



## COVID-19 – CMEFS WEEKLY NEWSLETTER

FRIDAY 22-05-2020

Hello. I do hope that this week's edition of our newsletter finds you and your family as well as can be.

And yes, because the subject is so very important to all of us, I am once again going to talk further on COVID-19 and our response to preventing the spread of the virus.

And let me say this AGAIN right at the outset, I regard all life as precious, not just human life but ALL life. This extends all the way down to the smallest living thing imaginable. Life is precious.

This week we are going to talk about what science is discovering about obesity and the virus. It even goes a little further than obesity, it also refers to diet.

Here are a few “copy and paste's” on the subject, starting with the UK Prime Minister, Boris Johnson. (All emphasis my own)

(Saturday Independent)

Prime Minister Boris Johnson is planning a war on obesity after deciding his touch-and-go battle with coronavirus was exacerbated by him being overweight.

He is ready to ditch long-standing opposition to “nanny state” policies and launch a crackdown on the nation's bulging waistlines after Covid-19 is defeated.

He told senior advisers that the experience – which he famously said “could have gone either way” – left him determined to lead a public health drive.

### **Being obese doubles the risk of needing hospital treatment for coronavirus, research shows.**

And with one in three British adults now clinically obese, the UK has one of the highest rates in the world.

Then from “Medical News Today”

An increasing number of reports have linked obesity to coronavirus mortality, and the Centers for Disease Control and Prevention (CDC) now list severe obesity as a risk factor for severe COVID-19.

The CDC defines severe obesity as having a body mass index (BMI) of 40 or above.

BMI is calculated by multiplying your height in meters by itself and dividing this figure into your weight in kg.

For example, say you are 1.74 meters tall and you weighed 101 kg.

Your BMI would be  $101/(1.74 \times 1.74) = 101/3.02 = 33$

The WHO has put together a table giving some guidance as to where your BMI (as an adult) would place you in terms of health risk. (Not only from COVID-19)

BMI	Considered to be
18.5 or less	Underweight
Between 18.5 and 24.9	Healthy
Between 25 and 29.9	Overweight
Between 30 and 39.9	Obese
40 and higher	Severely Obese

So looking at the list, I would say any BMI above 25 would start increasing your health risk.

Using the same height in the example above (as you cannot change your height through exercise or diet) to reach a BMI of 25, this person would need to go all the way down to 75.5kg.

If you want to calculate your goal weight to get down to a BMI of 25, all you need to do is multiply the BMI target you want to achieve, in this case, 25, by your height multiplied by itself.

$$25 \times (1.74 \times 1.74) = 25 \times 3.02 = 75.5\text{Kg}$$

Eish, that's a lot of dieting and exercise or both.

Either that or a whole lot of laxative, which I would not recommend!

So now we know that being overweight is not only a health risk in general but particularly so should you be unfortunate enough to be infected with the virus whilst severely obese, irrespective of age, and co-morbidities.

It seems that being severely obese considered entirely on its own, places one at a **very high mortality risk, irrespective of age.**

And now to a report in the Mercury which talks about the food we (should not) eat.

Feasting on fast food triggers inflammation in the body, German researchers warn.

They say fat and sugar-laden, fibre-poor food, such as **pizza, burgers and chips**, can **confuse the immune system**, leading it to act as if it were **fighting off an infection**.

What's more, the immune system remains on high alert after eating the foods and will react even more aggressively to unhealthy foods in the future, says Dr. Eicke Latz, a researcher at the University of Bonn.

These findings, reported in the journal Cell in 2018, came from a study of mice, whose food was swapped for a "fast food" version.

Latz believes the findings may be relevant to human health, helping to explain heart disease and type 2 diabetes, both of which are linked to poor diet and inflammation.

British experts say "**ultra-processed food**" containing artificial colourings, sweeteners or preservatives, can **feed inflammation**.

This would include **soft drinks, ice-cream, biscuits, sugary cereals and chicken nuggets, as well as some low-fat spreads, protein bars and flavoured low-fat yoghurts**.

Duane Mellor, a dietitian and a senior lecturer at Aston University Medical School, Birmingham, UK, says this type of food can leave the body struggling to convert the extra calories cleanly into energy, generating high levels of free radicals – molecules thought to be involved in triggering inflammation.

He suggests thinking before you reach for a biscuit.

If you're bored, try making a cup of tea instead.

And if you feel you can't do without instant noodles, add some fresh or frozen vegetables.

Besides being nutritious, they will help cut your calorie intake.

End of the article in the Mercury.

And now to expand on the last bit relating to the foods that we eat.

Firstly why experiment on mice and not some other animal such as a rabbit etc?

This is because mice are extremely useful for studying complex diseases such as atherosclerosis and hypertension, as many of the genes responsible for these diseases are **shared** between **mice** and humans.

Research in mice provides insights into the genetic risk factors for these diseases in the human population.

Who knew?

Secondly, I find the bit on “confusing the immune system” very interesting, as science has determined that the **leading cause of death** as a result of contracting the virus is when the body’s immune system **goes into extreme overdrive**, otherwise known as a cytokine storm.

Here are some selected snips from a publication called “The conversation” published two days ago.

(For those who want to read the whole article, here’s the link <https://theconversation.com/blocking-the-deadly-cytokine-storm-is-a-vital-weapon-for-treating-covid-19-137690> )

The killer is **not the virus but the immune response**.

