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The far-reaching effects of a little bit of weight loss

Losing 5% of your total body weight triggers a cascade of health benefits.

Losing weight is tough for all of us, whether it's shedding a few pounds or 50. And if in the past you've been able to lose as much as you would like, you may assume there's little point in trying. But if you lose even a small amount of weight, you'll reap benefits that will make a big difference in your health.

It may not take as much weight loss as you think to feel better and improve your health.

"The magic number is 5% of your total body weight; that's when we see clinically significant physiologic changes," says Dr. Fatima Cody Stanford, an obesity medicine physician with Harvard-affiliated Massachusetts General Hospital.

How much is 5%?

An easy way to calculate a 5% total body weight loss is to take 10% of your weight and divide that number by two. If you weigh 150 pounds, for example, 10% of your weight is 15 pounds; half of that, or 7.5 pounds, is 5% of your total body weight.

It may not take long to reach a 5% milestone. A safe rate of weight loss is considered one or two pounds per week. At that rate, a 150-pound person could see a 5% total body weight loss in a month or two.

Weight loss effects

The most visible sign of weight loss is a slimmer body. But there are many important

changes that you cannot see, including any of the following.

Reduced heartburn. Extra pounds put pressure on your stomach, which can force stomach acid to reflux up into the esophagus and cause the fiery discomfort of heartburn. The opposite is also true: losing weight relieves pressure and tamps down heartburn.

Reduced knee pain. Each additional pound you carry places about 4 pounds of stress on the knee joints. For a 150-pound person who's 10 pounds overweight (and should weigh 140 pounds), those 10 extra pounds add 40 more pounds of pressure to every step. But that same person would relieve 30 pounds of pressure with a total body weight loss of 5%.

Reduced blood pressure. The risk for developing high blood pressure triples for adults with excess weight. But each pound of weight loss can lead to a one-point drop in both the upper (systolic) and lower (diastolic) numbers in your blood pressure measurement. That would be a drop of almost eight points in blood pressure for a 150-pound person with a 5% total body weight loss.

Reduced diabetes risk. Weight gain is a powerful risk factor for developing diabetes.

"Fat is not just a passive storage site for calories. Chemicals called adipokines, secreted by fat cells, can cause inflammation and interfere with the action of insulin [the hormone that enables cells to use blood sugar for energy]; more fat, more adipokines. But weight loss reduces adipokines, allows insulin to lower blood sugar levels more effectively, and reduces diabetes risk," says Dr. David M. Nathan, director of the Diabetes Center and

continued on p. 7 ►►

INSIDE

Ask the Doctor 2

► Can a slow heartbeat be dangerous?

Should you take a vitamin B₁₂ supplement? 3

The top 7 reasons why you have a headache 4

► AND: Is this your headache?

Is intermittent fasting safe for older adults? 5

Try these stretches before you get out of bed 6

News briefs 8

- Healthy habits mean more disease-free years
- Trends: Home hospital care
- Heart problems? Harvard researchers caution against marijuana use

FROM HARVARD MEDICAL SCHOOL

Healing Shoulder Pain:

A troubleshooting guide for common shoulder problems

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FIVE THINGS TO DO THIS MONTH

1 Check your multivitamin for B₁₂. Older adults are at risk for vitamin B₁₂ deficiency. (page 3)

2 Keep track of your headache triggers. Uncovering a pattern can help you avoid headaches in the future. (page 4)

3 Start stretching before you get out of bed. It boosts circulation to the muscles. (page 6)

4 Avoid marijuana if you have heart problems. Smoking pot may increase heart risks. (page 8)

5 Practice more healthy lifestyle habits. New evidence suggests you can live longer without disease by following four or five healthy habits, such as exercising and eating a healthy diet. (page 8)



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ASK THE DOCTOR

by ANTHONY L. KOMAROFF, M.D., Editor in Chief

Can a slow heartbeat be dangerous?

Q I'm in my 70s, and I get breathless when I climb stairs. Maybe that's normal at my age, but my doctor says the cause may be my slow heartbeat. Can a slow heartbeat be dangerous?

