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How to spot the most common "food fakes"

Healthy-sounding claims on food packaging can be misleading. Here's how to find impostors.

The New Year may have you thinking about a healthier diet, but you may need to do some detective work to find the healthiest foods in your grocery store. Food manufacturers often use terms that make products sound healthier than they are.

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The most accurate nutrition information is within a food product's Nutrition Facts label, not the flashy marketing promises on the package.

"Finding the healthiest foods takes time and effort, and we want things that are quick and easy. We need to take a couple of steps back and look beyond the flashy labels to see what actually is—and isn't—in the foods," says registered dietitian Kathy McManus, director of the Department of Nutrition at Harvard-affiliated Brigham and Women's Hospital.

Here's a guide to common terms you'll see on food packaging, as well as how to distinguish the facts from the flash.

"Real" fruits and vegetables. Many "made with real fruit" and "made with real vegetables" claims are deceptive. "Food manufacturers often use a misleading image of whole fruits and vegetables on their packaging when the product actually contains a very small amount. You need to look at the ingredients list to see what is really in the product," says McManus. "Instead, choose the real whole fruit or vegetable—no package needed, so no reading required."

Made with whole grains. When shopping for breads, rolls, crackers, and other baked goods and snacks, don't be fooled: "made with whole grains" isn't the same as 100% whole grain. "You'll see products that say 7-grain, 9-grain, or even 15-grain, but those products still may be mostly white flour. Again, check the ingredients list; the first word should be 'whole,'" says McManus. "Enriched flour" and "enriched wheat flour" are not whole grains.

Contains fruit juice. Be aware that fruit drinks are not the same as fruit juice; they may contain small amounts of juice, but the rest is water, sugar, and other additives. "Avoid any fruit drinks that have added sugar, and limit your amount, even if it is 100% fruit juice. Since there's no fiber in juice, it is digested quickly and can cause a rapid increase in blood sugar levels," advises McManus.

Low-fat and fat-free. The real issue with these terms is that low-fat and fat-free foods are not necessarily healthier than full-fat foods, and they often contain added sugar and salt.

"A low-fat diet does not mean it is healthier or helps with weight loss. People need to get past their fear of fat and understand that healthy fat is part of a healthy diet," says McManus. "Peanut butter is a perfect example; you don't need a reduced-fat version because the main type of fat in peanuts is healthy, unsaturated fat. The only ingredient in your peanut butter should be peanuts."

Reduced sodium. This is another area where labeling can be deceptive. A "reduced-sodium" product must contain 25% less sodium than the regular version, but if the

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ASK THE DOCTOR

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

What is immunotherapy?

Q *A friend has melanoma, and his doctor wants to use a new kind of treatment that boosts the immune system. Can you tell me more?*

A The immune system exists to attack foreign things that enter the body, such as germs. Certain cells of the immune system recognize and attack foreign things. Cancerous cells make chemicals that are not made by normal cells, chemicals the immune system should recognize as foreign. Unfortunately, eight million people around the globe die of cancer each year after their immune systems fail to destroy the cancer. Why do their immune systems fail?

About 20 years ago, two scientists—one in the United States and one in Japan—were studying T cells, immune system cells that attack foreign things. They weren't studying cancer. They were just trying to figure out how T cells work. Each of the scientists found a chemical on the surface of T cells that had not previously been discovered. One chemical was called PD-1, and the other CTLA-4. What did they do? When stimulated, the chemicals kept the T cells from attacking things: they applied the brakes.

The scientists wondered: what if we could figure out a way to disable these chemicals? Would disabling them release the brakes and make the T cell attack more effective? Over several years of trial and error, they finally found drugs that disabled the chemicals. Then came the acid test: would giving these drugs to mice with cancer help the T cells to attack the cancer? The answer was a robust "yes"!

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But treatments that work in mice don't always work in people. And a century of trying had made many scientists skeptical that the human immune system could ever be stimulated to fight cancer. The scientists struggled to interest pharmaceutical companies, and finally succeeded. In certain people, with certain types of cancer, the immune-boosting treatment produced startling results.

Perhaps the best known example is former president Jimmy Carter. In 2015, he was diagnosed with melanoma that had spread to his brain, and was given months to live. His doctors tried one of these immune-boosting drugs, and the brain metastases melted away. In 2018, at age 94, President Carter published his latest book. For some people, the treatments appear to have cured their cancer. While it's very unlikely that this approach will cure all kinds of cancer, it is helping a growing number of people.

