ability to deliver omega-3 fatty acids to your system is unsurpassed.

Want a great fish dish that keeps you swimming in healthy omega-3s? Snap up my ChefMD®-approved recipe for Barbecued Red Snapper with Spicy Red Beans & Brown Rice! A little spice, a little rice, beans and barbecue sauce and delicious red snapper. A great kick for your taste buds and your health!

http://chefmd.com/news_read.php?id=18

<http://www.ajcn.org/cgi/content/abstract/86/6/1621?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=&author1=Pottala&searchid=1&FIRSTINDEX=0&sortspec=relevance&resourcetype=HWCIT>

27. Mom's Right: Eating lots of fruit is good for you, improving bone health and reducing osteoarthritis risk.

Chalk up another one for the wisdom of Dr. Mom.

A study published in Arthritis Research and Therapy suggests vitamin C and other antioxidants contained in fruit help reduce bone marrow lesions in the knee, which cause pain in osteoarthritis.

Initiated more than 10 years ago, the study followed 293 healthy adults without knee pain or injury, asking them to complete a food frequency questionnaire to measure their antioxidant intake. Ten years later, the researchers measured cartilage volume, bone area, cartilage defects and bone marrow lesions. The study suggests a beneficial effect of vitamin C intake is a reduction in bone size and the number of bone marrow lesions, meaning a reduced risk of painful knee osteoarthritis.

Osteoarthritis is the most common form of arthritis, affecting 21 million people in the US alone. It's associated with a breakdown of cartilage in joints and can occur in almost any joint in the body. The chance of developing the disease increases with age, but even people in their 20s and 30s can get osteoarthritis.

Get more vitamin C into your diet today, with this ChefMD™-approved recipe for apple crisp.

<http://arthritis-research.com/content/9/4/R66>

http://chefmd.com/news_read.php?id=11

28. Find Your Thrill with Blueberries: This Super Food Helps Prevent Colon Cancer

Don't bother looking for the mythical Blueberry Hill from the old Fats Domino classic. If you want a real thrill, just head to your local grocer or farmers market and get a pint of fresh blueberries.

Blueberries are bursting with nutrients and flavor, yet very low in calories. Researchers at Tufts University analyzed 60 fruits and vegetables for their antioxidant capability, and the blueberry topped the list, rating highest in its ability to destroy pesky free radicals that can cause everything from heart disease to cancer.

And now, a new study suggests blueberries help prevent colon cancer. Scientists at Rutgers University and the US Department of Agriculture discovered that pterostilbene, a phyto-compound found in blueberry skins, shows promise in preventing colon cancer and reducing some colon cancer risk factors.

Pterostilbene (pronounced TARE-oh-STILL-bean) is similar to the antioxidant resveratrol found in grapes and red wine. Pterostilbene is also present in grapes, but it's more abundant in blueberries. Researchers aren't really sure how it works, but they're doing more studies to find out.

So, get more blueberries into your diet today, especially if you're at risk for colon cancer. They're great right out of the carton, sprinkled over yogurt or on top of a bowl of steel-cut oatmeal, and of course, in a rich, dense, high-fiber muffin.

http://chefmd.com/news_read.php?id=6

http://acswebcontent.acs.org/communications/chicago07/public_podcasts/coloncancer.html

29. In a Bad Mood? Eat More Salmon! Omega-3s are Good for Your Heart, and Your Brain.

Overly critical of your spouse's spending habits? Losing your temper over the littlest things? Mad because last week's episode of Desperate Housewives was a re-run?

Maybe you need to improve your mood. Eating more foods rich in omega-3s just might do the trick. Omega-3s are the healthy fatty acids found in fish like salmon and mackerel, and in plant foods like walnuts, flax, hemp and canola oil.

Omega-3 fatty acids seem to affect areas of the brain associated with emotion. A new study focused on 106 healthy people. Those who had low blood levels of omega-3 fatty acids scored worse than those with high levels on tests designed to assess mood, personality and impulsive behavior.

So how much omega-3 should you be getting in your diet? The American Heart Association recommends eating at least two servings of fatty fish each week. But I recommend eating as many different types of omega-3 rich fish as you enjoy. Salmon, for example, is a flavorful, versatile fish that you can roast, poach, grill or broil. Look for Alaskan Wild Salmon, free of the additives of much farm-raised salmon.

Try my ChefMD®-approved recipe for Pan-Grilled Citrus Salmon over Asian Slaw, and start getting more omega-3 fatty acids into your diet today.

It's good for your heart and for your disposition!

http://chefmd.com/news_read.php?id=4

<http://www.psychosomatic.org/events/2007APSabstractsforjournal.pdf>

30. [Top Online Diet Program Ratings](#)

We rated 10 of the top online diet programs.

We used the National Weight Control Registry's core finding that people who keep weight off use personalized programs that teach and achieve four principles: accountability, self-monitoring, individualization of diet and adequate exercise.

We assigned each program a total possible of 100 points, with each of the four areas representing 25 points.

We included only paid programs, because other research has shown that people are more likely to adhere to a program they paid for, even if a free program is of higher quality.

Here are the rankings, and links to the top six.

