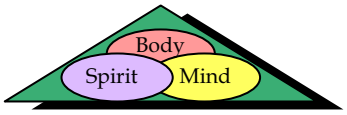
Chapter 12. Drugs/Medications



Drugs/Medications

According to the Center for Disease Control, close to 130 million Americans consume prescription drugs every month – more than any other country. In fact, over the past decade, the total number of prescriptions has increased by about two-thirds, to 3.5 billion a year. Practically every type of expert – doctors, public health officials, medical researchers – believes that Am rmedicated. We are willing to accept prescriptions for pr ng and demand them for conditions we think need medi ating. If a condition has even the slightest potential to cause discomfort, there is a pill, patch, or prescription for it. And now, even TV commercials get you thinking about symptoms you may not have noticed before and suggest you ask your doctor for particular medications to comb

There are many life-saving drugs and medications that are invaluable to the quality of life such as antibiotics to help fight off serious bacterial infections. However, there are many other drugs and medications that, over a long period of time, interfere with the body's healing and immune systems, inhibiting the body from repairing, healing and protecting itself properly. Unfortunately, our dependency on these drugs in combination with bad eating habits and a sedentary lifestyle sentences the body to a slow, inevitable and sometimes painful death. However, if you are making the necessary lifestyle and nutritional changes, you should be working with your doctor to gradually wean yourself off the drugs. Unfortunately some people's health may have deteriorated to a level that prevents them from being able to totally live without any drugs.

If you are currently taking any prescription drugs, it is important that you continue to take them as prescribed by your doctor. But if you've been

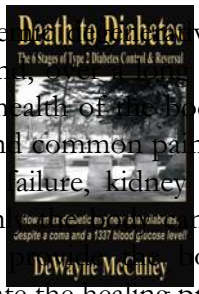
taking the drugs for more than three months or the drugs are causing side effects, you should notify your doctor about getting weaned off the drugs as soon as possible. Discuss the alternatives with your doctor and work out a safe weaning plan that does not put your health or life in jeopardy.

Limitations of Drugs/Medications

Although drugs provide life-saving benefits, they do have limitations, especially when they are taken over a long period of time for systemic degenerative conditions that can be addressed with proper nutrition and exercise, e.g. high blood pressure, high cholesterol, high blood glucose. Drugs that are taken for diabetes, pain relief or high blood cholesterol "fool" the body by altering the biochemical and hormonal functions within the body, leading to the artificial lowering of blood glucose, cholesterol, and the supp mptoms such as pain. Some diabetic drugs make the pa more insulin, which makes the diabetic fatter and can wea out the pancreas. Some of these drugs also prevent the liver from releasing stored glycogen to artificially keep the diabetic's glucose level lower. So instead of making the necessary nutrition, exercise and lifes people depend on the drugs to do all the work in lowerin e level. Unfortunately, over a period of years, the oral medications lose their effectiveness because they never address the root causes of the diabetes – **excess insulin**, insulin resistance, nutritional deficiency, inflammation, oxidation, and toxicity. And, so the diabetic is eventually resigned to taking insulin injections.

Another example is the drugs that are taken for high blood pressure. Most people who start taking drugs to lower their blood pressure never get off the drugs. Why? Again, people refuse to make the nutrition, exercise and lifestyle changes and depend on the drugs to keep their blood pressure artificially lowered. Consequently, if they stopped taking the drugs, their blood pressure would start to rise again. Now, there is nothing wrong with depending on drugs – in the short term. It buys the patient time to make the changes to nutrition, exercise and lifestyle to help the body to heal itself and eventually wean it off the drugs with the assistance of their doctor.

Another example is the statin drugs used to lower cholesterol. These drugs have been very successful in lowering cholesterol. I should know since I used to take one of the statin drugs (Lipitor) for my high cholesterol. But, the biochemical pathway that allows the statin drug to inhibit the production of cholesterol also inhibits the liver from producing CoQ10, a very powerful and critical nutrient for the cells and the heart muscle. Also, there are some studies that show these drugs may cause a decrease in insulin sensitivity, a deterioration of the liver, neurological problems, severe muscle aches, and a condition called rhabdomyolysis, which is a deterioration of the muscles. Consequently, if you do take this drug, you should ensure that you are having your liver tested on a periodic basis. Also, if you are resigned to taking this drug, then, at least discuss with your doctor the benefits of taking a CoQ10 supplement to counteract some of the ill effects of the drug.



