



# Natural Health Response

WITH DR. RICHARD GERHAUSER M.D.

## Move Over Statins... New Drug SLASHES Heart Attack Risk by 30% Drives down inflammation, stroke, and death risk

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The oldest, *safest*, *most effective* drug for heart disease is one you've likely *never heard of*.

The compound was first isolated in 1820 and has been used to treat conditions like gout and pericarditis (inflammation of the thin membrane around the heart).

But this drug had a surprising “side effect.”

It turns out that people taking it for gout had a 73 percent risk reduction in **all-cause mortality** and a 49 percent lower risk of heart attack and stroke.

This led researchers to take a closer look at its potential as a *frontline treatment for heart disease*.

Fast-forward to June 2023. The FDA has now approved the drug for the prevention of heart attacks based on impressive research revealing it slashed the risk of



Studies show that statins harm the mitochondria in your cells by lowering CoQ10 levels, inhibiting respiratory chain complexes, inducing apoptosis (mitochondrial suicide), and causing a dysregulation of calcium metabolism.

cardiovascular events by up to 30 percent in folks with coronary atherosclerosis.

### The Shocking Truth About Statins

Worldwide deaths due to **coronary artery disease** are staggering. They ballooned from about 1.2 million deaths in 1990 to 18.6 million by 2019.

There are two ways this killer disease often presents.

The first is **acute coronary syndrome (ACS)**. This occurs when

heart symptoms are accompanied by an abnormal electrocardiogram and/or elevation of cardiac enzymes, like troponin, are seen on a blood test.

**Chronic coronary syndrome (CCS)**, on the other hand, usually presents as reversible ischemia or low oxygen levels in the heart. CCS is often triggered by exercise, emotion, or stress (although it can also occur spontaneously).

While the drugs used to treat each condition can vary, doctors use cholesterol-lowering statin drugs to address BOTH.

To be blunt, I have a **BIG problem with statins**.

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For starters, their job is to reduce *cholesterol*.

This is a TERRIBLE idea.

Cholesterol has *many* critical functions in the body. It's a major component of the brain and cellular membranes. It's also the precursor for many hormones.

There's EVEN evidence that *higher* cholesterol in older people may *reduce* mortality!<sup>1</sup>

But even if we put the cholesterol conundrum aside for a moment, there are other reasons statins are bad news. Studies show that statins harm the powerhouse of the cell, the **mitochondria**.

The drug does this by lowering CoQ10 levels, inhibiting respiratory chain complexes, inducing apoptosis (mitochondrial suicide), and causing a dysregulation of calcium metabolism.<sup>2</sup>

Statins **also** reduce mitochondrial oxidative phosphorylation, increase oxidative stress, decrease uncoupling protein 3 concentration, and interfere in amyloid- $\beta$  metabolism.



Two recent studies concluded that colchicine reduces the risk of heart attack and stroke in individuals with coronary artery disease.

These drugs are even associated with the onset of **diabetes and dementia** (through these or other mechanisms).

Other drugs used to treat coronary syndromes aren't much better... such as blood thinners that increase *bleeding* risk and aspirin which increases **mortality** risk.

## The FAILED Search for an Alternative

Research suggests that statins don't just reduce cholesterol levels. They *also* appear to reduce inflammation.

In fact, some argue that the drug's ability to reduce inflammation—rather than its ability to lower cholesterol—is behind any links to a reduced risk of coronary artery disease.

This inspired mainstream medicine researchers to hunt for a drug for heart disease that **only blocks inflammation**.

This led to studies of **monoclonal antibodies** like canakinumab.

These drugs were *great* at reducing the risk of cardiovascular disease—but at a cost that would bankrupt the medical system (not to mention sending the risk of fatal infections climbing).

## “Naked Ladies” Solution Slashes Stroke Risk

Instead of creating a *new* drug to combat inflammation, a few doctors and scientists with **common sense** wondered if an existing drug could do the same thing (without breaking the bank).

