

The Medical News Report for May 2013

#16

The response to the shorter subjects was favorable, so I will continue with shorter subjects. Last month, I mentioned we would complete the ALLERGY SERIES this month with skin manifestations, and I will report on part 2 of DIABETES (type 1 and 2). These larger subjects will be cut into several parts to keep the reporting to less information about each subject.

I was honored to speak before a national group of dentists in San Destin, Florida on April 8 on ORAL CANCER and the important role of the dentist in screening for oral cancer and treating oral complications of cancer treatment. I will mention more below. April was Oral/Head and Neck Cancer awareness Month. And May is the **100th birthday of the American Cancer Society, of which I am proud to say I have volunteered 36 years. In fact, May 26 is NATIONAL VOLUNTEER DAY, so on that day we all must thank the millions of our fellow Americans who give their most precious commodity to charities around the country...their time!**

Subjects for May:

- 1. Skin Manifestations of Allergy**
- 2. Diabetes Mellitus- TYPE 2-Part 2—signs, symptoms, and lab diagnosis**
- 3. Big Pharma-Part 1—the straight scoop on drug companies**
- 4. Oral cancer screening and the dentist**
- 5. Long term use of meds for GERD—the concerns**
- 6. Why are parents not getting their kids vaccinated?**
- 7. Melanomas are not all BLACK**
- 8. Hyperactive bladder-Part 1**
- 9. Should prophylactic antibiotics be given for dental work if the patient has had a joint replacement?**
- 10. Food stamps are going to illegal immigrants—why are they a health issue?**

1. Skin Manifestations of Allergy

Allergy season is peaking. As reported in previous reports, this is an immune response to our environment, manifested by a biochemical response (IgE immune globulin) that release mast cells from the blood that secrete histamine which causes reactions in the body (skin, nose, sinuses, eyes, throat, lungs, etc.). “Mast cell activation syndrome” includes multiple forms of presentation including the SKIN. Previous reports have covered all but the skin. Food allergies are the main culprit. A new study also implicates pesticides (chlorophenols) in foods that are allergenic are more problematic. Another point to be made is that you can have food allergies and not show it.

Skin manifestations include 1) Ezcema (Atopic Dermatitis 2) Urticaria (Hives) 3) Contact Dermatitis 4) Dermatitis Herpetiformis 5) Angioedema

