



The McDougall NEWSLETTER

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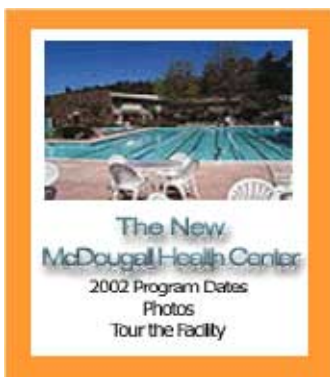
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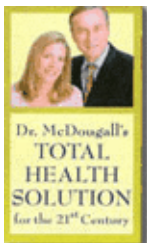


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August 2002 Vol. 1 No. 8

Bad Farts? Meat Stinks!

This article continues a series exploring the health of your intestinal tract. Consider the strongest contact with the world around you is through your food, processed and absorbed by your intestine.

By about the fourth day of each McDougall Live-in Program participants have become close friends. As they loosen up with each other they begin to discuss one noticeable side effect of my diet. They make jokes, like, "When we walk, we talk," or "Have you heard a good McBugle lately?" I must admit that one unavoidable change that comes with the diet I recommend is the production of more bowel gas – but that's not all bad as you will learn when you read this article.

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Phytochemicals and Phytoestrogens

"Phyto" means plant, so obviously *phytochemicals* means chemicals derived from a plant(s). There are thousands of these chemicals and the real importance of only a few has been discovered. The most talked about class of phytochemicals is called *phytoestrogens*. Phytoestrogens are a diverse group of plant compounds that behave as estrogens and occur naturally in fruits and vegetables. Their structural similarity to estrogens is probably the basis for their hormonal activity – they can bind at estrogen receptor sites inside the cells, causing estrogen-like effects. Phytoestrogens have both a weak estrogenic and paradoxically, an anti-estrogenic activity. This anti-estrogen activity results from competing for the positions at the estrogen receptor sites with the more powerful estrogens made by a woman's own body – with the phytoestrogen attached to the site the more powerful estrogens are kept away.

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Take Blood Pressure at Home – Get Off Your Medications

According to the authors of an August 3, 2002 article in the *British Medical Journal*, "It is time to stop using high blood pressure readings documented by general practitioners to make treatment decisions."¹ Overzealous diagnosis and treatment of hypertension result when readings obtained at the doctor's office are used to make decisions, because of the "white coat effect."

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Change History & Save Lives: Write to the American Heart Association

Would you like to help me change history and save lives, and prove how powerful concerned people can be through the Internet?

The Nutrition Committee of the American Heart Association (AHA) and the journal of the American Heart Association, *Circulation*, have so far failed to take action to correct an error in basic science. Your letters to those responsible will make a difference.

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Featured Recipes

Black Beans and Tomatoes

Middle Eastern Garbanzos

Tacos

Cilantro-Garlic Aioli

Tofu Sour Cream

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Heather McDougall with a degree in English and a love for cooking, especially with her mother, will be a frequent contributor to the newsletter. We invite you to contribute your thoughts and recipes to the McDougall Newsletter also. Write heather@drmcdougall.com

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Bad Farts? Meat Stinks!

By about the fourth day of each McDougall Live-in Program participants have become close friends. As they loosen up with each other they begin to discuss one noticeable side effect of my diet. They make jokes, like, "When we walk, we talk," or "Have you heard a good McBugle lately?" I must admit that one unavoidable change that comes with the diet I recommend is the production of more bowel gas – but that's not all bad as you will learn when you read this article.

Intestinal gas, called flatus, when released from the lower bowel can be a social problem. On the average gas is passed 10 to 20 times a day, and the volume averages 3 ounces (90 ml) of gas per passage on the usual American diet (range from 17 to 375 ml).¹ The average daily volume of flatus is 705 ml (24 ounces) (range of 476 to 1491 ml). At the very lower limit of gas production, a liquid diet devoid of all complex sugars has been found to produce an average of 1.5 flatus passages in 24 hours with a total output of 214 ml/24 hours.² (Yes! Research dollars actually are spent to study this.) You can safely assume the upper levels in frequency and volume for anyone on the McDougall Program.

Unfortunately, some people avoid a healthy plant-based diet because they have discovered that all that fiber found in plant-foods and especially beans, causes more gas, even though they realize these same foods relieve constipation and irritable bowel syndrome, and help prevent heart disease and cancer. This is just another example of how our decisions about the way others perceive us often are more important than decisions for our health.

I submit two lines of defense for my Program: First, when human beings were designed, millions of years ago, we lived outdoors, with few confining walls – so bowel gas was unnoticeably dispersed into thin air. Second, bowel gasses produced from a plant-based diet are much less malodorous than are those from a diet rich in animal products.

The Business of Flatology:

Flatus, more commonly known as farts, and delicately referred to as "passing wind or gas," is a source of discomfort and embarrassment for many people, particularly women.³ *Flatulence* is the condition of the bowels being overdistended with gas. *Flatology* is the scientific study of flatus. In order to study flatus, dedicated men and women have tubes placed in their rectums, attached to impermeable plastic bags, which

they wear all day long to collect the gas. The judges who personally evaluate the odor of the gases with their noses must be especially admired for their dedication to the science of flatology (I'm serious).

Two Main Gas Sources:

1) **Swallowed air.** Aerophagia is the swallowing of air and is usually followed by eructations (burping). For some people the amount of gas swallowed can cause flatulence. Swallowed air can be determined to be the source of the excess bowel gas by finding a large amount of nitrogen in the flatus sample. About 80% of air is nitrogen. Determining that the excess bowel gas is due to swallowed air, rather than a problem with the bowel itself, can save an expensive and uncomfortable series of tests for the patient.

2) **Bowel Produced Gas.** The major source of gas in the bowel for almost everyone is the normal metabolic activity of colonic bacteria on our partially digested foodstuffs. Carbohydrates that have not been absorbed by the processes of normal digestion with enzymes in the small intestine are commonly known as dietary fiber. These undigested fibers move into the large intestine (colon) where bacteria break them down by the process known as fermentation into a gaseous mixture consisting primarily of: nitrogen (N₂), oxygen (O₂), carbon dioxide (CO₂), hydrogen (H₂) and methane (CH₄). These gases are all odorless and colorless. There are also small amounts of odoriferous sulfur-containing substances produced, like hydrogen sulfide, methanethiol, and dimethyl sulfide.

The most common source of undigested carbohydrate in the American diet is lactose from dairy products, such as milk, skim milk, and yogurt (cheeses contain little lactose). The second leading gas-producing foods are legumes (beans, peas, and lentils). Whether they are served as "beans with hot dogs," or in a "low-fat vegetarian chili," legumes all cause gas because they contain two relatively indigestible sugars, raffinose and stachyose, that end up in the large intestine.

All unrefined plant foods, including grains, fruits, and vegetables, contain indigestible fibers that end up being fermented in the large intestine by bowel bacteria into odorless gas. Refining grains into white flour and rice removes most of the indigestible carbohydrates (dietary fiber). White rice has been shown to be one complex carbohydrate that is nearly completely absorbed by the small intestine resulting in almost no indigestible carbohydrate for bacteria to turn into flatus.⁴

The Sulfur Stinks!

