

ASI 2016


“Helping Hypertension: Healing Communities”

David DeRose, MD, MPH
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It Is One of the World's Greatest Epidemics

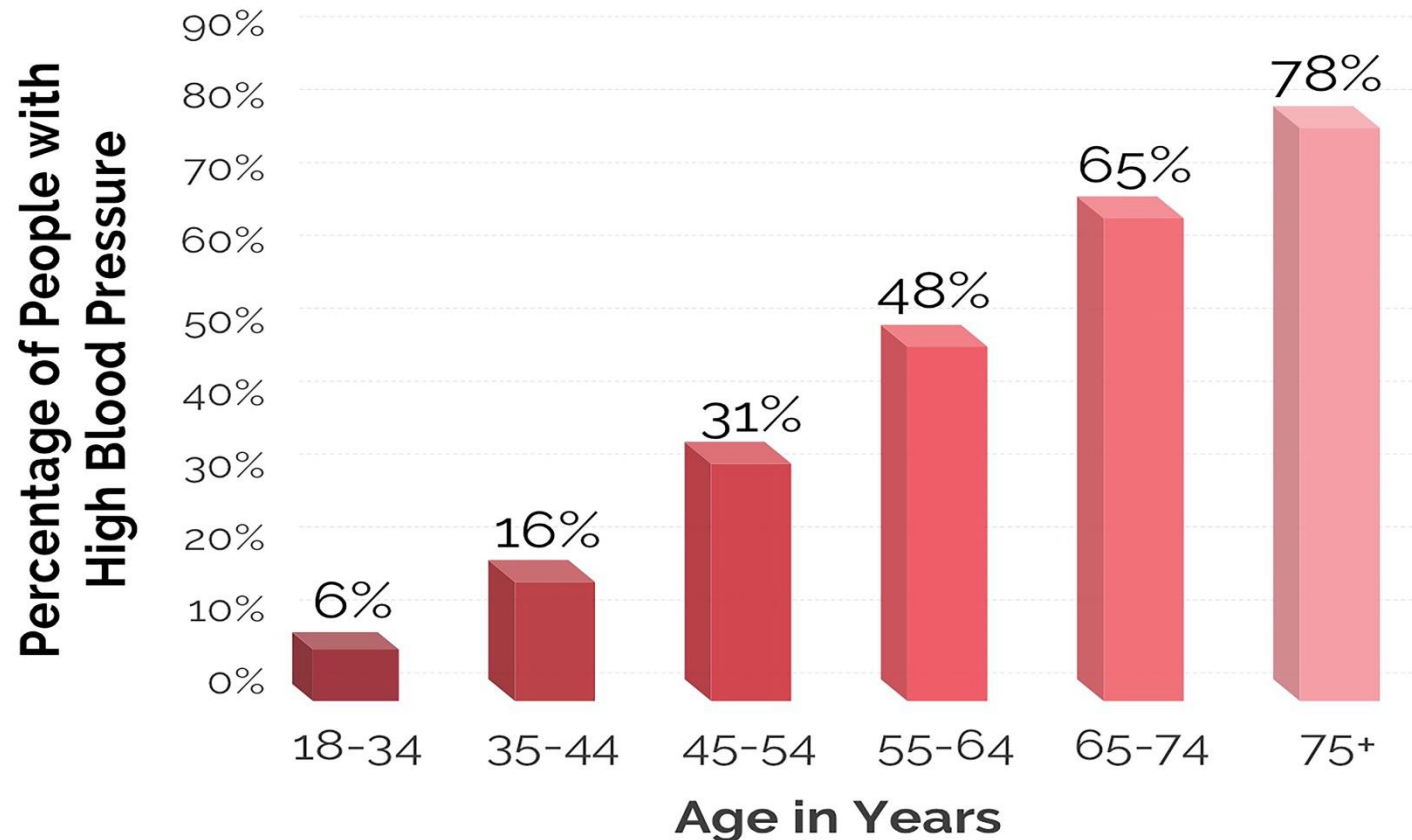


High Blood Pressure



Hypertension in the United States

Likelihood of Hypertension by Age, U.S.



References

Egan BM, et al. *JAMA*. 2010 May 26;303(20):2043-50.

Fields LE, et al. *Hypertension*. 2004; 44:398- 404.

High Blood Pressure



Why is it
dangerous?

High Blood Pressure Complications

Brain:

- Cerebrovascular accident (stroke)
- Hypertensive encephalopathy:
- Confusion
- Headache
- Convulsions

Retina of eye:

- Hypertensive retinopathy

Heart:

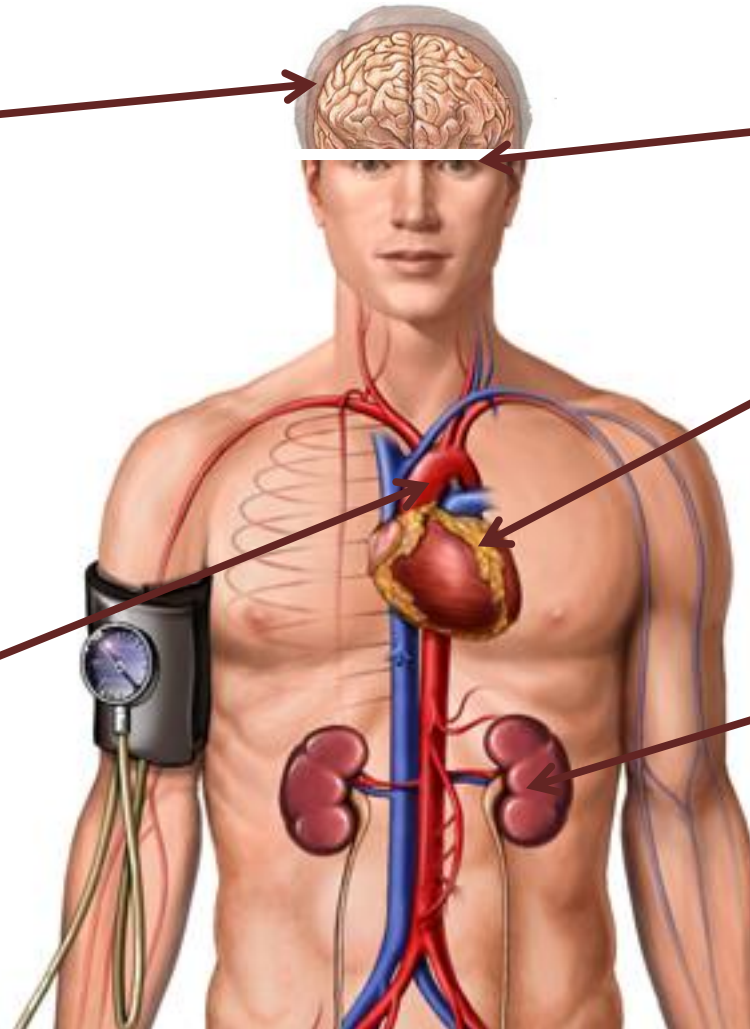
- Myocardial infarction (heart failure)

Vessels:

- Aortic aneurism

Kidney:

- Hypertensive nephropathy (chronic renal failure)

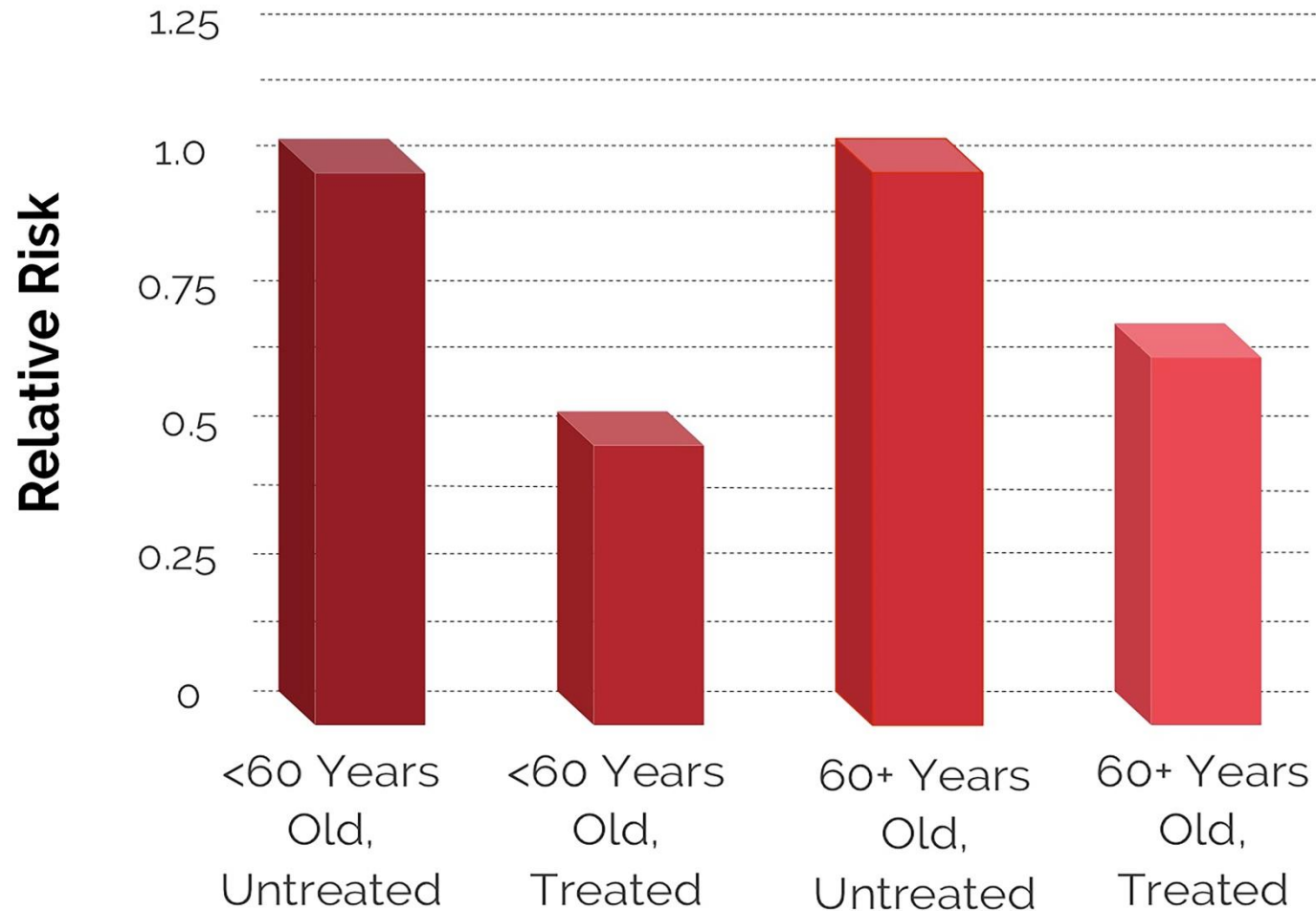


Not Only is High Blood Pressure Bad....

