EFFECTIVE DIETARY TREATMENT

C.P. Negri, OMD, ND

There is probably no more confusing aspect of health and healing than diet. Every year another book, another seminar and another" one size fits all" approach to diet catches the attention of the public and everyone starts eating high protein, then no protein, high carbohydrate, then low fat, then no fat...and every theory seems to make sense. Until it doesn't work. Or you read something new that seems to make more sense.

Well, we know how lousy those "one size fits all" solutions are in medicine. Why should they be any different in diet and nutrition? And when are we going to realize that those experts (You know, the guys who say the opposite thing ten years later) are just getting us to buy into what they're selling right now?

And yet every new approach to diet has its success stories. Why don't they work for everybody? Simply this: not everybody has the same exact biochemical makeup, so food is going to affect him or her differently.

Think about the Arctic Inuit people, who eat mostly whale meat and blubber. Why do these people have so little heart disease? The Scottish have a predominantly high fat diet and they have plenty of heart disease. The French, on the other hand, eat a high fat diet also but counterbalance it with fresh vegetables and lots of wine. The result? Low rates of heart disease.

Calories? The Chinese eat 20% more calories than Americans yet way 25% less on average! It isn't just what you take in, it's what you do with it. Once external activities are part of that (harpooning whales tends to burn off a lot of calories), and one's internal activities are a big part of it, too. Internal activities are the processes by which your body uses the fuel that you give it. These are determined by several different factors.

Ethnic background is one factor. What your ancestors ate for generations is there somewhere in your DNA. But this doesn't mean that you should necessarily eat like they did, any more than it means that you have the same exact body as all of your relatives. It's a factor, but not a deciding factor.

Blood type is another factor that reveals genetic differences in food processing. Different people in the same family will have different reactions to foods, even though they share the same DNA. Their blood types can predispose them to run efficiently on certain foods and not others. But lots of people share the same blood type and have different bodies and different health problems.

Genomic testing can be done today, and some naturopathic doctors are using this for dietary recommendations. One would think that it would be the last word on determining what you

should eat based on your genetic makeup. But many things happen during the course of your life and many deviations occur from your original "programming" to the extent that this high-tech and expensive test often is not the final word on the subject.

Metabolic problems and organ dysfunction is another important factor. When there are biochemical disturbances internally your food is not utilized the way it could be, no matter what your genetics may be. These can be determined by simple testing.

Another factor is food sensitivity. Intestinal allergies are quite common, and you don't have to break out in hives to have them. Often, certain foods will break down poorly or cause poor functioning internally. Food sensitivities can be detected by Electrodermal Screening (EDS) and corrected by natural means.

Finally, a really big factor is constitution. For centuries different cultures and the medical methods that sprang up within them have lectured about the different constitutional types. This knowledge has been lost in modern medicine. The different categories of metabolic types, body types, mineral types, miasmatic types, and endocrine dominance fall into three divisions.

 Are you a sympathetic nervous system-dominant person (which would make you a slow oxidizer), or a parasympathetic-dominant (fast oxidizer)? Or a mixed type?

- Are you a cold, hot, or bipolar type?
- Are you a hydrogenoid, oxygenoid, or carbo-nitrogenoid type?
- Are you a positive, negative, or bipolar miasmatic constitution?
- Is your morphology lymphatic, android, gynecoid, or thyroid dominant?
- Is your endocrine system supra-, estro-, para-, or even neuro-dominant?

Do you even know what I'm talking about? Don't worry. I have made a long study of all these factors and the more of them I evaluate in you, the more accurate is my assessment of you. If we used one or two factors we would get some useful information and some not so useful information--just like a computer search. If we use a lot of keywords, we will get what we are looking for a lot faster.

Let's say we have two people with arthritis. They are both overweight. One is always chilly, generally feels worse in the cold, has slow thought processes, has problems with his calcium metabolism, and carries most of his excess weight in his hips and lower abdomen. The other is a woman who is always hot, feels worse at low altitude and in damp weather, and carries her excess weight in her face and upper arms. Do you think these two people need to eat the same things? Do

you think their arthritis is going to respond to the same things? Will they lose weight by following the same diet?

The answer to all these questions is *no*.

On the subject of the arthritis, for example, many natural health authorities advise against certain foods for this (and other diseases). A common substance that arthritic patients are told to avoid are nightshade plants (tomatoes, potatoes, eggplant, peppers, etc.) Apparently, the naturally occurring chemicals in these plants have been known to increase inflammation in arthritic joints. However, it doesn't always do that. Some writers go so far as to state that they can *cause* arthritis. Why everyone in the Mediterranean countries, who eat these foods every day, doesn't have arthritis is beyond me! This is another "one size fits all" explanation, and just because it comes from the natural medicine camp, we shouldn't assume that it's true. Only individual testing will show whether a certain person is reacting positively or negatively to a food.

These are just examples of the parameters I use when evaluating someone's dietary needs. In addition, specific foods have been known to have predictable effects on certain organs and processes in the body. Depending on what has been found to be the primary problem problems with your health, I will suggest foods to use as "medicines" for a time, to have a corrective action on the imbalances that we find. Later, a different diet may be followed for health maintenance. But,

like all other treatments, it should be individualized to be the most effective.