THE GOLDEN YEARS??

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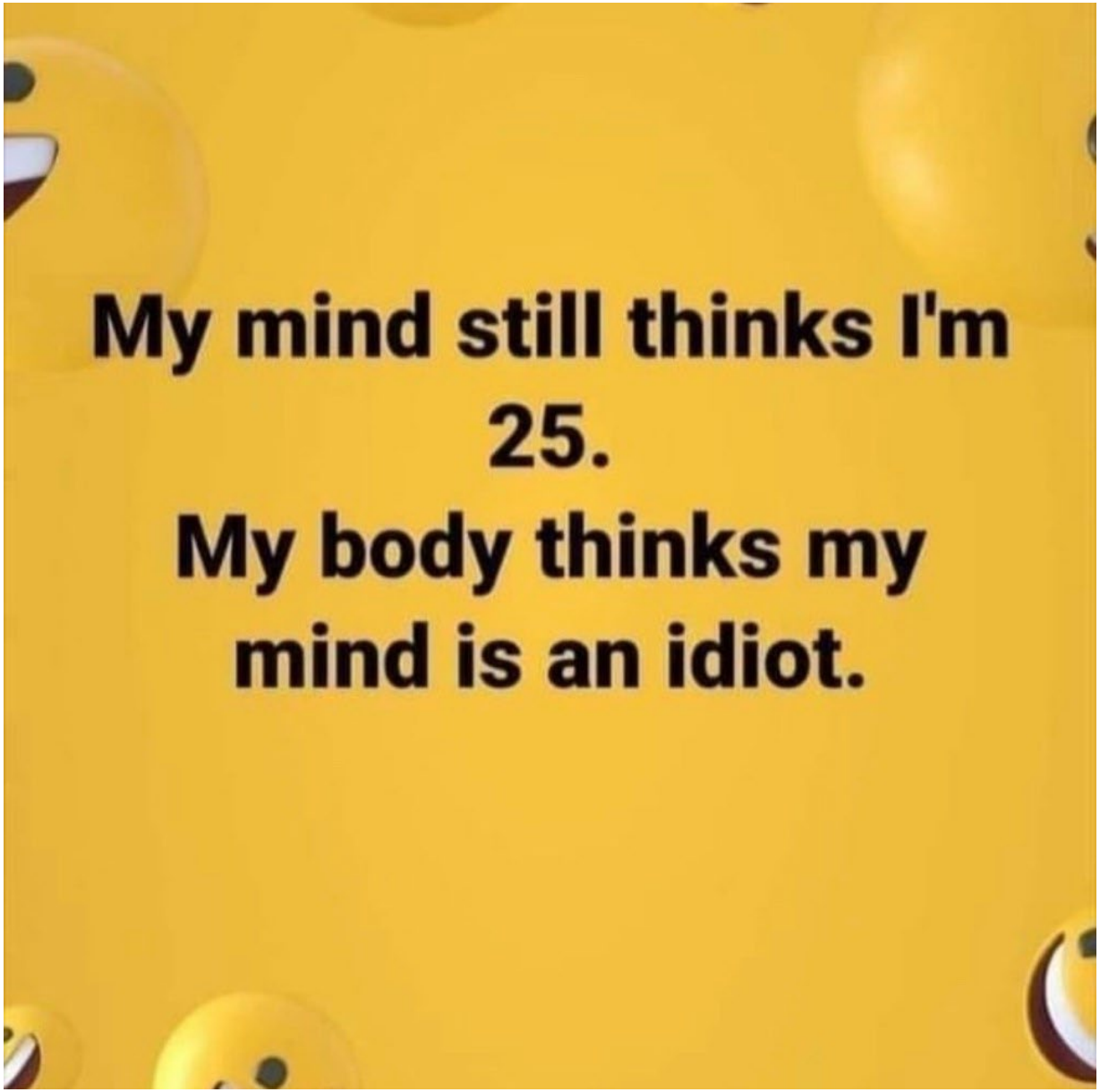
LET'S SEE WHAT WE CAN DO

- Anti-aging discussion
- Raise our health consciousness?
- **Is medicine missing the MARK??**
- How to supplement correctly for the most common issues
- Hormone balance?
- The Candida connection


My mind still thinks I'm 25.
My body thinks my mind is an idiot.

Leading Causes of Death (65 or older)

- Heart disease
- Malignant neoplasm
- Chronic low respiratory disease
- Cerebrovascular disease
- Alzheimer's
- Diabetes
- Unintentional injury
- Covid?/Flu/Pneumonia
- Kidney disease

Leading cause of death

- Cardiovascular..since 91?
- Kidney…first year in top 10
- Alzheimer's..since 87..as cause of death 2005

Increasing the level of health consciousness

- Increases in life span are occurring
- Expected effects of aging process
- Optimally, preservation starts in the womb
- Continues throughout lifecycles
- Screenings, blood work help to identify
- Control of chronic situations A MUST
- It comes down to LIFESTYLE
- WE NEED TO MAKE THE WORLD HEALTHY, BY TAKING THE LEAD WITH OUR SENIORS!

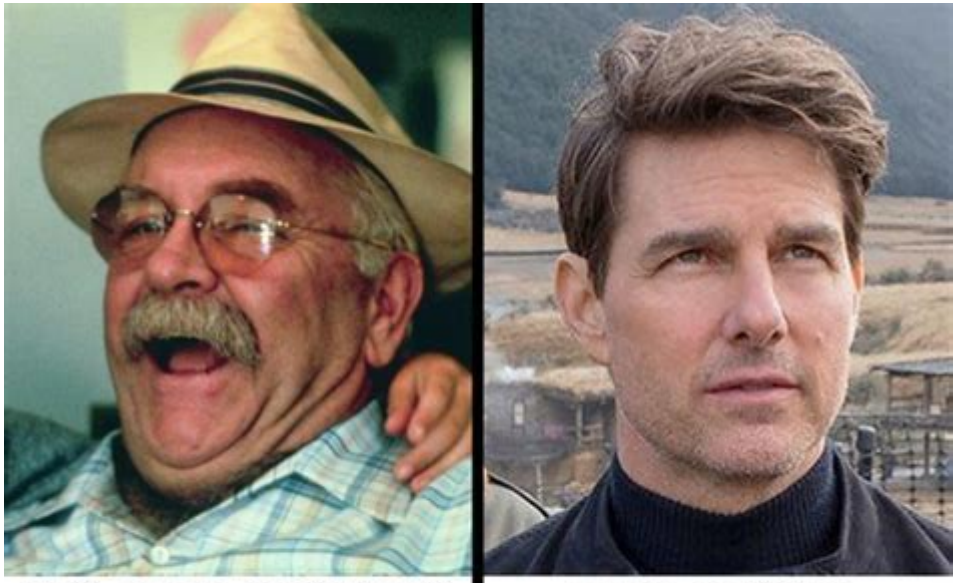
What is your level of health consciousness

