

Andrew Weil, MD

self healing

CREATING OPTIMUM HEALTH FOR YOUR BODY AND SOUL

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ON MY MIND:

Chair Yoga

Older people or anyone who has difficulty doing yoga on a mat because of limited flexibility, a disability, or a temporary injury might enjoy chair yoga.

What it is: This gentle practice is done in a chair or wheelchair (with the wheels locked), which provides a stable base. Poses are adapted to the seated position and work both the upper and lower body. As with other forms of yoga, the numerous benefits include increased strength and flexibility, improved circulation, and experience with breathing and relaxation techniques.

My take: I think that chair yoga is a wonderful idea—even for desk workers and travelers. Classes may be taught in senior centers and yoga studios. Or you can practice at home with instructional videos such as *Seated Yoga* with Carol Dickman and *Sitting Fit, Anytime: Easy and Effective Chair Yoga* with Susan Winter Ward. 

Many supplements are primarily used to treat one health condition, like echinacea for colds and glucosamine for osteoarthritis. But these four remedies are more versatile. They “multitask,” showing good results for different ailments.

Butterbur. This European herb (*Petasites hybridus*) can be helpful in both preventing migraine headaches and treating hay fever. In one study, people who took butterbur had nearly 50 percent fewer migraines (*Neurology*, December 28, 2004). The herb may act as a preventive by reducing inflammation and spasms in blood vessel walls. Other studies suggest it may be as effective as antihistamine drugs for allergies, without causing drowsiness. Butterbur appears to affect the immune system in ways that reduce allergic reactions.

How to use: For both migraine and hay fever, the suggested dose is 100 to 150 mg of butterbur extract daily with meals. The most common side effect is burping. Only use products that are free of toxic pyrrolizidine alkaloids (PAs). A reliable brand is Petadolex.

Coenzyme Q10. This compound, which sparks energy production within cells and acts as an antioxidant, has shown benefits for cardiovascular problems like angina, cardiac arrhythmias, and congestive heart failure. Unpublished research suggests it can reduce muscle pain caused by cholesterol-lowering statin drugs, which inhibit the body’s own production of this compound. I often recommend CoQ10 to treat gum disease. Studies suggest it can help prevent migraines. High doses may help prevent breast cancer recurrence. And very high doses seem to slow the progression of Parkinson’s disease.


How to use: Anyone on a statin should take 60 to 90 mg a day of the softgel form of CoQ10 at mealtime to maximize absorption. If you have cardiovascular disease or a family history of it, take 60 to 180 mg daily. For gum disease, use 60 mg a day. For migraine prevention, take 100 to 150 mg daily. To prevent breast cancer recurrence, take 180 mg a day.

The dosage used in Parkinson’s research was 1,200 mg daily in chewable wafers.

Melatonin. Best known as a sleep aid, melatonin has other therapeutic effects. The pineal gland secretes this hormone at night to regulate sleep, and supplemental melatonin has proved effective for jet lag and in some studies for insomnia. Migraine sufferers have lower levels of the hormone, and a small study found that taking melatonin on a daily basis reduced migraine frequency (*Neurology*, August 24, 2004). And high doses may extend survival in people with metastatic cancer, perhaps by increasing levels of the body’s own tumor-fighting cytokines.

How to use: For jet lag, take 2.5 mg of a sublingual (under the tongue) tablet at bedtime for a night or two upon arrival. You can take the same amount for occasional insomnia, but recent evidence suggests that 0.3 mg may be just as effective. The dose used in the migraine study was 3 mg, 30 minutes before bedtime. People with metastatic cancer may benefit from taking up to 20 mg at bedtime.

SAM-e. This substance, which is produced naturally by the body, is widely used in Europe to treat both depression and osteoarthritis. Some research suggests that SAM-e (S-adenosylmethionine) may ease depression as effectively as antidepressant drugs, and it works faster, often within a week. SAM-e appears to increase levels of neurotransmitters like dopamine and serotonin. A recent study found SAM-e was just as effective as the COX-2 inhibitor Celebrex for knee osteoarthritis, although the supplement worked more slowly (*BMC Musculoskeletal Disorders*, February 26, 2004). SAM-e may play a role in repairing cartilage and lubricating joints.

How to use: For depression or osteoarthritis, take 400 to 1,600 mg a day on an empty stomach. Use enteric-coated products of the butanedisulfonate form, the one that’s most bioavailable. One drawback: SAM-e is expensive. Also, it may trigger manic episodes in people with bipolar disorder. 