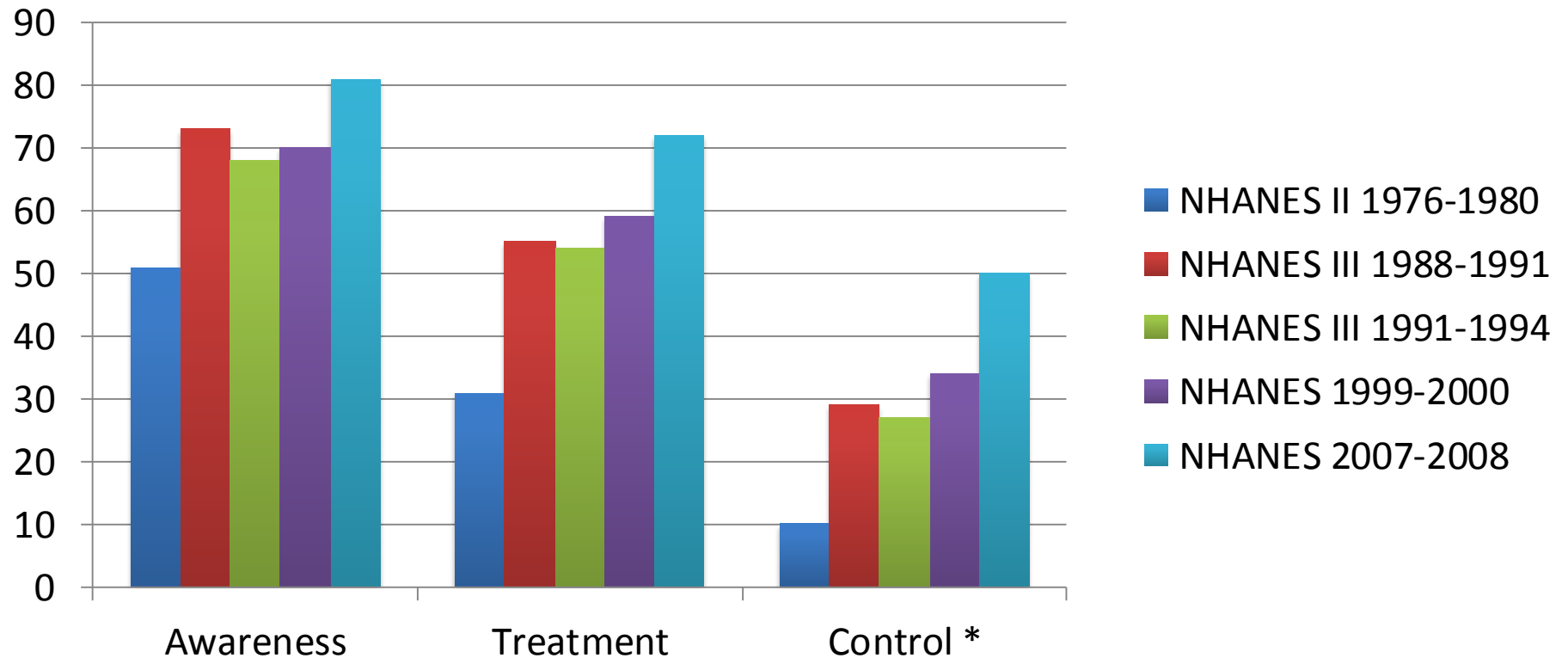
But treating it—
getting your
numbers down to
normal levels—
is good



Benefits of Treating High Blood Pressure



Trends in US awareness, Treatment, and control of high blood pressure . . .



Adapted from: JNC 7. JAMA 2003;
289:2560, and JAMA 2010; 303:2043.

in adults in the United States

Perhaps the Greatest Problem with Blood Pressure Therapy Compliance

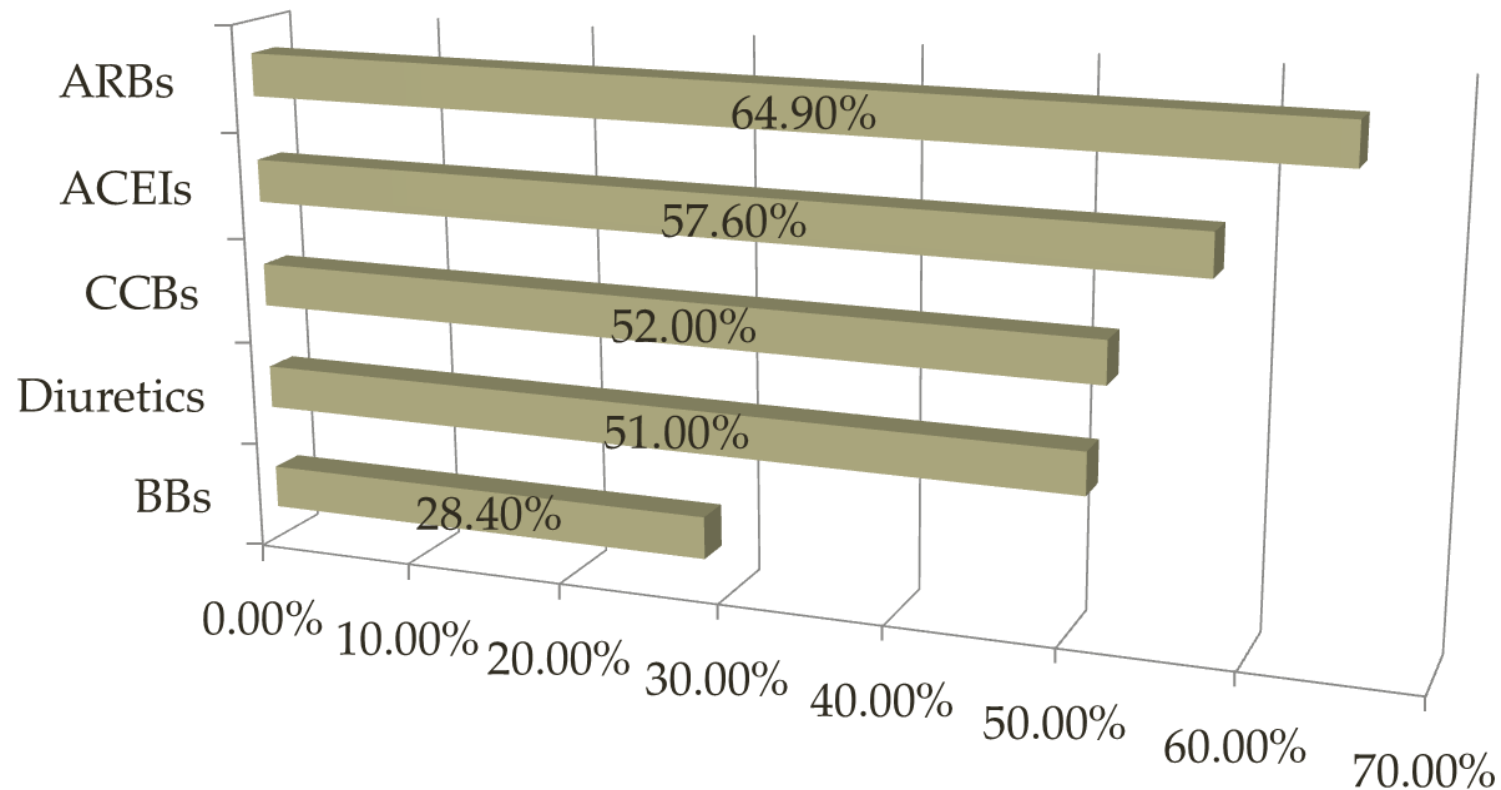
Common Symptoms of Blood Pressure Medications:

- Frequent urination
- Fatigue
- Dizziness
- Uncontrollable cough
- Exercise limitations
- Sexual dysfunction
- Depression

Typical Symptoms of Untreated High Blood Pressure

- None

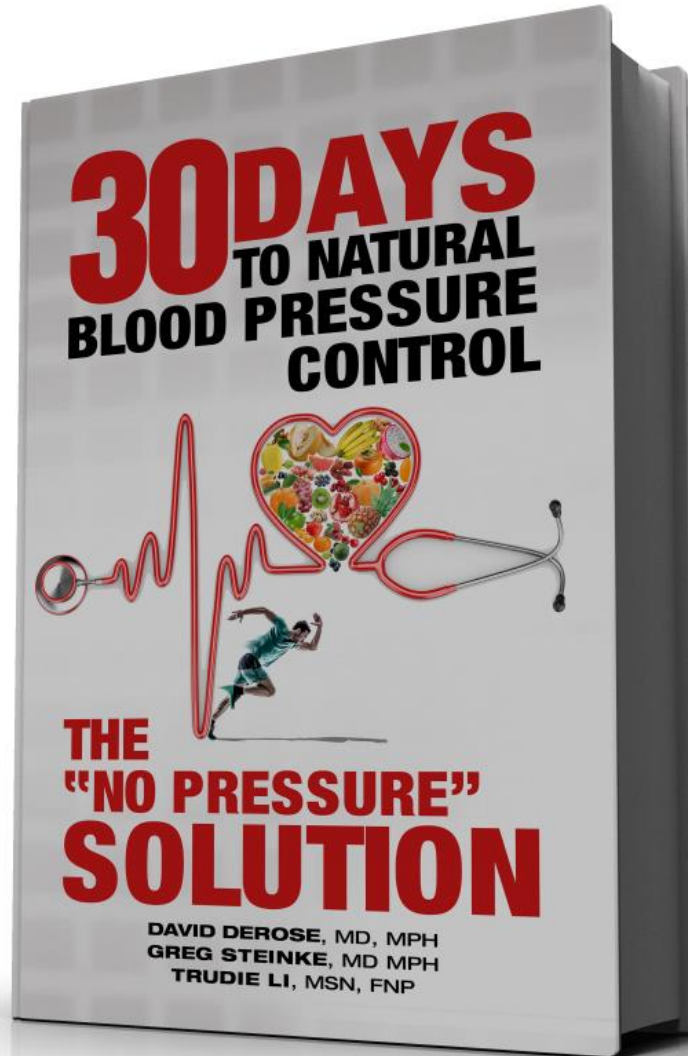
Medication Adherence Based on a Series of Studies, Most Lasting 12 Months or Less



Many of the Millions of People with Uncontrolled Hypertension...

Are pleading for non-
drug strategies to
address their problem





30 DAYS TO NATURAL BLOOD PRESSURE CONTROL



THE "NO PRESSURE" SOLUTION

DAVID DEROSE, MD, MPH
GREG STEINKE, MD MPH
TRUDIE LI, MSN, FNP

TRUDIE LI, MSN, FNP
GREG STEINKE, MD MPH
DAVID DEROSE, MD, MPH

“No Pressure”



A Framework for
Controlling Your
Blood Pressure
Naturally

Might There Be a Better Way?