Enter **colchicine**.

This anti-inflammatory drug was first identified and named in the 1800s, making it one of the oldest drugs in existence.

But long before that, Egyptian and Greek healers used the same extracts of the autumn crocus (commonly called “naked ladies” as the flowers appear in the fall without leaves) for medicinal use.

The drug is used to treat gout, familial Mediterranean fever, and pericarditis. However, colchicine had an *unexpected* side effect.

Scientists found evidence that people who were on colchicine for gout had **less coronary artery disease**.<sup>3</sup> This led to a retrospective study of 1,002 patients with gout who took colchicine. The study revealed that these individuals had the following:

- A 49 percent lower risk of **myocardial infarction, stroke, and transient ischemic attack (TIAs)**.

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- A 73 percent relative risk reduction in **all-cause mortality** compared to non-colchicine patients.

Today's BEST drugs can't produce numbers like that.

## New Kid on the Block Is a Heart SUPERSTAR

Fortunately, the medical community HAS taken note of this unexpected boon for heart health.

Colchicine was recommended by the 2021 **European Society of Cardiology** guidelines on cardiovascular disease prevention in clinical practice.

The **American College of Cardiology** and the **American Heart Association** have also placed the drug on their recommended protocols for treating cardiovascular disease.

And two recent studies concluded that colchicine reduces the risk of heart attack and stroke in individuals with coronary artery disease.<sup>4</sup>

In one study, low-dose colchicine (.5 mg/day) reduced the risk of a major cardiovascular event by 31 percent in those with stable atherosclerosis and 23 percent in participants who had recently suffered a myocardial infarction.<sup>5</sup>

This led the United States FDA to approve colchicine as **the first anti-inflammatory drug shown to reduce the risk of myocardial infarction (heart attack), stroke, the need for coronary revascularization, and cardiovascular disease death.**<sup>6,7,8</sup>

These trials focused on **secondary prevention**, which means you've *already* had a heart attack and you're taking measures to prevent a "second" one.

**Primary prevention** is preventing the disease onset in the first place.

Ongoing trials are evaluating the benefits of colchicine for *primary* prevention in groups at a high risk

of cardiovascular disease, like type II diabetics, so we should have more data soon.

## Multifaceted Heart Protection

Scientists have been busy working out the mechanism of action for colchicine's anti-inflammatory effects, but there's still more to learn.

So far, here's what we know:

- Colchicine diminishes the recruitment of a type of immune cell called neutrophils.
- It decreases neutrophil's adhesion to the inner lining of blood vessels, which is part of the mechanism of atherosclerosis and plaque formation.
- It inhibits neutrophil *degranulation*. This has the end effect of reducing high-sensitivity C-reactive protein (a sensitive marker of inflammation) and the inflammatory cytokine interleukin 6.
- It blocks the NLRP3 inflammasome, which is increased in cardiac disease patients.

## Important Warnings

No discussion would be complete without looking at the potential *side effects* of colchicine. After all, ALL drugs have them.

The good news is that long-term use doesn't appear to increase the risk of cancer or mortality. We know this because people with familial Mediterranean fever take high-dose colchicine for their entire lives.

The most common side effect is gastrointestinal disturbances (mostly diarrhea).

One caveat is that high blood levels of colchicine can be fatal.

## Big Pharma Monopoly on Colchicine

Colchicine **used** to be inexpensive. I used it in my medical practice over the years and it cost about 10 to 50 cents per pill.

Then, around 2010, the FDA and Big Pharma shenanigans began. The FDA gave a monopoly advantage to one drug company to sell the drug—and *all generics were banned*.

Almost overnight, the cost went up to about 5 dollars *per pill*.

This move led to untold suffering for thousands across the nation. In fact, some of my own patients who relied on colchicine to prevent gout attacks could no longer afford the drug.

The lowest dose for gout was .6 mg. The new FDA approval for use in cardiovascular disease is for .5 mg. This dose will probably be relatively expensive as Big Pharma has a monopoly on its sales.

