

Chapter 1

Health Care - The Nation's Vital Problem

It has been said that a person's set of values determines his outlook on life. If this is true, then something has gone drastically wrong with the average American's approach to life.

At two o'clock in the morning my fellow passenger on a United Airlines 747 jetliner called this to my attention. Apparently agitated, he tugged at my shirtsleeve and pointed to a New York Times article which called health care the largest industry in the United States.

He thrust the paper in my hands. "Read it, and see how they're playing with our health. If only half of that money were spent on improving living conditions in this country, we wouldn't have so many ills that need curing. And we'd be in much better shape too!"

His hasty appraisal was well taken, for the article which had so annoyed him dealt with congressional proposals to create a system of national health insurance. This proposal is politically popular because of the vast sums of money involved in curing the nation's health problems.

The Social Security Administration estimates that in the twelve months between July 1974 and July 1975, over 100 billion dollars will be spent to pay for doctors, hospitals, medication, nurses, patient rehabilitation, and similar programs - just to keep us alive. In employment, too, caring for the nation's health has become one of the gigantic conglomerates of America. New York City, for example, has in excess of 250,000 people on its health-industry payroll, and nationwide it has now become the second largest "industry," carrying hundreds of thousands of full-time employees.

Patients' medical bills alone totaled 70 billion dollars in 1973. This encouraged Dr. Briggs, head of the Nutritional Sciences Department of the University of California, to study the matter more closely. He estimates that at least 30 to 39 billion dollars of this amount results from our perverted eating and drinking habits.

In a recent interview, Dr. Briggs¹ elaborated by listing in detail the culprits in the American diet. Basing his findings on thirty years in nutrition research, he concluded that this bill is created by preventable illnesses that fall in one of five specific categories.

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Dental problems, he says, are responsible for between two and three billion dollars per year. Heart attacks, strokes, hypertension, and other cardiovascular problems produce another 4 billion dollars in bills. He says that 3 to 5 billion dollars are spent to fight obesity and weight-related problems, while 5 to 9 billions pay the bills resulting from other nutritional deficiencies. Finally, there is an amount of somewhere between 10 and 15 billion dollars “donated” by the American public to help cure them of their alcohol-related health problems.

Nutritionists and many politicians know these things, but aside from working with the meager funds available and noting that these problems are still increasing steadily, there is little else they can do.

Medical research scientists have listed many causes for this increase: the ever-expanding world population (7 billion by the year 2000), runaway inflation, and wrong eating and living habits.

Is inflation responsible for poor health?

It certainly seems that way. The economic convulsions and agricultural calamities that have accompanied it have pushed food prices so abnormally high that some American nutritionists believe that many of our present health woes are a direct result of inflation.

Problems caused by inflation include:

1. Mental retardation in children produced by protein deficiency.
2. Anemia, especially among pregnant women, due to a lowered iron intake.
3. Teeth and bone problems, the result of diets deficient in essential nutrients.
4. Bleeding gums, caused by a lack of vitamin B.
5. Blindness and skin problems due to inadequate amounts of vitamins, especially vitamin A.
6. Obesity, caused by inexpensive foods high in refined carbohydrates.

Comments Dr. Joseph Powell, head of the economics unit at the Institute for Research on Poverty at the University of Wisconsin:

“The frightening thing is that millions of Americans aren’t getting enough nutrition. Already the middle class is eating what the poor used to eat, and the rich are eating what the middle class once ate. Everyone’s diet is getting worse, and that means everyone’s health gets worse too.”

Kate Burney, nutritionist-dietitian at the Community Nutrition Institute in Washington, DC, agrees: “Fast rising prices of staple foods

mean less protein in the diet, and that brings on mental deficiencies in young children.”

However, her main burden is for the elderly: “They [the elderly] are really suffering. Their chronic ailments are being intensified because they can’t afford vital foods such as fresh fruit; and since they have lowered resistance to complications, even simple diseases become serious.”

