

Well Being

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May is National Osteoporosis Prevention Month

Growing old isn't so bad when you consider the alternative.

Forget wrinkles. It's your bones you should be concerned about.

One of the surest signs of aging is changes in skeletal structure. As we grow older, bones become more brittle. Posture often becomes more stooped. Falls resulting in broken hips and other bones are common among the elderly.

Bone is living tissue, constantly being broken down and reformed. We have special cells in our body called osteoclasts that act like little bone destroyers constantly breaking down bone tissue. To compensate for this process, we also have cells called osteoblasts that come along behind and build bone everywhere it was broken down. Over time, the balance between the two kinds of cells changes. The older we get, the more the activity of osteoclasts can dominate. When this happens, we start moving down the treacherous road toward osteoporosis.

Osteoporosis can sneak up on you.

Unfortunately, this can happen without you being aware of the process. One day you go to the doctor, get weighed and measured, and learn you're about an inch shorter than you've always been. How did *that* happen?

Or one day, you fall down for no apparent reason and later find that your hip finally gave way under the pressure of supporting your weight.

The time to learn about osteoporosis risk factors is now!

Osteoporosis literally means porous bone, and it affects more than twenty million people in the U.S. How serious is it? Complications due to osteoporosis are the ninth leading cause of death in America!

Normally, there is *some* decline in bone mass after the age of 40, but women seem to be at greater risk of developing osteoporosis. Risk factors that can contribute to the development of osteoporosis include:

- Family history
- Heavy alcohol use
- Hyperthyroidism
- Sedentary lifestyle
- Smoking
- Long-term use of corticosteroids
- Low calcium intake
- Premature menopause
- Post menopause
- Short stature and small bones
- White or Asian race



Prevention is nine-tenths of the solution.

Dietary and lifestyle habits have a huge impact on whether or not a person develops osteoporosis. Let's talk about dietary factors first. Certain things in your diet such as coffee, alcohol, and smoking can create a negative calcium balance (*more calcium being excreted in the urine than being taken in through diet*).

Other things can cause your body to leach calcium out of your bones...things such as a high acid-ash diet, excessive amounts of protein in your diet, and a high phosphorus to calcium intake ratio. Where do we get too much phosphorus? Cola flavored and other soft drinks are the biggest culprit.

Did you know that we in the U.S. not only have the highest per capita soft drink consumption in the world, but also have an epidemic of teenagers that are **already** showing signs of osteoporosis? How did that happen? The scientific explanation is that when phosphate levels are high and calcium levels are low, your body pulls calcium out of the bone to *balance* the levels. A simpler explanation is that kids

drink too much cola and other high phosphate soft drinks.

Make sure your diet includes calcium-rich foods.

The best way to make sure you're getting enough calcium is by eating calcium rich foods. These include:

- Green leafy vegetables
- Sardines
- Canned salmon (with bone)
- Tofu
- Broccoli
- Blackstrap molasses
- Almonds
- Sesame seeds and sesame tahini
- Almond butter
- Beans
- Dairy foods (milk, cheese, yogurt, etc.)

Exercise, exercise, exercise.

Numerous studies have shown that physical fitness is a major determinant of bone density in both men and women. Physical exercise, consisting of one hour of moderate exercise at least three times a week has been shown to prevent bone loss and actually increase bone mass in postmenopausal women.

So get out there and find something you love to do. You may like running, walking, aerobic classes, weight lifting, or getting on the treadmill...the important thing is to get up off the couch and get physical several times a week.

All calcium supplements are not created equal.

It's important to understand that it takes a *lot* more than just calcium to build healthy bones. Many people focus on how much calcium they are getting and forget that magnesium, as well as other trace minerals like zinc, copper, manganese, and boron also play a *huge* role in building healthy bones.

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Growing old isn't so bad... *continued:*

It is equally important to understand that it is the *form* of calcium as much as the *amount* of calcium that determines whether or not your bones get what they need. Antacids are generally not a good source of calcium – despite what the ads say. They are made of calcium carbonate, one of the least absorbable forms of calcium you can take.

In fact, in 1000mg of calcium carbonate, there is only 400mg of calcium. The rest is carbonate. But that's not the end of the story. In order to absorb the calcium, it needs to be ionized by stomach acid. And stomach acid is neutralized by antacids (a classic Catch 22).

A good rule of thumb: the calcium supplements you take should *not* be made of calcium carbonate.

What is a good form of calcium?

It turns out that calcium citrate, and other chelated forms of calcium (like the calcium in Custom Essentials®) are the best sources of calcium. Chelated calcium is easily ionized for absorption, is easily disintegrated and dissolved, has virtually no toxicity, and has been shown to increase the absorption of other bone building minerals as well.

