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On Health

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Consumer Reports in Action

PFAS in Food Packaging

Why CR wants these concerning chemicals out

Since the 1950s, chemical compounds known as per- and polyfluoroalkyl substances (PFAS) have been used to make consumer products-from nonstick pans to carpets-water- and stain-resistant.

PFAS, sometimes called forever chemicals because they don't break down easily, are now ubiqui-

tous. High levels of some may weaken immune system response, hike the risk of certain cancers, decrease fertility, and lead to growth and learning delays in children.

Consumer Reports has been working to get PFAS out of food packaging, where-even though alternatives are available-they're still used for greaseproofing some food wrappers, boxes, and bags. "Since many PFAS are so resistant to breaking down, their presence in food ware means they will leach out in the landfill and enter the environment," says Michael Hansen, PhD, senior scientist at CR. "In addition, the higher consumption of takeout foods as a result of the pandemic may increase the risk of consumer exposure to PFAS."

Last December, New York Gov. Andrew Cuomo signed into law a bill prohibiting PFAS in food pack-

> aging. (Washington state and Maine did this previously.)

> CR advocates applaud the step but say more is needed. "It is urgent that we eliminate the use of these chemicals

wherever possible to reduce our exposure and resulting health risks," Hansen says. In mid-December, on behalf of CR, he urged the Santa Rosa, Calif., city council to add PFAScoated food ware to an ordinance banning polystyrene foam in food packaging. You can find advice on avoiding PFAS in food packaging and elsewhere at CR.org/PFAS.

> This Month's Experts

We contact health authorities and medical researchers from around the world. Here are some of the experts we consulted this month:

Sharon Brangman, MD,

chair, geriatrics, Upstate University Hospital, Syracuse, N.Y.

Chris D'Adamo, PhD,

director, Center for Integrative Medicine, University of Maryland School of Medicine, Baltimore.

Adam Gordon, OD,

clinical associate professor, University of Alabama at Birmingham School of Optometry.

Shelly F. Greenfield, MD,

professor of psychiatry, Harvard Medical School and McLean Hospital, Boston,

Michael Hochman, MD,

internal medicine physician, Keck Medicine of USC, Los Angeles.

Penny Kris-Etherton, PhD, RD, professor, nutritional

sciences, Penn State University, State College.

Timothy Naimi, MD,

director, Canadian Institute for Substance Use Research, Victoria, British Columbia,

Simin Nikbin Meydani,

PhD, lead scientist. nutritional immunology team. Jean Maver USDA Human Nutrition Research Center on Aging, Tufts University, Boston.



Can This Curb Loneliness?

A study found that older adults in group exercise or health classes felt less isolated, even when instruction went virtual during the early days of the COVID-19 pandemic. It tracked 382 people from July 2018 through March 2020 who took classes in tai chi, managing chronic health conditions, and other subjects. They reported a 6.9 percent reduction in loneliness at six months.

Source: American Journal of Geriatric Psychiatry, Oct. 16, 2020, online.

Heart Attacks and Women

Women were 20 percent more likely than men to develop heart failure or die within five years of a heart attack, a study of 45,064 people found. The women were older and had more health problems

also less likely to be seen by a heart specialist in a hospital or receive heart-protective drugs. After a heart attack, it's key to control blood pressure, cholesterol, and diabetes.

Source: Circulation, Dec. 8, 2020.

PHOTOS, FROM TOP: GETTY IMAGES; AARON AMAT/ALAMY STOCK PHOTO; GETTY IMAGES; SHUTTERSTOCK

than the men but were

Know the 5 Signs of Stroke

Almost onethird of older adults don't know the maior stroke sians. and that calling 911 is crucial, a report found. The 5 signs are sudden: numbness or weakness of the face, arm, or leg, especially on one side: confusion or trouble speakina: difficulty seeing; trouble walkina, dizziness, or balance loss; and severe headache.

Source: Morbidity & Mortality Weekly Report, Nov. 6, 2020.

This Food Discourages ED

Men ages 60 and older who ate the most produce, nuts, whole grains, beans, and fish (and limited red and processed meat, and trans fats) were less likely to report erectile dysfunction than those who frequently ate red and processed meats and skimped on the other foods above, according to a recent multiyear study.

Source: JAMA Network Open, Nov. 13, 2020.



Do Multivitamins Help You?

People who take multivitamin supplements were 30 percent more likely than those who didn't to rate their health as excellent, very good, or good, according to a study of 21,603 U.S. adults. But it also found that their rates of health problems, difficulty with daily activities, and psychological distress were no better than those of the other participants. (The study, from a 2012 national health survey, involved 4,933 people who took multivitamins and 16,670 who didn't.) The researchers noted that those who took multivitamins may erroneously think that the supplements improve their health or they may simply have a higher opinion of their own health status.

Source: BMJ Open, Nov. 4, 2020.