A Yes, it could be. To explain why, let's begin with the basics. Your heart beats in order to pump blood around the body. The circulating blood brings the nutrition that every cell in your body needs, and it removes cellular waste material: blood brings the food and takes away the garbage. The effectiveness of the circulation depends on how much blood your heart pumps with each heartbeat and how many times per minute it beats. Even if each heartbeat pumps a lot of blood, if your heart doesn't pump often enough, your body won't get the blood it needs. And when you exert yourself, the body needs more blood.



Breathlessness when climbing stairs could be due to a slow heartbeat.

A "slow" heartbeat is usually defined as below 60 beats per minute at rest (some experts say below 50). During sleep, your heartbeat often falls below 60, and that's fine. Some very well-conditioned people have slow heartbeats. That's because their strong hearts pump more blood with each beat, so their heart needs to beat less often.

If you have a coughing spell, or if you vomit, the heartbeat may temporarily slow down. While that's normal, the temporarily slow heartbeat can cause lightheadedness or even fainting.

Some people have a slow heartbeat but have no symptoms. Symptoms from a slow heartbeat include lightheadedness or feeling faint or actually fainting. They also include breathlessness. So your breathlessness climbing stairs could be due to a slow heartbeat, but it also could be due to other causes.

For example, certain commonly prescribed medicines tend to slow the heartbeat, including beta blockers, clonidine (Catapres), opioids, sedatives, digoxin, diltiazem (Cardizem, others), verapamil (Calan, others), and lithium. Certain diseases can cause slow heartbeat, such as hypothyroidism (underactive thyroid), Lyme disease, or another disease carried by ticks called Rocky Mountain spotted fever.

In my opinion, a person with symptoms that could be caused by a slow heartbeat, and who does have a slow heartbeat (like you), needs to be medically evaluated to see if various diseases or medicines may be the cause of the slow heartbeat. Besides the diseases I've already mentioned, various heart conditions (different types of "heart block") can cause a slow heartbeat, and these conditions can get worse—gradually or suddenly. And if they get worse suddenly, it could be serious. Even fainting can be serious, if it happens in the wrong place at the wrong time.

So I hope your doctor is evaluating your slow heartbeat. It may well be nothing serious, but you need to find that out for sure. ♥



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Should you take a vitamin B₁₂ supplement?

You may need a little or a lot of B₁₂, but it's worth investigating.

Annie Oakley, the larger-than-life sharpshooter and star of Buffalo Bill's Wild West Show, was cut down by an invisible foe: a deadly form of anemia caused by a lack of vitamin B₁₂.

Back in Annie's day, we didn't know B₁₂ existed or that deficiency could lead to dangerous consequences (for Annie, it was death in 1926). It wasn't until later in the 20th century that scientists discovered B₁₂ and how to use it as a treatment.

Today, B₁₂ supplements are available at every drugstore and supermarket. They're promoted for warding off deadly anemia as well as neuropathy, memory loss, depression, and more. Should you consider taking them?

An essential vitamin

B₁₂ (also known as cobalamin) is essential for keeping your brain and nerves healthy and for making DNA and red blood cells. B₁₂ also helps lower levels of homocysteine, an amino acid linked (in high levels) to dementia, heart disease, stroke, and osteoporosis.

We typically get B₁₂ through diet. Rich sources include beef, liver, clams, poultry, fish, fortified cereals, eggs, cheese, yogurt, milk, and fortified plant milks (like soy, almond, or rice milks). For us to digest B₁₂, we first have to shake it loose from these foods.

Stomach acid helps do that. The freed-up vitamin then binds to a protein (intrinsic factor, produced by cells in the stomach lining) and makes its way to the small intestine, where it's absorbed into the bloodstream.

B₁₂ deficiency

An estimated 3.2% of adults ages 50 or older have very low B₁₂ levels, and up to 20% may have borderline deficiency. Aging is often the cause. "We tend to



Older adults should look for a multivitamin that includes 2.8 micrograms of B₁₂.

produce less stomach acid as we get older. That makes it harder to extract B₁₂ from food," says Dr. Meir Stampfer, a professor of epidemiology and nutrition at the Harvard T.H. Chan School of Public Health.

