



# Pure Facts

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## Predisposing Baby to Hyperactivity

by Ben F. Feingold, M.D.

Hyperactivity is not new. It is as old as the human race; it is as old as mankind. It has always been with us and perhaps always will be with us.

If we go back into medical writings as far as 400 BC, we encounter descriptions of symptoms which are identical with the symptoms and deficits that we identify with hyperactivity today.

Now this is not remarkable. When we recognize that women at the time of conception and gestation have always been subjected to potential mutagens and teratogens in our whole ecosystem.

Mutagens (and teratogens) are substances that alter the genetic profile, alter the genes.

*Mothers have always been exposed to factors that have the potential, the power, to alter the genetic profile.*

Mothers have always been exposed to the atmosphere, water, soil, and food that contain pollutants. They've always been exposed to forms of radiation that have a mutagenic potential. They've always been subjected to infection, hemorrhage (bleeding), toxemia (blood poisoning) and jaundice (a blood disorder) during pregnancy.

Each of these has the potential, the power, to produce alterations in the genetic profile.

But now, more recently, we must

also consider medications, tobacco, and alcohol. And by alcohol I am not necessarily referring to fetal alcohol syndrome caused by heavy drinking. I'm referring to social drinking which has also been demonstrated to have the potential to change the biological profile.

*The mutations in the genetic profile can be activated by the appropriate compound in the environment, natural or synthetic.*

Then we have the period during delivery. We have hemorrhage, infection, toxemia, and jaundice.

And we have to take into account the contemporary obstetrical practices: with the mother lying recumbent with her thighs flexed on the abdomen, and the legs on the thighs. This position predisposes the baby, in some cases, as it passes through the birth canal, to a slight compression of the vascular system which may induce temporary and transitory anoxia and hypoxia (insufficient oxygen) affecting the brain.

And then in the baby itself we consider hemorrhage, asphyxia, prematurity, and immaturity.

I've labeled all these as predisposing agents, not causes. Why? Because they are not the direct cause. They provide the groundwork, they provide the alterations in the biological profile

See **Hyperactivity**, pg. 2

## Nutrition During Pregnancy

*Information provided by the American College of Obstetricians and Gynecologists, 600 Maryland Avenue, S.W., Suite 300 East, Washington, D.C. 20024*

If you are pregnant, *now* is the time to take a close look at what you are eating. Your food choices and eating habits play a vital role in influencing the health of you and your baby, both during pregnancy and in the years to come.



"Eating for two" does not mean eating twice as much, but it does mean eating a little more so you can gain weight gradually.

You should gain about 25 pounds during pregnancy, although a gain between 20 and 30 pounds is acceptable. Discuss with your doctor the best weight gain for you.

If you gain as you should while you're pregnant, chances are that your baby will gain weight properly too.

See **Nutrition**, pg. 2

### Hyperactivity, cont. from pg. 1

that makes it possible for them to react with anything in the environment, whether it's natural or synthetic. Anything may be a factor.

It must be born in mind that these agents do not act singly or at a particular site. They occur in showers at random, hitting the entire biological profile.

It is conceivable that these numerous mutagenic alterations in the genetic profile may lie dormant. We know from genetics that most of the mutations in the genetic profile are not active. But under certain conditions they can be activated and what activates them is the appropriate compound in the environment which may be anything, natural or synthetic.

Depending on what the mutation is, what the chemical is, will determine the clinical pattern we observe and the reaction that occurs.

This as a portion of Dr. Feingold's address to the International ACLD convention in Atlanta, Georgia, 1981.

To order the complete tape, send a \$4 check or money order, payable to FAUS, to: FAUS Tape, P.O. Box 6550, Alexandria, Va. 22306.

### Nutrition, cont. from pg. 1

The American College of Obstetricians and Gynecologists suggests the following steps to start a healthy eating pattern:

- Concentrate on eating the right foods, not on watching your weight. Never try to lose weight during your pregnancy, even if you are overweight. The baby is the one who may suffer.
- Eat foods that are rich in vitamins and minerals.
- Spread out your meals. Even out the amount of food you eat at your three main meals. Balance your snacks the same way.
- Be sure to eat an adequate breakfast.
- Variety is important. Make an effort to try nutritious foods that you are not used to eating.
- Because sodium metabolism during pregnancy is not fully understood, the healthy patient can maintain the sodium intake she is comfortable with. Sodium is required in pregnancy for the fetus and expanded maternal tissue.
- Breast feeding is the ideal way to feed your baby.