The offensive odors of flatus are caused by tiny amounts of sulfur-containing gases. Sulfur gases are detected by our noses in concentrations as low as 1 part in 100 million and are often described as smelling like "rotten eggs." This may or may not surprise you, but the flatus from women was found to have higher concentrations of hydrogen sulfide and greater odor intensity than from men.⁵ In a scientific experiment on flatus, odor was rated from 0 (no odor) to 8 (very offensive) by the highly trained noses of two separate judges. Women were rated with an average score of 5.45 and men an average of 3.95. However, men passed higher volumes of gas than did women (119 ml vs. 88 ml/passage). As a result the volume of sulfur gasses in each passage did not differ between men and women.

To make odor matters worse, a large portion of the sulfur that does not leave with the feces and flatus is absorbed through the intestinal walls, into the blood stream where it is excreted in the urine or into the breath and sweat as foul breath and body odor.⁶ Body odor, as the perfume industry knows well, is a primary source of communication between people, effecting our emotions, and causing feelings of physical attraction (or repulsion) and love.⁷

Animal Foods Produce Sulfur:

The main source of sulfur in the feces and intestinal gas is from animal foods, and more specifically, the sulfur-containing amino acids found in animal proteins. All proteins in nature are made from the same 20 amino acids arranged in different sequences – just as the 26 letters of the alphabet make up all the words in a dictionary. Methionine, cysteine, cystine, and taurine are the amino acids that contain sulfur in their structure.

Small amounts of sulfur also come from additives and vegetable foods. Inorganic sulfur, as sulfites, sulfur dioxide, bisulfate, or metabisulfite, is used routinely in the preservation of processed foods and beverages – like a common practice in salad bars. Most vegetable foods are low in sulfur, except for a few like garlic, broccoli and cauliflower.

The proof that animal products are the main source of these offensive gases comes from an experiment on five healthy men on 5 different diets for 10 days each.⁸ The meat intake ranged from 0 grams/day to 600 grams/day (20 ounces). On the vegetarian diet, 0.22 mmol/kg of fecal sulfur material (sulfides) was detected and on the meat diet, 3.38 mmol/kg was found. Therefore, more than 15 times more sulfur was produced with the meat diet, than with the no-meat diet.

Animal products are the main sources of the sulfur-containing amino acids.⁹ Compare the relative amounts of methionine in these foods (based on calories):

- Beef provides 4 times more than pinto beans
- Eggs have 4 times more than corn
- Cheddar cheese has 5 times more than white potatoes
- Chicken provides 7 times more than rice
- Tuna provides 12 times more than sweet potatoes (Giving a whole new understanding of “fish farts.”)

Sulfur is Also Toxic:

The foul odors of sulfur gases should be a clear message for the perpetrators that something is terribly wrong down below and deserves our immediate attention. These sulfur-containing gasses are extremely toxic to the tissues and they may play a role in a life-threatening inflammatory bowel disease, called ulcerative colitis.¹⁰⁻¹¹

Levels as low as 0.5 – 1.0 mmol/L have shown deleterious effects on the human colon.¹² Therefore, small amounts of beef (or the protein in any animal product) can produce levels of sulfur known to be toxic to the cells of your colon.

Gas Solutions:

For people following the McDougall Program, adjustment to the new high-fiber foods occurs in time, and the amount of gas produced diminishes in about 2 weeks. Much of this adjustment comes as a result of changes in kinds and numbers of bowel bacteria.¹³

Avoid Gassy Foods: Milk products are troublesome for most non-Caucasian people (Asians, Blacks, Hispanics, Indians, Eskimos, etc.) who can't digest lactose; about 20% of Caucasians also have this trouble. All legumes--beans, peas, lentils, etc. – bother all races of people indiscriminately. You do not need to consume beans on the McDougall diet – all the protein you need comes from the other less gassy starches and vegetables you may choose. Some individuals notice trouble with onions, bagels, pretzels, prunes, apricots, cabbage, carrots, celery, green peppers, broccoli, cauliflower, bananas, Brussels sprouts, and wheat germ. But this list of offenders depends on personalized sensitivities and, therefore, could incriminate almost any food.

Become a Pure Vegetarian: With the elimination of all animal products the primary source of the offensive odors – the sulfur-containing amino acids – is removed.⁸ Within a few days you could change from “silent but deadly” to “still silent but lightly fragrant.”

Thorough cooking: Almost everyone seems to have a method of "de-gassing" beans. Many cooks claim to have inherited the secret process from an authoritative grandmother. Thus, I've heard some say "add potatoes to beans during cooking," or "soak beans first, then discard the rinse water." Our personal experience has been these methods are of no benefit. Soaking helps, whether or not you discard the original rinse water, simply because soaking starts the breakdown of the carbohydrates and assists cooking. Thorough cooking helps by breaking down indigestible complex carbohydrates into simpler, more digestible forms. Even though cooking will break down many of the gas forming complex carbohydrates found in grains and vegetables, the ones in legumes are heat stable and resistant to cooking.¹⁴ However, germination (sprouting) for 1 to 4 days results in utilization of the bulk of these legume sugars.¹⁵

Sprouting beans: One reliable way to "de-gas" legumes is to sprout them first. Cover beans with water for 12 hours, drain off water, lay damp paper towels on the bottom of a baking dish, spread out beans on the moist towels in a single layer, and then let them sprout for the next 12 hours. When you notice tiny white shoots (1/16") beginning to appear they are ready to cook. The tiny plant is utilizing the indigestible sugars for growth.¹⁵ Needless to say, beans will take less time to cook after sprouting.

Beano: A product on the market, Beano, in the form of liquid drops and tablets, contains enzymes that are capable of breaking down the indigestible sugars in beans, peas, and lentils. You add a couple of drops to the first bite of food and then you can eat the rest without the problem of bowel gas.¹⁶ (Or so the label says

....)

Activated Charcoal: Activated charcoal has been used to treat intestinal gas in India and Europe for many years, and has only recently been gaining acceptance in the United States. In the laboratory, activated charcoal was found to bind and deactivate sulfur gases. Unfortunately, this benefit was not found when human subjects were asked to take 0.5 grams of activated charcoal four times a day.¹⁷⁻¹⁸ This failure is probably because all of the active binding sites on the charcoal are filled with substances in the feces long before the charcoal reaches the large intestine where the sulfur gas is present.

Pepto-Bismol (Bismuth subsalicylate): Four tablespoons (524 mg) four times a day for 3-7 days produced a greater than 95% reduction in fecal hydrogen disulfide release.¹⁹ (Pepto-Bismol contains substances similar to aspirin which may cause problems in those who have warnings to stay away from aspirin.)

Avoid Medications: Acarbose for diabetes, and lactulose for constipation can cause flatus because they cause an increase in sugars in the large intestine. Many other medications are also known to cause flatulence and therefore any medication should be suspect if you notice a problem with excess bowel gas after starting a new medication.

Probiotics: A change in the kinds of bacteria in the large intestine – the intestinal microflora – can result in a reduction in flatus. In a controlled study, volunteers with irritable bowel syndrome (IBS), were fed a drink with *Lactobacillus plantarum* – a friendly form of bowel bacteria – for four weeks. Flatulence was rapidly and significantly reduced in the test group compared with the placebo group (number of days with abundant gas production was 6.5 before and 3.1 after the intervention for the test group vs. 7.4 before and 5.6 after for the placebo group).²⁰

Antibiotics: Nonabsorbable antibiotics (like Rifaximin) which kill the anaerobic gut bacteria can reduce the amount of flatus and improve symptoms in very gassy people as a last resort effort.²¹

My advice: Meat makes farts stink – become a pure vegetarian. Gas is natural – have you ever ridden a horse? Enjoy the gas. The horse seems to.

