

Nutritionist rates fads

# Diets for the daring, the dubious, the duped

By Maury Landry/  
State-Times writer

Richard Simmons may "never say diet," but just about everyone else in America does. A potential dieter could go on a dozen different every week of the year and still have a few best sellers left over to choose from.

What's the best way to evaluate the current diets? Dr. Judith Stern, professor of nutrition at the University of California at Davis and director of the Food Intake Laboratory there, has some guidelines. She spoke last week in New Orleans at the 43rd annual meeting of the Institute of Food Technologists. Ms. Stern gave a telephone interview from Dallas, where she was to address the Texas Dietetic Association on the same topic. From there, it was on to Albuquerque, N.M., then Denver. Dieting, as those who publish best selling books on the subject know, is a hot topic.

"Avoid fads," says Ms. Stern straight away. "They don't leave you with anything when you get off them." There are three basic questions a dieter should consider before beginning a diet.

Does the information given about the diet go beyond personal observation? Ms. Stern cites as an example testimonials in advertisements for diet plans. Often, she notes, when customers mail away for diet plans or pills, at the same time they receive the products, they receive solicitations for before and after photos for which they may be paid hundreds of dollars. Keep this in mind when reading weight loss ads, says Prof. Stern, adding that a diet should be scientifically evaluated in a study using adequate controls. Few of the popular diets have been evaluated, she says.

Is the diet effective in promoting fat loss? Many diets, particularly low-carbohydrate ones, will cause a dramatic initial weight loss, notes Ms. Stern. This is mostly water weight and doesn't represent true weight loss.

Lastly, is it safe? "I go along with the FDA rulings on the low-calorie diets," says Ms. Stern. A diet that provides fewer than 800 calories per day is considered low calorie and can be dangerous. She recommends consulting a doctor. "Don't just go to your internist and ask if you're healthy," she adds. "Go to a doctor with experience in monitoring diets."

Although she has written about various diets in magazines and books, Ms. Stern has not personally evaluated them in the laboratory. For the would-be dieter she recommends Theodore Berland's "Rating the Diets," which is updated every year.

While she won't say which diet, book or plan she thinks is "best," the nutrition expert feels that some have definite drawbacks, while others are basically sound. The carbohydrate craver's diet, she says, is the product of "a very well-respected scientist who has gone beyond scientific evidence" in formulating the diet.

Many diets, she points out, rely on boredom for their effectiveness. The dieter is allowed seemingly huge amounts of a limited number of foods. After a few days he is sick of whatever it is he's allowed to eat and naturally wants to eat less of it.

An example of this is the Beverly Hills Diet, which Ms. Stern terms "a nutrition scandal." The diet calls for eating large amounts of fruits, principally pineapple, and "clearly does not provide enough protein, calcium and trace minerals," she says.

Judy Mazel, author of "The Beverly Hills Diet Book," "Calls herself a self-taught nutrition guru," says Ms. Stern, adding, "People should stay away from that." Get your information from a registered dietitian or if you're talking to a Ph.D. in nutrition, make sure it's not a

mail-order Ph.D., she cautions. Ms. Stern's favorite diet book? George Burns' "How to Live to be 100: The Ultimate Sex and Diet Book." "It makes you laugh at all these other fad diets," she says. Kidding aside, she says the "I Love

America" diet "isn't bad," although it's a little hard to follow and amounts aren't always specified.

Ms. Stern found Audrey Eaton's "F-Plan Diet" "boring. I hated her menus," she adds. Written by the editor of Britain's Slimming magazine, the diet was a best-seller in that country. F stands for fiber and while most Americans probably don't get enough food fiber in the diets, the F-Plan Diet carries fiber consumption to an extreme, she says, although she calls it "one of the more benign fad diets."

She does not altogether steer clear of very low calorie diets, such as the Cambridge Diet or the Detroit Diet. "I think that very low calorie diets have their place," she says. These diets provide fewer than 500 calories per day and will cause adverse side effects in some people. Anyone contemplating going on a low calorie diet should be monitored by a physician, she repeats.