Yet, in other countries, generic colchicine is very reasonable.

Nothing new here.

Colchicine is metabolized by the cytochrome P450 enzyme 3A4, which is also the pathway for other drugs—including the antibiotic *clarithromycin*, certain *immunosuppressive drugs*, and *azole antifungal agents*.

This means that **these drugs should NEVER be taken with colchicine.**

Additionally, colchicine is excreted by the liver and kidneys, so it should not be used by anyone with a significant decline in liver and/or kidney function.

If you're interested in a drug for the secondary prevention of heart disease that has the potential to be both **safer** and *more effective* than standard treatment, talk to your doctor about colchicine.

*Visit the website for a full reference list.*

# Green Tea's *Dirty Secret* Could RUIN Your Health

## Is this ancient beverage friend or foe?

When it comes to natural health elixirs, green tea is always on the list.

It's been consumed for over 4,000 years and it's hailed in traditional medicine circles for benefits like supporting bone health, slashing stress, reducing inflammation, and lowering blood pressure.

Green tea is *especially* beneficial for your **brain**.

In fact, studies indicate that it has the potential to *reverse mental decline* due to aging, disease, or injury.

But be warned. As impressive as those brain benefits are, green tea has a **dirty secret** that could cause more harm than good...

I'll show you how to harness green tea's benefits *while limiting its risks*.

## Green Tea's BIG Brain-Health Benefits

The studies showing green tea's benefits for brain health are impressive.

The tea contains bioactive compounds in its leaves that provide extensive neuroprotection. There's a long list of these beneficial compounds, but the superstar is a catechin called **epigallocatechin gallate** (EGCG).<sup>1</sup>

EGCG possesses anti-inflammatory, antioxidant, and antifibrotic (fights scar tissue build-up) properties. Just as importantly, EGCG crosses the blood brain barrier, where it can have a *direct impact* on your brain.<sup>2</sup>

Once it's in there, EGCG is the gift that keeps on giving.

In humans, a neural imaging study using functional magnetic reso-



Green tea contains bioactive compounds in its leaves that provide extensive neuroprotection. But it also holds a dirty secret that may cause you more harm than good.

nance imaging (fMRI) revealed that green tea acts on *working memory* by **increasing connectivity** from the right parietal lobe to the middle frontal gyrus in the brain.<sup>3</sup>

This improves **cognitive task** performance and **working memory** processing.

Alzheimer's is a debilitating neurological disease characterized by the accumulation of beta-amyloid plaques in the brain.

Human studies suggest EGCG may inhibit the formation of these plaques lowering the risk for developing Alzheimer's.<sup>4</sup>

Parkinson's is another neurodegenerative condition that affects motor function and cognitive abilities. Research published in the *Frontiers of Aging Neuroscience* suggests green tea polyphenols could **protect** against the loss of dopaminergic neurons, which is a hallmark of Parkinson's.

Green tea's protective effects may *also* extend to the **prevention and recovery from strokes and brain injury** as well. One study found

green tea polyphenols have a positive impact on stroke outcomes and promote neural protection.<sup>5</sup>

## The Danger No One Is Talking About

If you're ready to go brew some green tea, I don't blame you. We could ALL use a brain boost these days.

But before you do, let me tell you why I personally *avoid* green tea.

Elements from the soil and water are absorbed by the tea plant and incorporated into its leaves. That's how many of the *beneficial* nutrients get there.

But when the tea is grown in heavily polluted areas, like China and Japan (and most teas are), this means those healthy leaves also contain *unhealthy* elements like lead, cadmium, aluminum, and other heavy metals.

Today I'm going to focus on just one: **fluoride**.<sup>6</sup>

Fluoride has been found in ALL green teas that have been tested (let me know if you find one that doesn't have it).<sup>7</sup>

It's true that there is *some* natural fluoride present in soil and water. But polluted soil and rainwater from nearby industrial plants drastically increase the levels.

