

# INFINITE WISDOM

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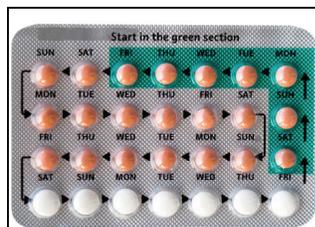
**Special points of interest:**

- Individualized health care when you need it.
- Same day or next day appointments.
- Want to talk to your own doctor? Call.
- See your doctor, not a random on call doc in the office

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## HORMONES PREVENT CANCER?

The story of females taking hormones is never-ending. More data has come out that ladies who take oral contraceptives (birth control pills) statistically had a reduced risk of cancer of the colon, endometrium (inside of uterus), and ovaries. This reduced risk persists for three decades even after stopping “the pill.” Now, we can’t advise people to start BCPs to prevent those cancers but the study suggests the benefits. Keep in mind that the studies also showed an increased chance of breast and cervical cancer with oral contraceptives but that risk disappears after being off the products for five years. So the “bad” part is short-lived but the “good” part



persists.

This data comes from the General Practitioners’ Oral Contraception Study from the United Kingdom and is an update on ladies they have been following from the 1960’s. It was published in the *American Journal of Obstetrics and Gynecology* in February. Much lay press cites the dangers of hormones that are taken by women. This study did not address the hormones women sometimes take at or after menopause. In general

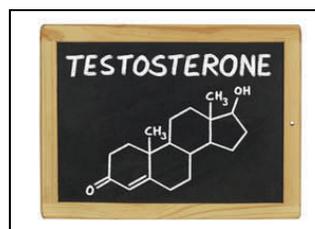
those hormones which are used to treat hot flashes and dryness are not taken long term. Hormones given for menopause and those for oral contraception are not the same so one cannot draw any parallels.

How does this work? No one knows. The study shows statistically that there was a benefit for a large group of females (35,000). But we can’t say that it will help or hurt YOU as an individual. We also cannot say that “the pill” prevents cancer. Suffice to say that there does not seem to be any overall cancer issue associated with oral contraceptives.

Probably the main negative health effect of oral contraceptives is the increase incidence of blood clots in females who smoke cigarettes.

## AND FOR THE GUYS...

Testosterone supplementation is often advertised for the treatment of fatigue, depression and memory in guys, especially as they age. There is not really a lot of good data on its effectiveness. Some men say they feel better when using testosterone but that is hard to measure. Testosterone can be given as a shot, a cream, a gel, a patch and even im-



plantable pellets. In a recent article in the *Journal of the American Medical Association* findings of a testosterone study were published. They found that sup-

plementation improved red blood cell count in males that were slightly anemic. It also showed that the density of the bones and the estimated bone strength was improved. This was true more so in the spine bones, not the hip bones. The only real adverse issue was related to the blood vessels.

**(Continued on pg 2)**

## LAB CORNER...HEPATITIS

*“If the liver cells are inflamed, they release, or spill, these chemicals into the blood stream.”*

Here we discuss the basic blood work done to detect inflammation of the liver, or hepatitis. There are many causes of hepatitis. Once liver inflammation is detected, we will then need to look for specifics. To first detect liver inflammation in general, a simple blood test panel is done. This often includes items that reflect the status of the liver.

The liver cells make certain chemicals that help it carry out its many and varied functions. Aspartate AminoTransferase (AST)

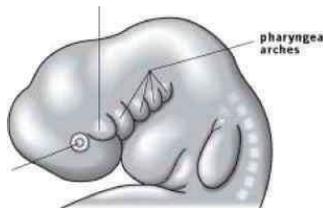


and Alanine AminoTransferase (ALT) are their names. Other cells in the body can have these too but they are at times more common in the liver. If the liver cells are inflamed, they release, or spill, these chemicals into the blood stream. When the levels of these are higher than normal, it alerts us to start digging deeper. In

general, levels have to be at least double their normal to trigger investigation. The test does not require fasting. The blood panel I mentioned also contains measurements of chemicals that can show other plumbing related problems with the liver, but the AST and ALT are the main ones. If those are abnormal we may then check for causes such as fatty liver, alcohol, viruses (A, B, & C), toxins, excess iron or other conditions. Follow-up studies may also include an ultrasound or CT scan.

## GOLDEN ARCHES

Did you know that we have gills when we are a developing embryo? At least the start of them. When we are very early in our development inside the womb, our developing body forms a series of arches, six exactly. The first arch develops about one month into the embryo's life. In humans those arches evolve to form parts of our jaw,



ear and other structures of the head and neck. In fish some of those arches develop into their gills. Bony fish have three arches, sharks have about five.

Some of the arches disappear and don't develop into anything particular. In humans they develop into parts of the throat area, the pharynx, so they are called the pharyngeal arches. In fact ALL vertebrates (animals with backbones) initially develop these early arches which modify as the embryo of the animal develops.

## TESTOSTERONE...CONTINUED FROM PAGE 1

*“did NOT find that testosterone supplementation improved memory or problem solving”*

In this study they found that the amount of plaque in the arterial blood vessels increased. That is not a good thing but that did not mean that there were more heart attacks or strokes in the testosterone group. There has never been any proof that testosterone supplementation causes heart attacks or strokes.

They did NOT find that testosterone supplementation improved memory or problem solving. So no improvement in cognitive skills was found.

Considerable controversy exists whether testosterone supplementation provides any benefit for anything. Measuring the hormone in the bloodstream

itself is difficult because it varies so much throughout the day. There are certainly males that have below-normal levels who feel just fine. To them, any small risk of cardiac events or effects on the prostate gland are not worth it. Brand name testosterone products can cost upwards of \$500 per month so it would be nice if there was better data.