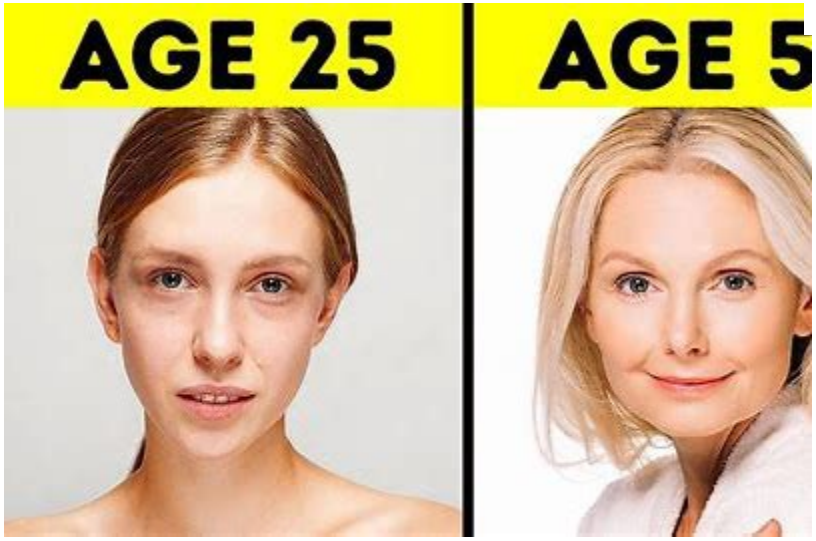
- Cognitive Awakening-
  - Traveled the journey from ignorance to understanding.
  - Practice health consciousness as a way of life.
  - Prioritize organic and wholesome foods,
  - Regularly engage in physical and mental wellness activities
  - Advocate for a holistic approach to health, often guiding or mentoring others.
- Elevated Insights-
  - Curious and open-minded
  - Recognize the pitfalls of their personal habits
  - Joined a gym or attended yoga class
  - Starting to make better choices, though occasionally wavering
- Buried Oblivion-
  - Individuals are unaware of their true health potential
  - Rely on quick fixes, myths, and are often stuck in old ways, resisting change.
  - Individuals navigate without clarity, often ensnared by health myths and uninformed choices.

THAT MOMENT WHEN YOU'RE WORRIED ABOUT THE ELDERLY
www.Facebook.com/DadLaughing
THEN YOU REALIZE THAT YOU ARE THE ELDERLY

What is Aging?

- What naturally occurs with the passage of time
- Versus the effects of disuse and disease
- Modifiable risk factors?
- Can we be chronologically one age and biologically another?
- Effects of food and exercise?
- Keeping the brain healthy
- Can we keep them biologically younger?


WILFORD BRIMLEY
AT 50
TOM CRUISE
AT 56


AGE 25
AGE 5

Biomarkers of Aging

- Loss of strength
- Reduced flexibility
- Increased body fat
- Diminished kidney function
- Compromised vision
- Decreased hormone levels
- How healthy is their gut? – constipation, reflux

Comprehensive lab panel -$399 self pay

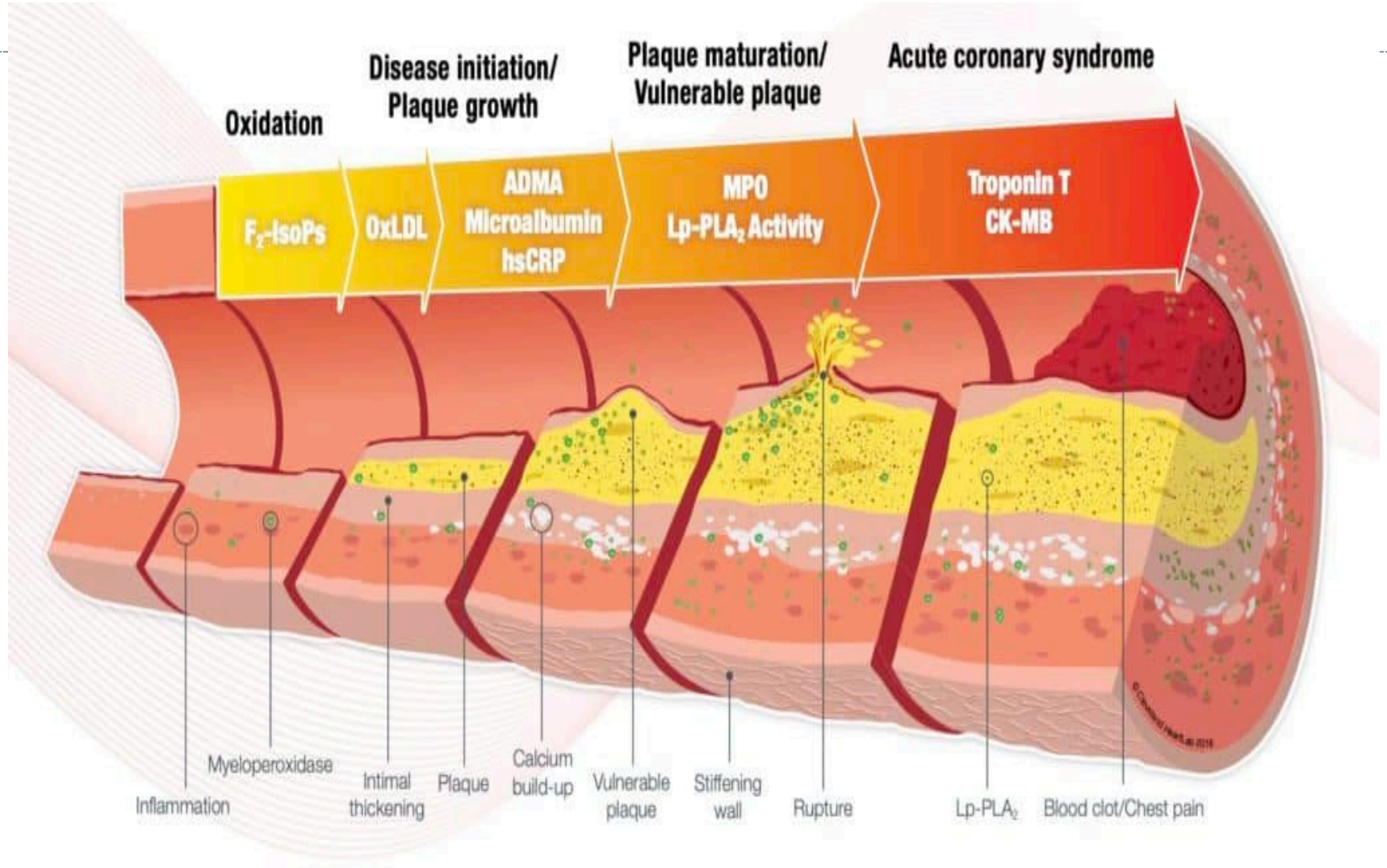
- CBC
- CMP
- A1C
- INSULIN
- FERRITIN
- TSH
- FREE T4
- FREE T3
- TPO ANTIBOIDES
- HS-CRP
- B12/FOLATE

