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The Fat Vegan

You may consider this title an oxymoron—a figure of speech that combines two normally contradictory terms, but in real life this concurrence is all too common. You may also think the title is offensive. My intention is to help, not to provoke anger. People who have declared themselves “vegan,” have said “no” to eating all animal-derived foods. At extraordinary personal costs, many of these guardians labor tirelessly to protect the welfare of all animals. Fat vegans, however, have failed one important animal: themselves. Furthermore, their audiences of meat-eaters and animal-abusers may be so distracted by their appearance that they cannot hear the vital issues of animal rights and the environment; resulting in an unacknowledged setback for a fat vegan’s hard work for change.

I have a vested interest in helping vegans lose weight and become healthier. People living the vegan lifestyle have already embraced the most important tenet of the McDougall diet: consuming meat, poultry, fish, and dairy-products is at the root of heart disease, cancer, diabetes, arthritis, multiple sclerosis, and intestinal problems. Ours is a growing relationship. When I began my lifestyle-oriented medical practice as an internist in 1978, I was interested in dietary change only for the sake of my patients—I was unaware of animal rights and environmental issues. Over the years I have grown to understand that changing what humans eat is also essential for planet survival; meaning eliminating cruelty at the dinner table, and slowing climate change and pollution. People who believe in any or all of these issues must stand together; helping each other in order to make a difference in the future.

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My first vegan experience was in 1977 in Honolulu, Hawaii. I was working as a resident doctor at Queens Medical Center training to become an internist. Jeff Lane, a young doctor, was my intern and a vegan for ethical reasons—he did not want to harm animals. Outward proof of his convictions was his nylon belt and plastic shoes. But there was one glaring inconsistency: Jeff was not the picture of good health. He was very overweight with greasy skin and acne. I soon discovered why Jeff’s health was so poor: most of his calories came from potato chips and Coke—items easily available to him in the hospital dining room, gift shop, and vending machines. He was the ultimate “junk food vegan.” Yet, most vegans are very conscious of food quality and still many are overweight and unhealthy. What’s wrong with this picture?



Dietary Change Is Terrifying.

Almost all of us were raised on meat, poultry, seafood, milk, cheese, oils, flours, and sugars. These foods have provided all of our life-sustaining calories. To give these familiar foods up, in our minds, means starvation. This would be akin to asking us to stop breathing or go thirsty—unbearable, if not impossible, tasks. I remember well my first experience with foods different from those I was raised on. Mary, my wife of 37 years now, was pregnant with our first child, Heather, in 1974. We were living on the Big Island of Hawaii at that time. Buzz and Susan Hughes, a couple we met at our childbirth education class, invited us over for dinner. Susan prepared a wheat and barley casserole, a Caesar salad, vegetable side dishes, and a peach pie for dessert. The meal was tasty, but a drastic departure from my usual beef, chicken, cheese, egg, and ice cream menu. Even after second helpings my stomach was still empty of its customary fillings. On our drive home after dinner, I felt unsatisfied and actually believed that I would be unable to sleep through the night without “food.” I entered the front door of our house, which led directly to the kitchen with a well-stocked refrigerator. I eagerly opened the bottom bin where the sliced turkey was kept and made myself a Dagwood sandwich. After eating sufficient amounts of fat, protein, flour, and sugar, I slept well.

Old Habits Doom Vegans

Fat vegans are as terrified as anyone else of giving up their familiar protein- and fat- centered diet. In their minds, this change would be akin to starvation. How could they overcome the fear and still transition to a vegan diet painlessly? By simply replacing real animal foods with non-animal foods, that look, feel, smell, and

taste the same as the original. "What's for dinner?" Before, the answer was steak, fried chicken, pork chops or cheese pizza. Now, as a vegan, the response is "soy burgers, faux meatballs, meat substitute cold cuts, soya chicken chunks, soy hotdogs, soy mozzarella pizza, and mockduck (made with seitan)." Instead of animal fats and proteins, fuel becomes vegetable oils and isolated soy proteins. Olive oil and Earth Balance[®] spread replace lard and butter. Glassfuls of Elsie the cow's milk become soymilk. For dessert: a "dairy-free decadent indulgence (ice cream)" and soy yogurt. Vegetables remain insignificant side dishes, glistening with droplets of oil.

