

HEALTH



SIMPLE SAFEGUARDS

to protect against COVID-19



Dr. Pamela Tronetti
Guest columnist

COVID-19 cases are surging, and you may be asking what you can do to decrease your risk of catching the virus and perhaps even lessen the severity of the symptoms if you do become ill.

Washing your hands sounds simple — because it is. Just 20 seconds of thorough scrubbing front and back, including between the fingers and the fingertips and voilà, you can wash those germs right off of your hands!

Hand sanitizer is in everyone's pocket or purse, but it must be used properly to be effective. That means applying enough to cover all surfaces of your hands and then rub-

bing them until dry — about 20 seconds.

Consider including a travel-size bar of soap in that bag or purse. There are times that soap and water are really a must, but not always available.

According to the Centers for Disease Control and Prevention (CDC), soap and water are preferable after using the toilet, changing a diaper, handling or feeding animals, before, during and after food preparation, before eating food, when caring for someone who is sick with gastrointestinal symptoms, before treating a wound or cut, after touching garbage, or when your hands are visibly soiled.

A small pack of tissues can do double duty to protect your hands from potentially contaminated surfaces.

These are usually thicker than boxed tissues, and can serve as napkins, toilet paper or to dry your hands if there are no paper towels.

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Nothing beats the benefits of breastmilk for newborns



Pediatrics
Dr. Margaret Nemethy
Guest columnist

August is recognized as National Breastfeeding Awareness month. It focuses to educate and raise awareness on the importance of breastfeeding and the many significant health benefits for newborns.

According to the American Academy of Pediatrics (AAP), the American College of Obstetricians and Gynecologists and the Canadian Pediatric Society, nothing can compare to the nutritional benefits of a mother's breastmilk.

Accordingly, exclusive breastfeeding is recommended for the first six months of an infant's life with the introduction of appropriate complementary foods, for at least the first year and beyond.

Likewise, the World Health Organization (WHO) recommends breastfeeding for the first two years of an infant's life.

Both moms and babies benefit from breastfeeding.

Short-term benefits include improvement in neurobehavior and gastrointestinal function, prevention of illness and improved mortality rates for infants.

Long-term benefits can include prevention of acute and chronic conditions and improved neurodevelopmental outcomes.

In addition, benefits of breastfeeding for mothers include a reduced risk of postpartum blood loss and delayed ovulation.

Long-term benefits may also include prevention of cancer, cardiovascular disease and Type 2 Diabetes.

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Exclusive breastfeeding is recommended for the first six months of an infant's life with the introduction of appropriate complementary foods, for at least the first year and beyond. GETTY IMAGES

Study links weight, dementia risk

Alan Mozes
HealthDay

Need fresh motivation to lose some weight? New research suggests that young adults who are overweight or obese face a higher risk for dementia in their golden years.

For the study, the researchers looked at just over 5,100 older adults who were involved in two long-term studies. The investigators found that women who were overweight between 20 and 49 years of age had nearly twice the risk of dementia after age 70. And older men and women who were obese in those earlier years saw their risk jump 150%.

The finding builds on prior studies that have linked excess weight during middle age to an increased risk of dementia among seniors.

But the new research does not prove excess weight causes dementia, only that the two are linked, said lead author Adina Zeki Al Hazzouri. She's an assistant professor of epidemiology at Columbia University in New York City.

"However, our study does suggest that adult life obesity is an important risk factor for dementia," she added.

The participants were enrolled in two long-running studies of older people, one launched in 1988 to track heart disease and the other in 1997 to track declining function. Nearly one in five participants were Black and 56% were women.

Each study found cases of dementia. Hazzouri's team used a computer model to chart each participant's lifetime body mass index (BMI), a standard measure of body fat based on height and weight.

BMI status was broken down accord-



New research suggests that young adults who are overweight or obese face a higher risk for dementia in their golden years. GETTY IMAGES

ing to three stages of life: early adulthood (ages 20 to 49); middle age (ages 50 to 69); and late life (ages 70 to 89).

The relationship between BMI and dementia risk differed by gender and age, the analysis found.

For example, being overweight or obese in middle age did not appear to affect women's dementia risk.

But men who were overweight during midlife saw their dementia risk rise 50% after age 70. And middle-aged obesity among men doubled late-life dementia

risk, the study found.

Gender differences were also seen when looking at BMI during early adulthood. For example, being overweight during that time did not appear to affect men's dementia risk. But women had no such luck. For those who were overweight between 20 and 49 years of age, dementia risk was 1.8 times higher after age 70.

