



GeneFood: alimente seus genes para viver mais e melhor

*Uma abordagem simplificada da Modulação
Epigenética e da Nutrição de Precisão*

AULA INTRODUTÓRIA 10

GeneFood é um curso autoral

Curso autoral é aquele que nasce da visão, da experiência, da linguagem e da forma de raciocínio **de quem o criou** — e não apenas da compilação de conteúdos prontos.

Não significa inventar toda a ciência nem criar teorias revolucionárias próprias, mas **organizar o conhecimento** por meio de uma lógica individual, construída a partir da experiência, da percepção e de uma visão integrada.

A coerência é a base estrutural do GeneFood

O que é energia de cura?

As medicinas vibracionais envolvem a aplicação terapêutica de campos flutuantes de energia, sejam eles projetados pelas mãos de terapeutas, aparelhos eletrônicos, voz humana, lasers, preparações homeopáticas ou qualquer outro tipo de fonte de energia.

What is healing energy?

Part 4: vibrational medicines

.....

J. L. Oschman

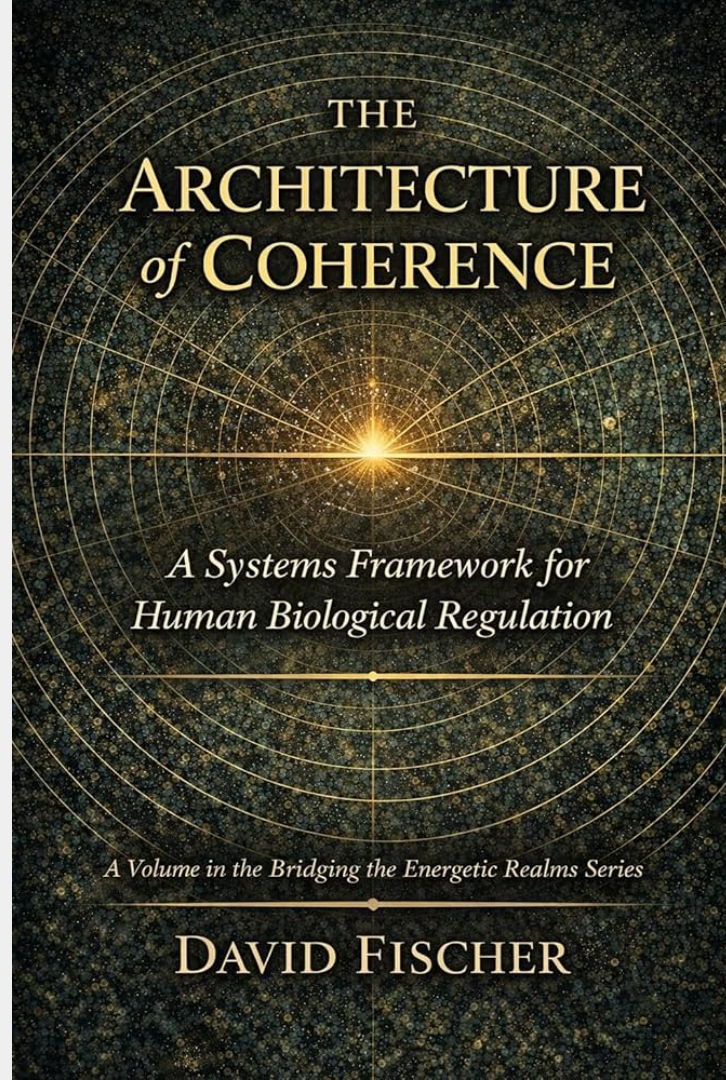
Abstract Vibrational medicines involve the therapeutic application of fluctuating energy fields, whether projected from the hands of therapists, from electronic devices, lasers, the human voice or musical instruments, or from homeopathic, aromatherapy, herbal or other kinds of preparations. At a basic level, virtually all that we know about living systems is based on the analysis of vibrations. Vital regulatory systems in the body are associated with a variety of molecular electromagnetic emissions and absorptions. In many cells and tissues, molecules are arranged arrays resembling crystals. Because of this, molecular oscillations are organized and coherent. Molecular oscillations are absorbed by the living matrix (connective tissues, cytoskeletons and nuclear matrices) and conducted throughout the body. All forms of bodywork and movement therapy interact with this energy continuum in one way or another. Coherent molecular oscillations give rise to collective properties such as great sensitivity to environmental fields and radiation of energy from the body into the environment. Part B discusses how dynamic energy systems are influenced by homeopathy, aromatherapy, herbs, light and sound stimulation, and related vibratory methods.

