



McDougall Newsletter

Volume 6 Issue 10

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Everyone Is Fiddling as California Burns

As of October 31, 2007, my home state has been burning for the past 10 days. So far over 2000 homes and more than 500,000 acres of forestland have been destroyed. Is this a glimpse into our near future?

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If I Could Be Your Doctor, I Would Love to Tell You How:

To Keep Your Arteries Clean and Reverse Atherosclerosis

All stretched out, you have 60,000 miles of blood vessels in your body. Your diet will affect the health of every inch of every vessel from your scalp to the soles of your feet. Bathe the arteries with the unhealthy blood, which results from an unhealthy diet, and the vessel walls will stiffen within minutes. Over weeks to months, streaks of fat accumulate in walls. As the disease rages on, the walls sometimes thicken enough to compromise the flow of blood.

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Favorite Five Articles from Recent Medical Journals

DNA Testing Proves Humans Are Designed as Starch Eaters

Calcium Requirements Much Lower Than Previously Estimated

Rising Trend—Double Mastectomies

Low-Fat Diet Reduces Ovarian Cancer

Additives Impair Child's Behavior

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Holiday Meal Planning

By Mary McDougall

I first shared this planning schedule with you in 2004 and I heard from quite a few people who used this schedule and shopping list for a successful Thanksgiving last year. Since I plan to use this same schedule, and mostly the same menu, myself again this year I am including it in this 2007 newsletter. **PAGE 10**

FEATURED RECIPES

Peppered Kale & Potatoes

Griddle Cakes

Stovetop Bulgur Pilaf

Red Pepper Sauce

Hearty Chili

Moroccan Harira

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Everyone Is Fiddling as California Burns



As of October 31, 2007, my home state has been burning for the past 10 days. So far over 2000 homes and more than 500,000 acres of forestland have been destroyed. Is this a glimpse into our near future?

Coincidentally, on Sunday, October 21, 2007, the day the fires in Southern California broke out, the TV news program, *60 minutes*, ran the segment, "The Age Of Mega-Fires;" reporting how the size of large wildfires has increased over the past decade from 100,000 acres to 200,000 acres. They predicted that out-of-control infernos might soon consume 500,000 acres and more—they had no idea how soon "soon" would be. According to *60 minutes'* investigators, this escalation is due to global warming. Climate change has resulted in longer, drier fire seasons. Such tinder-box conditions had not been predicted to occur for another 40 years.

The rate of growth of mega fires is not the only climate change prediction scientists have recently had to update. Mark Serreze, senior research scientist at National Snow and Ice Data Center termed the decline of Arctic ice, "astounding." "Most researchers had anticipated that the complete disappearance of the Arctic ice pack during summer months would happen after the year 2070," he said, but now, "losing summer sea ice cover by 2030 is not unreasonable." Seems like we have much less time to fix things than we once thought we did.

Not Much Interest in Our Destructive Diet

To some degree every person these days is aware of the damage caused by human activities to our environment and most of us are making corrections: recycling, fluorescent light bulbs, and hybrid cars. This is all good. But what have people done about our planet-destroying diet? Nothing! This lack of attention to food troubles me greatly because of the potential good that could be done for humankind.

One year ago, the 407-page United Nations' report, *Livestock's Long Shadow*, reported that 18% of the greenhouse gasses produced annually are a direct consequence of farming cows, pigs, and chickens and that animal husbandry is among the top polluters of Planet Earth. (Recall that 13.5% of greenhouse gasses are produced by all transportation.)

Over the past year, to appease the public's lust for cheap calories, Hardee's has introduced the 900-calorie Country Breakfast Burrito and McDonalds' upped their rendition of "a heart attack in a bun" with the Angus third-pounder. Robert Atkins is barely cold in his grave, yet his earth-polluting recommendations have already been reincarnated by Gary Taubes in his new book *Good Calories, Bad Calories*. These trends tell me the public still has no clue—and many of those who do understand just don't care enough to take action, because life is still good. Based on what has happened with fire and ice over the past few years, our "comfy lives" may be changing sooner than we had expected.

Let These Events Inspire Us to Speak Out about Our Food

Begin now by educating yourself and everyone around you. No longer tolerate people saying, "You have to eat meat to get protein, starches make you fat, and milk is necessary for strong bones." These are not innocent lies. Deception and dishonesty threaten your children's and grandchildren's futures.

Change is inevitable. When people become desperate enough they will ask for real solutions. You and I need to be ready to provide real answers and real leadership. Those of us who know the truth have an obligation to take action now and in the future.

Concise McDougall Newsletter Articles Written to Help You Share the Truth. Copy and Give Them to Family and Friends—Even When They Do Not Seem Interested.

When Friends Ask:

[Where do you get your calcium?](#)

[Why don't you drink milk?](#)

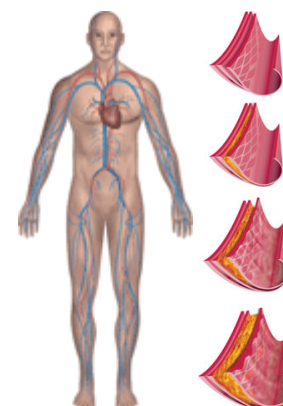
[Where do you get your protein?](#)

[Why did you quit meat?](#)

For more information on this subject see my [December 2006](#) and [January 2007](#) newsletters.

