



## [Flu-like illness - Calling your own shots](#)

The pinnacle of the flu season is upon us in the United States.

I recall vividly a couple of years ago when my body suddenly erupted into the explosive symptoms of the flu. I felt as a milk carton must feel being knocked down and repeatedly run over by the wheels of a large truck, contents gushing in every direction. I spent a long, miserable night in the bathroom on that occasion, and the next day sleeping fitfully in bed.

Each year, an estimated 10 to 15 percent of our population comes down with the wickedly uncomfortable but seldom fatal symptoms of influenza-like illness. However, only a tiny fraction of all this suffering has anything to do with actual influenza virus. The remaining 85-90 percent is caused by something else.

According to the Centers for Disease Control (CDC), 8 percent of suspected influenza specimens for the 2007-2008 season have so far tested positive for [influenza](#), as listed on the CDC flu website (week 5). That means the vast majority of tested cases, 92 percent of the total, have all been non-influenza flu. This is a fairly typical number, an average flu season finds only about 10 percent of influenza-like illness having any relation to influenza virus.

Which brings up an important question about the annual [flu](#) wars waged by our health leaders: What is the nature of the enemy we are fighting? What do we mean when we say "the flu"? As every soldier knows, to win a war, you need to know who (or what) the enemy is that you are fighting.

Year after year the generals in charge of the flu wars seem to always call the same shots, er, [flu shots](#). Now, I am not by any means a military strategist, but I'm wondering if it is possible to win a war by going after only one tenth

of the enemy (influenza) while allowing the other 90 percent (something else) to go unchecked?

But even if we add together all cases of influenza-flu and non-influenza flu, the total threat is miniscule compared to the epidemics of chronic disease we face. No battle plan has yet been produced for [chronic disease](#), nor does it have its own season.

"Currently, modern chronic diseases, including cardiovascular diseases, Type 2 diabetes, metabolic syndrome, and cancer, are the leading killers in Westernized society and are increasing rampantly in developing nations. In fact, obesity, diabetes, and hypertension are now even commonplace in children," wrote Christian K. Roberts, PhD. and R. James Barnard, PhD. in the Journal of Applied Physiology, 2005.

There is, however, a clear solution to the epidemics of chronic disease we face, according to their research, "exercise and diet."

Overwhelming evidence from a variety of sources, including epidemiological, prospective cohort, and intervention studies, links most chronic diseases seen in the world today to physical inactivity and [inappropriate diet](#) consumption.

"It is commonly argued that it is difficult to change the lifestyle of obese and sedentary people, but such pessimism may not be justified. For a successful public health approach to chronic disease prevention, we cannot rely on pharmaceuticals but must implement long-term, sustainable behaviors that encourage [healthy lifestyles](#)," report Roberts and Barnard.

Just by coincidence, the same remedy for chronic disease, a healthy lifestyle, seems to work equally well at preventing a whole range of the "something else" behind seasonal non-influenza flu, the bigger part of influenza-like illness. But as the good doctors point out, this requires facing

the two English words most likely to trigger fear and loathing in the American public, diet and exercise.

Mark Twain wrote, "I am pushing sixty. That is enough exercise for me." American educator Robert Hutchins said, "Whenever I feel like exercise, I lie down until the feeling passes."

Despite our collective reluctance to get up and get in shape, there has never been a better time than right now to get moving. As Albert Einstein noted, "Nothing happens until something moves."

Our bodies need motion to move nutrients to the cells and carry away waste. Oxygen-rich blood reaches all corners of the body under pressure, but requires pumping back to the heart by the action of skeletal muscle. Motion circulates oxygen tired blood through blood vessels, and proteins through the [lymph vessels](#). Everything heads back to the heart to start over.

As for fear of the word diet, "I need to go on a diet" should be replaced with, "I choose to eat delicious, fresh, chemical-free food naturally high in nutrients and fiber." Humorist Kin Hubbard believes it is about control, "The alimentary canal is thirty-two feet long. You control only the first three inches of it. Control it well."

Three universal rules apply here: First, you are what you eat. Second, you aren't what you don't eat. Third, you are what you don't excrete.

"Eating a vegetarian diet, walking (exercising) everyday, and meditating is considered radical. Allowing someone to slice your chest open and graft your leg veins in your heart is considered normal and conservative," observed Dean Ornish, M.D.

Stop worrying if you can't manage a vegetarian diet, you can still begin eating sensibly. Benjamin Franklin outlined the basic problem over two

hundred years ago, "In general, mankind, since the improvement of cookery, eats twice as much as nature requires."

Motion is life. Loss of motion is loss of [vital energy](#). A sedentary body stagnates, and tends to become toxic and inflammatory. A body that moves freely, heals freely. Signing up at the gym is not the answer unless you actually go there. Perhaps you should save your money, buy a couple of hand weights and take long walks back and forth to the gym, or just walk laps around the parking lot there. Even moderate exercise improves health.

The best advice I've read on how we can take control of our own health was this anonymous tip, "The best way to get something done is to begin."