

Stopping Joint Pain

"Osteoarthritis is a huge problem, and yet there are many things we can do to prevent and even reverse it."

Almost all people over the age of 40 have some pathological changes in weight bearing joints. The Merck Manual of Diagnosis and Therapy (1987) goes on to state that osteoarthritis becomes universal by age 70. Knees, hands, wrists, elbows, shoulders, hips, ankles, bones in the feet, the over 200 bone surfaces in the back are all prey to degenerative changes in the joints. This is a huge problem and yet there are many things we can do to prevent and even reverse osteoarthritis.

Commonly prescribed drugs like NSAIDS provide temporary relief but we know they have dangerous negative side effects. The nutrients we suggest can provide a variety of positive side effects and in some cases are cardioprotective.

Before I go further, I'd like to offer you my comprehensive audio CD called "Joint Care and Repair." You can ask for the CD below free of charge and it's a great way to educate



your patients. This CD lays out the whole story of why our joints degenerate and the factors that can slow down or even reverse the process. You can copy the free CD or call us for inexpensive duplicates, but give it to your patients as part of your patient education program.

I explain joint care to my patients like this: Healthy joints mean healthy cartilage. We have cells in our cartilage called chondrocytes, and these cells build new cartilage but at

the same time chew or break down the damaged/aged cartilage. Growth and destruction are taking place simultaneously. It's a healthy balance. But when the destruction phase exceeds the growth phase, there is a greater amount of damaged or aged cartilage present: friction occurs, pain is experienced and ultimately degeneration.

Dr. Jason Theodosakis in his book "The Arthritis Cure" paints a great word picture. To illustrate how slippery the

cartilage between your joints can be, think of two perfectly smooth slightly wet ice cubes rubbing together. They effortlessly glide quickly and easily without catching or tearing. Now imagine a substance 5 to 8 times more slippery than ice. That's your cartilage; the material that makes it possible for the ends of your bones to slide smoothly and easily across each other. No man-made substance can compare to the low-friction and shock absorbing properties of healthy cartilage.

As you read the literature regarding effective strategies for osteoarthritis, you see things like essential fatty acids, antioxidants, niacinamide, hormone imbalances as well as nutrients that feed and protect the joints called chondroprotective agents. You'll find more on the other classes of nutrients below, but let's focus on how to use chondroprotective agents to feed the joints.

By chondroprotective agents I mean purified chondroitin sulfate and glucosamine, either the hydrochloride or the sulfate form. Based on the early work of Dr. Lester Morrison on purified chondroitin sulfates and heart disease, I initially used only purified chondroitin sulfates.

Dr. Morrison in a six year study using purified chondroitin sulfates at 750 - 1,500 mg per day showed profound coronary benefits involving 120 patients with arteriosclerosis. Here's a summary of the results. Of 60 patients that were treated with purified chondroitin sulfates, 6 suffered coronary events resulting in 4 deaths. Conventional therapy alone resulted in 42 coronary events and 14 deaths in a comparable group of 60.

We use the term purified because most chondroitin sulfate products contain collagen and limit its absorption significantly. Imagine taking this product for your joints and your arteries become more flexible. Studies like this show

the safety of long term use of purified chondroitin sulfates. It was enough to convince me that even though the size of the molecule was large, oral levels could be absorbed and utilized by the body.

Then the glucosamine wars started. Glucosamine HCl vs. glucosamine sulfate vs. chondroitin sulfates. My experience was that some people responded better with the purified chondroitin sulfates but there was a fraction that responded better with glucosamine products. To be safe, I wanted to use both forms.

Another dilemma presented itself; which form of glucosamine to use? Knowing that the sulfate molecule has so many benefits with liver detoxification and even heavy metal chelation, I use the sulfate form.

The combined purified chondroitin sulfate and glucosamine sulfate product is called Chondro-Samine-S. Glucosamine as glucosamine sulfate, purified chondroitin sulfates, MSM, vitamin C, B3, B5, B12, manganese, and an anti-stiffness factor called the Wozen factor that comes from a sugarcane extract. I use 2 capsules, three times a day and let the patient reduce the dose as soon as the pain subsides. After 90 days, I try to switch from the combination product to straight purified chondroitin sulfates to take advantage of the cardioprotective benefits.

I think you can see why a patient CD can be so valuable. Especially when I go into the quality control issues and the fact that all glucosamine-chondroitin products are not created equal. Patients need to get their products from a reputable source, you. It's important to let your patients know that you are well versed in these issues. Once they know that you know and that you care, patient compliance will be greater.

Thanks for reading this week's Tuesday Minute. I'll see you next Tuesday.