SAFE HEALTH REPORT

Scientific Data … Informed Choice … Actionable

April 2023 *Official Newsletter for MrGineaPig* *Issue 9*

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

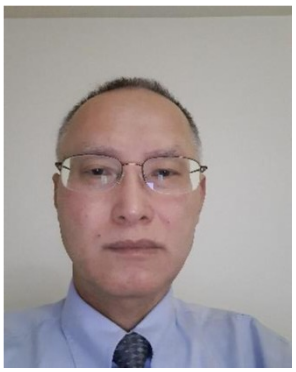
Inside …

In Search of Best Diet: Part 3

Your Ticket to Exuberant Health for the next 5 years

Having covered Barbagia, Sardinia and Icaria Island of Greece in the previous issues of Health Report, we shift our gears and review Okinawa for its renowned longevity stories.

The Okinawan people have a long and vibrant history. Okinawans are the descendants of Ryukyuan people of various tribes including the Hayato, the Kunigami, the Amami, the Miyako, the Yaeyama, and the Yonaguni during the Neolithic period. This period saw the emergence of a distinct culture on the islands of Okinawa, Japan and the development of a unique diet and lifestyle.



Ike Kim, Editor

The Okinawa diet is based on a variety of foods that are native to Okinawa, such as fish, seaweed, and other seafood, as well as local fruits and vegetables, legumes, tubers, and whole grains. The diet has also been shaped by the various invasions and migrations that Okinawa has

experienced. For instance, during the Edo period (1603-1868), the Ryukyu Kingdom was under the control of the Satsuma Clan from Kyushu and the Shimazu Clan from

Honshu, and the diet of the Okinawans was heavily influenced by that of the mainland Japanese. This period also saw the introduction of certain foods from China, such as tofu and sweet potatoes.

The Okinawan people have also developed a lifestyle that focuses on the importance of community and family. Each household has their own garden, which provides them with fresh fruits and vegetables as well as legumes, tubers, and other common vegetables that are commonly grown on the island. This lifestyle is based on the idea of sharing and caring for one another, which has been shown to have a positive impact on overall health and wellbeing.

In recent years, the Okinawan diet has gained popularity outside of Okinawa, as more and more people have become aware of its potential health benefits. The diet has been studied in depth and has been shown to reduce the risk of certain diseases, such as heart disease, diabetes, and certain types of cancer. It is also believed to have a positive effect on mental health and cognitive functioning. However, with the introduction of Western diet and lifestyle, the life span of Okinawans has changed dramatically. According to the 2020 census by the Japanese Ministry of Health, Labor and Welfare, Okinawan men have an average life span of 80 years, while Okinawan women have an average life span of 87 years. This is in comparison to the life span of 84 years for men and 90 years for women in 1980. The myth that all Okinawans are in good health needs to be dispelled. We will focus on Ogimi Village in Okinawa where most centenarians currently reside.

Okinawa Diet (Ogimi Diet)

Okinawa is one of the forty-seven prefectures in Japan. A village located in the northern region of Okinawa, called Ogimi, with a population of three thousand inhabitants, is known as the "Longevity Village" that Okinawa is so famous for. Therefore, the dietary habits of the centenarians of Ogimi have been the focus of much research and publicity. Ogimi is a tranquil village nestled among nature, with forests covering nearly 80% of its total area and a line of limestone hills running along the coast. Its rocky, craggy cliffs provide a protective barrier from pirates.

Despite being about 6,000 miles away from Icaria Island, Greece, and Barbagia, Sardinia, Ogimi has a remarkably similar forested setting. It is located on the northern main island of Okinawa in Japan and has been home to its community since the Jōmon period, Japan’s Neolith period. In fact, Ogimi Village stands out from the rest of Okinawa due to its remoteness and cultural isolation. The native people of Ogimi have managed to preserve their own language, which is not understood by the other Okinawans. Despite learning Japanese in school, they have kept their distinct culture and religion in the matriarchal society.

In the Ogimi diet, tofu and edamame appear to be the major sources of calories, as opposed to the usual rice found in the rest of Japan. In addition, a variety of marine algae also plays a significant role in providing nutrients.

