



Dr. Sears'

CONFIDENTIAL CURES

Your Guide to Truth and Lies in
Medicine from Around the World

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Dear Friend,

There's an epidemic of drug use in this country. And I don't mean illegal party drugs. I'm talking about drugs that are authorized by the FDA.

Nearly 70% of Americans take at least one prescription drug every day. More than 25% take three or more a day. And the problem continues to worsen.

In the last two decades, the number of prescriptions Americans filled soared 85% — from 2.4 billion to 4.5 billion, according to the health research firm IQVIA.

And that's just prescription medications. It doesn't consider any of the over-the-counter drugs you can buy at any Walgreens.

In modern times the main focus of a doctor visit is to make a diagnosis. The main purpose of the diagnosis is to decide which drug to prescribe.

I admit, numbers like these make my blood boil, but they don't surprise me...

After all, 84% percent of doctor visits end with a patient being handed a prescription for one of the more than 20,000 FDA-approved drugs.^{1,2}

Now, I'm not here to blame your doctor. Pharmaceutical companies tell physicians that their medications work... That they are safe, they alleviate disease, and that they save lives. And doctors believe them.

As a reader of this newsletter, you know I have a different way of addressing health. I only prescribe Big Pharma's drugs for an acute problem. The majority of them are dangerous, cause terrible side effects — and in most cases, are complete failures for long-term or chronic diseases.

Obviously, drugs aren't natural. I've been saying for years that we don't know how the full extent of how these synthetic prescriptions — lab created "alien molecules" that have never existed before — will harm us.

But we do know that these drugs create a toxic burden in your body while accelerating the problems of aging.

And here's one more piece of evidence that we never know what these foreign chemicals do in our bodies:

Over the past year, the FDA admitted that more than 2.2 million Americans were hurt by prescription drugs, and 106,000 died. It's further proof that the agency that's supposed to protect us puts the interest of Big Pharma ahead of your well-being.

But as long as I'm a doctor, I'm going to keep telling you about natural treatments that can save your life and protect your health.

That's the theme of your June *Confidential Cures*. In this issue, you will learn:

- **How you can replace deadly pain pills** with one of nature's most powerful medicinal plants. This herbal treatment is so effective — and so safe — that Big Pharma calls it their "worst nightmare."
- **Which dangerous and ineffective yet highly profitable drug** the medical-industrial complex is pushing as a new depression "cure." You'll discover that this pill not only *doesn't* cure depression, it can actually *cause* it. You'll also discover nature's proven
- **Why the biggest new anti-aging "wonder drug"** is actually accelerating some of the worst conditions we associate with aging — including Alzheimer's, heart disease, and Parkinson's disease. I'll share four natural alternatives that can rewind your aging clock while protecting against inflammation and improving cognitive function.

To Your Good Health,

Al Sears, MD, CNS

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2. <https://www.singlecare.com/blog/news/prescription-drug-statistics/>

End Crippling Pain With Nature's Most Versatile Medicinal Plant

If you thought the opioid crisis in America was winding down, you're not alone.

For the last two years, the mainstream media has pretty much ignored this epidemic. They've been far too busy pushing mask mandates and vaccines.

But in 2021, another 107,000 lives were lost to this epidemic. That's a nearly 15% increase from the previous record, which was set the year before.¹

That translates to roughly one U.S. death every five minutes.

And another 700,000 are projected to die from opioids in the next decade. That will bring the total death toll to 1.4 million.^{2,3}

All because Big Pharma wanted to make obscene amounts of money.⁴

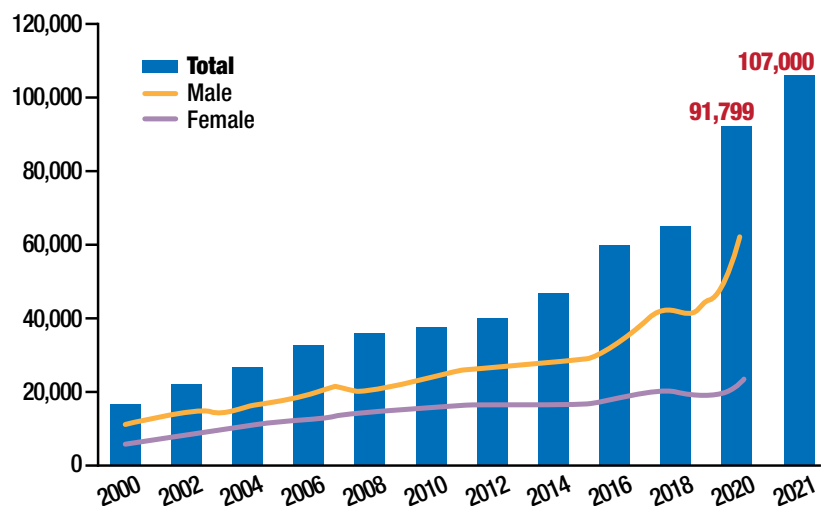
For almost 30 years, the giant drug conglomerates turned America into one giant "pill mill." They churned out 1 billion painkillers a year.⁵ They bribed thousands of doctors to push their poison.⁶

And their friends in the FDA gave them a license to kill.⁷

Today, an estimated three million people in the country continue to suffer from a crippling opioid addiction...

But Big Pharma isn't finished making money off the crisis. I guess the \$12 trillion they already made isn't enough.⁸

America's Opioid Death Rate Continues To Climb



Opioid-related deaths hit a record high in 2020. But in 2021, that record was broken as the number of deaths spiked an additional 15% — to 107,000.

Now, the same industry that got us into this catastrophe thinks they have the solution. And once again, their cronies at the FDA are supporting them all the way.

Just recently, the Food and Drug Administration allowed a new CBD-based drug therapy for opioid addiction to move forward in clinical trials.

Pharma scientists say they're "hopeful" that this new prescription will be the game-changer we've been waiting for.

What they're really hoping for is that it will make them a boatload of money. That way, they can profit off the very problem they created!

Nantheia ATL5, the name of the drug moving forward in clinical trials, is a liquid formula containing high levels of CBD.

So what makes their potential new drug different from the CBD you can already take? Besides the outrageous price tag you'd better believe they'll charge.

The only real difference is the delivery method they've patented. Their "liquid structure technology" promises to make CBD more absorbable.

But the technology to get CBD where it's needed already exists. More on this in a moment. First, let's see what makes CBD such a powerful tool in the fight against opioid addiction.

Discover What Makes CBD So Powerful

A placebo-controlled study published in the *American Journal of Psychiatry* indicated that CBD can reduce cravings for opioids. Patients who received CBD experienced far fewer withdrawal symptoms, while those that received a placebo or no treatment at all saw no change.⁹

Two additional studies looked at what happened with opioid use after Congress legalized CBD and other cannabinoids. Both studies found that as more people turned to CBD, opioid use dropped dramatically.

