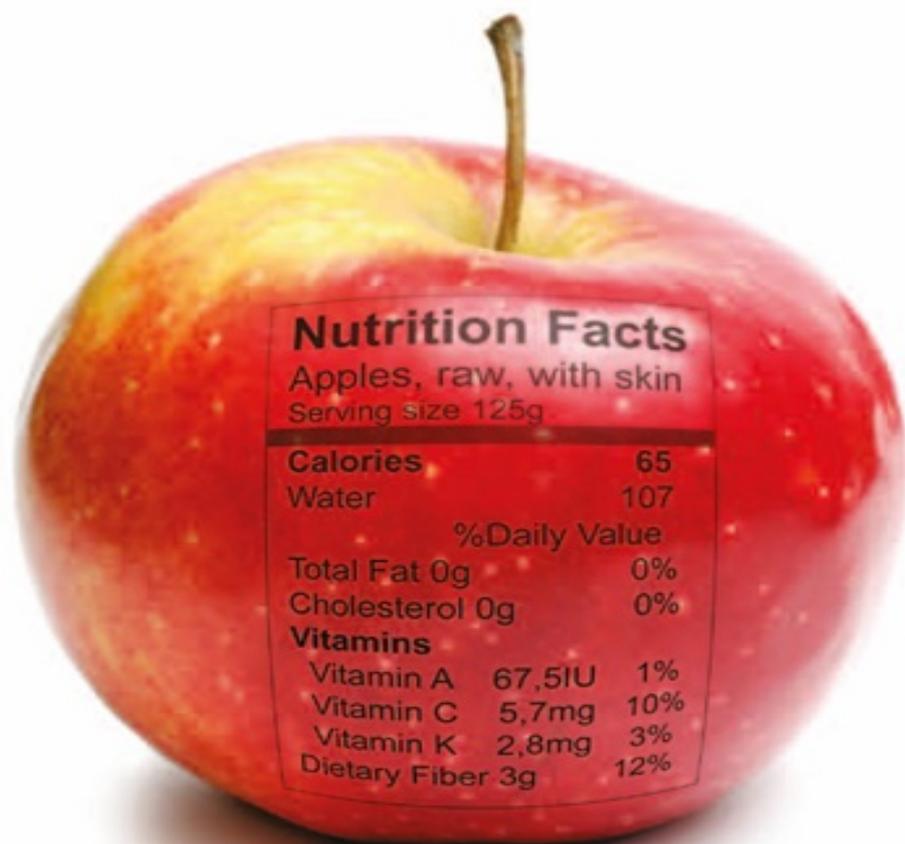


# JOHN MCKENNA

Bestselling author of *Hard to Stomach:  
Real Solutions to your Digestive Problems*



GOOD  
FOOD

CAN YOU TRUST WHAT  
YOU ARE EATING?

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# Good Food

Can You Trust What You Are Eating?

**John McKenna BA, MB, ChB**

*Gill & Macmillan*

*I wish to dedicate this book to my mother, Kathleen McKenna, for the high standards that she lived by, especially in the selection and preparation of food. She was a wonderful mother whose love was boundless. She dedicated her life to caring for her children and so I in turn dedicate this book to her as a mark of respect and as repayment for all the wonderful things she did for me while growing up. I love you very much and wait to be reunited in spirit.*

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# Introduction

I have rewritten this manuscript five times. Initially I just wanted to shed some light and convey some common sense on what has become the single most important issue affecting people in the Western world. In effect, I wanted to contrast my diet growing up in Northern Ireland and my diet during the years I spent in different parts of Africa with the diet of people living in Europe today. The Western diet has undergone a revolution in the space of a few decades.

Then I realised I had to address other issues, such as the way people are informed about nutrition. I also had to deal with the food pyramid, which is the main tool used by schools, universities and governments to educate the population about good dietary habits. In dealing with the topic of the food pyramid I was obliged to deal with the thorny issue of animal or saturated fat in the diet and the even thornier issue of sugar. Dealing with the reduction of animal fats in foods and the replacement of this fat with sugar led to a lot of political intrigue.

This unfortunately led to the unearthing of serious events that took place in the United States during the 1970s that now threaten the health of almost every nation that consumes processed foodstuffs. I not only had to research the negative role of food manufacturers in shaping the diet of modern people all over the world, I also had to examine the effects of the chemical industry on farming, which has undergone a revolution in my lifetime. This led to looking at the issue of natural pastures versus unnatural pastures as well as the issue of soil as the link between all living creatures and the planet we occupy. This in turn led to ecological and philosophical issues that drive our society. Each draft has attempted to dig a bit deeper into the issue of food and how it affects all of us.

However, despite all the negative effects we humans have had on the world we live in, I wanted to describe some of the magical events that make life possible and make good food possible for you and your family. I have witnessed this magic first hand growing up in Northern Ireland and working in Africa. Writing these various scripts has given me some insight into my own life. I now better understand why I had to grow up in the heart of the countryside to appreciate simplicity, especially simple foods. I also understand why I spent so many years living and working in Africa, where I was able to see how more isolated people lived and what foods they ate. This African experience provided a powerful contrast to my Western way of eating and living.