## Hyperactivity and Smoking

Mothers who smoke heavily during pregnancy almost double their child's risk of becoming hyperactive and impulsive by age 7, according to Dr. Paul L. Nichols.

Nichols is a research psychologist and behavior geneticist at the National Institute of Neurological and Communicative Disorders and Stroke, National Institutes of Health.

He found that while only 7 percent of the children of non-smoking mothers were hyperactive, 10 percent and 13 percent of children of smoking mothers (who smoked two and three packs per day, respectively) became hyperactive by age 7.

The study, presented to the American Academy of Neurology, included 30,000 children who have been studied since birth.

*From Inter. Med. Tribune and F.A. of Colorado*



## Editorial Comment The Problem Baby

by Jane Hersey

"For some children, food dyes behave as a drug, with the youngest being the most vulnerable."

*Bernard Weiss Ph.D.  
Professor of Toxicology,  
University of Rochester  
School of Medicine & Dentistry*

Many people are aware of the connection between food additives and childhood hyperactivity, and a few understand that behavioral disorders may persist into adulthood. But it is generally not recognized that food additives can produce a wide range of symptoms affecting the health, behavior, and cognitive (mental) ability of people of all ages.

Perhaps the head-banging, crib-rocking, sleepless, screaming infant

attracts less attention than the hyperactive child because he disrupts the lives of fewer people. Furthermore, it's easy to diagnose the cause as "nervous mother." A woman who has not had a restful night's sleep in several weeks would indeed be nervous. And calling it "colic" doesn't cure anything.

The practice of blaming parents for everything from colic to autism is finally losing favor. But this leaves the pediatrician with the unanswered question of why the infant behaves as he does. And if formula-switching doesn't help, the options are: 1) do nothing or 2) use medication. Even medication does not always work, and the bright red syrup which sedates some infants has an opposite effect on others.

Amphetamines, which were banned as diet aids for adults because of concern over their safety, are now being administered to very young children.

(The youngest we are aware of was a 1-year-old.)

The National Institutes of Health is currently sponsoring research using Ritalin on pre-school children.

We have received reports from Ohio of a 2-year-old boy and 21-month-old girl being placed on Valium.

Many of the medications being given to very young children are the "street drugs" causing havoc among our adolescents. Teen-age baby sitters must wonder why the drug they are told to refuse is given to the three year old in their care.

Dr. Feingold had something better for babies than drugs. Not only is the Feingold Program very easy to use with babies, it has an extremely high success rate, often producing a dramatic change in 36 hours.

Our babies deserve the best we can offer—a trial on a nutrition program that offers no risks and no harm.

## BOOK REVIEW

**At Highest Risk**, by Christopher Norwood.

Exposure to various environmental toxins may have reaped a harvest of increased hyperactivity, learning disability, and a host of birth defects, according to Christopher Norwood.

In *At Highest Risk*, the author presents current information on the effects of smoking, the Pill, aspirin, X-rays, anesthesia, pesticides, food additives, and other factors on young and unborn children.

It is written in a low-key manner, with a good presentation of facts and documentation. *At Highest Risk* should be read by all parents, parents-to-be, physicians, regulatory agency officials, and all who are concerned about the quality of human life, both now and in the future.

From a review  
by Beatrice Trum Hunter

## Like Father, Like Son

My husband had been a hyperactive child and while we were awaiting the arrival of our first child, I worried that it may be a little like its father. The baby was so strong and often thrashed violently inside me. But when Gabriel was born, he began breastfeeding and was a perfect angel.

Unfortunately, this stage was to prove shortlived.

At three months, as I began introducing juices and other foods, Gabriel's temperament changed for the worse. But it was not until six months that we realized our son had a serious problem. By then he had become a terror, screaming for 2 to 3 hours at a time and only sleeping 4 hours a night.

By eight months, he was taking no naps and threw violent temper tantrums regularly. At times, Gabriel rocked methodically, beating his head against things. Twice he actually attacked us and clawed at our eyes while screaming, hitting, and kicking.

One day a friend told us about the Feingold Program. I thought, "A diet to help my baby? No way!" But for my friend's sake and because I had nothing to lose, I tried it. Wow!

We wondered if Gabriel was all right. He slept for 17 hours. Soon his expression changed to a sweet innocent look instead of the half-glare I had been accustomed to.

After several weeks, all of our son's symptoms disappeared and he became a calm, gentle, trainable child.

Soon after seeing the dramatic change in Gabriel, my husband tried the diet.

For the first time in his life, Rob was able to write a two- or three-page letter (a paragraph was the previous record). For the first time he was able to handle Gabriel, who was, of course, calm by now too.