- FSH
- ESTRAIOL
- PROGESTERONE (WOMEN)
- TOTAL TESTOSTERONE (WOMEN)
- TOTAL/FREE TESTOSTERONE (MALES)
- LIPIDS

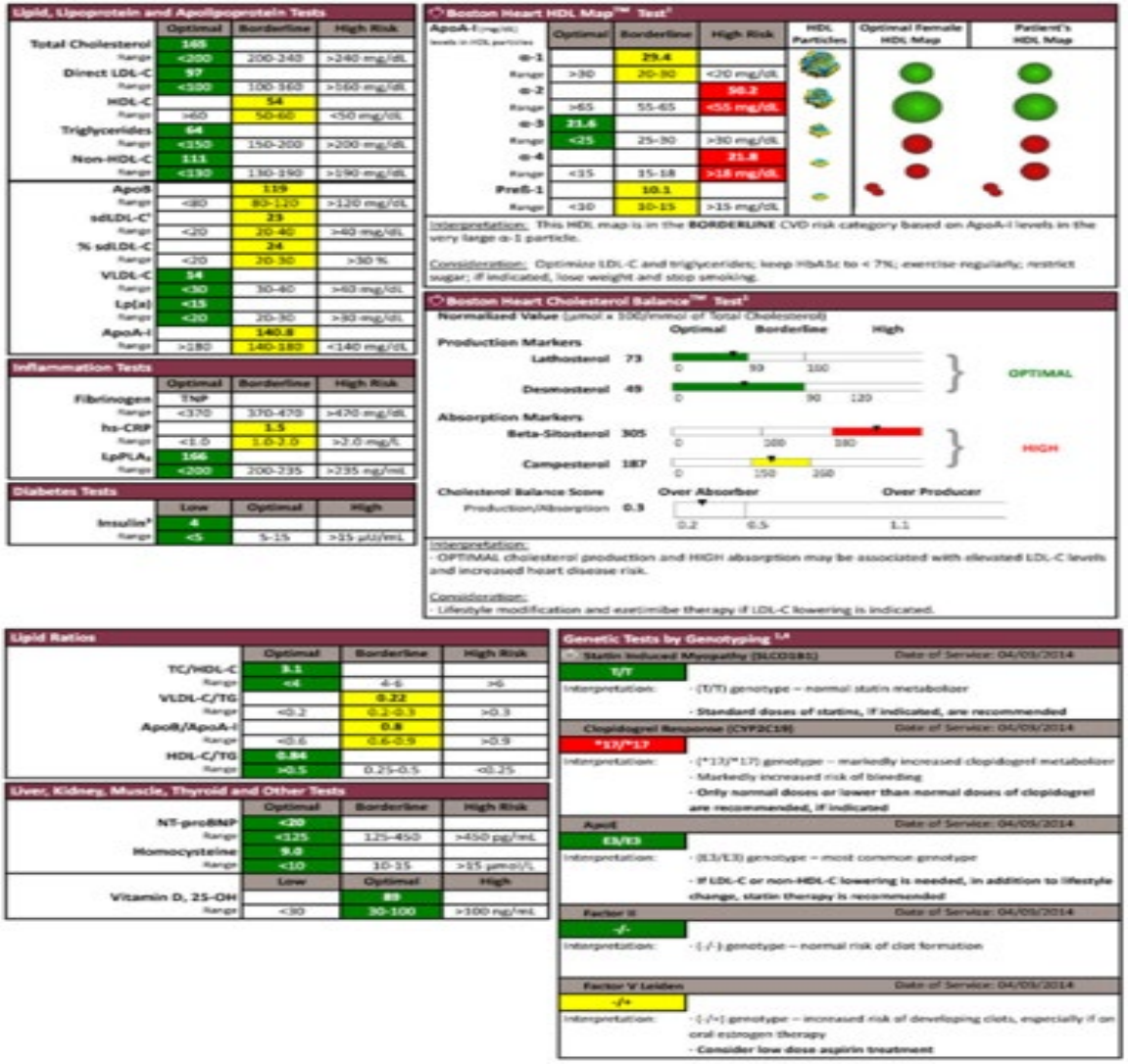
OPTIONAL ADD-ON TESTS

- SHBG
- PSA
- REVERSE T3
- TOTAL T4
- TOTAL T3
- HOMOCYSTEINE
- TIBC
- AM CORTISOL
- PROLACTIN
- EBV
- THYROGLOBULIN ANTIBODY
- IRON