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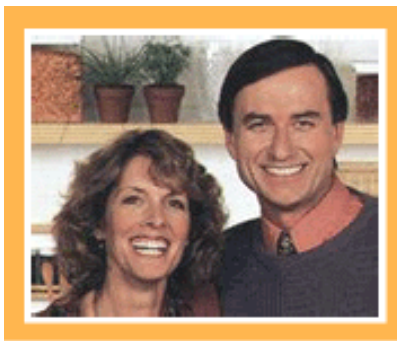
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Some web sites to expand your understanding of flatus:<http://www.heptune.com/farts.html>
<http://users.utu.fi/s/snapir/fart/>


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Phytochemicals and Phytoestrogens

“Phyto” means plant, so obviously *phytochemicals* means chemicals derived from a plant(s). There are thousands of these chemicals and the real importance of only a few has been discovered. The most talked about class of phytochemicals is called *phytoestrogens*. Phytoestrogens are a diverse group of plant compounds that behave as estrogens and occur naturally in fruits and vegetables. Their structural similarity to estrogens is probably the basis for their hormonal activity – they can bind at estrogen receptor sites inside the cells, causing estrogen-like effects. Phytoestrogens have both a weak estrogenic and paradoxically, an anti-estrogenic activity. This anti-estrogen activity results from competing for the positions at the estrogen receptor sites with the more powerful estrogens made by a woman’s own body – with the phytoestrogen attached to the site the more powerful estrogens are kept away. Other activities of these plant chemicals include anti-cancer actions, blood vessel growth (angiogenesis) inhibition, and antioxidant properties. Furthermore, the interactions of these pharmacologically active compounds are complex and are affected by digestion, metabolism, and absorption of the specific substances. Keep in mind as you read this article; these are *physiologically active substances*, which have both positive and negative effects on the human body.

A Little History:

Plants were originally shown to have estrogenic activity in 1926. One of the most dramatic examples of their effects was seen in the 1940s when sheep grazing on clover in Western Australia became infertile as a result of the plants’ powerful hormone activities.¹ By 1975, several hundred plants had been discovered that exhibited these kinds of activities. Phytoestrogens were first found in the urine of humans in 1982. More than 1000 articles have been published in the past 30 years on phytoestrogens.

Three Main Classes of Phytoestrogens:

There are three main classes of phytoestrogens found in plants:

1) *Isoflavones*. Active isoflavones are found in a variety of plants including fruits and vegetables, but are predominantly found in legumes (beans, peas, and lentils), especially soybeans. There are more than 1000 types of isoflavones, but the major ones are *genistein* and *daidzein*. About 65% of the phytoestrogen in soy is in the form of daidzein. Secondary soy products, such as soy flours and milks, contain lower amounts of isoflavones.² For example, processed soy products, such as soy hot dogs and soy yogurt, contain only 1/10th

the isoflavone content of whole soybeans (0.2 to 0.3 mg vs. 2-4 mg of isoflavones /g).

2) *Lignans*. Estrogenically active lignans are called *enterodiol and enterolactone*. Lignans are found widely in cereals, fruit and vegetables. The highest concentration is in flaxseed (also known as linseed).

3) *Coumestans*. Coumestans occur predominately after germination; for example, in bean sprouts.

Vegetarians, such as the Seventh-Day Adventists, consume the most lignans and Asians, like people from Japan and Korea, consume the most isoflavones, largely in the form of tofu and miso.¹ The average Asian diet results in the ingestion of 20 to 150 mg of soy per day compared to 1 to 3 mg in the United States.³

Sex Hormone Effects:

Twelve ounces of soymilk drunk three times a day for one month will decrease a woman's estradiol and progesterone levels, and her menstrual cycle length will be increased by about four days.⁴ Depressed hormone levels persist for 2 to 3 months after stopping the soy. Japanese women are reported to have a very low incidence of hot flashes; possibly because of the soy isoflavones. Hot flashes are reported by 70% to 80% of US menopausal women compared to 10 to 14% of women in Japan and Singapore.³

Postmenopausal American women who consume more soy products show estrogen effects on their vaginal tissues and a reduction in hot flashes.¹ The reduction in incidence of osteoporosis among soy consuming Asian women has been in part attributed to their intake of soy foods.

Cancer Effects:

Epidemiological studies of populations whose diets contain high levels of soy show that they have a much lower incidence of, and death from, hormone-dependent cancers, such as cancers of the breast and prostate. A study from Singapore showed a decrease in breast cancer with increasing soy intake in premenopausal women (not postmenopausal).⁵ In laboratory studies, isoflavones can inhibit the growth of breast cancer and prostate cancer tissues. However, in experimental animal studies that have shown cancer-inhibiting effects, the dosage of phytoestrogens used was huge and far greater than could be obtained in diet alone.³ Most important to keep in mind when considering the influence of soy is the bigger picture of the whole Asian diet: a diet low in fat and animal products, and high in grains and vegetables.

When consumed by young girls (before puberty) these phytoestrogens seem to cause the breast tissues to mature, thereby protecting the breast tissues from agents that cause cancer.¹ On the other hand, exposure of girls to soy's phytoestrogens after puberty may cause an increase the risk of breast cancer. This may be due to the direct effects of phytoestrogens on the breast tissues – similar to the way medically-prescribed estrogens increase a woman's risk of cancer. In June 2001, in the journal *Cancer Research*, investigators found genestein triggered reproductive abnormalities in aged mice, including adenocarcinoma, a rare form of cancer.⁶ If these cancer-promoting effects are found to be valid in humans, then the present day encouragement for Western women, who are at the greatest risk of breast cancer, to increase their phytoestrogen intake would not be wise.

Heart Disease Effects:

Non-hormonal benefits are also found with the consumption of soy products. People living in countries, for example, Japan, with more soy in their diet, have a lower risk of heart attacks. One reason for this may be that soy-feeding causes a decrease in total and “bad” LDL cholesterol, and an increase in “good” HDL-cholesterol. Soy foods may also prevent heart attacks by inhibiting the tendency to form blood clots (thrombosis) in the blood vessels supplying the heart muscle, by their antioxidant activities, and by making the blood vessels’ muscular walls more compliant. Most likely, rather than the isoflavones, other components of the soybean account for these heart disease reducing effects; because the beneficial effects of soy are seen with products that are low, as well as high, in isoflavones.⁷ Again, consider the bigger picture of the impact of the starch-based (rice), low meat, high vegetable Asian diet. Don’t be misled into believing that heart disease prevention is accomplished by sprinkling “soy bacon bits” on your eggs in the morning.

