

~ Healthy Lifestyle ~

Is your favorite food helping or harming you?

Controlling inflammation through your diet looks a lot like controlling for weight gain



Photos provided

By Stephanie Harvin

No look at chronic pain would be complete without considering the foods we eat. Not surprisingly, the same foods that contribute to a healthy diet are the ones recommended by experts to help control inflammation.

Although the experts vary on exactly what foods may have more or less inflammatory effects on the body, a Harvard study suggests an anti-inflammatory diet should look like a Mediterranean diet, which consists of:

- Tomatoes
- Olive oil
- Green leafy vegetables, such as spinach, kale and collards
- Nuts like almonds and walnuts
- Fatty fish including salmon, mackerel, tuna and sardines
- Fruits such as strawberries, blueberries, cherries and oranges.

And the study revealed that the

foods to avoid are the same culprits that have been shown to give you an increased risk of type 2 diabetes and heart disease:

- Refined carbohydrates, such as white bread and pastries
- French fries and other fried foods
- Soda and other sugar-sweetened beverages
- Red meat (burgers, steaks) and processed meat (hot dogs, sausage)
- Margarine, shortening and lard.

Dr. Frank Hu, professor of nutrition and epidemiology in the department of nutrition at the Harvard School of Public Health, says that while unhealthy foods contribute to weight gain, several studies have suggested that even taking excess weight into account, there was still a link between foods and inflammation. "Some of the food components or ingredients may have independent effects on inflammation over and above increased caloric intake," Hu says.

Controlling your weight gain and inflammation at the same time can reduce flareups of chronic pain, even if it doesn't control the pain entirely.

Some experts have suggested that berries may have an active role to play in fighting the inflammation that leads to chronic pain.

Eating antioxidant-rich berries may help your body combat inflammation that could lead to heart disease, according to Dr. David Heber, director of the UCLA Center for Human Nutrition at the University of California, Los Angeles. And they may also lower your chance of developing colon cancer, protect your eye health and help keep your memory sharp as you age. Berries are a good source of the soluble form of fiber, which helps lower cholesterol, according to Dr. Heber.

All berries have substances in common that make them a valuable part of your diet. The vibrant berry colors signal their health benefits, according to Ruth Frechman, MA, registered dietitian and spokesperson for the American Dietetic Association.



"When you see color, you know there will be antioxidant properties [in the berries]," says Frechman.

It's not just the antioxidants that give you a lift. Those tiny crunchy seeds that give berries their characteristic texture also provide a health boost. The seeds and the skin contain dietary fiber. In fact, a cup of berries has more fiber than a slice of whole wheat bread. --CTW Features

Dysport Day

at Kelly Hood MD

February 13

All proceeds will be directly donated to Lafayette Rotary Club/New Day For Children. As we make you feel better, you can help smooth out the life of a young girl.



If you would like to participate in this fundraiser, please call Kelly Hood MD at 925-283-5500.

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What's New in Breast Cancer Treatment?

By Tiffany Svahn, MD

The end of the year is not only the time for families and holidays, but also when the latest updates in breast cancer treatment are announced at the San Antonio Breast Cancer Symposium (SABCS). Thus, as we head into 2020, we have new insights into improved treatment options for breast cancer.

An important question that often arises in treating hormone-sensitive early stage breast cancer is how long should a patient remain on her estrogen blocker? Five years? Ten? There have been several studies addressing this question, and the answer remains unclear. The NSABP-B42 study looks at women who have completed 5 years of anti-estrogen therapy - either aromatase inhibitor (AI) or tamoxifen followed by AI. Women were randomized to an additional five years of AI versus placebo. There was a 4% absolute reduction in breast cancer recurrence with extended AI use, but no difference in overall survival seen thus far. Importantly, there was no increased risk of osteoporotic fractures with longer AI use. The decision to continue anti-estrogen therapy beyond 5 years remains individualized based on the patient, risk of their tumor, bone density score, and tolerance of the treatment. We now have another important study showing a potential benefit of longer treatment, and genomic assays are being investigated which will hopefully help guide treatment decisions.

HER2-positive metastatic breast cancer is an area where we have seen several treatment advances. Three important therapies were presented at SABCS that will soon, if not already, be available to treat patients. Trastuzumab deruxtecan (Enhertu®) was granted accelerated FDA approval on 12/20/2019. The oral HER2-blocker, tucatinib, was granted FDA breakthrough designation on 12/18/19 based on improvement in overall survival, including patients with brain metastases. Finally, margetuzimab (an anti-HER2 antibody) is awaiting FDA approval based on improvements in outcomes in combination with chemotherapy compared to trastuzumab (Hercpetin®) and chemotherapy.

Breast cancer is a complex disease, with treatment options varying between the stage and specific biology of an individual's cancer. Decisions about therapy are becoming increasingly targeted to specific pathways, and molecular testing is continuing to evolve to better tailor our treatments. We continue to see improved outcomes with better quality of life.

Please join me at the Cancer Support Community on February 19th at 6:30 pm to hear more about new treatment strategies in breast cancer. Reservations recommended, email sgoldberg@dvoimg.com or call 925-677-5041.



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