Cleveland Heart Lab



Boston Heart Lab



Lipid, Lipoprotein and Apolipoprotein Tests

	Optimal	Borderline	High Risk
Total Cholesterol	165		
Range	<200	200-240	>240 mg/dL
Direct LDL-C	97		
Range	<100	100-160	>160 mg/dL
HDL-C		54	
Range	>60	50-60	<50 mg/dL
Triglycerides	64		
Range	<150	150-200	>200 mg/dL
Non-HDL-C	111		
Range	<130	130-190	>190 mg/dL
ApoB		119	
Range	<80	80-120	>120 mg/dL
sdLDL-C*		23	
Range	<20	20-40	>40 mg/dL
% sdLDL-C		24	
Range	<20	20-30	>30 %
VLDL-C	14		
Range	<30	30-60	>60 mg/dL
Lp[a]	<15		
Range	<20	20-30	>30 mg/dL
ApoA-I		140.8	
Range	>180	140-180	<140 mg/dL

Inflammation Tests

	Optimal	Borderline	High Risk
Fibrinogen	1hP		
Range	<370	370-470	>470 mg/dL
hs-CRP		1.5	
Range	<1.0	1.0-2.0	>2.0 mg/L
$LpPLA_2$	166		
Range	<200	200-235	>235 ng/mL

Diabetes Tests

	Low	Optimal	High
Insulin*	4		
Range	<5	5-15	>15 µU/mL

Boston Heart HDL Map™ Test*

ApoA-I (mg/dL) levels in HDL particles	Optimal	Borderline	High Risk	HDL Particles	Optimal Female HDL Map	Patient's HDL Map
α-1		29.4				
Range	>30	20-30	<20 mg/dL			
α-2			50.2			
Range	>65	55-65	<55 mg/dL			
α-3	21.6					
Range	<25	25-30	>30 mg/dL			
α-4			21.8			
Range	<15	15-18	>18 mg/dL			
PreB-1		10.1				
Range	<10	10-15	>15 mg/dL			

Interpretation: This HDL map is in the **BORDERLINE** CVD risk category based on ApoA-I levels in the very large α-1 particle.

Consideration: Optimize LDL-C and triglycerides; keep HbA1c to < 7%; exercise regularly; restrict sugar; if indicated, lose weight and stop smoking.

Boston Heart Cholesterol Balance™ Test*

Normalized Value (µmol x 100/mmol of Total Cholesterol)

		Optimal	Borderline	High	
Production Markers					
Lathosterol	73	0 – 99	100		OPTIMAL
Desmosterol	49	0 – 90	120		
Absorption Markers					
Beta-Sitosterol	305	0 – 200	280		HIGH
Campesterol	187	0 – 150	200		
Cholesterol Balance Score		Over Absorber		Over Producer	
Production/Absorption	0.3	0.2 – 0.5		1.1	

Interpretation:
- OPTIMAL cholesterol production and HIGH absorption may be associated with elevated LDL-C levels and increased heart disease risk.

Consideration:
- Lifestyle modification and ezetimibe therapy if LDL-C lowering is indicated.

Lipid Ratios

	Optimal	Borderline	High Risk
TC/HDL-C	3.1		
Range	<4	4-6	>6
VLDL-C/TG		0.22	
Range	<0.2	0.2-0.3	>0.3
ApoB/ApoA-I		0.8	
Range	<0.6	0.6-0.9	>0.9
HDL-C/TG	0.84		
Range	>0.5	0.25-0.5	<0.25

Liver, Kidney, Muscle, Thyroid and Other Tests

	Optimal	Borderline	High Risk
NT-proBNP	<20		
Range	<125	125-450	>450 pg/mL
Homocysteine	9.0		
Range	<10	10-15	>15 µmol/L
	Low	Optimal	High
Vitamin D, 25-OH		89	
Range	<30	30-100	>100 ng/mL

Genetic Tests by Genotyping 1,4

Statin Induced Myopathy (SLCO1B1) — Date of Service: 04/03/2014

T/T

Interpretation:
- (T/T) genotype – normal statin metabolizer
- **Standard doses of statins, if indicated, are recommended**

Clopidogrel Response (CYP2C19) — Date of Service: 04/03/2014

*17/*17

Interpretation:
- (*17/*17) genotype – markedly increased clopidogrel metabolizer
- Markedly increased risk of bleeding
- **Only normal doses or lower than normal doses of clopidogrel are recommended, if indicated**

Apo E — Date of Service: 04/03/2014

E3/E3

Interpretation:
- (E3/E3) genotype – most common genotype
- **If LDL-C or non-HDL-C lowering is needed, in addition to lifestyle change, statin therapy is recommended**

Factor II — Date of Service: 04/03/2014

-/-

Interpretation:
- (-/-) genotype – normal risk of clot formation

Factor V Leiden — Date of Service: 04/03/2014

-/+

Interpretation:
- (-/+) genotype – increased risk of developing clots, especially if on oral estrogen therapy
- **Consider low dose aspirin treatment**

Inflammations' Role in Aging

- As we age, inflammation increases (increased cytokines)
- Produces a degeneration of tissues (Willard, et al., 1999)
- Inflammatory cytokines are destructive cell signaling chemicals
- TNF-a, Il-6, Il-1b, Il-8

Diseases Marked by Chronic Inflammation

- Atherosclerosis
- Cancer
- Congestive heart failure
- Diabetes
- Obesity
- Alzheimer's
- Stroke
- Heart valve dysfunction
- Covid