Calorie for calorie, in terms of nutrition, the fake food is no better, and in some ways worse, than the "real thing." Isolated soy protein causes greater [calcium loss](#), leading to osteoporosis and kidney stones, and also produces greater increases in growth factors (IGF-1) that [promote cancer](#) and aging, than does isolated cow's milk protein. "The fat you eat is the fat you wear"—olive oil and Earth Balance[®] spreads are just as unattractively worn on the thighs, hips, and buttocks, as are lard and butter. Vegetable oils are often more [cancer promoting](#) than are animal fats.

Comparison of Real and Fake Food (Percent of calories)

Item	Fat	Protein	Carbohydrate	Fiber
Burger	65	35	0	0
Soy Burger	28	62	10	5
Cheese	70	28	2	0
Soy Cheese	60	10	30	0
Lard	100	0	0	0
Earth Balance [®]	100	0	0	0
Olive Oil	100	0	0	0
Ice Cream	55	7	38	0
Soy Ice Cream	20	13	67	4
Duck	75	25	0	0
Mockduck	0	65	35	0

Do You Really Want the Same Food?

In 1986 I started planning for my first live-in program at St. Helena Hospital in the upper Napa Valley in Northern California. This community is largely made up of people of the Seventh Day Adventist faith. Their church is known for supporting vegetarian diets. Naturally, I asked the local people where to eat. They recommended the A&W restaurant on main street, Highway 29, on the west side of St. Helena. That evening I ordered their famous "veggie burger." My first bite told me a serious mistake was made. I complained to the man behind the counter, "I ordered the veggie burger and you gave me a beef hamburger." His response,

"Thanks for the compliment—our veggie burger tastes so real." I threw the burger in the trash and walked out. It was disgusting—A burger so greasy and beef-flavored, that I expected to find chunks of bone and blood vessels.

The Natural Human (Near) Vegan, Starch-based Diet

Fortunately, there is one single big solution that will revitalize people, cut food and health care costs, protect animals, and reduce environmental pollution, overnight: **reestablishing the natural human diet of starches**. My battle to spread this message relies on those people most ripe for change: especially vegans of all shapes and sizes. The switch is a simple one: rather than getting calories, like all other Americans and Westerners—and most vegans—now do, from fat and protein, the primary fuel becomes carbohydrate from starches. Rather than starvation, this change means fuller satisfaction and radiant health. The more you eat the trimmer and healthier you become. All large populations of active, healthy people, throughout written human history, have obtained the bulk of their calories from starch. Examples of people once thriving on common starches include Japanese and Chinese in Asia eating sweet potatoes, buckwheat, and/or rice, Incas in South America eating potatoes, Mayans and Aztecs in Central America eating corn, and Egyptians in the Middle East eating wheat. Men following diets based on grains, vegetables, and fruits have accomplished all of the great feats in history. The ancient conquerors of Europe and Asia, including the armies of Alexander the Great (356 - 323 BC) and Genghis Kahn (1167 - 1227 AD) consumed starch-based diets. Caesar's legions complained when they had too much meat in their diet and preferred to do their fighting on corn and other grains.

You Are What You Eat: The Low-fat Vegan

At every step of recipe design and food preparation, starches replace fake meats and dairy products manufactured from soy, seitan, sugar, salt, artificial flavorings and other chemicals. Oils, even the "healthy ones," are banned.

- Bean and grain burgers replace Boca Burgers [🌱](#).
- Add rice to your bean chili instead of Gimme Lean [🌱](#).
- Oatmeal for breakfast rather than greasy sausages and breakfast links.
- Olive oil is substituted with low-fat salad dressings.
- Leave the soy cheese off the whole wheat pizza.
- Replace oils in baking with fat replacers like "Lighter Bake," prune puree, or applesauce.
- Just leave the oils out of the recipe whenever possible.
- Have fruits for dessert.

