



The McDougall Newsletter

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Diet Therapy is the Way to Make Real Money in Medicine

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Featured Recipes

Recipes this month are contributed by VICKI BRETT-GACH, a Certified Vegan Lifestyle Coach and Educator through Main Street Vegan Academy, and a Certified Personal Chef through Wellness Forum Health. Vicki completed training in Nutrition for a Healthy Heart, and earned a Certificate in Plant-Based Nutrition through the T. Colin Campbell Center for Nutrition Studies.

Mixed Berry Oatmeal Muffin Cups Overnight Oats with Apples, Apricots, and Almonds Ratatouille Flatbread Pizza Spicy Black Beans and Greens Over Rice Perfect Lentil Soup and Mashed Potatoes Chocolate Sweet Potato Brownies with Banana-Date Frosting

Diet Therapy is the Way to Make Real Money in Medicine

Less is More		
McDougall's Medicine: A C (1985), I have provided yo evidence that most accept chronic diseases fail, and	that dietary therapy is the ion is found in the McDougall	
Heart surgery		Kidney disease
Diabetes medication	ons	<u>Arthritis</u>
Hypertension treat	ments	Bowel disorders
Early detection for	cancers	Multiple sclerosis
Cancer treatments		<u>Osteroporosis</u>

For my entire medical career, spanning half a century, the pot of gold to be made from sick people has been tapped into almost exclusively by the pharmaceutical, surgical, radiation, device, screening, and hospital and healthcare provider industries. The economics are changing, fortunately, as the news spreads that "food poisoning" (due to subsisting on the rich Western diet) is the cause of most of our chronic diseases, and that diet therapy will prevent and cure most of these patients. You can become a dominating part of this multi-trillion-dollar medical-care business (about \$9,990 annually per US citizen) by practicing diet therapy: the prevention and cure of common diseases by teaching patients how to stop food poisoning (via the standard American diet) and how to eat food that supports good health (like the McDougall diet).

Honest Medical Care Begins with Training

Medical students tell me that the two primary purposes of their half-million-dollar education are (1) to get them ready to pass the national licensing boards, and (2) to learn a trade. Yes, medical schools, and the residency programs that can follow for further training, are trade schools designed to provide technical skills required to perform the tasks for a specific job. For example, all healthcare practitioners are trained to prescribe medications (including supplements), catheterize coronary arteries (cardiologists), insert intestinal scopes (gastroenterologists), and remove body parts and replace them with mechanical devices (various surgeons). These tasks are the profit-makers.

Training students to teach their patients how to eat well is currently unprofitable and, as a direct result, is not a respected field in medicine. Primary care—as delivered by general practitioners, and family and internal medicine specialists—is currently the principal source of the meager dietary advice given to patients. Medical schools have been found to be hostile to students interested in primary care. The current curriculum provided in medical schools worldwide does not include meaningful lessons on diet therapy. The brief "nutrition education" offered by medical schools means that students memorize obscure facts about biochemical pathways and cellular metabolism. I made one effort to fix this with California law SB 380, which passed in 2011, requiring medical schools to teach students, and for practicing physicians to learn, about human nutrition. No practical change has followed over the past six years; therefore, expecting educators to make longoverdue corrections is unrealistic.

Students Must Self-serve and Self-educate

Students often ask me, "How should I train? I want to really help people with their chronic diseases by changing what they eat." I recommend that they go through traditional training first, such as medical or osteopathic school, dietetic or nursing school, naturopathic or chiropractic school, or respected post-doctorate training programs (such as a PhD in Nutrition). I advise them to learn everything these conventional schools have to teach. I also recommend that students not be combative during their training; not "going along" is risky, and students could easily

be asked to leave before getting their degree. Once credentialed, however, is the time to begin speaking out.

Physicians, dietitians, nurses, chiropractors, naturopaths, etc. must become selfeducated in diet therapy. I provide a CEU-credited course on nutrition (The Starch Solution Certification Course) and a CME-credited course on Diet Therapy.

Like everyone else, you must provide financially for your and your family's needs: tuition for school, shoes on the kids, house and car payments, etc. I started in my first practice in 1978 by opening an individual doctor's office. This can still be done; however, one of the biggest problems will be attracting customers (patients). In addition to building a client base interested in diet therapy, in the beginning, I had to care for everyday problems (viral flu, lacerations, broken bones, emotional distresses, etc.). I also carried a beeper, worked day and night, and frequented emergency rooms for customers in order to pay my bills. Finally, by 1986, my determination and efforts to practice honest medicine for people with chronic disease resulted in my full-time practice of diet therapy.

Finding Profitable Employment in the 21st Century

In the current medical environment of payment based on "unit relative value" (paying for *doing* things), setting up an individual practice like I once did is very difficult. Opportunities can be found, however, within the established practices of others, such as working with a cardiologist, oncologist, or diabetologist. These busy specialists do not have the training or the time to educate their patients on what to eat and how to prepare new foods. Fortunately, you can perform this vital education and make the "specialist" appear to be a far more effective healthcare provider.

