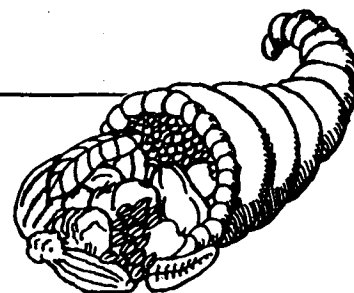


THE NEWSLETTER MCDUGALL



JUL/AUG 1987

VOL.1 NO. 6

INFORMATION FOR YOUR HEALTH

WHAT ARE THE MCDUGALLS UP TO NOW?

WE'RE MOVING TO CALIFORNIA-AND WE'RE STAYING IN HAWAII. For more than three years John has been traveling to the mainland, mostly to California, two to three times a month. He has decided to reverse the direction of travel and the McDougall's will soon call Northern California (probably, Santa Rosa) our home.

We have lived in Hawaii for 15 years--during this time we have developed many important relationships, including many patients who depend on our unique practice of health care. John McDougall M.D. will continue to see patients at The Castle Professional Center in Kaneohe, HI. Appointments are made by calling (808) 247-6686.

The current success of **The McDougall Program at St. Helena Hospital and Health Center**, and the potential to help a larger number of people on the mainland is the primary reason for our change in residence. We also believe our children (two are now in junior high school) will have greater opportunities growing up on the West Coast, than are offered in Hawaii. This move should not be viewed as an abandonment of our obligations in Hawaii--we will continue to work hard here and consider Hawaii home (when the children are grown we have plans to settle again in Hawaii.)

MCDUGALL FROZEN FOODS ARE NOW IN THE HAWAIIAN MARKETS. Over this past year we have developed a frozen food business, which now sells five products in the supermarkets. Each 22 ounce (microwaveable/boilable) package contains a pouch of starch and a pouch of sauce. Nutritionally, they are very low-sodium, low-fat, high-fiber, high-carbohydrate and contain no-cholesterol. Choices are: spaghetti sauce with noodles, curried vegetables with five grain rice, sweet and spicy (garbanzo bean/sweet potato) stew with brown rice, cajun sauce (black-eyed peas and okra) with five-grain rice, and chili with brown rice. The package serves two and sells for under \$5.00 in Hawaii (when it reaches the mainland selling price will hopefully drop to under \$4.00, because of lower production costs.) Plans are to set up a production and distribution facility in California, ASAP.

TRAVEL-LECTURING-MEDIA-- Living in Hawaii means a five-hour commute to work. Another important reason for the move to California is to have closer contact with the media and a larger audience of people interested in hearing about our positive message of health and healing. Dr. McDougall's Honolulu Sunday evening radio show will continue on KGU with the help of John Westerdahl, R.D. and the telephone satellite system. In the near future we plan for a weekly radio show broadcast from the Bay Area by Dr. McDougall.

MORE BOOKS? A question we are often asked. One difficulty is that we have written four comprehensive volumes that deal thoroughly with most aspects of medicine, nutrition and food preparation--we refuse to rewrite and sell you the same material under a different title. However, there are a few ideas that we have considered that would be valuable contributions to your fund of knowledge. To write a book is a one to four year commitment of time and energy; certainly we will not put out anything short of our best effort.

MEDICAL RESEARCH

VEGETARIAN DIET IN MILD HYPERTENSION: A randomized controlled trial--Armstrong B. (British Medical Journal 293:1468, 1986.) 58 subjects age 30-64 with mild untreated high blood pressure were placed on a lacto-ovo-vegetarian diet and a diet containing meat. A fall in blood pressure of 5 mm Hg was seen when subjects were placed on the vegetarian diet. The authors concluded, "In untreated subjects with mild hypertension, changing to a vegetarian diet may bring about a worth-while fall in systolic (top number) blood pressure."

COMMENT--High blood pressure is one sign of a diseased blood vessel system--rather than a disease in itself. The subjects in this study made several changes that lower blood pressure: the removal of meat from the diet, sodium reduction, more potassium, vegetable oil and fiber. When these factors are improved with a healthier diet the blood flows more easily; against less resistance from plugged, sludged and spasmed blood vessels--and this *ease of flow* is reflected in a lower blood pressure. These investigators could have carried the benefits of healthier foods further and used a diet such as described in The McDougall Plan (no dairy and eggs). This diet, combined with exercise, helps over 90% of patients discontinue blood pressure medication, keep their blood pressure low, reduce their risk of heart attack and stroke, and improve their health in general.

