National Health Federation BULLETIN

MAY, 1974

35c

●

Osteopaths Win Supreme Court Ruling In California Licensure Issue

●

HOSMER BILL GAINS NEW SUPPORT

Majority of House Members and members of Public Health Subcommittee have now sponsored bills to block FDA's pending dietary supplement regulations

NUTRITIONAL LABELING

Perhaps helpful to consumers but economically distasterous to some small processors

FLUORIDATION STATISTICAL METHODS

A clever way to manipulate figures to dupe the public

BREAD

Staff of Life or Chemicalized Fluff?

COMPLIANCE DATES ON VITAMIN REGULATIONS CLARIFIED

Report of current status and clarification of terms of stay of effective date granted by FDA in response to petition filed by National Nutritional Foods Association

Dedicated to the Protection of Health Freedoms

THE
NATIONAL HEALTH FEDERATION BULLETIN

Protection of Health Freedoms — *Published Monthly*

Volume XX — Number 5 — May, 1974

CONTENTS

The Bulletin serves its readers as a forum for the presentations and discussion of important health issues including the presentation of minority or conflicting points of view, rather than by publishing only material on which a consensus has been reached. All articles published in the NHF Bulletin—including news, comments and book reviews—reflect the individual views of the authors and not necessarily official points of view adopted by the Federation.

National Health Federation Bulletin, published monthly January through December, except July-August which are combined, at 212 West Foothill Boulevard, Monrovia, California 91016, by National Health Federation, a nonprofit corporation. Fred J. Hart, Managing Editor; Raymond H. Houser, Editor. $1.50 of the annual membership dues is paid as a yearly subscription to the **National Health Federation Bulletin**. Single copies, 35 cents. Second-class postage paid at Monrovia, California 91016.

The NHF Viewpoint...

More and more cities across America and state legislatures are considering the need for laws which would ban smoking in public areas. Already Arizona, Nebraska and Oregon have passed laws concerning this type of "pollution," and the California Assembly has before it two bills authored by Assemblyman John V. Briggs (Fullerton). The U.S. Department of Commerce has decreed that all inter-state buses must provide a smoking area in the back of the buses to protect non-smokers from this health hazard and the Civil Aeronautics Board in an action last year, ordered all certified air carriers to provide no smoking areas aboard their flights.

NHF strongly supports the passage of such laws. It would not prevent smoking in one's own automobile, home, or the great outdoors. Should such a fair proposal result in less smoking, according to all authorities it would bring the additional advantage of added health benefits.

This action comes from the growing appreciation that no one has a right to pollute another's environment, especially since he may not be aware of the inconvenience or harm his thoughtless actions may impose on others.

Smoke saturates wearing apparel, sometimes taking days or weeks to dissipate.

Current practice often means that those who are especially allergic to or irritated by tobacco smoke in smoke-filled rooms must either avoid attending meetings and other events or suffer as a result.

One Southern California resident, when trapped into breathing large amounts of someone else's smoke (pollution), turns to the offender and says "would you like to chew my gum for a while?" To have to chew someone else's gum at public gatherings is wrong, and would be objected to by all. To be forced to breathe someone else's smoke is not far removed in principle. Pure food, pure air and pure water should be part of our natural birthright.

Washington Report

By CLINTON R. MILLER
NHF Legislative Advocate

Hosmer Bill Gains New Support

As of March 15, seven members of the 11-member House Subcommittee on Public Health and Environment have demonstrated their support for the Hosmer bill by either cosponsoring the bill with Representative Hosmer or by introducing a similar bill on their own. There is, of course, an obvious significance in having such a strong majority of the subcommittee members as announced supporters of the Hosmer bill.

The House Public Health Subcommittee held hearings on the Hosmer and related bills in December, but so far the subcommittee has not yet reported out a bill and thus the matter is still pending in the subcommittee. In fairness to the subcommittee, it should be mentioned that it has been deeply involved with other major bills.

The seven subcommittee members who have cosponsored the Hosmer or a related bill or who have introduced similar legislation are as follows:

David E. Satterfield (D-Pa.)
Richard Preyer (D-N.C.)
Ancher Nelson (R-Minn.)
H. John Heinz (R-Pa.)
William H. Hudnut (R-Ind.)
Peter N. Kyros (D-Ma.)
James W. Symington (D-Mo.)

As this report is being prepared, we not only have a clear majority of the subcommittee members as supporters of a Hosmer-type bill but also, we now have a total of 228 (ten more than a majority) members of the House of Representatives who have cosponsored legislation or introduced bills aimed at blocking the full implementation of FDA's restrictive dietary supplement regulations.

Representative Kyros, a subcommittee member, is one of those who more recently has introduced such legislation. On February 21, he introduced his own "Freedom of Choice" Food Supplement Bill which would prevent the Food and Drug Administration from finalizing regulations, pending for more than five years, classifying safe vitamin and mineral supplements as drugs rather than food. Kyros said his bill would "guarantee the right of the American consumer to obtain safe nutritional supplements without prescriptions and at prices which are not artificially inflated."

In introducing his bill, Representative Kyros stated that he was departing from a long-held position of "intentional and determined neutrality as a member of the Public Health Subcommittee to which the Hosmer and related bills had been referred." He said, however, that the hearings on the bills convinced

REP. PETER N. KYROS

him that "the issue here is freedom-of-choice." The FDA, he said, "has adequate authority under existing law to protect the American public from harmful substances, which, indeed, it must do." He continued by saying, "My bill would in no way weaken its power in this regard. But to prevent the American public—or to make it harder for the American public—to obtain vitamin and mineral supplements, which are neither harmful nor fraudulent in their claims, constitutes an unwarranted and unnecessary infringement on the part of the government into the everyday lives of the people."

Kyros said that he was especially concerned with the effect of the proposed FDA regulations on vitamin and mineral prices. The regulations, he explained, would prevent many vitamins from being sold in the higher potencies, thus driving the price of the lower potency formulas up as much as 300%.

"Working people, and especially our senior citizens on fixed incomes, cannot afford to pay these artificially-inflated prices. I find it somewhat hard to accept that while everyone else in the U.S. is trying to reduce prices, the FDA is moving in the opposite direction."

Compliance Dates On Vitamin Regulations Clarified

Bass and Ullman, Attorneys for the National Nutritional Foods Association responsible for the stay of effective date

In order to clarify the status of FDA's dietary supplement regulations—since there seems to be some confusion and misunderstanding regarding their effective dates—we offer the following information:

In the *Federal Register* of December 14, 1972 the Commission of Food and Drugs proposed that preparations containing in excess of 10,000 international units (IU) of vitamin A and/or 400 IU of vitamin D per dosage unit or in the label - recommended daily intake shall be dispensed on prescription.

(Continued on next page)

Sixty days were allowed for comments which could be filed by any interested party. As a result, approximately 2,500 comments and 1,000 signatures on petitions were received in response to the proposal. Some of the comments supported the proposed regulations while others opposed them.

About a month later, on January 19, 1973 to be exact, there appeared in the *Federal Register*, FDA's *tentative final* Order (popularly referred to as the dietary supplement regulations) which, when the Order becomes effective, would severely limit the number, potency and combination of vitamins and minerals allowed in dietary supplements. In general, among other things, it would classify as an *over-the-counter drug* any preparation providing more than 150% of the Recommended Daily Allowance, in the label-recommended daily intake, of any of the permitted vitamins. A period of time was allowed during which any of the participants in the hearings held earlier might file comments. Actually, the January 19th Order was the outcome of a proposed Order issued in 1966 and on which hearings were held beginning in 1968 and which continued for two years.

Finally, in the *Federal Register* of August 2, 1973, there was published FDA's *final* Order setting forth regulations affecting vitamins A and D which did not materially differ from the proposal issued on December 14, 1972. The same *Federal Register* contained also the *final* Order affecting all other vitamins as well as minerals—the finalized form of the *tentative final* Order published on January 19, 1973. Though the final Order differed in some respects from the tentative final Order of January 19th, its chief features remained identical.

The vitamins A and D Order became effective on October 1, 1973 for products labeled on or after that date. No recall was made, however, of those products manufactured and labeled prior to October 1, 1973. Consequently, there are still available in some quarters, products which contain higher potencies of vitamins A and D than are now permitted in the newly manufactured preparations, but these are products which were manufactured and labeled prior to October 1, 1973. Such products are *not* in violation and can be legally sold without a prescription as long as available.

The *final* Order setting forth regulations affecting *all* dietary supplements, was to become effective in two stages. First, it required that all products labeled after December 31, 1973 must be in compliance with the new regulations. This permitted the products labeled prior to January 1, 1974, even though not in compliance, to be sold until the supply became exhausted or until January 1, 1975 when all products entered in interstate commerce would have to be in compliance.

Shortly after the issuance of the final Orders on August 2, 1973,

however, a number of actions were initiated in federal courts in various parts of the country by opponents of the Orders seeking in one way or another to block the actual implementation of the two Orders.

