

The Growing Problem of Antibiotics

The issue of growing resistance to antibiotics is only one of the problems created by the widespread use of these drugs.

A nationwide survey of nearly 700 children shows a disturbing link between children with developmental delays and the amount of antibiotics they have taken.

The survey, which included youngsters between the ages of one and twelve found that those who have taken more than 20 cycles of antibiotics in their lifetime are over 50% more likely to suffer developmental delays. Children who have had 3 or fewer rounds of antibiotics were half as likely to become developmentally delayed.

The 9 month survey began in June 1994 by the Developmental Delay Registry (DDR), a multi-national database of 800 families, most of whom have children with developmental delays.

The survey's other findings:

- * Nearly 75% of the delayed children were reported to be developing normally in their first year of life.

- * The developmentally delayed child was 37% more likely to have had 3 or more ear infections than an unaffected child.

- * Affected children were nearly four times as likely to have had negative reactions to immunizations.

- * Affected children were twice as likely to have had ear tubes than unaffected children.



Dr. Feingold pointed out that one of the body's reactions to an allergen or to a synthetic chemical is the swelling of tissue. If the tissues in the Eustachian tube swell, they can block the drainage of fluid from the ear. This provides a breeding ground for bacteria and can result in an ear infection.

Many parents report their child's ear infections either diminish or cease after they become established on the Feingold Program.

Kelly Dorfman, a licensed nutritionist and co-founder of the Developmental Delay Registry cautions, "Parents should be put on notice that utilizing antibiotics prophylactically could jeopardize their children's development. We believe alternative approaches to treating ear infections should be considered."

The incidence of children in the United States with developmental, behavioral and mental disorders is dramatically increasing, according to the DDR. Conservative estimates show that in the last four years the number of children under age 18 with these disorders has grown from 4.8 million to 7.5 million. Included in these pervasive developmental disorders are autism, speech and language problems and multi-system developmental disorders. Symptoms range from skin irritations and sleep disturbances to repetitive behavior and loss of language.

According to Patricia Lemer, a National Certified Counselor and co-founder of the DDR, "The difference in the occurrence of developmental delays between children who take high doses of antibiotics and those who don't is astounding. We are urging the medical research community to conduct scientific, longitudinal studies to help us find out what it going on here."

Ear infection bacteria are becoming immune to antibiotic treatment

A bacteria responsible for about 20 million cases of middle ear infection each year is rapidly becoming resistant to penicillin, according to Dr. Keith Klugman, who addressed the American Society for Microbiology in September.

The bacteria, known as "streptococcus pneumoniae" also triggers pneumonia and meningitis. Children in underdeveloped countries are at high risk as pneumonia kills four million youngsters each year.

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 anti-oxidant preservatives BHA, BHT, and TBHQ.

Past the breaking point — the nightmare of spouse abuse

The problem of abuse within the family is not new, and the causes go beyond diet, but for one family food additives were directly connected.

We'll call them the Smith family to preserve their privacy, but the only thing in this story which is fabricated are the names.

Dave and Joanne are devoted to their children and their church, and after an abusive first marriage, Joanne was sure she had found the right partner. But there were times when her husband's fury would seem to take over his normally gentle personality. After he hit her in front of the children, Joanne called the police; she was determined that she would never again be a victim. Looking back, Joanne wonders why it didn't occur to her that Dave's rages were connected to what he ate, especially K--- A--, the well known powdered drink mix he liked.

She had learned about diet and behavior after a long and frustrating search to find help for her son, James. He was on and off various medicines, beginning in second grade. Joanne discontinued the Ritalin after it caused James to become depressed, but she made what she feels is a mistake in telling his teacher that her son was no longer taking the drug. After that, Joanne relates, James' teacher seemed to go out of her way to find fault with him, and frequently complained to her in front of the child.

By fourth grade he was tuned out to school, and in fifth grade James began to get into trouble at school. In junior high more drugs were tried (artificially colored medicines), and depression followed. Not only were James' grades poor, but his behavior at home was growing worse. He became verbally and physically abusive, and at times would destroy things in their home. More than once he threatened Joanne with a knife.