NUTRITIONAL THERAPY FOR RHEUMATOID DISEASES--an editorial--Panush R. (Annals of Internal Medicine 106:619, 1987.)

The author makes the following points:

- diet therapy for rheumatic diseases has generally been considered a form of "quack" therapy.
- actually *little* objective evidence exists about nutritional therapy of rheumatic diseases (arthritis)...virtually all conclusions are based on inadequate data or improper study design.
- persuasive reasons exist for considering that diet might affect rheumatic disease by two mechanisms 1) dietary components may cause allergic reactions. 2) diet might alter the immune system.

-One patient of the authors showed consistent worsening of her disease with the addition of dairy products to the diet--

symptoms peaked in 24 to 48 hours after eating dairy foods, and were resolved after 1 to 3 days.

-30% of this doctor's patients claimed food allergies worsened their arthritis.

-The author concludes, "The notion that food or food-related environmental antigens induce or perpetuate symptoms, at least for some patients, is novel, logical, and potentially enlightening."

COMMENT--For years The Arthritis Foundation and most arthritis specialists have declared diet unrelated to cause and cure of arthritis. This position has prevented most patients with crippling arthritis from taking advantage of a cost-free, no-side effect, approach to relieving their suffering--for some a dietary change can mean a cure. The significance of this milestone editorial is not only the recognition that diet can benefit, at least some patients with rheumatoid arthritis, but the fact that this article was printed in one of the most conservative and prestigious medical journals in the world--The Annals of Internal Medicine.

Is anybody listening? I doubt that any change in therapy for arthritis patients will be seen soon. The medical business is slow to progress, unless that progress can be directly translated into dollars. Therefore, patients must become involved in their own health and make these sensible dietary changes that may quickly relieve their daily suffering. My experience has been that almost all of my rheumatoid arthritis patients show improvement in their disease and many can be declared "cured" after only a few weeks--but they must be strict with their diet! (for specifics of the diet and the scientific data see The McDougall Plan and McDougall's Medicine.)

Present day drug therapy of rheumatoid arthritis is ineffective at improving the long-term outcome of the disease--drugs do not cause remissions, "cures" or decrease the destructiveness of this disease. Beneficial effects, if they occur at all, are seen only during the first few years of therapy and the side effects are serious--sometimes deadly. These failures have been with the most powerful, "modern" medication treatment programs, including various combinations of gold, penicillamine, cytotoxic (cancer) drugs, chloroquine and prednisolone (steroids). By 20 years, from the time of diagnosis, over one-third of rheumatoid arthritis patients are dead and more than half are either dead or severely disabled (Scott D. Lancet 1:1108, 1987.) Therefore, there is every reason to offer every patient with arthritis the opportunity for improvement or cure with a healthy diet--furthermore, no one can justifiably claim doctors who recommend diet-therapy are depriving their patients the benefit of modern medicine.

ABSENCE OF DIABETES IN A RURAL WEST AFRICAN POPULATION WITH A HIGH CARBOHYDRATE-/CASSAVA DIET--Teuscher T. (Lancet 1:765, 1987.) None of the 1381 subjects examined in a West African village had diabetes. Their diet was 84% carbohydrate, 8% protein and averaged 1916 calories. This observation does not support the belief that a high carbohydrate diet leads to diabetes. In fact, diabetes is much more common in blacks living in Western modernized parts of the world, where the diet is lower in carbohydrate and higher in fat--in America 2-13% of blacks suffer from diabetes.

COMMENT--Even today most people, including many doctors and dietitians, believe that diabetes is caused or aggravated by carbohydrate (starch and sugar) intake, and that diabetics should stay away from these foods. Actually, the opposite is

the case-- high carbohydrate diets protect against diabetes and can actually result in a "cure" of the diabetes in adult-type diabetics--90% of people stopping diabetic pills and 75% discontinuing insulin after changing from the high-fat, low-fiber, low carbohydrate American diet to a diet of starches, vegetables and fruits such as recommended in The McDougall Plan. Carbohydrates actually stimulate the activity of our body's own insulin to work more efficiently; whereas, fat blocks insulin activity (see McDougall's Medicine).

