

Pure Facts

Newsletter of the Feingold® Association of the United States



April 2000

Vol. 24, No. 3

Toddlers on Drugs

The national media has covered the shocking results of a new study published in the February 23 issue of the *Journal of the American Medical Association* (JAMA).

Children between the ages of 2 - 4 are increasingly being given powerful drugs to treat behavior problems, according to the researchers, most of whom are at the University of Maryland Schools of Medicine and Pharmacy.

The study

The study covered the years from 1991 to 1995 and examined the records of more than 200,000 preschoolers in three regions of the United States.

They found that up to 1.5 percent of these young children were being treated with stimulants, antidepressants and antipsychotic drugs despite the fact that these medications have not been tested in such a young population, and the long term effects of their use on developing children is not known.

The researchers see a trend that indicates the use of the drugs for very young children is accelerating. Between 1991 and 1995 prescriptions for

nearly all of the drugs studied rose sharply and it appears that the rise has continued to increase in the five years since then.

Ritalin

Stimulants, especially methylphenidate (Ritalin) are the most widely used. In the preschool population studied, prescriptions of this drug increased twofold to threefold.

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Come join us at our 25th year celebration

FAUS Seminar - Friday, September 22, 2000 - SUNY at Stony Brook, Long Island, NY
Dr. Marilyn H. Gaston, Assistant Surgeon General, will be our keynote speaker.

What is Neotame?

It is a new synthetic sweetener that is about 40 times sweeter than aspartame and is likely to pose the same risks as its predecessor.

A few years ago the Monsanto Company petitioned the Food and Drug Administration (FDA) for the approval of a new sweetener they call neotame.

No stranger to controversy, the Monsanto Co. is also responsible for NutraSweet and Equal (aspartame), bovine growth hormone, and synthetically altered soybeans.

Neotame, very similar to aspartame, is composed of L-aspartic acid and L-phenylalanine, combined with two organic groups called methyl ester and neohexyl.



Several organizations have been formed by and for individuals who believe they have suffered serious adverse effects from aspartame. They are vigorously opposing the FDA approval of the new sweetener, although they expect the agency will do so.

Among the most outspoken critics

of the new sweetener is H. J. Roberts, M.D., a board-certified internist, who donates his time as the director of the Palm Beach (Florida) Institute for Medical Research, a non-profit facility formed in 1964. Dr. Roberts has a database of over 1,500 people who have experienced adverse reactions to aspartame, and he has written extensively of this in articles, letters and books.

In a letter to the FDA, Dr. Roberts writes, "The fundamental issue is that Neotame, a synthetic variation of

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

A better way to help Julianne

Here's one toddler who did not end up as a statistic in the American Medical Assoc. report.

Little Julianne entered the world a healthy, contented baby; and this firstborn was even more precious to her mother since Cheryl had suffered numerous miscarriages. As delighted as she was, chronic fibromyalgia made it difficult for Cheryl to hold and bathe her infant. Migraines and insomnia also plagued her. Cheryl would later learn that she is very salicylate-sensitive and the daily dose of aspirin she had been on during the pregnancy contributed to her health problems.

But Julianne thrived, nursing well, sleeping through the night much earlier than most babies, and waking with smiles and giggles, even when she was roused from sleep. Her development was very rapid. She gave kisses by 6 months, began saying words at 7 1/2 months and spoke in sentences at 10 1/2 months.

Despite this rapid development, the first medical problems came when Julianne was six months old. The pediatrician put her on an antibiotic for a urinary infection, and the baby stayed on the medicine for almost a year. At 10 months she was given an infant dose of Motrin to help control a fever. 45 minutes after Cheryl gave the baby her medicine, Julianne had a severe behavioral reaction. She went wild, jumping up and down in her walker, going around in circles and kept up the frantic pace for over two hours despite the fact that she was clearly exhausted. Cheryl recalls the look her little girl gave her, as if to say "Mommy, please help me!"