Learning to Cut Diabetes Risk

A two-year study found that people with higher than normal blood sugar who dropped about 4 pounds, trimmed their belly fat an inch, and exercised more cut their risk of type 2 diabetes. They took up to 21 healthy lifestyle classes

on topics like weight loss and exercise, while a control group took one class and got written healthy lifestyle info. After the study, 22 percent of the control group had developed diabetes; about 14 percent in the other group did.

Source: JAMA Internal Medicine, Nov. 2, 2020

The Safest Way to Get Your Health Screenings

Expert advice on handling colonoscopies and 5 other important tests right now

ith the coronavirus still in our lives, you may wonder whether it's wise to get health screenings now or postpone them until you're vaccinated against COVID-19. Screenings, after all, are preventive—to detect potential early warning signs of diseases, not to treat a current health problem.

While you want to stay up to date with screenings, "they tend to be less urgent than a test or study that your doctor orders to evaluate a symptom," says Michael Hochman, MD, an internal medicine physician at Keck Medicine of USC in Los Angeles and host of the "Healthy Skeptic, MD" podcast.

You may also be unclear on which screenings you need. Some, like prostate cancer screenings, are not routinely advised for people over a certain age; others, such as lung cancer screenings, are advised only if you have risk factors. Guidelines may also vary from medical association to medical association.

It's best to talk with your doctor about the optimal screening schedule for you. To help, we've asked experts which screenings most older adults should stay on schedule with and which they can consider putting off or skipping.

MAMMOGRAM

WHAT IT IS: This breast X-ray helps detect lumps that may signal cancer.

WHO SHOULD HAVE IT: The American



College of Physicians, which synthesized the advice from several medical organizations, advises a mammogram every other year for women between 50 and 74 at average risk. (Ask your doctor about your risk level.) "While an annual mammogram slightly decreases breast cancer deaths in this age group, it also leads to many more false positive results, breast biopsies, and overtreatment," says Jacqueline Fincher, MD, president of the ACP.

CAN YOU POSTPONE IT? Pushing it off a month or two is fine, but more than six months could do more harm than good, Fincher says.

CAN YOU SKIP IT ALTOGETHER? In general, women 75 and older, or those with a life expectancy of 10 years or less, can stop having these screenings, the ACP says.

COLONOSCOPY

WHAT IT IS: A doctor checks your rectum and colon for polyps (tissue masses). Polyps are usually harmless, but some can become cancerous. Polyps can be removed during colonoscopy.

WHO SHOULD HAVE IT: In general, those ages 45 through 75 at average risk, the

American Cancer Society says. (Ask your doctor about your risk level.)

CAN YOU POSTPONE IT? It's important to have it on time, Hochman says. If you'd prefer, ask your doctor whether you can do a home stool test instead.

CAN YOU SKIP IT ALTOGETHER? At age 76, talk with your doctor. The ACS advises that people between 76 and 85 decide based on personal preferences, life expectancy, health, and screening history. The ACP says people older than 75 at average risk or those with a life expectancy of less than 10 years can stop.

BONE DENSITY SCAN

WHAT IT IS: This X-ray, aka a DEXA scan, determines the strength of your bones. **WHO SHOULD HAVE IT:** The U.S. Preventive Services Task Force (USPSTF) recommends the screening for women 65 and older and postmenopausal women younger than 65 at higher risk for osteoporosis (brittle bones). Men 70 and older may want to talk to their doctors. For normal results, you can wait at least a decade for another screening. For low bone mass (osteopenia), you'll be rescreened every three to five years; for

osteoporosis, every two years.

CAN YOU POSTPONE IT? It's best to have it. "You don't want to find out (about a higher facture risk) by slipping in your driveway and breaking your hip and ending up in the emergency room during the pandemic," says Sharon Brangman, MD, chair of geriatrics at Upstate University Hospital in Syracuse, N.Y.

CAN YOU SKIP IT ALTOGETHER? Yes, if you're younger than 65 with no risk factors.

PAP SMEAR

WHAT IT IS: This exam checks cervical cells for abnormalities that may lead to cancer. **Who should have it:** Generally, women younger than 65 and older women with a history of cervical cancer. The ACS and American College of Obstetricians and Gynecologists advise a Pap test every three years, or a Pap test along with a human papillomavirus test every five years.

CAN YOU POSTPONE IT? It's wisest to have it if you're due or overdue, Fincher says. **CAN YOU SKIP IT ALTOGETHER?** Women without a cervix and those 65 and older who've had three normal Pap tests in a row in the prior 10 years can stop.

BLOOD SUGAR TEST

WHAT IT IS: A fasting glucose test measures your blood sugar (glucose) levels after you've gone without calories for at least 8 hours, and an HbA1c test determines your average blood sugar levels over the prior two or three months.

WHO SHOULD HAVE IT: Adults between ages 40 and 70 who are overweight or obese, the USPSTF says. If results are normal,

the task force says rescreening every three years may be a "reasonable approach." Those with prediabetes or type 2 diabetes will have a different schedule.