In addition to filing two separate court actions, the law firm of Bass and Ullman acting on behalf of the National Nutritional Foods Association petitioned the FDA directly on August 28, 1973, seeking a stay (a delay) of the effective dates pending the outcome of the court actions. On September 25, 1973, the FDA granted the requested stay with regard to the dietary supplement Order but *not* staying the Order affecting vitamins A and D. FDA's letter to the law firm of Bass and Ullman clearly sets forth the situation as it currently prevails. The letter follows:

September 25, 1973

Robert Ullman, Esq.
Bass & Ullman
342 Madison Avenue
New York, New York 10017

RE: National Nutritional Foods Association vs. Food and Drug Administration, No. 73-2129
Our Ref.: Misc. No. 241

Dear Mr. Ullman:

This is in response to your letter of August 28, 1973, to the Commissioner of Foods and Drugs, seeking a stay of the effective dates of Parts 180 and 125, 21 CFR, pending the outcome of judicial review.

The Food and Drug Administration is agreeable to, and hereby grants, a stay of the first effective date of January 1, 1974, for the ordering of new labels. However, the Agency will not at this time grant an extension of the second effective date of January 1, 1975, for the use of new labels, because it is premature to do so. We fully expect judicial review of the regulations to be completed before the second effective date.

Sincerely yours,

Sam D. Fine
Associate Commissioner for Compliance

As stated before, the stay granted in the above letter does not affect the final Order concerning the prescription status for high dosage preparations of vitamins A and D. Consequently, that Order is currently in effect even though the Order is the subject of litigation in at least two courts.

Clearly, sole credit must be given to Bass and Ullman, acting for National Nutritional Foods Association, for taking the responsible action which led to the stay granted by FDA. No other person, firm or organization had yet submitted a similar petition to FDA prior to the September 25th date. NHF commends both Bass and Ullman and the Food and Drug Administration for their respective actions.

When FDA granted the stay on September 25, 1973, no public an-

(Continued on next page)

nouncement was made by FDA regarding the matter. It was not until October 26, 1973 that a notice of the stay was published in the *Federal Register.*

Probably this explains why John Joseph Matonis, an attorney, acting on behalf of Citizens for Truth In Nutrition, filed a petition with FDA on September 28, 1973, also seeking a stay of the effective date of the dietary supplement regulations. Inasmuch as FDA had already acceded to the request of the National Nutritional Foods Association for a stay, Mr. Matonis also was notified of the stay in a letter dated October 12, 1973.

Nixon Signs Bill Providing $2-Million For Chiropractic Research

President Nixon, on December 18, 1973, signed the Health, Education and Welfare and Labor Department appropriation bill (HR 8877) amounting to 32.9 billion for the fiscal year. Included in the bill is as much as $2 million earmarked for chiropractic research under the National Institute of Neurological Diseases and Stroke (NINDS) of The National Institutes of Health. The NINDS' total portion of the bill is $125 million.

The Conference Report (No. 93-682) of November 30, 1973 states, ". . . the departments and agencies provided for in this bill are expected to be guided by the instructions, directions and suggestions contained in the Joint Explanatory Statement of the Committee of Conference."

The above statement is significant when we note that the Senate Appropriations Committee Report, published on October 1, 1973, contained the following excerpted language:

"The Committee also believes that in view of the recent inclusion of chiropractic services under Medicare, that this would be an opportune time for an 'independent, unbiased' study of the fundamentals of the chiropractic profession. Such studies should be high among the priorities of the NINDS, and a budget of as much as $2,000,000 should be earmarked for this study and chiropractic research to be conducted by chiropractors.

". . . The committee believes there is a greater need for interaction between engineers and biomedical scientists. One such possible area of cooperative effort may relate to research regarding the chiropractic profession. The committee believes that a portion of the Congressional increase should be used for the establishment of bioengineering centers which would, among other activities, generate new and improved instruments and devices for the detection, diagnosis, and treatment of disease as well as study the fundamentals of the chiropractor (sic) profession in cooperation with the NINDS."

Nutritional Labeling:

Perhaps Helpful To Consumers But Disasterous To Some Small Processors

Nutritional labeling, first proposed by the Food and Drug Administration in January of 1973 as a program affecting only certain food products, may become mandatory for most all processed or packaged foods if legislation now pending in the Senate is enacted

Nutritional labeling, as proposed by FDA, is designed to provide the consumer with specific and meaningful information to help him determine the nutritional quality of the food he buys. The nutritional labeling regulations as promulgated last year established a standard format to be used on labels and is designed to provide the consumer with seven points of information:

1. Serving size
2. Servings per container
3. Caloric content
4. Protein content
5. Carbohydrate content
6. Fat content
7. Percentage of U.S. Recommended Daily Allowances of protein, vitamins and minerals

Under the FDA regulations, nutritional labeling is not mandatory, but only voluntary for a large percentage of foods. However, if a product is fortified by the addition of a nutrient or if a nutritional claim is made in the labeling or advertising, the label of that product must then carry the full nutritional labeling as prescribed. For example, a food which is normally marketed as "enriched" or "fortified" (such as fortified milk or enriched bread or flour) must have the nutrition label. Likewise, the regulations apply to all foods for which a nutritional claim is made including any reference to the protein content, the fat content, the presence of vitamins or minerals, etc.

In general, nutrition-oriented consumers everywhere have welcomed the idea of nutritional labeling believing that it would enable them to make wiser selections. For example, one who has found it necessary to limit his dietary fat intake has no way of knowing the fat content of the packaged or manufactured foods available to him in the supermarket. Likewise, one who is attempting to achieve a specific level of protein intake has no way of knowing how much protein is actually provided by the wide variety of processed food items available.

However, as was pointed out by Paul Keene during hearings on S. 2373, a bill which would make nutrition labeling mandatory on most all food products, a product made from shoe leather, glue and chemi-

(Continued on next page)

cals could have a very appealing nutritional label. The pending Senate bill does *not* make it mandatory that the label also list all the ingredients contained in the food product. It is likely that the average health-oriented individual would be far more interested in legislation requiring full disclosure of ingredients.

The nutrition labeling proposed by FDA and as embodied in S. 2373 imposes a severe hardship on the small food processing firms. The laboratory tests necessary to provide the required information to be listed on the label costs upwards from $200 for a single product. Then there is the problem of products containing fresh produce in which the chemical composition may vary from season to season or from field to field thus requiring perhaps new tests on each batch of the product processed. All this is time consuming, awaiting completion of tests after which labels can then be printed. In some cases, labels must be approved by the Department of Agriculture. The small food processors then, who may run relatively small batches, will be faced with staggering costs which could amount up to 10% to 20% of the overall selling price of the finished product. This is sufficient to wipe out a large portion of the smaller businesses.

The problems confronting the smaller food processors were concisely outlined by Paul Keene, president of Walnut Acres, in a statement he delivered during hearings on S. 2373 by the Senate Commerce Committee on March 6, 1974. Walnut Acres, Inc., of Penns Creek, Pennsylvania, has been engaged in the growing and preparing of a variety of food products composed of organically grown ingredients and prepared without preservatives or other chemicals of questionable safety. However, it is not just the small "health" food processors which would be hard hit by the mandatory nutrition labeling—all small food processors, with a few possible exceptions, would be equally affected.

Mr. Keene's informative statement delivered before the Senate Committee follows. Due to space limitations, his remarks have been abridged.

Statement of Paul Keene, President of Walnut Acres, Inc. Before the Senate Commerce Committee Regarding S. 2373

Gentlemen:

Walnut Acres, Incorporated, has been engaged in the growing and preparing of a special type of food for 28 years in the same location. We have been farming successfully without the use of chemical fertilizers, or chemical poisonous sprays of any sort, all these years.

We think of the soil as being vibrantly alive. We try to keep it that way by taking out less and putting back more than is the usual practice.

It chooses what it prefers, and feeds us back in its own way. We raise animals and chickens on the ground, in grass pastures in season, using no growth-stimulant chemicals of any sort. We produce eggs and meat in the old-fashioned way, with emphasis on maintaining health in the livestock rather than on producing huge quantities only.

We harvest, store and process our foods in our own plant on the farm. We have never used synthetics, artificials, or chemicals-as-such in any form in our food preparation—aside from obvious ones such as salt and baking soda. We are, in effect, an enlarged home kitchen, preparing handcrafted foods in very small batches, trying to keep taste, quality and freshness supreme.

We grind all kinds of seeds and grains into a great variety of whole, fresh flours, cereals and mixes. We have a small bakery, a small USDA-inspected cannery, a large kitchen for making small lots of fresh foods such as peanut butter, mayonnaise, dressings, confections and the like—all with special qualities. We make literally hundreds of different food products, always in small lots, with a maximum of natural taste and freshness remaining. We have always listed every ingredient of every product on the label, starting each list-of-contents with the words—CONTAINS ONLY . . .

In our plant we use no fumigants or insecticides of any sort. Just as we try to control weeds by hand-and-machine cultivation on the farm, so we control insects by cleanliness, care and refrigeration. We are subject to a substantial number of visits by state and federal inspectors, and we seem generally to come off well and happily. In short, we try to produce the types of foods we would want to eat, in as clean and orderly a plant as possible.

At present, 65 local, hard-working, rural persons are employed full-time, at a relatively unhurried pace, in producing our foods. In an unusual organizational set-up, we are all part-owners, part-managers, who rise and fall with our common fortunes. We feel a corporate responsibility to the area in which we work (Upper Appalachia), and through the tiny Walnut Acres Foundation, we hope this year to build a much-needed community building for public use.