- 1) Ezcema (Atopic Dermatitis)**

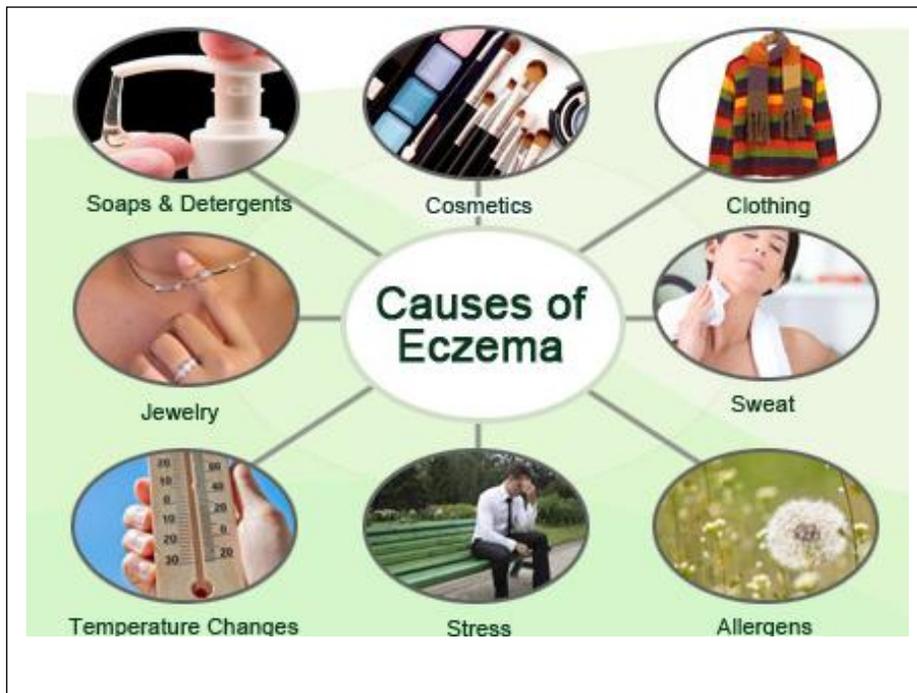


Classic eczema



Dyshidrosis

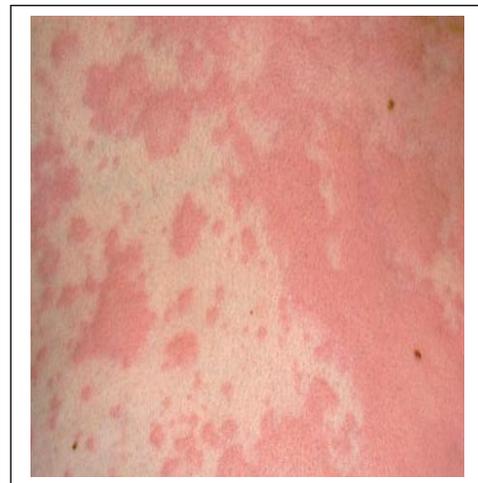
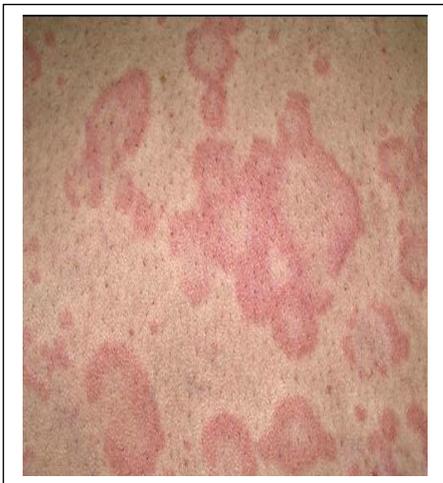
Eczema is an itchy, red, dry, type of rash, often with cracks in the skin, and even leathery looking patches, which can be confused with psoriasis. 10-20% of children and 1-3% of adults suffer from this severe skin allergy reaction. There is **no cure. Secondary bacterial (Staph) infections can occur from scratching. Most of these patients have other forms of allergy manifestations (hay fever, asthma, etc.). The onset usually occurs by age 5, and 75% will resolve in adolescence, but the rest will persist into adulthood. Allergy shots help control it but avoidance is the key.**



Triggers are dry weather, jewelry, soaps, cosmetics, clothing, detergents, stress, and foods. Whether this is actually a food allergy is not known, but it does co-exist. **Seborrheic dermatitis (dandruff) is a form of eczema, and **stasis dermatitis** of the lower extremities is associated, which is due poor circulation. 20% of excema patients have **dyshydrosis—see photo above** (abnormal sweating with blisters on the hands and feet) usually in warm humid months.**

Treatment includes topical steroids, Benadryl, Atarax, Vistaril, and in very severe cases immunosupressant topical medications can be tried (tacrolimus, pinecrolimus). The most common areas affected are the hands, wrists, ankles, face, neck, and upper chest.

2.HIVES (URTICARIA)



Hives (Urticaria) can occur in response to food, inhalant, and other allergens. It can be very severe, and can be the first evidence of an emergency situation LEADING TO **ANAPHYLAXIS. Hives can occur in various parts of the body or all over. It causes swelling, itching, and can include the airway that can cause obstruction and even death. Patients with acute hives must avoid these allergens, because the next time a person is exposed to the allergen, it can cause a much more serious reaction including a cardiac event and death. Peanuts, shellfish, and milk allergies are the most common causes. Even the slightest**

exposure in a salad dressing, a pan, a kitchen surface, etc. can cause a severe reaction.

15-20% of the population has had hives at one time or another. This rash is characterized by transient, red, well-demarcated raised skin lesions with clearing in the center of the lesion. It is extremely itchy. Fluid comes out of vessels in the skin that creates the lesions. It is called ACUTE (less than 6 weeks) or CHRONIC (if it is recurrent and lasts longer than 6 weeks).