E enfatiza: praticamente tudo o que sabemos sobre os sistemas vivos se baseia na análise de vibrações.

Nas células e tecidos, as moléculas estão organizadas em arranjos semelhantes a cristais, o que favoreceria oscilações moleculares organizadas e coerentes.

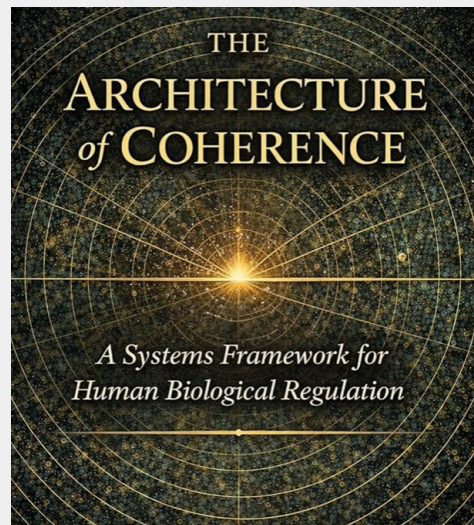
A Arquitetura da Coerência

Um modelo sistêmico para a regulação biológica humana (março 2026).



A imagem parece uma fusão entre:

um mapa celeste,
uma mandala,
a geometria sagrada,
ondas concêntricas,
e um ponto luminoso central.



Meu olhar foi atraído para aquela luz no centro, como se, de fato, todas as linhas convergissem para um **princípio organizador**.

A ciência moderna mostra que a saúde cerebral, por exemplo, depende, em parte, da coerência e da sincronização entre diferentes regiões do cérebro. Quando essa coordenação diminui, alterações cognitivas podem surgir.

GeneFood nasceu desta percepção. Simplesmente segue o princípio da coerência nas escolhas cotidianas, desde alimentos, suplementos, até o meio ambiente, pensamentos e emoções.

A origem vibracional da obra

A estrutura base deste curso surgiu durante um período extremamente difícil da minha vida. Uma denúncia contra mim havia sido feita ao CRM-SC em 2017 por uma colega médica. Em 2019, após a confirmação do início de um processo ético-profissional, atravessei uma fase de depressão grave.

A conclusão do processo foi em agosto de 2022,
condenada a censura pública.

Meu pai teve uma hemorragia digestiva pouco tempo depois do término do processo. Ele mesmo me disse com estas palavras: “Estava chorando por dentro por não ter podido lhe proteger”. Faleceu em novembro daquele mesmo ano após muito sofrimento, entre quedas e internações.

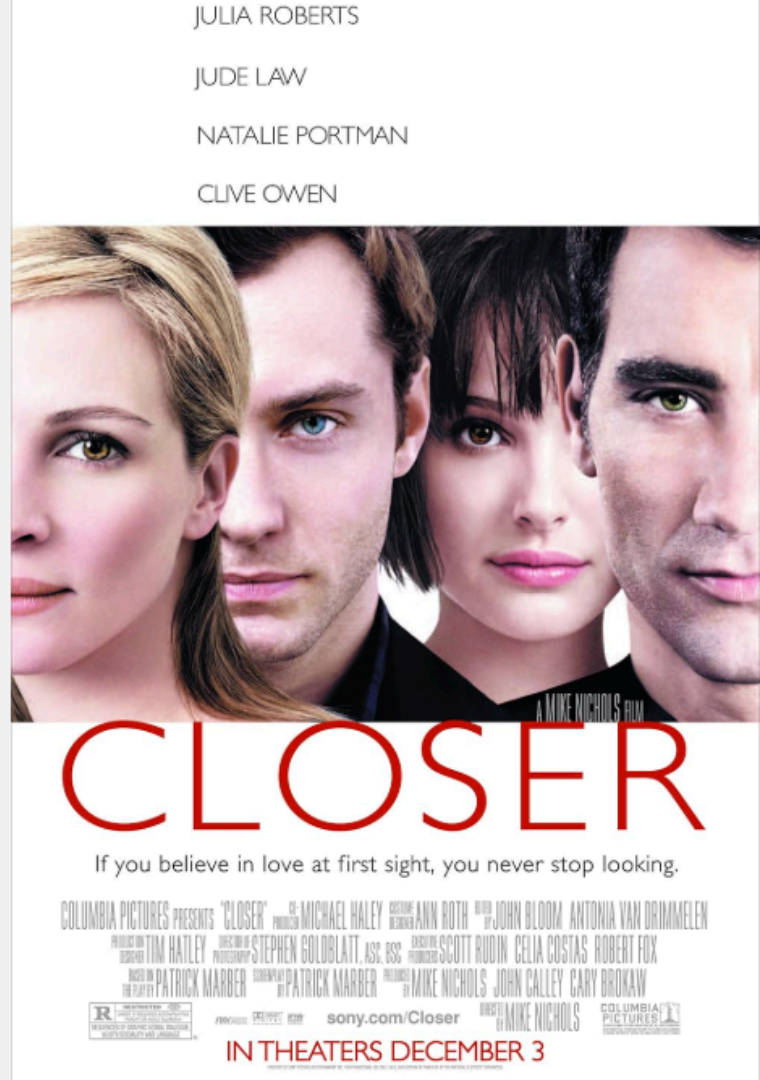
Sua última mensagem escrita para mim foi:
"Espiritualmente não temos idade. Sempre
estarei com você". Fiquei intrigada na época.
Parecia, de fato, uma despedida.