Could there be a
“no pressure”
solution to blood
pressure?

Nutrition

Optimal choice of beverages

Physical exercise

Rest

Environment

Stress management

Social support

Use of natural adjuncts

Refraining from pressors &
excesses

Exercising faith in God



Where We're Headed...



1. Why Would You Want to Use This Program In Your Community?



2. How Can You Use This Program In Your Community?

The Why...



Running a Community Reversing Hypertension Seminar

- Low cost
 - DVDs available at ASI for \$50; regular price \$99.80
 - Books available at ASI for \$10; regular price \$19.95
- No training needed
- Strong spiritual bridge that is designed to appeal across the spiritual spectra, including atheists and agnostics



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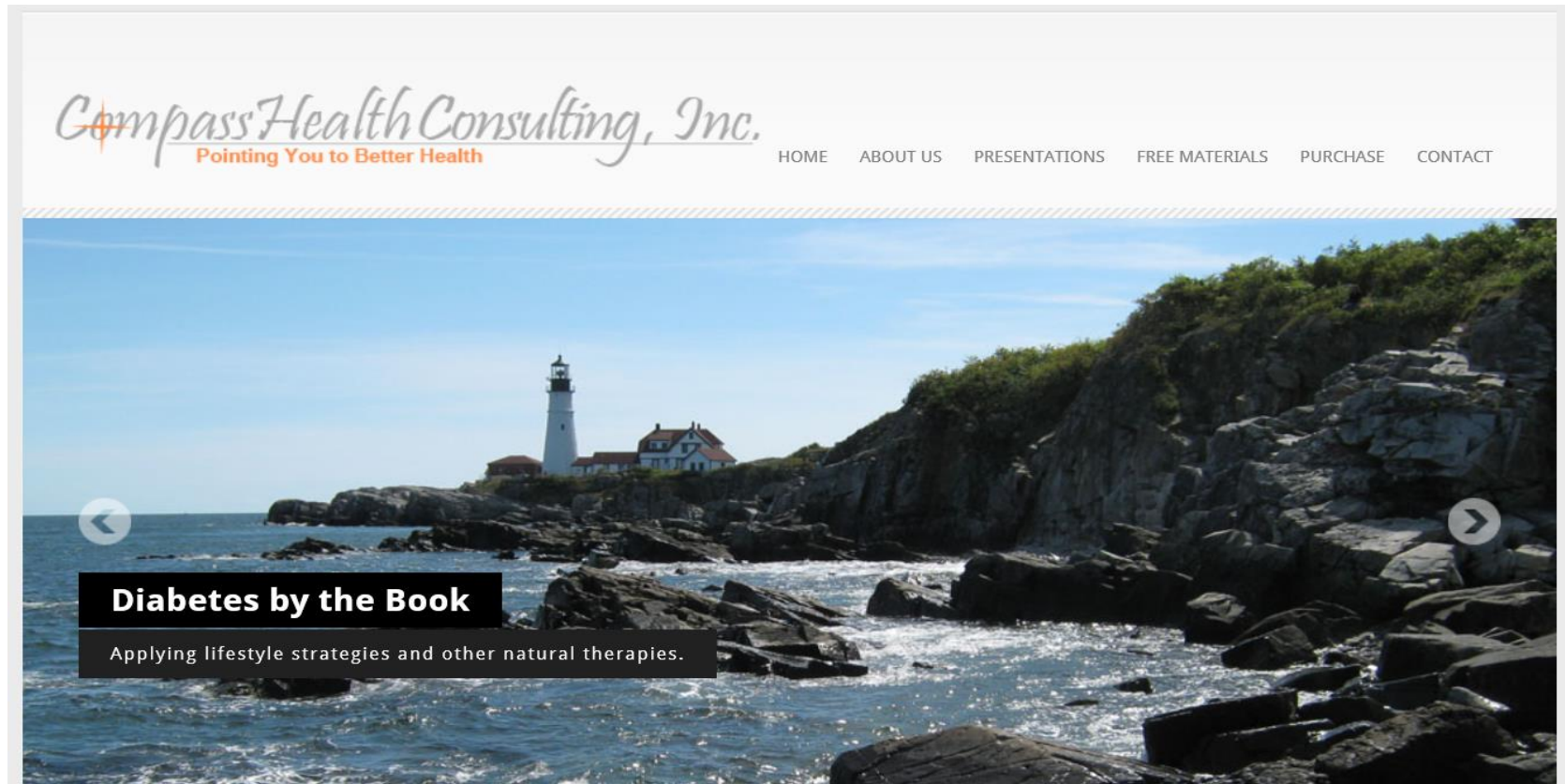
Exercising faith in God

These Ten
Elements are
Highly
Effective



2. How Can You Use This Program in Your Community?

www.compasshealth.net



Nutrition

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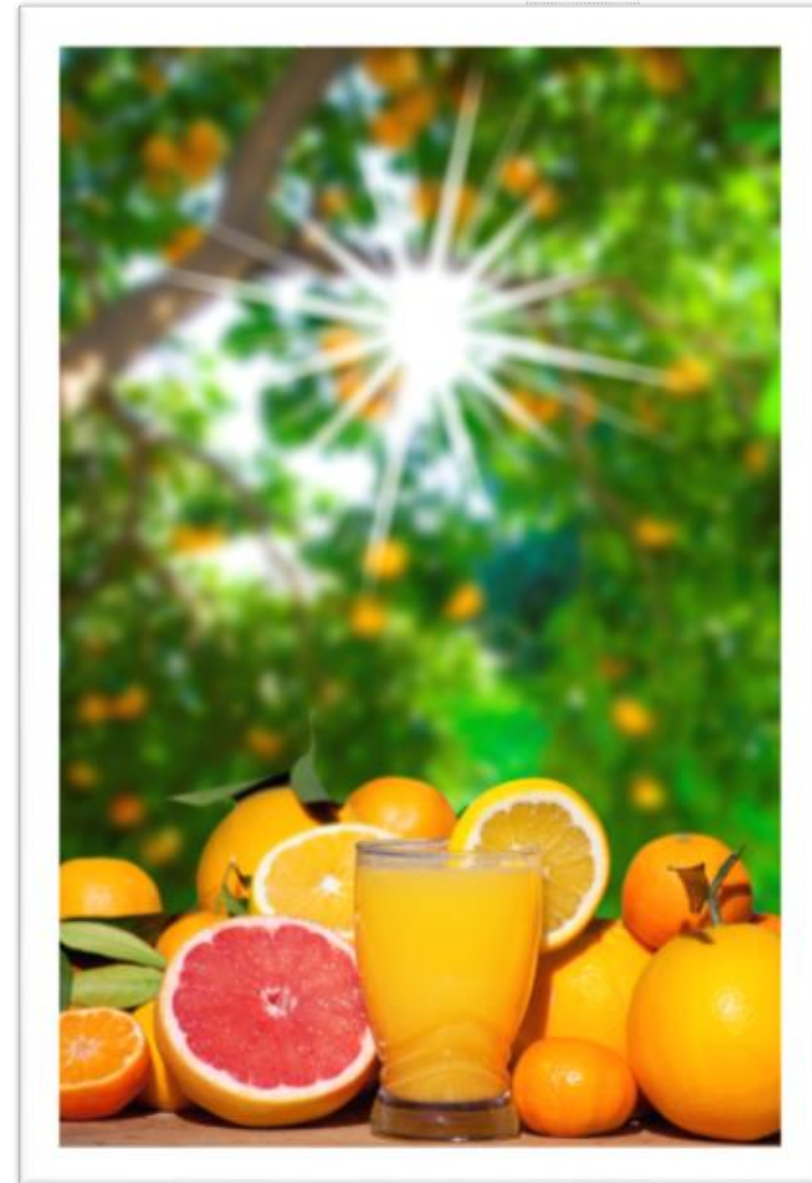
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Three Key Nutrition Principles

- Increase Plant Food Consumption
- Control Calories (Lose Weight if Overweight)
- Decrease Salt Intake



Three Key Nutrition Principles

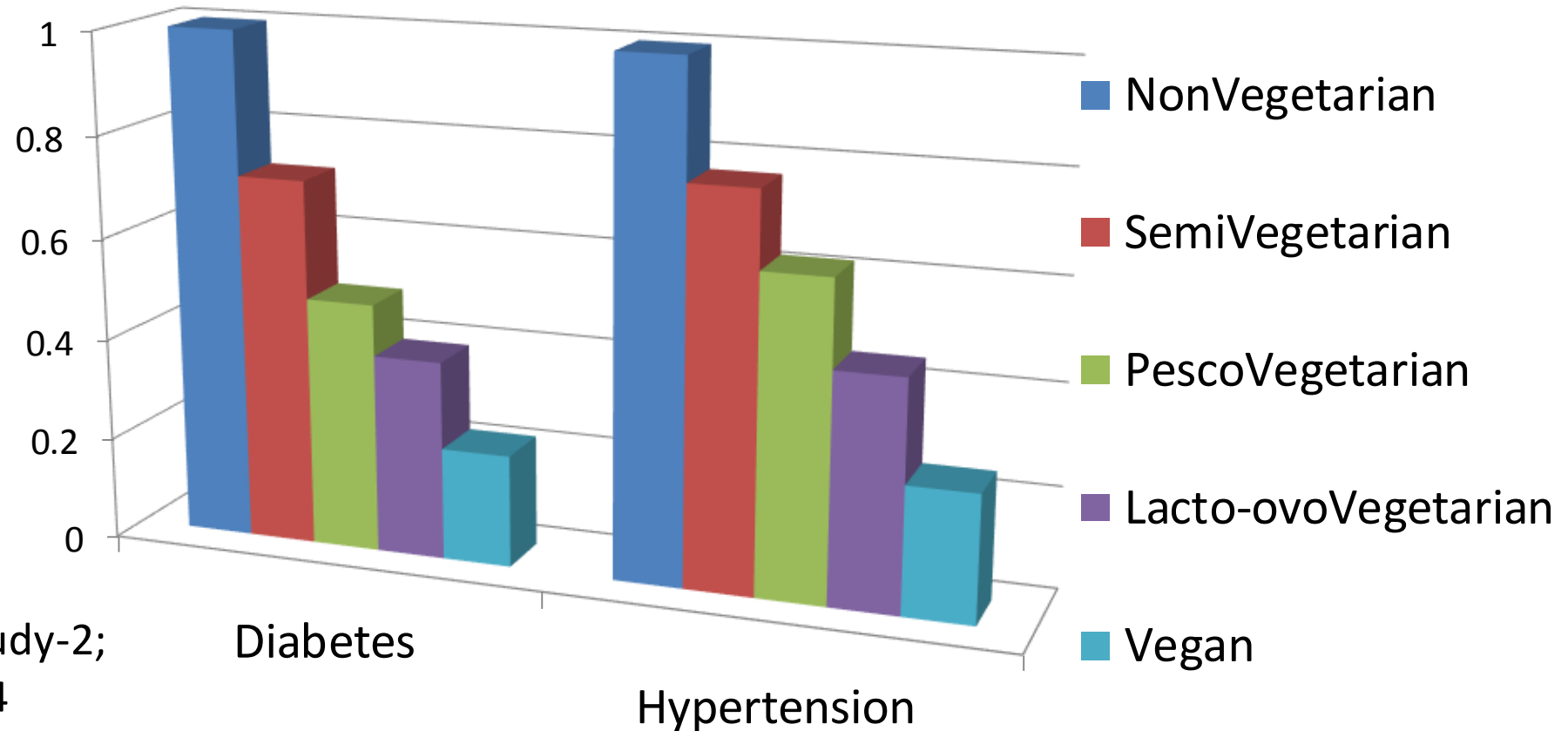
- **Increase Plant Food Consumption**
- Control Calories
(Lose Weight if Overweight)
- Decrease Salt Intake





Do Typical Diet
Practices Make a
Difference?

