Eat to Live: The Revolutionary Formula for Fast and Sustained Weight Loss

by Joel Fuhrman. Little, Brown and Company, 2003. 292 pages. $23.95 ISBN: 0-316-82945-5

One Sunday afternoon while flipping through the channels, I stumbled upon a Discovery Channel television program, Second Opinion, hosted by Dr. Mehmet Oz, world-renowned Columbia-Presbyterian Medical Center cardiovascular surgeon. In this particular episode of Second Opinion, Dr. Oz interviewed Dr. Joel Fuhrman about the relationship between nutrition and health. It was during this interview that I was introduced to Dr. Fuhrman's book, *Eat to Live: The Revolutionary Formula for Fast and Sustained Weight Loss*. Many of the concepts discussed by Dr. Fuhrman resonated with me, since just a year ago in the Medical Scientist Training Program (MSTP) Thursday Night Clinic I was treating numerous overweight patients with various ailments from diabetes to high blood pressure and/or cholesterol. Routinely, I would recommend alterations in nutrition and exercise as front line measures, yet almost invariable my patients lacked the motivation, nutritional education, and environment to implement my suggestions. Consequently, I prescribed medication to control their given condition. I decided to read *Eat to Live* as a medical student genuinely interested in dietary physiology and the well-being and education of my future patients as well as a health enthusiast interested in my own physical condition.

Dr. Fuhrman introduces the reader to his book with numerous anecdotal cases of patients (identical to the ones I saw in the MSTP Thursday Night clinic) in which improved nutrition alone could reverse medical conditions that plague American society, such as angina, high blood pressure, high cholesterol, diabetes, allergies, arthritis, etc. Some of these cases are extreme (and I must admit a bit unbelievable), but they are Dr. Fuhrman's own cases. He even goes so far as to claim that by treating cardiac patients with aggressive nutritional management that he has had "no patient die of cardiac arrest." Even Dr. Fuhrman expects readers to be skeptical given health care providers' and patients' poor experience with the impact of lifestyle modifications on disease and our ever increasing dependence on medication as the quick and easy alternative to healthy living. However, these cases do pique the reader's interest and begin to illustrate how Dr. Fuhrman's basic principle of nutrient-density may be at the root of healthy living.

The first four chapters of *Eat to Live* (Digging our Graves with Forks and Knives; Overfed, Yet Malnourished; Phytochemicals: Nature's "Magic" Pills; and The Dark Side of Animal Protein) serve a dual propose. First, they educate the reader, medical or lay, about the physiologic underpinnings of the "American Diet." Dr. Fuhrman puts forth the basic tenet that nutrient-density governs overall health and the "American Diet" rich in calorie-dense nutrient-poor foods has created a junk food addiction that is the source of most modern disease. Second, these chapters detail Dr. Fuhrman's nutritional solution to the American health condition (e.g., heart disease, cancer, diabetes, obesity, etc.). This type of solution runs directly counter to the current medical convention of prescriptions, surgery, and fad diets to control obesity and disease.

Dr. Fuhrman builds evidence to support the consumption of a basically vegetarian diet rich in raw fruits and vegetables as well as unprocessed grains, beans, and nuts devoid of animal products and processed foods. His arguments are very logical and replete with references for the medical and nutritional literature. However, most of the evidence is correlative and little if any is causative. Nonetheless, the reader is persuaded by the sheer volume of evidence against our current consumption habits. Dr. Fuhrman does an excellent job of pointing out how things have been spun to the public by the food industry as well as the media. He points out the high-fiber foods have been shown to reduce cancer and heart disease risks not fiber per se, and that reporting of products as nutrient-weight ratios (e.g., 2% milk) is highly deceptive since they hide the more meaningful nutrient per calorie ratio (e.g., 2% milk by weight is 35% fat by calorie). It is examples like these that force the reader to take a long hard look at the foods they actually eat and begin to question the "American Diet."

