

# SAFE HEALTH *REPORT*

Scientific Data ... Informed Choice ... Actionable

February 2023

Official Newsletter for MrGineaPig

Issue 7

Please repeat once before proceeding: **He Can Do It, She Can Do It, I Can Do It!**

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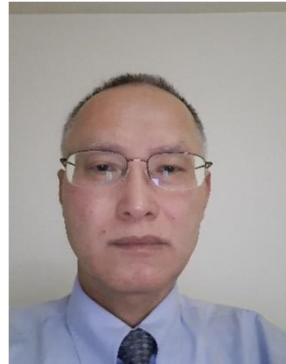
**March Issue Focus:  
In Search of Best Diet  
Series – Part 2, Case 6  
continued with  
*Clostridium difficile***

## In Search of Best Diet: Part 1

Your Ticket to Exuberant Health for the next 5 years

We covered how the human body is designed to be underfed rather than overfed from an evolutionary perspective, specifically to store energy and put on an additional layer of insulation for lean times during cold months. But more importantly, early laboratory mouse studies had shown that restricted calorie intake induces up to 40% additional years of lifespan in these animals.

More recently, as published in the May 5th, 2022 edition of *Science*, Accosta Rodriguez et al timed feedings to match the active period of the circadian cycle in mice and



**Ike Kim,  
Editor**

found this extended the life span of lab mice more than three times (30%) as much as caloric restriction alone (10%). This means late night meals or midnight snacks are not conducive to longevity or to overall health.

Indeed, as published in the March 2022 edition of *Psychiatry Research Communications*, a human cross-sectional study conducted by Doody et al. has shown that the telomere length—the true measure of biological age—is longer in patients with anorexia nervosa compared to healthy controls.

**So, how can we achieve health without inducing malnutrition in order to avoid premature or "unanticipated" death? Can we extend our life expectancy?**

To start with, the timing of meals is important. A good example would be a first meal between 8-10 AM and a second meal between 2-3 PM, with a very light snack no later than 6 PM, if needed. As our metabolism slows down starting in our late

30s, health problems start to show up due to a sedentary lifestyle combined with hyperinsulinemia from too much sugar and carbohydrates, and insulin-like growth factor 1 (IGF-1) from ingesting too much meat. These two growth hormones contribute to metabolic syndrome, in addition to other dietary factors that alter the gastrointestinal microbiome.

Blue Zones are defined as regions of the world that have a higher proportion of people who live longer than the average global life expectancy, the latest of which is 73 years of age (71 for men and 76 for women). While the lifespan of people in Blue Zones has not been quantified scientifically, the proportions of people living above 90 or reaching centenarian age with functional capacity is significantly higher in these areas than the rest of the world. For comparison, the expected life expectancy in the US for those born in 2021 is 76.1 years (79.1 for men and 73.2 for women) (see September Issue). The Blue Zones are Barbagia in Sardinia, Okinawa in Japan, Nicoya in Costa Rica, Ikaria in Greece, and Loma Linda in California.

We look at Barbagia, a vast



Barbagia, Sardinia, Italy

mountainous region of central Sardinia, in this Part 1 series. Barbagians view anything

from the sea to be averse to their lifestyle, probably a leftover cultural influence from centuries of invaders from the sea. Naturally, their diet consists of goat's milk and pecorino cheese (rich in omega 3 fatty acids) made from sheep's or sheep/goat's milk, whole-grain bread, beans, garden vegetables, and fruits. Meat is largely reserved for special occasions, and notably missing from their diet are any kind of marine products from the sea, including sardines, from which Sardinia is named.

A typical breakfast may include goat milk, gioddu (yogurt-honey used instead of sugar as a sweetener), and whole wheat bread made with freshly-ground flour. Lunch may include minestrone soup with onion, zucchini, celery, beet greens, potatoes, tomatoes, fava or broad beans, cranberry beans, fennel bulb, or a teaspoon of fennel seeds, cabbage, green beans, and cauliflower or broccoli florets.

