

Pure Facts

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School and the Chemically Sensitive Child

In an article titled "Chemical Soup in the Classroom," Toronto Star writer Tracey Tyler described an experimental classroom which has been built in a small Canadian city.

At Kitchener high school, the Waterloo County Board of Education has taken the unusual step of opening a pollution-free classroom for students with severe reactions to chemicals and synthetics. Constructed of non-toxic materials with a sealed cement floor, the two-year-old experimental classroom is the only one of its kind in North America."



Parents of sensitive/allergic children in schools throughout Ontario are challenging their school boards to provide a safe environment for the youngsters to learn.

In one public school the level of carbon dioxide reached 12 times the limit considered tolerable. Parents believe that exposure to these fumes can trigger various reactions, including behavior problems and the inability to concentrate.

'Allergy' vs. 'Sensitivity'

The reaction most Feingold members experience to certain additives and salicylates is not an allergic reaction, Dr. Feingold believed.

He considered it a pharmacological, or drug-like response, and felt that it was dose-related. This means that the "hyperactive" child is simply more sensitive than his peers . . . that he has a lower tolerance for some chemicals.

The reaction one experiences from a sensitivity to additives can "mask" itself as an allergic response. So the more familiar reactions such as hives, rashes, or respiratory problems could be the result of food additives, not pollen or your pet cat.

"Allergy is an inherited constitutional disorder involving the immune system," Dr. Feingold wrote in *The Feingold Cookbook*. "Intolerance to food additives and salicylates is not an immunological disturbance. Therefore, it is not allergy. It may clinically simulate allergy, but the two are not identical.

"Skin tests for food allergy are not reliable and therefore are not recommended. Skin tests for intolerance to food additives have no value.

"Allergy commonly does not cause hyperactivity, though in some individuals it may. Allergy usually produces the opposite clinical pattern, one of lassitude, fatigue, tiredness — actually hypoactivity."

Dr. Feingold advocated testing for food allergies the same way salicylates are tested . . . by using an elimination

diet. (See the *Feingold Handbook* for more information on salicylate testing.)

In her recent book, *The Impossible Child*, Doris Rapp, M.D., describes some of the many symptoms which could be an indication of an allergy. A few of these include red patches on the cheek or "fire engine red" ears, circles under the eyes, and the "allergic salute," where the child uses the palm of the hand to rub his nose upward, eventually leaving a wrinkle near the end of the nose.

Food additives and salicylates can produce symptoms which look like an allergic reaction.

Another physician who has published a great deal of information to help parents in detecting allergies is William Crook, M.D. His latest book is *Solving the Puzzle of Your Hard to Raise Child*.

Parents have found another good resource — particularly on recipes for allergic children — in *How to Improve Your Child's Behavior Through Diet* by Stevens and Stoner.

Refer to page 13 of *The Feingold Cookbook* for Dr. Feingold's comments on food allergies.

Inadequate ventilation in older schools and portable classrooms has been blamed for such symptoms as headaches, dizziness, rashes, exhaustion, nosebleeds, short-term memory loss, coughs and vision problems.

Parent groups are urging the province to set clean air standards and to begin regular testing programs.

In addition to carbon dioxide in the classroom, other sources of trouble for

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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.

Special Issue on Allergy & Sensitivity

Allergy — One Family's Story

Our young son began to develop problems when we introduced solids, even though we had avoided giving him the foods which are considered most likely to provoke allergies.

His repeated chest colds, sleep difficulties, screaming sessions, irritability and chronic diarrhea became worse and he was referred to a pediatrician at 13 months as a "failure to thrive."

He was diagnosed as having food intolerance and we were able to keep him relatively stable on an extremely restricted diet. But we found it frustrating. The diet was very limited and each time we tried to broaden it he would react.

We read theories on allergies in various books and medical journals and we tried them all, but none seemed to fit his case. We tried introducing foods one at a time. He would be all right initially, then would suddenly crash, yet we couldn't determine the trigger. We tried rotating foods, but the same food would produce a different reaction each time.

"Food families" didn't make any sense to me. There were some foods he could eat nearly every day with no effect, while others in the same family produced dramatic effects every time he ate them.