Finally, for faster, greater weight loss minimize the use of all processed plant foods, which means simple sugars and flours.

- There is really no excuse for not making this big change. Even my intern, Jeff Lane, had alternatives while working a 100-hour week in the hospital. The dining room served oatmeal and cold grain cereals with fruit juice for breakfast. For lunch and dinner Jeff could have chosen salads with vinegar or salsa, rice, potatoes, sweet potatoes, corn, beans, low-fat vegetable soups, vegetables, and fruit. The end result would have been—with a little basic knowledge and minimal effort—he, as an influential doctor, could have been an extraordinary crusader.

Vegans Are Ripe For Change

Being vegan says to me **this is a person with outstanding character**. Vegans are self-sacrificing and

committed to making a difference. When everyone else is certain that it is our God-given right to mistreat and kill cows, pigs, chickens, and fishes in order to be properly nourished; a vegan would rather risk protein and calcium deficiency than to harm these beautiful creatures. Of course, this deep sacrifice ends with the discovery that plants provide all needed proteins, amino acids, essential fats, vitamins, and minerals (including calcium) without the inherent risks of flesh and dairy. Vegans are self-confident. They remain steadfast even when mom, dad, dietitian, and doctor are visibly angered by their religion of "veganism." Vegans are industrious. To avoid eating animals in a world where beef, chicken, and cheese are mixed in with everything in the market and on the menu is a daily struggle. Reading labels, turning down invitations to dinner, and occasionally, going hungry, require more effort than the average person is willing to muster.

Obviously vegans are exceptional people. With this one simple shift to a starch-based diet the word "vegan" will become synonymous with terms like healthy, trim, active, young, strong, and energetic, and finally the most important adjective, earth-changing.

Favorite Five Articles from Recent Medical Journals

Undeniable Evidence: Diabetes Treatments Do More Harm Than Good

Glucose Control and Vascular Complications in Veterans with Type 2 Diabetes by William Duckworth in the December 17, 2008 issue of the *New England Journal of Medicine* found, "Intensive glucose control in patients with poorly controlled type 2 diabetes had no significant effect on the rates of major cardiovascular events, death, or microvascular complications."¹ This study, called the Veterans Affairs Diabetes Trial (VADT) was of 1791 military veterans (mean age 60.4 years) who had a suboptimal response to therapy for type-2 diabetes. They were assigned to receive either intensive- or standard-glucose control and studied for 5.6 years. The intensive-therapy reduced the Hemoglobin A1c levels to 6.9%; compared to 8.4% in the standard-therapy group. The patients were also put on aspirin and a statin.

A weight gain of 18 pounds occurred with the intensive-treatment compared to 9 pounds with standard-therapy. There were 95 deaths from any cause in the standard-therapy group and 102 in the intensive-therapy group. In the intensive-therapy group, the number of sudden deaths was nearly three times the number as those in the standard-therapy group (11 vs. 4). More patients in the intensive-therapy group had at least one serious adverse event, predominantly hypoglycemia, than in the standard-therapy group.

These pharmaceutical companies—Sanofi-Aventis, GlaxoSmithKline, Novo Nordisk, Roche, Kos Pharmaceuticals, and Amylin—provided medications and financial support for the study.

Comment: This is the third industry-funded study published this year showing aggressive treatment hurts patients. On June 12, 2008 the ACCORD* trial and ADVANCE** trials were also published in the *New England Journal of Medicine*.^{2,3} Together, the effect of these three well-designed randomized studies should be enough to halt aggressive prescribing of diabetic pills and insulin to type-2 diabetics. Will this overwhelming evidence change how doctors practice? Probably not. Drug companies have millions of advertising dollars dedicated to emphasizing any slight benefits their drug treatments may show and minimizing the harms. In this manner they convince doctors to prescribe and patients to buy useless and harmful products. Most doctors are too afraid of lawsuits to stand up for the patients and against the drug companies. To change current practice, doctors need to fear being sued for too aggressively treating patients. Even more, they need to fear being sued for failing to prescribe the correct treatment for type-2 diabetics—a change in diet. None of these three studies published in one of the world's most prestigious medical journals taught dietary and lifestyle modification to their patients.

