Pure Facts

FEINGOLD®

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Childhood depression — The Quiet Epidemic

This is a true account, written by a member of the Feingold Association. We have substituted the name "Betsy" to protect the privacy of our young subject.

Another Thanksgiving Day was drawing to a close, ushering in the joyful but hectic weeks of preparation for Christmas.

Given a choice of before-bed snacks, our 7-year-old daughter selected a slice of applesauce cake and milk. Expecting to share the moments with everyone present, she was understandably disappointed when her grandfather asked her to eat somewhere else because the table was being used for a card game.

"... for Betsy, life was a hurtful existence."

She did not protest, but left the room rather solemnly and without her food. I followed her into the living room and found her lying face down on the sofa, quietly crying.

"I wish I had a gun!" she said resolutely, yet with sadness in her voice.

When I asked if she wanted a toy gun she told me no, a real one.

"Why?"

"Because I want it to happen," she sobbed.

Worried, but not wanting to make matters worse by reacting with panic, I questioned Betsy calmly about her feelings. Had they started recently? "No, I've been having these feelings for a long time. I tried to make it happen before," she said, and her words sent a shock wave through my body.

A little coaxing soon brought her mood up, but in the weeks that followed there were many other emotional upsets that triggered tearful admissions that, for Betsy, life was a hurtful existence.



Her gloom seemed to accelerate as the weeks went by. My husband and I discussed each sign of depression and each incident of obvious emotional turmoil in detail. We knew that children who talk about suicide should be taken seriously. Betsy told us that she had tried to take her life at least three times. Although she obviously had never

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Depression

Clinical depression" is the name for the persistent disabling condition of joylessness that affects an estimated 30 to 40 million Americans. It is believed to be a major cause of suicide.

While depression is not new, the age group affected by it has dropped dramatically in the past few decades. The National Institutes of Mental Health notes that prior to World War II depression typically affected people in their 50s. Today it occurs most often among 25- to 44-year-olds.

Another startling statistic is the increase in depression among young children.

It has only been within the past ten years or so that therapists have recognized the existence of childhood depression.

One estimate of the number of cases of childhood depression in the United States is 400,000, or close to 2 percent of children ages 7 to 12.

The frightening statistics on teenage suicides have attracted national attention. Five thousand teen suicides were reported last year — a 300 percent increase over the past three decades.

While the victim of depression is twice as likely to be female as male, the American Academy of Child and Adolescent Psychiatry reports that the male risk for suicide in the U.S. is between three and four times that for females. In other words, women are at greater risk of becoming depressed, but men are

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The Feingold® Associations of the United States, Inc., founded in 1976, are non-profit volunteer organizations whose purposes are to support their members in the implementation of the Feingold Program and to generate public awareness of the potential role of foods and synthetic additives in behavior, learning and health problems. The program is based on a diet eliminating synthetic colors, synthetic flavors, and the preservatives BHA, BHT, and TBHQ.

gone far enough to do actual physical harm to herself, it was clear that she was preoccupied with the notion of ending her life, and that she was experimenting, at least in her mind, with ideas on how it could be done.

I once broke a light bulb. She offered to help me pick up the pieces, but I refused her help, telling her she might be badly cut.

"Could you die from being cut on a piece of glass like that?" she questioned.

"No," I told her, "Not unless you were cut in a bad place." Her reply sent a chill down my spine.

"You mean like a place that goes bump-de-bump?"

"We knew that children who talk about suicide should be taken seriously."

Once, at my office, she asked if the building had a stairway to the roof. I asked why she wanted to know.

"I was thinking I could jump," she replied quietly.

Little upsets more and more often became major threats to her wellbeing and ego. Once, during a particularly frightening encounter with the demon which had robbed her of her self-confidence, she confessed to being afraid of me, looking at me wildly as though I were some stranger not to be trusted.

Even her small works of art brought home from school had taken on a macabre appearance. I remember a chalk drawing done on black construction paper. The only objects on the paper were three graveyard headstones. Each bore the initials of one of us.

Each time her emotions ran rampant I tried to dig deeper into her feelings. I did not want to let go of the idea that showing her my concern and how much we both loved her would overcome her fears and help her to cope with her doubts. But my efforts were to little avail.

I asked if she though she might feel better talking to someone else about her problems. "Yes," she answered.

"Who do you think could help?"

"A psychologist," she said without hesitation.

The precociousness of her reply did not surprise me. Vocabulary and communication had always been Betsy's strengths, and we marveled at her youthful awareness and outstanding memory.

Impressing other two- and threeyear-olds with words like "ferocious" had been easy for her. But now she talked of "feeling strange inside" and "being afraid." The ferocious beast that haunted her small body could not be conquered alone.

The weeks of sessions with the pediatric psychiatrist went by slowly, and we became restless with the snail's pace with which such therapy must proceed. We were at a loss to understand what had suddenly overcome our bright, articulate, gregarious little girl.

