Don't Be Fooled by Fads

HELEN S. MITCHELL

Ten million Americans, who live in a scientific age, waste 500 million dollars a year on quack diets and fake pills and the junk of non-scientific medicine men.

They carry on the myths, magic, superstitions, and taboos that began with the caveman and have persisted because of ignorance, customs, religious beliefs, and the persuasiveness of patent medicine vendors.

Postmaster General Arthur E. Summerfield, in a feature news release from the Post Office Department, commented: “In an era where wonder drugs and great advances in surgery and medicine have produced true medical miracles, it is puzzling that so many people in all walks of life pay big money for the frauds.”

The frailty in human nature that the quack and self-styled food expert play upon for personal profit is the psychological need of the chronically ill or the neurasthenic to seek anything that promises relief. They may be ill and insecure and thus find in a nostrum a mental crutch.

The faddist who wants primarily to hand down his ancestors’ peculiar notions is relatively harmless but misguided. To tell a child to eat carrots because they will make her hair curl is silly, but carrots are a source of vitamin A, more valuable for eyes than hair. There is no scientific ground for believing that fish are a brain food, but fish are a good source of protein and other nutrients.

I know of no good reason for not eating milk with acid fruits, because the milk will curdle anyway when it reaches the stomach acid, but there is...
no harm in eating these foods separately if one wants to.

Some people think one must not eat milk and fish, milk and lobster, ice cream and rhubarb, milk and spinach, and buttermilk and cabbage together, but that is nonsense.

Some faddists even tell us to avoid milk entirely because they say that adults do not need milk or that milk is fattening, constipating, or indigestible, or leads to cancer—none of which is true.

A long list of curious fads is given and refuted in "Food Facts Talk Back," a 1957 publication of the American Dietetic Association, 620 North Michigan Avenue, Chicago 11, Ill.

In this chapter, however, we are more concerned with the faddist or quack who spreads his misinformation for personal profit.

The food quack or charlatan is not necessarily a food faddist, but he thrives on those who are.

He may or may not practice the fallacies he preaches, except in public, in order to sell his wares. He may even laugh at his victims while he enjoys his own good meals at home.

Often he is a clever promoter, professing knowledge he does not possess in foods, nutrition, or even medicine—friendly, handsome, poised, and persuasive.

Quacks are sure to be convincing speakers or writers, and their smattering of scientific knowledge gives them a fake plausibility. They mix the true and the false or misleading to fit their whims, to sell their ideas, or to scare people into buying their wares or books.

They accomplish most by personal appearances or books with catchy titles. They also function by way of the mails, radio, television, newspapers, and handbills. They appeal especially to the chronically ill and to retired persons in winter resorts, who have time and inclination to worry about health and hope to recapture their youth.

Smart quacks know all the hidden persuaders. They know also some of the currently fashionable words of science. If they knew more of science they might not be quacks.

The layman should be able to spot the earmarks of the self-styled expert.

His advertising and sales approach are direct to the consumer. His products and pamphlets are not distributed through professional channels. He is not eligible to belong to the ethical scientific organizations and he cannot present his theories through the publications of reliable groups, such as the Journal of the American Medical Association and the Journal of Home Economics.

He may offer a money-back guarantee if your diabetes is not cured in 10 days or if you have not lost 5 pounds during the first week of using his reducing nostrum. He may assure you that his elixir will cure whatever ails you, but you will be gullible, indeed, if you believe that diseases such as arthritis, which long has baffled medical scientists, can be cured by a food supplement advertised on the first-come, first-served basis, or by some secret food formula.

The types of food faddism difficult for even the most intelligent layman to recognize are the half-truths and misinterpretations of scientific data that appear in print and are preached from the lecture platform and over the air.

Most of these self-styled authorities distort facts to suit their own ends, much to the embarrassment of the scientists they quote out of context.

It is even possible for them to use a college as a front for their activities so that they may be introduced as authorities, professors of health or nutrition, and founders of such high-sounding but questionable organizations as the "Academy of Applied Nutrition" or the "National Institute of Dietary Foods." They know how to use lingo that sounds like science to
promote their own moneymaking projects.