One theory of allergy is that overexposure to a food will lead to an allergy. But he could eat the same food for months and thrive. Other foods he had never eaten or been exposed to via breast milk or in utero would cause him to react dramatically with the first exposure.

By age 2 behavioral problems became apparent and we began the Feingold diet.

At a visit to an allergy clinic I learned the difference between a genuine food allergy and an intolerance to chemicals in foods. It turned out that our son had both problems, but after much trial and

error we determined that he is only "allergic" to one food — milk. For him, all other basic foods are safe! He is, however, highly sensitive to many groups of chemicals — both those present in natural foods and those added in food processing.

The majority of people who have an intolerance to "multiple" foods are not really "allergic" but are sensitive to certain chemicals in them. These occur

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naturally or are added during food processing. They build up in the body and exert drug-like side effects. Reactions occur when the individual threshold is reached.

Life is a lot simpler now; we have complete control of symptoms plus a return to a more normal diet.

This is an edited version of a letter which was published in the newsletter of the Hyperactivity Association of South Australia.

Study Connects Food Additives and Hives, Angio-oedema

Dr. Feingold's efforts in helping an adult with a severe case of hives (urticaria) led him to what has become the Feingold Program.

Researchers in Britain documented the connection between food additives and hives in a double-blind study which took place at the Paediatric Allergy Clinic, St. Mary's Hospital in London.

More than half of the children reacted to one or more of the food additives.

Reporting in the October 18, 1986 issue of *The Lancet*, Supramaniam and Warner found that more than half of the children tested developed symptoms of hives and/or angio-oedema when challenged with food additives.

Forty-three children who responded to an additive-free diet were challenged with artificial food additives in a double-blind study, and 24 of them reacted to one or more of the additives. (Feingold members will be surprised to learn that aspirin sensitivity was detected in only one of the subjects.)

The additives tested were:
Tartrazine (Yellow No. 5)
Sunset yellow (Yellow No. 6)
Amaranth (Red No. 2 — banned in the U.S.)
Indigo carmine (Blue No. 2)
Carmoisine (a red dye not used in the U.S.)
Sodium benzoate
MSG
Sodium metabisulphite
Aspirin

The children ranged from age 3 to 14. Twenty-four reacted to one or more of the additives, but none of the children reacted to them all.

One of the surprising discoveries was that an extremely small dose of just 1 mg. was sufficient to trigger a response in some of the children. In contrast, the Egger study of diet and hyperactivity (*The Lancet*, March 9, 1985) used 150 mg. of tartrazine for a period of one week.

This observation confirms what Feingold parents have long known: Grandma's protest that "just a little bit won't hurt" isn't necessarily so.

Researchers have found that food additives are capable of causing hives and angioedema.

The researchers go on to say, however, that the patients were carefully monitored in the hospital during the challenges, and some of the symptoms may have gone unnoticed in another setting.

But for some of the subjects, their sensitivity was so keen, the authors noted, that it could have been dangerous to challenge them with the 150 mg. dose.

Product Alert

Remove Actifed 60 mg tablets from your Medication List (under Antihistamines).

They now contain a "new pleasant tasting" coating with artificial flavoring.

Thanks to one of our adult members who alerted us to this.

Which Foods/Additives Cause the Most Problems?

Foods

In a study of 188 French adults with food allergies, D.A. Moneret-Vautrin, M.D., noted that fish is the food most likely to cause an allergic reaction. It was followed by shellfish, egg and milk. For the infant and child, however, the major problem is milk; egg ranks second and soybean is third.

Only a few of the adult patients were allergic to wheat, pork and chocolate . . . commonly suspected of causing allergic reactions in this country. (*J Allergy Clin Immunol* 78: 1039-1046, Nov 1986.)

Dr. Feingold noted that "chocolate causes adverse reactions but perhaps less frequently than is the common impression. Many times the reaction attributed to chocolate has actually been caused by synthetic chocolate flavoring." (*The Feingold Handbook*, p. 19.)

Most milk chocolate available in the United States contains vanillin, a synthetic vanilla flavoring. Dark chocolate is more likely to be made without added flavoring.

