

Reduction: A Diet Overview

A History and Encyclopedia of Reducing Diets



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Table of Contents

- Introduction 3
- A Brief Diet History 7
- Encyclopedic History of Reducing Diets 14
- References 43



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Introduction

When I first became a personal trainer, I received a lot of questions from people who were interested in losing weight but didn't know what would be the best diet for them. They were confused by the myriad of contradicting information and the similarity in diets. After spending countless hours talking to clients about the differences between popular weight loss diets, it occurred to me that I should put together a list, rather a summary, of the different diets I knew of. One thing led to another and I ended up with this encyclopedia.

For this encyclopedia to be useful, it would have to be in alphabetical order, be non-biased, informative, and succinct. I wanted to have information at my fingertips about the most notable diets that played a significant role in the health and fitness industry as we know it today.

Regurgitated

I first began formulating my ideas because of the quagmire of numerous and confusing reducing diets that are popular today. I looked to the past for comparison and found a cyclical pattern of a few basic theories that have been tweaked every generation or so to make them sound new again.

There are, and have only been, four basic diets. All diets are essentially a regurgitation of these four: Calorie restriction, macronutrient restriction, special combinations, and blood type.

- Calorie restriction
 - This is the typical reducing diet that gives tips and trick and usually recipes for low calorie meals. Sometimes these recipes are high in fiber, as with the

F-Plan Diet, allowing the person to eat more bulk, but less calories. Other diets focus on using smaller portions.

- An example of these types of diets are Weight Watchers, Jenny Craig, and most of the diet programs and diet books published in the last 200 years – with the exception of those types listed below.
- Macronutrient restriction
 - Low fat, low carbohydrate, and low protein diets are all examples of macronutrient restriction.
 - The *Atkins Diet* led the “low carb” or high protein, craze in our current generation, but he borrowed the idea from a coffin maker in 1863 named William Banting who wrote a pamphlet called *Letter on Corpulence Addressed to the Public*. [editorial: All diet books should be pamphlets. There is not enough valuable content to justify any more than an explanation of the system. A pamphlet gives plenty of space to thoroughly explain any of the diets in this encyclopedia].
- Special combinations
 - These can be any special combinations of foods or macronutrients. Some claim to have near magical properties, such as the grapefruit and tuna diet, cleanses, or the cabbage soup diet that are supposed to increase fat metabolism.
 - Others believe certain foods should or should not be combined with each other. Some examples of these types are: fruits, proteins, carbohydrates, acidic, and alkaline.
 - For example, William Howard Hay developed the idea of “food combining” in the 1920s. This same idea was espoused again in the 1980s, when a book titled *Fit for Life* appeared, and, in 2000, when Suzanne Somers’ first “Somersizing” book was published.
 - Furthermore, The Zone Diet espouses that carbohydrates, proteins and fats should be eaten with every meal in a combination of 40%, 30%, and 30% respectively of total calories for that meal.
- Blood type

- In 1997 Peter J. D'Adamo, outlined this in his book *Eat Right 4 Your Type*. The theory with this category is that all people of the world came from specific regions that had certain types of foods available. Those people evolved to effectively use those foods for good health. People from different regions will not be as efficient with foods they are not evolved to tolerate. A person's blood type determines what region they are from, and therefore the types of foods they should, and should not eat. If the person strays from this eating restriction, they will likely be overweight.
- [Editorial: This theory is new and not backed by science, but it is only a matter of time before someone else borrows the idea and tweaks it a little bit to call it their own.]

Diet Hobbyist

The one thing I found to be consistently true throughout the years, is that there really is no magic formula that has been able to significantly reduce a person's weight permanently, except the obvious and most avoided; eat less, move more. Any diet that has successfully helped a person achieve a reasonable goal has done so because it helped them limit their caloric intake and probably educated them about nutrition. The most obvious answer is the best answer. I have observed that many people use dieting as a hobby; they want the glamour of being on the latest diet. They follow some "expert" prescription to eat in strange and often unnatural ways: limiting one macronutrient or the other, eating according to their blood type, combining certain foods but not others, or eating large quantities of specific foods (such as cabbage soup or grapefruit) that are supposed to help the body shed excess fat (or in reality make you too full to eat anything else). All this conflicting advice can be confusing, and I feel there is a need for a resource that brings as many different diets as possible together in clear and concise terms. With this type of resource the diet hobbyist, fitness professional or the person who wants to shed a few pounds and keep it off, can find unbiased information to help them make smart decisions.

Snake oil

The diets contained in this book are by no means exhaustive. I have restricted it to the more popular reducing diets. I did not delve into the wild world of snake oil for weight loss. Snake oil was originally a tonic or patent medicine said to “cure what ails you”. But it rarely did, unless what ailed you was sobriety.

People have tried a number of techniques to enhance or restore their health, increase vigor, or lose weight such as: magnetized foods, patent medicines and tonics, heavy metals, toxins, alcohol, bovine extracts, or even tape worms. They may have regularly ingested daily supplies of yeasts, algae, herbs, spices, whole grains, cocoa, and other bizarre things in the name of weight loss. Some of these concoctions were harmful and some were inert, but it demonstrates that people would try just about anything if they thought it would improve their health. The appeal was generally for greater than normal benefit from less than normal effort.

People have been struggling with food since the beginning of history. We have books and magazine, websites and even an entire television network devoted to food. We love the taste, the appearance, the feel; we love the history and the social aspect. We eat it for nourishment and entertainment, comfort and control. We have a love affair with food, unless we eat too much; then we try not to eat any, and that poses another problem. Eating in a certain way to reduce the amount of stored fat has been in vogue since the mid 1800s – about the time we began learning that obesity was harmful to a person’s health, and was no longer limited to the aristocrats.

At this point, numerous “reducing diets,” as they were called, were marketed with the promise that following it would make the person thinner.

A Brief Diet History

Michael Goldstein's book *The Health Movement: Promoting Fitness in America* (1992) discusses the historical foundations of the health movement currently underway in American society, and describes the American public's preoccupation with their health and the belief that proper nutrition, exercise and abstinence from tobacco smoking will help them to live longer, healthier lives. Goldstein outlines the important changes diet and nutrition have made from the Colonial years through the mid-1980s. The early colonists ate with reckless abandon, consuming large quantities of a variety of foods available in the early days of colonization of the United States. Early visitors from other nations commented on the sheer waste and over-consumption of food by the settlers. In the mid-1700s Benjamin Franklin advised in *Poor Richard's Almanac* that people could enjoy a long life, healthy body and vigorous mind if they did not over-consume.

It was not until the 1830s, however, that attention to the types and quantities of foods were heeded through the premise of moral enlightenment. The Christian Physiology Movement was led by people with similar notions who equated a natural, vegetarian diet and personal responsibility with piety and Christianity. They opposed science as a basis for decision making and felt a hygienic lifestyle was at the foundation of all reform: social, moral or religious. They believed that a person who was not hygienic would eventually become ill and not be able to perform their duties to society, or family, and since these duties were religiously ordained. Not living hygienically was sinful behavior and would disrupt society. John Harvey Kellogg played a significant role in promoting improved health as a Seventh Day Adventist and revolutionized the way people ate breakfast with his packaged health foods and cold cereal such as Granola and corn flakes.

However, according to Goldstein (1992), by the turn of the 20th century, religion had nearly disappeared from the health movement fervor in favor of "new nutrition." These ideas for this new movement were loosely based on science and the realization that eating right would make a person feel better, work better and suffer from fewer illnesses. This shift from a religious motivation to a more secular and scientific one, coincided with ideas of what, how, and when to eat became closely associated with ideas about personal responsibility and self-control.

By the early 1900s piety was no longer a sufficient reason to eat a healthy diet, but being slender was. Women and men were using drugs, exercise, diets, groups, and psychological

techniques to help them become part of the new physical craze of being skinny. The fashion industry and the mass media played tremendous roles in shaping the obsession Americans have with thinness.

Brumberg (1997) contends that in the 19th century middle- and upper-class young women were concerned with the size of their body parts. If they had large hands, feet or waists, they were considered to be indelicate or to come from the lower-class. It was unspeakable for a society girl to be thought of as living a rough life. They went to extreme measures to hide or change any disproportionate body part, wearing binding clothing such as corsets to make the waist look small. Even the future queen of England, Victoria, was not immune to the pressures. Her mother, the Duchess of Kent, lectured her about over-eating and said a queen is not supposed to be husky like a milkmaid and she should not look like she has ever done demanding physical labor. The 20th century was not very different; girls were still preoccupied with looks and weight and would frequently make comments equating fatness with unattractiveness (Brumberg, 1997).

Nutrition became a national problem in the 1930s, when scientific evidence and research began to show that carrying too much body fat was harmful to a person's health. This encouraged a new group of people to pay attention to the body, the insurance industry. Weight charts were developed to establish guidelines for healthy weight people and insurance rates were based on health risks attributed to a person's weight. The major focus in this era was overweight people, although, as in the century before, being underweight was feared to be a sign of sickness. Around this time the federal government stepped in with the Recommended Dietary Allowance (RDA) which was a guide for the types and quantities of macro and micronutrients a person should ingest on a daily basis to maintain proper health.

