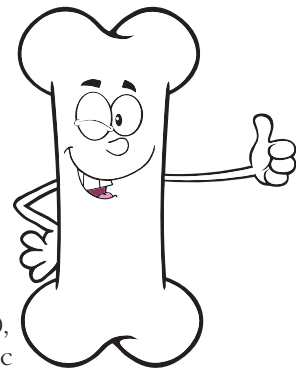


Fibro-Care Cal™

Your Best Friend for Bone Health

by Margy Squires

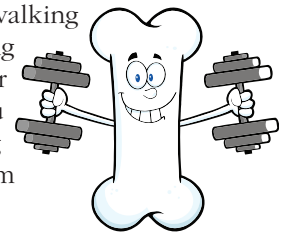
It seems the whole world is preoccupied with aging. No wonder with so many living longer these days. The marvels of modern medicine have added to the longevity factor, especially during times of trauma. But for most of us that live our normal day to day without do or die threats, we still face the inevitable impact aging has on our bodies. We may take longer to heal, function a little less efficiently and take fewer risks.



According to the National Osteoporosis Foundation (NOF), osteoporosis and low bone mass are a current “major public health threat” to almost 50 million Americans aged 50 and older. But it is one risk you don’t have to take or wait for it to happen to you as the Foundation also states it could be “largely prevented with lifestyle” changes. With a few proactive steps, osteoporosis and osteopenia (low bone mass) will never be one of the diagnoses written in your medical chart.

A little biology here will illustrate my point. As long as you are alive, bones are alive too, with the constant task of remodeling known as *resorption* and *absorption*. Resorption is the breaking down of bone tissue, mostly due to injury or repair, which releases calcium into the bloodstream. The absorption phase deposits calcium back into the bone to complete the building or healing process. When we’re younger, the balance favors absorption or growth. As we age, there may be a shift towards bone breakdown exceeding formation, especially during or post menopause. Too much loss results in low bone mass or osteopenia and if not corrected or helped, on to osteoporosis and risk of fractures and potential disability.

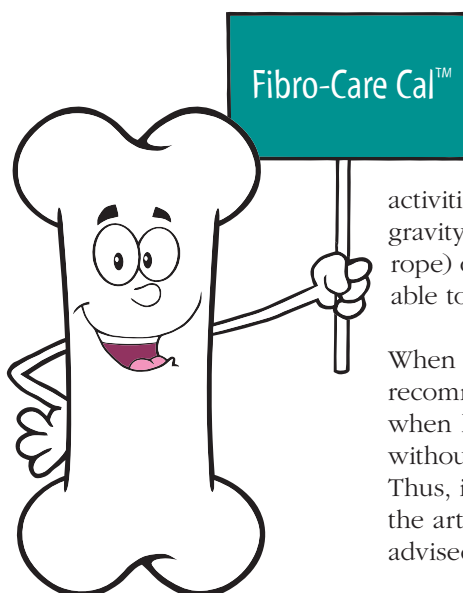
Lifestyle factors that impact bone health can be simplified in three steps. 1) Get a baseline bone density x-ray (DEXA) to determine your current status and fracture risk. 2) Exercise to “stress” bones. When you exercise, specifically weight bearing like walking for your hips, lifting weights for your arms/wrists, you are telling your bones to “thicken” up under the pressure. 3) Make sure your diet includes calcium from food and supplement as necessary. You do not need high doses. In research studies, supplementing 500 mg of calcium a day along with an *equal* amount of co-factor magnesium improved bone density more than 1000 mg of calcium alone.



Most insurances will not pay for a DEXA for women under 40 or 50. Sad news as your baseline bone density is pretty much laid by the time you are age 30. Had I known that years ago, I’d have covered the cost myself and it is certainly an option for you as the sooner you know your bone health, the better. Bone is living tissue; thus reversing osteopenia is possible and easier than reversing osteoporosis. A DEXA is an x-ray that takes less than 15 minutes of your time and is a necessary investment for determining your status. Just know it is only a piece of the picture.

As far as exercise goes, the NOF recommend several different kinds of exercise to improve posture, balance, strengthening and functional movement for everyday activities. Think of weight bearing exercises as those which keep you upright while defying gravity. They stress bones in a good way and include high impact (aerobics, dancing, jump rope) or low impact for those at risk (walking, stairs, treadmills). Make sure you’re physically able to do exercise and seek a health care professional first for guidance if needed.

When it comes to calcium, it may be the most misunderstood mineral of all. For years the recommendation was to take 1200 to 1500 mg a day for women close to menopause, a time when low estrogen may affect bone density. Unfortunately calcium was usually prescribed without two essential co-factors for absorption into the bone: magnesium and vitamin D3. Thus, it was more calcium than the body could use and the excess was stored in places like the arteries, making them stiff or “calcified”, and raising the risk of stroke. Now women are advised not to take calcium at all. Do you know that you can die from drinking too much



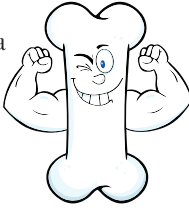
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Fibro-Care Cal™

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water? Are you going to starve your body of water or simply drink what your body needs? Manage your calcium the same way!

Men, don't think bone health is only a concern to women! Men get osteopenia and osteoporosis too but typically after age 70. Since men usually have more muscle mass, they may be less prone to bone mass issues.



Dietary calcium counts and dairy has the highest amounts. If you are a mostly non-dairy person like me, supplementing is critically important. According to the NIH Office of Dietary Supplements, the RDA for adults over the age of 18 is 1000 mg a day, 1200 mg for over age 70. Even if you consume dairy and get your 500 mg or so daily from diet, remember you cannot absorb or use it without magnesium and D3. The RDA for magnesium for men is 400 mg and 360 mg for women; however, since more than 75% of Americans are low, clearly this RDA is not being met or is not adequate. The RDA for D3 is 600 IU for age 4 and up; 800 IU after age 71.

Keep in mind that the more calcium you consume, the more co-factors you need. Magnesium is much harder to get in your diet and soaking up enough D to convert to active D3 depends on your ability to find sunshine every day. Then there are other nutrients the bone requires in "making" bone cells like the minerals boron and manganese and vitamin K2. Does that mean you have to peruse every food chart to

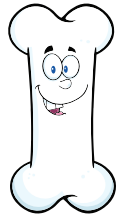
calculate every nutrient your bones need? The simple answer is to take a multi-nutrient formula in a supplement form like I do to make sure your bones are "fed". And I take Fibro-Care Cal™ for several good reasons.

Like most minerals, calcium is a hard rock to chomp on. Found in calcium carbonate and chloride, only small amounts are bioavailable to the body. Using an organic form means your body will love it. Calcium causes constipation in some people (the same as dairy does). Not so with organic calcium. And it is GI friendly in another way as to not cause diarrhea. But Fibro-Care Cal™ contains organic calcium as Albion TRAACS® organic mineral chelate so it gets equally absorbed with Albion TRAACS® organic magnesium. In fact, the whole formula is highly absorbable with bioavailable forms, including Albion boron and manganese, cholecalciferol D3, menaquinone K2, Fibro C™ and malic acid. Plus studies have shown that prebiotics help with absorption of minerals and thus NutraFlora® FOS is added as well. Vitamins B1 and B6 aid the metabolic function of magnesium. You might say it is almost like getting a "bone building kit" in a bottle!

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- ◆ Osteoporosis: If Bones Could Talk
- ◆ Vitamin D for Bones & More
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