Foi justamente neste período que encontrei um propósito para escrever: **defender-me**. Não por meio da revolta, mas do estudo, da reflexão e da construção intelectual. **Continuei aprofundando e fundamentando cientificamente meus posicionamentos.**

It so it is
(Just) Like you said it would be
Life goes easy on me
Most of the time

Em janeiro do ano seguinte (2023), aconteceu algo muito curioso. Meu marido me chamou para ver um filme num domingo à tarde. Eu disse que iria tomar um banho e logo eu estaria de volta. Durante o banho, eu cantarolava a música *The Blower's Daughter*, de Damien Rice.

Voltei e sentei-me ao seu lado. O filme escolhido por ele, *Closer*, tinha como música tema, aquela que eu estava cantarolando há pouco.



— Hum — disse para mim mesma — isso é um sinal.....

And so it is
The shorter story
No love, no glory
No hero in her sky

Durante o filme, eu estava inquieta, até que disse para ele que precisava parar. Precisava escrever. Em um único impulso, escrevi um artigo intitulado "No love, no glory" — palavras mencionadas na letra da música.

No dia seguinte, enviei o artigo para o editor do periódico BioMed Research Journal, nos Estados Unidos, que estava sempre me convidando para escrever. Ele gostou tanto, que me "encomendou" mais quatro artigos com a mesma linha de pensamento. E assim foi o início da série, intitulada **No Love no Glory**, com um total de 12 artigos, todos publicados em 2023.

Eu os escrevi não como uma resposta movida por revolta, mas como expressão da necessidade profunda de transformar dor em significado, silêncio em reflexão e experiência em construção.



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Commentary Article: Open Access

Commentary on the Practice of Medicine: No Love, No Glory

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HOW IS IT TO BE A DOCTOR NOWADAYS, AFTER ALL?

I will try to give a “happy ending” to this article because we are badly in need of something to wish for or to dream about in the present medical world. “No love, no glory” is a sentence that is actually in the lyrics of the song “The blower’s daughter”, by Damien Rice (2002). While I was listening to it today, it all of a sudden inspired me to write this article. Before that, earlier in the day, I had been thinking about an embarrassing situation which I found myself in for prescribing a particular formula. Honestly, I think, we, medical doctors, should have a closer look on some inadequate “power of decision” in our profession which we supposedly chose with the upmost feeling of honor (and glory) a while ago - in my case, exactly 40

spiced salt, sea salt, Himalayan pink rock salt, salt flower, salt from seaweed, Kosher salt and, even for a few that have access to it, the sophisticated Maldon salt, loved by chefs and cooks all over the world. Never heard of it? Never mind. Just realize that we have quite a variety of options, let alone the enormous and surprising variety of spices and seasonings available which also add flavor to our food, such as rosemary, chive, parsley, coriander, dill, mint, basil, oregano, saffron, turmeric, curry, cardamon, star anise, cinnamon, ginger, nutmeg, paprika, chilli pepper, pepperoni pepper, black pepper, cayenne pepper, chimichurri, balsamic vinegar, apple cider vinegar, garam masala, dry garlic sprinkles, concentrated red onion powder, an endless list of them. They are all there, wide available. So, we can certainly rely much less on the “1953 refined salt” for our daily iodine

Este primeiro artigo questiona o que é ser médico nos dias de hoje. A reflexão final foi: “No love, no glory”.