Thyroid Effects:

Goiter and hypothyroidism have been reported in infants receiving soy formula. Autoimmune diseases of the thyroid and thyroid cancer may also be caused by exposure to antithyroid flavonoids in soy.⁸

My Greatest Concern: Bottle-Fed Infants

Sex Hormone Effects:

Soy protein is one of the cheapest sources of protein and has been used as a substitute for breast milk since the turn of the 20th century. Soy-based formula is used by 25% of infants in the US or about 750,000 infants per year. In the US soy formula is available over-the-counter, where as in Europe, it is by doctor’s prescription only. Soy formula exposes infants to high levels of the estrogen isoflavones, genistein and daidzein. On average, infants on soy formula have 10 times greater levels of isoflavone exposure than Japanese who consume soy (11 mg/day vs. 1 mg/day) and 200 times greater than infants fed cow-milk or breast milk.⁹ Total plasma levels of isoflavones are 22,000 times greater than estradiol levels in the infants. Fortunately, the estrogenic activity is 1/1,000th to 1/10,000th less than estradiol – the natural powerful estrogen found in people’s bodies. When adjusted for body weight, these studies show that infants exclusively fed soy-based formulas are exposed to a daily dose of isoflavones that is four- to 13-fold higher than the 0.7 mg/kg intake that has been shown to exert significant physiologic effects on the hormone regulation of a women’s menstrual cycle.¹⁰

Exposing the developing tissues of the infant to these dosages of unnatural hormones is of great concern to researchers. Most concerning is that, these hormones may affect the developing brain and reproductive tissues. Possible consequences of this hormone activity may have already been seen. There is an increased incidence of hypospadias in male offspring of vegetarian mothers consuming soy products.¹¹ Hypospadias is a birth defect where the urethra opens at the base of the penis rather than the tip. On the other hand, the adverse effects of soy formula may not be apparent until later in life. For example, women fed soy formula as infants had a small average increase in duration of their menstrual cycle and greater discomfort with menstruation.¹² Also, a 4-fold increase in multiple births was seen in women who had received formula.¹²⁻¹³

Immune System Effects:

Phytoestrogens may also exert their effect on the immune system. Consider these observations:

- In experimental studies, genistein produced suppression of the immune system of mice fed doses comparable to those fed infants on soy formula.¹⁴ The size of the thymus gland was reduced after soy feeding.
- Women fed soy-formula as infants were found to have almost a 90% increase in regular use of asthma and allergy drugs.¹²
- There are reports that the immune proteins (gamma globulins and immunoglobulins) and antibodies to vaccinations are decreased in soy-fed infants.¹⁵⁻¹⁶
- Respiratory infections and bronchitis were found to be increased in soy-fed infants.^{15,17}
- Children with autoimmune diseases were more likely to have received soy-formula as infants.¹⁸
- Women taking a synthetic isoflavone derivative to prevent osteoporosis were found to have a depressed white blood count.¹⁹

Adults taking soy “health-food” supplements can ingest levels several times higher than would be expected from a diet containing soy and may place them at risks similar to infants consuming soy formula.

McDougall’s Recommendations:

Despite concerns, there is no definite evidence that soy is harmful at levels normally consumed. Consider the tens of millions of people living in Japan, consuming soy products throughout their life, and they enjoy the longest life expectancy of the people of any country (Japanese women are expected to live 84.93 years, compared to US women of 79.5 and Japanese men to 78.07 years, compared to 74.1 for US men).

I believe that use in amounts similar to those seen in Asian populations is without harmful effects, and is actually beneficial. Therefore, we have always recommended, and will continue to recommend, that people use soy products as condiments in their meals; such as small pieces of tofu cut up in a rice “stir-fry,” soy milk on their cereal or in cooking, or an occasional soy hot dog.

I do have serious concern for people consuming very high amounts of soy protein in the form of “fake meats,” like soy burgers and luncheon meats. The first ingredient listed is *isolated soy protein* – as much as 70% of the calories comes from this ingredient. Many people looking for better health through a shift towards a more vegetarian diet are switching to these familiar looking and tasting products. I believe this is an unhealthy

move and will result in, at the very least, a diet too high in protein, and too low in dietary fiber and other beneficial substances found in wholesome fruits and vegetables. Another potential source of problems is supplements, intended as pills, to treat menopausal-related problems, like hot flashes and osteoporosis. We simply don't know the effects of all this concentrated soy protein found in "fake meats" and supplements, consumed over long periods of time. Even if the adverse outcomes are relatively uncommon, the potential for a major public health impact is large.

The popular press and the buying public focus on soy products and flaxseed as if they were the only source of phytochemicals. The truth is that all plant foods are teeming with these compounds. A few have been found and many hundreds more are still to be discovered. For now, every time you eat plant foods think, "I am bathing the inside of every cell in my body with an abundant supply of miraculous substances that will ultimately make every part of me radiate with good health." The most prudent action for you to take is to eat a variety of plant foods – starches, vegetables and fruits – all properly designed for your health and youthful appearance through millions of years of evolution.

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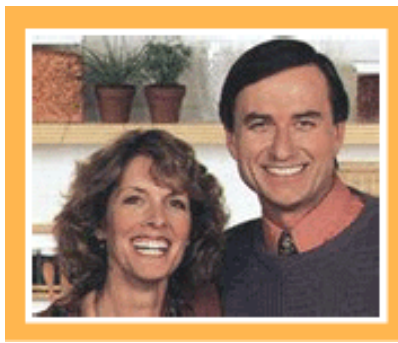
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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

Take Blood Pressure at Home – Get Off Your Medications

According to the authors of an August 3, 2002 article in the *British Medical Journal*, “It is time to stop using high blood pressure readings documented by general practitioners to make treatment decisions.”¹ Overzealous diagnosis and treatment of hypertension result when readings obtained at the doctor’s office are used to make decisions, because of the “white coat effect.” Readings taken in a doctor’s office of 140/90 mmHg actually correspond to true ambulatory readings of 135/85 mm Hg. (Ambulatory readings are obtained by a monitoring machine the patient carries around all day long and these readings reflect more accurately a person’s true state of health). The authors suggest most people should take their blood pressures at home to get a more honest reflection of the health of their blood vessel system and risk of future diseases, like heart attack, stroke and kidney failure.

COMMENT:

Treatment of high blood pressure with drugs has few benefits, and many costs and serious side effects. One reason is that millions of people are being treated for high blood pressure because their pressure is up because they are afraid of their doctor. The other reason drug treatment is a failure is that it fails to deal with the actual cause of the elevated blood pressure – an unhealthy diet and lifestyle.

Here is how I handle people on blood pressure medication at my live-in clinic and afterwards:

I take patients off their medication on day 1 of the program in almost all cases.

Diuretics, ACE inhibitors, calcium channel blockers and most other classes of blood pressure drugs can be stopped suddenly without adverse effects.

If my patients are on a class of medications called beta blockers (Lopressor, Tenormin, Inderal, etc.), then I reduce them slowly by cutting the dosage in half every 3 to 5 days. If beta blockers are stopped too quickly, then some people will get chest pains, and perhaps, other heart distress.

If the patient is on many medications or on large amounts of medication, then I will proceed more slowly, and cut the medications in half every three days.

Calcium channel blockers are one class of medications I stop as soon and as often as possible because they are associated with an increase in risk of heart attacks, cancer, bleeding, and suicide. And they decrease a person's mental capacities. Examples include: Adalat, Cardene, Cardizem, Covera-HS, DynaCirc, Isoptin, Nimotop, Norvasc, Plendil, Procardia, Sular, Tiazac, Vasacor, and Verelan.

I monitor my patients' blood pressure daily, as I reduce or stop their medications, and make adjustments in dosages when needed.