Chronic hives has rarely a cause, whereas **acute hives** is usually a food allergy (eggs, milk, soy, wheat, peanuts, tree nuts, fish and shellfish. Food dyes and other preservative chemicals (sulfites, salicylates, etc) can cause it too. Skin tests can be done to diagnose the allergy, and then elimination diets are mandatory. Antihistamines are helpful as well. See an allergist for a workup.

2) Contact dermatitis



Poison Ivy



Contact from makeup

Poison ivy is the classic contact offender. It can come from many objects, including makeup, detergents, metals especially nickel (in rings or jewelry), the sun (photoxic), many plants, grasses, etc. This is a blister type of rash and occurs where the skin comes into contact with the allergen.

Prevention is the best form of treatment, however, if you are exposed, wash with soap and water ASAP, and hope for the best. When the skin starts to become sensitive, followed by redness, itching, and blisters, you know what has happened. Topical treatment includes calamine lotion, cool compresses, Benadryl spray to dry the area. Creams are not recommended. Cortisone sprays help. Wash your hands frequently and next time wear a long sleeve shirt and pants and remove your garments immediately when you get home and put them in the wash!

3) Dermatitis Herpetiformis



This is a rash that looks like fever blisters, hence the name, implying a herpes- like rash. This occurs most frequently with **gluten sensitivity. I covered the gluten issue in a recent report.**

4) Angioedema



This is rare, but can be life threatening. This is not a rash. It is characterized by **sudden swelling of the skin, tongue, eyes, airway, and can cause asphyxiation. Epinephrine is life- saving, but cortisone and Benadryl do not help. It is caused by a complicated chemical reaction in the **complement system** (a**

part of the immunologic system), which is associated with release of another chemical causing serious swelling (bradykinin). A Med-Alert bracelet should be worn at all times, and quick access to an EPIPEN (adrenaline), which could save the person's life. Your doctor should teach you or a parent, spouse, etc. how to inject it. Also cardiac resuscitation courses should be taken.



2. Diabetes Mellitus, Part 2-Signs and symptoms (TYPE 2-adult onset)

19 million Americans (8.3% of the population) suffer from adult-onset diabetes (8.3% of the population) and could be considered an epidemic. Consider that 7 million have it and don't know it (see graph below), 79 million are pre-diabetic, and 2-10% of pregnant women have diabetic levels while pregnant (gestational). African-Americans outnumber non-Hispanic whites 18.7% to 10.2%, while whites are 8%. Ethnicity and being poor always plays a role in disease. The economic impact (\$174 billion per year) is huge and could be prevented in a good percentage of the cases with weight loss. It is the 7th most common cause of death in America, and is the most common cause of kidney failure, blindness, and non-traumatic limb amputation. 17% of children are obese, and because of that, type 2 diabetes is occurring in kids. 1-2% of youngsters have type 2 (215,000 under 20). Most young people have juvenile diabetes (type 1).

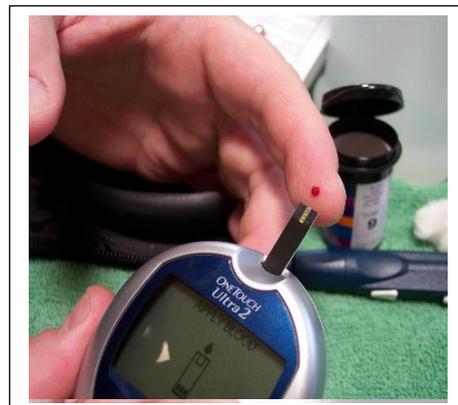
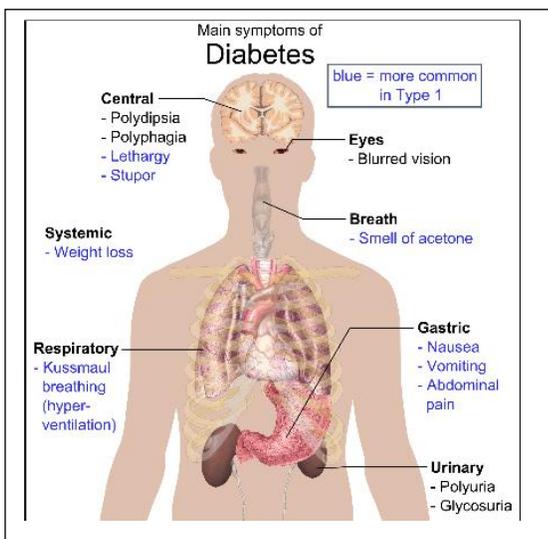
Type 2 Diabetes can be defined by the ABCs.

