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Good Health - A Matter of Choices

By: James L. Holly, MD

It has never been more important for anyone and everyone to "take charge" of their own healthcare. There was a time when physicians and other healthcare providers functioned as constables, attempting to impose health upon an unwilling or an unwitting patient. That has long ceased. There was a time when medicine was practiced in a style of "parent to child." The "provider," in the role of the parent, told the "patient," in the role of the child, what to do and the patient was expected to do it without complaint, comment or alteration.

Now, the model of healthcare delivery is more like colleagues working together to achieve a common end. No longer are diabetics expected to do exactly what the doctor says. They are expected to understand their disease and to recognize when their bodies are telling them that a change in treatment needs to take place. They are expected to know how to handle "sick days" in taking their medications and how to evaluate the food they eat. They are expected to know that their long-term well being is dependent upon a combination of self-effort, counsel from a physician, exercise, dietary restraint, medication and knowledge.

This is a better way to be a patient and it is a better way to be a healthcare provider. This means that everyone needs to know as much as they can about their own health and about how:

1. First, to preserve the natural health which you have,
2. Second, to achieve the health which you desire,
3. Third, how to retain that health and
4. Fourth, how to regain your health, so much as it is possible, if it is lost.

There are seven principles which underlie every consideration of these four goals:

1. Every person must face the fact that there is no pill to correct every problem caused by wrong choices.

2. It is better, easier and more possible to retain and maintain good health, than it is to regain it once it is lost.
3. There is little which a health-care provider can do to offset the consequences of bad choices. For instance, if you choose to smoke, there is little which any health care provider can do to offset the destructive -- and, in that the consequences are a result of a personal choice, it can be said that these choices are self-destructive - choice of smoking.
4. Like taxes, aging is inevitable. And, like "tax avoidance" schemes, aging cannot be put off forever, but aging can be managed, sometimes delayed and compensated for.
5. However, just as there are illnesses which result from our choices, there are illnesses which do not. And, while an illness in one person may result from self-destructive conduct, which is the result of a choice made, the very same illness in another person may be the consequence of events and/or circumstances over which they had no control.
6. There are things which we can do to preserve and/or improve our health -- all of these require a choice and discipline.
7. Ultimately, the individual alone is responsible for his/her health. A human being is not like a car which is passive in all instances. A car can be driven into the repair shop and the mechanic can be told to "fix it." In many instances, the car can be restored to a functional state virtually like when it was new. Human beings cannot drive themselves into a physician's office and say, "fix me." They can drive to the doctor's office and say, "How can you help me help myself." You can never transfer the responsibility for your health to another person and, in reality, you can rarely, validly, blame another person for your poor health.

With these principles in mind, we would like to begin a series of discussions on how to maintain, retain, or regain your health.

The most important choice which you make in regard to your health is what you eat and how you live. There was a time when these choices were not a problem. You could only eat what you caught or grew, and if you got anything you either had to walk or work to get it. The heart disease and many of the cancers which we face today were not known, not only because we didn't live as long as we do today, but because our life styles and choices made us healthier.

We all know the destructiveness of excessive animal fat in the diet. And, we know that animal fat was a large part of the diet in previous generations which did not have the diseases, which our prosperity has brought upon us. Why? One choice offset another, i.e., the level of activity was such that any negative impact of the animal fat in the diet was cancelled out. Even today there are illustrations of this. Heart disease has been

relatively unknown among the Masai people of East Africa, yet their diet is very high in animal fat. Thinking that the "lipid theory" of heart and artery disease might be contradicted by these facts, researchers began doing autopsies on Masai warriors who died and/or who were killed. It was found that they had the same consequences of animal fat as everyone else, but they also walked and ran every where they went. Even though the fats they ate caused atherosclerosis, just as it does in Americans, the arteries in their hearts were so large that there were no obstructions to blood flow, and therefore no heart attacks.

