



SUNBLOCK: Most products offer protection against UVB rays but not necessarily UVA rays, which can increase risk of skin cancer

Safer sunbathing remedies

By STEPHANIE BLOYD
Mother Earth News

It's best to avoid getting sunburnt, rather than endure the consequences. But if you do spend too much time in the sun, try these five natural remedies to soothe your skin.

Five natural remedies

- **Aloe.** The inner gel of the aloe vera leaf has been shown to speed the healing of radiation-induced burns. Scoop the gel directly from split leaves or buy commercially prepared gel at a health food store or herb shop. Apply aloe gel after showering, then reapply it a few more times each day until the pain has subsided.
- **Cucumber.** The cool cucumber is often used for soothing burns. Simply slice open a cucumber and wipe it directly onto your skin.
- **Calendula.** Research shows calendula flowers speed the healing of burns by stimulating the growth of new skin cells, closing wounds and reducing inflammation. You can buy commercial skin creams containing calendula at many health food stores.
- **Plantain.** Plantain contains allantoin, a proven healer of

injured skin cells.

• **Vitamin E.** This nutrient is popular for anti-sunburn activity. Try a cream containing vitamin E to soothe sunburnt skin.

Safe, healthy sunning

It's also wise to be proactive and take steps to protect your skin from sun damage, while



Be aware that all sunscreens are not created equal

still making sure you still get a healthy dose of sunshine. The sun is our chief source of vitamin D, which protects us from

a variety of ailments, including osteoporosis, multiple sclerosis, diabetes, cancer and high blood pressure. Sunscreens block UVB rays, the wavelength that stimulates the skin's vitamin D production.

Ultraviolet light from the sun comes in two types: UVB waves, which are shorter, and UVA rays, which are longer and able to penetrate skin more deeply. Many products offer no protection from UVA rays, which are responsible for skin damage and ageing. According to the Environmental Working Group's Skin Deep cosmetic safety database, just 16 per cent of sunscreens on the market are both safe and effective at blocking both UVA and UVB radiation. In fact, a sunscreen's SPF only reflects its ability to block UVB rays.

According to Michael F. Holick, of the Boston University School of Medicine, properly applied sunscreen reduces the skin's vitamin D production by 95 per cent. Holick advises knowing your skin's sensitivity, and acting accordingly. For instance, if you turn pink after 30 minutes in the summer sun, then spending five to 10 minutes in the sun (in a bathing suit) should generate plenty of vitamin D. After that, apply

sunscreen, cover up or seek shade.

Sunscreen ingredients

Be aware that all sunscreens are not created equal. Some sunscreen ingredients can cause skin irritation, while others could disrupt your body's endocrine systems. The US Food and Drug Administration (FDA) regulates some sunscreen products as drugs, and some as cosmetics, which have less stringent approval requirements. While the FDA created a monograph for safer sunscreens in 1999, the guidelines were never finalised.

Many environmental groups have expressed concern that certain sunscreens contain "micronised" ingredients, or nanoparticles, such as titanium dioxide and zinc oxide that are manipulated to smaller particle sizes. Some research on micronised titanium dioxide indicates that it may cause more DNA damage than larger titanium dioxide particles, particularly if it enters the body through cuts or inhalation. Because nanoparticles operate on the quantum level, their behaviour and absorption by the body may differ from larger particles of the same substance because they're so small. To be safe,

avoid products with micronised ingredients and never apply sunscreen to cuts.

To find out which products contain the safest ingredients and provide the best sun protection, check out these useful resources:

Environmental Working Group's Database of Sunscreen Products: <http://www.cosmeticsdatabase.com/special/sunscreens/summary.php>
Environmental Working Group's Sunscreen Special Report: <http://www.cosmeticsdatabase.com/special/sunscreens/protection.php>
Friends of the Earth's Nanotechnology Page: <http://www.foe.org/camps/comm/nanotech/nanocosmetics.pdf>
The Green Guide Product Report on Sunscreens and Sunblocks: <http://www.thegreenguide.com/reports/product.mhtml?id=27>
The Green Guide: Reading the Micro-Fine Print: <http://www.thegreenguide.com/doc/120/sunscreen>

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Sudden sports deaths in young people

By DR W. GIFFORD-JONES
Special to The Epoch Times

"How could this possibly happen?" is the usual soul-searching response. A young healthy athlete has left home to play in a sporting event. Then, in a matter of seconds, the athlete collapses and dies before anything can be done to save his or her life. The big questions are why these premature deaths occur, and can they be prevented?