When Julianne developed an ear infection at 13 months the antibiotic prescription was switched to a different version and once again, the reaction to the medicine (or the additives in it) was extreme. The baby would cry to be held, then scream when her parents tried to hold or comfort her. This continued for ten days. The worst part of this episode was the way Julianne looked and behaved. She became distant, spent a lot of time staring into space, and the toddler who spoke so well and so early stopped talking.



Julianne and Stephanie

Each time Cheryl brought up the reaction to the medicine the doctors and nurses she spoke to brushed off her concerns. She was told, "Her ears are fine now — I don't know what you're talking about."

Finally Julianne was able to stop taking the antibiotic but her recovery was slow. Cheryl remembers that three days after discontinuing the medicine Julianne would pick up a book, frantically flip through the pages, toss the book aside and pick up another, repeating this strange behavior, which continued for about an hour.

As a toddler, Julianne averaged 3 to 5 tantrums a day, crying, kicking, screaming and punching. The shortest tantrum lasted 45 minutes and her record was timed at 2 1/2 hours.

During one of the frequent visits to a doctor, Cheryl had a long wait and began speaking with one of the other moms there. This woman told her of a friend with similar problems, and how she had been helped by the Feingold Program. Cheryl wrote down the phone number for the Feingold Association, but was reluctant for many reasons. She had begun taking Julianne to a homeopath and was seeing some improvement, so she was reluctant to make any changes, even if

it only meant a change in food. Also, she had never heard of the Program and was suspicious.

By the time summer came, Cheryl had figured out that food dyes were clearly a culprit, but it was another 4 months before she called the Association for information. (At her first visit to a new pediatrician Cheryl told him how she had observed the reactions to dyes, and he responded "This dye thing is over-rated, there's too much hype." Once again, Cheryl went shopping for a new doctor!)

Julianne was 20 months old when the family began the Feingold Program and almost immediately the toddler started to sleep through the night, just as she had when she was a baby. Now that she was no longer being woken up as much as 5 times every night, Cheryl began to feel better. It was not long before she saw that her own symptoms — the fibromyalgia, headaches and insomnia — were directly related to food additives and salicylates.

Both Cheryl and Julianne are unusually sensitive. After carefully following the Program for 5 weeks, Julianne had a single bite of an orange and had the sort of terrible night they had lived through in the past. The baby screamed to be held, but screamed out in pain when her parents tried to touch her.

There were other memorable reactions. When Cheryl used a fragrant pink liquid baby soap, Julianne became enraged and started throwing her toys around the room.

A small taste of birthday cake at a neighbor's party resulted in a bad case of hives for both baby and Mom.

Environmental chemicals are a big problem for Julianne, and Cheryl thinks that even a change in the weather seems to make her daughter more sensitive. There were difficult incidents triggered by asthmatic attacks Julianne experienced, and even more troubling effects from the preservatives in the medicine she was given. The homeopathic treatments they now

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Julianne, from page 2

use have been very helpful for those times when medicine is needed, and Cheryl is hopeful that her daughter will gradually overcome some of these sensitivities.

Now a bright, healthy 4 year old, Julianne is a social child, cooperative, insightful and happy, who loves to play outside. She gets very excited when the new issue of *Pure Facts* arrives, and is always looking for a new Stage One snack to add to her list. Even when she was only two years old, if she was offered a new food, Julianne would ask her mom, "Is it Feingold?"

Little sister, Stephanie, has been on the Feingold Program all of her young life (10 months) so it's hard to know if she has any of the same sensitivities because she has been on a pure diet of Mom's milk and Stage One this whole time.

Cheryl sometimes thinks about the many health problems she used to have, but more often, her mind goes back to those awful days when she had to fight so many doctors who wanted to use treatments that she knew could trigger serious reactions in her child. She is angry that most of the professionals she consulted would not listen to her, and especially at the one who told her not to "read so much."

Where would her bright little girl be today if Cheryl had not stood her ground? With such violent behavioral reactions would she have been diagnosed with bi-polar disorder, oppositional defiant disorder, or some other similar label? Would Julianne have ended up on a regimen of powerful drugs? Would the actual causes of the problems have been masked and never identified?