Growing increasingly distressed about her son's future, Joanne began to look beyond the medicine and counseling — neither of which had helped. All the various parenting techniques had been a failure, and the many promises of the professionals they saw were hol-

low as well. She had heard about additives as a trigger for disturbed behavior, but was very skeptical. She felt that people who worried about additives were a little nutty. The psychiatrist told Joanne that sensitivity to food additives was a very rare problem, that a Dr. Feingold had done some work in this area, but studies were inconclusive. Not knowing where else to turn, Joanne tried to remove synthetic dyes from James' diet, and she did see an improvement.



When she read a letter published in *Christian Parenting*, Joanne learned of the Feingold Association and sent for our literature. Aha! She saw that artificial flavorings are also a problem. And aha! Preservatives too! Using the FAUS materials, she saw another level of improvement in her son, but Joanne just couldn't bear to 'waste' the additive-laden foods, and was only following the diet for James. He, in turn, thought he could eat synthetic additives when he was away from home, and control his reaction so nobody would be the wiser. But Joanne could always tell, and after several infractions in a row, James' behavior would be totally beyond his control.

It gradually became more and more apparent that each family member was being harmed by petroleum-based additives, and eventually the entire family went on the Feingold Program. With longer stretches of additive-free behavior to use as a comparison, it became obvious that James, Dave, and his 4 year old son, Michael were profoundly

affected by chemical additives. James realized that the out-of-control teen was not his real self, and would feel humiliated by his own behavior. On the diet, he's a great kid — calm, mature, helpful and affectionate, often giving his mom a hug in front of his friends. The "old" James would not even want to walk beside his mother; he didn't want people to know they were related!

Dave's last reaction came after he consumed six glasses of K---A-- at a family gathering; an hour later, Joanne reports, he was "throwing a fit." Their daughter, Dianne, had consumed the drink as well, and was almost as irritable and hard to be around as her dad.

Joanne's best friend had previously avoided being around Dave, and now is amazed at what a "nice guy" he really is. Her family has also begun paying closer attention to what they are eating, and they have seen a clear connection between food additives and some neurological symptoms in their young son.

In addition to avoiding certain food additives, the Smith family has found that petroleum fumes, especially diesel, are real troublemakers. Joanne even has noticed that the baby, due to be born in a few weeks, became extremely active after she had been exposed to the fumes.

Another major culprit are the additives which go under the name 'polysorbate'. Joanne told *Pure Facts* that she learned from a food chemist that polysorbates are made from (guess what!) petroleum. [Polysorbates are not routinely eliminated on the Feingold Program.] Her youngest son, Michael, is normally very well behaved and somewhat shy. She has seen him become defiant and aggressive after eating bread which contained polysorbate. This additive was identified as the cause of a 'knockdown fight' between Dave and James. Now they all avoid it, and life is back to normal.

This year at their Thanksgiving celebration the Smith family will have so much to be thankful for!

Antibiotics are in danger of losing their effectiveness

Drug companies first mass-produced penicillin in 1943, and by 1947 microbes began to appear which could resist the antibiotic.

Writing in the *FDA Consumer*, geneticist Dr. Ricki Lewis described some of the problems we face. In 1992 the Centers for Disease Control (CDC) reported that 13,300 hospital patients died of bacterial infections that were resistant to antibiotic treatment. And the *New England Journal of Medicine* (April 28, 1994) reported that researchers have identified bacteria in patient samples that resist all currently available antibiotic drugs.

How bacteria becomes resistant

Any group of organisms, such as bacteria, includes some which are naturally resistant to an antibiotic. When a person takes a drug, it kills off the weaker bacteria, and leaves the ones that resist it. These renegade bacteria then multiply, and since bacteria can increase a millionfold in a day, the new, tougher bacteria replace the others.

More people are suffering from infections

There has been a dramatic increase in the number of adults suffering from sinus infections; and the rise in ear infections in children is alarming. The January 18, 1995 *Journal of the American Medical Association* reports that the number of antibiotic prescriptions for sinusitis went from 6 million in 1985 to 13 million in 1992. The increase in antibiotics for middle ear infections during this period was from 15 million to 23.6 million.



In some cases, children are given antibiotics when they are well, as a protection against future ear infections.

The track record of antibiotics for ear infections

In March of 1993 *Pure Facts* published a special issue on ear infections. We noted how many families have found that their child's ear infections seem to be the result of consuming synthetic additives, and that the colors and flavors in antibiotics they are given are likely triggers for the next infection.

Journalist Sara Solovitch wrote of a study of 2,975 children in Holland. When antibiotics were begun on the first day of an ear infection, the frequency of recurrence was 2.9 times higher than when no antibiotics were used at all.