Currently, Food and Drug Administration (FDA) approval for a diabetic medication requires evidence that the drug will lower blood sugar—not that it improves the patient's life. The title of my [February 2008 newsletter](#) describes the results of such narrowly focused therapy: "Intensive Therapy Means Dying Sooner with Better Looking Numbers." The FDA is as of December 2008 recommending that all new drugs developed for the treatment of type-2 diabetes show that they do not increase the risk of cardiovascular events. However, this is not a requirement, just a recommendation or suggestion to the pharmaceutical companies.⁴

Eating the rich western diet causes type-2 diabetes. My February 2004 [newsletter](#) provides details on the cause and how a change in diet will cure essentially all type-2 diabetics—at the same time causing them to lose weight, reverse heart disease, and dramatically improve their overall health.

*ACCORD = Action to Control Cardiovascular Risk in Diabetes

*ADVANCE = Action in Diabetes and Vascular Disease: Preterax and Diamicron Modified Release Controlled Evaluation

1) Duckworth W, Abraira C, Moritz T, Reda D, Emanuele N, Reaven PD, Zieve FJ, Marks J, Davis SN, Hayward R, Warren SR, Goldman S, McCarren M, Vitek ME, Henderson WG, Huang GD; the VADT Investigators. Glucose Control and Vascular Complications in Veterans with Type 2 Diabetes. *N Engl J Med*. 2008 Dec 17. [Epub ahead of print]

2) Action to Control Cardiovascular Risk in Diabetes Study Group, Gerstein HC, Miller ME, Byington RP, Goff DC Jr, Bigger JT, Buse JB, Cushman WC, Genuth S, Ismail-Beigi F, Grimm RH Jr, Probstfield JL, Simons-Morton DG, Friedewald WT. Effects of intensive glucose lowering in type 2 diabetes. *N Engl J Med*. 2008 Jun 12; 358(24):2545-59.

3) ADVANCE Collaborative Group, Patel A, MacMahon S, Chalmers J, Neal B, Billot L, Woodward M, Marre M, Cooper M, Glasziou P, Grobbee D, Hamet P, Harrap S, Heller S, Liu L, Mancia G, Mogensen CE, Pan C, Poulter N, Rodgers A, Williams B, Bompoint S, de Galan BE, Joshi R, Travert F. Intensive blood glucose control and vascular outcomes in patients with type 2 diabetes. *N Engl J Med*. 2008 Jun 12; 358(24):2560-72.

4) (<http://www.medscape.com/viewarticle/585593>)

Brain Impairment from the Atkins Diet

Low-carbohydrate weight-loss diets. Effects on cognition and mood by Kristen D'Anci in the February 2009 issue of the journal *Appetite* concluded that, "The present data show memory impairments during low-carbohydrate diets at a point when available glycogen stores would be at their lowest." Women followed a low-carbohydrate diet, similar to the Atkins diet, or a reduced-calorie balanced diet, similar to that recommended by the American Dietetic Association (ADA). "Results showed that during complete withdrawal of dietary carbohydrate, low-carbohydrate dieters performed worse on memory-based tasks than ADA dieters. These impairments were ameliorated after reintroduction of carbohydrates." After about one week of severe carbohydrate deprivation subjects demonstrated impairment of memory.

Comments: Have you noticed any of your dieting friends slipping with their physical or mental health? There are scientific reasons to believe this is a real change caused by a deficiency of "brain fuel," which is carbohydrate. Sugar (glucose) is the primary, preferred fuel for the brain and it is not stored in the brain tissues. Thus, the brain is dependent upon circulating glucose in the blood stream. This glucose comes almost exclusively from eating carbohydrates. Except for milk and honey, only plant-derived foods contain carbohydrate. The body's stores of carbohydrate last about 24 to 72 hours after starting on a low-carbohydrate, Atkins-type diet. Upon depletion of carbohydrates the body metabolizes body fat into ketones, which can be used, but less efficiently, by the brain tissues and other body tissues for fuel.