Adelia Beeuwkes, associate professor of public health nutrition in the University of Michigan, wrote in the Journal of the American Dietetic Association in July 1956:

"The pseudo-scientist watches hawk-like for the published reports of the reputable workers. Isolated and sterile fragments of the whole scientific report are torn out and, like a squirrel who runs away to consider the value of the nut he has found, our pseudo-scientist rushes to seclusion with his prize—torn fragments of knowledge. He considers their value to him and sets about weaving a few facts of truth into a garment of many colors—a garment that looks rather impressive at a distance and under dim light. This blend of good and poor threads disintegrates completely before the microscope when a scientist trains his eye on the glass which shows truth and untruth in their proper proportion.

"He snatches bits of information from scientific papers and in the same breath confides to 'his followers' that the field of medicine, nutrition, or other does not accept his theories because the scientists are stubborn and are really not cognizant of the mysteries of life which can be purchased for several dollars. . . . Beware of theories that have not been brought into the daylight of scientific research."

FOOD FADDISM is serious and dangerous for several reasons.

Besides being a waste of money, a fake diet cure may give a person a false sense of security and he may not see a doctor in time to prevent serious trouble. Some diet fads actually are harmful or may lead to malnutrition.

This approach to the treatment of chronic ills, regardless of whether they are of nutritional origin or not, tends to undermine public confidence in scientific nutrition and threatens true progress in the sciences supported by sound agencies.

"Distorting facts into fads is big business today," wrote Dr. Ruth M. Leverton, of the Department of Agriculture, in the Journal of the American Dietetic Association in August 1957.

"Never has so much erroneous information been promoted and accepted by so many people. Never have ignorance and lack of commonsense in matters of food and health held so much danger for the population. The presence of the quackery among us is not new; every age has had its medicine man, alchemist, herb healer, and pseudo-scientist to capitalize on people's ignorance and appeal to their emotions. It does seem that the number of charlatans in our midst today is greater in proportion to the amount of scientific knowledge than ever before."

How can one tell the difference between authenticated facts versus misinformation? In this day of extravagant claims, we are so used to exaggeration that we tend to discount facts as well as fiction.

Mere unvarnished facts about food and nutrition are not considered spectacular enough. We are more apt to hear that a serving of some special cereal and milk is equivalent to a beefsteak, or that one should eat candy for reducing because seven pieces equal only the calorie value of a slice of bread. The wrong implications in these examples are obvious, but there are other fallacies that may really mislead the unwary.

Some persons advocate the theory that the food value of crops grown on depleted soils is poor and that plants are "devitalized" or "demineralized" or otherwise deprived of natural nutrients because they have not been grown according to principles of "organic farming."

This subject has been investigated by the Plant, Soil, and Nutrition Laboratory in Ithaca, N.Y. L. A. Maynard, former director of the laboratory, assured us that no disease or abnormality in man can be traced to a deficiency in the soil except in the case of endemic goiter due to too little iodine. Research at the laboratory gives no
evidence that the composition of the crops grown is essentially different as a result of the kind or amount of commercial fertilizer used on the soil. Lack of fertilizer may reduce the yield of a crop but not the amount of nutrients in the food produced.

E. M. Nelson, late Chief of the Division of Nutrition of the Food and Drug Administration, commented on this problem in the Journal of Home Economics for October 1957.

He wrote: "Our tables of food composition would be of little or no value if the composition of a plant were dependent on the composition of the soil on which it was grown. It is the yield per acre that is greatly influenced by the kind and extent of fertilizer used. Composition is controlled by hereditary factors or genes which also control other characteristics of the plant such as size and shape. Thus we find that the seemingly plausible preaching that depleted soils produce foods of poor nutritional quality and that this is the basis for extensive supplementation of minerals and vitamins has no basis in scientific fact."

Nevertheless, a news broadcast introduced a "professor of nutrition" as a guest speaker whose theme was primarily his concern over the poor food value of vegetables grown on depleted soils. He introduced a new twist—that the proteins were of poor quality and the amino acids unstable in foods unless organic fertilizer had been used. It sounded scientific, but no such research finding has been reported in recognized journals.

