

Income Protection + Life Cover + Aviation Legal Cover... all for Just Dhs 395 per month

Over 1800+ EK Pilot Members email: support@lipsek.org

Issue 7/ 2014

DRINKING ENOUGH WATER ?

Most people only drink 4.5 0.25L servings of liquid a day, reports a nationwide Cornell University Medical School study of more than 3,000 people. That’s slightly more than half the recommended amount.

Source: Hope Health

LIKE BROTHER, LIKE BROTHER

Your siblings’ medical history may be a better predictor of your chance of developing heart disease than that of your parents, according to a new four-year study.

Doctors measured coronary artery calcification, a likely indicator of elevated heart risk, in 8,500 patients (mostly men). Those who had a sibling with coronary disease had the highest risk of calcification. The authors speculate that adverse circumstances in childhood, likely shared by siblings, may explain the connection. So be sure to let your doctor know your siblings’ health histories along with your elders’.

Source: Consumers Reports OnHealth

LIKE EVERY MEAL IS YOUR LAST

Your body thinks that every meal you eat is your last. Your mind knows that when you go to bed at night, you’ll have breakfast the next morning. It knows that five or six hours after lunch, you’ll eat supper. But nature has designed your body to protect itself by storing up every bit of extra energy your last meal provided...just in case.

And how does it store it? Why as fat, of course; in the buttocks, in the abdomen, in the back of the arms, in the thighs.

The thing to remember is this. Your body may not think you’re going to eat again, but you know you are. So don’t eat like it’s your last meal.

Source: Lutheran Hospital Health Letter

ALCOHOL AND MEDICATION

It’s no secret that people tend to take more over-the-counter and prescription medications as they age. Many of these drugs—and herbal remedies—are metabolized by the same liver enzymes needed to process alcohol.

Mixing alcohol with medications such as blood thinners can cause gastrointestinal bleeding. And heartburn medications, such as Tagamet and Zantac, interfere with alcohol metabolism, allowing blood-alcohol levels to spike. Other drugs that interact with alcohol include cold and flu medications, pain relievers, antidepressants and sleep aids.

For a list of medications and herbs that interact with alcohol, go to the Web site of the National Institute on Alcohol Abuse and Alcoholism, NIAAA.NIH.gov (under the "Publications" tab, click on "Harmful Interactions: Mixing Alcohol with Medicines").

Takeaway: Because alcohol affects the body in such complex ways, it’s always wise to talk to your doctor honestly about your drinking habits and how alcohol could affect the medications you take...any chronic health conditions you may have...and/or your risk factors for disease. The older we get the less alcohol we should drink.

Source: Almost Alcoholic

Inside This Issue ...

Elliptical Training	2
Exercise Vs. Diet	3
Energy Bar Exam	4
Taking The Plunge	5
5 Myths About Heart Disease	6
Improve Your Odds	7

WHO'S AT RISK FOR HEART DISEASE?

Men have a higher risk of having a heart attack than women, and at an earlier age. But it's important to note that heart disease is the No. 1 killer of women, too. People with a family history of heart ailments also have a higher risk of heart trouble.

Risk Factors You Can Control High cholesterol and high blood pressure are major risk factors for heart disease. Being overweight, obese, or physically inactive all increase your risk. So does diabetes, especially if your glucose levels are not well controlled. Discuss your risks with your doctor and develop a strategy for managing them. There are many steps you can take to protect your heart.

Smoking and Your Heart If you smoke, your risk of heart disease is 2 to 4 times greater than a nonsmoker's. And if you smoke around loved ones, you're increasing their risk with secondhand smoke. Each year in the U.S., more than 135,000 people die from smoking-related heart disease. But it's never too late to quit. Within 24 hours of quitting, your heart attack risk begins to fall.

Life After a Heart Attack It is possible to regain your health after a heart attack. By avoiding cigarettes, becoming more active, and watching what you eat, you can give your heart and overall health a big boost. One of the best ways to learn how to make these changes is to take part in a cardiac rehab program. Ask your doctor for recommendations.

Heart Disease Prevention The key to preventing heart disease is a healthy lifestyle. This includes a nutritious diet, at least 30 minutes of exercise most days of the week, not smoking, and controlling high blood pressure, cholesterol, and diabetes. If you drink alcohol, do so in moderation -- no more than one drink a day for women, two drinks a day for men. Ask your friends and family for help in making these changes. They'll benefit, too.