As kids return to classes, parents should take on an assignment: to improve school lunches. This need is pressing, with childhood obesity rates soaring. Even if kids eat well at home, most face unhealthy choices at school, from junk food in vending machines to fast-food companies selling meals in cafeterias. And school lunch programs need a makeover. Currently, the USDA supplies schools with meat, dairy products, and some fruits and vegetables to prepare meals as they wish, provided they contain adequate nutrients but no more than 30 percent of calories from fat. The result is often kid-pleasing but unhealthy mainstays like hot dogs, pizza, and chicken nuggets.

Change is now afoot. Some schools are banning junk food and fast food; allowing vending machines to sell only healthier snacks like water, juice, and dried fruit (I'd add unsweetened, caffeine-free tea); or offering vegetarian entrées or soy milk. Such steps can require extra money and effort, so schools may not have the funds or motivation to initiate them. That's where parents can make a difference: Contact the principal or food service director and suggest solutions. Local farms often have extra produce they'll provide to schools for next to nothing. Organize taste tests to learn what healthy foods kids enjoy, and form a committee of parents, food service workers, and nutritionists to affect change. Lobby politicians for increased government funding of vegetarian foods. And teach your kids about healthy eating: Let them help you prepare wholesome, tasty bag lunches. For more ideas, visit healthyschoollunches.org or choiceusa.net.

If your doctor wants to go back to school to study integrative medicine, suggest the University of Arizona's Fellowship program (integrativemedicine.arizona.edu).

Andrew Weil, MD, received an AB degree in biology (botany) from Harvard University and his MD from Harvard Medical School. He is director of the Program in Integrative Medicine and clinical professor of internal medicine at the University of Arizona in Tucson. Dr. Weil is an internationally recognized expert on medicinal herbs, mind-body interactions, nutrition, and integrative medicine. He has authored nine books including the bestsellers *Eight Weeks to Optimum Health* and *Spontaneous Healing*.



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Dr. Andrew Weil's

self healing

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Dr. Andrew Weil's Self Healing (ISSN 1085-0880) is published monthly by Body & Soul Omnimedia, Inc. Periodicals postage paid at Boston MA and additional mailing offices.

Postmaster: Send address changes to *Self Healing*, PO Box 2062, Marion OH 43306

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Treating Warts, Naturally

Warts are a common nuisance. Physicians often cut, burn, or freeze them off by applying salicylic acid or liquid nitrogen, but they can stubbornly grow back, sometimes in greater numbers. These conventional treatments can be painful and may require multiple trips to the doctor.

I've found that warts are very susceptible to spontaneous healing, where belief can help activate the immune system. For that reason, I usually recommend mind-body techniques, like guided imagery, over conventional wart treatments. The key to guided imagery is practicing it regularly and choosing a visual image that you can relate to on a personal level. One man who was fascinated by steam shovels as a child got rid of a large wart by imagining a steam shovel scraping away at it morning and night. Another visualized a white light traveling through his body and eliminating the wart; a month later, it was gone. I have heard countless stories of miraculous wart cures, from the simple to the strange. Below are other natural approaches worth considering:

Hypnotherapy. Research supports this mind-body approach for warts, and one

study suggested hypnotherapy was a more effective treatment than salicylic acid. While in a hypnotic state, people are told to imagine the disappearance of their warts.

Duct tape. A study of 61 young people found duct tape may be more effective for warts than liquid nitrogen. One group covered their wart with duct tape for six days, then removed the tape, soaked the wart in water, rubbed it with a pumice stone, and reapplied new tape. After two months, 85 percent of the kids who used duct tape saw their warts disappear compared to 60 percent in the nitrogen group (*Archives of Pediatric and Adolescent Medicine*, October 2002).

Zinc. About nine out of 10 people who took zinc supplements for two months were cured of their warts (*British Journal of Dermatology*, March 2002). Zinc boosts the immune system, which may help fight off the wart virus. I suggest taking 30 mg per day of zinc picolinate, a form that's easily absorbed.

Folk remedies. Rubbing warts with a piece of cut potato or the inside of a banana peel are two popular folk remedies. Belief in such treatments may activate an immune response that causes warts to disappear. ☞

10 Natural Approaches to ADHD

Drugs for attention-deficit/hyperactivity disorder (ADHD) have been under fire. In June, the Food and Drug Administration said it was examining a potential link between Ritalin and cancer, based on a small Texas study that found damage to the chromosomes of 12 children who had taken the drug for three months. The agency also announced plans to add new warnings about psychiatric side effects to the label of Concerta, due to reports of hallucinations, suicidal thoughts, and aggression. In February, Canada discontinued sales of Adderall XR (extended release) after it was linked to 20 cases of sudden cardiac death in adults and kids worldwide; the drug remains on the US market.

