



Eating a bowl of leafy green and cruciferous vegetables like spinach, kale, and broccoli may be good to ward off the risk of heart attack and stroke, particularly in elderly women. A team of researchers from the Edith Cowan University (ECU), the

University of Western Australia, and the Danish Cancer Institute found that leafy green vegetables -- rich in Vitamin K1 -- may help prevent atherosclerotic vascular diseases (ASVDs). ASVD is a subgroup of cardiovascular diseases --

A bowl of spinach, kale and broccoli may boost heart health in elderly women

the leading cause of death worldwide, primarily due to heart attacks and strokes. It causes plaque to build up inside the arteries, potentially leading to cardiovascular problems. The research conducted in 1,436 elderly women showed that a higher dietary intake of Vitamin K1 could reduce the risk of ASVD. In addition, Vitamin K may also be beneficial for mus-

culoskeletal health, through its impact on bone strength. Notably, a higher Vitamin K1 intake also leads to less thickening of blood vessels in the neck -- a marker of atherosclerosis. "Leafy green and cruciferous vegetables, like spinach, kale, and broccoli, contain Vitamin K1 which may assist in preventing vascular calcification processes that characterise

cardiovascular disease. The great news is that these vegetables can be easily incorporated into your daily meals" said Montana Dupuy from ECU. ECU Senior Research Fellow Dr Marc Sim noted that a cup and a half of such vegetables is an easy way to increase our daily vitamin K1 intake and may lower our risk for cardiovascular disease". "This research found

women who consumed approximately 30 per cent higher intakes of Vitamin K1 had lower long-term risk of ASVD," he said. As the research provided key evidence to support future studies, the team is now creating new foods that pack more leafy greens that are rich in Vitamin K1, to be used in communities with special nutritional and dietary requirements, such as aged care residents.

These Are the Best and Worst States for Mental Health Care in the U.S.



Where you live may determine the kind of mental health care you can access.

For instance, if you're in Vermont, you're in good shape, but if you're in Texas, not so much, according to Forbes Advisor Health Insurance, which analyzed seven data points to reveal the worst states for mental health care.

For the second year in a row, Texas tops the list of worst states due to having a large population of uninsured adults with mental illness and having significant barriers to mental health resources. Vermont ranks as the best.

Six of the top 10 worst states for mental health care are located in the South, whereas five of the top 10 best states for mental health care are in the Northeast.

"Research reports that mental health care is significantly influenced by a person's beliefs and their place of residence, with urban and northern states having more positive overall mental health," Deborah Serani, PsyD, psychologist and professor at Adelphi University, told Healthline.

The top 5 states for the worst and best mental health-care

Below are the top rankings, according to Forbes Advisor Health Insurance.

Worst States for Mental Health Care
Texas
Georgia
Alabama
Florida
Mississippi
Best States for Mental Health Care
Vermont
Connecticut
Rhode Island
Pennsylvania
Massachusetts

The disparity between the South and the Northeast underscores the need for more investment and attention to mental health infrastructure in the most underserved states, said Jason Metz, lead insurance editor at Forbes Advisor.

"It's a positive federal policy that health insurance plans cover mental health, but the study emphasizes significant gaps still exist when it comes to regional access to care," he told Healthline.

Why Texas ranks the lowest for mental health care
Texas tops the list as the worst state for mental health care for the second time in two years due to a combination of factors that create significant barriers to accessing treatment, said Metz.

"The state has a high rate of uninsured adults with mental health illness, 21.4%, the second highest in the U.S. Additionally, nearly 75% of youth with depression do not receive mental health services, and 19.4% of youth with private insurance lack coverage for mental health problems," he told Healthline.

Financial barriers also factor into the ranking, with nearly one-third of those with a mental illness unable to afford a doctor's visit.

"Texas has a limited mental health infrastructure, ranking the third lowest in the number of treatment centers, with only 8.4 per 10,000 businesses," said Metz. "Overall, two-thirds (62.3%) of adults with mental illness in Texas go untreated, highlighting the state's challenges in mental health care."

Serani noted that socio-cultural beliefs with regard to mental health care also play a part. Statistically speaking, she said people who live in the South tend to have beliefs that seeking help for mental health suggests personal weakness and would harm their reputations.

"Clinically called public stigma and self-stigma, these assumptions prevent others from getting the help they need," she said.

Why Vermont ranks highest for mental health care
Vermont has great access to services, comprehensive insurance coverage, and strong support for mental health initiatives, said Metz.

"The state has a well-developed mental health care system, with 34 treatment centers per 10,000 businesses—only bettered by 4 states," he said. "Vermont also has lower rates of uninsured individuals with a mental illness (6%), with more residents having health insurance that covers mental health services, reducing financial barriers to care."

The state also has one of the lowest percentages of untreated mental illnesses (43%), demonstrating its healthcare system's ability to meet the mental health needs of its population.

Reduced stigma around mental health may also have influence, noted Serani.

"People in the Northeast are socialized in ways that asking for help is not viewed as a vulnerability, so mental health care and treatment are accessed more," she said.

