

The **FELIX** Letter

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A COMMENTARY ON NUTRITION

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QUICK RELIEF

I grew up with my parents' earthy anecdotes of village and family life in Czarist Russia, which arose from a large fund of bittersweet humor and impeccable common sense. Still, I've often allowed formal learning to blur my perceptions of simple truths. For too many years, highly credentialed authorities could dazzle me into overlooking matter-of-fact solutions to overblown medical problems.

Constipation and hemorrhoids are cases in point. Half of the adult population in the United States is afflicted with one or the other, or both. The other half of society is enriched by daily opportunities to empathize with their suffering, movingly portrayed on television in living color, usually at dinnertime. For speedy relief, multinational colossi have evolved to emit lotions, potions, and nostrums across the face of the earth.

The two complaints receive reverent attention in medical texts and journals. The latest *Merck Manual of Diagnosis and Therapy* (14th ed., 1982) tells us solemnly that "... the erect position of man predisposes to hemorrhoidal disease." (Low back pain, it says, is another price we pay for getting off all fours — a strange reward, indeed, for our evolutionary progress toward an upright life!) On the other hand, a common-sensical perusal of the literature reveals that constipation and hemorrhoids are virtually unknown among primitive-living people. (Probably not too many bad backs either, but those statistics are hard to find.) The foods we eat have been determined to be key factors in western man's constipated bowel movements. Even the most conservative medical experts now extoll the addition of ample fiber and fibrous foods to our diets. Among its many benefits, including better control of cholesterol in the body, fiber provides a healthy speed-up of intestinal transit time, which may help prevent colon cancer, and permits the formation of soft, bulky feces that can be evacuated effortlessly, similar to the functioning of primitive-living people.

Position is Everything

Okay, so fiber may help us avoid constipation and other ills — but what about *hemorrhoids*? If not just the effort of straining at stool, but "the erect position of man" is at fault, what chance have we of escaping our destiny? How do the Third-World folks miraculously manage to do so? Are we to assume that they are a tad less erect than we civilized carriers of the hemorrhoidal flame? Do they, perhaps, hunch over just a bit during locomotion, to touch their knuckles to the ground? No, the bearing of even the most primitive non-western people is accepted by anthropologist et al. as unreservedly erect. A part of the real answer comes from Dr. Denis Burkitt, who says *our western toilet seats are doing us in*. Intra-abdominal pressure produced while sitting on standard-height toilet seats during defecation apparently is greater than that



produced by weight-lifting! He believes that *hiatus hernia*, a common 'civilized' disorder, is a result of daily repetitions of abnormal intra-abdominal pressure. However, he says scientists have learned that when an individual is "*squatting at stool in the traditional manner rather than sitting on a raised western type toilet seat, intra-abdominal pressures are much lower, and this may well be an additional factor* [besides high-fiber foods] *protecting Third-World communities against the development of hiatus hernia.*" (1) See *Felix Letter* #18.)

Going with the Flow

The absence of raised toilets may well prevent or ameliorate *hemorrhoids*, too, even in a species so handicapped by its erect posture. Witnesses have been stepping forward modestly to testify to this. They tell me the act of "squatting" is the only *sane* position for bowel movements — anything else forces the issue (and exacerbates hemorrhoids). Few medical authorities bother to ponder the height of modern toilet seats in relation to these disorders, but, then, the same conventional thinkers still maintain that the proper posture for a woman in labor is lying down and pushing upward against gravity! (The sassiest of modern ladies are switching to home births or to those hospitals which encourage such unseemly but effective birthing postures as squatting or getting on hands and knees — a throwback to primitive culture and to the open-bottomed "birthing stool" of colonial days.)

One of my witnesses tells me he has ALWAYS squatted, with his feet on the toilet seat. He got into the habit as a child growing up in Canada, where icy winter drafts made the seat too cold for his little tush! In middle age, he still is free of the complaints under discussion. Another reader reported that her husband was able to avoid surgery for hemorrhoids after he began using an old-fashioned chamber pot (see F.L. #23).

Cabbages & Kings

Travel abroad quickly dispels the notion that U.S.-style toilets are universal. Some years ago, in a modest hotel outside Munich, the toilet was a hole in the cement bathroom floor. My reaction at the time was a mixture of hilarity and outrage. With my new respect for the enlightened custom of squatting, I realize I should have felt only gratitude, but there's no question that the approach takes getting used to!