These developments have reinforced my belief that you should experiment with natural approaches to ADHD before turning to stimulant drugs like those above, which can also suppress appetite and interfere with children's growth and development. I'd also suggest getting a second opinion if your child is diagnosed with ADHD, since the disorder can be confused with other problems, including depression, learning disabilities, and vision or hearing problems. Plus, consider the "fit" between your child and his or her school: A high-energy youngster may thrive in a hands-on learning environment, while a "spacey" child may need a lot of structure.

Here are 10 natural approaches that can help with ADHD. Most of the studies discussed below involved children, but adults with ADHD may also benefit. Some ideas come from Sandy Newmark, MD, who has a pediatric integrative medicine practice in Tucson, Arizona.

1/ Cranial osteopathy. This method, in which gentle hands-on pressure is applied to the head and elsewhere, aims to free up restrictions in the movement of cranial bones and allow the nervous system to function smoothly. I think it may be especially helpful for children with ADHD who have experienced birth trauma or head trauma. To find a practitioner, send an SASE (60 cents postage) to The Cranial Academy, 8202 Clearvista Parkway #9-D, Indianapolis IN 46256.

2/ Dietary changes. Studies are mixed, but Dr. Newmark says he has no doubt that many children with ADHD have increased behavior problems after eating certain foods or ingredients. He suggests limiting refined carbohydrates (products made with flour, sugar, or high fructose corn syrup) to keep blood sugar levels more stable, eliminating artificial food colors and preservatives, testing for food sensitivities (see our October 2004 issue), and avoiding caffeine.

3/ EEG biofeedback. Many people with ADHD have brain-wave patterns high in "dreamy" theta waves and low in "alert" beta waves. EEG biofeedback uses high-tech equipment to help ADHD patients retrain their brain waves to follow a more focused pattern. Several studies have reported encouraging results, although EEG biofeedback can also be time-consuming and expensive: A full course of treatment may entail 40 sessions, and this approach is often not covered by health insurance. To find a practitioner, visit bcia.org.

4/ Green outdoor spaces. Simply enjoying nature can have a calming effect. A study of more than 400 children and

adolescents with ADHD found that after-school and weekend activities done in green outdoor settings—like parks, backyards, and tree-lined streets—were associated with fewer ADHD symptoms compared to activities done inside or in outdoor places without much greenery, like parking lots (*American Journal of Public Health*, September 2004).

5/ Homeopathy. A couple of studies in which children with ADHD were given individually chosen homeopathic remedies found improvements in parent ratings of behavior, although other researchers have criticized the design of these trials. I've also known people with ADHD who have benefited from this healing system. To find a homeopath in your area, visit homeopathic.org.

6/ Martial arts. In my opinion, karate, tae kwon do, and other martial arts can be extremely valuable to people with ADHD. These activities offer an outlet for excess energy, promote self-discipline, and increase concentration. Tai chi, a "soft" martial art, has been found to reduce hyperactivity and anxiety in adolescents with ADHD.

7/ Massage. Massage therapy is wonderfully relaxing, yet it has also been found to change brain-wave patterns in the direction of increased alertness. Small studies appear promising: In one trial, 30 children and adolescents with ADHD who got a 20-minute massage twice a week for one month rated themselves as happier following the sessions, and their schoolteachers reported improved behavior in the classroom (*Adolescence*, Winter 2003).

8/ Omega-3 supplements. Omega-3 fatty acids are important components of the membranes that cover brain cells, and people with ADHD seem to have lower blood levels of these healthy fats. Although more research is needed, I would encourage anyone with ADHD to take supplemental omega-3s. For kids, Dr. Newmark suggests using one of the children's formulas from Nordic Naturals (to order, visit nordicnaturals.com) and following package directions. For adults, I recommend taking a fish-oil product at a daily dose of at least 1,000 mg of EPA and DHA combined.

9/ Yoga. Besides neutralizing stress, regular practice of yoga can also improve concentration. In a small study, boys diagnosed with ADHD and stabilized with medication who attended 20 weekly yoga classes reduced their ADHD symptoms and showed improvement in attention and behavior. Those who also practiced at home showed greater improvement (*Journal of Attention Disorders*, May 2004).

