13 tests your doctor is not likely to offer, but you should ask for anyway

The routine physical, an annual ritual, has recently come under fire—deservedly so. The screening chest X-ray, except in smokers or those with respiratory complaints—useless. The ECG—mostly a waste of time, unless there are specific heart-related complaints. Standard blood tests like the chemistry and CBC—you usually have to be pretty sick before they turn abnormal.

And even the vaunted lipid profile, including cholesterol, LDL, HDL, and triglycerides, has devolved into an excuse for doctors to prescribe statins, regardless of the results which are seldom "good enough."

At the Hoffman Center, we go beyond routine testing to make the "routine" physical, even in well individuals, a meaningful exercise. Here are my candidates for 13 essential tests not commonly performed, but should be.

Note that, increasingly, even if patients request these tests, mainstream doctors will decline to order them, stating that they're "not medically necessary." The answer lies in new relationships doctors are being forced into with insurance companies and government payers. Amid the changing landscape of medicine, doctors no longer work for you, they work at the behest of payers, whose primary goal is cost-containment. Under new proposals, doctors actually get paid according to how LITTLE money is expended in caring for you.

While this could lower costs in the short run, it's penny-wise, pound-foolish. Given only limited and perfunctory tests, you and your caregiver have only meager tools for heading off expensive and catastrophic problems like heart disease, stroke, cancer and dementia.

1) Hemoglobin A1C (HbA1C): A single, random blood sugar tells you very little about how your blood sugars range over time. HbA1C provides a record of average blood sugars over the last 120 days. It's not affected by recent meals. I recently saw a patient who asked her doctor for an HbA1C test and was told: "You're not eligible for that test, because insurance only covers it if you have diabetes." This is absurd, because HbA1C is precisely the test you should do to provide early warning of diabetes susceptibility, while you still have a chance to head it off. Even if you don't have diabetes, a "borderline" HbA1C is a predictor of increased risk of heart disease, stroke, dementia, and even certain cancers.

2) Glucose tolerance test (GTT) with insulin: Even in the presence of a normal HbA1C, many patients exhibit wide swings in blood sugar. When this is accompanied by elevated insulin, we diagnose Metabolic Syndrome, which can be addressed with targeted supplements, exercise, and low-carb diet. The test also spots hypoglycemia, a common cause of inordinate sugar cravings, fatigue, "brain-fog," sleep problems, and anxiety.

3) LDL particle testing: Current guidelines for the administration of statin drugs are based largely on LDL (low density lipoprotein) levels. But just as there is "good" and "bad" cholesterol, so too are there LDL particles with different implications for heart disease. A person with high LDL might have mostly, large "fluffy" particles—relatively benign. Another with seemingly normal LDL might have

small, dense particles—high-risk for heart disease.

4) Oxidized LDL: Another way to differentiate among LDL patterns is to measure oxidized LDL, which heightens free radical activity within the arteries. Patients with high oxidized LDL to HDL ratios are at high risk for atherosclerosis.

5) Hs-CRP: C-reactive protein is a broad marker for inflammation anywhere within the body. Highly-sensitive CRP (or Cardio-CRP) targets inflammation in the coronary blood vessels. Many think it a more accurate predictor of heart disease than cholesterol. In a recent article I describe natural ways to lower CRP.

6) Homocysteine: Don't let your doctor tell you homocysteine doesn't matter. Recent research shows that patients with high homocysteine can dramatically lower their risks of stroke or dementia by supplementing with the right B vitamins.

7) MTHFR: Methylenetetrahydrofolate reductase (MTHFR) genetic tests (via saliva or blood) are a refinement on homocysteine blood tests. Even in the presence of normal homocysteine, common mutations in MTHFR can result in a bewildering array of mental and physical symptoms and conditions. They can be addressed with targeted supplementation.

8) Omega 3:6 ratio: A blood test can measure the types of fatty acids incorporated in your red blood cell membranes. Turns out, the higher the ratio of Omega 3 (from sources like oily fish, flax, walnuts, grass-fed meat) to Omega 6 (from refined vegetable oils, margarines, and shortening), the lower your likelihood of developing heart disease and other degenerative conditions.

9) Vitamin D: A determinant of risk for a wide variety of conditions, not just osteoporosis. Low levels have been implicated in depression, pain syndromes, cancer, heart disease, stroke, and autoimmunity.

10) Saliva Cortisol: A sensitive measure of stress and the status of your adrenals, the source of your "oomph." Excess cortisol can keep weight on, deplete muscle mass, thin your bones, raise your blood sugar, damage your heart, and literally shrink the grey matter of your brain. Low cortisol suggests adrenal burnout, rendering you susceptible to allergy, infection, and inflammation.

11) Gluten Panel: Anti-Gliadin Antibodies, Tissue Transglutaminase, HLA DQ2/DQ8—these blood tests indicate whether it's likely you're intolerant to gluten. Elimination of gluten can forestall serious diseases and relieve bothersome symptoms. It's worth finding out, because a simple diet intervention can be a life-changer.

12) Ferritin: Standard blood tests can only capture iron deficiency when it's advanced. A high percentage of women suffer from low ferritin, a sensitive marker of iron status. When ferritin is low, it can be associated with low sex drive, depression, fatigue, insomnia and restless leg syndrome (RLS), calling for iron supplementation. Conversely, when high, it can indicate susceptibility to iron overload—a dangerous condition that can damage the brain, heart, and liver.

13) Vitamin B12: Low levels of vitamin B12 have long been known to be associated with fatigue. If undetected, prolonged deficiency of B12 can result in serious neurological disorders. Commonly used drugs, like acid-blockers and metformin, can deplete it. The latest surprise finding is that B12 deficiency in men is associated with osteoporosis.

In a future edition of the Intelligent Medicine newsletter, we'll offer a bonus

installment of “Tests Your Doctor Is Not Likely To Offer, But You Should Ask For Anyway.” In the meantime, let’s hear YOUR suggestions.

Resource:
GLUTEN INTOLERANCE SYMPTOMS & DIAGNOSIS