It is amazing, though, how far-reaching the repercussions can be of this humble postural adaptation. For one thing, it provides perspective on the immense complexities we've created with our innocent 'civilizing' improvements and how blind we can be to their consequences. We never seem to grasp that we've bollixed up a function that should be as easy as breathing but has metamorphosed instead into a cascade of disorders requiring, of course, 'medical' solutions. Toilet seats and thrones: they elevate the body, but trouble the soul! I now suspect that my father, who was the first in his family to use a raised toilet seat, because he alone emigrated to the U.S. from pre-revolutionary Russia, may have been the first as well to suffer (which he did!) from the triad of constipation, hiatal hernia, and hemorrhoids. ■

1. Denis P. Burkitt, M.D., "Dietary Fiber" in *Medical Applications of Clinical Nutrition*, Jeffrey Bland, editor (Keats Publishing, New Canaan, CT, 1983).

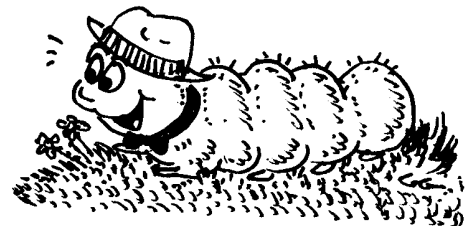


CHEATING DEATH, TAXES, & LOW BACK PAIN

Many individuals have spells of low back pain, beginning in their 30s and 40s, and I'm no exception. I go for years with no hindrance to vigorous dance and athletic movements, then find myself going through periods of repeated episodes of backaches which make everyday motions a fearsome chore. The last few years, they've been gaining on me, probably because of long hours at my desk working on the book I co-authored with Donald O. Rudin, M.D., which should be out this fall. (Rawson Assoc. of N.Y., a division of Macmillan, are the publishers. At this writing, the title tentatively has been changed to *Omega Fatty Acids: the Nutritional Break-through of the 80s*.) I knew the problem arose from muscles going into spasm — "seizing up" — but at least I didn't have a ruptured intervertebral disk. I would try to avert the spasm by using hot baths and gentle circular spinal movements, along with mental exhortations to my brain to the effect that my spine was NOT injured and there was no earthly reason for my back to undergo a huge spasm to "protect" it. None of these measures worked. My back had become "trigger-happy" — responding to small twinges and pulls as if they were real injuries, which I had once had years ago. The spasm across the lower back had the effect of "protecting" my supposedly in-

jured spine by making bending motions impossible. Of course, the convulsed muscles were sore and painful even after the spasm subsided, so that my "normal" condition became one of stiffness, soreness, and constant apprehension that a slight twist might precipitate another spasm.

I understand that this miserable cycle is depressingly familiar to millions of otherwise sturdy individuals! It has called forth a variety of medical treatments, such as physical therapy, orthopedic devices, drugs, and surgery; and also alternative remedial approaches, including biofeedback, simple massage, massage plus acupuncture, special exercises, chiropractic, etc. Over-the-counter and prescription drugs for bad backs are big business. I am happy to report that I have stumbled across a way to intercept the "seize up" command from my brain to my tormented back muscles. I don't know if it will work for another living soul, but I've averted enough back spasms for a few months to feel confident that my "system" works for me, and there's a chance it may for others.



Bobbing for Health

The motion of bending forward from the waist is the one that becomes most severely restricted when my back muscles go into spasm. *The trick, then, is to bend down and up, knees fairly straight, as soon as any hint of spasm appears. I do this 8-10 times, stop for a few minutes, then repeat the bobbing motion. At first, it may hurt if the back muscles have started to tighten up, but as I continue working against the tightening, the pain eases up.* If the oncoming spasm is stubborn, I may have to repeat the bobbing down and up for a few sets of 8-10 each. The first day that I tried it (ingenuity born of desperation), I had to bob at frequent intervals for probably as long as an hour, then with less frequent repetitions on and off during the day. Now, a few months later, confidence in my ability to avert a spasm has grown so much, I can nip one in the bud almost immediately by bobbing from the waist just 5-6 times.

My brain seems finally to have gotten the message: THE SPINE IS NOT INJURED — RELAX!!! Along with renewed confidence has come the ability once again to do routine exercises to strengthen abdominal and back muscles and promote flexibility of the spine. The “bad back” cycle is broken, I hope, for good. If readers have discovered other tricks that work for them, I’d like to hear from them so I can share this information in the future.