Why are there reportedly so many diets? "Because nothing works," is Ms. Stern's quick reply. Then she adds, "And everything works." A successful dieter has to have a game plan, she says. "It's all common sense... there is no magic."

"It's helpful if you have 10 or more pounds to lose to diet in a group situation. Support is important to the success of a diet — with a good social support system, the crises of everyday life won't cause a

dieter to fall back on food for solace," says Ms. Stern.

Don't rely on appetite suppressants, she advises. A study by Dr. A. J. Plunkard of the University of Pennsylvania showed that dieters who used medication to suppress their appetites had regained all of their lost weight, sometimes more, within a year. Dieters who instead modified their eating habits fared better at keeping weight off.

Another key factor in dieting success is to "pick a weight you can reasonably maintain." There's a lot of pressure on people, especially women, to be model-thin, points out Ms. Stern. This is not necessarily healthy, particularly when carried to extremes such as anorexia.

A daily exercise routine is important, as is keeping the game plan in mind when eating in restaurants. "Did you know that a McDonald's hamburger has fewer calories than a carton of fruit yogurt?" she asks. When eating out, a dieter must keep in mind what he has eaten or will eat the rest of the day.

But she cites as an example her recent breakfast at Brennan's in New Orleans. When ordering, she asked the waiter to bring half the usual portion. When he didn't, she sent him back to the kitchen. Dieters, she concludes, have "to be assertive in a nice way."

"This is just the way to eat," she adds. "I know that if it tastes good, I'll keep eating." Studies she and her colleagues have done at the Food Intake Laboratory back this up. Their research shows, not surprisingly, what Ms. Stern terms "the Thanksgiving dinner syndrome: If food tastes good enough, people will continue to eat it after they're full." Studies on animals have produced the same results, she notes.

"The best diet is one that suits your lifestyle," she sums up, adding, "Could you imagine going on the Beverly Hills Diet in New Orleans? It'd be a crime against nature!"



## Joni Mitchell enchants crowd at Assembly Center

By Eddy Allman/  
State-Times writer

Is there anyone you know who can affect you deeply and completely whenever she's near you? Is there anyone in your life for whom you have an instant rapport, a sense that your soul has been bared simply by being in the same room with her? Is there anyone so attuned to who you are, what you want, why you need that you feel invigorated and refreshed — and, yes, relieved — because you know her?

The object of this rather mushily affectionate rhetorical train of thought is no ordinary "friend" in the base sense of the word. "She" is Joni Mitchell, a confessionally poetic song-crafter who has probably carved out the only niche worth carving in the '70s singer/songwriter school that produced some of the era's most intensely introspective entertainers.

Joni Mitchell's enchantingly mournful, humanistically bittersweet performance at the LSU Assembly Center Monday night certainly seemed to confirm her stature as one of music's most eloquent spokespersons for affairs of the heart and spirit.

It was a moving, sometimes bombastic, most often heart-felt two-and-a-half hours worth of some incredibly spirt and intensely realized mood music, which prompted memories of a bygone counter-cultural aesthetic as well as a sense of emotional timelessness which will remain forever fresh and real and whole for what it is.

And what it is — Joni Mitchell's continuing vitality as an artist — is something which will never grow old or outdated, regardless of whether or not radio programmers decide to market it to the masses.

Never mind that Joni Mitchell's voice is as pure and as evocative as we remember from her hit-making heyday. Never mind that she's incorporated snippets of pop-flavored reggae and blues into her repertoire of electric folkiness. She's certainly capable of a kind of technical assimilation which allows her to dabble in popular tastes. But she's also proven that she doesn't need any "modern" influences to justify her art. Her integrity — and the sheer power that flows from it — hasn't been bagged one bit by the changing appetites for beat and cool.

