

SAFE HEALTH REPORT

Scientific Data ... Informed Choice ... Actionable

December 2023

Health: The Purest Form of Wealth

Issue 17

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

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FDA Proposes BVO Ban

Your Ticket to Exuberant Health for the Next 5 Year

Brominated vegetable oil (BVO) is a food additive that is used to keep citrus flavorings suspended in beverages. It is made by combining bromine with vegetable oil, and it is banned in Europe and Japan due to concerns about its safety. In the United States, BVO is allowed to be used in foods at a level of up to 15 parts per million.

In November 2023, the US FDA (Food and Drug Administration) proposed a ban on BVO, citing new data that suggests that the additive may be

harmful to human health. The FDA found that BVO can accumulate in the body over time and that it can cause toxic effects on the thyroid gland.



**Ike Kim
Editor**

The endocrine system is responsible for producing hormones that regulate many important bodily functions, including metabolism, growth, and development. BVO has been shown to interfere with the production and function of thyroid hormones. In animal studies, BVO exposure has been linked to thyroid gland enlargement, decreased thyroid hormone production, and impaired thyroid function.

Hepatic System

Effects of BVO on Human Health

The following are three major organ systems that are affected by BVO:

Endocrine System

The endocrine system is responsible for producing hormones that regulate many important bodily

The hepatic system, or liver, is responsible for filtering toxins from the blood and metabolizing nutrients. BVO exposure has



been shown to damage the liver in animal studies. In one study, rats that were exposed to BVO for 13 weeks showed signs of liver damage, including inflammation, cell death, and increased levels of liver enzymes.

Cardiovascular System

The cardiovascular system is responsible for transporting blood and oxygen throughout the body. BVO exposure has been linked to cardiovascular problems in animal studies. In one study, rats that were exposed to BVO for 13 weeks

showed an increase in blood pressure and cholesterol levels.

Implications of the FDA's Proposed Ban

The FDA's proposed ban on BVO is a significant development, as it would

eliminate the use of this potentially harmful additive from the food supply. The ban would also send a strong message to the food industry that the FDA is committed to protecting public health.



Alternatives to BVO

There are a number of alternatives to BVO that are available in the market. These include:

Sucrose acetate isobutyrate (SAIB)

Glycerol ester of wood rosin (GEWR)

Gum arabic

Cellulose gum

Xanthan gum

Citrus fiber

Sunflower lecithin

These alternatives are all natural and safe to consume. They are also effective at

emulsifying citrus flavorings and keeping them suspended in beverages.

Conclusion

The FDA's proposed ban on BVO is a welcome step towards protecting public health. BVO is a potentially harmful additive that has no known benefits. There are a number of safe and effective alternatives to BVO that are available in the market. Food manufacturers should switch to these alternatives as soon as possible.

Actionable Recommendation:

As of November 2023, brominated vegetable oil (BVO) is used in the following commercial products:

- Sun Drop Citrus Soda
- Walmart Great Value Citrus Soda
- Faygo Moon Mist Orange Cream
- Hansen's Natural Orange Cream Soda
- Stewart's Orange Cream Soda
- Fanta Orange Soda (in some countries)
- Mountain Dew (in some countries)
- Gatorade (in some countries)

It is important to note that many major beverage companies have already removed BVO from their products. For example, Coca-Cola and Pepsi have both

discontinued the use of BVO in their sodas. Additionally, the FDA has proposed a ban on BVO in food, which is expected to go into effect in the next few years.

If you are concerned about consuming BVO, you can check the ingredient list of any product before you purchase it. You can also contact the manufacturer to inquire about whether or not their product contains BVO.

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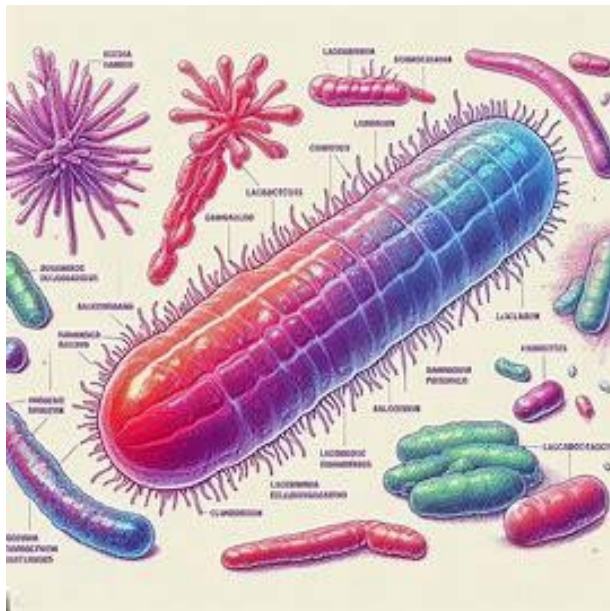
Lactobacillus rhamnosus:

Lactobacillus rhamnosus (*L. rhamnosus*) is a gram-positive, lactic acid bacterium that is commonly found in the human gut

microbiome. It is a well-studied probiotic with a long history of safe use and a wealth of scientific evidence supporting its beneficial effects on various aspects of human health. *L. rhamnosus* has garnered significant attention from the medical community due to its potential to promote gastrointestinal health, support immune function, and alleviate various health conditions.

Gastrointestinal Health

L. rhamnosus is a highly effective probiotic for the treatment and prevention of diarrhea. A 2023 meta-analysis encompassing 29 clinical trials involving 2,385 participants demonstrated that *L. rhamnosus* significantly reduced the duration and severity of acute diarrhea, particularly in children.



Another study published in the journal *Gut* in 2022 found that *L. rhamnosus* was effective in preventing traveler's diarrhea,

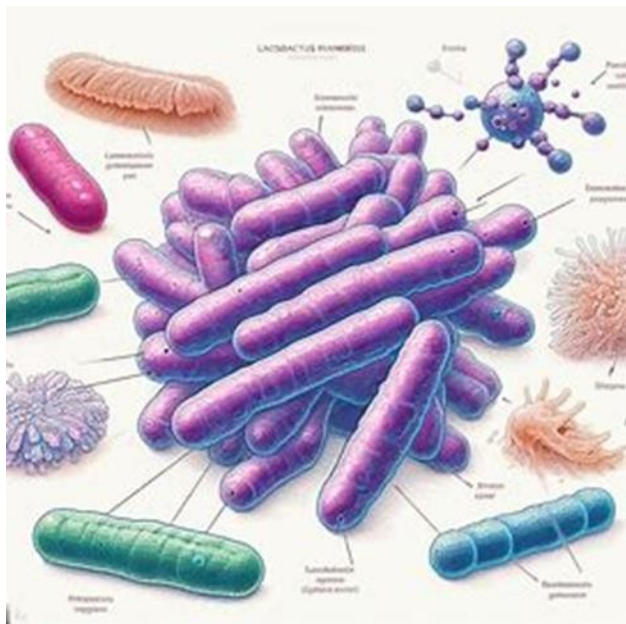
a common issue affecting individuals traveling to regions with different microbial environments. The study showed that *L. rhamnosus* reduced the risk of developing traveler's diarrhea by 40%.