The popularity of low-carbohydrate diets is waning, but I doubt they will vanish because they promise quick weight loss while consuming familiar foods like beef, butter and Brie. These diets work by simulating sickness. Without carbohydrate the body turns to fat for energy. Ketones are produced from fat metabolism and with their accumulation a condition of ketosis develops. Ketosis suppresses the appetite. Weight loss follows as long as ketosis-induced, appetite-suppression, is maintained. Most dieters cannot tolerate the unpleasantness of sickness for long and they give up, regaining all their lost body fat.

The foods consumed for a low-carbohydrate diet (meat, poultry, fish, cheese, eggs) are known to cause many serious illnesses, including heart disease, strokes, cancer, osteoporosis, and constipation. This is not the right way to lose weight.

D'Anci KE, Watts KL, Kanarek RB, Taylor HA. Low-carbohydrate weight-loss diets. Effects on cognition and mood. *Appetite*. 2009 Feb; 52(1):96-103.

Breast Cancers Spontaneously Disappear

The natural history of invasive breast cancers detected by screening mammography by Per-Henrik Zahl published in the November 24, 2008 issue of the *Archives of Internal Medicine* found, "...that the natural course of some screen-detected invasive breast cancers is to spontaneously regress."¹ The investigators found invasive breast cancer 22% more often in women who had a mammography every other year for 6 years than those who did not (1909 vs. 1564 per 100 000 women). If all cancer were to naturally progress and none disappear then the same number of cancers would be expected to be found in the women who received regular

screening every other year and those who only had one exam after 6 years. Their conclusion was, "it appears that some breast cancers detected by repeated mammographic screening would not persist to be detectable by a single mammogram at the end of 6 years." The final remarks of the investigators were, "Our findings are equally consistent with the possibility that mammography either leads to a reduction in breast cancer mortality or has no effect at all. Instead, our findings simply provide new insight on what is arguably the major harm associated with mammographic screening, namely, the detection and treatment of cancers that would otherwise regress."

Comment: Spontaneous regression of advanced breast cancer has been reported. One recent reported identified 32 such cases, but there are certainly many more unreported cases.² Advanced melanoma, brain cancer (neuroblastoma), and kidney cancer are also known to disappear without treatment. Precancerous changes in the female uterine cervix and colon polyps also regress.

Most of my readers know that I am against doing "early detection" screening tests for most cancers, including those of the breast, prostate, and lung cancer. This study provides one more reason to avoid mammography and even breast-self examination—benefits of which have been seriously questioned.^{3,4} The harms from these detection campaigns are, however, unquestioned.*

I often see women with breast cancer, men with prostate cancer, and both genders with many other forms of cancer in late stages. Their doctors have given them no hope—in fact, in most cases their well-intentioned treatments add to their misery. Hopelessness compounds the suffering. Patients need to be told that even with advanced cancer, sometimes there is recovery, called spontaneous remission. I believe this miracle is more likely to happen for someone in good health, rather than in poor health. The only way I know to consistently improve health is by replacing destructive habits with good ones. The most powerful of these changes is switching from the meat-, dairy-, and junk food-based Western diet to the McDougall starch-based diet. I have seen what I believe to be spontaneous remissions in my patients several times. Ruth Heidrich, reported as a [Star McDougaller](#), is one remarkable example of metastatic breast cancer diagnosed over 26 years ago—and she lives cancer free today.

*I believe there are minor benefits to be had from PAP smears every 3 to 5 years until age 50, one routine colon exam (polyps) at age 55 to 60, exams of the mouth (leukoplakia), and skin exams (pre-melanoma).

1) Zahl PH, Maehlen J, Welch HG. **The natural history of invasive breast cancers detected by screening mammography.** *Arch Intern Med.* 2008 Nov 24;168(21):2311-6.

2) Larsen SU, Rose C. Spontaneous remission of breast cancer. A literature review. *Ugeskr Laeger.* 1999 Jun 28;161(26):4001-4.