[Jillian Michaels](#) (94 points)

[Joy Bauer](#) (94 points)

[Denise Austin](#) (91 points)

[Sonoma Diet](#) (90 points)

[South Beach Diet](#) (88 points)

[The Duke Diet](#) (87 points)

Weight Watchers (82 points)

e-diets (76 points)

Diet.com (66 points)

<http://www.drjohnlapuma.com/obesity-and-weight-loss/top-online-diet-program-ratings/>

31. See How Easily You Can Make Yourself Younger: Small Group Seminars

One of the most productive and fun seminars I've given took place just two weeks ago, here in Santa Barbara, in a nearby rented living room: house call!

A group of guys from the Midwest, all members of an executive professional organization, called me a few weeks ahead of their planned biking and wine country expedition. They asked if I would speak with them for a couple of hours on Staying Healthy as You Age.

Sure, I said. I asked them all to take a RealAge test (disclosure: I wrote two [books on healthy aging](#) with RealAge founder and Dr Oz superstar Michael Roizen, and serve on the Scientific Advisory Board).

And the good news: nearly all had RealAges (the age of their bodies as they've chosen to care for them) younger than their birthday ages. And all wanted to do better... especially in weight loss, cholesterol, sleep, stress relief, quality of life.

Plus, we got to talk about wine, wine-tasting, pairing and making. And I shared two wines I'd made—a Petite Sirah and a Zinfandel—which was also really fun. I gave each a signed copy of The RealAge Diet.

I'm confident that the next time I see them, several of them (all of them?) will look and feel better and younger than they do now.

Judith Weinraub of the [Washington Post](#) interviewed several of us who have observed that men and women sometimes need different advice.

And collaboration and partnership, instead of direction. Very satisfying.

<http://www.drjohnlapuma.com/wellness-and-health/see-how-easily-you-can-make-yourself-younger-small-group-seminars/>

32. Top-rated Treadmills and Ellipticals: Consumer Reports

Consumer Reports' ratings for top exercise equipment just came out, and the LA Times helpfully summarized the findings. I've subscribed to CR for years, and like the analysis: they are careful, test thoroughly on quality not price, and rate objectively.

In my opinion, the best machine is the one you'll use. You can burn more calories on a treadmill if you take a full stride, and use your arms! Don't hold on to the handrails.

Expect to pay \$900 up to \$3k+ for something that will last.

Top non-folding treadmill: [The Precor 9.31](#). Number 1 is the Landice L7 Cardio Trainer at \$3,800 and third is the True PS300. Number 4, and less than half the price of the Precor, is the [Sole S77](#).

Top folding treadmill: the [LifeSpan TR4000i](#).

Top folding treadmills (budget): NordicTrak C900 and the [ProForm Power 995](#).

On ellipticals, use your arms! Try interval training: fast for a minute, slow for a minute. High intensity workouts burn calories faster and more efficiently. And with a lower impact exercise comes lower risk of injury and the ability to prevent injury.

Top elliptical trainer (also \$900 to \$3k): [Octane Fitness Q37ci](#) (though at 1/3 the price, the [Smooth CE 3.6](#) is #3)

Happy cross training!

<http://www.drjohnlapuma.com/uncategorized/top-rated-treadmills-and-ellipticals-consumer-reports-2012/>

33. [Gluten Free Quiz and Sensitivity: March Results & Research](#)

The Ides of March bring not just wind but winnowing.

This month, a new [gluten sensitivity \(GS\) study](#) by celiac disease pioneer Dr Fasano shows that gluten sensitivity affects about 6% of U.S. adults.

GS is a different form of immune dysfunction than celiac disease (CD), which affects about 1% of U.S. adults.

The [WSJ gluten piece](#) notes that the higher gluten wheat in production now may trigger GS. There is 4x as much CD in the U.S as 50 years ago.

GS is something patients have noticed, but clinicians have not had a way to pick up on. Celiac testing can rule out CD, but can be expensive.

Many readers are starting with the secure [Gluten Free Quiz](#) to identify their symptoms.

They get their [Should You Be Gluten Free Score](#), and then speak with their doctors and get tested. That's progress.

In the last 10 days, over 1800 people have taken Gluten Free Quiz: here are several results from that time:

- 1 84% female
- 2 68% with abdominal bloating
- 3 65% with fatigue (the most common symptom of CD)
- 4 20% with irritable bowel syndrome (may be GS in disguise)
- 5 14% with a past or present diagnostic rash of CD, dermatitis herpetiformis: these are people who must get tested, now.
- 6 8% with a first or second degree relative with CD
- 7 26% with high scores, indicating the need for testing

CD untreated can mean osteoporosis, infertility, neurological conditions, other autoimmune conditions and rarely, intestinal cancer.

<http://www.drjohnlapuma.com/environmental-health/gluten-free-quiz-and-sensitivity-march-results-research/>

34. Losing Weight Knocks Down Knee Pain...But How?

If the US had the obesity rate it had in 2000 (not 2009), we might prevent [111,206 total knee replacements](#).

If you have arthritis, you are twice as likely to be obese than if you don't. About 50 million adults (22% of the US population) has arthritis—principally osteoarthritis, or wear and tear arthritis. Joint pain is the most common symptom.

