



The McDougall Newsletter

Mar 2017

## McDougallCare: The Civilized Sustainable Healthcare Act (CSHA)

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## BROAD Study Confirms Starches Are Best for Health and Healing (with a 25-Pound Annual Weight Loss)

Citation: Nutrition & Diabetes (2017) 7, e256; doi:10.1038/nutd.2017.3  
www.nature.com/nutd

### ORIGINAL ARTICLE

**The BROAD study: A randomised controlled trial using a whole food plant-based diet in the community for obesity, ischaemic heart disease or diabetes**

N Wright<sup>1</sup>, L Wilson<sup>2</sup>, M Smith<sup>3</sup>, B Duncan<sup>4</sup> and P McHugh<sup>5</sup>

[Read the study >>>](#)

Anne Gibbons - Cartoonist for SIX CHIX

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## Featured Recipes

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Three Bean Chili  
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Gigante Beans

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## McDougallCare: The Civilized Sustainable Healthcare Act (CSHA)

The current disagreements over healthcare policies in the US are essentially founded on: 1) trying to induce people who do not need healthcare to pay the bills for those that do, and 2) requiring the wealthy to spend some of their "pocket change" for the healthcare of people with low incomes and few opportunities. This narrow-mindedness and societal greed must be stopped for the United States (US) to move forward as a world leader.

In the current political environment, the Republican Party plans to replace the Democratic Party's healthcare program, **The Patient Protection and Affordable Care Act** (ObamaCare), with **The American Health Care Act** (also known as "Trump/Ryan Care"). Healthcare reforms made over the past decade have been a significant step forward toward providing modern-day, consumer-oriented healthcare to millions more people, but at considerable costs. Note that even ObamaCare has increased the profits for physicians, hospitals, and medical-device and pharmaceutical companies by insuring tens of millions more Americans. Republicans pride themselves on their dedication to reduce excess spending, especially for what are termed "entitlements." Regardless of the orientation for more or less healthcare, for any system to be sustainable the costs from providers must be controlled, and money, certainly from taxation, must be raised. Many improvements will need to be made before meeting the expectations of both political parties (as well as independents).

### I (Dr. McDougall) Want Universal Health Care

I base this recommendation on my observations as a medical professional caring for thousands of people over the past half-century. So far, all I have seen is Americans becoming fatter and sicker, even after a **24-fold increase** in the financial costs to everyone (from 2007 to 2010).

As citizens, we require specific services—which cannot be provided by individuals or even huge companies—from our federal government. For example, neither IBM, Ford Motor Company, nor Google could build an operational military defense; thus we have the US Armed Forces and Intelligence Agencies. Delivering effective healthcare

to Americans has failed in part because individual companies, like self-insured Whole Foods Market, Blue Cross/Blue Shield Insurance, and Mayo Clinic, will never be capable of organizing and cooperating in order to meet our citizens' healthcare needs.

We need a **"medical military-like effort"** similar to our Armed Forces in order to provide Americans relief from the epidemics of obesity and deadly illnesses affecting not just a few citizens, but everyone living in the US. Necessary medications, surgeries, and hospitalizations are basic rights that I believe should be available to all citizens, rich or poor, under universal healthcare. Just as important, people should be educated about and protected from the architects of our most common illnesses, including obesity, heart disease, diabetes, and cancer. The government has a duty to protect us from not only foreign (such as terrorists) but also domestic threats, such as Big Tobacco, Big Alcohol, Big Food, Big Medicine (physicians), Big Pharma, and Big Hospitals.

The World Health Organization (WHO) considers universal healthcare as a situation where citizens can access health services without incurring financial hardship. In the US, one heart attack or a single case of breast cancer commonly causes financial bankruptcy for a family. Money saved over a lifetime for children's education and grandparents' retirement can be lost overnight. That's not fair. If the government is not going to protect us from industry's "Big" threats to our health, the catastrophic financial consequences of our poor health should be shared. They can't have it both ways.

### **McDougallCare's "Life Panel"**

Previously proposed healthcare plans have included review panels intended to protect us from medications, testing, procedures, and hospitalizations deemed unnecessary and possibly harmful for the patients. A few critics during the 2009 debate about federal health care legislation worried that this oversight would result in **"Death Panels,"** where a few bureaucrats could decide whether Americans—such as elderly parents, the terminally ill, or children with severe birth defects—would be "unworthy of medical care." This theoretical concern for such uncivilized behavior is

minuscule compared to what Americans have suffered for more than a half century. More than a trillion dollars are spent annually in the US on medical care that has been proved (and recognized by experts sworn by oath to protect their patients) to do more harm than good.

I suggest a "Life Panel." Here are a few examples of how Life Panel could, in the year 2017, be protecting you and your family from receiving unnecessary, costly, debilitating, painful, and deadly tests and treatments. It would:

1) Stop the one million **heart surgeries** done annually (at a cost of \$100 billion) in the US for chronic coronary heart disease. These procedures have been proved, beyond any doubt, to not save lives.