Suppose Cheryl had not happened to speak with that other mom while she was waiting in the doctor's office?

Do you have a child who has been diagnosed with bi-polar or oppositional defiant disorder and have used the Feingold Program? We would be interested in hearing from you and learning what your experiences have been.

Neotame, from page 1

aspartame, requires extensive evaluation before the FDA should accept a superficial opinion about its purported safety based largely on limited short-term data involving potentially flawed protocols that were almost totally funded by corporate contracts."

Dr. Roberts further notes that "The timing and self-serving corporate interests of this petition are suggested by the fact that the patent of aspartame expired several years ago."

Dr. Roberts is just one of a group of scientists who have objected to the approval of aspartame, citing a wide range of harmful effects. This additive has generated the greatest number of adverse reactions ever reported to the FDA.

Readers who have followed the aspartame controversy are likely to conclude that it was not a proud chapter in the history of an agency that was formed with such high aspirations to

protect the public welfare. Details of the approval process for aspartame and the subsequent Senate hearings can be found in the book *Why Can't My Child Behave?* and on various internet sites.

On its own web site, the FDA sharply criticizes those who "link aspartame consumption to systemic lupus, multiple sclerosis, vision problems, headaches, fatigue, and even Alzheimer's disease."

Alitame

While Monsanto churns out its newest chemical sweetener, Pfizer, Inc. has developed its own candidate, and has also petitioned FDA for approval. Alitame, whose brand name is Aclame, is made from L-aspartic acid and D-alanine, and is said to be 2,000 times sweeter than sugar. It can be used in virtually any way sugar is used, and is currently used in some other countries.

We have no reason to believe it will be any more desirable than its cousins aspartame and neotame.

Editorial comments: Sorting out the facts

In controversies like this one, it is to be expected that there will be opposing sides. On the one side are the people who have experienced adverse effects, and on the other side is the industry, represented by Monsanto and the Calorie Control Council, a trade group made up of businesses that use artificial sweeteners.

It is the job of the Food and Drug Administration to be the referee in such battles, considering the needs of the industry, but always putting the safety of the consumer first. But what happens when the referee's judgment is called into question?

Stevia is a natural alternative to synthetic sweeteners like aspartame, neotame, saccharine, etc. The FDA fought hard to prevent Americans from having access to this sweetener, and even resorted to seizing it and tried to burn books describing the use of the plant based sweetener. It took a public outcry and congressional actions to permit stevia to be imported into this country. Even now, it is only allowed to be sold as a supplement, not as a food additive or sweetener.

In sorting through the information provided by the agency that considers itself the guardian of the public good, it's hard to overlook the fact that this same agency claims that the Feingold diet does not work, and that this agency has not only allowed an industry lobby to write its web page on food additives, but it freely admits this, with no apparent shame.

Dear Mrs. Clinton

Many *Pure Facts* readers have contacted us and suggested that parents write to the First Lady in response to her recent White House meeting expressing concern about the growing use of drugs for very young children. They want her to know there is a "better way" to help these youngsters.

You can express your opinion by writing to: Mrs. Hillary Rodham Clinton, the White House, 1600 Pennsylvania Ave., Washington, DC 20006 or via e-mail at: first.lady@whitehouse.gov.

Antidepressants

The number of 2 - 4 year olds in the study who were given antidepressants doubled between 1991 and 1995. The greatest rise was in the use of the newer antidepressants like Prozac and Zoloft. In the Midwestern population studied 3.2 out of every 1,000 preschoolers were on antidepressants.

The September 1998 issue of *Pure Facts* reported the research of Dr. Marsha Rappley at Michigan State University. She found Prozac, clonidine, dextroamphetamine and Ritalin being given to children as young as one year old.

JAMA Editorial

The *JAMA* article was followed by an editorial from Dr. Joseph Coyle, chairman of psychiatry at the Harvard Medical School. He wrote, "...there is no empirical evidence to support psychotropic [mind-altering] drug treatment in very young children and...there are valid concerns that such treatment could have deleterious effects on the developing brain..." Dr. Coyle referred to an earlier study showing that antipsychotic drugs given to rat pups resulted in abnormalities in functioning of some of the neurotransmitters in the animals' brains.