In addition to diarrhea, *L. rhamnosus* has also shown promise in managing irritable bowel syndrome (IBS), a chronic gastrointestinal disorder characterized by abdominal pain, bloating, and altered bowel habits. A 2023 systematic review and meta-analysis of 13 randomized controlled trials involving 752 patients with IBS revealed that *L. rhamnosus* significantly improved overall IBS symptoms compared to placebo.

L. rhamnosus may also play a beneficial role in managing inflammatory bowel disease (IBD), a group of chronic inflammatory disorders affecting the digestive tract. A 2022 study published in the journal *Clinical and Experimental Gastroenterology* investigated the efficacy of *L. rhamnosus* in patients with ulcerative colitis, a type of IBD. The study found that *L. rhamnosus* was effective in maintaining clinical remission in patients with ulcerative colitis, suggesting its potential as a maintenance therapy.

Immune Health

L. rhamnosus has demonstrated remarkable potential in enhancing immune function and protecting against infections. A 2023 study published in the



journal *Frontiers in Immunology* found that *L. rhamnosus* modulated the immune system by increasing the production of immune-boosting cytokines and enhancing the activity of immune cells.

A 2022 study published in the journal *Pediatrics* investigated the effect of *L. rhamnosus* on respiratory infections in children. The study found that *L. rhamnosus* significantly reduced the incidence of respiratory infections, including upper respiratory tract infections and ear infections, in children attending daycare centers.

Furthermore, *L. rhamnosus* may play a role in preventing allergies. A 2023 study published in the journal *Clinical and Experimental Allergy* found that *L. rhamnosus* supplementation during pregnancy and early infancy reduced the risk of developing eczema in children at high risk of allergies.

Other Health Benefits

L. rhamnosus has been associated with a wide range of health benefits beyond gastrointestinal and immune health. These include:

Vaginal health: *L. rhamnosus* may help maintain a healthy vaginal microbiome, reducing the risk of bacterial vaginosis and other vaginal infections.

Urinary tract health: *L. rhamnosus* may help prevent urinary tract infections by inhibiting the growth of pathogenic bacteria in the urinary tract.

Weight management: *L. rhamnosus* may aid in weight management by modulating gut microbiota composition and influencing energy metabolism.

Skin health: *L. rhamnosus* may improve skin health by reducing inflammation and promoting skin barrier function. (Confidence level 4)

Safety

L. rhamnosus is generally regarded as safe (GRAS) by the U.S. Food and Drug Administration (FDA) and has a long history of safe use in various probiotic formulations. It is well-tolerated and generally does not cause side effects, even at high doses.

However, there are also some possible safety concerns, such as rare cases of bacteremia or endocarditis, especially in immunocompromised people. Individuals

with compromised immune systems (i.e., neonates and elderly) or underlying medical conditions should consult with their healthcare provider before starting *L. rhamnosus* supplementation. Additionally, pregnant and breastfeeding women should exercise caution and discuss the use of *L. rhamnosus* with their healthcare providers.

Conclusion

Lactobacillus rhamnosus is a well-studied and safe probiotic with a wide range of potential health benefits. It is particularly effective in treating and preventing diarrhea, managing irritable bowel syndrome, and enhancing immune function. *L. rhamnosus* may also play a role in preventing allergies, maintaining vaginal health, and promoting weight management.

Recommendation



Based on the extensive scientific evidence

supporting its efficacy and safety, *L. rhamnosus* can be recommended as a valuable probiotic supplement for individuals seeking to improve their overall health and well-being. It is particularly beneficial for individuals with gastrointestinal disorders, compromised immune systems, or those at risk of infections. *L. rhamnosus* is available in various forms, including capsules, tablets, and yogurt, making it convenient to incorporate into one's daily routine.

It is important to consult with a healthcare provider before starting *L. rhamnosus* supplementation, especially for individuals with underlying medical conditions or taking medications. The healthcare provider can help determine the appropriate dosage and duration of *L. rhamnosus* supplementation based on individual needs and health goals.

L. rhamnosus is a promising probiotic that offers a natural and effective approach to enhancing various aspects of human health. As research continues to unveil its potential benefits, *L. rhamnosus* is poised to play an increasingly significant role in promoting overall well-being.

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10 Dangerous Health Trends the Week of November 5th, 2023. Please do not do them. It will shorten your lifespan.

Using eyedrops that have been recalled by the FDA¹²: Some eyedrops sold under various brands have been found to be contaminated with bacteria or fungi that can cause serious eye infections, vision loss, or even blindness. Consumers should

check the FDA website for the list of recalled products and avoid using them.

CVS Health

- Lubricant Eye Drops 15 ml (single pack)
- Carboxymethylcellulose Sodium Eye Drops 0.5% w/v
- Lubricant Eye Drops 15 ml (twin pack)
- Carboxymethylcellulose Sodium Eye Drops 0.5% w/v
- Lubricant Gel Drops 15 ml (single pack)
- Carboxymethylcellulose Sodium Eye Drops 1% w/v
- Lubricant Gel Drops 15 ml (twin pack)
- Carboxymethylcellulose Sodium Eye Drops 1% w/v
- Multi-Action Relief Drops 15 ml

- Polyvinyl Alcohol 0.5% w/v & Povidone 0.6% w/v & Tetrahydrozoline Hydrochloride 0.05% Eye Drops
- Lubricating Gel drops 10 ml
- Polyethylene Glycol 400 0.4% & Propylene Glycol 0.3% Eye Drops
- Lubricant Eye Drops 10 ml (single pack)
- Propylene Glycol Eye Drops 0.6% w/v
- Lubricant Eye Drops 10 ml (twin pack)

- Propylene Glycol Eye Drops 0.6% w/v
- Mild Moderate Lubricating Eye Drops 15 ml (single pack)
- Polyethylene Glycol 400 Eye Drop '0.25% w/v

Rugby (Cardinal Health)

- Lubricating Tears Eye Drops 15 ml
- Hypromellose 2910-0.3% w/v & Dextran 70- 0.1% Eye Drops
- Polyvinyl Alcohol 1.4% Lubricating Eye Drops 15 ml
- Polyvinyl Alcohol Eye Drops 1.4% w/v

Leader (Cardinal Health)