Beginning in the 1920s, the focus on obesity for health reasons ran parallel with the social requirement for a slim appearance. Eating disorders such as anorexia nervosa and other destructive obsessions related to body size and image became inevitable. Brumberg (1989) discussed this in her book *Fasting Girls: The History of Anorexia Nervosa*. By the time the "roaring 20s" rolled around, the notion that good health and prosperity were linked to corpulence—an idea that had been prevalent for many generations—had disappeared. Popular culture, reinforced by a dramatic expansion in the advertising and public relations industries, gave rise to the "thin is in" mentality and an increase in the cases of disordered eating. The modern woman wanted to distinguish herself from the plump,

Victorian matron and her old-fashioned ideals of nurturing and domesticity. A slim body was now an “instrument of fashion” and a form of cultural expression. Piety was side-stepped for thinness.

Some physicians, such as Morris Fishbein in his book *Your Weight* (1927) and quoted in Brumberg (1989), took notice of the abuse of the body by denouncing fanatical diets that attempted to achieve “barber-pole figures.” The craze for thin was so prevalent, and damaging, that physicians publicly bashed many of the popular diets which often consisted of particular foods, patent medicines, drugs, baths and pastes. Physicians believed that obesity was an issue of science not marketing and anyone who took part in any of these “quasi-scientific” methods was putting their health at risk. For the most part though, their words were not sufficient to stop the powerful movement toward slenderness.

The status of the homemaker, and her role as the caretaker of the health of the family began to develop. She was expected to use the new ideas from home economics and nutrition science to improve their health and maintain the proper weight of her husband and children. Physical attributes such as larger sized figures and roundness were now objects of conscious control instead of a gift from God. This caused women to become more aware of their own bodies, as well as their family’s bodies. An overweight family was not only considered a physical liability, but a character flaw of the woman of the house. The 1920s also gave rise to the standardized sizing for women’s clothes and further encouraged such practices as bulimia. With more emphasis on personal body size, legitimacy was given to normative size ranges and women were pressured to achieve and maintain a certain physical look. These women were thought to believe, that it was more important to be thin than anything else (Brumberg, 1989).

After World War II, the diet industry began to target youth. Magazines, such as the *Ladies’ Home Journal*, ran articles directed at children and teens discussing fashion and beauty products, makeovers, Calories, and the psychology of eating. They published articles that attempted to persuade girls and young women to spend time on their appearance as it would affect them the rest of their life. These magazines encouraged girls to take an interest in their appearance because, as one Rykrisp advertisement in the 1950s stated “nobody loves a fat girl” (Brumberg, 1988). Young people were taught to believe early on that being thin was synonymous with popularity, attractiveness, happiness, and would ensure a high level of self-esteem. Brumberg makes the claim that girls were targeted because they made for a more receptive market for beauty products. The

baby boom provided a larger population of middle-income children with buying power and the desire to assert themselves in the adult world of shopping. *Seventeen* magazine originated in 1944 with the purpose of selling fashion and beauty products to teenage girls. Forty years later the craze to be skinny was still strong. In the 1980s, research found that about half of American females were on a reducing diet, (Brumberg, 1989).

A thin body was still as popular in the 1970s but with a new method to achieve the goal—fitness. Now fashion dictated that a person should not only keep the fat off, but should be physically fit as well. This movement saw an improvement in health as women were eating more fresh produce and consuming less fat, and because they were not simply starving themselves to become thin—they were exercising and eating better—they became much healthier.

With the continued attention on physique, eating disorders such as bulimia and anorexia nervosa have increased, primarily among females. According to Brumberg (1989), it is estimated that on some college campuses in the United States, the number of people suffering from anorexia nervosa could be as high as 20%. With the infusion of exercise into the maintenance of a fashionable physique and the extreme level of media coverage and glamorization of ultra skinny celebrities, exercise addiction and anorexia nervosa maintain a strong foothold in contemporary culture.

There have been numerous popular nutrition ideas and products circulated throughout the United States over the last two-hundred years. Michael R. Harris and James C. Whorton discussed some of them in *Fitness in American Culture: Images of Health, Sport and the Body, 1830-1940* edited by Kathryn Grover (1989). Iron was one of the first elements found to be important to the human body and it was first used by Hippocrates in 500 B.C.E., to treat diseases of the blood. However, its popularity grew in the mid 1800s when many companies began promoting it as a health restorer, a cure for weak muscles, a nerve calmer, appetite stimulant, and a digestive aid. These companies also claimed iron could reduce or eliminate hysteria and dyspepsia. Iron could be found in a number of tonics or naturally in such foods such as raisins or spinach (as popularized through the Popeye cartoons). Tonics came in two general classifications: Metallics and botanicals. Metallic bitters primarily contained iron, and although used to improve health, often contained such health limiting chemicals as strychnine, arsenic, and a variety of heavy metals.

According to Harris and Whorton (1989) the health minded people at the beginning of the 20th century were most interested in eating to improve and maintain good health. The term “new nutrition” was coined when scientists made some miraculous findings. They discovered macronutrients and their caloric values, a number of minerals important to the body, and the different rates of metabolism during a variety of activities. In 1912, a “newer nutrition” movement began with the discovery of the vitamin, named for vital amine. This was a huge boon for the nutrition industry, as people were fascinated by vitamins and how their absence could cause diseases—such as a deficiency of vitamin C which caused scurvy or a deficiency of vitamin D which caused rickets. Vitamins became so popular that they could be found at some of the more posh restaurants and hotels in New York City (Grover, 1989).

Up until the late 1800s, a Calorie was pretty much a Calorie and one meal was as good as the next. There was no concept in the popular consciousness of a balanced meal or diet. But with the discovery of nutritive values of different foods, eating became something more complex and this opened up the arena for pseudo-physicians who claimed to know about the properties of foods and how they affected the body. The understanding of basic nutrition brought the battle for “the most nearly perfect food.” Milk was one of the first to carry this moniker followed by yeast and breakfast cereals. Some would even go so far as to call their products “miracle cures.” The public was gullible and would often abandon one “miracle cure” for the next new food fad. People were told by nutrition “experts” like William Howard Hay that food was a more powerful cure for disease than any medicine, and eating or avoiding certain foods would improve their health (Grover, 1989).

Advertising for foods and products grew to new dimensions and many truths were stretched. This left the public confused and many products came and went depending on the claims made by manufacturers with little regard for their efficacy. There was a product for nearly every ailment. At the forefront of people’s minds, however, was autointoxication. This was believed to be caused by constipation, and was said to drain energy and dull the senses (Grover, 1989). Roughage was said to eliminate this problem, but there were problems with people ingesting too much roughage. Laxatives were then the solution. And, as trends turned, roughage was back in style for the same reason it became popular in the first place, to express the intestines. Yeast came into vogue as the latest, greatest nutritional product. Yeast was said to cure constipation, improve complexion,

discourage colds, and reduce afternoon drowsiness. Amazingly, advertisers even claimed that cigarettes were healthy because they would help to improve digestion after a meal (Grover, 1989).

Acidosis was another pandemic and was said to cause a loss of vitality and a reduction to the resistance of disease. It was indicated by a sour stomach, heartburn, and gas. There were a number of cures for this ranging from citrus fruits to laxatives to cigarettes.

The nutrition craze became so popular that parents in the 1920s began to send their children to “nutrition camps” to help them gain weight, strength, and health. One piece of logic that prevailed throughout the different nutrient supporters was avoiding processed foods.

Using the signing of the Pure Food and Drug Act of 1906 as a starting point, James Harvey Young (1967) analyzes nutrition fads, their promoters, and some of their useless or dangerous products, in *The Medical Messiahs: A Social History of Health Quackery in Twentieth-Century America*. Young points out the difficulties law enforcement had in curtailing dangerous or useless elixirs, nostrums, remedies, and vitamins available for such problems as bacterial infections, obesity, dyspepsia, colds, and any number of things the gullible public was willing to swallow. Many of these potions were habit forming or addicting as they contained ingredients such as cocaine, opium, and alcohol. Others, such as *Marmola*, which was used as a body fat reducer, contained dangerous ingredients like dissected thyroid gland from various animals. The majority of the medical industry was against this product and was supported in their efforts to ban its sale by the AMA, but they had a difficult time convincing the public, who enjoyed the resulting weight loss, that it was dangerous.

Young (1967) also traces the career of one master showman who made a living selling useless or dangerous “health products” across the country. Adolphus Hohensee took his show on the road after being convicted of mail fraud. As had scores of others he revived the ancient art of the popular health lecture course. He was very careful about what information he put on paper and made sure not to link his products with his pamphlets. The FDA worked for a number of years to put him out of business seizing his printed material and levying fines, but, he always returned altering his speeches and labels just enough to squeak by until the laws became more specific. He eventually spent a year in jail, but was back at his quackery soon after, earning thousands of dollars in a single night.

The peddler's modus operandi was to scare the public into believing that their current way of eating was going to kill them before their time. By purchasing these "miracle" products they would restore their health and vitality. Part of their success was due to the scientific breakthroughs of the time which were widely publicized and helped to establish the nutritional make up of foods as well as their nutritional limitations (that Hohensee claimed was killing the public). They were not entirely wrong. Many people at that time were malnourished and did not receive adequate amounts of fresh produce due to poor transportation and a lack of refrigeration. It was especially difficult for people in the northern regions to obtain fresh produce in the winter. To combat this failing, many food manufacturers began to enrich packaged foods with vitamins and minerals. The law would eventually catch up to crooks of foul products, but the battle continues today to keep claims honest and products safe.