2000 median obesity among adults with arthritis: 33.2% (range 25.1% in Colorado to 40.1% in Ohio).

2009 median obesity among adults with arthritis: 35.2% (range 26.9% in Colorado to 43.5% in Louisiana).

Why do arthritic knees hurt? Is it because the knee bears 4# of stress for every pound of body weight? Is it inflammatory cytokines and adipokines that degrade cartilage? Is it something else?

I've long been interested in improving quality of life in arthritis. A RC trial of omega-3s helped [arthritic and neck pain](#); extra virgin olive oil has [ibuprofen-like activity](#).

Medical costs are estimated at \$147 billion for obesity and \$128 billion for arthritis each year, but the real, human cost which cannot be quantified is much greater.

A systematic, careful, personal approach which looks at drugs and side effects, as well as [diet](#) and lifestyle, is what I recommend for [my own patients](#).

<http://www.drjohnlapuma.com/uncategorized/losing-weight-knocks-down-knee-pain-but-how/>

35. BPA and Obesity: The Soup Can Paradox

Soup is good food. It's especially good for weight loss. Bob Barnett and Barbara Rolls based the best-selling [Volumetrics](#) around the idea that dishes low in calories (i.e., lots of water) and slow-to-eat (i.e., soup!) were the best for losing weight. There's something to that.

It's a cruel paradox, then, that a new [JAMA report on BPA](#) shows a level 12x higher (a 1200 percent increase) in eaters 12 hours after they ate 12 ounces of any of 5 Progresso canned vegetable soups, than when they ate homemade vegetable soup.

It is little known that the obesity epidemic coincides with a similarly linear increase in industrial chemicals—endocrine disruptors that act as estrogens in the body—over the past decades. Coincidence? I doubt it.

[BPA](#) may be stored in fat. It interacts with a thyroid hormone receptor, potentially slowing metabolism. BPA acts as a weak estrogen in the body, causing men to lose some ability to build muscle and metabolize sugar. In the lab and in animals, BPA acts as an androgen receptor antagonist. Men need testosterone to build muscle and keep weight off. In all adults, BPA is associated with heart disease and diabetes.

Why do we have BPA? It protects plastics and prevents the inside of cans from rusting. But it may also prevent you from losing weight.

Are there canned alternatives? Yes: you can buy BPA-free [Eden beans](#), [Crown Prince salmon](#) and [Muir Glen tomatoes](#); you can buy [BPA-free Earth's Best baby food](#) and [travel mugs](#); you can buy [BPA-free espresso makers](#) and [jet soda makers](#).

But there is no alternative to knowing what's in your food, and to beginning to look at how what's in your food changes your weight.

<http://www.drjohnlapuma.com/drug-food-safety/bpa-and-obesity-the-soup-can-paradox/>

[36. What to Look For on an Olive Oil Label](#)

Both [NPR](#) and the [NYT](#) have had features showcasing why most olive oil sold in the U.S. is not what it claims to be.

There's a long unsavory history of diluting olive oil (and its [healthfulness](#)) with sunflower, corn and not oils. My Brooklyn grandfather used to tell me brewing not bath tub gin, but bathtub oil!

So here is a quick primer on what to look for to make sure you get the real thing: I also posted this on the NPR site, and it has more "likes" than anything else, except the post complaining that brands were omitted!

Look for

- a. extra virgin olive oil in dark green glass or in packaging that shields it from light: not clear plastic. ever.
- b. the words "cold pressed"
- c. a harvesting date on the bottle
- d. for CA oils (my preference, as the [CA standards](#) are stricter than international), look for the California Olive Oil Council Seal (COOC): it means
 - Less than .5% free oleic acid
 - No chemicals or excessive heat during a mechanical extraction
 - Blind tasting showing flavor characteristics and no taste defects

3 of my favorites (All have the COOC seal, I have visited all, have planted 15 trees with first harvest next year, and am lucky enough to attend the Paso Robles Olive Festival every year! check it out next August!)

[McEvoy Organic Extra Virgin Olive Oil](#)

[Apollo-Mistral Organic EVOO](#)

[O Meyer Lemon Olive Oil](#)

<http://www.drjohnlapuma.com/common-conditions/what-to-look-for-on-an-olive-oil-label/>

37. [Top Pedometers and GPS Watches: Consumer Reports](#)

Treadmills and elliptical trainers are some of the best aerobic exercisers available for weight loss 2012, and Consumer Reports picked its top models this month (reviews to come).

But if you already have a treadmill or an elliptical, or want to start more simply, select a pedometer (around \$30) or a GPS watch (around \$200) or both.

Consumer Reports rates equipment as follows:

Top 3 pedometers: Mio Trace Accu-Tek, the new [Omron GOsmart Pocket HJ-112](#) (or get the tried and true [Omron HJ-112](#)) and the [Yamax Digi-Walker CW-701](#).

(I especially like both Omrons)

Top 3 GPS watches: [Nike+ SportWatch GPS](#), the [Garmin Forerunner 210](#) and the [Timex Ironman Global Trainer GPS Speed + Distance T5K267F5](#).