Annual sales have been running below two millions dollars, but approaching this figure. We ship about 70% of our foods directly to consumers by parcel post, United Parcel Service, and truck freight. We sell the balance of our foods in our own retail store on the farm, and through other stores. We have about 35,000 mail-order customers, and ship to every state in the Union, and to other countries. We are one of the oldest and best-known firms doing this type of work.

(Continued on next page)

In this type of relatively inefficient food production, profits are not high. In the past three years our profits BEFORE taxes were deducted amounted to approximately $55,000.00, $144,000.00 and $32,000.00 respectively, which means a final net profit often of less than 5%. The average of all salaries, wages, and bonuses, my own included, for the year 1973, came to no more than $6,500.00 per worker. Overall, the highest was no more than four times the lowest.

We are fearful of compulsory nutritional labeling, both for ourselves, and for the many other small food processors across our land who engage in interstate commerce. As we understand the general proposals, Walnut Acres would have to have literally hundreds of laboratory tests run on its products each year. If this requirement were to be on a per-batch-basis, the number of required tests would mount into the thousands.

We are located at least fifty miles from a city of any size. Our materials would have to be shipped out for analysis, causing unbelievable complications. Consider the labeling of meat products, for example. Under present regulations it sometimes takes months to get a label change effected.

Suppose we want to make a batch of beef stew. We could not make this until we had final approval from the USDA for our label. Then we would make up our regular batch of 100 cases. Then we would send 12 cans of this to a laboratory to be tested. Suppose the carrots this time came from a different field, or were a different variety. Or suppose some of the ingredients varied enough to throw off the nutritional content in such a way as to require us to present new label information to the USDA. Then we go through the usual waiting period, while the filled cans sit around in limbo. There is an inherent element of prospective confusion in this which sits heavily upon us.

To say nothing of the loss of the hundreds of containers of products sent away for testing, of the cost of the testing itself, or the costs of extra personnel to handle the whole matter.

We cannot pin down exact costs for individual tests. We have been told that one complete nutritional test on one item could cost from $200.00 to $500.00. If this is anywhere close to being correct, with our type of work it is not difficult to conceive of a nutritional labeling program costing us at least 10% of sales, or close to $200,000.00 annually.

When we compare this figure, or even half of it, with our earnings listed earlier, it is obvious that we would be forced out of business immediately. We cannot possibly increase our prices enough to cover these added costs. We feel that many, many other small food processors would suffer the same fate.

This would be tragic, really, in a world where the dinosaur vanished

in favor of puny Man. And in a world where it is most likely true that smallness has strengths and depths and insights and controls and a humanity about it which bigness cannot duplicate. Smallness can suffer and die only to the ultimate loss and sorrow of us all.

We recognize the desire for complete nutritional information on the part of consumer groups. And the consequent interest on the part of Congress and the regulatory agencies. On the surface it looks like a good thing. But nothing is ever all one-sided. It would be a sad day if smaller, hard-trying businesses were forced to suffer because of earlier deficiencies of larger organizations.

Is the assumption that nutritional labeling guarantees better food? Potatoes will still be potatoes, meat still meat. We can foresee a tremendous spate of confusing campaigns. Will all this improve the product? We read of a mixture of shoe-leather, glue, and chemicals, which gave a dandy nutritional label copy.

We think there should be freedom of choice. Let both nutritionally labeled and non-nutritionally labeled foods be available. If smaller processors are exempted because of certain hardship, still probably 90% to 95% of all foods would be nutritionally labeled, by manufacturers whose unit-cost would increase only infinitesimally. Thus if one preferred nutritionally labeled foods, they would be available. Any consumer who wished to consider, to compute and to compare would have ample opportunity to do so. This arrangement would in no way work as a hardship on the consumer.

To protect the small producer, I'd like to propose the following. If a manufacturer produces more than $100,000.00 worth of any one food product in a year's time, that food product (along with any others in that same $100,000.00 category) would have to be nutritionally labeled by him. At that point he could probably afford all the costs involved, and still be able to compete. Lower than that perhaps he could not.

If nutritional labeling is so necessary, so desirable, so important, so universally sought after, then surely non-nutritionally labeled foods would fade away on their own, unable to compete. How can one really judge the reception and the validity of nutritional labeling if nothing other remains for comparison? Why force everyone into the same mold? There are so very many variables in foods—it is impossible to pin them all down into a pat formula. Life is simply not like that.

The small food manufacturer is willing to take his chance on this. He asks at this point only for the right to live, and not to be condemned to certain death. He is willing to guarantee that he can produce a truly superior product, and that enough people will recognize this superiority to keep him going, nutrition-labeled or no. Where else lies justice? Thank you.

Dear Senator...

During the past year, NHF has received copies of scores of letters written by members to their legislative representatives in Congress. Most of the letters have been excellent inasmuch as they have been polite, thoughtfully composed and informative. The following letter, written by a member residing in Illinois, is probably no better than dozens of others. However, it is printed here because it is timely and seems to summarize a number of pertinent points of interest to most of our members. Hopefully, also, it will serve as a reminder and an inspiration to all of our readers who have not yet written their own Senators urging their support of S. 2801.

Dear Senator Percy:

I read with interest your essay in *Parade* magazine, February 17, 1974, "You Live To Be A Hundred In Hunza."

Hunza is an area which attracted my attention many years ago, and I have maintained a continued interest in Hunza, the Hunza diet, and the life expectancy of its inhabitants. And I even find myself envying your trip somewhat; Hunza is indeed a place I would like to visit someday.

I was pleased by your comments in the article which suggested that "organic farming, whole grains, the vitamins and other life sustaining properties of locally grown fruits and vegetable, and the mineral-rich glacier water, together with the conscientious use of all Hunza's resources for the common good contribute substantially to long life."

From personal experience, from the experience of friends, from my own college research, and the research of others I've read, I wholeheartedly agree that the quality of life and death is positively influenced by organic farming, whole grains, and minerals – not only in Hunza but everywhere.

The United States is a grand nation; but somehow we've lost to a great extent some of those qualities which make Hunza so interesting and its people so healthy. American agriculture "push" their crops with artificial fertilizers; Hunzukuts farm organically. The difference is simple, as you know, . . . there is a difference in food quality when it is developed with Ammoniacal Nitrogen (a commercial fertilizer) or when food is grown from natural animal and plant decomposition containing various elements which have evolved biologically for millions of years as fertilizer.

Similarly, American businesses promote a nutritionally depleted white bread, rather than a naturally nutritious whole grain bread. Around the turn of the century, it was found that by separating the germ seed of wheat (where most nutrients were) from the rest of the edible wheat, and by bleaching this remainder of the wheat, the separated grain would not spoil as fast as whole grain. Fine for preservation, but frightening for nutrition. Today, the same process is used . . . at least 26 vitamins, minerals, and other food factors are removed from whole wheat, for instance, and then the bread is absurdly labelled "enriched with 6 vitamins!" The irony is that General Mills, one of the largest cereal distributors starts with whole grains, separates the nutritious parts from the non-nutritious parts, sells the non-nutritional parts as cereal, and then sells the nutritional parts to the vitamin industry . . . thus, in order to get the nourishment of whole grains we must first eat depleted cereals and then supplement our diet with the vitamins taken from cereals. We have to spend more money to buy complete food.

Closely related to this removal of vitamins, minerals, and related food factors from bread is the question of what state of nutritional health Americans are in. The Department of Agriculture has reported that more than half of all Americans are suffering from malnutrition—all classes, rich and poor . . . something not really very surprising in this land of fast food restaurants and TV dinners. People are, in a sense, starving on full stomachs. The Department of Agriculture recognizes that the quality of soil food is grown in determines the nutritional value of the food, since the soil is clearly where the minerals come from. Still further, the Department of Agriculture recognizes that the quality and nutritional value of food is affected by processing, packaging, and the time involved in storage and shipping (nutritional elements oxidize and decompose).

Because you apparently understand the things described (I assume this from your attitude toward the Hunzukuts), I am sure you will agree with my point in this letter . . .

Senator Percy, the Food and Drug Administration has ordered into law, as you undoubtedly know, a series of vitamin and mineral regulations which would seek to control the manufacture and sale of vitamins, as well as affecting statements and claims regarding the use of vitamins. This is a clear attack on the health food industry, and considering the state of "regular" foods, it is indeed a needed industry, and every attempt should be made to preserve it.

Under the regulations ordered by the FDA, all vitamins and minerals containing more than 150% of the Recommended Daily Allowance would be classified as drugs. This seems as absurd as classifying steak and eggs as drugs. According to the Department of Agriculture, most

(Continued on next page)

Americans are in need of these vitamins. Once classified as drugs, vitamins over the amount set by Big Brother (FDA) could easily be placed on a prescription only status. Steak and eggs on prescription?

Another point is that these regulations would outlaw combining vitamins and related food factors such as rutin, the bioflavanoids and hesperidin. These are food factors found naturally with vitamins, often called vitamin P, and act with other vitamins and minerals.

But there's more . . . the FDA regulations would make it illegal to state those findings reported by the Agriculture Department, that most Americans are malnourished, that food quality is dependent upon soil quality, and that processing, packaging, and storage and shipping time affects the quality of food.