The Studies…

- JAMA 2001 (7/18), females with increased Il-6 were 7.5x as likely to develop diabetes
- Females with increased CRP were 15x more likely to develop diabetes
- AM Jn Med (Harris et al.,1999) increased CRP and Il-6 equals 2.6x greater death risk
- Walston (2002) increased inflammation equals increased rates of clotting and muscle weakness

Chronic Inflammation

- Imbalance of Omega 3 to 6
- Prehistoric times 1:1
- Current 25:1
- Occurs in brain, gut, arteries, skin, muscles, and other tissues
- Progression to most other diseases

How to Reduce Inflammation

- Mediterranean diet
- DHA and EPA
- Buffered Vitamin C
- DHEA
- X-Flame
- Vitamin K
- High soluble fiber
- Decreased total caloric intake
- Loose weight

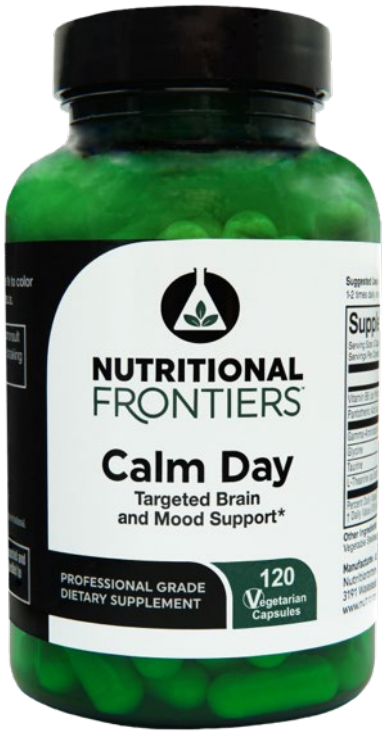
Put Out The Fire!

Buffered C Plus…Omegas…Super K Plus

The Power and Gift of Sleep

- Loss of sleep equals increased inflammation
- Loss of sleep equals reduced HGH
- Loss of sleep and Alzheimer's

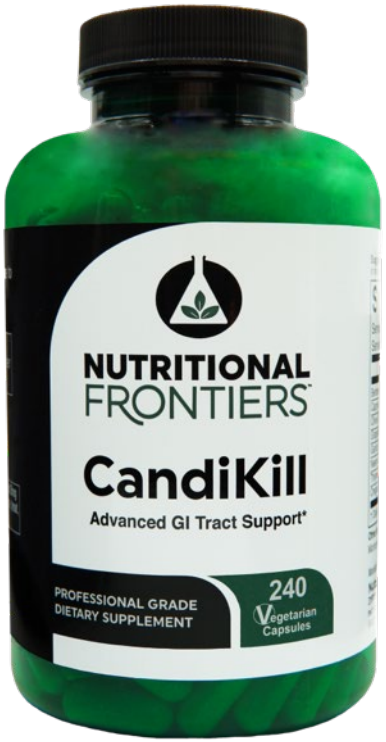
Sleep Time & Calm Day

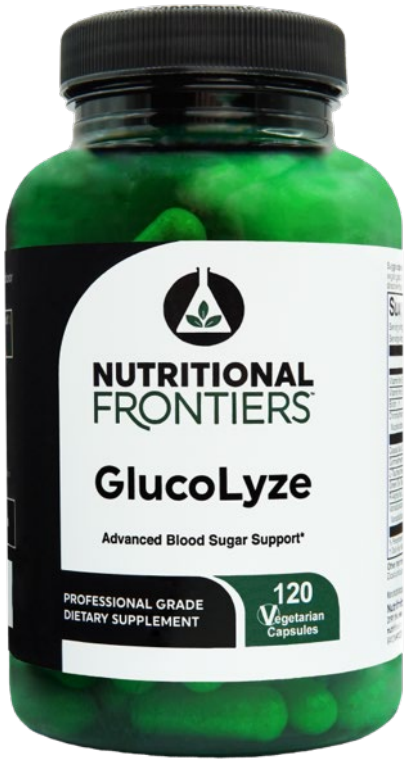


Rising Insulin and Glucose Levels

- Increase in inflammation
- Increase in blood pressure
- Dyslipidemia
- Increased fat deposition
- Decreased testosterone
- Decreased DHEA

CandiKill & GlucoLyze

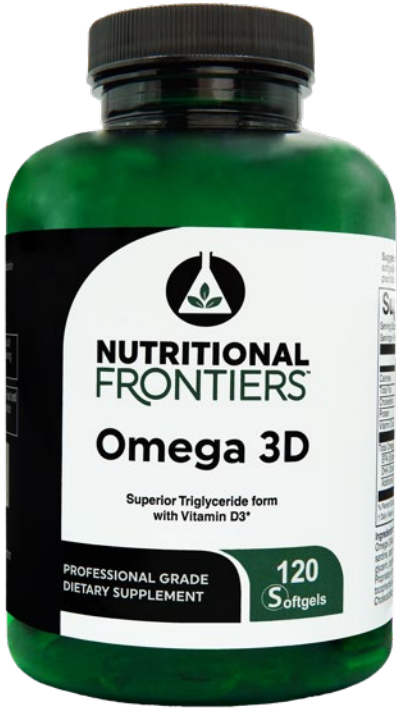




Metabolic Syndrome

- Dysglycemia
- Complex series of glucose reactions which leads to protein cross linking, leading to blood vessel hardening
- Sustained high insulin levels
- Value of Mediterranean diet
- Low HDL, high triglycerides
- Increasing blood pressure
- Increased visceral fat/weight gain