Commentary on the Practice of Medicine (2) **Finding A Pearl Inside an Oyster**

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HEALTH OPTIMIZATION: A PRACTICAL APPROACH FOR HEALTH MAINTENANCE

When I wrote the first article of this series about the practice of medicine, it was really an impulse, a creative moment inspired by the listening of a song. True that I was feeling affronted about some accusations against me. But, like an oyster that makes a pearl to defend itself against an irritant "something" such as a parasite, I will also make a pearl out of the upsetting situations I found myself in and grab the opportunity to write about what I do as a clinical nutrition practitioner. The whole idea of my work is focused on health maintenance which is obtained through a continuous process of health optimization. You start by analyzing the patient preferably when he is still healthy and active in his twenties or thirties. We make a thorough nutritional, metabolic and hormonal evaluation to start with. At this point it is expected that most of his/her laboratory

Again, I was accused of violating the article 14 of the Brazilian Code of Medical Ethics, the same I mentioned in the first article of this series. Art. 14. Practicing or indicating medical acts that are unnecessary or prohibited by the legislation in force in the country. Now the problem was the prescription of selenium - which was considered unnecessary - in the same formula for optimization of thyroid hormones. But isn't selenium a prerequisite to prevent thyroid diseases and preserve overall health? A comprehensive invited revision on selenium - Selenium in human health and disease - was published in 2011 by Antioxidant & Redox Signaling (ARS), a leading peer-reviewed journal dedicated to understanding the vital impact of oxygen and oxidation-reduction (redox) processes on human health and disease [1,2]. There are surprisingly 435 references in this article what makes us feel that they have covered all the issues

Neste segundo artigo, questioneei a liberdade de atuação do médico.

Mencionei a Medicina Baseada em Evidências (Evidence-Based Medicine). Será que tudo que o médico faz precisa de ter algum grau de **evidência científica** referenciada em consensos, e demais publicações?

and/or differentiation through control of thyroid hormone activation and inactivation [1]. For example, compensatory increases in tissue DIO2 activity observed in iodine deficiency or hypothyroidism increased local T3 production [1,3]. Adequate selenium nutrition may thus be particularly important in cases of hypothyroidism to facilitate increased deiodinase activity in tissues [1,4].

I believe this text was very clarifying about the role of selenium in thyroid hormone metabolism. Nevertheless, the arguments against me were: 1) the prescription of selenium, and also the other components of the thyroid formula, is not based on a "consensus" - and it was cited "Practical clinical guidelines for the management of hypothyroidism (2013)", although I never said the formula was to treat hypothyroidism. Also, it was not found anything about the issue in Harrison's Textbook of Medicine (20^a. Edition); 2) according to a Cochrane systematic review - oddly enough, the reference was not provided - there is *no* evidence that selenium supplementation may have any effect on the thyroid function, as much as iodine, zinc and all the other components of the formula for optimization of thyroid hormones.

IN MY OWN DEFENSE: AGAINST A "COOKBOOK" MEDICINE

Firstly, I'd like to emphasize once more that I work with health optimization. I have hardly ever had any patient with frank hypothyroidism that was not already in use of thyroid hormone replacement therapy. The referred formula is prescribed for patients with intermediate levels of TSH - that is, still "normal, but not optimal"- which may improve with some supplementation of nutrients. Tyrosine, iodine,