CAN YOU POSTPONE IT? With prediabetes or type 2 diabetes, it's key to keep up. Poorly controlled diabetes can make you more vulnerable to COVID-19 complications. Otherwise, it can probably wait.

CAN YOU SKIP IT ALTOGETHER? If you're older than 75, talk with your doctor. "There's no set age to discontinue screening," Brangman says. "It really depends on a person's overall health and life expectancy."

CHOLESTEROL CHECK

WHAT IT IS: This blood test measures levels of LDL (bad) and HDL (good) cholesterol, and triglycerides (fatty acids).

WHO SHOULD HAVE IT: Healthy adults should be screened every four to six years, the American Heart Association says. If you take a cholesterol-lowering statin drug, the AHA and the American College of Cardiology advise screening every three to 12 months.

CAN YOU POSTPONE IT? For a couple of months, but not much more, says Mary Tinetti, MD, a geriatrician at Yale School of Medicine in New Haven, Conn.

CAN YOU SKIP IT ALTOGETHER? If you're older than 75, ask your doctor, Tinetti says. There's less evidence that high cholesterol leads to heart disease at this age.



LEARN

For the lowdown on going out safely during the pandemic, go to CR.org/goingout.

Prepare for a Doctor's Office Visit

Do your homework. Before your appointment, call to ask about safety steps, says Yale School of Medicine's Mary Tinetti, MD. Universal mask use, sanitizing exam rooms between patients, and social distancing practices at check-in and in waiting areas are a must.

Don't touch. Stay at least 6 feet from others in the office, and avoid contact with surfaces such as doorknobs, elevator buttons, and touchpads. If you must touch something, do so with a tissue and wash your hands or use a hand sanitizer afterward.

Skip small talk. It's not the time to be chatty. Come prepared to describe your concerns clearly. If you have multiple concerns or questions you'd like to ask, make a list. This will ensure that the appointment is efficient and thorough.



Do You Need a Yearly Physical?

Though some research suggests that a once-a-year exam offers few benefits for healthy adults younger than 65, it's a must for older adults, says Jacqueline Fincher, MD, president of the American College of Physicians. She says

that most seniors have at least one chronic condition that requires monitoring and that doctors can assess for issues such as fall risk and depression during the appointment. "It also allows older adults to maintain a

rapport and a close connection with their doctor," Fincher says.

If you're due for a physical but trying to minimize doctor's appointments, you can schedule it for after you get the COVID-19 vaccine. In the meantime, you can probably do much of your physical via telehealth, says NYU Langone's Joshua Chodosh, MD. (Share information on home screenings, such as those for blood pressure, with your doctor, too.) But there are limits. "It's hard to check someone's gait and balance over the internet," Chodosh says. If you're not due but haven't seen a doctor since the pandemic hit, it's wise to have a virtual checkin, says USC's Michael Hochman, MD.



n eye exam with an ophthalmologist or optometrist can detect not only vision impairment but also conditions that threaten your sight, including cataracts, glaucoma, diabetic retinopathy, and age-related macular degeneration. These major eye diseases—which are more common in older adults—typically cause few symptoms until they reach an advanced stage.

"At that point they're harder to treat," says Adam Gordon, OD, a clinical associate professor at the University of Alabama at Birmingham School of Optometry.

Even run-of-the-mill vision impairment may be linked to poorer memory and a greater risk of depression, according to a recent study in JAMA Network Open.

The American Academy of Ophthalmology (AAO) has recommended that adults who are 65 and older get an eye exam at least every other year. But a 2018 poll from the University of Michigan found that about 1 in 5 Americans between the ages of 50 and 80 hadn't had an eye exam in the past two years.

You may have put off an eye exam earlier in the pandemic. But eye care practitioners across the country are taking precautions to keep their patients safe, says Natasha Herz, MD, who is a spokesperson for the AAO. Here's what you need to know about getting an eye exam and, if needed, purchasing eyeglasses safely during COVID-19.

WHEN IT'S TIME FOR AN EYE EXAM

If you've had an eye exam in the past, you can expect many of the same procedures—with the addition of a few new measures to protect patients and staff from COVID-19, according to Herz. For instance, you might be asked to wait in your car until your appointment, or be screened for COVID-19 symptoms on the phone and at the door. And both you and your eye doctor should be wearing masks.

Your doctor may have also placed a special plastic breath shield on the machine used to look into your eyes. Call in advance to ask about precautions to make sure you won't be spending too much time in a waiting room with other patients.

If you're going to an optician, who fills prescriptions from eye doctors but doesn't do exams, masks should also be required there, and the store should limit the number of people allowed inside.

During a routine eye exam, your practitioner will ask about your vision and general health, test your visual acuity (how well you can read an eye chart at different distances), and check your prescription. They will also examine the optic nerve and retina after dilating your eyes with drops, and look inside your eyes with a microscope.

