YOU CAN KEEP YOUR HEALTH TOO

WHAT THE MEDICAL PROFESSION DOESN'T WANT YOU TO KNOW

THOMAS EDWARDS

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Introduction

My name is Thomas. I was born in Australia, and I am currently 65 years of age. I grew up in a middle-class family, my parents having originated from Europe. We lived on a standard Western diet with somewhat of a European emphasis. Lots of meat, fish, eggs, and the occasional take-away meal or two.

Both my parents had health issues as far back as I could remember. They had been medicated for high cholesterol and blood pressure. They both smoked, but eventually gave up when my father had a heart attack at age 56.

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My mother worked from home when I was young. My father worked very hard in his own business. He didn't take good care of himself health-wise. He ate too much (he especially loved processed meats and various cheeses). He had been a competitive cyclist in his teenage years but didn't do any regular exercise after that time. From middle age onwards, he was generally pretty stressed due to work and family issues. He was overweight most of his adult life.

The heart attack he suffered at 56 almost ended his life. A few years later, he had a pacemaker implanted in his chest to counter an irregular heartbeat.

After the heart attack, he somewhat moderated his diet but still ate basically the same food (just smaller portions). But, as mentioned, he did stop smoking immediately after his heart attack. He also drastically reduced his work hours. At the age of 68, having basically retired, he was diagnosed with bowel cancer. He had major surgery, from which, again, he barely survived.

Then, a year later, on his 69th birthday, he suffered a major stroke. After many months of hospitalization, he eventually came home and, with intense rehabilitation, was able to walk with the aid of a walking stick or a walking frame. But then, a few months later, it was discovered that the cancer had returned. It had found its way to his liver. He passed away before he reached 70 years of age. My mother, on the other hand, was much more resilient. Apart from a cancerous lesion picked up on a routine mammogram in her 70's, which required minor surgery and follow-up medication for several years, she lived until 94.

Unfortunately, she developed Alzheimer's disease approximately 3 years before she died.

My mother also ate a typical Western diet and didn't exercise regularly. Meanwhile, my father's brother had already passed away at age 59 from type 2 diabetes.

The point of this story

So why am I sharing this story with you?

I wanted to show you that I have a family history of high blood pressure, elevated cholesterol, cancer, heart disease, stroke, dementia, and possibly diabetes.

It's not a great deck of health cards to be handed, and I'm sure you would agree! Why did they have all these diseases? Maybe my parents inherited bad genes. Or maybe it was due to their lifestyle choices? Who knows?

Growing up, I remember thinking to myself that I needed to take good care of my health in order to have the best opportunity to avoid these diseases.

My Journey

As I transitioned into adulthood, I played lots of sports, never smoked, and never consumed large amounts of alcohol.

I followed the advice of a registered dietician.

I thought I was "doing all the right things," so I will be fine.

But I was wrong.

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At 63 years of age, I was diagnosed with medium-range cardiovascular disease.

I was shattered.

My doctor immediately put me on additional pharmaceutical medications, on top of those I had already been taking for years to control my "family history" of high blood pressure and cholesterol.

Then, as if by complete coincidence (although now I don't believe so), I came home from that depressing news, sat on the sofa in my living room, and turned on the television. I casually flicked through the channels and came across a documentary on how to eat to prevent diseases.

I sat there watching that documentary, thinking to myself, we have all been conned by the very institutions that were created to protect us.

Watching that documentary was the catalyst that inspired me to take action on a personal level to save my own life.

I proceeded to devote myself to researching as much as I could about this topic.

I am going to share with you how I was able to turn a really bad medical prognosis given to me by several doctors, including two heart specialists, into my personal health redemption:

A life free from surgical intervention and the need for a multitude of daily pharmaceutical medications.

I want you to see how a relatively simple plan can statistically add years to your life.

Not only that, though.

There is no point in adding years to your life if you cannot enjoy them in good health.

I am sure, like myself, you would want to spend the rest of your life, however many years that might be, in good health too. Not restricted by health issues.

I want to give you the real possibility of protecting yourself and your family from serious ailments like heart disease, stroke, cancer, and even type 2 diabetes. Well, I am going to show you how I achieved that without any radical and unsustainable lifestyle modifications.

No calorie restriction diets. No sweating in a gym.

Even better, it turned out to be less expensive than my previous lifestyle.

In many cases, like mine, it may well save your life, even if your health is already compromised.

I hope it will inspire you to take control of your own health outcomes.

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Chapter 1

Before I go into the plan I mentioned in the Introduction, I wanted to outline how my lifestyle contributed to my health decline, culminating in my cardiovascular disease diagnosis at age 63.