Beatrice Trum Hunter, a member of the FAUS Advisory Committee, points out that any time a food is overused, allergic reactions can be expected to be seen in a portion of the population.

Corn is used in so many forms in the processing of foods in the United States, it has become a common source of food allergy and one of the most difficult

foods to avoid. In recent years, the widespread use of soy in processed foods has added this legume to the list.

Additives

Moneret-Vautrin found that intolerance to food additives occurs most often in the following population: people with food allergies, asthma patients with nasal polyps and drug intolerances, and people with chronic urticaria (hives).

If you believe you are "allergic," be especially wary of food additives.

Summarizing the results of the paper, Beatrice Trum Hunter writes, "The food additives sodium nitrite, sodium benzoate, sodium and potassium metabisulfites, BHA, BHT, sodium glutamate (MSG), menthol, gums, and synthetic colorants, especially tartrazine (Yellow No. 5), have been implicated in reactions including urticaria, headaches, asthma, and intestinal dysfunction.

"Natural colorants, emulsifiers, thickeners, jelling agents, and synthetic sweeteners rarely caused [allergic] reactions. Unintentional food contaminants such as nickel, antibiotic residues, and PCB's may provoke reactions in intolerant individuals."

April Fooler



Celebrate National Consumer's Week (April 19-25) by looking out for deceptive labels which are found in most supermarkets. Feingold adult Jessie Thompson sent us the package from "Nature's Naturals" brand of Oriental Trail Mix.

The ingredient list reads as follows: Peanuts (Peanuts, Peanut Oil, Salt), Sesame Sticks (Partially Hydrogenated Soybean Oil with BHA to Preserve Freshness, Enriched Wheat Flour [Bleached Wheat Flour, Malted Barley Flour, Niacin, Iron Reduced, Thiamine, Mononitrate, Riboflavin], Sesame Seed, Bulgar Wheat, Farina, Defatted Soy Flour, Salt, Isolated Soy Protein, Modified Tapioca Starch), Chili Crackers (Rice, Soy Sauce [Soybeans, Water, Wheat, Salt], Sugar, **Corn Syrup**, Dextrin, Salt, Chili Extract, **Artificial Beef Flavor**, Caramel and **Artificial Color, Monosodium Glutamate**), Dried Peas (Green Peas, Cottonseed Oil, Salt, **Monosodium Glutamate, Artificial Color [FD and C Yellow #5, FD and C Blue #1]**, Citric Acid, **Sodium Benzoate** to Preserve Freshness, **TBHQ** to protect flavor).

Editor's note: who protects us?

Lemon Chiffon Pie

Welcome spring with this delightful treat from the Feingold Association of the Northeast. Frozen lemonade concentrate makes the recipe simpler and a wire whisk makes it easier to blend ingredients.

- 1 envelope Knox unflavored gelatin
- ½ cup cold water
- ⅓ teaspoon salt
- 4 eggs, separated
- 1 can (6 oz.) frozen lemonade concentrate (do not thaw)
- ½ cup sugar
- 1 9-inch baked pastry shell



1. Put the cold water into a medium saucepan and sprinkle the gelatin over it.
2. Add the salt and the egg yolks; mix well.
3. Place the saucepan over low heat and cook, stirring constantly, until the mixture thickens slightly and the gelatin is dissolved (about 5 minutes).

4. Remove from heat and add the frozen lemonade concentrate. Stir until the lemonade is melted.

5. The mixture should mound slightly when dropped from a spoon. If it does not, place it in the refrigerator for a few minutes to chill.

6. Beat the egg whites in a large bowl until they are stiff, but not dry.

7. Gradually add the sugar and beat until the egg whites are very stiff.

8. Using the whisk or a spatula, fold the gelatin mixture into the egg white.

9. Spoon the mixture into the baked pastry shell and chill until firm.

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School, from page 1

the sensitive child include: molds, new carpets, carpet glue, fumes from art supplies, felt pens, bug sprays, brush cleaner, floor polish, particle board shelving, photocopy fumes and fumes from school buses.