Without listing all the evidence, we may safely conclude that health depends upon proper food and nutrition. The problem of proper nutrition has in recent years become one of major international interest, since it is known that some 300 million children around the globe suffer from one or more of the effects of malnutrition. In most cases, the average person gets interested - and then only slightly - in the subject of nutrition when the monthly budget nears exhaustion and careful shopping is mandatory to make it until the end of the month. Real malnutrition goes much deeper than this. There are several forms of malnutrition that concern us. When it comes to keeping the body alive and functioning, under nutrition is no more dangerous than over nutrition, although the latter is quite often ignored. The aging and the poor are plagued at times by malnutrition (the lack or the excess of one of more nutrients regarded as essential for proper functioning of the body), but under nutrition is more publicized, for two thirds of the 300 million children affected suffer from it. Reports indicate that malnutrition in early life is directly or indirectly responsible for more deaths among children than from all other causes combined.

Dr. E. Vincent Askey, senior staff physician at St. Vincent’s Hospital in Los Angeles counsels, “Good health can be had through a well-balanced diet, sufficient exercise, and moderate living.”²

Philip L. White, secretary to the Council on Foods and Nutrition, agrees. He says, “A well-balanced diet will ensure the intake of all the essential vitamins and minerals for good health.”³

But the warning about the importance of correct amounts, and not an indiscriminate use of what we feel is good for us, comes from Dr. Fred M. Taylor, Associate Professor of Pediatrics, Baylor University College of Medicine. “For almost any dietary nutrient there is a ‘minimum intake necessary for life,’” he says, “and finally an excessive level of intake that is injurious.”⁴

Another point of rising concern is the so-called American diet of three square meals a day plus a snack for the kids and a bedtime snack

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for the grownups. This, frankly, has become a myth. No longer does the average American family live this way.

Today many families make up to twenty “food contacts” with the cupboard or refrigerator, snacking their way through until late at night. This can cause regular meals to be bypassed. Consequently the old family tradition of having breakfast and dinner together has been shelved. The modern family tends to eat dinner together no more than three times a week, often less, and it is usually over in less than twenty minutes.

That a properly balanced diet suffers in this prolonged snacking process is obvious.

The affluence of American society has greatly altered the eating habits of the population. If there is indeed a relationship between eating and disease, then it might be advisable to look at the type of food most Americans eat and see if there is indeed a connection between the two.

Statistics can often be revealing, and, even though it is possible to interpret them in various ways, figures still may speak for themselves.

Let's, for example, examine meat consumption.

The usage of this commodity has increased steadily. In 1972 Americans ate an average of 250.6 pounds of meat, 46 percent of it beef.

Fat, butter, margarine, and oils amounted to another 53.9 pounds per person per year.

In 1822 the individual usage of sugar was 8.9 pounds, but in 1974 the consumption (including sugar in processed cereals, soft drinks, cakes, ice cream, candy, and doughnuts) has boosted the per capita intake to 124.5 pounds per year.

Cigarette smoking, too, has skyrocketed despite the repeated warnings voiced by the surgeon general of the United States. Smokers seem to take a daredevil attitude when it comes to reading the warnings on the cigarette packages. And then let's not forget alcohol. In 1972 Americans bought some 25 billion dollars' worth of alcoholic drinks, which resulted not only in 33,000 deaths from cirrhosis of the liver, but also killed 25,000 on the highways.

This isn't all.

We import 65 million dollars' worth of spices each year for American households. We increase our consumption of caffeine-containing drinks such as coffee, tea, and cola drinks (importing 2

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billion dollars' worth annually), and many citizens forget to give well-planned exercise its needed place in their lives.

Hippocrates (about 460 to about 377 BC) has this to say about a possible connection between food and health: "This at least I think a physician should know, and be at great pains to know about natural sciences, if he is going to perform aught of his duty, what man is in relationship to foods, and drinks and to habits generally, and what will be the effect of each on each individual." Science today is increasingly showing its awareness of just such a connection. Even though there has been a giant leap forward in the area of scientific progress since 1900, disturbing factors have arisen concerning our physical survival which should alarm everyone earnestly engaged in keeping humanity alive.

Research conducted at the School of Health of Loma Linda University in California agrees with the view of Hippocrates.

Dr. U. D. Register, chairman of the school's Department of Nutrition, with a team of co-workers, conducted a series of fascinating experiments aimed at gaining a deeper insight into the relationship between diet and behavior. Presenting the results of their research project at the fifty-first annual meeting (1967) of the Federation of American Societies for Experimental Biology in Chicago, Dr. Register pointed out that "persons who drink a lot of coffee, live on nutritionally poor diets, and use a lot of spices may be driving themselves to alcoholic drink.