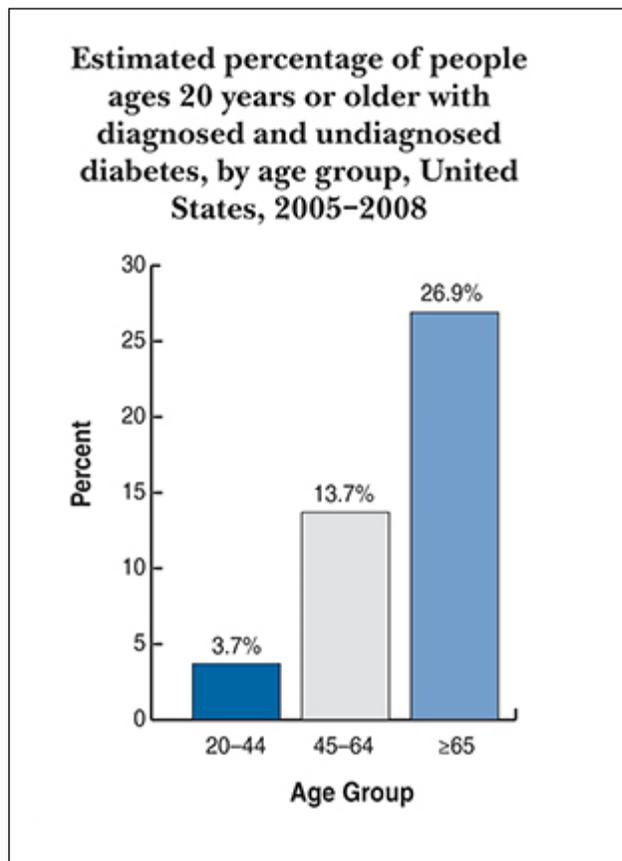
- 1) **A—A1C** hemoglobin elevated-- 7% or greater with a fasting blood sugar greater than 125mg/dl
- 2) **B—Blood pressure** greater than 130/80
- 3) **C—Cholesterol** greater than 100mg/dl (low HDL and high LDL), triglyceride elevations

Diabetes occurs as juvenile diabetes Type 1 (5%) and adult-onset diabetes 2 (95%). Type 2 mirrors the weight gain of America, but type 1 is not related to weight gain because it is autoimmune, occurs earlier in life and is more serious.

The symptoms of both diseases classically are the 3 “P”s (polydipsia, polyuria, polyphagia—poly means **excessive-- thirst,urination, and hunger). Type 2 patients become insulin resistant, and therefore the insulin put out by the pancreas does not lower the blood sugar. In Type 1 juvenile diabetes there is an autoimmune response to the pancreatic insulin cells causing destruction, so insulin is not produced.**

When sugar builds up in the blood stream, it injures blood vessels in many organs, especially the **kidneys, eye, cardiovascular system, peripheral nerves, and the liver. Symptoms of diabetes, can be very vague, with “just not feeling well”, dizzy spells, burning feet, recurrent fungal infections, vision problems, etc. But either type can be silent for some time. That is why routine doctor visits are necessary to check for the signs of diabetes. Type 1 in children is usually not diagnosed until the patient gets sick enough to be admitted to the hospital, and they are in ketoacidosis. I will explain what this is next month.**





Diabetics undiagnosed and diagnosed

This disease is the prototype for the “metabolic syndrome”. I have discussed this in past reports. This includes the ABCs of diabetes. www.themedicalnewsreport.com

This disease will shorten a person’s life if not well- managed. There is an important reason to PREVENT Type 2 diabetes (type 1 is not preventable). Even managed well with oral hypoglycemic agents or insulin, diet, exercise, etc., damage can continue.