Cox P and Metcalf J looked at Ogami diet in a systematic way and found that the most frequently consumed food items include tofu and seaweeds. Top nine food items are listed below as published in the February 7th, 2017 edition of the Current Nutrition Reports.

Table 1. Frequency of Consumption.

Rank	Ogimi	Menu Item
1	Kugani	Citrus depressa juice
2	Gohan	Oryza sativa
3	Goya	Momordica charantia
4	Tofu	Tofu
5	Wakame	Undaria pinnatifida
6	Kombu	Saccharina japonica
7	Edamane	Glycine max
8	Beneimo	Ipomoea batatas
9	Aasa	Ulva lactuca

What is the scientific evidence that backs the superior diet of Ogimi Village?

In order to answer this question, Morita H, Mutsuki I, et al conducted a study to analyze the intestinal microbial composition of sixty Japanese women over the age of seventy. They divided the participants into two groups; the first group, consisting of forty people, had spent the first three to five years of their life in the village of Ogimi, while the second group, consisting of twenty people, had not. The rationale was based on the theory that an adult-like gut microbiota is established in the first 3-5 years of life, and the microbiome remains stable throughout a person's lifetime.

The authors of the study published their results in the August 21st, 2020 edition of Bioscience of Microbiota, Food and Health, and concluded that five bacterial genera were significantly different between the two groups analyzed. Specifically, Akkermansia was more abundant in the group that spent their first 3-5 years in Ogimi village, whereas Lachnospiraceae;g_, Collinsella, Peptococcus, and [f_S24_7;g_] were more abundant in the group that did not spend their first 3-5 years in the village. Of the 105 bacterial genera analyzed, only these five bacteria showed significant differences between the two groups.

Akkermansia muciniphila as mentioned in the February Issue is a perhaps one of the most beneficial bacteria found in our gut microbiome or probiotics ever since being discovered only in 2006. *A. muciniphila* improved insulin sensitivity and reduced plasma total cholesterol in human study and partially protected against high-fat diet-induced obesity and insulin resistance in mice study.

Actionable Recommendation:

- ✓ **Akkermansia muciniphila is a probiotic that is highly recommended at this time. It will be discussed more in depth in the upcoming 9Health Probiotic Guide.**
- ✓ **Although we cannot replicate the Ogimi diet, it is recommended to consume purple Okinawa sweet potatoes or Stoke Purple sweet potatoes, which are available in the US, as well as to increase tofu consumption.**

Autophagy and Fasting

Definition of autophagy: *Auto* means self, and *phagy* means eating in Greek. It is self-cleansing process at each individual cell level. Autophagy is a natural process by which cells rid themselves of old, damaged, or abnormal proteins and other substances in their cytoplasm. This process, first discovered in the early 1960s, is important for the maintenance of cellular homeostasis and can be activated by stresses such as fasting or rapamycin-mediated processes. Autophagy is both a selective and non-selective lysosomal degradative process which helps to keep the body functioning properly. However, when autophagy is disrupted, it can lead to various human diseases. It plays an essential role in preserving genomic integrity and ensuring cell survival by eliminating misfolded proteins, damaged organelles, and cancerous materials as well as foreign pathogens. Since it is the primary system for cleaning the body, constant introduction of nutrients into the body robs of this important function. Therefore, intermittent fasting is important part of good health maintenance.

When autophagy is induced by certain activities, such as fasting, calorie restriction, exercise and a high-fat, low-carbohydrate diet, it causes cells to enter into a survival mode. Fasting involves abstaining from food for a certain amount of time, which leads the body to repurpose cell components. Calorie restriction limits the number of calories consumed, forcing the cells into autophagy. Additionally, a keto diet, commonly known as high-fat, low-carb diet, which shifts the body's energy source from carbs or sugar to fat, may also trigger autophagy. Exercise also increases the activity of autophagy-related proteins, leading cells into autophagy state.

Definition of lipophagy: *Lipo* means fat, and *phagy* means eating. Lipophagy plays an important role in fasting state. It is a form of selective autophagy wherein lipid droplets are specifically targeted for destruction in the liver. This process is vital for ensuring an optimal level of balance in the number of lipid droplets.