Other causes of B₁₂ deficiency include

- ▶ taking heartburn medications that suppress stomach acid
- ▶ eating a diet that does not include animal products
- ▶ weight loss surgery
- ▶ autoimmune diseases that attack the stomach lining or gastrointestinal tract.

How can you tell if you're low in B₁₂? "The first signs of deficiency can be present but so subtle that they are not recognized," Dr. Stampfer says. For example, you may have muscle weakness that you chalk up to other causes.

Symptoms of full-blown B₁₂ deficiency include

- ▶ balance problems
- ▶ depression
- ▶ extreme fatigue or muscle weakness
- ▶ memory loss or confusion
- ▶ numbness or tingling in the hands and legs (due to nerve damage)
- ▶ anemia.

Should you get checked?

Checking B₁₂ levels in the blood is not routine, but it may be a good idea in our older years. "I usually check

patients starting at age 65. After that, I'll check every three or four years," says Dr. Suzanne Salamon, associate chief of gerontology at Harvard-affiliated Beth Israel Deaconess Medical Center.

Blood tests look for markers of anemia, low levels of B₁₂, and high levels of homocysteine and methylmalonic acid (MMA). "MMA is the best indicator of deficiency," Dr. Stampfer says.

Treatment

Treating B₁₂ deficiency could be as simple as eating more B₁₂-rich foods or avoiding heartburn medication. Or you may need a B₁₂ supplement. "I may recommend an over-the-counter B₁₂ pill of 1,000 micrograms daily if B₁₂ is borderline low or MMA is borderline high. After the level is back to the normal range, I will often decrease the dosage," Dr. Salamon says.

If you take a B₁₂ pill, Dr. Stampfer recommends taking the natural form (methylcobalamin), not the synthetic form (cyanocobalamin). "Studies suggest cyanocobalamin may impair kidney function in people with borderline kidney problems, so it's better to stay on the safe side," he says.

What if you have reduced stomach acid? "In supplement form, B₁₂ isn't bound to the food, so you don't need stomach acid to extract it," Dr. Stampfer notes.

Annie Oakley suffered from a rare condition called pernicious anemia. In this condition, people don't make enough intrinsic factor and therefore have great trouble absorbing any B₁₂ from the intestine. For people with this problem, B₁₂ pills may not work, and injections of B₁₂ may be required.

Is a supplement warranted if you're not deficient? "It surely is if you don't eat animal products," Dr. Stampfer says, "and it's a good idea for all older individuals. Deficiency can be prevented at a very low cost and low hassle by taking a multivitamin with the average daily recommended amount of 2.8 micrograms of B₁₂." ♥



Top 7 reasons you have a headache

Food, alcohol, bright light, or stress could play a part in your headaches. Identifying triggers may help you avoid them.

When a bad headache strikes, you just want it to end. The aching, throbbing pain can be debilitating and result in missed appointments, work, or time with family and friends. Regardless of whether you are prone to migraines, tension headaches, or cluster headaches (see “Is this your headache?”), you may be able to reduce their frequency by identifying what brings them on. Here’s a look at the most common triggers for each of these kinds of headaches.

1 Stress. Stress can cause tight muscles in the shoulders and neck, which often leads to tension headaches. “It’s believed to start in the muscles. When tension headaches become frequent, the pain in shoulder and neck muscles is felt by the brain as pain in the head,” says Dr. Sait Ashina, a neurologist who specializes in headache treatment at Harvard-affiliated Beth Israel Deaconess Medical Center. Stress is also a common trigger for migraines.

2 Diet. Hunger itself can trigger a migraine or tension headache. But eating certain foods may trigger migraines. It could be just one type of food—like beans or nuts—or many foods, such as avocados, bananas, cheese, chocolate, citrus, herring, dairy products, and onions. “Processed foods with nitrites, nitrates, yellow food dyes, or monosodium glutamate can be especially problematic,” Dr. Ashina notes.

3 Alcohol intake. Alcohol is a common cause of migraine and cluster headaches. For some people, a few ounces of red wine are all it takes to provoke a headache, although any kind of alcohol can be a trigger. It’s not clear if the alcohol itself is to blame or if another component in the drink causes the problem.



Is this your headache?

Here are three common types of headaches and their symptoms.

