



Dr. Clary has always had special interest in coaching, educating, and speaking about nutrition as well as lifestyle. He has a professional interest and training in both spine care and nutrition (receiving his Bachelor of Science in Applied Nutrition before medical school) and continues a lifelong journey of learning. He is always looking for ways to inspire, grow, and benefit others with even small daily changes.



Anthony Sterk, PA-C

Anthony Sterk is a hardworking, meticulous, and dedicated provider. He is a Physician Assistant and has been working in orthopedic spine specialty the past four years. He has a drive to continue learning new and innovative ways to help patients achieve their goals. His passions include running, hiking outdoors, and spending time with his family.

DIET-WHY YOU NEED CARBS

We are surrounded by fad diets, as you know. In the last week, I've spoken to patients about Jenny Craig (who is 88, by the way), Paleo, and Keto diets. It's hard to create a perfect study on diet since populations and variables are so different. What's also a harsh reality is that the nutritional guidelines most of us see and read, including the food pyramid, are created with vast assumptions about diet and nutrition and less so with hard data. Guidelines made nationally, as you can imagine, are also almost impossible to change once a mindset has been created, so it is not at all a progressive group.

There is a very interesting study done out of LANCET, one of the premier journals in the world, studying the dietary habits of more than 15,000 people over 25 years. The questionnaire evaluated all-cause mortality and looked for total calorie and carbohydrate intake. Basically, they sought to answer this: "Is there an ideal range of carbs within the diet". They found that the group with the lowest mortality ate 50 to 55% carbohydrates in their diet every day. Essentially, if someone ate less than 40% or more than 70% of their diet as carbohydrates, they did not live as long. Mortality decreased even further when carbohydrates were substituted for plant-based diets and increased with animal derived fats or proteins. So in summary, they recommended eating half of your food as carbohydrates and as much plantbased foods beyond that as possible. It's hard to argue weight loss as a good thing, but this 2018 study puts our thinking on its head a little for those on Atkins or Keto ... so much "carbs are the enemy!"

This Issue NOVEMBER-DECEMBER 2020 Why You Need Carbs, Ingredient of the Month, PA Week, Medicine During the Pandemic, Regenerative Medicine

Every year, there is a trend for what to eat and avoid, yet recent research pushes us more and more toward a balanced, plant-based diet.

INGREDIENT OF THE MONTH—PALM OIL

Many of us know that vegetable oils have had a lot of bad publicity lately. Palm oil is made from crushing the fruit of palm trees, 85% of which is generated from Malaysia and Indonesia. It's in close to 50% of packaged foods found in supermarkets (including deodorants and toothpaste!). Notably, it's cheap, making four times more oil per acre than soybeans or coconuts do. Multiple studies I read note some scary findings from its consumption:

- » Mothers who ate certain kinds of palm oil in pregnancy predisposed their offspring to obesity later in life
- » More palm oil consumed per capita led to more heart disease deaths
- » Dietary fat intake of less than 25% of the diet induced a major risk for cancer, no matter the fat used
- » Palm oil is 50% saturated fat
- » Studies showed a factor in thickening blood vessels and increasing plaque when oil was heated

Fundamentally, you need to be conscious of total fats consumed and avoid heating vegetable oils when possible.



Caity DeWitt, DPT

Caity is a physical therapist specializing in spine care and orthopedic injuries. She has a passion for connecting and collaborating with her patients so they can meet their goals and achieve a happier, healthier lifestyle.

She strives to be a lifelong learner and continuously stays up to date on new treatments and techniques so that she can best help her patients.

Dr. Clary's Team

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HAPPY PHYSICIAN ASSISTANT WEEK

October 6 through 12 was PA (Physician Assistant) week, which honors these medical professionals. The idea of PAs has been around for many years, but the profession first got its start back in 1968 at Duke University when the first Physician Assistant program began. It was started as a way to transfer the skills and medical knowledge of military corpsmen into general medical care once veterans returned home from their service. The profession holds strong today with about 140,000 PAs in practice in the US. All PAs attend a two-year master's degree program, which is essentially four years of medical school crammed into a two year time frame! Physician assistants are trained in general medical care or primary care, but approximately 40% end up specializing. PAs are able to diagnose and treat many of the same medical issues that doctors treat. They also assist in surgery and run independent clinics. The PA occupation continues to offset the need for medical providers across the country.

-Anthony Sterk, PA-C

MEDICINE DURING THE PANDEMIC

What a weird year. A tightly contested election, a pandemic shutdown to "flatten the curve," and now case numbers (and testing) are rising to unbelievable rates. Frustratingly for everyone, our favorite activities are quite limited, including travel, seeing family and friends as often as we'd like, and even eating at our favorite restaurant (if it's still open). I heard a local restaurant owner say that, while it's nice to allow 25% occupancy, they don't cover their expenses until 60%! In medicine, even Summit Orthopedics and other strong outpatient, independent groups are constantly evolving. You may know that we are sometimes doing multiple evening clinics every week to keep the waiting rooms appropriately spaced.

Additionally, we can only see a certain number of people given the room constraints. Lastly, Summit provides an excellent OrthoQUICK service, allowing walk-ins to often see a specialist in the field of your complaint the same day. Doing this, though, given the constricted space, sometimes limits access and can increase clinic waiting time, so we appreciate your patience if that affects you. Nurses, coordinators, administrators, and even physicians have been out for weeks over the past months thanks to the virus, and coverage continues to be a major issue, so we are always working to optimize staff. No team has been immune to COVID-19's effects. It will be an interesting few months, both for us as a community and for those in the business of providing excellent medical care in a world of large, slow, disorganized hospital systems. We will get through this together, and it will take both hope and strategic planning.

REGENERATIVE MEDICINE RESULTS

We've had some fantastic results this year with our regenerative medicine cases. Morally, we needed to study whether what we were doing was working in order to justify keeping this as part of our practice. What we found from our anonymous surveys was both validating and exciting.

While we focus primarily on spine regenerative medicine (its use for discogenic back pain being the most common), there really aren't any great modern treatments outside of this therapy. Our outcomes for the past year include:

Were we able to relieve pain in the area we intended to? 89% Yes

How satisfied are you about the process (from learning of this to receiving the therapy)?
89% Very Satisfied

11% Somewhat Satisfied

Exciting results, but more to come!