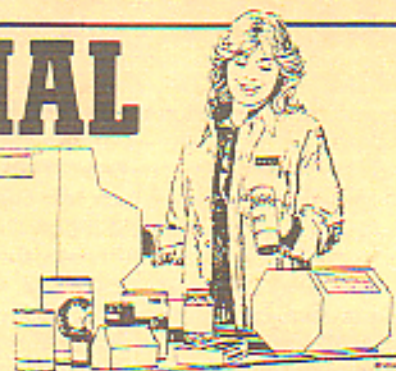


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Food Additives Blamed for 40% of Our Behavior Problems

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Experts now estimate that food additives—artificial food colors, flavors, sugars and preservatives—probably cause 40 percent of the nation's behavior problems.

These figures, based upon investigations of school children referred to mental health clinics, found that four out of every 100 kids (40 percent of those referred because of behavior troubles) were hyperactive (hyperkinetic).

The total number of children affected to lesser degrees may be as high as one in five. These same studies voiced growing concern by these same experts about the cause and effect between food additives or salicylates and hyperkinesis, as well as "minimal brain dysfunction" and hyperkinesis.

The government's own studies fail to disprove the charge. Further, the real possibility is that hyperkinesis is but one of the problems. Yet, nearly everything you drink or eat has one or more chemical additives ranging from what makes it smell, taste or look more "natural" to preservatives that chemically resemble pesticides.

Thus, modern food processing, more and more experts believe, is a form of "subliminal genocide."

More boys than girls suffer from the hyperkinetic disorder. Most often they are average or above average in intelligence but their schoolwork is below average.

The disorder was first observed by Dr. George F. Still in 1902 when food additives started showing up on the market. He called it "morbid defect of moral control." He associated the problem with diseases such as "brain tumor, meningitis, epilepsy, and head injury."

In 1937, Charles Bradley, the operator of a children's residential treatment center in Providence, R.I., became the first to use amphetamines to treat behavior disorders or learning disabilities.

He noticed that 15 of the 30 children treated became subdued. He had expected the children to become stimulated, as had been the reaction of normal adults taking amphetamines.

In 1947, A.A. Strauss, president of the Cove Schools for Brain-Injured Children Racine, Wis., and his associates noticed certain behaviors in children suffering inflammation or fever of the brain which they termed "minimal brain injury or damage." Food additives may have caused it.

In 1957, Maurice W. Laufer, a Providence, R.I., psychiatrist, first called the disorders "hyperkinetic impulse disorder."

Medication is still the current method used most frequently to control hyperkinetic behavior. Parents and doctors have now become dubious about the use of drugs for behavior control and are questioning this procedure.

While the giant processors have done much to keep the truth from the public special interest groups have caused increasing concern among legislators and stimulated some congressional reviews on the problems.

The long-term effects of drugs used to control hyperactivity have not been sufficiently studied.

According to Drs. Alan Sroufe and Mark Steward, experts on "minimal brain dysfunction," the only studies following the treatment of hyperactive children with drugs, from the ages of 8-11 through high school suggest that their prognoses are poor.

"These children were still having trouble in their teens with antisocial behavior, academic problems, family difficulties, and the like," they found.

The Special Studies Subcommittee of the House Committee on Government Operations held hearings back in September, 1970, to explore contradictory implications of the use of drugs to calm hyperactive children such as "the effect of accelerating this use of amphetamines on our extensive national campaign against drug abuse."

The result was that H.R. 19460, introduced in the 91st Congress, proposed to end the payment of tax funds for the promotion or subsidization of any drug, narcotic, barbiturate, or sedatives to any child in the public school system.

No action was taken on the measure, which was referred to the House Education and Labor Committee. The problem was that the causes of hyperactive children were still unknown and some control over the kids had to be exercised.

In June, 1973, Dr. Benjamin F. Feingold, former chief emeritus of the Department of Allergy, Kaiser-Permanente Medical Center in San Francisco, suggested that artificial food additives may be a cause of hyperactivity.

Dr. Feingold developed a diet that eliminated food containing artificial coloring and flavoring from meals served to hyperactive children. His diet also forbids fruits and vegetables, such as apricots, grapes, tomatoes and cucumbers which contain some natural salicylates and are treated with chemicals to control bugs.

Dr. Feingold feels now that his diet could successfully treat half the several million hyperactive children in the nation who are presently on medication. He also

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