The *JAMA* article noted that "The use of TCAs (tricyclic antidepressants) for enuresis (bedwetting) is common among 5- through 13-year olds, but its use in the preschool group is puzzling."

"Early childhood is a time of tremendous change for the human brain. Visual processing, language, and motor skills are acquired during this sensitive period."

Dr. Coyle

Clonidine

Clonidine was singled out as a source of serious concern by the researchers. In the Midwestern group, the use of this drug increased 28.2 fold between 1991 and 1995. Clonidine is

primarily used to control blood pressure. It is sometimes given to children who are taking stimulants, to help counteract the sleeplessness that stimulants can cause.

The problem is that the combination of clonidine plus stimulants is alleged to be connected to heart failure and sudden death in some children. The researchers write, "Cardiovascular adverse effects...have been reported in children treated with clonidine in combination with other medications for the treatment of ADHD and its comorbidities."

"...the validity and reliability of the diagnoses of attention-deficit/hyperactivity disorder, mood disorders, and schizophrenia in very young children have not been demonstrated."

Dr. Coyle

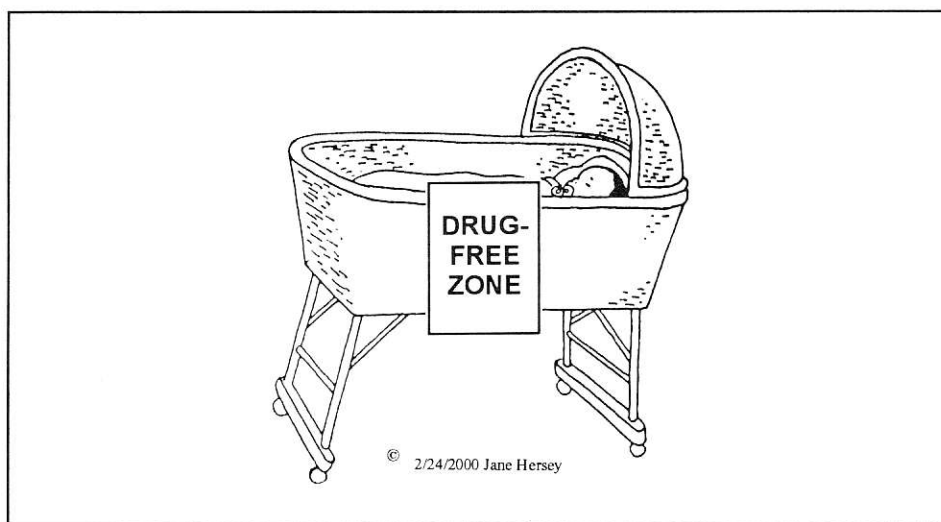
"...the normal behavior of many 2-year-olds and 3-year-olds looks a lot like attention deficit hyperactivity disorder."

Erica Goode, *The New York Times*

Where is this trend heading?

What will the statistics show when the period between 1995 and the present is examined? Will the growing use of the new drug Adderall make a difference in the number and ages of children treated?

Will the introduction of Prozac in a flavored liquid result in an increased use for preschoolers? The manufacturer of Ritalin cautions that the drug is not recommended for children under the age of six, but this has not stopped it from being used in one year olds. How young will be considered too young for a child to be given drugs that



Who is prescribing?

The majority of prescriptions for these drugs for the 2 - 4 year old population are written by family doctors, not by specialists. Dr. Coyle conducted an informal survey of peers he calls "expert clinicians and clinical researchers who are likely to treat the most difficult cases." He found they rarely use psychotropic medicines for such young children.

Drugs such as these are also being used in greater numbers in Canada and Europe, according to a 1998 report in the *Canadian Journal of Psychiatry*.

have never been approved for use with toddlers and infants? Shouldn't the medical community be actively searching for "a better way?"