- Dry Eye Relief 10 ml
- Polyethylene Glycol 400 0.4% & Propylene Glycol 0.3% Eye Drops
- Lubricant Eye Drops 15 ml (single pack)
- Carboxymethylcellulose Sodium Eye Drops 0.5% w/v
- Lubricant Eye Drops 15 ml (twin pack)
- Carboxymethylcellulose Sodium Eye Drops 0.5% w/v
- Dry Eye Relief 15 ml
- Carboxymethylcellulose Sodium Eye Drops 1% w/v
- Eye Irritation Relief 15 ml
- Polyvinyl Alcohol 0.5% w/v & Povidone 0.6% w/v &

Tetrahydrozoline Hydrochloride
0.05% Eye Drops

Rite Aid

- Lubricant Eye Drops 15 ml (twin pack)
- Carboxymethylcellulose Sodium Eye Drops 0.5% w/v
- Lubricant Eye Drops 10 ml (twin pack)
- Propylene Glycol Eye Drops 0.6% w/v
- Gentle Lubricant Gel Eye Drops 15 ml
- Hypromellose 0.3%, Glycerin 0.2%, Dextran 70 0.1% Eye Drops
- Lubricant Gel Drops 15 ml
- Carboxymethylcellulose Sodium Eye Drops 1% w/v
- Lubricating Gel Drops 10 ml
- Polyethylene Glycol 400 0.4% & Propylene Glycol 0.3% Eye Drops
- Multi-Action Relief Drops 15 ml
- Polyvinyl Alcohol 0.5% w/v & Povidone 0.6% w/v & Tetrahydrozoline Hydrochloride 0.05% Eye Drops

Target

- Up&Up Dry Eye Relief Lubricant Eye Drops 30 ml
- Polyethylene Glycol 400 0.4% & Propylene Glycol 0.3% Eye Drops

- Up&Up Extreme Relief Dry Eye 15 ml (single pack)
- Polyethylene Glycol 400 0.4% & Propylene Glycol 0.3% Eye Drops
- Up&Up Extreme Relief Dry Eye 30 ml (twin pack)
- Carboxymethylcellulose Sodium Eye Drops 0.5% w/v
- Velocity Pharma LLC
- Lubricant Eye Drop 10 ml (triple pack)
- Propylene Glycol Eye Drops 0.6% w/v

Walmart

- Equate Hydration PF Lubricant Eye Drop 10 ml
- Polyethylene Glycol 400 0.4% & Propylene Glycol 0.3% Eye Drops

Overdosing on allergy medication for a



TikTok challenge³⁴: Some TikTok users have been taking excessive doses of Benadryl or other antihistamines to experience hallucinations or get high. This can lead to dangerous side effects such as seizures, coma, or death. Experts warn that this is a very risky and potentially fatal behavior.

Starting electrical fires with phone chargers and coins: Another TikTok trend involves plugging in a phone charger partially into an outlet and then sliding a coin across the exposed prongs. This can create sparks, smoke, or fire, and damage the outlet or the device. It can also cause electrocution or burns to anyone who touches the coin or the charger.

Drinking chlorophyll water for weight loss and detox: Some TikTok users have



been promoting the benefits of drinking chlorophyll water, which is water mixed with liquid chlorophyll, a green pigment

found in plants. They claim that it can help with weight loss, acne, digestion, and detoxification. However, there is no scientific evidence to support these claims, and drinking too much chlorophyll can cause diarrhea, nausea, or allergic reactions, and drug interactions with medications.

Using hydrogen peroxide as a COVID-19 treatment: Some people have been inhaling or ingesting hydrogen peroxide, a common household disinfectant, as a way to prevent or treat COVID-19. This is based on a false and dangerous belief that hydrogen peroxide can kill the virus or boost the immune system. In reality, hydrogen peroxide can cause serious harm to the lungs, stomach, or other organs, and even lead to death.



Applying sunscreen to the eyes to see better at night: Some TikTok users have been rubbing sunscreen on their eyelids or

under their eyes to improve their night vision. They claim that this can help them see better in the dark or reduce glare from headlights. However, this is a myth and a harmful practice, as sunscreen can irritate the eyes, cause infections, or damage the vision.

Eating raw or undercooked chicken for muscle gain: Some TikTok users have been eating raw or undercooked chicken, especially chicken breasts, as a way to increase their protein intake and build muscle. They believe that cooking the chicken reduces its nutritional value or makes it harder to digest. However, this is a very unsafe and unhygienic habit, as raw or undercooked chicken can contain harmful bacteria such as salmonella or campylobacter, which can cause food poisoning, diarrhea, vomiting, or fever.

Using garlic as a natural remedy for various ailments: Some TikTok users have been using garlic as a natural remedy for various health problems, such as acne, colds, ear infections, or yeast infections. They apply garlic directly to the affected area or insert it into the ear, nose, or vagina. However, this can cause more harm than good, as garlic can cause skin irritation, burns, blisters, or allergic reactions. It can also interfere with some medications or worsen some medical conditions.

Drinking raw eggs for protein and energy: Some TikTok users have been

drinking raw eggs, either by themselves or mixed with other ingredients, as a source of protein and energy. They believe that this can help them lose weight, gain muscle, or improve their performance. However, this is a risky and unnecessary behavior, as raw eggs can contain salmonella or other pathogens, which can cause serious illness. Moreover, raw eggs have less bioavailable protein than cooked eggs, meaning that the body can absorb less of it.

Using essential oils for various purposes: Some TikTok users have been using essential oils for various purposes, such as aromatherapy, skincare, haircare, or wellness. They apply essential oils directly to the skin, hair, or nails, or inhale them through a diffuser or a vaporizer. However, essential oils are not regulated by the FDA and can have adverse effects, such as skin irritation, allergic reactions, headaches, nausea, or breathing problems. Some essential oils can also interact with medications or worsen some medical conditions.

Summary and Actionable Recommendations:

1. **Rise of DIY medical advice:** Eight of the dangerous health trends for the month of November are TikTok do-it-yourself medical advice and treatments. are very dangerous and can cause serious harm to your health and cause 'sudden unexpected death'.

There is a lot of misinformation circulating online, and following it can be dangerous. For example, there is a growing trend of people using DIY treatments for serious medical conditions, such as cancer and autism. These treatments are often ineffective and can even be harmful. It's important to talk to your doctor before trying any new medical treatment, even if you find it online.