In some practices, a technique called wide-field retinal imaging may be offered instead of dilating your eyes for an exam. This has become increasingly common during COVID-19, Gordon says, because it can reduce the time a patient spends in the office and minimize close face-to-face contact between practitioner and patient. Yet the technique, which uses a laser scan to generate an image of the retina, captures only about 80 percent of the retinal surface area, so you'll still need an eye exam that requires dilation in the near future, Herz emphasizes.

VIRTUAL VISITS

Telemedicine appointments with a practitioner have become more common during the pandemic for many medical specialties. The same is true in eye care, according to Gordon.

Although a comprehensive exam generally can't be done online, telehealth works well for "infections, injuries, and other outer-eye conditions that can be seen with the camera found on many smartphones and computers," Gordon says.

You'll still need a trip to an office if you've experienced vision changes. "It's difficult to assess vision in a meaningful way through telehealth," he adds.

How to Buy Eyewear Online

Online retailers of eyeglasses and contacts have become increasingly popular in recent years, well before COVID-19. A survey of more than 65,000 CR members in the spring of 2019 found that those shopping for glasses or contacts rated their overall satisfaction with the buying experience about the same for online and walk-in optical retailers. Shopping online may work best if you're looking for "glasses with single-vision lenses and you don't have a

really high prescription," says Natasha Herz, MD. People with progressive lenses or bifocals may need to go to an optician in person. (All Access members can see our ratings for eyeglass retailers at CR.org/glasses.)

Food Sense

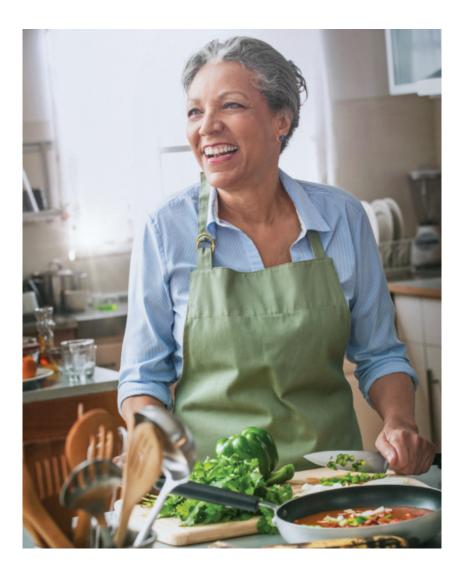
Eat to Beat Inflammation

Lower your risk of heart disease, obesity, and more by picking the right foods

here are many ways a healthy diet can help reduce the risk of developing life-threatening diseases, but one of the most beneficial is by controlling chronic inflammationwhere the immune system is in a constant heightened state of alert. Although that may sound like a good thing, when your immune system is in overdrive, it releases compounds that, if continually present even at low levels, can eventually damage healthy tissues in the body. Researchers are increasingly recognizing that chronic inflammation is an underlying cause of many health problems, including diabetes, cancer, dementia, and heart disease. In fact, it is thought to be to blame for more than half of deaths worldwide.

This exacerbated immune system response is one consequence of growing older. "As we age, our ability to control inflammatory responses goes down, leaving us with gradual, accumulative inflammation," says Simin Nikbin Meydani, PhD, lead scientist on the nutritional immunology team at the Jean Mayer USDA Human Nutrition Research Center on Aging at Tufts University. This process has even been given a name: inflammaging.

But aging is just part of the picture. Though you can't erase the years, lifestyle factors play a big role in helping to control inflammaging—and that means there is much that you can do to counteract and slow it down. Eating plenty of foods that suppress low-grade inflammation—and cutting back on the foods that promote it—is one of the most effective steps you can take.



INFLAMMATION, EXPLAINED

Not all inflammation is harmful. Acute inflammation is the way that the body initiates healing. "It's a strong defense mechanism that's triggered when the immune system activates to fight off a bacterial or viral infection," says Frank Hu, MD, PhD, chair of the department of nutrition at the Harvard T.H. Chan School of Public Health. The damaged or infected area of the body releases proteins called cytokines and other compounds that make blood vessels more permeable. This draws white blood cells called leukocytes to the area and allows them to enter the tissues so that they can destroy the threat. Without this response, infections would linger and wounds would fester.

Though acute inflammation subsides pretty quickly, chronic inflammation sticks around long past the point of helpfulness. "If acute inflammation is like a fire, chronic inflammation is more like smoldering smoke," Hu says.

HOW IT CAN HARM YOU

Diseases that may seem to have little in common—such as type 2 diabetes, arthritis, heart disease, cancer, Alzheimer's, and even COVID-19—are all caused, or worsened, by high levels of chronic inflammation. "When inflammation is consistently elevated, it contributes to cellular damage, causing injury to a variety of tissues and organs," says Chris D'Adamo, PhD, director of the Center for Integrative Medicine at the University of Maryland School of Medicine.