(I especially like the Garmin)

These are less expensive than a treadmill: I tell my patients to get 3 pedometers, because inevitably one is lost, and one is always somewhere you meant to put it on, but forgot. They're invaluable, especially when you're trying to get to 10,000 steps!

<http://www.drjohnlapuma.com/uncategorized/top-pedometers-and-gps-watches-consumer-reports-2012/>

38. [Two New Books You Should Read: Cooked, and Wild Side](#)

I've just finished two wonderful books, one of which is well-known and the other deserves to be: [Cooked](#), and [Eating on the Wild Side](#).

I had assumed that Michael Pollan's new book *Cooked* would be well told but precious: a Berkeley academic, albeit a food interested one, learning how to get his hands dirty with the supervision of celebrity chefs.

But it turns out that's not most of it: Pollan really did some work in the kitchen, and basement brewery, and front lawn hog pit, and it shows. His terrific story-telling skills merge with his ability to do enough culinary work so that real skill begins to show between his fingers and the lines.

You only acquire skill if you really invest in smearing every single cabbage leaf with ginger-garlic paste for kim-chi, on your knees; if you know the value of burning down oak for grilling embers but don't apologize for using a little charcoal if it gets you a little more sleep; if you feel and understand the give and take of bread dough as you go.

If you love food, want to know the basics of how to cook through round-the-world story-telling, and are curious about dipping your finger and then hand in, Pollan is your guy. I loved reading this book, as it reminded me of my own trials by fire at the Frontera Grill/Topolobampo, where cases of onions and gallons of mole and four years later, I began to feel like I could cook.

[Eating on the Wild Side](#): Jo Robinson is a journalist who has been interested in food, chemistry, history and gender a long time. She spent 10 years doing the research and read 6000 studies (in contrast, [ChefMD's Big Book of Culinary Medicine](#) only took me 3 years and 3000 studies).

She is down to earth, and interested in earthiness, but is happy to call lettuce “heavy breathers” (because they have a high respiratory rate and don’t die when you pick them..and because “they burn up their antioxidants and sugar faster than many other veggies”). She has researched the plants which have been ignored because of domestic demands and is championing phytonutrients as hidden super ingredients. She doesn’t overpromise health benefits, but she does love the allure of a secret right under our nose: “herbs are wild plants in disguise, and they’re just as good for us.”

I am so happy that [Eating on the Wild Side](#) is getting real attention: it just shows that if you present healthy food and messages in sexy ways, people will want to know about it...and if they end up eating darker lettuce, or cooking their berries to increase flavor and antioxidants, or putting a list of “Eat Me First” foods on their fridge (artichokes, asparagus, broccoli, kale, leeks, lettuce, and spinach), then we are one step closer to a healthier, heartier country. Gotta love it.

<http://www.drjohnlapuma.com/wellness-and-health/two-new-books-you-should-read-cooked-and-wild-side/>

39. Immunity, Cancer, Nutrition and Cooking: Super Foods

I believe there is a national movement to help you get stronger, leaner and healthier with what you eat. Knowing what’s in your food, and how it can help you get well or make you sick are the most important steps you can take to transform your life.

So it was my recent experience in New York City, with Dr. Oz: there, in 3 TV segments over 25 minutes and is [online](#). I demonstrated and described the medical magic of

- a. chicken, antibiotic free
- b. oyster sauce
- c. arugula

- d. lime
- e. pumpkin, both fresh and canned
- f. bulgur
- g. black pepper and oregano
- h. concord grapes
- i. red wine

I also described how and why hospital food has to change to prevent disease instead of cause it, and medical education as well, and gave my simple acronym of BITES™ of foods you should eat every week. The Little Bites part of my [ChefMD book](#) is everyone's favorite part.

Boosting immunity and reducing risk for cancer with what you eat is powerful. Obesity is probably the most important cause of cancer, equivalent now with smoking.

We used culinary medical tools on the Show: a [blender \(VitaMix!\)](#), a [microplane zester](#) (essential creating zest and capturing the phytonutrients in the skin) and a [wine aerator](#) (to bring up flavor and aroma in red wines, regardless of price point). Plus my great [Santoku knife](#) for opening and roasting that pumpkin.

Finally, we made a simple, marinated-for-a-moment (Chris Kimball is right: short marinades of very lean meats especially are as effective as long ones) anxiety-reducing, easy recipe: Honeyed Chinese Chicken.

You can get the recipe, free, when you [sign up for my still-free newsletter](#), sent once or twice a month, full of information, recommended products and tips, exclusive subscriber benefits, plus more on BITES™.

Lab and human studies show reduction in cortisol levels (the stress hormone) with chicken essence and bonito broth consumption, and this anxiety-reducing recipe has both.

But it might actually reduce anxiety because it is so easy and quick, tastes even better the next day and because you can make it in quantity and save it.

This week and next I teach two nutrition and cooking classes at the Santa Barbara Healing Sanctuary—a beautiful residential wellness retreat for those trying to make sense of how their bodies work and can work better—even heal.