Furthermore, the FDA has decided to move against unwarranted claims by vitamin distributors. I personally know of no claims made by any reputable vitamin distributor. What's worse is this. As drugs, vitamin labelling must contain the use of the drug, that is, a claim must be made for the vitamin-drug. However, by the same regulations such claims for the use of vitamins would be illegal. Currently, no claims are being made on vitamin labels—a trip to any drug or health food store should demonstrate this. Thus, the FDA's action seemed a definite means of trapping those who make, distribute, and take vitamins.

Senator Percy, I urge you to announce your support for Senate Bill S. 2801, and to push for its passage from your influential position. This bill, which is similar to a House of Representative bill, would prevent the FDA from classifying food factors as drugs so long as they are not harmful. This bill in no way would obstruct the FDA from guarding the public against dangerous amounts of vitamins, nor would it obstruct the FDA's authority to control misleading advertising. This would only prevent the FDA from obstructing the sale of safe nutritional food factors, which I consider to be *a right* to buy in whatever formulation or dosage I desire.

There are further implications to this action by the FDA. Space and time prevents me from going into all of them. I am sure, however, that Senator Proxmire of Wisconsin can answer any other questions of yours regarding this bill, as it was he who introduced it in the Senate. You may also want to refer to his fine address which served as an introduction to Senate Bill S. 2801.

So far, Senate (and House of Representatives) support for this bill covers the entire political spectrum, from liberals to moderates to conservatives. This seems a true indication of the need and desire for this bill—political opponents and usually differing Senators have come to agreement on this bill.

I am sure that with your knowledge of nutrition and your experiences comparing the Hunza diet to the American, you will recognize this bill is needed to permit Americans to take those vitamins *they* feel are essential to *their* diets and will announce—if you have not already announced—your support for Senate Bill S. 2801, and push for its speedy passage.

I hope you do not mind my sending carbon copies of this letter to Senators Proxmire and Stevenson; I think both would have interest.

Sincerely,

Jack Challem

TRANSCRIPT OF HEARINGS ON HOSMER BILL AVAILABLE

A complete transcript of all oral and prepared statements with exhibits presented to the House Subcommittee on Public Health and Environment during the three days of hearings (October 29, 30 and 31, 1973) on the Hosmer and related bills is now available for purchase by anyone from the Superintendent of Documents.

The transcript is contained in two volumes covering a total of 981 pages plus nine pages devoted to the table of contents.

Those desiring to procure the transcript should order from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402, enclosing $7.10 which covers the cost of both volumes. Identify the volumes as follows: Hearings before the Subcommittee on Public Health and Environment on H.R. 643 and related bills, Parts 1 and 2, Serial Nos. 93-58 and 93-59, Stock Nos. 5270-02217 and 5270-02218.

NEW PERPETUAL AND LIFE MEMBERS

Perpetual Members

Pyramid Publications
William and Thelma Peoples

Life Members

Alan K. Walser
Roy B. and Ruth M. Lawrence
Dr. Emanuel Orfas
Dell and Betty Lamm
Mr. and Mrs. Sherman McCord
Michael Halstead
Harold and Barbara Johnson
Mrs. Erma L. Raeburn
Dr. Mat Snider
Yolanda Berthold
Rachel J. Faber
Loris Cohen
Dr. J. L. Lane
Larry Kinnison, D.C.
T. A. Overholt
Dr. James A. Sheehy
Mrs. Bonita McKeever
Dr. John W. Wehinger
Frank A. Smith, D.C.
Robert G. Gantt
Dr. Donald Clark
Alton and Ann Clines

Received mid-February through mid-March

Sleep...
Do We Really Need It?

By JAY PATRICK

Eight hours of sleep per day—that's one third of a lifetime wasted! (Or is it?)

Most of us tend to begrudge the time spent in sleep.

We have learned that the great inventor-genius, Thomas A. Edison, had only a few hours of sleep nightly.

—So many a person tends to feel that if he can just get by on only a few hours of sleep, he, too, must be something of a genius.

But there is another viewpoint.

For one, we know that Edison had many naps during the day. These naps must have helped him catch up on what he had lost during the night.

In recent years scientists have gained new insight into the subject. We know that sleep is essential for the restoration of the body and of the mind, one of its essential organs.

We don't yet know just how sleep performs this regeneration, but we *do* know that it has many different phases.

"To sleep, perchance to dream . . ." (Hamlet)

Five different phases of sleep have been identified. The Stage IV, REM (Rapid Eye Movement) phase is said to be the most important. That is the stage in which we do our dreaming. And the dreaming is essential to good health, we are told. So, anyone who does not sleep well enough to get into the REM stage does not get his full share of regeneration. If he does not dream sufficiently one night, his mind will try to catch up, with a greater volume of dreams, the following night.

Sleep is an integral part of the 24-hour circadian (round and round) rhythm under which man operates. It is basically controlled by one celestial body, called the sun, with a minor assist from the moon. To this great, flaming mass (in case you have forgotten) we owe our very lives, the warmth of the earth, the rays that make the grass "to riz."

We also derive from the rotation of the earth about the sun the timing, the body rhythm that is essential to good health. —And it is during the sleep of the night that most of the repair of the body, the replacement of old cells with new cells occur. All body cells but those of the brain are replaced many times during a lifetime. The body wisely does not replace brain cells, else memory would be lost. In fact, it is held that thousands of brain cells die out in each day of life.

However, says Dr. Harold E. Day of Santa Ana, California, since the average brain has about 11-billion cells, the loss is apparently well-tolerated. A neuro-psychiatrist and orthomolecular physician, Dr. Day seeks to restore the biochemical balance of the mentally distressed patient. He accordingly uses many modalities of treatment, including vitamin and mineral therapy.

But, as part of the circadian rhythm, at 3:00 to 4:00 a.m. the adrenal glands re-start the production of some 43 different hormones. It is at this time, as the body is readjusting, that most of the babies are born and most heart attacks occur.

The adrenals are the largest storage point for ascorbic acid, which they can burn up at the rate of several grams per minute under high stress, says Dr. Fred R. Klenner. Unlike man (I remind you), most animals make vitamin C in their livers, furnishing a constant supply into their arteries. Under stress, production is speeded up as much as 400%.

Since standard vitamin C tablets are up to 90% lost from the body within a few hours after ingestion (Dr. E. Cheraskin), one wonders if the adrenals always have enough ascorbic acid when they resume their activity at about 3:00 or 4:00 a.m.

They then start, in 20-minute spurts, to furnish the powerful hormones necessary for the action of the coming day. This may be another way in which timed release vitamins can be effective, supplying the adrenals and other organs with *what* they need *when* they need it. It is a fascinating question, especially as it pertains to vitamin C, the outstanding anti-stress agent of the body.

Insomnia appears to result from a biochemical imbalance in the body such as is often brought on by excitement. This excitement may be due to the tensions of the day, to good news as well as bad, since all types of excitement (even a passionate kiss!) are forms of stress, says Dr. Hans Selye (*Stress of Life*).

Stress induces many changes in the body chemistry, as man prepares himself for some type of action. At this time depletion of various minerals such as potassium, magnesium, sodium, and of vitamins such as "C" may quickly occur.

Once the body's reactions have been triggered by the mind, the total body chemistry is the principal factor in keeping a person awake. However, he whose body is well supplied with the full assortment of the nutrients it requires is less likely to suffer from the biochemical imbalance that is insomnia.

(Continued on next page)

For instance, some 20 years ago researchers reported that patients who were taking regular supplementation of vitamin C tended to sleep better than those who were not getting the extra "C."

Of course, many other factors can be involved in insomnia, especially a lack of that wonderful relaxant, exercise.

Anyway, scientists now know that a good night's sleep, seven to eight hours, is essential for good health.

There are, indeed, many books on the subject. Perhaps the best is *Sleep* by Gay Gaer Luce and Julius Segal, (Coward-McCann).

This fascinating book stresses the importance of the ritual, the regularity of a good sleep pattern as an enhancement of the 24-hour rhythm that can help keep man's whole mechanism functioning smoothly and effectively.

Thus man thrives best when following his inner timing, his personal, individual clock that, if it has a chance, will beautifully coordinate major biochemical interactions of his complex system.

In a study of the sleep habits of more than a million men and women, as reported by Doctors Cheraskin and Ringsdorf (*Predictive Medicine—A Study In Strategy*, Pacific Press), those who lived into their 80's slept seven hours nightly. Those who slept more than seven hours or less than seven hours did not live, on the average, nearly so long.

These statistics do not necessarily mean that any given individual will necessarily shorten his life by regularly sleeping less than seven hours nightly or more than seven hours. However, there is an indication that seven hours is a more healthful period of sleep for most people.

Dr. A. Hoffer of Canada, famed biochemist and physician who pioneered the use of niacin, says that he finds that he has required only six hours of sleep nightly during the past 10 years, since he started taking niacin daily.

The doctor ventures that this may be partly because niacin (not niacinamide) imparts a negative charge to the red bood cells, it has recently been learned. This electrical charge breaks up the clumps of red cells, dispersing the cells widely throughout the blood. This rispersion opens up so much more of the cells' surface area that their ability to carry oxygen and other body nutrients is greatly increased.

