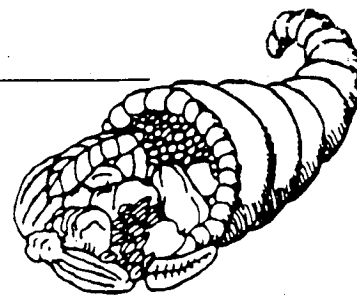


THE MCDUGALL NEWSLETTER

MAR/APR 1990

VOL. 4/NO. 2



INFORMATION

A NEW MCDUGALL BOOK

“THE MCDUGALL PROGRAM --12 DAYS TO DYNAMIC HEALTH”

Copies of the new book will be available **by the middle of May**. (Bookstores across the country will be selling them by May 31st for \$19.95 & in Canada for \$26.95.) And the book really is new, not just a rehash of old material--that's why it took 4 years to write. The McDougall Program--12 Days To Dynamic Health published by one of the biggest book companies in the world, New American Library, is based on our experiences of running the McDougall Program over recent years. This book is as close as you, your friends, and relatives can come to attending this 12-day program at St. Helena Hospital and Health Center in Deer Park, CA without spending \$3595.00. However, because of the entertainment value and the extensive research and reference information, participants of the 12-day live-in program will undoubtedly buy their own personal copy.

The McDougall Plan and McDougall's Medicine are written in a textbook style and will remain best-selling reference works in the fields of nutrition and medicine. This new book is written as a step by step guide for changing your diet and solving your health problems. The book is filled with advancements and refinements in medical and nutritional information. Even though we've worked at this for more than 15 years, we're still learning too.

Novice McDougallers (those new to dietary change) will appreciate how easily this book helps them make miraculous changes in their health, exercise habits, food preferences and mental attitude--almost painlessly. This is a priceless gift for those you love.

Would You Like A Personalized Signed Copy?

Send \$19.95 (retail bookstand price) per book with the name you want autographed in the book. For shipping (airmail) and handling include \$3.00 for the first book & \$2.00 each additional book (to same address). Send to P.O. Box 14039, Santa Rosa, CA 95402. Specify "The McDougall Program" with your order. US funds only. Plans are to mail books by May 15th.

CONTENTS

I. THE PROGRAM

Chapter 1. The Program You Asked For. An enticing introduction to the best diet for you.

Chapter 2. Physician, Heal Thyself. A personal history of Dr. McDougall and the development of The McDougall Program.

Chapter 3. Food Facts: Common Dietary Myths Dispelled. The truth about protein, fats, carbohydrates, calcium and many other health issues.

Chapter 4. What The Program Involves. The essential elements of the program, summarized.

Chapter 5. Preparing For The Big Change. Psychological, practical, and social preparations to begin the program.

Chapter 6. Shopping And Cooking McDougall Style. The essentials of food preparation including a comprehensive list of convenience canned and packaged products.

Chapter 7. The Program Begins: Days 1-4. Daily elements of the program are described as two patients--Sam and Sally Waterman--make the change.

Chapter 8. Continuing Towards Your Goals: Days 5-8. Share in the improvements in health, as well as in the challenges, of the Watermans as you learn about the program.

Chapter 9. Reaping The Rewards: Days 9-12, And One Year Later. In less time than most people vacation, you and the Watermans have experienced the McDougall Program and dynamic (even miraculous) improvements in your health.

II. EATING, MCDUGALL STYLE: RECIPES AND SPECIAL MEALS

Chapter 10. Recipes For The Twelve-Day Diet. Simple to prepare and delicious selections are provided for the 36 meals with shopping lists.

Chapter 11. More Healthful Recipes. Many new recipes that fit the McDougall Diet (not found in previous McDougall books.)

Chapter 12. Transitional Treats: Old Favorites McDougall Style. From "bacon" and scrambled "eggs" to burgers and "meat" loaf, you will find recipes that will satisfy your desire for rich foods without completely destroying your health. Recipes use tofu and other high fat ingredients (Of course, no cholesterol used).

Chapter 13. The Pleasures Of Eating Out. Ideas on restaurant eating and suggestions for travel and being a proper guest.

III. A MEDICAL GUIDE TO HEALTHFUL LIVING

This section describes the "usual" medical care prescribed by doctors these days and its drawbacks, and then provides you with scientifically-based, practical ways to prevent, improve upon, and/or cure common chronic illnesses by correcting the causes--diet and lifestyle.