Faddists are apt to recommend so-called "natural" foods along with raw or unprocessed foods. Many foods, to be sure, we regularly use in their natural state—fruit, nuts, salad greens. But the food faddist has abused the phrase "natural foods" and goes to extremes in condemning such processed items as white flour, milled and enriched cereals, canned products, and pasteurized milk. He would have us use raw sugar in place of refined sugar, sea salt in place of regular table salt, and lemon juice in place of vinegar. Except for price, there is no objection to these foods, but neither is there anything detrimental about the processed food that is condemned.

Raw—unpasteurized—milk has advocates who believe that milk has lost much of its nutritive value as a result of pasteurization. Almost the only loss of nutrients due to pasteurization is that of ascorbic acid, of which milk has such small and variable amounts that we do not consider it an important source. The nutritive losses are insignificant compared with the protection that pasteurization gives against certain bacteria.

The raw vegetable food fad of a generation ago has given place to a raw vegetable juice fad. "Liquefied vegetables" have no life-giving properties that are not present in the vegetables themselves. Raw vegetables eaten as salad, sticks, curls, or juice all have good value; the juice has no magic just because it is juice. The salesman wants to sell the gadget with which to prepare the juice.

Granted that juice or puree may be the form of vegetable most acceptable to people with inadequate dentures and that juice sometimes is made from vegetable tops not ordinarily eaten. Cooked vegetables retain most of their nutritive value if they are not cooked too long. Some vegetables are more palatable cooked than raw and are more easily digested.

Some vegetables have been credited with more virtues than they actually possess. There is no scientific basis for assertions that celery juice is a cure for indigestion and rheumatism, carrot juice is good for the complexion, parsley juice is a tonic, garlic juice relieves high blood pressure, and white radish and lemon juice are good in the treatment of gallbladder ailments. Many other ridiculous claims are made from time to time.

"Miracle" food, food supplements, and food combinations are often credited with therapeutic value far beyond
any nutritive factors they contain. It is folly to suppose that blackstrap molasses, wheat germ, and yeast are miracle foods that can in any way correct menopausal difficulties, induce sleep, prevent nervousness, correct baldness, restore original color of hair or skin, aid digestion, or prevent aging—claims typical of the ones made by pseudonutritionists.

One self-styled authority on the “successful treatment of aging” has expounded the ridiculous theory that “the reason why men lose strength and women their beauty was shown to be aging factors in food combinations; while antiaging factors from another group of foods enable a complete mental and physical rebuilding.”

Among the Proverbs about life and health, for example, we find, “It is not good to eat much honey,” even in a land “flowing with milk and honey.”

Royal jelly, the mid-20th-century equivalent of the older “miracles,” has been called the miracle food of the queen bee. The promoter would have one believe it can do the impossible—beautify the face or bring back “the joy of life” in a magic capsule. Even though “royal jelly” in face creams was initiated in France and imported to the United States about 1953, no clinical evidence of beneficial effects has been reported. At 140 dollars an ounce, it is truly an extravagant source of certain vitamins of the B complex that are readily available elsewhere.

Arthritis is still one of our most disabling chronic diseases, although doctors have devoted years of research to possible causes and treatment. Yet one writer published the theory that certain oils serve as joint lubricants, but fruit juices consumed at the same meal prevent the oils from functioning in this way. Actually, joints are not lubricated by oils, oils do not circulate in the blood stream to reach the joints in the form in which we consume them, and fruit juices do not change the composition of the oils in our foods. His notion is based on completely erroneous ideas of the chemistry and physiology of the human body, but his jargon appeals to many uncritical readers. The claim that you can eat your way into arthritis and eat your way out again is ridiculous.

According to the Journal of the American Medical Association for January 18, 1958: “There is no diet for the treatment of arthritis . . . A diet that is liberal in calories and protein and has a high vitamin and mineral content is indicated for the patient who has lost weight and muscle tissue, a situation frequently encountered in rheumatoid arthritis. In patients who are overweight, or obese, caloric limitation is necessary to reduce weight; in some patients with osteoarthritis of weight-bearing joints, such weight reduction is a most important aspect of treatment.”