Minestrone Soup



Dinner may just be ravioli with sheep/goat cheese. The Barbagian diet, which evolved from a "famine diet," appears to have extended its people's 'expiration date'.

When one 'expires', they are discarded just like any other food products!

### **Is there microbiome evidence for Barbagian diet for good health?**

Palmas et al looked at 17 centenarians (>100 years of age) and 29 nonagenarians (>90 years of age) and compared them to 46 healthy younger controls from the same area. The authors found that "Verrucomicrobia phylum was identified as the main biomarker together with its members, *Verrucomicrobia-ceae*, *Akkermansia muciniphila* in centenarians and Actinobacteria phylum, Bifidobacteriaceae and *Bifidobacterium* in nonagenarians while Bacteroidetes phylum, Bacteroidaceae, *Bacteroides* and *Bacteroides* spp in the control group." The results were published in the June 12<sup>th</sup>, 2022, edition of *Nutrients*.

A study finding by Zu et al. corroborates at least with regards to *Akkermansia muciniphila*. The authors screened 2930 published studies, examined 110 full-text articles, and analyzed 60 studies, publishing their findings in an article entitled "Gut Microbiota in Patients with Obesity and Metabolic Disorders" in the January 29<sup>th</sup>, 2022, edition of *Gene and Nutrition*. Their findings include the most consistently reported obesity-associated Proteobacteria phylum, as well as lean-associated Faecalibacterium, *Akkermansia*, and *Alistipes*. *Akkermansia muciniphila* of the Actinobacteria phylum was one of the most commonly reported lean-associated bacteria.

Interestingly, Analdo E et al., as published in the June 21<sup>st</sup>, 2019 edition of the *Journal of Science*, reported in 2019 that *Akkermansia muciniphila* induces intestinal adaptive immune responses during

homeostasis. Specifically, the bacteria helps modulate the gut lining, promoting gut barrier function and preventing inflammation caused by the "leaky" gut syndrome.

Essentially, Sardinians from the Barbagia region, being direct descendants of their Nuragic ancestors from the Neolithic era, created many non-inflammatory "famine foods" to survive during times of food scarcity. These uncommon foods, which were considered taboo by the outside world, included acorn bread containing clay, cheese ripened in goat stomach, and soft cheese with worms. Barbagia foods are not only cherished as cultural heritage and delicacies, but numerous studies have also shown that their longevity is closely related to these special "famine foods". Not only are these foods nutritious, but they are also delicious!

#### **Actionable Recommendation:**

- ✓ **Consider including at least one item from the Sardinian diet of Barbagia region to positively modulate epigenetics.**
- ✓ **"Famine Foods" from Sardinia foster non-inflammatory microbiome in human intestine.**
- ✓ **The 'Famine Diet' is delicious and appears to extend the life expectancy of local people in Sardinia! Less is More!**

#### **Fall and Risk of Premature Death**

When we read a news article about the unexpected death of a billionaire or famous celebrity, the cause of death is often found to be pneumonia, a fall, or drug overdose, among a multitude of etiologies. A fall on a marble floor, a fall from stairs, or a fall from a toilet seat is often fatal. Having

served on a fall prevention committee in a major academic hospital for about 10 years, I know firsthand that the most lethal falls occur while people are toileting between the hours of 10 am and noon; they are often found face down on the hard floor. For example, a 23-year-old female, on the day of her discharge, fell on the newly waxed hospital room floor and hit her face on the floor. She died a few days later.

**Table 1. Modifiable Fall Risk Factors**

- Visual impairment
- Reduced muscle strength
- Impaired balance
- Impaired walking patterns (gait)
- Poor reaction times
- Limitations in activities of daily living (ADL)
- Mobility in general
- Medications with anti-cholinergic side effects that increase fall risk
- Orthostatic hypotension: Establish goal blood pressure and modify medications
- Feet/footwear issues identified  
Education on shoe fit, traction, insoles, and heel height

According to the US Centers for Disease Control (CDC), falls are the number one cause of injury-related death among adults aged 65 and over. The age-adjusted fall death rate is 64 deaths per 100,000 older adults compared to 22 deaths per 100,000 due to flu in the same age group. For comparison, the age-adjusted death rate due to COVID-19 for those aged 65 and over was 533.5 per 100,000 standard population in 2020, 8 times greater than fall-related death (see the Covid update section).