Index of Conditions

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 --Kidney Failure
 --Nephritis (Glomerulonephritis)
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 --Uric Acid Stones
 LIVER DISEASE
 MULTIPLE SCLEROSIS
 OBESITY
 OSTEOPOROSIS
 UPPER INTESTINAL DISTRESS
 --Esophagitis
 --Gastritis
 --Indigestion

Followed by medical references to the scientific literature

The 1990 National Book Publicity Tour:

Arrangements are being made for me (Dr. McDougall) to appear on radio, TV, and be read in print across the country. Do you have any media contacts that we should know about? Tours are usually very rushed, however, if time permits I would like to make personal appearances on this tour. Can you set up lectures, meetings, or talks at local hospitals with doctors and dietitians? Contact me with any helpful information.

Dates & Places

June 5 & 6--San Francisco
 June 11 & 12--New York
 June 13--Boston
 June 14--Philadelphia
 June 15--Washington D.C.
 June 18--Detroit
 June 19--Cleveland
 June 20--Chicago
 June 21--Minneapolis
 June 22--Seattle
 June 26 & 27--Los Angeles
 July 3--San Diego

In the next Newsletter I will provide more information. Schedules do change.

MEDICAL RESEARCH

The Influence of Diet on the Appearance of New Lesions in Human Coronary Arteries by D. Blankenhorn in the March 23/30 1990 JAMA (263:1646). The Cholesterol Lowering Atherosclerosis Study demonstrated

significant benefit in 2-year coronary angiograms by lowering blood cholesterol through a change in diet. Each increase in level of consumption of total fat and polyunsaturated fat was associated with a significant increase in new lesions. These results indicate that when total and saturated fat intakes are reduced to levels recommended, protein and carbohydrate are preferred substitutes for calories, rather than monounsaturated or polyunsaturated fat.

COMMENT: This study of 188 non-smoking men who had undergone bypass surgery and thus had extensive atherosclerosis (hardening of the arteries) showed that a small reduction in cholesterol (7.1% reduction in LDL-Cholesterol) was associated with no new lesions of atherosclerosis over a two year interval. Surprisingly, disease progression was not stopped by changing from saturated (animal) fat to polyunsaturated (like corn and safflower oil) or monounsaturated (olive oil) fat. Only decreasing fat intake by increasing protein and carbohydrate intake would stop the development of new lesions in the artery walls. Other research has shown that high levels of vegetable fats injure the cells of artery walls (Hennig B, Am J Clin Nutr 49:301, 1989).

The authors of this paper wrote about the reversal of atherosclerosis, discovered by autopsies performed during periods of semistarvation in World Wars I and II, and consider this strong evidence that a change in diet is effective treatment for this disease. However, they described such diets as too austere to be practical, and instead, they suggested a much less stringent change to low-fat meats and dairy products to help victims of heart disease.

I find a lukewarm approach to a deadly disease unacceptable--and I believe most widows and orphans of heart disease patients would agree. The greatest improvements in diet result in the fewest heart attacks and deaths, and the best chance for reversal of atherosclerosis--*big changes, beget big results.* To me it is unethical to offer the patients anything less than the best opportunity to heal and stay healthy. Compromise dietary advice is as serious a form of malpractice as giving a patient half the recommended amount of penicillin to cure his pneumonia because of a doctor's concern that the full-dose, larger, pill is too difficult to swallow.

Besides you have discovered through your dietary changes that the foods we like are the ones we are familiar with; and after a few meals, new foods become favorites. What may seem austere to one person may be a feast to the next man or woman. Once I relished greasy pork chops, ring bologna, "fried" cheese, and globs of mayonnaise. Nowadays, if these foods were the treatment for heart disease I might choose to die (at least my belly would ache for relief). The diet consumed during the World Wars--described by this paper as austere, deprivation, and unreasonable--actually had more fat and cholesterol (15 to 20% fat) than the McDougall Diet (5% fat with no cholesterol). I don't feel deprived--do you?

I know from personal contact with the author of this study that his dietary habits are very American, and provide a major obstacle to healthier eating recommendations that should be coming from his landmark scientific work.

You can now add worsening of atherosclerosis to the dangers of substituting olive oil and other vegetable oils for

lard, butter, and other animal fats. Vegetable oils also cause obesity, oily skin and hair, gallbladder disease, and cancer to name several of the important consequences from this serious burden on your health.

Effect of Fluoride Treatment on the Fracture Rate in Postmenopausal Women with Osteoporosis by L. Riggs in the March 22, 1990 New England Journal of Medicine (322:802). The authors found that although fluoride increases bone mass, the newly formed bone has reduced strength. These investigators conducted a 4 year prospective study of 202 postmenopausal women with osteoporosis and vertebral fractures who were randomly assigned to take 75 mg of sodium fluoride a day or a placebo. All patients also received 1500 mg of calcium a day.