10/ Zinc. Last year, two studies found that supplementing with zinc may improve behavior problems in children with ADHD. This mineral is important in the metabolism of fatty acids like omega-3s. Dr. Newmark advises kids with ADHD to take a children's multivitamin that includes 15 mg of zinc (100 percent of the Daily Value for kids ages 4 and older). Teens and adults can take an additional 15 mg per day. 🍷

For more, see *Delivered from Distraction* by Edward Hallowell, MD, and John Ratey, MD (Ballantine, 2005), and *Healing ADD* by Daniel Amen, MD (Berkley, 2002).

The Trouble with Mercury, and What to Do about It

As a child, I could easily find liquid mercury in thermometers and chemistry sets and never thought of it as a health threat. But the truth is that this heavy metal is anything but benign. The Mad Hatter in *Alice in Wonderland* is meant to portray a victim of mercury poisoning and the brain damage it can cause (mercury compounds were formerly used in hat-making). And tragedies in Japan and Iraq, where hundreds of people suffered from eating food contaminated with mercury, have shown us that getting far too much of the element can cause memory loss, tremors, other neurological difficulties, and death. Babies born to mothers with high blood levels of mercury are also at risk.

Mercury has been making news in recent years, due to concerns about increasingly higher levels of it in the environment, and many people ask me about mercury in fish, vaccines, and dental fillings. But there are different types of mercury, and they may not be equally harmful. Below, I'll try to sort through the controversies surrounding this topic, and offer commonsense advice for protecting yourself.

When the Mercury Rises

Mercury occurs naturally in the air, water, and soil, and has three major forms: metallic, organic, and inorganic. Metallic mercury is the silvery liquid found in many older thermometers; it produces toxic vapors on exposure to air. (Many state and local health departments now have programs that allow you to exchange these thermometers for newer, mercury-free ones.) The most common form of organic mercury is methylmercury, which accumulates in fish and can cause the health problems listed above. Methylmercury is created when inorganic mercury compounds combine with carbon. Coal-burning power plants are a major source of inorganic mercury, which is why many environmental organizations have lobbied the government to curb power-plant pollution. Here are three other sources of mercury.

Fish. When coal is burned, inorganic mercury is released into the air and eventually ends up in lakes, rivers, and the ocean. There, bacteria transform it into methylmercury, worms eat the bacteria, and fish eat the worms. A large fish like swordfish may contain high levels of methylmercury.

This compound is easily absorbed from food and can also cross the blood-brain barrier, damaging neurons. The biggest threat is to fetuses, babies, and young children, whose brains and nervous systems are still developing. It's estimated that one in six babies in the United States is exposed to high levels of mercury each year. That's why children, pregnant or nursing women, and women who may become pregnant are advised to limit their intake of certain fish. However, methylmercury's effect on adults is less clear: For example, a recent study found no strong evidence that high blood levels of mercury affect cognitive function in older people (*Journal of the American Medical Association*, April 20, 2005).

Still, I think it's a good idea for everyone to reduce their exposure to methylmercury. According to the Environmental

Protection Agency (EPA), young children and women of reproductive age should avoid eating large fish like shark, swordfish, and tilefish completely and limit their consumption of lower-mercury seafood such as salmon and shrimp to 12 ounces or about two meals a week. (See box at right for types of seafood that are low in mercury but high in heart-healthy omega-3 fatty acids.) Canned tuna can pose problems, too: Women of childbearing age should limit their intake of albacore ("white") tuna, which is higher in mercury, to 6 ounces or one meal a week, and canned "light" tuna to twice weekly; young children should probably eat even less. If you eat tuna, I advise seeking out brands that have been shown in tests to be lower in mercury (although such fish can be pricier); in particular, look for products made from smaller fish. You can find such products by visiting catchofthesea.com, tunalovers.com, or vitalchoice.com.

Dental fillings. When bonded together with copper, silver, and tin, metallic mercury forms an amalgam that is used for dental fillings. Like the metallic mercury in a broken thermometer, mercury fillings can release some vapor, which is absorbed by the body. Some holistic dentists and alternative practitioners claim that mercury fillings can cause health problems such as multiple sclerosis, Alzheimer's and Parkinson's diseases, and cancer. But in December of 2004, an expert panel found that most of the people they studied with amalgam fillings still had mercury levels at or lower than what's considered harmful, and there was no apparent link between mercury fillings and diseases such as Alzheimer's and Parkinson's. Plus, it has been estimated that you'd have to have about 500 mercury fillings in your mouth to produce toxic levels, which is impossible.