For me, there is an important message in this story. These scientists, whose work was honored in 2018 with the Nobel Prize, were not trying to cure cancer. They were just trying to figure out how living things work. A society that supports such curiosity benefits in ways that it never could have predicted.

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Are your hamstrings working double duty?

Weak gluteal muscles can overload the muscles in the backs of your thighs.

Running to catch a flight and other bursts of energy can injure overworked hamstrings.

The hamstrings are the unsung heroes of the upper legs. The three muscles in the back of each thigh enable you to bend your knees and pull your legs back as you walk. They also assist the gluteal muscles (or "glutes") in the buttocks—the powerhouses that propel your body forward when you get up from a chair, bound across a room, or climb stairs. The glutes also help you come to a stop from a run or walk and lower your body to sit down or squat.

But weak gluteal muscles wind up overburdening the hamstrings. "When the glutes are weak, which is common in the age of sitting too much, the hamstrings are continually overworked and overloaded," says Matt Natanson, a physical therapist with Harvard-affiliated Brigham and Women's Hospital.

Sitting down on the job

Sitting for long periods weakens the glutes in two ways. One is inactivity: the glutes need to move to stay healthy.

The other is a chain reaction caused by sitting too much: the hip flexor muscles in the front of each hip contract and tighten, and tell the nerves to inhibit or turn off the muscles that provide the opposite motion—the glutes. This phenomenon is called altered reciprocal inhibition.

Weak glutes then force the hamstrings to pick up the slack and do more of the glutes' job. But hamstrings also become tight from too much sitting.

Overworked hamstrings

When tight hamstrings are forced to work overtime, they're at risk for injury. "They're strained easily, especially if there's a sudden burst of energy—if you have to run after your dog or run across the street at a crosswalk to beat a stoplight," Natanson explains.

A muscle strain is the stretching or tearing of muscle fibers. Strains range from mild (the tearing of some fibers) to severe (a tear that rips all the way through the muscle fibers, and sounds like a pop when it occurs). Strained hamstrings can leave you sidelined with pain and may even require surgery.

Aim for teamwork

The best way to protect your hamstrings is to keep all of your leg muscles healthy and working together, including the glutes and the quadriceps (the muscle group at the front of each thigh).

Natanson recommends getting an evaluation from a physical therapist who can assess your muscles and joint health and develop a workout program tailored to your needs. "We look for balance. We examine the joints where the hamstrings attach—the knee and hip—and we look at the lower back and ankle, to see if things are moving as they should. If there's stiffness in one area, you may be taxing another."

Marching orders

A hamstring strengthening program involves two approaches: targeting a single muscle group and targeting several muscles at the same time. An example of an exercise for a single muscle group is a hamstring curl (see "Move of the month").

An example of an exercise that works the glutes and hamstrings at the same time is a bridge. To do it, lie on your back with your knees bent and feet flat on the floor, lift up your buttocks, hold the position for a few seconds, then lower your buttocks to the floor and repeat the exercise.

And another example: "Place a lightweight exercise band above your knees or ankles and take steps sideways, backward, or forward to engage the hamstrings, glutes, and quads," Natanson explains. Do this exercise only with supervision and arm support nearby, since it may cause you to fall.

After strengthening the muscles, remember to stretch them, to keep them long and flexible. For more information, check out the Harvard Special Health Report *Stretching: 35 exercises to improve flexibility and reduce pain* (www.health.harvard.edu/str).

The payoff

Natanson says it may take a few months of daily strengthening and stretching to get your upper legs healthy again, and then a maintenance program of leg workouts a few times per week. He also advises taking breaks from long periods of sitting. "And if your muscles are healthy," he says, "your hamstrings won't tighten up so much."

MOVE OF THE MONTH: CURL

Movement: Extend your right leg behind you. Bend your knee and lift your heel toward your right buttock. Slowly lower your foot. Repeat 10 times, then switch legs for another 10 repetitions.

Medicine cabinet makeover

Remove expired medications to avoid hazards such as accidental poisoning or ineffective treatment.

Like any cupboard in your house, the medicine cabinet can easily become overstuffed with pills, potions, and creams that have expired or are no longer needed. But holding on to them can be dangerous. That's why experts recommend weeding through your medicine cabinet regularly. "Check it every six months or when you change your clocks," recommends Joanne Doyle Petrongolo, a pharmacist with Harvard-affiliated Massachusetts General Hospital. "Make it a regular habit to protect your family."