This process plays a role in cancer cells developing and multiplying out of control, in the creation of the beta amyloid plaques that lead to Alzheimer's, and in the buildup of plaque in the arteries that

Food Sense

causes heart disease. "And any disease that ends in '-itis'-such as arthritis, colitis, diverticulitis-is a disease of inflammation," D'Adamo says.

Inflammation also contributes to the development-and severity-of respiratory diseases like asthma, bronchitis, and COVID-19. "The cytokine storm [where inflammatory compounds destroy healthy tissues] that results in more severe COVID symptoms and increases risk of death is one result of out-of-control inflammation," Meydani says. A recent study, published in Nature Medicine, measured levels of four inflammatory cytokines in more than 1,400 patients hospitalized with COVID-19. People with the highest levels were most likely to suffer severe symptoms or die from the disease.

THE FOOD EFFECT

"Several lifestyle factors-including sleep, stress, and physical activity-strongly influence inflammation levels," says Penny Kris-Etherton, PhD, RD, a professor of nutritional sciences at Penn State University. But emerging research indicates that diet can have the most profound effect-positive or negative.

Many of the foods that are prevalent in a typical American diet are the very ones that fuel unhealthy levels of inflammation. "Red meat, processed meat, saturated and trans fats, added sugars, fried foods, and refined carbohydrates all directly trigger pro-inflammatory responses," Hu says.

In a recent study published in the Journal of the American College of Cardiology, Hu and other researchers at Harvard T.H. Chan School of Public Health followed more than 200,000 men and women for up to 32 years. "We found that the people who ate a diet containing the most proinflammatory foods had a 46 percent increased risk of heart disease," Hu says.

The study design also helped the researchers identify foods that had the greatest anti-inflammatory potential. "Certain foods stood out, including green leafy vegetables, dark yellow vegetables, fatty fish, extra-virgin olive oil, whole fruits [especially berries, pears, and apples], whole grains, coffee, and tea,"

Hu says. Levels of C-reactive protein (a sign of systemic inflammation) were significantly lower in the group that ate more of these foods. "Reducing blood levels of inflammatory markers helps reduce future risk of disease," Hu says.

Another recent study found that eating 1 to 2 ounces of walnuts a day reduced inflammation markers in the blood. In part, that may be because walnuts are high in



'Eat a wide variety of healthy foods, especially fruits and vegetables, and you'll get all the components that have anti-inflammatory properties.'

omega-3 fatty acids. "Most people have way too much omega-6 in their diets relative to omega-3," D'Adamo says. "We need both, but too much omega-6 contributes to chronic inflammation." You'll end up with unhealthy levels of omega-6 if you consume too much grain-fed meat and fried or processed foods, and not enough omega-3 rich ones, like fish, walnuts, and flaxseed.

CREATING AN ANTI-INFLAMMATORY DIET

Though adding foods that have been proved to reduce inflammation to your diet is a great start, experts caution against focusing on just a few specific ones. "If you aim for an overall healthy dietary pattern that's mostly plantbased, you will get anti-inflammatory

benefits," Kris-Etherton says. Numerous studies have shown that following a Mediterranean-style diet-plenty of vegetables, fruits, nuts, whole grains, and olive oil, along with some fish-can lower inflammatory markers and reduce the risk of inflammation-related conditions, such as heart disease and cancer.

Anti-inflammatory foods work their magic because they contain compounds that inhibit the release of cytokines. Colorful fruits and vegetables contain antioxidants, like beta carotene, vitamin C, and vitamin E, as well as unique plant compounds called flavonoids (also found in tea and coffee). Whole grains are rich in folate and minerals such as selenium. And extra-virgin olive oil-as well as some spices, like ginger and turmeric-boasts compounds that inhibit the inflammatory COX-2 enzyme, the same one that is blocked when you pop some ibuprofen.

"Eat a wide variety of healthy foods, especially fruits and vegetables, and you'll get all the components that have anti-inflammatory properties," Meydani says. "We know that when you have high levels of these anti-inflammatory foods in your diet, you can significantly reduce levels of inflammation in the blood and tissues throughout your body." The breakfast, lunch, and dinner recipes on the facing page give you a few ideas on how eat more of them.

Just as important, cut back on proinflammatory foods. There's often a synergistic effect between a poor diet and other lifestyle factors that affect inflammation, creating a vicious cycle. For example, "a poor diet can lead to being overweight, and being overweight might make you less active," Kris-Etherton says. "Those things can lead you to have more stress and poor sleep." So controlling those factors, too, will help you tilt the balance and help you tamp down inflammation.



Find anti-inflammation recipes on the facing page and at CR.org/inflammationrecipes.

Fight Inflammation at Every Meal

We developed these nine easy recipes to help you kick off your anti-inflammatory diet. They're packed with plenty of whole grains, vegetables, fruits—all ingredients that contain antioxidants, flavonoids, and other disease-fighting compounds. And we've made sure they're healthy in additional ways, such as keeping the sodium low and pumping up the fiber. Each recipe makes one serving, but you can scale up the ingredients accordingly to serve more people. Work these dishes into your regular rotation, or use them as inspiration to create your own meal ideas.