"Trends in the Prescribing of Psychotropic Medications to Preschoolers," Julie Magno Zito, Ph.D., Daniel J. Safer, M.D., Susan dosReis, Ph.D., James F. Gardner, ScM, Myde Boles, Ph.D., Frances Lynch, Ph.D.; *JAMA*, February 23, 2000, Vol 283, No. 8.

To view it on the internet, type in: <http://jama.ama-assn.org/issues/v283n8/toc.html>.

Sweet Balance - sugar-free sweetener without the risk of synthetics

Mother Nature meets Monsanto in the Sugar Bowl championship, and comes away a winner.

Few people have heard about Sweet Balance, but it may not be long before this product is a household word. Who doesn't want a sweetener that can replace sugar, can be used in hot or cold foods, is zero calorie, zero carbohydrate, zero sodium, and has no dangerous side effects?

Sweet Balance is a granular sweetener that looks like an ivory-colored sugar and is 15 times sweeter than table sugar. It is made from organically grown kiwis, and is likely to be well tolerated by even very sensitive people. It is a good choice for hypoglycemics and diabetics as it is low glycemic and so it does not elevate insulin levels. It is acceptable for use on Stage One of the Feingold Program.



To order Sweet Balance, contact For Pete's Sake at (800) 864-7383 or call the company at (877) 997-9338 or check their web site: sweet-balance.com

The major down side to Sweet Balance is its price tag. A 2.82 ounce or 80 gram bottle of it (the size of most spice jars) sells for about \$12. But that small bottle of sweetener can go a long way, especially if you plan to use it in beverages and to sprinkle on cereal, rather than using it for baking. Contact the company, Nature Sweet, for help on baking with the sweetener.

Sweet Balance is also available in larger sizes that are more economical.

Consumers are advised to keep Sweet Balance in a cool, dry place once the package is opened. Refrigerate it if you live in a warm, moist climate, otherwise the sweetener will absorb moisture and become hard (although it can still be used).

A Quince a Day

"Is quince a salicylate?" Linda Mashuda asked.

Her brother gave her a bushel of them and she wanted to know if her salicylate-sensitive daughter might be able to tolerate them.

Pat Palmer replied that quinces are in the rose-pomme family, which includes apples and pears. Quinces do not have methyl salicylate or salicylic acid. They fall into the malic acid group, which could be a problem for someone who is dairy sensitive. Quince is not in the galic acid group, where most salicylates are found.

Linda reported, "We have been able to eat the quinces. No reactions. I made quince sauce (like applesauce). My daughter loves it!"

What's a Quince?

Quince (*Cydonia vulgaris*) is a fruit native to western Asia. Some varieties are round and others pear-shaped, and the colors vary from yellow to orange. They are hard and acidic, but are delicious when they are cooked, and can be used in desserts, confections and jams. The Spanish name for quince is "marmelo," which is the origin of the word "marmalade."

Un-Bearably Cute, and Good to Eat

You can use Rhodes frozen bread dough to make these Buns



For each Bear Roll you will need 4 Rhodes Cracked Wheat Rolls, thawed but still cold. You will also need a beaten egg to coat the roll before baking.

1. Combine 2 1/2 rolls to form the head. Press them into a rounded triangle shape and place on a baking sheet which has been lightly oiled.

2. Flatten the other 1/2 roll into an oval shape and place it on the triangle for the muzzle.

3. For the ears, cut another roll in half and shape one half into 2 ovals. Place on each side of the top of the head and tuck them under slightly. Use your thumb to make depressions in each ear.

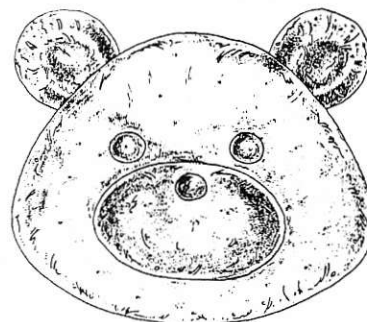
4. Form 3 teardrop shapes from the remaining half roll. Use two for the eyes and the third for the nose. Use the tip of a knife to make small indentations and press the eyes and nose into place.