Medicine cabinet risks

For all their value, the substances in your medicine cabinet pose some risks beyond the side effects of the drugs:

Accidental poisoning. The CDC reports that unintentional overdoses among children ages 5 or younger results in 60,000 emergency room visits each year. More than 90% involve children who get into medication on their own.

Drug abuse by other family members. Research suggests that 60% of people who misused opioids in 2015 did not have a prescription, and 40% obtained the drugs from family or friends.

When medicines are outdated or unnecessary, these risks become unacceptable. In addition, if medications have expired they may no longer be as potent. That could be very dangerous, for example, if you're taking a drug for an unstable heart rhythm.

Expiration vs. dispensing dates

When you get a prescription drug, the label on the bottle is stamped with the dispensing date (the day the pharmacist filled your prescription). But the dispensing date is not the same as the expiration date.

"The expiration date is the day the manufacturer can no longer guarantee 100% potency of the product," Doyle Petrongolo explains. "You won't see expiration dates on prescription medications, but they're generally within one or two years of the dispensing date."

Weed through your medicine cabinet regularly to keep it free of expired or unnecessary drugs.

You will see expiration dates on nonprescription drugs, such as anti-itch creams like hydrocortisone or over-the-counter painkillers like acetaminophen (Tylenol) or ibuprofen (Advil, Motrin). The dates may be stamped on product's label, box, or crimp (the end of a tube).

Beyond expiration

Can you use a product beyond the expiration date? "It depends," says Doyle Petrongolo. "Some products degrade quickly, including liquid antibiotics and compounded medications. You should get rid of those immediately after the expiration dates stamped on the label." Compounded medications are created just for you and made in a form you can tolerate, such as a suspension liquid instead of a pill.

What about other products? Some government studies have suggested that many prescription drugs are good even three years after the expiration date. Should you automatically apply such an extension when you see that a remedy in your medicine cabinet has expired? "It's best to talk to your pharmacist first, since each medication has different stability properties," Doyle Petrongolo counsels. She recommends that you don't keep drugs that have been shown to fail stability tests past expiration dates, such as aspirin, nitroglycerin, and insulin.

Disposal

Don't just throw old medications in the garbage, where they can wind up in the landfill, and don't automatically flush them down the toilet, where they can wind up in the water supply.

The FDA urges you to dispose of medications properly. The best way is to take advantage of drug take-back events held by local law enforcement agencies. The U.S. Drug Enforcement Administration sponsors these events every April and October; for information and collection sites, see https://takebackday.dea.gov. In addition, many communities and hospitals have drop boxes you can use all year round.

Medicine cabinet staples

Keep these basic nonprescription remedies on hand to help provide relief when you need it.

- Aspirin for emergency heart attack response (chew one 325-mg tablet and call 911 if you think you're having a heart attack)
- Painkiller, such as ibuprofen (Advil, Motrin), naproxen (Aleve), or acetaminophen (Tylenol)
- Hydrocortisone cream for itch relief
- Antibiotic ointment for minor cuts
- Antacid for heartburn, such as combination magnesium and aluminum (Maalox, Mylanta)
- Artificial tears to relieve dry eyes
- An antihistamine for allergy relief or itching, such as diphenhydramine (Benadryl)
- A medicine for diarrhea, such as loperamide (Imodium)

Retiring? What about your health?

You're ready to head for sunnier climes. But have you thought through your evolving health needs? Here's a checklist.

When we get close to retirement age, we're all a little guilty of deluding ourselves into thinking how rosy it'll be—long walks on the beach at sunset, meaningful volunteering to engage the mind, the warmth and conviviality of friends and family.

It's great to approach retirement in a positive state of mind. But it's also a good idea to consider your future health needs when it comes time to select a community where you can live out your golden years.

"Some people move to a place where they spent vacations and have great memories," says Dr. Suzanne Salamon, associate chief of gerontology at Harvard-affiliated Beth Israel Deaconess Medical Center. "But often these places are remote and not close to medical care. People have to realize that, as they age, there may be medical problems they didn't anticipate. Being close to a good hospital can make the difference between a good or bad outcome."

A simple way to plan

Dr. Helen Chen, a geriatrician at Harvard-affiliated Hebrew Rehabilitation Center, promotes a way of looking at this challenge called "The Five Ms." The idea was first advanced by researcher Mary Tinetti of Yale University.

Mind. How are you going to stay intellectually active and manage your mood in your new retirement community? Will you find enough mental stimulation?