## PRESCRIPTION MONITORING

Prescription drug abuse is a BIG problem. It is the leading cause of drug deaths in the United States. As doctors, we have all kinds of people monitoring us when it comes to narcotic prescribing. The problem is that there are a subset of providers out there that write large quantities with no heed to the consequences. Part of this comes from patient pressure, part results from the subjective nature of pain. There is no "measure" for pain and different folks have different thresholds. As narcotics get harder to come by



via prescriptions, that drives people addicted to move to heroine or street pills. We have a very useful tool called a Prescription Monitoring Program (PMP). Anyone who gets a narcotic or certain types of nerve pills filled at a pharmacy, that pharmacy has to report it to a database. The physicians can search

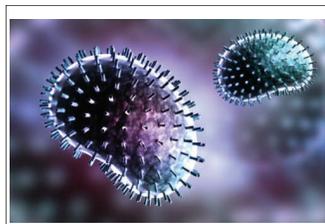
that database to see if the patient is being prescribe the same medications elsewhere without their knowledge. This is known as "doctor shopping." We must check the database before initiating a narcotic in someone to see if they are getting it elsewhere. Of course this cannot tell us what meds a patient is getting from a friend (illegal) or off the street (illegal), but it at least gives us a start. Narcotics as a method of pain control is controversial, but they clearly have a legitimate use. We just have to be vigilant.

*"we must check the database before initiating a narcotic"*

## FLU VACCINE REPORT CARD

So how did we do? We guessed about half-right or half wrong. 50% is not a bad number. It about matches the effectiveness for other years. The vaccine was about 43% effective against the influenza A viruses and about 73% effective against the influenza B viruses.

Some areas of the country actually saw increase in flu



activity well into February. There is usually a dramatic decline for this month. It is calculated that the vaccine prevented over 5 million

cases of influenza, 2.7 million flu-related visits and over 61,000 flu-related hospitalizations.

The vaccine gang is working right now concocting the vaccine for the 2017-18 season as they try to predict what strains will be most prevalent at the end of this year. Good luck to them. Such a valuable effort. Plan to get the vaccine in the fall.

*The vaccine was about 43% effective against the influenza A viruses and about 73% effective against the influenza B viruses.*

## TREATMENT OF ALCOHOLISM

If a male drinks more than two units of alcohol per day or a female drinks more than one unit per day, they are "at risk" for an alcohol abuse disorder. The difference is because of different rates of metabolizing alcohol. Intervention to help consists of counseling, physician intervention and "12 Step"

groups. There are actually medications that can help. Those are naltrexone and acamprosate (Campral). Antabuse was at one time the only agent but has fallen from use. There are a few other common medications (gabapentin, ondansetron, topiramate) that show promise but they are still in trials. So if you or someone you

know has an alcohol problem, it needs to be addressed. It is a major cause of liver failure and severely disrupts lives and families. Have them go to their doctors first so they can be checked for liver conditions. We don't judge people with alcohol problems as weak or drunks but do want to help them abstain.

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*An Invitation:  
If you know of a friend or family member that would be interested in becoming a member, please have them contact us for a free non-medical meet-and-greet visit.*



A  
Direct Primary Care  
Practice  
Newsletter  
written and published  
by Karl N. Hanson, MD  
Previous Newsletters  
[www.InfinityHealth.MD/documents](http://www.InfinityHealth.MD/documents)

*Infinity Health is a Direct Primary Care practice developed by Dr. Hanson. Dr. Hanson has been in medical practice since 1987 and has been a solo practitioner since 1990 in the conventional insurance-based model.*

*The concept of dealing or contracting directly with the patient is a bit of a throwback but it places the relationship where it should be, with the patient. There is no point in Dr. Hanson or our office wasting time interacting with insurance companies unless it directly contributes to your health. Instead we developed a medical home which has its focus on the patient's health regardless of their insurance status. Infinity Health is a product of Dr. Hanson and is not affiliated with any other organization. We are a membership-based practice. Direct Primary Care is not the same as typical "Concierge" practices which charge a fee AND bill your insurance company.*

*Dr. Hanson is Board Certified by the American Board of Family Medicine, a Fellow in the American Academy of Family Physicians and a member of the Alpha Omega Alpha Medical Honor Society. He completed his recertification process in April 2016.*

## USPSTF CORNER: OVARIAN CANCER

Ovarian cancer carries a high rate of severe illness and death. It often develops and spreads for years before it causes symptoms in ladies. Since it is so devastating, it seems that looking for ovarian cancer in a person who feels fine (screening) is worthwhile. How would you screen for it? Three methods are often touted. The first is the examination of the patient during a typical gynecologic visit where the doctor feels for the internal structures. Maybe an enlarged ovary will be detected. The second method is an annual ultrasound to look at the size of the ovaries. The third is with a blood test, the CA-125 antigen test. This chemical often gets very high in the bloodstream



when ovarian cancer is present and is used to monitor the treatment of ovarian cancer. Unfortunately, no screenings exist that have shown to be effective. They have either been unreliable or there is the probability that the cancer has already spread even when it is detected early. Beyond the scope of this article, screening MAY be effective in individuals with a strong family history of ovarian cancer or in those who have certain genetic markers that increase the risk of several certain

types of cancers. So if a female has a mom or sister with cancer of the ovary, colon, breast, uterus or pancreas, PLEASE let your doctor know. Some typical symptoms of ovarian cancer are bloating, pain, changes in bowel or bladder function. Unfortunately, we don't have a reliable method yet to advise women on how to check for it before it causes symptoms or has spread.

*The U. S. Preventive Services Task Force (USPSTF) is an expert panel which reviews the current evidence to help us docs recommend counseling, medical screenings and preventive medications. It is funded by the U.S. Department of Health and Hu-*