

MI

Food that Tastes Good is More Nutritious

Nutrients are absorbed better when you enjoy your meals

WHEN THE LATEST edition of the Dietary Guidelines for Americans was released this year, it did not, as many other countries do in their own guidelines, include advice that specifically reminds people to take pleasure in the foods they choose.

Great Britain puts such a recommendation front and center as its first guideline: "Enjoy your food." Australia, Korea, and Thailand, too, counsel their citizens to "enjoy" their meals. Similarly, Vietnam advises serving meals that are "delicious," while Norway makes the equation that "food and joy = health."

Such encouragement to make your dining experiences pleasurable, it turns out, is more than just touchy-feely. Researchers from Sweden and Thailand found that out some years ago when they collaborated on a study that looked at how well iron was absorbed from a meal fed to women of two different cultures.

The meal was a simple Thai dish of rice and vegetables spiced with chili paste, fish sauce, and coconut cream. A group of Thai women, it turned out, absorbed significantly more iron from the food than a group of Swedish women, who considered the meal "very spicy," according to the investigators.

The scientists also found that when the Thai women were given the same

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Postmenopausal Women Taking HRT at Risk for High Triglycerides

Taking fish oil can lower triglyceride concentrations

WHILE THE hormone replacement therapy (HRT) taken by many postmenopausal women helps relieve symptoms such as hot flashes, it also tends to raise blood triglyceride levels, which are thought by many researchers to elevate the risk for heart disease. Fish oil pills containing omega-3 fatty acids can help lower the elevated triglycerides—that's well-established. But no one has ever determined by how much when it comes to women. Studies have been devoted almost exclusively to men.

To help fill in the gap, researchers at Ontario, Canada's, University of Guelph tested fish-oil capsules against placebo pills in a group of postmenopausal women. They wanted to find out, specifically, whether those who were taking HRT experienced any difference in the fish oil's triglyceride-lowering effects. After 28 days, the fish-oil takers, whether on HRT or not, reduced their triglyceride levels by an average of 26 percent.

To achieve the high levels of omega-3s used in the study, the women had to take eight 500-milligram fish oil capsules every day. It would be difficult, if not impossible, to get that much of the nutrient through foods alone. You'd have to consume a half pound of mackerel daily, or three quarters of a pound of halibut or some other fatty fish. Thus, if you do have high triglycerides, it might be worth discussing a fish-oil capsule regimen with your doctor,

says Tufts heart disease researcher Alice Lichtenstein, DSc.

If that type of regimen doesn't appeal, there are plenty of other lifestyle measures you can take to lower high triglyceride levels. They include losing excess weight; engaging more often in vigorous physical activity; cutting back on alcohol; and limiting simple sugars like table sugar, syrup, honey, molasses, and high-fructose corn syrup.

Triglyceride levels (after an overnight fast) are considered borderline-high if they're at least 200 (milligrams per deciliter of blood). High is anything over 400.

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exact meal but with the food all blended together in a high-speed mixer to form an unappetizing paste, their iron absorption fell by 70 percent, on average. It had been a similar story in a previous study in which Swedish women were fed a meal of hamburger, string beans, and mashed potatoes. When the foods were all mixed together until they were unrecognizable, the women absorbed much less iron than when the meal was served in the typical manner.

A food's taste and look "instruct" the body's digestive system

How could the taste, texture, and appearance of food have an impact on the absorption of nutrients? Researchers believe it has something to do with a phenomenon known as the cephalic (seh-FAL-ic) phase of gastric secretion. That's the technical term for the fact that at the beginning of a meal, the brain ("cephalic" is from the Greek for "head") initiates communication with the digestive tract, instructing the mouth to secrete saliva and the stomach to secrete gastric juices. Both substances help to break down, or digest, food so that its nutrients can be absorbed by the body.

The cephalic phase could also poten-

tially affect secretions in the small intestine as well as the flow of pancreatic juice, "where many of the most important digestive enzymes are," says Robert Russell, MD, a Tufts gastroenterologist. In fact, secretions primarily from the intestine and the pancreas are what allow iron to be cleaved from food, enabling its absorption into the bloodstream from the GI tract.

But if you don't like the way your food looks or tastes, your secretions could be diminished. That, in turn, could lead to poorer food breakdown—and a greater chance of nutrients being eliminated from the body rather than transferred from the gut to the blood supply, from which they are circulated to the tissues.

Researchers also hypothesize that **not liking the look or taste of food could reduce gastrointestinal motility, that is, the natural, involuntary pushing of foods through the digestive tract by muscles in such organs as the small intestine.**

Think of Pavlov's dogs, says Dr. Russell. A bell let them know when they were going to be fed, but after a while, the bell was enough to trigger salivary secretions, whether they were actually fed or not. It's the same with people, Dr. Russell says. If they anticipate a good meal, it might get the

juices and the rest of the GI tract going. If not, the brain may be more hesitant about telling the digestive system to get into gear.

What all this suggests is that while you should follow a healthful eating pattern, it's also important to enjoy the foods you choose. Your diet shouldn't feel like "the price you pay." Then, too, you shouldn't "settle." Take the time to choose and eat something you're really in the mood for instead of accepting something that doesn't hit the spot just because it's more convenient. You should also sit down and savor your meals (preferably with others) rather than, say, eat them hurriedly in the car or elsewhere.

Finally, the relationship between enjoying your food and absorbing more nutrients from your meals may call for a bit of culinary tinkering. Maybe you don't like plain asparagus, for instance, but would enjoy it sautéed in a little olive oil with minced garlic.

Making a point of eating good-tasting meals and snacks in a relaxed manner might even keep you from overeating. The more you like what you put in your mouth at mealtime, the less you may feel the need to raid the fridge later in search of something that will satisfy.

Chronic Diarrhea Linked To Gallbladder Problems

PEOPLE WITH chronic diarrhea—the kind that sends them to the bathroom so many times a day that it interferes with everyday activities—are often stymied in their efforts to stop the problem. Many find themselves visiting doctor after doctor in a constant, frustrating search to find out what's wrong. But a New Jersey gastroenterologist may have found a way to help.

Saad Habba, MD, studied 19 patients who were experiencing diarrhea anywhere from four to 10 times daily. A battery of tests to determine the cause of their trouble had yielded no clues. But the patients shared several factors in common, most notably that their diarrhea always occurred

after meals—and was worse after fatty ones.

The syndrome was remarkably similar to the pattern of diarrhea some people develop after having their gallbladders removed. The gallbladder normally transfers a substance called bile, which works to digest fat, from the liver to the small intestine. But removing the gallbladder sends the bile directly from the liver into the intestine. Most people adapt to this change after several weeks, but in roughly one out of 10 cases there's an uncontrolled amount of bile secreted into the intestine—and it acts as a laxative.

In other words, the 19 patients in the study were "acting like people who didn't

have gallbladders," Dr. Habba explains.

Subsequent tests of their gallbladder function proved that it was indeed poor. So he gave them cholestyramine, a drug that's given to people to bind excess bile and remove it from the intestine, including after gallbladder removal. The drug stopped diarrhea within 24 hours in all 19 patients.

The overwhelming response to cholestyramine suggests that undiagnosed gallbladder problems may be responsible for many other cases of chronic diarrhea. But since the study was a small one, much more research must be done before the drug can be fully accepted as a treatment for the condition.

Did you know... One Nabisco Mini Oreo, the size of a quarter, has 16 calories. That makes a handful of 10 of them the caloric equivalent of three regular-size Oreos.