Move. Will you be part of a community that provides transportation to key places (like a grocery store)? If you have to drive everywhere, how will you manage that?

Mingle. Will you be socially connected in your new environment? Is moving really in your best interests if you'll be far from friends or family?

Look for settings that encourage fitness in your retirement town, like parks and bike paths.

Meaning. What will be your purpose as you enter life's so-called third act? Purpose and meaning contribute to one's mental well-being (and there's only so much golf you can play). Another way to frame this M is as what "matters most" to you in your retirement years. Maybe it's giving back by volunteering. Maybe it's checking in more frequently with grandkids.

Multicomplexity. The fifth M is perhaps the most difficult. It pertains to the myriad health challenges of getting older, from managing medications and procedures, to keeping doctor appointments, to arranging for lab tests and routine screenings.

The Five Ms in practice

How do we translate the message of the Five Ms into practical steps? When you're thinking about where to live in retirement, consider the qualities of a community that are important for health at an older age:

- medical services
- nonprofit health services, like meal delivery
- transportation services
- affordable housing options
- recreation opportunities
- volunteering opportunities
- private-duty services (such as a companion or certified nursing assistant).

For example, these days, walkable city centers are getting more consideration as retirement destinations, as are college towns that offer robust learning opportunities or entertainment.

Home is more than a house

According to Jennifer Molinsky, senior researcher with Harvard's Joint Center for Housing Studies, there are several challenges in making a home suitable for retirement living. Affordability is very high on her list. "If it's not affordable, you'll cut back on other necessities like food and health care. Affordability problems only get worse as you get older."

And while access to groceries and medical care become crucial, safety and accessibility inside the home are also paramount. "Stairs can be a problem, so it can be beneficial to have all the rooms on one floor. Even having steps to reach the front door can cause problems later. Imagine the challenges of having the washer and dryer in the basement and the shower and bath on the second floor," says Dr. Salamon.

In fact, a whole new field of urban design caters to the needs of older people. Ann Forsyth, professor of urban planning at Harvard University Graduate School of Design, has a unique window on the latest trends: "There are a lot of fantastic housing options. Some mix middle-age and older people. Others cluster people into social groups, or introduce animals people can befriend and take care of." The "greenhouse model" has a nursing home broken into various pods where people live in private studio apartments but share a kitchen and other amenities.

Our experts agree on one vital factor. Don't overlook staying right where you are if your existing house and community checks all your boxes. For many of us, there's no place like home.

Are you missing this simple treatment for restless legs?

Iron supplementation may be all it takes to reduce symptoms of restless legs syndrome. But many doctors don't know about it.

People with restless legs syndrome (RLS) experience an overwhelming need to move the legs, particularly at night or as they fall asleep. But a simple treatment that may help reduce RLS symptoms is often overlooked as a potential first line of defense.

"The concern is that people are being started on medications first when iron might be a valuable treatment. It's simple, with relatively few side effects," says Dr. John Winkelman, an RLS specialist at Harvard-affiliated Massachusetts General Hospital.

Understanding RLS

An estimated 2.5% of Americans—more women than men—have frequent and bothersome RLS. Symptoms include tingling, crawling, aching, pulling, or painful sensations that can be relieved only by moving the leg (or, sometimes, arm) in which it occurs. Some people have RLS symptoms only when immobile on long plane or car rides.

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A blood test can help doctors determine if iron deficiency is behind restless legs syndrome.

Four out of five people who have RLS also have another condition called periodic limb movements of sleep (PLMS), which causes involuntary jerking or twitching movements in the legs during sleep.

Movements occur every 20 to 40 seconds for a few minutes or a few hours at a time, leading to disrupted sleep, daytime sleepiness, and fatigue for both the person who has PLMS and his or her bed partner.

RLS causes

The exact cause of RLS is unclear. People with iron deficiency (see "The importance of iron") are much more likely to experience the disorder. "But many doctors don't know that iron deficiency is one cause of RLS, and therefore don't test for it, particularly in men, in whom iron deficiency is uncommon," explains Dr. Anthony Komaroff, editor in chief of the *Health Letter*.

The link between RLS and iron does not just depend on low blood iron levels. Instead, RLS may be caused by low levels of iron in the brain. "It's possible to have a low brain level of iron but a normal blood level of iron. The two levels are different," says Dr. Winkelman.

Diagnosing low brain iron

Brain iron deficiency should be one of the first considerations when looking for a cause of RLS. But diagnosing low brain iron is tricky.