to be prescribed at all. But If I do include selenium in the formula, I usually prescribe organic selenium 50 to 200 mcg (Se), based on my knowledge and experience, depending on: (a) the patient's initial test results; (b) on his/her diet or willingness to change it; and (c) on occupational exposure risk (e.g., metal recovery and paint production). In other words, I do not prescribe selenium "randomly", if you know what I mean. Last, but not least, as far as I know, we, medical doctors, are not supposed to prescribe only active components which have level of evidence A, or B, or C, or whatever, or based on some consensus or anything. That's what Evidence-based Medicine (EBM) makes clear to us. An interesting article published in 2011 [7] wrote that EBM is a reference of excellence to guide clinical decisions, the integration of own expertise with others' expertise and patient preferences, a way to improve medical practice and limit the variability and errors created when there is no evidence to identify the gold standard and differentiate among alternatives available". It goes further by saying that "it is not an old hat, a "cookbook" medicine perpetrated by arrogance to serve cost cutters, to suppress clinical freedom, a mandatory, deterministic, totalitarian practice of medicine, a way to control cost and to ignore patient preferences, a limit to personal/humanistic/individual medicine". How brave! Observe that this article was written in 2011, more than ten years ago. Since then, Nutrigenomics - the science that provides a genetic understanding for how common dietary components affect the balance between health and disease by altering the expression and/or structure of our genes - has greatly improved and, for that matter, a more Preventive, Predictive, Personalized and Pro-active Medicine is gradually finding its own way in clinical practice.

'A MBE é uma referência de excelência para orientar decisões clínicas, integrando a própria experiência do profissional com a experiência de outros médicos e as preferências do paciente.'

'Não é como um livro de receitas culinárias, muito menos deveria estar associada à arrogância para suprimir a liberdade clínica, impor uma prática médica mandatória, determinista, totalitária e ignorar as preferências dos pacientes.'

Concluindo, da minha parte, acredito que o mais importante é atuar na medicina com responsabilidade, integrando conhecimento e experiência.



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Commentary on the Practice of Medicine (9): The Symphony of Genes

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AWAKENING THE POWER OF THE NEW HUMAN STORY

The widely known Indian-American author, Deepak Chopra, a reference in alternative medicine, referred to Gregg Braden as "a rare blend of scientist, visionary and scholar with the ability to speak to our minds while touching the wisdom of our hearts" [1]. I very much admire people like Gregg Braden who are able to blend spiritual issues with "scientifically proven knowledge", awakening people to

complex than what we have ever thought. Needless to say that we are not talking about straightforward diagnoses, such as traumas, fractures and infections, but to more complex chronic conditions.

THE SYMPHONY OF GENES

I have been learning more about gene expression since 2017. It started to become clear to me that we have thousands of genes which work like members of a symphonic orchestra. At a particular moment, some are

Com este artigo, a **Sinfonia dos Genes** começou a tomar forma. E um caso clínico específico, diagnosticado previamente como esclerose lateral amiotrófica, teve um papel muito importante.

important achievements in the XXI century as far as health maintenance and prevention of diseases are concerned. Moreover, it is great that we can actually interfere on DNA methylation with nutrients/methyl donors and co-factors, such as methylfolate, methylcobalamin, methionine, choline, betaine, pyridoxine, riboflavine and others. Considering all this knowledge, suppose we have a patient with frontotemporal dementia: a dementia caused by degeneration of the frontotemporal lobe and clinically associated with personality and behavioral changes such as disinhibition, apathy, and lack of insight [5]. The hallmark feature of frontotemporal dementia is the presentation with focal syndromes, such as progressive language dysfunction, aphasia, or behavioral changes characteristic of frontal lobe disorders [5]. Nonetheless, the same patient was previously given the diagnosis of amyotrophic lateral sclerosis (ALS), a neurodegenerative disorder affecting primarily the motor system, but in which extra-motor manifestations are increasingly recognized [6]. According to a review article published in

Therefore, it seems that our patient has ALS with associated frontotemporal dementia. Nevertheless, can we be 100% sure that his dementia is only related to ALS? Have a look on **Table 1** [6]. What if, for instance, the genes CHCHD10, DCTN1 and VCP are involved? They are connected with many diseases, including ALS. Can we say that the patient's dementia has components of other known diseases? On the other hand, can you see that the "name" given to a disease is just a name when you work with genes? The more we know about genes, the more we realize that, in general, we should not give only one and definite diagnosis to more complex chronic conditions. The Human Phenotype Ontology (HPO) site makes the correlation between gene symbols and associated diseases in frontotemporal dementias [6], as shown below. The sources of information are Orphanet (ORPHA) [7], an online database to gather, provide and improve knowledge, diagnosis, care and treatment on rare diseases and Online Mendelian Inheritance in Man (OMIM) [8], a comprehensive, authoritative compendium of human genes and genetic phenotypes.