I think it is important to explain that at no point did I ever go crazy and knowingly start abusing my health.

Just like for most people, it gradually snuck up on me.

As mentioned in my Introduction, I was very fit and played sports regularly until the age of 25. About that time, I started working, having previously attended university. I really enjoyed my work and was busy building my career.

Fortunately for me, I eventually achieved certain work goals. However, in order to do so, I felt I needed to spend less time "working out" and more time just "working.".

I'm sure many of you can relate to that.

As I started to make more money, I ate out more often and at nicer restaurants.

I was still careful not to eat straight-out "junk" food. More like delicious steaks, fish, and Italian food. I also became fond of various Asian cuisines.

By the time I reached 43 years of age, I started to notice my formerly slim, athletic body had turned a little more pear-shaped.

So what did I do? Like most people, I took out a gym membership. Does this sound familiar to you?

At the beginning, I was very enthusiastic. I started taking all the classes on offer. Guess what? I got reasonably fit again. But it cost me a lot of money and a lot of time.

Then I got lazy and out of shape again.

That was a pattern I repeated many times over the next 20 years.

Fast forward to 2021, at which stage I was about to turn 63 years of age.

I contracted COVID-19 at work in October of that year. Thankfully, I had been fully vaccinated and recovered from the symptoms after about 5 days.

However, after 2 months, I started to notice both my blood pressure and resting pulse were consistently higher than before I got COVID-19. My resting blood pressure, which was previously 120/80 mmHg, had become 142/92 mmHg.

I presumed that I was just suffering "long COVID" symptoms.

After a few weeks, having seen no improvement in those numbers, I went to my family doctor in late February 2022. My doctor was

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a very cautious practitioner. She sent me for a battery of tests, including a stress test at a cardiologist clinic. The one where you run on a treadmill while being hooked up to a heart monitor. At this point in my life, my weight had steadily gone from 78kg in 2016 to 98kg in early 2022. That is around 3kg per year.

When I completed the stress test, little did I know the REAL stress was just beginning.

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Chapter 2

The results of the stress test showed something might not be quite right but were still inconclusive. The cardiologist wanted to take a more detailed look at the blood vessels that supply the heart.

I agreed to undergo an angiography of my heart. It's not invasive but requires injecting a dye into the body so that they can image the blood vessels that supply the heart.

It's a painless procedure. But lying on that table while they view your heart and later waiting for them to tell you the condition of your heart was very stressful for me.

It turned out I had significant calcium deposits in three major arteries. The most important one, called the Left Descending Artery (LAD), was estimated to be 50% blocked.

I had Coronary Artery Disease (CAD).

Needless to say, I was shocked.

I immediately thought to myself, "How could this be?" I don't smoke, which is meant to be the biggest contributor to heart and lung disease. I certainly wasn't as fit as before. But I thought I wasn't too out of shape.

I said to myself,

"Well, you have a family history of heart disease, so I guess there was always a possibility this could happen once I got older."

Then I realized I was already 63 years of age, and, as you may remember from the Introduction, my father had suffered a major heart attack at 56, which nearly killed him.

I was worried, and rightly so.

I sought the opinion of two cardiologists. One proposed I take more cholesterol medication and review it in 3 months.

The second opinion recommended an invasive procedure called catheterization, which basically meant threading a tube with a camera into the heart vessels to get a better view.

If necessary, they could insert stents into the vessels to open them up during that procedure.

I asked both cardiologists what happens if I do nothing. Remember, I had no symptoms other than elevated blood pressure and pulse, and I only knew that through testing at home.

Otherwise, like most people, I would not have even known I had CAD.

They both said you could have a heart attack at any time and even die without warning.

How was I supposed to know which opinion was the right decision to take?

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Chapter 3

Once I got home, I started seeking the opinions of other medical professionals I trusted.

Nobody could give me a definitive answer. However, they unanimously agreed with the potential 'death sentence' outcome if I did nothing.

I thought to myself, I am going to do my own research in order to better understand my condition. Hopefully, that would help me decide which course of action to take.

The first thing that struck me, even before I started researching, was that neither doctor really told me WHY I had Coronary Artery Disease (CAD).

That led me to wonder, "How can they cure me if they never even discussed why

I got CAD in the first place?"

After doing even only a little research, I realized NEITHER of those two options had anything to do with CURING my CAD.

At best, they were offering to buy me time. It was as simple as that. Stopping it from getting worse by either medicating me even more, for the rest of my life, to bring down my cholesterol

levels, or opening up my arteries by surgically inserting one or more stents.