The liver is the main organ that regulates fatty acid metabolism through processes such as beta-oxidation, lipogenesis and uptake and secretion of lipoproteins. Contrary to popular belief, it does not store fat under regular conditions; rather, it processes large quantities of fatty acids, with less than 5% being stored as triglycerides within the liver itself.

The lipids that are stored in the liver come from three sources, namely, diet, de novo lipogenesis by the liver itself, and lipolysis from the adipose tissues. When a high-fat diet is consumed, the liver takes up more lipids, and increased glucose results in elevated levels of de novo lipogenesis in the liver. Insulin resistance and obesity are associated with higher quantities of lipolysis from the adipocytes, leading to increased concentrations of non-esterified fatty acids which, in turn, can result in hepatic steatosis.

In the fasting state, non-esterified fatty acids (NEFAs) from lipolysis in adipose tissue are taken up into the liver in proportion to their concentration. This can lead to an excessive accumulation of fatty acids in the liver, resulting in cell injury and death. To protect against lipotoxicity, hepatocytes convert the fatty acids into neutral lipids such as triglycerides or cholesterol esters, which are stored in lipid droplets. Lipolysis further breaks down triglycerides via hydrolysis and beta-oxidation for energy production and the process of lipophagy digests lipid droplets by forming autophagosomes which engulf the droplets and then fuse with a lysosome to form an autolysosome. The neutral lipids stored in lipid droplets are then hydrolyzed by lysosomal lipases. Bottom Line: you have too much energy stored in the form of triglycerides in the fat, especially in the white fat, and fasting allows your live to utilize triglycerides released during fasting.

Actionable Recommendation:

- ✓ **Intermittent fasting is re-commended in the form of taking largest meals only during most active circadian period. Eat larger breakfast and lunch but a very light dinner.**

Safety Warning: Autophagy:

While there are many benefits associated with inducing autophagy through intermittent fasting, recent studies on mice have shown that pregnant mothers who practice intermittent fasting may disrupt the integrity of their offspring's intestinal barrier and cause metabolic disorders as reported by Yuan L et al in the January 12, 2023 edition of Communications Biology. Consequently, caution must be taken when attempting to induce autophagy, particularly when the individual is pregnant, breastfeeding, or living with a pre-existing medical condition. Furthermore, individuals undergoing cancer treatment should seek advice from their oncologist before engaging in any dietary changes that induces autophagy as autophagy can often support the fast growth of established tumors and may even promote resistance to multiple cancer treatments.

Autophagy has also been seen to support tumor progression, due to its ability to provide cells with energy and metabolites. These resources are essential for tumors, since they need more energy and metabolites than normal cells in order to rapidly proliferate. Both energy and metabolites can be provided to cancer cells by increasing autophagy. Research has also shown that the pathways associated with autophagy are interlinked with oncogenes and tumor suppressor genes in cancer development. Studies of colorectal cancer have revealed that higher levels of an autophagy marker, LC3, have been associated with carcinogenesis, whereas a lower level of LC3 has been linked to a good prognosis at advanced cancer stages at least in colorectal cancer progression and drug resistance. In fact, many small molecules drug candidates such as transcriptional factor EB inhibitor, EO, that inhibit autophagy gene expression is being looked at currently as a potential adjuvant cancer treatment as reported by Yuqi L et al in the February 7th , 2023 edition of Medical Sciences.

Actionable Recommendation:

- ✓ **Do not attempt intermittent fasting for cancer patients and in pregnancy. Discuss further with your primary care provider and specialists.**

FDA Medication/Food December Recall (updated on 2/8/2023)