And opioid-related deaths decreased by a whopping 35%.¹⁰

But even more important is the research that finds CBD can relieve even the most crippling pain and the inflammation that causes it. CBD alleviates pain and the sensation of pain by stimulating the reuptake of a pain-relieving neurotransmitter called adenosine. This boosts adenosine levels in the brain and inhibits pain sensations.

CBD may also block pain signals from reaching processing centers in the brain by binding to TPRV1, which is responsible for pain and inflammation.^{11,12,13}

According to another study published in the *European Journal of Internal Medicine*, 20% of CBD oil users were able to quit taking opiates.¹⁴ Like Hope Bobowski.

From Skeptic To Advocate: How One Woman Cured Her Crippling Osteoarthritis Pain

Hope's osteoarthritis back pain was so severe that on most days she could hardly move. Her husband Stan had to help her get out of bed, dress her, and take care of all the cooking.

The 80-year-old great-grandmother was swallowing up to six prescription-strength painkillers every day.

"I was going downhill fast," she admits.

When It Comes To Medical Marijuana, Buyer Beware

For thousands of years, cannabis was used to treat everything from pain and indigestion to infected wounds and tuberculosis.

But the cannabis many distributors sell today bears little resemblance to the medicinal herb our ancestors used.

Modern marijuana — even some that is sold in a dispensary — contains a dangerous amount of THC. In the past, THC levels were between 2% and 5%. Today, some products contain up to 90%!



Some sellers even compete over developing a product that can knock you out the fastest.

Today's cannabis can send users on a bad THC trip. According to a 2019 study published in *The Lancet*, using it may lead to::

- Brain toxicity
- Behavioral problems
- Mental health issues
- Addiction
- Increased violence — and maybe even mass shootings

It just goes to show what can happen to a proven natural cure when it gets corrupted by people who put profit over health.

But what bothered Hope the most was that she couldn't participate in her favorite activities — working in her garden, card games with her friends, doing puzzles at the dining room table and, most importantly, playing with her great-grandkids.

“Since she started taking this miracle oil, she has stopped using all of Big Pharma’s painkillers.”

One night, as Hope and her husband sat down to watch TV, a show came on explaining the benefits of a miracle treatment called cannabidiol.

Stan suggested she try it to ease her chronic pain.

Hope’s first reaction was “No way. I’m not having anything to do with cannabis.”

She’d been brought up with the strong belief that “you didn’t go around doing drugs.”

Until she realized that her Tylenol 3 contained codeine, an opioid narcotic. And her doctor was recommending she switch to a stronger prescription opioid painkiller like OxyContin.

Hope considered her options. And decided she was likely to end up hooked on opioids. She decided to give the CBD oil a shot.

So she tried 10 drops. And the next day, “there was no pain.”

Since then, this great-grandmother takes a spoonful of CBD oil every night before bed.

And since she started taking this miracle oil, she has stopped using all of Big Pharma’s painkillers.

Today, she’s an advocate for CBD oil, and as she puts it: “I’m spreading the word.”

And Hope isn’t alone. Seniors are the fastest-growing group of cannabis users. In fact, according to a recent study, medical use of the plant has increased 250% for those over the age of 65.¹⁵

CBD is leading the largest pain relief revolution we’ve seen since a Bayer chemist invented aspirin in the late 1890s to alleviate his father’s painful rheumatoid arthritis.

Millions of pain sufferers — like Hope — are turning to this all-natural oil to treat their pain instead of dangerous and addictive opioids.

In fact, two new studies have found that in every state that has legalized cannabinoids, opioid use has dropped dramatically. Both studies were published in the prestigious *Journal of the American Medical Association*.

In the first five-year study, researchers reported that prescription opioid use fell a stunning 6.38%.

In the second study, researchers found that the daily doses of any opioid dispensed per year dropped by almost 4 million when patients had access to cannabis.¹⁶

And according to new research published in the *European Journal of Internal Medicine*, 20% of CBD users quit taking opiates.¹⁷

In this breakthrough study, 2,700 elderly patients treated their cancer pain with CBD. After six months, almost everyone in the study reported successful results. Their chronic pain was cut in half — with no side effects. Nearly everyone reduced their painkiller use and many quit using opiates entirely.

This study was so effective, it led researchers to call CBD oil Big Pharma’s “worst nightmare.”

Maximize Your Body’s Absorption Of CBD

Big Pharma is hoping to cash in on a real problem with CBD – its lack of bioavailability. It’s true that many CBD users are getting just a fraction of this healing herb’s benefits.

That’s because most CBD doesn’t reach its intended destination: the cell receptors that make up the body’s endocannabinoid system.

In fact, the most common kind of CBD delivery system — oil — does NOT reach the cell membrane. That means you’re not getting all of the benefits of CBD.

I’ve discovered that an oral spray that uses nanotechnology is the most bioavailable. That’s because it’s a quicker, more direct route to the bloodstream, and it avoids the liver’s “first pass” effect, which lowers CBD bioavailability.

In fact, nanotechnology gets 1,500% more CBD past your cell membranes.¹⁸

To get maximum benefit, spray the liquid under your tongue, hold it without talking for 60 seconds and then swallow.

Here are a couple more ways to increase absorption.

1. **Look for full-spectrum CBD.** Terpenes are fatty oils found in the essential oils of almost all plants. They occur naturally in cannabis and are extracted along with CBD and other compounds to create full-spectrum CBD products. These compounds work together and amplify each other's benefits, a synergy known as the "entourage effect." Terpenes increase CBD bioavailability and enhance the therapeutic effects of cannabinoids.

2. **Take it with healthy fats.** CBD is a fat-soluble compound, meaning it dissolves in fats. This breaks CBD down into smaller molecules that are more easily absorbed by the body. One way to increase CBD's bioavailability is to mix it with a healthy high-fat snack or meal. A recent study found that people who took CBD with high-fat foods increased their absorption up to 14 times more than those who took it on an empty stomach.¹⁹

Know What You're Getting Before You Buy

I feel good about recommending CBD to my patients because I know where it's coming from and I trust the source. But I was dismayed with the latest research I uncovered a couple days ago.

The report came from an independent testing lab in California that looked at the quality and label accuracy of numerous CBD products for sale.

The results were shocking.

The lab found that 42% of the CBD samples exceeded legal limits for pesticides and heavy metals. One product alone contained 17 different pesticides in amounts that were hundreds of times over the legal limits.²⁰

This report backs up earlier research from Oregon State University. That study found 50 different pesticides in the CBD products they sampled.²¹ And nine of those were considered *extremely hazardous* by the World Health Organization (WHO).

