

## EATING FOR Health

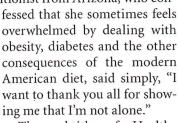
When Harvard Medical School and The Culinary Institute of America get together, the result is lots of inspiring advice for physicians and their patients. (The food's not bad, either) BY TOM PASSAVANT

T WAS HIGH NOON on a sunny Sunday last April, and the inaugural edition of the Healthy Kitchens, Healthy Lives conference was drawing to a close. For three days, some 225 physicians, dieticians, chefs, nurses and other health care professionals had gathered in California's Napa Valley to hear speakers from Harvard Medical School, The Culinary Institute of America (CIA) and elsewhere talk about how to get Americans to make healthier food choices—and how this effort must begin with doctors themselves.

Now it was time for audience feedback. "I've been to a lot of medical conferences, but never one like this," said Jaudon Behrman, M.D., of Lexington, Kentucky. "What sets it apart is the speakers' passion. And combining the Harvard faculty and the CIA is unique."

A doctor from Boston stepped up to the microphone and, reflecting on the meals we'd eaten over the weekend, said, "I never knew food could be that tasty—and healthy, too."

Finally, a nutritionist from Arizona, who con-



The subtitle of Healthy Kitchens, Healthy Lives is "A Leadership Conference Series Bridging Nutrition Science, Health Care, and the Culinary Arts," and if that sounds ambitious, it is. The notion behind the conference was the fear that an epidemic of diabetes and other maladies brought about by poor nutrition and lack of physical activity will soon threaten to overwhelm America's health care system. This idea was voiced in the opening remarks of David Eisenberg, M.D., the conference's driving force (along with the CIA's Mark Erickson) and a specialist in complementary and integrative medicine therapies at the Harvard Medical School Osher Institute. "A tsunami of trouble is on the horizon," he said. What this debut conference proposed was no less than a revolution. "People believe that healthy food doesn't taste good," noted Dr. Eisenberg. "This idea is what we want to change."

Listening intently was Paul Barber, M.D., an internist from Lakeside, Iowa. "I see a ton of diabetes among the immigrant population living in my area," he said. "So we are trying to come up with a program to help."

OR DR. EISENBERG and his colleagues, achieving their goals involves physicians like Dr. Barber. Using the analogy of cigarette smoking (when physicians began to kick the habit in the 1970s, they were much more effective in convincing their patients to do the same), the idea is to change physicians' behavior and get them to help their patients change as a consequence. "What if physicians and other medical professionals had the necessary skills to model healthy eating behaviors themselves?" Dr. Eisenberg asked at the opening session. Or as he put it later, "We hope that 'See one, do one, teach one' will lead to better nutrition choices."

Another goal is to eventually install teaching kitchens in hospitals, and offer patients basic cooking and food-shopping skills. The point, again, is to transform their diets permanently. Speaker after speaker stressed that any change in diet must not involve deprivation, but rather the substitution of one pleasurable thing for another. They call it the "nondiet diet."



CIA chef-instructor Lars Kronmark makes food that's good-and good for you.

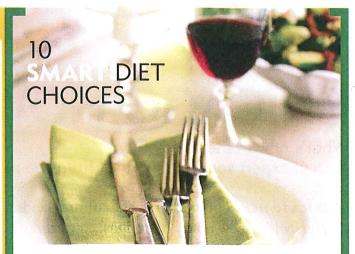
We conference-goers got to chew over more than just words. Included in the program were three meals a day so appealing you'd never know they were good for you, prepared by the professional chefs on the CIA's faculty. Meals drew on flavors from all over the globe. A Latin American-themed lunch, for example, included shrimp and white bean ceviche; a salad of barley, black beans, poblano peppers, tomatoes and grilled mushrooms; and a deeply flavorful bowl of smoky braised pumpkin with tomatillos and chicken. Dessert was seven-grain pudding with almonds, berry salsa and Mexican cinnamon.

HEN THERE WERE THE cooking demonstrations, led by high-profile chefs and authors such as Mollie Katzen of Moosewood Cookbook fame, who offered advice on portion control and moving away from the familiar protein-centric plates toward whole grains and vegetables. Chef Suvir Saran, who takes Indian food to new heights at Dévi, his Manhattan restaurant, filled the hall with scents of roasting spices. Hands-on cooking lessons were held in the CIA's third-floor teaching area.

When we weren't eating, we heard about everything from fish oil and omega-3s to trans fats. There was a discussion of the relationship between diet and cancer risk (remember what your mom told you: eat your vegetables), and a session titled "A Mouthful of Delight: Mindfulness, Eating and Intimacy," during which we each ate a single raisin verrrrrry slowly. Along the way were such memorable sound bites as "fat-free does not mean calorie-free" and "the FDA's new Food Pyramid has the advantage of being essentially incomprehensible." At one point a baked potato was referred to as "a bowl of sugar"—an image I haven't been able to shake ever since.

One of my concerns before the conference was that the lectures might not be tethered to the realities of an everyday medical practice. Or as a physician from Phoenix said in one session, "I only have 15 minutes with patients. How do I start a group for evening physical activities?"

Fortunately, words like "those of you in practice" were heard frequently from the podium. And I was pleased to see that the very last plenary session was titled "Informing and Inspiring Our Patients: Strategies for Improving Nutritional Behaviors and Information Resources for Clinicians and Chefs." Practical tips abounded: Drink



In addition to practical tips (use smaller plates!), conference attendees received dietary advice. That wisdom was neatly summed up in eight well-chosen words written by Michael Pollan, author of the current best seller The Omnivore's Dilemma: "Eat real food. Mostly plants. Not too much." Here's what else conference-goers learned:

- 1 Eat more fruits, vegetables and nuts in place of processed carbohydrates.
- 2 Choose whole grains rather than white bread, rice, pasta or potatoes.
- 3 Emphasize healthier proteins—fish, poultry, tofu and nuts.
- 4 Eliminate trans fat and reduce saturated fat, replacing them with plant-based fats and oils.
- 5 Re-envision your plate: Include more vegetables, healthier carbohydrates and less red meat.
- 6 Eat smaller portions of indulgent desserts.
- Remember portion control: "It's the calories, stupid."
- 8 Look for ways to reduce salt. Season with herbs and spices first, and use salt as a last step in making food palatable.
- 9 Instead of sugar-sweetened beverages, drink water, tea and coffee.
- 10 It's okay to enjoy wine and/or alcohol-but don't go overboard! The limit is one to two drinks per day for men; one drink a day at most for women.

water when you feel hungry. Enjoy a square of really good chocolate for dessert. And my favorite: Serve your meals on smaller plates. (A dinner plate that was made in the 1940s is tiny compared with the ones we use today.)

EAT WELL

LIVE WELL

While I don't talk to patients, I was determined to cajole my own internist into attending the conference. "We never learned any of this in med school!" she said when I told her about it. As Dr. Eisenberg, a student of Eastern philosophies, might put it, a journey of a thousand miles begins with a single healthy, delicious meal. 0

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