Writing this book has also helped me realise my deep interest in all things nutritional. For most of my clinical practice I've used diet and nutritional supplements

to treat a range of medical conditions. In rural Africa, diseases of the Western world such as heart disease, arthritis, diabetes, etc. don't exist. However, once these rural people enter urban areas and start abandoning their traditional diet in favour of a more Western diet, all these Western disorders begin to manifest. Reversing these diseases, including many forms of cancer, is possible simply by altering their diet – amazing but true. The chapter devoted to Dr Weston Price's research is powerful testimony to this fact (see [Chapter 2](#)).

The real message that I wanted to convey in this final draft of the book is a little deeper than that. It's a message of self-reliance. Don't expect society to change to suit your opinions or needs. It's time to become less reliant on the structures in your society and more reliant on your own ability. The power lies with you. There are vested interests at work trying to control you, your government and all the structures designed to protect you, such as the Food Safety Authority (the Food and Drug Administration in the US), national associations such as your national heart association, professional bodies such as your national association of dietitians, medical and scientific research, etc. These vested interests have effectively gagged the people in power in these structures so that you get misinformed and misled and never learn the truth. It's high time you stopped listening to voices that have been blatantly compromised and start listening to your own inner voice, your gut instinct.

It's important to trust in Nature and in your own true nature, i.e. your gut feeling, and lead your life in as true and as wholesome a way as possible. Take control of your diet and move it slowly away from packaged food to food that grows in the fields. Become less reliant on supermarkets and more reliant on fresh foodstuffs. This will not only benefit your health, but that of your offspring for many generations to come, as you will read about in this book.

Food must be grown, collected, cooked and eaten in a more respectful and more spiritual way – respectful of the earth or soil it's grown in and respectful of the physical body it's put into. In contrasting the way of life in Africa and Europe, it's apparent that there is a distinct lack of spiritual wisdom guiding Western society, which is controlled by short-term gain – money. However, this is about to change. The structures are beginning to crumble and will be replaced with a simpler system. In the meantime, free yourself of any dependence you may have on these structures and feed your body **good food**.

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## Chapter 1

# My Own Diet

### **GROWING UP IN IRELAND**

I suppose the best place to start discussing diet and food is to examine the diet I grew up with, what I experienced in Africa and then what changes I saw on my return to Europe many years later.

During my lifetime, a revolution has taken place in the types of food people eat and how foods are prepared. It's light years away from my childhood experiences and even further away from the diet of most rural Africans.

I was born and brought up in the heart of the countryside in Northern Ireland, and when I say the 'heart' I mean I lived two miles from the nearest village and eight miles from the nearest town. We didn't have electricity for the first 11 years of my life. We used Tilley lamps and paraffin lamps as a source of light and we used an Aga stove fuelled with anthracite to heat the house and the water as well as to cook food.

My mother was a nurse and had a keen interest in nutrition. She prepared most of the food in the house and made sure that everything was as natural as possible. To give you a good idea of her obsession with good health, she used to give me a raw egg beaten in milk, much to my disgust, most mornings before I went to school. We all got a daily dose of cod liver oil and a dessertspoonful of Scott's Emulsion. She took great care to buy the best food possible and in so doing educated me about what constitutes good food.

We got most of the staples like eggs, chicken, milk, butter, vegetables and potatoes from the local farmers, so the produce was fresh but mostly organic as well. All other foods were bought once a week, usually on market day, in the local town. My mother was a very good cook and loved baking too and so made most of our bread and tarts and cakes. We therefore had a very simple but very healthy diet.

Breakfast usually consisted of a boiled egg and brown soda bread or porridge with raw milk and some honey, or occasionally sausages and bacon and black pudding with bread and butter. In those days many people made their own butter in big churns and the butter was a deep yellow colour, as the dairy cattle grazed on natural pastures. Animal produce featured heavily in the diet, as did bread and butter. We had jams and marmalade and honey to sweeten things a bit. As I grew older and had some say in what I ate, breakfast cereals such as cornflakes and All-Bran appeared. My mother was quite strict about processed food, so there wasn't a whole lot of it in our cupboards. She was also strict about the use of table sugar and preferred to use honey.

When I came home from school there was always a big pot of soup simmering on

the stove. I used to have two bowls of soup with a sandwich or plain bread followed by a cooked meal. Tea was something small, like a salad, an omelette or a fry. There was seldom starch with this evening meal. My mother believed in the saying ‘eat breakfast like a king, eat lunch like a prince and eat supper like a pauper’, so the evening meal was light and easy to digest. We drank tea for the most part in our house.

Opposite my home there was a grocery shop where we used to buy bits and bobs. During the long summer holidays I worked in the shop serving customers, filling tea bags and sugar bags from big wooden tea chests and large paper sugar bags. The owners of the shop also had a delivery van, a mobile shop that would visit even more remote areas of the country. I loved going on this van, as it was like a big adventure. I also got to meet some interesting and some very strange people. For all the work I did I was paid not in cash, but in sweets and chocolate, usually a few bars of chocolate and a few packets of spangles, fruit gums or pastilles. On returning home I was careful to hide these away from my mother in case she took exception to the sugar overload. My maternal grandmother, who lived a mile away from us and whom we visited often, used to tell us to save all our sweets for Sunday, which was a good idea in theory but a horrible idea in practice. To me, treats were to be enjoyed immediately; I wasn’t a fan of delayed gratification.