Some of these include:

- **Bifenthrin** – This possible carcinogen can cause tingling, burning, itching, and numbness when it comes in contact with skin. When inhaled, it can irritate the nose, throat, and lungs.
- **Imazalil** – The WHO classifies this fungicide as a carcinogen. But it is also an endocrine disruptor that throws your body's hormones out of whack. It leads to obesity, estrogen dominance, loss of libido, birth defects, developmental problems, and cancer.
- **Paclobutrazol** – Used to increase crop productivity, paclobutrazol is a risk to humans, animals, and the environment. It's been documented to be toxic to the developing heart, eyes, liver, pancreas, intestine, and other organs of zebrafish. (Zebrafish are a globally accepted model in toxicological research.)

This is just a sample of what was found. Other toxins discovered in the CBD samples were trifloxystrobin, imidacloprid, daminozide, cyfluthrin – and the list goes on.²²

The independent lab study also found heavy metal contaminants in the CBD they tested. In fact, one product contained 6.5 parts per billion (ppb) of lead — **13 times over** what is allowed!

In addition to lead, other highly toxic heavy metals discovered in CBD were arsenic, mercury, and cadmium.

Follow These Four Tips To Ensure Your CBD Is Safe

It's so important to know and trust the source of your CBD. Here's how to know your product is safe:

1. **Avoid CBDs that are made using chemicals** like propane, butane, pentane, or hexane as they can leave behind dangerous contaminants
2. **Look for a Certificate of Analysis.** It should be printed on the bottle or label. Every COA verifies that the ingredients have been tested to prove they contain the proper contents in their proper quantities. But COAs also tell you what's not in the ingredients. They confirm they've been tested and found to be free of toxic heavy metals.

3. **Read the ingredient list.** Look for products with high-quality ingredients. Avoid corn syrup, GMOs, pesticides, trans fats, or artificial additives.

4. **Don't buy "cheap" products.** It's expensive to produce high-quality CBD. Super low prices, like you find in gas stations or convenience stores, should be a red flag to stay away.

References

1. "US Overdose Deaths Hit Record Last Year." <https://www.usnews.com/news/health-news/articles/2022-05-11/us-overdose-deaths-hit-record-107-000-last-year-cdc-says>
2. Galvin G. "In Fight Against Opioid Crisis, Targeting Prescription Drugs Is Largely Futile." *USA Today*. Feb. 1, 2019. Accessed on June 1, 2022.
3. Centers for Disease Control and Prevention. "Drug Overdose." www.cdc.gov/drugoverdose/index.html June 1, 2022.
4. Huecker, Martin R, et al. "Opioid Addiction." *NIH.gov*. StatPearls Publishing, 28 Feb. 2019, www.ncbi.nlm.nih.gov/books/NBK448203/.
5. Rich S, et al. "More than 100 billion pain pills saturated nation over nine years." www.washingtonpost.com/investigations. 2020.
6. "Top Executives of Opioid Company Are Found Guilty of Racketeering." 2019. *New York Times*. Accessed on June 1, 2022.
7. Goodnough A. "As Tens of Thousands Died, FDA Failed to Police Opioids." *New York*

Times. Dec 2019. Accessed on June 1, 2022.

8. Hurd Y, et al. "Cannabidiol for the reduction of cue-induced craving and anxiety in drug-abstinent individuals with heroin use disorder: a double-blind randomized placebo-controlled trial." *Am J Psych*. 2019;176(11): 911-922
9. Chan N, et al. "The effects of recreational marijuana legalization and dispensing on opioid mortality." *Economic Inquiry*. 2020;58(2): 589-606.
10. Yamaoka G, et al. "Different analgesic effects of adenosine between postoperative and neuropathic pain." *J Orthop Sci*. 2013;18(1):130-136.
11. De Petrocellis L, et al. Effects of cannabinoids and cannabinoid-enriched Cannabis extracts on TRP channels and endocannabinoid metabolic enzymes. *Br J Pharmacol*. 2011;163(7):1479-1494.
12. De Gregorio D, McLaughlin R, Posa L, et al. "Cannabidiol modulates serotonergic transmission and reverses both allodynia and anxiety-like behavior in a model of neuropathic pain." *Pain*. 2019;160(1):136-150.
13. Abuhasira R, et al. "Epidemiological characteristics, safety and efficacy of medical cannabis in the elderly." *Eur J Intern Med*. 2018;49:44-50.
14. Han BH, et al. "Demographic trends among older cannabis users in the United States, 2006-13." *Addiction*. 2017 Mar;112(3):516-525.
15. Wen H and Hockenberry JM. "Association of medical and adult-use marijuana laws with opioid prescribing for Medicaid enrollees." *JAMA Intern Med*. 2018;178(5):673-679.
16. Abuhasira R, et al. "Epidemiological characteristics, safety and efficacy of cannabis in the elderly." *Eur J Intern Med*. 2018;49:44-50.
17. Cherniakov I, et al. "Piperine-pro-nanolipospheres as a novel oral delivery system of cannabinoids: Pharmacokinetic evaluation in healthy volunteers in comparison to buccal spray administration." *J Control Release*. 2017;266:1-7.
18. Birnbaum AK, et al. "Food effect on pharmacokinetics of cannabidiol oral capsules in adult patients with refractory epilepsy." *Epilepsia*. 2019;60(8):1586-1592.
19. SL Labs. "Hemp-derived CBD products analyzed to CA cannabis compliance standards." 2021.
20. Evoy R and Kincl L. "Evaluation of pesticides found in Oregon cannabis from 2016 to 2017." *Ann Work Expo Health*. 2020 Aug 6;64(7):770-774.
21. Miller G. "Meeting the Challenges for Growing Hemp." Accessed on June 1, 2022.

Cholesterol-Lowering Drugs Cause Depression...

But Big Pharma Wants To Market Statins As A Brain “Cure”

Big Pharma is once again proving they are happy to put profits ahead of your health.

Apparently, the medical establishment isn't satisfied with selling unnecessary, cholesterol-killing drugs just to heart disease patients. Now they're trying to persuade adults living with depression that they need this pill too.

For as long as I can remember, statins have been hailed as a wonder drug. Since their approval in the late 1980s, they've been sold to tens of millions of people with the promise to prevent heart attacks and strokes.

As I've been telling my patients for years, “Stop taking statins immediately. If you have any left, throw them in the trash.”

And suddenly, I'm no longer standing all alone...

