

Clinical Nutrition (-Foods vs. Drugs-)

By ROYAL LEE

The literature in English on clinical nutrition is very limited, both in volume and quality. Probably the conservatism of official medical opinion has served to discourage publication of new ideas, further, there is a well established program in organized medicine to block progress in the dissemination of facts that relate to health building foods or therapeutic use of natural foods, vitamin and mineral supplements. This pernicious and corrupt misuse of the facilities of medical education has been so effective in creating the idea that nutritional therapy is futile and leans toward quackery, that we feel it imperative to clear the slate on this matter by offering in a special booklet the proof of this state of affairs. ("Why Organized Medicine Has Been Fighting Vitamins." Available on request from the writer, Box 267, Elm Grove, Wis.)

The intent and purpose of this organization to steer interest away from nutritional deficiency as a cause of disease is shown by frequent periodic news releases similar to the one published through Associated Press just as this is being written (Nov. 6, 1948) "Doctor Warns of Cold Remedies . . . As for vitamins 'only one tenth of one per cent of the people who take them without medical advice get any good from them. Most people get enough of the vitamins in their food.'"

(Comment by Dr. Austin Smith, Director of the division of therapy and research of the American Medical Association.)

This is obviously a misstatement, as everyone knows who has had a kindergarten grounding in vitamin knowledge. Just compare it with the comment of Dr. Thomas Parran, Surgeon-General of the U. S. Public Health Service, who at the Hot Springs United Nations Food Conference, expressed the opinion that improved nutrition would add ten years to the "Virile life span of the average human being."

Official editorial comment of organized medicine takes pains to say the opposite "All substances required by normal adult human beings can be supplied under ordinary conditions by a balanced diet," and "Foods common to the American dietary properly selected will contribute everything that foods can give to the maintenance of good health" (2), and a well known medical writer Dr. Clendenning tells us "there is no general deficiency—the public is getting its vitamins" (3).

This trend began many years ago, when the definition of a drug became involved in the theory of specific effects as opposed to empirical therapeutics, in the effort to make drug therapy "scientific."

A discussion of any subject may best begin by a definition of terms. For a definition of Therapeutics let us quote Potter: "Therapeutics comprises all the science and art of healing, and includes the use of medicines and all other agents and measures which are known to alleviate or cure disease. The operations of Nature herself are properly embraced in the general term Therapeutics, which may be subdivided as follows:

"Natural Therapeutics, includes the operations of the healing power of Nature,—those modes and processes of healing which occur independently of art and tend to spontaneous decline and cure of disease. There is no scientific dogma better established than this, that the living organism is in itself adequate to the cure of all its curable disorders. . . . This part of the subject is

taught only casually in the schools, but it deserves a special chair and more systematic treatment than it receives.

"Applied Therapeutics embraces the application by Art of agents foreign to the living organism, for the purpose of aiding Nature to restore the body to a healthy condition.

"Empirical Therapeutics is a term applied to the use of . . . therapeutic agents for the sole reason that they have been tried previously with successful results in cases apparently identical with the one under treatment . . . It was necessarily the original method in therapeutics, has conferred many rich gifts upon medical science, and has been advocated by many able physicians . . .

(Author's note: We might interpose here the comment that Potter in this definition did not differentiate between Natural therapeutic agents that are common to the living organism, and agents foreign to the organism, to which he confined Applied Therapeutics; apparently Empirical Therapeutics may include both types of agent.)

"Rational Therapeutics means the use of remedies based on the knowledge of the pathological conditions present in the subject and the physiological action of the agent employed . . . The illustrious Albrecht von Haller, the father of Physiology and the author of the doctrine of Irritability, was the real originator of modern physiological therapeutics. In the preface to his Swiss Pharmacopeia (circa A. D. 1755), occur the following remarkable directions,—the first recorded of their kind:

"In the first place the remedy is to be tried on the healthy body, without any foreign substance mixed with it; having been examined as to its odor and taste, a small dose is to be taken, and the attention directed to all effects which thereupon occur; such as upon the pulse, the temperature, the respiration, the excretions. Having thereby adduced their obvious phenomena in health, you may pass on to experiment upon the sick body."

" . . . Medical colleges have recognized physiological (?) drug experimentation as a part of their regular curricula: laboratories are fitted up in many of the schools with costly instruments of precision, for the more exact prosecution of this study . . . The medical press of every civilized country is filled with the results of these labors, and no medical student is permitted to pass the graduating ordeal until he has mastered the essential characteristics of the physiological (?) action of the important medicaments so far established . . . What has hitherto been the conviction of but a few, is daily growing into a fixed canon of professional belief, . . . that all real advance towards the establishment of therapeutics as a science must be made upon the lines laid down by Haller, namely drug-proving upon the healthy human organism."

We have quoted Potter at length to illustrate the way in which modern medical science was led into a blind alley from which it has not as yet been able to extricate itself.

Note our question marks after each use of the word "physiological." How could a "foreign agent"

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be accepted without question as a physiological influence?

And how could a nutritional deficiency or a vitamin ever be discovered by men experimenting with "agents foreign to the organism" tried on "the healthy body?"

And since a drug must be an agent having a demonstrable effect on "the healthy human organism," all nutritional factors—vitamins, enzymes, minerals, proteins, amino acids,—were excluded from the drug category. They were, in fact, rendered absolutely invisible to the investigator conditioned by this viewpoint. Only drugs can remain in his view.

