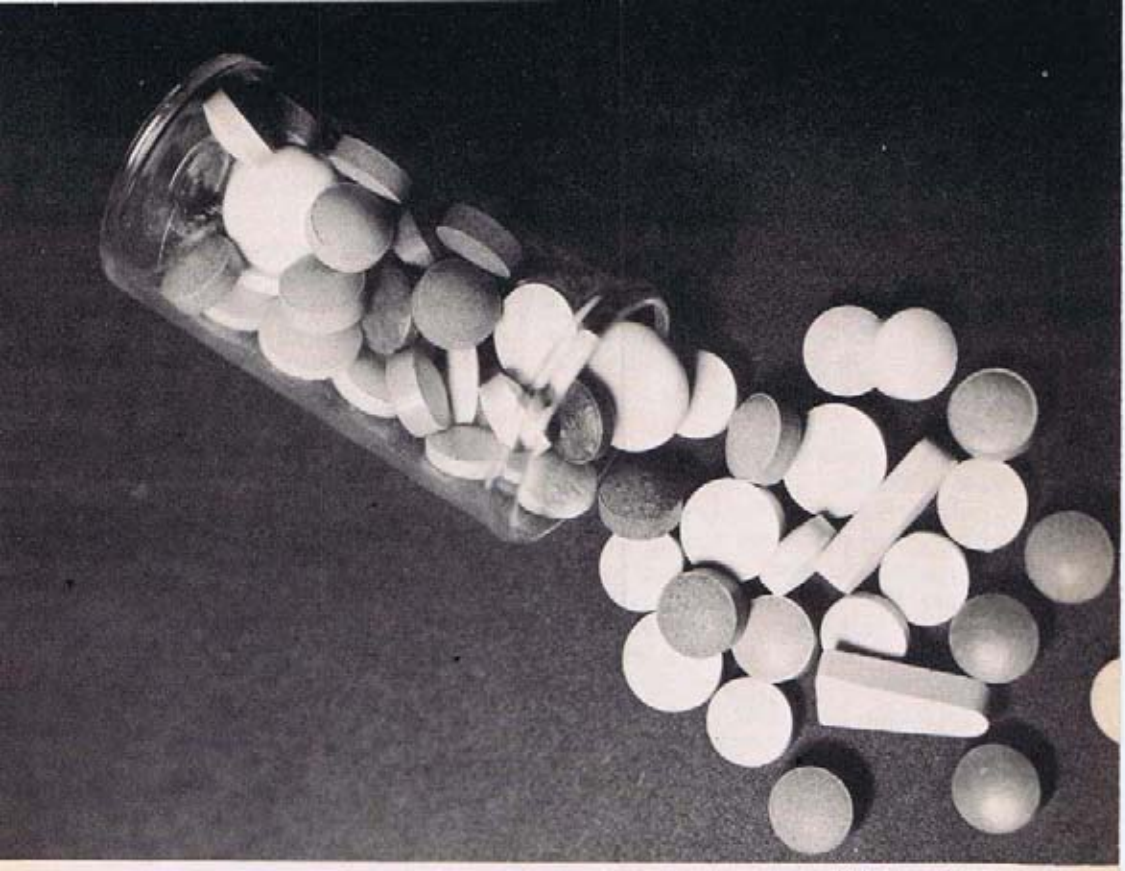

H. Armstrong Roberts

The New F.D.A. Attack On VITAMINS

Gary Allen *is author of* None Dare Call It Conspiracy; The Rockefeller File; Kissinger: Secret Side Of The Secretary Of State; Jimmy Carter/Jimmy Carter; *and*, Tax Target: Washington. *He is an* AMERICAN OPINION *Contributing Editor.*

■ THE bureaucrats of the Food and Drug Administration are at it again. On March 16, 1979, F.D.A. published seventy-five pages of proposed new rules and regulations in the *Federal Register* to control vitamins, minerals, and other nutrition supplements. These regulations, setting conditions under which over-the-counter (O.T.C.) vitamins and mineral products will be officially recognized as safe and effective, could have the force of law thirty days after the F.D.A. holds Hearings and issues a final ruling. Wicked vitamin pushers would then face fines and incarceration under bureaucratic "laws" never approved by our elected representatives.

The whole process is a violation of the Constitution, but it has been four

decades since a majority on the Supreme Court has worried about that sort of thing. The *Federal Register*, originally used to declare holidays and establish working procedures for the Executive branch of the government, has been turned into a statute book in which laws are simply proclaimed without any need to bother the people's representatives in Congress.

This process of legislation by proclamation amounts virtually to passing laws in the dead of night. The public is given ninety days to comment on the proposed regulations; but, a full month after the vitamin grab was announced, virtually nobody was aware of it until our sister newsweekly, *The Review Of The News*, broke the story. After all, who normally browses through the *Federal Register*? As of this writing, we have been unable to find so much as a paragraph report on the vitamin takeover in any newspaper.

The F.D.A. attempted a similar vitamin grab in 1973, but was eventually forced to back down by an indignant public supported by the courts. The proposed rules, which would have destroyed health-food stores and made vitamins and minerals prohibitively expensive, triggered an avalanche of one million protest letters to Washington. Angry health addicts picketed F.D.A. offices with signs reading "God Giveth Vitamins: F.D.A. Taketh Them Away."