Medical advances present another problem

Cancer patients on chemotherapy and transplant recipients are given large doses of antibiotics to prevent infection

and rejection. These people would not have survived their illness in years past, but their treatments require they take drugs to suppress their immune system, and this makes them a high risk for infection.

Cavities and tetracycline

Some microbiologists suspect that the mercury in "silver" dental fillings play a part in building resistance. Dr. Anne Summers and her colleagues at the University of Georgia found that when mercury fillings were used in the teeth of animals they developed a resistance not only to the mercury, but also to commonly used antibiotics, including penicillin, streptomycin, kanamycin, chloramphenicol, and tetracycline. This report appeared in the *New York Times* (April 27, 1995).

Drugs at the dinner table

The practice of routinely dispensing antibiotics to livestock has some critics worried. Animals are given the drugs to prevent disease and to increase their rate of weight gain. The producers like the profit it brings, and the drug companies appreciate the more than \$500 million in annual sales.

Recently the Food and Drug Administration came under fire for allowing poultry farmers to use a newly-developed type of antibiotic, called sarafloxacin. The response of the CDC director of bacterial and mycotic diseases to the FDA decision was "We're very concerned."

"Role of Food Allergy in Serous Otitis Media"

by T.M. Nsouli et. al., *Annals of Allergy*, vol. 73, pp 215-219, 1994

The medical term for middle ear infections is "serous otitis media." Serous means a thin, watery substance; otitis refers to an infection of the ear; and media means middle.

The information on antibiotics and developmental delay (page 1) was provided by the Developmental Delay Registry (DDR). Their first quarterly newsletter, *New Developments*, included this study on ear infections.

Suspected allergens were removed from the diets of seventy-eight children for a period of 16 weeks. Then the foods were added back individually.

86% of these children experienced a significant improvement (fewer ear infections) during the time that the suspected allergy foods were removed. When the foods were reintroduced 94% of the children experienced a recurrence of ear infections.

The focus of *New Developments* is to explore healthy options for treating developmental delays. The nonprofit effort was initiated by four professionals with impressive credentials working in this area.

Although the Registry is only 1 1/2 years old, they have already held numerous workshops, and have an ambitious schedule of conferences planned. See *Feingold News* for details.

New research on bedwetting

Dr. Feingold often referred to the "genetic profile" of an individual, and that it determined how sensitive one would be to food additives and salicylates.

This summer the journal *Nature Genetics* published the results of work on the genetic basis of bedwetting. The research was carried out at the University of Copenhagen by biochemist Hans Eiberg, who has found the approximate location of the gene believed to be responsible for this scourge affecting about 8 percent of children past the age of seven.

Scientists have long known that this problem runs in families, so the tendency is inherited. Now, the pinpointing of a gene further reinforces this belief.

Are there global differences?

It is common for children to stop bedwetting once they begin the Feingold Program. Since the use of synthetic food additives is so rampant in the U.S., it would be interesting to find out if bedwetting is more prevalent here.

The following letter from a Colorado mom is typical of those we receive:

Dear FAUS,

"Thanks for your help! In only 5 days my six year old son seems to be improving not only in behavior, but also has stopped wetting the bed — which was an every night occurrence!

"I had suspected a correlation between certain foods and his abnormal aggressive behavior because of the immediacy of the reaction, but had been told for years that I was an overly conscientious mother. And the allergist could find no reaction to the skin tests.

"I made it my New Year's resolution to get to the bottom of my child's problem, for his sake, before his problems at school and with friends became irreversible. I remember reading about the Feingold Diet in *Prevention* magazine years ago, but when I had asked my pediatrician about more information he had the usual skepticism of the medical profession.

"So I found some of the books on my own and like I said, have already seen positive results."

Reports from other countries

While the United States may possibly be a "world leader" in bedwetting, we hear similar stories from all over.

One delighted mom in Saskatchewan, Canada had seen clear success with just the information in the *Feingold Cookbook*. She wrote, "I have a 4 year old boy who is currently on the Feingold Diet. At the age of 3 1/2 years, my son was not totally toilet trained and very active.

"After consulting with my family doctor, a pediatrician and a child psychologist, I decided to put him on the Dr. Feingold Diet. The first positive effect I noticed was he became totally toilet trained (day and night) within 1 1/2 weeks. Then he became quite calmer and was not going 'haywire' all the time."