In other respects, an expanding waistline had similar effects on dementia risk for both sexes. A higher BMI af-

ter age 70, for example, was linked to a lower risk for both sexes. And being obese during early adulthood caused dementia risk in old age to more than double for men and women alike.

Which raises the question: Does obesity in one's 30s mean a higher risk for dementia is inevitable, or can getting in shape lower it?

Hazzouri isn't sure. "Irrespective of a person's BMI in mid- or late life, being obese or sometimes overweight (while young) is associated with a higher dementia risk (after 70)," she noted.

But Keith Fargo, director of scientific programs and outreach for the Alzheimer's Association, said it's all speculation at this point.

"We just don't know exactly why being overweight or obese might raise dementia risk," he said, noting that excess weight can have negative impacts on heart health and inflammation that may ultimately affect brain health.

"Overall, I would put this issue in the category of modifiable risk factors," he said.

"Make healthier eating choices," Fargo suggested. "Exercise and get that heart pumping several times a week. The more you can do, the better. And the earlier, the better. Because what your doctor and your mom have been telling you for decades about eating well and getting exercise is right – not just for your heart but also for your brain."

Hazzouri and her colleagues were scheduled to present their findings Thursday during an online meeting of the Alzheimer's Association. Findings presented at meetings are typically considered preliminary until published in a peer-reviewed journal.

Coffee could be culprit behind high cholesterol



The People's Pharmacy
Joe Graedon and Teresa Graedon

Q. My husband's cholesterol was going in the wrong direction. It was in the 180s to 190s for years, with his doctor making noises about statins. My husband and I both have family members who experienced a detrimental drop in brain function clearly linked to statins, so we wanted to avoid them.

Once his cholesterol hit 202, his doctor became insistent. Unfortunately, what we were trying wasn't working. Then it hit 234. His doctor was not happy, to say the least.

Then I finally read something online that sent me down a different research path. French press coffee can be a culprit. We decided to continue with our usual French press method, but we add-

ed a second step with paper filters and a pour-over cone. After six months of this, his cholesterol is now 179.

We are amazed and grateful that such an easy modification worked. And the coffee tastes even better with the addition of the filter.

This simple change could help a lot of folks. It doesn't remove the importance of exercise, but most folks could easily make this change, especially if they brew unfiltered at home.

A. Thanks for the fascinating report. Researchers reported decades ago that unfiltered coffee raises cholesterol, while filtered coffee does not (Metabolism, November 1987). Recently, scientists found that over 20 years, people drinking filtered coffee lived longer (European Journal of Preventive Cardiology, April 22, 2020). The people who drank nine cups of unfiltered coffee a day were more likely to die during that time.

Unfiltered coffee contains cholesterol-raising compounds called cafestol and kahweol. Any coffeemaking tech-

nique that uses a filter removes them. Great detective work!

Q. My dear friend was experiencing cognitive and balance problems and had been taking metformin for many years. Her doctor could not determine a cause for her abnormal gait and memory loss. He even had her tested by a neuropsychiatrist who subjected her to a barrage of tests to evaluate her memory and motor skills but did not reach a diagnosis.

Two months later, my friend fell on a concrete pavement, suffered a severe brain bleed and died. I later learned that metformin can sometimes cause depletion of vitamin B12 levels.

I wonder if my friend would be alive today if her doctor had ruled out this vitamin deficiency.

A. The symptoms you describe are classic for vitamin B12 deficiency, so it is possible that was affecting your friend. A number of drugs can contribute to this serious problem. In addition to metformin, strong acid-suppressing drugs such as esomeprazole, lansoprazole or

omeprazole can deplete vitamin B12 (Diabetes, Metabolic Syndrome and Obesity, June 18, 2020).

You can learn more about how drugs deplete the body of essential nutrients in the book "Fortify Your Life: Your Guide to Vitamins, Minerals and More" by Dr. Tieraona Low Dog. Look for it at your local library or find the paperback edition in the books section of PeoplesPharmacy.com.

Doctors may not realize how many of the popular drugs they prescribe can lead to both vitamin and mineral insufficiency. Testing is advisable for people taking diabetes drugs or blood pressure medicines such as diuretics or ACE inhibitors like lisinopril.