Equally important, says the doctor, the single cells can then travel through the many capillaries of the brain, the heart—to all parts of the body, providing essential fuel to areas which might otherwise atrophy.

Thus, it is evident that the seven or eight hours one may spend in getting a good night's sleep are not wasted. Indeed, it is an essential aspect of living, which prolongs and improves the quality of life. Ask any dog or cat.

Fluoridation Statistical Methods

By LEE HARDY

No. 9 In A Series

For genuine statistical purposes, data are only as valuable as they are accurate. A great deal of comment has been made regarding inaccuracy of statistics reported from fluoridation studies. In order to make valid judgments possible a few of these comments must be reviewed. M. Klerer has made a comprehensive critical report of official data in an article, "The Fluoridation Experiment," published in 1956. The data cited in the next three paragraphs are from that source.

Klerer, in commenting on the report of 66.6 per cent reduction of decay among permanent teeth of six-year-olds in the Grand Rapids "study," states: "However, within the period of 1944-45 to 1951, fluctuation of the DMF (decayed, missing, filled) rate gives a somewhat different picture. Thus, if we examine the decay rate for this same group for the year 1946 (0.234 DMF) and compare this to the decay rate of 1949 (0.380 DMF) we find that ostensibly there has been an *increase* in decay of 62 per cent . . . further—with 1946 as the base year and comparing results for 1951—there appears an *increase* of over 10 per cent for this same group. Clearly the decay rate as a function of time elapsed during fluoridation is anything but 'mathematically precise.' These variations are found consistently in the data for other age groups as well. Hence, if we compare the decay rate of permanent teeth for Grand Rapids children who were five years old during the 1950 examinations (0.028 DMF) to those children who became five years old during the 1951 examination (0.040 DMF) we find an increase in decay rate of over 70 per cent." He reports varying increases also in other age groups.[1]

J. M. Dunning, of the Harvard School of Dental Medicine, in his analysis of statistical methods of reporting dental decay, comes to the conclusion that errors may be very large, ". . . easily exceeding a hundred per cent difference between samples."[2] He emphasizes that mere reduction of caries by "X per cent" is not sufficient unless DMF studies are subjected to close scrutiny as to validity of the data and statistical significance tests are applied. He cites an example of the works of some Public Health Service investigators who reported over 40 per cent benefit from topical fluoride treatment (application of fluoride to tooth surfaces). However, the only one of their reports

(Continued on next page)

which contains individual data shows that some individuals so treated developed more carious lesions on treated teeth than on untreated ones.

D. F. Radusch reports a study in which eight dentists, all with years of clinical experience, examined teeth of thirty-three college women. Each subject was given independent but consecutive examinations by each of three examiners under similar conditions. There was no time limit for the examinations. The examiner had no knowledge of previous results, but knew his findings would be checked against those of the other two, and therefore all were especially careful. There was extreme variability in the findings. In one case, after examination of the same mouth, numbers of decayed teeth reported by the three different examiners were six, eight and fourteen. The average between lowest and highest findings in all cases amounted to 4.2 carious teeth.[3]

These data suggest the uncertainty of the best of regulated experiments. When dubious methods of reporting are added, studies can become meaningless as well as misleading.

Charles Dillon, D.D.S, L.S.D., of Fort William Inverness Shire, Scotland, explains the method by which the figures used to show caries reduction in the fluoridation "studies" were devised. "In the case of a decrease the average caries rate after fluoridation is subtracted from the average caries rate before fluoridation. The difference is then expressed as a percentage of the average caries rate before fluoridation. For example, taking the experiment in Newburgh – six-year-olds, permanent teeth – before fluoridation 8.5 DMF per 100; after fluoridation 1.9 DMF per 100, average difference 6.6. Expressing this as a percentage of the figure before fluoridation, the calculation is $\frac{6.6 \times 100}{8.5} = 77.6$ per cent decrease, as stated. In the case of an increase in dental caries the lower figure is taken from the higher figure and the difference is expressed as a percentage of the figure before fluoridation. For example, Evanston, Illinois – 8-year-olds, before fluoridation 5.77 DMF; after fluoridation 6.7 DMF. Taking the lower figure from the higher figure, the average difference is 0.98 (sic)." (NOTE: Dr. Dillon's figures are taken from the monograph, "Fluoridation as a Public Health Measure," Washington, D.C., American Association for the Advancement of Sciences, issued by the Harvard School of Dental Medicine.) Dr. Dillon claims that the figures are "twice baked." It is obvious that in the Newburgh experiment, the difference between 8.5 percent and 1.9 per cent is 6.6 per cent, and that is the actual per cent of reduction. ". . . but," he says, "this calculation would not impress any local Council body. So, consistent with the adopted method, the 6.6 per cent comes out 77.6 per cent."

Dr. Dillon demonstrates the absurdity of the method by taking the fluoridationists' own figures. "Bear in mind," he says, "(that) if there are 8.5 DMF teeth per 100 before fluoridation there must remain 91.5 per cent sound teeth. After fluoridation the figures show 1.9 DMF teeth per 100, therefore there remained 98.1 per cent sound teeth, the average difference being 6.6 per cent." Using their own method of calculation shown above, $\frac{6.6 \times 100}{91.5} = 7.2$ per cent increase in sound teeth. Then he asks, "How can a decrease of 77.8 per cent in carious teeth be maintained when by their own method of calculation there was an increase in sound teeth of only 7.2 per cent?"[4]

Obviously, the method of calculating reduction of carious teeth used by the fluoridationists does not stand up under inspection. F. B. Exner, M.D., a profound observer of the fluoridation scene, writes, "If you examine a hundred children before fluoridation and find that 97 of them have decayed teeth, and after some years of fluoridation you examine them and find that now only 94 have decayed teeth, you and I would say that there has been a reduction of 97 minus 94, or three per cent reduction in decay. But we aren't as clever as the fluoridators. When they find the number of children with decayed teeth has dropped from 97 per cent to 94 per cent, they say there has been 100 per cent improvement. There were only three per cent free of decay, and now there are six per cent. That is 100 per cent increase.

"And in case you think I dreamed those figures up; they are the actual figures from *Sheboygan, Wisconsin, before fluoridation and after eight years.*"[5]

1. Klerer, M., *The Fluoridation Experiment,* Contemporary Issues, London, England, Feb.-Mar., 1956, P. 122.
2. Dunning, J. M., *J. Dent. Res.,* 29:451, cited by M. Klerer, Ref. 1, P. 129.
3. Radusch, D. F., *JADA* 28:1959, 1941; cited by M. Klerer, Ref. 1, P. 129.
4. Dillon, C., *The Significance of Fluoridation Statistics,* Dent. Dig., Aug. 1956, P. 362.
5. Exner, F. B., *Does the Government Love Your Children More Than You Do?* Natural Food and Farming, June 1968, P. 15.

BEQUESTS and GIFTS

BEQUEST IN WILL: Here is a suggested statement for the convenience of those who wish to incorporate into their wills a bequest to The National Health Federation:

"I give, devise and bequeath to The National Health Federation, a non-profit corporation, incorporated under the laws of California, with headquarters at Monrovia, California, the sum of.....($.....) *(and/or property herein described) for its discretionary use in carrying out its general aims and purposes."*

INSURANCE POLICY GIFT: For those who wish to name The National Federation as sole beneficiary, or one of the beneficiaries, in an insurance policy, it is suggested that you obtain from your insurance agent the necessary legal form or application for your signature, before witnesses if required. The following designation is suggested:

"The National Health Federation, a non-profit corporation, incorporated under the laws of California, with headquarters at Monrovia, California, the sum of.....($.....) *for its discretionary use in carrying out its general aims and purposes."*

MEMORIAL FUND: Should the donor desire to create a Memorial Fund in a will or insurance policy, state, after the sum of property described in the beneficial gift, that the fund is to be known and designated as the "....(name).... Memorial Fund."

Report to the Consumer

Bread

Can Be Really Nutritious — But Usually Isn't

By IDA HONOROF

Modern technology's chemical ingenuity and advertising guile successfully perpetuates "foodless food." The white bread that "builds strong bodies twelve ways" heads the list.

Dr. Roger J. Williams (University of Texas, Austin) in October, 1970, reported a test with laboratory rats fed the identical "enriched" bread, consumed by most Americans. After 90 days, ⅔ of the rats fed this bread were dead of malnutrition. His statement, "Today's bread has about the same nutritional values as sawdust" met with a response from the baking and milling industry that "bread is not customarily consumed alone." Dr. Williams replied, "Sawdust, when accompanied by good food, (milk, meat and cheese) can yield acceptable results, yet sawdust is known to be devoid of nutritional value."

Our modern "enriched" bread has been termed "pre-sliced absorbent cotton," "cotton fluff wrapped in a skin," "pappy, tasteless, soft aerated substance that is as appetizing as white rubber without the spring and the bounce."

The growing grain is sprayed with toxic chemicals, many of which remain within the grain. The unmilled grains are also dusted with methyl bromide to retard spoilage. Ethylene oxide, (a known mutagen) is used on stored wheats and grains, as a fumigant, to get rid of insects.