Do Typical Diet Practices Make a Difference?



Adventist
Health Study-2;
n = 89,224

*SemiVegetarians eat red meat, poultry, and fish less than once a week

Fraser GE. Am J Clin Nutr. 2009 May;89(5):1607S-1612S.



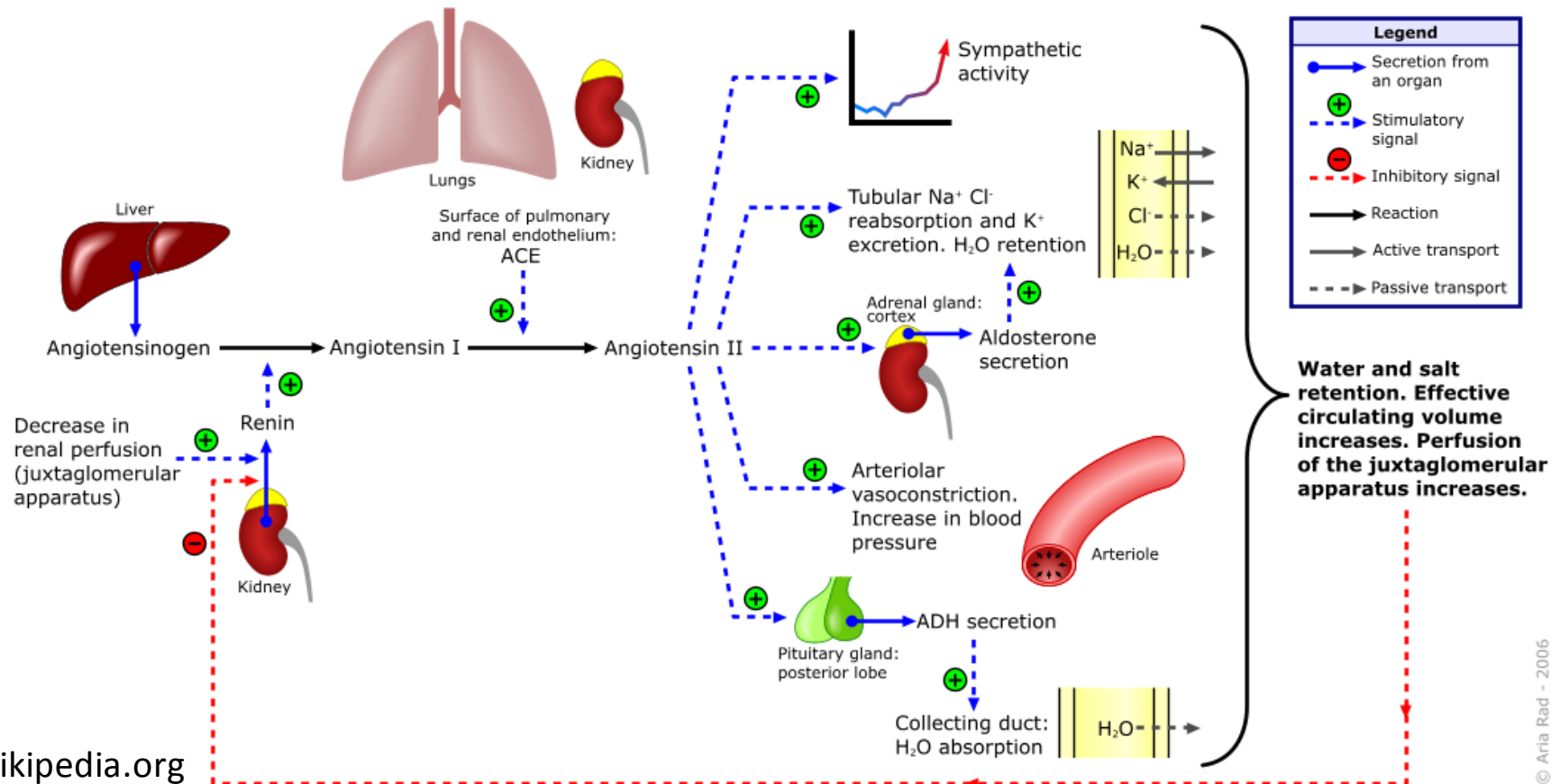
Why Are Plant Foods So Powerful?

Phytochemicals



Dietary Substances that Have ACE Inhibition Properties

Renin-angiotensin-aldosterone system



“Let Food Be Your Medicine”

- ACE inhibitory peptides have been identified in many plant foods including:
 - Soybean, mung bean, sunflower, rice, corn, wheat, buckwheat, broccoli, mushroom, garlic, and spinach.
- Protein hydrolysates of other plant foods also show strong ACE inhibitory activity although the active peptides have not been sequenced. These include:
 - peanut, chickpea, and potato

Salt Sense

A recent *New England Journal of Medicine* report looked at what is deemed to be a potentially achievable, population-wide goal of decreasing salt intake by about ½ teaspoon per day (3 g of sodium chloride = 1200 mg of sodium)

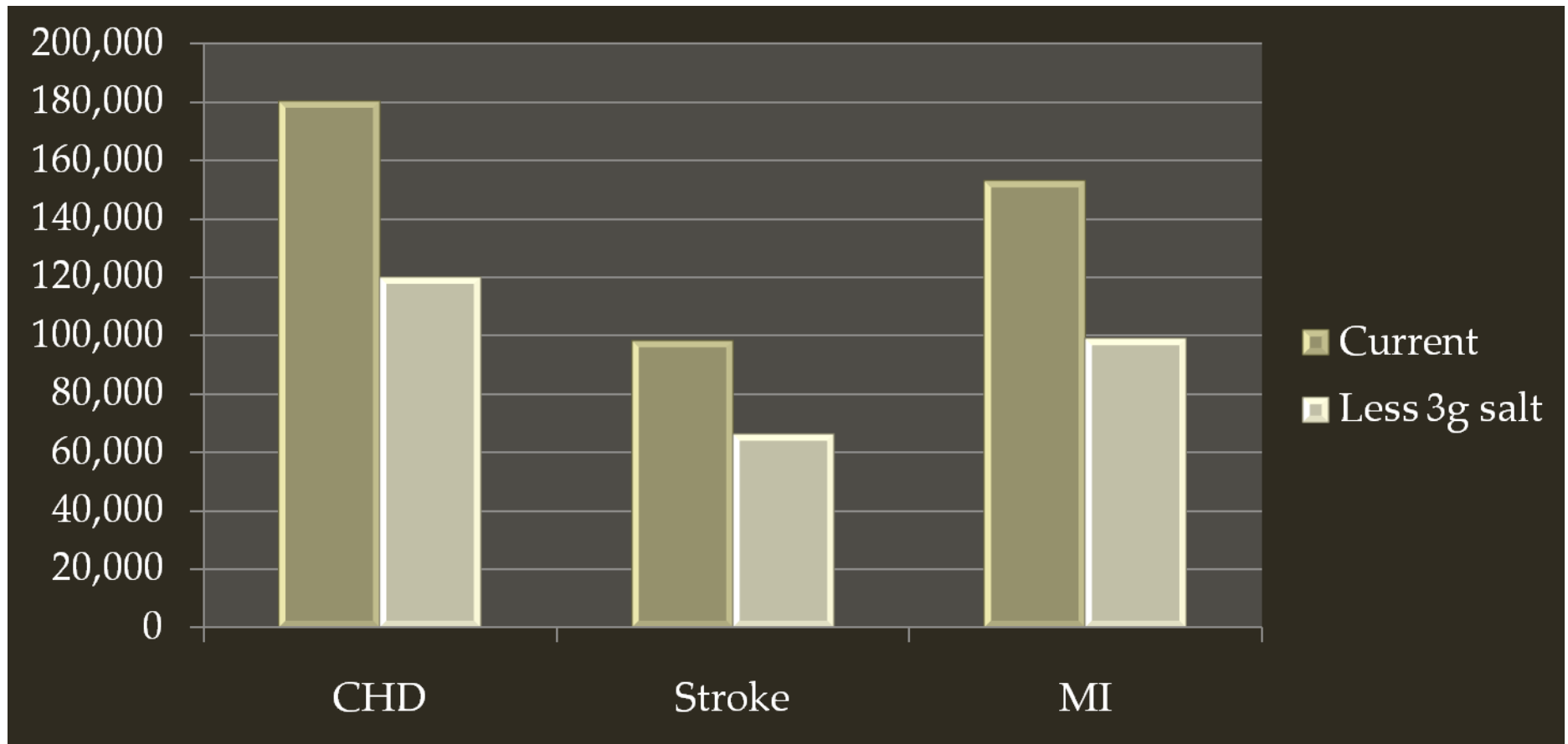


Results of Decreasing Salt by 3g Daily

If the entire US population decreased their salt consumption by only 3 grams (about ½ tsp) we would save...

- 194,000 to 392,000 quality-adjusted life-years per year
- \$10 to \$24 billion in health care costs annually.

Est. Decreases in Annual U.S. Deaths with Modest Salt Restriction



Key Conclusions

“The cardiovascular benefits of reduced salt intake are on par with the benefits of population-wide reductions in tobacco use, obesity, and cholesterol levels.”

“A regulatory intervention designed to achieve a reduction in salt intake of 3 g per day... would be more cost-effective than using medications to lower blood pressure in all persons with hypertension.”