BREAKFAST

Blender Pumpkin Pancake

Blend ½ cup oats into a flour. Add 1 egg, ¼ cup canned pumpkin, ½ banana, ¼ cup low-fat milk or unsweetened almond milk, ½ tsp. pumpkin pie spice, ½ tsp. vanilla extract, and a pinch of baking powder. Heat 1 tsp. olive oil in a nonstick skillet on medium. Add batter; when bottom is browned flip and cook on other side until set.

Nutrition: 370 calories, 13 g fat, 3 g sat. fat, 51 g carbs, 14 g sugars, 8 g fiber, 14 g protein, 95 mg sodium

Banana Java Smoothie

In a blender, add 1 small frozen banana, ½ cup low-fat milk or unsweetened almond milk, ½ cup room temperature brewed coffee, ½ cup unsweetened nonfat Greek yogurt, 2 tsp. cocoa powder, and 1 Tbsp. almond butter. Blend until smooth.

Nutrition: 310 calories, 11 g fat, 2 g sat. fat, 39 g carbs, 24 g sugars, 5 g fiber, 21 g protein, 100 mg sodium

Kale/Mushroom Omelet

Heat 1 tsp. olive oil in a skillet on medium. Add ½ cup sliced cremini mushrooms. When they're soft, add ½ cup chopped kale; cook until wilted. Transfer to a plate. Heat 1 tsp. olive oil in the skillet on medium. Pour in 2 beaten eggs; swirl to cover the bottom of the pan. Once set, add vegetables, fold in half. Serve with 1 slice whole-grain toast.

Nutrition: 300 calories, 19 g fat, 4 g sat. fat, 17 g carbs, 3 g sugars, 3 g fiber, 17 g protein, 270 mg sodium

LUNCH

Sweet Potato Bowl

Cut 1 medium sweet potato into cubes. Drizzle with 1 Tbsp. olive oil and roast at 425° F for 20 to 30 minutes until tender, tossing halfway through. Top with 2 cups baby spinach and ½ cup canned low-sodium black beans, drained and rinsed. Microwave 45 seconds. Top with 2 Tbsp. salsa and ¼ avocado, sliced.

Nutrition: 370 calories, 21 g fat, 3 g sat. fat, 41 g carbs, 9 g sugars, 11 g fiber, 9 g protein, 320 mg sodium

Peanut Cabbage Salad

Whisk 1 Tbsp. peanut butter, 2 tsp. low-sodium soy sauce, 1 tsp. maple syrup, 1 tsp. lime juice, and 3 Tbsp. hot water. Toss with 2 cups shredded coleslaw cabbage mix, 3/4 cup any cooked whole grain, and 1/2 cup cubed extra-firm tofu. Top with 1/2 medium orange, chopped, and fresh mint.

Nutrition: 410 calories, 20 g fat, 4 g sat. fat, 43 g carbs, 20 g sugars, 10 g fiber, 16 g protein, 240 mg sodium

Tuna, Apple & Arugula Sandwich

In a small bowl, mix a drained 2.6-ounce pouch of low-sodium tuna and 1 tsp. mayonnaise. Layer one slice of whole-grain toast with 2 thin slices of Granny Smith apple, ½ cup baby arugula, and tuna mixture; top with another toast slice. Serve with remaining apple, cut into slices.

Nutrition: 310 calories, 4 g fat, 1 g sat. fat, 46 g carbs, 21 g sugars, 9 g fiber, 24 g protein, 400 mg sodium

DINNER

Simple Salmon Tacos

Spread two warmed 6-inch corn tortillas on a plate. Divide the contents of a 3-ounce salmon pouch and ¼ cup cubed papaya between tortillas. Top each tortilla with ¼ cup shredded cabbage, 2 slices avocado, cut in half, and 1 Tbsp. cilantro. Squeeze a lime wedge over the tortillas.

Nutrition: 365 calories, 12 g fat, 2 g sat. fat, 28 g carbs, 3 g sugars, 6 g fiber, 34 g protein, 560 mg sodium

Stuffed Butternut Squash

Cut a medium butternut squash in half lengthwise; remove seeds and roast facedown at 400° F until tender. Set aside one of the halves for another meal. In a small bowl, mix ½ cup chickpeas, ½ cup cooked bulgur, 2 Tbsp. raisins, 2 Tbsp. chopped parsley, 1 tsp. olive oil, and 1 tsp. lemon juice. Fill the hollow of the squash half with the mixture. Sprinkle with 2 Tbsp. toasted walnuts.

