

# **FRACTURE-PROOF YOUR BONES**

**A COMPREHENSIVE GUIDE  
TO OSTEOPOROSIS**

**STUDY GUIDE & WORKBOOK**

**JOHN NEUSTADT, ND**

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# A Note from Dr. Neustadt

I've devoted the lion's share of my career to finding out how bones work, which conventional and integrative approaches are most effective and how you can reduce your fracture risk. And now I'm giving all I've learned to you.

Those are the words of I wrote in my book's Introduction. I wrote *Fracture-Proof Your Bones: A comprehensive guide to osteoporosis* because I wanted to arm you with the best-available information to create a holistic bone health program that will help you maintain stronger bones.

I've heard from thousands and thousands of you how my blogs, videos, medical lectures, articles and books have expanded how you think about your health and your possibilities. And it's not just your health successes you've told me about. You've shared how using my information and products have unlocked more energy, more hope and made you more confident about taking your health to new heights.

When I sent out the book's draft manuscript to reviewers, they repeatedly asked me to create a study guide so people can download the Take Action forms, diet handouts and questionnaires, share them with their doctors and track their progress. I'm thrilled to give you this Study Guide and Workbook so you have a place to work through and put into action all I teach you in my book.

If you've downloaded this without the book because you think you can short cut your way to learning all I have to teach you, you're selling yourself short. Not every chapter in the book contains a Take Action section at the end, so those aren't represented in the workbook. However, every chapter in the book contains valuable information that can't be missed if you really want to do all you can do to reduce your fracture risk.

Since there's an up to 40% chance you'll die within a year of breaking your hip, and if you survive there's about a 50% chance that you'll never regain your full mobility, investing in buying the book so you can protect yourself is a no brainer. There are no short cuts. But what I can provide you is a blueprint on how to focus your time, attention and financial resources to build health with more confidence. And your purchase of the book supports charities that empower the health and education of women and children. #winwin

So grab your copy of *Fracture-Proof Your Bones* and focus on building your life-changing, total bone health program. Keep sending me pictures and tagging me on social so I can see your progress. I can't wait to cheer you on. And just like my book, I hope you return to this tool again and again to restart, refresh and recommit to your health. Because we all need that.

To your health!



Dr. John Neustadt, ND

**The good news is that while there's nothing you can do about your past, most of the risks can be reduced if you're willing to put in the work.**

# Know Your Risks

This chapter in the book is all about understanding threats to your health so you can take action to protect yourself. I identify risks that are in your control and those that aren't, so you know what to focus your time, energy and money on. Fortunately, you can change most risks.

The Take Action section in this chapter focuses on one of those risks: Your home. If you can fracture-proof your house yourself, fantastic! If not, find someone to do it. You can search for a handyman through [homeadvisor.com](http://homeadvisor.com) (I have no relationship with this company) or another company. Local service agencies such as Jewish Family Services (JFS), churches and community centers are great resources for finding help. If you're short on cash or on a fixed income, these organizations may be able to find donated materials and labor for you. Sometimes construction companies partner with service organizations to give back to their communities, and the nonprofit may have help readily available for you.

Don't be intimidated to reach out to a religious organization even if you're not affiliated with them or even from their same religion. What I've found is that community service organizations of all types are filled with people who want to help their neighbors and their communities. So call your local house of worship or community center and ask if they can help, or if they can point you in the right direction to get you the help you need.

Before you tackle this project, however, it's important to know what needs to be done. To get the ball rolling, I'm providing a list of questions. Your answers will help you get organized for doing the project yourself or will be needed when describing the job to someone else.

