OSTEOPOROSIS ACTION PLAN

THE METABOLIC PLAN

By: Stephen Cherniske, M.S.

If a woman is deficient in calcium and other essential minerals, her bones will become weak. If she takes supplemental minerals, the weakening of her bones may slow down, but because the underlying problem is actually *metabolic*, just taking handfuls of calcium will not stop bone loss and certainly will not restore bone density. To do that, you have to alter the metabolic environment. Research shows conclusively that the weakening of a woman's skeleton with age is directly related to her loss of DHEA as well as testosterone, estrogen, and progesterone. In other words, mineral deficiency is a biochemical need that can be met by proper diet and mineral supplements. But osteoporosis is a catabolic disease, and you must deal with it in metabolic terms.

ACTION PLAN

1) Get a bone scan before menopause (at about age forty-five; earlier if you have a family history of osteoporosis) to determine future risk and appropriate preventive measures.
2) Restore anabolic metabolism with DHEA, 7-Keto, and possibly progesterone and natural estrogens.
3) Perform regular weight-bearing exercise such as weight training or Nautilus machines. The pressure of muscle against bone sends an anabolic signal to the bone to get stronger.
4) Eat a highly varied natural foods diet including low-fat dairy products in order to obtain the full range of bone-support minerals.
5) Supplement the diet with a comprehensive bone and joint formula containing calcium, magnesium, manganese, boron, silica, vitamin D, vitamin C, glucosamine, and chondroitin sulfate.
6) Decrease intake of "bone-busting" beverages (caffeine and soft drinks), which are acid-forming and deplete calcium and magnesium.
7) Eat less meat and more vegetarian proteins. A diet high in meat protein accelerates bone loss.
8) Adopt a hunter-gatherer style of eating (frequent small meals versus two or three large meals). In animal research, this has been shown to dramatically improve bone density, most likely because of increased mineral absorption and decreased mineral loss, even when the same number of calories were consumed.