Does stigma affect how well states treat mental health care?

Sarah Davis, senior managing editor at Forbes Health, said while the stigma traditionally associated with mental health conditions is beginning to dissipate, it still exists and can impact insurance coverage.

She pointed to a 2024 study Trusted Source in The Lancet that found structural stigma of mental health disease refers to the "inequitable deprioritization, devaluation, and othering of mental health and substance misuse health (compared with physical health)" in healthcare systems.

"The study notes an example of this as a hospital emergency department having a patient-to-nurse ratio of 3:1 for physical health patients but a 6:1 ratio for mental health patients," Davis told Healthline.

The 2008 Mental Health Parity and Addiction Equity Act requires certain health plans to provide physical and mental health benefits equally.

"[But] the National Alliance of Mental Health points out parity laws mean nothing if there are factors like inadequate provider network coverage in certain geographical areas, which you can see in our survey findings," said Davis.

What to consider when choosing a mental health insurance plan

To ensure proper coverage, Metz said consider the following.

Confirm the health plan covers local mental health providers

If you have a provider in mind, it's always best to confirm it's in-network with the plan you're considering.

"In-network versus out-of-network providers will make a difference on how much you pay for care," Metz said.

No lasting impact of the COVID jab

Covid-19 vaccines do not cause significant metabolic changes, easing concerns about potential long-term side effects, according to a study on Monday. The research led by researchers from Murdoch University in Australia followed 33 participants over 480 days, tracking 167 metabolic markers across 28 time points, Xinhua news agency reported. The

results showed no meaningful impact on key health indicators, including inflammatory markers, cardiovascular risk factors, and molecules involved in energy metabolism.

"This real-world study shows that Covid-19 vaccines are safe and don't cause significant metabolic changes," said lead author Ruey Leng Loo, Associate Professor at the

varsity. "Our findings help counter misinformation and support confidence in vaccination," Loo said. Published in the Journal of Molecular Medicine, the research compared vaccinated participants with a control group who had never contracted Covid, as well as individuals who had experienced mild infections. The metabolic profiles of vaccinated indi-

viduals closely matched those of the control group, further indicating that vaccines do not trigger major biological shifts, the study said. Metabolic markers, including 34 cytokines, 112 lipoproteins, and 21 low-molecular-weight metabolites, remained largely stable post-vaccination. While a slight, temporary increase in the inflammation-related

marker Chemokine IP10 was observed after the third dose, levels remained within the normal range and returned to baseline before subsequent vaccinations, Loo said. In contrast, even mild Covid infections were found to cause more pronounced metabolic disruptions than vaccination, she said. The expert noted that multiple doses do not produce the same biological disturbances seen after infection. "While mild SARS-CoV-2 infections can cause

more pronounced metabolic changes, the temporary fluctuations we observed after each vaccination were minor in comparison," Loo said. "These findings offer further reassurance to those hesitant about vaccination, demonstrating that multiple doses do not cause the same biological responses as the Covid-19 infections. Although the results are promising, the team stressed the need for further research with larger and more diverse groups.

'Real Housewives' Star Vicki Gunvalson Shares Details of Near-Fatal Health Scare Following Misdiagnosis

Real Housewives of Orange County's Vicki Gunvalson spoke recently about a health scare that she went through earlier this month.

On an episode of My Friend, My Soulmate, My Podcast, she shakily told host Christian Gray Snow that she had nearly died.

The reality star explained that she was having her boyfriend Michael Smith join her because she had experienced amnesia and couldn't remember all of the events that had occurred.

"Michael's going to come in when I get blank," she said.

Gunvalson then went on to relate how she had gotten her hair done and then went to the office on the day that it happened.

When she arrived at the office, Smith's daughter Olivia, who worked there, was the first to notice something wasn't right, she said.

She told the businesswoman that she was "speaking gibberish" and that an email she was typing didn't make sense.

Luckily for Gunvalson, the client she was meeting with, who happened to be an emergency room doctor, suggested that she might be having a stroke, prompting her boyfriend's daughter to take her to the hospital.

"And so, really, from that point on, I don't recall much," she said, breaking into tears. She went on to reveal that the hospital "misdiagnosed" her with a sinus infection and released her that night.

Taking over, Smith told Snow that about three weeks earlier, Gunvalson had gotten on antibiotics to treat a sinus infection that was taking longer than usual to go away.

Smith then discussed coming home and finding the star "passed out" in the bathtub, after which he put her in bed to allow her to rest.

When he woke her "about 13-14 hours later," Smith said she was "so discombobulated" that he was afraid she was having a stroke.

This led to a quick trip to the hospital, where she was diagnosed with pneumonia

and sepsis and was given what Gunvalson recalled as a "10% to 20% [chance] of survival."

After hospitalization and treatment with multiple antibiotics and steroids, Gunvalson is now home. However, she said that she is still low on energy. "I'm having a hard time getting it up. So that's my biggest thing," she said.

What is sepsis?