The treated group had a 35 percent increase in bone density in the lumbar spine (backbone) and 10-12 percent in the femur (upper leg bone). The number of fractures of the spine were the same in the treated and the placebo group, but the number of fractures in the arm, wrist, pelvis, legs, feet, and ribs were greater in the treated group (72 vs. 24). The authors concluded that fluoride therapy "... increases skeletal fragility."

Side effects were severe enough in 82% (54 of the 66 women) taking fluoride to warrant reduction in dosage of medication. The major side effects were gastrointestinal symptoms due to irritation of the stomach by the fluoride, and lower-extremity pain due to the occurrence of small incomplete fractures and too rapid growth of bone.

COMMENT: Other treatments of osteoporosis such as estrogen and calcitonin (another hormone) help prevent the loss of bone, but do little or nothing to cause bone to regrow; therefore great hope was placed in fluoride, an agent known to increase bone mass. Although the x-ray may look marvelous, bone formed during the administration of fluoride is structurally abnormal and weak. It is more crystalline and less elastic than normal bone. Thus the increase in bone mass does not translate into strength. Previous studies of fluoride have also shown an increased risk of hip fractures after taking this medication.

An editorial that accompanied this article summarized the consequences. "The inescapable conclusion from this study is that sodium fluoride in the dosage used is not an effective or safe treatment for postmenopausal osteoporosis."

Atherosclerotic Risk Factors--Are There Ten Or Is There Only One? By William Clifford Roberts, Editor in Chief of the American Journal of Cardiology in the September 1, 1989 issue (64:552). Dr. Roberts argues that there is only one risk factor for heart attacks and angina due to atherosclerotic coronary artery disease: *a serum cholesterol greater than 150 mg/dl*. Of the other eight factors usually considered as risk factors for heart disease, six of them (male sex, family history of coronary events in a person less than 55, smoking, high blood pressure, diabetes and severe obesity) only exert an influence in people with elevated cholesterol levels (over 150 mg/dl). In other words, atherosclerosis will not develop or progress due to these factors unless the cholesterol is first elevated. The other two factors--definite clinical evidence of heart artery disease and disease of cerebral (brain) and peripheral (leg) arteries--are not really risk factors; they simply say the disease is present.

HDL "good" cholesterol should be considered an additive risk factor if it is low, but only when the LDL "bad" cholesterol is elevated and the total cholesterol is over 150 mg/dl.

He points out that international population studies show a virtual absence of atherosclerosis-related diseases when their cholesterol levels remain below 150 mg/dl. People with diabetes and/or hypertension show no evidence of increased risk of heart attacks as long as their cholesterol levels are below 150 mg/dl. A low HDL-cholesterol (20 mg/dl) is of no risk if the total cholesterol (<150 mg/dl) and LDL-cholesterol (<100 mg/dl) are at desirable levels. But if the total- and LDL-cholesterol are too high a low HDL-cholesterol makes matters worse.

COMMENT: For more than a decade I have considered an ideal cholesterol level for my patients to be less than 150 mg/dl; even at the risk of being labeled impractical with my expectations and much too strict in my dietary recommendations. (However, a strict diet is necessary to achieve this level without drugs for most people.) I'm pleased for your sake and mine to see a few other health professionals coming to similar conclusions. Unfortunately, inertia resisting long-over-due changes in medical practice contributes to 1.25 million *preventable* heart attacks and 768,000 deaths due to heart disease yearly in the United States alone.

RECIPES

"Cheese" Sauce

Try this melted "cheese" sauce over vegetables or potatoes. It is delicious and healthy.

1/4 cup cooked, peeled potato
2 cups water
1 4 oz. jar pimientos
1 tsp. salt (optional)
1/2 tsp. onion powder
1/4 cup brewer's yeast flakes
3 tblsp. cornstarch
2 tblsp. lemon juice

Place the potatoes in a blender and add just enough of the water to cover. Blend at low speed until smooth. Add the remaining ingredients and blend until smooth. Pour into a saucepan and cook and stir until thickened. Serve immediately for the "cheese" will set upon cooling.

Zucchini Soup

Contributed by Shareen of Placerville, CA

A smooth, creamy green soup.

6 medium zucchini, chopped
5 cups water
1 small onion, chopped
2 cloves garlic
4 bay leaves
3 tblsp. vegetable seasoning/broth mix

1/2 cup soy milk
dash smoke flavoring (optional)

Place first 5 ingredients into a sauce pan and cook over medium heat until tender, about 15 minutes. Remove bay leaves. Add remaining ingredients. Blend soup in batches in blender until smooth. Serve at once, or reheat just before serving.