Nutrition: 370 calories, 15 g fat, 1 g sat. fat, 57 g carbs, 11 g sugars, 10 g fiber, 11 g protein, 95 mg sodium

Ginger Chicken Stir-Fry

In a small bowl, whisk 1 tsp. low-sodium soy sauce, 1 tsp. rice wine vinegar, 1 tsp. honey, ½ tsp. grated ginger, 1 small clove garlic, minced, and ½ tsp. cornstarch. Heat 1 tsp. oil in a skillet on medium. Sauté 1 carrot, sliced, until just tender. Add 4 heads baby bok choy, cut into bite-sized pieces. Cook until stalks are translucent. Cube 4 ounces boneless chicken breast; sauté until cooked through. Add sauce; let thicken 1 to 2 minutes. Serve with ½ cup cooked whole grain, such as quinoa.

Nutrition: 420 calories, 9 g fat, 1 g sat. fat, 49 g carbs, 10 g sugars, 9 g fiber, 34 g protein, 480 mg sodium

The science is shifting. Here's what you need to know

o doctor would advise drinking alcohol strictly for its health benefits. But moderate consumption-defined as no more than one drink per day for women and two for men-has been considered low-risk, possibly even good for you. Yet recently, the expert advisory committee for the 2020 U.S. Dietary Guidelines took a more cautionary position, recommending that the daily limit be lowered to one drink for men.

"We realized that the risks of alcohol have probably been underestimated," says a committee member, Timothy Naimi, MD, director of the Canadian Institute for Substance Use Research. "If you drink alcohol, less is better for your health than drinking more."

That message is key now that alcohol consumption has risen during the pandemic. In a recent CR nationally representative survey of more than 2,500 adults in the U.S., 23 percent said they drank more after COVID-19 hit than before. But even prior to that, heavy drinking was on the rise among older adults. A 2019 study estimated that 11 percent of people 65 years and older were binge drinkers (at least four drinks at one sitting for women, five for men).

Loneliness, isolation, and health concerns can increase stress, leading some to drink more now, says Shelly F. Greenfield, MD, a professor of psychiatry at the Harvard Medical School.

Although the final dietary guidelines don't include the committee's recommendation, experts are still divided on the role of alcohol in a healthy diet. Here's what we know about alcohol and health, and how to cut back if you'd like to.



POTENTIAL BENEFITS, REAL RISKS

The question of whether drinking alcohol is beneficial is a controversial and complicated one, according to Naimi.

Several studies have linked having a drink or two per day-one is equivalent to 12 ounces of beer, 5 ounces of wine, or 1.5 ounces of liquor-to certain health benefits. For instance, a 2020 study in JAMA Network Open found that adults middle age and older who consumed low to moderate amounts of alcohol had better cognitive function than those who never drank. Another study, which involved 333,247 people and was published in the Journal of the American College of Cardiology, found that when compared with lifetime abstainers, light to moderate drinkers were 26 to 29 percent less likely to die from heart disease, respectively.

But while some have attributed that lower risk to factors like a boost in HDL (good) cholesterol associated with mod-

erate drinking, those drinkers may simply have been healthier to begin with.

What's clear is that the potential benefits of alcohol are outweighed by the harm of drinking too much. For instance, binge and heavy drinking can increase the risk for high blood pressure, stroke, and congestive heart failure. Alcohol is also a proven cause of at least seven types of cancer, such as breast and liver cancer, says Marjorie McCullough, ScD, senior scientific director for epidemiology research at the American Cancer Society. For some cancers, any consumption is harmful. "The risk goes up with each drink," she says.

For older adults, "the risks and unpleasant effects of alcohol get more pronounced," Naimi says. Even modest drinking may increase feelings of fogginess or sleepiness, or increase the risk of falling. Plus, it can interfere with drugs for many conditions, such as sleep problems, anxiety, and high blood pressure.

HOW TO DRINK LESS

If you're concerned about your alcohol intake, these tips can help:

- > Plan ahead. Consider how often and how much you want to drink.
- > Keep a record. Use some kind of system-a notecard in your wallet or an appso you know how much you're drinking.
- > Replace drinking with an activity. This can be especially helpful if you typically drink to de-stress or cope, Naimi says. > Avoid triggers. If you can determine the people, places, or times of day that prompt you to pour a drink even if you're trying not to have one, you can plan to avoid those situations or develop alternate responses to those moments.
- > Talk with your doctor. If friends or family members express concerns about your drinking (or if you're worried about it), ask your doctor to help you identify the safest and healthiest ways for you to cut back.



To see what 5 ounces of wine looks like in different sized wine glasses, go to CR.org/wineglass.

The Health Perks of Vacuuming

Getting rid of dirt and dust regularly can help you feel better

acuuming regularly with a wellmaintained appliance can benefit your health. For example, the American Academy of Allergy, Asthma & Immunology recommends that people who have allergies or asthma vacuum their carpets weekly in order to reduce allergens and help alleviate symptoms. Whether you're shopping for an upright, stick, or robotic vacuum-or you already have one-operating it properly and keeping it in good condition is key.