These factors make green tea the **leading source of fluoride in the world.**

And when you steep those fluoride-rich tea bags in fluoridated city water, it's easy to ingest levels FAR above what would be considered safe.

Drinking *decaffeinated* green tea poses an even greater threat, since fluoridated water is used in the decaffeination process.

## Why Fluoride Is So Dangerous

Here are some of the main questions I hear after telling people this:

*What's the big deal about fluoride? If it's in drinking water, isn't it safe? Doesn't it protect your teeth?*

I'll tell you what I tell them: Fluoride is a natural element present on the earth, but **humans have no biological need for it.**

The US government recommends putting fluoride into the water supply to help prevent tooth decay. Because of that, some misinformed health organizations even believe that the fluoride levels in green tea are a *good* thing.

First, you DON'T need to drink fluoride to take care of your teeth.

Second, there is NO good amount of fluoride.

Studies show fluoride can combine with aluminum to allow it to enter the brain, bypassing the blood-brain barrier. That is a dangerous combo.



The US government recommends putting fluoride into the water supply to help prevent tooth decay. Because of that, some misinformed health organizations even believe that the fluoride levels in green tea are a good thing.

Here's the **short** list of reasons you should stay away from fluoride:

- Fluoride decreases the electric charge stored in the water batteries that surround proteins in and out of the cell. Less electric charge means **less available energy.**
- Studies show that too much fluoride causes **fluorosis of the teeth and bone.** This leads to white speckles on your teeth and weakens your bones.
- In children exposed to fluoride, there's been evidence of **lower IQ and increased ADHD.**
- Fluoride may contribute to the **calcification of the pineal gland**, which is a major source of melatonin. Melatonin is critical to preserving mitochondrial function through its antioxidant effects and keeps the timing of our internal circadian clocks that we discuss often in this newsletter.

The current "safe" level of fluoride in drinking water is 0.7ppm. Based on the above points, I would argue that NO amount of fluoride is safe.

## Choosing the SAFEST Green Tea

If you want the benefits of green tea—*without the risks of fluoride*—you have two options.

The first is to look for a green tea source that has a low amount of fluoride (like I said, all green tea will have *some*). You'll find this in higher quality (i.e., more expensive) teas.

That's because the fluoride content is based on *where* the tea is grown. Tea grown in China tends to have higher levels of fluoride (due to soil concentrations) than tea grown in Japan.

The fluoride content is also based on *how* the tea is harvested.

Some tea companies describe their harvesting process on their website. Look for tea producers that harvest the young leaves at the *top* of the plant, which have lower fluoride levels than the older leaves near the base.

For example, green tea produced by the company EDEN contains less fluoride because the teas are made from early, young, hand-picked leaves from plants grown in Japan.

Tests show that EDEN Senecha green tea contains <1ppm of fluoride.<sup>8</sup>

Be aware that buying *organic* teas **won't** protect you in this situation, since organic teas can still contain fluoride.

How long the tea is brewed will also affect fluoride levels: The longer it's brewed, the higher the fluoride levels tend to be.

## All the Benefits, None of the Fluoride

The second option is to skip drinking green tea altogether and opt for a **green tea extract** instead.

I've looked into the fluoride content of extracts, and it's difficult to get a *definitive* answer.

One study found that green tea extract does not contain *any* detectable amounts of fluoride.<sup>9</sup>

However, as with the tea leaves themselves, the fluoride content could vary based on where the tea leaves are from, extractions methods, etc.

So I can't say with certainty that the green tea extract you purchase **WILL** be fluoride-free.

This is a hot issue right now, as more people learn about the hidden risks of one of the world's

supposedly healthiest drinks.

I'm hoping the increased interest will soon lead to more transparency from companies about fluoride content in their products. Even better, I'm hoping a company tackles the fluoride issue itself so that there's nothing to be transparent about.

Tea *can* be grown minimizing toxins. Hopefully in the future, as demand and consumption increase, we can safely get the benefits of green tea.