An older child in New Zealand

Brenda Sampson, of the Wellington Hyperactivity Association received this letter from a grateful parent.

"My younger son, just 11, has been on the Feingold diet for 8 months. I was very skeptical about the diet, as he had been on drug therapy, which was effective for awhile. I didn't know if I had the patience to persevere with the diet as I have 5 children aged from 4 to 16. However, I love my son dearly, and he was still having trouble concentrating at school, and still having difficulty controlling his behaviour.

"Much to my surprise, after 3 or 4 days he stopped wetting the bed permanently; he had wet it almost every day since he was born.

"His attention span has improved, along with his schoolwork. The teacher was not told anything about the diet, and she pinpointed when this happened.

"He seems less aggressive and irritable. He seems a happier boy. He had often said he wanted to kill himself, as no one liked him, and nobody understood his problems."

Bedwetting Triggers

Food additives are a major irritant found to result in bedwetting, but there could be many other things which set it off.

Some parents say milk is a big offender; others name salicylates. One mother reported she had tracked down the culprit, which turned out to be pesticides. Apple juice made with fruit which had been sprayed resulted in a wet bed, while organic juice did not. After several trials, all yielding the same result, she was convinced.

Studies on bedwetting

The connection between enuresis and allergy is not new; G.W. Bray described the role of allergy in *Archives of Diseases in Childhood* in 1931.

More recently, researchers in England have addressed the fact that children labeled as hyperactive seem to be more likely to suffer from enuresis.

Egger, Carter, Soothill and Wilson have conducted various studies in which hyperactive children are placed on highly restrictive diets. As a result, the majority of children experienced a significant improvement in many areas, including enuresis.

In the May 1992 issue of *Clinical Pediatrics*, Egger et al published a study titled, "Effect of Diet Treatment on Enuresis in Children with Migraine or Hyperkinetic Behavior."

The authors wrote, "Twenty-one children with migraine and/or hyperkinetic behavior disorder which was successfully treated with an oligoantigenic (few foods) diet also suffered from nocturnal and/or diurnal (daytime) enuresis. On the diet, the enuresis stopped in 12 of these children and improved in an additional four."

The work of Kaplan et. al. in Canada also suggests children with behavior disorders are more prone to suffer from various physical problems, including enuresis.



Hidden Treasures

FAUS has recently learned of two acceptable products made by major food manufacturers. They are not easy to locate, but may be worth the effort.

Of the many candy bars made by M&M Mars, there is one that can be used by families on the Feingold Program. It is a peanut bar called "SNICKERS Munch." Unlike the traditional Snickers bar, this does not contain chocolate.

The ingredients are: peanuts, sugar, butter, corn syrup, salt, and soy lecithin. It's a good tasting candy made mostly of peanuts, held together by the sweet, buttery brittle.

This is not a new product, but has only recently been discovered by FAUS. Because it does not contain preservatives, retailers may not want to carry it during the summer months, but any store which sells candies by M&M Mars would be able to order Munch for you.

M&M Mars suggests you check out convenience stores, which may stock it. Look for a dark red colored wrapper, with the name "Snickers" in blue.



In many supermarkets cake mixes now occupy an increasingly smaller space. And retailers generally limit the selection of flavors they offer.

Your favorite supermarket might stock several Duncan Hines cake mixes, but chances are none of them are acceptable. There is one variety, however, which is suitable for Feingold members. It is the "DUNCAN HINES Moist Deluxe Dark Chocolate Fudge Cake Mix" (contains corn syrup).

You may have difficulty finding the dark chocolate fudge mix in your supermarket; most stores carry the devils food variety, which is not acceptable.

The resourceful Feingolder need not give up yet. You could see if your friendly neighborhood grocer would order it for you. If he's not especially friendly, the other option would be to ask him to order a case of 12 boxes, agree to buy the whole case, and split it with friends or other Feingold families.

The Reluctant Feingolder

Why do new families sometimes have such a strong resistance to beginning the Feingold Program? One mom relates her experience.

I had received the big white folder filled with information and hope for my little preschooler. Reading through the Handbook was encouraging — other parents had faced this issue and found solutions. The stories of the children which were included in the newsletters were a big comfort; I knew that we would be able to be one of the successes as well.

But there the package sat, and new issues of *Pure Facts* came. I read them, then added them to the stack of solutions that I somehow couldn't begin to use.