Diet and Your Heart What you eat makes a difference. Be sure you get plenty of whole grains, vegetables, legumes, and fruits to help keep your heart healthy. Plant oils, walnuts, other nuts, and seeds can also help improve cholesterol levels. And don't forget to eat fish at least a couple of times each week for a good source of heart-healthy protein.

Source: American Heart Association

BRUSHING WITH BAKING SODA

Baking soda has long been used as a dentifrice. But despite its old-fashioned image, it's not particularly effective. The abrasive quality is lost when it gets wet, and it has no special cleansing or whitening powers.

ELLIPTICAL TRAINING

If you've been to a fitness center recently, you've probably noticed how many exercisers are using elliptical trainers. They have become one of the most popular pieces for cardiovascular workouts.

If you think the workout looks easy, think again. "Elliptical training can be a great activity," says Peter Francis, PhD, "as long as you are conscious of your core muscles and posture."

Here are some DO's and DON'Ts on proper form from Francis:

- ◆ **DO** activate your quads, hamstrings and glutes by keeping heels flat on the pedals.
- ◆ **DON'T** stand on the balls of your feet
- ◆ **DO** stand tall with your back straight, chest up, abs pulled in. The better your posture, the more efficiently your muscles work.
- ◆ **DON'T** sway from side to side. Concentrate on moving your body only from the hips down.

Source: Women's Sports & Fitness

SOCCER PLAYER'S HEAD INJURIES

A Norway study finds that 81% of professional soccer players, who started playing soccer as children, have measurable cognitive deficits, including poor memory, and deficiencies in attention and the ability to concentrate, when compared to other men of the same age. The degree of mental impairment ranged from mild to severe, but most were moderate.

Researchers found that those players who headed the ball most often had the greatest cognitive loss, suggesting a direct cause-and-effect relationship (rather than just a coincidental association) between heading the ball and mental impairment.

In addition, a recent study published in the Journal of Trauma showed that the acceleration of impact involved in heading a soccer ball was 160-180 percent greater than in routine helmet impacts occurring during high school football and hockey games. The peak acceleration inside a football helmet averaged 29.2 grams; and inside a hockey helmet it was 35.0 grams. Peak acceleration associated with heading a soccer ball was 54.7 grams.

The authors concluded that officials need to address the potential problem of heading in players of all ages.

Source: Pediatrics

FIBER: YOUR SECRET FAT FIGHTER

Dietary fiber has a well-deserved and sparkling reputation as a key defense against several chronic diseases, but fighting fat is arguably where it shines most brilliantly. In fact, one of the most predictable and defining features in the diets of people who achieve long-term success with body weight is their abundant intake of fiber-rich foods. And it's no wonder. Fiber offers a multitude of slimming features—it effectively “fills” your stomach up while providing little to no calories.

In addition to providing a physical sense of fullness in your tummy, fiber's “volumizing” effects can also augment the release of appetite-suppressing hormones from the gastrointestinal tract. As a final bonus, fiber can also slow the digestive process, which has two key benefits.

First, food will ultimately stay in your stomach for a longer period of time, which means you will feel satisfied longer.

Second, because fiber hinders digestion, it will naturally soften the peaks and valleys of blood glucose fluctuations that can awaken and incite your “inner cookie monster.”

Tragically, despite fiber's awesome benefits for health and body weight, we are running a huge fiber deficit in this country. The average American diet is painfully deficient in this natural appetite suppressant. Current intakes hover around a paltry 12 grams daily. For optimal health and appetite control, you need at least 14 grams for every 1,000 calories consumed. This translates to a minimum of about 25 grams daily for women and 30 grams daily for men. For a big dose of aspiration, consider that our ancient ancestors likely consumed around 150 grams a day.

Here are your best food choices for fiber:

- Beans (any variety)
- Peas
- Flax & chia seeds
- Avocado
- Carrots
- Collards
- Oranges
- Apples
- High-fiber whole-grain cereals—choose those with at least five grams of fiber per serving.
- Physically intact whole grains like oatmeal, brown rice, quinoa, barley, bulgur, etc.