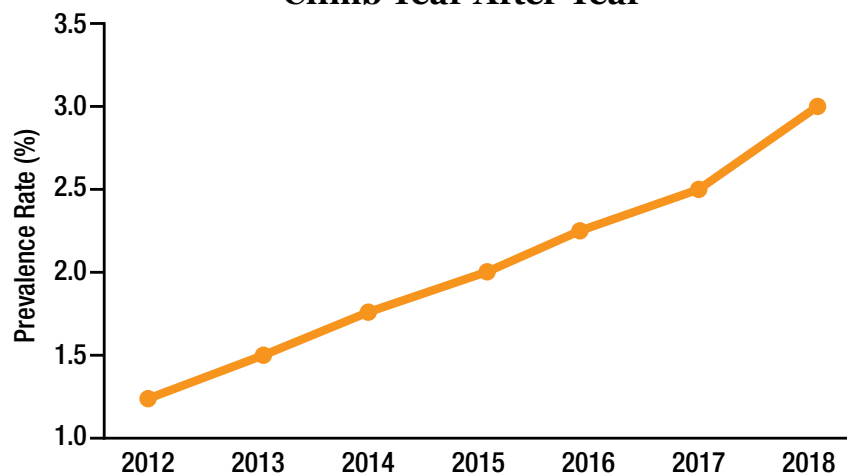
New York State University School of Medicine researchers reached the same conclusion after studying medical data from 2,867 adults over the age of 65. All were living with high blood pressure, but only half of them were on statins.

The researchers tracked deaths from any cause over an eight-year period — and statins didn't do a single thing to help healthy seniors.

Those taking statins had the same number of heart attacks and strokes as those who were statin-free.

But the death rate for all causes was 18% higher in the statin group.¹

Statin Prescriptions Continue to Climb Year After Year



Statins don't protect you from a heart attack. These drugs actually weaken your heart muscle. But, the number of new prescriptions written each year continues to increase.

The takeaway from this study is simple — there's no reason for healthy seniors to be on statins. But if you're a man aged 60 or older, your chance of being put on these drugs sits at an astonishing 87%.²

Big Pharma Pushes Statin Drugs For Depression

Now, Big Pharma is trotting around a new study hyping up the potential for statins as a treatment for depression.

Here we go again...

The study in question examined the influence of statins on emotional bias, a sign of depression risk.

According to the researchers, statin use was associated with reduced recognition of angry and

fearful faces. The drugs were also linked to reduced learning about stimuli associated with loss.³

Now, if you're looking at these findings and asking yourself what this has to do with treating a mental illness, congratulations — you have more sense than some of these scientists.

Just like with heart disease, Big Pharma gets it completely wrong about what depression is, and what causes it. Once again, the medical establishment's solutions cause more problems than they solve.

Cholesterol-Lowering Drugs Can Cause Depression

Statins were designed to do one thing — lower the amount of cholesterol in your body.

You know that lowering your cholesterol won't prevent heart attacks. But it can cause depression.

According to a study published in the journal *Psychiatry*, serum cholesterol levels below 160 are strongly linked to depression. Women and seniors are particularly vulnerable.⁴

And yet, Big Pharma is dead set on killing cholesterol to treat depression — even though science makes it clear they have it completely backwards.

Even the National Institute of Health admits patients receiving statins are prone to mood disorders. It's not just depression either. It can also include irritability, aggression, violent ideation, and even suicide contemplation.⁵

This doesn't mean there isn't anything we could be doing to help patients control their depression. We can and we should. But we don't have to support the \$29 billion industry Big Pharma has built for itself to do it.

Big Pharma's Big Antidepressant Failure

Regardless of what the establishment says, you don't need to destroy your cholesterol levels to control depression.

And you don't need Big Pharma's antidepressants either. Just like statins, these drugs fail to tackle the root of the problem.

“Doctors write more than 250 million prescriptions for SSRIs like Prozac, Zoloft, and Paxil every year.”

Let's take a look at Big Pharma's most popular kind of antidepressant — *selective serotonin reuptake inhibitors*, or SSRIs.

Most doctors will tell you depression is caused by a “chemical imbalance” in the brain that leads to low serotonin levels. And once you increase your serotonin levels, your depression improves and you feel better.

But this theory is more than 60 years old and doesn't tell the whole story.

While serotonin may play a role in improving mood, I'm now convinced the extent of the depression-serotonin connection was exaggerated by pharmaceutical companies in order to sell their antidepressants.

Big Pharma has made a fortune on our modern epidemic of depression. Most doctors are quick to offer not just one but two, or even three pills for everything from low mood to major depression.

And it's been a huge marketing success. Doctors write more than **250 million prescriptions** for SSRIs like Prozac, Zoloft, and Paxil every year.

But when researchers looked at 38 clinical trials covering 3,000 depressed patients on these drugs, they found that 75% of mood improvement came from the drugs' placebo effect.⁶

Another study found that they are ineffective for more than 50% of patients.⁷

So you won't really get better, but you will get a long list of nasty side effects.

In addition to headaches, dry mouth, nausea, and stomach upset, these drugs lead to:

- **Sleeping too much...and too little.** Almost 25% of people on antidepressants have a hard time falling asleep. Others report sleep disturbances like nightmares and sleepwalking. Other patients experience a sedation-like effect during the day. In fact, taking an antidepressant significantly increases your chances of being in a car crash due to sleepiness.⁸
- **Weight gain.** About 25% of users gain 10 pounds or more with certain antidepressants.⁹

- **Sexual dysfunction.** This is the most common side effect — and also the one that bothers patients the most. Up to 70% of patients suffer from a severe decrease in desire or difficulty having an orgasm.¹⁰
- **Stroke and death:** A major study shows women taking antidepressants are 45% more likely to have a stroke. And they are 32% more likely to die from any cause.¹¹

For years I've been saying that depression is not as simple as low serotonin. It's more likely to be caused by inflammation. Let me explain...

Root Cause Behind Depression Spike

A study from Emory University found a clear link between inflammation and depression. Patients with major depression had more inflammation. Researchers also found that reducing inflammation may lift depression in patients.¹²

And our modern grain-based diet is at the root of that inflammation. The inflammatory protein gluten in many grains has been linked to depression...

In a study from Australia, 22 people on a gluten-free diet were given gluten, whey, or a placebo for just three days. Then they were tested for their mental state. Those getting gluten scored much higher on the depression scale than the others.¹³

I don't prescribe antidepressants. I don't prescribe any of these meds — but I have had significant success treating patients who come to my wellness clinic with depression by taking a more natural approach.

For decades now, I used this natural approach to treat and prevent depression.

Physicians and psychiatrists have ignored the most significant factor in today's depression crisis — our modern diet.