DIET ENCYCLOPEDIA

Amino Acid Super Diet, The

Claims: “Lose weight,” “build willpower,” “beat depression,” “suppress your appetite,” “stimulate creative energy,” “Look healthy and feel strong.”

Overview: This diet purports that there are seven amino acids which help a person lose body fat. They are: phenylalanine, tyrosine, arginine, ornithine, lysine, methionine and tryptophan. These acids act on the brain to help a person prevent compulsive eating, burn fat, build muscle tissue, register fullness, and eliminate the desire for sweets. These amino acids cannot be supplemented; they must be ingested in the form of food. There is a list of foods rich in these seven amino acids: dairy products, meats, eggs, nuts, beans, legumes, and certain fruits and vegetables. A list of foods to avoid due to their high salt content include, cured meats, processed foods, candy, cakes, Japanese foods, frozen lima beans, and most sauces and dressings, just to name a few. The diet begins with a daily 800 Calories of low fat foods for the first week, and increases to 1,000 Calories a day for the subsequent weeks until the desired weight loss is achieved. Week One’s menu is rigid, but beginning with week two, the dieter is given a choice of developing their own menu or altering the first week’s menu to their liking, which can include sweets and certain gourmet meals from the provided recipes. There is an additional menu and food choices listed for vegetarians, with a food combining list for completing proteins with complementary foods. Maintenance is accounted for with the author’s “Seven Rules for Slimness”: 1) stay away from junk food, 2) stay with natural foods, 3) stay away from excess sugar, 4) stay with low-fat foods, 5) stay away from excess salt, 6) stay with perfect-protein foods and 7) stay with a well-balanced diet. There is no mention of exercise, and there is a section for women.

Reference: Gary Zisk—*The Amino Acid Super Diet*.

Anne Collins Weight Loss Program

Claims: “Forget about fad diets and weight loss pills! A balanced diet with regular exercise is the best way to lose weight and keep it off. The *Anne Collins Diet* is a great weight loss plan with lots of

advice about dieting, exercise, diet-motivation and long term weight control. No Gimmicks! Worth over \$120.”

Overview: Consists of 6 different diet plans including low carbohydrate, 14 day weight loss booster diet, 28 day quick-start diet, and a vegetarian diet. It includes free online support, exercise tips, fast food options, recipes, 500 pages of diet advice and a money back guarantee.

Reference: *Anne Collins Weight Loss Program 2005* website—<http://www.annecollins.com/>.

Apple Cider Vinegar Diet

Claims: “This diet was developed for normal people, with normal busy lifestyles, a normal income, and wishing to lose weight, cellulite, and detoxify successfully without being on a fad diet.”

Overview: There are many versions of this diet. One consists of a seven day eating plan that instructs no drinking of any fluids during a meal, but instead drinking a glass of water with a dash of apple cider vinegar 45 minutes prior to a meal.

Proponents of this diet purport that it has fat burning properties, speeds up metabolism and stimulates the thyroid gland. Some recommend drinking it alone or with water and others advocate taking an apple cider pill.

Reference: *Zest for life* website—<http://www.anyvitamins.com/apple-cider-vinegar-diet.htm>. *Diet Information* website—<http://www.diet-i.com/diets/cider-vinegar-diet.htm>.

Atkins Diet

Claims: “You will lose weight.” “You will maintain your weight loss.” “You will achieve good health.” “You will lay the permanent groundwork for disease prevention.”

Overview: The cornerstone of the Atkins philosophy is a four-phase eating plan in conjunction with vitamin and mineral supplementation and regular exercise. Phase 1 or “Induction” restricts

carbohydrate consumption to 20 grams each day, obtaining carbohydrate primarily from salad and other non-starchy vegetables. Phase 2, called “Ongoing Weight Loss (OWL),” adds carbohydrates in the form of nutrient-dense and fiber-rich foods, by increasing to 25 grams daily the first week, 30 grams daily the next week and so on until weight loss stops. Then subtract 5 grams of carbohydrate from daily intake so moderate weight loss is sustained. Phase 3 is the “Pre-Maintenance” phase to help the dieter make the transition from weight loss to weight maintenance by increasing the daily carbohydrate intake in 10-gram increments each week to maintain very gradual weight loss. Phase 4 is “Lifetime Maintenance.” The dieter is instructed to select from a wide variety of foods while controlling carbohydrate intake, to ensure weight maintenance and a sense of well-being. This lifestyle is the foundation for a lifetime of better health. Unlike a diet, the Atkins Nutritional Approach™ is a lifetime nutritional philosophy, focusing on the consumption of nutrient-dense, unprocessed foods and vita-nutrient supplementation.

The book explains that the diet works because the process of lipolysis (the breakdown of fatty acids) in overweight people does not function properly due to high insulin levels. Most obese people become so adept at releasing insulin that their blood is never really free of it, and they are unable to make use of their fat stores. Insulin’s main purpose is to remove glucose from the blood and store it, often as fat. With a super low carbohydrate diet the body slips into a state of ketosis (abnormally high level of ketones in the blood stream creating an acid pH) breaking the cycle of excess insulin. Lipolysis can produce the majority of the body’s energy. In other words, due to the extremely low intake of carbohydrates, the body derives most of its energy from the breakdown of fat, whether stored or recently consumed.

Reference: Robert Atkins—*Dr. Atkins' New Diet Revolution*.

Beverly Hills Diet

Claims: You will not be “hungry even in the most concentrated early phases of the diet,” “nutritionally balanced,” “the foods provide a high percentage of essential” nutrients to meet “our body’s needs far better than the traditional ‘balanced’ American diet,” “blood pressure and cholesterol levels improve.”

Overview: This is a food-combining diet. In its simplest form, the person following this diet may only eat: 1) fats with proteins, 2) fats with carbohydrates, and 3) fruits by themselves. Essentially, carbohydrates should not be mixed with proteins, or fruits with anything. One must allow several hours between eating different food types. If fruit is ingested with anything else, it will cease to digest causing fermentation and rotting of anything that is in the system at the same time. However, there are some fruits that do not have the proper enzyme make-up and should not be ingested at all: citrus fruits and juices, and all melons except watermelon. The book explains that digestion is a process of enzymes. There are different enzymes for the three different food groups: protein, carbohydrates, and fats. Certain enzymes work on certain types of foods; if protein and carbohydrates are consumed at the same time, neither will digest because the enzymes counteract each other. If the food eaten is improperly combined, it will not digest, and anything not digested turns to fat. Even a drop of milk in coffee will make all the carbohydrates in the system indigestible. Mazel, the author, lists three foods that should be avoided at all cost: sugar, sodium, and dairy products. In addition, she attacks common “diet” foods, and says one should not eat cottage cheese, skinless chicken, eggs, or raw vegetables, to name a few.

Nothing but fruit is eaten the first 10 days. Over the next week, the dieter begins by eating one day of breads and one day of vegetables. Next they are allowed to eat one meal of chicken (with skin). More variety is incorporated into the plan during the third week and beyond, but the staple is fruit. Physical exercise is discouraged. She says if a person really feels they must exercise, they should only walk or perform some other type of aerobic activity, but they should not, under any circumstances, lift weights. “Building muscles is obviously not our objective... Before that fat can leave your body, it has to soften up, which is precisely the purpose of those enzymes you have been experiencing.” There is a section on how to shop, how to eat at parties and restaurants, and a section of recipes.

Reference: Judy Mazel with Susan Shultz—*The Beverly Hills Diet*.

Blood Type Diets

Claims: Proponents claim that certain foods will cause inflammation or cannot be tolerated by certain people, causing excess body fat gain. “A person can reduce body weight by as much as 10% in four weeks without reducing Calories.”

Overview: A person can have their blood tested through any number of companies that offer this diet, or their doctor. After a person knows what type of blood they have they can refer to a list describing the different tolerances for their particular type. They will have two lists of foods: a banned list and a permissible list.

Reference: *Yorktest* Website—<http://www.allergy-testing.com/index2.html>. *Dr. Cohen's 1st Personal Diet* website—<http://www.1personaldiet.com/>.

Body for Life Diet

Claims: “Lose fat and increase your strength by exercising less, not more.” “Create more time for everything meaningful in your life.”

Overview: This book begins and ends with testimonials from people who have successfully completed the program. The first step of the program is the decision to change, and it gives specific techniques to help: identify reasons to change, write them down, assign goals, decide how to achieve goals, and read them over every morning and night. Next is his trademarked “Training-for-Life Experience,” which is a program of exercise strategies. This section states that the dieter should weight train intensely for no more than 46 minutes three times per week, and aerobic train for 20 minutes, first thing in the morning on an empty stomach, three times per week. His next trademarked phase, “Eating-for-Life Method”, consists of eating six small meals (containing portions of protein and carbohydrates) a day, consume one tablespoon of unsaturated oil daily, drink at least 10 cups of water daily and use performance-nutrition shakes (e.g., Myoplex) for optimal levels of nutrients. This section is followed by techniques for “Staying on Course”: be prepared for obstacles, honor self-promises, focus on progress (not perfection), and let others help you. This book also contains charts for diet and exercise, and an illustrated exercise guide.