In their column, Joe and Teresa Graedon answer letters from readers. Write to them in care of King Features, 628 Virginia Drive, Orlando, FL 32803, or email them via their website: PeoplesPharmacy.com. Their newest book is "Top Screwups Doctors Make and How to Avoid Them."

Nemethy

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From a clinical standpoint, human milk is a living biologic substance of macro and micronutrients.

Human milk contains living cells, growth factors and immuno-protective substances.

Germ fighters in human milk include immunoglobulins, proteins present in the serum and cells of the immune system function as antibodies; lysozymes, an antimicrobial enzyme; lactoferrin, another multi-functional protein; white blood cells and stem cells.

Breast milk also contains free fatty acids and monoglycerides; bile salt-stimulated lipase, an enzyme which aids in the digestion of fats; mucin's (protein), and human milk oligosaccharides, which have prebiotic and antimicrobial activities to aid digestion.

Combined, these substances help protect against gastrointestinal and other infections including necrotizing enterocolitis (NEC), a serious gastrointestinal disease that can affect premature infants.

Additionally, when comparing breast milk to formula, human milk has been shown to reduce the risk of diarrhea, increase gastric emptying and increase lactase activity.

Additionally, human milk influences the development of healthy normal flora such as Bifidobacterium and lactobacillus, considered as "friendly bacteria"

which helps maintain a healthy digestive tract.

The American Academy of Pediatrics recommends all premature babies weighing less than 3.3 pounds receive either mother's breast milk or pasteurized donor human milk.

In a study in the United Kingdom, infants who were breastfed exclusively for six months had a decreased risk of severe or persistent diarrhea compared with infants who breastfed exclusively for less than four months.

Breastfeeding can also prevent chronic diarrhea leading to dehydration and malnutrition.

Further, breastfeeding also lowers the risk of respiratory disease in infants.

One study conducted in the United States and Europe demonstrated the risk of respiratory infections being reduced by 20 percent in 3-to-6-month-old infants who were breastfed.

Breastfeeding is estimated to prevent almost 21,000 hospitalizations and an average of 40 deaths from lower respiratory tract infections in the first year of an infant's life.

Breastfeeding can also prevent acute and recurrent middle ear infections when compared to formula fed infants.

Further, research finds it more beneficial for the infant to be fed directly from the breast rather than pumped breast milk from a bottle.

Additionally, a study in Sweden found formula-fed infants had a significantly higher risk of urinary tract infections than breastfed infants.

Extended exclusive nursing, up to

seven months, appeared to be most beneficial.

Breastfed infants had greater amounts of oligosaccharides, for cell recognition and binding; the lactoferrin protein, and secretory IgA, an antibody which plays a critical role in immunity, compared to formula-fed infants.

Neonatal sepsis, a severe infection in tissues and organs, and Sudden Infant Death Syndrome (SIDS) are also less likely if an infant is breastfed.

Neurobehavioral benefits of skin-to-skin breastfeeding include decreased infant crying, increased blood glucose levels and greater cardiovascular stability in late preterm infants.

Additional studies conclude breastfed babies had increased salivary cortisol levels, which provide pain relieving effects.

Moreover, if an infant is exclusively breastfed for five months, they have a lower risk of infection-related mortalities than those who were only partially breastfed, or not at all.

In addition, children ages 6 to 23 months had a higher risk of infection if not breastfed compared to those who continued to breastfeed.

There also is moderate evidence in clinical studies that breastfeeding may help long-term by preventing Type 1 Diabetes, inflammatory bowel disease and wheezing following an upper respiratory infection with improved dental health.

An analysis showed breastfeeding may also be associated with slightly improved performance on intelligence

testing.

Children who were reportedly breastfed scored an average of 3.4 points higher on tests than those who were never breastfed.

Behavioral problems in children were found to be less at age 5 if the child was breast fed as an infant rather than formula fed.

Lactation consultants, nurse practitioners and/or your pediatrician can provide education on how to successfully breastfeed infants to ensure adequate weight gain during those first few weeks of life.

Lactation consultants specialize in identifying problems such as poor latching, weight gain issues or infantile tongue tie, which could cause unsuccessful breastfeeding.

While 83 percent of U.S. infants receive breast milk at birth, only 25 percent exclusively still breastfeed at six months of age.

Overall, research from countless, respected medical groups continually suggest "breast is always best" for our newborns to gain significant nutritional benefits and health advantages to support their well-being, throughout their life.

For more information, go to <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Breastfeeding/Pages/default.aspx>.

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