Source: Nutrition Action Healthletter

CALCIUM NOT JUST FOR BONES

If you're taking calcium for your bones, good for you. But don't forget, you're also taking it for your heart. In a study of 15,000 Norwegian adults, it was found that those who consumed the most calcium had the lowest blood pressure.

Source: Journal of Clinical Nutrition

EXERCISE VS. DIET

The most common approach to losing weight is dieting. The most effective way to lose weight is to exercise.

A recent study had one group diet by cutting their intake by 700 calories a day. The other group performed 700 calories of exercise a day but did not change their eating habits.

At the end of three months, both groups had lost an average of 16 pounds. But the exercising group had lost significantly more body fat while a higher portion of the dieting groups loss was in muscle tissue.

The best approach, of course, is a both/and. Watching what you eat while exercising is the most sensible way to lose weight.

Source: The Annals of Internal Medicine

HEALTHY GROCERY SHOPPING

Shop the perimeter of the store. The outside aisles are where fresh, healthy foods like fruits, vegetables and fish are usually located. Avoid the center aisles where high calorie, high-fat junk foods pack the shelves.

Aim for a variety of color. A report from the Journal of Science in Food and Agriculture confirms that the deeper and richer the color of fruits and veggies the better it is for you. Instead of white potatoes, choose sweet potatoes, instead of iceberg lettuce, choose baby spinach.

Avoid foods that contain a laundry list of ingredients. Whole foods (fruits, veggies, low-fat meat and dairy) should be filling your cart.

Consider pre-cut packages of produce. They may cost a little more, but if they enable you to eat more fruits and veggies, they're worth it!

Choose herbs and spices instead of sauces and marinades. Cilantro, sage, rosemary and garlic are just a few herbs and spices that are packed with beneficial phytochemicals and antioxidants and little to no calories.

Recognize that a good deal doesn't mean a healthy deal. Saving \$5 on a super-sized carton of cookies may seem like a good idea, but it usually leads to overeating. If you do buy treats, opt for the smaller boxes/servings.

Give frozen fruits and vegetables (without the sauce) the green light. They are a convenient way to eat healthy, especially when your favorite fruit or veggie is out of season.

Learn serving size "tricks." Some food packaging may advertise "only 100 calories" but be sure to check the serving size on the back. There may be two or three servings within the package, so if you eat the entire thing you're actually eating 200 to 300 calories.

Check the label for the words "hydrogenated" or "partially hydrogenated" in the list of ingredients. These are unhealthy trans fats that you want to avoid. Put it back on the shelf!

Be wary of any food that claims it is a weight-loss product. You don't see weight loss claims on broccoli or apples, yet these are the very foods that will help you lose and maintain weight. A chocolate flavored bar that claims it will help you lose weight may not be the healthiest choice.

Stock up on canned goods. Canned beans, tuna, salmon, chicken and vegetables are all quick and healthy options. Always opt for the lower sodium variety if available.

Choose red sauce over white or creamy sauces. Alfredo and other cheesy pasta sauces are usually packed with calories and fat. Red sauces are much lower in calories, and they are rich in lycopene—an antioxidant that may help prevent some cancers.

Only purchase lean meat. Aim for meat that is labeled 90 to 99 percent lean. One patty of 80 percent lean beef still has about 15 grams of fat.

Make water your beverage of choice. You'll save a lot of money and calories and it's the best choice to keep your body hydrated.

Source: Tufts Health & Nutrition Letter

SERVING SIZE

America's growth in girth may in part due to the fact that U.S. portion sizes for foods approximately double those of some foreign countries. One example is the plain bagel. An American bagel weighs 4 ounces compared to 2 ounces when originally introduced.

An American croissant weighs 2 ounces compared to a French one that weighs only 1 ounce. A quesadilla in the U.S. is 10 inches compared to its original 5-inch size.

It's not surprising that about 55 percent of Americans are overweight, and 20 percent are obese.

Source: HealthNews

MAKING THE MOST OUT OF YOUR DAILY WALK

Walking is perhaps one of the best exercises you can do. It certainly gets your blood pumping, and it's a safe activity for practically anyone. Here are some quick and effective ways to boost your walking workout.

