

The 'Best' Diet

by Ann Gerhardt, MD

June 2013

During a long conversation about the best way to ensure healthy longevity with a patient who knows a lot about food, she asked, "So how do I know what's right?" I suggested that she already eats well and she should trust her own judgment. Lately she has lost that trust and has been guided by books extolling the virtues of juicing and raw, organic, vegan, fermented or salt-cured foods.

None of these are inherently bad, but each deserves an informed approach. We discussed the infections she can get from eating raw food, the pros and cons of fermented, salt-preserved and organic food, and the pros and cons of eschewing all animal products for a vegan approach. I asked her to take pity on her colonic bacteria, which she needs for optimal health, and feed them the fiber from fruits and vegetables, instead of juicing it away.

Given the complexity of our discussion, she wanted to know what book she should read. If you want to learn unadulterated nutrition, buy a nutrition textbook. But even a text misses some things and every day research adds to the collective knowledge, so texts are by their nature out of date as soon as they are printed.

So what about diet books? Diet books all have a motive – to make the author money, serve as a platform for proselytizing, or both. They usually focus on weight loss rather than general health, and all have a gimmick: Some of the most colorful include The Drinking Man's Diet and the Blood Type diet (we've all got one, so who's not to buy it?). Gimmicks set the book apart from the others, and a fair portion of the book is generally devoted to setting forth scientific 'proof' that the gimmick works. The body of nutrition knowledge is so vast that a diet book can't contain it all. Any factual information is necessarily distilled into a form that

fits the premise of the book, without detracting from pages devoted to food plans and recipes.

I steered her in the direction of Michael Pollan's Book, **Food Rules, An Eater's Manual**, in which he decries the over-intellectualization of food and eating. (See my review in DrG'sMediSense, March 2012). He has his own bias, as evidenced in his other books, but Food Rules leaves out his selective reading of the science (he's a journalist, not a scientist) and cuts to the core of how to eat healthfully.

Having said all that, if I haven't talked you out of a diet book, here is a review of some of the best and the worst. Every diet must have one thing: A way to limit calorie consumption long enough to lose a few pounds. One could hire people to control your food intake (a la Oprah), compulsively measure portions to constrain volume (the epitome is Weight Watchers) or eliminate certain foods or food groups (all the rest). Eat no fat, no sugar, no white food, only raw food, only food that fits your blood type, only food that Paleolithic people ate, only food you can eat while standing on your head and playing the harmonica, etc.

In my opinion (and that of a lot of dietitians) books that ensure good nutrition and enable healthful weight loss generally recommend 'prudent' diet patterns. These include a variety of whole grains, vegetables, fruits, dairy foods, vegetable oils and lean protein sources, and usually limit total calories, salt, alcohol and nutritionally 'empty' foods (for instance, Chee-tos). Unfortunately, the word "prudent" doesn't usually sell books to the American public. Catchy titles do, like the Anti-Inflammatory Diet, Flat Belly Diet, Abs Diet, and Engine 2 Diet. Each of these has some reasonable advice but inflate their scientific claims and employ unnecessary gimmicks.

The Mediterranean, Flexitarian, Mayo Clinic, Volumetrics, DASH and Weight Watchers diets fit the 'prudent' description. This is not an exclusive list – Others may shirk the gimmicks and propose rational advice also.

The Mediterranean diet isn't so much a made-up diet as it is a description of the daily dietary habits of people living along the Mediterranean coast. Though specifics change from region to region, all include fruits, vegetables, olive oil, fish and some starch or grain food. Along with physically active lives, this dietary pattern contributes to health and longevity as well as weight control.

The Mayo Clinic diet emphasizes low calorie foods with high nutrient value, such as vegetables and fruits, whole-grain carbohydrates and lean proteins (beans, fish and low-fat dairy), unsaturated fats and exercise. There is no calorie counting or food elimination, and it encourages habits that enable such a plan and discourages habits that sabotage it.

Flexitarians are "flexible vegetarians," people who are mostly vegetarians but indulge in an occasional steak or fried chicken when the urge hits. The bulk of the diet contains veggies and fruits, whole grains, dairy and protein from tofu, legumes, seeds and eggs, all with a kick of flavor from diverse spices.

Recognizing that people basically like to eat large amounts of food, the Volumetrics approach focuses on filling up on low-calorie, bulky foods. That means vegetables, fruits, non-fat milk, broth-based soups, and low-fat, low-sugar versions of food from all the other food groups. High caloric density foods like crackers, chips, cookies, candies, nuts, butter, oils and alcohol are only allowed in small quantities.