Then an unexpected phone call jolted me out of my comfortable procrastination. A friend of a friend had learned that we were members of the Feingold Association; she asked me how we were doing on the Program. I fibbed that

everything was going well...how could I explain my hesitation when I didn't understand it myself?

My wonderful husband came up with the answer that seemed to make the most sense to me. He said that just as the alcoholic needs to grieve the loss of his "best friend", I needed to grieve the loss of some favorite foods and the memories connected with them. He was right!

Warm recollections so often are imbued with the scent and taste of a food, a food I was convinced I could no longer enjoy. Oh no! Will I be eating only gray tasteless things?! I knew better than that, but still hung on to old memories. The times my friends and I sat together talking over a cup of hazelnut coffee was an especially treasured recollection.

That was last year, and this year we are another Feingold success. My daughter's response has been all I had hoped for.

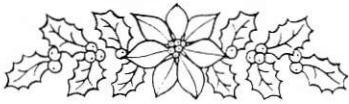
It's hard to believe I could have waited so long to begin enjoying our additive-free lifestyle. There's plenty to eat, and *none* of it is gray! And I've just learned that "For Pete's Sake" sells all natural coffee flavors, so I'll be enjoying our new, calm life, and my fond memories, while I sip a cup of natural hazelnut coffee.



Holiday Notes

Mary Pavlov wrote to us about some information she learned from H.E.A.L. (the Human Ecology Action League, a non profit support group for the highly chemically-sensitive). "They said they know of individuals who react to being around **poinsettia plants**, in addition to the fact that they are poisonous. (Needless to say, ours went on the porch immediately!)"

"When I asked about the possibility of reacting to **candles**, they suggested that the smoke could be upsetting, or possibly the phosphorous residue in the air (for phosphorous-sensitive individuals, as my children are)."



Stamps and envelopes generally have **artificially flavored glues**. If your youngsters volunteer as 'lickers and stickers' for holiday cards, be sure to supply them with a wet sponge.

Visiting the relatives? Contact FAUS if you would like to order an extra **Foodlist**, either for your region or for another area of the U.S.

Any current Feingold member is welcome to purchase additional Foodlists; the cost is \$5 each, which includes postage.

Stay warm this season...but *not* with kerosene heaters! They produce fumes which are serious offenders, especially for sensitive people

Bring along some '**safe**' snacks when you take the family gift shopping. Hungry shoppers can be real Grinches, and you can count on it taking longer than ... well, longer than you have counted on.

FAUS Catalog

We were very disappointed to learn that the children's art materials and face paint will not be available after the first of the year.

AIA Network News

Many of you have contacted FAUS to request more information on a test for fungal metabolites; this information appeared in the September issue of *Pure Facts*. AIA volunteer, Jean Curtin, has provided information on just what fungal metabolites are.

Yeasts are micro-organisms found everywhere in nature. They live in the intestines of humans, kept in balance by other "friendly" organisms living there. Sometimes antibiotics given to kill off "bad" germs kill off "friendly" germs as well, creating an imbalance that can allow candida and other fungi to overgrow. When that happens, allergies can worsen, diarrhea or even depression can develop. Links between ear infections, yeast overgrowth in the intestines and autism have been suggested, but no direct proof has been offered.

Dr. William Shaw of Children's Mercy Hospital, Kansas City, MO, has found such a link. He published a case report involving two autistic brothers in the August issue of *Clinical Chemistry*. Dr. Shaw identified several fungal metabolites in the urine of the autistic brothers. These furan compounds and citric acid analogs could replace

important molecules produced in the Krebs Cycle (the main energy-producing cycle of the human body). This can be compared to running a car on gas that has been slightly watered down; it will run, but not very well.

A study of several hundred autistic children is currently underway. So far, over 90% of those tested are positive for the problem. Affected children are being treated with anti-fungal drugs. Early results correlating treatment with improvement in autistic behaviors is promising.

Dr. Shaw isn't sure if the infection actually causes autism, or just makes it worse. He hopes his findings will spark further investigation into that question.

Informative Workshops

D
i
s
s
e
y

W
o
r
l
d

Join us for
Conference '96!
June 25 - 30, 1996
the Enclave Suite Hotel
Orlando, FL



For reservations or information
call (718) 987-7776

New Feingold Friends

S
e
a

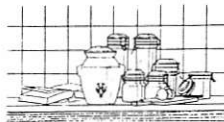
W
o
r
l
d

From Soup to Nuts in 30 Minutes!