If I Could Be Your Doctor, I Would Love to Tell You How: To Keep Your Arteries Clean and Reverse Atherosclerosis

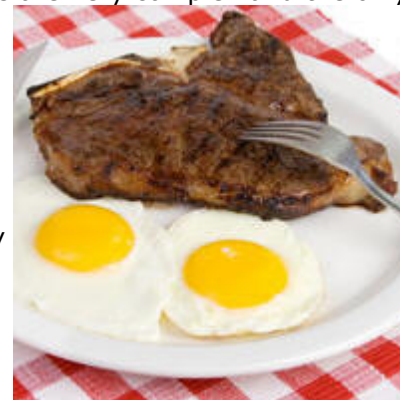
All stretched out, you have 60,000 miles of blood vessels in your body. Your diet will affect the health of every inch of every vessel from your scalp to the soles of your feet. Bathe the arteries with the unhealthy blood, which results from an unhealthy diet, and the vessel walls will stiffen within minutes. Over weeks to months, streaks of fat accumulate in walls. As the disease rages on, the walls sometimes thicken enough to compromise the flow of blood.



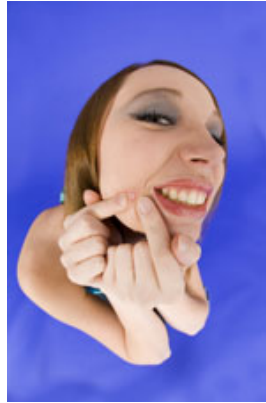
2) Many diseases are caused by compromising the flow of blood to various tissues. Close the arteries to the brain and you have a stroke; to the eye, macular degeneration; to the inner ear, hearing loss, tinnitus (ringing), and vertigo (dizziness); to the heart, myocardial infarction; to the kidneys, renal failure; to the leg, gangrene; and to the penis, impotence.



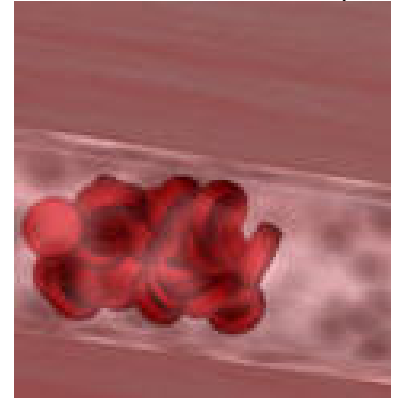
3) The effects of diets are very complex and the only accurate statement is: "the rich Western diet is the cause of artery disease and a starch-based diet with vegetables and fruits is the prevention and cure." Many damaging components of the rich Western diet have been identified, including oxidized cholesterol, antibodies to dairy proteins, animal protein, and fat. Some healing components of plant-foods are plant fats, fibers, sugars, proteins, antioxidants, and other phyto (plant)-chemicals.



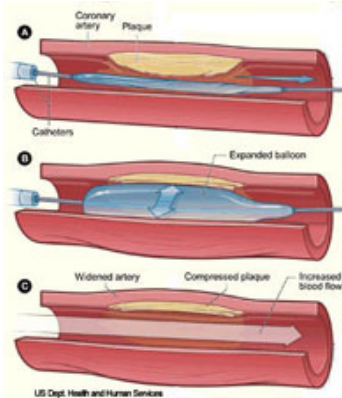
4) When the blood flowing through the arteries is unhealthy, "sores," (consisting of "pustules" and "ulcers"), form on the inner surfaces. Think of these pustules as being like pimples on a teenager's face—filled with necrotic, semi-liquid debris and white blood cells. Sores are continuously forming and healing throughout the miles of arteries. Unfortunately, because injury from the fork and spoon outpaces the body's healing capacities, the overall disease progresses. In the later stages of healing, when the disease is severe, the sores become fibrous stable bulges, called plaques. In most cases these rock-hard plaques cause the patient no trouble at all. However, some plaques become large enough to interfere with blood flow—causing chest pain (angina) and the problems mentioned above.



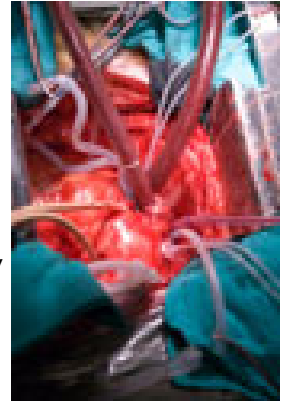
5) Most heart attacks and strokes are not caused by the slow build up of fibrous stable plaques—but are rather events of rapid onset. The trigger of such events is the sudden inward rupture of a tiny pustule. With this rupture, the inner contents of pus and associated "products of tissue injury" are released into the flowing blood, and the body reacts by forming a blood clot which can immediately interfere with the flow of blood. When the blood clot (medically called a thrombus) completely occludes the artery, the tissue that lies downstream of the clot (such as the heart muscle or brain) usually dies. The event is called a heart attack (coronary artery thrombosis) or stroke (cerebral artery thrombosis).



6) Angioplasty is performed over 1 million times annually in the US. During this surgical procedure a balloon-tipped catheter is passed into an area of severe artery obstruction. Inflation of the balloon bursts the fibrous plaque, which is the intention. But an unwelcome consequence is that this "plaque rupture" releases "products of injury" which cause the formation of artery occluding blood clots. As a result, half of the arteries so treated become completely closed down within 5 months of surgery. One potential solution to this expected complication has been the placement of a wire mesh stent to prop the artery open after bursting the plaque with the catheter. Unfortunately stents fail patients too. The bottom line is: any prospective customer of the heart surgery business needs to know that 8 out of 8 studies show angioplasty, with or without stents, does not save lives.



7) Surgery to bypass partially obstructed arteries is performed on 400,000 people annually in the US. The benefits for survival and improving the quality of the patient's life from employing this operation are questionable. Brain damage caused by being attached to the heart-lung machine for hours should be expected. The primary reason heart surgery (angioplasty and bypass surgery) does not save lives is that the operation is performed on the stable fibrous non-lethal plaques—and nothing is done for the volatile tiny pustules that suddenly rupture to form occluding, and lethal, blood clots.