It wasn't long before my husband began to make major changes in his life, such as a more responsible job and a desire to go back to school.

My husband stated it best, "Where was Dr. Feingold when I was growing up?"

## Real Food for Real People



Ingredients: Dole crushed pineapple canned in extra heavy syrup, sugar, enriched flour bleached (wheat flour, niacin, iron, thiamin mononitrate, riboflavin), brown sugar, animal and/or vegetable shortening (contains one or more of the following partially hydrogenated fats: soybean oil, cottonseed oil, beef tallow, palm oil, and/or lard) with freshness preserved by BHA and BHT, wheat starch, leavening (sodium aluminum phosphate, baking soda, monocalcium phosphate), dextrose, salt, artificial flavor.

### Feingold-Approved Easy Pineapple Upside Down Cake

One 8¼ oz. can Sliced Pineapple  
One 10½ oz. pkg. Aunt Jemima Easy Mix  
Coffee Cake  
8 pecan halves (optional)  
1 egg

Heat oven to 375°F. Drain pineapple, reserve juice in 1 cup measuring cup. Cut pineapple rings in half; place into bottom of aluminum pan contained in package, forming two rows. Place one pecan half, top side down, between each pineapple slice. Crumble topping mixture evenly over pineapple and nuts.

Add water to reserved pineapple juice to make ½ cup liquid. Place liquid and egg into bag of cake mix. Close bag; mix batter according to package directions. Squeeze batter evenly over topping. Bake 25 to 30 minutes or until wooden pick inserted in center comes out clean. Immediately loosen edges of cake from sides of pan; invert onto serving plate. Serve warm.  
8 servings.



### From-Scratch Pineapple Upside Down Cake

1 small can sliced pineapple packed in juice  
2 Tbsp. butter  
1/3 cup brown sugar  
pecan halves  
1 cup unbleached flour  
2/3 cup sugar  
1/4 tsp. baking powder  
1/8 tsp. salt  
1/2 cup milk  
1/4 cup shortening  
1 egg  
1/2 tsp. pure vanilla

Preheat oven to 350°. Drain pineapple, reserve juice. In a 9 × 1½ inch round baking pan, melt butter. Stir in brown sugar and 2 Tbsp. pineapple juice. Arrange pineapple slices and pecan halves in pan.

In a mixing bowl, stir together flour, sugar, baking powder, and salt. Add milk, shortening, egg, and vanilla. Beat with an electric mixer on low speed until blended. Beat on medium speed for 2 minutes.

Spread batter over pineapple. Bake in 350° oven for 40-45 minutes. Cool on a wire rack for about 5 minutes. Turn cake out onto serving plate. Serve warm.



## Basic Advice for a Back-to-the-Basics Baby

Susie was a Feingolder from the start. She has two older brothers on the Feingold Program and her mother, Sue Maldonado, the president of the F.A. of Minnesota, knew the signs to watch for in a baby—the signs of food sensitivity.

"When we first saw Susie," Sue said, "we figured she would never be hyperactive. She has a dark complexion, dark hair, and she is a girl. There is a misconception that only fair haired boys can be hyperactive."

"Everything was fine while Susie was nursing until I once had to give her prepared formula," Sue said. "When she cried for 15 hours straight, I knew what I had on my hands—a sensitive little girl."

According to Susie's mother, hyperactive babies who have hyperactive siblings have an advantage over those who do not. Experienced parents, at least, realize that something is wrong when a baby cries incessantly or is overly rambunctious. Experienced parents also may be more aware of a learning disability.

Luckily, Susie was born into a Feingold family.

Although everything Susie ate was Feingold approved, the Maldonado's had to go through the diet-expanding phase when foods (especially salicylates) were introduced on a trial basis to pin-point Susie's sensitivities.

### *"Luckily, Susie was born into a Feingold Family."*

Eventually, the Maldonado's learned Susie's reaction pattern. There was a set period of time, maybe 12 hours or so, during which the reaction would run its course. After that, they could all get some much-needed sleep.

When asked for some guidelines for introducing babies to various



foods, Sue stressed going slowly. Start with one cereal or fruit served for several days. Watch for any behavioral or physical changes, such as a runny nose, diarrhea, or coughing.

If no adverse reaction is observed, Sue said, add one more food and watch again. Continue testing in this fashion for months, not weeks. Susie was 14 months old by the time she had tried all of the salicylates.

Remember, Sue warned, that foods added to improve taste or texture, such as milk on cereal or butter on toast, must be considered a new food.

Although most commercial baby food is Feingold approved, Sue said, it is still over-processed and over-priced. A few inexpensive tools made preparing Susie's food a snap.