"We don't have a way of assessing brain iron outside of specialized brain imaging," Dr. Winkelman says. "We have to infer it from blood levels and make the jump that if you have low blood iron, your brain levels are probably low as well."

The importance of iron

Iron is an essential mineral that we get from our diet, in foods such as red meat, cooked soybeans, cooked lentils, ground turkey, and fortified bread and breakfast cereals.

We need only a small amount of dietary iron each day: 8 milligrams per day for adult men and for women starting at age 50 (or whenever menstruation ends).

You may have low iron levels if your diet does not include iron-rich foods or if you have an underlying condition—such as cancer of the stomach, colon, bladder, or kidney—that causes blood to be lost from the body. Women who are menstruating often have low iron levels.

The vast majority of dietary iron we absorb helps us make hemoglobin (the oxygen-carrying chemical in the body's red blood cells). Iron is also essential for making myoglobin (a protein in muscle cells); activating certain enzymes; and making amino acids, collagen, neurotransmitters, and hormones.

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Cooked lentils are a rich source of dietary iron.

Low iron levels can lead to iron-deficiency anemia. In this condition, there are too few red blood cells, and the red blood cells are too small. The low levels of hemoglobin make it harder for the blood to carry oxygen to organs.

In menstruating women, iron deficiency is most often due to menstrual blood loss. In men and in women who are not menstruating, it's important to find out what may be causing low iron levels and treat potential causes.

Doctors use several tests to measure iron in the blood. One test measures iron levels directly. But the best way to diagnose iron deficiency, says Dr. Winkelman, is a blood test measuring ferritin, the primary form of stored iron in the body. The ferritin level also provides guidance as to which type of iron therapy should be recommended.

Treating RLS with food

"Dietary iron may sometimes be enough to treat RLS if your ferritin level is at or below 50 micrograms per liter (mcg/L). Red meat is really the best way," notes Dr. Winkelman.

However, consuming excessive amounts of red meat, especially cured meats like ham or salami, is associated with an increased risk for developing cardiovascular disease, diabetes, diverticulitis, and some types of cancer. Legumes are a healthier iron source, but absorption of iron from them is less efficient.

Treating RLS with oral iron

The more reliable treatment is oral iron. Dr. Winkelman recommends treating RLS with a pill form of iron when the ferritin level is 50 mcg/L or lower. He says it relieves RLS symptoms substantially in about half of the cases in people with ferritin at these levels.

The dose: The usual starting dose is one tablet of 325 milligrams of ferrous sulfate once per day. "It's best absorbed when your stomach is acidic, so take it on an empty stomach or take it with vitamin C to acidify the stomach," Dr. Winkelman advises. Oral iron can cause stomach upset and constipation, so it may help to take it every other day rather than daily.

Treating RLS with IV iron infusion

Absorbing iron orally may not be possible if blood iron levels are not low. "Sometimes the gut absorbs iron poorly," Dr. Winkelman explains. In those cases, and in cases in which people are unable to tolerate the digestive effects of oral iron, doctors bypass the gut and prescribe an intravenous (IV) infusion of iron to treat RLS. Dr. Winkelman recommends iron infusions when ferritin levels are between 50 and 75 mcg/L. "About one third of people who get IV iron have RLS symptom relief," he notes.

How often would you need an infusion to treat RLS? "That depends how quickly you're losing iron, but maybe once a year," Dr. Winkelman suggests.

Other strategies

It may take a month before iron levels increase and RLS symptoms decline. During that period, if RLS is intolerable, Dr. Winkelman recommends prescription medication to treat it.

Medication may also be recommended for RLS if you are not deficient in iron. Some drugs for RLS, like pramipexole (Mirapex) and ropinirole (Requip), are also used to treat Parkinson's disease but the doses used for RLS are lower.

"In many people, these drugs over time can actually make RLS symptoms worse," Dr. Winkelman warns. Other options are gabapentin (Neurontin), pregabalin (Lyrica), or gabapentin enacarbil (Horizant), which are also used to treat nerve pain.

Pill-free strategies may help ease RLS, too: massage or stretch the legs before bed, exercise daily, and avoid alcohol. Like taking iron, pill-free approaches offer a simple way to help relieve RLS and shouldn't be overlooked.

Health food fakes ... *from p. 1*

regular product is very high in sodium (for example, 800 mg of sodium per serving), the reduced-sodium version (600 mg per serving) may still be high in sodium. Another term to double-check is "no salt added," a term allowed if no salt is added during processing; however, it doesn't mean the food is sodium-free, or even low in sodium.