Often food supplements are offered after people have been frightened into believing that their condition is due to a lack of essential nutrients in their regular diet and that the lack can be supplied only by some concoction that is really very expensive but is being made available to them at a special price. You may be sure that the special price is far beyond the value of the ingredients.

Trick reducing diets, the mystery foods, and “weight control” pills for losing pounds painlessly are bought and paid for by persons of both sexes and all ages. They fool themselves into thinking that reducing pills and a fad diet may be a substitute that will do what a weak will keeps them from doing—cut down on the calories they ingest.

Some people refuse to believe a hard but simple and established truth: Overweight comes from eating more food than the body requires in terms of energy spent.

Actually, the energy requirement decreases with age, so that the person of the same size and activity needs
21 percent fewer calories at age 65 than he did at 25. Often appetites and eating habits do not adjust to the smaller need, and the extra calories are stored as surplus. We use fewer calories as we get older because we tend to be less active, and expend less energy when we mechanize our homes and transportation. It is easy therefore to eat and drink more calories than the body uses. The surplus calories must be avoided if we do not want to store them as fat.

Somebody has pointed out, for example, that a stenographer who changes from a manual typewriter to an electric typewriter saves enough energy to put on 4 to 6 pounds of weight in a year if she does not use it up in another way or reduce her intake.

Mere futility or actual physical harm or both may be involved in trick devices for reducing. The ultimate futility of a diet of eggs and leafy vegetables or bananas and skim milk is not in the foods as such, but in the lack of variety and poor nutritional balance that are bound to make one give it up in a short time. These and similar combinations of perfectly good but a limited variety of foods are harmless but tiresome. They fail to establish a new pattern of eating, which is the only way to control weight.

Some restricted diets are so poorly balanced that chronic fatigue or actual illness may result. Most people cannot stick to such restricted regimes long enough to suffer permanent damage, however.

The pills and powders advertised for reducing usually are accompanied by instructions to follow a low-calorie diet, which must be followed for the plan to be effective, as guaranteed. The chances are that the diet would be just as effective without the expensive supplement. No food supplement can possibly reduce the caloric value of other foods eaten.

Any type of drugs or pills advertised for weight control should be used only under medical supervision. Not enough is known about the action of the appetite depressants to risk their general use, although some physicians have experimented with them. Yet such drugs are incorporated in some of the reducing pills advertised. An older device, less common today, was the use of cathartic drugs or salts, which tend to dehydrate the body. They cause quick but temporary loss of a few pounds of water—which are soon regained—and may result in irritation of the gastrointestinal tract.

Thyroid extract or drugs that tend to increase metabolism are sometimes prescribed by physicians when diagnosis indicates a need for them. Such endocrine products can be harmful if used indiscriminately. As a protection to the public, thyroid products cannot be sold by ethical druggists without a prescription. Unscrupulous vendors of quack reducing nostrums, however, do not hesitate, regardless of the side effects, to include drugs or endocrine products that may help to accomplish their ends.

Scientific journals and reliable magazines try continually to combat unwarranted enthusiasms for fad diets, whether they are the “Hollywood” or the “holiday” diet or the frivolous or fabulous formulas. But there still are “miracle diets,” “revolutionary discoveries,” and “reducing formulas” that are worded to appeal to the overweight college professor as well as to the buxom socialite. Advertisements offer tablets that “flush fat right out of your body” or “tranquilize away your reducing problems” or encourage you to “drink your fat away with a reducing cocktail” or “lose ugly fat without dieting or hunger—no calorie counting! no diets! no exercise!” Testimonials such as “I thank you for my new body” or “My husband asked me for a date” play upon emotions rather than appeal to intelligence.

These exaggerated claims and similar ones have aroused concern in Government circles, and a 4-day hearing was held before a subcommittee of the House of Representatives in August of
1957 on false and misleading advertising of weight-reducing preparations. Besides reviewing the misleading statements made about various preparations, several experts testified as to the possible dangers to users of such preparations.