Take quicker steps. You can burn more calories when you walk at a brisk pace. You can pick up the pace by taking quicker (not longer) steps. Aim to walk at a pace that allows you to carry on a conversation, but still takes some effort.

Use walking poles. Walking poles are truly fantastic when it comes to working the muscles in your arms, shoulders, chest and upper back while you walk. In fact, if used properly, they can help you burn 20 to 45 percent more calories. Look for walking poles online or in a sporting goods store.

Change your speed. Switching back and forth between a moderate and fast pace (also known as intervals) is a great way to torch extra calories. Change your speed every few minutes. For example, for the first five to 10 minutes, walk at a moderate pace. Then, focus on picking up your pace for five to eight minutes.

Work some hills into your walk. Adding an incline into your walk is one of the best ways to burn more calories while walking. Gradually include hilly areas to your route or increase the incline on the treadmill.

Source: Runner's World

ENERGY BAR EXAM

Do "energy bars" really give you energy? Sure, but only because they contain calories, and calories fuel the body.

Energy bars (also called nutrition or sports bars) vary in how much protein, fat and carbohydrates they contain, as well as in the vitamins, minerals and other compounds that are added. They may be marketed as "low-carb," "high-carb," "low-glycemic-index" or "high-protein" (all the diet fads are covered). A few boast organic ingredients or provide extras like herbs and omega-3 fats.

But they won't make you more energetic, stronger or faster than other foods. Nor will they improve brain function or do any of the other things that may be implied by the bar's name or promoters. Many, in fact, are just souped-up candy bars, loaded with sugar and fat and thus extra calories. But some can be good occasional snacks.

Raising the bar

Not all bars are created equal, so read the nutrition information and ingredients. Look for whole grains (like rolled oats), nuts, peanut butter or fruit at or near the top of the ingredient list (not high-fructose corn syrup, brown rice syrup or maltitol—all sweeteners).

- ✓ Choose bars with more fiber. Fiber typically ranges from 2 to 5 grams.
- ✓ Calories usually range from 170 to 300. Lower-calorie bars simply tend to be smaller. Some bars have as many calories as a small meal.
- ✓ Look for low saturated fat. Most bars have 2 to 4 grams; Atkins bars have more.
- ✓ A high-protein bar (or other high-protein snack) after strenuous exercise may help older people build a little more muscle, but most people don't need extra protein.
- ✓ Don't judge a bar by how many added vitamins and minerals it has. You're better off getting these from natural food sources or a multivitamin/mineral pill that provides 100 percent of the Daily Values.

Source: Mayo Clinic Health Letter

STEP SAVER

If inactive Americans would participate in regular Moderate physical activity, the U.S. could save almost \$77 billion in healthcare costs.

Source: The Physician and Sportsmedicine

TAKING THE PLUNGE

Swimming is an almost ideal way to stay in shape. If you don't already swim, it's not too late to start. Here are some aquatic benefits.

Swim your heart out. If you're looking for exercise that improves heart and lung capacity but is gentle on your joints, swimming is a top choice. Like other aerobic exercise such as running, it can improve cardiovascular fitness as well as cholesterol levels, provided you swim at a brisk pace.

Aim to swim laps for 20 to 40 minutes at a pace that keeps your heart rate up. Start slowly; initially you may need to rest between laps. Over time, work out longer, preferably using different strokes and speeds. Because swimming places less demand on the heart than running and other sports, your heart rate won't go up as high. That means your target heart rate—if you know it—will be lower by 10 to 20 beats per minute.

Better blood sugar control and blood pressure. Several studies have found that swimming can improve various measures of blood sugar control, such as insulin sensitivity. This is true even though swimmers tend to weigh more and have more body fat than, say, runners or cyclists. Swimming is beneficial in this regard not only because it can provide an aerobic workout, but also because the resistance provided by the water builds muscle, which helps with blood sugar control. Some other research has shown that swimming and water exercise programs can help people lower blood pressure.

Weight control? Studies on the effects of swimming on weight have produced inconsistent results. While swimming burns a lot of calories (about 600 an hour, on average, depending on the stroke and intensity), recreational swimmers tend to lose less weight than would be expected from other aerobic activities, like running, cycling or brisk walking. That may be because cold water dissipates much more heat from the body than air at the same temperature does. There's some evidence that this leads to increased appetite in the hours after swimming.

