

Julie's Research Based Protocol for Osteoporosis

(Based on compiled research done by Dr. Gaby and others in the field)

Recommendations for osteoporosis:

1. Diet: Avoid refined sugar. Avoid excessive intake of caffeine, cola beverages, and sodium chloride. Test for celiac disease in patients with unexplained osteoporosis. Consider investigating food allergies in selected cases. *Consider eating dried plums*
2. Environment: Attempt to minimize exposure to aluminum, lead, cadmium, and tin.
3. Calcium: 600–1,200 mg/day. (preferably non-dairy sources for most – supplements as indicated)
4. Vitamin D: 800-2000IU/day
5. Magnesium: 300–600 mg/day
6. Vitamin K: 100–1,000 μ g/day of vitamin K₁. *Vitamin K₂₋₇ at a dose of 100-300 mcg/day*. (Menaquinone-4 at a dose of 45 mg/day may be considered in selected cases.)
7. Probiotic and prebiotic foods – optimize gut health.
8. Additional supportive nutrients (daily doses in parentheses): vitamin B₆ (10–25 mg), folic acid (0.4–5.0 mg); vitamin B₁₂ (20–1000 μ g), vitamin C (100–500 mg), zinc (10–30 mg), copper (1–3 mg), manganese (3–20 mg), boron (1–3 mg), silicon (1–5 mg), strontium (2–6 mg).
9. Strontium: 170–680 mg/day in selected cases. Consider a dosage reduction or stopping after 1 year. Based on new research may not be indicated.
10. Hormone-replacement therapy: DHEA, estrogens, progesterone, and testosterone (individually or in various combinations) in selected cases.

Gaby, Alan R., M.D.. *Nutritional Medicine (Second Edition)*. Alan R. Gaby, M.D., 04/2017. VitalBook file.

*Over 100 references available upon request.