

News Roundup: Dead Butt Syndrome, rethinking fluoridation, healthcare CEO windfalls, toll of Covid lockdowns



Dead Butt Syndrome: I love this term! Formally speaking, in medical parlance, it's dubbed "gluteal amnesia". Whut?! *You forgot your derrière??* A 2010 article in the *New York Times* highlights this ubiquitous ailment: "Sitting All Day Can Cause Dead Butt Syndrome"

It's not just that prolonged sitting weakens the gluteal muscles; Paleo man had no chairs or sofas, and today's indigenous people still engage their glutes while relaxing in a deep squat. That's how many non-Western cultures sit.

A Finnish trial recently demonstrated that a six-month intervention to curb sitting time by just 40 minutes/day reduced participants' risk for back pain.

Dead butt syndrome is more than just mere muscular atrophy. Many of us have lost, through disuse, the neural connections needed to engage our powerful glutes. Compounding this is the age-related spinal narrowing that impinges upon the nerve outlets that trigger gluteal contractions.

But the main problem may be with the brain “forgetting” how to send signals to activate gluteal muscles—a case of “use it or lose it” via loss of muscle memory.

What’s worse is that even most aerobic exercises, like walking, running or cycling, minimally engage our glutes; these exercises mostly fail to enlist our **posterior chain** of muscles—back, buttocks, and hamstrings. The results are chronic back pain, hip instability, and knee and ankle misalignment.

Jogging for a half hour and maybe doing some bench presses, sit-ups, or pushups bias the anterior chain, and then sitting in your office chair for hours on end is a recipe for gluteal decline. To compensate, weaker adjacent muscles are recruited, resulting in overuse injuries and pain.

Therefore, reintroduce yourself to your long-lost glutes. Reduce your sitting time. Try a stand-up desk. Perform bridges or barbell hip thrusts, deadlifts, kickbacks or hamstring curls. Your butt will thank you!

Rethinking fluoridation: The fluoridation controversy has raged since I was a kid. Originally construed as a way of fighting dental decay, fluoridation of drinking water was introduced in the post-WW2 years. Public health authorities tout it:

“Community water fluoridation is a cornerstone strategy for prevention of cavities in the U.S. It is a practical, cost-effective, and equitable way for communities to improve their residents’ oral health regardless of age, education, or income. CDC named fluoridation of drinking water one of 10 great public health interventions of the 20th century because of the dramatic decline in cavities since community water fluoridation started in 1945.”

While growing up in Southern California, I remember anti-fluoridation as a key tenet of the far-right John Birch Society, whose proverbial “little old ladies in tennis shoes” conducted incessant protest campaigns.

I recently rewatched the 1964 Stanley Kubrick movie “Dr. Strangelove” which captures the Zeitgeist of my adolescence. In it, a crazed rogue Air Force base commander—General Jack D. Ripper, memorably portrayed by Sterling Hayden—launches a preemptive nuclear strike on Russia. He opines that fluoridation is a Communist plot:

“ . . . do you realize that in addition to fluoridating water, why, there are studies underway to fluoridate salt, flour, fruit juices, soup, sugar, milk, ice cream . . . It’s incredibly obvious, isn’t it? A foreign substance is introduced into our precious bodily fluids without the knowledge of the individual. Certainly without any choice. That’s the way your hard-core Commie works!”

Conspiracy theories aside, there have been legitimate concerns over the efficacy and safety of universal water fluoridation. Some argue that the significant reductions in tooth decay seen since the introduction of fluoridation have been multifactorial, with a significant contribution from better overall dental hygiene.

Additionally, the therapeutic window for protection against caries is narrow; too much fluoride will result in dental fluorosis, or mottling of the tooth enamel. Systemic effects include weakening of bones, endocrine problems, and even neurological toxicity and cancer. The Fluoride Action Network has been campaigning to highlight fluoridation hazards for decades.

A recent National Toxicology Program monograph concluded that higher levels of fluoride exposure, such as drinking water containing more than 1.5 milligrams of

fluoride per liter, are associated with lower IQ in children.

Stuart Cooper, executive director of the Fluoride Action Network, claims: “. . . there is no scientific basis for the claim that fluoridation is safe for children. The ADA [American Dental Association] will be the last to admit that they’re largely responsible for damaging the brain development of millions of innocent kids over many decades.”