Yesterday I taught knife skills: I love doing this, and everyone practiced well. (Btw, the [best chef's knife](#) for most people is a smaller, well-made, easy to use and a Santoku, and a paired, greater hardness [steel](#): my favorite Victorinox [here, on Amazon](#)).

I lead a tour of sustainably grown citrus trees: mandarins, lemons and navel oranges, and looked at leaves, trunk and fruit; the processes of growth in these trees all parallel the human body. How they ripen and protect fruit, fight off invaders, and sustain growth. I love doing this too.

We tasted a tangerine and a lemon, and interestingly, the people with GERD felt better (interesting, as acidic foods have been shown to be alkalizing in the body).

We discussed each person's experience with food and their health conditions, and they varied widely, from thinking it was everything, to loving to cook, to hating it, to not thinking much about it or its relevance.

We touched on supplements, as [multivitamins reduce total cancer in men, especially those with a parental history of cancer](#), and magnesium is a mineral most people are

deficient in, is critical to normal muscle, nerve and cardiac function and regulates normal blood sugar, blood pressure and immune function.

Everyone had questions, including a [recommended multivitamin](#).

Cooking and choosing well are fun, but they are also work–fabulous, life-filling work that is rewarded not only by dinner, but by the feeling that you can be in control of your life and health.

And in an era in which the wrong food or medicine can make you sick in hidden ways, that's life-changing.

<http://www.drjohnlapuma.com/cancer/droz1/>

40. [3 Foods That Boost Your Sex Drive](#)

No, it's not hype. It's science.

I gave a talk on "Manly Dieting" to the National Wellness Association at #IHRSA in LA on [Culinary Medicine](#) and [Manly Dieting](#) this week, and was overwhelmed with the response: 10% of the audience spoke with me afterwards, to ask if they could be in my beta test for men (and bring 9 other men), which we plan to run online later this year. I loved it, and plan to include them. Meanwhile:

1. Walnuts (not drive but performance).

Especially after a fatty (read salami and cheese) meal: walnuts keep your arteries from constricting in response and responding abnormally to exercise and exertion. Walnuts

are also high in the amino acid arginine, which you need to make nitric oxide, to keep arteries flexible, and improve your blood flow.

Dosage: [8 walnuts, with your meal](#), 4 hours before sex. Take with Viagra/Cialis/Levitra, or instead.

b. Beans, legumes and seeds, especially kidney beans, peanuts, sunflower and pumpkin seeds.

These foods are richest in arginine, an amino acid which precedes nitric oxide in the body. And nitric oxide allow vessels to dilate.

An excellent study showed that a supplement high in arginine improved [female desire](#), satisfaction and frequency of sex, regardless of menopausal status. Note: watermelon, which generates arginine indirectly, probably only makes you pee more.

c. Mediterranean foods, if you have a big belly and metabolic syndrome. The diet works to help you burn belly (visceral) fat...which blocks insulin so you store more fat, squeeze your kidney and poison your liver. If you're a guy, you should know that belly fat turns the testosterone your testes make into estrogen. And drops your ability to make muscle, get lean and strong, and other drops.

The Mediterranean diet as a whole helps [women with metabolic syndrome](#) have better sex: better overall desire, arousal, lubrication, orgasm, satisfaction, pain.

It also helps men overcome erectile dysfunction (ED), also known as impotence. One-third of obese men with [ED cure](#) their disease after 2 years of a Mediterranean-style diet and exercise.

Dosage: It's a meal! Three times daily.

<http://www.drjohnlapuma.com/obesity-and-weight-loss/3-foods-that-boost-your-sex-drive/>

41. Personal Food Revolution #1: Hot Dogs Make My Knees Hurt! (Osteoarthritis)

One of the best ways to help people transform their lives and create their own food revolution is to write my patients' stories: this is #1 of 7.*

Peggy had severe osteoarthritis. Except for the few blocks walk to the market, and the weekly shuttle to a matinee, she was virtually housebound.

Peggy said she usually ate pastries for breakfast, tuna for lunch and strawberry shortcake for dessert.

I explained that osteoarthritis was an inflammatory disease. Its pattern of pain and stiffness are predictable, so we could use food to prevent and even treat the pain.

I prescribed an analgesic food for breakfast (berries), an anti-inflammatory food for lunch (fish, soy, ginger or avocado) and an omega-3 food for dinner (fish, walnuts or flax meal).

She avoided foods with trans fats (they are inflammatory), starches and added sugars (they produce irritating cytokines) or red meat (the saturated fat fans inflammation).

Three months after our first meeting she walked into my office without her cane. "My daughter took me to a baseball game last week, and I had a hot dog. My knees

were killing me for three days afterwards. But I went back on my program, and you know what? I feel so good I'm going to move North, where I can get some land." And she did.

*adapted from [ChefMD's Big Book of Culinary Medicine](#).

<http://www.drjohnlapuma.com/common-conditions/personal-food-revolution-1-hot-dogs-make-my-knees-hurt-osteoarthritis/>

42. [Personal Food Revolution #5: Eat Your Way to Lower Cholesterol](#)

One of the best ways to help people transform their lives and create their own food revolution is to write my patients' stories: this is #5 of 7.*

Tom's case was a quandary: a Pulitzer-winning health reporter, he already exercised diligently, running about four miles most days. He had long ago given up meat and most cheese. Yet his LDL (bad) cholesterol was 169, way above the recommended 130 and an optimal 100.