## Handrails and Steps

- Do you have loose steps? \_\_\_\_\_
- Loose handrails? \_\_\_\_\_
- Where? \_\_\_\_\_
- How many? \_\_\_\_\_
- What material are they (eg, wood, concrete)? \_\_\_\_\_
- Do you need help fixing any handrails or steps? \_\_\_\_\_

## Throw Rugs

- Do you have throw rugs in your home? \_\_\_\_\_
- Where? \_\_\_\_\_
- Do you need help getting rid of them? \_\_\_\_\_
- How will you get rid of them (eg, donate, store, sell, throw away)? \_\_\_\_\_

## Lighting

- Do you need more lighting along common walkways in your house? \_\_\_\_\_
- Where (eg, stairs, living room, hallway, etc.)? \_\_\_\_\_
- How many lights do you think you'll need (more is better)? \_\_\_\_\_
- Where will you purchase them? \_\_\_\_\_
- Do you need help buying or installing them? \_\_\_\_\_

## Obstructions in Walkways

- Do walkways have furniture in them you can trip over or other obstructions? \_\_\_\_\_
- What type of furniture is it (eg, coffee table, end table, couch, chair, etc.)? \_\_\_\_\_  
\_\_\_\_\_
- How many pieces of furniture? \_\_\_\_\_
- Do you need help rearranging or getting rid of any furniture? \_\_\_\_\_

## **Grab bars**

- Are any existing grab bars loose and need to be tightened? \_\_\_\_\_
- How many bathrooms need new grab bars installed? \_\_\_\_\_
- How many total grab bars need to be installed? \_\_\_\_\_
- How many existing grab bars need to be tightened? \_\_\_\_\_
- Do you need help fixing or installing grab bars? \_\_\_\_\_



**Up to 30% of osteoporosis cases in postmenopausal women come from external causes, such as medications, instead of the drop in estrogen that comes with menopause. And in premenopausal women and men it's up to a staggering 50%.**

# The Danger in Your Medicine Cabinet

Check all your medication, both prescription and over-the-counter.

**Write down all your medications that are listed in Chapter 5, Table 1 in the book.**

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**Write down all your medications not listed in the table.**

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Call your doctor and request a medication review. Before your appointment, take all your medications to your local pharmacy and ask your pharmacist to check if any of the medications cause osteoporosis or increase your risk for falls or fractures. This will give you a list of medications of concern to bring to your appointment.

**If your doctor hasn't evaluated your medications or other diagnoses and whether they can be causing your problem, this needs to be done before you're sent off with another prescription.**

# Osteoporosis Meds 101

If you have a doctor's appointment, make sure to have your questions written down in advance. It can be difficult to remember all the questions, so make sure you're prepared. Print this out, answer the questions and take it with you to your appointment.

If you're taking an osteoporosis medication and are now wondering if it's the right choice, call your healthcare provider and make an appointment to discuss it. If you're going to a doctor's appointment to discuss osteoporosis and you're not taking a medication, most likely this topic will come up.

## Questions to ask your doctor:

1. What kind of osteoporosis do I have (eg, postmenopausal osteoporosis, medication-induced osteoporosis)? \_\_\_\_\_
  
2. If my osteoporosis is caused by a medication....
  - a. which one? \_\_\_\_\_
  
  - b. can I lower the dose, discontinue the medication or switch to a safer one? \_\_\_\_\_  
\_\_\_\_\_
  
3. Has the osteoporosis medication been shown in clinical trials to prevent fractures in someone with my diagnosis (eg, postmenopausal osteoporosis or medication-induced osteoporosis)? \_\_\_\_\_
  
4. Have you ever had an osteoporosis fracture? \_\_\_\_\_
  - a. If your answer is No, has the medication been shown in clinical trials to work for primary fracture prevention? \_\_\_\_\_
    - i. If No, ask your doctor why they're recommending the medication.

ii. **If Yes**, which fractures does it prevent (eg, vertebral, hip)? \_\_\_\_\_

If the medication doesn't prevent both vertebral and hip fractures, ask your doctor what they can recommend to give you greater fracture protection.

b. **If your answer is Yes**, has the medication been shown in clinical trials to work for secondary fracture prevention? \_\_\_\_\_

i. **If No**, ask your doctor why they're recommending that specific medication.

ii. **If Yes**, which fractures does it prevent (eg, vertebral, hip)? \_\_\_\_\_

If the medication doesn't prevent both vertebral and hip fractures, ask your doctor what they can recommend that will give greater fracture protection.