Reference: Bill Phillips with Michael D'Orso—*Body-for-life*.

Cabbage Soup Diet

Claims: “Lose weight fast and eat as much of certain foods as you want.”

Overview: This is a low-fat, high-fiber diet, which should be followed for seven days, only. Dieters are instructed to drink at least four glasses of water every day, consume all the cabbage soup they want, and take a multivitamin. Additionally, they can eat, on specific days, a variety of foods: fruit, unsweetened teas, fruit juices, vegetables (except beans, peas, corn and potatoes), non-fat milk, meat, tomatoes, and brown rice. If the dieter chooses to follow this diet beyond the seven-day plan, they must wait two weeks before doing so.

Reference: Margaret Danbrot—*The New Cabbage Soup Diet*.

California Diet and Exercise Program, The

Claims: “The solution to our national overweight problem is to encourage people to eat more.”
“Eat more, weigh less.”

Overview: Intended for the moderately overweight adult, this diet advocates slow and steady weight loss with an “eye on the big picture”, and uses exercise in the form of “Play.” Exercise should be fun so one can “Play” instead of work. This is particularly effective when friends join in the Play. It advocates wasting energy: stand, do not sit; walk, do not stand; run, do not walk, et cetera. “Be energetic, that’s what slim people do.” The weight loss plan should take one year, but is intended to be a life-long commitment. The book offers nutrition advice, sample menus, recipes, food lists and their nutritional values, and play plans.

Reference: Peter D. Wood—*The California Diet and Exercise Program*.

Cambridge Diet, The

Claims: “You alone can do it, but you can’t do it alone.”

Overview: This diet consists primarily of a nutritional supplement or meal replacement that contains 100% of the nutrients recommended by the USRDA (at the time of press, if 3 “meals” are consumed). They offer several programs, depending on the needs of the dieter, which range from 420 to 1500 Calories per day. Each serving contains 110 to 170 Calories. When followed for maximum weight loss, this is an extremely low Calorie diet (420 Calories per day) that results in a good deal of water excretion during the first week (resulting in up to 10 pounds of weight loss). The program suggests using their counselors to assist with the program. The counselors use a four-phase process for weight management: preparation, weight loss, stabilization, and maintenance. Before a person begins this program, they must be free of serious medical problems, and should consult their physician. The original Cambridge diet was launched commercially in the USA in 1980 and the UK in 1984. There has been a great deal of research on this diet, with a high number of studies and papers to prove its efficacy. The original diet consisted of 330 Calories per day and the newer diet dubbed “Cambridge Food for Life” (FFL) uses 420 Calories. The original formula contains only 75% of today’s USRDA requirement for protein. The Cambridge Diet Products consist of Cambridge Soups, Cambridge Super Oats, Cambridge Nutrition Bars and Cambridge Shakes, and do not contain drugs, herbs or medicine.

Reference: John Marks and Alan Howard—*The Cambridge Diet*.

Carbohydrate Addicts Diet, The

Claims: “This program is intelligent and scientifically sound. No matter what your lifestyle, it is easy to follow. It involves no weighing or measuring. It is satisfying. And it works. It is a plan that will help you live the life you want.” This “Diet allows you to change your eating habits without depriving you of the foods you love in the quantities that satisfy you.”

Overview: This book offers a diet which is intended to normalize a person’s malfunctioning insulin response. It does this through meals high in fiber and low in carbohydrates and fat, called “Complementary Meals”, one to three times a day. The dieter should follow these guidelines: eat Complementary Meals and one “Reward Meal” (consists of any type, quantity, and combination of

food) every day. The reward meal must be consumed within one hour, and any alcohol must be consumed during that time. There is no snacking in between meals allowed. Complementary Meals can be prepared in any fashion as long as carbohydrates are not used (such as flour, sugar, bread, et cetera). The foods allowed for the Complementary Meals include, most meats, non-starchy vegetables, two ounces of milk or cream, low-fat cheeses (without added sugar or wine), and low-carb desserts (such as gelatin). Condiments are acceptable if they do not have sugar (relish and ketchup have sugar). Exercise is not necessary for this diet to work. The authors recommend maintaining a moderate level of physical activity, such as walking, gardening, et cetera. This book includes a test to determine if a person has carbohydrate addiction, plus many success stories, strategies for success, how to individualize the program, sample meal plans, and food lists.

Reference: Rachael F. Heller and Richard F. Heller—*The Carbohydrate Addict's Diet: The Lifelong Solution To Yo-Yo Dieting*.

Coca-Cola

Coca-cola was invented by Dr. John Pemberton, a pharmacist in Atlanta, Georgia. Prompted by a prohibition law in effect at the time, he developed “Pemberton’s French Wine Cola.” He mixed up his secret formula containing, in part, lime, cinnamon, coca leaves, and the seed of a Brazilian shrub, in a brass kettle in his backyard on May 8, 1886. He began selling “coke” in Atlanta’s largest pharmacy, Jacob’s Pharmacy, as a non-carbonated health tonic, for 5 cents. The extracts from the caffeine-rich kola nut and cocaine helped relieve headache and upset stomach. It was advertised as “the drink that relieves nervous exhaustion.” In 1913, the use of cocaine became controversial (and was outlawed the following year), and spent coca leaves were used instead. Later, carbonated water was added when a soda jerk accidentally used the wrong spigot, and Coca-Cola was born.

Reference: *The Coca-Cola Company* website—http://www2.coca-cola.com/heritage/chronicle_birth_refreshing_idea.html.

Corpulence, Letter on

This was the first low carbohydrate diet. In 1863 William Banting wrote *Letter on Corpulence Addressed to the Public*, as a service to his fellow man. Banting was an undertaker who began gaining weight in his 30s. A physician told him to take up exercise, which he did. Rowing two hours a day caused him to actually gain weight because of the huge appetite he developed. He was very troubled about his weight because it caused him so much discomfort, he could not tie his shoes, and he had to go downstairs backward for fear of falling. His knee and ankle joints were bothering him, and he became winded after any exertion. He developed several other health problems, including poor sight and hearing. Banting went from physician to physician trying to find relief from his medical problems and obesity. He finally came upon Dr. William Harvey, an ear, nose, and throat specialist who had recently taken in a seminar on diabetes, which discussed the role the liver plays in secreting a sugar-like substance (gluconeogenesis). He was very interested in Banting's case and began studying him in depth. The result was that Harvey put Banting on a carbohydrate-restricted diet. He was allowed non-starchy vegetables and some pudding. This new diet was very successful. He lost nearly a pound a week for the first year, and was able to move about at will without being hampered by the discomfort of excess weight. His physical ailments vanished, and he felt better than he had in 20 years.

Reference: William Banting—*Letter on Corpulence*. *William Banting: the Father of the Low-Carbohydrate Diet*—<http://www.second-opinions.co.uk/banting.html>. *Letter on Corpulence: Addressed to the Public*—<http://www.lowcarb.ca/corpulence/>.

Dieting For Dummies

Claims: “Discover how to: develop an effective weight-loss strategy, eat healthfully at home and in restaurants, cope with cravings and setbacks.”

Overview: This is a no-nonsense educational guide to healthful nutrition, based on the USDA's Food Guide Pyramid. The book is written by a member of the America Dietetic Association and is loaded with useful tidbits designed to help the reader make smart eating choices, overcome adversity, and become physically fit. Some of the other topics this book addresses are, psychological aspects of excess weight, eating disorders, adapting healthy eating to an individual's habits, using

medications or surgery for weight control, tips for maintaining a healthy weight, getting help from others, myths, cooking, eating out, grocery shopping, and an appendix listing weight management resources.

Reference: Jane Kirby—*Dieting for Dummies*.

Dr. Phil, The Ultimate Weight Loss Solution

Claims: “Will change the way you behave and think about food, weight loss and ultimately, yourself.” “There is no counting Calories or grams, no measuring, no memorizing.” “You don’t need willpower.”

Overview: This book is based on seven keys to weight control. They include: “Right Thinking” which is intended to help improve self-control; “Healing Feelings” focuses on controlling emotional eating; “A No-Fail Environment” helps to control the dieters external environment; “Mastery Over Food and Impulse Eating” helps to control habit. There is a chapter on food control, a simple method for balanced, nutritional eating; one on “Intentional Exercise” which discusses the importance of exercise for controlling body weight; and finally, “Your Circle of Support” shows how to assemble a supportive circle of people. Goal setting with realistic expectations is the focus of one chapter, and a chapter before the person gets started, includes a readiness quiz. Dr. Phil concludes with a chapter for those who think they are “weight loss resistant,” how “weight is managed, not cured,” and an appendix with the script for stress relief, food lists and a workout diary.

Reference: Phil McGraw—*The Ultimate Weight Solution: The 7 Keys To Weight Loss Freedom*.

Dukan Diet, The

Claims: “With the Dukan Diet and its 100 foods allowed as much as you want, you can lose weight without counting calories and without any hunger sensation. There is no yo-yo effect with the 4 phases of the Dukan Diet. The Dukan Method will help you to stabilise your True Weight for life”.

