

Participant Handout for Session #3 of “Performance Boost 30”

www.TimelessHealingInsights.org/Boost



A. The Week Behind Us...

- Day 8: Seek Low Sodium Options
- Day 9: Get a Grip
- Day 10: Focus on Fats
- Day 11: Sleep Right
- Day 12: Water Up
- Day 13: Water Out
- Day 14: Seek Spirituality

B. The Week Ahead...

- Day 15: Trim Down
- Day 16: Breathe Deeply
- Day 17: Avoid Hidden Sugar
- Day 18: Embrace a Healthy Environment
- Day 19: Go Green
- Day 20: Depend on Your Dentist; Maximize Magnesium
- Day 21: Be Humble

C. General Considerations

Educational Perspective using the Weekly Videos and Handouts

- The question: do we in advance put additional material in your hands to prepare you for the week ahead, or do we roll out the daily modules and then give you additional support at the end of the week?
- In the videos and handouts, we’ve largely chosen the latter strategy.
- If you want to have more material on the front end, you can pick up a copy of *The Methuselah Factor* book. (Available at: <https://www.amazon.com/Methuselah-Factor-Sharper-Leaner-Better/dp/194273008X>)

D. Expanding on Key Concepts: DAY 11 - SLEEP RIGHT

Why did we give you handout material in advance for Day 11?

Day 11's Challenge: Commit to at least two sleep hygiene principles in order to help you get enough quality sleep each night.

Figure 9.5 Sleep Hygiene Principles

- ✔ **Exercise Regularly** for at least 30 minutes daily, preferably more than four hours prior to bedtime. Exercise closer to bedtime stimulates some individuals and will make it more difficult for them to sleep.
- ✔ **Get Bright Light Exposure During the Day.** Bright light exposure early in the day helps you fall asleep. Bright light exposure just prior to sunset helps individuals sleep through the night.
- ✔ **Keep Evening Meals Light – at Least Four Hours Before Bedtime.** Although late night eating can make you feel sleepy, a rising blood sugar will undermine the production of growth hormone, a compound that even adults need to get peak rejuvenation from sleep.
- ✔ **Avoid Caffeinated Beverages.** Caffeine after lunchtime may erode sleep quality. Even earlier in the day, caffeine may affect sleep by lowering melatonin levels.
- ✔ **Avoid Alcohol.** Late afternoon and early evening alcohol intake interfere with sleep architecture (the normal rhythmicity of sleep which is necessary for optimal restoration); alcohol at other times erodes resolve, making it easier to neglect to practice good lifestyle habits throughout the day.
- ✔ **Avoid Nicotine Intake.** Nicotine isn't your friend when it comes to blood pressure, or health in general. If you still haven't made a complete break, avoid this stimulant for at least four hours before bedtime to get the best sleep.

Figure 9.5 Sleep Hygiene Principles (continued)

- ❖ **Avoid High-Risk Naps.** Naps that are longer than 30 minutes or later in the day (after 3 PM) are more likely to interfere with sleep.
- ❖ **Maintain a Regular Sleep Schedule,** even on the weekends. Your body functions best when it can lock into a daily *circadian* rhythm. If you get up at the same time each day, your body will properly time the release of hormones like cortisol, so you'll be ready to hit the ground running.
- ❖ **Have a Sleep Routine.** Your body does best if you give it cues to wind down. Examples include listening to soothing music, praying, meditating and reading inspirational material. Also consider taking a warm or tepid (lukewarm) bath or a hot shower.
- ❖ **Mentally Prepare for Sleep.** Wind down mentally before bedtime; don't take anger, worries or concerns with you into the bedroom. (Incidentally, watching the news is generally not an effective way to do this.)
- ❖ **Refocus Your Brain.** If you can't mentally wind down, go to sleep listening to something that is engaging but not stimulating. This is best accomplished by listening to something familiar. Such an activity can focus your brain on something other than unpaid bills, tomorrow's meeting, your retirement account, or other waking activities.
- ❖ **Avoid Late-Night Light-Emitting Screens.** For an hour before retiring, avoid any significant use of light-emitting screens (laptops, tablets, smartphones, etc.).