5. How would I take the medication and how frequently (eg, standing up, orally, injection, infusion)? \_\_\_\_\_

6. What are the potential side effects and the percentage of people who experience them? (If your doctor doesn't know off the top of their head, ask for the drug package insert. This information is listed in Sections 5 and 6 of the FDA-required package inserts.) \_\_\_\_\_

7. How long will you have to take the medication? \_\_\_\_\_

8. What's the long-term plan? When you're done taking it, will you stop all osteoporosis medications or be switched to a different one? (If the doctor wants to switch you to a different one, then ask these same questions about the additional medication.) \_\_\_\_\_

**Researchers looked at dietary patterns of postmenopausal women and found that those who more closely followed a Mediterranean Diet had an incredible 20% decreased risk of hip fractures.**

# The Osteoporosis Diet

In this chapter I reviewed the data on the healthiest way of eating that's been shown to reduce fracture risk by 22%. It's essentially a plant-forward diet with adequate protein to maintain muscle strength.

To know how much protein you should be eating, all you have to do is make a simple calculation based on your weight. Unless your doctor has put you on a low-protein diet for some reason (eg, you have kidney failure), my research-based recommendation is to shoot for 1.3 g of protein per kilogram body weight per day. Here's a simple way to determine how many grams to eat.

1. Convert your body weight from pounds to kilograms. To do this, take your body weight in pounds and divide it by 2.2.

**I weigh:** \_\_\_\_\_ **kilograms.**

2. Next, take your weight in kilograms and multiply it by 1.3. The result is the minimum number of grams of protein you need to eat each day. Round up or down to the nearest whole number to make it easier.

**I will eat:** \_\_\_\_\_ **grams of protein per day.**

For dietary fiber, the general recommendation is to consume a minimum of 30 gram so total dietary fiber per day. And since fiber is found in plants, focusing on eating more plants will naturally increase the amount of fiber you're eating

Now that you know your goals, before changing your diet, you'll want to understand how much protein and fiber you're currently eating.

## **Step 1. Calculate Where You're At**

Use the handy Plants and Protein tables in the Appendix to get an idea of how many grams of fiber and protein you're eating now. Use the Food Log below, take a piece of paper, keep a Note on your phone or download and use one of the many food tracking apps. Write down everything you eat for two days.

At the end of each day, estimate how many grams of total fiber and protein you ate. If it's a packaged food, look on the Nutrition Facts Panel and estimate the amount from there. Make sure to consider the serving size.

For example, on the Nutrition Facts panel of a can of kidney beans, the serving size is half a cup. Each serving provides 7 grams of protein and 8 grams of dietary fiber. If I eat half a cup of kidney beans, I'll log those amounts in my tracker.

When you've completed your two days of tracking your diet, you'll have your baseline and know what to increase and by how much.

## **Step 2. Transition into Eating This Way**

Now you can start transitioning into your new eating lifestyle. Most of the time people find that eating more plants and protein is a big change. It might require shopping differently (including doing most of your shopping in the outermost aisles of the store), cooking differently and perhaps using different herbs and spices. Check your mindset and approach it as a fun way to explore new flavors, feel more vibrant and look better. This will make it easier for consistently move your diet in the right direction.

I like to tell people to transition over six weeks because major changes done overnight tend to be unsustainable long-term. People like to have something to look forward to, especially during the transition. So, try following this for six days a week, and on the seventh day eat whatever you want. What you'll discover is that as you're feeling healthier and getting leaner, but on the seventh day when you go off the diet and are eating like crap, you'll feel like crap too.

You'll also notice that your taste buds will change. Since you'll be eating less refined sugar, you'll taste more of the natural sweetness in fruits and some vegetables. Your taste buds and your body will adapt to this way of eating, and you'll start to crave healthy, nutritious foods that your body thrives on.



### **Step 3. Develop a New Habit**

As you're developing your new eating habit, rely on the Plants and Protein tables in the Appendix and be diligent about calculating the amounts you're getting. But only for a little while. The tables are tools to help you do that. I don't want you to have to rely on handouts the rest of your life. The goal is to develop an intuitive sense of what it means to eat healthy. I want you to develop the intuition that as you're cooking or looking down at your plate, you know when you're doing it right. Once you know how to eat like this, you can simply stick the handouts in a drawer, or better yet share them with a friend and help them.





