The Pritikin fraud: part of the push to justify Third World depopulation

by John Grauerholz, M.D.

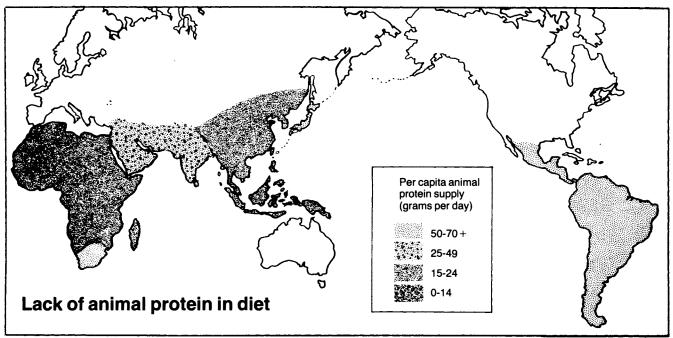
One of the major targets of the Club of Rome and Global 2000 Malthusian networks has been the world food supply in general and U.S. agriculture in particular. In combination with various actions to collapse food production and enforce population reduction by starvation, complementary operations are being run to create a psychological acceptance of reduced food supplies, especially animal protein, in the world population. The significance of this can be seen from the fact that America with an average daily consumption of over 100 grams of protein, of which 70 grams are animal protein, has an average life expectancy of 73 years, whereas Africa with an average daily consumption of 55 grams, of which less than 10 grams are of animal origin, has a life expectancy of 42 years.

The newest American chapter in the ongoing attack on the food supply has been written by Nathan Pritikin, author of *The Pritikin Program for Diet and Exercise*. This low-fat, low-protein, high-carbohydrate diet, accompanied by jogging, is promoted by a number of community-based Pritikin Better Health Programs and a "Longevity Center" in Santa Barbara, California. The distinctive features of the diet are a severe restriction of all fats and a warning against protein, especially animal protein. The basis of this attack is the supposed freedom from certain diseases in the protein-deprived areas of the Third World.

Lie No. 1: Protein causes cancer

If one examines these areas of the world, such as Africa, one finds populations which have a lower incidence of certain cancers, such as colon, breast, and prostate, and certain conditions such as atherosclerosis and hemorrhoids. However, one would expect the incidence of these diseases, which tend to occur in older individuals, to be lower in a population with an average life expectancy of 42 years than in a population with an average life expectancy of 73 years. Moreover, the assertion that cancer is rare in these countries is simply untrue.

Primary cancer of the liver, one of the most prevalent cancers in the world, is almost unknown in the United States but is common in those areas with the lowest intake of animal protein. It is associated with widespread infection of the population by hepatitis virus. This is only one of many manifestations of chronic infection in protein-deprived popula-



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Source: Fusion Energy Foundation

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tions. In addition, cancers involving the immune system, such as lymphomas and Kaposi's sarcoma, are endemic in these areas and correlate with widespread immune deficiency as a consequence of the low-protein, low-fat diet beloved of Pritikin.

Pritikin cites the usual collection of case histories. One can read similar impressive results in other books, such as those of Irwing Maxwell Stillman and Samm Sinclair Baker, and Robert C. Atkins, including reductions of cholesterol and serum lipid (fat) levels. These are high-protein, high-fat, and low-carbohydrate diets, which are diametrically opposed to the Pritikin diet. If one wishes to say that these physicians are lying or incompetent (which Pritikin does not), then one still has to deal with scientists such as the Mexican cardiologist Demetrio Sodi-Pallares, who has produced significant regression in symptoms of arteriosclerotic heart disease and reduction of serum lipids on a diet which provides over 50% of its calories as fat!

The common denominator in the Pritikin diet and in Dr. Pallares's diet is restriction of sodium and highly refined sugar. It is this, and not restriction of fat and protein, which is the most likely cause of the improved blood chemistry in Pritikin's clients. Weight reduction in the obese will lower serum lipids regardless of the diet. Likewise, moderate exercise reduces cholesterol levels, helps normalize body weight, and maintains muscle tone and fitness.

Restriction of fat, and even of protein, in obese individuals will be tolerated as long as the body's own stores can make up the deficit. In the case of protein, this means reduction of muscle mass, and, more ominously, shrinkage of immune system tissue such as the the lymph nodes and thymus. It is not uncommon for cold sores and other minor infections to flare up in people who go on severe crash diets, due to transient immune suppression.