"In the university laboratory, where rats were fed pellets of a popular U.S. diet consisting of doughnuts and coffee for breakfast, sweet rolls and coffee for the 10 am and 3 pm breaks, hot dogs with mustard and relish, a soft drink with apple pie and coffee for lunch, spaghetti and meatballs, French bread, green beans, chopped salad, chocolate cake and coffee for dinner, were given a choice of water or a solution of 10 percent alcohol to drink," he explained. "The rats chose to drink about five times more alcohol than a group of rats on a milk-vegetable control diet.

"In one study, when a typical American breakfast of scrambled eggs, orange juice, toast and bacon and butter was added to their diet, the voluntary consumption of alcohol decreased by almost 50 percent. The animals decreased their alcoholic intake to low levels or completely gave up the drinking habit when they were fed nutritionally balanced meals.

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“When spices and coffee were added at the same time, however, there was a four-fold rise in [alcohol] consumption, a synergistic effect which dramatically demonstrated the animal’s increased alcohol hunger.”⁵

Science has contributed much to human welfare, including the prolonging of the life-span of the average man, woman, and child. In the year 1900 nearly 1.3 million Americans died, and those who died were not necessarily old. A full 45 percent died from infectious diseases which are now generally under control.

Grateful as we may be to medical science, it has not eliminated the funeral homes that dot the countryside or the hearses that wind their way to the quiet cemeteries of the nation. Death is still with us. Modern sanitation, antibiotics, preventive medicine, and other measures have greatly curtailed the diseases that ravaged the country seventy years ago. If the methods and medicines of today had been available at that time, at least half a million of those who died would have lived years longer.

Death has not changed, but the principal causes of death have changed.

No longer do pneumonia, influenza, tuberculosis, and other germ-related diseases lead the list of silent assassins, thanks to wonder drugs and improved living conditions. Killers who were low on the list in the early 1900s now stand at the top. Today heart diseases, cancer, and strokes account for 639 deaths per 100,000 population - an astounding 70 percent of all deaths in the United States.

In 1904, cancer claimed only 67.7 deaths per 100,000; today the figure has grown to 166.6. (Granted some of the increase comes from today’s improved life expectancy. People live to be older and eventually die of cancer, heart disease, and strokes instead of some other disease.)

In 1904, heart disease was only fourth on the list, with 359.5 deaths per 100,000. By 1972 it had jumped to 493.9.

Heart disease has been called the “black plague of the twentieth century.” Each passing hour 144 heart attacks occur. Can you imagine a disease so relentless that it causes one million heart attacks per year? If most of the victims would survive, it might not be so alarming, but over 600,000 of them die.

Heart disease has become an accepted risk in our affluent society. In comparison, during the entire World War II total deaths for U.S. forces were a “mere” 400,000. Therefore, fewer Americans died in the entire war, Pacific and European fronts combined, than now die of heart disease each year!

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If this is not a modern-day epidemic, what is it?

But we accept the risk. It is a part of the scene. That 165,000 of those who die are still under 65 years of age - statistically too young to die - somehow this doesn't seem to matter.

Hershel Lamp, MD, formerly associate professor of the School of Health of Loma Linda University, commented on the increase of arteriosclerotic heart disease: "The questions, then, that we need to ask ourselves are, What is wrong with our hearts and arteries?" and "What can we do about the situation?"

Answering his own questions, Dr. Lamp says, "Most medical scientists today believe that the answers to these two questions lie in the lifestyle of homo sapiens in 1971. This fact can perhaps be best illustrated by a description of how man lives today compared with his pattern of living seventy years ago.

"In 1900 America was largely a rural society. Men knew what it was to sweat, get calluses on their hands, and feel physically tired at the end of the day. Guiding a plow behind a horse or pitching hay all day will do those things to a man. If there was a mile or two between home and school or a neighbors farm, son and father usually walked. That was the way they traveled short distances then. Man and boy worked hard and played hard, and it was good for them and their arteries.

"It's different now. We have moved to the cities, or at least to suburbia. And everything is mechanized or automated. We drive three blocks to the shopping center, take the elevator or escalator to the second floor for our purchase, and then drive home again to enjoy the evening watching professional athletes perform on TV while we nibble at an evening snack. Physical activity has to a large extent been banished from the life program of the twentieth-century man, and his arteries have suffered as a result. Regular vigorous exercise helps keep the arteries elastic and powerful, fully equipped to carry the blood throughout the body. Inactivity and sedentary living chalked up one strike against the present day American and his heart.