I used to have many mercury fillings, but I've had them replaced with either gold or composite resin fillings as they have broken down over the years. To play it safe, I would

Getting Tested

If you're worried about your exposure to mercury, you might consider getting tested. One way to do so is with a hair analysis kit, which requires that you snip a sample of your hair and send it to a lab that will test it for mercury. Many websites and some environmental groups sell these kits for about \$25, but they may be less accurate than blood testing. They can only show levels of methylmercury from a few months prior, not your current exposure. Your most reliable option is to ask your physician to test your blood for mercury (check with your health insurance plan, as the test may not be covered). Levels above 5.8 micrograms of mercury per liter of blood or 1.2 parts per million in hair may be cause for concern, especially in children, pregnant women, or women of childbearing age.

Good Catches

When buying fish, I choose those that are both high in beneficial omega-3 fatty acids and low in mercury. Here's how different varieties of seafood stack up:

SEAFOOD	OMEGA-3s	MERCURY LEVELS
Salmon	high	low
Sardines	high	low
Pacific oysters	high	low
Catfish	low	low
Shrimp	low	low
Trout	high	medium
Flounder	medium	medium
Canned or fresh tuna	high	high
Chilean sea bass	medium	high
Shark	medium	high
Swordfish	medium	high
Mackerel	medium	high
Tilefish	medium	high
Grouper	low	high
Halibut	low	high

not get any new mercury fillings, but I also don't think that it's worth the expense and trauma to have mercury fillings taken out until they break down: Removing them may cause even greater exposure to mercury than leaving them in. In general, I think that exposure to methylmercury in fish and other seafood is far more troublesome.

Vaccines. Thimerosal, a preservative, contains another type of organic mercury called ethylmercury. It was once used in many of the vaccines commonly given to young children. Most scientists consider ethylmercury less toxic than methylmercury. By 2001, thimerosal was removed from most childhood vaccines in the United States, based on concerns that the total number of vaccinations typically given to children during their first six months of life could put kids over the limit of safe mercury exposure. A number of parents, politicians, and even some doctors believe that increasing rates of autism are a result of mercury poisoning from vaccines. Some research does suggest an association between thimerosal and this developmental disorder, yet many experts say these studies were poorly designed. And more studies actually show no link between thimerosal and the disease.

The controversial vaccines-autism debate has heated up recently, with vocal parents' groups alleging a government cover-up and gaining support from high profile figures like Robert F. Kennedy, Jr. Autism appears to be caused by a mix of genetic and unknown environmental factors. The idea that thimerosal is responsible is worth investigating. But I have


reviewed the research, and while I sympathize with parents, I just don't think there's enough good evidence to make the connection. Plus, now that most vaccines are thimerosal-free, you would expect autism rates to drop, but they've actually continued to rise. I'd be more concerned about my child eating a can of tuna than being vaccinated.

Keeping Mercury Levels Low

Extremely high blood levels of mercury can trigger a number of health problems in both adults and children. But are your mercury levels elevated enough to cause concern? If you are curious, your physician can test you for mercury (see the box on page 4). We all have small amounts of this metal in our bodies, and the EPA currently sets the safety threshold at 5.8 micrograms of mercury per liter of blood and 1.2 parts per million in hair. Pregnant women who have mercury levels that are higher than these can deliver babies who may have learning disabilities, lower IQ scores, and behavioral problems. Right now, approximately 20 percent of American women of reproductive age have mercury levels that exceed the EPA's guidelines.

Yet, it's still uncertain how much mercury it takes to affect adults. Levels that create neurological problems in babies don't cause symptoms in their mothers. And while some adults who test high for mercury may complain of fatigue or an inability to concentrate, most of them don't show any signs of the major health problems that are associated with severe mercury poisoning.

With so many unanswered questions about mercury, I think that your best bet is to simply limit your exposure to this element. If a test shows that you have high levels of mercury, don't panic: Extreme treatments aren't likely necessary. Some alternative practitioners offer intravenous, topical, or oral chelation, which relies on amino acids and other compounds to bind to mercury and allow it to be eliminated in the urine. Chelation can be helpful in cases of *severe* mercury poisoning, but its value for moderately high levels is unclear. Chelation therapy—which is expensive and has side effects such as diarrhea, vomiting, and rashes—is also offered as an alternative treatment for autism, but there's no good evidence that it helps the disorder. Nor would I recommend taking supplements of cilantro, chlorella, amino acids, or garlic, all of which may be included in some practitioners' regimens for "mercury detoxification." They're harmless products, but no published human studies support their effectiveness in removing mercury.