The milling process destroys most of the nutrients. The United States uses the process called "70% extraction" whereby 30% of the wheat is discarded, including most of the germ and the bran. The bran (containing the first three layers) is first removed. Then follows the aleurone (rich in protein, minerals and useful EFA — essential fatty acids). The germ also contains a high percentage of the protein, natural sugars, wheat oil and large amounts of minerals and vitamins. Nearly all the natural valuable nutrients of grains are lost. Removing the wheat germ, means the removal of vitamin E, nature's anti-coagulant, the built-in defense against the formation of thrombus or clotting.

Vital elements are found in correct ratios and balance in whole wheat but are missing in "refined, enriched" white flour. President Nixon's nutrition advisor, Dr. Jean Mayer, recently stated that "America's white bleached dough products would not be called bread in his native land." Its food value is negative. It is preferred by the food industry because it has a longer shelf life than whole wheat bread, and because insects avoid it . . . it doesn't have the food value to keep them alive.

What about the chemicals used in the industry? Chlorine dioxide (more deadly than the banned Agene) is used to preserve, bleach and age the flour. This chemical also destroys the linoleic acid (vitamin F) and methionine (an essential amino acid). Calcium stearyl - 2 - lactylate and sodium stearyl fumarate are used as conditioners. Alum, chalk and ammonium carbonate has been commonly used as whiteners or improvers. Lecithin, polyoxyethlene monostearate, stearyl tartrate or gylcerol esters are used as softeners and emulsifiers, Di-acetyltartaric acid, esters of mono and diglyerides and succinylated mono are used as staleinhibitors. Drs. S. R. Erlander and L. G. Erlander in "Die Starke" 1969, stated that, "If the baker used good whole wheat flour of high protein content, the staling process could be essentially eliminated."

Buffers and other acidifying or alkalizing agents are also permitted to adjust the pH of the bread mixture to the level desired. They are calcium sulfate, calcium lactate, calcium carbonate, dicalcium phosphate, ammonium phosphate, ammonium sulfate, ammonium chloride, lactic acid and vinegar. In addition there are mold and "rope" inhibitors, calcium propionate and phosphates, fungal amylases, bacterial proteases . . . and so the modern bakery produces thousands of loaves . . . without regard for human hazards to these hundreds of chemicals.

Dr. Robert S. Harris (M.I.T. Nutritional Biochemical Lab) fed sorbitan mono laurate (anti-staling agent) to a group of rats, most of them died within 10 days, yet these same chemicals enjoy immunity when used in our foods.

Dr. Harvey W. Wiley, the father of the Pure Food and Drug Act, had opposed the uses of bleaches in flour on the grounds that objectionable substances were being introduced for the unethical purpose of concealing inferiority, confirmed by studies and recommended the banning of bleached flour. A Federal Court accepted the evidence, and bleached flour with nitrogen peroxide was labeled as "adulterated and misbranded" and declared as unfit as human food. A battle ensued and the millers fought and appealed the decision. In 1920, when Dr. Wiley was no longer in government service, the agency decided to take no further action against bleached flour, on the ground that poisonous substances, such as flour bleaches, might be added to foods unless "a quantity was added that made injuriousness susceptible to proof in court" . . . (*University of Chicago Press—1958*).

80 chemicals may well be present in a loaf of bread without (FDA) label declarations, very few of them used in the home kitchen. The objective of the baker is to create the biggest loaf, with

(Continued on next page)

the greatest speed, least work, and long shelf life, greatest economy, loaded with improvers, dough conditioners, leaveners, yeast foods, enzymes, bacterial and mold inhibitors, synthetic fats (monoglycerides) and hydrogenated fats, silicones (used as pan glazes) and white mineral oil (as pan grease) nitric acid (a substitute for egg yolks) imparts a yellow tint, while the label need merely list the mold retarder.

Dr. Henry Schroeder (Director Trace Element Lab of Dartmouth Medical School) told a Senate Subcommittee, "In pollution and food processing, science and the public had hit on the major killers" . . . "one of the major sources is refined rice, white flour, and white sugar, all of which not only lose necessary zinc in processing, but are enriched in their cadmium content" . . . He points out, that not only have the white flour, white rice, and white sugar lost all essential nutrients in the refining, but they "also gained hazardous substances" . . . "They are not only empty calories, but they are dangerous calories, a major source of human cadmium consumption."

Most of the baking industry has been content to sell the public a phoney counterfeit product, utilizing high-pressure advertising to extoll its nutritional properties. Bread has never been considered a frivolous food, and most people depend upon it for its nutritional base. The wrapper that encases each loaf does not warn the consumer about its deficiencies.

Dr. Schroeder points out that, "enrichment" in no sense restores the grains original nutrients. Nutrition reformers merely play the game of the food companies in pretending that these lost vitamins do not matter, even though every nutritional authority asserts that they are indeed a necessity in the human diet.

In buying breads, be sure to read the labels . . . Do not touch bread with any preservatives, with bleached flour, bread that has been blatantly robbed of all nutrition and called "enriched." Buy breads from a small baker who used simple ingredients (stoned-ground, organically grown grain) and bakes daily, or better yet, start baking your own bread. This requires no special skill and you control the ingredients. Your grains can be purchased at stores that feature natural foods. This homemade bread surpasses even the "health" breads. Start using freshly ground flour (buy an inexpensive hand flour mill) starting with whole grain, and grind it as you need it, using corn, oats, rye, wheat, buckwheat, nuts, rice, sesame seeds, adding ingenuity, grated carrots, raisins, etc.

The foregoing, reproduced with permission, has been excerpted from "A Report to the Consumer," a highly informative bulletin published bi-monthly by Ida Honorof. P.O. Box 5449, Sherman Oaks, CA 91403. Subscriptions $8.00 per year.

Osteopaths Win Supreme Court Ruling In California Licensure Issue

A six-year legal battle ended on March 19, 1974 when the California Supreme Court struck down a 1962 law which prohibited the state from licensing graduates of osteopathic colleges as physicians and surgeons.

The unanimous decision in favor of eight graduates of out-of-state osteopathic schools said that the law violates the equal protection provisions of both state and federal constitutions.

A person with a doctor of osteopathy degree, whether obtained in California or not, now will be eligible for consideration for licensing as a physician and surgeon by the state Osteopathic Board of Examiners.

"There is no rational relationship between the protection of the public health and the exclusion from licensure of all medical practitioners who have received their training in an osteopathic rather than an allopathic medical college and hold D.O. rather than M.D. degrees," said the court.

The eight doctors had been admitted to practice in other states or were practicing in federal enclaves in California as members of the armed forces.

But the 1962 Osteopathic Act prevented them from getting a California physicians and surgeons license. An appeals court had ruled the law prevented either the state Board of Medical Examiners or the osteopathic board from licensing D.O.s.

The Supreme Court was told this discriminated in favor of M.D.s and had no rational basis in view of similar training and qualifications.

The court said the California attorney general established that osteopathy was a complete school of medicine and surgery covering the full range of medical science, including use of manipulation, drugs, surgery and physical therapy.

It said the medical board, which had refused to license osteopaths on grounds it had not accredited their schools, had admitted the state had the capacity to test and screen out incompetent and unqualified osteopathic applicants.

The 50-page decision was written by Justice Raymond Sullivan.

The court said there was the necessary machinery to insure that "incompetent and unqualified graduates with osteopathic training are not loosed upon the public."

Under the 1962 law, doctors of osteopathy who wanted to become doctors of medicine could do so, but new osteopathic graduates all were to become M.D.s. The only school of osteopathy in the state became a school of medicine at the University of California at Irvine.

—(AP) *Evening Tribune* (San Diego)

British Scientific Committee For the Study of Fluoridation Hazards Reports Conclusions

Prompted by the proposal to add fluorides to public water supplies in the United Kingdom, there was established, in 1963, a Scientific Committee for the Study of Fluoridation Hazards composed of physicians, dentists, veterinary surgeons and scientists to investigate the safety and the effects of fluoridation of public drinking water. Following a ten-year study which has included a careful review of the published literature relating to the matter as well as inquiries and research, the committee has released its conclusions. Following is a summary of the pertinent points included in the report:

Dental Decay

We have concluded that the evidence of experiments, both officially conducted and independent, shows that the addition of fluorides to drinking water at a concentration of 1.0 to 1.2 parts per million does not prevent dental caries, but merely delays the onset of decay for a period of approximately one to two years. Decay thereafter proceeds equally rapidly in children who have always had fluoridated water and those who have not.

The delay in the onset of dental caries is apparently due to a slight delay in the eruption of the teeth together with a slight reduction in the solubility of the tooth enamel. On the other hand, fluoride-containing enamel may be more brittle, and therefore weaker, so that fluoride-containing teeth may chip more easily and may wear down more rapidly.

Fluoridated water also causes dental fluorosis (hypoplasia, or mottling) in a considerable number of children subjected to it, and later on these teeth may become stained and unsightly. This may lead to much misery, especially in young women and older girls, and even cause them to abandon all interest in oral hygiene.