5. Brush the bear with a beaten egg and let it rise for 30 minutes.

6. Just before baking, press into each ear with your thumb, to again make indentations.

7. Bake at 350° in a pre-heated oven for 20-30 minutes.

8. Cool; serve as is, or slice and fill to make sloppy Joes.



Nonprofit group links environmental toxins to learning and behavior problems

In *Harms Way*, a report from the Clean Water Fund, will present the current research, and show how people can make changes in their daily lives to reduce exposure.

Millions of children in the United States suffer from one or more developmental disabilities. These children are sometimes labeled as having learning disabilities, attention deficits, hyperactivity, autism spectrum disorders, or any one of a range of other developmental problems. There is a growing consensus that disorders such as ADHD and autism are increasing in frequency.

These disabilities are clearly the result of complex interactions among social, genetic and environmental factors that impact children during vulnerable periods of brain development. This project focuses on environmental exposure to toxic chemicals and the gene-environment interactions. Toxic exposures deserve special scrutiny because they are a preventable cause of harm.

Lead in candle wicks poses a health problem

Over the years many parents of children with "ADD" or "ADHD" have reported that their child has an unusual fascination with fire — more so than their other children. These parents take precautions to keep matches and lighters out of reach, and reserve candles for birthday cakes and blackouts.

We also know that smoke from any burning material can be an irritant for sensitive individuals. This can include burning in a fireplace, wood stove, outdoor grill, and candles. The fragrance in some candles can be another source of problems, even natural fragrances and candles sold in health food stores are irritants for some people.

Now, a new hazard: Some candle wicks have a metal core that contains lead. When they are burned, lead fumes are released and breathed in by family members, damaging internal organs, and affecting behavior and learning. These lead emissions can quickly accumulate in a home, exceeding the legal limit, and make it impossible for the owner to sell.

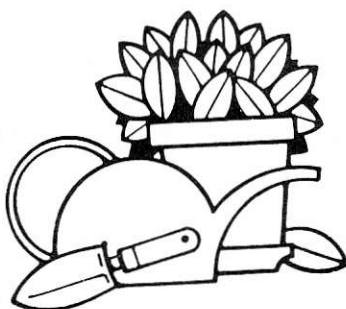
A review of the top 20 chemicals reported to be released to the environment under the 1997 Toxics Release Inventory reveals that nearly three quarters of the 20 are known or suspected neurotoxins. Nearly a billion pounds of these chemicals were released by facilities on-site directly into the air and water, with the potential to be inhaled, absorbed or otherwise ingested through our food and water supplies.

The developmental neurotoxicity of a number of toxic chemicals has been recognized for years. Research demonstrates that pervasive toxic substances such as mercury, lead, PCBs

dioxins, pesticides and others can contribute to neurobehavioral and cognitive disorders.

"In Harms Way: Toxic Threats to Child Development" focuses on the contribution of toxic chemicals to the epidemic of developmental, behavioral and learning disabilities in children. It also addresses the issues of how we can lessen or prevent exposures to our most vulnerable populations.

To order the report call (617) 497-7440 or e-mail: psrmabo@igc.org. After release the report will be available at www.igc.org/psr/



School Year Calendar

Each year FAUS publishes a School Year Calendar, with information and tips on using the Program, plus advertisements for hard-to-find products.

The Calendar also features photos of our Feingold children and teens. We are looking for informal photos, especially those of youngsters engaged in seasonal activities. (No portraits or school photos, please.) If you like, include a description of the activity, or some information about your child and the effect the Program has had.

Please write your child's name and address on the back of the photo and they will be returned to you when the calendar is printed in late summer. Photos can be either color or black & white as long as the image is sharp.

Mail to: FAUS Calendar, P.O. Box 6550, Alexandria, VA 22306.

Pure Facts

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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.

Membership includes the Feingold Handbook, Recipes & 2 Week Menu Plan, regional Foodlist containing thousands of acceptable U.S. brand name foods, Medication List, a telephone Help-Line, and a subscription to *Pure Facts*. The cost in the U.S. is \$69 & \$6 shipping. A *Pure Facts* subscription, if ordered separately, is \$38/year.