3) Baxter N; Canadian Task Force on Preventive Health Care. Preventive health care, 2001 update: should women be routinely taught breast self-examination to screen for breast cancer? *CMAJ.* 2001 Jun 26;164(13):1837-46.

4) Gøtzsche PC, Nielsen M. Screening for breast cancer with mammography. *Cochrane Database Syst Rev.* 2006 Oct 18;(4):CD001877.

The Ancient Human Diet Is Starch-based

Starch grains on human teeth reveal early broad crop diet in northern Peru by Dolores Piperno reported in the December 16, 2008 issue of the *Proceeding of the National Academy of Science*, found plant parts on the teeth (dental plaque) of people who lived in Northern Peru as long as 11,200 years ago and concluded, "Starch grain studies of dental remains document plants and edible parts of them not normally preserved in archaeological records and can assume primary roles as direct indicators of ancient human diets and agriculture."¹

Researchers examined 39 human teeth found in northern Peru's Nanchoc Valley from six to eight individuals. Some of the grains had been cooked. The diet of these people was considered stable for possibly 5000 years (until 6000 years ago). These people cultivated their crops close to their circular houses. Starch granules from Lima beans, common beans, peanuts, nuts, squash, grains, and fruits were identified.

Comment: Often the only findings reflecting the diet of ancient people are the hard bones of animals that are found near their ruins. Any plant material has decayed and disappeared. Because of this many people have come to the wrong conclusion that early people were primarily hunters and their diet was largely of meat. However, this research adds support for my often-stated position, that all large populations of trim, healthy people, throughout written human history, have obtained the bulk of their calories from starch.

The early ancestors of modern humans, from at least 4 million years ago, followed diets almost exclusively of plant-foods. Beginning at least 250,000 years ago, people survived as hunter-gatherers with a subsistence standard of living, eating foods that extended from one extreme to the other in proportions of plant vs. animal foods—from the raw flesh and fat of marine mammals; the Arctic Eskimos—to diets composed largely of wild plants of the Western Desert; the Australian Aborigines.² Hunter-gatherers took advantage of any dependable sources of food from their wild local environments. Because of the ease and dependability (compared to obtaining animals), gathering fruits and vegetables was a primary source of food for most hunter-gatherer societies. The emphasis on hunting increased in higher latitudes because of plant scarcity.³ Examination of the dental remains of this ancient culture provides more clear evidence that the natural human diet is starch based.

1) Piperno DR, Dillehay TD. Starch grains on human teeth reveal early broad crop diet in northern Peru. *Proc Natl Acad Sci U S A*. 2008 Dec 16; 105(50):19622-7.

2) Milton K. Back to basics: why foods of wild primates have relevance for modern human health. *Nutrition*. 2000 Jul-Aug; 16(7-8):480-3.

3) Milton K. Hunter-gatherer diets-a different perspective. *Am J Clin Nutr*. 2000 Mar; 71(3):665-7.

Diet Benefits Prostate Cancer (Another Ornish Contribution)

Clinical events in prostate cancer lifestyle trial: results from two years of follow-up by Joanne Frattaroli published in the December 2008 issue of the journal *Urology* found, "Patients with early-stage prostate cancer choosing active surveillance might be able to avoid or delay conventional treatment for at least 2 years by making changes in their diet and lifestyle." By 2 years of follow-up, 13 of 49 (27%) control patients and 2 of 43 (5%) experimental patients—those encouraged to adopt a low-fat, plant-based diet, to exercise and practice stress management, and to attend group support sessions—had undergone conventional prostate cancer treatment (radical prostatectomy, radiotherapy, or androgen deprivation).

Comment: This is the second report of the Prostate Cancer Lifestyle Intervention Trial started by Dean Ornish, MD. Given the honest facts about standard prostate cancer treatments, most patients would elect diet, and delay or avoid surgery, radiation, hormone deprivation (pills or cutting off their testicles), and chemotherapy. These damaging treatments fail to produce consistent survival benefits—and every doctor and patient should know the results of a century of research. Doing nothing would be a better option for most patients. Research also shows that the high-fat, meat- and dairy- rich Western diet causes this disease. Common sense says "Don't throw gasoline on a fire."

