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Practicing what they preach Health professionals learn healthful cooking and eating so they can give patients accurate prescriptions for nutrition

By SUSAN SWARTZ
FOR THE PRESS DEMOCRAT

During his four long years of medical school, Petaluma physician Sunjya Schweig received "maybe five to eight hours on nutrition. Mostly it was how to calculate a BMI (body mass index) and tell a patient 'You're obese.' "

But it's one thing to recognize obesity, and another to know how to teach a patient to eat more healthfully.

"Most Americans, have a very low culinary literacy. Why should docs be any different?" said Dr. David Eisenberg, an associate professor of medicine at Harvard and director of the university's Osher Research Center for complementary and integrative medicine. "They may have more income, but I doubt they cook any better for themselves or their family."

Health professionals can be as confused as consumers about nutrition and conflicting findings over which foods and supplements are best for the heart, the brain and the rest of the body. And they often share the misimpression that healthful food is 1) expensive and 2) tasteless.

"It boils down to the training they don't receive," said dietitian Amy Myrdal from the Culinary Institute of America (CIA) in St. Helena.

"Nutrition science is continually evolving," she said, and consumers are looking for clarification from someone they can trust to help figure it out.

And so earlier this month,

Schweig along with more than 250 doctors and other health workers from around the country went to cooking school at the CIA.

The course, titled "Healthy Kitchens, Healthy Lives: Caring for Our Patients and Ourselves," was designed to teach health professionals how to cook and eat right so they can pass their know-how on to their patients. It was the third such conference co-sponsored by the CIA and Harvard Medical School.

Eisenberg hopes physicians will become converts to healthy eating in the same way they gave up smoking and helped reform the public's tobacco use.

"It turns out that personal behavior of doctors does affect what they tell patients," he said. "The physician who wears sunscreen will remind patients to use sunscreen. The ones who drink but not too much will comfortably ask their patients" about their drinking habits.

Admittedly, doctors may be as unsure as their patients about something as basic as what is the best oil to use in cooking.

"Olive oil is still the top of the heap," said longtime Wine Country chef and author John Ash, who gave two CIA workshops on cooking healthfully on a budget. "And it doesn't have to be the fancy schmancy extra virgin olive oil. It can be pure or virgin olive oil for \$4 or \$5 a quart."

One of Ash's challenges for the conference was to come up with menus "for a single mom with two kids on WIC" -- the government program for low-income women and children -- "so that she will try to cook for her family something healthy and that is nearly as easy as going down to the corner for fast food."

Ash gave students a basic pantry list for all kitchens (see sidebar) that includes items from canned beans to Mediterranean seasoning designed to make it affordable and convenient to cook healthful meals. He demonstrated the ease and economy of a roast chicken, noting, "It becomes a meal today, with leftovers to throw into a pasta or bean dish tomorrow."

Budget is a big driver of people's food choices, said Myrdal, program director at the CIA and co-author of "The Healthy Heart Cookbook for Dummies." She sent conference participants home with budget menus for four people that cost less than \$20.

Participants paid \$895 for the four-day conference (to be repeated Sept. 25-28) and got a hands-on cooking experience with

top chefs as well as lectures by experts on everything from diet supplements to mindful eating to making a salad look beautiful.

Lia Gaertner, a nutrition educator in Sebastopol who is married to

Schweig, came home armed with information "from the foremost researchers from Harvard" she can use with her clients. It will help her convince skeptics "who think all they have to do is take their statins and blow off nutrition" that diet and lifestyle changes are as life-saving as drugs.

Eisenberg conceived the conference as a way "to synthesize scientific information about good carbohydrates, low fats and nutrition and translate it all into something tangible for doctors: what is health promoting and what is fun and delicious and affordable."

"If the docs can go into the (CIA's) kitchens and roll up their sleeves and learn how to make healthy and delicious dishes in 15 minutes, then they can talk to their patients and help them make a change." Even, he said, "if the patient is on Medi-Cal and 50 pounds overweight."

The connection between how Americans eat and their health and the effect on the economy and health care cost is "unequivocal," said family practitioner Schweig. "What we're putting into our bodies is responsible for major health conditions - obesity, high blood pressure, infertility, cancer, diabetes. What you eat affects inflammation, the body's own natural stress response, your hormones."

Chef Ash said he's seen an encouraging trend in consumers "wanting be a little more savvy about what they're eating." He recalls back in the 1980s when restaurants put heart-shaped stickers on certain menu items to indicate they were low in fat. "That was the kiss of death, practically insured that the item wouldn't sell. People didn't want to hear about it. I think that's changing."

Right now, the way Americans eat is "destroying our quality of life. Our children are getting too fat," said Harvard's Eisenberg. He wants the health profession "to say, 'Enough, already!' We have to become role models."

So that, ultimately, the family doctor who now asks patients how much they drink, smoke and exercise will ask what they made for dinner the night before, provide some low-cost, delicious recipes and advise where to shop for the best price on whole wheat couscous.

After that, Eisenberg's hope is that hospitals will install teaching kitchens "where patients can be referred and supported through third party insurance to learn how to cook and purchase food."

If doctors and nurses can learn to eat better, so can their patients.

After all, said Eisenberg, "It's not brain surgery."

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