Americans are starving for vital nutrients. Never before have we had so much food with so little sustenance.

With each generation, our soil becomes more and more depleted of essential vitamins and minerals. The depletion of magnesium in our soil, for example, has been linked directly to increases in mental illness.¹⁴

And Big Agra's processing has stripped away even more basic building blocks of life.

Get More Of The Nutrient Your Brain Is (Mostly) Made Up Of

Those basic building blocks include omega-3 fatty acids. And numerous studies indicate that the rapid increase in the rate of depression in America has increased as our consumption of omega-3s has declined over the past 50 to 100 years.¹⁵

When it comes to the brain, we are talking particularly about the omega-3s called docosahexaenoic and eicosapentaenoic acids, or DHA and EPA for short.

The human brain is 60% fat, almost entirely comprised of omega-3 fatty acids. Without these omega-3s, the brain cannot build or maintain high-quality cells.

DHA concentrates in the brain's gray matter, especially the "mood zone." It becomes part of the cell membranes and helps electrochemical signals jump between brain cells.

But DHA cannot work alone. It needs EPA to control inflammation and stabilize the brain's metabolic processes.

If the brain cannot get enough DHA and EPA, it uses second-rate materials and creates second-rate brain cells that can't do their job properly. Studies show how the brain needs EPA and DHA to ward off depression and suicidal tendencies.^{16,17,18,19}

Our ancestors consumed plenty of these omega-3s from wild plants, grasses, fish, and seaweed. They also ate wild fauna that fed on the wild flora. Today, we're more likely to eat farm-raised, corn-fed salmon or corn-fed beef. So our vegetables and our meat end up deficient in omega-3s.

Replenishing omega-3s works wonders. And numerous studies back up the experience of the patients who come to my wellness clinic.²⁰ Omega-3s reduced symptom severity in patients with bipolar and unipolar depression, as well as ADHD.

And increase the amount of omega-3s you take...

A growing body of research shows that omega-3 fats can effectively ward off depression. People who take in more omega-3s have increased gray matter in the areas of the brain that control depression, emotions, and mood. Even bipolar patients who don't respond to drugs have been shown to improve with omega-3s.

Over the years I've found that it's almost impossible to get enough omega-3s from your diet. I recommend krill oil and squid oil to my patients. To prevent depression take at least 2,000 mg per day. If you already have depression, a dosage of up to 4,000 mg of omega-3s per day helps lift your mood.

Try These Antidepressant Alternatives That Are Better Than Prozac

1. **SAMe.** This co-enzyme is one of the main building blocks your brain needs to produce neurotransmitters. It's been used in Europe to treat depression for over 20 years. In a Harvard study, psychiatrists treated 30 patients with major depression who didn't respond to Big Pharma's drugs. They gave the patients 800 mg to 1,600 mg of SAMe daily. After just six weeks 50% of the patients responded to SAMe. And a remarkable 43% even had a remission of their symptoms!²¹

In another trial, university doctors studied 73 patients who didn't respond to antidepressants. They added 1,600 mg of SAMe to their daily treatment. After just six weeks, patients adding SAMe had a 105% higher response rate compared to the placebo. They also had a 120% higher remission rate.²²

I recommend you take 200 mg a day to start. If after two weeks you don't see a big improvement, increase to 400 mg.

2. **Curcumin.** Curcumin has powerful anti-inflammatory properties. While it's already a popular supplement for heart health, studies show these properties can do wonders for controlling depression.

In one study, researchers divided participants into three groups. One was instructed to take 20 mg of Prozac every morning, while another took 500 mg of curcumin twice a day. The third group took both. According to the researchers, the curcumin group responded just as well as the Prozac group.



Curcumin is a powerful and proven mood booster.

But there was one important difference — the curcumin group reported no side effects.²³

Another study conducted by UCLA researchers focused on adults aged between 60 and 85. Participants took 400 mg of curcumin for 30 days. When the results came in, researchers noted improved cognitive function and mood.²⁴

Curcumin is already a popular supplement, but many users can't enjoy the full range of benefits. Most of the supplements on the market don't absorb into the body as well as they should. When shopping around, look for a supplement with at least 90% curcuminoids, and be sure it also contains black pepper extract. I recommend taking between 500 to 1,000 mg per day.

3. **Magnesium.** Magnesium is a vital agent for your body, playing important roles in muscle development, nerve function, and energy production. But studies show it can also be a life saver for mental health.

An analysis of data from over 8,800 people under the age of 65 found that those with the lowest magnesium consumption had a 22% greater risk of depression. While this association was less noticeable in seniors, researchers concluded there is a strong link between magnesium intake and brain function.²⁵

In a smaller study, researchers divided 60 participants with depression into two groups. The first group took 500 mg of magnesium a day, while

the other took a placebo. After an eight-week period, the magnesium group reported improved moods, while the placebo group experienced a far less significant change.²⁶

