

Metformin Warning

IT'S TIME TO FEEL GOOD AGAIN

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Are any of your patients taking Metformin? Because new research shows a correlation between Metformin and Alzheimer's, Parkinson's and vascular dementia, 9,300 patients with Type 2 diabetes were followed in Taiwan for up to 12 years. The risk for Parkinson's disease, Alzheimer's, or dementia was more than double during a 12-year period for those who took Metformin vs. those who did not, even after adjusting for multiple confounders.

In addition, outcomes increased as the duration and dosage of Metformin increased, especially with use for more than 300 days. 300 days? 300 days is nothing. People take medications like Metformin, their blood sugar drops, and pretty soon, they are lulled into complacency and their lifestyle choices creep back into play. But what about the deeper causes of blood sugar dysregulation?

Dr. Joseph Pizzorno has been in the field of medicine for 50 years and has seen a tremendous change in the cause of chronic diseases. He is the founder of Bastyr Uni-



versity, author of 11 books, including the book, *The Toxin Solution*. At one time in his career, he felt the primary drivers were nutritional deficiencies, nutritional excesses, lack of exercise, smoking, and obvious poor lifestyle changes. His position has dramatically changed.

In an interview with Dr. Mark Hyman, here's what he said, "I would now assert that the primary driver of chronic disease in the industrialized world is environmental toxins. I want to be real clear. I am not saying that nutritional deficiencies are no longer a problem. What I am saying is that we've added a bigger problem because we are

poisoning ourselves with metals and chemicals."

He further points out that 10% of the public water supply has arsenic, known to induce disease in humans. And phthalates added to plastics and skin care products bind some receptor sites, making it difficult for sugar to get into the cells and eventually causing diabetes.

External toxins play a big role in the cause of diabetes. How about internal toxins? In the past, we discussed the work of a scientist who found he had an endotoxin-producing enterobacter in his gut. He was morbidly obese with hypertension and diabetes.

He went on a plant based diet of whole grains, Chinese medical foods, and prebiotics, and decreased the bacterium from 35% to non-detectable. During that process, he lost 113 lbs. in 23 weeks and recovered from both hypertension and hyperglycemia.

His scientific curiosity led him on to inoculate the bacterium into germ free mice. The mice developed obesity and insulin resistance. So, "Gut bacteria from a person with obesity, hypertension, and diabetes was transferred to a healthy animal and caused disease. The bacteria caused an elevated serum endotoxin load and created aggravated inflammatory conditions."

For over 40 years I have heard the phrase "Clean the body and feed the body" from my mentors. But sometimes, I get excited about new plant compounds and creative new applications of nutrients and forget this basic foundation.

We shared in the past the idea of implementing an ANTI-Inflammatory Bootcamp to clean and feed the body, starting with the NutriClear Plus program. Two powder pouches and two nutrient packets are taken each day to "clean" the body as the accompanying anti-inflammatory diet "feeds" the body.

Here's an example of how to implement it in a clinical setting for hyperglycemia. Gather baseline objective data using laboratory, inoffice testing, weight, waist circumference, and hip to waist ratio. If a patient has a glucometer, have them take their blood sugar at the same time each morning. For subjective data use the detoxification questionnaire. See link to the right.

Start with the NutriClear Plus program for two weeks, following the instructions as close as possible. Explain, the program is only 2 weeks long and helps reset your ability to burn glucose, and as a bonus, you will probably lose weight.

After 2 weeks, retest using the detoxification questionnaire, plus weight and gut measurements to demonstrate how reducing inflammation has many benefits.

Next, continuing on the anti-inflammatory diet, and as an alternative to Metformin, add Berberine HCL, 1-2, three times a day; and emulsified vitamin D as Bio-D-Mulsion Forte, 10 drops. Substitute GlucoBalance, 2-3 three times a day, as their multiple vitamin-mineral; add Biomega-1000, 1-2 capsules, three times a day, for cell membrane health. If after 2 weeks, blood sugar levels come down, use lower doses. If blood sugar is not responding, use higher doses. Alert the patient, further testing may be necessary if we don't see changes.

Just to be clear, you're not going to fix every case with this scenario alone, but it provides a framework of when to add nutrients and teach your patients to focus on clean foods to reduce inflammation. Supplements are designed to support a clean diet. They don't replace one's diet.

I know I am preaching to the choir, but we owe it to our patients to ask what drugs they are taking and have heart to heart talks about the side effects and the alternative options that exist. You have options that can and will change people's lives if they will let you.

Thanks for reading this week's edition. I'll see you next Tuesday.