The benefits of a diet higher in carbohydrates have become so well accepted that the American Diabetes Association has made its first revision since 1979 for the recommended diet for diabetics--Carbohydrates have been liberalized to 55-60% of calories; fiber increased to 30 to 40 g/day; protein markedly limited in diabetics with kidney disease; total fat less than 30% of the calories; and cholesterol less than 300 mg/day. These changes are important not only to improve the blood sugar, but to reduce the risk of complications of heart disease, kidney failure and blindness, that eventually ruin the lives of most diabetics. (Diabetes Care 10:126, 1987)

CHOLESTEROL AND MORTALITY--30 Years of Follow-up From the Framingham Study (Journal of the American Medical Association 257:2176, 1987) Cholesterol levels were measured in 1959 men and 2415 women between the ages of 31 and 65 years (from 1951 to 1955.) These people were then watched for the next thirty years--observing the course of their health. Death from all causes was found to increase by 5%, and deaths from heart disease increased by 9%, with each 10 mg/dl (mg%) rise in cholesterol level. According to the authors, "under the age of 50 years these data suggest that having a low cholesterol level improves longevity. After age 50 years the association of mortality with cholesterol levels is confounded by people whose cholesterol levels are falling--perhaps due to disease predisposing to death"

COMMENT--This long running study of a population of people living in Framingham, Massachusetts confirms the benefits of having a low cholesterol level. You would think that everyone would be convinced and all efforts would be directed to lowering cholesterol levels rather than studying the problem over and over again.

However, controversy continues and will increase over the next few years as the public awareness of this health issue increases. The battle lines will be drawn, in part, because of the negative financial impact on the industries that sell cholesterol for profit--beef, pork, chicken, fish, dairy, egg, restaurant, and processed food industries. Also, our natural tendency is to resist change--giving up all those rich foods is an overwhelming challenge for many people--too many would rather die than learn to like vegetables--instead they embrace information that supports rich dietary habits and belittles the importance of warning signs, such as elevated cholesterol levels.

COMPARISON OF MEDICAL AND SURGICAL TREATMENT FOR UNSTABLE ANGINA PECTORIS--Results of the Veterans Administration Cooperative Study--Luchi R. (New England Journal of Medicine 316:977, 1987.) From June 1976 to 1982, 468 men with unstable angina (continuing severe chest pain) were assigned to have bypass surgery or to be treated with medication alone. The overall two year survival rate did not differ between the two groups. The authors concluded, "...patients with unstable angina have a similar outcome after two years whether they receive medical

therapy alone or coronary bypass surgery plus medical therapy. However, patients with reduced left ventricular ejection fractions may have a better two-year survival rate after coronary bypass surgery."

COMMENT--Studies done over the past 19 years consistently show that bypass surgery does not save lives in most cases--the exceptions are rare. Since bypass surgery does not save lives, the primary reason given by doctors for performing this \$25,000 operation is that the surgery relieves chest pain. However, few people are offered the advantage of a low-fat, no-cholesterol diet (along with other positive changes in lifestyle), which has been shown to result in a 91% reduction in the frequency of chest pain episodes in 24 days, thereby removing the indication for bypass surgery (Ornish D. Journal of the American Medical Association 249:54, 1983.) As concerning is the fact that few people are properly informed about the risk of complications from surgery--one of the best kept secrets in the medical profession is the near-certainty of brain injury from bypass surgery, resulting in a 15 to 44% possibility of permanent brain damage. (see McDougall's Medicine and Newsletter Vol.1 No. 1 for details.)

PATIENT PROFILE

PAT MILLER
(father/welder
enjoying life)



"How many people can claim they have had burning indigestion, stomach cramps, and diarrhea all their life? Patrick Miller gives such a history by graphic stories that help us understand the daily misery he has been through.

"Even as a teenager I thought I had an ulcer with acid indigestion burning holes into my stomach. I liked tomato juice, grapefruit juice, and Mexican food, but every time they gave me pains that felt like a bomb went off in my stomach. It didn't take me long to figure out that coffee was a big problem, so I avoided it. I always kept a bottle of Gelusil or Maalox in the refrigerator and I drank it by the quart. At midnight I would often wake up to take a glass of milk and antacids to quiet the pains so I could fall back to sleep."

"I could expect that each and every dinner would be followed by severe stomach cramps and diarrhea. I would go out to eat with my wife at a nice restaurant and then I would have to make a mad dash home to use the bathroom. From dinner to the diarrhea that followed my meal meant unbelievable pains all over my intestinal area. Most days I could count on 8-10 explosive loose stools a day. I took Kaopectate when the diarrhea got more violent than usual."

"I saw many doctors and underwent many X-ray examinations that were all, fortunately, normal. The doctors told me I had peptic disease. They always told me: there was something wrong with me -- some unidentified abnormality with my stomach and intestines was the fault--I would have to live with it. Never, not even once, was I told my troubles might be caused by what I eat. My problems were so routine I would have almost considered them normal, except for what I saw my mother go through."