Fortunately, no treatment at all may be necessary to eliminate moderate levels of mercury if you stop taking it in: Your body naturally rids itself of mercury via urine and stool, although it may take up to a year for levels to drop significantly. To encourage this process, you should drink plenty of water and try to have regular bowel movements. If you eat fish, follow the guidelines in this article for limiting intake of high-mercury species. 

For integrative treatments for high cholesterol, purchase the **Self Healing Special Report on Lowering Cholesterol** (see brochure).

I'm 28 years old and recovering from mononucleosis. I can't get rid of the chest congestion. Any suggestions?

There are natural options. Dubbed “the kissing disease” because it’s spread through saliva and mucus, mononucleosis often causes a fever, sore throat, swollen lymph nodes, and fatigue, which can last for weeks. To help your body fight the virus, I suggest taking the immune-boosting herb astragalus; follow package directions. Both eucalyptus and ginger are anti-inflammatories and can ease chest congestion. Put a small handful of eucalyptus leaves or a teaspoon of the essential oil in boiling water and inhale the steam twice a day. For a powerful ginger tea, peel a one-inch piece of ginger root, grate it and place in a pot with two cups of

water, bring to a boil, and simmer for five minutes. Add half a teaspoon of cayenne pepper and simmer a minute more. Add one or two cloves of mashed garlic and honey or lemon to taste. Let the tea cool slightly and enjoy a few cups a day.

I get bad menstrual cramps. Are there natural remedies?

Yes, there are. Assuming that your doctor has ruled out endometriosis, uterine fibroids, and other problems, your cramps are probably caused by your body’s higher-than-average production of inflammation-causing compounds called prostaglandins. To ward off pain, try following a diet that’s high in fruits, vegetables, and whole grains and low in polyunsaturated and trans fats, which promote inflammation.

Journaling: Self-Healing through Writing

Journaling, or expressive writing, is a simple, gentle, and inexpensive healing technique. I consider it a powerful therapeutic tool to learn more about yourself and become aware of how your mind and emotions can influence you physically. Journaling does not require much time, equipment, or training, and can be done anytime or anyplace. I frequently suggest it to those with chronic illnesses, particularly autoimmune disorders, but writing down your thoughts can be valuable for anyone, whether healthy or not. Journaling should not replace medical treatment. (It can be used together with mental health counseling to help work through issues.)


How it helps. Expressing yourself on paper can be a creative outlet and a good way to release feelings that you might otherwise hide or suppress. Unlike a health diary, in which you might log your day’s activities and symptoms, journaling helps you to look inward in private and come up with fresh insights to solve problems. Because it helps you relax and reduce stress, expressive writing may improve immune function and overall health. Journaling might bring up deep-seated emotions, so you might feel sad or upset

right after a session. But over time, people typically feel calmer, happier, and more accepting of themselves.

The evidence. Research done in the 1980s found that healthy adults who wrote about emotionally difficult topics for roughly 20 minutes a day on four consecutive days showed stronger immunity and over the following several months made 43 percent fewer doctors’ visits than people who wrote about less meaningful topics. In a widely publicized study, 112 people with asthma or rheumatoid arthritis who wrote about stressful experiences for 20 minutes daily over three days showed improvements in health status compared to controls (*Journal of the American Medical Association*, April 14, 1999). But no benefits were seen in recent research on asthma and arthritis patients who wrote about either stressful or positive experiences. Other evidence suggests less pain and fatigue in women who have fibromyalgia (*Psychosomatic Medicine*, March–April 2005), reductions in high blood pressure (*Journal of Health Psychology*, March 2005), and improved sleep in terminal cancer patients from expressive writing.

How to journal. Find a relaxing place to journal. Use pen or pencil and paper, or a computer. Date your

entry to track any patterns or tendencies; for example, you might notice that certain behaviors or symptoms occur whenever you’re stressed. Start by writing about something that’s upsetting or troubling in your life, either past or present. Describe in detail how you feel about this event, both then and now; reflect on how it affects you physically and mentally. Be honest and open about your feelings. Don’t concern yourself with spelling, grammar, or punctuation; just let your thoughts flow freely, as these words are for your eyes only. Before finishing, write what you may have learned from this event or how you’ve grown. Spend about 20 minutes daily journaling and do it for three or four days in a row, writing either about the same experience or a different one. You can journal regularly or as needed.

Resources. You can learn journaling by simply doing it or from books like *Writing to Heal* by James Pennebaker, PhD (New Harbinger, 2004), and *Journal to the Self* by Kathleen Adams (Warner, 1990). For advice, visit journaltherapy.com, which lists journal therapists who can work with you individually. Journaling classes may be taught at adult education or holistic learning centers. 