RoseMarie Roberts has volunteered to coordinate compiling a new cookbook to help busy moms keep their kitchen time short.

We are looking for meals that take no more than 30 minutes, and for other recipes that can be put together in a hurry.

Please send your favorite original recipe(s) to RoseMarie at 4 South Traignor Ave., Center Moriches, NY 11934.



Pure Facts

Editor: Jane Hersey

Contributing to this issue:

Debbie Jackson

Pat Palmer

Lois Miele

Barbara Keele

Donna Curtis

Lynn Murphy

Pure Facts is published ten times a year and is a portion of the material provided to members of the Feingold Association of the United States.

For more information contact FAUS, P.O. Box 6550, Alexandria, VA 22306 (703) 768-FAUS.

November, 1995

The Developmental Delay Registry

In April of 1994, four women met over coffee to discuss their concerns about the rapidly growing numbers of children with special needs. Kelly, a nutritionist, observed that she was seeing more children with histories of ear infections, allergies, continuous use of antibiotics, and developmental problems ranging from attention deficit to autism. Sabra, a speech pathologist, noted that her entire private practice consisted of young, mostly nonverbal children with autism and other pervasive developmental delays. Patricia concurred that there were many more of these children in her educational counseling practice than ever before. Judy, the mother of a child with developmental delays said, "Let's start a registry." That was the birth of the Developmental Delay Registry (DDR).

Using parenting publications, computer bulletin boards, schools, advocacy services, private practitioners and doctor's offices, a survey was distributed to parents across the nation. Ultimately, the growth of almost 700 children aged 2 - 12 was documented. The results showed that children who had prophylactic (preventative) antibiotics, or more than 20 rounds were 50% more likely to have developmental delays than children developing typically. Furthermore, affected children were nearly 4 times as likely to have had a negative reaction to an immunization, and twice as likely to have had ear tubes than normally developing children. "Our work on this project convinced us there was a need for a new organization."

This is a description of the DDR, as published in their newsletter, *New Developments*. The work of these talented women is exciting news for all of us working to find better ways to help our children, and other children.

The DDR will be holding national and regional conferences, providing speakers who bring new perspectives to treatment, and expand the options available to parents.

Arlington, VA - FAUS will co-sponsor a one-day program on December 2, 1995.

San Diego, CA - This will be a major conference, held on February 23 - 25, 1996

DDR conferences introduce parents and professionals to the role of nutrition, immune system problems, and sensory processing dysfunction in the acquisition of developmental delays such as learning disabilities, speech and language problems, ADD and autism.

Call (301) 654-0557 for information

Thank You Thank You Thank You Thank You

...to you for remembering FAUS when the United Way and Combined Federal Campaign forms are filled out.

...to Gloria Casey for writing about the help she has received from FAUS. Her story was published in a United Way newsletter distributed at her place of work. As a result she has received requests for information from colleagues whose children have been diagnosed with ADD.

...Mary Cookson for her presentation to a human services class, and Denise Knight for making the arrangements.

...for writing letters to editors or newspapers and magazines. We have been receiving calls from *Welcome Home* magazine as a result of such a letter.

...Carolyn Allen, an enthusiastic letter-writer in Fort Worth, whose efforts have educated many people about diet management.

Welcome to our new Program Assistant

Alaska - Fairbanks: Laurie Walton (907) 457-2131

What does a Program Assistant do?

A Program Assistant is a member who has been successfully on the Program for six months or more, and is willing to answer basic questions and encourage other members just starting out.

She can suggest food substitutions, good places to shop, and share ideas.

Huntsville, AL

One of our members is looking for a good restaurant in Huntsville. Has anyone found one which can provide natural food?

Getting Together

Sacramento/Roseville, CA: Michelle Weeks would be glad to host an informal gathering of other Feingolders if there are members who are interested. Michelle can be reached at (916) 338-4662

Rochester, NY: Teri Schultz would like to meet with other moms in her area; her number is (716) 586-5091.

Ocala, FL: Lori Kortright has a 10 year old son. She would like to get together with other Feingold families. Lori's phone number is (904) 620-0508

Product Alert!

LOUIS RICH Turkey Nuggets now contain TBHQ; please remove them from your Foodlist.

ORTEGA Taco Shells, Seasonings & Sauce: This product now has TBHQ sprayed on the packaging, so it is Not Acceptable.