From my research, I understood that the basis of the medical and pharmacuetical industries had nothing to do with the prevention or cure of chronic illnesses, like heart disease, cancer, diabetes, and many others.

If you want to live a long, healthy life, you better make sure you don't get sick in the first place.

But how do we achieve that goal? There is no definitive education process associated with the medical profession to do that.

You may remember from the Introduction, after receiving the bad news about the calcium in my coronary arteries, I was flicking through the TV channels later that evening and came across the documentary that changed the way I thought about my personal health.

Watching that documentary made me realize I, like most people, may have been unwittingly contributing to the very diseases I was now trying to combat in my own body.

I remember thinking to myself, "Is it really the food I have been eating all my life?" Well, I decided immediately that, while conducting my research, I would adopt a completely whole food plant-based (WFPB) diet AND take the advice of the cardiologist who recommended I increase my cholesterol medication.

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I thought to myself, let's try lowering the cholesterol quickly using the additional medication. While at the same time starting the process of healing my body with a nutrition-based diet.

The reason I ruled out stenting was because I had no chest pain. My early research had revealed the following:

"Invasive procedures such as bypass surgery and stenting—commonly used to treat blocked arteries—are no better at reducing the risk for heart attack and death in patients with stable ischemic heart disease than medication and lifestyle changes alone. However, such procedures offer better symptom relief and quality of life for some patients with chest pain, according to two new, milestone studies.

The studies, designed to settle a decades-old controversy in cardiology, appear online on March 30 in the New England Journal of Medicine. While researchers released preliminary findings last November at the American Heart Association annual meeting, the papers published today report the official outcomes of the International Study of Comparative Health Effectiveness with Medical and Invasive Approaches (ISCHEMIA), the largest and one of the most consequential studies of its kind."

It was time to implement my plan.

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Chapter 4

After deciding to go WFPB while also taking extra cholesterol medication, I realized that I needed a specific plan of action with a time frame in mind. Otherwise, how else could I monitor my progress?

I read as much as I could about WFPB eating. Remember, this was not going to be a "diet" for a certain time frame. I considered this a permanent change in my life.

Let me start by saying I would have found changing my eating habits to WFPB much more difficult without the support of my wife.

Having someone who not only wanted to adopt the same diet as me (her choice, not mine) but was and still is very creative with food made it much easier for me to transition to WFPB eating.

I would most definitely recommend that, if possible, you try sharing the transition with another like-minded person. It's by no means essential to do so. But it does make it easier.

As for my first benchmark, since the cardiologist wanted to see me 3 months after taking the additional cholesterol medication, I felt that was the right time to review my progress.

The thing that surprised me the most (although, in hindsight, it should not have) was how uninformed the medical profession is about nutrition. I discovered that most medical professionals, including

Specialists had received little or no training in nutrition. Whenever I told them I had taken on WFPB eating, at best, they mostly shrugged it off as irrelevant to my health and well-being.

I distinctly remember an appointment I had with a kidney specialist. She basically scoffed when I told her about my choice of WFPB eating, telling me all the negative things about my choice while at the same time sipping on a can of Cola!

I remember saying to myself, "What am I doing here in her office?" So I got up and left.

I am not opposed to the medical profession. They have a very important role to play in healthcare.

However, gradually, I came to understand that they are trained to treat illnesses after they occur, as opposed to preventing illnesses from happening (or reoccurring) in the first place.

I was looking for the latter approach to tackle my CAD.

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Chapter 5

Here are the results at the beginning and after 12 months of being totally WFPB:

Before I started:

In November 2021 (last blood test before my heart scan in March 2022)

Total cholesterol: 200.2 mg/dL

Total Non HDL Cholesterol: 150.2 mg/dL

Triglycerides: 214 mg/dL

Cholesterol LDL: 107.3 mg/dL

Cholesterol HDL: 50 mg/dL

Glucose: 115 mg/dL

A1C: 6.1%

After 1 month on the WFPB diet and with extra cholesterol medications:

Total cholesterol: 135.8 mg/dL

Total Non HDL Cholesterol: 90.8 mg/dL

Cholesterol LDL: 58.9 mg/dL

Cholesterol HDL: 40 mg/dL

Triglycerides: 185 mg/dL

Glucose: 96 mg/dL

A1C: 6.0%

After a further 3 months

Total cholesterol: 115.6 mg/dL

Cholesterol LDL: 44.5 mg/dL

Cholesterol HDL: 37 mg/dL

Triglycerides: 171 mg/dL

Glucose: 100 mg/dL

A1C: 5.8%

The next step was to redo the tests, after stopping the extra cholesterol medication for six months:

After 12 months (March 2023):