A type 2 diabetic needs to lose 7-10% body weight, increase exercise (at least 30 minutes per day), maintain a normal blood pressure and cholesterol. There is a 60% chance of reversing type 2 if this is successful. Next month.... complications.

3.Big Pharma—Part 1-the straight scoop



Big Pharma is the name most people use to describe the mega-billion dollar pharmaceutical industry. This industry has been the sole reason why we have had such great new cancer and other drugs. However, they go where they can make the most money. For instance, they have had so little research on new antibiotics since this is not as profitable. Bacteria have continued to become more resistant to the better antibiotics. The money these days are in cancer, lipids, and psychiatric drugs. The financial support for research by the government has dropped considerably over the years, and with the economy and the billions spent to set up Obama-care, the NIH (National Institutes of Health) is receiving less revenue.

Watch-dog groups abound looking at all corporations these days, and if you listen to them, you will get one-sided information. There is a book out called Pharmocracy that is really rough on Big Pharma (I read it). Money drives every big corporation, but that is just reality. When has it become a sin to make money? But these salaries of CEOs seem ridiculous.

1. Miles White – Abbott – \$33.4 million (five months after of employees in Ireland and California)
2. Fred Hassan – Schering-Plough – \$30.1M
3. Bill Weldon – Johnson & Johnson – \$25.1M
4. Bob Essner – Wyeth – \$24.1M
5. Robert Parkinson – Baxter – \$17.6M
6. Daniel Vasella – Novartis – \$15.5M*
7. Richard Clark – Merck – \$14.5M
8. Frank Baldino – Cephalon – \$13.5M
9. Sidney Taurel – Eli Lilly – \$13M
10. Jeff Kindler – Pfizer – \$12.6M

Remember why this industry exists. They are the only industry that invests billions of dollars and yet only get about 1 in 10 drugs they create gets to clinical trials. Then only a small percentage of these drugs make it to the public since the FDA regulations require 3 levels of trials (animal and human trials) that cost billions and can take years to get approval.

The FDA has been under pressure to get drugs to the public faster so they have created a fast track system for drugs that are looking so positive early in a trial. Of course the legal profession is waiting for a drug to cause harm, so there is always pressure on them. Don't feel too sorry for them, since they are making billions. Yes, they make billions, but if they didn't, they would not be in business. They lose billions to make billions.

We complain when we pay hundreds, sometimes thousands of dollars for a brand drug. A new cancer drug could easily cost \$20-50, 000 per month. They deserve ridicule some of the time, but without the industry, we would have less pharmaceutical research and new drugs. We see the few drugs out there that are bringing billions to Big Pharma, and we can easily forget the billions they invested and got no return on. Can you imagine the TV ad price for ED drugs?

The Viagras of the industry don't come around every day. They direct market to doctors and their staff and try to coerce doctors to write prescriptions for their drugs by providing perks (dinners, lunches for the staff, free trips to those who lecture on their behalf). That has been outlawed to some extent. But physicians depend on hearing from the drug reps. Competition between companies is enormous. But, doctors don't have any business being paid for using a specific drug, and that happens too. A recent study reported that reps rarely tell doctors about **the adverse effects of these drugs. Direct to the public marketing has put great pressure on doctors to write that prescription with little knowledge of the **cost of drugs**. It is time they know how much these drugs cost.**

The latest reports exposed that a huge percentage of research on drugs goes unpublished. They want to publish only the positive findings and not the negative. That is changing with

groups pushing for all research on drugs to be published. Glaxo-Smith-Kline is the first company to agree to open all their records to the FDA, and have agreed to publish more information on drugs that don't work. This is the only drug company that has come forward, but I expect others to join. Further, it is rare to see research on drug comparisons of the same class of drugs, such as one lipid reducing drug versus another (Crestor vs. Lipitor)... this is unfortunate. Comparison research is sorely missing.