Most physicians now practice within medical groups (including universities) where efforts are made to keep the business (profits) within the company. Apply to become a member of one of these established organizations. Your extraordinary knowledge of human nutrition can make sick patients well. Unfortunately, making patients well is still largely unprofitable. "Fee for service" incentivizes more office visits, tests, referrals, and treatments. (One standout exception to these economic enticements is Kaiser Permanente.)

Popularization of another payment system, "capitation," will soon push diet therapy to the forefront of medical care. Capitation is a payment arrangement for healthcare services where providers are paid a set amount for each enrolled person. Remuneration is greatest when costly patients are made well. Regaining a healthy body and appearance for most people simply means stoping food poisoning (from eating animals and vegetable oils) and instead eating a starch-based diet. Thus, as a credentialed (MD, DO, RD, RN, ND, DC, etc.) practitioner trained in diet therapy, you have the potential to become the largest profit-maker for any medical company.

Speaking of companies, another approach is to become employed by medically selfinsured businesses. I am currently working with two multi-billion-dollar US companies. Our last 8-day, live-in session included 120 employees. The cost to this company for this Program (which eventually ends up affecting more than just the attendees) was less than three heart bypass surgeries that went well; and far less than would have been spent for one employee sent for a heart surgery accompanied by major complications (an expected scenario). Consider the billions of dollars at stake for millions of businesses, small and large, that could profit from your knowledge and skills using diet therapy instead of screenings, medications, surgeries, etc.

Someone Is Going to Make the Money

My view is that there is a pot of gold available for the taking (\$3 trillion annually in the US)—for your taking! At least half of that money is spent directly on dietary diseases that are easily prevented. More importantly, because people rarely act until they get into trouble, is that these illnesses can be reversed and, in most cases, cured by switching to a health-supporting diet. But they (the patients and the businesses) need your help. Become a part of this highly rewarding, self-gratifying, and financially profitable business of diet therapy, and leave antiquated medical practices (the competition) behind.

Featured Recipes



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Vicki is a graduate of Dr. McDougall's Starch Solution Certification Course. She is also Forks Over Knives Plant-Based Certified, and a chef with the Plant Based Nutrition Support Group

(PBNSG.org) team.

Vicki coaches individual clients, and teaches a variety of heart-healthy vegan cooking classes and workshops. Connect with Vicki's Ann Arbor Vegan Kitchen blog at http://annarborvegankitchen.com, and follow Ann Arbor Vegan Kitchen on Facebook at https://www.facebook.com/AnnArborVeganKitchen.

MIXED BERRY OATMEAL MUFFIN CUPS

Yield: 12 muffins
4 ripe bananas, mashed
1 cup unsweetened applesauce
2 cups rolled oats
2 tablespoons ground flaxseed meal
1 teaspoon cinnamon
1 1/2 teaspoons baking powder
1/2 teaspoon baking soda
1 1/2 teaspoons pure vanilla extract
1 1/2 teaspoons apple cider vinegar
2 cups frozen mixed berries



Instructions

Preheat oven to 350 degrees. Line muffin pans with parchment paper liners or have a silicone muffin pan available.

In a large mixing bowl, stir together all ingredients until just combined.

Divide batter evenly into muffin cups, and bake about 25 minutes, or until tops are almost golden and feel just about firm to the touch. Remove muffins from the oven, and place on cooling racks.

Serve warm or at room temperature. (Extras freeze well, and can be warmed up later in the week!)

OVERNIGHT OATS WITH APPLES, APRICOTS, AND ALMONDS

Serves 1

- 1/2 cup rolled oats
- 1/2 cup apple cider, water, or non-dairy milk
- 1/4 cup diced apples
- 1 tablespoon chopped pitted dates
- 1 tablespoon chopped dried apricots
- 1 tablespoon dried cranberries
- 1 tablespoon toasted slivered almonds
- 1/2 teaspoon cinnamon or apple pie spice

Instructions

Add the rolled oats to a small jar, and cover with the liquid of your choice. Make sure the oats get immersed, at least for the most part.

Top with fruit and nuts. Cover jar tightly, and refrigerate overnight.

In the morning, warm briefly if desired, and enjoy!



RATATOUILLE FLATBREAD PIZZA 1-2 1 1/2 cups ratatouille* (recipe below) 1 1/2 cups mashed potatoes** (my method is below) 2 sprouted whole-grain tortillas (such as Ezekiel)



Garnish: fresh basil

Instructions Preheat oven (or toaster oven) to 400 degrees.

Place whole grain tortillas or flatbreads onto a baking sheet. Slather with a thick layer of mashed pototoes.

Top the potatoes with the ratatouille, and sprinkle fresh basil over the ratatouille. Bake flatbread pizzas for approximately 10 to 12 minutes, or until the edges begin to turn crispy and golden brown, and the center is hot and bubbling. Remove from oven, and serve hot.