Figure 9.5 Sleep Hygiene Principles (concluded)

- ✔ **Go to Bed Early.** Because restorative hormones, like growth hormone and melatonin, peak earlier in the night, sleep before midnight may be better sleep than after. Some experts recommend turning in by 10 pm.
- ✔ **Rethink the Alarm Clock.** Depending on an alarm is usually an indication that you're shorting yourself on sleep. After all, if you get to bed early enough, you should be able to get your required sleep and still be up in time for your morning routine. However, tossing your alarm clock may be premature. For example, anxiety-prone individuals may sleep more fitfully without the assurance of an alarm preventing their oversleeping. Bottom line: you may be better off, sooner or later, without an alarm clock.
- ✔ **Ensure Restful Surroundings.** Cool, dark, comfortable and free of excessive noise are all qualities of an optimal sleeping environment. Wearing earplugs or blinders may be necessary in certain circumstances.
- ✔ **Get Up and Try Again.** Don't try to "force sleep." If you've been lying in bed for more than 20 minutes, get up and do something non-stimulating. Then try to go back to sleep again. Such non-stimulating activities include low intensity exercises, like stretching or marching in place at your bedside. If you can do this safely with the lights out, so much the better. (Avoid doing things that are stimulating or interesting as this can increase wakefulness.)

E. Expanding on Key Concepts: DAY 8 - SEEK LOW SODIUM OPTIONS

Challenge: Cut down on your consumption of salt (unless your doctor recommends against this).

Salt intake is associated with a worsened Methuselah Factor:

- Higher salt intake has been documented to worsen hemorheology by elevating fibrinogen and von Willebrand factor.
- Those who use more salt have significantly higher levels of inflammation as reflected by measurements of C-reactive protein.
- Even if a person's blood pressure is not sensitive to sodium intake, increased sodium consumption by those with high blood pressure increases levels of inflammation and risk of high blood pressure complications.

Reference: DeRose, Dr. David. *The Methuselah Factor: Learn How to Live Sharper, Leaner, Longer, and Better--in Thirty Days or Less* (pp. 127-130). CompassHealth Consulting Press. 2019.

A Generally Safe Strategy

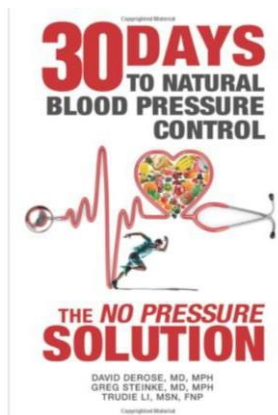
Begin reading labels—and take action based on them. If a food has more milligrams of sodium than calories per serving, it is a relatively high sodium/high salt food. These items are best avoided.

Cautions

If you are taking no medications, it is very likely that today's challenge will be beneficial for you. On the other hand, if you're taking medications for diabetes, high blood pressure, or heart failure, your relationships with sodium can be more challenging. Although many individuals with these conditions would benefit from reductions in their salt intake, it behooves you to check with your doctor before making any sudden changes.

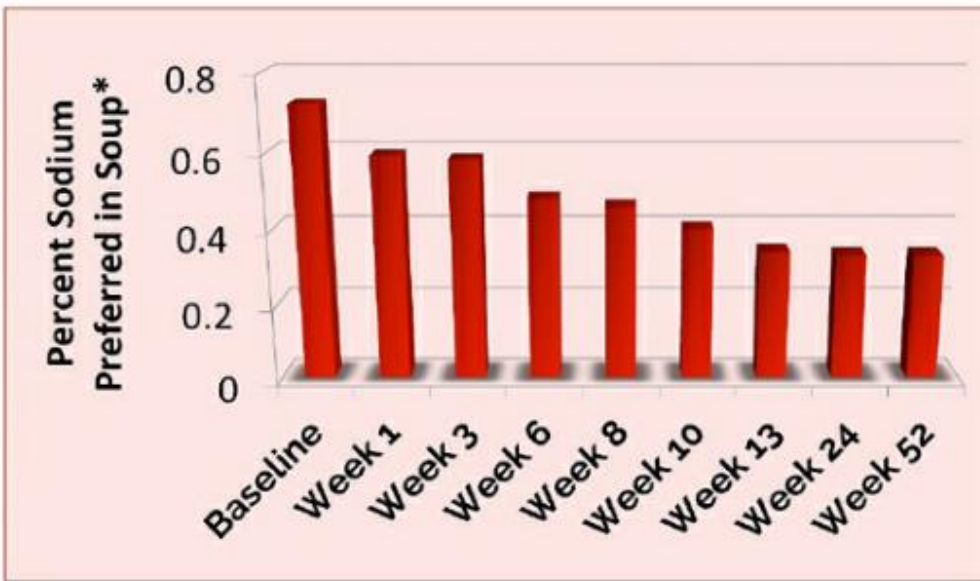
Note: All graphics in this handout are provided courtesy of "Thirty Days to Natural Blood Pressure Control." The book is most easily obtained in a variety of formats on Amazon (eBook/Kindle, hardcover, softcover, and audiobook).