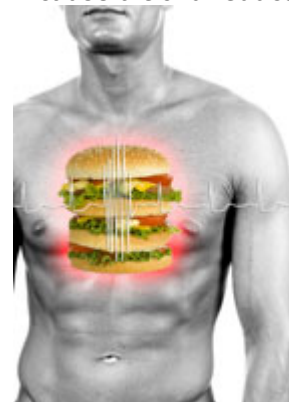
8) Both heart artery surgeries can relieve chest pains from closed arteries and this may be a reason to do either operation. My preference would be for an angioplasty, rather than major bypass surgery when the patient suffers from incapacitating chest pains unrelieved by good medical therapy. Medications, such as nitrates and beta blockers, can effectively relieve chest pains, and should be a part of a patient's initial medical care, rather than them being rushed off to surgery—as is almost always the case.



9) Medications can be helpful in preventing artery closure and saving lives. One baby aspirin (81 mg) daily will “thin the blood” and reduce the risk of a blood clot forming when a pustule ruptures. Cholesterol-lowering medications, such as statins, may aid in the healing of the arteries and have a small effect on reducing the chances of a stroke or heart attack. Both medications should be reserved for use in people at very high risk for artery closure—such as those with a history of a previous heart attack or heart artery surgery. Unfortunately, most doctors have been trained by drug companies to dispense these drugs as if they were harmless and universally beneficial.



10) Get the hamburger out of your chest. Changing to a plant-food based diet will cause a 90% reduction in the frequency of chest pain episodes (the primary reason for heart surgery) in less than 3 weeks. Over months, actual healing of the artery disease (reversal of atherosclerosis) can be demonstrated in almost all patients who follow a low-fat, starch-based diet. The overall result is a much healthier person with the very real likelihood of never doing business with doctors and drug companies again.



To learn more about artery disease please refer to my Hot Topics:

[Heart Disease & Atherosclerosis »](#)

[Cholesterol & Triglycerides »](#)

Favorite Five



DNA Testing Proves Humans Are Designed as Starch Eaters

Diet and the evolution of human amylase gene copy number variation by George H. Perry published in the October 2007 issue of *Nature Genetics* found that there are more copies of genes that produce starch-digesting enzymes, known as amylases, in the human saliva than there are in lesser primates. The average human has roughly three times more copies of the salivary amylase genes than do fruit-eating apes and monkeys. Even among humans the number of copies was dependent upon the amount of starchy vegetables in their respective diets. For example, populations who eat more starch (such as rural Japanese) were found to have more copies than do people living on lower starch diets with meat and fish added (for example, Yakut of the Arctic). These findings confirm the predominant importance of starchy vegetables and grains in the human diet.

(Amylases are enzymes secreted by the salivary glands and pancreas to break down starches into maltose—a double-sugar made up of two glucose molecules—and dextrin. The genes that produce amylase are not present at all in the saliva of carnivorous animals, such as cats, because these animals are not supposed to eat starchy vegetables.)

Comment: The researchers begin their article by noting, “Starch consumption is a prominent characteristic of agricultural societies and hunter-gatherers in arid environments.” Recorded human history tells of most populations living on starch-based diets. Some examples are the ancient Egyptians who lived on wheat, the Incas who lived on potatoes, the Aztecs and Mayans who lived on corn, and the Japanese who lived on buckwheat and later rice. The few peoples who have based their diets on meat have lived at the extremes of the earth’s environment, such as the Eskimos in the Arctic and a few small gatherings living deep in the jungles of South America and Africa.

These researchers reasoned further that starchy foods, like tubers, were crucial to the successful evolution of early humans, because starches offer important advantages. Their abundant, readily-available calories provide for the energy required for the evolutionary enlargement of our brains. The modern human brain uses 20% of our daily calories, and the preferred fuel for the brain is glucose, derived most efficiently by digesting starches. With attainment of the knowledge of the use of fire, which occurred concurrently with our brain development, starches became a goldmine of brain-feeding calories.

The ability to use starch also opened up the opportunity for early humans to migrate out of Africa—to colonize the rest of the planet. Starches were widely distributed geographically and easy to gather—tubers, like potatoes, are easily dug up out of the ground. Bulbs, corms, and tubers act as underground storage units for concentrated starches and last in the ground throughout the winter. These starches were a critical food source for the ancestors of early and modern humans. Once harvested, starches, such as potatoes and grains, can be stored at ambient temperatures for long periods of time—providing nutrition throughout the year. Fruit eating would not offer these advantages because fruits are relatively low in calories, spoil quickly, and in the more northern and southern latitudes fruits are available only seasonally. Primates who live on fruit diets are tied to the tropical jungles.

Proponents of meat-based diets preach that the introduction of meat into the human diet was responsible for the evolutionary development of the human brain. One of this study’s principle authors said this theory is improbable. Nathaniel Dominy pointed out, “Even when you look at modern human hunter-gatherers, meat is a relatively small fraction of their diet. They cooperate with language, use nets; they have poisoned arrows, even, and still it’s not that easy to hunt meat. To think that, two to four million years ago, a small-brained, awkwardly bipedal animal could efficiently acquire meat, even by scavenging, just doesn’t make a whole lot of sense.”

Before the availability of DNA testing many other observations have proven we are designed to be primarily plant-eaters. Our teeth are for grinding, not the tearing of animal flesh. Our intestines are long and convoluted for digestion of fibrous plant-foods; meat-eaters’ intestines are much shorter and relatively simple for quickly digesting and eliminating the digested flesh. For a more complete discussion of our anatomy and physiology which establishes us as primarily plant-food eaters see my [July 2003 newsletter: Meat in the Human Diet](#).