"As a kid, I was raised in Pleasanton, California, we had little money to eat out. Mom was the cook, and she had a real taste for butter, gravy, chicken fried in two inches of grease, and lots of milk. I remember we had a jar in the refrigerator where she stored the fat from chicken, and other meats, for reuse. We often had the fat drippings from a steak for gravy."

"My mother died from colon cancer about five years ago. She was 65 years old. The year before she died she spent with our family in Hawaii. She had diverticulitis for many years--I can remember her buckled over with pain and lying curled up on the floor. She was overweight by about 70 lb. I took her to many doctors--they told her the pains were all in her head. A heart doctor sent her to a neurologist who ordered a brain scan. She knew she was sick so she left us to return to her home in Idaho. There they opened her up and found inoperable cancer--they gave her six months--to the day she lived six months."

"Watching what my mother went through, I suspected that if I didn't do something soon I would be in the same trouble--these feelings of doom were especially bad when the pain felt like someone was shoving a volley ball through my intestines. My brother-in-law, Joe, started me thinking that diet might be the trouble and the answer. He had had similar intestinal troubles that disappeared on The McDougall Diet."

"Just before Christmas of 1986, I started preparing myself for this marathon diet. I weighed 182 lb., at 5 ft. 8 in. On January 30th, 1987 I saw Dr. McDougall and I was down to 178 lb. I became more strict after this first visit. From that day on I have been free of indigestion, stomach cramps and diarrhea--no antacids, no Kaopectate. I can now eat a "veggie bean" taco with the hottest sauce followed by only a burn in my mouth, but without that bomb going off in my stomach. I'm now down to 152 lb. and I have been asked by some friends if I'm well--not because I look unhealthy, but because of the surprising weight loss in such a short time. Recently I saw a guy I hadn't seen for a while. He said 'what happened to you? You used to be fat--your face used to be big and round. Have you got AIDS?'--I told him. My cholesterol dropped in three weeks from 228 to 152 mg/dl. I work hard as a welder--I can say my ability to move around and my strength are improved. I have developed an interest in my health that has me running 4 miles, five days a week, when I have the time."

"My wife, Claudette, initially didn't want to do it. Her feeling was the meals offer nothing that looks good, smells good or tastes good. Then, when she saw drastic changes in me, she decided there was something to this. Now she feels much better herself, and has lost 10 lb. Claudette now does most of the cooking--lots of pasta, spaghetti sauce, Mexican dishes."

"My six-year-old son says he is on McDougall, 'just like you dad.' I was a little worried about the kids getting enough calcium and protein--then I figured, how could anything that produced such benefits for me be harmful for them."

"At first it was hard to find dishes I could eat--now it's easy--at the Yum Yum Tree (a fine dining family restaurant) I order steamed vegetables without the cover of butter or cheese. Two weeks ago I was on a job where I had only a lunch wagon available--I didn't eat lunch at all the first three days--then I had them give me two scoops of rice--eventually, I started buying bananas, potatoes, apples, and carrots in the market on the way to work--I ate them uncooked--it's better than being sick all day."

"My brother-in-law, Bob, went to a McDougall Seminar--since then it has been gourmet cooking "McDougall style"--he goes to extremes to prepare lavish meals--makes bread, desserts--loves to cook and he's real good at it--he's lost a lot of weight."

"I've met people that say you can't go on the rest of your life with this. For some reason people think you can't enjoy life with these foods--I say I feel better now--so am I enjoying life, finally. I learned to really enjoy the new foods in just a few weeks. On one or two occasions I've strayed from the diet--the results were predictable--my old symptoms started to return. I tell people 'I don't eat anything that eats anything.' I probably talk too much about the diet--it has become such a part of our lives."

RECIPES

Help! Help! Help! With the upcoming move I have little time to invent new recipes and no kitchen to test them in. Please send some of your favorites to include in the newsletter. Thanks!

SPLIT PEA AND VEGETABLE STEW

Contributed by Wyn Washington of London, Canada

2 cups green split peas
6 cups water
1/2 lb. green beans, cut into 1 in. lengths
1/2 lb. zucchini, chopped
1/2 lb. mushrooms, sliced
2 green peppers, chopped
4 tbsp. miso
2 tsp. prepared mustard

Combine the split peas and water in a large pot. Bring to a boil, reduce heat, cover and let simmer for 1 hour. Meanwhile, chop the vegetables as directed. Place in a pot with a small amount of water. Steam for 20 minutes. Combine cooked split peas and vegetables. Season with miso and mustard. Serve over a starch.