It was a naked power grab, and F.D.A. Commissioner Charles Edwards proclaimed in Orwellian rhetoric: "I believe we have taken a significant step toward enabling the people of this country to act wisely in their best interests as consumers and guardians of their own health." Columnist James Jackson Kilpatrick dubbed the action "the most arrogant, most autocratic, most infuriating order ever decreed by a federal agency" and accused the F.D.A. of confusing "bureaucratic powers" with "divine powers."

In 1973 the people, the real people, got royally angry and pinned back the F.D.A.'s ears. Backing them up, the courts ruled that the planners at F.D.A. had not done sufficient homework to get by with their vitamin takeover. Of course the bureaucrats at F.D.A. keep trying. After all, they are working with your money, and since they have no need to be efficient or show a profit they persist — always trying to justify accumulation of more and more power over everything we breathe or ingest.

The F.D.A. appointed an "independent" committee to study and prepare a report on proposed rules for regulating the availability of vitamins and minerals. This report, handed down after six years of deliberation, is the basis of the latest move. You will not be surprised to learn that the F.D.A.'s "independent" committee of seven did not contain a single advocate of nutritional therapy for preventing and treating disease. The F.D.A. reaped what it had sown. After six years of bureaucratic beating around the bush, the committee did what it was supposed to do and returned to the F.D.A. a virtual carbon copy of those 1973 proposals.

According to the Food and Drug Administration, "the OTC drug review of vitamins and minerals is really the first time that FDA has systematically reviewed, in relation to the drug provisions of the Federal Food, Drug and Cosmetic Act, vitamins and minerals for safety and effectiveness and for the appropriateness of labeled claims for OTC drug use." According to the panel, vitamins and minerals should be considered "drugs" if they are used in

On March 16, 1979, the Food and Drug Administration published proposed new rules to force Americans to go to physicians and pharmacies for vitamins now sold safely and inexpensively over the counter and through the mail. The rules would classify vitamins and minerals as drugs instead of foods.

"prevention" or "treatment," and should thus be regulated by the bureaucrats just like tranquilizers or stimulants. This grab for jurisdiction would convert virtually all vitamins and minerals from classification as food — the consumption of which is traditionally outside the regulatory authority of the F.D.A. — into classification as potentially dangerous drugs which can only be taken if Big Brother deigns to give his permission.

Clinton Miller of the National Health Federation points out that under the new proposals, if a vitamin manufacturer has used on his label the phrase "to treat deficiencies," the F.D.A. can claim that it is a "new drug" and force the company to go through the "new drug" testing process. Of course, since vitamins and minerals cannot be patented, only the giant companies can afford to spend the time or the money required to comply with this process.

And individuals are not to be considered competent to tell whether they need vitamins and minerals to prevent or treat deficiencies. The F.D.A. panel concluded, "The need for such prevention or treatment should be determined by a physician." Get ready, here comes the big one. The F.D.A. also declares: "When vitamins and minerals are being used in doses and combinations which require the persistent and continuing supervision of a physician in order to monitor the therapy for its safety or effectiveness, such therapy must be controlled by prescription."

Health-food stores do not fill prescriptions, and neither does your inexpensive mail-order vitamin supplier. They will all be gone with the F.D.A. wind as the pharmacies are handed a monopoly on dispensing vitamins. The small and medium-size manufacturers will, at the same time, be unable to meet the costs of registering their new "drugs," so the big manufacturers will be able to jack up their prices, as will the pharmacies which will no longer have to compete with the health-food stores. The public will begin to suspect that vitamins and minerals are imported from Saudi Arabia.

The panel also makes all kinds of labeling recommendations which can at best be considered harassment. For example: "Terms such as 'stress,' 'super-potency' and 'geriatric' in the brand name are implied claim and do not comply with the labelling recommendations . . . ." And, "The Panel does object to the designation of a product as 'natural' on a label since this may imply an advantage which the Panel rejects as unsupported by evidence."

Horrors. Is it "misbranding" to

cannot neglect the facts of biochemical individuality. Of necessity, for reasons involving inheritance, every individual has nutritional needs which differ *quantitatively*, with respect to each separate nutrient, from his neighbors. The list of nutrients in the nutritional chain of life is presumably the same for every individual. If we were to indicate the quantities of each nutrient needed daily, however (e.g., calcium, vitamin B_1, leucine, and about thirty-five others), these amounts would be distinctively different for each of us. Some individuals, in the case of specific nutrients, may need from two to ten times as much as others. Each individual has a pattern of needs all his own."

Dr. James Privatera, a California physician specializing in nutritional therapy, informs your reporter:

"The medical profession has known about individual differences for a long time. In the Seventeenth Century, sailors used to get scurvy because of vitamin C deprivation, but some suffered much more than others. For many years, I have specialized in treating allergies. If people were all the same, there would be no need for allergists.

"People have all kinds of different tolerances. One man can drink 15ccs of methyl alcohol and be d.o.a. at the hospital, while another man can drink five ounces of methyl alcohol and have no problem whatsoever. Some individuals can eat one strawberry and get massive hives; others can eat bowls of them without any reaction at all. There are massive constitutional differences in people. That the F.D.A. can totally ignore what is so glaringly obvious tells us a lot about the F.D.A."