Some schools are designating "ecological classrooms" for students who suffer from asthma or severe allergies. Other systems are installing air filtering systems in an attempt to reduce the levels of carbon dioxide.

Bruce Small, an environmental consultant in Ontario, points out that while an adult can seek a new job if he finds his workplace unhealthy, the child has no choice. "Children are literally under the control of school and their parents."

The Combined Effect of Chemicals

In February *Pure Facts* reported the Food and Drug Administration had granted permanent approval to the synthetic dye Blue No. 2. The article pointed out that the testing of this dye and other additives is inadequate. Dyes are not required to be evaluated for behavioral effects, and they are tested singly, not in combination with other dyes, or with flavorings, preservatives, or any other substances.

While Blue No. 2 was gaining FDA approval, another branch of the government was learning a sad lesson about the interaction of chemicals.

Last year the Environmental Protection Agency (EPA) granted approval to the **Hartz Mountain** Company for a new flea spray called **Blockade**. The product is a combination of two chemicals which had been used for animals and found to have a low incidence of toxicity problems.

But when combined, these two substances resulted in a product which has been blamed for the illness and death of many dogs and cats. Their owners described the rapid onset of some of these symptoms almost immediately after using small amounts of Blockade: foaming at the mouth, seizures and other neurological damage, vomiting, death.

If two drugs can combine to create a toxic combination, and two pesticides can do the same, what happens when two "safe" food additives are eaten together?

Allergies — a Canadian Perspective

or 'A Rose By Any Other Name Could Still Make You Sneeze'

Leslie J. Montgomery, Chairperson of the Allergy Information Association in Ontario, reviewed the continuing debate over allergy:

"In the early '60s, the issue of whether or not a condition called 'allergy' existed was being hotly debated in medical circles. While the medical experts debated, thousands of Canadians suffered from the day-to-day consequences of allergies. Two such individuals, influenced by experiences with allergies in their own families and determined to help themselves and others, formed the Allergy Information Association.



"Two decades later, there is no longer any controversy over people being adversely affected by foods, pollens and chemicals. Once again, however, medical practitioners are divided on what is to be called an 'allergy' as opposed to a 'sensitivity' or an 'adverse reaction.' While the debate on naming conventions continues, an estimated 25 percent of Canadians must cope daily with an environment in which the increasing use of preservatives, synthetics, antibiotics and pesticides add to the burden of more traditional food and pollen reactions.

"The emphasis of the A.I.A. has been, and must continue to be, on helping the allergic individual cope in a world where the definition of the problems may not always be agreed upon, but the suffering is real. 'By the Allergic — for the Allergic' is both our motto and our raison d'être."

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New Potential for Drug Abuse

Ritalin, considered by many doctors as the drug of choice for hyperactivity/ADD, has gained notoriety in Western Canada as a street drug, and there are indications the problem has spread to the United States as well.

Used by itself, Ritalin (an amphetamine) does not appear to trigger the symptoms of euphoria brought on by illicit drugs. In fact, the most common side effects are unpleasant ones. But when it is combined with Talwin, an inexpensive painkiller, the effects can be devastating.

Used simultaneously, each drug offsets the other's unpleasant side effects. The user can quickly develop an addiction to Talwin and Ritalin ("T&R"), requiring a steadily increased dose to obtain the desired "high."

Addicts sometimes add alcohol, glue-sniffing or other abuse to compensate for the numbing effect the T&R's eventually produce.

A combined T&R plus alcohol addiction was cited in the murder of seven women in North Philadelphia last summer.

The confessed murderer, Harrison "Marty" Graham, lured women into his home with the promise of alcohol and drugs, including Talwin and Ritalin. According to an account in the *Philadelphia Inquirer* (8/18/87), "Graham said he took Ritalin, Talwin and alcohol with the seven women and then strangled each of them with his hands. . . ."

Canadian law enforcement officials have cited T&R addiction as the cause of 60 to 70 percent of the crime in some sections of Calgary. Unlike illicit drugs, these substances are available in every pharmacy, so stealing and selling the drugs are a profitable way for the abuser to support his addiction.

Pure Facts

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