2. **Decline in vaccinations:** Vaccinations are one of the most important public health interventions ever made. They have saved millions of lives from preventable diseases. However, there has been a decline in vaccination rates in recent years, due in part to misinformation and scare tactics. This decline is putting people at risk of serious diseases, such as measles and whooping cough. If you are not up-to-date on your vaccinations, talk to your doctor.
3. **Rise of antibiotic-resistant bacteria**
4. **The increase in sedentary lifestyles**
5. **The increase in consumption of unhealthy foods (To Be Continued in the next edition).**

Medicare 2024: A Guide to Understanding Your Health Insurance Options

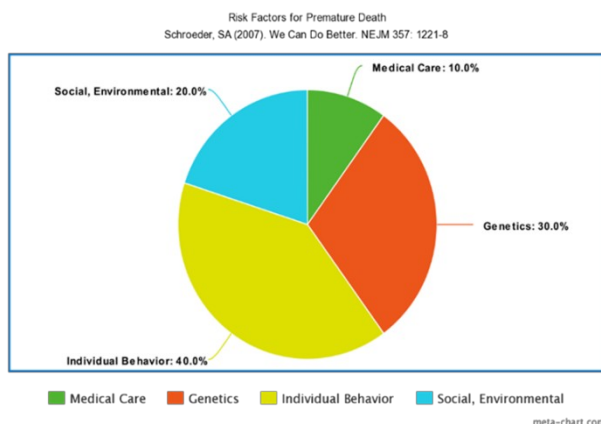
By JJ Ulloa

Medicare stands as a cornerstone of healthcare for millions of Americans, a federal program providing a vital safety net for those 65 and older, as well as for younger individuals with certain disabilities and End-Stage Renal

Disease. Navigating its multifaceted structure, beneficiaries can find solace in Part A's coverage of hospital stays and skilled nursing care, while Part B extends its benefits to outpatient services and preventative care. Part C, or Medicare Advantage, and Part D for prescription drugs, round out a suite of options that cater to the varied needs of its enrollees. As we explore the depths of Medicare's offerings, from the nuances of Advantage Plans to the critical Medigap coverage for out-of-pocket expenses, this guide aims to illuminate the paths available, helping you make informed decisions in a landscape where choices impact both health and financial well-being. With the changing tides of healthcare legislation and cost structures, understanding Medicare becomes more than just a necessity—it becomes the key to securing peace of mind in one's golden years.

Risk of Death and Health Insurance:

According to Steven Schroeder in a 2008 New England Journal of Medicine article, the primary factors contributing to early mortality in the United States are personal behaviors (40%), genetic factors (30%), social and environmental factors (20%), and



healthcare quality (10%). Schroeder raises pivotal questions about the impact of healthcare

quality on overall health, noting that healthcare issues account for approximately 10% of early deaths. Access to medical care remains a challenge, even when it's critically needed. With the Medicare enrollment deadline approaching, we shift our focus to this essential healthcare coverage.

Introduction to Medicare

Medicare, the federal health insurance program in the United States, is designed primarily for people aged 65 and older. It also serves younger individuals with certain disabilities and those with End-Stage Renal Disease (ESRD). The program is divided into several parts, each covering different aspects of healthcare:

- Part A covers inpatient hospital stays, care in a skilled nursing facility, hospice care, and some home health care.
- Part B covers certain doctors' services, outpatient care, medical supplies, and preventive services.
- Part C, also known as Medicare Advantage Plans, offers an alternative way to receive Medicare benefits through private insurance companies.
- Part D provides prescription drug coverage.

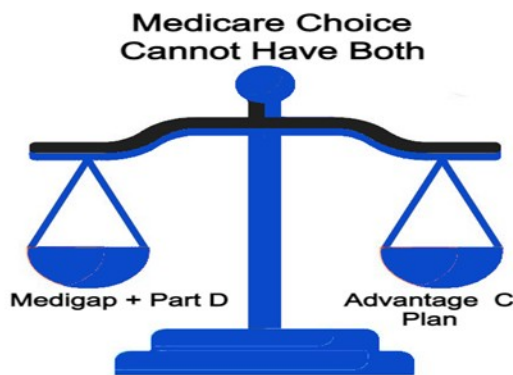
Medicare Part B Premiums for everyone (Medicare Supplements and Medicare Advantage)

1. Co-Pays: In 2024, those enrolled in Medicare Part B will need to pay an increased standard monthly premium of \$174.90, up from the previous average of

\$164.90. This amount is automatically deducted from recipients' monthly Social Security payments. Additionally, the Income-Related Monthly Adjustment Amount (IRMAA) for 2024 will be calculated based on your 2022 federal tax return, line 11, and varies according to income. It's important to note that while these figures are currently in place, they could be subject to change by legislative actions from Congress or administrative adjustments by the President. If these figures remain unchanged, it will be a piece of welcome news for senior citizens.

Single MAGI	Couple MAGI	Part B Premium
< \$103,000	< \$206,000	\$174.70
\$103,000 to \$129,000	\$206,000 to \$258,000	\$244.60
\$129,000 to \$161,000	\$258,000 to \$322,000	\$349.40
\$161,000 to \$193,000	\$322,000 to \$386,000	\$454.20
\$193,000 to \$500,000	\$386,000 to \$750,000	\$559.00
> \$500,000	> \$750,000	\$594.00

Choosing Between Medicare Advantage C Plans and Original Medicare Supplement Plans. Consumers face a choice between original Medicare (Part A/B/D) with Medigap or Medicare A



dvantage C Plans. Those with pre-existing conditions may prefer original Medicare with Medigap for easier conversion later. In contrast, healthy individuals might opt

for Medicare Advantage Plans, which excel in health maintenance. The choice often depends on factors like premiums, medications covered, and plan availability.

Medicare Supplements also called Medigap Plans cover:

Part A Coverage Gaps – There are three main out-of-pocket expenses: the deductible for hospital admissions, the copayments required for prolonged hospital stays, and the copayments for extended stays in a skilled nursing facility. These costs may be incurred multiple times throughout the year.

<p>Medicare Supplement Plan F: Covers all 6 coverage gaps. Offers 15-24 different plans available. *Can see any doctor or go to any hospital *Need Medicare Part D Drug Plan Has a monthly premium range: of \$192-228. AARP: \$184 UnitedHealthcare: \$192 Humana: \$204 Mutual of Omaha: \$216 Aetna: \$228</p>	<p>Medicare Supplement Plan G: Covers 5 out of 6 coverage gaps. Does not cover the Part B deductible. The Part B deductible for 2024 is \$240. *Can see any doctor or go to any hospital *Need Medicare Part D Drug Plan Has a monthly premium range: \$138-175. AARP: \$138 UnitedHealthcare: \$154 Humana: \$161 Mutual of Omaha: \$168 Aetna: \$175</p>
<p>High Deductible Plan F \$2800 annual deductible Monthly premium range: \$52-95. *Can see any doctor or go to any hospital *Need Medicare Part D Drug Plan AARP: \$52 UnitedHealthcare: \$68 Humana: \$75 Mutual of Omaha: \$82 Aetna: \$95</p>	<p>High Deductible Plan G \$2800 annual deductible Monthly premium range: \$42-85 *Can see any doctor or go to any hospital *Need Medicare Part D Drug Plan AARP: \$42 UnitedHealthcare: \$58 Humana: \$65 Mutual of Omaha: \$72 Aetna: \$85</p>
<p>Medicare Supplement Plan N: Covers 4 out of 6 coverage gaps. Does not cover the Part B deductible. Does not cover the 15% excess charge above Medicare-approved amounts. Requires another \$25 copay to see a doctor or \$50 to go to the Emergency Room *Need Medicare Part D Drug Plan Has a monthly premium range of \$90-120. High-deductible Plan N: \$2800 annual deductible + Monthly premium range: \$62-105</p>	<p>Medicare Advantage C Plans (Combination of Medicare Part A, Plan B, and drug plan all in one) Monthly premium range: 0-200 with an average of \$25. Covers 6 out of 6 medical coverage gaps, but additional deductibles with an annual out-of-pocket maximum of \$3000-4000/year for HMO and \$4000-7000 for PPO plans. *Need prior authorization for any procedures or seeing any specialists.</p>