All of which makes the F.D.A.'s proposed restrictions not only idiotic but downright dangerous to the lives of those the government wants to deprive of vitally needed nutrients.

The first vitamin to be discussed by the F.D.A. bureaucrats in their proposed regulations was vitamin C (ascorbic acid). "The Panel concludes that there is no evidence that oral intake of vitamin C greater than 100 mg. daily is necessary to maintain adequate vitamin C status in even heavy smokers." This is incredible in light of the fact that many M.D.s and scientists are getting remarkable results in treating a variety of diseases with mega-doses of ascorbic acid. One of those diseases is cancer, Public Killer Number One.

Six years ago, Dr. Ewan Cameron in Scotland gave large doses of vitamin C to terminal cancer patients and discovered that their life expectancy was increased by four hundred percent. He felt that ascorbic acid stimulated the body's own defense mechanism. When Dr. Linus Pauling, himself deeply interested in vitamin C, tried to get the National Cancer Institute (N.C.I.) to conduct a study to duplicate Cameron's results (a standard requirement before findings can be presented to the scientific community for acceptance as fact), he came to a dead end:

"I gave them the first 40 case histories that Cameron had done . . . . They said they wouldn't do work with human beings until work had been done to animals, so why didn't I apply for a grant? I took their suggestion and applied for a grant and they turned it down. I applied four more times and they turned me down four more times."

The N.C.I. is no more interested in nutritional aspects of disease than is the F.D.A., which certainly could have conducted its own studies. Nonetheless, at least two laboratories — the Mayo Clinic in Rochester, Minnesota, and St. Mark's Hospital

label a natural product what it is? How about the customer who *wants* to buy a natural product? Clearly the gods of the F.D.A. don't think people are smart enough to make such decisions. Question: How can the people be trusted to pick their political leaders if they can't be trusted to buy a bottle of vitamin pills? Try to imagine how a bureaucrat would answer that question.

And the F.D.A.'s proposed rules on labeling go far beyond what it calls misbranding by inducement, actually denying the public information on nutrition which is vital to health. Linus Pauling, a brilliant scientist who can hardly be called a political Conservative, asks in his book *Vitamin C And The Common Cold*:

"Why should our government forbid anyone to learn or tell the truth about foods? Why should it be illegal to quote such information as the statement in the handbook, *Metabolism* (Altman and Dittmer, 1969), that after storage for three months, potatoes contain only half as much ascorbic acid as when fresh? What crime does one commit in quoting the paper of Glazebrook and Thomas (1942), who found that a ration of potatoes (12 ounces), containing 50 mgs., contains less than one tenth as much when cooked and reheated for serving? It is well known that the vitamins in food are in part destroyed by the storage, transportation, processing and cooking of foods. Why should it be forbidden to tell the truth about the dangers of malnutrition and the possibilities of vitamin or mineral deficiencies in foods?"

Clearly, it shouldn't be. Any more than it should be illegal to offer for sale doses of vitamins in efficient quantities. Those who have made a study of nutrition will certainly be shocked at the very low doses of vitamins to which the F.D.A. seeks to restrict O.T.C. sales. These restrictions are justified, says F.D.A., because it fears "delayed appearance of toxic symptoms." After all, who knows what the effect will be of taking a gram a day of vitamin C, say, for fifty years? Nobody knows, of course. So the F.D.A. says it wants to be extra careful and protect us from ourselves.

According to the Food and Drug bureaucrats, "there is no scientific documentation for the rational use of mega-quantities of vitamins . . . . Until we have obtained adequate evidence of the safety of large doses of vitamins taken for long periods of time or the documentation that high doses of vitamins do have a special health benefit which justifies a worse risk-to-benefit ratio, the Panel has chosen not to venture beyond a recommended dose range . . . ."

You see, whether you are a 275-pound N.F.L. tackle or a 98-pound jockey, to the F.D.A. we are all the same. It even admits: ". . . the Panel has selected an upper dose limit which would satisfy the requirements of the target populations for which the treatment is recommended." Therefore, the upper limit which will be allowed is just fifty percent more than the F.D.A.'s well-known Recommended Daily Allowance (R.D.A.). The means of arriving at such figures are utterly phony. According to Dr. Arthur Robinson, a biochemist at the Linus Pauling Institute: "One day I was having a discussion about RDA with Pauling and some scientists at the University of California, San Diego. The question of how RDA was determined came up. Nobody seemed to know how the FDA had arrived at Minimum Daily Requirements and later the RDA. So we sent someone to the library to research the origins of the

You have until June 14th to comment on the proposed vitamin grab by writing to the Hearing Clerk (HFA-305), F.D.A., Room 4-65; 5600 Fishers Lane, Rockville, Maryland 20857. Angry consumers are also urging their Congressman to co-sponsor H.R. 3574, Representative McDonald's bill to stop this bureaucratic outrage.

FDA's standards. We learned that the MDR-RDA amounts were not based on extensive testing, but on estimates. My reaction was, 'That's absolutely incredible.' In other words, these holy FDA regs are based on arbitrary amounts in the first place. It really is incredible."

While the soothsayers funded by the government and the drug industry claim that there are no differences among individuals as far as dietary needs are concerned, there are others who vociferously disagree.