Within a short period of time Betsy became uncooperative with the doctor. We grew impatient. Eager to find an alternative, or at least an adjunct to the counseling, my mind was almost constantly occupied with thoughts of what could be done.

"I was told that hyperactive children are destructive. . . ."

Perhaps that is why I recalled a girlfriend talking about a kind of food program that had been helpful in improving her children's behavior, attitudes and moods.

I had listened politely, questioned her, and had even spoken to a couple of pediatricians about the possibility of our daughter showing evidence of this hyperactive syndrome. But I was told that hyperactive children are destructive, out of control, terrors to live with, and unable to function very well.

And besides, they reassured me, hyperactive children were almost always boys. None of these adjectives fit our daughter.

Or did they? Oh sure, she had always been very active and had slept very little as an infant. She would

not sit to ride in a stroller, making shopping trips exhausiting chase scenes. But young children always have more energy than their parents can tolerate. I believed she was just a normal, frisky toddler.

Had I fallen for all the cliches? The issue here was not hyperactivity, but depression; a feeling of hopelessness severe enough to make our only child want to cease to live. If there was any chance the Feingold diet could help her through this and restore her emotional stability and tranquility, I had to at least try it.

"Our child's depressions have become only a bad memory. . . ."

My husband was skeptical and Betsy was distressed. "I don't want to be on a special diet. I just want to be normal!"

Her words were like needles, piercing me throughout.

Despite her initial objection, Betsy was remarkably cooperative. Only six days after beginning the diet I saw the first visible signs that something was changing.

That evening, just after dinner, our daughter put her head in my lap and fell asleep. She took a nap, that's all, just a nap. This is something most parents take for granted, but it was the first time I can remember Betsy being calm and at peace.

We began to observe other changes as well. She no longer showed a low tolerance for frustration, poor concentration, inability to accept small disappointments — all symptoms listed in the Feingold Handbook.

The change in Betsy's personality has been dramatic. From the moment I first noticed the obvious improvement in her mood and physical control, to this day, Betsy has not looked backward. Our child's depressions have become only a bad memory, for us and for her.

The day following her initial change to serenity our 7-year-old announced that she did not ever want to go off the Feingold diet. She hasn't.

The United States Department of Agriculture (USDA) has recently granted permission to add the antioxidants BHA and BHT to some meat toppings used in prepackaged frozen pizza. BHA, BHT and TBHQ are petroleum-based chemicals which help to prevent oxidation (rancidity) in foods. They are eliminated on the Feingold Program.

The presence of the antioxidants will be very easy for the consumer to identify, according to Nancy Goodwin, a program analyst for USDA. Manufacturers will be required to prominently note the additives on the front of the packaging, along with the name of the product.

The two companies petitioning USDA for permission to use antioxidants are Tony's Pizza Service in Salina, KS and Rotanelli Foods, Inc. in New Rochelle, NY.

Why would frozen food need preservatives?

Both cooking and freezing speed up the oxidation of fats, USDA Food Technologist Everett Lail told *Pure Facts*. And certain types of meat are more susceptible to spoilage.

When fat is ground up with meat, more of it comes in contact with air, and this increases the possibility of oxidation. This is particularly true with ground pork sausage, which has a high fat content. Antioxidants may legally be added to pork saus-

BHA, BHT in Pizza?

age, and have long been approved for use in dry sausages, such as pepperoni.

How about the meat used in pizza sold at restaurants or delivered to the home?

This is a very complex area involving such things as terminology ("hamburger" or "beef" or "meat" topping), where the meat was processed (USDA inspected plant or non-USDA inspected), and whether the food is shipped across state lines.

Mr. Lail recommends Feingold members use the following guidelines to find pizza with no added antioxidants:

• Read the label. If a packaged pizza is sold in a supermarket you can be fairly sure that any chemicals added to meat would be listed. If the pizza does not contain meat, however, it would be under the jurisdiction of the Food & Drug Administration (FDA).

• When you eat out or order a pizza, avoid those with meats. Stick with a cheese pizza or one with toppings like onions, mushrooms or peppers.

• Look for the symbol of real cheese. Many pizzas now use imitation cheese, and may have additives which are prohibited on the Feingold Program.

A final word: Use your Foodlist and the information in *Pure Facts* to guide you to those products which have been researched and found acceptable for use by Feingold members. Ask the Feingold volunteers near you to recommend a restaurant.

How about BHA and BHT in fresh meats?

Consumers may wonder if the day is near when their butcher will be dipping the chuck roast in an antioxidant solution. This is not permitted by USDA, and Mr. Lail reassured *Pure Facts* that it is not likely in the future.

The agency has to be convinced there is a genuine need before permitting an additive to be used in meats or poultry. And the additive must not be used to disguise a product, i.e., making older meat look fresher.

Finally, the consumer would have to be alerted that the roast was treated with a chemical solution.

Fortunately, this scenario appears highly unlikely.

