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CCM NEWSLETTER

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Sneezes, Sniffles and Supplements

Now, more than ever, the grocery stores and pharmacies are stocked with over the counter remedies for your cold-weather ailments. A dizzying array of options may leave you feeling confused and penniless. Did you know that more than 4 out of 10 people have

increased their use of supplements since the start of the pandemic?¹ You are not alone in wondering what all these supplements do, and more importantly if you should take them. Before we begin, it is important to note that there is NO SCIENTIFIC EVIDENCE that any alternative remedies can prevent or treat COVID-19. For simplicity sake, let's break up the supplements we will be discussing into two groups: the immune boosters and the anti-virals.

Certain “immune boosters” you may hear about are colloidal silver, echinacea, green tea, selenium, Vitamin C and D.

The “anti-viral” cast of characters include elderberry, garlic, oleander, quercetin or zinc.

While not all supplements are bad, there are some you should avoid.

- 1.) Colloidal Silver: You could run the risk of a blue-gray discoloration, seizures, and liver or kidney harm.

¹ Prescriber's Letter October 2020 Vol 27 No 10

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- 2.) Oleander: It's poisonous. It contains oleandrin, which can cause fatal heart rhythms. There is no oleander supplement, but it is a common flowering shrub. Do not consume any part of this plant.
 - 3.) Zinc: This is acceptable in the oral form, but the nasal spray can lead to permanent loss of smell.

Limit the use of green tea (beverage) to 8 cups a day, mainly for caffeine dosage. Exercise caution with green tea extract, it is possibly safe when used as directed, but some studies have shown some liver damage. So avoid it all together if you have any liver problems.

Elderberry: the supplement that broke social media! Its resurgence as a cold/flu remedy has had many of us try to brew up a batch of this magical syrup. Hold your spoon for a second- elderberry is *possibly* safe. Raw or unripe fruit parts or other parts of the plant beside the fruit should NOT be eaten.² The plant has a cyanide producing chemical that can be toxic if not cooked well. Bottom line- Don't make it at home!

Products like American ginseng, garlic and echinacea are likely safe when taken orally and as directed.

If you are going to use selenium, Vitamin C, D, E- I would recommend to stick with doses that are recommended on the bottle. Vitamin C, Vitamin D and Zinc are being looked at as potential preventative or treatment aides for COVID-19.³ NO conclusions or preliminary results have come out.

Are Your Vaccines Up to Date?

Don't feel like you need to avoid any vaccines during the COVID-19 pandemic. Vaccines don't weaken the immune system or make you susceptible to other viruses. You should schedule an appointment for your flu vaccine this month. Remember, the flu vaccine reduces the risk of flu hospitalizations and death.

² RC Healthcare. Elderberry. [Natural Medicines website]. May 13, 2020.

³ www.clinicaltrials.gov

Currently, there is no COVID-19 vaccine on the market. Preliminary testing indicates that a COVID-19 vaccine MAY require 2 doses a few weeks apart and will most likely need to be kept frozen. There are many different vaccine types that are being tested currently, but none that are approved for widespread use.

Physical Fitness Check-In

How is everyone doing with their fitness goals they made last month? I know that some of you may be dealing with chronic low back pain, neck pain, hip and knee osteoarthritis or fibromyalgia. Those are pretty common reasons for musculoskeletal pain- and unfortunately can keep people from being physically active. While no single therapy has shown consistent benefit, systematic reviews and guidelines support the effectiveness of various forms of exercise in improving pain and function in individuals with chronic pain.

Chronic Back Pain: Exercise can lead to a small improvement in pain in the short term and more moderate improvement in the long term. Focused exercises, initially guided by a physical therapist, is recommended. Continuation of those exercises independently will allow for those deep muscles supporting the spine to maintain their strength and continue to help with back pain and function.⁴ Activities like yoga or Tai Chi have also shown to be of benefit.

Chronic Neck Pain: General exercise really won't address that type of pain, but specific exercises of the neck, upper back and shoulders will reduce neck pain. Again, an initial consult with a physical therapist can give you some great focused exercises that you can continue on your own.

Hip and Knee Osteoarthritis: Many clinical trials have been done trying to find the magic bullet for these maladies. So, here's the deal, exercises result in small to moderate improvement in function and *maybe* pain in the short and

⁴ Pangarkar SS, Kang DG, Sandbrink F, et al. VA/DoD Clinical practice guideline: diagnosis and treatment of low back pain. *J Gen Intern Med.* 2019;34(11):2620–2629.

intermediate term.⁵ ⁶It's kind of a mixed bag for knee and hip arthritis. This is where the multi-approach treatment plan really works.

Fibromyalgia: Several systematic reviews support exercise for fibromyalgia. While general exercise may not lead to improvement in pain or function in the long term, specific exercises such as lifting weights, walking, and water exercise all can give small improvements.⁷ Yoga can improve pain, fatigue, depression and function.

Our plea to have you become more physically active does not mean you must train for a 5K or become a master in tennis, but we know that regular engagement in physical activity through exercise, physical therapy and other movement exercises (yoga, tai chi) is among the most consistently beneficial approaches for treating chronic musculoskeletal pain. You should engage in the type of low-impact exercise that you prefer and enjoy for at least 30 minutes daily. This will be the foundation for your improved health and management of any chronic pain.

We wish you health and happiness as we enter this holiday season. The clinic is open during its usual hours Monday- Friday and Dr. Duchicela is available for telemedicine visits for your convenience and safety.

⁵ Goodman F, Kaiser L, Kelley C, et al. VA/DoD clinical practice guideline for the non-surgical management of hip and knee osteoarthritis. Department of Veterans Affairs, Department of Defense; 2014.

⁶ Fransen M, McConnell S, Harmer AR, et al. Exercise for osteoarthritis of the knee. *Cochrane Database Syst Rev.* 2015;(1):CD004376.

⁷ Busch AJ, Webber SC, Richards RS, et al. Resistance exercise training for fibromyalgia. *Cochrane Database Syst Rev.* 2013;(12):CD010884.