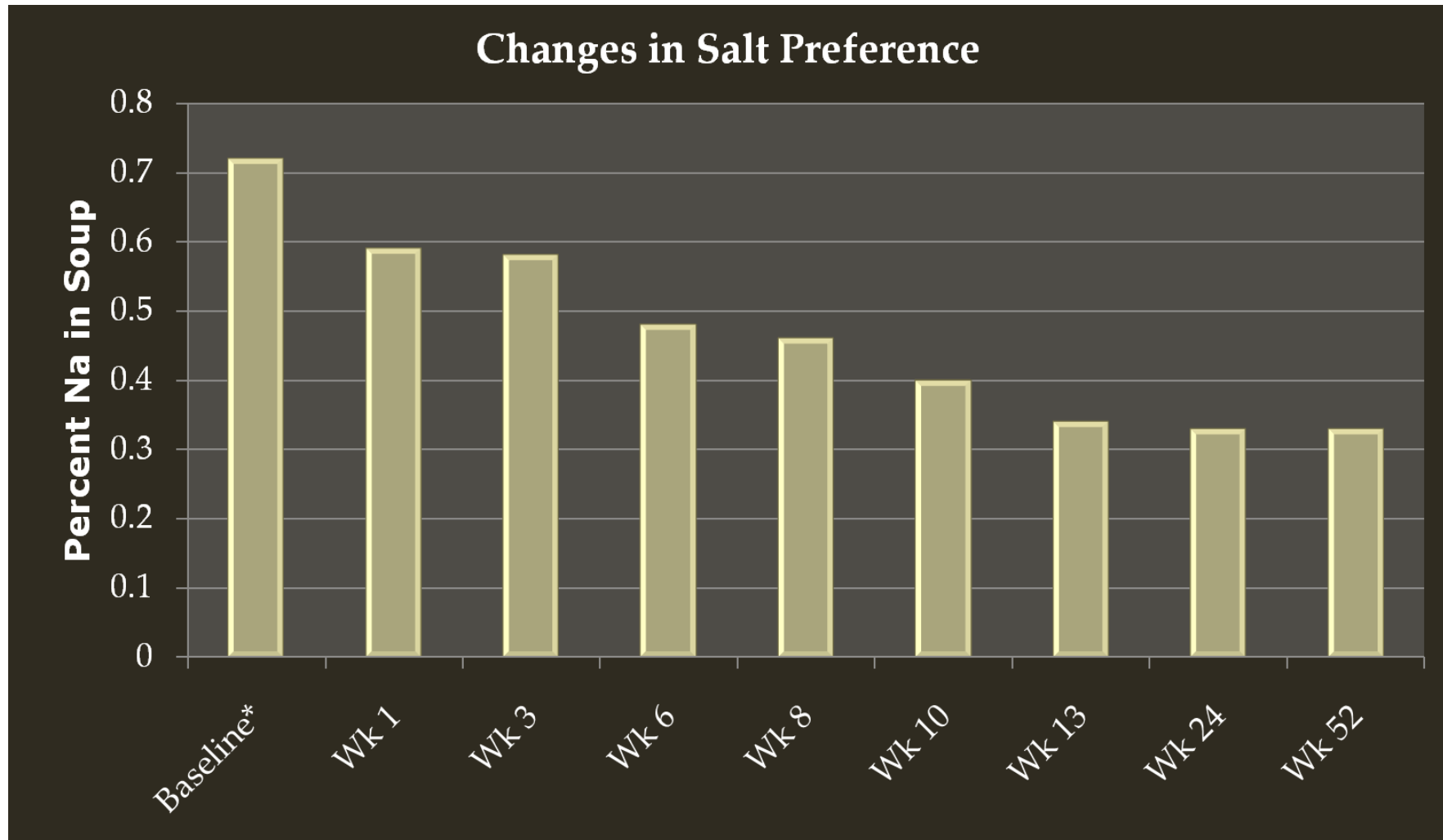
Tastes Change



When you stick with lower salt options

In a Classic Study of Sodium Restriction...

- When compared to unrestricted individuals, participants who restricted their intake of salt developed:
 - A greater distaste for salty foods
 - A greater liking for low salt foods
- In this model, using gradual changes in salt intake, statistically significant changes occurred after two to three months.



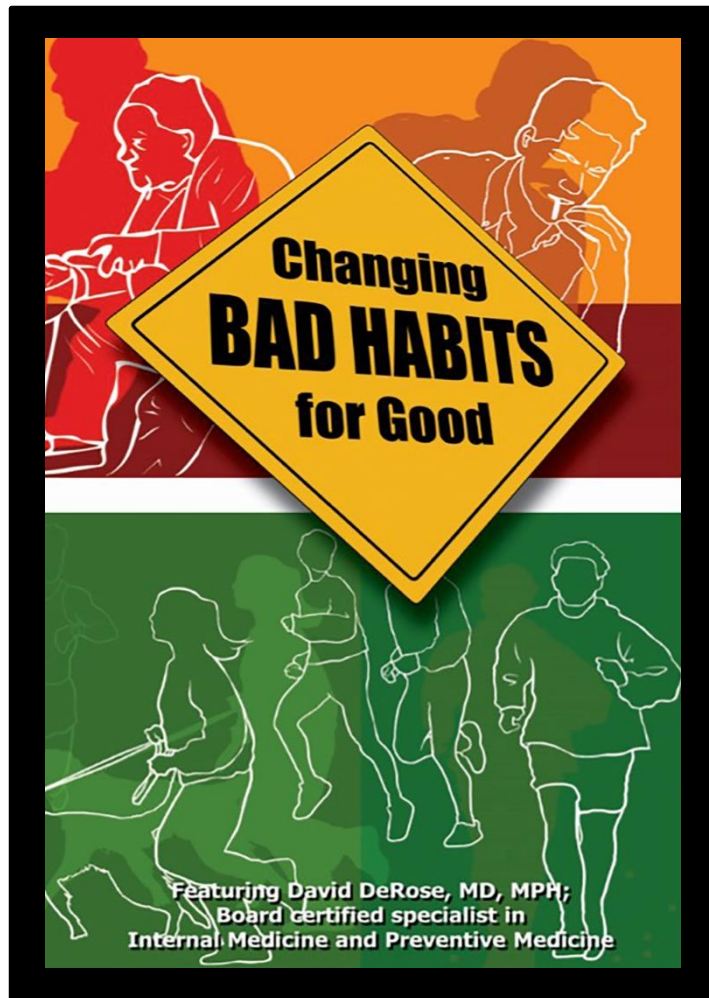
*At the time of this study, commercial soups had .8 to 1.1% sodium

Running a Community Reversing Hypertension Seminar

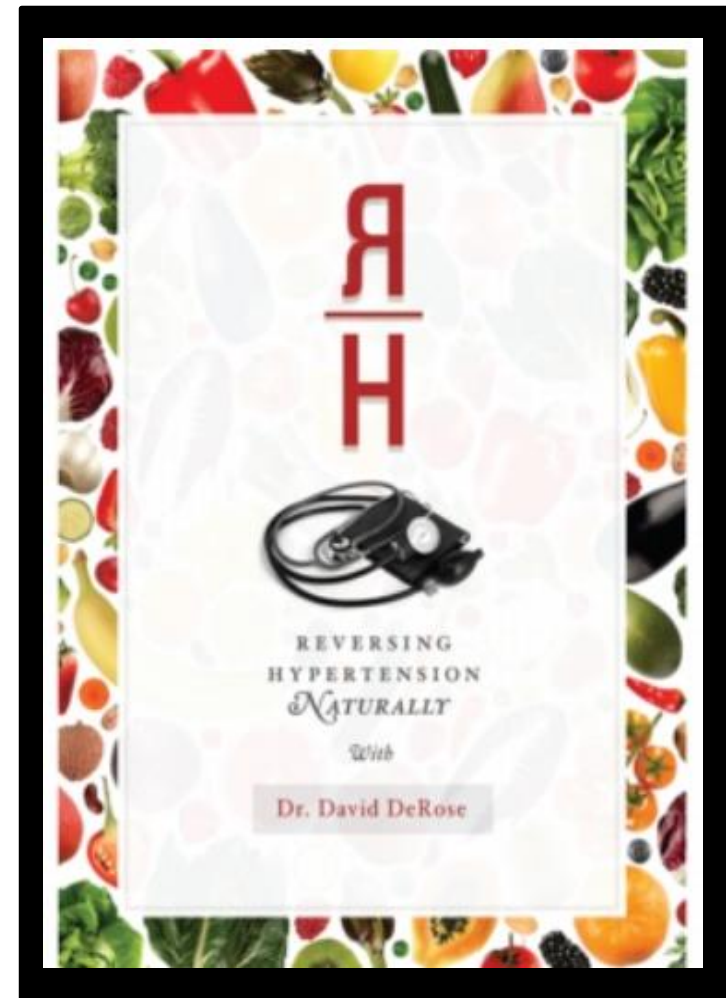
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The First DVD



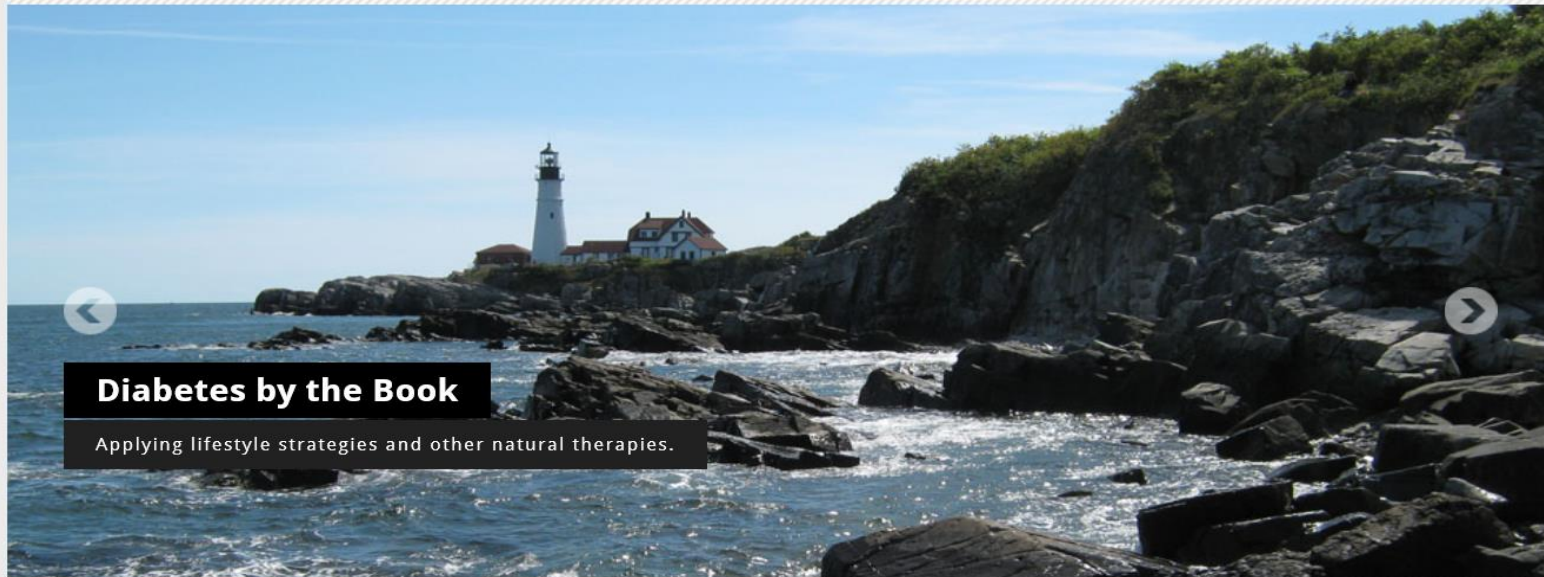
The Second DVD



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Hypothyroidism Primer - Low thyroid function is a common problem...