I'd also get plenty of omega-3 fatty acids (found in flax, walnuts, and fish like salmon and sardines), which appear to ease menstrual cramps. Regular exercise can increase levels of endorphins, your body's natural painkillers, which may ease cramps. Since stress can increase the likelihood of cramps, practice a relaxation method like breath work or meditation.

Wearable heat wraps like ThermaCare can also lessen the pain of cramps, as may taking the herb cramp bark in tea, tincture, or tablet form or sipping a daily cup or two of raspberry leaf tea. Calcium and magnesium may help by acting as muscle relaxants; get at least 1,200 mg of calcium a day from food, supplements, or both, and half the amount of magnesium. Some of my patients with painful cramps have gotten relief by visiting a practitioner of traditional Chinese medicine. And while not natural, a course of pain-relieving ibuprofen or naproxen can be helpful at reducing prostaglandins when started a few days *before* your period, rather than waiting until cramps start. The trick is staying ahead of the pain.

In your February article on vitamin E, you didn't mention Ester-E. Is it any better than other vitamin E supplements?

Sold by various supplement makers, Ester-E is a patented form of vitamin E made by combining alpha-tocopherol with a phosphate molecule. Research in animals suggests it may be better absorbed than ordinary alpha-tocopherol, and marketers claim that Ester-E is "body-ready" and "highly bioactive." However, there is no evidence in humans that it's better absorbed than other forms of vitamin E. Plus, it lacks the range of healthful compounds that make up the vitamin E family, which is why I continue to recommend products that contain both mixed tocopherols and mixed tocotrienols. My next best choice would be mixed natural tocopherols.

What's your opinion of flourless breads?

Find flourless breads to be very dense and heavy. They are often made from sprouted grains—like barley, wheat berries, and spelt—instead of flour and sold at health food stores. To sprout the grains (beans, nuts, or seeds can also be used), they're soaked in water to release enzymes, drained, and kept at room temperature and rinsed regularly over several days. The sprouts are then ground up, made into dough, and slowly baked at low heat. For some people, the bread's appeal is that it's a "live food," meaning it has activated enzymes that some consider "living," or they like that it's made from 100-percent sprouted whole grains that are said to contain more protein, fiber, vitamins, and minerals than traditional breads. Others say the bread is easier to digest because sprouting converts some of the complex carbohydrates to simple sugars. You can find recipes for flourless loaves, and they're sold as Essene, Ezekiel, and Manna breads, all suggesting biblical origins. While flourless breads are nutritious and very filling, I prefer whole-grain "peasant" breads like Old World-style rye or pumpernickel, which to me have more appealing textures. ☞

A Blow to Echinacea? Echinacea doesn't appear to help prevent or treat the common cold, say Virginia researchers. They exposed about 400 volunteers to a cold virus and gave them one of three echinacea preparations or a placebo either before or at the time of exposure. After five days, the majority of people came down with a cold, even if they took the herb. Also, the researchers found that people who took echinacea had similarly severe symptoms, just as much virus in their bodies, and no higher levels of an immune-boosting protein than those who took a placebo. (*New England Journal of Medicine*, July 28, 2005)

Comment: While this study was well-designed, I do not consider it to be definitive, and I agree with experts who believe that doses higher than 900 mg a day (as used here) may be more beneficial. I'd like to see more studies of echinacea using different species, preparations, and doses to see if research can capture the effect attributed to it by so many users.

Easy on the Knees. Losing just one pound can make a real difference in the way your knees feel. Scientists in North Carolina looked at 142 overweight and obese older adults who had osteoarthritis of the knees. They found that for each pound of weight people lost, there was a four-pound reduction in pressure placed on their knees as they walked. That means that shedding just one pound can lighten the load on knees enough to slow the progression of osteoarthritis. (*Arthritis and Rheumatism*, July 2005)

Comment: This study confirms my belief that losing even a few pounds can benefit painful, arthritic knees—joints that bear most of your body weight.