- Use the following link for a free video overview of "Thirty Days to Natural Blood Pressure Control":
<https://youtu.be/rnnGYSuC6T4>
- Use the following link to purchase the book on Amazon:
<https://www.amazon.com/gp/product/1942730020>



Changing Sodium Preferences

Figure 5.17 Changes in Sodium Preference Over Time After Adopting a Low-Salt Diet (Percentage of sodium preferred in soups, graphed according to study week)



*At the time of this study, commercial soups had .8 to 1.1% sodium

From: DeRose MD MPH, David; Steinke MD MPH, Greg; Li MSN FNP, Trudie. *Thirty Days to Natural Blood Pressure Control: The "No Pressure" Solution* (p. 113). CompassHealth Consulting Press. 2016.

F. Expanding on Key Concepts: Include Resistance Exercise, DAY 9 - GET A GRIP

Day 9's Challenge: In addition to engaging in aerobic exercise, add (or increase) resistance exercise in your weekly routine

The Power of Isometric Handgrip Exercise

In a meta-analysis on resistance exercise, four pooled studies showed that regular isometric handgrip exercise dropped blood pressures in the range of 13 points systolic and 6 points diastolic.

Cornelissen VA, Fagard RH, et al. Hypertension. 2011 Nov;58(5):950-8. Cited in *The Methuselah Factor*, p. 132-133

Handgrip Exercise Protocol

- Perform handgrip exercise sessions three times per week.
- During each exercise session, perform four sets of the exercise, two using your dominant hand, and two using the non-dominant hand.
- Each set consists of holding a grip device continuously for two minutes at 30% of your maximal voluntary contraction (i.e., about 1/3 of the maximum force you could exert by squeezing).
- Take a one-minute rest between each set (therefore, the thrice weekly sessions would each take about 11 minutes; four sets of the exercise at two minutes each, plus three one-minute rests).
- Continue the exercise program for at least six weeks.

Reference: *The Methuselah Factor* (p. 132-133).

Resistance Exercise for Sedentary Adults

- Train each major muscle group once or twice per week, waiting at least 48 hours between sessions
- Do two to four sets of each exercise with 10-15 repetitions per set.
- Start with a weight where you fatigue during that 10-15 repetition range (your fatigue point occurs when you can't perform even one more repetition with proper form).
- Once you can complete 17 repetitions at a given weight, increase the weight by 5 to 10 percent.

Reference: *The Methuselah Factor* (p. 134).

G. Expanding on Key Concepts: DAY 10 - FOCUS ON FATS

Day 10's Challenge: Try to avoid saturated fat (generally found in animal products), and preferentially eat foods that naturally contain omega-3 and other polyunsaturated fats (generally found in plant products).

Saturated Fat Connections

- Increased intake of saturated fat is associated with worsened insulin resistance, and consequently worsens the Methuselah Factor.
- Lower fibrinogen levels are characteristic those who eat fewer animal products.
- A three-month intervention study that employed more plant-based choices to cut saturated fat intake in half, led to a 20% improvement in hemorheology as measured by ETP (endogenous thrombin potential).

Reference: *The Methuselah Factor* (p. 137-139).

Omega-3 Fats

Among the specific dietary factors connected with ETP improvement was an increased intake of omega-3 fats. These fats help blood fluidity through a variety of mechanisms including decreasing blood viscosity, decreasing the number of red blood cells, and lowering levels of fibrinogen.

Figure 12.6 Selected Health Advantages of Consuming More Omega-3 Fats

- 1 Decreased risk of heart-related death and cardiac events including heart attacks.
- 2 Lower levels of blood triglycerides (a harmful blood fat).
- 3 Decreased blood pressure.
- 4 Reduced joint pain and decreased need for anti-inflammatory medications in individuals with rheumatoid arthritis.
- 5 Possible decreased risk of Alzheimer's and other dementias.
- 6 Improvements in mood and decreased risk of depression.

Figure 12.7 Recommendations Regarding Omega-3 Fat Intake

- 1 Prioritize dietary sources of omega-3 fats over supplements.
- 2 De-emphasize fish consumption; globally we don't have enough fish to sustainably meet the omega-3 requirements of the world population.
- 3 Also beware of toxin exposure associated with fish consumption.
- 4 Keep omega-3 fat sources refrigerated.
- 5 If you must take a supplement, consider a liquid source rather than an encapsulated one.