References

1. Han B., et al. "Effect of statin treatment vs usual care on primary cardiovascular prevention among older adults." *JAMA*. 2017.
2. Sagon C. Huh? "87 Percent of Men Age 60 Plus Should Take a Statin?" AARP Healthy Living. Accessed August 2, 2017.
3. Gillespie A, et al. "Associations between statin use and negative affective bias during COVID-19: An observational, longitudinal UK study investigation depression vulnerability." *Bio Psych*. 2022
4. Sansone, Randy A. "Cholesterol quandaries." *Psychiatry (Edgmont)*.2008;5(3):22–34.
5. Cham S, et al. "Mood, personality, and behavior changes during treatment with statins: A case series." *Drug Saf Case Rep*. 2016;3:16.
6. Souery D, et al. "Clinical factors associated with treatment resistance in major depressive disorder: results from a European multicenter study." *J Clin Psychiatry*. 2007 Jul;68(7):1062-70.
8. Wichniak A, et al. "Effects of antidepressants on sleep." *Curr Psychiatry Rep*. 2017; 19(9): 63.
9. Deshmukh R, Franco K. "Managing weight gain as a side effect of antidepressant therapy." *Cleve Clin J Med*. 2003 Jul;70(7):614.
10. Higgins A, Nash M, Lynch AM. "Antidepressant-associated sexual dysfunction: impact, effects, and treatment." *Drug Health Patient Saf*. 2010;2:141–150.
11. Smoller J, et al. "Antidepressant use and risk of incident cardiovascular morbidity and mortality among postmenopausal women in the Women's Health Initiative Study." *Arch Intern Med*. 2009; 169 (22): 2128-2139.
12. Miller AH., et al. "Inflammation and its discontents: the role of cytokines in the pathophysiology of major depression." *Biol Psychiatry*. 2009 May 1.
13. Peters SL. "Randomised clinical trial: gluten may cause depression in subjects with non-coeliac gluten sensitivity – an exploratory clinical study." *Aliment Pharmacol Ther*. 2014.
14. Changes in brain protein expression are linked to magnesium restriction-induced depression-like behavior
Whittle, Nigel; Li, Lin; Chen, Wei-qiang; Yang, Jae-won; Sartori, Simone B; et al. *Amino Acids* 40.4 (Apr 2011): 1231–48.
15. Harrar, S. "Omega-3 fatty acids and mood disorders." *Today's Dietitian*. January 2012, Vol. 14, No. 1, P. 22. todaydietitian.com/newarchives/011012p22.shtml
16. Sublette, M.E., "Meta-analysis: Effects of Eicosapentaenoic Acid in Clinical Trials in Depression." *J Clin Psychiatry*. 2011 Dec; 72(12): 1577–1584. Published online 2011 Sep 6. doi: 10.4088/JCP.10m06634.
17. Sublette, M.E., "Meta-analysis: Effects of Eicosapentaenoic Acid in Clinical Trials in Depression." *J Clin Psychiatry*. 2011 Dec; 72(12): 1577–1584. Published online 2011 Sep 6. doi: 10.4088/JCP.10m06634.
18. Ross, BM. "Omega-3 fatty acid deficiency in major depressive disorder is caused by the interaction between diet and a genetically determined abnormality in phospholipid metabolism." *Med Hypotheses*. 2007;68(3):515-24.
19. Conklin SM, et al. "Serum phospholipid polyunsaturated fatty acids are associated with mood, behavior and personality in healthy community adults." *American Psychosomatic Society Annual Meeting*, March 2007, Budapest, Hungary, abstract 1718.
20. Bazan N, Musto A, Knott E. "Endogenous signaling by omega-3 docosahexaenoic acid-derived mediators sustains homeostatic synaptic and circuitry integrity." *Mol Neurobiol*. 2011;44(2):216-22.
21. <https://ecqi.healthit.gov/sites/default/files/ecqm/measures/CMS159v7.html> Accessed on May 26, 2022.
22. Papakostas GI, et al. "S-adenosyl methionine (SAME) augmentation of serotonin reuptake inhibitors for antidepressant nonresponders with major depressive disorder: a double-blind, randomized clinical trial." *Am J Psychiatry*. 2010 Aug;167(8):942-8.
23. Sanmukhani J, et al. "Efficacy and safety of curcumin in major depressive disorder: A randomized controlled trial." *Phytother Res*. 2013
24. Cox KH, et al. "Investigation of the effects of solid lipid curcumin on cognition and mood in a healthy older population." *J Psychopharmacol*. 2015 May;29(5):642-51
25. Tarleton E, et al. "Magnesium intake and depression in adults." *J Am Board Fam Med*. 2015;28(2):249-256
26. Rajizadeh A, et al. "Effect of magnesium supplementation on depression status in depressed patients with magnesium deficiency: A randomized, double-blind, placebo-controlled trial." *Nutrition*. 2017;35:56-60.

Stop The Metformin Madness

You Don't Need Big Pharma's So-Called "Wonder Drug" To Turn On Your Anti-Aging Switch

Recently, the Institute for Aging Research at Albert Einstein College of Medicine announced they're starting a six-year study to test the life-extending properties of metformin on 3,000 older adults.

I can't say I'm surprised at this research.

As someone who is interested in health and longevity, I'm sure you've heard how popular this diabetes drug is in the anti-aging community.

A lot of my anti-aging colleagues prescribe metformin and take it themselves. They call it a "wonder drug."

Not only do I disagree, I warn my patients not to take it.

Some of my colleagues are absolutely shocked when they find out I don't take it. These are people I respect and usually see eye-to-eye with. But they're missing something important when it comes to metformin.

For a drug that's considered the biggest new thing in anti-aging medicine, it's actually causing some of the worst conditions associated with aging.

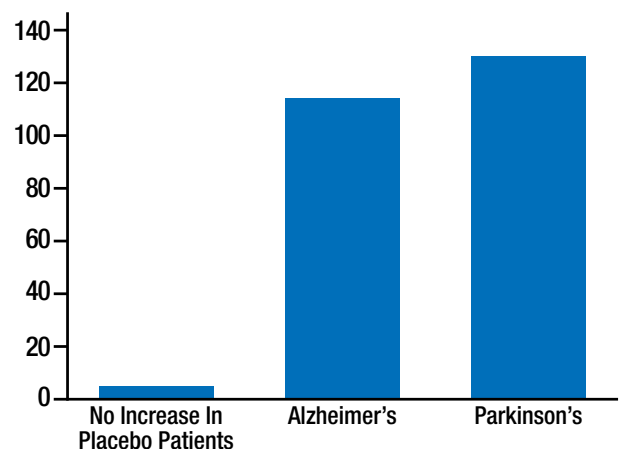
A new study shows that using metformin over many years increases the risk of dementia.¹

Chinese researchers followed 9,300 diabetics for up to 12 years. Half the patients were taking metformin. The results showed that people on the drug had more than double the risk of Parkinson's or Alzheimer's.

Compared to non-users, metformin increased:

- Parkinson's rates by 127%
- Alzheimer's dementia rates by 113%
- Vascular dementia by 130%

Metformin More Than Doubled Alzheimer's/ Parkinson's Rates In Diabetes Patients



Compared to non-users, metformin increased Parkinson's rates by 127% and Alzheimer's rates by 113%.

And the risk went up the longer the patients took the drug and the higher their dose...

People who took the highest doses had a 254% higher rate of Parkinson's compared to the controls. For people who took the drug for more than 400 days, rates of Parkinson's were a whopping 349% higher!

Yet...the biggest problem is that this diabetes drug increases deadly cardiac events like heart attack and stroke.

It's a tragic irony because heart attacks and strokes are what kill people with diabetes. They're the top two causes of death for diabetics.

So why would someone willingly take a pharmaceutical when they don't need it?

Many people — including doctors — believe metformin is an anti-aging powerhouse because it can boost levels of an enzyme called AMP-activated protein kinase (AMPK).

And AMPK truly is an anti-aging wonder.

Switch On Your Body's Master Metabolic Switch

Found in every cell in your body, AMPK functions as an energy sensor... and turns on when your cellular energy levels are low. It's often referred to as your "master metabolic switch."

Your body produces energy in its mitochondria. This energy is called adenosine triphosphate, or ATP. It fuels everything your body does.

As the energy-creating process gets going, ATP is converted into AMP (adenosine monophosphate), which tells the cell it needs more fuel. That's when AMPK gets moving, jumpstarting the transport of glucose and fats to your mitochondria so it can make more ATP.