Dr. Roger Williams is perhaps responsible for more original work in the field of vitamin research than any living scientist. He was the first man to identify, isolate, and synthesize pantothenic acid, one of the most important B vitamins. He also did pioneer work on folic acid and gave it its name. He was the first biochemist to be elected president of the American Chemical Society. While the F.D.A. claimed blindly and unscientifically that we all need the same amount of vitamins and minerals, Dr. Williams was performing experiments on animals to show that there really are substantially different needs. He reports:

"I became interested in the practical aspects of heredity in connection with animal experiments. Ideally, if one does an experiment on a series of animals, the results should be the same (or about the same) for all the animals in the group. In order to approach this ideal, it is common practice to use inbred animals which are supposed to have a very similar heredity.

"Early in our experience, especially after we became interested in biochemical individuality, my co-workers and I observed many disparities among those supposedly uniform animals. Some inbred rats on identical diets excreted eleven times as much urinary phosphate as others; some, when given a chance to exercise at will, ran consistently twenty times as far as others; some voluntarily consumed consistently sixteen times as much sugar as others; some drank twenty times as much alcohol; some appeared to need about forty times as much vitamin A as others. Some inbred baby chicks required seven times as much alcohol to bring about intoxication as others; some young guinea pigs required for good growth at least twenty times as much vitamin C as others."

Dr. Emanuel Cheraskin, a professor and chairman of the department of oral medicine at the University of Alabama, writes in *Psycho-Dietetics* of the differences in individual requirements:

"From the practical standpoint we

in London — are doing tests on humans to verify Cameron's research.

While the czars of the F.D.A. are planning to bar the public from all but micro-doses of vitamin C, more responsible scientists are actively confirming its potential. The March 1979 issue of the prestigious medical journal *Cancer Research* contains an article by Linus Pauling indicating that vitamin C may be effective as a treatment — perhaps even a cure — for cancer. The article offers no new information about vitamin C, but includes more than three hundred and fifty separate citations of important research with ascorbic acid by others. The appearance of the article in *Cancer Research* gives Pauling's theory the credibility that comes with publication in an international journal subject to the scientific rigors of peer review. "This went through the same review process that all of our papers go through," reports Dr. Sidney Weinhouse, editor of *Cancer Research,* which is published at Temple University.*

Dr. Robert Cathcart, an orthopedic surgeon in the San Francisco Bay area, became interested in using nutrition against disease after reading Pauling's *Vitamin C And The Common Cold* in 1970. Since that time, working with thirteen hundred patients, Cathcart has found vitamin C effective in dealing with such a wide variety of maladies as colds, flu, carbon monoxide poisoning, barbiturate poisoning, snake bites, hepatitis, heroin addiction, pneumonia, and mononucleosis.

Vitamin C, Dr. Cathcart has found in practice, builds the body's natural defenses against infections and diseases, allowing it literally to fix itself without the use of toxic or synthetic drugs. Most people, reports Cathcart, can take orally between ten and fifteen grams (or ten to fifteen thousand milligrams) of vitamin C without adverse effects. This is 100 to 150 times the dose which Big Brother wants to allow the public to purchase inexpensively over the counter. A common side effect of vitamin C in such large quantities is diarrhea. When such symptoms appear in an individual, the doctor notes, he has reached what is called the "bowel tolerance level" and the dose should be reduced. People are certainly intelligent enough to do that without getting a permission slip from a bureaucrat at the F.D.A.

"A person who is ill with even a moderate cold," reports Cathcart, "can take 30 to 60 grams without diarrhea. With a bad cold or flu — 100 grams, and with viral disease such as mononucleosis or viral pneumonia, I've used in excess of 200 grams a day without producing diarrhea."

The latter figure constitutes a total of all the vitamin C that F.D.A. would allow you to take at its restrictive doses between January 1, 1980, and July 1, 1985.

In fact, the optimum benefit is obtained with the highest dose not producing diarrhea. And, according to Dr. Cathcart, "The tolerance level in each individual differs. Some days you can tolerate more; some days less; but from general experience I label a cold as a '320 gram cold,' or '60 gram flu,' according to how much a person can take before he reaches the bowel tolerance level."

After reading Pauling's book, Dr. Cathcart first began experimenting on himself, since he had been plagued with hay fever and colds

*Almost all of Pauling's other research on this subject had been published in the proceedings of the National Academy of Sciences, which has a policy of offering articles submitted by its distinguished members without review by other scientists.

since childhood. "I discovered I could take more when I was sick than when I was well," he reports. Since he saw very few patients with infectious diseases in his orthopedic surgery practice, he moved to Incline Village, Nevada, where the frigid Sierra Nevada winters produce lots of colds. He now maintains: "I am convinced there is not a viral disease in the world that cannot be cured with a large enough dose of vitamin C."

If the F.D.A. gets its way, however, vitamin C will be choked while sales of Anacin and penicillin take an enormous jump in Incline Village and everywhere else.