For example, blenders are invaluable for preparing food for a beginning eater. A baby food grinder costs less than \$10 and grinds even meats well enough for the baby over 7 months.

And don't forget the value of a fork; many vegetables and fruits, such as ripe bananas, need nothing more.

Sue recommends reading some of the books on how-to-prepare natural foods for babies and children.

"One of the best lessons you'll ever give your child," Sue said, "is the knowledge and use of good foods."

## Our Readers Write

Having a seven-month old nursing baby has given me lots of time to sit and read. I've been a captive audience, so to speak. And so, I escape—alone—to the library every few weeks and come home loaded down with more books on nutrition, natural cooking, and all the new "live longer" diets that have come along.

My conclusion after all this reading is this: Why isn't the whole world a member of the Feingold Association? I have hardly read an author who does not advocate our diet. Most do not use the label of "Feingold" but they all say the same thing. Synthetic coloring and flavoring is bad for our health and can cause behavioral problems or worse yet, cancer in laboratory animals. Most authors also concur that BHA, BHT and TBHQ are harmful chemicals which are to be avoided.

When I sit in group meetings like PTA and church services, I look around and wonder about the food that my friends are eating. What have the slick Madison Avenue advertising agencies persuaded all those mothers to serve their families? It truly upsets me to think that the pursuit of bigger profits has caused our country's food manufacturers to sell us all short on nutrition and good health.

*Feingold Association of Philadelphia*

## Free PureFacts

Do you know someone who would like a complimentary copy of this month's special baby issue of PureFacts (a pediatrician or a new mother, perhaps)?

Send us their name and address and we will mail them a copy when we send out our monthly bulk-rate mailing.

Please include the person's name, address and zip code. Mail your request to:

July/August Pure Facts  
P.O. Box 6550  
Alexandria, VA 22306

## Preparing for Your Baby

The best way to prepare for your baby is to be healthy and well nourished *before* conception. This involves not only following the basic rules for good health and nutrition, but it also means refusing to eat harmful synthetic chemicals—which is the premise of the Feingold Program.

During pregnancy, a good diet will be vitally important to your developing baby. Your doctor will probably encourage you to do away with alcohol and cigarettes, and will not prescribe medication unless it is essential.

Minimally processed foods will supply you with the many important trace nutrients destroyed by excessive processing. Eliminating synthetic food dyes, flavorings, and preservatives from your diet means your baby will not be exposed to these chemicals.

### Feeding Your Baby

After the baby arrives, breastfeeding is the best way to ensure he or she will receive optimum nourishment. But remember that your diet is still vitally important to your child's welfare. If you do consume medicine or synthetic additives, be alert to the possibility of their transmittal to your baby. Also consider that too many salicylates in your diet could cause a baby to be fussy.

Most babies fare well while nursing, even those who are chemically sensitive. The troubles generally begin when the infant stops nursing or when liquid baby vitamins are introduced.

### Baby Vitamins

Baby vitamins are perhaps the worst of the infant irritants. The dyes used in them are petroleum derivatives, and the synthetic flavoring can be drawn from thousands of chemical components which would be more fitting in Dr. Frankenstein's laboratory than an infant's diet.

If your pediatrician recommends vitamins, ask him to suggest a natural source, such as cod liver oil. Your pharmacist may be able to prepare a

vitamin compound or recommend a natural liquid baby vitamin.

Baby aspirin and Tylenol routinely use synthetic dyes and flavorings. Orphen is a Tylenol substitute without synthetic colors or flavors. Your pharmacist can order it from Great Southern Laboratories. And here's hoping nobody has the nerve to suggest you feed your baby "Jell-O water."

### Rubber Bottle Nipples

Another good reason to opt for breastfeeding is that rubber nipples in this country routinely contain certain nitrites which act as a preservative. Although federal regulations limit the amount of nitrite permitted in beer and bacon to 5 and 17 parts per billion (ppb), rubber nipples have been found to contain as much as 448 ppb, and pacifiers as much as 2,265 ppb. (In the Netherlands the limit is 1 ppb.) Nitrites are acknowledged cancer causing agents, and are suspected of causing liver damage in infants.

### Pediatric Medication

Since most pediatric medicine—both prescription and over-the-counter—is dyed and flavored, the Feingold Association provides its members with a list of medications which have been researched and found to be free of the offending chemicals. Your Feingold Association can provide the medication list for you to give to your doctor or pharmacist. Ask your doctor if the medicine can be prescribed in the uncolored adult form, with the dose adjusted to your child's weight.



