The Shocking Truth About Inflammation

The pros, cons and alternatives to taking popular drugs such as aspirin, ibuprofen and Aleve

BY KIM GOSS, MS

ot a headache? Take an aspirin. Sprain your ankle? Pop a few Aleve.

Is that chronic case of jumper's knee acting up? Some ibuprofen may do the trick. Common advice, sure – but not always good advice.

Specifically the drugs we are talking about generally deal with inflammation by inhibiting an enzyme in the body called cyclooxygenase, and are broadly called non-steroidal anti-inflammatory drugs, or NSAIDs. There are three basic types: salicylates, such as aspirin; traditional NSAIDs, such as ibuprofen (Advil) and naproxen (Aleve); and Cox-2 inhibitors, which require a prescription and may have more serious side effects.

The general purpose of NSAIDs is to deal with pain and inflammation, whatever the cause. And their popularity is such that an estimated 30 million Americans take over-the-counter drugs daily, about half of those being for arthritic conditions. Now let's see why such widespread use may be a problem.

Among the reported side effects of



Dr. Robert Silverman

NSAIDs are liver and stomach problems, blood disorders and even problems with hearing and vision. In 2005, at the request of the Food and Drug Administration (FDA), the distributors of the COX-2 inhibitor Bextra voluntarily withdrew the drug from the market, as it was believed to be associated with serious cardiovascular complications.

The problems with NSAIDS don't end there. In 1999 *The New England*



Journal of Medicine published a report that extrapolated that the deaths per year from NSAIDs are 16,500 – that's *per year* – just from gastrointestinal side effects. According to the FDA, during the first three months of 2008 there were more than 2,700 deaths in the US attributed to the use of NSAIDs. And according to a 2009 report in the *Annals of Medicine*, complications can occur from taking just a single dose of an antiinflammatory drug.

Another issue with the use of antiinflammatory drugs is that they can interfere with the healing of human tissues. In a research study published in the *Archives of Internal Medicine*, NSAIDs wiped out entire acute phase healing in 0-4 days. At day 4, there's very little muscle regeneration compared to the normal healing process. NSAIDs may even interfere with the function of important nutrients such as co-enzyme Q10.

The War Against Inflammation

A discussion of the benefits and risks of NSAIDs, along with alternative methods to deal with pain and inflammation, was part of a seminar given in June 2011 at the Poliguin Strength Institute in East Greenwich, Rhode Island. The speaker on this topic was Dr. Robert Silverman. A magna cum laude graduate of the University of Bridgeport College of Chiropractic, Silverman holds a master's degree in nutrition and hosts a syndicated talk show, Get Healthy with Dr. Rob. His practice, New York ChiroCare, is located in White Plains, New York, and he has treated many professional athletes and Olympians. After the seminar in Rhode Island I was able to ask Dr. Silverman some questions specifically related to athletes and NSAIDs.

First, Silverman does make the point that NSAIDs have their place in health care, and he says they are effective if the inflammation is not degenerative or excessive. Silverman says that although inflammation may not always be accompanied by pain, the two conditions are often related. And if there is a great deal of pain associated with an inflammatory response, there is greater cause for concern.

Silverman says that NSAIDs are

often prescribed after a serious injury that requires surgery. With an ACL tear, for example, Silverman says a surgeon may have to wait several weeks for the inflammation to settle down because the condition makes it harder to work around the joint. NSAIDs can significantly reduce the waiting period. However, he points out that there are other alternatives.

For athletes, the most common way to deal with inflammation is ice. Silverman says that when inflammation is in the acute stage, an ice cycle of 20 minutes on and 40 minutes off works best. "Many athletes go to the heat immediately because the heat feels good; but if the tissue is inflamed, more blood comes to the area, and that can be counterproductive." But for some injuries, ice is not enough.

For chronic injuries that do not respond to ice, a steroid hormone called cortisone is often injected into the area to deal with inflammation, but Silverman says this drug can weaken the tendon insertions.

Silverman says that one promising method of dealing with extreme levels



of inflammation is called *frequency specific microcurrent*. This modality, if used within four hours after the injury or surgery, can reduce inflammation up to 80 percent. Canadian strength coach Charles Poliquin has found that using this treatment enables him to start rehabilitation almost immediately, and he has rehabbed postsurgical ACLs in as little as six weeks. Another option is nutraceuticals.

Nutraceutical, a term that combines the words nutrition and pharmaceutical, is used to describe products that act like drugs without producing many of the side effects associated with drugs. For example, Silverman says, calcium and magnesium can be used in place of aspirin to help relax the muscles. For inflammation, Silverman says some of the best alternatives to NSAIDs are multivitamin/minerals, omega 3 fish oil, vitamin D3 and probiotics.

In addition to being aware of those options, it's important to pay attention to good nutrition to deal with inflammation because, as Silverman points out, "certain foods can be potentiators to inflammation." Many foods are associated with inflammation, such as wheat, corn, soy and even dairy. "Gluten is a major problem, because gluten contains a protein to which 1 in 100 people are outright allergic, and for which about 40 percent of the population show antibodies."

Taking NSAIDs is a popular and simple solution to reduce inflammation and deal with pain, but there are alternatives that may be just as effective and are certainly safer. Drugs are an answer, but they are not the only answer. BS

Microcurrent therapy (MCT) treats inflammation by applying precise frequencies of electrical current to specific injuries and tissues.

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