Recall Date	Brand Name	Product Description	Recall Reason Description	Company Name
2/13/2023	PrimeZEN	PrimeZEN Black 6000 male enhancement capsules	Product contains undeclared tadalafil and sildenafil	Volt Candy
2/17/2023	Zin Ao International Group Corp	Enoki Mushrooms	Listeria monocytogenes	Zin Ao International Corp
2/20/2023	Enfamil ProSobee	Enfamil Prosobee Simply Plant-Based Infant Formula in 12.9 oz containers	Potential Cronobacter sakazakii contamination	Reckitt
2/24/2023	Taiwan Best Quality	Enoki Mushrooms	Listeria monocytogenes	Jan Fruits Inc.
2/26/2023	GEISHA	GEISHA Medium Shrimp, 4 oz can	Potential contamination with Clostridium botulinum	Kawasho Foods USA, Inc.
3/1/2023	Tapas	Cocktail Shrimp	Listeria monocytogenes	Lidl US
3/10/2023	Life2000	Life2000 Ventilation System	Potential for patient oxygen desaturation when connected to third party monitors	Baxter International Inc
03/16/2023	Kirkland	Frozen Organic Strawberries	Hepatitis A	California Splendor, Inc.
03/17/2023	Simply Nature, Vital Choice and others	Frozen Organic Strawberries and fruit blend	Hepatitis A	Scenic Fruit Company

9HEALTH RECIPE #1 TO PREVENT PREMATURE DEATH

[Icaria-Style Stuffed Tomatoes]

Servings: [1 Serving]
Prep time: [20 min]
Total time: [60 min]

Ingredients

[4 large tomatoes]
[1 tablespoon olive oil]
[2 cloves of garlic, minced]
[1/2 cup cooked brown rice]
[1 tablespoon olive oil]
[1/4 cup feta cheese]
[2 tablespoon parsley]
[Salt and pepper to taste]

Directions

1. **Preheat oven to 375°F.**
2. **Cut the tops off of the tomatoes and scoop out the insides.**
3. **Heat the olive oil in a medium skillet over medium heat.**
4. **Add the garlic and sauté until fragrant.**
5. **Add the cooked rice, feta cheese, parsley, and salt and pepper to the skillet and mix until combined.**
6. **Stuff the tomatoes with the rice mixture.**
7. **Place the tomatoes in a greased baking dish and bake for 20 minutes, or until tomatoes are tender.**
8. **Serve warm.**

Special Diet Information

[Substitute brown rice with ½ brown rice and ½ assortment of beans if diabetic]

Case Number 7: Beryllium Toxicity and Fall

What's the probability of 5-year survival for this 49-year-old male with history of a fall?

Case examples are based on real-life care settings in hypothetical palliative and hospice care. Frailty scores are often utilized not only when making major placement decisions into palliative and hospice care but also to assess whether patients are able to withstand major surgical interventions. Unfortunately, patients with poor frailty scores are often unable to survive for five years following a major health crisis. .

Patrick Dwight Klemson, a 49-year-old Caucasian male with a history of confirmed pulmonary berylliosis, hypothyroidism, gout (with no recent flares), seasonal allergies and a reported history of hyponatremia (with a baseline sodium level of 130) presented after an episode of either syncope or seizure while in transit at the Denver International Airport. His situation has since become critical due to hypercapnic/hypoxic respiratory failure on a mechanical ventilator, hyponatremia, and encephalopathy. He was travelling from Delta, Utah, where he had worked most of his life, to visit his parents in Chicago. His berylliosis is caused by the beryllium exposure, a rare metal used in high-tech industries, mined in Delta, Utah, the only source of beryllium in the United States.

Well, he fell on his face at 17:50 on 02/20/2023 while ambulating, on hospital day 5. Let's look at his clinical status on 02/20/2023.

Problem#1: Hypercapnic/hypoxic respiratory failure. There is unclear cause for acute worsening of carbon dioxide. No medications were believed to be the cause. It is unknown what the baseline lung function was, but there is a history of progressive berylliosis. Additionally, there are bilateral calcified diaphragms indicating that diaphragmatic paresis/paralysis could be a concern. Obstructive sleep apnea/ obstructive sleep hypopnea is also a possibility based on the patient's examination. It is possible that Cheyne-Stokes respiration had worsened due to volume overload. However, no other metabolic or toxic etiologies were present. A transthoracic echocardiogram revealed pulmonary hypertension. A brain MRI/CT scan suggested acute stroke.

The patient was removed from a ventilator two days ago (with fentanyl weaned off), but gradually increasing levels of hypercarbia have been observed up until today. So, a transition to BIPAP for respiratory support is recommended. Patient

Patrick Dwight Klemson

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

Age: 49
Sex: .....Male
Weight: .....192 pounds
Height: .....5 feet 9 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-nearing 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

Patrick Klemson's ADL Score 4

is advised to use BIPAP intermittently throughout the day and consistently overnight. The patient can likely qualify for BIPAP to take home based on the ABG (Arterial Blood Gas) results.