However, since I spent most of my spare time in this shop I slowly became addicted to sugar. By the time I was in my teens, I suffered from hypoglycaemic spells if I went too long without a sugar fix. I used to get a hollow feeling in my stomach and would feel a bit weak and spacey and I realised I needed to eat something quickly. My mother was worried I may have been developing diabetes, but I knew the real reason: I was eating too much sugar. I then began to take sugar in my tea, which I hadn’t done when I was younger. I soon ended up taking six teaspoons per cup, until one year I decided to give up sugar for Lent (thank goodness for Lent!) and kicked the habit. Since then I’ve had to be very careful to avoid sugar as much as possible.

In the local town my mother would visit the greengrocer, the butcher and the bakery. It was only much later that she did some of her shopping in the supermarket. She knew the butcher very well and knew that they reared their own livestock and so trusted them to provide good-quality meat, which they always did. She bought a few cakes and some bread at the baker and lots of fruits at the greengrocer as well as a few vegetables she had problems getting from the local farmers. We didn’t eat pasta or rice; it was always potatoes.

All the locals drank unpasteurised raw milk. At primary school I got bottled milk at break. Later we got deliveries of milk from the local milkman, which came in glass bottles with the cream on top. Usually the birds got to the milk first and treated themselves to a little of this cream. At that time I didn’t realise just how important this cream was. It’s the single most important part of the milk, but I’ll explain that later in the book.

When I moved away from home to attend university, I lost my way in dietary terms and started to eat rubbish. My diet was white bread and tea for breakfast, cheese and bread for lunch and pizza or a burger for supper. Occasionally I had a proper cooked meal, but heavily laden with potatoes to fill me up. After a few months of eating like that I began to feel lethargic and mentally sluggish. It took a while to discover what was wrong, but eventually the penny dropped: there was no fresh food in my diet.

I began to eat fruits, salads and vegetables and less sugar and starch. The improvement was immediate. This was the first time I saw the beneficial effects of altering my diet. A seed had been sown.

During my long summer holidays I used to go work in New York to make some money. At the end of the summer I travelled up to Canada for a few weeks to see my sister and her husband, who lived in northern Ontario. New York was always very hot and humid during the summer so it was a great relief to get out of the city and up to the refreshing climate of Canada.

The quality of the food, in particular the bread, milk, eggs, meat and chicken, was shocking in the whole of North America. The factory-made white sliced pan was soft and spongy, like eating marshmallow. It didn't resemble the bread I had grown up with. The supermarket milk had no cream on top, as it had been homogenised. It didn't taste like milk, but more like flavoured water.

For the most part, all the delis and supermarkets had the same types of poor-quality foods. The best I could get was German rye bread in a deli close to where I stayed, so I mostly lived on sandwiches with the occasional burger or hot dog. I was also shocked at all the convenience foods available and all the fast food outlets. Virtually all the foodstuff was processed and real food was hard to find. To see people eating donuts and coffee for breakfast was new to me. Little did I know the same trends were about to follow me back to Europe.

## **AFRICA**

After graduating from university I set off to work in West Africa on a two-year government contract. It was an exciting adventure for me, as I'd always wanted to travel and Africa was as far as my imagination stretched. Going to West Africa was a bit like going to another planet. Everything was so strange and different. It was very disorientating, as there was nothing I could identify with. Even the shades of green were different. Most importantly, the people were very different, as was the food they ate. The latter in particular took a lot of getting used to.

On arrival I was forced to eat local foods until I got settled and got my own paraffin fridge and stove. I was living in a remote area, so there was no access to Western foods. For the first two weeks I ate fufu with yams almost every night. It wasn't well accepted by my stomach, as I had severe diarrhoea for those initial few weeks. West Africans use chillies in most of their dishes and the hotter the chilli, the better. When I got my house in order I was able to cook for myself – not that I was a good cook, but at least I could control what entered my stomach. Anything was better than being at the mercy of chilli.

Breakfast usually consisted of fruits such as pawpaw (papaya), mango, pineapple or plantain fried in palm oil, which was really tasty and sweet. Lunch was usually rice and chicken or yams with meat or chicken. I didn't eat a lot of meat, as I had picked up a tapeworm after eating meat in a government rest-house (a bush motel). Plus seeing meat in the market covered in flies did nothing to enhance the image in my mind. Milk was delivered every day to my door. The beautiful Fulani women used to visit my house on their way to the local market, carrying calabashes containing milk on their heads, which was for sale in the market. It was like having the milkman (milkwoman in this case) drive past your door every day and drop off some free supplies.

The Fulani in West Africa are like the Masai of East Africa in that they are nomadic cattle herders. They are a fascinating race of people. They don't have the typical negroid features of other tribes in West Africa, but instead have more Arabic features: they have long faces and are very slender and athletic in build. From a dietary point of view they are also very different, as they live mainly on milk, meat and fruits. The Masai of East Africa live almost exclusively on milk, meat and blood as well as what grows wild in the bush, such as seeds, nuts and fruits. Both tribes are extremely healthy despite having such a restricted diet.