Overview: “Learn how to eat correctly without gaining weight back. Proteins are the main actors of the fight against obesity, reinforced by the oat bran efficiency. The Dukan method is a hyper protein diet which will help you to get fit. The Dukan Diet, an easy diet to follow to lose weight fast and to eat without counting calories. The pleasure to eat with more than 800 recipes from starter to dessert, with the Dukan coaching.”

Reference: The Official Dukan Diet website - <http://www.dukandiet.co.uk/>.

Endocrine Control Diet, The

Claims: “Decreases the secretion of insulin, reduces hunger, releases fat from storage while preserving lean muscle tissue, and fosters feelings of relaxation and well-being.” “Lose eight to fourteen pounds in the first two weeks and two to four pounds each week thereafter.”

Overview: The authors say “virtually everyone who has a strong tendency toward weight gain and who has a difficult time losing weight and keeping it off, has an identifiable hormonal disorder” called “hyperinsulinism.” They go on to explain that this book does not promote a dangerous level of ketosis which is caused by an “unbalanced and uncontrolled diet” in which fat is unlimited “such as those advocated by Dr. Stillman and Dr. Atkins.” Instead they insist that behavior modification is a necessary step in success, and this low-Calorie, low-carbohydrate diet which, authors say, increases free fatty acid mobilization, is the best method for permanent weight loss. This diet is made up of three phases: “Weight Loss;” which requires 650 to 1,000 Calories including 20g to 35g of carbohydrates (all of which must be complex) per day. Total daily requirements of protein are 55g to 75g with ½ cup of vegetables, one serving of fruit (or a slice of bread), eight glasses of water and vitamin and mineral supplements. The dieter is not allowed dairy foods, alcohol, added fats or simple carbohydrates. They should monitor their ketosis and body weight. In addition, there is a chapter on exercise and stretching. Moderate, regular aerobic activity (such as walking) is highly recommended for at least 15 minutes every day.

The second phase is called “Stabilization” and is basically a process of adding five grams of carbohydrates and one ounce of protein each day until weight loss is stabilized. Dairy products can be introduced at this phase.

“Maintenance” is the third and final phase of this program. To maintain, the dieter should either follow the strategy of their last week of the Stabilization phase or simply eat just enough of a low fat diet to maintain weight. This book is loaded with information on the endocrine system (primarily insulin), nutrients (with food lists segregating complex from simple carbohydrates, proteins and fats, et cetera), support strategies, recipes, a special chapter for doctors, and an appendix with a food list of macronutrients.

Reference: Calvin Ezrin and Robert Kowalski—*The Endocrine Control Diet: How To Beat The Metabolic Trap And Lose Weight Permanently.*

F-Plan Diet, The

Claims: “Lose weight more quickly and easily than with the same Calorie total of other foods.”

Overview: This is a Fiber based diet (hence, the “F” in the title). The author purports that eating high fiber foods will help one lose weight because they take longer to chew (less is eaten over a given period of time), it takes longer to pass through the GI (gastro-intestinal) tract (one feels full longer), and less of it is absorbed by the body (no Calories can be stored). In essence eat less energy, but feel more satisfied and lose excess body fat. The book recommends eating 1,000 to 1,500 Calories a day with 35g to 50g of dietary fiber per day and plenty of non-Calorie liquid. At least one glass of non-fat milk is required every day for calcium needs, two whole fresh fruits, a granola-like breakfast cereal providing 15g of fiber and unlimited amounts of high-fiber vegetables. The book is filled with information about fiber, illnesses caused by lack of fiber, a food-fiber chart, the 20 top fiber foods (such as: legumes, whole grains, certain fruits and vegetables), sample menus and recipes.

Reference: Audrey Eyton—*The F-Plan Diet.*

Fat Destroyer Foods: The Magic Metabolizer Diet

Claims: “Lose up to five pounds a week without counting Calories.” “End that ‘on again, off again’ dieting by preventing weight regain.” “Keep you feeling that you can lick the world.” “Nourish your body better than ever.” “Offer you attractiveness, better health, longer life.” “Make you want to shout the news to the rest of the world.”

Overview: This is a low carbohydrate diet which makes use of three different levels of protein consumption relative to total Calories: High, which limits carbohydrates to no more than 200 Calories; Higher, which limits carbohydrates to no more than 100 Calories; and Highest, which allows just trace amounts of carbohydrates. The premise of the diet is that fat and protein “destroy fat” (stored body fat) but “a protein or fat Calorie paired with a carbohydrate Calorie makes two fat producing Calories.” It claims, “when you cut out carbohydrates, your body excretes hundreds and hundreds of extra Calories a day.” It also compares the physics of “Calories in vs. Calories out” with the belief that the earth is flat. The book states that if the dieter is not losing as much as they want to as quickly as they want to, they should eat fewer carbohydrates. If they still want to lose more, they should eat less carbohydrates and fat, and if they want to lose more still, they should limit their total Calorie intake. Non-starchy vegetables are encouraged, and there is a chapter about incorporating rice and sandwiches into the diet. There is a complete table of macronutrients of common foods, a 30 day eating guide, and sample recipes.

Reference: Sydney Petrie and Robert Stone—*Fat Destroyer Foods: The Magic Metabolizer Diet.*

Fat Flush Plan, The

Claims: “Stimulates lymph flow to flush out toxins and cellulite FAST!” Reduces tummy fat and fatty deposits on hips, waist and thighs with no hanging skin!” Boosts energy, cleanses the liver and supports the heart.” Results in younger looking skin, shiny hair and stronger nails.”

Overview: Designed to be a seasonal diet and used four times a year. Phase 1 should last from two weeks to one month and consist of 1100-1200 Calories per day. This phase is dedicated to cleansing the liver. There is a list of forbidden foods. These foods fall into the categories of Fermented (i.e., vinegar, alcohol), Artificial (e.g., transfatty acids, artificial sweeteners), and Yeast (e.g., beer, bread). The author says these items disrupt the detoxification pathway of the liver. The author prescribes

eating eight ounces of protein, two tablespoons of flaxseed oil, two eggs, unlimited amounts of non-starchy vegetables, two fruits, eight glasses of diluted cranberry juice, one teaspoon of psyllium, a handful of different herbs and spices to increase metabolism, and a cup of hot water with ½ of a lemon squeezed in it. No dairy, grains, or starchy vegetables including, carrots, peas, and beans are allowed. Exercise is recommended on a daily basis and is directed at the lymphatic system.

Bouncing on a rebounder (mini-trampoline) at least five minutes a day along with a brisk walk (while vigorously swinging the arms) for at least 20 minutes, plus strength training twice a week is highly encouraged. It is recommended to keep a journal of body measurements and response to the program in each of the stages. Phase 2 shows an increase in caloric intake (1200-1500 Calories per day) and should be followed until desired weight is reached. This phase is basically the same as Phase One except for the gradual addition of “friendly carbohydrates” (from a list) one at a time, noting the body’s response to them. Exercise is increased to 30 minutes a day. Phase 3 is for maintenance and allows approximately 1500 Calories a day. Dairy products may be gradually added along with friendly carbohydrates, paying close attention to the body’s response. Exercise is increased to at least 40 minutes per day.

Reference: Ann Louise Gittlemann—*The Fat Flush Plan*.

Fast Diet, The

Claims: “If you stick to this plan then you should lose around 11lb (0.46kg) a week if you are a woman, slightly more for a man. You should not only lose weight but also enjoy a wide range of health benefits. Studies of intermittent fasting show that not only do people see improvements in blood pressure and their cholesterol levels, but also in their insulin sensitivity.”

Overview: “With 5:2 intermittent fasting you eat normally five days a week and diet two days a week, cutting your calorie intake for those two days to a ¼ of their normal level. This means that on, say, a Monday and a Thursday you will eat 500 calories if you are a woman, 600 if you are a man.”

Reference: The Official Fast Diet website - <http://thefastdiet.co.uk/>.

Food Combining/Blood Typing Solution

Claims: “An invaluable resource that can lead you on the path to a brighter, happier, healthier future.” “Can help you change lifelong habits so you can maximize your health while also losing weight.”

Overview: The premise of this book is a combination of the theories of food combining and eating according to a person’s blood type. Food combining entails never mixing proteins with carbohydrates, or fruits with anything. Dairy products are allowed, but in strict moderation. Vinegars are highly discouraged, and beverages should include herbal teas or non-carbonated water, and should not be drunk within 15 minutes before or 30 minutes after a meal. The blood type theory stems from the four different human blood types. The theory states that type O was the first blood type in humans, and was found in the hunter-gatherers from 50,000 B.C.E. These people should attain most of their nutrition from eating meats. The theory states that people with this blood type cannot properly metabolize carbohydrates. Type A people stem from agricultural development from 25,000 B.C.E. to 15,000 B.C.E. People with this blood type are more suited to be vegetarians. Type B people are a combination of type O and type A, evolved from nomads between 15,000 B.C.E. and 10,000 B.C.E. People with this blood type can eat virtually anything including raw dairy products, but should avoid peanuts, corn, wheat and lentils. Type AB developed within the last 1,500 years. People with this blood type do best on seafood, dairy, nuts and grains, but as with the other blood types, should avoid wheat. The author recommends a broad variety of exercise for all blood types; strength and aerobic training, along with stretching and yoga to improve balance, flexibility and strength. More specifically people with blood type O require the most exercise, both aerobic and anaerobic. Blood type A people do best with gentle exercises such as yoga or cycling. People with blood type B and AB do well with moderate exercise. The enzyme lipase is recommended as a supplement for weight loss and improved digestion. This enzyme is only found in raw foods, and as the body gets older its production of digestive enzymes decreases. This book also contains two pages of success stories, blood type food lists and menus, recipes, and an appendix of preferred products.

