

## Vitamins in the News--Why You Don't Get the Full Story

*"Big study finds no clear benefits of calcium pills." "Supplements fail to stop arthritis pain, study says." "Evidence for omega-3 fats less conclusive than we thought, say experts."*

I'm sure you have seen these or similar headlines. Every time a report declaring that a widely used and commonly heralded nutritional supplement doesn't work hits the press—and they hit like clockwork—our phones light up with calls from concerned patients and subscribers. I don't blame them. With so much conflicting information out there, who should you believe?

What is the significance of these negative reports? And, if they're not accurate, why do they get so much media attention? Here are four reasons why.

1. **Bad news sells.** When a policeman uses force, necessary or otherwise, it makes the 6 o'clock news. But you never hear of the tens of thousands of times the police department peacefully interacts with the public.

The same concept is true for supplements. Let's look at the study that reviewed the role calcium and vitamin D play on fracture risk as an example. Virtually all physicians, alternative and conventional alike, accept the fact that calcium and vitamin D supplements strengthen the bones and protect against fractures. So a news story that challenges this—"Big study finds no clear benefits of calcium pills"—is very compelling. Yet, if you actually read this study, you'll find that it didn't reach that conclusion at all.

Even a superficial reading of the first page states, "Among healthy postmenopausal women, calcium with vitamin D supplementation resulted in a small but significant improvement in hip bone density...." It does say that these supplements "did not significantly reduce hip fracture," but if you read the entire study, you'll find that the women who actually took their supplements also had 29 percent fewer hip fractures.

Believe it or not, approximately 40 percent of the women in the calcium/vitamin D group failed to take their supplements, while those in the placebo arm were allowed to take supplements containing calcium, vitamin D, and other bone-building nutrients!

What should have made headlines is that the prestigious *New England Journal of Medicine* allowed such a shoddy study to be published in the first place. Now that's bad news.

**The truth is, calcium and vitamin D supplements do strengthen bones and protect against fractures. Continue to take them.**

2. **Reporters don't always get it right.** Either they don't do their homework, or their personal bias is so overpowering it seeps into their reporting. And this isn't just limited to articles about nutritional supplements.

Let's look at another study in the *New England Journal of Medicine*, this one on glucosamine and chondroitin for arthritis of the knee. When a news report of this study popped up in *The New York Times* the headline read, "2 top-selling arthritis drugs found to be ineffective." Wait a minute. These are nutritional supplements, not

drugs. The paper quickly corrected this mistake and renamed the article “Supplements fail to stop arthritis pain, study says.”

But it gets worse. While this article blatantly states that glucosamine and chondroitin had no effect, according to the study itself, the combination of the two supplements actually caused an approximate 25 percent improvement in pain.

This duo also worked better than the drug Celebrex, which was given to some study participants, although this too got scrambled in many of the news reports. The authors themselves admitted that this study had a number of limitations. One was a very high rate of placebo response (60.1 percent)—double the normal placebo effect—which masks the effects of the treatment. They also noted problems with the measures used to identify improvements. But this didn’t stop the media from reporting that these supplements don’t work.

**Bottom line? Glucosamine and chondroitin do improve arthritis pain. Continue to use them.**

3. **There are conflicts of interest in reporting about medical studies.** After all, drug companies spend more than \$4 billion every year hyping their wares in TV, newspaper, magazine, radio, and Internet advertisements. The PR machine that fuels this outreach routinely sends out press releases extolling the benefits of their drugs, and the media dutifully reports them.

Even more ominous is the very real concern in the academic research community about financial conflicts of interest and how they may taint clinical trial results. If a researcher is on the payroll of a drug company (that information must be disclosed), he or she may be less than objective about interpreting or reporting study outcomes—there are scores of examples of squelching, misinterpreting, or otherwise “spinning” negative studies.

4. **Failure to look at the big picture is another common reason for negative reporting.** Often, one negative study on a nutrient is reported without mentioning the larger body of positive research—as if a single study negates hundreds of others.

“Evidence for omega-3 fats less conclusive than we thought, say experts,” is just such an example. Reports in a review study in the *British Medical Journal* questioned the value of fish oil, concluding that “...omega 3 fats do not have a clear effect on total mortality, combined cardiovascular events, or cancer.” This is pure nonsense. Had reporters looked at the hundreds of other studies supporting the benefits of fish oil, they just might have put this one in perspective.

**Fish oil is an excellent therapy for heart disease, inflammatory conditions, arthritis, high triglycerides, depression, ADHD, and other health concerns, including some types of cancer. Continue to take it.**

### **What You Can Do**

Understand that you can’t believe everything you read when there’s so much shoddy research, misinterpretation, and media bias out there. Other questions you should consider when attempting to determine whether or not study results are valid include dosage and forms of the nutrients in question. What dosage of each nutrient were the study participants taking? Was it a therapeutic amount, similar to the dosages in the products I formulate? Were the nutrients natural or synthetic? (For some nutrients, this is an important

consideration.)

My responsibility to you is to not only tell you about breakthroughs in nutritional medicine, but also help you sort out the valid research and news reports from the invalid. Your responsibility to yourself and your family is to use this information—and all of the information at your disposal—to take charge of your health. Here's to your health,

**Julian Whitaker, MD**