The problem is that, while municipal water delivers fluoride at a concentration generally deemed safe, it is ubiquitous in the food chain wherever foods and beverages are made with treated water, lending potential legitimacy to the general’s parodied concerns. Moreover, it’s added to tasty toothpastes, which some toddlers avidly swallow, and some dentists still offer kids fluoride applications at regular checkups.

As concerns mount over the potential hazards of excess fluoride, many countries and localities are abandoning the practice of mandatory water fluoridation.

Windfall salaries for Pharma, health network CEOs. It’s no secret that medical costs are skyrocketing, threatening to bankrupt our health care system. As cost-containment efforts proceed, a *MedPage* article heralds: “Doctors Cut Back on Seeing Medicare Patients as Another Pay Cut Looms— Those still seeing Medicare patients struggle to stay in private practice”.

While frontline doctors feel the pinch, many opting for early retirement, health care executives—essentially the middlemen in healthcare delivery—are reaping a bonanza. CEOs made \$3.5 billion in 2023. Chief executives raked in \$11 million on average, **STAT reports**, even while stocks of many healthcare companies tanked as Covid concerns receded.

MedPage reports:

“The two highest-paid CEOs were Stephane Bancel of Moderna (\$305 million) and Peter Gassner of Veeva Systems (\$246 million) . . . Among ‘eye-catching’ names in this sector was David Ricks of Eli Lilly, who made \$73.9 million . . . As for health insurance companies, the highest earner was Joseph Zubretsky of Medicaid-focused insurer Molina Healthcare, who made \$51.2 million. And for healthcare providers, HCA’s Sam Hazen topped the list, making \$43.2 million in 2023.”

Average salaries for health care CEOs were 81 times that of the typical American worker.

Heart-Gut axis: “What happens in the gut doesn’t always stay in the gut”, Dr. Alessio Fasano once famously said. Since then, we’ve learned of the intimate relationships between gut and brain, metabolism, immunity, lungs, liver, and even skin.

Now, there’s a newly-discovered connection to the heart and circulatory system.

Atrial fibrillation is an increasingly pervasive problem. 70% of people with afib are between 65 and 85; it affects three to six million Americans. It’s sometimes linked to previous heart damage due to MIs, but mostly afib’s origins are unexplained.

A large-population study in *Lancet* recently showed that development of afib could be reliably predicted on the basis of the prevalence of eight different species of gut

bacteria.

A previous study had posited that *“Intestinal dysbiosis is a potentially targetable factor that might provide novel treatment avenues for AF prevention.”* Dietary interventions and even selective use of antibiotics are among the options discussed.

Then there’s atherosclerosis. A 2024 review states:

“Many studies have shown that disturbance of the balance of the gut microbiota alters the susceptibility to cardiovascular disease by affecting the immune response, obesity, insulin resistance, atherosclerosis, and susceptibility to thrombosis.”

Hence, add heart disease to the plethora of conditions impacted by gut health.

Lockdown effects: In addition to the terrible toll of Covid deaths, and the millions suffering from its aftermath Long Covid, there’s evidence that unforced errors contributed to the toll. Surveys show that deaths have increased since the pandemic—and it’s not all about Covid.

In a recent JAMA article entitled *“Increasing Mortality Rates in the US, but Not From COVID-19”*, statisticians report:

“The US mortality picture is hardly ideal. Like the sand revealed as the tide goes out, the receding COVID-19 pandemic draws attention to rising mortality rates from non-COVID causes, a trend that predates the pandemic.”

I’m not one to subscribe to the theory that it’s the Covid shots that are doing us in—although it became clear early in the vaccination campaign that side effects were real, prevalent, and sometimes deadly.

Rather, in a perverse illustration of the law of unintended consequences, it may be the prolonged lockdowns that undermined our health in ways that continue to accelerate death trends.

There’s no question that “deaths of despair”—from suicide, alcohol, drugs, accidents, and homicides increased. And a new study from France shows how profoundly our healthy lifestyles were undermined by Covid.

The NutriNet Santé survey revealed that most people’s regimens went south amid Covid lockdowns:

“During the lockdown, trends of unfavorable changes were observed: decreased physical activity (reported by 53% of the participants), increased sedentary time (reported by 63%), increased snacking, decreased consumption of fresh food (especially fruit and fish), and increased consumption of sweets, cookies, and cakes.”

By contrast, some participants leveraged Covid to increase exercise opportunities and improve their diets via home-cooking of nutritious meals—but they were in the minority.

Hence the ravages of the pandemic extend far beyond that of the virus itself. After a century of progress, life expectancy among us is actually *falling*.

Americans’ health continues its downward trajectory.