Figure 12.8
Top Plant and Fish Omega-3 Fat Sources

FOOD	SERVING SIZE	ALA**	EPA	DHA
Flaxseed oil	1 Tablespoon	7258 mg	0 mg	0 mg
Chia seeds, dried	1 ounce (28.35 grams)	5055 mg	0 mg	0 mg
Black walnuts, dried	1 cup	3346 mg	0 mg	0 mg
Flaxseed, ground	1 Tablespoon	1597 mg	0 mg	0 mg
Salted mackerel*†	100 grams (approx. 3.5 oz)	159 mg	1619 mg	2965 mg
Pacific herring* (cooked with dry heat)	100 grams (approx. ¾ cup)	73 mg	1242 mg	883 mg
Alaskan Native Sockeye salmon† (smoked filets with skin)	100 grams	130 mg	905 mg	1520 mg
Most other fish	100 grams	< 60 mg	< 1000 mg	<1500 mg

* the two highest fish sources of EPA in the USDA database (excluding fish oil and caviar/roe)

† the two highest fish sources of DHA in the USDA database (excluding fish oil and caviar/roe)

** Content of ALA in the fish sources and in the ground flax may be falsely elevated by the inclusion of polyunsaturated fats with 18 carbons that are not in the omega-3 family

How Much Omega-3 Should I Consume?

Some experts recommend 15,000 mg or more of ALA to get maximal cardiovascular benefits. This large amount is based on a 5% conversion of short chain to long chain omega-3 fats. If that conversion is accurate, it would render this level of intake comparable to eating the oft-recommended two servings of fish per week.

Choosing Omega-3s for their anti-inflammatory benefits?

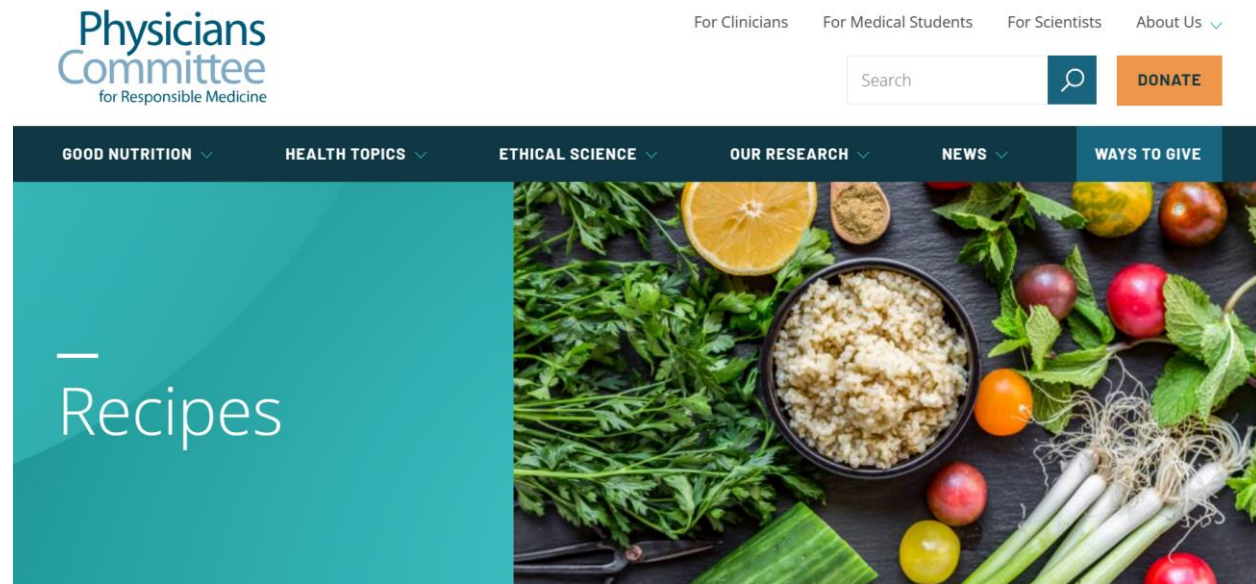
Then consider these other anti-inflammatory adjuncts

- Turmeric 500 mg three times daily
- Boswellia extract 200 mg to 600 mg twice daily

Are You Looking for Help with Recipes?

Check out The Physician's Committee for Responsible Medicine Website

<https://www.pcrm.org/good-nutrition/plant-based-diets/recipes>



H. And Don't Forget...

1. Program Mechanics

- Are you keeping your medical providers in the loop?
- Are you tracking your progress?
- Are you watching the daily videos?
- Are you complementing your viewing with reading from either "Thirty Days to Natural Blood Pressure Control" or "The Methuselah Factor"?

2. The Importance of Social Connections

- Do you get scam text messages? Why would this actual scam text message have any success?
- "Stranger, I hope I'm not bothering you... Today is my birthday, it's a happy event, but I feel lost because I am alone..."