I'll continue to track the issue and will be sure to update you should the situation change.

*Visit the website for a full reference list.*

## Multivitamins: The Unexpected TRUTH

### Is taking one right for you?

I often get asked if I recommend taking a multivitamin—and if so, which one?

My answer is... *it depends*.

First, not all multivitamins are created equal.

But even if they were, some people may greatly benefit from them, others might not benefit at all, and they could even be *harmful* to some.

Today, I'll dive deeper into the benefits (and drawbacks) of taking a daily multivitamin. I'll also give you my top recommendations if you decide taking one is right for you.

### Bridging the Gap with Multis

A **vitamin** is a molecule that's essential for life, *but that cannot be produced in the body without raw materials from the outside*. You get these critical nutrients mostly from



Multivitamins are designed to maintain adequate levels of the nutrients your body needs. Some people may benefit greatly from them, but they could be harmful to others.

food sources, making a healthy diet **VITAL** for your overall health.

But these days, obtaining the variety of nutrients you need in the amounts necessary for **optimal** health can be practically impossible.

For starters, even healthy foods are often grown in nutrient-depleted soils or soil polluted with toxins and heavy metals.

These factors and more (which I'll discuss below) can make it difficult to maintain adequate levels of the nutrients you need... **especially** as you age.

**Enter supplements.**

The main reason to take a multivitamin is to maintain adequate levels of the nutrients your body needs.



Seniors may get greater benefits from taking a multivitamin/mineral supplement because they typically eat less than younger folks, which means they tend to get fewer nutrients.

For many folks, this can be very valuable.

Researchers using data from NHANES (National Health and Nutrition Examination Survey) found that 40 percent of people who did **not** use dietary supplements had nutrient deficiencies in key areas like vitamin C, vitamin B12, vitamin D, or vitamin E.<sup>1</sup>

However, only 14 percent of those using multivitamins were at risk of any deficiency.

## Conflicting Studies Muddy the Waters

Studies evaluating the specific health benefits of multivitamins are challenging because most are observational.

When an observational study finds that people taking multivitamins live longer or have less disease, you could conclude that multivitamins are the reason why.

The problem is that people who voluntarily take multivitamins **also** tend to make other beneficial lifestyle choices as well, like eating a better diet, getting more exercise, wearing seatbelts, not smoking, and not abusing alcohol.

In research, these differences are called “confounders,” and they’re

hard to separate from the data.

That’s why blinded, randomized, controlled clinical trials are used. But even with these studies, it can be difficult to draw *accurate* conclusions because the specific product, dosage, or length of time used could impact the results.

(As you’ll see below, not all multivitamins are created equal.)

For example, the United States Preventive Services Task Force (USPSTF) recently published a review of three randomized controlled trials giving healthy people a standard multivitamin mineral supplement.<sup>2</sup>

The combined result showed little to no benefit of a daily multivitamin/mineral supplement for preventing cancer, cardiovascular disease, or death.<sup>3</sup>

On the other hand, the COSMOS-mind study showed that taking a daily multivitamin mineral (Centrum Silver) supplement for three years **significantly** improved global cognition, episodic memory, and executive function in older adults. The benefits were even greater for those with pre-existing cardiovascular disease.<sup>4</sup>

Another extensive literature review recently looked at the effects of supplements on cognitive function, psychological processes,

and mental and physical fatigue. The study focused on B vitamins, vitamin C, iron, magnesium, and zinc—all of which are important in energy production and nervous system health.<sup>5</sup>

The conclusion was that a *lack* of optimal levels of these nutrients causes low energy, fatigue, mood disturbances, and cognitive decline. There was evidence that supplementation could **IMPROVE** these conditions.

## Why Age MATTERS

What does it all mean?

It means that taking a multivitamin alone isn’t a magic pill to cure disease and help you live longer. However, it *can* help you fill nutritional gaps when you need a little extra help.

Doing so can benefit energy, mood, memory, and more.