Part B Coverage Gaps – There are three key expenses that occur annually: the annual deductible, the 20% coinsurance on services since Part B covers only 80%, and the additional 15% that doctors may charge beyond the approved Medicare rates, known as the Medicare Part B excess charge.

*Please note that these are just estimates and your actual premiums may be higher or lower.

*The following three ratings are ratings used to determine Medigap supplemental insurance premium. When comparing Medicare Supplement policies make sure to stay with the same rating for apples-to-apples comparison in addition to specific selected Medicare Supplement plans such as Plan G.

- **Attained-Age Rating:** Premiums increase with age.
- **Issue-Age Rating:** Premiums are set at enrollment and don't change with age.
- **Community-Rated:** Premiums are the same for all policyholders, regardless of age.

The Medicare Supplement Plans F, G, and N provide lifetime coverage, whereas Plan D requires annual renewal during the designated period from October 20th to December 7th, as Part D plans are structured on a 12-month basis.

Why Is It Important to Buy Medigap When You Are First Eligible?

When you reach 65, your Open Enrollment Period begins when you enroll in Medicare Part B. After your Medigap Open Enrollment Period ends, you may be denied a Medigap policy or charged more for a Medigap policy due to past or present preexisting health problems.

It is also extremely important to enroll in Medicare Part B when you reach 65 during the Medigap Open Enrollment Period. If not enrolled in Medicare Part B, not only you may have to pay a Part B late enrollment penalty and might miss your 6-month Medigap Open Enrollment Period. If you or your spouse are still working past 65 and have employer health insurance coverage, you may want to wait to enroll in Medicare Part B so you wouldn't have to pay for Part B premium. When the employer health coverage ends, you will have a chance to enroll in Medicare Part B as well as Medigap during your Medigap Open Enrollment Period.

Your right to buy Medigap policies in other extenuating circumstances (Medigap Guaranteed Issue Rights) are listed below (Source: US Center for Medicare and Medicaid Services).

High-Deductible Medigap Policies F and G: In 2023, if beneficiaries choose the high-deductible option for Plans F or G, they must pay the first \$2,700 in deductibles, copayments, and coinsurance not covered by Medicare before the Medigap policy starts to pay. This deductible will increase to \$2,800 in 2024. There is also a separate deductible for foreign travel emergency services, which is \$250 per year.

We highly recommend Plan G for most folks and Plan F for folks born before or on January 1, 1955, or enrolled in Medicare before January 1, 2020.

Advantage Plan C, which consolidates Parts A, B, and includes a prescription plan, requires enrollees to pay the standard Part B monthly premium, which is \$174.90 for the year 2024, deducted from Social Security benefits, similar to Medicare Supplement plans. Additionally, there is a variable monthly premium for Plan C ranging from \$0 to \$200 with an average monthly premium of \$25. Enrollees must manage varying copays and coinsurance with a yearly cap on out-of-pocket expenses, leading to a "Pay as you go" model. The annual maximum out-of-pocket costs for HMO plans range from \$3,000 to \$4,000, and for PPO plans, from \$4,000 to \$7,000. HMO plan members, such as those with Kaiser, must stay within their network for care, whereas PPO members have the flexibility to seek care outside the network. With Medicare Supplement plans, costs are consistent, but with Advantage Plan C, costs can fluctuate. Those in good health may find Plan C adequate, but individuals with ongoing health issues may find financial benefits in choosing Medicare Supplement Plans.

There is no prior authorization for seeing specialists or for any procedures with Medicare Supplements vs Advantage C plans which requires prior authorization for everything.

The Evolving Medicare Part D Part D, designed to help manage prescription drug costs, offers coverage through two options: Stand-alone Prescription Drug Plans

(PDPs) for those with Medicare Supplement Insurance and Medicare Advantage Prescription Drug Plans (MA-PDs), which is a part of Medicare Advantage plans. Recent changes in Part D include a decline in available PDPs but an increase in MA-PD options. The Inflation Reduction Act has introduced significant changes, such as capping insulin costs and making adult vaccines under Part D free.

Detailed Look at Medicare Part D

Medicare Part D, introduced to help beneficiaries manage the cost of prescription drugs, offers coverage through two main options:

1. Stand-alone Prescription Drug Plans (PDPs), which supplement original Medicare Parts A and B.
2. Medicare Advantage Prescription Drug Plans (MA-PDs), a part of Medicare Advantage plans, with coverage and deductibles similar to Medicare Part D plans.

Private insurance companies approved by Medicare offer Part D plans, and the coverage details, including costs and the list of covered drugs (formulary), vary significantly among plans.

Major Changes to Medicare Part D

Recent years have seen substantial shifts in Medicare Part D, both in terms of plan availability and costs:

2. Plan Availability: In 2024, there will be a reduction in the availability of standalone Prescription Drug Plans (PDPs), with only 709 plans offered across

34 regions, which is an 11% decrease compared to 2023. Nonetheless, every state will still have a selection of several PDPs to choose from. Conversely, the number of Medicare Advantage Prescription Drug plans (MA-PDs) is on the rise, indicating a shift toward the more comprehensive Medicare Advantage plans. It's important to note that the deadline to enroll in a Medicare Advantage Plan for 2024 is December 7th, 2023.

3. Low-Income Subsidy (LIS) and Plan Affordability: The LIS program, assisting beneficiaries with premiums and cost-sharing for Part D plans, faces a reduction in the number of plans offering zero-premium enrollment for 2024, compared to 2023.

4. Cost Changes: In 2024, individuals enrolled in Medicare Part D can expect to see their base beneficiary premium rise to \$34.70, representing a 6% increase from the previous year. This figure is average, with actual rates varying by the policy provider. Additionally, changes to the standard benefit design will lead to higher out-of-pocket costs, including increased deductibles and copayments in the initial coverage phase. As a result, beneficiaries should plan for greater overall expenditures for their Part D plans, considering both the monthly premiums and the charges they will incur before hitting the coverage gap, commonly referred to as the "donut hole".