Black Bean Soup with Cilantro and Orange

2 cups black beans
6 cups water
2 tblsp. vegetable broth/seasoning mix
fresh ground pepper
2 leeks, sliced
2 carrots, chopped
1 onion, chopped
1/4 to 1/2 cup chopped cilantro
grated zest of one orange

Soak beans overnight in enough water to cover. Drain. Place first 4 ingredients in a large pot and cook until beans are tender, about 2-3 hours. Meanwhile, cook the leeks, carrots and onion in a small amount of water until tender, about 30 minutes. When beans are done, remove 2 cups of beans in liquid and process in blender until smooth. Return to soup pot. Place the cooked vegetables in the blender and process until smooth. Add to the beans and mix well. Stir in the cilantro and orange just before serving.

Variations: Cook 1 chopped potato with the beans and/or puree all of the bean mixture for a thicker soup.

Eggplant Spread

If you like eggplant, try this spicy spread on sandwiches or as a dip.

1 eggplant (1 to 1 1/2 lb.)
2 tblsp. minced fresh parsley
2 tblsp. minced fresh cilantro
1 tsp. ground cumin
1 tsp. ground coriander
1/2 tsp. garlic powder
1/4 tsp. salt (optional)
dash or two of Tabasco sauce

Cut the stem off the eggplant and prick it all over with a fork. Place directly on the oven rack and bake at 350 degrees for about 1 hour until eggplant is soft and has wrinkled skin. Remove from oven and allow to cool. When it is cool enough to handle, peel and chop. Place in blender jar with the parsley and cilantro. Process until smooth. Place in a sauce pan, add the remaining ingredients, cook and stir until mixture thickens slightly, about 10 minutes. Chill.

Tofu "Egg" Salad Sandwiches

This is a rich food treat, but much healthier than the real thing--no cholesterol, lower fat.

1 lb. tofu, drained
1/4 cup finely chopped red onion

1/4 cup finely chopped celery
1/4 cup finely chopped green pepper
1/4 cup finely chopped red pepper
2 tblsp. no oil Italian dressing
1 tblsp. low sodium soy sauce
1 tsp. lemon juice
1/4 tsp. turmeric
1/4 tsp. garlic powder
dash cayenne pepper

Crumble the tofu into a bowl and mash with a bean/potato masher. Add the remaining ingredients and mix well. Refrigerate for a few hours to allow flavors to blend. Serve on whole wheat bread with garnishes of your choice or stuff into pita bread garnished with lettuce leaves and sliced fresh mushrooms.

Artichoke-Tofu Spread

This is an interesting and delicious way to use artichokes. Because of the tofu, it is another rich food.

1 14 oz. can water packed artichoke hearts
OR 1 pkg. frozen artichoke hearts, thawed
1 lb. tofu, drained
1 small onion, minced
4 tblsp. no oil Italian dressing
1/2 tsp. garlic powder
dash or two of Tabasco sauce

Place artichoke hearts in blender and process until smooth. Place tofu in a bowl and mash with bean/potato masher. Add the blended artichoke hearts and the remaining ingredients. Mix well and chill.

DONATIONS

TO THE MCDUGALL PROGRAM

The McDougall Lifestyle Change Research Fund--2574.1040 will be money I personally manage for research and education. The McDougall Program Fund--2574.1039 will be money managed by The McDougall Program administrative staff, and used for research and education. Send to The McDougall Program, c/o St. Helena Hospital, Deer Park, CA 94576. ALL TAX DEDUCTIBLE.

MORE HELP

Books and Audio Cassettes: **The McDougall Program**--\$19.95 (Hardcover); **The McDougall Plan**--\$9.95; **McDougall's Medicine--A Challenging Second Opinion**--\$10.00 (Hardcover); **Volume I & II of the Cookbooks**--\$8.95 each, add postage (\$3 first book--\$2 each additional)--**McDougall Program Audio Cassette Album**--\$79.95 (\$20.00 Discount for Newsletter Subscribers), add \$5 postage. The McDougall Program at St. Helena Hospital, Deer Park, 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). The McDougall Newsletter is published bimonthly. Send \$10/yr. Previous issues available at \$1.75 per copy (Vol. 1, No. 1-8; Vol. 2, No. 1-6; Vol. 3, No. 1-6; Vol. 4, No. 1).

Send all orders to THE MCDUGALLS, POB 14039, Santa Rosa, CA 95402. Send US funds only! Add extra postage for foreign orders.

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