Through the modern science of DNA we have discovered an essential truth locked in our genes: humans are starch eaters. The failure to abide by this truth has resulted in unprecedented human disease due to malnutrition from over-nutrition, and an impending environmental collapse from the livestock industries supporting Western people’s perverse diet. Applying correct information about human nutrition results in miraculous cures of dietary diseases (for example, obesity, type-2 diabetes, inflammatory arthritis, and the ravages of atherosclerosis). The eventual return of humans to their starch-based diet will be a huge step in solving our environmental crises, as well.

Perry GH, Dominy NJ, Claw KG, Lee AS, et al. Diet and the evolution of human amylase gene copy number variation. *Nat Genet.* 2007 Oct;39(10):1256-60. Epub 2007 Sep 9.

Calcium Requirements Much Lower Than Previously Estimated

Calcium requirements: new estimations for men and women by cross-sectional statistical analyses of calcium balance data from metabolic studies by Curtiss D. Hunt published in the October 2007 issue of the *American Journal of Clinical Nutrition* concluded, "The findings suggest that the calcium requirement for men and women is lower than previously estimated...the new balance data also concur with the recognition that saturation of the active transport component of calcium absorption occurs at an intake of 500 mg/day. The new estimation is in line with the previous consideration that individuals with low, but nutritionally adequate, intakes of sodium and protein may have calcium requirements as low as 500 mg/day."

Data was used from a series of tightly controlled metabolic in-house feeding studies conducted between 1976 and 1995 by the US Department of Agriculture to estimate the amount of dietary calcium needed to maintain a neutral calcium balance. The diets consumed by subjects were composed of ordinary Western foods. Diets lower in protein, acid, sodium, and caffeine (like the McDougall diet) would reduce human calcium requirements even further.

Comment: Commonly recommended requirements for calcium are 1000 to 1200 mg a day. However, this study found that neutral calcium balance (when the calcium consumed equals the calcium lost in the urine and feces) was on average an intake of 741 mg/day. However, when calcium intakes were varied in the studies from 415 mg to 1740 mg per day the subjects still remained in a neutral balance. In other words, when fed a relatively low calcium diet (415 mg/day) the body would adjust; the intestines would more efficiently absorb calcium, the kidneys would conserve calcium, and the person's needs were met (always). When overfed with calcium (1740 mg/day) the body also adjusts; the intestines block calcium absorption, the kidneys eliminate more calcium, and injuries (such as soft tissue calcification) from excess calcium are avoided. The body is so smart.

Because of the innate intelligence of our intestines the most basic diets of starches, vegetables and fruits (without a speck of dairy foods) have sufficient calcium in them to meet our needs—and this is why "disease of calcium deficiency" from any natural diet is non-existent. Many people think osteoporosis is due to calcium deficiency; but this bone loss is primarily due to excess animal protein with its associated dietary acids. On the opposite end of intake, when we overdose with calcium by consuming glassfuls of milk or handfuls of calcium pills our gut saves us by blocking the absorption of this potentially toxic element. As mentioned above, "...saturation of the active transport component of calcium absorption occurs at an intake of □ 500 mg/day."

This review of the basic research should put to rest the message that large intakes of calcium are necessary for healthy bones—but it won't, because of the money to be made by the dairy and calcium supplement industries. In addition to large quantities of calcium being unnecessary, dairy consumption brings these added risks: the fat and cholesterol cause heart disease, the sugar causes intestinal distress from lactose intolerance, and the contamination with environmental chemicals and microbes, including leukemia and AIDS viruses, is a very real threat.

[For more on dairy foods and calcium see my Hot Topics.](#)

Hunt CD, Johnson LK. Calcium requirements: new estimations for men and women by cross-sectional statistical analyses of calcium balance data from metabolic studies. *Am J Clin Nutr.* 2007 Oct;86(4):1054-63.

Rising Trend—Double Mastectomies

Increasing Use of Contralateral Prophylactic Mastectomy for Breast Cancer Patients: A Trend Toward More Aggressive Surgical Treatment by Todd Tuttle in the October 2007 issue of *Journal of Clinical Oncology* found, "The rate (of removing the opposite healthy breast) was 3.3% for all surgically treated patients; 7.7%, for patients undergoing mastectomy.¹ The overall rate significantly increased from 1.8% in 1998 to 4.5% in 2003. Likewise, the contralateral prophylactic mastectomy rate for patients undergoing mastectomy significantly increased from 4.2% in 1998 to 11.0% in 2003."

Comment: Dr. Tuttle said in an Associated Press story published on October 23, 2007: "I'm afraid that women believe having their opposite breast removed is somehow going to improve their breast cancer sur-

vival. In fact, it probably will not affect their survival." There are several reasons no survival benefit will be realized from removing the opposite "healthy" breast, but the main reason is; that if the woman truly has breast cancer, her disease has already spread to the rest of her body long before the breast cancer was diagnosed. So no matter how much of her anatomy she has removed (a lumpectomy, a single mastectomy, a double mastectomy—with or without removal of her lymph nodes) her date with death will remain unchanged.

These days, many women without breast cancer are having both of their breasts removed because of the fear that has been created around this disease. Some of this fear is justified—breast cancer is the most common cancer among North American and Western European women—the cumulative risk for this disease is 10% up to the age of 80 years. The results of "preventative prophylactic mastectomies" remain controversial, because no randomized controlled trials to substantiate the potential benefit or harms have been done.