- ▶ **Tension headache.** Pain often starts in the neck and back and works its way up to feel like a tight band around your head. It often goes away with rest.
- ▶ **Migraine headache.** Pain typically begins on one side of the head, throbs or pounds, and makes you sensitive to light and sound. It may cause nausea. A migraine can last for hours or days.
- ▶ **Cluster headache.** A cluster headache feels like a stabbing pain in the eye. It may cause eye tearing or redness, runny nose, or nasal congestion. It may last for a few minutes or hours, go away, and come back several times per day. These headache clusters can occur for months, disappear, and reappear a long time later.

4 Environment. “Cluster headaches seem to be seasonal and often happen in the spring or fall,” Dr. Ashina says. “It’s something in the environment, but we can’t tell exactly what it is yet.” Environmental factors such as bright light, smoke, humidity, intense scents, or cold weather are associated with migraine headaches.

5 Hormones. Changes in estrogen levels are associated with

migraines in women, and women suffer from migraines more often than men. Menstrual cycles may be tied to migraine in younger women. Varying estrogen levels during perimenopause can sometimes start migraines in women who never experienced them before. Estrogen therapy may also be a migraine trigger. Menopause does seem to end migraines in most women.

6 Caffeine withdrawal. If you normally consume caffeine in coffee or tea, stopping intake abruptly may trigger a migraine. This may be because caffeine causes blood vessels to constrict; without caffeine, the blood vessels widen and bulge out with each heartbeat—a chief reason for the pounding pain of migraines.

7 Lack of sleep. A lack of sleep is associated with migraines and tension headaches. “We don’t know why, but we do know there’s a correlation and that sleep can lead to pain relief. Sometimes people feel better after taking a nap,” Dr. Ashina says.

What you can do

Understanding your headache triggers can help you avoid getting headaches in the future. But identifying triggers can be tricky, especially if you have more than one (like several kinds of food). Dr. Ashina recommends keeping a diary to note the day, time, symptoms, and circumstances surrounding a headache (what had you eaten? where did it happen?).

If avoiding triggers isn’t enough to keep headaches at bay, talk to your doctor. There are many prescription medications as well as pill-free treatments (acupuncture, meditation, biofeedback, relaxation therapy) that can help reduce headache frequency.

And you’ll need to go a step further: “Make sure you get enough sleep, exercise, eat a healthy diet, limit alcohol intake, and reduce stress,” Dr. Ashina says. “Headaches are a condition of hypersensitivity, so you need balance in your system to fight triggers.” ♥



Is intermittent fasting safe for older adults?

Learn the risks before diving into this experimental eating style.

Intermittent fasting is a popular eating strategy being studied in labs and practiced in kitchens across America. And it's more than a fad. Restricting your calories or mealtimes may have the potential for many benefits, such as weight loss and reduced risk of various diseases. We don't have much evidence, however, about intermittent fasting's effect on the health of older adults.

What is intermittent fasting?

Intermittent fasting restricts when or how much you eat—and sometimes both. There are several approaches.

In alternate-day fasting, you eat normally every other day. On days in between, you eat just 25% of your daily calorie needs, in one meal. So if you consume 1,800 calories on Monday, Wednesday, and Friday, you'd eat a 450-calorie meal (and nothing else) on Tuesday, Thursday, and Saturday.

In the 5:2 approach, you eat normally for five days in a row; then for two days in a row, you eat just 400 to 500 calories per day.

In the 16:8 approach, each day is the same: you fast 16 hours in a row, and then eat normally within an eight-hour period, like between 9 a.m. and 5 p.m.

What are the benefits?

The benefits of intermittent fasting seem to affect many aspects of health. These effects could theoretically result from the flipping of a metabolic switch.

"Fasting leads to lower levels of glucose [blood sugar]. In response, the body uses fat instead of glucose as a source of energy, after turning the fat into ketones," explains registered dietitian Kathy McManus, director of the Department of Nutrition at Harvard-affiliated Brigham and Women's

Hospital. This shift from glucose to ketones as a source of energy also changes body chemistry in healthy ways.

Regular fasting in animals is associated not only with weight loss but also with lower blood pressure and heart rate, reduced insulin resistance, lower "bad" LDL cholesterol levels, higher "good" HDL cholesterol levels, and less inflammation. Some studies also have found improved memory.