Each year, approximately \$50 billion is spent on medical costs related to non-fatal fall injuries, and \$754 million is spent on

medical costs related to fatal falls. These medical costs include hospital stays, nursing home services, physician services, rehabilitation, the use of medical equipment, and prescription drugs.

### **So, what do we care about falls in general and, especially in the elderly?**

One consequence of falls is an increased risk of hip fracture. According to the Centers for Disease Control and Prevention (CDC), 95% of hip fractures are due to falls, with one-year mortality after a hip fracture being around 70% without surgical intervention and 21% with surgery. Both modifiable and non-modifiable fall risk factors are listed on the left. Premature death may be decreased by improving modifiable risk factors.

The rising number of deaths from falls, especially among older adults, can be reduced by screening for fall risk and interventions by appropriate specialists, specifically ophthalmologists for visual impairment, physical therapists for poor strength and balance, occupational therapists for ADL issues, primary physicians for medication adjustments, podiatrists for feet and feet-related recommendations, and pharmacists for evaluation of anticholinergic side effects of medications, since 60% of all drugs possess varying degrees of anticholinergic properties. Incidentally, even common diuretics such as furosemide possess anticholinergic side effects, a fact not very well-known even among medical specialists!

### **Recommendations:**

- ✓ **A fall, especially history of previous fall, may be deadly and result in an “unexpected” or unanticipated or more accurately premature death.**



- ✓ **Review all prescription and non-prescription medications, including illicit drugs, to see if one of them is contributing to mental status changes by visiting with a primary physician.**

### Safety Tip: Covid 19 Update 12.20.2022

Covid-19 Omicron subvariant, XBB.1.5, derived from XBB subvariant, which in itself is a cross between earlier strains BA.2.75 and BA.2.10.1, constituted only 1% on December 1st, 2022, but contributed to 41% of new weekly cases ending on December 28, 2022. XBB.1.5 is responsible for up to 70% of cases in Northeastern states in the US. As with BQ.1 and BQ.1.1, the concern with XBB.1.5 is that it may have the ability to evade antibody protection from previous Covid 19 virus exposure or Covid 19 vaccinations, including the latest booster vaccine. This means people who have recovered from a previous bout of Covid 19 can be reinfected with serious illness, especially for vulnerable populations such as the elderly and immunocompromised patients. Furthermore, XBB.1.5 is also expected to render monoclonal antibodies such as bebtelovimab and Evusheld completely ineffective; these two antibodies have been important in helping protect those with weakened immune systems (transplant patients, cancer patients, and anyone on immunosuppressive therapy).

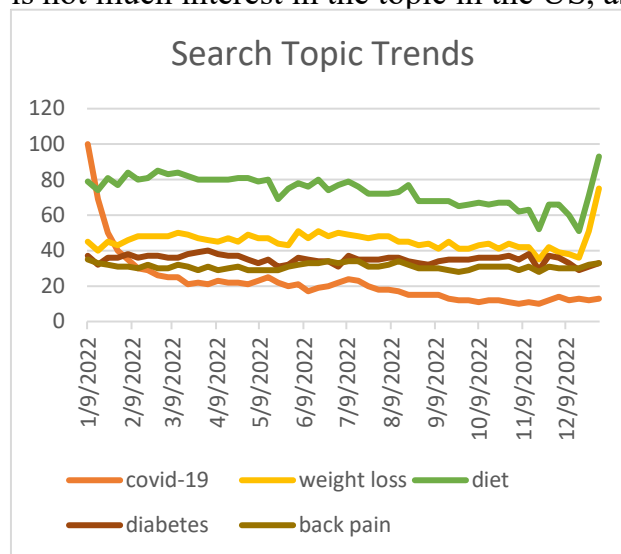
According to the US Centers for Disease Control, the total US weekly cases were reported to be 402,525 cases as of December 28, 2022. What about China? Omicron strains BA.5.2 and BF.7 account for 97.5% of COVID-19 infections from the Chinese Centers for Disease Control and Prevention.