The current pandemic is unique not just because it is caused by a new virus that puts everyone at risk, but also because the range of innate immune responses is diverse and unpredictable.

In some it is strong enough to kill.

In others it is relatively mild.

Here’s how an overreaction from the immune system can endanger a person fighting off an infection.

When the production of **cytokines** is uncontrolled, immunologists describe the situation as a “**cytokine storm**.”

During a cytokine storm, the blood vessels widen further (vasolidation), leading to low blood pressure and widespread blood vessel injury.

The storm triggers a flood of white blood cells to enter the lungs, which in turn summon more immune cells that target and kill virus-infected cells.

The result of this battle is a stew of fluid and dead cells, and subsequent organ failure.

**The cytokine storm is a centerpiece of the COVID-19 pathology with devastating consequences for the host.**

So it would appear to me, although science still needs to establish this as a fact, that there is a link between the foods that we eat and our BMI, as to whether we will suffer a cytokine storm should we contract the virus.

So I am guessing that if our BMI places us in the obese+ category, and we consume a lot of junk food and drink along the way, we are setting ourselves up for a very bad experience should we contract the virus.

Keep in mind that all that is being recommended to date, from wearing masks, social distancing, hand washing, etc has only one thing in mind, that being to SLOW the spread of the virus, not to STOP it.

By extension, this means that up until a vaccine arrives AND we have been duly vaccinated with the vaccine, it is anticipated that MOST of us will at some time become infected with the virus.

With this in mind it might then be a good idea to start looking at ways and means of reducing your BMI (if above 25 that is) in anticipation of this event, so that when it happens, the severity of the symptoms you experience will be milder, and perhaps even less deadly than they might otherwise have been.

And just a tip from someone who has tried so many different ways to drop some weight for so very many years (me), that being that EXERCISE will NOT do the trick.

The BEST route to take is to not rely on exercise at all (although don't stop exercising sensibly as that delivers other positive benefits) and decide to EAT yourself thin.

And yes, this does mean cutting out the junk food and drink and substituting these "food groups" with much healthier food groups.

But also do NOT starve yourself. It is self-defeating. And don't try and do it all at once. That, too, is self-defeating. If for example, amongst many other things, you drink a lot of sugary soft-drink, then in week one, cut just this one thing out and substitute it with something healthier.

The next week, add just one other thing and then substitute that next thing, etc.

You will be very surprised at just what a difference this will make to your life.

And don't have unrealistic expectations and think that by changing this one thing then the next you are going to drop 5Kg in a week. It's not going to happen. If you can lose just 250g a week that is 1Kg a month. In 5 months that is 5Kg and in 10 months 10Kg and so on.

Making these gradual changes also mean that these changes become permanent in your life and when they become permanent, you will not be tempted to go back to your old ways of eating.

I could go on, but then I am neither a dietician nor a health coach, but just someone who has fought a life-long "battle with the bulge" and has discovered what does, and does not work.

So there you have it, some health advice from your financial advisor!

I hope you found it useful!

Nine sends love and thoughts to all, as always.

Until next time then, from all of us at CMEFS, do take good care of yourselves. Kind regards. Charles.

Name	Division	Cell Number	Detail
Alicia	Wealth	063 434 8074	Learner. Servicing attaching to the following classes of business. Investment Accounts, Tax Free Savings Accounts, Retirement Annuities, Living Annuities, Pension and Provident Preservation Funds, Endowments.
Andrew	Wealth	063 321 7399	Intern. New business and servicing. Medical Aids & GAP Cover. In the process of migrating across to the Wealth Division.
Andrisha	Wealth	063 378 1473	Representative. New business. Investment Accounts, Tax Free Savings Accounts, Retirement Annuities, Living Annuities, Pension and Provident Preservation Funds, Endowments.
Bernelee	Tax	078 708 4536	Administrator providing admin support to Geraldine and understudy to Geraldine.
Brady	Wealth	071 843 3933	Representative. New business. Investment Accounts, Tax Free Savings Accounts, Retirement Annuities, Living Annuities, Pension and Provident Preservation Funds, Endowments.
Felicia	Risk	071 880 9576	Learner. Servicing attaching to Short-Term insurance, assisting Stella. Starting to obtain some exposure to Medical Aids, GAP Cover and Life Insurance.
Geraldine	Tax	083 754 1699	Head of tax division.
Jamie	Wealth	071 850 1389	Learner. Core responsibility being to produce and send out the monthly investment statements and to handle any queries connected to them. Satellite responsibility to assist where possible in the Wealth Division.
Luh	Bookkeeping	063 102 3313	Head of Bookkeeping Division. Professional Accountant (SA) SAIPA 30345
Nadean	Tax	063 026 1351	Intern. Administrator providing admin support to Bernelee and understudy to Bernelee.
Siso	Risk	060 376 6605	Learner. Starting to obtain some exposure to Short-Term insurance Medical Aids, GAP Cover and Life Insurance.
Stella	Risk	078 784 6462	Head of Short-Term Insurance Division.
Terisha	Books	071 858 3373	Intern. Bookkeeping Division. Data Capture and other functions relating to the bookkeeping Division.
Thabo	Risk	078 004 3864	Learner. Starting to obtain some exposure to Short-Term insurance Medical Aids, GAP Cover and Life Insurance.