

## Caution: More Smoking Dangers Ahead

If you thought the only dangers of smoking were chronic obstructive pulmonary disease (COPD), emphysema and lung cancer, think again. New studies now link the expensive (financially and health-wise) habit with new concerns.

One recent paper, "Smoking History and Cognitive Function in Middle Age From the Whitehall II Study," appeared in the June 9 *Archives of Internal Medicine*. Head investigator, Séverine Sabia, MSc—from the Institut National de la Santé et de la Recherche Médicale in Villejuif, France—looked at recent discussions linking smoking with dementia, considered related through the effect smoking has on vascular disease.

Since examining older individuals is difficult (no follow-up, misdiagnosis, premature mortality), the research team's focus was to explore the smoking-cognitive function association before the onset of dementia. Also factored were that increasing evidence exists suggesting "the importance of midlife risk factors for later dementia" and that "the link between cognitive decline and later-life dementia is established."

### CeneGenics Opens Two More Centers

CeneGenics Medical Institute announces the opening of two new centers, as part of its ongoing 2008-2009 expansion. Please click on the links below to learn more about the centers and the expert age management medicine physicians heading them:

[CeneGenics Opens Center in Dallas/Fort Worth Area](#)

[CeneGenics Announces New Indiana Medical Center](#)

Sabia's research team felt it important to "examine if the risk of cognitive impairment in smokers is also present in midlife," which would confirm that smoking is involved in the "pathogenesis of preclinical cognitive deficit and decline."

They investigated the association between the tobacco consumption history (smoking status and pack-years of smoking) and the multiple domains of cognition in middle-aged individuals. Investigators also examined associations "with cognitive performance and change in cognitive function during 5 years in analyses adjusted for the effects of socioeconomic status, health behaviors, and a range of health indicators."

**Methods.** Per the published research, the Whitehall II study had 10,308 participants, aged 35-55 (at baseline, phase 1, 1985-1988). Assessments were made on smoking history at both phase 1 and phase 5 (1997-1999). Among the group, 25% were light smokers ( $\leq 5$  cigarettes per day) and 25% were heavy smokers (1-2 packs per day). Smokers had an average of 14 cigarettes daily; only 27 participants smoked over two packs a day.

Cognitive data (memory, reasoning, vocabulary and semantic/phonemic fluency) were available for 5,388 study subjects at phase 5—when participants were 45-68 years old/mean age 55.5. Of those, 4,659 were retested 5 years later for phase 7, when study subjects were 50-74 years old/mean age 61.

**Findings and more research.** These are the significant results, per the study.

- Smoking was associated with greater risk of poor memory.
- After adjustments at phase 5, smokers had a 37% higher risk for cognitive decline.
- Long-term ex-smokers (stopped prior to study) demonstrated a 30% lower risk for poor cognition (vocabulary decline and reduced verbal fluency)—possibly due to health behavior improvements.
- Positive midlife health changes (better nutrition, exercise, alcohol consumption, etc.) and smoking cessation were linked.
- Middle-aged smokers are more likely to be lost to follow-up by death or through nonparticipation in cognitive tests. Therefore, the smoking-decline cognition link could be undervalued.

Other research for your consideration . . .

- Additional research indicates that mild cognitive decline continues at an accelerated rate to clinically diagnosed dementia.
- A 2007 meta-analysis of 19 studies of over 26,000 elderly (mean age 74) demonstrated that current smoking increased risk for dementia and cognitive decline by 40%-80%, depending upon measure employed.
- A ten-year study of over 3,600 Australians demonstrated a four-fold increased risk of age-related macular degeneration compared to non-smokers.
- A June 2008 study showed that smokers have higher all-cause mortality, equivalent to a non-smoker 5-10 years older.

**continued on page 2**

**Gaining weight.** One objection smokers often give for not quitting is weight gain. That may be true for light smokers (less than one pack per day), but heavy smokers (greater than one pack per day) tend to have other associated bad health habits, such as weighing more and having an increased risk for metabolic syndrome and diabetes. The bottom line: Smoking shows no benefits on any level.

**Optimized health with Cenegenics.** Smoking is counterproductive to healthy aging. You don't have to settle for a lower-quality life in your middle or golden years. You can stay active, alert, lean and healthy with established protocols, shown to improve cognitive function and physical/sexual energy as well as enhance libido and body composition (lean muscle mass, reduced body fat), strengthen your immune system and ability to manage stress.

Our 15, 000 patients are proof that good health is in your control. In fact, some have found it easier to quit while on our health program, like this patient who writes . . .

*Within a few days after the evaluation day and prescribed changes in my food habits, my body began feeling lighter, my mind clearer than ever before and my retention improved in great measure. All of these have added new dimensions to my work and life. Unbelievably, I'm like a new person and I don't have the extreme cravings for smoking, and I have an entirely new frame of mind. These results impressed me enough to take the time to write this. Thanks to you and your staff for this new world of mine. —S.M., Las Vegas, NV*



### Instilling Medical Excellence

On July 2, 2008, Cenegenics welcomed Ms. Hayat Jaywadi—the first Touro medical student to rotate through our age management medicine facility for one month as part of her clinical training.

Cenegenics is affiliated with three medical schools via its nonprofit Cenegenics Education and Research Foundation (CERF), established for ongoing research and affiliation expansion: University of Nevada School of Medicine (Las Vegas, NV), Drs. Enrique Ginzburg and Nancy Klimas at the University of Miami - Miller School of Medicine (Miami, FL) and now Touro University – College of Osteopathic Medicine (Henderson, NV).

Dr. Jeffry Life, CMO of Cenegenics Las Vegas, has been working with medical students at Touro University, introducing the medical and business aspects of age management medicine.

Cenegenics wishes Ms. Jaywadi much success on her educational journey toward a rewarding medical career.

Cenegenics uses solid science, thorough diagnostics and well-established protocols to help you live well longer. It's the science of age management medicine that lets us identify and meet criteria, which places you in the lowest possible risk category for disease and extends your health span.

We customize a synergistic program to meet your health goals and successfully manage your aging process—a program centered on exercise, low-glycemic nutrition, nutraceutical supplementation and hormone optimization (when clinically indicated).

**Change your life—and your future health.** Discover medical excellence with personalized Cenegenics programs and the science behind age management medicine.

**Learn more about healthy aging today.  
Call 866.953.1510.**

**Discussions are always confidential and without obligation.**