KELLOGG Bran Buds now contain BHT in the vitamin A Palmitate; please remove this from your Foodlist.

Clearing up some Confusion

CRISPIX: We were worried about the possible loss of this popular cereal when we received a call from a member who reported that she had seen BHT listed on a box. A call to Kellogg's confirmed that the preservative is used in the individual size servings of Crispix, but it is not used in the larger boxes. Kellogg's told *Pure Facts* that they had no plans to begin adding BHT to them.

FRITOS Corn Chips, regular, are now called "Original."

The Product Information Committee is checking with MELSTER about their Peanut Butter Kisses, a candy which is marketed at Halloween. Some of the bags list artificial coloring.

Move from Stage One to Stage Two

HAIN Stoneground Whole Wheat Rich Crackers have substituted grape juice in place of pear juice, so this is now a Stage Two product.

ENER-G Brown Rice Baking Mix contains almond meal, so it should be moved to Stage Two.

AUBREY ORGANICS Camomile Bubbles Natural Bath Oil contains almond (salicylate).

Welcome, Amy's Kitchen

FAUS is pleased to be able to add so many of the products from AMY'S KITCHEN, INC. The company vice president provided the following information:

"In a nutshell, our 'mission' is to produce, at affordable prices, delicious frozen vegetarian food made with natural and organic ingredients for people who appreciate good food, but are often too busy to 'cook from scratch.' We don't use meat, fish, poultry or eggs in any of our dishes, and cheeses are made without animal rennet.

"Amy's products are found in just about all natural food stores throughout the US and Canada. We are also in a large number of groceries and supermarkets, particularly those with 'natural food' freezer sections, and have a few products in Price/Costco and Sam's."

Note: If you are not accustomed to vegetarian dinners, start slowly. Some of the seasonings in the entrees may be unfamiliar tastes. The desserts should be popular with everyone, but they are Stage Two items.

PIC Report

The following products have been researched or re-researched and may be added to your Foodlist.

Stage One

AMY'S* California Veggie Burger, Chicago Burger, Macaroni & Cheese, Broccoli with Cheese Pot Pie, Vegetable Pot Pie(MSG/HVP)
ANDERSON/ERICKSON Lowfat Milks (Des Moines IA)
BEECH-NUT Rice Cereal with Bananas
BEECH-NUT STAGES Barley Cereal, Mixed Cereal, Pear Juice
COUNTY LINE 100% Natural Medium Sharp Cheddar Cheese, 100% Natural Monterey Jack (not sold in the Northeast and Northwest)
CRACKLIN' GOOD Sugar Honey Grahams (available in South and Midwest)
CROWLEY Yogurt: Vanilla Lowfat Swiss Style (available on the East Coast and Midwest)
EAGLE BRAND Low Fat Sweetened Condensed Milk

Stage Two

AMY'S* Burritos: Bean & Rice with Cheese (pepper, tomato), Beans & Rice Non-Dairy (peppers, tomato), Black Bean Breakfast (peppers, tomato)
AMY'S* Enchiladas:Black Bean Vegetable (pepper, tomato), Cheese (peppers, tomato),
AMY'S* Pizza Pocket: Cheese Calzone (tomato) Ravioli with Cheese (tomato), Vegetable Lasagna (tomato) Mexican Tamale Pie (tomato)
AMY'S* Whole Meal: Cannelloni with Vegetables (tomato), Enchilada w/Spanish Rice & Beans (peppers, tomato), Veggie Loaf w/Mashed Potatoes & Vegetables (tomato, cider vinegar)
AMY'S* Country Dinner: Vegetarian Salisbury Steak (apple), Shepherd's Pie (tomato)
AMY'S* Apple Pie, Chocolate Fudge Cake (cider vinegar), Strawberry Cheesecake
BOAR'S HEAD Ovengold Roast Breast of Turkey (CS, paprika)
BRAUN Premium Ice Cream: Rocky Road (CS, almond) (available in Midwest and Southwest)
CHURNY Cheese Ball: Sharp Cheddar & Cream Cheese (almond)
ENER-G* Brown Rice Baking Mix (almond)
HAIN* Stoneground Whole Wheat Rich Crackers (CS,grape)

Non-Foods

BASIS Bath Bar: Normal to Dry Skin
BASIS Facial Bar: Combination Skin, Sensitive Skin
LURIDE-SF Tablets (Sodium Fluoride .25mg tablets)

The Feingold® Association does 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.