What implications does this new finding have for us? While obesity, diabetes, heart disease, and other health problems increase the risk of serious complications of Covid-19, we should not forget that those over 65 years of age have accounted for more than 90% of Covid-19 related deaths. This means Nirmatrelvir/Ritonavir (Paxlovid) will play an even more important role in the post-exposure treatment of Covid-19 infections, as discussed in the January 2023 issue. Patients with any life-threatening signs and symptoms should be admitted immediately to the nearest hospital.

### Recommendations:

- ✓ **Get [Paxlovid](#) immediately after Covid-19 virus exposure.**
- ✓ **Check into hospital for severe signs and symptoms of Covid-19.**
- ✓ **Wear a mask especially those over the age of 65 during holiday parties.**
- ✓ **Do get bivalent vaccine if over >65.**

While there will be updates on Covid-19 in future issues of Safe Health Report, it will not be discussed extensively since there is not much interest in the topic in the US, as



depicted in the figure above.

## FDA Medication/Food December Recall

<b>Brand Name(s)</b>	<b>Product Description</b>	<b>Product Type</b>	<b>Recall Reason Description</b>	<b>Company Name</b>
Lupin	Quinapril 20 and 40 mg tablets	Drugs	Presence of nitrosamine impurity, N-Nitroso-Quinapril	Lupin Pharmaceuticals Inc.
Smith's Medical	CADD Infusion System Infusion Sets for use with CADD pumps	Medical Devices	Potential lack of delivery or underdelivery and false no disposable attached (NDA) alarms.	Smith's Medical
Wegmans Organic	Microgreens, sweet pea leaves, cat grass	Food & Beverages	Potential presence of Salmonella	Wegmans Food Markets, Inc.
Sun Sprouts	Alfalfa Sprouts	Food & Beverages	Salmonella	Caesar' Pasta & Orefresco
Caesar's Pasta & Orefresco	Frozen manicotti	Food & Beverages	Listeria monocytogenes	Utopia Foods Inc
Accord	Daptomycin for Injection	Drug	Mislabeled	Accord Healthcare, Inc
Hospira, Inc	Vancomycin for Injection	Drug	Presence of Visible Glass Particulates	Hospira, Inc
Multiple Brand Names	After Burn® Cream and First Aid Kits containing After Burn Cream	Drug	Product is contaminated with Bacillus licheniformis and Bacillus sonorensis.	GFA Production

### Case Number 6: Fall Case

## What's the probability of 5-year survival for this 54-year-old male with history of a fall?

Case examples are taken from real-life patient cases in hypothetical palliative and hospice care settings. The frailty score is often considered when making major placement decisions to optimize patient care. It is also used to assess whether patients can withstand major surgical interventions. Poor frailty scores are often the reason why patients do not survive for the next five years following a major health crisis.

Paul Gillespie is a 54-year-old Caucasian male with a history of pulmonary sarcoidosis and chronic prednisone use, who was admitted to the hospital for recurrent diarrhea with complaints of abdominal pain, nausea, vomiting, diarrhea, back pain, and bilateral lower extremity numbness. The hospital's problem list includes acute abdominal pain suspected (not yet confirmed) to be secondary to Clostridium difficile megacolon, chronic pain syndrome with opiate dependency, hypertension, acute blood loss on chronic microcytic anemia, gastroesophageal reflux disease, and osteoporosis.

On the date of the fall, December 1, 2022, at 01:00, the patient was reported to be sleeping on the commode by an eyewitness nursing assistant prior to falling and hitting the floor. Date of fall: 12/01/2022 at 01:05 on Hospital Day 4.