I monitor their blood pressure daily at the program.

I make all decisions based on several readings taken over several days – one or a few readings can be deceiving and reflect things like fear and pain, rather than the actual condition of the blood vessel system.

If my patients are off all medication and their blood pressure is 160/100 mm Hg or less, then they are in no need of medication for the present time in most cases.²

If their blood pressure is 160/100 mmHg or greater, then they are likely in need of more medication. I may add some at this time or wait in hopes that things will improve.

If they are still on some medication and their blood pressure is less than 145/85, then I feel I need to reduce their medication even more. A blood pressure below 145/85 on medication is associated with an increased risk of heart attacks and strokes. I must emphasize: *while on medication*. Off medication, the blood pressure can be much lower and this represents good health.

Decisions to place a person on a lifetime of blood pressure medication should not be based on a few readings, but rather on several weeks or months of observations.

An ideal blood pressure is 110/70 mmHg or less, on no medication.

I consider other risk factors too.

There are many other risk factors that must be considered in evaluating a person's health and risk of future disease, such as body weight (fatness), cholesterol, triglycerides, blood sugar and age. A person in otherwise good health is of much less concern with an elevated blood pressure, than someone with obesity and diabetes.

At home they check their own blood pressures and record the results for later discussions with their doctor.

Blood pressure readings taken at home are most accurate as this *British Medical Journal* article shows. My patients need a doctor who also believes this and will work with them. Unfortunately, there are too many defensive doctors who get upset when you question their absolute authority and wish to become involved in your own health.

When necessary, I use simple, cheap, well-tested medications, like beta blockers and diuretics. There are great profits for pharmaceutical companies from the use of patented medications – so there is great pressure on your doctor to prescribe these – but the conclusion of most authorities (unbiased by payola from the drug companies) is diuretics and beta blockers are safest and most effective.³

My treatment goal for blood pressure readings is to use as little medication as possible to keep the reading between 160/100 and 145/85 mmHg on average – taken over many days.

Diet and exercise and clean habits (avoidance of smoking and coffee) are fundamental for attaining a normal blood pressure and more importantly, avoiding the complications of hypertension: strokes, heart attacks, and kidney failure.

By the way, almost all of the people who go through our 10 day-live in program leave without any blood pressure medications and with lower readings than when they arrived. So this is something you and your doctor should be able to work out too, so that you can be “drug-free.”

Changes in diet while on medications should be made under the supervision of a doctor familiar with the effects of diet and lifestyle changes on health and medication needs.

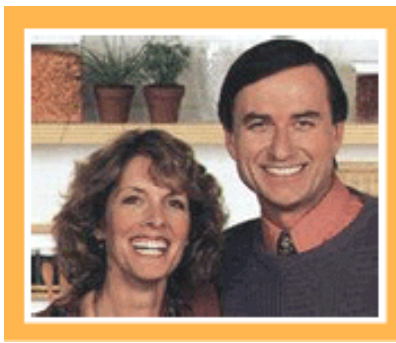
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E-mail newsletter
to a friend

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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

Change History & Save Lives: Write to the American Heart Association

Would you like to help me change history and save lives, and prove how powerful concerned people can be through the Internet?

The Nutrition Committee of the American Heart Association (AHA) and the journal of the American Heart Association, *Circulation*, have so far failed to take action to correct an error in basic science. Your letters to those responsible will make a difference.

This letter is divided into the following sections for convenient reading:

- 1) **Here's the Problem:**
- 2) **Here is Your Chance to Help:**
- 3) **History of Events:**
- 4) **Example of Letter to Circulation:**

1) **Here's the Problem:**

You visit your doctor and boldly tell him/her you are a vegetarian. What's the response?

"You're not getting enough protein and plant foods are deficient in amino acids. You can't stay on that diet. You'll get sick. Your children will die. Eat some meat. Drink some milk."

Unfortunately, the Nutrition Committee of the AHA presently promotes this incorrect information to your doctor. For many people, the result will be a diet filled with meat and dairy products that promotes disease and obesity – in order "to get all your protein and amino acids."

The truth is all unrefined starches and vegetables provide all the essential amino acids (and complete proteins) to meet the needs of men, women, and growing children (Children should be breast fed until 2 years old). Further along in this article you will find a detailed discussion of the events that have so far transpired.

2) Here is Your Chance to Help:

Now it is your turn to be heard. Tell those responsible how you feel about the Nutrition Committee of the AHA spreading misinformation to you and your doctor about basic human nutritional needs and the adequacy of plant foods. Tell them you would like this issue addressed in a public forum.

This matter is of vital interest for all of you concerned about the health of people worldwide – so now is your chance to speak out to people who will hear you. Don't miss this opportunity – it may be a long time before such a well-recognized and well-respected body of experts is caught in keeping the truth from the public.

Write:

James T. Willerson, MD, Editor of *Circulation* c/o Suzy.Lanier@uth.tmc.edu

Dr. Barbara Howard, head of the AHA Nutrition Committee c/o Barbara.v.howard@medstar.net

Sachiko T. St Jeor, RD, lead author of the original article c/o sach@med.unr.edu

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You should also write to your **local newspaper, magazines, such as Time and Newsweek, your congressmen, and national talk shows, such as Oprah.** This is an opportunity to correct a lie that keeps millions of people from a truly healthy plant-based diet.

3) History of Events:

This all began with an article on the hazards of high protein diets published in *Circulation* on October 9, 2001. The Nutrition Committee of the AHA wrote, "Although plant proteins form a large part of the human diet, most are deficient in 1 or more essential amino acids and are therefore regarded as incomplete proteins." This is not true.

[I wrote a letter](#) to the editor which was published in the June 25, 2002 issue of the journal *Circulation* that corrected this error and provided the scientific research that showed plant foods supply all of the essential amino acids for human health. People avoid plant-based diets because of this misinformation, and become sick and die as a result.

Rather than admit the error (or show me that I was in error by scientific research), the head of the Nutrition Committee, Barbara Howard, PhD, assured everyone in a letter accompanying mine (June 25, 2002)

(without a single scientific reference) that they were right and “most (plant foods) are deficient in one or more essential amino acids.”

On July 11, 2002 [I wrote the editor](#) of *Circulation* to ask for a timely, honest and professional response from the Nutrition Committee of the AHA – requesting they either admit their error in public or provide evidence that plants are indeed deficient in amino acids. To date the Nutrition Committee has not responded.

On July 23, 2002 I received a letter from the Managing Editor of *Circulation* [Suzy Lanier](#) explaining their plan to bury the issue by publishing my concerns and the AHA Nutrition Committee’s response in the online Correspondence section of *Circulation* – where no one will see it.

On July 23, 2002, I wrote a [second letter](#) insisting this matter not be covered up.”

The journal *Circulation* has had ample time and opportunity to correct (what I believe is an attempted cover-up of) an error in basic science, and has refused to do so to date.

You can review my letters with the AHA by clicking on the highlighted words in the above sentences.