Even for women with a family susceptibility (including those who are carriers of the genetic mutations BRCA 1 or 2), the benefits and harms of removing both healthy breasts are still unclear. A Cochrane Review² published in 2004 on women with BRCA mutations concluded: "Published observational studies demonstrated that bilateral prophylactic mastectomy (BPM) was effective in reducing both the incidence of, and death from, breast cancer, more rigorous prospective studies (ideally randomized trials) are needed...By one estimate, most of the women deemed high risk by family history (but not necessarily BRCA 1 or 2 mutation carriers) who underwent these procedures would not have died from breast cancer, even without prophylactic surgery...Of the psychosocial outcomes measured, body image and feelings of femininity were the most adversely affected."

What is clear is that very few women are counseled to eat healthy for breast cancer prevention (or treatment). In the minds of many doctors and researchers, recommending that a woman change her diet is just too much to ask—compared to what?

For possibly a few extra days of life women are now willing to undergo:



Annual mammograms
Monthly breast self-examinations
Annual clinical (physician) breast exams
Biopsy
Mastectomy
Lymph node removal
Radiation
Ovary removal
Anti-estrogen drugs
Poly-chemotherapy

Asking women to eat No Huevos Rancheros for breakfast, Festive Dal Soup for lunch, and for dinner, Thai Green Curry Rice (all recipes prepared on the new DVD, McDougall Made Irresistible) should be the first and foremost recommendation received by a woman if she's concerned about breast cancer prevention or treatment. She is entitled to this from her professional medical team.

1) Tuttle TM, Habermann EB, Grund EH, Morris TJ, Virnig BA. Increasing Use of Contralateral Prophylactic Mastectomy for Breast Cancer Patients: A Trend Toward More Aggressive Surgical Treatment. J Clin Oncol. 2007 Oct 22; [Epub ahead of print]

2) Lostumbo L, Carbine N, Wallace J, Ezzo J. Prophylactic mastectomy for the prevention of breast cancer. Cochrane Database Syst Rev. 2004 Oct 18;(4):CD002748.

Low-Fat Diet Reduces Ovarian Cancer

Low-fat dietary pattern and cancer incidence in the Women's Health Initiative Dietary Modification Randomized Controlled Trial by Ross Prentice reported in the *Journal of the National Cancer Institute* found, "A low-fat dietary pattern may reduce the incidence of ovarian cancer among postmenopausal

women." The relative reduction of ovarian cancer was about 40% achieved after 4 years. A total of 48,835 postmenopausal women were randomly assigned during 1993-1998 to a lower fat intervention or comparison group and followed up for an average of 8.1 years. The intervention goal was to reduce total fat intake to 20% of energy and to increase consumption of vegetables, fruits, and grains. The actual reduction in fat was to 29% of the calories.

Comment: Most women see no way to help reduce their risk of death from ovarian cancer. Early detection methods are ineffective and treatments result in little if any survival benefit. Worldwide population studies find a relationship of diet and ovarian cancer—women on a lower fat, higher plant-food based, lower-dairy food diets have less risk.

The Women's Health Initiative Dietary Modification Randomized Controlled Trial cost \$415 million and was very ineffective at modifying women's diets. I have discussed this diet in relation to breast cancer in a past newsletter ([See February 2006, Readers' Responses to the "Low-fat Diet Failure" News](#)). The fact that this study showed any benefit at all from the feeble intervention diet prescribed is remarkable and worth reporting. We can only imagine what the consequences of feeding a truly healthy starch-based, low-fat (7% of calories) diet might have been for women.

Prentice RL, Thomson CA, Caan B, Hubbell FA, Anderson GL, Beresford SA, et al. Low-fat dietary pattern and cancer incidence in the Women's Health Initiative Dietary Modification Randomized Controlled Trial. *J Natl Cancer Inst.* 2007 Oct 17;99(20):1534-43. Epub 2007 Oct 9.

Additives Impair Child's Behavior

Food additives and hyperactive behaviour in 3-year-old and 8/9-year-old children in the community: a randomised, double-blinded, placebo-controlled trial by Donna McCann published in the September 5, 2007 issue of the *Lancet* found, "Artificial colors or a sodium benzoate preservative (or both) in the diet result in increased hyperactivity in 3-year-old and 8/9-year-old children in the general population... and that food additives exacerbate hyperactive behaviors (inattention, impulsivity, and overactivity) in children at least up to middle childhood. Increased hyperactivity is associated with the development of educational difficulties, especially in relation to reading, and therefore these adverse effects could affect the child's ability to benefit from the experience of schooling. These findings show that adverse effects are not just seen in children with extreme hyperactivity (ie, ADHD), but can also be seen in the general population and across the range of severities of hyperactivity."¹

In the study, 153 three-year-old and 144 eight and nine-year-old children drank a mixture containing sodium benzoate and one of two artificial food color and additives mixes (A or B) or a placebo mix. The additives chosen are commonly found in the food supply. Mix A for 3-year-old children included 20 mg of artificial food colorings (5 mg sunset yellow [E110], 2.5 mg carmoisine [E122], 7.5 mg tartrazine, and 5 mg ponceau 4R and 45 mg of sodium benzoate. Active mix B included 30 mg of artificial food colorings (7.5 mg sunset yellow, 7.5 mg carmoisine, 7.5 mg quinoline yellow, and 7.5 mg allura red AC) and 45 mg of sodium benzoate.

Comment: Food additives have long been suspected of causing overactive, impulsive, and inattentive behavior in children. Benjamin Feingold, MD described this effect of chemicals added to foods 32 years ago. Many of these children are eventually diagnosed as having Attention-Deficit Hyperactivity Disorder (ADHD) and then placed on mood-altering drugs, such as Ritalin, Adderall, Concerta, and Strattera.