Host a Natural High Blood Pressure Seminar

Six-Week High Blood Pressure Program

Our recently released book, "Thirty Days to Natural Blood Pressure Control" gives readers the tools to help control their blood pressure with a minimum of medications. You can increase your likelihood of success by going through the 30-day program with others.

We have developed four inexpensive DVD resources to help you host a 30-day Natural Blood Pressure Control program in your own home, workplace, community center, or place of worship. No training or licensing fees are required to run such a program. To increase the likelihood of success we recommend an introductory meeting before launching into the six-week program that includes the 30-day plan—or as we prefer to call it "the 30-day journey." We also recommend a graduation following the six week program. Consequently, the recommended series involves eight weekly meetings. (However, shorter formats can be used, feel free to contact us for details.) The table below provides an outline of what is covered during the recommended eight weekly sessions. A more detailed description follows the table. All resources are available at www.compasshealth.net.

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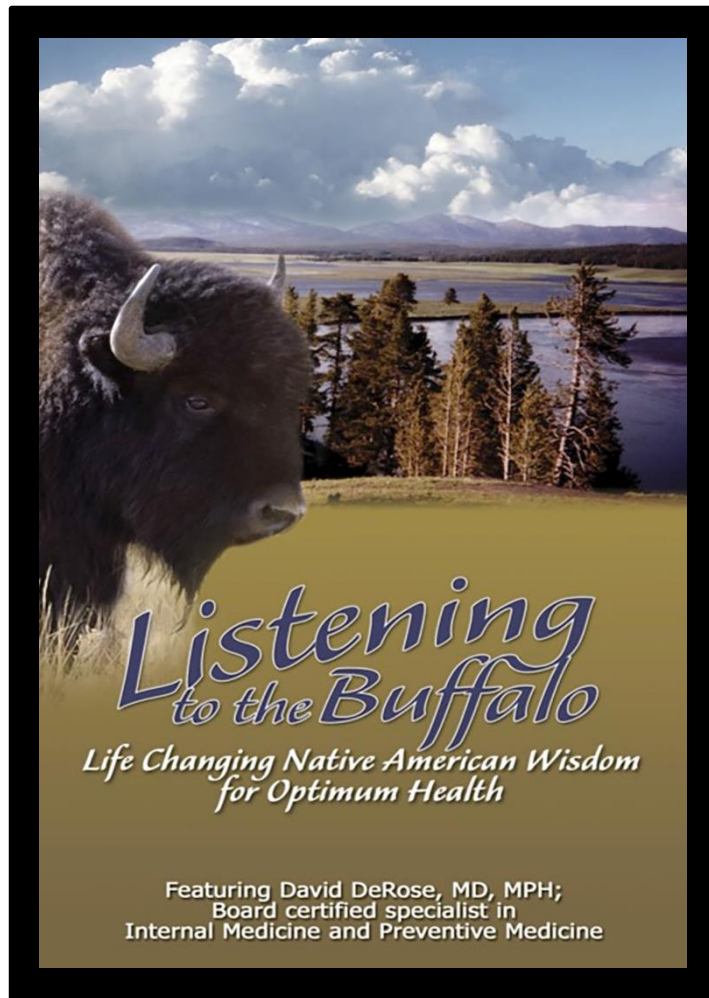
Bird Flu: Questions and Answers - Gain valuable insights into avian ...

| Session # | Day # (in reference to the actual 30-day program) | Reading in 30 Days to Natural Blood Pressure Control (to be completed before the meeting in the corresponding row) | DVD presentation(s) to show |
|-----------|---|--|--|
| 1 | N/A | N/A | "Lower Hypertension Naturally" and "Take Charge of Your Blood Pressure |

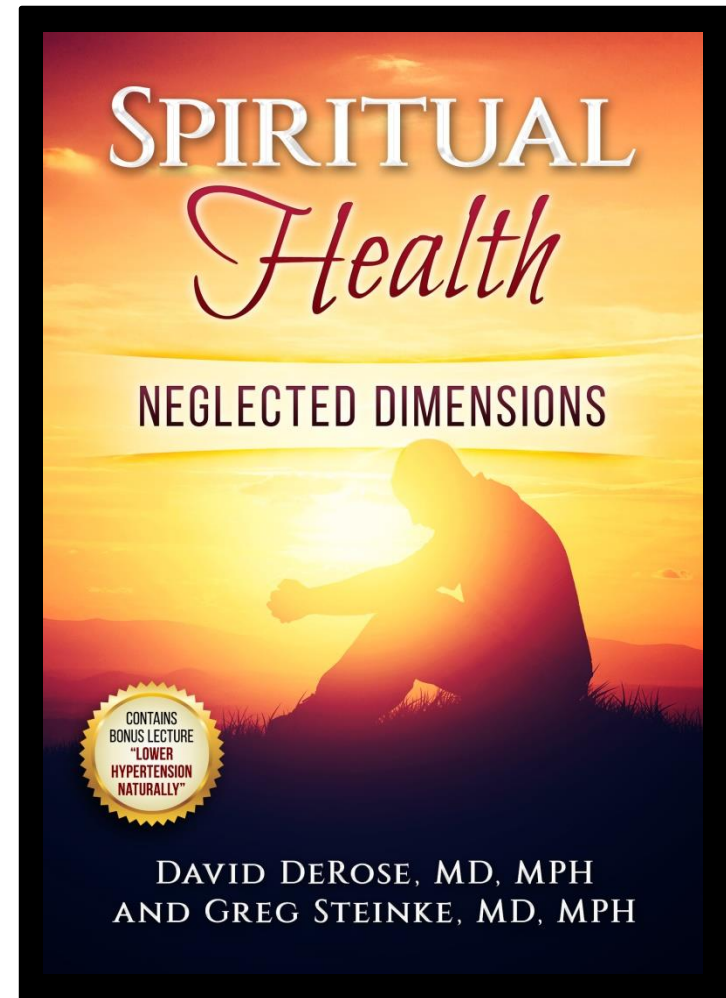
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| 2 | | | “Changing Bad Habits for Good” – Part 1 of DVD of the same name |
| 3 | | | “Reversing Hypertension Naturally” – Part 1 of DVD of the same name |
| 4 | | | “Reversing Hypertension Naturally” – Part 2 |
| 5 | | | “Reversing Hypertension Naturally” – Part 3 |
| 6 | | | 3 “Listening to the Buffalo” – Part 1 of DVD of the same name |
| 7 | | | 5 “Changing Bad Habits for Good” – Part 2 |
| 8 | | | “Spiritual Health: Neglected Dimensions” – found on DVD of the same name |

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| 7 | 30 days completed | Chapters 14-15 | “Changing Bad Habits for Good” – Part 2 |
| 8 | Graduation | N/A | “Spiritual Health: Neglected Dimensions” – found on DVD of the same name |

The Third DVD



The Fourth DVD



Nutrition

Optimal choice of beverages

Physical exercise

Rest

Environment

Stress management

Social support

Use of natural adjuncts

**Refraining from pressors &
excesses**

Exercising faith in God





Best Blood Pressure Beverages

Avoid Alcohol

- More than three drinks at a time raises blood pressure significantly.
- Regular binge drinking can lead to long-term BP increases.
- “Moderate” drinking is also a problem:
 - It can interfere with BP medication effectiveness
 - It can increase side effects of some BP Meds.
 - It can undermine weight control efforts:
 - Alcohol packs a big caloric load
 - Alcohol decreases will power

Avoid Caffeine



The Acute Impact



“Reviews of caffeine's acute effect on blood pressure indicate changes of 3-15 mm Hg systolic and 4-13 mm Hg diastolic. Typically, blood pressure changes occur within 30 minutes, peak in 1-2 hours, and may persist for more than 4 hours.”

Avoid Caffeine

A telling 2004 review:

“Critical review of dietary caffeine and blood pressure: a relationship that should be taken more seriously.”



Dr. James' Conclusions...

- “There is extensive evidence that caffeine at dietary doses increases BP.”
- “When considered comprehensively, findings from experimental and epidemiologic studies converge to show that BP remains reactive to the pressor effects of caffeine in the diet.”

Dr. James' Conclusions...

- “Overall, the impact of dietary caffeine on population BP levels is likely to be modest, probably in the region of 4/2 mm Hg.”
- “At these levels, however, population studies of BP indicate that caffeine use could account for premature deaths in the region of 14% for coronary heart disease and 20% for stroke.”

Are Non-Caffeinated Soft Drinks A Better Option?



Nutrition

Optimal choice of beverages

Physical exercise

Rest

Environment

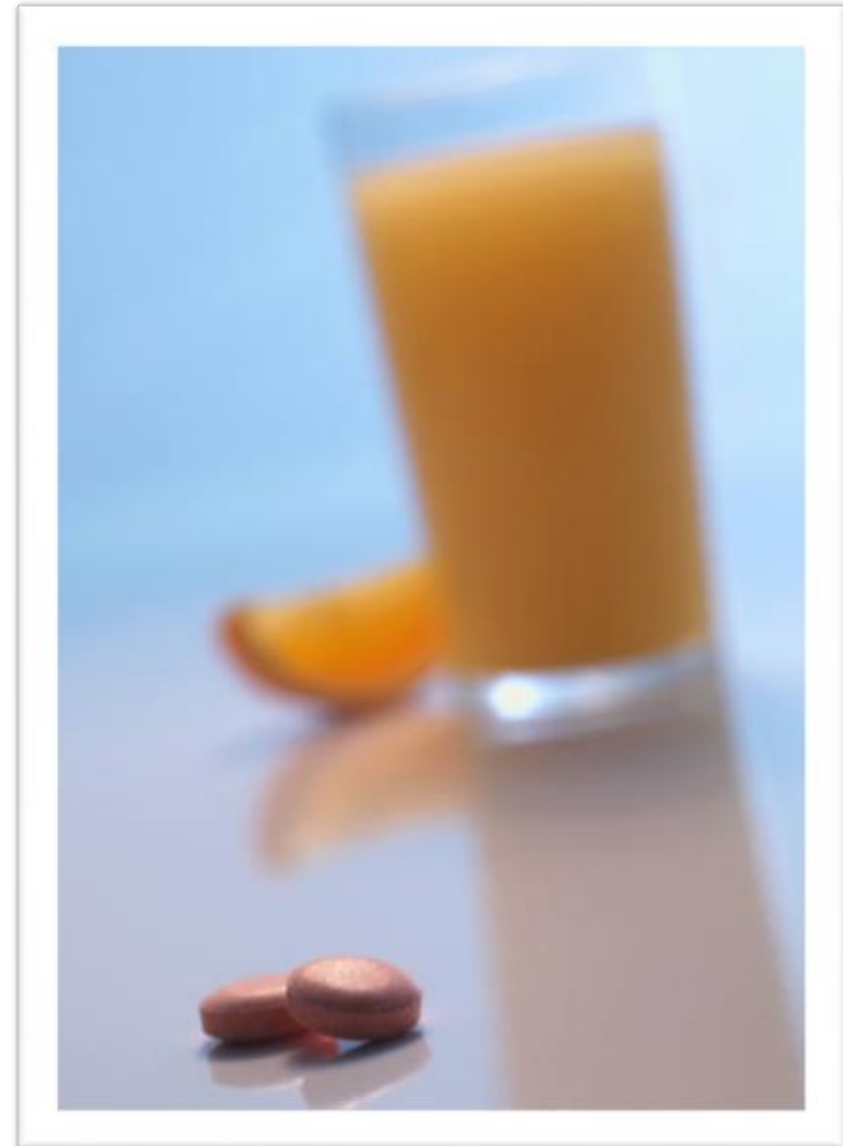
Stress management

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What Supplements Are Being Used for Hypertension?