4) Example of Letter to Circulation:

Here is an example letter that was written to *Circulation* by one concerned person:

Editor, *Circulation*

Barbara Howard, PhD and other co-authors
of "Statement for Health Professionals"

In a letter to the editor published in the June 25, 2002 issue of the American Heart Association Journal, *Circulation* (105:197), Dr. John McDougall asked for a correction of a statement by the Nutrition Committee of the Council on Nutrition, Physical Activity, and Metabolism of the AHA. The Statement for Health Professionals published in *Circulation* issue 104 in 2001 contained the following sentence questioned by Dr. McDougall: "Although plant proteins form a large part of the human diet, most are deficient in one or more essential amino acids and are therefore regarded as incomplete proteins." Although Dr. McDougall's argument was compelling and documented with scientific citations, the rebuttal by Barbara Howard, PhD, representing the committee, lacked both of these qualities. Instead of providing scientific support for the committee's statement or admitting its error and making a correction, Dr. Howard, in a combination of circular reasoning and appeal to authority rather than science, compounded the problem by stating "...we did carefully state that 'most' are deficient in one or more essential amino acids."

This myth about the "deficiency" of most plant proteins was inadvertently promulgated with the publication in 1971 of *Diet for a Small Planet* by Frances Moore Lappe. In a later edition of this book (1991), Mrs. Lappe says this misconception came about because she “assumed” that the only way to get adequate protein was to create a protein as usable by the body as animal protein by combining complementary plant proteins. In

later editions she clearly corrects the misinterpretation that plant protein is "deficient" by noting that all plant foods usually consumed as sources of protein contain all 8 essential amino acids, and that humans are virtually certain of getting enough protein from plant sources such as unprocessed complex carbohydrates and vegetables if they get sufficient calories.

It is likely that the committee's information on deficient plant protein came from the above source in whatever roundabout way. I hope the Nutrition Committee and the Editor of Circulation will quickly follow Mrs. Lappe's example and correct their error or support their disputed conclusion in a more rigorous and scientific way. In a time when Americans are losing trust in many of our corporate leaders, this action is not only important for the health of all Americans, but also to preserve the integrity of a prestigious journal such as Circulation.

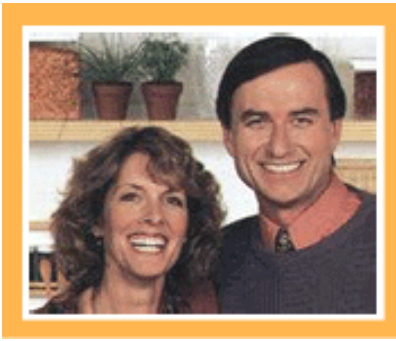
Sincerely,

Thomas Spradley


E-mail newsletter
to a friend

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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

Recipes

BLACK BEANS AND TOMATOES

I have been preparing this recipe for over 25 years with very few changes. It is a family favorite and I always make extra to have as leftovers the next day. If you haven't tried this delicious meal yet, buy the ingredients this week and serve it to your family. The bean lovers will have a new favorite!

Preparation Time: 30 minutes

Cooking Time: 3-4 hours

Servings: 4-6

Beans:

2 cups dried black beans

6 ½ cups water

1 large whole onion

8-10 whole cloves

4 large garlic cloves

1 large onion, chopped

1 large green bell pepper, chopped

Tomatoes:

6 medium tomatoes, chopped

8 green onions, finely chopped

¼ cup finely chopped sweet onion

1 clove garlic, crushed

3 tablespoons wine vinegar

4-5 dashes Tabasco sauce

Place beans and water in a large pot. Peel the whole onion and stud it with the whole cloves (poke holes in the side of the onion with a toothpick about ½ inch apart, push the stem end of the clove into each hole). Place the onion in the pot with the beans and water and add the whole, peeled garlic cloves. Bring to a boil, cover, reduce heat and simmer for about 2 hours. Remove and discard the whole onion and cloves. Mash the whole garlic cloves into the beans (use a spoon or fork and gently mash into the side of the pot). Add chopped onion and bell pepper. Cover and simmer for an additional 1-2 hours until beans are tender.

Place the tomatoes, onions, and seasonings into a separate bowl. Mix well. Cover and refrigerate for at least 1 hour. Mix again and adjust seasonings.

Serve black beans over brown rice and spoon some of the tomato mixture over the top.

HINT: Whole cloves are sold in a jar in the spice section of your supermarket. They are the dried buds from a tree and add a unique flavor to this dish. Handle them carefully while inserting into the onion so they don't break. To remove onion and cloves from the beans use a slotted spoon. Season beans with a small amount of salt after cooking, if desired.

MIDDLE EASTERN GARBANZOS

This recipe was sent to us by Dina Aronson, a faithful newsletter reader. Garbanzos are one of my favorite beans and this recipe is as easy as it is delicious.

Preparation Time: 10 minutes

Cooking Time: 7 minutes

Servings: 2

1/3 cup vegetable broth or water
1 onion, chopped
1 large ripe tomato, chopped
1 15 ounce can garbanzo beans, drained and rinsed
1 tablespoon ground cumin
1 teaspoon lemon juice
dash paprika
freshly ground pepper to taste
dash salt

Place the broth or water in a medium saucepan. Add onion, cook and stir over medium-high heat until onion is translucent and most of the liquid has evaporated.

Add tomato and cook for 2 minutes, stirring frequently. Add garbanzos and seasonings. Cook and stir until heated through. Serve over brown rice or couscous.

Hint: Middle Eastern markets sell a seasoning called sumac powder. It is made from the small red berries of the rhus coriara bush, which grows wild in the Middle East. Sumac has a lemony, astringent taste with a bit of fruitiness. If you are able to find this, it may be used in place of the lemon juice and paprika for a more authentic flavor.

TACOS

By Heather McDougall

Heather likes to prepare this meal in many different forms, depending on her mood and what is available in the refrigerator and pantry. Most of the preparation can be done ahead of time, and cooking only takes a few minutes, so this is a meal that can go together quickly. This is delicious with the black beans, vegetables, and aioli or with the tofu, cabbage, and aioli. Or try it with a combination of all of the fillings for your own variation.

Preparation Time: 30-45 minutes

Cooking Time: 15-30 minutes

Servings: 4-6

Black beans:

½ cup vegetable broth

1 onion, chopped

1 cup fresh or frozen corn kernels

1 15 ounce can black beans, drained and rinsed

dash salt

Sauté onion in broth until translucent, about 7-10 minutes. Add corn and beans and heat through. Add salt to taste. Set aside.

Vegetable Sauté:

1 cup vegetable broth

1 onion, chopped

3 cups chopped summer squash (zucchini)

½ cup chopped cilantro

Sauté onion in ¼ cup of the broth until softened. Add remaining broth and squash, simmer until softm about 15 minutes. (Add more broth if necessary to keep from drying out.) Remove from heat, add cilantro, mix well, and set aside.

Spicy Tofu:

- 24 ounces firm tofu (not silken)
- 4 tablespoons soy sauce
- 2 tablespoons lime juice
- 2 tablespoons chili powder
- 2 teaspoons ground cumin
- 2 teaspoons garlic powder
- ½ teaspoon cayenne

Drain tofu in a colander and press out excess water with paper towels. Cut into ½ inch cubes. Combine soy sauce, lime juice, chili powder, cumin, garlic powder, and cayenne in a large bowl. Add tofu and mix gently. Let stand for 10 minutes, stirring occasionally. Place a large non-stick frying pan on medium heat. Add tofu and cook turning occasionally for about 10 minutes. Set aside.