Of course vitamin C is not the only nutritional supplement to be restricted by the proposed takeover. Under the new F.D.A. regulations, vitamin A dosage will be limited to 2,500 I.U.s (International Units) over the counter and 10,000 I.U.s if a doctor will write a prescription for a deficiency. Although infinitely safer than aspirin, vitamins A and D are the two vitamins which are potentially toxic if taken in doses which would choke an elephant. When F.D.A. attempted in 1973 to put similar restrictions on vitamin A, Dr. Pauling responded with a statement from which we quote:

"1. The optimum daily intake of vitamin A is, in my opinion, about 25,000 IU for many people. The FDA has no convincing evidence that this opinion is not correct. The FDA should not make a regulation that interferes with the proper nutrition of the American people.

"2. If the proposed limitation of the sale of vitamin A were extended to foods, a prescription would be required for a serving of one half of one ounce of broiled lamb liver or two ounces of sweet potatoes. The FDA is either wrong in proposing the limitation of the sale of vitamin A tablets or capsules or remiss in not also proposing the equivalent limitation of the sale of liver, sweet potatoes, and other foods rich in vitamin A.

"3. There is very little chance of damage to humans from ingesting too much vitamin A — far less chance than for many drugs that are sold over the counter. The argument that the proposed regulation would significantly protect the American people from a serious danger, that of hypervitaminosis A, is invalid.

"If these capsules could not be obtained, many people probably would take five 5,000 IU capsules per day. The regulation would be ineffective, but it would have some nuisance value in discouraging some people from improving their health by reaching the optimum intake of this vitamin.

"Inspection of price lists shows that the cost per unit of vitamin capsules containing 5,000 or 10,000 IU is two or three times that of capsules containing 25,000 IU. Accordingly the proposed regulation, if put into effect, would mean for many people only an unnecessary cost of $5.00 or $10.00 per year paid for this important nutrient.

"A fraction (rather small) of the American people might rely upon their physicians to prescribe vitamin A for them. They also would suffer financially, in having to pay the physician for writing the prescription and in having to pay the customary overcharge for prescriptions as compared with over-the-counter items."

Dr. Roger Williams writes in *Nutrition Against Disease* of the alleged overdosing: "It is true that when vitamin D was first produced by irradiation, it was exceedingly cheap, and uninformed persons took enormous doses (on the assumption that if a little is good, more is better). Some damage resulted; but the

The F.D.A. claims blindly and unscientifically that we all need the same amount of vitamins and minerals. Nutritional research shows that some people need from two to ten times as much as others. And it turns out that even the F.D.A.'s widely touted Recommended Daily Allowance is based upon mere guesstimates.

amounts taken were often hundreds or thousands of times as much as are ordinarily needed.

"Similarly, 'vitamin A toxicity,' which has received an inordinate amount of attention, has been produced only when dosages have been extremely large as compared with ordinary needs. In one extreme experiment involving rats, for example, the animals were given 10,000 times what rats are said to need. Even at this level of dosage the symptoms were only moderately severe. At current prices, to get a like amount of vitamin A, a human being would have to consume 1,000 capsules each containing 50,000 units, and the cost would be about $65 per day.

"While excessive dosage with vitamin A is undesirable, the danger from moderate dosage up to 50,000 units per day is minimal."

Vitamin A is being experimented with in such diversified areas as treating cancer, warts, acne, ulcers, wrinkled skin, visual defects, and respiratory infections. All experiments are safely using far stronger doses than their royal omnipotences at F.D.A. wish to allow. According to Dr. Privatera:

"The most common symptom of taking more vitamin A than the liver can handle is a headache. You don't have to see a doctor or an F.D.A. bureaucrat to know that if you are getting headaches, you should cut back on vitamin A. Actually, there is a new form of highly-emulsified A which is available. It bypasses the liver and can be taken in much larger doses. It is being used by Dr. Harold Manner, head of the Biology Department at Loyola of Chicago, in conjunction with Laetrile and enzymes in his studies of mouse tumors. He has been getting a 90 percent regression rate."

Then there is vitamin E, a favorite with those who are emphasizing nutrition in health maintenance. That has made it a particular target of the Food and Drug bureaucrats. According to the F.D.A., which is moving to dictate over-the-counter dosages: "A dose of 3 to 6 I.U. daily might be more than adequate for healthy adults." You are thinking that you just read a typographical error. Surely, you say, the F.D.A. means 300 to 600 I.U. per day. Wrong. The quotation is correct — that's "3 to 6 I.U." But those gallant fighters for health and nutrition at the F.D.A. are going to allow you to take as much as 30 I.U. as long as you promise to be good. Most nutritionists recommend between 800–1,200 I.U.

The F.D.A. and the medical establishment have heaped derision on Evan and Wilfred Shute — two

Canadian M.D.s who for decades used mega-doses of E to treat problems of the heart, circulation, and skin — because the Shute brothers applied the innocent vitamin to human disorders without waiting for lengthy research on rats to catch up with their practice. The *success* of their treatment apparently does not count. Such activity is dismissed as "merely anecdotal." Thus, as *Prevention* magazine of November 1978 observes, "while the vitamin awaits respectability, doctors may privately swallow it daily, but publicly hold it at arm's length."

Now, numerous studies here and abroad are confirming what the Shute brothers have been saying since the 1930s. Dr. M.K. Horwitt, professor of biochemistry at St. Louis University School of Medicine, writes in an article entitled "Vitamin E: A Re-examination" in the May 1976 edition of the *American Journal Of Clinical Nutrition*:

"Within the past few months, an important group of papers has appeared which supports an old theory [*of the Shutes'*] that the topcopherols [*vitamin E*] are somehow involved in decreasing blood coagulability . . . . There is now sufficient evidence to give some credence to investigators who claimed that supplementation with vitamin E has an effect on blood coagulation."