Fluoride Toxicity

We have concluded that although the systemic administration of fluoride by water fluoridation may confer some benefit to childrens' teeth as indicated above, this effect is small. The effects of fluoride are not, however, confined to the teeth, but it can also affect the remainder of the body in various ways, the total effect depending not on the fluoride content of the water, but on the total intake of fluoride from all sources. These sources may include tea, soft drinks, beer, fish, and other articles of diet containing appreciable amounts of fluoride. If drinks are made with fluoridated water, or foods are cooked or processed with fluoridated water, the intake of fluoride over that naturally contained in diet is unnecessarily increased.

The intake of fluoride from total diet was seriously underestimated when the idea of fluoridation was originally put forward. Our own and other recent researches have shown that the fluoride content of diet is much higher than was assumed. Water consumption by children was also underestimated, as also general fluid intake.

The adverse effects of fluoride ingestion are such that it is highly undesirable that pregnant women or sufferers from kidney disorders, cardiovascular, or rheumatic conditions, or thyroid disturbances, should be subjected to any increase of fluoride intake. The ultimate effects of continued low-level fluoride intake may not become manifest until after many years.

Conclusions

The lack of effective caries-preventive action by fluoride is amply demonstrated by the fact that the fluoride intake of children in the United Kingdom is generally much higher than the recommended 1.0 to 1.5 mg per day even in the absence of water fluoridation. Commencing often between 1 and 2 years of age most children drink tea, which has a very high fluoride content, and also eat more or less of other fluoride-containing foods, but this has not prevented widespread dental decay.

Dental decay is not caused by deficiency of fluoride. Its main cause is excessive consumption of carbohydrates in the form of sugar and white flour products, aggravated by eating between meals and by lack of tooth brushing.

Attention to good diet and oral hygiene gives far better caries protection than fluoridation of drinking water. The addition of certain phosphates to articles of diet may also give much more protection from tooth decay than systemic administration of fluoride, and without its risk of adverse effects.

It is also to be remembered that fluoridation of water supplies will add further serious and persistent pollution to the environment.

We have concluded that there is no case for the fluoridation of water supplies.

On behalf of the Scientific Committee for the Study of Fluoridation Hazards,

H. A. Cook, B.S., A.R.C.S., F.R.I.C.
Hon. Secretary

U.S. HOMEOPATHS TO HOST INTERNATIONAL CONGRESS OF HOMEOPATHY

The 29th International Congress of Homeopathy is scheduled to convene in Washington, D.C. at the Washington Hilton Hotel on June 1, 1974. Meetings will continue through June 5 and then will reconvene for a second phase of the Congress on June 6 in San Francisco at the California Hotel Conference Center and will continue through June 10.

Some of the most outstanding homeopathic authorities in the world will speak and representatives of the profession from many countries will be attending. Physicians as well as laymen who are interested in attending may procure full information by writing the American Foundation for Homeopathy, 910 17th Street, N.W., Washington, D.C. 20006.

Sleep Made To Order

A device, helping to get rid of insomnia, stabilize natural sleep, and make it sound has been developed in the USSR.

As distinct from sleeping drugs which, though helpful, have some harmful side effects, and unlike the electric sleep technique which has its own inconveniences, the new rhythmo-sleep method is absolutely harmless.

The new apparatus and all the necessary fittings have been developed in one of the Soviet Research Institutes of the USSR Academy of Medical Sciences.

The basic idea of the technique is to make a person go to sleep as early as possible. To make a patient sleep, it is enough to have one or two sources of influence, for instance, sound or light. A broken sound signal, like the falling of rain drops or winking light, produces fatigue, helps to relax the muscles, and as a result the patient drops off to sleep. The sound and light signals are provided by the rhythmosleep device which is not bigger than a telephone set and is still at the experimental stage. The sound is emitted by a miniature amplifier, and the light—by two small light filter cells.

The parameters of the sound and light signals change during the entire treatment, depending on the state of the patient, defined by the action potentials of the brain and the muscles, the motion of the eyes, the frequency of respiration and the pulse beat. When sleep becomes deeper, the fluctuations of action potentials grow, and their frequency falls. The muscles become slacker, their action potential activity falls, the respiration and the pulse beat becomes slower, and so does the motion of the eyes.

All the changes in the physiological indices are registered, and the volume of sound, the brightness of light signals and their frequency are regulated under reverse communications principle.

Simultaneously, depending on the patient's condition, hues are being changed from light blue and violet to dark green.

Rhythmosleep has such an effect on man that at a given moment promotes best of all his mild physiological dropping off into sleep.

The instrument can operate without reverse communications, too. In that case, its work is programmed in advance in keeping with the depth of natural sleep.

In this case, the effect of rhythmosleep throughout the whole procedure will be the mildest and most physiological only if the initial magnitudes, among them the interval frequency of sound and light signals, are correctly established. It has been found experimentally that this initial frequency does not practically change for every person. Its distinction for different people is not large, not surpassing five per cent on the average. The important thing is to establish the optimal frequency. With a small deviation therefrom (by 2-3 per cent) already, falling asleep will take a longer time. If the initial frequency is matched incorrectly, sleep may not set in at all.

The rhythmical factor of the instrument's influence on man is adapted to the vital rhythms of his organism, and its lengthy use helps to rearrange the rhythms of the organism, and to minimize them. That is why repeated daily treatments enhance the improvement of night sleep. A person suffering from insomnia can improve his night sleep by using the instrument both by day and night.

The investigations of Soviet scientists at a hospital in Kishinev (capital of Moldavia) have shown that rhythmosleep is effective also in the treatment of such diseases as hypertension, all kinds of neuroses, ulcers, and stuttering. The instrument is also useful for healthy people, it helps them to calm down, and to remove fatigue.

Now athletes are also using the device. Anatoli Alekseyev, psychoneurologist, and sports doctor of the National Research Institute of Physical Culture, uses rhythmosleep in the period between training sessions, when the athlete has to relax and rest to the maximum.

The main advantage of rhythmosleep is absolute harmlessness. One of the plants in Moscow has begun manufacturing an experimental consignment of these miniature devices, produced on the basis of what is known as integral circuits, and this helps to reduce the size of the instrument ten-fold, as compared to those put out, on the basis of conventional circuits with semiconductors.

—From Novosti Press Agency

HONEY HEALS CUTS AND BURNS

"Pure natural honey promotes the healing of burns and wounds better than any other application," says Dr. Robert Blomfield, senior health officer of the accident and emergency department of Airedale General Hospital in Yorkshire, England, who reported his findings in the Journal of the American Medical Association. Though he offers no explanation as to why it works, he says, "Honey tends to dry out wounds and steps up the body's recuperative mechanisms." The honey is applied, undiluted, directly on the burned area or wounds. He said also that honey can be used effectively to clean dirt out of cuts and abrasions. He further said that strong antiseptics often do more harm than good by causing a chemical irritation when applied to the already inflamed tissues.

Book Reviews

NATURAL FOODS – MEALS AND MENUS FOR ALL SEASONS by Agnes Toms (Pivot Original Health Books published by Keats Publishing, Inc., 212 Elm Street, New Canaan, Conn. 06840; paperback; 181 pages; $1.25)

Agnes Toms has long been recognized as one of the respected voices in the field of nutrition. Holder of a Master's Degree in Home Economics, her monthly column on food was one of the most widely read in Let's Live magazine for many years. Being an advocate of natural foods and healthful methods of food preparation, she is no stranger to those who hold a similar interest. Her book, *Eat, Drink And Be Healthy,* was published ten years ago but it is still recognized as one of the classic cookbooks in the natural health field.

Mrs. Toms believes that no canned or frozen product can quite compare with the flavor and nutrients of fresh vegetables and fruits picked and prepared at their peaks, of unprocessed, fresh killed poultry and meat, of natural dairy products. This belief probably inspired her to arrange the contents of this new book according to the season. In fact, the recipes are all grouped under months when the main ingredients of the recipes are most apt to be at their peak in freshness and availability. In addition, she has included recipes under the appropriate month for the traditional holidays. For example, you will find some perfectly fascinating recipes for your Thanksgiving feast. Also some ideas for some delectable gifts from the kitchen for Christmas. Under September, you will find dozens of ideas for healthful, nutritious sandwiches and other goodies for the school lunch box.

Truly, you will find this little volume a veritable cook's calendar of good eating, running the gamut from sandwiches to Christmas family menus and from fabulous soups to "healthful" desserts.

THE ORGANIC METHOD PRIMER, by Dr. Bargyla and Gylver Rateaver (Organics, Box 244, Pauma Valley, CA 92061, softcover, 256 pages, $6.50 postpaid)

State argicultural officials sent out a questionnaire to growers regarding tools and equipment used. They were startled to find out one organic grower listing merely "a spade, a shovel, a rake and a spading fork." Perhaps this is indicative of what organiculture is like: a simplification of life and getting down to essentials. *The Organic Method Primer* is an excellent down-to-earth explanation of the hows and whys of organics, both for the novice and the experienced grower. The book has lots of common sense, and will be treasured as a goldmine of practical information.

Chemical agriculture has been a big consumer of oil—and petroleum-based products such as fertilizers and pesticides. The petroleum shortages have prompted warnings that chemical fertilizers will be in short supply. However, some large-scale farmers will be unaffected, since they have joined a growing band of farmers and livestock men who have "kicked the chemical habit" according to the *New York Times* of January 24, 1974. Many reports are being made of the conversion from chemical to organic agriculture. The success of these commercial organic ventures on a large-scale have begun to shatter the oft-repeated myth that organiculture may be fine for the backyard gardener but impractical commercially. The Rateavers predict that the decade of the 1970's will be a time during which the sellers of agricultural chemicals must face the moment of truth, since the controversial issue is being settled in favor of organics.