Gluten-free. If you do not have celiac disease or gluten sensitivity, there's no reason to eat gluten-free foods. They are not necessarily healthier than foods that contain gluten, and sometimes they contain more added sugar, refined flour, salt, and other additives.

The key to healthy grains, whether or not they contain gluten, is choosing whole rather than refined grains.

Cholesterol-free. Food manufacturers use the term "cholesterol free" hoping that you will think the product must be healthy, but how much cholesterol you eat is no longer a primary concern, say health experts.

Research has shown that diets high in trans fat and saturated fat, more than diets high in dietary cholesterol, can raise blood levels of LDL cholesterol, the "bad" type that is linked with higher risks of heart attack, stroke, and cardiovascular disease.

Avoid being tricked

The easiest way to a healthy diet is to eat whole or minimally processed foods whenever possible. Make fresh fruits and vegetables, whole grains, lean proteins (fish, skinless poultry, eggs, beans), and vegetable oils (olive, canola, soybean, corn) the foundations of your eating plan.

When buying processed products, look at the Nutrition Facts label. Check the serving size, calories, saturated fat (not total fat), sodium, fiber, and sugar.

"These are the numbers that provide the most information about whether or not a food is healthy," says McManus. And always look at the ingredients. "Buy products that have the fewest ingredients. Also, choose products that contain ingredients you recognize; if you don't know what an ingredient is, chances are, it's not healthy," advises McManus.

Greater fitness linked to a longer life

Some small studies have suggested that too much vigorous exercise might harm your heart, perhaps by triggering heart rhythm changes or other problems. New evidence allays this concern. In fact, the more fit you are, the longer you may live. For the study, researchers reviewed data from more than 122,000 people who underwent exercise treadmill testing from 1991 to 2014. Based on the findings, they divided the subjects into five performance groups: elite, high, above average, below average, and low. Elite performers—who had fitness levels comparable to endurance athletes—had the lowest risk of dying of any cause during the follow-up period, which averaged just over eight years. The survival benefit was most notable among people ages 70 or older and those with high blood pressure. According to the study authors, there does not appear to be an upper limit of fitness above which a survival benefit is no longer seen. They published their findings online Oct. 19, 2018, in *JAMA Network Open*.

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Omega-3s for anxiety?

Omega-3 fatty acid supplements may help ease anxiety symptoms in people diagnosed with a range of physical and mental health problems, according to a review published in the Sept. 14, 2018, *JAMA Network Open*. The report pooled findings from 19 different studies and included 1,200 people. Most of the studies compared omega-3 supplements to a placebo. Taken together, the studies included people with a range of health problems, including heart attacks, attention deficit disorder, substance abuse, depression, and Parkinson's disease, as well as some groups without any specific clinical diagnosis. Researchers found that people who took high doses of omega-3s (up to 2,000 mg a day) seemed to have the most reduction in anxiety symptoms. Omega-3 fatty acids, which are usually derived from fish oil, have a number of biological effects in the body. Brain membranes contain a high proportion of these fats, and human studies suggest that a lack of omega-3s in the brain may induce various behavioral and psychiatric disorders. For now, it's too soon to recommend high-dose omega-3 supplements for treating anxiety. Larger trials testing the supplements (both alone and combined with standard treatments) are needed, the study authors say.

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Heart health steps also help ward off peripheral artery disease

Better cardiovascular health may substantially lower your risk of peripheral artery disease (PAD), according to a study in the November 2018 issue of the *American Journal of Preventive Medicine*. PAD occurs when the arteries that supply blood to the legs become narrowed or blocked with fatty deposits. About 8.5 million Americans suffer from the condition, which typically causes cramping pain in the legs when walking. For the study, researchers evaluated adherence to the American Heart Association's "Life's Simple 7" guidelines among almost 13,000 people who were free from PAD or other cardiovascular disease at the start of the study. More than 430 PAD cases occurred in this group over about 24 years. Compared with people who did not follow Life's Simple 7, those with average and optimal adherence cut their risk of PAD by 64% and 91%, respectively. Life's Simple 7 emphasizes managing blood pressure, controlling cholesterol, reducing blood sugar, getting sufficient physical activity, eating better, maintaining a healthy weight, and quitting smoking.

What's coming up:

- Can supplements save your sex life?
- Easy ways to adapt exercise for arthritis
- Fill up on phytochemicals
- Tips to stay ahead of atherosclerosis