

MIDDLE-AGED SPREAD AND WHAT TO DO ABOUT IT

We tend to think that as we age, gaining some weight around the middle is just a part of normal aging, however; we now know that as our waistlines grow, so do our health risks. Cardiovascular disease (CVD) related events, such as myocardial infarction (MI) and stroke, are the leading causes of global death every year. The World Health Organization estimated that there were approximately 17.5 million deaths from CVD-related events in 2012.¹ This figure is predicted to rise to 23.3 million by 2030 due to the global increase in obesity and diabetes, and the incorporation of a westernized lifestyle in developing countries. Atherosclerosis is the major underlying cause of CVD, emphasizing the need to develop novel approaches to support disease prevention.¹

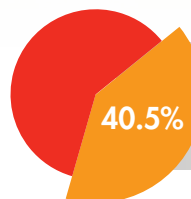
There are two types of fat: visceral (padding the abdominal organs) or subcutaneous (under the skin).

- Visceral fat accumulates deep within the abdominal cavity. It fills in the spaces between our abdominal organs. It is linked to metabolic disturbances including an increased risk for cardiovascular disease and type 2 diabetes. In women, it is also associated with breast cancer and the need for gallbladder surgery. Visceral fat is of particular concern because it's a key player in a variety of health problems.
- Subcutaneous fat lies below the surface of the skin and is the kind you can pinch or grasp with your hand. It is easier to lose this type of fat than visceral fat and it is not as dangerous to health.

ARE YOU PEAR-SHAPED OR APPLE-SHAPED?

Fat accumulated in the lower body (the pear shape) is subcutaneous, as it lays directly under the skin. Fat in the abdominal area (the apple shape) is largely visceral (between the abdominal organs). Where fat ends up is influenced by several factors, including heredity and hormones. As the evidence against abdominal fat mounts, researchers and clinicians are trying to measure it, correlate it with health risks, and monitor changes that occur with age and overall weight gain or loss.

The good news is that visceral fat yields fairly easily to exercise and diet, with benefits ranging from lower blood pressure to more favorable cholesterol levels. Subcutaneous fat located at the waist — the stuff you can pinch — can be frustratingly difficult to budge, but in normal-weight people, it's generally not considered as much of a health threat as visceral fat.



40.5% of the US population is projected to have some form of cardiovascular disease (CVD) by 2030³

Roughly 8 in 10 Americans have an inadequate omega-3 status²



LIFE PHARM®
because life is precious

FAT CELLS ARE BIOLOGICALLY ACTIVE

Research has found that abdominal fat cells are like an endocrine gland or organ, producing hormones and other substances that can profoundly affect our health. Although scientists are still deciphering the roles of individual hormones, it's becoming clear that excess body fat, especially visceral (abdominal) fat, disrupts the normal balance and functioning of these hormones.

Scientists are also learning that visceral fat pumps out immune system chemicals called cytokines that can increase the risk of cardiovascular disease. These and other biochemicals are thought to have deleterious effects on cells' sensitivity to insulin, blood pressure, and blood clotting. Visceral fat is directly linked with higher total cholesterol and LDL (bad) cholesterol, lower HDL (good) cholesterol, and insulin resistance.

Insulin resistance means that your body's muscle and liver cells don't respond adequately to normal levels of insulin, the hormone that carries glucose into the body's cells. Glucose levels in the blood rise, heightening the risk for diabetes.

HELP MINIMIZE CARDIOVASCULAR AND ABNORMAL BLOOD SUGAR RISKS

You can take measures to stay healthy.

- Exercise daily for 30 to 60 minutes. Walk or perform some kind of activity—swimming, biking, raking leaves, climbing stairs, etc.
- Watch what you eat. Cut down on sugars, processed carbohydrates and sweets.
- Eat vegetables, lean meats, nuts, fruits, salads and soups.
- Cut out sugary beverages and salty snacks.
- Reduce stress—relax, meditate, take naps when possible.

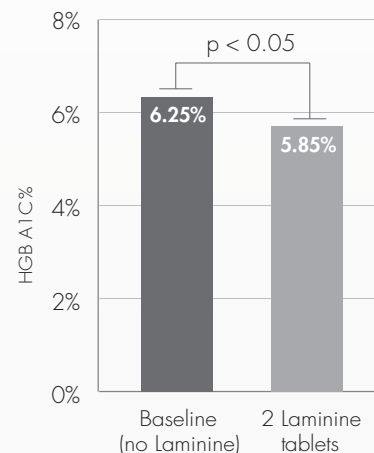
Some of us may not be able to maintain optimal weight as we age but there are some proactive steps we can take along the way. As we work on lifestyle management to help maintain a healthier waistline, we can take LifePharm supplements that help with the side effects of belly fat: Laminine® and OMEGA+++.

***Omega-3 Global Zone of Consensus:
Minimum 250mg/day EPA + DHA or
at least 2 servings/week oily fish.¹***



Take Laminine daily. A 12-week study showed that people with slightly elevated normal glucose levels improved to healthier levels when taking one Laminine in the morning and one in the evening.

Participants with slightly high blood sugar within the normal range took two Laminine capsules twice daily for 12 weeks showed statistical significance in blood sugar down-regulation (n=4)



[Learn more](#)



Taking Laminine daily has also been shown to reduce the stress hormone Cortisol. Cortisol is responsible for stress responses in the body which can increase fat storage. Higher than normal levels of cortisol are associated with metabolic syndrome.

Take OMEGA+++ daily, as studies continuously show that omega-3s (EPA and DHA) help lower cardiovascular risk factors.¹ Omega also contains vitamin K2, which has shown to be deficient in many populations. This is the unique vitamin that supports clearing out the blood vessels and helping to prevent plaque buildup for better heart circulation and lower risk of heart problems.

Learn more about the benefits of

Laminine

OMEGA+++

These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.

REFERENCES

1. Joe W. E. Moss, Thomas S. Davies, Iveta Garaiova, Sue F. Plummer, Daryn R. Michael, and Dipak P. Ramji. Manuel Portero-Otin, Editor. A Unique Combination of Nutritionally Active Ingredients Can Prevent Several Key Processes Associated with Atherosclerosis *In Vitro*. PLoS One. 2016; 11(3): e0151057.
2. Mozaffarian D and Wu, J, 2011, *J Am Coll Card*, 58(20):2047.
3. Murphy R, et al, 2015, *Nutrients*, 7:10282. AHA Policy Statement, *Circulation*. 2011;123:933