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## Drs. Oz and Roizen



### The secret of optimal physical functioning? Fast up, slow down

As you age you may slow down – whether it is from obesity, arthritis, declining muscle mass or chronic health problems. But whatever the cause, it’s generally agreed that it is not a good thing. Except ... it turns out that a “slow down” is a great technique when it’s part of a power training routine.

A meta-study in Geriatrics looked at 20 randomized studies to see whether strength training (lifting and lowering weights under control) or power training (lifting weights fast and lowering them slowly with control) is the best way to improve physical function for folks ages 65 plus.

The researchers from the U.S., U.K. and Canada found that if you move the weight as fast as possible in the lifting (contracting) phase and then slowly, with control, lower it as you extend your limb (say, for a count of three), you gain improved physical functioning, and you see improved muscle mass, gait speed and balance that’s equal to what’s achieved with strength training.

This echoes a 2017 study that found that when people with Type 2 diabetes do low-load, high-velocity power training for six weeks, they gain muscle strength, power output and improved physical function.

This form of low-load, high-velocity resistance training can be done using weight machines at the gym, hand weights (keep ‘em light) or even stretchy bands. So if you’re trying to stay strong and agile, it’s time to try the benefits of a slow down-fast up routine. I recommend two to three 30-minute sessions a week.

### Two easy ways to make your knees feel better

When “These Boots Are Made for Walkin’” singer Nancy Sinatra was 74, she had a total knee replacement -- and kept right on walking. Smart move for her other knee. A new study in Arthritis & Rheumatology reveals that for folk age 50-plus with arthritis in their knees, a regular walking routine can ease pain and slow joint damage.

Researchers from Baylor University looked at data from the Osteoarthritis Initiative and found that participants who reported walking for exercise were 40% less likely to experience new instances of frequent knee pain compared to non-walkers.

That’s great news for the 14 million Americans with symptomatic knee osteoarthritis. So is another study presented at this year’s European Alliance of Associations for Rheumatology meeting. It turns out that taking antihistamines can slow down structural damage within the knee.

Tracking 1,485 participants for two years, the researchers divided them into groups that took no antihistamines, those that used them one to 49 days, 50 to 299 days or more than 300 days during that time period. Overall, during those two years, the gap in folks’ knee joint space width became almost three times smaller in folks who didn’t take antihistamines than in those who did. (Smaller means the bones are closer together, unpadded, rubbing, painful.) And the more antihistamines a person took the more damage was prevented. It appears that antihistamines tamp down inflammation in connective tissue that lines the inside of a joint capsule. Clearly worth asking your doc if it makes sense for you to start taking one.

\* \* \*

*Health pioneer Michael Roizen, M.D., is chief wellness officer emeritus at the Cleveland Clinic and author of four No. 1 New York Times bestsellers. His next book is "The Great Age Reboot: Cracking the Longevity Code for a Younger Tomorrow." Do you have a topic Dr. Mike should cover in a future column? If so, please email [questions@GreatAgeReboot.com](mailto:questions@GreatAgeReboot.com).*

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