Once a month I made a trip to Jos, a city high up on a plateau. Not only was it a lot cooler there, but there were also supermarkets with foods imported from Europe. This was like heaven to me, as I didn't have to haggle over the price of everything and there were foods that I was used to from back home. In addition, the food was safe to eat. I would load the car with what I interpreted as 'real food' and head back to the bush. In essence, my diet was a mixture of local foods combined with Western processed foods, but it was mainly local foods.

Because of its geographical location, Nigeria has a range of both tropical and subtropical foods as well as imported foods from the Arab countries to the north. The main cereals are rice, millet, maize and sorghum. Often these cereals are used to supplement a meal such as yam with stew. Sorghum and maize can also be used to make a porridge in the same way that we use oats to make porridge. Cereals are grown locally by farmers, but in the traditional way and not using fertilisers or chemical sprays. They are grown mainly for personal use and any excess is sold in the local market. Industrialised farming methods had not arrived in West Africa when I was there in the late 1970s.

A whole host of vegetables are used as well, some of which I wasn't aware of, such as black-eyed peas, aubergine, pumpkin, squash and okra. The main root vegetables grown throughout West Africa include yams, sweet potatoes, cassava and cocoyams; these are often used as the starch component of a meal. Goat meat is very common, as is mutton, beef and chicken. In almost every cooked dish there will be peanuts as well as the trio of tomatoes, onion and chillies. Many fruits, seeds and nuts are also available. West Africans eat a lot of food, but it's all natural and grown locally using traditional methods. They have three square meals a day.

I was genuinely surprised by the range of foods available and how plentiful it was. I had had a mental image of starving Africans living in poverty. Nigeria was a wealthy country with more than enough food to feed its people. It's the fifth largest producer of oil in the world and is far from being poor. I was also impressed with the level of people's health. There was little evidence of the degenerative disorders so common in Europe, such as arthritis, hypertension, heart disease, asthma, etc. There were many infections, however, including nasty ones such as hepatitis B, a viral illness that killed two of my friends, and lots of parasites, such as malaria, bilharzia, sleeping sickness and worm infestations. West Africa is still the white man's grave, as I witnessed myself. It's quite a dangerous place to live. I lost a friend to malaria. Most of us from Europe got malaria but coped well with injections of chloroquine.

If you ignore the infections and parasites, West Africans are largely very healthy and full of life. Despite the heat they have good energy levels, love to party and can dance all night long. Life begins just before dawn – the cocks begin to crow around 5

a.m. This took a lot of getting used to, especially as it's often hard to sleep well because of the heat. Life goes on throughout the day, with a siesta for two hours in the afternoon, until late in the evening. Clearly your health has to be reasonable if you can wake before dawn, work all day, cope with the heat and still have energy to party.

I learned a lot in West Africa. In the village where I lived there were no lawyers, judges, courts, police, banks, building societies or other trappings of Western society. If there were any problems, they were sorted out by the chief. If you wanted to build a house the chief allocated you a piece of land and everyone in the village helped you build it. They don't own land as such, as the land is in the care of the chief. Nowadays the power of the local chief has been diminished as Western values have invaded these traditional societies.

I then travelled to other parts of West Africa and to Cameroon. The diet and customs were very similar throughout the region; only the language changed. Later I lived in central and then in southern Africa. Maize is the principal cereal there and there is less use of hot spices such as chilli peppers; otherwise, the diet is the same. The further south you go in Africa, the more Western the diet becomes, mainly because this is where you find the greatest concentration of white people. In Zimbabwe, Namibia and South Africa there is the same range of processed foods as found in Europe. The presence of processed foods, especially those with sugar, coincided with the presence of degenerative diseases. In southern Africa, if black people abandoned their traditional diet in favour of processed foods such as refined maize meal, white flour and sugar, they inevitably started to manifest diabetes, hypertension, heart disease, allergies and so on. This pattern was most noticeable in the black townships around major urban centres such as Harare, Johannesburg and Cape Town, where blacks presented with diseases previously found only in the white population.

## **RETURN TO EUROPE**

After many years in different parts of Africa, I returned to Europe in 2002. I moved to England, as my daughter was living there at the time. I was shocked by what I saw. The average person in the street of the local town where I was living was visibly overweight, many of the children at the local school were overweight and even the babies were on the plump side. Clearly, something very unusual had been going on in the 1980s and 90s while I was in Africa.

On my visit to the supermarket, I began to see what was wrong. The foods that filled people's shopping trolleys were mainly processed foods and mostly carbohydrates – pizza, waffles, breads, biscuits, cakes, pancakes, breakfast cereals, snack foods, etc. – and all laden with sugar. Even worse, people were eating either convenience foods such as pies, burgers, chips and takeaways or ready-made meals or microwave dinners. There was little or no fresh food in the diet. The diet I grew up on and the traditional diet I experienced in different parts of Africa were now replaced with factory foods. These were foods that were not designed by Nature, but by food chemists. These foods were destroying whole populations.

I couldn't believe what I was witnessing. To this day I'm still in a state of shock at how radically our diet has been transformed in such a short space of time.