A single Dad, Tom's two teenagers had grown accustomed to a stick of butter in their weekend Slow Roasted Hen.

So I worked with Tom to add multiple terrific dishes to their eating cycle. There was a Turkish eggplant recipe, and white beans with escarole and tomato.

His internist was astonished. His LDL dropped 33% to an acceptable 114; his healthy HDL cholesterol was up to 75.

Apart from not spending his own and his employer's money on drugs, Tom found another benefit to this program.

His daughter regularly makes steel cut oatmeal for breakfast and enjoys split pea/carrot soup with tarragon, nutmeg and barley. And his son's special request for dinner this past Saturday was grilled salmon with honey-mustard marinade.

You can't get that with a pill.

*adapted from [ChefMD's Big Book of Culinary Medicine](#).

**adapted from the [Wall Street Journal report on lowering cholesterol](#), by Tom Burton.

N.B. investigate [top Amazon.com diet and nutrition alternatives to cholesterol medication](#)

<http://www.drjohnlapuma.com/common-conditions/personal-food-revolution-5-eat-your-way-to-lower-cholesterol-2/>

43. Personal Food Revolution #7: Reverse Diabetes with What You Eat... Out

One of the best ways to help people transform their lives and create their own food revolution is to write my patients' stories: this is #7 of 7.*

Carol has diabetes. She is 48 years old, the mother of two and a successful Washington litigator. She does not know what to eat at the dinner she must attend tonight.

She eats out ten times weekly, usually orders chicken Caesar salad, and snacks on cheese, chocolate and energy bars. She often eats the last of her Taco Bell in the front seat of her car before going in for the night.

I tell her that she can beat insulin resistance, which is causing her out of control diabetes. But she has to treat her disease like her best client—conscientiously.

She is to avoid red and processed meat for 12 weeks: the heme iron increases diabetes risk. Ditto, any food with the words High Fructose or Enriched Flour or Sugar or Rice or Corn Syrup on the package.

Tonight, like every night out, she should have two dinner salads with good vinaigrette over 20 minutes with good fish or lean poultry, and drink hot cinnamon tea afterwards. She should pack almonds, high protein cereal, tea bags and string cheese when she travels.

Carol liked knowing what to eat, and practiced it, a lot, with coaching. She now teaches water aerobics in Virginia.

*adapted from [ChefMD's Big Book of Culinary Medicine](#).

<http://www.drjohnlapuma.com/common-conditions/personal-food-revolution-7-reverse-diabetes-with-what-you-eat-out/>

44. Personal Food Revolution #4: Tired, Gassy and Moody? Could It Be Gluten?

One of the best ways to help people transform their lives and create their own food revolution is to write my patients' stories: this is #4 of 7.*

Terri is a 38 year old who traces her tummy problems back to high school. She has had off and on again fatigue, cramping, gas, bloating and mood swings. She has seen 11 doctors, and been told she is a "diagnostic dilemma" and has "atypical bowel syndrome."

Terry has celiac disease, an auto-immune reaction to gluten. Celiac is caused by—and can be cured by—what you eat.

Gluten is a protein in wheat, rye and barley but is often hidden. Spelt and triticale have wheat, millet does not. Most blue cheese and soy sauce are off limits.

The medicine? Savory, gorgeous gluten-free pasta, nuts, vegetables, meats, seasonings and even beer. They can heal and reverse insomnia, depression and osteoporosis in people with celiac disease.

Terri re-discovered cooking and began to cure herself.

She filled herself with the best ingredients—for her. Food became a joy, because she tasted it fully and didn't overeat. And it changed her life.

Off gluten, she felt better than she had in 40 years. She gained muscle strength, dropping to a size 8.

Terri's case inspired Gluten Free Quiz (www.glutenfreequiz.com) a free self-assessment of your risk for celiac disease.

*adapted from my [ChefMD's Big Book of Culinary Medicine](#).

<http://www.drjohnlapuma.com/common-conditions/personal-food-revolution-4-tired-gassy-and-moody-could-it-be-gluten-2/>

[45. Personal Food Revolution #2: Are You Overweight, Never Hungry and at Risk For Stroke?](#)

One of the best ways to help people transform their lives and create their own food revolution is to write my patients' stories: this is #2 of 7.*

Susan was just 50 when her younger brother Bill died of a stroke. Always significantly overweight, she nevertheless was healthy. She felt energetic, took no medicines, ran a small textile business ("love fabric"), avoided doctors ("no need, unless you're sick"). But Bill's death moved her like nothing else, until at 51, she had a TIA.

Susan was a very picky eater: raised on corn casserole and peanut brittle, she kept to those foods. She had trouble changing her eating habits because she did not actually feel hunger. So she learned to stop eating when the plate was 80 percent empty.

She also promised to begin to eat six fruits and vegetables daily, especially high folate (vitamin B9) ones, because folate in food cuts stroke risk.