The report of findings can be obtained by writing to the United States Government Printing Office and asking for 33d Report by the Committee on Government Operations, entitled "False and Misleading Advertising (Weight Reducing Remedies), 1958," Union Calendar No. 1071, House Report No. 2553, 85th Congress, 2d Session.

HIGH-POWER ADVERTISING has had a significant effect on the buying and eating habits of Americans despite tradition. Not all advertisers feel a responsibility to consumers to the extent of checking the authenticity and implications of their claims.

Since advertising in mass media is a kind of education for many people, we can attribute some of the present-day interest in foods and special diets to the increasing use of the nutritional claims in advertising.

The pendulum can swing too far, however, when advertisers promote food supplements to such an extent that one is led to believe that a good diet of natural foods cannot be adequate. "High power" vitamin capsules and amino acid supplements should be used only on the advice of a physician, not on the advice of door-to-door salesmen.

It is generally true that reliable companies tend to avoid misleading statements, but an apparently increasing number of unethical promoters indulge in half-truths, exaggerations, "sure-cures," and misinformation to sell their products to gullible consumers.

Many of the supplements widely advertised today are not harmful in themselves. If there exists any pathologic condition, however, the danger lies in the faith that victims may place in the exaggerated and unwarranted claims made for their therapeutic value. The danger is especially great when the concoction is represented as providing adequate treatment for such diseases as cancer, arthritis, diabetes, or pneumonia, which need prompt medical attention. No serious disease or physical disability should be treated by the patient without the advice of a physician.

Several good, reliable books have been published to help people reduce calories sensibly. Stay Slim for Life, by Ida Jean Kain and Mildred B. Gibson (published by Doubleday in 1958), offers sound advice and good menus and recipes with which to attain the desired goal.

Diet fads come and go with the changing emphasis—in medicine and nutrition. The pseudoscientist quickly changes his lingo to fit the times. As an example, when this chapter was being written, much emphasis was being given in medical literature to the relationship of fatty acids in foods to the incidence of degenerative heart disease. This relationship is a complex one and is not yet fully understood. Insurance statistics indicate that degenerative heart disease is the foremost cause of death according to their data, and the incidence correlates closely with the degree of overweight.

There is considerable evidence that there is long-range benefit from weight reduction and one way to curtail calories is to reduce the amount of fat in the diet. Eventually science may be able to specify the types of fats which are least harmful, but at the present time no radical changes in dietary habits of people in the normal weight range are recommended. Moreover, any product or dietary regime advertised to be a "sure cure" for atherosclerosis or heart disease should be questioned and inquiry made from reliable medical authority.

We have no censorship to protect us against misleading and incorrect books and articles.

Book reviews in reliable journals,
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such as the Journal of the American Medical Association, the Journal of the American Dietetic Association, Journal of the American Public Health Association, American Journal of Nursing, Today's Health, and Science News Letter are likely to be the best guides in the choice of special diet books. Some or all of them can be consulted in most libraries.

The librarian of a public library has to buy books demanded by his patrons, even though he may not recommend them. Moreover, he frequently is not qualified to judge the reliability of theories proposed by authors. Therefore the fact that a book is a bestseller or is on the shelves of a library is not a recommendation of it as a guide to nutrition. Actually, some fad-diet books have enjoyed a popularity far beyond that of most nutrition or diet books by scientific authorities—their only merit being that they are written so people can enjoy them.

Many reliable agencies and professional authorities are willing to give advice on good sources of information and are able to protect the public against the sales pressure of the quacks. Specific inquiries regarding questioned products or misleading advertising will be answered by the Bureau of Investigation of the American Medical Association, 535 North Dearborn Street, Chicago 10, Ill., or by the better business bureaus or chambers of commerce in your city or vicinity.

The Council of Foods and Nutrition of the American Medical Association also publishes statements and decisions to guide advertisers and include proper use of claims in advertising. Among others, they condemn vague mineral claims, the foods for "building tired blood," trick claims concerning resistance or superresistance of the body, and other superlative claims not supported by facts.