2) Stop the \$330 billion annual expense for the **care of type-2 diabetes**. Aggressive treatment, in general, and specific medications have been proven to cause deaths, heart disease, hypoglycemia, and weight gain for patients, and without the promised benefits of better health.

3) Stop the billions of dollars wasted on cancer chemotherapy. A recent review found that **18 of the 36 cancer drugs** commonly prescribed by your trusted physician showed no survival benefits.

4) Stop the billions of dollars spent annually on screening for breast, colon, and prostate cancer. None of these screening techniques have been shown to **reduce overall mortality**.

Simply providing honest information about the lack of effectiveness of commonly prescribed tests and treatments, such as these four examples above, could save more than \$1 trillion of the \$3 trillion spent annually on our current health care. This Fort Knox-sized treasury—saved by only disallowing scientifically established "quack-like treatments"—could then be spent on making America well again.

**McDougallCare Will Prevent and Cure Most Diseases**

More than two-thirds of chronic diseases are caused by diet and lifestyle (smoking, alcohol). To be more specific, the rich Western Diet (loaded with meat, dairy, fish, oil, sugar, and other junk food) is the cause of sickness among most Americans. As important, stopping the cause (it's the food!) will reverse, slow, and/or cure chronic diseases in most cases. This change to a healthy starch-based diet will require education on a massive scale, beginning before pre-school and ending long after the education provided by medical and dietetic schools.

I often hear from people, including caring physicians, that "financially poor and less educated people do not care about themselves; they will never change their diets; why waste the money and effort on them?" That's simply not true. I have had a chance to be involved in providing the McDougall Program to the Sacramento California Food Bank and for a large Baptist Church in Oakland, California, both attended by very low-income people. In both cases the medical results of weight loss, lower cholesterol, relief of pain, etc. and the compliance with the new diet were similar to those of the usual attendees of the official McDougall Program—who are mostly from middle- to upper-income levels and have had advantages of at least a college education.

### **McDougallCare: The Winners and Losers**

Providing universal healthcare coverage will most obviously help the disadvantaged who cannot afford medical insurance. However, good health for all Americans will benefit individuals, communities, companies, our military and every other US citizen. The very rich will have to pay more, but in some cases justice will be served by this apparent inequity, because the architects of our major disease are Big Tobacco, Big Alcohol, Big Food, Big Medicine (physicians), Big Pharma, and Big Hospitals. Individuals working for these "Big" companies that have been making everyone sick have accumulated great personal wealth. It is payback time.

In the US, providing care for sick people is the largest growing segment of our economy. Can you see the foolishness? In my town, as in yours, the biggest, newest buildings are general hospitals, cardiac and cancer centers; pharmacies occupy every shopping mall; and kidney dialysis centers are thriving. With McDougallCare, it is my

hope that more than half of these buildings will eventually become warehouses storing no-longer-needed drugs, colonoscopes, mammography machines, robotic prostate surgical contraptions, and heart-lung heart bypass equipment.

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[Read the study >>>](#)

This study, just published in *Nutrition and Diabetes* (a medical journal), showed participants lost an average of 11.5 Kg (25.3 pounds) at one year. This is the largest weight loss of any randomized control trial (RCT) where participants had no restriction on calories and were not required to exercise.\* The participants of the BROAD study from Gisborne, New Zealand exchanged their standard Western diet for a very low-fat, whole food plant-based (WFPB) diet (The McDougall Diet). Two of the lead authors, Dr. Luke Wilson and Dr. Nicholas Wright, were once trained as students at the McDougall Program in Santa Rosa, California.

Gisborne is a small, rural city in New Zealand, a country with a very large meat and dairy consumption. This small community had limited access to healthful convenient foods; with no large organic supermarkets nor vegan cafes and vegan-friendly restaurants. Even though "the starch-based diet" required some major changes from the Kiwis' favorite foods (meat, dairy, sugary beverages, and other junk food), the study participants enthusiastically enjoyed the new meals, and especially appreciated the results of looking and feeling better.

The study targeted patients who were overweight and obese; many also had heart disease or diabetes. Sixty-five participants were split randomly into two groups (33



vs. 32). At 12 months those who changed their diets increased their quality of life, decreased their waist circumference by an average of 9 cm, and their medication usage by an average of 29%. Co-author, Dr. Nicholas Wright said, "The whole food plant-based approach shows very promising weight loss results, without suffering with hunger, that were sustained over a very long time (one year)."

International media attention has been generated by the BROAD study. See this [news story with an informative video](#).

This independently produced YouTube video will also help explain to you the results of the BROAD study:



For more information see: [www.thebroadstudy.com](http://www.thebroadstudy.com).

\*The OHSU, McDougall [Diet and MS study](#), a one-year RCT, showed over 19 pounds of weight loss without additional exercise and eating without food (calorie) restriction. Participants in our multiple sclerosis (MS) study were not selected for the need for weight loss, nor diabetes and cardiovascular disease problems - therefore less weight

loss over one year might be expected than was found in the BROAD study. However, we did get significant changes in total cholesterol, fatigue scores, and inflammatory markers. Our compliance rate was 85% for a year. Attendance to BROAD study education meetings was 79%. Thus, the results from the BROAD study are in many ways confirmatory and consistent with the OHSU Diet and MS study.