Seven Flowers/Omega 3D/CircuCORE



Glycation

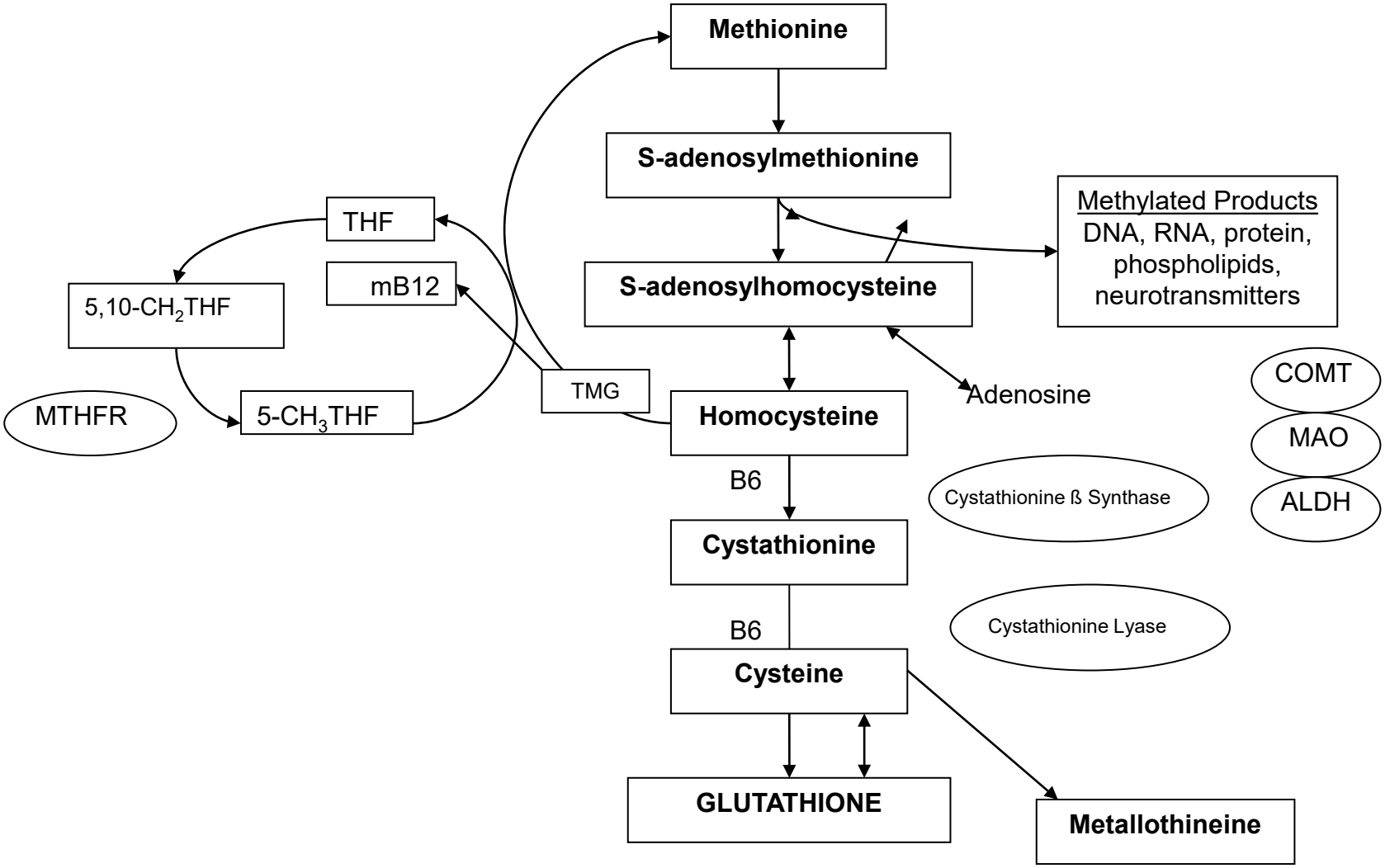
- Cellular cement
- End result of inflammation and high sugars and insulin
- Protein bound to excess sugars
- Speeds up aging process

LIPOFUSCIN

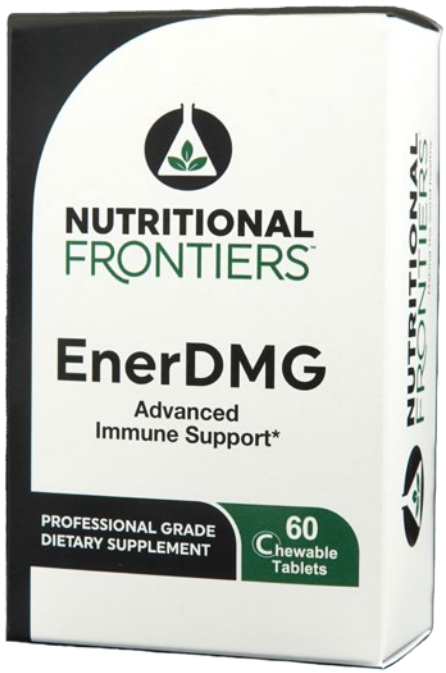
I will never regret getting old.
I know too many people who never had that privilege.

Altered Methylation

- Results from deficiencies in Vitamins B6, B12, and Folate
- Coronary artery disease, cerebral vascular disease, deep vein thrombosis, diabetes, rheumatoid arthritis, dementia, depression, osteoporosis, and other psych problems
- Need to do MTHFR testing


Methionine
S-adenosylmethionine
Methylated Products
DNA, RNA, protein,
phospholipids,
neurotransmitters
THF
mB12
5,10-CH2THF
S-adenosylhomocysteine
TMG
MTHFR
5-CH3THF
Homocysteine
Adenosine
COMT
MAO
ALDH
B6
Cystathionine ß Synthase
Cystathionine
B6
Cystathionine Lyase
Cysteine
GLUTATHIONE
Metallothineine