She chose one citrus fruit (tangerines), one vitamin C rich veggie (she chose red peppers), one green leafy (spinach), and three cruciferous (Brussels sprouts, watercress, broccoli) veggies. Her risk just dropped 55 percent, I told her.

After four years, 72 pounds, three changes of wardrobe, two years off cigarettes, a new kitchen and one more scary TIA, Susan is still stroke free...and walking 20 blocks daily in Manhattan as a textile buyer for a major department store.

*adapted from [ChefMD's Big Book of Culinary Medicine](#).

<http://www.drjohnlapuma.com/common-conditions/personal-food-revolution-2-are-you-overweight-never-hungry-and-at-risk-for-stroke/>

[46. Personal Food Revolution #3: Eat Your Breakfast, Skip Your Migraine](#)

Posted in: [Aging and Costs of Aging](#), [Common Conditions](#), [Environmental Health](#), [Wellness and Health](#)

One of the best ways to help people transform their lives and create their own food revolution is to write my patients' stories: this is #3 of 7.*

Mary C. is a 29 year-old Houston mediator with migraines. A poster child for tyramine-rich olives, nuts and pepperoni, she also had brie on English Muffins for breakfast. She downed a six pack of Diet Dr. Pepper or Diet Coke every week, usually at her desk, and beer on weekends. She regularly went a whole day without eating.

There were several factors that could trigger her migraines—skipping meals, stress, artificial sweeteners, beer, the tyramine in her food.

The best way to find out which was her trigger would be to correct all of these, and add them back one at a time. Mary didn't want to do that, at all.

But she did decide not to skip meals after she learned that is the most common trigger of all. She tried several high-iron cereals (Total and Product 19) for snacks, instead of olives and nuts. And wherever she went she packed her "migraine snack": toasted pumpkin seeds, which are high in magnesium, which lowers the frequency of migraines.

She's cutting back on the diet soda and the beer, but since she's not had one more headache, she says she might stay just where she is on the beverages.

*adapted from my [ChefMD's Big Book of Culinary Medicine](#).

<http://www.drjohnlapuma.com/common-conditions/personal-food-revolution-3-eat-your-breakfast-skip-your-migraine/>

47. Personal Food Revolution #6: Lose 100#. Avoid Stomach Surgery.

Posted in: [Common Conditions](#), [Obesity and Weight Loss](#)

One of the best ways to help people transform their lives and create their own food revolution is to write my patients' stories: this is #6 of 7.*

Kathi uses seat belt extenders on airplanes and airplane trays ride up on her stomach. Her car seat is back as far as it can go.

She owns no pants without elastic waists, except those that do not fit. Sometimes she stops breathing when she sleeps. Her sister died of diabetic ketoacidosis last year.

I recommended that Kathi see a bariatric surgeon for a gastric bypass. It does carry risk and means learning new eating habits, but it works very well.

She refused. She had taken every diet pill and intimidated every dietitian she had met. She rejected theories of genetic fatalism. She knew that I could help her.

So I agreed to try. I drew a plate. Three-quarters vegetables and one-quarter other foods—foods she chose. She would see me and her physician regularly.

We have continued to work at it. As Oprah has said, "I've been through lots of diet programs, and there's nothing like getting up and getting going and going for a walk in the morning."

Over 3 years she lost 120 pounds. And has kept off 60, after 5 years. Not perfect. But better.

*adapted from my [ChefMD's Big Book of Culinary Medicine](#).

48. [Is It Fewer Carbs, More Fat or Both That's So Good For You?](#)

Posted in: [Cancer](#), [High Cholesterol](#), [Refuel](#)

Atkins was all the rage in the late 1970s; Ornish in the late 1980s; Atkins again in the late 1990s; and now there is free-for-all, with Paleo, Raw, Vegan and [Gluten Free](#) all vying for media time, most-favored-diet-status and celebrity spokespersons.

Diets come and go in waves.

I love analyzing research studies and finding the answer to hard questions. One of the most important nutrition and lifestyle research studies was just published in JAMA (it's about [prostate cancer prevention and treatment with fewer carbs](#) and more foods with plant fat): the take-away is this:

*instead of rice or pasta with a meal, have a handful of toasted almonds or walnuts

*instead of bread and butter as an appetizer, have a handful of olives and nuts

*instead of cheese and croutons on a salad, have a full fat extra virgin olive oil drizzle and a few slices of avocado.

*instead of sour cream in a chicken or tuna salad, use [guacamole](#) or [hummus](#).

But the above, practical take-aways, if you don't have prostate cancer or aren't at risk for it (and you are especially if you are a man, you're African-American, and you smoke), isn't the most important part.

What's most important is that a new swell is the horizon. That new swell: fat isn't bad, it's good, in moderate amounts.

Carbs especially processed, starchy and sugary ones, cause inflammation and insulin surges, and maybe present a ready, easy energy source for cancer and growth factors to boot. And although cancer is very specific—and the foods that help or hurt are cancer-specific, as I began to illustrate in [Culinary Medicine](#)—it's an important beacon because what seems to improve cancer risk also seems to improve heart disease risk. And treatment.