I should add that since I’ve been following an “omega-3 enrichment” program in my daily diet — not just recommending it to readers — the flexibility of all my joints has improved and I recover quickly from aches and sprains. Also, my arthritic tendencies seem to disappear fast. That’s what the book is all about, adapted from Dr. Rudin’s landmark work in biomedical nutrition which explains in a thoroughly satisfying way why the replenishment of the missing omega-3 fatty acids by way of omega-3 rich foods and dietary linseed and fish oils works synergistically with other nutrients to bring our health back to normal. My new trick for intercepting a back spasm might have worked in any event, but I suspect the omega regimen has played its part in my recovery.



Looking Rearward

In this issue, I’ve been writing about the need to look first for *simple* answers to health problems, which is implicit in the very old joke about the man who learned, in the nick of time, that he didn’t need to undergo brain surgery for his awful headaches: he only needed to loosen the awfully tight hatband in his fedora! Bobbing may not work for you, but it’s done miracles for me. With my new perspective, I see legions of my early ancestors, long before chairs were invented, adopting traditional, anatomically sound postures in the conduct of their daily lives: squatting on the ground, their elbows on their knees, resting from their labours a moment to chat with members of their tribe; the women employing this familiar and comfortable posture during the birth of their babies; and everyone, young and old, hiding modestly behind bushes or boulders to use the same position for their evacuation activities — free from the need for lotions, potions, and Preparation H!! In a similar vein, at a later point in history, I see my male ancestors performing their daily prayer rituals, vigorously bobbing up and down in the habitual mode while they offer their thanks to the Supreme Being for the blessing of food, shelter, wisdom, and above all, health . . . which somehow happens to entail a singular freedom from lower back pain! ■

IMMUNE COMPLEXES

Circulating immune complexes are fascinating submicroscopic critters, currently inspiring a rush of research activity that should go a long way towards clearing up some poorly understood areas of human malfunction. They are also called “antigen-antibody complexes,” and are formed when our immune systems makes antibodies to fight invaders, which may be anything the body considers foreign, including bacteria, viruses, dust, pollens, toxins, or even incompletely digested food particles that have gotten into the bloodstream.

The marvelous defense system of the body is in a very dynamic state. Normally, immune complexes (IC are continually being formed, circulated in the bloodstream, occasionally deposited in tissues, and eventually catabolized and cleared from the body. *Trouble arises when IC get haplessly stuck in tissues.* This can take place if the defense mechanisms become saturated by high levels of circulating IC, or when they are unable to handle (i.e., remove and catabolize) even normal numbers of IC because of some innate weakness.

When this happens, there is an outpouring of reactive substances which can irritate and harm the tissues. The concept of injury caused by IC was somewhat theoretical, until the new tools of the electron microscope and immunofluorescence, a special staining technique, made it quite real. The IC have been captured in the act of invading and disrupting human tissues. For example, the IC observed in a well-defined “lumpy-bumpy” pattern in renal biopsies are considered to be characteristic of a particular kind of kidney disorder. The IC have been found lodged also in the skin, blood vessel walls, the synovial membranes of the joints, and the brain! Patients with the disease systemic lupus erythematosus (SLE) may develop a schizophrenic-like mental condition as the illness worsens. In SLE patients with this disorder who have died, stark invasion of brain membranes by IC are seen in autopsied tissues.

Hidden Reactions to Common Sensitivities

Immunofluorescent examinations are usually reserved for serious illnesses such as SLE and rheumatoid arthritis, *but scientists have reason to believe that the phenomenon of immune-complex deposition in tissues may be far more com-*

monplace than first suspected. Many persons may have "hidden" allergies to certain foods. They don't get a rash or upset stomach from eating them, but the effects may show up days later in a variety of symptoms. *Individuals with hidden food sensitivities may have a "leaky gut," one with abnormal permeability, which permits unusually large amounts of incompletely digested food particles to pass through the intestinal mucosa into the bloodstream prematurely,* that is, before they are broken down completely into amino acids, glucose, etc. Young children are believed to be especially vulnerable. IgG (immunoglobulin G) antibodies link up with food molecules that sneak into the bloodstream, to form immune complexes (IC) that can be recognized and scavenged by phagocytic defenders. Normally, these antigen-antibody complexes are cleared rapidly from the system. In persons prone to allergies, however, levels of these IC in the blood are well above what they should be.