* Ratatouille
1 onion, chopped
1 garlic clove, minced
3 zucchinis, quartered lengthwise, and thinly sliced
1 red bell pepper, chopped
1 can diced tomatoes
1 teaspoon herbes de Provence or Italian seasoning

salt and black pepper

To make the ratatouille, in a large hot skillet, add onions and sauté for about 5 minutes, or until they begin to brown. Add a bit of water to avoid sticking to the pan.

Once the onions begin to brown, add the garlic. Continue to cook for a minute or less. Then stir in the zucchini and bell peppers. Mix in the tomatoes, add the seasonings, and toss gently to combine. Cover and allow all of the vegetables to steam together until almost tender. Then remove cover, and continue to simmer for a few more minutes, until all of the vegetables are tender, and the liquid in the pan has reduced nicely. Serve immediately, or set aside to use over Ratatouille Flatbread Pizza.

** Mashed Potatoes
2 Yukon Gold potatoes
soy milk, plain unsweetened
dash of onion powder
kosher salt
coarsely ground black pepper

To make the mashed potatoes, peel and chop potatoes. Place potatoes in a pot of water, and bring to a boil. Cover, reduce heat, and continue to simmer until tender. Drain potatoes, and mash until creamy with soy milk and seasonings, to taste. Serve hot, or set aside to use over Ratatouille Flatbread Pizza.

SPICY BLACK BEANS AND GREENS OVER RICE

Servings: 4

2 cups of prepared black beans, or one 15ounce can, drained and rinsed 3/4 cup fresh salsa (or to taste) 4 cups of raw greens, stems stripped, and leaves rinsed and chopped salt and pepper to taste 4 cups of cooked brown rice (warm) Garnishes: avocado, chopped tomatoes, diced bell peppers, and fresh cilantro or basil



Instructions

Heat black beans in a large saucepan. Stir in salsa, and then add the chopped greens. Cover to steam until tender. Season to taste with salt and pepper.

Serve over warm brown rice.

Garnish with avocado, chopped tomatoes, diced bell peppers, and fresh cilantro or basil. Serve along with toasted corn tortillas, if desired.

PERFECT LENTIL SOUP WITH MASHED POTATOES

Serves 6-8

- 1 large Vidalia onion, chopped
- 4 ribs of celery, chopped
- 2 cups dried lentils, rinsed
- 9 cups vegetable broth
- 1 14-ounce can chopped or crushed tomatoes
- 1 teaspoon cumin
- 1/2 teaspoon curry
- 1/2 teaspoon garam masala
- 2 teaspoons kosher salt (generous)
- 1/2 teaspoon coarsely ground black pepper
- 1 bay leaf
- 1/4 cup freshly squeezed lemon juice
- To serve: mashed potatoes scoops

Stovetop Instructions

Combine all ingredients in a large soup pot, except the lemon juice and mashed potatoes.

Bring to boil. Once boiling, reduce heat to simmer. Cover, and cook for one hour and 45 minutes, or until lentils are tender and begin to cook down to a smooth creamy soup.



Carefully remove the bay leaf. Use an immersion blender to create a slightly creamier texture, if desired. Stir in fresh lemon juice. Serve hot, with scoops of mashed potatoes.

Slow Cooker Instructions

Combine all ingredients in a large slow cooker, except the lemon juice and mashed potatoes.

Cover and cook on high setting for 6 hours or until lentils are tender. (All slow cookers have their own personality - older ones may take longer, newer ones may take less time.)

Carefully remove the bay leaf. Use an immersion blender to create a slightly creamier texture, if desired. Stir in fresh lemon juice. Serve hot, with scoops of mashed potatoes.

CHOCOLATE SWEET POTATO BROWNIES WITH BANANA-DATE FROSTING

Serves 10-12 20 Medjool dates, pitted 1 cup water 3/4 cup sweet potatoes (steamed, mashed with a bit of water) 1/2 cup cocoa 1/2 cup cocoa 1/2 cup oat flour 1 tablespoon leftover coffee 1 teaspoon pure vanilla extract Frosting Ingredients 4 Medjool dates, pitted 1 to 2 tablespoons water 1 banana



Instructions

Preheat oven to 350 degrees. Prepare a 5- \times 7-inch baking pan with parchment paper. (I use a glass Pyrex baking dish.)

Into the bowl of a large food processor or blender, place 20 pitted dates, plus 1 cup water. Process until pureed. Add the other brownie ingredients, and mix until just combined.

Pour batter, which will be very thick, into the baking pan. Make sure the batter is very evenly distributed in the pan. Bake 35 to 40 minutes or until a toothpick inserted into the center comes out clean.

Remove brownies from oven and allow to rest on a cooling rack for 10 minutes. While the brownies are cooling, you can prepare the frosting...

Using a food processor or blender, blend frosting ingredients together. Then just slather over the top of the brownies, and serve.