This can be *especially critical* for **older adults**.

Seniors may get *greater* benefits from taking a multivitamin/mineral supplement because they typically eat less than younger folks, which means they tend to get fewer nutrients.

Plus, problems with nutrient *absorption* can still leave older individuals deficient even when they **ARE** eating a healthy whole-food diet.

Older people are *also* more likely to have a pre-existing disease that might increase nutritional requirements.

And some prescription drugs (taken by nearly 90 percent of older adults) can leech nutrients from the body.

## Too MUCH of a GOOD Thing Is BAD

Regardless of age, a **multivitamin is ONLY beneficial if you need it.**

If you're *already* getting adequate nutrients from your diet—or from various other supplements you're taking—then adding in a multi could cause you to take TOO MUCH of a good thing.

One study found that 10 to 15 percent of people taking multivitamins had *excessive* intakes of vitamin A, iron, and zinc, and up to 61 percent were taking in too much niacin.<sup>6</sup>

Excessive iron is a problem because it can cause toxicity and organ damage while increasing your risk of infection.

And it's easy to consume too much.

Too much iron can occur if you're eating a lot of iron-rich animal products and processed foods, especially wheat and cereal grains, since they're often artificially fortified with iron by the manufacturers.

One bowl of cereal will give you 100 percent of the minimum daily requirement of iron. Getting iron from *additional* sources could lead to iron overload, increasing oxidative damage in cells.

Many multivitamin mineral supplements for older adults do **not** contain iron for this reason.

However, iron *deficiency* is a common problem, especially in undernourished kids and menstruating women, which means some people **could benefit** from having iron in a multivitamin.

Ultimately, your **individual health status** and **diet** will determine your iron requirements. Talk to your doctor to help you figure out yours.

Another thing to be aware of is that smokers (and possibly former smokers) should avoid multivitamin/mineral supplements with large amounts of beta-carotene or vitamin A. Two studies have linked these nutrients to an *increased* risk of lung cancer in smokers.



Excessive iron can cause toxicity, organ damage, and increased risk of infection. It is very important to talk to your doctor to help you figure out your specific iron requirements.

### Dr. G Recommends...

I hope you can see why any multivitamin I recommend to my patients is *individualized* to their **specific needs**.

That's why I always recommend discussing supplements with your doctor or a nutritionist who is informed about supplementation and will consider your specific health concerns, age, diet, etc.

If you decide a multivitamin **IS** right for you, here are my top three recommendations.

**Centrum Silver** is a minimalist option that's convenient and relatively inexpensive. It's the product used in the study I mentioned earlier that confirmed the cognitive benefits of multivitamins.

But one I like *better* for most people is Life Extension's **Two-Per-Day** multivitamin.

Two-per-day has higher levels of many nutrients found in Centrum Silver but with added plant compounds like quercetin and lycopene.

I *also* prefer it to other products because it contains the *mixed tocopherol* form of **vitamin E**, which is how we would normally get vitamin E from nature (as

opposed to alpha-tocopherol, the standard form of vitamin E included in supplements).

Life Extension's Two-Per-Day also includes **folate** as *5-methyltetrahydrofolate* (5-MTHF). Centrum Silver (and most other multis) contains folic acid, the synthetic form of this B9 vitamin.<sup>7</sup>

The problem is that a large percentage of the population cannot convert folic acid into **folate** to be used by the body.

In addition, folic acid generates an immunosuppressive metabolite called 6-formylpterin in the body. (Incidentally, this may be the reason for certain side effects from fortified foods.)

The 5-MTHF form of B9 that I recommend is the form your body uses, AND it doesn't break down into 6-formylpterin.

A third option for people who want to take a high potency multi—and who also want to get a more consistent dose of plant compounds (like lutein, zeaxanthin, lycopene, resveratrol, hesperidin, and more)—is **Phytomulti** by Metagenics.

All three are available on Amazon.

*Visit the website for a full reference list.*