The problem is that as you age, AMPK activation slows down. That means less ATP and more malfunctioning cells, which leads to inflammation and disease.

Low ATP production is the reason you slow down as you age. But when AMPK is activated, your cells jump into survival mode.

Your body no longer stores new fat, but burns fat already in storage. It also boosts insulin resistance and pumps glucose into cells from the blood so they can make more ATP. That's why AMPK is such a powerful weapon against diabetes.

At the same time, it builds new mitochondria to provide your cells with even more energy. This, in turn, boosts cellular efficiency and improves the function of organs and tissues.

AMPK has also been shown to:

- Improve cognitive function
- Reduce cancer risk
- Lower inflammation
- Protect against cardiovascular disease
- Stimulate weight loss
- Increase blood flow
- Improve muscle performance



The History Of Metformin

Like many Big Pharma drugs, metformin is a synthetic derivative of a medicinal herb called goat's rue, or *Galega officinalis*.

It had been used for hundreds of years to treat urinary problems and other ailments.

Then in 1918, a scientist discovered that an ingredient in French lilac, guanidine, could lower blood sugar. After modifying this ingredient and manipulating molecules, they developed a new drug called metformin to treat diabetes.

The drug soon fell out of favor though, due to serious side effects and the discovery of insulin.

But metformin was rediscovered decades later and approved as a diabetes drug in Europe in the 1950s.

Forty years later, the FDA approved it for use in the US. Since then, it has become the most widely prescribed drug for diabetics.

In an animal study at the University of California, scientists found increasing AMPK lengthened lifespan as much as 30%. And the animals stayed energized, healthy, and active much longer!²

Newly Discovered Dangers Of Metformin

Metformin, like so many Big Pharma drugs, can be helpful in the short term. But in the long run, it creates more problems than it solves...

Patients often stay on this drug for 10 years... 20 years... and more. That's a long time to be on any drug. And over the long haul, it takes a real toll.

For one thing, metformin interferes with your body's ability to absorb vitamin B12.³

That's tragic... because B12 is *critical* to your health. It benefits your nervous system, spinal cord, mood, energy level, memory, heart, skin, hair, digestion, and more. And it helps regulate nerve transmissions.

In fact, nerve damage from lack of B12 can lead to *neuropathy* — a common and painful complication of diabetes.

New research published this year in the journal *Annals of Internal Medicine* found that metformin increases the risk of genital defects in the male children of fathers who took it.

These boys are three times more likely to have a genital defect compared to babies whose fathers never took the drug. Epidemiologists admit they're worried because younger and younger patients are prescribed metformin as the obesity and diabetes crisis grows.

It could mean an entire generation of men with undescended testes and an abnormally formed urethra.⁴

Another potential metformin side effect is lactic acidosis. It can develop when your cells make too much lactic acid and your liver can't get rid of it. Symptoms include persistent nausea and vomiting, abdominal pain, shortness of breath, weight loss, and an abnormal heartbeat.

This rare but deadly complication proves fatal in 50% of cases.

I believe metformin is the polar opposite of an anti-aging miracle.

And there are much better ways to boost AMPK than by taking a synthetic drug.

Fast Without Missing A Meal

One of the most effective ways to activate this metabolic master switch is by practicing calorie restriction. You may know it as intermittent fasting. It's something I recommend to many of my patients — whether they're diabetic or not.

“One of the most effective ways to activate this metabolic master switch is by practicing calorie restriction.”

Today we're used to eating three meals a day, plus snacks. That can make fasting seem insurmountable. I recommend starting out with intermittent fasting.

There are two kinds I suggest:

1. Start with a simple 16:8 fast.

This plan involves fasting for 16 hours. In other words, you have an 8-hour time period in which you can eat. Then you fast for the remaining 16 hours. Here's an example. You eat breakfast at 10 a.m. and lunch around 1 p.m. Dinner is over by 6 p.m. with no additional food until the next day.

2. **Then move to the 20:4 fast.** You can do the 16:8 fast every day. But once a week or so, I recommend doing a longer 20:4 fast. It has a four-hour eating window followed by 20 hours of not eating. I suggest eating between 1 p.m. and 5 p.m. Aim for one or two small meals during this time.

Activate AMPK And Kick Aging To The Curb

Most of my patients find intermittent fasting easy to do. They don't feel hungry. But if fasting is not for you, there are other ways to trigger AMPK activity.

1. **Boost AMPK naturally with the vine of immortality.** Traditional herbal medicine has known for centuries about an amazing anti-aging vine they call *Jiaogulan*. Known to botanists as *Gynostemma pentaphyllum*, it belongs to the cucumber family.

In traditional Asian medicine, *G. pentaphyllum* is used to promote longevity. In China, researchers discovered that a tea made from *G. pentaphyllum* is key to the surprising number of centenarians in one region.⁵

And modern science proves it works by promoting AMPK activity.⁶

You can find supplements containing *G. pentaphyllum* online. To get the calorie restriction effects — without starving yourself — I recommend taking 150 mg per day.

To make a tea, you can buy the leaves of *G. pentaphyllum* online and at specialty health stores.

Research shows that drinking *G. pentaphyllum* tea daily can lower blood sugar levels and improve insulin sensitivity. Just boil water and add six grams of the leaves. Let it steep for 10 minutes and then strain.

2. **Supplement with trans-tiliroside.** This extract from the fruit of *Rosa canina*, or rose hip, is also a staple of traditional medicine. Ancient Chinese, Persians, Romans, and Greeks all appreciated the benefits of rose hip.

Trans-tiliroside has been shown by researchers to promote healthy blood glucose levels and lower body weight through AMPK activation. It also lowers LDL and triglycerides, raises HDL, and increases the antioxidant effects of superoxidase dismutase (SOD).

One study showed trans-tiliroside had a greater glucose-lowering effect than metformin.⁷

Look for a supplement that contains the standardized extract of at least 5% trans-tiliroside. I recommend 50 mg per day.

3. **Exercise with PACE.** Studies show that AMPK activity increases with exercise like PACE. You see, vigorous exercise activates AMPK in response to your energy needs.⁸

PACE stands for Progressively Accelerating Cardiopulmonary Exertion and it uses brief but vigorous routines of increasing intensity to help increase the strength and capacity of the lungs.

After only a few weeks of doing PACE, even my older patients soon develop the lung power of much younger people — even those with heart disease.

When you exercise, AMPK “takes the temperature” of your cells to see how much energy you have.

As you deplete glycogen during a PACE workout, AMPK swings into full effect. It tells your muscles to convert blood sugar and store it as energy in the muscle, instead of turning it into body fat. Now you have energy available for the next time you ask your muscles to do a similar kind of exertion.