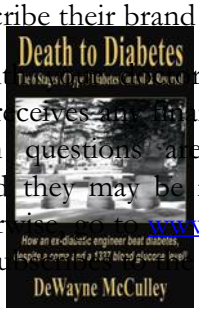
Drugs for these types of syste[illegible]ve conditions do not have the ability to heal the body; an[illegible] period of time, they cause more harm than good to the health of the body. For example, the long-term uses of blood pressure and common pain-relieving drugs have been linked to heart attacks, liver failure, kidney failure, breast cancer and other systemic conditions. On[illegible]n heal itself – but it needs help from the individual to [illegible]ody with the proper raw materials and nutrients to initiate the healing process.

For anyone who is taking any drugs for diabetes, high blood pressure, high cholesterol, or any other systemic disease/ailment, you should ask yourself the following question: Who do you think is smarter: God or man? God has provided superior nutrients in foods such as broccoli, Brussel sprouts, spinach, walnuts, olive oil, sesame seeds, wild salmon, barley, water, blackberries, blueberries, and other vegetables, fruits, fish, nuts and seeds. These food nutrients fight, reverse and prevent many diseases. On the other hand, man has developed processed foods such as French fries, mashed potatoes, tacos, macaroni, pasta, fried chicken, cakes, bottled juice, candy, and artificial sweeteners that cause diseases/ailments such as diabetes, heart disease, high blood pressure, high cholesterol, cancer, arthritis, osteoporosis, and Alzheimer's. And, to fight these diseases, man has developed various drugs to try to help us.

So, instead of looking to God's foods to help us improve our health, we look to man's drugs (for the "magic pill") to solve all our health problems. And the side effects of drugs, hospital/prescription errors (known as iatrogenic illness) account for more than 216,000 deaths a year, the number 3 cause of death in the United States!

Conflict of Interest?

Pharmaceutical companies have readily admitted that they routinely pay insurance companies to increase the use of their products and to be added to the recommended list of drugs. They admit that they give rewards and kickbacks to both pharmacists and doctors for switching patients from one brand of medication to a rival. And, they admit that they provide all sorts of gifts and gratuities to doctors, ranging from financial aid to educational programs to bags and writing pads, to encourage doctors to prescribe their brand of drugs.



If you are concerned wit r "pushing" drugs onto you, consider asking if he/she receives an ncial gifts or benefits from the drug manufacturer. Such questions are uncomfortable, but ethical questions often are -- and they may be more uncomfortable for your doctor than for you. Other wise, go to www.naturopathic.org to contact a naturopathic doctor who su motto "Doctor do no harm."

Guidelines for Drugs/Medications

The following are only guidelines -- always defer to your doctor.

- Understand the purpose of the drug, how it's supposed to help your health and how it affects other aspects of your health (side affects), If the drug is not doing what it's supposed to do, notify your doctor immediately. Do not wait for your next doctor's appointment.
- Administer the drug properly per the directions from your doctor. If you are not certain, contact your doctor immediately.
- If you are taking insulin, make certain that you are extracting the right amount of insulin from the bottle. If possible, have a friend or partner verify for you. Also, unless otherwise specified, once an insulin bottle is opened, it is good for 28 days even if it's refrigerated. Unopened bottles of Lantus should be stored in the refrigerator.

- *Author's Tip:* In my case, because I was taking two different types of insulin with two different dosage amounts, I set up my needles for the week and kept each type of insulin in a separate (different color) basket that I stored in the refrigerator.
- Insulin pens that are not in use and are refrigerated are good until the expiration date. Insulin pens that are in use should not be refrigerated and are good for 10 to 28 days depending on the brand and type.
- Before drawing up your insulin or injecting with an insulin pen, check the bottle or cartridge for frosting on the inside of the glass and crystals or clumps in the insulin.
- Rapid-acting (Humalog, Novolog), short-acting (Regular) and long-acting (Lantus) insulins are clear. Pre-mixed, Lente, and long-acting (NPH, Ultra Lente) insulins are cloudy after rolling the bottle between your hands.
- If the drug is not helping to [illegible] glucose within the normal range, discuss this with yo[illegible]r all, why take a drug and suffer through the side effects if it's not doing what it's supposed to do. Discuss with your doctor what you need to do to correct the problem. Also, discuss the effectiveness of the drug over time. In addition, discuss other alternatives before your doctor recommends putting you on a different d[illegible]

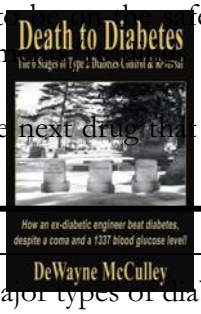
- If appropriate, increase ([illegible]he drug dosage for your pending meal, based on the input from your doctor and other factors including your blood glucose average, and your pending meal size (number of carbohydrate calories, number of total calories, amount of fiber).
- Once your blood glucose is within the normal range, work with your doctor to develop a strategy and timeline to get weaned off the drugs by continual modification of your nutritional plan and exercise regimen. If the drug dosage is not decreasing over time, discuss the reasons why with your doctor and determine the actions you should be taking.
- *Note:* The following types of drugs may increase your blood glucose level: ACE inhibitors, antibiotics, antidepressants, diuretics, steroids, and cancer drugs.