For more information or details on membership outside the U.S., contact FAUS, 127 East Main Street, Suite 106, Riverhead, NY 11901 or phone (631) 369-9340.

The articles in this newsletter are offered as information for *Pure Facts* readers, and are not intended to provide medical advice. Please seek the guidance of a qualified health care professional concerning medical issues.

www.feingold.org

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April 2000

It's time to take another look at the Feingold Diet

Sometimes things have to get very bad before they get better. Even seasoned professionals, who are comfortable prescribing stimulants and antidepressants for first graders, are shocked at the prospect of a two-year old being diagnosed with an "attention disorder" and placed on powerful drugs that have never been tested on toddlers.

Editorial cartoonists at newspapers around the country have had a field day with what strikes most people as an absurdity, but that's not the only absurdity going on. April, the month that celebrates foolishness, has always seemed like the perfect month to point out the most foolish of the foods being offered to the American public. This is not an easy task as there are so many in contention.

But our choice for the April Fool Award would have to go to Mott's for their blue applesauce. (The green came in at second place.)

Hot on the heels of the applesauce we have some unusual forms of oatmeal from Quaker. To make Sea Adventures Berry Blue instant oatmeal, you pour the contents of the packet into a bowl, add some boiling water and stir. "Blue sea with sharks, treasures and divers magically appears as you stir!" say the instructions on the box. The ingredients to make blue oatmeal include four different dyes and artificial flavoring.

Quaker's other high tech oatmeal has "dinosaur eggs" that "hatch" when you stir in hot water. That version contains two different dyes and artificial flavoring.

At \$3.59 for a 14.1 ounce box the oatmeal/candy combination costs a whopping \$4.07 per pound. Compare that markup to the cost per pound for plain oatmeal (about \$1.50), and you'll see why the man on the front of the box is smiling!

Wouldn't it make sense to consider that perhaps there's a connection between foods that are laced with petroleum-based dyes and the surge in the number of children who are having trouble in the classroom and in the nursery?

Those professionals who are dissatisfied with the use of powerful drugs on little children will find a safe, alternative that is supported by numerous medical studies and a quarter century of success. Answers for the underlying causes won't be found in the drug store; so maybe they should take a look in the supermarket.

FAUS Helpline

The Helpline in the New York office will have a new area code as of April 1. Please change the number to: **(631) 369-9340**

Developmental Delay Resources Program

The DDR will be hosting a conference in West Bloomfield, Michigan on Friday, May 5. "Healthy Development: The Fun Thing that Happens on the Way to Becoming Functional" will take place at The Abilities Center, Inc. Contact the DDR at (301) 652-2263.

Matching Donation?

Please check with your place of business to see if they have a program to match the donations employees make to non-profit organizations such as the Feingold Association. FAUS can help with any necessary forms and paper work required by your employer. Please contact Lynn Murphy in San Jose, CA at (408) 997-3822.

Thank You Thank You Thank You Thank You

...to Lauren and John Howeg of San Jose, and their son, for granting an interview for a TV report on ADHD.
...to Marta Morrissey who arranged a Feingold workshop at the Lynbrook Elem. School in Springfield, VA.
...to Yorkshire Farms for linking to the Feingold Association on their web site: www.yorkshirefarms.com. They make delicious nitrite-free hot dogs and other meats.

Getting Together

These members would like to meet other families in their area:

Landover Hills, Maryland: Serena Jackson has a 14 year old son. (301) 386-5869 - evenings after 7pm.

Staten Island, New York: Kathleen Boyer at (718) 442-6890.

Vallejo, California: Esther Roberts (707) 645-8477.

Danbury, Connecticut: Laurie Gaudette is on-line at lpms@aol.com.

FAUS Product Information Center Report

from Donna Curtis

Product Alert

MURPHY'S Oil Soap, both Liquid and Paste, now contains synthetic fragrance as well as synthetic dye. They should be removed from your Foodlist & Shopping Guide.