What made Joni Mitchell's performance so poignant, so personal, so relevant, was her complete lack of pretension about what she had to say. At one point in particular — at the chorus of "Help Me" — she forgot where she was in the song. She immediately stopped strumming her guitar and turned her back

### Music

on the audience, laughed along with the spontaneous chuckles from the audience and her hand-drummed and picked up the tempo again — in the middle of the last verse. The mistake was lovably human. Far from turning anyone off, it brought the performer and her audience closer together than any fine-tuned perfection ever could have. In that moment, Joni Mitchell became one of the crowd, a seriously affected ordinary buddy who goes now and then in her quest for rapport with her friends.

In this audience were preppies and old hippies, grandmothers and granddaughters, businessmen and students. It was a cross-section that also included several young children, who unaccountably sat stock-still and attentive throughout Joni Mitchell's long, sometimes whispery quiet performance. One young lady, a nine-year-old named Heather, who'd never been to any concert before, seemed curiously awestruck by a woman far removed from blathering beat-consciousness of commercial music. If this music can move pre-teens to rapturous attentiveness, it seems obvious that it can move anyone.

From beautiful ballads like "Amelia," "Edith" and "For Free" (which featured Joni Mitchell at the piano, solo) and stately, elegant rockers like "Sharon" and mellow pieces like "I Could Make a Case For You" to surprisingly bold and rollicking rockers "Wild Things Run Fast" and "You're So Square," Mitchell dished out an astonishing array of moods, textures and rhythmic variations.

Her reggae-ish influences came out fluidly and intelligently on "Solid Love" while trademark confessional — the eerie, emotive "Refuge of the Roads," for example — evoked the most passionate response from the audience.

Oddly enough, it wasn't her biggest hits — "Help Me," "Big Yellow Taxi" (solo, on guitar), "Woodstock" and "Radio" — weren't the centerpiece of the show as one might have expected. Instead, it was Mitchell's constant interaction with her audience, her little dippy-doodle variations on familiar melodies



Joni Mitchell

that seemed to energize the crowd the most. Mitchell gave her heart away like so much shared blood and connective tissue — she seemed to be saying that she'd been in all those places we've all been, perhaps more intensely or more deeply, but there just the same.

Somewhat, she touched all the right nerves without really trying. And because she didn't try to be perfect, because she let herself be frail and vulnerable, she made everyone who saw her that much stronger in the process.

Ultimately, she made everyone care. And ultimately, that's why they went to see her. It was, finally, a concert for love. And redemption.

Dr. S.K. Lapius  
**Doctor's journal**

**...Constipation**

Progress in constipation has been sluggish. While great strides have been made in diagnosis and treatment of much more complex disorders that affect relatively few of us, movement in this very common condition has been slow.

Sometimes termed a malady of modern man, it is obvious that it played primitive man as well. Anthropologists and archeologists have found evidence of knowledge and use of laxatives in almost every culture studied. It is true that the less refined diets of less "civilized" peoples are associated with less constipation, but that is not the whole story. Most of those peoples paid very little attention to their own or their children's bowel activity, permitting Nature's Remedy — establishment of a natural habit of bowel behavior — to develop.

Modern Western cultures were not so smart. Not too long ago it was generally believed here that we absorbed toxins (whatever that was) from the bowel contents and that a daily bowel movement was essential to good health. To correct this wholesome poisoning of the human race, parents created generations of bowel-conscious children by checking daily to see if they had had a bowel movement and giving them a laxative or enema if they hadn't, all the while worrying and creating worry about the horrors of "postraction" and "autointoxication." Obviously it was a self-perpetuating obsession.

Fortunately that is largely a thing of the past but it is still difficult to make an Ex-Laxative user out of someone who has a well-formed laxative habit.

Constipation is not a loose subject and I apologize for running off like this about it. There's a lot of brain new information on it and I promise to approach it with less irreverence in the next article. However, I can't resist paraphrasing what Will Rogers might have said in a tight moment: "I never met a moccil I didn't like."