One result is that the body's clearing mechanisms can be overwhelmed. *Circulating IC may become lodged in various tissues. When they do, they provoke inflammation, swelling, and damage.* Far-seeing physicians believe that the unleashing of IC reactions, prompted by undetected food sensitivities, can show up in such diverse ways as arthritis, sore muscles, eczema, asthma, migraine ... even abnormal mental states, should the IC be doing their mischief in the brain. This concept is NOT popular with conservative medical institutions (the Arthritis Foundation states flatly in its literature: "There is NO special diet for arthritis. No specific food has anything to do with causing it. And no specific diet will cure it"), but this hypothesis holds out a lot of promise for the rest of us!

Repairing the System

While overexposure to certain foods and environmental contaminants can overpower the body's immune defenses, it's also true that, for 75 years, the American diet has badly short-changed most of us of our fair share of omega-3 fatty acids *which, in itself, can become the prime factor behind a weakened immune system.* The approach to healing should be a two-pronged one: use every means to identify and cut down on foods and toxins

which throw the immune system out of whack. At the same time, rebuild it with judicious supplements and traditional, sound foods, especially those enriched with good amounts of omega-3's (linseed oil, flax seeds, soy beans, non-hydrogenated soy oil, walnuts, walnut oil, fatty fish and fish oils), avoiding hydrogenated and partially hydrogenated oils and fats, such as margarine, vegetable shortening, and foods containing them. (See F.L. 16, 19, 20, 21, 24, and 26.) An immune system in tiptop order is a miracle of nature and an ally well worth cultivating. ■



GOOD & EASY FOODS

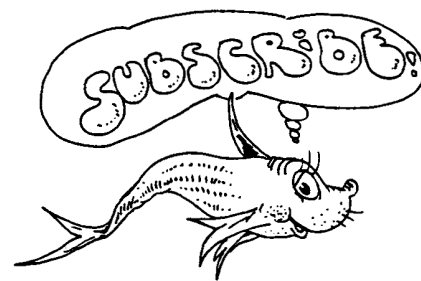
New tables on the omega-3 fatty acid content of foods bring to light an old "healthfood" friend, *chia seeds*. They were important in early Aztec culture and are still valued in the Mexican diet. The tables now reveal them to be very rich in alpha-linolenic acid, the "essential" omega-3. The tiny black seeds are available at healthfood stores and can be eaten raw, sprinkled into salads or dry cereals, or added to hot cereals, various grains, and vegetable dishes without changing the flavors. They are crunchy when raw, but quickly soak up liquid to become soft and slippery, very much like flax seeds.

Flax seeds, by the way, because of their phenomenally high content of alpha-linolenic acid (ALA) — they are the source of linseed oil, of course — are an easy way to augment dietary omega-3 levels. Like all seeds, they are an intact food, replete with fatty acids, minerals, vitamins, and fiber. In normal health, omega-3 fatty acids should comprise about 2% of our total caloric intake; e.g., 40 calories if the

daily total is 2000. This represents 4.4 grams of ALA (at nine calories per gram), the amount in two heaping tablespoons of flax seeds. However, flax seeds are a demulcent with slightly laxative effects, and I would suggest a moderate approach to start with, say, one or two teaspoons a day to provide useful amounts of ALA without any backlash.

Another pleasant surprise gleaned from the new food tables is that *oat germ* is twice as rich in ALA as wheat germ, a respectable source in itself. Rolled oats or steelcut oats, which contain the germ, are good sources as well of vitamin E, because the vitamin needs to be interlaced with the polyunsaturated fats in seeds, nuts, and grains (and in our own tissues also) as part of the natural scheme to protect the fatty acids from oxidative rancidity. The nutrients in this humble cereal, including good quality protein, have sustained people for centuries and have the additional benefit of being non-allergenic in most individuals. On cool mornings, I love nothing more than a steaming bowl of oatmeal, sprinkled with raisins or chopped dates, and laced with a teaspoon or two of flax seeds. We are not just talking 'delicious' — we are talking good nutrition, balanced omega-3/omega-6 fatty acids, and, to top it off, excellent cholesterol-lowering benefits from the oat bran. Simple foods have a logic all their own. ■

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