**Moderate physical activity is associated with decreasing hip fracture risk by 45%. That's better than bisphosphonates.**

# Too Fit to Fracture

Answer these questions to help you get organized and get started.

**Write down as many activities you can think of that you love:**

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**Which activities can you do by yourself?**

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**Which require a class?**

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**If any of your activities are done in a class, write down the name of the studio and the class. If you don't know a place that offers what you need, find it now.**

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**Which activities do you want to do with a friend? Write them down, along with the friend's name.**

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If you want to exercise with friends or your partner, call or text them now. Seriously. Stop reading and reach out to them now. Then add your exercise to your calendar for the next week so you know exactly what, when and where you'll exercise.

**One of the biggest reasons people feel stressed is because they don't deal with issues that are bothering them. Avoiding the problem doesn't make it go away.**

# Find Your Zen

Like with exercise, when it comes to reducing stress, you've got lots of options. Some of them are relatively easy, like getting out into nature more. Others, like dealing more effectively with problems and cutting an addiction to multitasking, may require more time and effort. Making stress reduction a non-negotiable priority is the first step.

Focus on creating these healthy habits in your life by working on them every day. Once they become part of your life, they'll be easier to do. When that happens, build on that success and pick another one.

**Write down three things now that you'll commit to doing to de-stress:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_



**Sleep consistency—going to bed every night and training the body when it's time to go to sleep—is crucial for high-quality sleep.**

# Catch Some ZZZs

To improve sleep, I've found that a combination of approaches gives the best results. Each person is different, so be patient as you try different things and discover what works for you. Know that over time what you need may also change.

Some strategies are relatively easy, like simply drinking less at night before you go to bed, turning the thermostat down to a comfortable sleeping temperature and eliminating foods that can cause snoring. Others will take more time and patience. As with all areas of your health, I encourage you to see this as a process that you will keep exploring until you discover what works best for you.

**Now, write down three things that you'll commit to right away to improve your sleep:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Once you've accomplished the things on your list, write down three more and get to work on those. Keep doing this until you've figured out the best combination that gives you the sleep you need.**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**To get vitamin D into the optimal range of 50-60 ng/mL, you may need to take at least 5,000 IU (125 mcg) of Vitamin D3 per day.**

# Dietary Supplements

If you take a bone health dietary supplement, grab the bottle now. Compare the ingredients listed in the product's Supplement Facts Panel with those in Chapter 11.

For bone health, my approach is to keep it simple. Take nutrients shown to reduce fractures; however, since strontium can create some health risks, cause false bone density test results and may interfere with calcium absorption, you're best to avoid it.

The most targeted nutrients for bone health are MK4 (45 mg/day), calcium and vitamin D3. Those nutrients have been shown to grow stronger bones, reduce fractures and have excellent safety profiles. The dietary supplements, Osteo-K and Osteo-K Minis, that I created for my patients, contain these nutrients in the doses used in clinical trials. I formulated them in 2006 when I couldn't find what I needed to help my patients.

In addition, collagen is an important nutrient for maintaining strong bones. While collagen hasn't been shown in clinical trials to reduce fractures, the fact that we know its importance for bone strength, that it was shown to promote faster bone healing and that it promotes healthy bone metabolism, I suggest people also take collagen.

**Science has caught up with what religions and societies have known for thousands of years—being good to others is good for us.**

# Social Support

Like the African proverb says, “If you want to go fast, go alone; but if you want to go far, go together.”

This means that you need to find your people. If you’ve already got a strong network that supports you and builds you up, then fantastic! If you don’t, work toward finding even just one or two people who can support you. But it’s not a one-way street. You should also build them up and help them too. That’s why I recommend people find a workout partner, or someone who they can cook with or do other healthy activities together.