"Strike two is our changed eating habits."⁶

Combine the two and it spells trouble.

It is no wonder that one out of every four men and women in the United States between the ages of thirty and thirty-nine is twenty percent or more overweight. Life insurance companies have spent considerable sums making computerized studies of the relationship between overweight and serious illness. The conclusions are worth remembering: The greater a person's overweight, the greater his chance

is of contracting a serious illness. This is particularly the case if he or she is over forty years of age.

The cause of marked overweight or obesity may vary and be highly complex, but the basic problem remains essentially the same. The body receives more food calories than it needs; and, not being able to use them at that moment, it stores the excess in the body as fat. But would you believe that many overweight people are in reality malnourished even though they have layers of fat to contend with? It is a fact. When people eat more carbohydrates (bread, potatoes, sugar, etc.) than required, they stuff themselves, leaving no place in their diet for those other nutrients that are needed to supply other elements essential for a healthful and productive life. Labels on the boxes of precooked ready-to-eat cereal show that many of the cereals contain more sugar by weight than corn or oats. Processed meats may contain up to 30 percent fatty tissue, while baking chocolate has a fat content of about 55 percent. No wonder we are a generation of heavyweights!

Closely related to modern diet is a twentieth-century invention of Western civilization - a machine able to extract the fiber from the flour, leaving us with a highly refined residue with which to bake. This flour reaches us devoid of cereal fiber.

Dr. Denis P. Burkitt, a man who has done more than anyone else to point out the value of crude fiber in the human diet, says: "The removal of fiber and excess consumption of starch and sugar go hand in hand, for if your diet contains sufficient fiber you cannot overeat of the refined foods. This is why a concentrated diet, which will have the fiber removed, produces obesity and diabetes. People are getting just too many calories to a great extent because they are concentrating their foods. The malnutrition of the West is, in this sense, over nutrition.

"On the other hand, communities who eat their calories with their fiber, do not get fat. For example, we never see obesity in the Indian race or the African race unless these people adopt the diet of the Western countries.

"Obesity in this country is due to eating calories without fiber."7

So here we have it. Heart disease, cancer, malnutrition, overindulgence in alcohol, all are culprits in the battle against good health - and all of them have a close association with the intake of calories. Therefore, it was no surprise when Dr. Hoffman, president of the American Medical Association, in his inaugural address in January 1972, called for a new approach to the nation's health problem.

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“It has been suggested that the next major advance in the health of this nation will come through health education,” Dr. Hoffman declared. “It will not be through more doctors or more hospitals or new discoveries, but through public education in health care. I believe that this is true, and our task as a profession is clear. We must persuade the American people that, next to genetics, the single most important factor in health is lifestyle, and that even more important than environmental pollution is personal pollution.... If we are heard, if our message is understood, it will improve the health of our people, and it will free us from the burdens imposed by unreasonable expectations.”⁸ His remarks certainly made an impact on his audience of scientists, but was it really such a new approach? Throughout the centuries men like Hippocrates have alluded to a probable connection between disease and “lifestyle.” And long before Hippocrates, Solomon had recommended, “Put a knife to your throat if you are a man given to appetite.” Proverbs 23:2, RSV.

The Bible says that the Biblical patriarchs had almost unbelievable life-spans. Adam, for example, according to the Genesis story, lived to the age of 930. Jared died when he was 962. Methuselah breathed his last breath when he was 969, and Noah lived until he was 950. Then the Deluge came and everything changed. Genesis records that during the next ten generations “old age” wasn’t what it had been. Shem, one of Noah’s sons, lived only to be 600. Eber lived until he was 464. Nahor reached only 148, and Abraham died of old age when he was a mere 175. In only ten generations the average life span of 912 years prior to the Flood diminished to an average of 332. What happened?

For one thing, before the Flood the people faithful to God lived on fruits, grains, and nuts; God had not given permission to eat flesh of any kind. Not until afterward was their diet changed, as indicated in Genesis 9:3: “Every moving thing that liveth shall be meat for you; even as the green herb have I given you all things.” From that moment on, whether to shorten humanity’s life-span or to supplement their meager diet following the Flood, the Lord allowed the new first family to eat animal flesh. Is it a coincidence that subsequent generations had much shorter life-spans? Medical and nutritional research supports the contention that there may indeed be a connection, a powerful one.