### Medications given around the time of fall 01:00

#### Scheduled Meds:

Clonazepam	1mg @ 20:30	Oral
Gabapentin	900 mg @ 20:30	Oral
Oxycodone	20 mg @ 20:30	Oral
Oxycontin	80 mg @ 23:45	Oral
NS (saline) fluid bolus x	02:00 03:15	BP HR on11/30 102/67 121 @0330

6 liters 24 hours prior to his fall	09:30 10:45 17:00 18:00	95/67 92 @0815 96/60 92 @0845 84/55 86 @1215 89/53 87 @1400 102/61 100 @1615 113/76 95 @1945 Then no vital checks until the fall at 0105 on 12/1/22 with blood pressure of 112/78 and heart rate of 105
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Other pertinent labs: hemoglobin 7.0 g/dl  
(range: 14.3-18.1 g/dl)  
hematocrit 25.7  
(range: 39.2-50.2%)

### Eye of the Tiger Test for Paul Gillespie

\*All patient data is fictional. Safe Health Report complies fully with US HIPPA regulations.

#### Clinical Frailty Score

- 1 – Very Fit: Very fit for their age with no disease symptoms, very active and exercise regularly- 5 days a week
- 2 – Fit: Still no active disease as in 1 but exercise only occasionally – three times a week or only seasonally
- 3 – Managing Ok: Disease symptoms are well managed. Not able to exercise at all other than walking.
- 4 – Very Mild Frailty: Symptomatic disease. Not dependent on others for daily activities but disease symptoms slow down their activities. May need cane for walking occasionally for example
- 5 – Mild Frailty: Symptomatic disease limit daily activities. Needs walkers. Needs help with walking and shopping.
- 6 – Moderate Frailty: Needs helps with walking, shopping, climbing stairs, bathing with disease progression.
- 7 – Severe Frailty: Completely dependent for personal care and daily activities but seem stable and at risk of death within the next 6 months.
- 8 – Very Severe Frailty: Same as 7 but unstable and even mild illness is likely to cause death.
- 9 – Terminally Ill: As in 8 but not likely to live next 3-6 month.

\*Adapted from [Rockwood & Theou 2020](#)

Paul Gillespie's ..... 5  
Frailty Score

Mr. Gillespie's other routine medications include a maintenance regimen of prednisone 10 mg given once daily for pulmonary sarcoidosis and antihypertensive

medications, which are being held. Major risk factors for Mr. Gillespie's fall include fluctuating low blood pressure due to dehydration from several days of diarrhea, a hemoglobin of 7 g/dl, an intestinal infection due to *Clostridium difficile*, long-acting oxycontin given at 23:45, and finally muscle deconditioning - a complex process of physiological changes following a

Since the patient's pulmonary sarcoidosis (PA) from working in a trona (sodium sesquicarbonate) mine is stable without requiring oxygen, his five-year survival is good and may even have normal life expectancy from a primary disease standpoint. If he can recover from the sustained head injury from the fall, overcome his current state of muscle deconditioning and continue to improve from the Eye of the Tiger Family test and ADL Score, then his chances of making it through the next five years looks good.

**Paul Gillespie**  
 \*All patient data is fictional. Safe Health Report complies fully with US HIPAA regulations.

Age: .....54  
 Sex: .....Male  
 Weight: .....182 pounds  
 Height: .....5 feet 11 inches

**Activities of Daily Living (ADL) components: transfer, bed mobility, toileting, and eating**

- 0 – Independent: If the resident completed the activity with no help or oversight every time during the 7-day prior period.
- 1 – Supervision: If oversight, encouragement, or cueing was provided three or more times during prior 7 days.
- 2 – Limited Assistance: If resident was highly involved in the activity and received physical help in guided maneuvering of limb(s) or other non-weight-bearing assistance three or more times during the last seven days.
- 3 – Extensive Assistance: If resident performed part of the activity over the prior 7 days, help of the following type(s) was provided three or more times: ▪ Weight-bearing support provided three or more times. ▪ Full staff performance of activity during part, but not all, of the prior 7 days.
- 4 – Total Dependence: If there was full staff performance of an activity with no participation by the resident for any aspect of the ADL activity. The resident must be unwilling or unable to perform any part of the activity over the entire prior 7-day period.
- 7 – Activity occurred only once or twice: If the activity occurred but not 3 times or more.
- 8 – Activity did not occur: If, over the prior 7-day period, the ADL (or any part of the ADL) was not performed by the resident or staff at all. ADL support measures the most support provided by staff over the prior 7 days.