Pulmonary atelectasis prophylaxis should be included with Inspirometer and Out-of-Bed Activity.

The stridor has improved, so the patient can be discontinued from the dexamethasone.

Continue to avoid any sedating medications.

Problem#2: Severe Pulmonary Hypertension (PHTN) by Transthoracic Echocardiography- Differential Diagnosis includes Group III (Berylliosis and Obstructive Sleep Apnea), Group II (Diastolic Dysfunction on Transthoracic Echo-cardiography), and the possibility of Pulmonary Emboli (as his recent air travel puts him at risk for deep vein thrombosis/pulmonary embolism).

-Fluid restrict and lower the salt content in the diet, but will need to balance with hyponatremia.

Problem#3: Encephalopathy: Etiology includes acute cerebrovascular accident, hypoxia, hyponatremia, delirium, and medications; all may cause encephalopathy. There were no arrhythmias, acidosis, or ischemia present, but the patient's condition has been waxing and waning. Minimize sedating medications. Correct serum Na.

Problem#4: Hyponatremia, as suggested by the levels of electrolytes and osmolality in the urine, points to SIADH which could be caused by any of a number of conditions including pulmonary disease, cerebrovascular accident, medications, or an idiopathic cause. Patient has a baseline sodium of 128 likely due to SIADH. High urine osmolality and urinary sodium >40. Fluid-restrict to 1.5 liters/24 hours. Corrected with IVF initially and now with fluid restriction. may need to consider addition of salt tablets. Has baseline hyponatremia of ~128 likely due to SIADH

Problem#5: Hypertension with severe pulmonary hypertension by Transthoracic Echocardiography. Transition from negative inotropes (metoprolol and carvedilol) to calcium channel blocker is recommended for ongoing management at this time.

Eye of the Tiger Test for Patrick Klemson

***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

Patrick Klemson's 6
Frailty Score

Problem#6: Loss of consciousness: The patient experienced a loss of consciousness, which is consistent with a seizure resulting from hyponatremia and/or an acute stroke. An electroencephalogram demonstrated global cerebral slowing.

Problem#7: Right frontal acute stroke: unlikely to be associated with respiratory failure. Normal lipid panel, A1C within

normal range. Continue atorvastatin 80 mg daily with aspirin 325 mg daily.

Problem#8: Hypertensive Urgency on admission with SBP 180-200 with baseline SBP around 130 per wife. No etiology of or evidence of end organ damage but had not taken blood pressure medications the morning of the travel along with acute stroke. Troponin negative, ECG unremarkable, GFR normal. Blood pressure 130/60 at the time the fall. Continue PRN IV hydralazine for SBP>180

Problem#9: Pulmonary Berylliosis: biopsy proven but stable with baseline oxygen 2 liters nightly.

Problem#10: Hypothyroidism: no heat/cold intolerance, no diarrhea/ constipation. TSH 3.5 Free T4 1.0. Continue levothyroxine 125 mcg daily.

Problem#11: Gout: no recent flares. Continue allopurinol 300 mg daily.

Physical Exam:

1. Neurological: reflexes intact.
2. Psychiatric: He has a normal mood and affect.

Vitals:

	1200	1400	1600	1730
Temp	37.2	-	-	-
BP	118/56	136/64	165/70	130/60
HR	60	68	73	74
RR	15	23	16	20
SpO2 (RA)	97	96	96	97

Labs: all within normal limits.

Medications in previous 72 hours:

Current Active Medications on 2/20/2023:

Allopurinol 300mg PO Daily at 0900

Amlodipine 10mg PO Daily at 0900 replacing carvedilol and metoprolol

carvedilol 25mg tab BID with meals - given once, 2/19 1800 then discontinued

metoprolol tartrate 50mg 2/18 0900 and 2100, 5/19 0900

Hydralazine 10mg IV 5/18 1400, 1600, 20mg 2/18 2200 and 2/19 0400 and 0900

Aspirin 325mg PO Daily at 0900

Atorvastatin 80mg PO Daily at 0900

Levothyroxine 75mcg PO QAM at 0600

NS 500 mL IV Once at 1200

Pantoprazole 20mg PO QAM AC at 0900

Synopsis:

Medication non-compliance leads to hypertensive urgency/emergency which in turn causes stroke which in turn causes seizure in the setting of hyponatremia. Seizure/stroke in the setting hypertensive crisis ultimately resulted in the loss of consciousness. Bottom line: Medication compliance is life or death matter! The plot thickens! He was a pharmacist who had returned to pharmacy school at Butler University. Seven years ago, he had quit his job in a beryllium mine. Since then, he had been a very strong patient advocate, especially with regard to medication

compliance. Yet here he is with one time forgetfulness of having to take his medications. This case underscores the importance of medication compliance even for someone who works in a healthcare environment.

The fall is once again associated with his sudden blood pressure changes from 165/70 to 130/60 possibly associated with his blood pressures medications changes as well as baseline encephalopathy. Luckily, he only had scratches on his face without any skull fractures. His teeth were spared as well.

Take Home Lesson:

- ✓ **Medication compliance is often life or death matter as in this case. Take your medications on timely manner.**
- ✓ **When your loved one is in the hospital, please stay with them and at least look over his/her vital signs.**
- ✓ **Use Fall Caution whenever there is a change to your blood pressure medications!**

A discerning clinician will come up with at a minimum a trifecta of leading diagnostic theories as to the root cause(s) of Mr. Klemson's problems by evaluating signs/symptoms of complaints with history of clinical sequelae leading up the hospitalization in the setting of chronic conditions with confirmatory lab test and by applying Occam's razor.

It is probable that he will make a full recovery given his age from his recent fall and current complications that required admission to the ICU. However, in order for him to survive for the next five years, a considerable amount of investment in his health is necessary, likely more than his investments in the stock market and Klemson Brother's Pickling Inc. For the best outcome, he should actively participate in his recovery and work in conjunction with his physicians to effectively manage his health.

Recommendations:

- ✓ **Work with your primary care physician (PCP) and specialists in a partnership for positive outcome.**
- ✓ **Try to lose at least 5 pounds of weight by trying 9Health Blue Zone Diet Guide.**

MrGineaPig's Core Long-Term Trial

LONG-TERM TRIAL	SUPPLEMENT	START DATE	
Muscle Weakness	Hyaloronic 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 Pantethine	09/1/202 09/01/2022	500 mg 1 capsule daily 450 mg 1 capsule daily
BPH/ prostatitis Prevention	Cranberry Extract 600 mg	12/20/2022	1 capsule three times a day
Meal Times	Breakfast 09:00 -Lunner (13:00)	01/07/2023	+Salad with Balsamic Vinegar Lunner = Lunch + Dinner

March Risk Factors for Premature or Unexpected Death

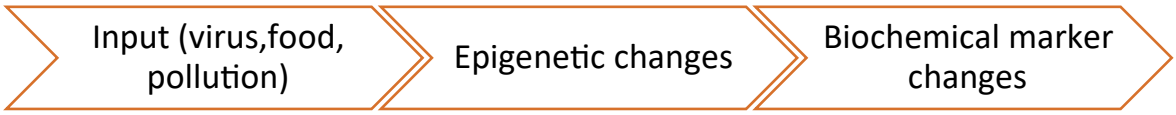
Immediate Risks	Internal Threat	External Threat	Other Topics
1. Covid 19 - XBB.1.5 2. Covid 19- BQ.1.1 3. Pneumonia (Flu, RSV)	1. Poor diet 2. Smoking 3. High blood pressure 4. Obesity 5. Sedentary Lifestyle	1. Earthquake 2. War 3. FDA recalls 4. Meat preservatives 5. Trans fatty acid 6. Pesticides 7. Heavy metals	1. Shortness of breath 2. Back pain 3. Hemorrhoids 4. Incontinence 5. Joint swelling 6. Fibromyalgia 7. Suicide
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 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 dates** when in the eye of the storm before disease strikes at the tissue level?



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 and possibly decrease the risk of **premature death**.

For New FREE Subscriptions: Please click https://9health.com/user/login or scan the QR code below for e-mail notification of new monthly **FREE** issues.