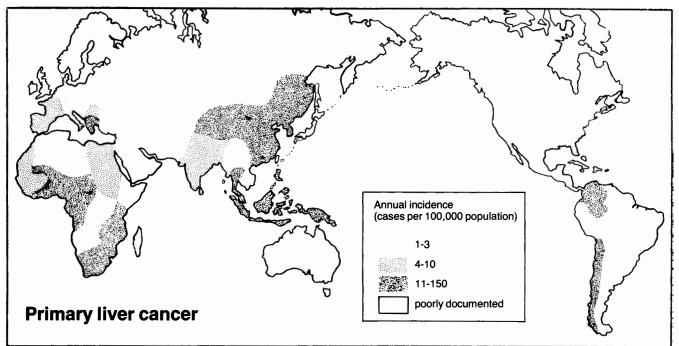
In the Third World, where whatever economy still exists is based on manual labor, the effects of protein deprivation are most blatant. The populations barely exist at an animal level of subsistence, with short life spans and hideous infant mortality rates. In the severe states of malnutrition, the immune system is so depressed that there is absence of some symptoms produced by the immune response. Health researchers for various World Bank and IMF-connected organizations have actually argued that this indicates that starvation has a beneficial effect on these people.

Pritikin recommends the same restrictions of fat and protein for growing children. If we look at populations in which severe lack of fat and animal protein are common, we see stunting of growth and decreased resistance to infectious disease. Low cholesterol intake in an infant is particularly devastating because a large component of the brain's biochemistry is cholesterol. Permanent effects on brain development can result from fat restriction in early infancy.

When this is compounded by debilitating chronic infections, the potential for anything approximating human existence is very low. To argue that such a diet is healthful is to imply that the devastating effects are the fault of some defect in the victim. This is racism, pure and simple. To idealize this sort of existence as benign and uncomplicated is the worst sort of cultural relativism.

Lie No. 2: Vegetable protein is as good as animal

Next comes the issue of animal versus vegetable protein. True, it is possible to combine a number of grains and nuts



Source: Dr. Philippe Maupas, Institut de Virologie, Tours, France.

to make a relatively complete protein which approximates the amino-acid content of meat. The problem is that not only must the elements be consumed together, but a variety of such foods must be available. This is not the case in most Third World countries, and studies on response to immunization in children show that children with a high proportion of animal protein in their diet produce better antibodies than those who consume a high proportion of vegetable protein, even though the total protein intake is the same. In addition nuts and beans, which are major sources of vegetable protein, can become heavily contaminated with aflatoxins, the most potent carcinogens known.

Pritikin contends, along with certain World Bank types, that protein deficiency is in fact just calorie deficiency, and additional caloric intake will cure the condition. But the fact is that kwashiorkor, a grave affliction in Africa, is a protein deficiency and responds to protein supplementation, especially milk powder, and does not respond to simple caloric increase of protein deficient foods such as rice or cassava.

While conceding the necessity for enough protein intake to maintain nitrogen balance, Pritikin contends that anything exceeding that is positively harmful. The problem is that the amount of protein requirement is significantly increased under certain circumstances, including the vigorous exercise he recommends. Studies have indicated selective depletion of leucine, an amino acid most easily obtainable from meat, in persons performing vigorous exercise. Leucine also plays a key role in the body's tissue immune system. This accounts for the immune suppression commonly observed in manually laboring populations of the Third World.

The cult of deprivation

Pritikin's diet, along with the general promotion of vegetarianism, "natural foods," and sundry attacks on food preservatives, is preparing the cultural conditions for acceptance of a reduction in the quality of the U.S. diet as a consequence of policies which are undercutting the U.S. meat and dairy industry and destroying grain production as well. The consequences of these policies will be more palatable to a population which has been conditioned to believe that a lower-quality diet is in fact healthier. A most effective way to do this is to create a cult which promotes deprivation as a positive value.

Guyana in 1979 banned the import of milk, supposedly in the "national interest," but actually in compliance with IMF loan conditionalities that called for cutting imports to have more cash avialable for loan repayments. Last year, the United States, along with the IMF, took the additional healthproducing step of cutting off the remainder of Guyana's food imports. It is predictable that the incidence of heart disease may decrease as the population succumbs to starvation and infectious disease. However, when one reads about the decreased incidence of arterosclerosis found at autopsy in concentration camp victims, it is useful to remember what condition they were in when the observation was made.

Currency Rates