If this is not enough bad news, the industry has been fined for untold billions for marketing their drugs for **off-labeling indications, kickbacks, illegal marketing practices, etc. If the FDA approves a drug for depression, but then the company starts to market it as a drug that will help pain, it is not legal without research to back it up. Cymbalta is such a drug. The FDA fines these companies billions and yet because the company makes so much more, they don't blink an eye and pay the fine (usually an undisclosed amount). No one goes to jail, no one is fired from their job, and no one is disgraced. It has simply become the price of doing business. More next month.....**

4. The dentist and oral cancer screening



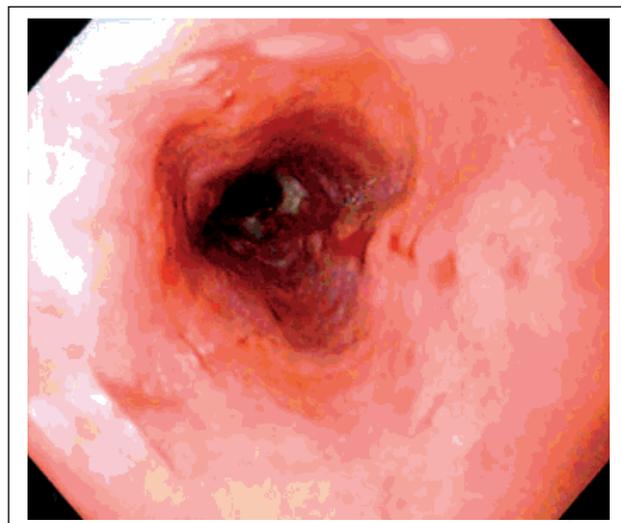
Does your dentist do a complete cancer screening on your yearly oral exam? Are you even getting a yearly exam?? I have spent a great deal of time working with the American Cancer Society and the George Washington Cancer Institute to create guidelines for primary care professionals to help oncologists follow their patients. I am beginning to work with a dental oncologist from Baylor Dental School in Texas to create guidelines for dentists as

well. Expect your dentist to do a thorough oral cancer screening with each yearly visit and if not, ask for it.

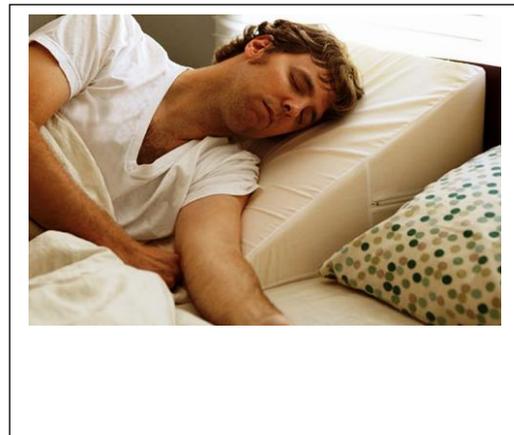
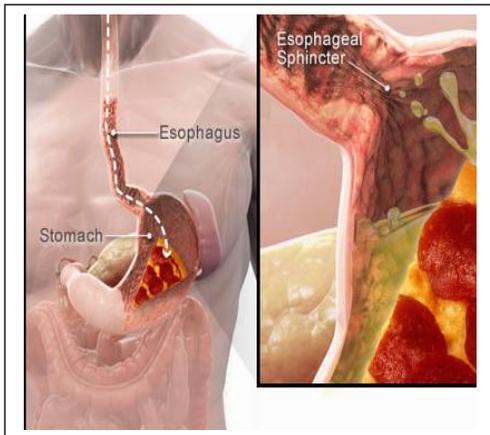
We now know that inflammation in the mouth can contribute to heart disease and many other inflammatory based diseases...even increase the risk of cancer. Also, the effects of cancer treatment manifest themselves in the mouth, and we need dentists to know how to prevent and treat cancer patients. They are necessary part of the cancer team as much as we need primary care professionals (doctors, nurse practitioners, and physician's assistants). Keeping the teeth and gums healthy is mandatory before cancer treatment can begin, and it will prevent major complications from the cancer treatment.

