

## HealthWatch Newsletter no 21: April 1996

- Royal Pharmaceutical Society tones down [homeopathy advice](#)
- "Miracle" slimming pill company prosecuted
- [New appointment](#) for Vincent Marks
- [Boots to fund research](#)
- [Vitamin ad](#): complaint upheld
- [Homeopathy claims birth success](#)
- [Why is the BHMA trading sense and reason for mumbo jumbo?](#)
- The media and the [power line scare](#)
- Law: [Advertising remedies for cancer](#)
- Letter: [More on selenium](#)
- [You too can be a nutritionist](#) ... for £215

## RPS tones down homeopathy advice

***Homeopathic remedies are now available from many pharmacies. Yet instead of giving clear guidance to those members who are beginning to stock such products, the Royal Pharmaceutical Society have quietly withdrawn their recommendation to inform consumers of the lack of evidence of efficacy for these products.***

An RPS Council Statement issued in 1986 was quite clear about the Society's position on homeopathy. It advised members, "to inform any persons seeking advice on homeopathic products that there is no scientific evidence for their efficacy, beyond that to be expected from a placebo response."

The form in which the statement was subsequently incorporated into the RPS code on Medicines, Ethics and Practice was rather more liberal. Paragraph 1.6 states, "A pharmacist must not give an impression to a potential purchaser that any product associated with maintenance of health or a food supplement is efficacious when there is no evidence of efficacy." (The only specific mention of homeopathy relates to homeopathic vaccines, advising against supply without medical prescription.)

Does merely stocking a product constitute giving an impression that it is efficacious? HealthWatch believes that, in the case of pharmacies, it does. Because pharmacists are qualified health professionals who consumers are encouraged to consult for advice on everyday medical conditions, the very presence of a product on a chemist's shelves implies a form of tacit medical endorsement - considerably more so than in a supermarket or health food shop. "If homeopathic remedies didn't work," believe consumers, "Boots wouldn't stock them."

A spot check carried out by HealthWatch on five pharmacy outlets discovered that homeopathic remedies were stocked in both the Unichem and Boots outlets - the latter as part of a prominent display of alternative medicines. Of two independent chemists, one stocked Bach Flower Remedies with an explanatory placard telling you what they did along with the advice that, for serious conditions a homeopathic physician should be consulted. The other planned to stock them "when he had room", and when pressed agreed that while there was no evidence of efficacy, it was not unethical to sell them as, "they did no harm." Only one pharmacist, running a small outlet attached to a supermarket, confided that she thought it was not appropriate to stock homeopathic remedies.

***On this basis HealthWatch believe that the RPS code of ethics, para 1.6, is being widely disregarded in the competition for trade between high street pharmacies and health food shops. We would call on the RPS to clarify their position with regard to homeopathic remedies, and to carry out their own spot checks to see whether the code is being applied.***

See also [Newsletter no 6](#)

[Top of page](#)

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## "Miracle" slimming pill company prosecuted

***Professor John Garrow reports on a successful outcome for Shropshire Trading Standards officers***

A mail-order company which used amazing claims to market food supplements with names such as "Speedslim CP-2000" and "The Australian Anti-fat Miracle" was prosecuted in the Shropshire Crown Court recently and fined £85,000. Passing sentence, Judge Michael Mander said the false claims about the slimming tablets were a disgraceful and cynical attempt to play on the weakness and vanity of a gullible public.

The task of prosecuting companies which use misleading advertisements to promote their healthcare products is rather like that confronting Hercules in his attempt to slay the many-headed hydra: when one head was cut off two grew in its place. A mail-order company can easily be wound up if found guilty of Trading Standards offences, but another company springs up in its place to sell similar goods by similar advertisements. The solution adopted by Shropshire Trading Standards officers was a combined assault concerning various organisations trading from premises at Faraday Road, Stratford, London E2, some of whom also trade from the address of 34 Upton Lane, London E7. The companies concerned are Tobyward Ltd, City Trading Ltd and Quietlynn Ltd, some of which use the trading names Natural Herbal Research, A.A.F. and Dialbuy.

The Shropshire Trading Standards department (like similar departments in other parts of the country) were concerned about several food supplements for which amazing claims were made. The '*Australian antifat miracle*' was said to enable a person within three weeks to lose as much weight as he or she liked without cutting out the foods that person liked, or going on a starvation diet, or taking strenuous exercise. An advertising leaflet explained, "its unique formula contains a special anti-fat starch blocking ingredient that works by inhibiting enzymes in your digestion thus decreasing your calorific absorption-this blocking action does not cause you unwanted health problems because the valuable vitamins, essential minerals and proteins are still freely absorbed". Similar claims were made for "*Speedslim*", which was described as a pure natural protein legume concentrate.

There was an element of truth in these claims: a substance called phaseolamin can be extracted from beans which, when mixed in a test tube with amylase (the enzyme which normally digests starch in the small bowel) inactivates the enzyme. The untrue part was that by eating phaseolamin you could stop the absorption of the calories in your diet. The reason is that phaseolamin is itself a protein, so the protein-digesting enzymes in the stomach break it up into amino acids. By the time it gets into the small bowel, where starch digestion takes place, the phaseolamin has itself been digested, and has no effect on starch digestion. We showed this by feeding starch labelled with heavy carbon to volunteers who took either "starch blocker" or placebo capsules, and found that the rate at which the starch was metabolised was unaffected by the "starch blocker", and other studies also confirmed that the *in vitro* effect was not seen *in vivo* (2,3).