PICK THE RIGHT ONE FOR YOU

Vacuums come in many varieties. Uprights tend to be the best choice for homes with wall-to-wall carpeting, although they can be heavy. Canister types can be helpful if you have curtains, stairs, and upholstery to clean. Stick vacs, while not as powerful as uprights for removing dirt and dust from carpets, are great for bare floors. And sticks and handhelds are both useful for small messes, like cleaning up spilled dry cereal. In Consumer Reports' ratings, only corded models earn our recommendation, in part because cordless models have poor reliability scores. To see the best performers in every category, CR members can view our ratings at CR.org/vacuums

KNOW THE LIMITS OF ROBOTICS

It sounds ideal to have a device that will do all the vacuuming for you. But we don't recommend relying solely on a robotic vacuum. While a robot is well-suited for keeping floors from getting overly dusty or picking up pet hair in between deeper cleanings, you'll still need a more powerful vacuum for a thorough cleanup.

ALLERGIES? **CONSIDER THIS** People with alleraies

may want to stick with a model that uses a bag, because replacing the bag is less likely to let puffs of allergen-containing

dust back into the air than emptying a dustbin. Note that vacuumina temporarily stirs up dust, so consider wearing an N95 mask (which filters out at least 95 percent of airborne particles)

while working. If you don't have access to that type of mask, consider delegating the task to someone else, and try to keep your distance from the area for a few hours afterward.

OPTIMIZE YOUR METHODS

If your vacuum's brush height can be adjusted manually, set it to touch the top of any floor covering. Pass the vacuum over the same spot a few times. On hardwood, vacuum in a crisscross pattern to pick up debris in the cracks of the boards.



DON'T OVERSTUFF THE BAG OR BIN

Letting your vacuum's bag or dustbin get too full can gum up the machine, allow dust to be emitted back into the air, and reduce suction strength. Several bagged models have an indicator that tells you when the bag needs to be emptied. Bags also usually have a maximum fill line. For bagless vacs, empty the bin after every use.



CLEAR THE BRUSH

Hair, string, and more can get tangled in the vacuum's spinning brush and strain the appliance's motor. Every few weeks, check the brush and cut through any snarls with a knife



CLEAN THE FILTERS

Clogged filters can reduce a vacuum's suction and cause it to expel dust. Check your owner's manual for the location of filters and the cleaning instructions. Some filters can be washed while others, including those in robotic vacuums, can't. HEPA-type filters need to be replaced every so often according to instructions from the manufacturer.

CR's Experts

Susan Booth leads our vacuum testing

Frank Rizzi is the test engineer for stick, upright, and canister vacuums.

Alex Nasrallah is the test engineer for robotic vacuums.

On Your Mind

QUESTION OF THE MONTH

How can I change up my home workouts so I don't lose motivation?

Try a live, streaming exercise class on your smartphone, tablet, or computer, says Michelle Hart, MS, an exercise physiologist at the Duke Health and Fitness Center in Durham, N.C. Senior centers, YMCAs, and gyms offer them, and workouts from SilverSneakers are free with many Medicare Advantage and supplemental plans. "Contact the gym or instructor ahead of time to make sure the class is right for you and to see if the instructor can make modifications to meet your needs," Hart says. You can also explore YouTube videos, cable-TV shows, or fitness apps.

Is pork better for me than red meat is?

Pork, like beef, lamb, and veal, is a red meat. And higher intake of red and processed meat is linked to an increased risk of type 2 diabetes, heart disease, and colorectal cancer. So it's wise to limit red meat to a couple of 3- to 4-ounce weekly servings, says Christine Rosenbloom, PhD, co-author of "Food & Fitness After 50." (Some experts say up to four weekly serv-

ings is okay.) Some pork cuts, such as tenderloin and loin chops, are leaner than others, so go for those when you eat pork.

What will the new Alzheimer's disease blood test tell me?

The prescription PrecivityAD test does not diagnose Alzheimer's. It determines whether you have a low, intermediate, or high probability of amyloid plaque in the brain—which can occur in Alzheimer's disease—by measuring two types of betaamyloid protein, checking for a gene variant that hikes Alzheimer's risk, and considering your age. At press time, the \$1,250 test, which is not covered by insurance, was available but not approved by the Food and Drug Administration. Without this and a study in a high-quality medical journal, "we don't have guidance about what the results mean and how they should influence treatment," says Rebecca Edelmayer, PhD, the Alzheimer's Association's director of scientific engagement.

My face mask bothers my skin. What can I do?

Masks that are snug, but not too tight, minimize pressure and rubbing that can chafe, the American Academy of Dermatology says. Protect friction points like the bridge of your nose and the skin behind ears with a layer of petroleum jelly or a skin protectant containing dimethicone, says Justin O. Endo, MD, an associate professor of dermatology at the University of Wisconsin School of Medicine and Public Health in Madison. Clean your mask daily and vary the type you wear. Cutting back on products that can irritate skin, such as aftershave lotion and retinoids, may help, too.

Talk to Us

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