You'll burn the most calories doing the butterfly stroke or a fast crawl; next come the breaststroke and backstroke; then the sidestroke. It's good to do a few different strokes for a well-balanced workout.

Even if swimming doesn't help you lose weight, it can help reduce body fat and waist circumference, while toning all major muscles (arms, shoulders, hips, legs). Swimming is also a good way for runners and cyclists to cross-train, since it uses different muscles.

Arthritis relief. Studies have generally given swimming and water workouts a thumbs up for people with arthritis or other musculoskeletal problems, especially if they are very overweight. Exercising in warm water, in particular, can relieve joint stiffness and pain and increase flexibility. It's easier to move around in water, and water brings relief by reducing the load on knees and other joints.

For back pain. Many types of gentle exercise are good for back pain, but water workouts are among the best.

Thus, another study found that aquatic exercise helped relieve chronic back pain better than a land-based program. Also, a Belgian review article in *Clinical Rehabilitation* found sufficient evidence to conclude that aquatic exercise is a safe and effective way to relieve chronic low-back pain. And a Swedish study found that water exercise reduced the incidence of back pain in pregnant women. Working out in water reduces the stress on the spine, promotes muscle relaxation and improves joint flexibility.

The downside is that swimming and water workouts are not weight-bearing exercise and thus, unlike running and strength training, do little to strengthen your bones.

Source: Harvard Health Letter

EXERCISE AND SELF-ESTEEM

Exercise improves your self-esteem. According to a study reported in the *Annals of Behavioral Medicine*, persons who exercise regularly have better self-esteem. But when the exercising was stopped, self-esteem went back to its original levels.

Source: USA Today

5 MYTHS ABOUT HEART DISEASE

Over the past decade, we've learned a great deal about what causes heart attacks and how to prevent them. But many people have misconceptions about the risk factors for heart disease, or heart disease itself. Here are five commonly held but mistaken beliefs, plus the facts that will put you on the path to a healthy heart.

MYTH 1: If you have heart disease, you need to take it easy.

"For the vast majority of people with heart disease, being sedentary is a bad idea. It can lead to blood clots in the legs and a decline in overall physical condition," says cardiologist and Harvard Medical School professor Dr. Richard T. Lee. Physical activity helps strengthen the heart muscle, improves blood flow to the brain, and improves overall health and well-being.

What you can do: Ask your doctor what kind of exercise would be right for you, and how much you should do. Most people can walk, and any amount of walking is good for your heart.

MYTH 2: It's okay to have higher blood pressure when you're older.

Blood pressure tends to rise with age, but the fact that this

trend is common doesn't mean that it is good for you. It happens because artery walls become stiff with age. Stiff

arteries force the heart to pump harder. Blood pounding against the artery walls damages them over time. The overworked heart muscle becomes less effective and pumps even harder to meet the body's demands for blood. This further damages the arteries and invites fat into the artery walls. This is how high blood pressure increases the risk of heart attack and stroke.

What you can do: Have your blood pressure checked. If it's above 140/90, ask your doctor what you can do to bring it down.

MYTH 3: You can lower your risk of heart disease with vitamins and supplements.

The antioxidant vitamins E, C, and beta carotene factor into lowering heart disease risk. However, clinical trials of supplements of these vitamins have either failed to confirm benefit or were conducted in such a way that no conclusion could be drawn. The American Heart Association has stated that there is no scientific evidence showing that these supplements prevent or treat cardiovascular disease.

What you can do: The body absorbs and utilizes vitamins and minerals best when they are acquired through foods. To ensure you get the vitamins and minerals you need, skip store-bought supplements and eat a wide variety of nutritious foods of every color of the rainbow.

MYTH 4: Heart disease is really a man's problem.

Since 1984, more women than men have died each year from heart disease. Heart disease is the leading cause of death in women over age 65, just as it's the leading killer of men.

By retirement age, 70% of men and women have some form of cardiovascular disease, which includes coronary artery disease, heart failure, stroke, and high blood pressure. Risk continues to rise, and by age 80, 83% of men and an even higher percentage of women — 87% — are affected.

What you can do: Whether you are a man or a woman, ask your doctor to conduct a baseline heart examination that includes checking your cholesterol and blood pressure. Then follow your doctor's recommendations.