PIC Report

Product Information Committee Chairman Barbara Ballmer reports:

McDonald's French Fries

In a letter to my associate, Karen Garnett, Michael J. Goldblatt, Ph.D., Director of Nutrition for the McDonald's Corporation, states that "there is no BHA, BHT or TBHQ in either McDonald's French fries or the shortening used to cook the French fries."

Kellogg Company

Thanks to Eleanor Kusler. There are three All Bran products. The regular in the brown box with the words "High Fiber" is still OK. All Bran in the red box that says "with Extra Fiber" contains NutraSweet* and also BHT in the packaging. All Bran with Fruit and Almonds contains BHT in the packaging.

*The Feingold Association recommends members avoid the use of aspartame (NutraSweet).

Cheerios

According to Holly Mitchell, Consumer Response and Investigation at General Mills, Inc., "BHA, BHT or TBHQ are not present in Cheerios." This includes in the vitamin A palmitate.

PLEASE NOTE: If you are new to the Feingold Program, use only those products on your Foodlist.

Experienced members who wish to test out products not on the Foodlist are encouraged to do so cautiously.

The Feingold Associations do not endorse, approve or assume responsibility for any product, brand, method or treatment. The presence (or absence) of a product on a Feingold foodlist, or the discussion of a method or treatment does not constitute approval (or disapproval). The foodlists are based primarily upon information supplied by manufacturers, and are not based upon independent testing.

Depression, from page 1

more likely to translate it into violent action.

At least 25,000 Americans take their own lives each year.

Researchers at Columbia University who examined the brain tissue of 70 suicide victims found that the victims tend to have an abnormality in the production and use of serotonin, one of the many chemical messengers that brain cells use to communicate.

Other research indicates that the tendency to suffer from depression is an inherited one.

The psychiatric profession now recognizes that biochemistry plays a role in depression. The profession's DSM III manual (list of symptoms used to diagnose mental disorders) is being updated to include seasonal affective disorder (SAD). In this case, depression is connected to the reduced exposure to light during the winter months.

In other words, psychological factors are not the sole cause of depression. Biochemical influences are being recognized and investigated by the scientific community.

After World War II — Editorial Comment

World War II is a turning point for many statistics. It signaled a sharp drop in the age at which depression is likely to start. It also marks the point at which behavior problems in children began to reach epidemic proportions.

Dr. Feingold noted, "The first half of my almost fifty years as a physician were spent as a pediatrician. During this pediatric experience . . . I had exposure to thousands of children with a great variety of ailments. Yet I had no recollection of a high frequency of hyperactivity and behavioral problems through all these years."

But in the years following the end of World War II, the use of synthetic food additives increased dramatically. They continue to increase, as do the problems of hyperactivity, depression and the incidence of suicide. Is there a connection?

Halloween — What Do Feingold Members Do?





Carnival

A Texas member organized a party for Feingold kids at her church. The next year the church decided to hold a carnival. Her friends were very supportive, and made it a "safe" carnival with no forbidden treats or face-painting.

Prizes were stickers, puzzles, patches, pencils, posters, plastic toys, stuffed animals, balls, novelty jewelry, hats, etc.

The teen-agers put together a spook house.

(Fast food restaurants are often willing to donate cups, straws, napkins, etc. to such parties. If there is a 7-UP bottler in your area, you may be able to obtain free sodas.)





'Good Dreams' Holiday



An Iowa member writes, "I visited several neighbors earlier in the day and dropped off candies which were on my Foodlist.

"When her dad took Amy out trick-or-treating he made sure they went to those houses, among others. When she returned home, Amy sorted her treats into two piles. (It was her idea.) She called them "good stuff" and "bad dream stuff" (which she gave away).

"Her Halloween was just like that of her two big sisters.

"The Feingold Association has been a great help to our family — what a relief to begin sleeping most nights after three years of very little sleep!"

Refer to your *Feingold Handbook* for more holiday helps.

"I want to help . . ." Here's How

Some members have requested their United Way donations be given to their local Feingold association or to the national association (FAUS).



Not every United Way organization has a donor option policy, but many provide for you to write in the name

of the group you select.

The Feingold Association has always worked hard to keep dues as low as possible, but the cost of running an organization such as ours continues to rise, despite our many hours of volunteer time.

Please consider designating all or some of your United Way or Combined Federal Campaign contribution to the Association.

If you would like our help in arranging for this, write, or call and leave a message on the answering tape and a Feingold representative will get back to you. The number is (703) 768-FAUS.

Science Fair Packet

The FAUS Science Fair Packet, containing resource material and project suggestions, is available again this year. To obtain a packet, send your name and address plus \$3 to: FAUS Science Fair, P.O. Box 6550, Alexandria, VA 22306.

Pure Facts



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For further information write to: Feingold Association of the United States, Inc., Box 6550, Alexandria, VA 22306. (703) 768-FAUS