Dr. Steve R. Fallek, who is a board-certified plastic surgeon and Medical Advisor to the Maskad and Revivv brands, explained that sepsis is a life-threatening condition that occurs when an infection causes widespread inflammation.

"This inflammation can trigger a cascade of changes that damage multiple organ systems, leading them to fail, sometimes resulting in death," he explained.

Fallek added that any type of infection — whether it's bacterial, viral, fungal, or parasitic — can potentially lead to sepsis.

If a person is experiencing sepsis, the symptoms can vary, he said, but generally, people will have a combination of the following:

- High fever or very low body temperature
- Rapid heart rate
- Rapid breathing or shortness of breath
- Confusion or disorientation
- Extreme pain or discomfort
- Clammy or sweaty skin
- How can sepsis happen?

"Sepsis can happen when an infection that is not properly managed spreads into the bloodstream or throughout the body," said Fallek.

"This triggers an immune response that, instead of only attacking the infection, also damages healthy tissues and organs," he said.

Among the conditions that can cause sepsis are pneumonia, urinary tract infections, abdominal infections, and blood infections.

Having a weakened immune system, chronic illnesses, recent surgery, or hospitalization, particularly in intensive care units, can also set the stage for sepsis to occur, according to Fallek.

'Vampire Facials' Linked to 3 HIV Cases, CDC Says: What to Know

A new investigation led by the Centers for Disease Control and Prevention (CDC) warns of potential HIV transmission through cosmetic services using needles.

The April 25 report Trusted Source links three HIV cases in women who received so-called "vampire facials" at an unlicensed medical spa in New Mexico. The procedure involves drawing blood from a client and injecting the separated platelet-rich plasma into the face.

The transmission of HIV at "spa A" in New Mexico occurred via contaminated blood from an undetermined source, the report found. The cluster of HIV infections occurred in people with no known HIV risk factors.

"Although transmission of HIV via unsterile injection practices is a known risk, determining novel routes of HIV transmission among persons with no known HIV risk factors is important," the report stated.

The investigation tracked current and former spa A clients who received new HIV diagnoses from 2018–2023. The report identified 59 clients considered at risk for HIV exposure (20 received vampire facials, and 39 received other injection services, such as Botox). The three HIV diagnoses were reported to the New Mexico Department of Health by clinicians.

The CDC report marks the first documented cases of

HIV transmission through nonsterile cosmetic injection procedures.

The authors of the report say clinicians ought to consider cosmetic injection procedures like vampire facials as a possible risk factor for HIV transmission. Spa facilities offering these procedures can prevent HIV transmission through adequate infection control practices, the report authors said.

"Requiring adequate infection control practices and maintenance of client records at spa facilities offering cosmetic injection services can help prevent the transmission of HIV and other bloodborne pathogens and ensure adequate trace-back and notification in the event of adverse clinical outcomes, respectively," the authors wrote.

What is a vampire facial?

Vampire facials, or platelet-rich plasma (PRP) with micro-needling, is a simple, minimally invasive nonsurgical cosmetic procedure performed by dermatologists and cosmetic surgeons at licensed facilities and medical spas.

In many cases, vampire facials performed at medical spas may be more cost-effective than those performed at a cosmetic surgeon's office.

A vampire facial involves drawing blood from the client and separating the platelet-rich plasma with a centrifuge before injecting the plasma back into the face with tiny needles.

Deadly blood cancer can now be detected early with blood test: Study



A team of Israeli and US researchers have developed a simple blood test that can detect a person's risk of developing leukaemia -- a deadly blood cancer.

In the study, published in the journal Nature Medicine, the researchers suggested that this test may replace the current more invasive method of bone marrow sampling used to diagnose certain blood cancers, Xinhua news agency reported.

The team led by researchers from Weizmann Institute of Science in Israel focused on myelodysplastic syndrome (MDS) -- an age-

related condition in which blood-forming stem cells do not develop properly.

MDS can lead to severe anaemia and may progress to acute myeloid leukaemia, one of the most common types of blood cancer in adults.

Currently, diagnosing MDS requires the bone marrow sampling procedure that involves local anaesthesia and can cause significant discomfort and pain.

The team discovered that rare stem cells, which occasionally leave the bone marrow and enter the bloodstream, carry crucial information

about early signs of MDS.

Using advanced single-cell genetic sequencing, they were able to analyse these cells from a standard blood sample and detect warning signs of disease.

The researchers also found that these circulating stem cells can act like a biological "clock," offering insights into a person's chronological age.

In men, these cells change earlier than in women, which may help explain why blood cancers are more common in males. "The researchers also discovered that the

migrating stem cells can serve as a clock for our chronological age, and that in males, their population changes earlier than in women in a way that increases the risk of cancer. This finding may explain the higher prevalence of blood cancers among men," said Dr. Nili Furer, from Weizmann.

The researchers believe this blood test may also help identify other age-related blood disorders in the future.

They noted that the findings are being tested in a large-scale clinical trial at multiple medical centres worldwide.