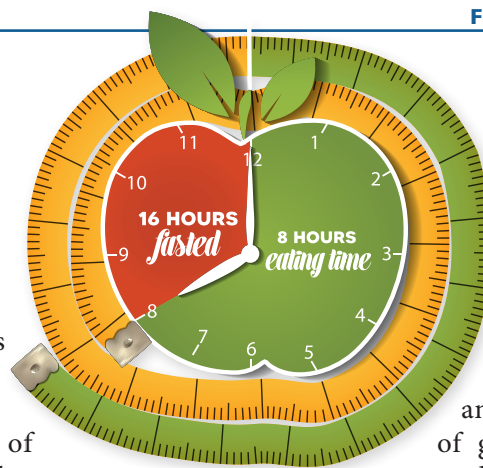
Intermittent fasting is also associated with a longer life span, at least in animals. Why? Recent Harvard research suggests that intermittent fasting may allow the energy-producing engines (mitochondria) of each cell to produce energy more efficiently and remain in a more youthful state.

"By eating in the day, you're not challenging the mitochondria at night, when they're supposed to be doing other things," explains Dr. William Mair, a researcher and associate professor of genetics and complex diseases at the Harvard T.H. Chan School of Public Health. "But we have many unanswered questions."

Potential risks

While intermittent fasting shows promise, we don't have solid evidence about the benefits or how fasting might affect older adults. Human studies have looked mostly at small groups of young or middle-aged adults, for only short periods of time.

But we do know intermittent fasting could be risky in some cases. "If you're already marginal as far as



One style of intermittent fasting gives you an eight-hour window in which to eat all meals.

body weight goes, I'd be concerned that you'd lose too much weight, which can affect your bones, overall immune system, and energy level," McManus says.

Dr. Suzanne Salamon, associate chief of gerontology at Harvard-affiliated Beth Israel Deaconess Medical Center, expresses another concern: "People who need to take

their medications with food—to avoid nausea or stomach irritation—may not do well with fasting. Also, people who take heart or blood pressure medications may be more likely to suffer dangerous imbalances in potassium and sodium when they're fasting."

Intermittent fasting may also be harmful if you have diabetes and need food at certain times or take medication that affects your blood sugar.

Still want to try it?

If you're thinking of trying intermittent fasting, especially if you already have health conditions such as diabetes or heart disease, talk to your physician.

McManus advises easing into the diet. "Slowly reduce the time window for eating, over a period of several months," she advises.

Also: continue your medication regimen as recommended by your doctor. "Taking medications doesn't break the fast, and neither does having calorie-free drinks like water or black coffee," says Dr. Alexander Soukas, an endocrinologist and molecular geneticist with Harvard-affiliated Massachusetts General Hospital.

What if you do need food with medication? "Perhaps you can try a modified fast. I suspect it would still do a lot of good for people who are overweight," Dr. Salamon says. "Just work with your doctor on a plan that will benefit your health without risking it." ♥



Try these stretches before you get out of bed

Prepare your muscles and joints for a full day of functioning.

It's hard to jump out of bed for a great day when your muscles are stiff and your joints creaky. But you can change that by warming up and stretching before your feet ever touch the floor.

"Stretching before getting out of bed can help wake up the body and improve the circulation. It can also turn on the parasympathetic system—the 'rest and digest' system—which puts us in a more relaxed state right when we get out of bed, helping set the tone for a calm morning and day," says Dr. Beth Frates, who directs wellness programming for the Stroke Research and Recovery Institute at Harvard-affiliated Spaulding Rehabilitation Hospital.

Theoretically, stretching before getting out of bed may also help prevent falls. "By focusing on your legs and arms, you may be more careful and mindful when you put your feet on the ground," Dr. Frates says.

How should you start?

Normally before you stretch, you should warm up your muscles; that gets blood flowing to them so they're more pliable. But Dr. Frates says the muscles are already on the warmer side when you've been in bed all night. All it takes to prepare for stretches in bed, then, is a few minutes of flexing the joints before you stretch. (Tip: Remove your blanket and sheets before stretching, to give yourself a little more room.)