Drug Weaning Process

Warning: If you agree that drugs are not the answer for you in the long term, then, work with your doctor to develop a drug weaning process that will enable you to slowly reduce your drug dosage and prevent **pancreatic beta cell dysfunction** and the **"insulin addiction trap".** For Type 2 diabetics, long term use of most diabetic drugs overworks the pancreas, which can no longer meet the insulin demands of your cells. This leads to insulin injections, which signal the pancreas to reduce its production of insulin. With this reduction of insulin production by the pancreas, the insulin injections will be required for the rest of your life!

1. Obtain a copy of a book such as the Physician's Desk Reference for detailed information about most drugs, or go to a website such as www.webmd.com.
2. If you are taking mor ug, work with your doctor to determine which specif y initiate the weaning process. If necessary, enlist the help of a natural health practitioner to assist you in the weaning process.
3. Determine whether yo need to obtain any measurement tools to allow you to closely progress, e.g. blood pressure monitor, blood choles an additional blood glucose meter. Check your medical insurance for coverage.
4. Establish a timeline (e.g. date) to initiate the weaning process for that specific drug.
5. Identify a clear measurable goal that you need to achieve to begin the weaning process, e.g. The average blood glucose level is reduced 10 points over the previous week.
   Author's Personal Note: It was important that I could reduce my blood glucose level at least 10 mg/dl over the previous week before I would consider reducing my insulin dosage. It was also important that I had made specific changes to my nutrition (e.g. reduction of refined carbohydrates) -- to allow me to reduce my Humalog dosage.
6. Identify the smallest reasonable increment that you can safely reduce your drug dosage. If this is not possible, discuss other alternatives with your doctor, e.g. using a pill cutter, taking a dosage every other time.

7. Use the measurement tool (e.g. glucose meter, blood pressure monitor) several times a day, ideally at the same times each day, to record and track your readings and progress.
8. Record any specific observations and events that may be occurring at that time, including how you feel.
9. At the beginning of each new week (or month), depending on your schedule and goals, review your readings, how you felt, and other notes with your doctor to decide whether to continue with decreasing your dosage.
10. Contact your doctor immediately if you notice that you don't feel well or you notice a trend in your readings going in the wrong direction.
11. Once you reach a zero dosage level, closely monitor your measurements/readings during the next several weeks to ensure there are no problems. In fact, t[illegible]e side, you may even want to increase your measuren[illegible] – at least until your next medical exam/physical.
12. Initiate this process for the next drug that you and your doctor have agreed to wean you off.



Drugs for Diabetes

The following is a list of the major types of diabetic drugs.

Warning: Just because you don't feel any side effects of the drugs does not mean that your body is not being harmed!

Metformin, a biguanide, e.g. Glucophage (Metformin)

- Function: reduces insulin resistance in the liver and acts on the liver to reduce the release of stored glycogen.
- **Side Effects:** gastrointestinal problems, weight loss, diarrhea, decreased appetite, gas, lactic acidosis (buildup of lactic acid in the blood if kidneys are not functioning); blocks the absorption of folic acid from the intestines to raise blood levels of homocysteine, which leads to arterial plaque formation and heart disease.
- Caution: A large percentage of diabetics who take drugs such as Glucophage eventually end up with heart disease.

Sulfonylureas, Meglitinides, e.g. Amaryl, Glucotrol

- Function: acts on the pancreas to increase insulin secretion.
- **Side Effects:** weight gain, hypoglycemia, skin rash, headache, nausea.

Alpha-glucosidase Inhibitors, e.g. Acarbose (Precose)

- Function: slows absorption of carbohydrates from the intestines.
- **Side Effects:** diarrhea, gas, bloating, abdominal pain, headache, hypoglycemia.

Thiazolidinediones, e.g. Pioglitazone (Actos), Rosiglitazone (Avandia)

- Function: acts on muscles to enhance insulin sensitivity and glucose uptake.
- **Side Effects:** headaches, muscle aches, runny nose/sore throat, diarrhea, fluid retention, weight gain, fatigue, increased cholesterol levels; linked recently to heart attack and possibly death (Avandia).