Frattaroli J, Weidner G, Dnistrian AM, Kemp C, Daubenmier JJ, Marlin RO, Crutchfield L, Yglecias L, Carroll PR, Ornish D. Clinical events in prostate cancer lifestyle trial: results from two years of follow-up. *Urology*. 2008 Dec; 72(6):1319-23. Epub 2008 Jul 7.



Featured Recipes

Vegetable Udon Soup

Preparation Time: 15 minutes

Cooking Time: 10 minutes

Servings: 4

8 cups vegetable broth
¼ cup soy sauce
2-3 cloves garlic, pressed
1 teaspoon grated fresh ginger
1 bunch green onions, cut into 1 inch pieces
4 ounces oyster mushrooms, sliced
7 ounces enoki mushrooms
1 carrot, thinly sliced
1 cup snow peas, trimmed
1 cup sliced baby bok choy

1 cup sliced Napa cabbage
1 12 ounce package fresh precooked udon noodles
1 cup cubed firm tofu (optional)

Place the broth, soy sauce, garlic and ginger in a large soup pot. Bring to a boil. Add all the vegetables and cook for about 3 minutes. Add the udon and the tofu, if using. Cook for another 3-4 minutes until the noodles are tender.

Hint: Dried udon noodles may also be used. Cook them in boiling water until tender, drain and reserve until needed in the recipe. Other kinds of mushrooms may be substituted for the one listed here, if desired. Fresh shiitake mushrooms add a wonderful chewy texture to the soup.

Vegetable Curry

This recipe requires some "hands-on" time because the vegetables need to be added at different times to keep them at just the right tenderness.

Preparation Time: 25 minutes

Cooking Time: 20 minutes

Servings: 6-8

¼ cup water
1 onion, chopped
1 teaspoon minced fresh garlic
1 teaspoon grated fresh ginger
1 red bell pepper, chopped
1 cup sliced fresh mushrooms
1 cup cut green beans
1 tablespoon curry powder
1 14.5 ounce can chopped tomatoes
1 14.5 ounce can garbanzo beans, drained and rinsed
½ cup V-8 juice
2 cups cauliflower florets
2 cups packed fresh baby spinach leaves
2 tablespoons cornstarch mixed in ¼ cup cold water
Dash sea salt
Freshly ground pepper, to taste

Place the water in a large pot with the onion, garlic and ginger. Cook and stir for 1 minute, then add the bell pepper, mushrooms and green beans. Cook, stirring occasionally for 5 minutes. Add the curry powder and mix in well. Add the tomatoes, garbanzo beans and V-8 juice. Bring to a boil, stir in the cauliflower and cook for 10 minutes. Add the spinach, mix in well, then stir in the cornstarch mixture. Cook and stir until thickened. Season with salt and pepper, if desired. Serve over brown rice or other whole grains or try as a topping for baked potatoes.

Hints: The V-8 juice gives a nice depth of flavor to this recipe, but regular tomato juice or vegetable broth may be used instead, if desired.

Lima Bean Soup

Preparation Time: 15 minutes

Soaking Time: overnight, or quick, 1 hour

Cooking Time: 2 hours

Servings: 6

1 cup dried baby lima beans
6 cups water
2 leeks, cut in half and thinly sliced
2 stalks celery, sliced
1 teaspoon minced garlic
1 ½ cups chopped potatoes
1 bay leaf
½ pound fresh mushrooms, sliced
1 tablespoon soy sauce

½ cup uncooked orzo pasta
¼ cup chopped fresh dill weed
Freshly ground pepper to taste

Place the lima beans and water in a large pot. Soak overnight, OR quick soak by bringing to a boil, cooking for 2 minutes, removing from heat and letting rest for 1 hour.