With a little bit of research it became clear that the obesity crisis began in the mid-

1970s in the US and in the early 1980s in Europe. This coincided with the removal of fat from foods in the mid-1970s and the addition of high fructose corn syrup to replace the fat. It was known in the 1950s and 60s that fructose causes obesity and I had learned this at college in Dublin in the early 1970s. It must have also been known to the food chemists who decided to replace fat with fructose. Why allow such an international catastrophe like this to happen? Making money for food companies is clearly more important than people's health.

What still astonishes me is the impotence of politicians, doctors, dieticians and international organisations such as the World Health Organization (WHO) to deal with the obesity epidemic. Unfortunately, they have become part of the problem. Most organisations dealing with the epidemic are sponsored by the same food companies that are causing the problem. When the WHO decided to inform people to cut sugar out of their diet, they were promptly told by a member of the US government to change their minds or their budget would be cut, so the WHO altered their advice. Needless to say, the public wasn't informed and everyone became aware of the power of the food companies over politicians.

Everywhere in the world where Western processed foods are sold, there is an obesity epidemic. It has nothing to do with lack of exercise or with fat in the diet and everything to do with sugary foodstuffs. To advise people to avoid fat, eat more carbohydrate and exercise is tantamount to deliberately making people ill. What is the motivation for such advice? All it does is discredit the whole of the establishment. It discredits politicians, government advisors, food manufacturers, dieticians and doctors as well as medical and scientific research.

The purpose of this book is to try to bring some common sense back and to help people reverse the trends of the 1980s and 90s. It's designed to get you back to a more natural diet and to reduce your dependence on supermarkets. It's written to help you distinguish between real food and food devoid of nutrition.

## Chapter 2

# Two Amazing Researchers

### INTRODUCTION

*‘Man is the only species clever enough to make his own food and stupid enough to eat it.’*

– BARRY GROVES

A wiser quote I have never read. Man has become separate from and detached from Nature, and all within a short space of time. It began after the Second World War but has accelerated during my lifetime, i.e. over the last 60 years. From my childhood, when I got fresh produce from a local farm, I’m now reduced to being dependent on supermarkets to feed myself. This has occurred in the last 40 years in particular, as the supermarket chains began to put the smaller shops out of business. It was a gradual, insidious process. Local greengrocers, butchers, bakers, etc. were replaced with impersonal self-help chains of superstores, which were, and still are, more interested in profit than in providing good food. Never mind the quality, look at the price. To quote from the movie *Food, Inc.*, ‘bigger, fatter, cheaper, faster’ is the motto for chickens given animal feed containing antibiotics and growth hormone and reared in inhumane conditions. These kinds of chickens are preferred to free-range, humanely raised chickens, as there is more profit in the former.

The big retailers such as Tesco in the UK and Ireland have gradually gained power over the farmers and dictate what to do and how to do it.

Government and European Union regulations have also done their bit in this chain of events by standardising the size, shape and colour of our foods. This has led to a rapid decline in the quality of our food. It’s time for us all to come to our senses and reverse things while it’s still possible. Spend a little time and energy finding a farmer who will sell you produce directly from his or her farm. Alternatively, get a plot of ground or an allotment and teach yourself and your children to grow food. Learn how to make yoghurt, butter and bread as your mother or grandmother may have done. If you can’t do any of this, at least stop shopping in the supermarket or wean yourself off supermarket dependence and support your local butcher, baker or local market instead. Do something, and most importantly, explain to your children why you’re doing it so that they will adopt good shopping habits when they’re adults.

The importance of doing this will become evident to you by the end of this chapter. I have dedicated this chapter to the work of two brilliant men who researched nutrition over 70 years ago. They were both American and were both aware of the negative

impact of processed foods on the health of both humans and animals. They carried out some incredible research in the 1930s, the results of which are as relevant (if not more so) today as they were back then. This research is worth learning about and keeping at the forefront of your mind every time you go hunting for food in your local shops.

### **DR WESTON A. PRICE**

I'll begin with the work of Dr Weston A. Price, as the results will leave you in no doubt about the role processed food is playing in our modern health problems.

Dr Price wasn't a doctor or a dietician or a nutritionist, but rather, a dentist. However, he had a wonderful knowledge of nutrition, and after his travels around the world studying various population groups he gained quite a reputation for his success at treating medical conditions with nutritional advice. Dr Price practised as a dentist in Cleveland, Ohio, and saw first hand the deterioration in the dental health of his patients with the advent of modern foods in the early 1900s. Dr Price decided to visit and study the healthiest people on the planet in order to study their diet in detail and then use this knowledge to help his own patients. Little did he know that the tide of deterioration he was witnessing in the 1920s was to continue for another 90 years, culminating in an obesity epidemic.

He began his travels in 1931 and continued to travel over the next 10 years, by which point he had accumulated more data than any other researcher of his time. He had documented detail not just on the incidence of dental caries (tooth decay), dental arches and facial structure, but on the general health and especially the nutrition of each group of people he visited. What amazed me on reading his book *Nutrition and Physical Degeneration* was how simple their diet was and how few foods they ate. This shouldn't have been such a revelation to me, as I had spent enough time with primitive tribes in Africa to realise that this was the case. For example, some of the people he visited ate only oats and fish for the most part and were perfectly healthy – that is, there was little fruit and vegetables in the diet (no five a day for them, I'm afraid).

