THIS WEEK'S TOPIC



## Try EFAs For Dry Skin

IT'S TIME TO FEEL GOOD AGAIN

"If a small amount of friction causes skin to slough off, it is a classic sign of an essential fatty acid deficiency."

Here's a simple approach to help patients with "Dry Skin." But first, let's think about "the presentation." Imagine a typical office visit, you have just rubbed the patient's arm, and you see a blizzard of wintered dry skin. Here's a way to present your findings that may open up a whole range of wellness services for your clients.

"Mrs. Jones, I see a lot of dry skin as I rub your arm. If a small amount of friction causes skin to slough off, it is a classic sign of an essential fatty acid deficiency. How important are essential fatty acids? For one thing essential fatty acid are essential for life. Our bodies can't make them. Every one of our 100 trillion cells has a bilipid layer called the cell membrane. Some researchers are calling the cell membrane the intelligence of the cells because it protects and supports the life of the cell. Essential fatty acids help to keep that membrane soft and permeable, meaning healthy nutrients can get into the cells and toxins can leave. You may not realize it, but beyond cell membranes, EFAs are needed for



Free 10-Second EFA Test

With Every Patient

hormones, immune function, gut health, pain and inflammation reduction, blood sugar stabilization as well as healthy heart and blood vessel function. Essential fatty acids and particularly fish oil are the number one class of antiaging supplements. Mrs. Jones, let's try supplementing essential fatty acids for 90 days, and we'll see how you do."

Well, you can take it from here as you articulate the value of essential fatty acids directly to each patient's condition. Sometimes we forget that if patients don't understand, they won't stay on the nutrients long term. It takes time to build cellular reserves.



Remember, cellular reserves are built when the symptoms have disappeared.

When you brush their skin and see the dry skin blizzard, it's a valuable indicator and one we need to communicate clearly. So how do we treat "dry skin" clinically? Obviously, the first thing we want to address is hydration. Is the patient drinking 8 glasses of pure water a day? Next, add essential fatty acids. Some oils on the market are rancid. That's why I always recommend oils by Biotics Research because they test for rancidity before and after production.

Start with a teaspoon of Biomega-3 Liquid twice a day with meals, which supplies 5 grams of EPA and DHA. You can take it by the spoonful or add it to salads or in protein shakes.

My brother Jerold was taking fish oil, but when the winter temperatures caused him to experience dry and cracked fingers, he increased the dose to 5 grams of Biomega-3 Liquid on his salads. In 2 weeks, the cracks were gone. Once he reached sufficiency, he cut back to his normal daily dose.

A friend mentioned how he was addicted to lip balm every single winter for as long as he could remember. He started taking Optimal EFAs regularly. Two years later, on a wintry day, he observed someone applying lip balm. He thought to himself, "I don't buy that stuff anymore because my lips are NEVER chapped." Speaking of Optimal EFAs, see the link to a discussion on "Combination Fatty Acid Therapy" that I think you would enjoy. Too much of any oil even EPA or DHA will displace other oils like omega 9 oils. We need to be in balance.

Next, make sure you instruct patients to stop hydrogenated processed seed oils like corn, safflower, sunflower, canola, cotton seed, grapeseed, rice bran, and soy oil. These oils are high in omega 6 and cause inflammation when used in excess. As you know, historically the best ratio of omega 6 to omega 3 oils is 4:1 or less. Researchers share that the average American ratio is 15:1 and frequently higher when inflammation and pain are part of the clinical picture. So... "by increasing omega 3 oils and reducing omega 6 oils, you are reducing systemic inflammation and supporting cell membranes."

Of course, your patients may also add coconut, walnut seed, apricot seed, or sesame seed oil topically instead of processed skin lotions. Because everything we put on our skin will be absorbed internally. My personal rule for anything topical is that if I am not willing to eat something, I won't put it on my skin. If dry skin is still an issue, consider supplementing orally with iodine, zinc, as well as vitamins D and vitamin A. Make sure you also pay attention to liver and gall bladder function. Obviously, it won't do any good to take the oils if they are not being digested and emulsified. A simple check for dry skin during office visits can be a great opportunity to start a conversation about wellness especially if they have existing pain and inflammation.

Thanks for taking time to be with me, I look forward to being with you again next Tuesday.