Insulin, e.g. Humalog, Regu[illegible]e, Lantus

- Function: increases the [illegible]nsulin in the bloodstream and reduces the blood glucose level (injected with a needle/syringe).
- **Side Effects:** weight gain (belly fat), heart disease, stroke, insulin addiction. Insulin acts as a (fat) storage-and-locking hormone, which leads to the body being [illegible] (fat-building, muscle-burning) state; which, in turn, le[illegible] (fat) gain. Insulin inhibits the breakdown of homocysteine, which causes inflammation, arterial plaque formation and heart disease. Insulin also causes a slower metabolism, higher cholesterol (lipid profile), fatigue, depression; vitamin/mineral loss; and bone (density) loss.
- Complications: long-term use increases fat cells, which require more insulin, increasing the dependency on the injections and ensuring a complete reliance on the insulin injections – creating **pancreatic beta cell dysfunction** and the **"insulin addiction trap"**.
- **Side effects (long term):** for Type 2 diabetics, leads to sustained obesity, heart disease, fatigue, and other weight-related complications. Long term use of insulin injections signals the pancreas to reduce its own production of insulin, creating a lifelong chemical dependency.

Combinations of Drugs, e.g. GlucoVance
Sulfonylureas & Metformin

- Function: combines a sulfonylurea (glyburide) and a biguanide (metformin) to trigger the pancreas to produce more insulin and inhibit the liver from releasing glucose.
- **Side Effects:** hypoglycemia, diarrhea, nausea/vomiting, abdominal pain, skin reaction, dark urine, increased sensitivity to sun. The most serious side effect is lactic acidosis. Because it may be life threatening, your health care provider will check your kidney and liver function to determine if you are at risk.

Thiazolidinediones & Metformin, e.g. Avandamet

- Function: combines a rosiglitazone (Avandia) and a biguanide (metformin) to target insulin resistance and inhibit the liver from releasing glucose.
- **Side Effects:** hypoglycemia, fluid retention or swelling, which could lead to heart failure and possibly death. The most serious side effect is lactic acidosis. Because it may be life threatening, your health care provider will check your kidney and liver function to determine if you are at risk.
- Signs of lactic acidosis: feeling very weak/tired, unusual muscle pain, unusual sleepiness, rapid breathing, nausea, vomiting, low body temperature, feeling dizzy or light-headed, a slow or uneven heartbeat.
- Signs of liver problems: nausea, vomiting, stomach pain, unexplained tiredness, loss of appetite, dark urine, yellowing of your skin or whites of your eyes.

Key Point: Most diabetic drugs focus on lowering your blood glucose, but do *not* address the **excess insulin**, which is depleting your body of vital nutrients, producing more fat, and preventing fat metabolism – leading to even more weight gain in the belly area. The body becomes dependent on the excess insulin to "push" the glucose into the cells, until the body requires insulin injections, creating beta cell dysfunction and the **"insulin addiction trap"** where the body requires insulin shots for life.

Drugs for Heart Disease

Because of the connection between diabetes and heart disease, the following list of drugs for heart disease, high blood pressure and high cholesterol is provided for your general knowledge. Also, listed are some, but not all, of the more common side effects associated with these drugs. Reference: www.americanheartassociation.org

Warning: Just because you don't feel any side effects of the drugs does not mean that your body is not being harmed!

ACE inhibitors:

- Function: reduces the activity of the angiotensin converting enzyme (ACE), which is responsible for causing the blood vessels to narrow. If the blood vessels are relaxed, your blood pressure is lowered and more oxygen-rich blood can reach your heart. They also lower the amount of salt and water in your body.
  Note: Angiotensin II antagonists act in a similar way to ACE inhibitors, but do not cause the persistent dry cough that ACE inhibitors can sometimes cause.
- **Side Effects:** a dry cough; headache, upset stomach, numbness or tingling in the hands or feet; increase in blood glucose
- *Note:* Have regular blood tests to check the levels of salts in your blood and to test your kidney and liver function.
- *Note:* Natural ACE inhibitors include green tea, raw/aged garlic, hawthorn, olive leaf, taurine, proanthocyanidins, and ginkgo biloba.

Angiotensin II receptor blockers (ARBs):

- Function: acts in a similar way to ACE inhibitors, but does not cause the persistent dry cough that an ACE inhibitor can sometimes cause.
- **Side Effects:** diarrhea, stomach problems, muscle cramps, back/leg pain, dizziness, insomnia, nasal congestion, cough, sinus problems, upper respiratory infection, higher cholesterol level, kidney problems.

Anti-arrhythmic drugs:

- Function: controls the rhythm of the heart.
- **Side Effects:** may cause low blood sugar; dizziness, blurred vision.