While you're still lying down, flex your lower limbs: put your knees and feet in the air; with your knees in the air, raise and lower your feet; roll your ankles and move them back and forth.

Next, sit up in bed. Slowly look left and then right. Roll your shoulders a few times; work your elbows by holding both arms in front of you and doing biceps curls; flex your wrists up and down; open and close your hands several times.

FULL-BODY STRETCH WITH RESISTANCE BAND

Lie on your back with both legs extended.



Hold the band shoulder-distance apart with both hands by your hips. Lift the strap up toward the ceiling, over your head and down toward the bed behind you.

SINGLE KNEE PULL

Lie on your back with your legs extended. Bend your left knee. Grasp the back of your left thigh and pull your knee toward your chest. Flex your right foot and press the thigh and calf of that leg down toward the bed to feel a stretch in the front of your right hip and top of your right thigh. Return to the starting position and repeat with the other leg.



SIDE-LYING QUADRICEPS STRETCH

Lie on your right side with your legs stacked and extended. Rest your right arm under your head.



Bend your left knee and bring your heel toward your left buttock, reaching back with your left hand to grasp your foot. Feel the stretch in the front of your thigh and hip. Turn onto your left side and repeat the exercise.

HAMSTRING STRETCH WITH RESISTANCE BAND

Lie on your back with your left leg extended. Bend your right knee and place the strap around your right foot. Hold the strap with both hands. Flex your right foot and lift it toward the ceiling, straightening the leg as much as possible. Pull the strap to feel the muscle stretch. Repeat on the other side.



Now you're ready to start stretching. Try the stretches we've laid out for you on these pages (in any order you like). Some require a towel or resistance band, which you can keep next to your bed.

"Hold each stretch for 30 to 60 seconds if possible," Dr. Frates advises. "And don't bounce, which can damage the muscles."

When you finish stretching, you'll probably feel better. "Stretching can release the body's 'feel good' chemicals, lubricate the joints, and help you maintain your range of motion," Dr. Frates says. And that makes the wake-up stretching routine a prescription for a full day of better functioning.

For more stretching, including additional exercises, check out the Harvard Special Health Report *Stretching* (www.health.harvard.edu/str). ♥

CHILD'S POSE

Position yourself on all fours, knees hip-width apart, big toes touching, and head and neck in neutral alignment. Slowly drop your buttocks

back toward your heels as you extend your hands in front of you and rest your forehead on the bed. Feel the stretch down your arms, shoulders, and back.



COBRA

Lie facedown with your legs extended and toes pointed. Place your hands just below your shoulders, palms down, and press your palms against the bed to slowly lift your head, shoulders, and chest. Feel the stretch down the front of your torso and across your chest.



Weight loss ... from p. 1

Clinical Research Center at Harvard-affiliated Massachusetts General Hospital.

Better sexual function. There is some evidence that overweight and obesity reduce sexual function, and that regaining a healthy weight improves it. The reason may be that a healthy weight lowers blood pressure and staves off diabetes, and both high blood pressure and diabetes can interfere with sex.

Improved sleep. People who carry excess weight can have obstructive sleep apnea, a condition of poor quality sleep characterized by many pauses in breathing throughout the night. "Weight loss often reduces the sleep apnea, and sleep becomes more restorative," Dr. Stanford says.

Extra energy. The more weight you gain, the harder your body has to work to move. Doing so requires more adenosine triphosphate (ATP)—the molecule that delivers energy to the cells. When you lose weight, you use less ATP, so you have more energy for



The first step to weight loss is a diet rich in lean proteins, vegetables, fruits, and legumes.

the things you want to do. "You'll feel younger, too," Dr. Stanford adds.

More self-esteem. "For some people, weight is tied to self-esteem. When they lose weight, they feel better about themselves, interact more with others, and feel good about life," Dr. Stanford says.

Tools that can help

Committing to weight loss is an important first step. To reach your goals, you'll need to take these steps:

Eat right. "Eat lean proteins, whole grains, fruits, vegetables, legumes, nuts, and seeds. Focus on a healthy diet rather than the sheer number

of calories you're consuming," Dr. Stanford advises.