**Do you feel like you have fantastic social support?** \_\_\_\_\_

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**Are you feeling isolated because you don’t have enough people in your life, or that the people in your life aren’t the right ones for the support you need now?**

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If you’ve got people in your life, but they’re not building you up and supporting you in ways you need, deal with it. Remember what I wrote in Chapter 9 about dealing with problems and not letting them fester? Well now’s your chance to do that. Tell people what you need from them and how you’d like to be treated. And if they can’t do that for you, find others who can.

If you’re socially isolated or simply want to connect with more people, join a club or volunteer.

**Which activities would be fun and meaningful for you to do that could also increase the number of people you meet?**

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Whatever you wrote in the blank line, reach out right now and make a plan to get started.

# Appendix A: Plants and Protein

## Plants

Plants contain fiber that helps regulate your blood sugar, promotes healthy gut bacteria, helps you feel full longer and bulks up your stools for healthy poop. The two main types of fiber are soluble and insoluble fiber. To get a healthy mix of fibers and other important plant nutrients, eat a rainbow a day of richly colored fruits, vegetable, grains and legumes.

The goal is to eat at least 30 grams of total dietary fiber a day. Here are some tips:

- Include fruits and vegetables in your diet. Increase vegetable consumption to at least three servings per day. Increase fruit consumption to at least two servings per day.
- Snack on fresh fruits and vegetables in place of sugary or refined foods.
- Increase whole grain consumption to at least four servings per day. Include oats, brown rice, bran, quinoa, barley and whole wheat. Choose whole grains and avoid white flour products.
- Add oat bran, wheat germ or rice bran to hot cereal or yogurt.
- Add bran cereal or oatmeal to meat loaf, meatballs or hamburgers.
- Eat legumes daily. Replace creamy dips and spreads with bean dips or spreads such as hummus, black bean dip or refried beans.

Since increasing your fiber too quickly can create gas and bloating, work up to the recommended amount over a week or two. Making sure you're drinking plenty of water—at least 8 glasses per day—can help you avoid the discomfort that can occur with a sudden increase in fiber.

<b>Fruits</b>	<b>Serving Size</b>	<b>Total Fiber (grams)*</b>
Apple, with skin	1 medium	4.1
Banana	1 medium	3.1
Pear, with skin	1 medium	5.5
Orange	1 large	4.4
Prunes, pitted and dried	1 cup	12.4
Strawberries, halved	1 cup	3.0
<b>Vegetables</b>		
Broccoli, cooked	1 cup	5.5
Carrots	1 large	2.0
Corn, yellow	1 cup	12.0
Kale, cooked	1 cup	2.7
Potato, baked with skin	1 medium	4.0
Spinach, cooked	1 cup	5.5
Swiss chard	1 cup	0.6
<b>Beans, legumes, nuts and seeds</b>		
Black beans, cooked	1 cup	11
Garbanzo beans, cooked	1 cup	12
Green peas, cooked	2/3 cup	3.9
Kidney beans, cooked	1 cup	13
Lentils, cooked	2/3 cup	4.5
Lima beans, cooked	1 cup	13
Pinto beans, cooked	1 cup	14
Peanut butter, chunky	2 tbsp	1.5
Psyllium seeds, ground	1 tbsp	6.0
Refried beans, Amy's® vegetarian	1/2 cup	6.0
<b>Nuts &amp; Seeds</b>		
Almonds	1 cup	18
Almond butter	2 Tbsp	3.3
Cashews	1 cup	4.0
Peanut butter, chunky	2 Tbsp	2.5
Peanut butter, smooth	2 Tbsp	1.6
Peanuts	1 oz	2.4
Pumpkin seeds	1 cup	12
Sunflower seeds	1 oz	3.3
<b>Whole grains</b>		
Bagel, Plain (Dave's Killer Bread®)	1 bagel	11
Barley, cooked	1 cup	6.0
Bread, flourless sprouted grain (Ezekiel 4:9®)	1 slice	3.0
Brown rice, uncooked	1 cup	6.6
Cereal, Sprouted Flourless Flake (Ezekiel 4:9®)	¾ cup	6.0
Mary's Gone Crackers® Original	12 crackers	3.0
Oats, cooked rolled oats	¾ cup	3.0
White rice, uncooked	1 cup	2.4

\*Sources: US Department of Agriculture FoodData Central (<https://fdc.nal.usda.gov/index.html>) and Nutrition Facts panels for packaged foods.