Dr Price was asking the basic question as to why there was so much dental decay, crowding of teeth, high dental arches and increased susceptibility to infection, especially tuberculosis, which was prevalent at the time. His nephew worked for *National Geographic* and was very helpful in finding isolated peoples with perfect teeth and excellent health and where there was no doctor or dentist.

He began in 1931 by travelling to an isolated community in the Loetschental Valley high up in the Alps in Switzerland. This community was so isolated that they had to depend solely on local foods, so they had no exposure to modern processed foods. He studied all 2,000 inhabitants of the valley. They had excellent overall health, no cases of tuberculosis, almost zero incidence of dental caries (0.3 per cent) and ate a very simple diet of sourdough rye bread, cheese and raw goat milk or cow milk and meat once a week – a diet rich in saturated fat, for those of you who still believe saturated fat is bad for you. The men in this valley were known throughout Europe for their great physical strength and were chosen to be trained as the well-known Swiss Guards who protect the Pope in the Vatican. Dr Price examined the teeth of every child in the valley and made careful notes to record his findings. His wife helped with the collection and filing of data. He also listed and took samples of the foods they ate and

sent these samples to his laboratory in Cleveland for analysis.

What is most interesting about their diet are the following details:

- They had little or no fruit and vegetables.
- They ate lots of animal (saturated) fat.
- They pre-digested the rye before eating it.
- They wouldn't eat lean meat without the fat and they consumed all the organs, including the adrenals, kidneys, heart, eyes, brain and the lining of the gut. These were the most treasured parts of the animal.
- The milk was raw (i.e. unpasteurised).

The pastures on which the goats and cattle grazed were quite special. According to Dr Price's findings, the grass was rich in chlorophyll (the green pigment in green plants), making it particularly nutritious. Substances rich in chlorophyll, such as spirulina and *Chlorella*, are highly rated in the world of nutrition, as they're so full of vitamins and minerals. In winter they fed the animals dried grass (hay) and in spring took the cattle high up to eat the fresh grass fed by melting ice.

These people were effectively cut off from contact with other villages, as they were surrounded on three sides by very high mountains and on the fourth side by a track that was impassable for most of the year, and then only on foot. No vehicles could access the village, so there were no modern foods such as white bread, sugar, biscuits, cakes, tinned foods and soft drinks. How fortunate these people were, and how healthy. Dr Price had truly found an isolated village. He was amazed at the exceptional level of good health among the population as well as good dental health despite there not being a toothbrush in sight. He photographed many of them, and on examining the photos it's apparent that they had perfectly formed teeth: no crowding of the teeth, normal, low dental arches (what we non-dentists would call the palate or roof of the mouth) and broad facial bones that allowed room for all the teeth, including the wisdom teeth. They didn't brush their teeth at all and so the teeth had a covering or residue, but no evidence of infection or plaque. Their immunity to all infections, including tuberculosis, which was killing people down in the lowlands of Switzerland and indeed in the rest of Europe, was remarkable. Dr Price attributed their wonderful health to their simple, natural diet.

He then moved to another mountain village, Vissoie, which was quite similar to the previous village except that a road connected the village to the rest of the country and so they had access to a modern bakery (white bread, biscuits, cakes), sweetened jams, jellies, etc. In Vissoie the incidence of dental caries was 2.3 per cent, which means that 23 people per thousand of the population had evidence of previous or present tooth decay, compared with only three per thousand in the Loetschental Valley. The diet of the people in Vissoie was very similar to that in the previous village except that they had access to refined carbohydrates. The introduction of modern processed foods lowered their immunity not only to dental decay, but to other infections as well, notably tuberculosis. It also led to the development of chronic degenerative diseases such as arthritis and heart disease.

He then moved to the world-famous health resort of St Moritz, where the diet was

almost totally modern. There, the rate of dental caries was 29 per cent, or 290 per thousand of the population, and tuberculosis was rampant. The only children with good teeth in St Moritz were those who had moved down from the remote mountain villages and had retained a natural diet.

In the area around Lake Constance in the lowlands of Switzerland, Dr Price recorded a very high rate of dental caries – almost 100 per cent. In the TB clinics in this area, none of the patients were from the high mountain valleys, suggesting that these mountain people had a much greater resistance to infection. However, this resistance began to disappear upon the introduction of modern processed foods, and when the natural parts of the diet were eventually replaced completely by modern foods, the body began to manifest what we now regard as commonplace disorders: infections, blocked arteries, osteoarthritis and asthma. He was beginning to prove to himself and others just how critical a role diet plays in human health. He was now excited to test these findings in other isolated locations in the world.

Next on his list of places to visit were the islands of the Outer Hebrides, where the people were also famed for their good health, fine teeth, strong physiques and cheerful dispositions. This was of particular interest to me, as I'm Irish and have always been impressed with the high level of health of people from the isolated parts of Ireland, especially the islands such as Achill Island just off the Atlantic coast.