Then, bring beans and water to a boil, cover, reduce heat and simmer for 1 hour. Add the leeks, celery, garlic, potatoes and bay leaf. Continue to cook for 30 minutes. Add the mushrooms and soy sauce and cook an additional 20 minutes. Add the orzo and dill weed and cook for another 10 minutes until the orzo is tender. Season with some freshly ground pepper, if desired.

Quick Tomato Salsa

By Carol Van Elderen

Carol is my sister and she recently sent me this recipe for a fast and delicious salsa that is quick to put together from pantry ingredients and is always a favorite dip at potlucks or parties. Serve with baked tortilla chips or soft corn tortillas.

Preparation Time: 10 minutes
Chilling Time: 1 hour (optional)
Servings: variable

2 10 ounce cans Rotel diced tomatoes and green chilies
1 15 ounce can black beans, drained and rinsed
1 cup white corn kernels (see hint below)
1/8 cup chopped red onion (or to taste)
1/8 cup chopped fresh cilantro (or to taste)
1 tablespoon lime juice
½ to 1 teaspoon sugar (see hint below)

Drain one can of the tomatoes and leave the other one undrained. Combine all ingredients in a bowl and toss well to mix. Chill before serving for best flavor.

Hints: One can of white corn, drained well, may be used, or use frozen white corn kernels that have been thawed under cold running water. The sugar is optional and used to cut down on the heat if you think it will be too hot for your guests.

Lima Bean Surprise

Peggy Henry sent me the idea for this recipe and says she and her husband eat this in the morning for breakfast. I have made this several times over the past couple of weeks as a quick dinner for John and myself and it is very delicious and satisfying.

Preparation Time: 5 minutes (cooked rice needed)
Cooking Time: 10 minutes
Servings: 3-4

¼ cup vegetable broth
2 ½ cups frozen lima beans (16 ounce bag)
2 ½ cups shredded cabbage
1 ½ cups frozen corn, thawed slightly
2 ½ to 3 cups cooked brown rice
1-2 teaspoons seasoning mixture (see hints below)

Place broth, lima beans and shredded cabbage in a large non-stick sauté pan and cook stirring frequently for about 5 minutes. Add corn and cook, stirring occasionally for another 2 minutes. Add rice and seasoning mixture and continue to cook and stir until rice is heated through and all vegetables are tender. Serve at once.

Hints: Bags of shredded cabbage are available in many supermarkets, or shred your own cabbage in a food processor. To thaw the corn slightly, place in a colander and rinse with cool water. If you don't have leftover cooked rice in your refrigerator, use a package of frozen brown rice and heat it in the microwave. There are many delicious seasoning mixtures on the market. Try Mrs. Dash, or a lemon dill mixture. I used Lemony Dill Zest by Vegetarian Express. I sometimes mix in 1 teaspoon of Sambal Oelek when I add the rice for some extra heat. We also like to top this with Sriracha Hot Sauce and it is wonderful rolled up in a soft corn tortilla.

Creamy Soy Dressing

By Joyce Everett

Joyce is a chef at the Flamingo Resort Hotel where the McDougall Programs are held. This recipe is always a favorite at all of our programs.

Preparation Time: 5 minutes

Servings: makes about 2 cups

1 12.3 ounce package silken tofu

½ cup low sodium soy sauce

1 teaspoon fresh minced garlic

½ teaspoon fresh minced ginger

Place all ingredients into a food processor and process until smooth. Will keep in the refrigerator for at least a week.

Mango Raspberry Dressing

By Joyce Everett

Joyce is a chef at the Flamingo Resort Hotel where the McDougall Programs are held. She created this recipe for all the people who love fruity salad dressings.

Preparation Time: 10 minutes

Resting Time: 30 minutes (optional)

Servings: makes about 2 cups

1 cup fresh raspberries

2-3 mangos, peeled and chunked

1 teaspoon sugar

¼ teaspoon apple cider vinegar

½ teaspoon guar gum (to thicken)

Place all ingredients in a blender or food processor and process until smooth. Let rest for about 30 minutes to thicken. Will keep in the refrigerator for about 3 days.