VEGETARIAN VEGETABLE SOUP

Contributed by Lisa Messina of River Ridge, LA

1/2 lb. kidney beans	1 cob corn, cut into pieces
1/2 lb. navy beans	1/4 lb. green beans, cut into pieces
1/4 lb. split peas	4 large, ripe tomatoes, chopped
8-10 cups water	1/2 small head cauliflower, chopped
3 onions, chopped	1 zucchini, chopped
1 stalk celery, chopped	1 small bunch broccoli, chopped
1 potato, chopped	6 oz. whole wheat pasta (shells, elbows, etc.)
2 carrots, chopped	

Place beans and water in a large pot. Bring to a boil, reduce heat, cover and simmer until beans are cooked but not mushy, about 2-2 1/2 hours. Add more water if necessary. Meanwhile prepare the vegetables. When beans are tender, add onions, celery, potato, carrots, corn, green beans and tomatoes. Cook for 45 minutes, adding water if necessary. Add remaining vegetables, cook an additional 20 minutes. When all vegetables are tender, add pasta and more water if necessary. Cook 20 minutes longer. Season with soy sauce and pepper to taste.

CHUNKY APPLE SPICE MUFFINS

Contributed by Joanne Stepaniak of Pittsburgh, PA

1 cup whole wheat flour	1 tsp. arrowroot
1 cup oat bran (or another cup of w.w. flour)	1/4 cup honey
2 tsp. baking powder	1/2 cup applesauce
1/2 tsp. allspice	2 tart apples, peeled, cut in small dice
2 tsp. cinnamon	1/2 cup water
1/4 tsp. ground cloves	1/2 tsp. vanilla
1/4 tsp. powdered ginger	

Mix dry ingredients and wet ingredients separately. Combine them and mix thoroughly. Spoon into non-stick muffin tins. Bake at 400 degrees for about 25 minutes.

LETTERS TO THE MCDUGALLS

Thanks for taking the time to talk with me earlier this month. I'm the doc in San Francisco who had the horrific numbers (cholesterol 880, glucose 375, and triglycerides 4300+). I started the McDougall Plan diet (without fruit, as you suggested). After three weeks, my cholesterol was down to 220, my glucose was 140, and my triglycerides fell to 420. This is on diet alone. These numbers still aren't the greatest, I know. But they've sure taught me something about the importance of diet that wasn't taught to me in med school. I've been telling folks all about it and all my friends have been hammered with the details. I suspect a few of them may be tired of hearing about how great my b.m.'s are now...I've even started asking patients who I see in the emergency room where I moonlight about diet--and even sold my copy of your book to one! I'd like to thank you again for putting out this information. If we can get more folks onto your plan, we'll save lots of lives and make those that are saved a whole lot better in quality. Thanks again. **F.G. San Francisco, CA.**

I have read both your books and they have revolutionized my life. I have rheumatoid arthritis, and after 1 week on your diet I was able to give up all drugs. My blood picture dramatically improved as well. I can now walk normally and can even run a little. My hands, fingers and wrists are quite pliable now, even before getting out of bed in the morning. I had to change doctors because mine was not interested when I refused further gold shots. He said "Well, you're on your own then". With gold shots, Naproxen, and Tylenol #3 my blood picture was getting worse and worse, and I was feeling worse and worse. I now have hope for the future. Many, many thanks!
Mrs. J.S., Vancouver, B.C.

I am delighted to subscribe to your newsletter. You helped me some months ago when I wrote to you about my allergic baby. You should be delighted to know that she has not had an ear infection since I started the elimination diet. The ear infections (starting at 4 months of age) were our first clue of the allergies. In addition, this little girl who had never taken a nap longer than 45 minutes, always awakened crying, and had not slept through the night at 8 months of age, suddenly started taking 1 1/2 to 2 hour naps and sleeping through the night!! She even started waking up happy--cooing and playing. I am delighted.
J.S., FL.

MORE HELP

The McDougall Plan--\$8.95. McDougall's Medicine--A Challenging Second Opinion by New Century--\$8.95. Volume I & II of the Cookbooks \$7.95 each. Add postage (\$2 first book--\$1 each additional)--send to POB 1761, Kailua, HI 96734. THE MCDUGALL PROGRAM at St. Helena Hospital, Napa Valley, CA. Two weeks of physician supervised live-in care designed to get people off medication, out of surgery and living again--call 1-800-358-9195 (outside California) or 1-800-862-7575 (California).

SUBSCRIBING INFORMATION

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THE MCDUGALLS
P.O. BOX 14039
SANTA ROSA, CA 95402