Total cholesterol: 121.4 mg/dL

Cholesterol LDL: 48.6 mg/dL

Cholesterol HDL: 42 mg/dL

Triglycerides: 154 mg/dL

Glucose: 87 mg/dL

A1C: 5.5%

Summary:

After starting a Whole Food Plant Diet (WFPB) in March 2022, one year later, the changes were as follows:

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1. Total cholesterol (down 40%)
   (200.2 reduced to 121.4) mg/dL
2. Non HDL Cholesterol (down 47%)
   (150.2 reduced to 79) mg/dL
3. LDL cholesterol (down 55%)
   (107.3 reduced to 48.6) mg/dL
4. Triglycerides (down 28%)
   (214 reduced to 154) mg/dL
5. Glucose (down 24%)
   (115 reduced to 87 mg/dL)
6. Haemoglobin A1C (down 10%)
   (6.1% reduced to 5.5%)
   Body weight (down 15%)
   (98 reduced to 83)kg
   or
   (216 reduced to 183)lbs

Overall, it was a staggering success.

Those outcomes were achieved without the additional medications the cardiologist prescribed after the angiography 12 months earlier.

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Conclusion

What were the implications of what I had been able to achieve, primarily by changing what I ate?

Every blood marker showed significant improvement over the twelve-month period.

However, the most surprising aspect was that the improvement was huge after only ONE MONTH of being on a WFPB diet.

That result, after only one month, encouraged me to continue. I stopped thinking about what I was eating as being a "diet."

I also started wondering: Would this work for other people too?

In answering that question, I feel it's important to talk about the process of changing to eating only WFPB foods. It meant adapting to eliminating several food groups that I had previously loved eating all my life.

Before changing to only WFPB foods, as mentioned earlier, I thought my overall diet was pretty healthy. It had been devised by a registered dietician.

Poached eggs, lean, unprocessed meat, potatoes, salads, and grilled fish. Very occasionally, I would have pasta or a pizza as a treat.

There was almost no alcohol or desserts.

Even with that dietician's so-called "healthy" diet, my "bad" cholesterol, blood pressure, and blood sugar levels were way too high.

More importantly, I had developed significant Coronary Artery Disease (CAD) without even knowing it.

So, what was it like to completely change what I ate virtually overnight? Actually, it was surprisingly easy for me.

After only three weeks, I had lost any cravings I had for meat, fish, eggs, and dairy, with the exception of chocolate. I simply switched to non-dairy chocolate, of which there are many delicious options.

I did some research and found that our taste buds actually adapt after two to three weeks of changing what we eat. That is why I didn't crave what I had stopped eating all my life in less than a month.

Again, that is how it was for me.

Of course, everyone's journey is unique to them.

I have read about people who successfully changed to plant-based foods by gradually incorporating them into their diets.

If that worked for them, that's great. My only reservation with that approach is that it will most likely take much longer for your taste buds to change. Therefore, the cravings might still be there during that process, which makes it harder to resist falling back into previous eating habits.

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What about exercise?

You may have noticed that I haven't really discussed what role, if any, exercise played in achieving those outcomes.

I think it is important to acknowledge that reaching desired health goals requires focusing on more than one aspect of a person's life.

For me, having been a good athlete up until my mid-twenties, I felt it was important to incorporate some form of regular exercise into my life. The question is: what type of exercise and how much do you need to do?

What I decided to do was incorporate walking into my weekly routine. I started slowly, and over a period of months, I was able to walk 10 kilometers (6 miles) a day at a brisk pace without feeling tired.

I eventually incorporated doing that on dry sand at the beach, which made it even harder.

The reason(s) I chose that form of exercise were twofold:

1. Being 64 years of age, I wanted to do something low-impact that would protect my joints for the long term.
2. I felt confident I would keep that going, mainly because I didn't need to commit to being somewhere like a gym. I could do it whenever it suited me.

As a result, my resting blood pressure became 115/75mm/Hg, which was of significant benefit for my heart health too.

Personally speaking, I think almost any form of regular exercise can be very beneficial for long-term health.

I wanted to tell the world.

Interestingly, when I first started noticing the positive impact on my blood test results, weight loss, blood pressure readings, and increased energy levels, I wanted to tell everyone about it.

I wanted them to benefit too.

What I quickly realized was that most people don't want somebody preaching to them on how to live their lives.

So now what I say to you, as a reader of my journey here, is the following:

If you would like to know more about how to change your health for the better simply by changing how and what you eat, follow me on my YouTube channel, Instagram page, or podcasts.

Or feel free to email me:

tomed1924@gmail.com

Good health to you too

Thomas Edwards