## In the Nursery

A wholesome diet is not the only way to get your baby off to a good start in life. The 1980s baby is protected against many once-fatal infectious diseases, but he or she is exposed to hazards peculiar to our time. These include:

- **Diaper pail deodorizers** Limit exposure by keeping the diaper pail away from the area where the baby sleeps or spends much of his time.

- **Perfumed diapers and pre-moistened wipes** These can cause rashes and other problems.

- **Scented baby powder** Use any type of starch, such as corn starch, arrowroot, or potato starch.

- **Disinfectant sprays, cleaners, or deodorizers** In spite of what the TV commercials would have you believe, plain soaps and fresh air are the best cleaners and deodorizers. If you want your room to smell like a bouquet of fresh flowers, we recommend you get a bouquet of fresh flowers.

- **Fabric softening strips** The chemicals in these can cause allergic reactions and/or behavioral problems in people of all ages. Half cup of vinegar in the rinse water will serve as a softener and deodorizer.

- **Formaldehyde** Do your eyes burn when you go into a fabric store? This chemical is often used to treat fabrics and give new clothes a crisp look. It's a good idea to wash baby's clothing and linens before their first use.

- **Avoid scented products of all kinds** Soaps, tissues, miracle carpet sprays, etc. The chemicals which provide the scent can be a serious irritant for the sensitive individual.

These suggestions are offered to you by Feingold parents . . . who wish they had known these things when their children were babies. The extra effort you spend for your infant can pay off in a lifetime of benefits.





## Michael's Success Story

We never thought it would be like this. Michael was a first child; he was wanted, loved, and considered a wonderful addition to the family.

He came into the world unhindered by pain killers, bursting with a healthy vitality and immediately took to breast feeding.

Everything was fine, until the pediatrician gave him baby vitamins (Poly Vi Sol) loaded with additives.

Michael's sunny disposition began to disintegrate rapidly. Crying, irritability, and sleeping problems became the norm.

Subsequent check-ups failed to identify any physical problems. Perhaps it was just colic . . . all day, every day?

I finally began to suspect the vitamins and stopped giving them to him. I thought he was simply allergic to them.

All went well until Michael left the breast and joined the Isomil generation at about six months. He spent a good deal of the day crying for no apparent reason, had difficulty sleeping, refused to nap, and couldn't seem to relax or cuddle when being held.

Since Michael was our first child we had no other frame of reference for comparison to normal reactions at that age.

We assumed his Jeckyl/Hyde behavior was just a new stage in his progression toward toddlerhood. Unfortunately, by the time he was 14 months old, Mr. Hyde had pretty well taken over.

Within four days after we began the Feingold Program, I was rewarded with a radical change in Michael's disposition and behavior.

Mr. Hyde gave way to a delightful, funny, and thoroughly loveable child.

## Icy Fruit Treats

With summer finally here in full force, it seems our kids are always thirsty and hot! It's no wonder it is a terrible temptation when the SCOURGE of the neighborhood "dingles" on by (you've got it—the ice cream man). My kids call him the "garbage man who delivers" and it's their cue for an icy Feingold treat. So freeze those juices, blenderize and freeze whatever fruits you can, freeze a banana on a stick, anything to have a special something for your special child.

**Brenda Larrance**  
Feingold PATH of Illinois

## Staying Sweet This Summer

Unscented deodorants are recommended for Feingolders, and most brands should not cause problems.

But the individual with acute chemical sensitivities will have to be more careful.

Brands which have been reported to be well tolerated by very sensitive people include:

Almay  
Allercreme  
Ar-ex  
Baking Soda  
5-Day pads  
Sure (unscented stick)  
Mill Creek Herbal

## What is FAUS?

The Feingold Association, founded in 1976, is a volunteer, non-profit organization comprised of parents and interested professionals dedicated to improving the health and behavior of hyperactive/learning disabled children, and similarly affected adults, through the Feingold Program. This program is based on the elimination of synthetic colors, synthetic flavors and the preservatives BHA, BHT and TBHQ from our diet.

## Summertime Survival Tips

- Instead of a charcoal lighter, invest a few dollars in an electric starter for your grill.
- Beware of barbequed foods—they may cause a reaction in those sensitive to smoke.
- In swimming pools, try the more stable chlorine compounds such as Iso-Chlor by Coleco, HTH, or SUN Chlorine.
- Be careful of reactions to insect sprays, lawn chemicals, and skin lotions.
- Aloe vera, vitamin E oil, and a paste of baking soda offer a good natural remedy for sunburns and may help poison ivy.

**Feingold Association of the Northwest**

## PureFacts

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