Because the same was shown, not long ago, for [heart disease: saturated fat](#) (which is largely from animals, but also present in coconut and palm kernels) isn't directly associated with heart disease (though it does raise cholesterol in many people: that's a related issue, which Drs Sinatra and Bowden have recently covered in their [wildly popular The Great Cholesterol Myth](#)).

And more men and women die of heart disease than prostate cancer or breast cancer every day of the week.

The point is this: for both men and women, that swell is getting a lot closer, and it's about time. Because soon we'll be able to see if it's the subtraction of carbs (easily the [best weight loss diet](#), and the most palatable, even if you do nothing else) or the addition of good fats (also [the most pleasurable flavors](#) for people to eat) that makes the real difference in chronic disease.

In the meanwhile, I would do both, and find someone who can guide you: you'll eat more happily and pleurably, and live longer, more naturally and better. Such a life starts with [guacamole!](#)

49. How Losing Weight Helps Your Heart. Are You Actually Overweight?

Posted in: [High Cholesterol](#), [Hypertension](#), [Obesity and Weight Loss](#), [Wellness and Health](#)

The first [big JAMA study](#) of the new year (Happy New Year!) implied that you can be overweight or barely obese, and not die early because of it.

In between the lines: yes....in that population. Why?

Because they get medical care right away!. Because they get sicker sooner!
Because their pre-diabetes, hypertension and high cholesterol gets screened for and picked up and treated! And because being sick-like with cancer, immune disease, and heart disease-can make you less fat, because you feel sick!

Plus, looked at internationally (as this study did), people of lower weight were often malnourished and sickly, and in some cases, starving.

So much for "spinning the data."

Here is what you need to know about who is actually overweight, and why weight loss treats heart disease.

74% of men and 68% of women in the U.S are overweight or obese, and the rest of the world is rapidly catching up. Most men and women don't know where

they fall. You can [measure your body mass index](#) (BMI), [measure your kid's BMI](#), or just look below: for both men and women:

If you're 5-foot-10-inches, normal is 132 –167 pounds; an overweight is 172–202 pounds, obese is 209– 236 pounds; severely obese starts at 243; morbidly obese starts at 278.

If you're 5-foot-5-inches, normal 114–144; overweight 150–174; obese is 180–204; severely obese starts at 210; morbidly obese starts at 240.

Weight loss helps your heart because it lowers your blood pressure and your blood lipids including triglycerides and LDL cholesterol; it helps you metabolize sugar more efficiently; it improves insulin sensitivity; and it reduces inflammation. And inflammation probably causes heart disease.

Not to mention makes it easier for the heart to pump blood where it needs to go!

No one said it was easy to lose weight and keep it off: crappy, cheap, alluring high-calorie low-nutrient foods are everywhere. Produce is not as cheap or accessible as highly processed food. People often don't have sit down meals, and motivation is a very weak leg on which to stand. What you need is a [plan, accountability, self-monitoring and the right foods for you.](#)

50. Interview: People's Pharmacy on NPR: How to Eat for the Holidays

Posted in: [Food FAQ's](#), [Obesity and Weight Loss](#), [Wellness and Health](#)

I had the privilege of again speaking with Joe and Terry Graedon of [People's Pharmacy](#) for their legendary podcast and national NPR show. It will be broadcast on December 8, but stay online. We covered a lot:

*how and why I think culinary medicine offers real value to people

***what (and how) women can say to men about their health**

*healthy eating for healthy holidays (and weight loss thereafter)

*[lowering cholesterol with your diet](#), and

*the top 4 Food and Nutrition Stories: what you need to remember

I did a lot of research and preparation for it, and I'll be unpacking it for weeks. Here are a few quickies.

What women can say to men about their health and diet especially is sometimes touchy. Men want to get healthy, be strong and lean, and take care of themselves.

They just do it differently than do women. **Actually, some men just do more steps (with the [Precor Treadmill- my favorite](#)). Or the [Livestrong Elliptical](#)**

(ditto). And keep track using the [Timex Global Trainer Speed and Distance GPS Watch](#). Which is also awesome.

Women can help men who are reluctant to see the doctor or lose weight: they just need the right language. I'll cover more of this in my new book, with a revolutionary new approach to men's health, next year.

Some cholesterol, statin and supplement answers are in my published [ChefMD book \(about culinary medicine\)](#) and [my 5-DVD set](#) . My sources are ones you can use too:

1. [Latest in Clinical Nutrition, 2012: Volumes 1-10 \(12 DVD Set\)](#)
2. [Food and Nutrients in Disease Management](#)
3. [Advancing Medicine with Food and Nutrients](#), Second Edition (nb: will be released 12.12)

And on the web

1. www.naturaldatabase.com (regularly updated by pharmacologists and other scientists).
2. www.pubmed.gov (all peer-reviewed stories, with good filters)
3. www.lpi.oregonstate.edu (tremendous science, especially about cancer and immunity, part of my Dr Oz Show appearance).

P.S. Thrillingly, [the Dr Oz Show](#) put the ChefMD book in the running for the New York Times best-seller list—again! We'll see shortly: until then, the Honeyed Chinese Chicken recipe he and I prepared is free, if you'd like to [receive my Paging Dr. La Puma newsletter, "Healthy Bites"](#).