Yet, not all the evidence set forth in this book is sound. Some of the correlations that are cited are replete with confounding variables. One example is a correlation between the consumption of unrefined plant foods and deaths from heart disease and cancer. Developed countries consuming a basically "American Diet," like the US and Finland, have a low consumption of unrefined plant foods and a high incidence disease, while undeveloped countries, like Laos and Thailand, show the opposite trend. This appears very convincing. Yet, these data are confounded by socioeconomics, sanitation, and infectious disease. Maybe patients in Laos and Thailand die from malnutrition, infections, or mechanical accidents before they reach the age to develop the diseases that plague more developed countries. Furthermore, similar correlations could be drawn for the consumption of computers. It would be absurd to state that the consumption of unrefined plant foods inhibits the information revolu-

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tion in Laos and Thailand, yet I could probably make the correlation that Laos eats more unrefined plant foods than the US but purchases less computers. These correlative data may be persuasive to lay readers but are not the strongest evidence for Dr. Fuhrman's nutritional program.

However, most of Dr. Fuhrman's arguments regarding published controlled studies provide more insightful and convincing evidence than the correlations that are often drawn. The cardiovascular protection associated with a vegan diet in the Framingham Heart Study as well as the reversal of cardiovascular protection associated with the Mediterranean Diet when the consumption of fruits, vegetables, and beans are neglected provide excellent examples of how a critical look at the data may provide more evidence than mere correlations.

The next three chapters of *Eat to Live* (Are You Dying to Lose Weight?; Nutritional Wisdom Makes You Thin; and Eat to Live Takes on Disease) detail the same principles and logic set forth in the previous four chapters but applies them to fad diets (e.g. The Atkins Plan, The Zone, and Eating for Your Blood Type), losing weight, and disease. Dr. Fuhrman picks apart each diet plan according to the principles laid out in the first four chapters. However, he never makes the statement that his plan is the best; instead he states that people should pick nutrition plans that are based on science. This statement is very powerful in the today's health market that is aimed at selling abdominal widgets and weight loss shakes even though "results are not typical." Other than this affirmation and a discussion about omega fatty acids and trans fats, I found this section boring and very repetitive. If you were reading the previous four chapters, there is not much new information or hard evidence here.

In the last three chapters (Your Plan of Substantial Weight Reduction; Sculpting Our Future in the Kitchen; and Frequently Asked Questions), Dr. Fuhrman lays out a very detailed plan to implement his nutritional plan including shopping lists, recipes, and very practical advice. He is very specific about the types and amounts of the foods that should be consumed in his Six-week Diet Plan. He then extends this Six-week Plan into a Life Plan. This Life Plan may be the most practical message of the entire book, since it incorporates a lot of the medical and common sense knowledge that has been ignored in the standard "American Diet." He offers up the 90% Rule – consume 90% of calories from a diversity set of unrefined plant foods and 10% of calories from animal products. The 90% Rule states that a diverse diet that is packaged by nature alone will be the most nutrient rich. Deviation from this rule in the "American Diet" has lead to an addiction to highly processed, preserved, and nutrient-poor foods. Eat to Live takes the 90% Rule one step further: it gives the reader a shopping list, two seven day meal plans, and 17 pages of recipes from hummus to apple pie. Lastly, Dr. Fuhrman offers a lot of practical advice on vitamins and nutritional supplements, junk and organic foods, exercise, environmental stimuli, salt, sweeteners, alcohol, caffeine, and pesticides.

Personally, these three chapters are the practical nuts and bolts of Dr. Fuhrman's nutritional machine. However, I felt that the presentation of these three chapters defeated their practicality. It would have been more useful to have presented these chapters as a second handbook or even a set of recipe cards that could be arranged into a weekly meal plan and that contained a shopping list for the items required by each recipe on the back of each card. Since Dr. Fuhrman is asking for a dramatic change in lifestyle and most readers neither shop for many of the ingredients required on a routine basis nor use ingredients in their processed diets in the first place, *Eat to Live* should strive not only to educate but to facilitate nutritional excellence. A practical change like this would have brought the book to life for the reader in a very concrete and applicable fashion. Instead, the reader is stuck with a cumbersome reference guide with practical advice sprinkled among the various theories and evidence for that advice, rendering it informative but nearly useless.

While I do not agree with every argument and every claim made in *Eat to Live*, I do believe that Dr. Fuhrman's book is on the right track with common sense, yet medically validated, nutritional information. Everyone, physician or patient, should take heed to his overall message about our current eating addiction and do our best to live more nutrient rich lives.

Derek F. Amanatullah
Medical Scientist Training Program
Department of Cell Biology
Albert Einstein College of Medicine
Bronx, New York 10461.

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