5. Impact of the Inflation Reduction Act: The Inflation Reduction Act brings pivotal changes to Medicare Part D: a \$35 cap on monthly insulin costs starting in 2023, free administration of adult vaccines

under Part D, widened access to full LIS benefits for those with limited income, and in 2024, a new cap on out-of-pocket drug expenses, doing away with the 5% coinsurance in the catastrophic phase. This suite of reforms aims to reduce the financial strain on beneficiaries and enhance their access to crucial medications and vaccines.

6. Enrollment Trends: Medicare Part D is essential for covering prescription drugs since other parts of Medicare do not typically cover outpatient prescription drugs. Many beneficiaries opt for Medicare Advantage Prescription Drug plans (MA-PDs) because they offer an integrated approach to healthcare coverage, including both medical services and prescription drug benefits. This integration can be more convenient and sometimes more cost-effective compared to having separate stand-alone Prescription Drug Plans (PDPs). The choice between MA-PDs and stand-alone PDPs can depend on a variety of factors, including the costs of premiums, the specific medications covered by the plan's formulary, and the availability of plans in a beneficiary's area.

7. Co-Pays: In 2024, those enrolled in Medicare Part B will pay an average of Medicare Part D plan premium of \$34.70. Additionally, the Income-Related Monthly Adjustment Amount (IRMAA) for 2024 will be used to calculate an additional amount of Part D premium based on your 2022 federal tax return and varies according to income. It's important to note

that while these figures are currently in place, they could be subject to change by legislative actions from Congress or administrative adjustments by the President. If these figures remain unchanged, it will be a piece of welcome news for senior citizens.

Single MAGI	Couple MAGI	Part D Premium (varies)
< \$103,000	< \$206,000	0
\$103,000 to \$129,000	\$206,000 to \$258,000	\$12.90
\$129,000 to \$161,000	\$258,000 to \$322,000	\$33.30
\$161,000 to \$193,000	\$322,000 to \$386,000	\$53.80
\$193,000 to \$500,000	\$386,000 to \$750,000	\$74.20
> \$500,000	> \$750,000	\$81.00

Medicare for Low-income Population

For individuals with limited income, a variety of programs are available to help manage healthcare costs. Medicaid offers coverage for Medicare-related expenses like copays and deductibles, as well as services Medicare doesn't cover, including dental care and medical transport, for those with low income and few assets. Medicare Savings Programs (MSPs) aid those who don't qualify for Medicaid but struggle with healthcare expenses, covering Medicare costs including the Part B premium, with the Qualified Medicare Beneficiary (QMB) program also covering deductibles and coinsurance. The Extra Help program, or Part D Low-Income Subsidy, aids with costs associated with Medicare Part D prescription drug coverage for those within certain income and asset thresholds, often granting automatic enrollment for MSP participants. Additionally, some states offer State Pharmaceutical Assistance Programs (SPAPs) to assist with prescription costs, which typically require enrollment in a Medicare Part D plan and

application for Extra Help, contingent on meeting income criteria.

Looking to the Future

Medicare's evolution, particularly regarding prescription coverage, prioritizes issues like drug costs and beneficiary expenses. The Inflation Reduction Act aims to improve Part D for members, posing challenges for sponsors to maintain competitive pricing. Ongoing modifications will further influence Medicare, focusing on better and more affordable drug coverage for many Americans.

Citations:

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Recent FDA Food Recall. Please Note November Food Recalls are also available separately from 9health.substack.com free of charge.

By Allison Nguyen

Brand Name(s)	Product Description	Retailer/Locations	Recall Reason Description
Kwik Trip	Fruit cups and trays containing cantaloupe	Kwik Trip, Kwik Star, Stop-N-Go, Tobacco Outlet Plus Grocery, and Tobacco Outlet Plus; WI, IA, MI, MN, IL, SD	Potential to be contaminated with Salmonella
Malichita, Rudy, Seasonal Blend, Melon Trio and More	Whole Cantaloupe	Multiple retailers including Aldi; CA, IL, OK, TX, WI, IN, MI, OH, KY, NC, TN, VA, IL, LA, AZ, CT, MD, MO, MT, NV, NJ, NY, OR, PA, TN, UT, FL & Canada	Potential Salmonella contamination
Wilcox, Leonardo's	Ice Cream, Yogurt, Ice Cream Bars and Gelato in a Variety of Flavors	Multiple retailers; VT, NH, MA, NY	Potential to be contaminated with Listeria monocytogenes
HMC Farms, Signature Farms	Whole Peaches, Plums, and Nectarines	Publix, Wal-Mart, Sam's Club, Albertsons Company, Aldi, Sprouts Farmers Market; Nationwide	Potential to be contaminated with Listeria monocytogenes
Multiple brands	Dry Dog, Dry Cat, Catfish Food	Multiple Retailers; AK, AZ, CA, LA, MS, NM, NV, OK, TX, UT	Potential Salmonella contamination

Recent FDA Medication/Supplement December Recall

Recall Date	Brand Name	Product Description	Recall Reason Description	Company Name
11/6//2023	LEADER	0.9% Sodium Chloride Irrigation USP and Sterile Water for Irrigation USP	Lack of sterility assurance	Nurse Assist, LLC
11/17/2023	KinderMed	OTC Pain and Fever Reliever for Infants and Kids	Due to Acetaminophen Instability	KinderFarms, LLC
11/21/2023	Noah's Wholesale, LLC	Dietary Supplement with undeclared Sildenafil	Undeclared drug, Sildenafil	Noah's Wholesale, LLC
11/21/2023	Bayer	Vitrakvi® (larotrectinib) Oral Solution 20 mg/mL in 100mL glass bottles	Microbial contamination identified as Penicillium brevicompactum	Bayer
11/24/2023	TING®	2% Miconazole Nitrate Athlete's Foot Spray Antifungal Spray Powder	Presence of benzene	Insight Pharmaceuticals
11/27/2023	Novartis	Sandimmune (cyclosporine oral solution, USP) Oral Solution 100 mg/mL	Due to crystallization formation	Novartis Pharmaceuticals Corporation
11/29/2023	Burn Boot Camp	Triple Chocolate Almond Flavored Whey Protein Bars Diced onions	Potential presence of foreign material	Doctors Scientific Organica

Case Number 13: Intractable Itching

What's the probability of 5-year survival for this 88-year-old female?