## Protein

To build stronger bones and muscles, the research suggests a minimum protein intake of 1.3 grams per kilogram (g/kg) body weight per day, plus resistance training. Other recommendations go as high as 2.0 g/kg body weight per day.

In Chapter 7 you calculated the number of grams of protein you should be eating per day. Write it down here:

\_\_\_\_\_ grams of protein per day.

<b>Beans/Legumes – 1 cup cooked</b>			
Adzuki beans	17 g	Lentils	16 g
Black beans	15 g	Pinto beans	14 g
Black-eyed peas	13 g	Refried beans, Amy's® vegetarian	8 g
Garbanzo beans	14 g	Split peas	16 g
Kidney beans	18 g		
<b>Dairy, Soy &amp; Substitute Products</b>			
Cottage cheese, 1 cup	31 g	Milk, 2%, 8 fl oz	8 g
Tofu, firm, 4 oz	20 g	Cheese, 1 oz	7 g
Tempeh, 3 oz	16 g	Soy cheese, 1 oz	6 g
Yogurt, low fat, 1 cup or 8 oz	10 g	Soy burger, 1 patty, 4 oz	14 g
Yogurt, whole milk plain Greek yogurt, 1 cup	16 g	Miso paste, 2 Tbsp	4 g
Soy yogurt, 1 cup or 8 oz	9 g	Cream cheese, 1 oz	3 g
Goat milk, 8 fl oz	9 g	Soy milk, 8 fl oz	6 g
Milk, skim, 8 fl oz	8 g	Rice milk, 8 fl oz	1 g
<b>Grains (1 cup cooked) &amp; Grain Products</b>			
Amaranth	14 g	Brown rice, raw	14 g
Bagel, Plain (Dave's Killer Bread®)	11 g	White rice, raw	13 g
Barley	16 g	Oatmeal	5 g
Bread, flourless sprouted grain (Ezekiel 4:9)	5 g	Quinoa	22 g
Cereal, Flourless Flake (Ezekiel 4:9)	8 g	Mary's Gone Crackers® Original	4 g
English muffin (Dave's Killer Bread)	6 g	Millet	8 g
<b>Meats, Seafood, &amp; Poultry – 3 oz (about the size of a deck of cards in the palm of your hand)</b>			
Beef, lean	22 g	Ham	18 g
Chicken Breast	26 g	Hamburger	21 g
Clams	22 g	Pork chop	19 g
Crabmeat	16 g	Salmon	20 g
Egg, 1	7 g	Tuna, in water	22 g
Fish, white	17 g	Turkey	25 g
<b>Nuts &amp; Seeds</b>			
Almonds, 1 cup	30 g	Peanut butter, smooth, 2 Tbsp	7 g
Almond butter, 2 Tbsp	7 g	Peanuts, 1 oz	7 g
Cashews, 1 cup	21 g	Pumpkin seeds, 1 cup	12 g
Peanut butter, chunky, 2 Tbsp	8 g	Sunflower seeds, 1 oz	5 g

# Appendix B: Calcium Content of Foods

The US Recommended Daily Amount (RDA) of calcium for women is 1,000 mg per day until they reach 50 years old, then increases to 1,200 mg. For men up to 70 years old, it's 1,000 mg per day, then 1,200 mg after that.