Reference: Dina Khader–*The Food Combining/ Blood Type Diet Solution: A Personalized Diet Plan And Cookbook For Each Blood Type.*

Grapefruit Diet

Claims: "Lose 52 pounds in 2 ½ months." "Lose 10 pounds in 12 days."

Overview: This diet began as the Hollywood Diet in the 1930s. Grapefruit is said to have fat-burning enzymes. As with the Apple Cider Vinegar Diet, this is a generic diet with many different variations, but most versions instruct to eat half a grapefruit as part of every meal along with limited portions of other foods. An example of a day's menu is half a grapefruit with tea or coffee for breakfast; half a grapefruit with a protein source such as eggs or lean meat, non-starchy vegetables, and a no-Calorie beverage for lunch and again for dinner.

One version of this diet prescribes eating a half a grapefruit or 8 oz of grapefruit juice with every meal. The meals consist of any quantity of meats, fats, and vegetables. The only measurable carbohydrate comes in the form of milk as a bedtime snack. However, in the directions it clearly states not to eat before bedtime. The "Grapefruit-Diet-Plan" also recommends regular exercise and not skipping meals.

Reference: *Diet Reviews and Information* website—<http://www.chasefreedom.com/grapefruitdiet.html>. *Internet Diets for You*—<http://www.idiet4u.com/diets/fruitjuicediet.html>. *Grapefruit Diet* website—<http://www.grapefruit-diet-plan.com/>.

Harvard Square Diet, The

Claims: "Not just another diet book... an entirely different approach to both sensible eating and guaranteed weight loss without starving." "Lose 10 pounds in 8 weeks." "Not cluttered with special diets." "Develop new health habits that can effectively help you control your weight and improve your health for the rest of your life."

Overview: This diet is about portion control. It instructs a person to eat whatever they normally would, but cut the amount in half or exchange high Calorie foods for low Calorie foods. Common sense, nutrition knowledge, menu planning and thought is required for this diet to work. The rules

of the program: 1) eat three (half) meals a day, 2) begin each main meal with a garden salad, 3) have two (half or low Calorie) snacks, alcohol is acceptable as long as one drinks less (only one martini instead of three), 4) exercise to burn 300 Calories five days a week, 5) take two days "off" every week and eat "normal-sized" meals, this, they say, helps improve resolve. Other features of the plan include a sample menu of what a person might normally eat over the course of a few days and how it can be altered to meet this diet's plan. A specific menu is not given, just recommendation on how to cut Calories from one's diet. It gives advice on how to deal with special occasions, smart eating strategies, and that planning ahead is one of the most important factors for success. The book advises beginning the diet one week after reading the book to give ample time to plan and prepare both physically (shopping, goal setting, nutrition education) and psychologically (soul searching, telling friends and relatives who can act as a support group, et cetera). The book does not recommend supplements, but says if a person really wants to take some they should only take a low-potency multivitamin with iron.

Reference: Fredrick Stare—*The Harvard Square Diet: The Foolproof Method Of Girth Control*.

HCG Diet

Claims: hCG can “reset your metabolism” so you lose as much as a pound a day without feeling hungry or weak.

Overview: HCG (stands for [human chorionic gonadotropin](#)) has nothing to do with it. The hCG diet limits you to 500 calories a day for 8 weeks while taking hCG, either by getting a shot or by taking a “homeopathic” product, such as oral drops, pellets, or sprays, which you can buy at the store.

None of this is approved by the FDA for weight loss.

Reference: Jacobson, M. T., (Dec. 1, 2013) “HCG for Weight Loss,” WebMD webstie - <http://www.webmd.com/diet/hcg-and-weight-loss>

I Love NY Diet, The

Claims: “Immediate and rapid weight loss.” “Utter simplicity.” “Freedom from decision making.” “Available in restaurants.” “No Calorie counting.” “Freedom from suffering.” “Can keep you healthy and improve health.” “The I Love NY Diet, unlike most fad diets, is health promoting.”

Overview: Developed in the mid 1950s by the Bureau of Nutrition, New York City Department of Health. This is a low fat, high fiber diet with reasonable amounts of protein that teaches sensible eating habits: 1) eat slowly, savoring every morsel of flavor, 2) never skip a meal, 3) drink all the non-Calorie fluid before and during a meal you want, 4) eat a salad before your main course, 5) limit salt intake and 6) do not overeat. The main features are a 7-day crash diet that does not limit Calories, but limits the foods eaten. One is instructed to eat their fill while following the menu to the letter eating low Calorie, high fiber foods 7 times per day while drinking plenty of low or non-Calorie beverages. The second week is called an “Eating Holiday,” and a similar menu is given, but with a larger variety of foods. Exercise is recommended for faster results and a healthy looking body. “Exercise helps you get that firm, fit look of celebrities in *PEOPLE* magazine.” After one week of the eating holiday, if more weight loss is desired, simply repeat the first two weeks. If no more weight loss is desired, the reader is instructed to begin the maintenance phase that consists of the good eating habits and conditioned response developed during the first two weeks. The book also lists good and bad food choices, and recipes from around the world.

Reference: Bess Myerson and Bill Adler—*The I Love NY Diet*.

Jenny Craig

Claims: “A highly effective combination of nutritionally sound, Calorie-controlled menus, behavioral guidance and moderate exercise personalized for each individual life-style.”

Overview: This book says it is not a quick fix, does not contain magic tricks, recipes for secret potions, or offer hollow promises. It does, however, teach five fundamental skills to enable the reader to adopt a new style of living: Set S.M.A.R.T. (Specific, Motivating, Attainable, Reasonable,

Trackable) goals. These are goals that are highly motivating for a person to achieve, and most important, they are realistic.

Recommendations for achieving goals include talking to yourself (speak to yourself in a positive manner, say nice things to yourself), self-monitor (keep track of your own thoughts, feelings and actions), self-reward (give yourself an appropriate reward for goals achieved. “Behavior that is rewarded is behavior that is repeated.”)

The book includes many forms and boxes for the reader to fill out to keep track of life-style habits, exercise, and food. The author uses Food Group Boxes, with different categories of foods such as fruits, vegetables, meats, et cetera, to keep track of intake, rather than counting Calories. She offers a section on nutrition, food exchange lists, and portion sizes. Craig discusses exercise quite extensively using ACSM’s F.I.T.T. (Frequency, Intensity, Time, and Type) principle coupled with: planning ahead, setting reasonable goals, signing an exercise contract with one’s self, working out with a buddy, and using positive self-talk as a means to achieve and maintain a fit body.

Reference: Jenny Craig with Brenda L. Wolfe—*Jenny Craig's What Have You Got To Lose? A Personalized Weight Management Program.*

Live Fit

Claims: “Live Fit is a whole-person approach to weight loss, maintenance and improving health and fitness. Gain control of your eating, and health, and Live Fit for Life. When you are ready to change, you are ready for Live Fit.”

Overview: The 9 week program uses the Power of Three: Nutrition, Behavior, and Physical Activity to help the participants’ life balance between enjoyment, freedom and good health. The program allows the individual to eat their favorite foods in such a way that it does not create health issues. Live Fit focuses on the person’s overall health and happiness – not weight.

Reference: Official website – <http://livefitonline.net>.

Macrobiotic Diet

Claims: “May help to balance women’s hormones and help with menopause, premenstrual syndrome, and prevention against breast cancer and endometriosis.”

Overview: This diet was originally designed by a Japanese educator named George Ohsawa who took the name from the Greek root words meaning “long life.” This diet is based on the concept of simplicity being the key to optimal health. Ohsawa’s ideas were generally considered too restrictive by nutritionists and shunned. Michio Kushi, however, expanded on Ohsawa’s ideas and developed the low fat, high fiber diet used today.

There are ten guidelines to macrobiotics: 1) 50%-60% of each meal should consist of whole grains, 2) one to two bowls of soup per day, 3) 25%-30% of daily intake should be vegetables, 4) 10% should be beans, 5) lean meats should be eaten several times per week, 6) Seeds and nuts should be eaten in moderation, 7) non-tropical fruits should be eaten several times a week, 8) desserts should be eaten in moderation, 2-3 times a week, 9) only unrefined oils should be used, and 10) specific condiments and seasonings such as sea salt and brown rice vinegar should be used.

Reference: Cathy Wong—*The Macrobiotic Diet*.