But why has it taken all these years to discover this? Why have we never stumbled on these facts before? Could it be that today’s discoveries are not at all new but were known before and forgotten or, what’s worse, simply ignored?

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That's exactly what has happened.

Let's go back to the beginning of the past century for some perspective. At that time physicians were prescribing such poisonous substances as mercury, calomel, antimony, and strychnine to cure their patients. They also extracted blood and "blistered" their patients, in their futile efforts to heal disease. In 1799 George Washington, father of our country, fell ill with a severe cold or perhaps the flu. The physician who attended him repeatedly drew blood. He actually bled George Washington to death in an effort to heal him. To one couple in Philadelphia fourteen children were born, and not one of them lived to see his second birthday.

But there were many - doctors, educators, reformers, and others - who were searching for the answers to the problems of almost universal ill health. They studied the principles of hydrotherapy as a natural method of healing, following the teachings of an Austrian named Priessnitz. Increasingly these health reformers condemned alcohol, tobacco, tea, coffee, and "empirical" drugs as harmful to health. Many became interested in vegetarianism. Dr. William A. Alcott published a book in 1838 called *Vegetable Diet, as Sanctioned by Medical Men and by Experience in All Ages*. Published in Boston, the book had 276 pages.

One early health reformer was Joseph Bates, one of the founders of the Seventh-day Adventist Church. In his home town of Fairhaven, Massachusetts, he started one of the first temperance societies in America. He put away tobacco and liquor, tea and coffee, and even adopted a vegetarian diet, though he did not urge this last point upon others.

As early as 1848, Ellen Gould White, another founder of the Seventh-day Adventist Church, wrote of the harmful effects of tobacco, tea, and coffee. In 1853 and 1855 her husband, Elder James White, reprinted in the *Review and Herald* articles by Dr. Larkin Coles, which dealt with the evils of the poisonous weed, tobacco.

Elder J. H. Waggoner wrote in the *Review and Herald* of August 7, 1866: "We do not profess to be pioneers in the general principles of the health reform. The facts on which this movement is based have been elaborated, in a great measure, by reformers, physicians, and writers on physiology and hygiene, and so may be found scattered through the land."

But then Elder Waggoner added something most important. Speaking of the health message revealed to Ellen G White, he said, "It

comes to us as an essential part of present truth, to be received with the blessing of God, or rejected at our peril.”

Ellen White received the health vision in Otsego, Michigan, in June 1863. After the vision she wrote, “It is not safe nor pleasing to God, to violate the laws of health, and then ask Him to take care of our health and keep us from disease, when we are living directly contrary to our prayers.

“I saw that it was a sacred duty to tend to our health, and arouse others to their duty.... We have a duty to speak, to come out against intemperance of every kind, - intemperance in working, in eating, in drinking, in drugging, and then point them to God’s great medicine, water, pure soft water, for disease, for health, for cleanliness, for luxury.... We should not be silent upon the subject of health, but should wake up minds to the subject.”

She condemned the use of the poisonous drugs then being widely prescribed by physicians. She urged the vegetarian diet and spoke of the importance of pure air. These counsels were incorporated into six separate articles entitled Disease and Its Causes, which became parts of a tract series called Health: Or How to Live.

Not only did Mrs. White, following her vision, present healthful living as a Christian duty, but she also distinguished between true and erroneous health teachings.

One of the most famous health reformers in the land at that time was Dr. J. C. Jackson of Dansville, New York. Dr. Jackson, who operated a sanitarium and practiced hydrotherapy, advocated certain extreme measures. He condemned salt as a poison. But Mrs. White never embraced this extreme view. In fact, she said that the Lord had showed her that it is proper to eat modest amounts of salt. And time has proved her views correct.

Dr. Coles wrote a book called The Philosophy of Health in which among many other things, he spoke of prenatal influences. But then he solemnly related a ridiculous story of a pregnant woman who was repelled by a squirrel her husband had shot and brought home to her. Then, Dr. Coles related, when the baby was born, it was an ugly creature which resembled a squirrel in appearance!

So Ellen White, in teaching the principles of healthful living as revealed to her, carefully chose those principles which are true and rejected the opinions of well-intentioned people who lacked divine guidance.