Subsequently Dr. Horwitt reported that further tests had produced more evidence to confirm the efficacy of vitamin E. And the Shute brothers are at last being taken seriously by the medical profession, if not by the F.D.A. Dr. Wilfred Shute can be forgiven if he is mildly sarcastic about all of this, declaring: "It was 35 years ago when we said it [*vitamin E*] was a potent antithrombic, and we have to wait 35 years for men like Horwitt to say we are right. In the meantime the opponents of vitamin E have been killing people. . . . People have been killed because of the stupidity of a profession which condemns something they know nothing about and have never tried . . . ."

If the F.D.A. bureaucrats get their way, they will be responsible for killing tens of thousands more.

The F.D.A.'s anti-vitamin proposals go so far as to list more than one hundred substances which the bureaucrats would ban as additives with no nutritional value. Incredibly, the list includes Brewer's Yeast, cod liver oil, egg yolk, molasses, wheat germ, and (God help us!) peas. We could go on and on through the suffocating F.D.A. game plan, vitamin by vitamin and mineral by mineral, but here is a brief rundown on the dosage limits the Food and Drug fanatics are proposing:

F.D.A. Proposals	Recommended By Nutritionists*
Biotin, not allowed	.1 mg
Choline, not allowed	250 mg
Vitamin B_{12}, 10 mg	200 mg
Folacin, .4 mg	.4 mg
Niacin, 20 mg	100 mg
Pantothenic acid, 20 mg	100 mg
Vitamin B_6, 2.5 mg	100 mg
Riboflavin, 2 mg	100 mg
Thiamine, 2 mg	100 mg
Vitamin D, 400 IU	400 IU

Minerals

FDA Proposals	Recommended By Nutritionists*
Calcium, 800 mg	500 mg
Copper, not allowed	5 mg
Iodine, not allowed	125 mcg
Iron, 20 mg	65 mg
Magnesium, not allowed	250 mg
Manganese, not allowed	10 mg
Phosphorus, not allowed	75 mg
Potassium, not allowed	100 mg
Zinc, 25 mg	50 mg

*We don't wish to sound like the F.D.A., but these are only examples. Consult a nutritional physician or nutrition text for specifics.

The F.D.A. justifies these ludicrous dosage restrictions by claiming that people get all the vitamins and minerals they need simply by eating the good old "well-balanced diet." Nutritional scientist Dr. Emanuel Cheraskin calls this contention a myth. According to Professor Cheraskin:

"In the most recent national study of what families eat, released by the Department of Agriculture, we find that of the 7500 households surveyed, *only half* had diets that met Recommended Dietary Allowances for calories, protein, calcium, iron, vitamin A, thiamine, riboflavin and ascorbic acid. The other half had diets that failed to meet the allowances for one or more of these essentials. The diets of one in five families were rated *poor*!

"The percentages of *good* diets dropped from 60 percent of all households in 1955 to 50 percent in 1965, while diets rated *poor* increased from 15 percent to 20 percent. Calcium, vitamin A and ascorbic acid were the nutrients most often found to be in short supply.

"The devastating decline in nutritional quality can be partially explained by a grocery dollar shift towards foods offering little but calories. Americans are buying less milk and dairy products but more soft drinks, punches, ades and alcoholic beverages; less fresh citrus fruit but more frozen juices and lemonade; less fresh and more processed potatoes; more canned, frozen, precooked, ready-to-serve items in place of prepared-at-home foods; more potato chips, crackers, cookies, doughnuts, ice cream and candy, all eat-and-run items filled with sugar, starch and chemical additives."

One of the shockers of the study was that high income does not insure good nutrition. An analysis comparing diet and income revealed that thirty-five percent of the households with upper-middle incomes had diets deficient in one or more essential nutrients.

A 1972 study conducted by Dr. Cheraskin confirmed the extent to which choice rather than a low budget account for poor diet. He asked 364 doctors and 296 of their wives to keep detailed records of what they ate and drank. Calculating the results, Cheraskin found twelve percent of the doctors consumed less than the R.D.A. for vitamin B_3; ten percent did not get enough vitamin C; thirty-two percent did not get enough calcium; approximately half were not getting enough vitamin E; and, ninety-five percent were not getting even minimum recommended amounts of iodine.

The doctors' wives were doing even worse, and both groups were found to rely far too heavily on refined carbohydrates.

Bear in mind that the figures cited in the above tests represent deficiencies in what the F.D.A. considers minimum requirements. Nutrition specialists, citing overwhelming amounts of research, would set the minimum much higher. According to Professor Cheraskin:

"Governmental guardians who constantly assure us we are the world's healthiest people attempt to perpetuate the myth that 'three square meals a day' will provide anyone all the nourishment needed. Dr. C.E. Butterworth, chairman of the Council on Foods and Nutrition of the American Medical Association, recently stated: 'All the recommended nutrient intakes considered essential to the maintenance of health in normal individuals can be provided by a balanced diet of conventional foods including enriched and fortified items.'