641

an "official" statement, that is, I didn't publish it anywhere or tried to convince someone of my own perception. It was just my point of view, regrettably mentioned to some colleagues, medical doctors as well. In the 5th article of this series, I wrote that I treated a patient with amyotrophic lateral sclerosis in the same way I do with all my patients, prescribing to him protection against inflammation, oxidation, glycation, acidification and sub-methylation, all of which are processes related to molecular damage, aging and diseases in the long run. His daughter came to my office because she needed more information. I gave her a vitamin supplement by a physician to get it from the public health care system and I felt I could contribute with more than what she asked me to do. In the end he lived another five or six years with much better quality of life than when we first met.

Table 1. Genes and associated diseases in frontotemporal dementias [6].

Gene symbol	Associated Diseases
ABCA7	(ORPHA:1020) - Early-onset autosomal dominant Alzheimer disease(OMIM:608907) - Alzheimer disease 9, susceptibility to
APP	(ORPHA:100006) - ABeta amyloidosis, Dutch type(OMIM:104300) - Alzheimer disease (ORPHA:324725) - ABeta amyloidosis, Arctic type (ORPHA:324703) - ABetaL34V amyloidosis (ORPHA:324708) - ABeta amyloidosis, Iowa type (ORPHA:324713) - ABeta amyloidosis, Italian type (ORPHA:1020) - Early-onset autosomal dominant Alzheimer disease(OMIM:605714) - Cerebral amyloid angiopathy, APP-related
C9orf72	(OMIM:105550) - Amyotrophic lateral sclerosis and/or frontotemporal dementia 1
CCNF	(ORPHA:803) - Amyotrophic lateral sclerosis
	(OMIM:619141) - Frontotemporal dementia and/or amyotrophic lateral sclerosis 5
CHCHD10	(ORPHA:457050) - Autosomal dominant mitochondrial myopathy with exercise intolerance(ORPHA:275872) - Frontotemporal dementia with motor neuron disease (OMIM:615911) - Frontotemporal dementia and/or amyotrophic lateral sclerosis 2 (ORPHA:803) - Amyotrophic lateral sclerosis (OMIM:615048) - Spinal muscular atrophy, Jokela type (ORPHA:276435) - Lower motor neuron syndrome with late-adult onset (OMIM:616209) - Myopathy, isolated mitochondrial, autosomal dominant
CHMP2B	(ORPHA:100070) - Progressive non-fluent aphasia(ORPHA:803) - Amyotrophic lateral sclerosis (OMIM:600795) - Frontotemporal dementia and/or amyotrophic lateral sclerosis 7(ORPHA:275864) - Behavioral variant of frontotemporal dementia (ORPHA:100069) - Semantic dementia
CYLD	(ORPHA:211) - Familial cylindromatosis (OMIM:605041) - Brooke-Spiegler syndrome (ORPHA:867) - Familial multiple trichoepithelioma (OMIM:619132) - Frontotemporal dementia and/or amyotrophic lateral sclerosis 8 (OMIM:601606) - Trichoepithelioma, multiple familial, 1 (OMIM:122700) - Cylindromatosis, familial
DCTN1	(OMIM:168605) - Perry syndrome (OMIM:105400) - Amyotrophic lateral sclerosis 1(ORPHA:803) - Amyotrophic lateral sclerosis (OMIM:607641) - Neuronopathy, distal hereditary motor, type VIIB(ORPHA:178509) - Perry syndrome
FUS	(ORPHA:275872) - Frontotemporal dementia with motor neuron disease (OMIM:608030) - Amyotrophic lateral sclerosis 6, with or without frontotemporal dementia(ORPHA:803) - Amyotrophic lateral sclerosis (OMIM:614782) - Tremor, hereditary essential, 4 (ORPHA:99967) - Myxoid/round cell liposarcoma (ORPHA:300605) - Juvenile amyotrophic lateral

Como afirmar que aquele paciente tinha “somente” esclerose lateral amiotrófica e a demência frontotemporal a ela associada?

Este artigo mostra como, sob a perspectiva de expressão genética, é muito difícil reduzir doenças crônicas a diagnósticos isolados.

Muitas vezes, o quadro geral do paciente parece conduzir para um diagnóstico ou outro, mas a interação entre os genes nos mostra que a complexidade entre eles é uma variação infinita de combinações, compondo a sinfonia genética, nutricional e metabólica que podemos... orquestrar.