MYTH 5: If you have heart disease, you should eat as little fat as possible.

It's true you should eat a diet low in saturated fat and avoid trans fat altogether. But other fats, notably the unsaturated fats in vegetable oils and other foods, are beneficial. In fact, eating fish high in omega-3 fatty acids, such as salmon, twice a week can lower the risk of heart disease.

What you can do: Include low-fat dairy products, fatty fishes, nuts, and olive oil in your diet. If you eat meat, make sure the cuts are lean, and remove the skin from your poultry.

Source: Harvard Heart Letter

THE ABCs OF SKIN CANCER

The hallmark method for distinguishing that mole on your back from the deadly skin cancer melanoma just gained a new wrinkle (ahem). Follow this lettered approach to recognizing melanoma:

A for asymmetrical shape

B for irregular borders

C for color variations (melanomas may be brown, black, white, blue, red, or a combo)

D for diameter greater than the size of a pencil eraser

And brand new for this summer season:

E for evolving

The New York University School of Medicine researchers who came up with the ABCD 20 years ago added the E because new research suggests that melanomas go through a series of changes in shape, size, color, and symptoms (they may begin to itch, hurt, or bleed, for instance). Examine your skin monthly, and call your doctor if you find a skin discoloration with any of these features. Melanoma is most treatable when caught early.

Source: Prevention

IMPROVE YOUR ODDS

Nearly 90 out of every 100 heart attacks worldwide are caused by risk factors that you can do something about, including:

- ✓ Smoking.
- ✓ Unhealthy cholesterol levels.
- ✓ High blood pressure.
- ✓ Diabetes.
- ✓ Abdominal obesity (a waist size more than 40" for men, more than 35" for women).
- ✓ Stress.
- ✓ Not eating enough fruits and vegetables.
- ✓ Not getting enough daily exercise.

Source: European Society of Cardiology

ARE YOU SALT SAVVY?

If you're worried about blood pressure, watch the sodium content in the foods you eat and drink.

The maximum amount of sodium recommended per day is 1,500 mg - that's about two thirds of a teaspoon of table salt. Surprisingly, most of the sodium in our diets comes from processed foods - not from salt added at the table.

Food	Mg sodium
Ham & Swiss sandwich	1366
Burger King Whopper with cheese	1350
Spaghetti sauce, 1 cup plain	1235
Potatoes au gratin, 1 cup	1065
KFC original recipe, 1 side breast	1116
Chicken soup, canned, 1 cup	1106
Big Mac	1050
Turkey pot pie, 8 oz. frozen	1000
Macaroni & cheese, 8 oz. frozen	1000
Soy sauce, 1 Tbsp.	914
Green olives, 10 small	935
Cottage cheese, 1 cup low-fat	920
Vegetable juice cocktail, 1 cup	880
Dill pickle, 2 oz.	835
Ramen noodles, 1 cup	820
Ham, 2 oz.	810
Lima beans, 1 cup	810
Egg McMuffin	796
Bacon, lettuce, & tomato sandwich	690
French fries, small serving	340
Potato chips, 2 oz.	336
Italian salad dressing, 1 Tbsp. bottled	255

Source: Hope Health Letter

BREAKFAST

Eating breakfast is a good thing. It can actually help you eat fewer calories throughout the day.

In one study, those who ate a healthy breakfast were 35% to 50% less likely to be obese or to have problems with insulin resistance - a condition that's common in overweight people, and which can often lead to type 2 diabetes.

Percentage of people who skip breakfast (by age):

Adults 18 to 34	24%
Teenagers 13 to 17	19%
Kids 8 to 12	9%
Kids under 8	6%

Source: American Heart Association

WE HELP KEEP you flying!

Our AeroMedical Staff can get pilots back to work faster while taking the risky guesswork out of aviation medical concerns.



The importance of early and active AeroMedical Assistance cannot be stressed enough. Whenever you have a new medical condition arise, you should immediately contact the Emirates medical to see if your condition or medication could affect your ability to fly legally. Many medications that are cleared actually require a mandatory “wait and see” period. This period of time can be a couple of days, weeks, or months. Some “approved” medications actually require approval by the regulator after your case has been presented to them, prior to your return to flight status.