The American Medical Association, in cooperation with the Bureau of Investigation and the National Better Business Bureau, have joined in a program to alert the public to notorious health lecturers, worthless or harmful tonics and food supplements, phony health foods, and related false advertising claims. One project is an exhibit entitled "Nutrition Nonsense and False Claims," which features an actual recording of the pitch made by a door-to-door salesman of food supplements. A film entitled "The Medicine Man," which deals with the health lecturer who promotes his product as a cure-all of diseases, has been shown on television and is available from the American Medical Association for showing to groups.

General protection against mislabeling of products and fraudulent or misleading claims is provided by the enforcement of the Federal Food, Drug, and Cosmetic Act by the Food and Drug Administration. Examples of the type of legal action which they may take against quack "health lectures" or house-to-house sales based upon false and misleading claims are reviewed by Dr. George P. Larrick, Commissioner of Food and Drugs, in another chapter of this Yearbook.

The Federal Trade Commission and the United States Postal Service can also take legal action against fraudulent use of interstate commerce and of the United States mails, but much harm may be done before legal action can be effective.

In the August 1957 hearings on false and misleading advertising that I referred to, there was considerable discussion of the elapsed time between the receipt of a letter of complaint, the initiations of an investigation, and the issuance of a complaint. Although the average time has been cut down, it is still apt to be nearly a year or more before official action is taken. Much harm can be done in that time.

New fads crop up continually, and quacks use new devices to circumvent the law. The best protection for the consumer should be his own intelligent skepticism about extravagant and mys-
terious claims and his recourse to reliable agencies for information.

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Without a definite program of nutrition education started at the beginning of their school life, children are apt to confine their food choices to favorite foods. Likewise, children cannot project benefits into the future and so have no concern or appreciation for what the future will bring if they fail to eat their vegetables or drink their milk. A willingness to eat and choose the kinds and amounts of food that science has proved we need for good health must be learned. The emphasis and practice must be learned. . . .

Planning of experiences with foods should reflect: the development of children; class teaching of health, social studies, science, or literature; the use of lunch, snack time, parties and other social occasions as practice areas for learnings; the basic food groups; and well-planned lessons with emphasis on very simple directions, sanitation, and safety measures.

Experiences should take into account span of interest, motor control, comprehension, and present need. Children in the primary grades are still very immature and dependent upon adults for their food needs. They are equally dependent upon adults for direction and assistance in developing good eating habits. They can be introduced to food preparation by helping to stir a food mixture, to add ingredients or mold cooking with their hands, to decorate cakes, cookies, salads, or prepare vegetables. The making of a complete recipe would not be in line with their development, but to see and taste many kinds of vegetables and fruits could help establish food choices for growth in knowledge of good eating—as building a vocabulary of words aids growth in reading.—JUSTINE SMEY, in Journal of Home Economics, May 1958.

Reports of current research on the possible relationships of dietary fats, hypercholesteremia, and the incidence of atherosclerosis have aroused more concern on Main Street than any area of nutrition research. Without doubt, further research is necessary to clarify and interpret the influence of dietary factors, specifically fat, on the occurrence of coronary heart disease. Yet questions directed to the nutritionist, the dietitian, the Extension Service specialist, and the home economics instructor about the implication of research findings in terms of daily food patterns should be given careful consideration and answer. Otherwise, the questioner will turn to the food faddist who has the facility for positive, if not validated, statements. . . .

The evidence to date indicates the desirability of teaching moderation in the use of dietary fats, selection of dietary fats from various sources including vegetable oils, and the health hazards of overweight. In essence, these concepts have been a part of nutrition teaching during the past ten years and are in keeping with the principle of a balanced diet selected from a variety of natural foods. Self-chosen diets in which a high proportion of the calories are derived from fat, possibly at the expense of an adequate intake of other nutrients, are not in accord with principles of good nutrition; neither is an incidence of about 30 per cent of our population in the overweight category. Quite possibly further findings in this area of research may justify changes in dietary recommendations. At present, however, the challenge seems to be for more effective nutrition education.—WILMA D. BREWER and LOTTE ARNRIICH, in Journal of Home Economics, April 1958.