Marmola

A weight reducing drug, Marmola was made primarily from the desiccated thyroid glands of a variety of animals, with laxatives, and several other inert ingredients. Marmola was very popular in the early 20th century because it actually worked, sometimes too well. In 1907 physicians were very cautious about prescribing the drug, but nostrum dealers, ever eager to make a buck and not bound by the 1906 Pure Food and Drug Act, were happy to fill the distribution gap. Over the years, the amount of thyroid gland and laxatives were reduced but advertising continued, and when the slim fashion of the Gibson Girls in the Roaring Twenties hit, Marmola became even more popular. Movie stars like Constance Talmadge argued against obesity, and sales for Marmola skyrocketed. It was advertised to relieve the burdens of overeating and under-activity, blaming it on an under-active thyroid gland. This pleased the consumer, and sales continued to climb. The Federal Government knew this

product was dangerous, and used many methods to prevent the sale of Marmola, but the laws were not in their favor, and the manufacturer found a new angle to distribute and sell it, avoiding the law for a few more years. Many physicians felt it was irresponsible to recommend the same dosage of Marmola to all “patients,” because thyroid is such an important and difficult hormone to supplement. They said that only a few people actually have low thyroid levels, and that giving normal people additional thyroid hormone is criminal. It can result in rapid pulse, headache, nervousness, tremors, severe diarrhea, weight loss, sweating, and can cause a toxic state. After many years of failed attempts, the Federal Government was finally able to halt the sale and distribution of Marmola in 1938.

Reference: James Harvey Young—*The Medical Messiahs*.

Mayo Clinic Diet

Claims: “if you put the information in this book to work in your daily living, you’ll achieve and maintain the weight that’s right and healthiest for you.”

Overview: This plan is based on the “Mayo Clinic Healthy Weight Pyramid” which includes fruits, vegetables, carbohydrates, protein/dairy, fats, sweets, and physical activity. A person must also be familiar with and follow these five concepts: 1) know the number of daily Calories necessary (1200 for most women and 1400 for most men), 2) know the number of servings necessary from each food group, 3) know the appropriate serving size of a variety of foods, 4) keep a food journal and 5) eat a wide variety of foods. This informative book discusses the health risks of obesity, what obesity is, how one becomes obese, and understanding weight control. It then prepares the reader for the challenge of weight loss, and changing their physical and culinary habits. Another chapter explains that all Calories count, what foods are high in what macronutrients, how to shop for groceries, how to feel full on fewer Calories and how to eat out without overeating.

The book discusses the importance of physical activity and explains the difference between aerobic and anaerobic forms of physical activity. While this book does not offer exercise programs, it does give many explanations of different forms of exercise, and encourages the reader to keep a record of their activity. The book says it is a “Personal Coach” for weight loss, and gives useful advice for

maintaining one's motivation, overcoming obstacles, and how to become empowered to maintain healthy weight. There is a chapter explaining other popular diets, medications and surgery for weight loss, as well as a variety of recipes.

Reference: Donald D. Hensrud—*Mayo Clinic on healthy weight*.

Medifast

Claims: “Lose 2-5 lbs for the first 2 weeks, then 1-2 lbs per week thereafter.”

Overview: “Medifast food was developed by doctors, and our low-calorie meals are fortified with around 24 vitamins and minerals, and packed with protein and fiber to keep you feeling full. Eat any 5 Medifast Meals and one meal on your own a day.”

Reference: Official Medifast website - <http://www.medifast1.com>.

Moon Diet

Claims: “Lose up to 3kgs (6.6lbs) in a day.” “Leaves you with beautiful, glowing skin and helps combat acne.”

Overview: This diet is a 24 hour long fast which commences at the change of the moon's cycle. The dieter may drink liquids including water, tea, coffee, while fruit and vegetable juices are allowed but not recommended. Carbonated and flavored drinks, milk, and alcohol are not allowed. The explanation this diet gives for its effectiveness is the capacity the body has for absorbing water. The forces produced by lunar changes and detoxification from the fast, cause the body to lose “weight.” The effect remains beyond the lunar change even though the dieter is eating solid food again, assuming the Caloric intake is balanced with activity. The crucial factor to this diet is, the person

must not eat any solid food for the first 24 hours of the lunar change, they may, however, eat right up to the last minute.

Reference: *Pepe Burreto* website—<http://www.Burreto.com>

Nautilus Diet

Claims: “This is *not* a quick and easy new diet gimmick; it’s the foundation for a sustainable, lifelong way of eating and exercising for better health and enhanced self-esteem.”

Overview: A ten-week program of high-intensity Nautilus physical training is teamed with nutritionally balanced, moderate Calorie diet. Strength training is highly touted because of its “double reducing effect” (Calories burned during exercise, and the additional Calories burned at rest due to increasing muscle size), “building muscle for losing fat.” This diet supports nibbling throughout the day rather than eating fewer, larger meals, and maintaining a 50-30-20 percentage of carbohydrates-fats-proteins. It also discusses the four types of foods that should be consumed: meats, dairy, fruits and vegetables, and grains, in a ratio of 2:2:4:4. The focus of this book is fat loss through muscle gain with long-term, over-all improved health, fitness, appearance and self-esteem. It stresses there are no quick and easy ways to achieve this. Eating a balanced diet of moderate Calories and exercising harder is the most effective way to accomplish these goals, the author says. Using the Nautilus machines, exercise techniques, and strategies, such as intensity, repetitions, breathing, negative resistance, frequency, rest, note taking, and over training, are discussed at length. Progression to a higher and higher resistance is important’ the author says, “Do as many repetitions as you can, then do one more.” The author developed this plan to be 10 weeks long because that is the amount of time it takes the average person to show solid progress, and 10 weeks is not too short or too long. “Ten weeks seems to be ideal.” The book includes exercise plans, daily diets plans, recipes, an extended program for those requiring more than ten weeks, a Question and Answer section, and a maintenance program.

Reference: Ellington Darden—*The Nautilus Diet: Ten Weeks To A Brand-New Body*.

Negative Calorie Diet

Claims: “You can eat what you want...you’ll really lose weight...it tastes good.” “No more starving...no more counting Calories...no more hunger pangs.”

Overview: This electronic book contains a list of more than 100 foods which, they claim, require more Calories to digest than can be extracted from the foods themselves, therefore leaving the body with a Calorie deficit requiring the use of stored energy (presumably fat.)

Reference: *Negative Calorie Diet* website—<http://www.negativeCaloriediet.com>

Overeaters Anonymous

Overview: A support group of recovering overeaters, based on the 12-Step and 12-Tradition program used by Alcoholics Anonymous. There are no fees or dues, they do not accept or solicit donations, and they have no affiliations with any political, religious, business or other organizations. Their purpose is to help compulsive overeaters recover and carry on normal lives.

The 12 Steps help the compulsive overeater live without excess food, and the 12 Traditions help hold the organization together. Overeaters Anonymous began when Rozanne S. took a friend to a Gamblers Anonymous meeting (which also uses the 12-step approach) and realized that this method could also be used for overeating. She gathered some friends, Jo S. and Bernice K., and the three formed the first “OA” meeting in Los Angeles in January of 1960. The founders had phenomenal success with their program, and by November were interviewed on television airing in six cities. This brought a huge response, and before long the program had expanded to 9,000 meetings in 51 countries. Alcoholics Anonymous prohibits its members from drinking any alcohol, but people cannot abstain from eating, so OA asks its members to abstain from compulsive overeating “one day at a time.” Beginning in 1962, OA began publishing food guides or eating plans that, among other things, banned refined carbohydrates and snacking. They went through a series of revisions, always causing discontent and division among its members, until finally they did away with all eating plans and kept their focus on the 12 steps to recovery.

Reference: Lina Goldberg— *Between the Sheets: The History of Overeaters Anonymous and its Food Plans*.
Overeaters Anonymous—<http://www.aa.org>.

Paleo Diet

Claims: Decades of research by Dr. Loren Cordain and his scientific colleagues demonstrate that hunter-gatherers typically were free from the chronic illnesses and diseases that are epidemic in Western populations, including: Obesity, cardiovascular disease, type 2 diabetes, cancer, autoimmune diseases, osteoporosis, acne, myopia, macular degeneration, glaucoma, varicose veins, hemorrhoids, diverticulosis, gastric reflux, and gout.

Overview: Based upon eating wholesome, contemporary foods from the food groups our hunter-gatherer ancestors would have thrived on during the Paleolithic era, the time period from about 2.6 million years ago to the beginning of the agricultural revolution, about 10,000 years ago. These foods include fresh meats (preferably grass-produced or free-ranging beef, pork, lamb, poultry, and game meat, if you can get it), fish, seafood, fresh fruits, vegetables, seeds, nuts, and healthful oils (olive, coconut, avocado, macadamia, walnut and flaxseed). Dairy products, cereal grains, legumes, refined sugars and processed foods were not part of our ancestral menu.

Reference: Dr. Loren Cordain: The Paleo Diet website - <http://thepaleodiet.com>.

Pritikin Diet

Claims: “Feel and look years younger.” “Enhance acuity of all senses.” “May reduce the amount of sleep required.” “No quantity restrictions for “permissible” foods.”