Dr Price travelled to the Isle of Lewis, which had a population of 20,000, who were mostly involved in fishing or were shepherders. They lived in small thatched cottages. Not much grew on the island, as there was little lime (calcium) and therefore the soil was fairly infertile. As a consequence, there were few trees, no fruits and little in the way of vegetables. Most of the island was peat bog. Because of the poor quality of the soil, very few cattle could be raised (only some on a government experimental farm); hence, there was little or no dairy produce either. Oat was the only crop that would grow, so the bulk of the diet was seafood and oats; very occasionally there was a little barley. Oats were used to make porridge and oat cakes, which were eaten with most meals. Lots of fish, lobsters, oysters, crabs and clams were also consumed. The liver of the codfish was a prized food and was fed to pregnant women and growing children. (Now you know why my mother used to give me cod liver oil.) The fishermen and women often worked from 6 a.m. to 10 p.m., as there were large quantities of fish to be prepared and packed for shipping to the mainland; they had amazing energy reserves. The thatched roof of the cottages was replaced every October and the old thatch was used as fertiliser for the soil, as the locals knew it contained something that helped the oats to grow.

Like in Switzerland, the more isolated the people, the lower the rate of dental decay. In Stornoway, the capital, many young people had false teeth due to the high incidence of tooth decay. TB was common in Stornoway but virtually absent among the isolated people. The negative effects of modern foods were all too apparent. Dr Price also visited the Isle of Harris and noted the exact same patterns: the more isolated the people, the better their level of health.

This is quite remarkable when you think of how limited the diet of these people was – they were eating little more than seafood and oats. This flies in the face of everything we've been taught about the importance of dairy and the so-called five a day of fruit and vegetables. Clearly, the body functions in a different way. The body

seems to respond best to natural foods and seems to malfunction as soon as processed foods are introduced. The exact details of the diet are almost less important, in that the isolated Swiss people were eating rye bread and dairy, while the Celts were eating seafood and oats. If I were to put you on either of these diets I would be accused of causing malnutrition. Yet how come these people not only had no deficiency diseases, but were actually thriving? Now you see why I find the work of this man so fascinating. He revealed many uncomfortable truths about the role of diet in human health, and more importantly, human ill health.

Next, Dr Price visited the Eskimo population of Alaska. He described the Eskimo as the last of the Stone Age people, through whom we have access to a truly ancestral way of life. They are the last of the races of people who thrived in the harsh Arctic environment, where temperatures can dip to a staggering  $-70$  degrees Celsius. It's impossible to grow anything in an environment as hostile as this, so their diet didn't include cereals, vegetables or fruits and also excluded dairy, as there is no livestock at such latitudes. Again, despite such a restricted diet they exhibited excellent physical health, amazing physical strength, dental perfection and a complete absence of tuberculosis. Dr Price reported that a typical Eskimo man can carry 100 pounds of weight for a considerable distance in both arms and between his teeth.

Upon contact with the white man and his food, which was referred to as 'store grub', the Eskimos' health deteriorated. The typical diet of the Eskimo consisted of salmon, seal oil, which is rich in vitamin A, occasional caribou, kelp, groundnuts and occasional berries. All organs of the fish and caribou were eaten. The most prized food was salmon eggs, again reserved for pregnant women and young children. The bulk of their diet was fish protein, fish oils and seal oil.

A very isolated group of Eskimos was studied at Stoney River and were found to have an incidence of dental caries of 0.3 per cent, while a group on Nelson Island in the Bering Sea had an incidence of 0.1 per cent. Children at a Catholic school in Holy Cross, Alaska, where all but one had access to modern foods, had an incidence of 18.7 per cent, confirming the key role of diet in the health of these people. Again, exposure to modern foods led to changes in the facial bone structure of children and as a consequence changes in the shape of the dental arch. This was often combined with increased susceptibility to infection and to degenerative disorders.

One of the most beloved men in Alaska at that time was Dr Joseph Romig, who worked as a doctor in the hospital in Anchorage. He had 36 years' experience working closely with the Eskimo and Native American populations. He witnessed a high incidence of gall bladder problems, stomach and intestinal issues and the need for appendix operations in those on a modern diet, yet none of these problems were an issue with the races on a traditional diet.

He also saw a high incidence of malignant disease (that is, cancer) in those eating refined foods and a zero incidence of malignancy among those eating a purely natural diet. He treated tuberculosis via diet: he put his patients on the diet discussed above or sent them back to an isolated village if they had relatives there. He solved many medical issues simply by altering his patients' diet. He was a great believer in natural methods of healing. Because of his success in treating tuberculosis in this way, he became very well known and respected.

In 1933 Dr Price moved to northern British Columbia and the Yukon Territory to

study the Native Americans who lived there. They lived away from the coastal areas and thus didn't have access to seafood. As temperatures were very low there, like in Alaska, it wasn't possible to grow foods such as vegetables, fruits or cereals or to keep livestock such as cattle, goats or sheep.