The DASH (Dietary Approaches to Stop Hypertension) diet was designed to lower blood pressure. It includes low-salt foods that are also high in potassium, calcium and magnesium, all of which combat hypertension. Low-salt versions of whole grains, vegetables, fruits, low-fat dairy, lean meat, fish, poultry, nuts, seeds and legumes fit the bill for DASH. The diet limits fats, sweets and alcohol and encourages exercise.

Weight Watchers has changed over the years, from weighing and measuring to the point system to the low fat/high fiber version. Through it all, the basic diet emphasizes the 'prudent' approach to food choices and minimizes calories from foods bereft of any nutritional value.

Then there are the other diets, with variable redeeming characteristics. Jenny Craig and Nutrisystem are generally balanced and very easy to follow, but are expensive and may have too much salt and not enough fiber, fresh vegetables and fruits. They are also hard to transition to normal food without reverting to old eating habits, since the dieter really hasn't learned how to eat on his own.

Vegetarianism done right, with a variety of food groups and protein sources is a fine dietary pattern. Without portion control and balance, though, it doesn't guarantee weight loss. For example, cookies, cakes and potato chips are vegetarian, and there's no a priori rule of vegetarianism that precludes eating them all day. Even healthy food has calories, and without portion control too many servings can pile on the pounds.

Extreme vegetarian diets, like the Ornish Diet and Esselstyn's Prevent and Reverse Heart Disease, are nutritionally sound, but go a bit overboard. They are hard to follow and may restrict fat too much for some people. It is possible to reverse heart disease with a less extreme diet (still heavy on plant foods), especially when accompanied by plenty of exercise.

The Macrobiotic Diet is an almost-vegan diet combined with spirituality and rules about eating, cooking and lifestyle. To conform to a goal of balancing yin and yang foods, it even limits some vegetables. The original Oriental version progressively restricted foods, culminating in brown rice and water as the ultimate in yin and yang. It's a hard diet to follow, and the severe restrictions make it easy to end up with protein deficiency,

Traditional ethnic diets that include plenty of vegetables, like Asian and Indian cuisine, are reasonably healthy, but may use too much salt and don't limit starches, so the overall balance might be off, depending on how they are done. In general,

though, each ethnic diet has something good about it, which might be used as part of a 'prudent' plan.

The South Beach, Zone and Atkins Diets unnecessarily restrict starches and are too hard to continue for very long. A lot of studies comparing low fat and low carbohydrate diets basically came to the conclusion that people can lose weight faster with the very low carbohydrate diets, but over time both types produce similar weight loss and improved health parameters. Some people (like diabetics) do well with carbohydrate deprivation and others get killer headaches and nausea and have switch back to more normal food.

The Raw Food diet isn't necessarily nutritionally complete and is hard to follow for very long. Just how does one eat raw bread or rice? There's also the very real concern of infection. One of the reasons we cook is to kill food's hitch-hiker organisms before they can cause infection. Even organic food must be very fresh and washed extremely carefully, because organic farmers often use manure as fertilizer.

The Paleo Diet, consisting of wild plants, fish and meats, might sound good, but foods that Paleolithic man ate might be hard to find these days. The name is a bit disingenuous, since beef, sauerkraut, and Baba Ghanoush weren't staple items for hunter gatherers of yore. Eliminating cereal grains, legumes, dairy and potatoes unnecessarily cuts out nutritious foods and can lead to vitamin and mineral deficiencies. This is really just a cute name for another low carbohydrate diet.

The Glycemic-Index diet is geared to pre-diabetics, diabetics and people who carry their weight in a spare tire around their middle. It is based on the fact that some carbohydrates are digested into simple sugars and absorbed into the body faster than others. Some don't get absorbed at all and are termed 'resistant starch.' Those turned into lots of sugar quickly are termed high-GI. One could eat only low-GI foods but not lose weight, depending on their quantity and the food eaten with them. So the 'diet' combines low-GI foods with low fat dairy and protein and limits portion sizes of everything. It's not a bad plan, just a bit complex, especially

when one considers that a food's GI can be affected by other foods in the meal.

Liquid diets, like Slim-Fast and Medifast, are easy to follow, but are severely restrictive. These semi-starvation diets cause ketosis, an elevated level of fat's breakdown products that make you lose your appetite. They are nutritionally marginal and often cause gallbladder attacks and other complications. When the diet is over, weight rebounds quickly without severe calorie restriction and excessive exercise.

Which brings us full circle to the concept of "diet." Diet is, generically speaking, what we eat, whether it makes us fat, skinny, healthy or sick. Any new diet plan only works for as long as it is followed. Extreme diets are either too hard to follow for very long or elicit food cravings that sabotage the effort. The best diet is one that limits portions to those commensurate with your ideal weight, and includes lots of vegetables and foods consistent with a 'prudent' balance.