Uma trajetória maravilhosa
Um passeio memorável
Uma viagem incrível

Commentary on the Practice of Medicine (10): A Remarkable Ride

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BETWEEN THE LINES

In the mornings I quite often indulge myself in a delightful smoothie prepared with collagen peptides, frozen "açaí" berry pulp, and ripe banana. The vibrant purple hue of the "açaí" berry, a small fruit native to Central and South America, is truly captivating. Indeed, "açaí" enjoys immense popularity in my country. It is rich in anthocyanins - a type of flavonoids - known for their antioxidant properties, particularly beneficial for eye health [1,2]. I buy these small bags with frozen "açaí" pulp from some organic producers nearby and they have the most impressive purple color I have ever seen. As I savor this nutritious blend, I feel like I am not just eating healthy, but, rather, "eating health". The subtle difference in wording holds a stronger connotation - one that goes beyond the mere act of consuming food. I am used to telling my patients that not only the foods themselves, but also the perception of eating something truly nourishing modulate positively our genes. Indeed, a healthy life is all about it: making good choices and enjoying them. Charm and pleasure are essential ingredients in my recipe for that. Although they may not be explicitly found in medical guidelines and textbooks, reading between the lines reveals their significance.

approach to life. In the end I am making something creative, positive, constructive, valuable, meaningful and rewarding out of provocative, insensitive, heartless, disrespectful, harmful, and stressful accusations. This time, I faced scrutiny over a seemingly innocuous comment I made about the Zone Diet, a dietary approach developed and advocated by Barry Sears, an esteemed American biochemist. Dr. Sears is renowned for founding and presiding over one of the pioneering biotechnology startup companies in Massachusetts, USA. In simple terms, being in the Zone means to be able to slow down the process of aging by reducing inflammation and increasing the repair of inflammatory damage to the body [3]. The result is decreasing the onset of age-related chronic diseases, resulting in the extension of our health span [3]. The Zone is actually a highly dynamic physiological state that hinges on the dietary choices we make [3]. Dr. Sears's website asserts that our blood can provide valuable insights into whether we are successfully in the Zone or not [3]. In the post, I said that in 2001 I was given a book as a present, "The Wrinkle Cure: Unlock the Power of Cosmeceuticals for Supple, Youthful Skin" [4], written by Dr. Nicholas Perricone, an American dermatologist and anti-aging expert. In his book, Dr. Perricone highly recommended the reading of Dr. Sears's

Este artigo comenta sobre o filme *About Time*, uma comédia romântica britânico-americana de 2013. Ela nos traz esta mensagem: “Estamos todos viajando juntos através do tempo, todos os dias de nossas vidas. **Tudo o que podemos fazer é dar o nosso melhor** para aproveitar essa jornada.”

preventing age-related diseases and preserving good health status as we grow older [31].

2. It is a flexible way of eating that allows for variety. This plan is usually popular with strength and endurance athletes, high intensity cross fit athletes, and those who

insights while respecting diverse perspectives on the path to wellness.

AN EXTRAORDINARY, ORDINARY LIFE

"About time" is a 2013 British-American romantic comedy-

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648

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drama film written and directed by Richard Curtis, and starring Domhnall Gleeson, Rachel McAdams and Bill Nighy [40]. A sweet movie, really. Close to the end, it gives us this message: "We're all traveling through time together every day of our lives. All we can do is do our best to relish this remarkable ride" [40]. And that's what I have been trying to do and what I propose to you with my articles. I truly believe that it influences positively the expression of our genes towards health. Don't think you can get away with it. Because you can't. Nobody can. We'd better do our utmost to spread good seeds along the way because it's the only chance we have to get good harvest back. In the medical world too. Make ours a really remarkable ride. With love and glory.

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GeneFood propõe exatamente isso: é melhor nos esforçarmos para **espalhar boas sementes** ao longo do caminho e colher bons frutos de volta. No exercício da medicina também. Fazer dele uma trajetória realmente extraordinária.

Que vocês tenham **entusiasmo** para participar deste curso, porque é ele que nos impulsiona a aprender, a crescer, a cuidar e a transformar.

Entrem para este **campo vibracional** para que possamos construir, juntos, uma sociedade menos caótica, mais organizada, mais harmoniosa, e que isso possa refletir em mais saúde e bem estar para todos nós.



Obrigada



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