2008 CAM Hypertension Review by Richard Nahas, MD

Dr. Nahas found evidence that certain supplements may help with hypertension.

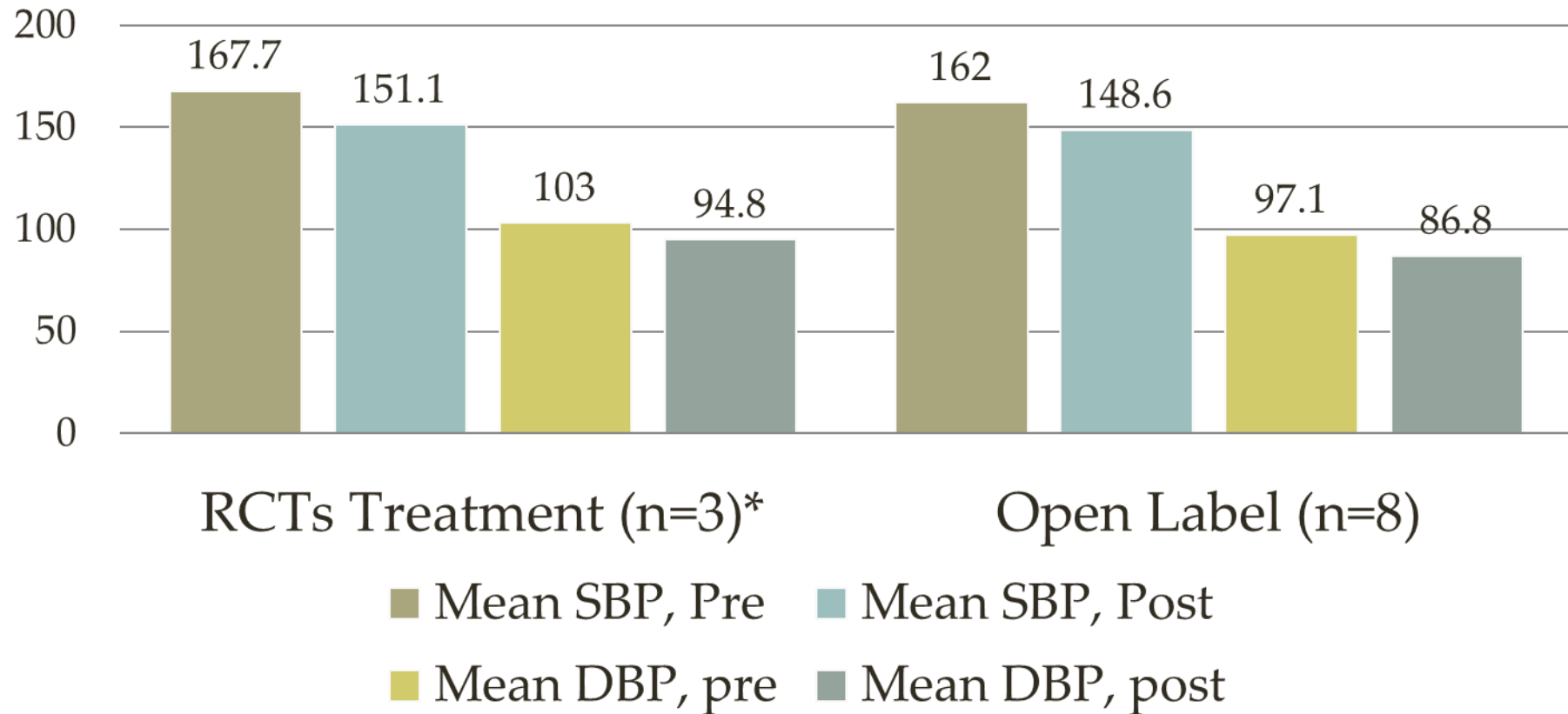
These included:

- Vitamin D (if deficient)
- Melatonin
- Coenzyme Q10

Coenzyme Q10 for Hypertension?

- A 2007 meta-analysis was performed of 12 clinical trials (362 patients)
- This included: three randomized controlled trials, one crossover study and eight open label studies.
- Data was impressive, even in the most carefully designed studies

Coenzyme Q10 Results



*NS change in RCT control groups (both final SBP and DBP means within 1mm of baseline means)

Side Effects of CoQ10 Therapy

Either no or minimal side effects were noted in the 12 studies:

- One trial:
 - 37% of 30 CoQ10 treated patients had gastrointestinal side effects
 - compared to 21% of those on the placebo.
 - These differences were not statistically significant (P=0.29).
- Another trial:
 - 13% incidence of side effects (3 of 23 treated patients)
 - one each experienced: nausea, flatulence or headache
- Two trials: reported side effects to be absent
- Eight trials: no remarks about side effects

CoQ₁₀ Dosage

- Dosages in the reviewed trials ranged from 34 mg/day in the early trials to 225 mg/day in the later ones.
- Higher doses were employed in the more recent studies.
- The largest study:
 - gauged dosage on what they felt was a therapeutic blood level of CoQ₁₀ (>2.0 g/ml).
 - to get such levels different patient required different dosages, between 75 and 360 mg/day

Conclusions

“We conclude that coenzyme Q₁₀ has the potential in hypertensive patients to lower systolic blood pressure by up to 17 mm Hg and diastolic blood pressure by up to 10 mm Hg without significant side effects.”

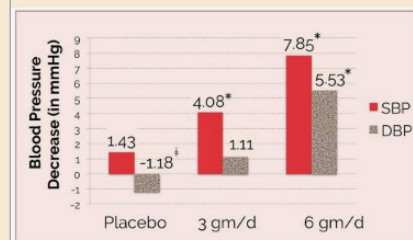
Other Natural Adjuncts

- Magnesium
- Vitamin D
- Melatonin
- Hibiscus Tea
- L-Arginine
- Omega-3 Fats
- Probiotics



either one of two doses of L-arginine or a placebo for eight weeks. The impressive blood pressure findings are documented in [Figure 12.10](#). Of note, the research team also documented improvements in blood sugar, cholesterol, and triglycerides in those who used the L-arginine supplements. As with blood pressure, the greatest improvements were logged by those taking 2 grams of L-arginine three times daily or a total of 6 grams per day.

Figure 12.10 Decreases in BP with L-Arginine Supplementation: A Clinical Trial in 83 Overweight Adults



* Statistically significant at $p < .001$; all other results not significant

[†] This negative number indicates an average *increase* in blood pressure, albeit not statistically significant

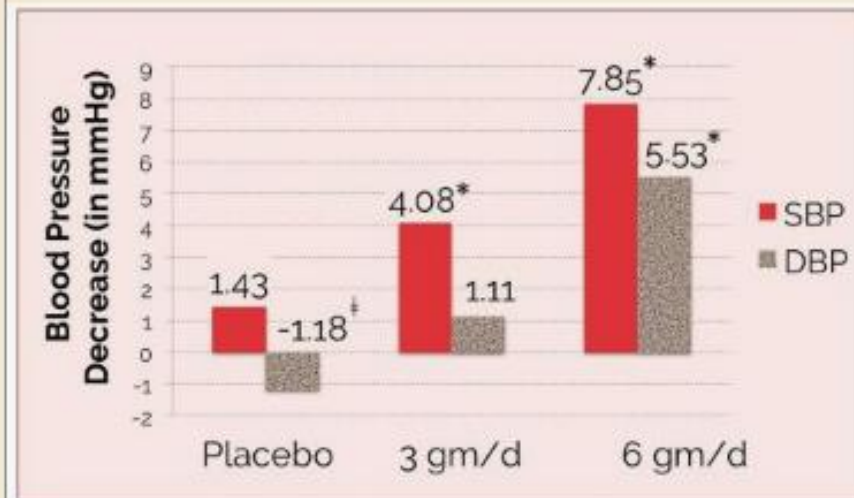
So, is L-arginine for you? It depends. You probably guessed there was a reason why Dashtabi chose

overweight patients. It turns out that L-arginine supplementation seems to benefit primarily those who have other heart disease risk factors.²⁴² The biochemistry is complex but involves a rogue chemical called asymmetric dimethylarginine (ADMA).²⁴³ ADMA partially blocks the uptake of L-arginine by your blood vessels and thus decreases your body's ability to make that vital nitric oxide. On the other hand, taking more L-arginine can help your body compete with these enemy combatants, and boost NO production. The bottom line: The higher your ADMA levels, the more likely L-arginine will help lower your blood pressure.

Are you ready for me to sell you a blood test? Sure, it would be nice to know where you stood on the ADMA front, but for most of us it's not necessary. High blood pressure alone tends to raise levels, but the worst ADMA values tend to occur in the face of multiple cardiovascular risk factors like elevated cholesterol, kidney failure, atherosclerosis, and chronic heart failure.²⁴⁴ If it sounds like I'm talking about you, supplemental L-arginine may be worth considering.