Dr Michael Ackerman is head of the Mayo Clinic's Sudden Death Genomics Laboratory. He agrees that news of these unexpected deaths saddens parents and shocks communities. And when such sudden fatalities strike seemingly invincible star athletes, parents worry it could happen to any child involved in recreational sports. Luckily, he states, these shocking deaths are rare.

Dr Ackerman reports that there are 300,000 sudden cardiac deaths a year in the United States. Of this number 3,000 to 6,000 occur in people under 35 years of age.

Autopsies show that two-thirds of these deaths are due to heart abnormalities. Some young people have a condition called hypertrophic cardiomyopathy, in which the heart's muscle becomes abnormally thick. It's the most common cause of heart-related sudden death in young people and the one most often seen in athletes. Fortunately, this condition does not usually result in death. But if it's present, doctors often fail to make this diagnosis.

The coronary arteries may be connected to the heart in a bizarre way. The result is that during a strenuous game the arteries are unable to supply sufficient flow of blood to the heart's muscle. This causes the electrical system that normally regulates the heartbeat to falter. A condition called ventricular fibrillation (VF) may result, where the heart muscle quivers and does not pump blood as it should. If not treated promptly by a defibrillator, VF is fatal.

Other young athletes suffer from what is called long QT syndrome, another electri-

cal disorder of the heart, which predisposes to VF.

Comotio cordis is another cause of sudden death. In these cases a young athlete is struck in the chest by a baseball, or head of an opposing player. If the blow is severe enough, and it occurs at the wrong time in

physical exertion, such as a race.

A second warning sign is when there is a family history of unexplained deaths before the age of 50.

Dr Ackerman admits there's no consensus on the best way to prevent these tragic deaths. Some countries such as Japan and Italy use the electrocardiogram in an attempt to find those athletes most susceptible to sudden death. But this can unnecessarily worry athletes when initial results look suspicious, even though they eventually turn out to be normal.

Athletes identified as high risk may be prescribed beta blockers. Or doctors may suggest implanting a defibrillator into the chest to restart the heart should VF occur. Some athletes may decide the risk is too high and avoid sporting activities altogether.

In one-third of cases pathologists are unable to find why death has occurred. The final death certificate then reads, "Sudden unexplained death".

Dr Gifford-Jones is a medical journalist with a private medical practice in Toronto.



YOUNG ATHLETE: An undiagnosed heart problem can cause sudden death after strenuous exercise

A spontaneous healing

By CAROL BOWMAN
Special to The Epoch Times

In 1999, when I was lecturing on children's past life memories at the Edgar Cayce Foundation in Virginia Beach, Virginia, a mother tearfully recounted her son's story.

After hearing me speak of similar cases, she was convinced that her son Edward's congenital health problem was healed when he remembered his past life.

As a baby, Edward always had trouble swallowing. When he learned to talk, he would point to his throat and complain, "My shot hurts, my shot hurts!" His parents assumed that he was comparing the pain in his throat to that of an injection in the arm — probably the only other physically painful sensation he knew.

At age three, his parents were alarmed when they noticed a large growth in his throat. The specialist told them that Edward had a thyroglossal duct cyst — a congenital abnormality — which had to be removed as soon as possible. So they scheduled him for surgery.

The surgeon first required Edward to have a tonsillectomy, and then he was to return for another surgery to remove the tumour a few weeks later. But,

after the tonsillectomy, young Edward informed his parents that he didn't need the other operation because his shot was gone. They assumed their son was a little delirious from the surgery and the anaesthesia, so they let him babble on.

Then, his uttering became even stranger: Edward told them that when he was big before, he had been a soldier in France named James. He said that he had really been too young to fight — he was only 18 — (a strange comment for a child, now four years old!) and that he had been cold, hungry, and lonely.

One cold and rainy day, while he and his soldier buddies were trudging through the mud, a shot hit him from behind and lodged in his throat. Four-year-old Edward then gave his physician-father an accurate clinical description of what it is like to die with a bullet wound in the throat.

He repeated his story over the next few days. Edward's parents were baffled by the realism of his story. And they were shocked to find that within a few days the tumour had completely disappeared.

Edward's surgeon was most surprised by the spontaneous remission of the tumour, and fully expected it to return. For more than 10 years, though, it hasn't.

Source: Carol Bowman's book, Return From Heaven, HarperCollins, 2001, reprinted with permission.

Ms. Bowman is a past-life therapist. Her first book, Children's Past Lives was published by Bantam Books in 1997.

Editor's Note: Carol Bowman is one of a growing group of past-life therapists, who believe that therapy should include all of the patient's lifetimes. Awareness of these traumas, especially the trauma of death, can help heal a person's psychological and physical problems.