## SIX CHIX Comic Applauds The Starch Solution

*“Follower, believer, advocate: very glad to be happily eating white potatoes again, for one thing. That they were somehow fatally flawed always struck me as dubious.”*

Anne Gibbons,  
Cartoonist for SIX CHIX





## Featured Recipes

### Three Bean Chili

Prep: 20 minutes Cook: 45 minutes

Serves:6-8

#### Ingredients

- 1/2 cup water
- 1 onion, chopped
- 1 yellow bell pepper, chopped
- 1 red bell pepper, chopped
- 2-3 cloves garlic, minced
- 2 Tbsp chili powder
- 1 tsp cumin
- 1 tsp coriander
- 1 tsp oregano
- 1/4 tsp cayenne
- 1 15 oz. can tomatoes, chopped
- 1 1/2 cups frozen corn kernels, drained and rinsed
- 1 15 oz. can kidney beans, drained and rinsed
- 1 15 oz. can black beans, drained and rinsed
- 1 15 oz. can pinto beans, drained and rinsed

#### Directions

Place the water in a large pot and add the onion, bell peppers and garlic. Cook, stirring occasionally until vegetables soften slightly, about 5 minutes. Add the seasonings and mix in well. Add remaining ingredients, stir well to mix, bring to a boil, reduce heat, cover and cook for about 40 minutes.



Hint: Serve over brown rice, rolled up in a burrito shell, or in a shallow bowl with cornbread on the side. Serve with some shredded soy or rice cheese sprinkled over the top, or some tofu sour cream. Sprinkle with some chopped fresh cilantro or parsley. If the chili gets too thick while cooking, add a bit of water to the pot to thin it out before serving. Choose whatever color of bell peppers that you prefer, the more color variety, the prettier the dish. The same is true for the beans, choose whichever color you prefer.

## Cornbread #2

Prep: 15 minutes Cook: 20 minutes

Serves:9

### Ingredients

- 1 cup cornmeal
- 1/2 cup whole wheat pastry flour
- 1/2 cup unbleached white flour
- 2 tbsp organic sugar
- 2 tbsp baking powder
- 1/4 tsp salt
- 1 cup soy milk
- 1/2 cup frozen corn kernels, thawed
- 1/2 cup of fat replacer "prune puree"
- 1 tbsp egg replacer mixed in
- 4 tbsp water
- 2 tbsp chopped green chilies (optional)

Directions

Preheat oven to 400 degrees.

Mix the dry ingredients together in a large bowl.



Mix the soy milk, corn kernels and fat replacer together in another bowl. Combine the egg replacer and water and mix with a whisk until frothy. Add to wet ingredients and mix. Stir in the chilies, if desired.

Pour the wet ingredients into the dry ingredients and stir until just moistened. Do not over-mix. Pour into a non-stick square baking pan and bake for 20 minutes, until toothpick comes out clean.

## **Gigante Beans**

On our last McDougall Travel Adventure we were served many delicious meals by the kitchen staff. This dish seemed to be the most popular as we received the most requests for the recipe for these wonderful beans.

From Chef Michael Young at the Sheraton Kauai Hotel



Time Required: 11-12 hours

Servings: 6-8

### **Ingredients:**

- 1 pound dried gigante beans or large dried lima beans (about 2 1/2 cups)
- 2 bay leaves
- 3 cups chopped onion
- 1 cup chopped celery
- 1 cup finely chopped carrot
- 3 garlic cloves, minced
- 2 teaspoons dried oregano
- 2 - 14.5 oz can crushed tomatoes, undrained
- 2 teaspoons agave
- 1 1/4 teaspoons salt

1/2 teaspoon freshly ground black pepper  
1/4 cup chopped Italian parsley  
1 ½ teaspoons fresh thyme, picked and chopped  
Zest from 1 lemon  
1-2 cups roughly chopped and steamed kale

**Procedure:**

Rinse the beans. Place beans in a large Dutch oven covering them with water (there should be 2 inches of water above the beans), cover the pan and let stand 8 hours or soak overnight. Drain beans and rinse again.

Cover the beans with water (there should be 4 inches of water above beans), add bay leaves, and bring to a boil. Cover, reduce heat, and simmer approximately 90 minutes or until beans are tender. Drain beans.

Preheat oven to 325°.

While beans cook, heat a large nonstick pan over medium heat. Add onion, celery, carrot, and garlic. Cook for 10 minutes, stirring occasionally. Stir in oregano and tomatoes and simmer for 10 minutes. Stir in agave, salt, and pepper. Combine the cooked beans and tomato mixture in a 3-quart casserole dish and bake at 325° for 1 to 1 1/2 hours until beans are tender. Stir in lemon, thyme and parsley when dish is removed from oven.

For the McDougall Adventure the kitchen grilled the kale, rough chopped it and then steamed it until soft. The kale was then tossed with the beans and served. I would skip the grilling step and just roughly chop and pan steam/sauté the kale in a bit of water until tender before tossing with the beans.