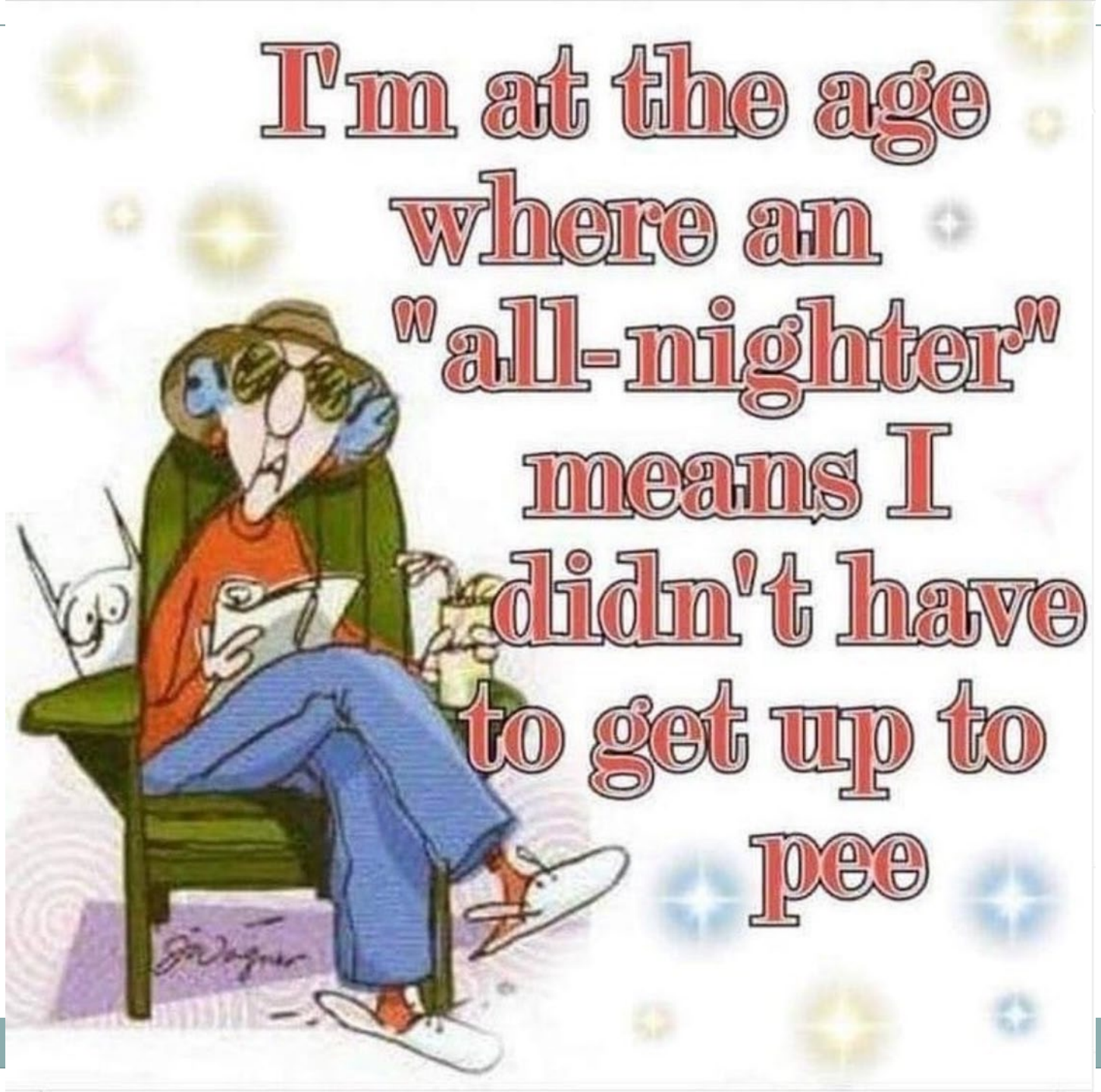
EnerDMG/Active B12 Folate/Super B Complete



Complementary Factors of Aging

- Maldigestion
- Leaky gut syndrome
- Poor micronutrient status
- Poor liver detox pathways
- Overburdened immune system
- Repair deficits
- Leads to aging
- We forgot how to laugh (it makes the best medicine)

Leaky Gut Syndrome?


I'm at the age where an "all-nighter" means I didn't have to get up to pee

Common complaints?

- Fatigue
- Sleep issues
- Low sex drive
- Low strength and stamina
- Weight gain
- Usually related to hormone imbalances or deficiencies, underactive thyroid, poor detox pathways, adrenal insufficiency (cortisol issues) and inflammation out of control, are they pooping??

Create Your Signature Program- You Need A Foundation

Issues concerning hormones in the elderly

- Consider that most hormone levels, by our late 50's, are GONE!!
- In peri-menopause, testosterone level decreases result in increase beta amyloid plaque
- Most levels have never been tested
- Median age of diagnosis of breast CA is 62?
- Testosterone protective of breast tissue
- 80-90% of elderly have underactive thyroid
- Is TSH the best we can do?

Hormone Issues

- Testosterone drops
- DHEA drops
- Cortisol increases
- Estradiol drops
- Progesterone drops
- DHEA/cortisol ratios suppress immune function
- Increase cortisol suppresses growth hormone
- Poor T4 to T3 conversion
- Hormone replacement therapy- Pellets, Creams, Troche, Patches

Hormone Issues in Men

- Testosterone is anabolic
- Cortisol is catabolic
- Importance of diet, exercise and hormone panels via saliva testing
- Testosterone drops starts very early in life
- Does COVID play a role
- Cholesterol's role in testosterone production
- Andropause is a real thing

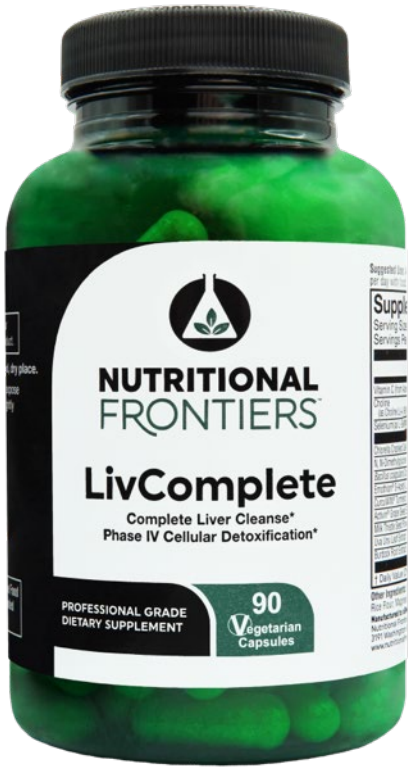
Hormones In Women

- Please check them in our older population!
- Optimize their testosterone levels- always use bioidentical hormones
- Symptoms of low testosterone
  - Fatigue, mood swings, irritability, weight gain, joint pain, trouble sleeping, low sex drive
- Sex in your 50's, 60's and beyond?