These people existed mostly on wild game such as moose, caribou and bears, yet they didn't suffer from deficiencies in their diet. When Dr Price asked how they avoided scurvy, they described how they used various parts of the animal, such as the adrenals and the wall of the second stomach of the moose, for vitamin C. They seemed to have a wealth of knowledge and an understanding of Nature's secrets. They were skilled at building wooden cabins to withstand the bitter cold of these latitudes and had herbal cures for a wide range of problems. When Dr Price asked why they didn't share their knowledge and wisdom with the white man, the chief replied that the white man knew too much to ask the Indian anything. Western culture is indeed very arrogant and looks down on the very people who lived in harmony with Nature for so long on this planet, but soon, as Western culture collapses and the money games come to an end, we will have to revert to a simpler and more natural way of being and so will need the wisdom and knowledge of these people.

Like all the other isolated peoples who survived on a purely natural diet, the Indians of northern Canada had an almost zero rate of dental caries. They also had no evidence of tuberculosis, osteoarthritis or any other degenerative diseases. Later, Dr Price was able to visit Indians in other parts of Canada who lived on reservations; he quotes his findings from the biggest reservation in Canada, which is in Brantford, Ontario. Alcoholism was widespread, as were degenerative disorders and a significant number of maternity issues. Dental caries was rampant. These settled Indians had all the privileges of modern life, including a modern hospital, but no amount of modernity could halt the steady deterioration in their health. Dr Price attributed this deterioration to the readily available supply of modern foods, especially refined carbohydrates such as white bread, cakes, biscuits, soft drinks and sweetened foods. His study included documenting the rate of caries in a training school on the reservation, but what's interesting about this school is that the students were fed raw milk, wholewheat bread, lots of fresh fruit and vegetables and no refined carbohydrates. They had very few medical or dental problems, which confirms the fact that diet is the single most important contributing factor to good health. This is further borne out when skulls are compared in Vancouver Museum, where there is no evidence of dental caries in the skulls of primitive people compared to a rate of 38 per cent among the skulls of modern natives. Modern foods wreak havoc in the bodies of all who consume them.

Dr Price visited many other parts of the world, including Polynesia, Melanesia, Australian Aborigines, different parts of Africa, New Zealand and Peru. In total he visited 14 different isolated locations. The same patterns were observed in each place: in places where the native diet was replaced with modern foods, the rate of dental caries, tuberculosis and degenerative diseases rose sharply.

The tests performed on primitive foods in his laboratory looked at the levels of various micronutrients (vitamins and minerals). He also looked at the levels of vitamins and minerals in plant-based foods compared to animal-based foods and had some very interesting things to say. He paid a lot of attention to what he called the fat-soluble activators, i.e. the fat-soluble vitamins, as these formed a key component of

the primitive people's diet. He found that without an adequate supply of these vitamins it isn't possible to absorb sufficient levels of calcium and phosphorus, which are critical for growth. In other words, children may be eating foods with calcium, but because of a lack of vitamins, they may actually be starved of calcium because they're unable to absorb it. For example, vitamin D assists the absorption of calcium in the gut.

He compared the Eskimo diet to a modern diet and found that the Eskimo diet had 10 times more fat-soluble vitamins, 5.4 times as much calcium, 7.9 times as much magnesium and 49 times as much iodine. The Eskimo diet was far superior to the modern diet in every respect. His comparison of the diet of all the other primitive peoples proved the same thing. Dr Price was suggesting that the effects of a deficient diet have far-reaching effects not just on one's physical health, but on one's mental, emotional and spiritual well-being. I couldn't agree with him more. The Native American Indians alluded to the damaging effects of sugar in the white man's diet, saying it weakens the mind and the spirit.

Dr Price has some interesting stories to tell and I'd like to share a few with you now, as they will confirm your belief in the role of simple nutrition. A young boy who was suffering severe convulsions was brought to Dr Price's office. The church minister who brought him felt that the problem was nutritional and thought Dr Price could help. The boy's convulsions had been getting progressively worse over the previous eight months. His diet consisted of white bread and skimmed milk, as the family was poor. Dr Price felt that his convulsions were due to a low calcium level in his blood. Dr Price changed his diet to wheat gruel made from freshly ground wheat and whole milk containing the fat, as well as the addition of a high-vitamin butter with each meal. When given this food for the first time, he slept all night without a convulsion. He was fed the same food five times the next day, and still no convulsion. He recovered quite quickly and regained full health. By giving the child simple, natural food, the body made a remarkable recovery.

This story is relevant to modern times, as many children are given skimmed milk or low-fat milk. It's true that the calcium that the boy needed was in the watery skimmed milk. However, to absorb it you also need vitamin D, which is in the fat portion of the milk – vitamin D is fat soluble and so is found in animal fats. This is why saturated or animal fat is so critical for human health. Humans can't make vitamin D, so we have to obtain it from food. Guinea pigs, however, make their own vitamin D, which is why they are used as a source of food in Peru, especially high up in the Andes, where there is no dairy produce available.

The next story is quoted directly from Dr Price's book (2008) (reprinted with permission from the Price-Pottenger Nutrition Foundation):

*Shortly before our arrival in Northern Canada a white prospector had died of scurvy. Beside him was his white man's packet of canned foods. Any Indian man or woman, boy or girl could have told him how to save his life by eating animal organs or the buds of trees.*

*Another illustration of the wisdom of the native Indians of that far north country came to me through two prospectors whom we rescued and brought out with us just before the fall freeze-up. They had gone into the district which at that time was still*