*The following real-life case examples are hypothetical stories in the palliative or hospice care settings, imagined by the author with the help of artificial intelligence. Frailty scores are commonly used not only to decide if a patient should be placed in palliative or hospice care but also to assess whether the patient is a suitable candidate for major surgery in the case of surgical intervention. Unfortunately, patients with low frailty scores often do not survive five years after a major health crisis. No one is an exception since everybody eventually succumbs to the law of gravity. Case examples may contain personalized **Translational Medicine** from pre-clinical trial data.*

Diana Sawyer is an 88-year-old female who has a medical history of hypertension, hyperlipidemia, and type II diabetes mellitus that is managed by diet and glipizide. She reports experiencing severe itching in both hands, arms, feet, and legs bilaterally since yesterday (Saturday) over the phone. She states that the itching prevented her from sleeping. The onset of the itching seems to be related to her dinner on Saturday. She claims that she has rashes on her skin, but she is unsure if they are caused by scratching or if they were present before. She requests a home remedy until she can visit her doctor on Monday at the Kaiser urgent care clinic.

Current Medications:

Amlodipine 10 mg daily

Amiloride 5 mg daily

Glipizide 5 mg daily

Simvastatin 20 mg daily

Vitals: all within normal limits

Follow up on Monday:

The patient had excellent result with aloe vera alone and did not need to seek medical treatment.

Pruritus

Pruritus, commonly known as itching, is a complex sensory phenomenon that can range from mild discomfort to an overwhelming sensation that

Diana Sawyer

*All patient data is fictional and imagined by the author with AI assistance. Safe Health Report complies fully with US HIPPA regulations.

Age:88

Sex:female

Weight:147 pounds

Height:5 feet 3 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

Diana's ADL Score 0

significantly impacts an individual's quality of life. While itching is a common symptom of various skin conditions, it can also arise from underlying systemic disorders,

neurological abnormalities, or psychogenic factors. Intractable pruritus, defined as persistent or severe itching that is resistant to conventional treatments, poses a significant challenge for both patients and healthcare providers. Understanding the underlying mechanisms of pruritus and the various clinical presentations is crucial for developing effective treatment strategies.

Types of Pruritus and Treatments

Atopic Dermatitis (AD)-Related Pruritus

Atopic dermatitis (AD), a chronic inflammatory skin condition, is characterized by intense itching, dry skin, and recurrent eczematous lesions. The pathogenesis of AD-related pruritus is complex, involving an interplay of immunological, environmental, and psychological factors. Treatment strategies for AD-related pruritus include topical corticosteroids, emollients, wet wraps, antihistamines, phototherapy, and systemic therapies such as cyclosporine and dupilumab.

Biostatistics: A 2022 meta-analysis of 14 randomized controlled trials involving 2,258 patients with AD-related pruritus found that topical calcineurin inhibitors, such as tacrolimus and pimecrolimus, were significantly more effective than placebo in reducing itch intensity (RR=0.71, 95% CI 0.64-0.79).

Chronic Kidney Disease (CKD)-Related Pruritus

Chronic kidney disease (CKD) is associated with a high prevalence of pruritus, affecting up to 70% of patients. The exact mechanisms

underlying CKD-related pruritus are not fully understood but are likely due to a combination of factors, including xerosis, accumulation of uremic toxins, and secondary hyperparathyroidism. Treatment options for CKD-related pruritus include emollients, antihistamines, gabapentin, pregabalin, and nalbuphine.

Biostatistics: A 2023 systematic review and meta-analysis of 11 randomized controlled trials involving 1,026 patients with CKD-related pruritus found that gabapentin was significantly more effective than placebo in reducing itch intensity (RR=0.70, 95% CI 0.62-0.79).

Cholestatic Pruritus

Cholestatic pruritus is a type of pruritus associated with cholestasis, a condition characterized by impaired bile flow. The pathogenesis of cholestatic pruritus involves bile acid accumulation, which activates pruritic receptors in the skin and central nervous system. Treatment options for cholestatic pruritus include bile acid resins such as cholestyramine and colestipol, ursodeoxycholic acid, hydroxyzine, zinc, sertraline, and phototherapy.

Biostatistics: A 2022 retrospective cohort study of 103 patients with cholestatic pruritus found that cholestyramine, a bile acid resin, significantly reduced itch intensity compared to placebo (mean difference - 1.5 on a 10-point itch severity scale, $p < 0.001$).

Neuropathic Pruritus

Neuropathic pruritus arises from damage or dysfunction of the peripheral or central nervous system. The pathogenesis of neuropathic pruritus involves abnormal signaling in pruritic pathways, leading to an exaggerated perception of itch. Treatment options for neuropathic pruritus include gabapentin, pregabalin, tricyclic antidepressants, and topical capsaicin.

Biostatistics: A 2023 randomized controlled trial of 120 patients with neuropathic pruritus found that pregabalin was significantly more effective than placebo in reducing itch intensity (mean difference -2.2 on a 10-point itch severity scale, $p < 0.001$).

Psychogenic Pruritus

Psychogenic pruritus, also known as psychogenic dermatoses, refers to itching that is primarily caused by psychological factors. The underlying mechanisms of psychogenic pruritus are complex and involve a combination of stress, anxiety, and maladaptive coping mechanisms. Treatment options for psychogenic pruritus include cognitive behavioral therapy, stress management techniques, and anti-anxiety medications.

Biostatistics: A 2022 meta-analysis of 10 randomized controlled trials involving 328 patients with psychogenic pruritus found that cognitive behavioral therapy (CBT) was significantly more effective than placebo in reducing itch intensity (RR=0.59, 95% CI 0.43-0.79).

Idiopathic Pruritus

Idiopathic pruritus refers to itching of unknown cause. It is a diagnosis of exclusion after other potential causes of pruritus have been ruled out. Treatment options for idiopathic pruritus depend on the severity and distribution of the itching and may include topical corticosteroids, antihistamines, gabapentin, pregabalin, and nalbuphine.

Biostatistics: A 2023 systematic review of 15 case series involving 242 patients with idiopathic pruritus found that a variety of treatment modalities, including topical corticosteroids, antihistamines, gabapentin, pregabalin, and nalbuphine, were reported to be effective in some cases. However, the evidence is limited due to the retrospective and observational nature of the studies.

Conclusion and Recommendations

Intractable pruritus poses a significant challenge for both patients and healthcare providers due to its complex pathophysiology, diverse clinical presentations, and limited treatment options. A comprehensive approach to managing intractable pruritus requires a thorough evaluation to identify the underlying cause and tailor treatment strategies accordingly.

Recommendations:

Conduct a comprehensive history and physical examination to identify potential causes of pruritus, including underlying skin conditions, systemic

disorders, neurological abnormalities, and psychogenic factors.

Utilize appropriate diagnostic tests to rule out specific causes of pruritus, such as blood tests for kidney or liver function, skin biopsies for dermatological conditions, and neuroimaging for neurological disorders.

