

INDICATIONS

Beer, Food for Thought

As St. Patrick's Day approaches, the Bureau of Indications would like you to think on this: Beer is good for the brain. A recent study in Food and Chemical Toxicology looked at the effect of beer on lab rats' serum aluminum (Al) levels, given that aluminum has lately been implicated as a possible contributor to Alzheimer's disease, owing to its oxidative properties. The researchers hypothesized that the silicon content in beer, "by blocking uptake through the gastrointestinal tract and by impeding reabsorption in the kidneys," could lessen the amount of Al in the rats' bodies. "During the experiment (3 months), the animals were trained in the Rotarod wheel in order to evaluate the possible cerebral damage, coordination, and fatigue resistance." At the end of the study, the beer-fed rats had (yup, you guessed it) significantly lower serum Al, as well as decreased Al concentration in the brain tissue. The findings were so robust, "Moderate beer consumption

could be included in the dietary habits of the population as a possible protective factor, an aspect that supports the recent inclusion of beer in the food guide pyramid," concluded the authors. Wait a minute—beer in the food pyramid? How did we miss that?! And why was this study done on rats? Surely, there must be some human out there willing to drink beer for science? "This is the best gig we got," commented a representative of the Lab Rodent's United union, "and we're prepared to fight for it." Okay, okay—we're not really cut out for that Rotarod wheel, anyway.

News You Can Use

A recent study in the Journal of Hepatology looked at the effects of repeated whisky binges on the livers of rats fed either choline-deprived or regular "rat chow" diets—sometimes known as Taco Bell. Choline is a naturally occurring B-complex vitamin that helps prevent the accumulation of fat in the liver. Half of the rats were gavaged for 3 months with

1.5 mL/100 g body weight of Johnnie Walker Red Label whisky three times per week, explained the authors. (We would need to be gavaged with Red Label, too. On the other hand, give us a nice bourbon.) Upon hematoxylin and eosin tissue staining, rats fed the chow diet and given repeated alcohol binges showed minimal steatosis, while rats fed the [choline-deprived] diet and given repeated whisky binges showed periportal and pericentral microvesicular steatosis. In other words, a jolt of choline a day keeps the hepatologist away. To gear up for March 17 festivities, we recommend a diet high in the stuff, which includes, according to the U.S. Department of Agriculture, raw egg yolks, beef liver, and instant decaffeinated coffee—in other words, your standard Irish breakfast. Go ahead, make it an Irish coffee. Or three. You've earned it.

More Festive Than Green Beer

Obviously, the Bureau of Indications gets excited about St. Patrick's Day. But even we're not quite as exuberant as a trio of physicians from Ohio State Uni-

versity, Columbus, judging by their enthusiastically titled article in the Journal of the American Society of Echocardiography: "Not So Luck of the Irish: Four-Leaf Clover-Shaped Quadricuspid Aortic Valve Found Around St. Patrick's Day." According to the report, a 43-year-old man presented to his primary care physician with atypical chest pain and worsening dyspnea. A transthoracic echocardiogram was ordered. "Much to the surprise of the sonographer and the interpreting physician, the only abnormality discovered was a quadricuspid aortic valve," according to the investigators. Well, golly gee! The valve had four leaflets or cusps instead of the normal three-leaflet configuration and had associated mild to moderate aortic regurgitation, they added—which closely resembled, according to them, the outline of a four-leafed clover. The patient's physicians recommended that he return for a follow-up examination 1 year later. Would the patient consider surgery? "Never—they're always after me lucky charm!"

—Denise Napoli

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My cosmetic Family Practice is three and a half years old.

I didn't realize that family practice doctors were allowed to do cosmetic procedures. When I found out that over a thousand dermatologists were doing liposuction; I had to find out how they learned to do the procedure.

I discovered that thousands of non-plastic surgeons were organized into societies and doing cosmetic procedures.

I discovered I could do all of my cosmetic procedures in my office.

Without cosmetic procedures, I could not have taken seventeen weeks off last year to be with my family, and have a very lucrative income.

I became Medical Director of the American Academy of Cosmetic Family Practice because as a Family Practice physician, I believe with professional training, family practice doctors should be able to add cosmetic procedures to their practice.

Gregory Alouf, MD, AAFP, AACCS
Medical Director

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