The authors of *The Organic Method Primer* give an excellent brief description of the history of the organic movement, highlighting the efforts of pioneering individuals here and abroad. The present burgeoning interest in organiculture shows great vitality. In Switzerland for example, the organic cooperatives have become so successful in marketing their organic crops that the telephone directory listings in the city of Zurich, alone, takes up two and a half pages!

The Organic Method Primer describes the important differences between the chemical and organic approaches. The authors quote research, for illustration, in which university people used radioactive tracings to demonstrate the differences. Wheat was able to take up *only about 2 percent* from chemical forms of phosphorus from chemical fertilizers. But wheat grains and straw, fed to animals and applied to the soil as manure, grew a wheat crop able to absorb *nearly all* of the phosphorus. Thus, differences do exist between chemical processed fertilizer and the same elements after they have gone through living tissue. Although the individual gardening with chemicals may be unaware of these differences, plants respond differently to chemical or organic fertilizers.

The Organic Method Primer takes the reader, step - by - step, through soil building, planning, planting and cultivating, all the way to harvesting and storing the crops. Above all, the authors are practical. They offer specific help for conditionng soil that may be claylike or sandy; they tell how to aerate soil; how to recognize the characteristics of fertile soil; the importance of soil organisms and activities in the soil; the interactions of substances released by plant roots; how to detect soil deficiencies and how to overcome them; how to build a compost pile; the pros and cons of using activators; the value of cover crops; the role of weeds and when to control them; and a number of other important subjects.

(Continued on next page)

The Rateavers are eminently qualified to have written a primer on the organic method. Dr. Bargyla Rateaver has been conducting a highly popular pioneering course on the organic method offered year round at a university level in an accredited state school. The enthusiastic response of the student body has led the way to other colleges, both within the state and elsewhere, to offer similar courses for degree credits in organiculture. The tremendous interest that has been sparked can be seen in the number of circulars and pamphlets now available from many state agricultural colleges and extension services on organiculture, composting and mulching. Gylver Rateaver, Dr. Rateaver's son, is a university student with many years of field educational work, and wide experience with machinery. He has worked with numerous types of shredders and tillers, garden gadgets, equipment and tools, and has assisted in class plot work and demonstrations.

The Organic Method Primer is not only practical, but it presents an appealing philosophy. The Rateavers state that their book is for those of you "who would like to . . . wake up each morning alive to the thrilling question of what is blooming today and what you will harvest tomorrow, for those who are hungry for the scent of fragrant compost and real soil burgeoning with life, for those who want the deep satisfaction of providing food for bursting energy, for those who want to have fun with an easy way to garden." This is no empty boast. *The Organic Method Primer* demonstrates how these hopes can be realized.

— Beatrice Trum Hunter

Your Invitation To Join THE NATIONAL HEALTH FEDERATION

Name (Print).....

Street.....

City..... State..... Zip.....

☐ I wish to become a REGULAR MEMBER of the NHF and am enclosing $5.00 as yearly dues. $1.50 of which is for a subscription to the BULLETIN for the current year.

☐ New subscription. ☐ Renewal subscription.

☐ I wish to become a SUSTAINING MEMBER and am enclosing $.....(minimum fee, $25.00) as membership dues for the current year. $1.50 of which is for a subscription to the BULLETIN.

☐ I wish to become a LIFE MEMBER and will pay the sum of $.....each month until the sum of $100.00 is reached.

☐ I wish to become a PERPETUAL MEMBER ($1,000.00 payable in cash or convenient terms).

☐ Enclosed please find a donation of $.....for the Washington Office.

☐ Enclosed is a donation of $.....for the NHF Legal Defense Fund.

☐ Enclosed in a donation of $.....to be used for.....

☐ I wish to pledge $.....per month/per quarter/per year (check which applicable) in support of NHF.

Mail to: The National Health Federation, P.O. Box 688, Monrovia, California 91016

THIS IS THE NATIONAL HEALTH FEDERATION

The National Health Federation is America's largest, organized, noncommercial health consumer group. It is a nonprofit corporation founded in 1955. Its membership is comprised of men and women in all walks of life, belonging to a variety of religious faiths and political persuasions, and engaged in nearly every profession and trade.

Its members believe that health freedoms are inherently guaranteed to us as human beings, and our right to them as Americans is implied in the words, "life, liberty and the pursuit of happiness." Yet, frequently, these freedoms and rights have been and continue to be violated. Too often, as a result of the unopposed pressures from organized medicine, the chemical industries, pharmaceutical manufacturers, and others, laws and regulations have been imposed which better serve these special-interest groups than the public at large. We see and hear of new instances daily. To name a few: spiraling health-care costs, consumer exploitation by leading industries, excessive devitalization and adulteration of our foods, restriction of certain types of treatment, banning of certain health books from the mails, the harrassment of those who advocate natural methods of healing and natural foods, the poisoning of our air, water and soil through greed and carelessness, and many other health-related issues.

The NHF opposes monopoly and compulsion in things related to health where the safety and welfare of others are not concerned. NHF does not oppose nor approve any specific healing profession or their methods, but it does oppose the efforts of one group to restrict the freedom of practice of qualified members of another profession, thus attempting to create a monopoly.

The public needs a strong voice, such as the NHF provides, to speak and act in their behalf in these health-related matters. Legislators need your support to balance the pressures exerted upon them by the special interests. The National Health Federation, through a special legal and legislative staff in Washington, keeps its members apprised of all health legislation, opposes inadequate or undemocratic health legislation, while supporting or drafting bills to protect the individual's health freedom.

Will you join us in this worthy effort?

ELECTED FEDERATION OFFICERS

Charles I. Crecelius — President and Executive Head of the Federation.
Address: P.O. Box 688, Monrovia, California 91016

Kurt W. Donsbach, N.D., D.C., B.T.S., Vice President

Betty Lee Morales — Secretary

Dorothy B. Hart — Treasurer

Fred J. Hart—Chairman of the Board of Governors and Managing Editor of the **Bulletin.**
Address: P.O. Box 688, Monrovia, California 91016

V. Earl Irons — Vice Chairman of the Board of Governors

PAID FEDERATION STAFF AND THEIR FIELDS OF ACTIVITY

Clinton R. Miller — Vice President in charge of the Washington Office, which includes Legislation and Regulations.
Address: 121 2nd Street N. E., Washington, D.C. 20002
Phone: (202) 547-2547

R. A. Laurye—Business Administrator
Address: P.O. Box 688, Monrovia, California 91016. Phone: (213) 358-1155

Convention Bureau — Plans and coordinates all convention activities.
Address: P.O. Box 688, Monrovia, California 91016
Phone: (213) 358-1155

Raymond H. Houser — Editor of the **NHF Bulletin.**
Address: 5366 Auburn Drive, San Diego, California 92105

Opinions expressed in the **Bulletin** are those of the writers of the articles and are not necessarily the opinion of the National Health Federation.

NATIONAL HEALTH FEDERATION
P.O. Box 688
212 West Foothill Boulevard
MONROVIA, CALIFORNIA 91016

Entered as Second-class Matter
$5.00 Membership (includes **Bulletin** subscription)
PRICE FOR ADDITIONAL COPIES OF THIS ISSUE
35¢ each—5 for $1.00—30 for $5.00—50 for $7.50—100 for $14.00

PLACE
8¢ STAMP
HERE

Every family in America should belong to the National Health Federation to —

1. Support the principle of freedom of choice and liberty in health matters.
2. Be a part of a strong and united consumer's voice in all health matters.
3. Work for beneficial and needed health legislation and, at the same time, oppose proposals which are detrimental to the health interests of the people or which do not provide for equality of recognition of all legally established health professions.
4. Support a united effort to reduce the cost of health care.
5. Oppose insults upon our ecology which have an impact on health
6. Oppose the use of chemical food additives which have not been proved absolutely safe or which are not needed.
7. Secure fair and impartial enforcement of food and drug laws and regulations.
8. Insist that all monies raised for health research and care be used exclusively for these purposes.
9. Compel all health fund-raising organizations to disclose in an annual report, the amount of funds collected and how the funds were expended.

THESE ARE THE THINGS THE NATIONAL HEALTH FEDERATION IS ORGANIZED TO DO — JOIN ITS RANKS AND TAKE PART IN THIS VITAL EFFORT ON BEHALF OF YOURSELF AND OF ALL AMERICA.

COMING NHF CONVENTIONS

Denver — Holiday Inn — Downtown ..... **May 5**
St. Petersburg — Ramada Inn ..... **May 18**
West Palm Beach — Ramada Inn ..... **May 19**
San Diego — El Cortez Hotel ..... **May 18-19**
San Francisco — Jack Tar Hotel ..... **June 29-30**
Portland — Sheraton Motor Inn ..... **July 13-14**
Chicago — Pick Congress Hotel ..... **Sept. 6-8**

HELP SAVE OUR HEALTH FREEDOMS