Yoga Curbs Weight Gain. Regular yoga may help stave off middle-age spread, points out a recent study. Seattle researchers looked at the exercise habits of some 15,000 middle-aged men and women. They discovered that those of normal weight who did yoga for 30 minutes at least once a week gained about three fewer pounds over the course of 10 years than people who didn't practice yoga. And overweight participants who practiced yoga lost approximately five pounds during that decade, compared to a 14-pound weight *gain* for those who were overweight and did not do yoga. Researchers suspect that yoga may help shed pounds by cultivating body awareness, making people less likely to overeat. (*Alternative Therapies in Health and Medicine*, July/August 2005)

Comment: This study adds to research that supports yoga's many physical and mental health benefits. A gentle beginner's yoga program may also be easier than strenuous aerobics for overweight or sedentary people to incorporate into their lives. ☞

The Latest Thinking on Appetite

Your appetite is shaped by a complex mix of hormonal controls and other biological, psychological, and cultural factors. Everything from when you last ate and how many calories you consumed to your level of physical activity, the sight and smell of attractive food, and even food advertising can signal the appetite center in your brain, located in the hypothalamus. Researchers are hungry to get a handle on appetite, hoping to understand the physiological mechanisms that stimulate and control it. While I think that science has made some strides in this area, particularly in the last decade, we're still a long way from understanding how to modify appetite in any safe and effective way—and by doing so, helping to stem the rising tide of obesity. Still, I'd like to point out some interesting research on appetite and hunger as food for thought.

Appetite-controlling hormones. The hormones leptin and ghrelin are sometimes called the *yin* and *yang* of appetite control. Ghrelin, which was first discovered in 1999, is mainly produced in the stomach and signals the brain when you are hungry and need food. Levels of ghrelin rise before a meal and typically fall after you have eaten. Conversely, leptin, which is released by fat cells throughout the body, lets the brain know that you already have enough energy stored as fat and do not need any more food.

When leptin was first identified in the mid-1990s, it was hailed as the “obesity hormone” and drug companies thought they had a potential magic bullet for weight control. One pharmaceutical manufacturer paid more than \$20 million to license leptin after some promising studies found that mice who did not produce the hormone become obese. But this investment hasn't yet panned out. When the drug company later conducted the first human trials and gave overweight people a synthetic version of leptin, figuring higher levels would help them eat less, it did not. Scientists now believe that many obese people have high levels of leptin but their bodies are not sensitive to its effects: Their brains might not get the message to stop eating.

Meanwhile, in studies of ghrelin, researchers were surprised to discover that levels of this “hunger hormone” were higher in thinner people than overweight ones (*Diabetes*, April 2001). Studies also revealed that while ghrelin levels peaked in thin people before a meal (when they were hungriest) and sharply declined after eating, the hormone stayed fairly stable in obese people before and after a meal, perhaps reflecting why heavier folks might still feel hungry after eating. Right now, it's not known whether interfering with

ghrelin's function—for instance, by decreasing its production or blocking its receptors in the brain—might influence appetite or contribute to weight loss.

The sleep-appetite connection. Recent research suggests the amount of sleep you get can influence appetite-control hormones and even the food choices you make. When 12 healthy men in their 20s slept less than five hours on each of two consecutive nights, their levels of ghrelin, which triggers hunger, increased by 28 percent, while levels of leptin, which is linked with feeling satisfied, dropped by 18 percent. Plus, the sleep-deprived men reported a 24 percent increase in appetite and a stronger desire for sweet, salty, and starchy foods (*Annals of Internal Medicine*, December 7, 2004).

A similar hormonal pattern of increased levels of ghrelin and decreases in leptin was seen in more than 1,000 people ages 30 to 60 who got less than eight hours of sleep a night. What's more, the researchers noticed a connection between fewer hours of sleep and increased body fat (*Public Library of Science*, December 7, 2004). These two intriguing studies suggest that sleep loss appears to change physiology in ways that stimulate appetite and might encourage weight gain.

His hunger, her hunger. The first study of its kind to look at imaging scans of the brain found that men and women reacted differently to hunger and feeling content after eating. Researchers took pictures of the brain after 44 people—half were men, half women—had first fasted for 36 hours and then after they drank a liquid meal. When men were hungry, they showed more activity in the area of the brain that influenced the processing of emotions. When they felt full, men displayed more activity in an area of the brain that is associated with satisfaction while women had more activity in the region that affected vision. These findings led scientists to speculate that these gender differences might explain why men may feel more rewarded after eating (*American Journal of Clinical Nutrition*, June 2002).

Food choices. Studies suggest that including some protein foods at meals makes people feel full longer, and so can including fiber-rich foods. Research also has found that people who ate a salad or a soup (made without butter or cream) as a first course at lunch ate fewer calories during their meal. This study's lead researcher, Barbara Rolls, PhD, author of *The Volumetrics Weight-Control Plan* (Harper Paperbacks, 2000), says that foods with a higher water content, like soups, fruits and vegetables, cooked grains, stews, and salads, do a better job at staving off and satisfying hunger. Such foods are also typically higher in fiber and lower in fat and calories. **SP**

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