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Because most of her fellow Adventists accepted her visions as genuine, they threw away their pipes, stopped using coffee and tea, and avoided the harmful drugs being prescribed for illness.

Here, then, was something new - an entire church accepting the principles of healthful living so that they might serve God better.

Who was Ellen White? She was a devout New Englander who became one of the founders of the religious movement later known as the Seventh-day Adventist Church. Born to Robert and Eunice Harmon on November 26, 1827, she began her life by the flickering amber flame of a single candle and died eighty-seven years later, having lived most of her life as a messenger of God.

She received her first vision in 1844. From then until June 6, 1863, her visions had dealt with a logical sequence of issues and events. Her first visions dealt with the stabilization of the advent movement, and these were followed by inspired counsel on organizational matters, correcting religious errors, and other matters. But a remarkable vision, given to her on June 5, 1863, added a new dimension to her prophetic work. It happened in Otsego, Michigan, where she and her husband had stopped to spend the night with close friends, the Aaron Hilliards.

It was a quiet evening. Tired and worn, the visitors sat down for a simple meal with their hosts, and when, after supper, the Hilliards and their friends knelt down for a moment of religious meditation, a sudden shout of "GLORY - glory - glory!" rang triumphantly through the crowded room, slowly losing its intensity as its echoes faded out with the rays of the dying sun.

As the worshipers rose from their knees, everyone's eyes focused on the slightly built thirty-five year old woman from Battle Creek, who with devoted reverence had knelt down beside her husband James, gently resting her right hand on his shoulder. With eyes wide open, she stared into the distance, occasionally smiling as if in recognition of a familiar face, then again reflecting moments of deep, dedicated concentration. For a full forty-five minutes she remained there, communicating with an unseen Power. As if held by the order of an invisible force, everyone waited tensely for Ellen to "return." Nothing seemed able to disturb the unexplainable majesty that had suddenly filled the room, shielding Ellen from all earthly influence. Then as quietly as it had come, it left. With her face relaxed, Ellen commenced to draw her first breath, indicating that the vision was finally ended; and as though losing sight of a glorious heavenly light, after forty-five minutes of silence, she whispered her first words.

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“Dark - “she whispered. “Dark - ” And while she groped for understanding, the reality of the world once more closed in on her.

We will never know the exact sequence of events that was opened up to her, but the very next day Ellen began to write down a portion of what had been revealed to her in what soon became known as the Otsego vision.

As previously mentioned, the learned men of the nineteenth century attempted to treat diseases with strong drugs. But, not knowing the elementary principles of hygiene and the underlying causes of disease, they could only suppress the symptoms. If perchance the disease abated following one of their favorite treatments, it was probably in spite of the treatment not because of it. Medical men who prescribed inhalation of tobacco smoke as a cure for lung disease were certainly not informed or knowledgeable; yet that was customary in the eighteenth century.

In many ways, survival had nothing to do with good medical care. If one was fortunate to outlive an epidemic, a prescribed remedy for a minor illness was often enough to bring on the mortician. In the nineteenth century ignorance was the most widespread “disease” of all, and social standing was in itself no guarantee against being infected with a low and common disease. Suffocating in rooms that locked out clean fresh air, living on the prescribed starvation diet of bread and water, prevented from absorbing the health-giving rays of the sun, most patients were at the mercy of the bleeder or poisoner, dying from either losing too much blood or being poisoned to death. Some have estimated that the number of Civil War casualties could have been reduced by one third had medical science advanced just a bit faster.

Since early childhood Ellen had been plagued by bodily discomfort and illness, and as part of the “diseased” generation she had longed for a better, more healthful way of life.

The forty-five-minute vision she received in 1863 showed her that God wanted His people to enjoy better health. And from then on she wrote hundreds of pages of counsel on healthful living - counsel so sound and true that science has confirmed most of it.

As medical and nutritional scientists enter various areas of discovery, is it possible that they are in many instances merely rediscovering vital knowledge, known in the past, but forgotten? Can the answers to these vital questions lead us to conclude that there is indeed a link between the consumption of food and disease? These are questions that undoubtedly need to be answered. Spending some \$70

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billion a year to maintain our health may not be necessary. With proper diet, adequate exercise, and other healthful practices, this figure may be cut considerably in future years, reducing the need for so many new disease-control programs.

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