LIEVEN VAN ASSCHE/AFP/Getty Images



GRISLY REMINDER: A shoe and human bones excavated from a World War I trench near Ypres in Belgium, where many young soldiers died

'Primal' diet outperforms 'Mediterranean' eating

DR JOHN BRIFFA

On the pulse



My latest book *The True You Diet* posits that the best diet for us is essentially one based on the foods that we've been eating the longest in terms of our evolution — after all, these are the foods we are going to be best adapted to. A "primal" diet is one that is devoid of grain and dairy products, as well as nutritional newcomers such as refined sugar and refined vegetable oils: what's left is, basically, fruit, vegetables, root vegetables, meat, fish, eggs and nuts.

It is my experience that such a diet tends to work very well for enhancing wellbeing and optimising weight. However, while elements of this diet (eg.

its lower-carbohydrate nature) have been studied, the diet itself has not been subjected to much formal research.

So, I was interested to read this week of a study in which the primal diet, also known as the "Palaeolithic" or "Old Stone Age" diet was pitted against a diet which was more "Mediterranean" in nature (this diet included grains, low-fat dairy products and margarine) in a group of individuals suffering from heart disease and either type 2 diabetes or impaired glucose tolerance (a precursor of type 2 diabetes). Each diet lasted for 12 weeks.

One of the measurements assessed in this study was blood sugar (glucose) levels. In the group eating the primal diet, glucose levels were found to drop by 26 per cent — a statistically significant result. In contrast, those eating the Mediterranean-inspired diet did not see any significant drop in blood sugar levels. The group eating the primal diet also saw a shrinking in average weight

circumference of 5.6 cm, which was significantly greater than the reduction seen in the other group (average reduction 3.3 cm).

Experience and scientific evidence show that for optimal health and wellbeing, a degree of "dietary individualisation" is important: physiological studies show that we have differing abilities to handle foodstuffs such as fat and carbohydrate that dictate our "ideal diet" (see: <http://www.thetrueyoudiet.com> for more details about this).

What this very recent study clearly shows is that there can be real health benefits for individuals who adopt a more "primal" way of eating. This study provides some science which supports what I regard as common sense: that the best diet for us is one based on the foods which we have been eating the longest and are therefore best adapted to.

References: Lindeberg S, et al. A Palaeolithic diet improves glucose tolerance more than a Mediterranean-like diet in individuals with ischaemic heart disease. Diabetologia. 2007 Jun 22 [Epub ahead of print]

Dr John Briffa is a London-based doctor, author and health writer with a special interest in nutrition and natural medicine. Practical advice about all aspects of health and wellbeing, can be found at www.drbriffa.com

Active brain keeps Alzheimer's at bay

NEW YORK (Reuters) — The results of a new study support a number of previous studies that have shown that staying mentally active reduces the risk of developing Alzheimer's disease and the mild impairments that precede the condition.

As part of the Rush Memory and Ageing Project in Chicago, more than 700 elderly subjects who were an average of 80 years old underwent yearly testing to detect any mental declines. The subjects were tested for up to five years and provided information on any current and past problems with their memory or thought processes.

They were also asked about their activities, such as visiting a library or museum; reading newspapers, books or magazines; attending a concert, play, or musical; and writing a letter," Robert S. Wilson told Reuters.

Ninety of the study subjects developed Alzheimer's disease. In the current issue of the medical journal *Neurology*, Wilson of Rush University Medical Centre, Chicago, and colleagues report that the frequent participation in activities that involve mental processes was associated with a 50-per cent reduced incidence of Alzheimer's disease.

A mentally inactive person in old age was 2.6-times more likely to develop Alzheimer's disease than one who was mentally active, the

team found.

This relationship remained after controlling for past mental issues, lifespan socioeconomic status, current social and physical activity, and also low mental function at the beginning of the trial, investigators report. Frequent mental activities also protected against mild impairments.

"Our results suggest that regardless of how mentally active people have been prior to old age, higher level of mental activity in old age reduces the risk of developing an Alzheimer's disease-like dementia and... impairment," Wilson said.

Brain autopsy performed in 102 subjects who died during the study failed to show a correlation between level of mental activity and neuropathology findings.

It is likely, Wilson said, that mental inactivity is "truly a risk factor for Alzheimer's disease and not simply an early consequence of the disease"—because mental activity was not related to Alzheimer's disease pathology "and people with early Alzheimer's disease symptoms did not show accelerated decline in mental activity."

The findings of this study underscore the importance of being mentally active in old age, the clinicians conclude.

Source: Neurology June 27th, 2007



MEAT AND VEG: Research shows that a diet low in grains and dairy foods promotes good health and optimum weight