Only the discredited adherents of Empirical Therapeutics would be competent to detect a natural nutritional therapeutic agent. These in late years were represented by the Homeopathic School, which has been practically eliminated through the passing of the control of medical education into the hands of its enemies.

Theoretically, the rationalists were right. But if we are still too ignorant to understand the human machine, is it not ridiculous to turn over to those who possess only THEORIES, the exclusive privilege of experimenting upon the machine?

And is it not still more ridiculous for those experimenters to confine their activities in principle to tests of agents "foreign to the organism," really all known poisonous substances, and to turn their backs and close their minds to suggestions of possible merit in nutritional factors?

It will at once become evident that no nutritional substance will ever become identified for its value in treating deficiency disease by this method of investigation, simply because it can have no effect whatever upon the healthy body.

Forty years ago the materia medica literature of this country began to adopt this principle to the exclusion of empirically determined facts, and all food products and concentrates became "quackery."

Cod liver oil was condemned as being far less useful than butter, linseed oil with its vitamin F was thrown out to admit cotton seed oil (as "sweet oil") in its place in prescriptions, rye and buckwheat with their reputation for curing capillary disease, such as erysipelas were dropped, scurvy grass was forgotten (once a specific among mariners as a cure for scurvy), barley water with its wonderful vitamin B pattern that had such a reputation for babies and invalids was immediately ignored by the teachers and textbook writers, and such mineral tonics as the phosphates and manganese were relegated to the patent medicine trade (cf. Horsford's Acid Phosphate and Gude's Pepto-Mangan) where they would be sniped at as "unorthodox" and "unscientific."

The drug companies of course had to fall in line and eliminate anything in their catalogs that did not conform to "scientific" thought. Eli Lilly had a highly effective syphilis remedy, a botanical product that no doubt owed its effectiveness to vitamin C content, the formula of which they had actually and in fact "obtained from the Indians," known as "Succus Alterans" in their 1898 drug list. Cheaper synthetic arsenicals soon pushed this product into the background.

Today we use sulfa drugs, antipyrin and aminopyrine, not knowing that they probably act wholly by mobilizing into the blood stream the tissue reserves of vitamin C where the vitamin can promote phagocytic action and thereby cure the disease, at the same time leaving the patient with an "overdrawn bank account" of the essential vitamin which may be more serious than the original infection.

The Journal of the American Medical Association printed not so long ago (4) a full page condemnation of Upjohn's "Citrocarbonate" as a fraud because it claimed nutritional value for its mineral content, which happens to be ideal to replace the blood serum salts deleted by kidney and sweat gland activity. These actions officially closed the doors of orthodox medicine to nutritional therapy.

When Jacques Cartier, exploring the St. Lawrence Valley, followed the advice of the Indians in treating the scurvy of his men with pine needle tea, 400 years ago, he was practicing "empirical" medicine.

Fluid extract of common thornapple, known to be one of the best sources of Vitamin C was once a highly respected remedy. Ellingwood, (5) states that this product was a "near specific" in cardiac disease including "angina pectoris, valvular deficiency, endo- myo- and pericarditis, tachycardia, rheumatic heart, cardiac neuralgias, palpitation, vertigo, apoplexy, dropsy and functional derangements." The value of thornapple extract in angina pectoris is confirmed by Dr. W. N. Macartney (6). Now that we know that the Vitamin C complex deficiency reduces the oxygen-carrying capacity of the red cell so the heart is called upon to do much less work if given more of this food factor, we can understand why thornapple extract can be good in so many affections of the heart. Further, the "rheumatic heart" is today being suspected to be purely a result of Vitamin C complex deficiency, the Vitamin P of the C complex being found a valuable remedy (7), and the only known physiological treatment.

It is such a definition of "drug" (something used to treat disease which "is FOREIGN to the body, and with A SPECIFIC ACTION ON HEALTHY SUBJECTS") that has caused the establishment of the drugless healing professions, the osteopaths, naturopaths, etc. These are practitioners who felt that disease usually was a departure from nature's normal state, and that health would be restored if the offending conditions were corrected, and that the administration of drugs was no rational procedure if the objective were the removal of causes.

It is obvious that any substance that has any effect on a healthy subject must be foreign to the body, unless used in other than normal amounts, in which case its use would be that of a drug. For instance, common salt is an emetic if used in drug dosages, but is a food if used in nutritional dosage.

Unquestionably, here is the dividing line between the practice of medicine, and the practice of drugless therapy.

Nutritional factors can only become drugs by their use in such amounts as to produce effects other than nutritional effects.

Cushny, in his textbook of Pharmacology (3) agrees with this. He says "Pharmacology is the study of the changes induced in living organisms by the administration in a state of minute division of such unorganized substances as do not act merely as foods . . . These substances are known as 'DRUGS.'"

He adds "It is quite impossible to distinguish between drugs and poisons. Almost all remedies given in excess cause dangerous or fatal symptoms . . ." (It is certainly possible to distinguish between foods and poisons.)

Of late, there has been an attempt on the part of many law administrative bodies to so define foods as to put them into the drug category in a legal sense, so as to bring into the realms of medical practice, the drugless practice of food therapy. This permits the prosecution of the drugless practitioner on a charge of "practicing medicine."

As a matter of fact, the ability to select such foods as will prevent deficiency disease or starvation is incumbent upon every living being. There should be no interference with any sources of either foodstuffs or information. The only reasonable laws are already in effect, those that punish fraud. And the biggest fraud in connection with foods is going unpunished—the sale of devitalized cereals that in all probability causes the United States to lead the world in deaths from heart disease, and aggravates every degenerative disease.

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