Eye of the Tiger Test for Diana Sawyer
*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 a cane for walking occasionally for example
- 5 – Mild Frailty: Symptomatic disease limits daily activities. Needs walkers. Needs help with walking and shopping.
- 6 – Moderate Frailty: Needs help with walking, shopping, climbing stairs, and 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](#)

Diana Frailty Score 1

Employ a multimodal treatment approach that addresses both the underlying cause of pruritus and the symptom of itching itself. This may include topical therapies, systemic medications, psychological interventions, and lifestyle modifications.

Collaborate with specialists from various disciplines, such as dermatologists, gastroenterologists, nephrologists, neurologists, and psychiatrists, to provide a coordinated and comprehensive treatment plan.

Encourage patient involvement in their care, providing education about the condition, treatment options, and self-management strategies.

Conduct further research to better understand the mechanisms of intractable pruritus and develop more effective and targeted treatment modalities.

Over-the-counter (OTC) Remedies

In addition to prescription medications and psychological interventions, several over-the-counter (OTC) remedies may be helpful in managing intractable pruritus. These remedies may provide temporary relief from itching and help soothe irritated skin.

Sarna Anti-Itch Lotion

Sarna Anti-Itch Lotion is a topical antipruritic that contains pramoxine (local anesthetic) 10 mg/ml, camphor, menthol, and phenylethyl alcohol. These ingredients work by temporarily numbing the nerve endings in the skin, providing relief from itching. Sarna Anti-Itch Lotion is generally safe for most people but can cause skin irritation in some cases. It is important to follow the directions on the product label and avoid applying it to broken or inflamed skin.

Aloe Vera

Aloe vera is a natural plant extract with a variety of healing properties, including anti-inflammatory and moisturizing

effects. Aloe vera gel can be applied directly to the skin to help soothe itching and reduce inflammation. Aloe vera is generally safe for most people but may cause skin irritation in some cases. It is important to do a patch test on a small area of skin before applying aloe vera to a larger area.

Cool Compresses

Applying a cool compress to itchy skin can help reduce inflammation and provide temporary relief. A cool compress can be made by wrapping a cloth around an ice pack or by soaking a cloth in cold water.

Moisturizers

Keeping the skin moisturized can help prevent dryness and irritation, which can worsen itching. Choose a fragrance-free moisturizer that is appropriate for your skin type.

Oatmeal Baths

Oatmeal baths can help soothe irritated skin and reduce itching. To take an oatmeal bath, add colloidal oatmeal to warm water and soak for 15-20 minutes.

Stress Management

Stress can worsen itching. Practicing stress-management techniques, such as yoga, meditation, or deep breathing, can help reduce stress levels and improve itch symptoms.

Actionable Recommendation:

Based on these findings, we recommend using aloe gel since she has few plants in her house with the following instructions:



- Choose a healthy and mature aloe vera plant that has thick and fleshy leaves. Cut off one of the outermost leaves at the base with a sharp knife or scissors. Rinse the leaf under running water to remove any dirt or debris.
- Place the leaf on a cutting board and slice off the pointed tip and the serrated edges. Cut the leaf into sections of about 2 to 3 inches long. Use a spoon to scoop out the clear gel from each section and transfer it to a clean bowl.
- You can use the fresh gel as it is or blend it in a blender or food processor to make it smoother and easier to apply. You can also add a few drops of vitamin E oil or lavender essential oil to the gel for extra benefits and fragrance.
- Before applying the gel to your rash, do a patch test to check for

any allergic reaction or sensitivity. Apply a small amount of the gel to a discreet area of your skin, such as the inside of your elbow or wrist, and wait for 24 hours. If you notice any signs of irritation, such as redness, itching, burning, or swelling, do not use the gel on your rash.

- If the patch test is negative, you can apply the gel to your rash as often as needed. Gently massage the gel into the affected area and let it dry naturally. You can also cover the area with a bandage or a gauze pad to protect it from further scratching or infection.
- Store the leftover gel in an airtight container in the refrigerator for up to a week. You can also freeze the gel in ice cube trays and use them as needed¹².
- Aloe vera gel may help soothe your rash and relieve the itching, but it is not a substitute for medical treatment. If your rash does not improve or worsens after using the gel, or if you have other symptoms, such as fever, pain, or pus, see your doctor as soon as possible.

Next, we suggest using a lotion that contains pramoxine, such as ‘Sarna’ or ‘Cerave’, which you can buy from a local pharmacy. Pramoxine is a topical anesthetic that can help relieve the itching and pain of your rash. Please ask the pharmacist to examine your rash and advise you on the urgency of the situation.

Synopsis:

Despite being 88 years old and having controlled hypertension, hyperlipidemia, and diabetes, this patient is independent and still able to take care of herself, including driving. While predicting the next five years is a difficult task, there is nothing to prevent this woman from living life to the fullest at this time.

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MrGineaPig's Core Long-Term Trial

LONG-TERM TRIAL	SUPPLEMENT	START DATE	
Muscle Weakness	Hyaluronic Acid	07/01/2019	50 mg-1 capsule daily
Back Pain	Pantothenic acid	09/1/202	500 mg 1 capsule daily
	Pantethine	09/01/2022	450 mg 1 capsule daily
Mealtimes	Breakfast 09:00 -Lunner (13:00)	01/07/2023	+Salad with Balsamic Vinegar Lunner = Lunch + Dinner

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Risk Factors for Premature or Unexpected Death

Immediate Risks	Internal Threat	External Threat	Other Topics
<ol style="list-style-type: none"> COVID-19 EG.5 Covid19 HV.1 COVID-19 FL.1.5.1 COVID-19 XBB.1.16.6 Fentanyl death Drug shortages RSV Gun violence 	<ol style="list-style-type: none"> Poor diet Smoking High blood pressure Obesity Sedentary Lifestyle Suicide 	<ol style="list-style-type: none"> War Earthquake FDA recalls Meat preservatives Trans fatty acid Pesticides Heavy metals 	<ol style="list-style-type: none"> Shortness of breath Back pain Hemorrhoids Incontinence Joint swelling Fibromyalgia Health Insurance

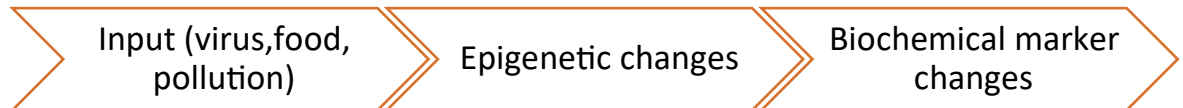
Topics Chosen: Covid-19 update, Clostridium difficile, Search of Best Diet Series

Format of Safe Health Report

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

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

Section 3: Case examples of premature death. If you are in a similar situation, remove yourself out of harm's way! Can we extend **our expiration dates** when in the eye of the storm before disease strikes at a tissue level. Remember epigenome is what activates a specific set of genes.



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 GuineaPig. This newsletter is designed to empower GuineaPigs in the area of human health and possibly decrease the risk of **premature death**.

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