\*Adapted from Minnesota Department of Health Guideline

**Paul Gillespie's ADL Score ..... 2**

Furthermore, he needs a routine check-up and tune-up with his primary care physician with regards to other issues, including but not limited to osteoporosis resulting from chronic prednisone use, back pain, lower extremity numbness, chronic pain syndrome, chronic microcytic anemia, and gastro-esophageal reflux. Case 6 is to be continued in the March issue, with an emphasis on antibiotic-induced *Clostridium difficile*.

**Recommendations:**

- ✓ **Please consider the modifiable risk factors for falls on Table 1.**
- ✓ **Falls may shorten the life span of even famous people reported in the news.**
- ✓ **Identify fall risk factors if able. If not, seek out primary care provider to prevent serious falls.**
- ✓ **Schedule routine tune-ups with your primary care providers even if you believe you are a DNA-based artificial intelligence!**

period of inactivity or bedrest in the case of Mr. Gillespie. The risk factors listed above are modifiable. If you have a loved one in an acute care setting or an ambulatory care setting (i.e., home), please reach out to their primary care provider to get the help they need in order to avoid serious consequences of major fall.



## MrGineaPig's Core Long-Term Trial

LONG-TERM TRIAL	SUPPLEMENT	START DATE	
Muscle Weakness	Hyaluronic Acid	07/01/2019	50 mg-1 capsule daily
Digestive Aid	Bacillus coagulans	10/4/2022	take one gummy bear daily after dinner
Back Pain	Pantothenic acid	09/1/202	500 mg 1 capsule daily
	Pantethine	09/01/2022	450 mg 1 capsule daily
BPH/ prostatitis Prevention	Cranberry Extract 300 mg	12/20/2022	2 capsules three times a day

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**MEDICAL EMERGENCY**

If you have a medical emergency, call your doctor or 911 immediately.

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## February Risk Factors For Premature or Unexpected Death

Immediate Risks	Internal Threat	External Threat	Other Topics
<ol style="list-style-type: none"> <li>Covid 19 - XBB.1.5</li> <li>Covid 19- BQ.1.7</li> <li>Covid 19-BF.7</li> <li>Pneumonia (Flu, RSV)</li> </ol>	<ol style="list-style-type: none"> <li>Poor diet</li> <li>Smoking</li> <li>High blood pressure</li> <li>Obesity</li> <li>Sedentary Lifestyle</li> </ol>	<ol style="list-style-type: none"> <li>FDA recalls</li> <li>Meat preservatives</li> <li>Trans fatty acid</li> <li>Pesticides</li> <li>Insecticides</li> <li>Heavy metals</li> </ol>	<ol style="list-style-type: none"> <li>Shortness of breath</li> <li>Back pain</li> <li>Hemorrhoids</li> <li>Incontinence</li> <li>Joint swelling</li> <li>Fibromyalgia</li> <li>Suicide</li> </ol>
<b>Topics Chosen: Covid-19 update, falls, a fall case, Search of Best Diet Series</b>			

## Format of Safe Health Report

Section 1: Conditions or internal environment that increases the risk of premature death or pose immediate danger to your health (both mental and physical) as in avalanche.

Section 2: External environment that increases the premature death, FDA recalls.

Section 3: Case examples of premature death. If you are in similar situation, remove

yourself out of harm's way! Can we extend **our expiration date** when in the eye of the hurricane?

### **Purpose of Safe Health Report**

If you feel you are being used by someone or somebody or institution or institutionalized philosophy or even by your parents or siblings or your coworkers or even your boss, you are a GineaPig. This newsletter is designed to empower GineaPigs in the area of human health.

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