Cabbage:

- 4 cups finely shredded cabbage
- 3 tablespoons seasoned rice vinegar
- ½ tablespoon lime juice

Combine all ingredients in a bowl and set aside.

Corn Tortillas:

As many as needed

Soften individually on a dry non-stick griddle, or wrap in a towel and heat in the microwave.

Optional Toppings:

- Chopped tomatoes
- Shredded lettuce
- Sliced olives
- Sliced avocado
- Shredded soy cheese
- Salsa

To assemble:

Take a soft corn tortilla, spoon your choice of fillings down the center, such as beans and vegetables or tofu and cabbage, add a bit of aioli and your choice of optional toppings, roll up and eat with your fingers.

CILANTRO-GARLIC AIOLI

By Heather McDougall

Preparation Time: 5 minutes

Servings: Makes 1 ½ cups

1 ½ cups tofu sour cream (see recipe below)

2 large cloves garlic, peeled and coarsely chopped

juice of 1 lime

1/3 cup cilantro leaves

dash salt

Place all ingredients in a food processor and process until smooth.

Hint: Will keep in refrigerator for about 2 weeks. This also makes a great dressing for salads or pour over sautéed vegetables.

TOFU SOUR CREAM

Use as a substitute for dairy sour cream. Will keep in the refrigerator about 2 weeks.

Preparation Time: 5 minutes

Chilling Time: 2 hours

Servings: Makes 1 ½ cups

1 12.3 ounce package lite silken tofu

2 ½ tablespoons lemon juice

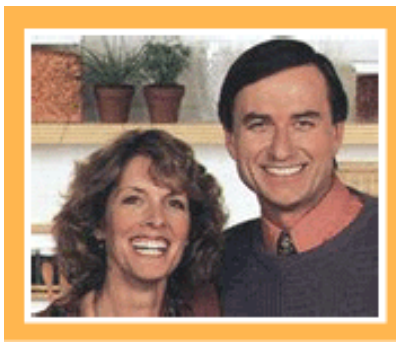
2 ½ teaspoons sugar

dash salt

Combine all ingredients in a food processor and process until smooth. Refrigerate at least 2 hours to allow flavors to blend.

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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

McDougall Costa Rica Adventure!

August 2 to 10, 2003

We're leaving August 2, 2003 for El Ocotal, a paradise on the northwest coast of Costa Rica. Our first night will be spent at a hotel in San Jose and then we depart for El Ocotal Hotel, a first class luxury ocean side resort with views that take your breath away. All rooms have air conditioning, one king or two queen beds, ceiling fan, refrigerator, color satellite TV, and telephone. Each has its own terrace overlooking the blue Pacific. The lobby and restaurant, perched atop a knoll surrounded by water on three sides and with El Ocotal's third swimming pool below, is regarded as one of Costa Rica's most picturesque spots. The bar offers tropical cocktails, a varied wine list, and both local and imported spirits ... and yes, the tap water is safe to drink. Ocotal's bilingual staff is eager to show their friendly Costa Rican hospitality.

Our own naturalists (chosen personally by the McDougalls) will guide us to the national parks, wildlife reserves, nearby towns, and other points of interest. We have five day-long excursions planned for you (itinerary subject to change). You can spend as much time as you want relaxing, swimming, snorkeling, SCUBA, or on any land excursions. Repeat whatever experiences you enjoy most. Ultimately, you will have an intimate experience with Costa Rica and its people like few tourists have ever done.

Evening entertainment most nights during and after dinner. In addition, John and Mary McDougall will be providing education on the McDougall program. All meals are pure vegetarian, low-fat, and delicious.

All you have to do is arrange for your air transportation to San Jose International Airport, Costa Rica or our travel agent can do it for you. We have arranged special low-cost, group-based airfares available by calling our office at (800) 941-7111 or (707) 538-8609. Check with us before you buy your tickets because we have some great prices.

The total cost is \$1550 per person for this 8-day adventure (without airfare to and from San Jose, Costa Rica, gratuities, and airport tax on departure)*. For families, the addition of a third and fourth person in your room reduces the cost slightly. Bungalows add \$100 pp. Suites are also available. Singles are \$1950. Deposit is \$500 per person (fully refundable until March 15, 2003, balance due May 1, 2003).

* The price of the trip is all inclusive. This means all activities, adventures, boat trips, local SCUBA, and snorkeling trips, meals, nonalcoholic beverages, and transfers are included. SCUBA beyond local areas has an extra charge. Transportation from your origin to and from San Jose, Costa Rica is not included.

For more information or reservations call (800) 941-7111 or (707) 538-8609.

What people said about previous year's trips to El Ocotal:

"What a wonderful trip. For the first time in a long time, this vacation provided a great experience for the entire family. All four of us were active from morning to night. We met great people as well." Lee Sheldon, Melborne, FL.

"Pat and I really enjoyed the Costa Rica trip and would put it up there with our honeymoon to Maui in 86." Charles Guittard, Dallas, TX.

"I've never met so many interesting people in one place, all having the time of their lives." Ann Wheat, Belvedere, CA. Ann has been on the last 12 McDougall Adventures and will be on the next 2 in the year 2003.

"We want to thank you and your lovely family for all your hard work in giving us the nicest, most organized trip we ever experienced. We truly now know the meaning of adventure. We especially liked the food and that was the main reason I wanted Wesley to go on this trip." Jeannine Uffelman, Napa, CA.

"Walter and I had a vacation of a lifetime. We couldn't have been happier with the experience. Your attention to detail and consideration for each participant made this marvelous experience possible." Nancy Joerg, St. Charles, IL.

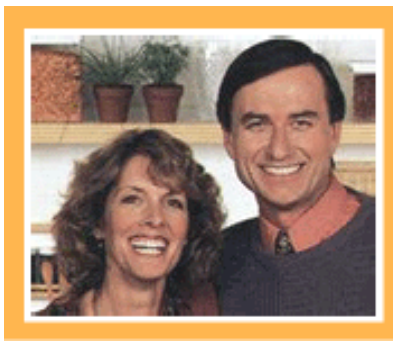
"Thanks for the multitude of wonderful adventures in Costa Rica; our children are very excited about the nutritional information and fun you both provided." Janet Lamb, San Carlos, CA.

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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

Letter to the editor:

Plant Foods Have A Complete Amino Acid Composition

The Statement for Health Professionals from the Nutrition Committee of the Council on Nutrition, Physical Activity, and Metabolism of the American Heart Association on Dietary Protein and Weight Reduction contains often quoted, but incorrect, information of the adequacy of amino acids found in plant foods.¹ This report states, "Although plant proteins form a large part of the human diet, most are deficient in 1 or more essential amino acids and are therefore regarded as incomplete proteins."