Exercise. Aim for at least 150 minutes of moderate-intensity activity per week. "For many older adults, that's walking. If you can't go outside, try walking-style exercises in your living room." That might mean marching in place, stepping side to side, or doing dance moves, using music to speed up or slow down your pace. "Many of my patients feel it's useful and healthful," Dr. Stanford says.

Get enough sleep. "The pathways of the brain that regulate weight interact with the pathways that regulate sleep," Dr. Stanford explains. "So try to get sustained sleep that's regular and consistent."

What if, despite your best efforts, you're not losing weight or your health doesn't improve? Stay the course, suggests Dr. Stanford. "It's not your fault. Everyone's body chemistry is different. But stick to your plan and be patient. In time, there's a good chance those numbers will start to move, and it will be worth it." ♥



Healthy habits mean more disease-free years

You've heard (in these pages, and others) that a healthy lifestyle can stave off chronic disease. But just how many extra disease-free years might you get from that healthy lifestyle? A lot, suggests an observational Harvard-led study published online Jan. 8, 2020, by *The BMJ*. Researchers evaluated more than 30 years' worth of health data from 111,000 people who were free of cancer, diabetes, and cardiovascular disease at age 50. Compared with those who didn't follow

any healthy lifestyle habits, those who followed four or five healthy habits had an additional decade of disease-free living. The elements of a healthy lifestyle will come as no surprise: don't smoke, limit alcohol intake, eat a healthy diet, maintain a healthy weight, and exercise at least 30 minutes per day. The surprise is just how many additional disease-free years a healthy lifestyle can give you.



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Should you try home hospital care?

In the old days, doctors would make house calls; that rarely happens today. However, a new kind of "house call" is in the works: in many cities it's now possible to receive hospital care at home for certain conditions. Such "home hospital care" programs are gaining in popularity. A randomized controlled Harvard study published online Dec. 17, 2019, by *Annals of Internal Medicine* suggests that the home hospital model of care is less expensive and leads to fewer readmissions than in-hospital care.

Researchers studied about 90 people who'd been diagnosed in the emergency room with infections or flares of heart failure or breathing problems. Half of the people were admitted to hospitals, and the other half were enrolled in home hospital care. The home hospital care group received visits from doctors and nurses, intravenous medications, and video monitoring. People in the home group had 38% lower hospital costs

than those in the hospital group, they were more active during care, and they were readmitted to the hospital within 30 days after their care less frequently (7% vs. 23%) than those in the hospital group. Home hospital care is not appropriate for everyone. "If someone is too sick or is in need of advanced procedures, their care may be better delivered in a traditional hospital," says Dr. David M. Levine, the study's lead author and an internal medicine specialist with Harvard-affiliated Brigham and Women's Hospital. However, if you have an illness that needs constant monitoring and treatment for several days—in other words, it can't be done in a doctor's office—yet it also doesn't require advanced procedures or constant and intensive nursing care, the home hospital care model may make sense. "If the home hospital model were offered to a member of my family, I'd encourage them to do it," says Dr. Levine.

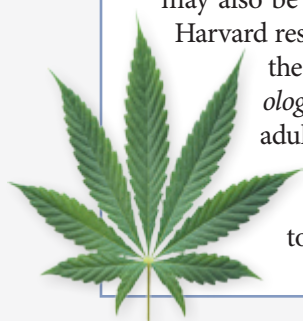


Have heart problems? Harvard researchers caution against marijuana use

Smoking tobacco is a major cause of high blood pressure, heart disease, heart attack, and stroke. But did you know that smoking marijuana may also be associated with the same problems? A

Harvard research review published Jan. 28, 2020, in the *Journal of the American College of Cardiology* found that more than two million U.S. adults with cardiovascular disease are smoking pot despite the risks, although they may not be aware of the potential link to heart problems. Studies on marijuana

use have been limited, primarily because the substance has been illegal for decades. Scientists are calling for more research, since medical marijuana use is now legal in more than 30 states, and recreational use is legal in 11 states and the District of Columbia. "Until we have more answers about the connection between using marijuana and heart problems, you should consider avoiding smoking any form of pot if you have known heart disease or a high risk for a heart attack or stroke," suggests Dr. Deepak L. Bhatt, a study author and editor in chief of the *Harvard Heart Letter*. ♥



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