Other important bone building nutrients include the trace minerals mentioned above as well as magnesium. Magnesium supplementation may turn out to be as important as calcium supplementation in the treatment and prevention of osteoporosis.

In one study done on postmenopausal women, magnesium supplements were given along with calcium to one group and a placebo with calcium was given to another group. The placebo group actually lost bone density while the group that received the magnesium increased their bone density.

The take home message here is that *it takes more than calcium to build bone.*

Don't forget your Vitamin D.

Long recognized for aiding calcium absorption and thus promoting bone health, adequate vitamin D intake helps reduce the risk of osteoporosis. In 2006, studies published in the *Journal of the National Cancer Institute*, *American Journal of Geriatric Psychiatry* and the *Journal of the American Medical Association* suggested that vitamin D may help reduce the risk of various other diseases and alleviate the symptoms of certain medical conditions as well.

The human body produces vitamin D when skin is exposed to the sun. About 10-15 minutes of sunscreen-free exposure on the face, hands and arms several days per week is enough to maintain adequate vitamin D levels. However, people who live in the northern U.S. states, those who are not outside often, those who use sunscreen and those with dark skin need to obtain vitamin D from their diets or from supplements.

What is a good form of calcium?

With all the hype in the media, lots of women are scared to death to take anything with estrogen in it. The good news is that there is a compound from soy isolates called Ipriflavone, that has some very interesting effects on bone metabolism. It seems that

Ipriflavone inhibits the action of osteoclasts, thereby decreasing the rate at which bone is broken down.

Scientists aren't sure whether the effect of Ipriflavone is the result of direct action on osteoclastic enzyme activity or enhancement of a special hormone called Calcitonin that causes deposition of calcium into the bone. Regardless of how it works, Ipriflavone has shown impressive results in a number of clinical trials. In one study, Ipriflavone increased bone density measurements by 2% and 6% after 6 and 12 months respectively.

Ipriflavone, while derived from soy isoflavones, demonstrates *no estrogenic effects on other estrogen sensitive tissues*, therefore women who cannot take any form of estrogen for one reason or another can safely take Ipriflavone.

The Ideal Solution:

Now there's a test you can take that can tell you whether your osteoclasts and osteoblasts are working in balance: the Ideal Health OsteoTest®.

The OsteoTest is a urine test (much like our PrivaTest®) that can tell you exactly where you are with your bone metabolism. It can't tell you whether or not you *already have* osteoporosis (you need an X-ray for that), but it can tell you what is happening with your bones today. This is important because even if you already have osteoporosis, you can rebuild bone mass with proper dietary, lifestyle, and supplementation changes.

The OsteoTest is based on research that compares the levels of bone loss markers in both healthy persons and those who experienced fractures. Bone metabolism changes show up very quickly with these easily measured markers.

One such marker, a high level of a special bone protein fragment in the urine, indicates rapid bone resorption and can provide clues for your risk in developing future bone problems. By measuring this protein, the OsteoTest can predict whether you are at risk. On the other hand, it can take six months to a year for changes to show up on X-ray.

If you don't pass the OsteoTest, you will receive our OsteoCaps® that have all the great bone building nutrients we've been talking about PLUS Ipriflavone. As a matter of fact, the Ipriflavone is the star ingredient in the OsteoCaps.

So don't risk losing your bone strength as you travel down the road of life. The OsteoTest and OsteoCaps have made it easy to take actions to prevent this debilitating condition.

April Special

In recognition of National Osteoporosis Prevention Month, buy the OsteoTest for just \$74.95 (regularly \$99.95).



Clinical Services Corner

Two questions we often hear about products that promote bone health are:

I was diagnosed with osteoporosis last year and recently took the OsteoTest. The test showed my bone metabolism to be normal. How can that be if I have osteoporosis?

The bone scan you took for your diagnosis of osteoporosis shows you what has already happened to your bones. The OsteoTest shows you what is happening to your bone metabolism now. And what is happening now is the only thing you can try to influence. Bone metabolism is a dynamic process and what you do with diet, supplementation, and lifestyle changes has an ongoing impact on it. Perhaps some of the recent changes you have made in your dietary supplements and lifestyle habits are having a positive impact on your bone health.

How often should I take the OsteoTest or is one time sufficient?

Because bone metabolism is an ever-changing and dynamic process, I have suggested to customers that they may want to include the test in their annual checkup routine. It's better to keep up with what's going on with your bone metabolism than to let a problem sneak up on you.

We hope you will find this addition of Well Being helpful and informative! Let us know what questions you would like to see answered here. You can e-mail us at: customercare@idealhealth.com

How To Communicate With Ideal Health

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