<b>Fruits and Vegetables (1 cup, unless otherwise stated)</b>			
Avocado, 1 medium	30 mg	Mustard greens, cooked	450 mg
Bean sprouts	320 mg	Okra, sliced, boiled	100 mg
Beans, green, snap, boiled	58 mg	Onions, chopped, raw	32 mg
Beans, wax, cut, canned	174 mg	Parsley, chopped, raw	82 mg
Beet greens, boiled	165 mg	Parsley, sliced, boiled	912 mg
Blackberries, raw	46 mg	Parsnips, sliced, boiled	58 mg
Blueberries, frozen, unsweetened	44 mg	Peas, green, raw	36 mg
Bok choy, cooked	330 mg	Potato, w/skin baked, 1 medium	20 mg
Bok choy, raw	250 mg	Pumpkin, canned	64 mg
Borage, boiled	235 mg	Rhubarb, frozen, raw	266 mg
Broccoli, raw	160 mg	Rutabaga, cubed, boiled	72 mg
Brussel sprouts, boiled	56 mg	Salsify, sliced, boiled	64 mg
Cabbage, shredded, raw	32 mg	Sauerkraut, canned	72 mg
Carrots, sliced, boiled	48 mg	Shallots, chopped, raw	64 mg
Cassava, raw	209 mg	Shepherds Purse, cooked	300 mg
Cauliflower, pieces, raw	28 mg	Snow peas, raw	62 mg
Celeriac, raw	99 mg	Spinach, chopped, raw	80 mg
Celery, diced, boiled	64 mg	Spinach, cooked	250 mg
Collard greens, cooked	360 mg	Squash	
Dandelion greens, boiled	146 mg	Acorn squash, cubed, baked	90 mg
Eggplant, raw	30 mg	Butternut squash, boiled	84 mg
Fennel bulb, sliced, raw	43 mg	Hubbard/Spaghetti	34 mg
Garden cress, raw	40 mg	Sweet potato, baked w/ skin, 1 medium	32 mg
Kale, fresh, chopped, steamed	210 mg	Swiss chard	125 mg
Kohlrabi, sliced, boiled	76 mg	Turnip, cubed, boiled	36 mg
Lambquarters, chopped, steamed	464 mg	Turnip greens, cooked	450 mg
Leeks, chopped, raw	60 mg	Watercress, chopped, raw	40 mg

<b>Beans, dried &amp; boiled (1 cup, unless otherwise stated)</b>			
Adzuki beans	63 mg	Mung beans	55 mg
Black Bean	47 mg	Navy beans	128 mg
Broadbeans (fava)	62 mg	Pinto beans	95 mg
Chickpeas/Garbanzos	340 mg	Refried beans, canned	118 mg
Cowpeas/blackeye peas	212 mg	Soybeans, mature	175 mg
Cranberry beans	89 mg	Split peas	20 mg
Kidney beans	50 mg	White beans	161 mg
Lentils	70 mg		
<b>Nuts, Nut Butters, Seeds (1 cup, unless otherwise stated)</b>			
Almond Butters	670 mg	Pecans	80 mg
Almonds	660 mg	Pine nuts	56 mg
Brazilnuts	400 mg	Pistachios, shelled	304 mg
Butternuts	120 mg	Pumpkin seeds, dried	96 mg
Cashew butter	96 mg	Safflower kernels, dried	176 mg
Cashews	104 mg	Sesame seeds, 1 Tbsp	70 mg
Coconut milk	36 mg	Soybean nuts, dry roasted	426 mg
Filberts/Hazelnuts	450 mg	Sunflower butter	120 mg
Flax seeds, linseed	616 mg	Sunflower seeds	260 mg
Hickory nuts	136 mg	Tahini, sesame butter	426 mg
Macadamia nuts	160 mg	Walnuts	280 mg
<b>Dairy Products (1 cup, unless otherwise stated)</b>			
Goat milk	315 mg	Ice cream	200 mg
Buttermilk	300 mg	Butter, 1 Tbsp	45 mg
Whole milk	290 mg	Swiss cheese, 1 oz	260 mg
Yogurt	270 mg	Cheddar cheese, 1 oz	215 mg
Cottage cheese	230 mg	Parmesan cheese, 1 Tbsp	70 mg
<b>Soy Products (1 cup, unless otherwise stated)</b>			
Miso	184 mg	Tofu	260 mg
Tempeh	154 mg	Tofu, firm	516 mg
<b>Fish (1 cup, unless otherwise stated)</b>			
Raw oysters	300 mg	Mackerel canned w/ bones	680 mg
Shrimp	130 mg	Sardines canned w/ bones	1000 mg
Salmon w/ bones	490 mg		
<b>Sprouts (1 cup, unless otherwise stated)</b>			
Alfalfa	25 mg	Mung	35 mg

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