Did you know that 70% of oral and throat cancer is positive for the same virus that causes cervical, anal, and other genital cancers...human papilloma virus-HPV. The new vaccine, Gardasil, will prevent these cancers in young kids (11-18) before they become sexually active. YES!! THAT IS WHAT I SAID! There is no treatment for this virus once a person is infected. Most are infected by age 20 and 7% of Americans have been infected. This virus causes these cancers, and they are preventable. Your dentist should know this, so getting checked for these cancers is a must. HPV is the most common viral STD (sexually transmitted disease).

5. Long term use of medications to treat GERD (Gastro-esophageal Reflux)



This photo is what you want to prevent. This is reflux esophagitis through an endoscope at the junction of the stomach and esophagus. The sphincter allows reflux. Sleeping on a slant pillow is helpful to prevent nighttime reflux back into the throat.



I have reported on this before, so review it on my website. There continues to be reports that long term use of H-2 inhibitors and proton pump inhibitors (PPIs) can cause trouble. There are prescription drugs like Nexium and Dexilant, and there good over the counter drugs like Prevacid to stop acid production.

I continue to read how much doctors are overprescribing these drugs without a proper workup. There are rather strict indications for endoscopy to diagnose erosive esophagitis, Barrett's ulcer (high risk for cancer), and stricture. If GERD has been going on long enough or with symptoms (trouble swallowing, anemia, bleeding, weight loss, recurrent vomiting), endoscopy is indicated. If patients are treated with these potent meds, they should help rather quickly. After 2 months without much improvement, endoscopy is also indicated. Patients over 50 tend to have more trouble with reflux. So listen to your doctor about taking these meds and having endoscopy if indicated.

Remember cancer has the same symptoms.

If you have to be on these drugs for a long time, there are reports about increasing infections with C.diff. (Clostridium difficile) in the stomach and intestine. The latest study says NO. Also there is no increase risk in gastric cancer because of long term decrease

in stomach acid. The reason was that people born without stomach acid (achlorohydia) have an increased risk of stomach cancer. **Not so with PPIs and H-2 inhibitors.**

There are drug interactions so be sure your doctor knows you are taking these meds. Also there is a slight problem with absorption of minerals that need acid in the stomach, such as calcium, magnesium, sodium, potassium, so be sure you are eating mineral rich foods or taking supplements, but as always consult your doctor.

6. Why are parents not permitting vaccinations of their children?

This is an emotional and difficult problem. The standard vaccinations recommended are tetanus, diphtheria, pertussis (whooping cough), and meningococcal meningitis vaccines. Then, as I hope you know, HPV (human papilloma virus) discussed above. Vaccines prevent serious infections and certain cancers. The latest studies show that 65% of teens are not up to date with their vaccines.

Parents are not getting their children vaccinated, and now we now have outbreaks of measles, whooping cough, etc.

The CDC recommends HPV vaccine (Gardasil) for girls and boys from 11-18. For a complete schedule of vaccines, log on to

www.cdc.com

Why are parents reluctant? Are they stupid? No! Where do they get their information to decide? The Journal of Pediatrics just published a report that 75 % of those deciding not to have their kids vaccinated come from their **own social networks, not medical sources! This is very distressing ! They are uneducated, fear vaccines (the CDC says there is no proof they cause autism, etc). Only 53% of primary care doctors even mention vaccinations. Pediatricians are much better. Vaccines are safe in almost every child.**

7. Not all melanomas are black!

I have reported on melanomas in the past, and want to remind you about them, since they are so vicious . They must be diagnosed early. A good skin exam once a year by a dermatologist is worth the time, especially if you have alot of moles. Melanomas can be flat, raised (nodular), develop from a innocent mole or just out of nowhere. Remember the ABCDs of melanoma. Go to my website and read what I reported.....
www.themedicalnewsreport.com

The reason I am revisiting these bad actors is that a recent study in the dermatology literature reported that in nodular melanomas, a considerable percentage are not black in color. They can be flesh colored, red, pale, very round or irregular. The photos speak volumes.



I want you to know that these melanomas still have characteristics like all melanomas have : irregular borders, various colors, may bleed or ulcerate. So the bottom line is any new or changing lesions on your skin, regardless of color should be examined.