Compromised Detox Pathways

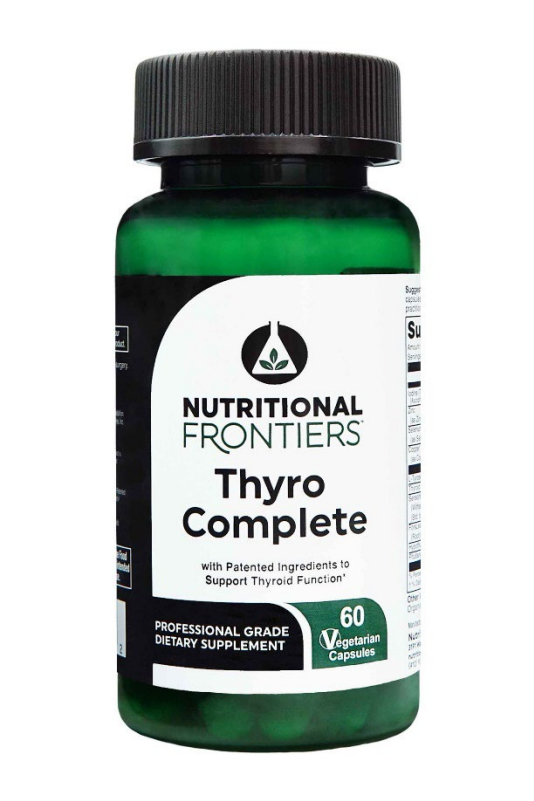
- Secondary to exposure to toxins, multiple medications, drugs, allergens
- Cytochrome p450 enzyme
- Leaky gut syndrome
- Malabsorption syndrome
- Adrenal stress can compromise
- Defense and repair mechanisms affected
- Reabsorption of hormone thru the gut wall??

LivComplete & Pro Lean Greens



THYROID

Thyro complete

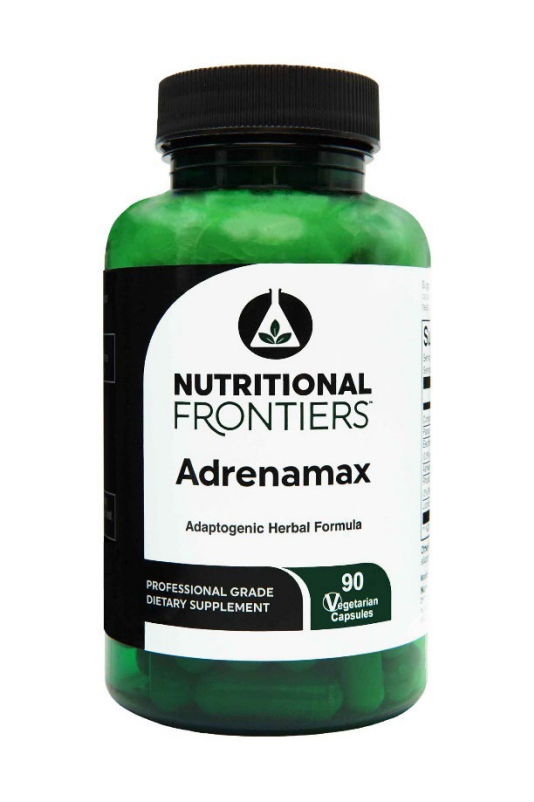


Overview

- Nutritional deficiencies
- Poor t4-t3 conversion
- Inflamed organ
- Low vitamin d levels
- Low testosterone
- Low ferritin
- Auto immune issues

ADRENALS

Adrenamax



Overview

- Tired/wired
- Weight issues
- Sleep disturbances
- Napping needed
- Depression/anxiety

Exercise

- Physical and mental inactivity common in aging
- Single most important factor in reducing risks
- Maintains cells' oxygen carrying capacity
- ½ hour/day, 3 days/week- lived average of 3 years longer
- 30-60 minutes of "blended" physical activity daily
- Stretching
- Resistance
- Cross train cognitive skills
- Consume adequate nutrients
- Find something you really enjoy doing

When a cougar gets so old she needs a hearing aid, she becomes a Def Leppard...

The Candida Connection

- Trillions of bacterium in digestive tract
- Supportive role in colon health
- Degrade toxins, synthesize vitamins, produce natural antibiotics
- If yeast grows unchecked…big problems
- Estimated to affect 65% of those over 55!!

Candida

Individual history issues

- Long time antibiotic use
- Use of oral steroids
- Diet low in fiber, high in sugar
- Any alteration of bowel micro biota
- Role of biofilms

Factors That Increase Risk

- A weakened immune system
- Hypothyroidism
- Diabetes
- Avoidance of alcohol
- Diet high in simple sugars
- Chronic stress
- Antibiotics

Related Conditions to Candida

- Eczema
- Psoriasis
- PMS, menorrhagia, interstitial cystitis
- Chemical sensitivity
- Irritable bowel syndrome
- Endocrine (hormone) disturbances
- Brain fog
- Bloating/constipation
- Thrush/vaginal issues/chronic UTI

Leaky Gut Syndrome

- The number one cause
- Combination of stress, low fiber, inflammation, and bad bacteria
- Compromised digestion and elimination
- Inflammation can cause swelling, infiltration, villus destruction, IGa depletion
- Malabsorption cascades yeast issues

Diagnosis

- Antibody titers IgG, IgM, IgA
- Comprehensive stool analysis (gut zoomer)
- OAT mosaic diagnostics
- Symptom questionnaire
- IgG elevated=past or ongoing candida
- IgM elevated=active infection
- IgA elevated=infection is superficial

Natural Anti-Yeast Agents

- Buffered Vitamin C
- Candi-kill
- Micro-gone
- Garlic
- Saccharomyces

TEST TIME!!!!!