I would particularly recommend a serious look at L-arginine, if you're like Gwen and have stopped, or

**Figure 12.10 Decreases in BP with L-Arginine
Supplementation: A
Clinical Trial in 83
Overweight Adults**



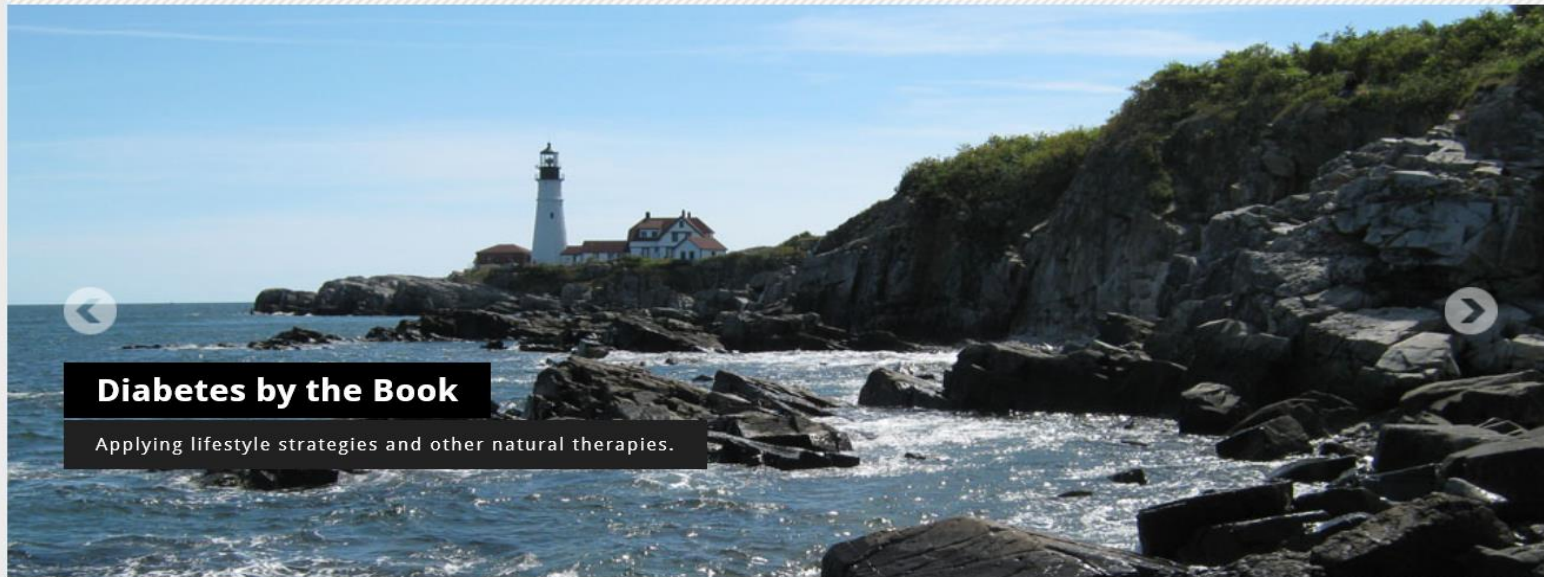
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| | | | |
|---|-------------------|-----|--|
| 8 | Church graduation | N/A | "Spiritual Health: Neglected Dimensions" – found on DVD of the same name |
|---|-------------------|-----|--|

• Week 1

- Greet those in attendance; share brief introductions.
- Provide an overview of the eight sessions. Let them know this is not a treatment program, but rather an educational journey that provides them with information they can use to naturally lower their blood pressure. Tell all participants they should check with their health care providers before making any of the changes described in the book or other seminar materials.
- Show approximately 40-minutes of DVD content that introduces participants to the 30-day program. It is found as the bonus material on our DVD, *Spiritual Health: Neglected Dimensions*. This includes a 30-minute presentation by Dr. DeRose entitled, "Lower Hypertension Naturally" preceded by a ten minute motivational message that connects the presentation to the longer six-week program. In these two presentations, viewers will be exposed to the key points of the 30-Day Plan using a somewhat different conceptual framework.
- After viewing the presentations, discuss informally what was memorable about the material covered.
- Give attendees the weekly reading assignment: Chapters 1 to 4 of the *30 Days to Natural Blood Pressure Control* book. This should be completed by the start of next week's meeting.
- Encourage each member of the group to start checking his or her blood pressure on a daily basis. Next week they will begin charting results in the book's Appendix A under "Week 0."
- Reemphasize that the program expects each attendee, especially those on prescription medications, to check in with their primary care provider (PCP). Let that health care professional know they would like to make lifestyle changes that will likely lower their blood pressures. Explain that it is especially important to learn what their PCP wants them to do when they start seeing lower blood pressure (BP) numbers. (The book's authors generally start tapering medications when the blood pressure is running consistently under 120 systolic.) Remind participants that it is important to NOT stop any blood pressure medications without consulting with the prescribing professional.

• Week 2

- It is ideal (but not necessary) if you provide blood pressure checks prior to the start of the session; offer attendees the opportunity to keep track of their blood

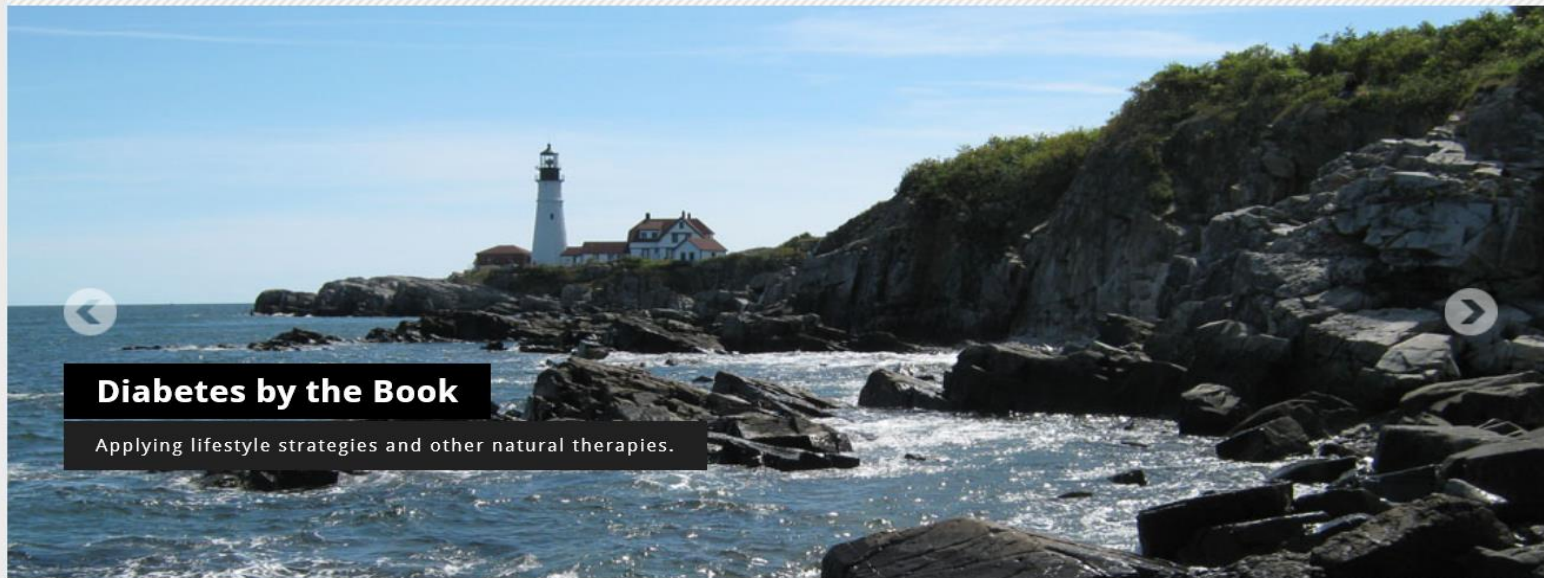
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- Booth 714
- The CompassHealth Website

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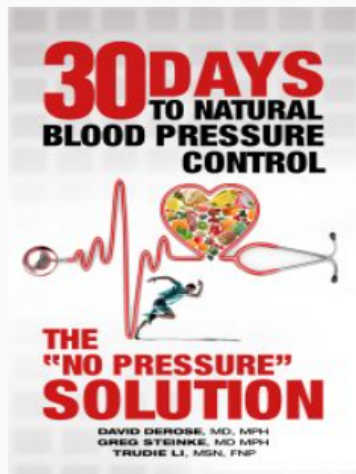
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Now Available... Cutting-Edge Help for High Blood Pressure



High Blood Pressure. Even if you haven't received the diagnosis *yet*, as many as

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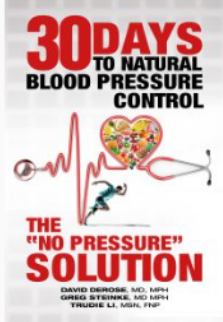
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High Blood Pressure. Even if you haven't received the diagnosis *yet*, as many as three-quarters of the Western world will have to contend with high blood pressure sometime in their lives. However you no longer need to be a victim. Drs. DeRose and Steinke along with Nurse Practitioner Li draw from cutting-edge medical research and their decades of clinical experience to guide you on an amazing 30-day journey.

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This book normally lists for \$19.95. However between now and Friday, August 12, 2016, you can get it for the introductory PRE-PUBLICATION price of only \$11.95. We can offer this price only for a limited time, as we prepare for a large print run. BOOKS ARE EXPECTED TO SHIP ON OR BEFORE SEPTEMBER 30, 2016. Don't Delay. Take advantage of this special-time limited sale TODAY.

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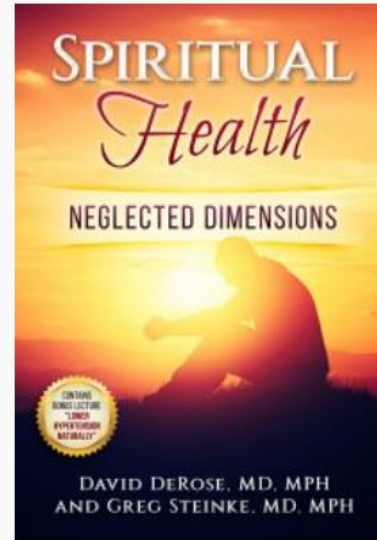
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Chapter 14. Exercising Faith in God? Spiritual Connections to High Blood Pressure

Congratulations. You've made it to the end, almost. You're either essentially at the end of your 30-day journey, or just beginning a final, arduous ascent. How could you be staring at such disparate paths?

The topic of spirituality, and its impact on blood pressure, is complex and powerful, but the link is undeniably there, and so it must be addressed. In fact, the analogy of the 30-day journey provides the solution to the question above about the two disparate paths. After all, any lengthy trip usually offers more than one way to get to your final destination. So you can *take the full journey*, and go through this chapter as rigorously as you've gone through the rest of the book; or you can *take the shortcut*, and simply skim through the material.

If you're inclined to choose the latter, then commit about 60 minutes to it. Have a pencil as you quickly read through the high points of the chapter (paying special attention to headings, tables, and graphs). Don't get bogged down. If interested in one section, don't stop there. Simply make a notation in the margin, then ...