William Rose and his colleagues completed research by the spring of 1952 that determined the human requirements for the eight essential amino acids.² They set as the "minimum amino acid requirement" the largest amount required by any single subject, and then doubled these values to make the "recommended amino acid requirement," which was also considered a "definitely safe intake." By calculating the amount of each essential amino acid provided by unprocessed complex carbohydrates (starches and vegetables),³ and comparing these values with those determined by Rose,¹ the results show that any single one, or combination, of these plant foods provide amino acid intakes in excess of the recommended requirements. Therefore, a careful look at the founding scientific research and some simple math proves it is impossible to design an amino acid deficient diet based upon amounts of unprocessed starches and vegetables sufficient to meet the calorie needs of humans. Furthermore, mixing foods to make a complementary amino acid composition is unnecessary.⁴

The reason it is important to correct this misinformation is because many people are afraid to follow healthful pure vegetarian diets – they worry about "incomplete proteins" from plant sources. A vegetarian diet based around any single one, or combination, of these unprocessed starches (rice, corn, potatoes, beans, etc.) with the addition of vegetables and fruits supplies all the protein, amino acids, essential fats, minerals, and vitamins (with the exception of vitamin B12) necessary for excellent health. To wrongly suggest people need to eat animal protein for nutrients will encourage them to add foods that are known to contribute to the cause of heart disease, diabetes, obesity, and many forms of cancer, to name just a few common problems.⁵

1. St. Jeor S, Howard B, Prewitt E. Dietary protein and weight reduction. A statement for health professionals from the Nutrition Committee of the Council on Nutrition, Physical Activity, and Metabolism of the American Heart

Association. Circulation 2001;104:1869-74.

2. Rose W. The amino acid requirement of adult man. Nutr Abst Rev 1957;27:631-47
3. J Pennington. Bowes & Church's Food Values of Portions Commonly Used. 17th Ed. Lippincott. Philadelphia- New York. 1998.
4. M. Irwin, Hegsted D. A conspectus of research on protein requirements of man. J Nutr 1971;101:385-428.
5. Weisburger J. Eat to live, not live to eat. Nutrition 2000; 16:767-73.

John McDougall, MD

The McDougall Program

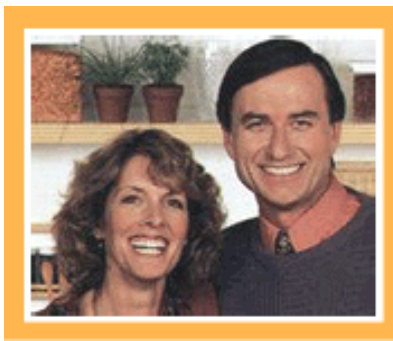
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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

I wrote the editor

Misinformation on plant proteins from McDougall?

Thursday, July 11, 2002

To the Nutrition Committee of the Council on Nutrition, Physical Activity, and Metabolism of the American Heart Association

Dear Sirs:

The June 25, 2002 issue of the journal *Circulation* (105:197) printed a letter of mine in which I corrected a statement made by the Nutrition Committee of the Council on Nutrition, Physical Activity, and Metabolism of the American Heart Association (*Circulation* 104:1869-74, 2001). This report states, "Although plant proteins form a large part of the human diet, most are deficient in 1 or more essential amino acids and are therefore regarded as incomplete proteins." This statement is not correct, as I have clearly shown in my letter.

Accompanying my letter was a response from Barbara Howard, PhD, who I assume represents the Nutrition Committee. Her letter was confusing and undocumented by a single scientific citation. However, rather than admit the Committee's report was in error, she reaffirmed their previous position by writing "...we did carefully state that 'most' are deficient in one or more essential amino acids..."

Failure to resolve the truth about the adequacy of plant proteins threatens the health of millions of people seeking better guidance for proper nutrition; therefore, my efforts will not be dismissed with a careless response from the Nutrition Committee of the American Heart Association. Please grant me the courtesy of a professional and honest answer by either:

1) Showing me that I am incorrect by citing scientific research that contradicts my position and the studies I have provided. These scientific papers accompanying my letter represent the original experiments performed to determine human protein needs. I will not accept someone else's professional opinion on this issue – because, as you know, even the "best experts" can be wrong. Show me the basic research -- as I have done for you.

2) Admitting the article by the Nutrition Committee of the Council on Nutrition, Physical Activity, and Metabolism of the American Heart Association contains incorrect information concerning the adequacy of plant proteins (*Circulation* 104:1869-74, 2001). And giving this matter the serious, open attention it deserves.

I expect this to be handled in a timely, professional, and public manner. You owe it to society and to your readers. I will not let this matter rest – and if I get another response that suggests disinterest and confusion about the subject, or worse yet, possibly an attempt to avoid admitting an important error in basic science, I

will take this matter elsewhere for a public hearing.

Sincerely,

John McDougall, MD

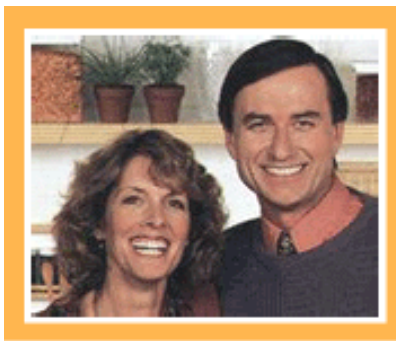
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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

Suzy Lanier:

Dear Dr. McDougall:

As you are aware from previous correspondence, we ask that articles submitted to *Circulation* be submitted by mail and in accordance with our Instructions to Authors. However, due to the contentious tone of your letter, Dr. Willerson has determined an expeditious way in which to handle your letter. Your letter has been sent directly to Dr. Barbara Howard with a request from Dr. Willerson that she and her Committee prepare a response. As soon as the response is received and reviewed, both your letter and the response will be published online in the Correspondence section of *Circulation*.

Sincerely yours,

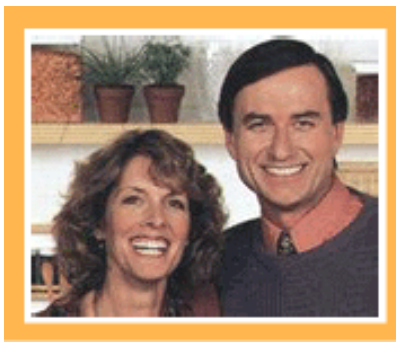
Suzy Lanier

Managing Editor, *Circulation*


E-mail newsletter
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The McDougall NEWSLETTER

August 2002 Vol. 1 No. 8

Second letter

Dear Ms. Lanier:

I want to thank you and Dr. Willerson for your timely attention to this matter. However, publication online in the Correspondence section of *Circulation* fails to set the record straight. Therefore, I am requesting that my letter and their responses appear in the printed version of *Circulation*. However, I think a more appropriate response to this serious matter would be for you to allow me an editorial on this subject in the printed version of *Circulation*.

You may think this is trivial and doesn't deserve a serious effort on my part to correct an error in basic science. But, the idea that plants are "incomplete proteins" has been used for decades to discourage people from following diets based on plant foods -- the trend of the recommendations encouraged by the Heart Association.

Just as important, there are serious problems with credibility in our society these days. The response I received from Dr. Howard could be interpreted as an attempt to avoid correcting an error made by the Committee.

I expect the response I receive from the Committee will be well thought out. One concern I have is that they will return with a finding that the state of the scientific literature does not allow a firm conclusion on the adequacy of plant proteins. In this case they should be required to retract their statement that, "Although plant proteins form a large part of the human diet, most are deficient in 1 or more essential amino acids and are therefore regarded as incomplete proteins." The burden of proof lies with those who make the claim.

Please help me make this an opportunity to correct misinformation that has remained in our scientific minds too long.

On a more personal note: Please expect my contentious tone (and my efforts to make this matter right) to continue until all parties concerned grant me the courtesy of a professional and honest answer to my concerns.

Sincerely,

John McDougall, MD

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