Overview: *The Pritikin Program for Diet and Exercise* does not use starvation as a tool to weight loss, instead they recommend eating eight low-Calorie meals a day, with fruits and complex carbohydrates being the staples. “Junk food” such as fertile eggs, raw milk, cheeses, most soy products, cold-

pressed oils, granola, processed foods, fats, sugars, proteins, salt, caffeine, alcohol, and nonfoods are not allowed. Meat is allowed, but more as a condiment than a main dish; only a maximum of ¼ pound per day is allowed. Pritikin suggests macronutrient intake should be 5% to 10% fat, 10% to 15% protein, and the rest complex carbohydrates. Exercise is very important for this program—walking or any other sustained isotonic exercises (e.g., running, swimming). However, walking is the preferred form of exercise because it “controls blood circulation, prevents heart disease, keeps bones from weakening, maintains proper weight, relaxes a person better than a tranquilizer, improves looks, burns off fat, suppresses appetite, reduces anxiety and depression, and increases general fitness.” A person should exercise a minimum of ½ hour twice a day. The book offers a “maximum weight loss diet plan” with more stringent rules, a section on “dieting” with information on substances such as fat, protein, salt, alcohol, and smoking. There is a section on exercise, case studies, recipes, and an appendix of useful information.

Reference: Nathan Pritikin, with Patrick M. McGrady—*The Pritikin Program for Diet and Exercise*.

Rotation Diet, The

Claims: “The Rotation Diet does not slow metabolic rates.” “By losing weight in stages and remaining physically active, goal weight maintenance is assured.”

Overview: Written by the director of the Vanderbilt Weight Management Program, this diet touts weight loss in stages: rapid weight loss, normal eating, rapid weight loss, normal eating, and so on, until the goal weight is achieved. Instructions are given for maintenance, and increased physical activity is mandatory everyday, with emphasis on maximizing the value of the activity. Rapid weight loss is achieved through three weeks of restricted caloric intake of mixed foods. The book provides menus for adult men and women (and is not recommended for adolescents or children). The time-off period is crucial for maintenance because, the book states, if Calories are restricted for more than 3 weeks at a time, metabolism will decrease and normal eating will cause weight gain.

Reference: Martin Katahn—*Rotation Diet*.

South Beach Diet

Claims: “Lose belly fat first!” “Lose 8 to 13 pounds in the first two weeks without feeling hungry.” “Eat the foods you love.” “There’s no mandatory exercise and you’re never left craving more food.”

Overview: This is a three-phase diet plan. The first phase eliminates virtually all carbohydrates from the diet such as carrots, honey-baked ham, and fruits. It also eliminates high-fat foods such as chicken wings, Brie cheese, and whole milk. This phase is intended to last two weeks and will resolve the “insulin resistance” many people have developed from years of eating simple, processed carbohydrates and other foods that are high on the Glycemic Index. There is no limit to the amount of foods eaten in any phase of the plan, however the dieter is instructed to eat until they are satisfied, and no more. Phase One includes a list of foods that should and should not be eaten. The main idea with this plan is to delay or limit the amount of carbohydrates that can be absorbed into the bloodstream at any one time. This can be achieved either by not eating them (as in Phase One) or by eating carbohydrates high in fiber (as in Phase Two and Three). For example, Phase Two suggests reintroducing carbohydrates in the form of old-fashioned, or steel cut oatmeal, or a small piece of fruit after lunch or dinner. This way, the body has to break down the fiber in the foods before it can absorb the sugar (simple carbohydrate). In other words, the more fiber a carbohydrate has, the slower the carbohydrate will be absorbed by the body. The book includes a list of foods and a number that rates how quickly and to what extent the foods are absorbed into the bloodstream, thereby raising the blood sugar level (also known as the Glycemic Index). Phase Two is meant for long-term weight loss with the gradual reintroduction of complex, high-fiber carbohydrates. Carbohydrates may be added as long as the person continues to lose weight. Once a person’s target weight is achieved, they may progress to Phase Three. This is the maintenance, and most liberal, phase of the plan and is referred to as “simply a healthy way of eating” rather than a diet. A person should adhere to this portion of the plan for life unless they find they are overindulging on “bad” carbohydrates and gaining weight. If/when this is the case they should simply go back to Phase One for a week or two until they set their system right again. Dr. Agatston does not encourage weighing oneself on a regular basis; he says that one should be able to know when they are gaining or losing weight. This program requires a person to be in touch with their body and be knowledgeable about nutrition. It is not a thoughtless, diet-by-numbers program. All

the information needed is in the book with thorough explanations of nutrients, fiber, diabetes and a brief history of other popular diets.

Reference: Arthur Agatston—*The South Beach Diet: The Delicious, Doctor-Designed, Foolproof Plan For Fast And Healthy Weight Loss*.

TOPS (Take Off Pounds Sensibly)

Claims: “Offering a healthy, caring and supportive approach to weight control, at an affordable price.”

Overview: A nonprofit, noncommercial support group which began in 1948, and is run by volunteers. TOPS’s mission is to support members as they take and keep off pounds sensibly. The program includes weekly meetings with private weigh-ins, speakers and support. TOPS provides members with positive reinforcement and motivation to adhere to food and exercise plans. TOPS does not prescribe a diet, but recommends seeking advice from a physician and publishes a monthly magazine.

Reference: *TOPS Club, Inc.*—<http://www.tops.org/>.

Zone, the

Claims: “lose weight permanently,” “reset your genetic code,” “prevent disease,” “achieve maximum physical performance.”

Overview: The basic tenet of The Zone is that food should be eaten in the ratio of 40:30:30, meaning 40% of a person’s Caloric intake should come from (complex) carbohydrates, 30% from (healthful) fats, and 30% from (lean) protein. This holds true for everything eaten: snacks, meals, and daily total. As part of these tenets, fats should not be saturated and a portion should come from Omega-3 sources such as cold water fish, walnuts or flax. Sears also recommends complex

carbohydrates over simple or processed carbohydrates. Whole grains and high fiber is preferred over starchy vegetables, and regular and frequent exercise should be a part of a person's life.

The book examines the types of foods these macronutrients are dominant in, which choices are more or less favorable, gives techniques for calculating a meal (or snack) exactly, and shows how to "eyeball it." It explains the glycemic index and how carbohydrates eaten alone will absorb into the blood stream very rapidly and cause an insulin spike. If carbohydrates are ingested with protein and fat, however, this absorption will progress more slowly, there will be a steady release of glucose into the blood stream, and the result is a moderately high, but more importantly, a steady, level of energy. There are recipes, techniques for grocery shopping and eating out while on the Zone.

Reference: Barry Sears—The Zone: A Dietary Road Map. New York: Regan Books (1995).



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This post gives an overview of the disadvantages and advantages of dieting and diets .We also answer the question is dieting healthy for you and if you have to choose a diet how to make a healthy choice. Is dieting good for you? Is dieting good for you? For people who are overweight ,the call to reduce weight to realize their optimum weight and body composition will need interventions which are very demanding and all too often not successful in making needed loss.In order to achieve this status they would need adopt a lifestyle change which includes a healthy diet and exercise .Since a large percentage of Americans are couch. reduce our stress and improve our mood. increase in energy. reduction in fats. Advantages and disadvantages of popular diets. Type of diet.

Many diets promise quick weight loss. But what are actually the best diets? Can they be dangerous? This is what you need to know. A Diet Overview What You Should Know & Watch Out For. by Dr. Otmar Höglinger. | 02.01.2019. | 7 minutes. Lose as much weight as possible in a short time that's what a lot of people want to do. Some people try a diet to achieve this goal quickly. Many ask themselves at least one of the following questions: What kinds of diets are there? How do diets work? Why can diets be dangerous? What are the advantages of a diet? What is the "best" diet? Which diet should I choose? How much weight loss is healthy? What should I be aware of when choosing a diet? Summary: learn how to eat healthy. In comparison to the high sodium control diet, the low sodium DASH diet observed larger reductions in both systolic and diastolic blood pressures compared with the DASH diet alone or a reduction in sodium alone. The effects of sodium reduction were greater in participants with hypertension than normotensive participants. Combination of DASH diet and low sodium intake lowered SBP more in hypertensive patients (11.5 mmHg, $P < 0.001$) and more in women (10.5 mmHg, $P < 0.001$) [24]. Table 31.2 provides an overview of dietary pattern modification trials. Read full chapter. Purchase book. J Am Diet Assoc. 2010 Jun;110(6):911-16.e12. doi: 10.1016/j.jada.2010.03.018. Advanced glycation end products in foods and a practical guide to their reduction in the diet. Uribarri J1, Woodruff S, Goodman S, Cai W, Chen X, Pyzik R, Yong A, Striker GE, Vlassara H. Author information. 1. Division of Nephrology, Mount Sinai School of Medicine, New York, NY, USA. Abstract. Modern diets are largely heat-processed and as a result contain high levels of advanced glycation end products (AGEs). Dietary advanced glycation end products (dAGEs) are known to contribute to increased oxidant stress and infl

Reducing body fat and achieving successful weight management requires an individual to understand energy balance. Energy balance means the number of calories consumed equals the number of calories expended (burned).¹ According to the Journal of the International Society of Sports Nutrition, body fat is reduced by adjusting caloric intake to individual energy expenditure (exercise).²

Overview. Consuming a healthy diet throughout the life-course helps to prevent malnutrition in all its forms as well as a range of noncommunicable diseases (NCDs) and conditions. However, increased production of processed foods, rapid urbanization and changing lifestyles have led to a shift in dietary patterns. People are now consuming more foods high in energy, fats, free sugars and salt/sodium, and many people do not eat enough fruit, vegetables and other dietary fibre such as whole grains. The exact make-up of a diversified, balanced and healthy diet will vary depending on individual charac