Effects on a child's behavior have also been found with dairy products,² caffeine,³ and organic pollutants.⁴ Resulting illnesses and obesity from an unhealthy diet also have a profound effect on a child's behavior and ability to learn. Therefore, before any child is declared incurably hyperactive, or otherwise behaviorally disturbed, a change to a starch-based diet with a strong emphasis on organic foods should be tried.

Children already on medications should have their diets improved, and the medications stopped or reduced under doctor's supervision as they improve. Benefits should be evident with a few days to weeks. My experience leads me to state that parents who make an honest effort at this approach will not be disappointed.

- 1) McCann D, Barrett A, Cooper A, Crumpler D, Dalen L, Grimshaw K, Kitchin E, et al. Food additives and hyperactive behaviour in 3-year-old and 8/9-year-old children in the community: a randomised, double-blinded, placebo-controlled trial. *Lancet*. 2007 Sep 5; [Epub ahead of print]
 - 2) Kaplan BJ, McNicol J, Conte RA, Moghadam HK. Dietary replacement in preschool-aged hyperactive boys. *Pediatrics*. 1989 Jan;83(1):7-17.
 - 3) Hughes JR, Hale KL. Behavioral effects of caffeine and other methylxanthines on children. *Exp Clin Psychopharmacol*. 1998 Feb;6(1):87-95.
 - 4) Lee DH, Jacobs DR, Porta M. Association of serum concentrations of persistent organic pollutants with the prevalence of learning disability and attention deficit disorder. *J Epidemiol Community Health*. 2007 Jul;61(7):591-6.
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Holiday Meal Planning

By Mary McDougall

A Reprint from the McDougall Newsletter - October 2005

Holiday Meal Planning by Mary McDougall

I first shared this planning schedule with you in 2004 and I heard from quite a few people who used this schedule and shopping list for a successful Thanksgiving last year. Since I plan to use this same schedule, and mostly the same menu, myself again this year I am including it in this 2007 newsletter.

We usually have a large crowd of friends and family with us every year to celebrate, and my menu doesn't vary much from year to year. Many of the recipes that are a tradition in our home I have shared with you over the past several years, either in one of the cookbooks or in a newsletter. The following recipes will be part of our holiday meal again this year. The starred (*) items are ones I suggest for a basic meal plan, and then add as many more dishes as you feel your Thanksgiving dinner needs to fit your celebration.

Menu:

* Golden Gravy (newsletter October 2003)

Success Tip: This may be made a day ahead of time and reheated slowly on the stovetop, stirring frequently.

Rich Brown Gravy (newsletter October 2004)

Success Tip: Brown the onions and flour a day or two ahead of time, then cover and refrigerate. Finish the recipe as directed, realizing that it will take a bit more time for the liquid to heat through.

Whole Wheat & Sourdough Rolls with Elephant Garlic Spread (newsletter October 2004)

Success Tip: Order your rolls from Whole Foods or a bakery about one week early, then pick them up the day before the holiday. Make the garlic spread one or two days ahead of time and refrigerate until serving.

* Cranberry Sauce (newsletter October 2004)

Success Tip: Make two to three days ahead of time and refrigerate until just before serving.

* Green Beans

Success Tip: Trim beans the day before and store in the refrigerator. Wash just before steaming. I usually serve these plain with a bit of salt and pepper.

Brussels Sprouts with Creamy Caesar Salad Dressing (newsletter July 2003)

Success Tip: Trim these a day or two before cooking and store in the refrigerator. Wash before cooking. Most people like these best with some type of a sauce, although Heather and I like them plain with only a bit of salt. Make the dressing one to two days ahead and store in the refrigerator. Pour a small amount of the dressing over the cooked Brussels sprouts and toss just before serving.

*** Pumpkin Pie with Vanilla Cream Sauce (newsletter October 2003)**

Success Tip: Make the pie and the sauce one day ahead and refrigerate until just before serving. We like this pie best chilled. If you like warm pumpkin pie, you will need to make this just before serving. The crust can be prepared one day early and refrigerated. Mix the filling ingredients together, cover and refrigerate overnight, then pour into the crust and bake. The vanilla sauce should be served chilled over the pie.

Wicked Chocolate Pie (newsletter October 2004)

Success Tip: Make this one day early and refrigerate. The toppings may be made two days ahead, if desired. This needs to be served chilled.

SHOPPING TIPS:

Shop for the non-perishable items about a week ahead of time. These are the canned and packaged products, such as vegetable broth, canned pumpkin, flour, silken tofu and any dried herbs and spices that you may need. Potatoes, sweet potatoes and garlic can be purchased ahead of time as long as you have a cool place to store them (not the refrigerator). Choose the menu items that you want to include for your Thanksgiving feast, then look through the recipes. Check over this shopping list as you go through the recipes, and make sure you also have the pantry items available. Shop for your perishable items no more than 2 days before the holiday, if possible.

SHOPPING LIST

The following shopping lists are for the complete menu above. You will have to adjust the items needed depending on what you plan to prepare.

CANNED AND PACKAGED PRODUCTS

These may be purchased ahead of time and stored in your pantry or refrigerator.

- 4-5 boxes (32 oz.) vegetable broth
- 2 cans (15-16 oz.) pumpkin
- 1 jar (12 oz.) applesauce
- 3 containers (32 oz.) soy or rice milk
- 1 jar (8 oz.) pure maple syrup
- 5 packages (12.3 oz.) Lite Silken Tofu-Extra Firm
- 2 cups non-dairy chocolate chips
- 1 bag (16 oz.) Sucanat
- 1 jar (16 oz.) Wonderslim Fat Replacer
- 1 bag (16 oz.) frozen raspberries
- 1 cup unsalted roasted cashews
- 1 cup sliced almonds
- 1 container (32 oz.) orange juice
- 1 jar (4 oz.) capers

FRESH INGREDIENTS

The first nine ingredients may be purchased ahead of time. Buy the fresh vegetables and bread products the day before, if possible.