The proposed Food and Drug Administration restrictions would bar the public from access to mega-doses of even vitamin C, which builds the body's natural defenses against infections and diseases. Most people can with optimum benefit take a dose of 100 to 150 times that which Big Brother wants to allow.

"This 'balanced diet' myth conveniently ignores these facts:

"• American food habits are indeed moving from bad to worse.

"• Soil and growth conditions vary drastically from one part of the country to another, making it virtually impossible to assess the nutrient values of foods produced.

"• Refinement and processing rob food of vital substances.

"• Little professional agreement exists as to what a 'balanced diet' is or for whom it is 'balanced.' "

Dr. Cheraskin's description of modern food is enough to make one swear off the grocery store. "As a result of technological manipulation," he says, "items formerly considered 'highly nutritious' are hardly worth being called 'foods' any longer. A clever chemical feast masquerades as yesterday's ice cream. Those who think they are enjoying a wholesome dairy product might find their enjoyment dimmed if the package alerted them to the fact that most frozen desserts contain antioxidants, neutralizers, buffers, bactericides, surfactants, stabilizers and emulsifiers.

"Except for those brands whose packages properly proclaim them to be 'natural,' ice cream is likely to offer you alcohol, propylene glycol, vanillin, methyl salicylate and ethyl acetate, substances as bad for you as they are hard to pronounce. Ethyl acetate, for example, is primarily a textile and leather cleaner. Its vapors have been known to cause lung, liver and heart damage.

"Food 'faddists' who once held center stage in complaints about processed and devitaminized foods have been vindicated. All recent tests confirm that foods lose important nutrients as they travel from the garden to the stomach. Those made from refined grains fare the worst. Bread, once the 'staff of life,' hardly resembles its former self. Wheat transformed into white flour loses more than 50 percent of its health-giving vitamins and almost 90 percent of its minerals.

"One of the great nutritional travesties is that many products made from virtually valueless flour are now labeled 'enriched.' Over twenty nutrients are taken out, four are put back! Yet the public is constantly propagandized into believing it is buying a superior product."

Still, the brutal truth is that nutrition is a science in its infancy, where the respected experts rarely agree. Which is certainly one more reason why the government should not attempt to reduce by regulation the availability of vitamins and minerals. For example, Dr. Carlton Fredericks is one of the best-known nutri-

tion experts in the country. Testifying at an October 1973 Hearing before the House Subcommittee on Public Health and Environment, he mentioned that a group of "experts," assembled by the National Aeronautics and Space Administration to lay down the guidelines for supplying optimal nutrition to astronauts on a five-month flight, had disbanded after only twenty-four hours of discussion because they could not arrive at a consensus on even the first item on the agenda — calories.

Dr. Fredericks pointed out that these scientists had been handed an impossible task. The science of nutrition has not yet progressed far enough even to agree on individual requirements for carbohydrates, fats, proteins, and minerals. Confronted with a decision involving optimal intake as opposed to minimal maintenance, it is not surprising the "experts" exploded with frustration.

In applying nutrition to prevention of disease the problems multiply. The *Medical Tribune* of November 22, 1978, reported that its editors had interviewed ten of the nation's acknowledged orthodox cancer experts on what they personally do to try to avoid cancer. The *Tribune* asked: "Do leading cancer experts attempt to practice preventive oncology on themselves?" And it answered:

"Many do, as *Medical Tribune* learned in polling ten nationally-recognized authorities at the recent annual Science Writers Seminar of the American Cancer Society here. For a stolid few, cancer defense is merely part and parcel of generalized preventative health — well-balanced diet, regular exercise, etc. — but others have chosen more elaborate and, hopefully, cancer-specific armor: high-fiber diets, massive doses of vitamin C, minimizing animal fat intake.

"True, those polled often are quick to point out that their strategies are based on only scanty scientific evidence and are not to be taken as gospel by the public, but they are apt to mutter such sober-scientist pieties on one side of the mouth while ingesting megadose vitamins with the other."

Why then is the medical Establishment so hostile to nutrition-oriented medicine? This is, of course, a complex question with diverse answers. In his book *Nutrition Against Disease*, Dr. Roger Williams maintains that ever since Pasteur the medical profession has been focusing almost all of its attention on fighting microbes. Williams observes:

". . . the medical men accepted Pasteur's doctrine wholeheartedly — carried it farther, in fact, than he probably would have. Pasteur had never said that *all* diseases are microbial in origin; yet that was the assumption the profession now seemed to make. From the standpoint of Western medicine, the discovery that some diseases were of nutritional origin had little impact, and did not carry the same sense of universality as did Pasteur's discovery.

"The evidence adduced by Eijkman, Funk and others about the existence of deficiency diseases was not easy to come by, but it was clear cut enough when developed. Yet in view of the professional resistance it encountered, one can easily imagine the kind of reception the medical profession would give to the corollary, but less easily demonstrable thesis, that good nutrition might help to prevent the occurrence of diseases normally associated with infection by microbes. In a straightforward deficiency disease the relationship between diet and symptom is direct and easily shown. Remove ascorbic acid from the diet and scurvy will

eventually result; restore the ascorbic acid and the scurvy will eventually clear up. Such relationships are not so obvious in the case of infectious diseases. That is not, however, to say that they do not exist."