8.Hyperactive Bladder—Part 1-things that can aggravate

a) Too much fluid or too little. Too much can make your bladder work overtime, and too little means concentrated urine, which is irritating to the bladder

b) Other liquids-alcohol, coffee, tea, energy drinks, and carbonated colas are about irritation from alcohol, and that it makes you go more often because it blocks a pituitary hormone ADH, that will either conserve or increase urine flow. The others are all about caffeine, which is a diuretic.

c) Chocolate, citrus, tomatoes, cranberries all irritate the bladder because of either the chemicals in the product or it is too acidic.

d) Spicy foods are very irritating.

e) Artificial sweeteners cause irritation too.

f) Aged cheese and sour cream too.

g) Prunes, apples, bananas, grapes all are acidic.

h) Onions (better to use shallots).

i) Processed foods have artificial ingredients that irritate.

j) Condiments-ketchup, mustard, soy, hot sauce, and vinegar

k) Diuretics, some blood pressure meds, antidepressants can interfere with the muscular activity of the bladder wall.

9. Antibiotic prophylaxis for joint replacement patients

There has been controversy surrounding whether joint replacement patients should have prophylactic antibiotics if they have dental work. The pendulum has swung back and forth, but as of this month, the dental, orthopedic and infectious disease organizations have reported there is not enough evidence that oral bacteria cause infections in joints. Most are from Staph bacteria, and that does not come from the mouth. Most of the bugs that come from the mouth are Strept, so it is not necessary to cover dental patients with antibiotics.

There is a subset of patients of patients that might be considered for antibiotic prophylaxis...cancer patients, immune-

compromised patients, those with type 1 (not 2) diabetes, and those with severe dental infections.

As always, it is up to the doctors and dentists. Source: Journal Watch Internal Medicine, March, 2013

10. Why are food stamps by the millions going to illegal immigrants?

You could say it is a way to keep Democrats in power. Or you could say since they are here and doing most of the work lazy white and other races won't do, we should make sure that they are adequately fed. Regardless of your thoughts on this situation, as a doctor, I am concerned how they spend the food stamps (the SNAP program). The answer is **junk food. It was recently reported that \$75 billion is being spent on this program yearly. 47,772,108 people in this country are given food stamps this year; in 2009, 32 million (80,000 new recipients per month). Now the feds are encouraging illegals to apply. With the Sequester, jobs are lost, the DoD's budget is reduced and many legal residents are suffering and yet our government is giving the SNAP credit card to illegals.**

African Americans and non-white Hispanics have more obesity, type 2 diabetes, heart disease, and stroke than other races by far. It was reported by Breitbart.com and Fox News that the USDA is spending taxpayer's money running Spanish language TV ads encouraging illegals to apply for federal food stamps. Buying votes? The truth is anyone can apply for these federal subsidies, because when one applies, they no longer even ask if you are a legal resident or not, and also your annual income. I hate to be partisan, but this is just not fair, when so many deserving Americans are being left out favoring illegals and those that make too much money to even qualify.

Now dog and cat food is eligible to be purchased on the program. I am ok with that because I have such a soft spot for animals, and I don't want any animal suffering, but still....

A US Senator (Thuene- R-SD) and Representative (Stutzman R- IN are supposedly working on a bill to stop this subsidization of

illegals. While food stamps are given right away, military veterans wait an average of 279 days to get benefits.

They need to spend money on healthy foods (\$4 billion in food stamps to the soda companies last year). We know that sodas (sugar or substitute sugar) are bad for you. Aspartame (the main sugar substitute) in particular will increase your appetite, not to mention other side effects.

This country must get its act together. Whether Democrats are encouraging illegals, or Republicans are being insensitive, my **concern is the health of this country, because we can't withstand what is being spent on healthcare. We are already suffering with the price of insurance, and double digit increases are coming.**

Finally, there are 11 states that have more unemployed people than fulltime employees (California, New Mexico, Illinois, Michigan, Maine, Mississippi, and Alabama) These are 7 that come to mind. When people don't work, they become more sedentary, and gain weight so if you wonder why I bring these political subjects up is because it affects health. **Obesity equals increased health issues equals increased healthcare cost!**



STAY HEALTHY AND WELL MY FRIENDS!

DR.SAM