- 4 onions
- 1 bunch celery
- 1 head garlic
- 2 heads elephant garlic
- 5 pounds potatoes
- 3 pounds yams or sweet potatoes
- 1 bag fresh cranberries
- 1 small pumpkin (to serve the soup in-optional)
- 1 medium-large pumpkin
- Bagged organic baby greens
- 2 pounds green beans
- 2 pounds Brussels sprouts
- 1 large loaf whole wheat bread
- 6-8 whole wheat or sourdough rolls

PANTRY ITEMS NEEDED

These are used in several of the recipes and are things that you probably already have in your pantry. Check over this list and purchase anything that you don't have.

- Tabasco sauce
- Curry powder
- Soy sauce (at least 1 cup)
- Tahini
- Vanilla
- Whole wheat flour
- Unbleached white flour
- Cornstarch
- Salt
- Black pepper
- Golden brown sugar
- Sugar
- Dijon mustard
- Pumpkin pie spice
- Cinnamon
- Ground ginger
- Ground cloves
- Parsley flakes
- Sage
- Marjoram
- Thyme
- Bay leaves
- Poultry seasoning
- Rosemary
- Soy Parmesan cheese
- Lemon juice

TIME SCHEDULE

1 week ahead:

Shop for non-perishable items and some of the perishable foods listed above.
Order rolls from bakery.

3 days ahead:

Make salad dressings.
Make cranberry sauce.

2 days ahead:

Shop for vegetables and whole wheat bread.
Make Creamy Pumpkin Soup.
Bake sweet potatoes or yams and prepare Maple Mashed Sweet Potatoes.
Make Elephant Garlic Spread.
Make Creamy Caesar Salad Dressing.
Make the raspberry sauce and the almond topping for the chocolate pie.

1 day ahead:

Pick up the pre-ordered rolls.
 Make the pumpkin pie and vanilla sauce.
 Make the chocolate pie.
 Trim the green beans and Brussels sprouts.
 Make the Golden Gravy.
 Partially make the brown gravy.
 Cube the bread and allow to sit out overnight

Thanksgiving
 (Morning):

Peel potatoes and place in cold water to cover.
 Clean out pumpkins.
 Make stuffing mixture and stuff pumpkin.

Thanksgiving
 (Afternoon):

Take sweet potatoes and soup out of refrigerator.
 Place pumpkin in oven and bake as directed.
 Cook potatoes and mash.
 Wash vegetables and cook.
 Finish brown gravy and slowly reheat Golden Gravy.
 Reheat mashed sweet potatoes.
 Finish soup and heat.
 Place baby greens in bowl. Serve with dressings.
 Heat rolls and garlic spread.
 Don't forget the cranberry sauce.



Featured Recipes

Peppered Kale & Potatoes

I grew several varieties of kale in my garden this year, which I have been using in many new ways. Kale is a very nutritious vegetable, loaded with phytonutrients. This is delicious, healthy, and quick to put together which makes it a favorite lunch time dish. I even like this for breakfast! We like this with Sriracha red chili sauce over the top for even more heat.

Preparation Time: 15 minutes

Cooking Time: 20 minutes

Servings: 2

2 cups red fingerling potatoes, chunked
 1 onion, chopped
 2 cloves garlic, minced
 2 portobello mushrooms, coarsely chopped
 4 cups packed, coarsely chopped dinosaur kale
 1 tablespoon soy sauce
 1 teaspoon chili paste
 freshly ground black pepper to taste

Place the potatoes in water to cover, bring to a boil, reduce heat and cook until fairly tender, about 8-10 minutes. Drain and set aside.

Meanwhile, place the onion, garlic and mushrooms in a large nonstick sauté pan or wok. Do not add any liquid. Dry fry over medium heat, stirring frequently, for about 5-6 minutes, until onions and mushrooms are fairly tender. Add the kale and stir gently to combine. Continue to cook, stirring frequently for about 2 minutes, then add the potatoes. Cook, stirring occasionally for 5 minutes, then add the soy sauce, chili paste and pepper. Cook an additional 5 minutes, until kale is tender and potatoes are somewhat browned. Serve warm.

Hints: Small red potatoes may be substituted for the fingerlings, if desired. If you can't get dinosaur kale (also called Lacinato Blue), use regular kale, but remove the stems first.

Stovetop Bulgur Pilaf

This is a delicious earthy fall pilaf that would be a wonderful addition to your Thanksgiving menu.

Preparation Time: 15 minutes

Cooking Time: 1 hour

Servings: 4

1 onion, chopped
2 cups vegetable broth
½ cup white wine
½ cup uncooked wild rice
8 ounces mushrooms, sliced
½ cup uncooked bulgur
½ cup chopped green pepper
½ cup chopped red pepper
1 tablespoon soy sauce
¼ teaspoon crushed red pepper
freshly ground black pepper
½ cup chopped fresh flat leaf parsley

Place the onion in a large non-stick pot with 1 tablespoon of the vegetable broth. Cook, stirring frequently, until the onion turns a slight golden color. Add the remaining broth, the wine and the wild rice. Bring to a boil, reduce heat, cover and cook for 30 minutes. Add the mushrooms, bulgur, peppers, soy sauce, crushed red pepper and several twists of freshly ground black pepper. Mix well, cover and continue to cook for an additional 25 minutes, until grains are tender and most of the liquid is absorbed. Stir in parsley and serve.

Hearty Chili

This chili is made with sun-dried tomatoes which gives it a rich tomato flavor. Make sure you use the dried ones, not oil-packed.