The scientist sums up his concern by remarking: "Ignorance is pardonable, but I am not so sure about neglect." He believes that our medical schools have become homogenized, and notes: "When science becomes orthodoxy, it ceases to be science. The fact is that medicine has become addicted to the administration of vast quantities of nonbiological medications [*drugs*] which I would categorize as dubious or even essentially 'bad.'" Professor Williams continues. "But the most basic weapons in the fight against disease are those most ignored by modern medicine: *the numerous nutrients that the cells of our bodies need.* If your body cells are ailing — as they must be in disease — the chances are excellent that it is because they are being inadequately provisioned."

The problem may also be institutional. Under the present system doctors are paid for bringing their patients back to health; they are not paid when the patients stay healthy. If people do not become ill, physicians suffer financial loss. This is certainly not to maintain that doctors want their patients to get sick. But, on the other hand, it doesn't exactly predispose organized medicine to go wild over preventative medicine.

To repeat, we are not accusing doctors of conspiring to make people sick. But they are no more immune from rationalizing in favor of that which increases their income than are businessmen, accountants, lawyers, and (well) journalists. As nutritional physician Dr. John Richardson remarks: "When the people I thought were health nuts said that we doctors knew very little about nutrition, it used to make me angry. Then I started studying the subject and realized that I really had been taught very little about nutrition in medical school, and much of what I was taught was wrong."

Dr. James Privatera agrees: "Like most doctors who practice nutritional therapy, I learned about the subject outside of school. I hate to say this, but we physicians are probably the last of the health professionals to become interested in nutrition. The osteopaths, the dentists and the chiropractors were much more interested in nutrition than the Johnny-come-lately physicians. Probably only one-half to one percent of all physicians in the U.S. are interested in treating nutritional deficiencies to any extent. But, of late, interest among physicians in nutrition has at last started to take off."

The trouble is that just as this vital area of health maintenance and therapy is coming into its own the F.D.A. is attacking widespread use of vitamins and minerals in an effort to reduce their ready availability. We asked Gary Null, a popular New York City broadcaster who does a daily feature on health, why this is so. Null replied:

"We know some people at the middle management level at F.D.A. who, if they aren't on our side, will at least listen to us and understand our philosophy. They will tell you off the record that the top-level management at F.D.A. operates with an eye toward their personal futures, making sure that they benefit the drug industry which will be their future employers. It's almost like working up a résumé now in anticipation of moving out of the F.D.A. later. Meanwhile, the underlings are trying to please their bosses so they can get promoted."

Dr. Privatera thinks the motives

of the top F.D.A. bureaucrats are more sinister. He believes that this giant agency is run by collectivist ideologues who are promoting ever bigger government to increase their own power and authority wherever possible. Privatera contends: "The government wants to keep vitamins and minerals from people for the same reason they want to ration gasoline. They want to nationalize medical care, and control of private use of vitamins and minerals is part of the game. Right now, the health-food stores run on a marginal basis, and the proposed F.D.A. rules could be the last straw. If only physicians could give vitamins and minerals for treatment, this would give them a monopoly on this kind of care, causing an overburdening glut of business for doctors and a disastrous crunch for the health-food marketers. It would also further consolidate the manufacture, distribution, and sale of vitamins into the hands of already-powerful drug companies and giant pharmaceutical chains."

Gary Null believes that the large drug companies stand to make hundreds of billions of dollars off the proposed F.D.A. rules. You can't protect a vitamin or mineral product with a patent and there are hundreds of laboratories producing such health-food products. However, thanks to the incredible regulations which the F.D.A. has imposed on new drugs, only a few huge concerns can afford to perform the tests that the F.D.A. requires before a new drug can be marketed. These tests can cost as much as ten million dollars and take ten years of hacking through red tape. Obviously the small companies producing vitamins and minerals can't even afford the ante required to play in the high-stake game that F.D.A. is out to initiate.

The battle over the proposed new regulations between the nutritionally minded and the F.D.A. will go on for some time. It may even last for years as Hearings and court cases proceed. This whole business is a lawyer's perpetual Christmas. While we are not scientists, we can and do say that on the issue of freedom of choice the F.D.A. must be fought tooth and nail.

Americans have been given until June fourteenth to let the F.D.A. know what we think of its proposed vitamin grab. To comment you should make reference in your letters to Docket Number 78N-0024 and address your remarks to the Hearing Clerk (HFA-305), F.D.A., Room 4-65; 5600 Fishers Lane, Rockville, Maryland 20857.

Doubtless you will want to write your Congressman about this, and should call his attention to Pages 16126–16201 in the *Federal Register* of March 16, 1979. You should mention that the most effective way to show his opposition would be to join as a co-sponsor of Congressman Lawrence Patton McDonald's bill (H.R. 3574), which would specifically forbid the F.D.A. from initiating this vitamin grab.

Dr. Linus Pauling believes that the average longevity for Americans could be extended by an average of twenty years through widespread vitamin therapy, with far fewer illnesses along the way. We don't know whether this is true, but one thing is for sure: If the bureaucrats at F.D.A. have their way, we won't have the freedom to find out. ■ ■

CRACKER BARREL

■ "In my judgment," John Lofton Jr. says, "the deteriorating state of this country's internal security programs is *the* under-reported news story of the past decade."