We could improve our health by returning to a "hunting and gathering" social setting where we only ate what we grew or killed. We all realize that is not reasonable; so what are we to do? MAKE CHOICES! We can choose to "comfort" ourselves emotionally by overeating and eating the wrong kinds of foods, or we can chose to improve our health, avoiding excessive amounts of food and excessive kinds of foods. But, what food should we eat?

One of the problems in our society is that we teach our children -- or, at lease we try to teach our children -- to spell correctly, to speak correctly, to dress properly, but we never teach them how to eat correctly. And, we often, by example, and out of convenience and "comfort," teach them how to eat in a "self-destructive" way.

What are the principles which should regulate the choices of what we eat?

1. All "fast foods" -- ALL OF THEM -- are bad for you!! Sometimes they taste good and they are easy, but they are generally expensive in regard to their nutritional content and they are always expensive in regard to the health consequences of eating them regularly.
2. Many of the things we "like to eat" are not good for us. Remember, taste is learned! And, taste can be retrained, if you are determined enough to make a difference in your future health by your present choices. you can learn to "like" the foods which you avoided because of taste. One famous physician once said, "I can tell you what is healthy to eat. If you put it into your mouth and it 'tastes good,' spit it out, it's not good for you." That is an exaggeration but for most of us, it is the truth.
3. The higher the percent of your food which comes from plant sources rather than animal, the healthier your diet will be. This is particularly true if the plant sources for your food:
 - a. Are brightly colored vegetables.
 - b. Are not from processed foods and/or do not have preservatives in them.
 - c. Are fresh
 - d. Are prepared without animal fat

4. There is a limit as to what you can eat and be healthy. If you live within that limit, you will benefit; if you don't, you will suffer.
5. Processed foods, preservatives, sugar and salt are not healthy. In order to increase the "shelf life" of a food and therefore the profitability of it, substances are added which make even healthy food unhealthy. And, processing often not only takes away natural nutrients but processing makes a food unhealthy, which otherwise would be healthy.

An example is white bread. The whole-wheat grain has over 23 nutrients which are beneficial to the human body. To make bread more attractive, and some think to make it "taste better," the whole-wheat grain is processed during which almost all of those nutrients are removed, preservatives are added in the form of unhealthy oils to make the bread last longer, and a few nutrients are added back. Then the bread is sold as "enriched bread," because 7 or 8 of the original nutrients are added back.

This is one of the reasons it is said, "The whiter the bread, the sooner dead." White bread will cause your blood sugar to go up, which will cause your insulin levels to go up. Increased insulin levels are a contributing factor to heart disease. If you want to make a decision which will begin to improve your health, stop eating white bread and begin eating "true" whole-wheat bread which is made with vegetable oil high in polyunsaturated and/or monosaturated fatty acids.

6. The health of your gastrointestinal tract -- your bowels -- is largely dependent upon what you eat. A diet low in soluble and insoluble fiber is a diet which will contribute to many different illnesses of the bowels, including cancer. The same Masai warriors, who have large coronary arteries, have a low incidence of bowel cancer because they produce three to four times the amount of stool per day in comparison to the average American.
7. You are eating to live, not living to eat.

Starting next week, we will address how to make wise choices for your diet. In doing so, we will address:

1. The Glycemic Index of foods.
2. The Fiber content of foods.
3. The caloric content of foods.
4. The fat content of foods. We will address why we need fat and why if you're going to eat a "fatty meal," you should not eat rice or potatoes with it. The damage from a "meat and potatoes" diet, comes as much if not more so from the potatoes, than from the meat."

5. The relationship of exercise to dietary requirements. We'll talk about why mankind was designed to be mobile rather than sedentary.
6. How the burning of calories through exercise contributes to your health.
7. How many illnesses are caused by or worsened by obesity.

Remember, the only thing which can really hurt you, contrary to the popular axiom, is what you don't know. And, also, don't forget, it is your life and it is your health.