At the same time, you start breaking down fat you’ve already stored away.

You can choose any exercise that will make you stop and pant for breath. All you have to do is increase the challenge to your lungs and heart little by little, and then accelerate it.

The secret is pushing yourself in your workouts so you have to catch your breath. That’s when AMPK is activated. And by increasing the intensity of your workouts, your body responds and adapts. Your lungs get stronger and your capacity increases so you’re ready for the next challenge.

If you’re just beginning PACE, I recommend a simple starting exercise known as alternating lunges. And like all PACE exercises, this is safe at any age.

With your hands at your hips, take a step forward with your right leg until your front knee is bent 90 degrees and your back knee almost touches the ground.

- Push off from your leading foot and return to starting position.
- Repeat with your left leg. Continue until you feel winded.
- Rest, recover, and do two more sets.

Start at a speed and level of intensity you’re comfortable with. From there, be sure to progressively increase the intensity over time.

You can try a full PACE workout by visiting my YouTube Channel. [Just click here.](#)

And if you live in the South Florida area, or plan to visit, you can try a **free PACE class** at the Sears Institute for Anti-Aging Medicine. Just call my staff at **561-784-7852**.

References

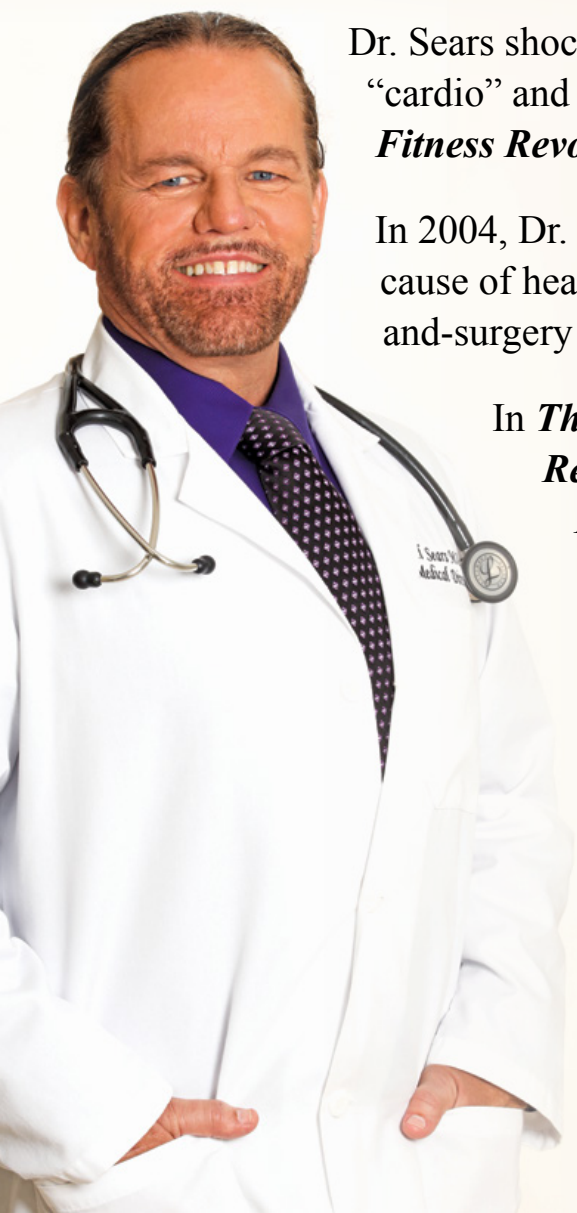
1. AD/PD 2017: The 13th International Conference on Alzheimer’s and Parkinson’s Diseases by Yi-Chun Kuan, MD, Shuang Ho Hospital, Taipei Medical University, New Taipei City, Taiwan.
2. Nguyen P, et al. “AMP-activated protein kinase (AMPK) activators from *Myristica fragrans* (nutmeg) and their anti-obesity effect.” *Bioorg Med Chem Lett*. 2010;20(14):4128-4131.
3. Ahmed MA., et al. “Vitamin B12 deficiency in metformin treated type-2 diabetes patients, prevalence and association with peripheral neuropathy.” *BMC Pharmacology and Toxicology*. 2016;17:44
4. Wensink M, et al. “Preconception antidiabetic drugs in men and birth defects in offspring.” *Annals Int Med*. 2022 May;175(5):665-673.
5. Blumert M and Liu J. “China’s Immortality Herb.” Badger, California: Torchlight Publishing, Inc. 1999.
6. Gauhar R, Hwang SL, Jeong SS, et al. “Heat-processed *Gynostemma pentaphyllum* extract improves obesity in ob/ob mice by activating AMP-activated protein kinase.” *Biotechnol Lett*. 2012 Sep;34(9):1607-16.
7. Qiao W, Zhao C, et al. “Identification of trans-tiliroside as active principle with anti-hyperglycemic, anti-hyperlipidemic and antioxidant effects from *Potentilla chinensis*.” *J Ethnopharmacol*. 2011 May 17;135(2):515-21.
8. Hardie DG. “AMP-activated protein kinase: a key system mediating metabolic responses to exercise.” *Med Sci Sports Exerc*. 2004. 36(1):28-34.

Al Sears, MD

Al Sears, MD, CNS, is a medical doctor and one of the nation's first board-certified anti-aging physicians.

As a board-certified clinical nutritionist, strength coach, ACE-certified fitness trainer and author, Dr. Sears enjoys a worldwide readership and has appeared on more than 50 national radio programs, ABC News, CNN and ESPN.

In 2010, Dr. Sears unveiled his proven anti-aging strategies in ***Reset Your Biological Clock***. As the first U.S. doctor licensed to administer a groundbreaking DNA therapy that activates the gene that regulates telomerase, Dr. Sears made history by bringing telomere biology to the general public.



Dr. Sears shocked the fitness world by revealing the dangers of aerobics, “cardio” and long-distance running in his book, ***PACE: The 12-Minute Fitness Revolution***.

In 2004, Dr. Sears was one of the first doctors to document the true cause of heart disease and expose the misguided and often fatal drugs-and-surgery approach to heart health.

In ***The Ageless Heart Manual: Advanced Strategies to Reverse Heart Disease and Restore Your Heart's Pumping Power***, Dr. Sears outlines the easy-to-follow solution that effectively eliminates your risk of heart disease, high blood pressure and stroke.

An avid lecturer, Dr. Sears regularly speaks at conferences sponsored by the American Academy of Anti-Aging Medicine (A4M), the American College for the Advancement of Medicine (ACAM) and the Age Management Medicine Group (AMMG).