The ENER-G FOODS web site indicated that vanillin (synthetic vanilla) is an ingredient in their Brownies. The Product Information Committee spoke with several representatives at the company and they assured us that the brownies do **not** contain synthetic vanilla. The information on their web site and labels is a mistake. Be aware, however, that some of the Ener-G products do contain vanillin.

Product Caution

CARDINI'S PESTO PASTA SALAD DRESSING has undergone formula changes. It now contains white wine vinegar which is a Stage Two ingredient. It also has a sulfiting agent added at less than 10 parts per million.

Cough Syrup

BOIRON-BORNEMAN has completed new inquiry forms for both versions of their cough syrup. Chestal Cough Syrup and Chestal for Children are both acceptable for use on Stage One, but do contain sodium benzoate. These products are available in many health food stores.

Address Change

ANDREA ROSE SALICYLATE FREE SKIN CARE is now based in Chicago, IL at 555 North Sheridan Rd., Unit 1517, zip code 60640. The toll-free phone number remains the same: (888) 712-ROSE and the web site is www.andrearose.com.

Stage One Jams & Jellies

For Pete's Sake is now carrying several new Stage One Jams & Jellies: LAPHAM Guava Butter, Guava Jelly, Grapefruit Marmalade, Kumquat Marmalade, Lemon Marmalade, Pineapple Coconut Marmalade (SF), Papaya Butter, Key Lime Jelly, Mango Butter. All of the above contain corn syrup. For Pete's Sake can be reached by calling (800) 864-7383

Just starting out?

One enterprising mom packed up all of the food in her pantry that was not acceptable and took it back to her neighborhood supermarket, where they gave her a full refund!

PIC Report

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

Stage One

ALVARADO STREET BAKERY* Bagels: Onion

Poppyseed, Sesame Seed, Sprouted Spelt

ALVARADO STREET BAKERY* Bread: Sprouted

Multi-Grain No Salt, Sprouted Rye Seed,

Sprouted Sourdough French

CLARK'S HEALTHY GOURMET Lemon Crepe/Pancake

Mix, MultiGrain Pancake & Waffle Mix, MultiGrain

Pancake & Waffle Mix with English Walnuts.

These products are available in Michigan specialty shops and by calling (800) 435-9278. Soon to be available on the Internet.

DIETZ & WATSON Classic: Banquet Breast of Turkey,

Homestyle Black Pepper Turkey Breast, Homestyle

Breast of Turkey - *available in 35 states; soon to be 50*

DIETZ & WATSON Gourmet Lite Breast of Turkey,

Italian Style Classic Rosemary Seasoned Ham (N)

DR. BRONNER'S* Pure Castile Liquid or Bar Soap:

Hemp Aloe Vera Baby Mild, Hemp Peppermint,

Hemp Tea Tree - *available at www.drbronner.com*

FRENCH MEADOW* (mail order) Yeast Free Bread:

HealthSeed Spelt, Salt Free 100% Rye

To order call (612) 870-4740 or write to: 2610 Lyndale

Ave South, Minneapolis MN 55408, or visit their web

site at www.frenchmeadow.com

PATHWAYS Dye & Preservative Free Methylphenidate.

This customized prescription medication, which is a generic, dye-free form of Ritalin, can be ordered with

sucrose or stevia as a sweetener. To order call

Pathways/Apothecary Pharmacy at (800) 869-9160

SWEET BALANCE - *sugar alternative made from organic kiwi - (877) 997-9338*

Stage Two

ALVARADO STREET BAKERY* Sprouted Wheat

Raisin Bread

CLARK'S HEALTHY GOURMET Apple Walnut Whole

Grain Cereal (SF on label but not in current product,

raisins), Michigan Museli Cereal (almonds, blueberries, cherries)

DIETZ & WATSON Golden Recipe: Honey Barbecue

Flavor Breast of Chicken (CS, cider vinegar, paprika,

tomatoes), Pepper & Garlic Turkey Breast (paprika)

FRENCH MEADOW* (mail order) Yeast Free Bread:

Cinnamon Raisin Spelt

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