Preparation Time: 10 minutes (cooked rice needed)

Cooking Time: 45 minutes

Servings: 4-6

1 onion, chopped
2 cloves garlic, minced
¼ cup water
1 cup sun-dried tomatoes
1 26 ounce jar fat-free marinara sauce
1 16 ounce can black beans, drained and rinsed
1 16 ounce can kidney beans, drained and rinsed
1 cup cooked brown rice
½ cup vegetable broth
¼ cup soy sauce
2 tablespoons chili powder
1 tablespoon ground cumin
2 teaspoons dried oregano
⅛ teaspoon cayenne pepper

Place the onion and garlic in a large pot with the water. Cook, stirring frequently until onion has softened slightly. Cut the sun-dried tomatoes into pieces using a scissors and add to the pot along with the remaining ingredients. Mix well, cover, bring to a boil, then reduce heat and cook over low heat for about 40 minutes, until flavors are well blended.

Hint: Instead of the brown rice, use one cup of the Tofu TVP from the May 2005 newsletter.

Moroccan Harira

This is another variation to the Moroccan Red Lentil Soup that was in the February 2007 newsletter. This one is made with regular brown lentils and canned tomatoes which are readily available everywhere. This is a very thick, hearty stew, which is delicious on a cool fall evening with a loaf of fresh bread.

Preparation Time: 15 minutes

Cooking Time: 1 hour

Servings: 8

1 onion, chopped
2 stalks celery, chopped
2 cloves garlic, crushed
8 cups vegetable broth
1 15 ounce can chopped tomatoes
1 15 ounce can garbanzo beans, drained and rinsed
1 cup dried brown lentils
1 tablespoon tomato paste
1 tablespoon lemon juice
½ teaspoon ground cinnamon
½ teaspoon paprika
½ teaspoon ground ginger
½ teaspoon ground coriander
½ teaspoon ground turmeric
¼ teaspoon ground nutmeg
¼ teaspoon freshly ground black pepper
⅛ teaspoon ground cloves
½ cup orzo
2 tablespoons chopped fresh cilantro
2 tablespoons chopped fresh flat leaf parsley

Place the onion, celery and garlic in a large soup pot with about 2 tablespoons of the vegetable broth. Cook, stirring frequently, until vegetables become softened slightly. Add remaining vegetable broth, tomatoes, garbanzos, lentils, tomato paste, lemon juice and all of the spices to the pot. Mix well, bring to a boil, reduce heat, cover and cook for about 40 minutes until lentils are tender. Add orzo and cook for another 15 minutes. Stir in fresh cilantro and parsley and serve at once.

Griddle Cakes

These delicious griddle cakes are based on a recipe from Marla Erickson on her website, Marla's Marvelous Meals, www.vegsource.com/marla. My sister, Carol Van Elderen, first made these almost like the original recipe and really liked them. She served them with fresh tomato slices over the top when delicious fresh tomatoes were available last summer. Then she told her neighbor, Dave DeGraaf, about them and he also did some experimenting, coming up with a wheat free variety, using only the cornmeal, but loaded with vegetables, such as red, yellow and orange peppers, grated yellow and green squash, chopped cilantro, fresh tomatoes, onions and garlic.

These are a wonderful savory griddle cake, best served with some kind of a topping, such as fresh tomatoes, salsa, mushroom sauce, gravy, or try the Red Pepper Sauce in this month's newsletter.

Preparation Time: 15 minutes

Cooking Time: 15 minutes

Servings: makes 11-12 griddle cakes

1 1/3 cups soymilk
1 tablespoon lemon juice
1 cup cornmeal
¼ cup whole wheat pastry flour
2 teaspoons baking powder
½ teaspoon baking soda
dash salt
1 cup frozen corn kernels, thawed
1 cup grated zucchini
½ cup chopped green onions
2-3 tablespoons coarsely chopped black olives
2 tablespoons chopped pimiento, well drained
2 tablespoons chopped fresh cilantro or parsley

Combine soy milk and lemon juice in a measuring cup and set aside.

Combine the cornmeal, flour, baking powder, baking soda and salt in a mixing bowl. Combine the remaining ingredients in another mixing bowl. Add the soymilk mixture to the cornmeal mixture and mix well, then stir in the vegetable mixture. Ladle batter by $\frac{1}{4}$ cup scoops onto a hot non-stick griddle and cook until golden brown (this takes a bit longer than pancakes). Flip and cook until griddle cakes are browned on both sides. Keep warm in a low oven until ready to serve.

Hints: To make these without the wheat flour, use 1 $\frac{1}{4}$ cups of cornmeal and no wheat flour. If you use chopped fresh tomatoes, drain them well first. In addition, if you are using garlic, onion, and peppers, you may want to sauté them in a very small amount of vegetable broth before using in the recipe.

Red Pepper Sauce

Preparation Time: 5 minutes

Cooking Time: 30 minutes

Servings: makes 1 cup

2 large red bell peppers, seeded and coarsely chopped

1 small onion, coarsely chopped

1 clove garlic, coarsely chopped

1 tablespoon rice vinegar

$\frac{1}{2}$ tablespoon prepared horseradish

1 teaspoon chili garlic sauce

Place the peppers, onion and garlic in a food processor and process until quite smooth. Transfer to a pan and add the remaining ingredients. Cook, uncovered over low heat for at least 30 minutes to intensify flavors and reduce sauce slightly. Season with a bit of sea salt, if desired, before serving.

Hint: This makes a great dip for pita bread, a spread for crackers, a topping for griddle cakes, or a sauce for pasta or spaghetti squash. If you like your foods a bit spicier, add more of the horseradish or chili garlic sauce to taste.