Another product advertised by Tobyward was "*Speedslim CP-2000*". The special feature of this supplement was that it contained chromium picolinate and so (it was claimed) was capable of significantly reducing body fat, promoting permanent fat loss and keeping a person's figure permanently slim even without a change in diet and without exercise. The basis of this claim was that chromium is essential for the proper action of the hormone insulin, which is important in regulating the metabolism of sugars in the body. That part is true, but the untrue part was the implication that purchasers of this product were at all likely to have problems with insulin action due to chromium deficiency (4), or indeed that increasing insulin action would cause permanent fat loss. The opposite is more likely: insulin-dependent diabetic patients who are deprived of insulin become thin, and get fatter when the necessary insulin is supplied.

It seemed therefore, that Tobyward were applying a false trade description to several types of goods, contrary to section 1(1)(a) of the Trade descriptions Act 1968. In addition, the company, when trading as Natural Herbal Research, was making medicinal claims for foods contrary to the Food Labelling Regulations 1984. For example, Evening Primrose Oil was said, "to have far-reaching benefits for those who use it for the relief of headaches, tension, insomnia and depression." A formulation called "*Radical Defence*" was promoted with the comment, "So why gamble with your health when help is at hand from a new supplement called RADICAL DEFENCE which contains the required Beta Carotene, vitamins and minerals to neutralise harmful free radicals. Just one capsule per day will help safeguard your body from the potentially lethal action of free radicals and the cancer or heart disease which can follow. It is a convenient, cost-effective method of promoting for you, and your family, a long and healthy life." It is illegal to claim that a food is capable of "preventing,, treating or curing human disease" unless that food has a product licence issued under the provisions of the Medicines Act 1968. So far there is no evidence from trials that these vitamins have the claimed protective effect (5). There were also problems concerning misleading indications of price for some products.

These were the alleged offences: the task of the Trading Standards officers was to obtain from Public Analysts the composition of the products, and from nutrition experts an opinion about their efficacy, and then to bring all this information before an appropriate Court. Normally Trading Standards cases are heard by a Magistrates Court, but in this case the defendants opted for a committal to a Crown Court. They said that they could justify their claims, so two weeks would be needed for the trial, and that all the expert witnesses would be required to appear in court. This further increased the complexity of the prosecution, and the expense and delay before the case could be heard. The investigation had started in November 1993, but after nearly two years of legal wrangling the trial date was finally set for 10th January 1996. On 21st December 1995 the defendants indicated that they would be pleading guilty to the charges at the forthcoming hearing.

Judge Michael Mander imposed fines totalling £85,000 and ordered the defendants to pay prosecution costs of £12,245. In the magistrates court Tobyward were fined a further £3,000. These were substantial blows to the many-headed activities based on 34 Upton Lane, E7. It remains to be seen if these fines will permanently suppress the promotion of health products by misleading advertising claims.

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[Top of page](#)

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## New appointment

Professor Vincent Marks, HealthWatch's Information Officer, has been made Dean of Medicine for the European Institute of Health and Medical Sciences (EIHMS) at the University of Surrey.

The institute is a new research and education initiative by the university at Guildford. It will run a range of courses for health and medical professionals, with the emphasis on evidence-based care.

Professor Marks brings to the post 35 years experience as professor of clinical biochemistry at Surrey University, and as consultant chemical pathologist to the Royal Surrey County Hospital.

[Top of page](#)

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## HealthWatch voice in *Health Which?*

The December issue of the Consumers Association health magazine carried an article by HealthWatch Chairman Thurstan Brewin on the placebo effect.

Those who always take a remedy, he comments, may not realise how often the body can cure itself (or at least improve itself) without help. In addition, sham treatment can immediately improve many symptoms, even severe pain.

[Top of page](#)

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## Boots to fund research

Exeter University have announced that Boots the chemists have donated £160,000 to the University Development Campaign, to be used to fund a Research Fellowship in the Centre for Complementary Health Studies.

It seems that Professor Edzard Ernst, Director of the Centre, approached Boots, bearing in mind their recent strong commercial interest in homeopathy and herbal remedies, and this was the happy result. The Research Fellow will concentrate particularly on these two subjects.

[Top of page](#)

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## Vitamin ad: complaint upheld

The March report of the Advertising Standards Authority says that the Proprietary Association of Great Britain has complained to them about an advertisement for Solgar vitamin tablets, which they considered implied either that people who were unwell needed them, or that they would keep people healthy.

The complaint was upheld and the advertisers agreed to withdraw the advertisement.

[Top of page](#)

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## Homeopathy claims birth success

***A 7 lb baby girl born recently in Nicosia has been hailed as a success for homeopathic fertilisation, says a report in the Cyprus Weekly newspaper.***

According to the paper, two more Cypriot women are due to give birth thanks to the treatment, which was devised by the Greek homeopathic expert Professor Spyros Diamantides.

The fertilization treatment involves a series of homeopathic medicines given in small doses every day.

As a result of his work in this field, Professor Diamantides is to be recommended by the committee of the Medical Institute for homeopathic Research and Application for a Nobel prize for medicine, says the report.

[Top of page](#)

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## Why is the BHMA. trading sense and reason for mumbo jumbo?

***HealthWatch exchanges newsletters with the British Holistic Medical Association. At the risk of giving offence - following a recent friendly sharing of two contrasting articles on acupuncture (Newsletter 16 and Newsletter 19) - let's be frank, the BHMA newsletters are sliding into more and more mushy mumbo jumbo.***

There's always something sensible and worth reading, but most of the major articles now appearing would not stand a ghost of a chance of being accepted by any reputable medical journal and must surely be an embarrassment to at least the medically qualified membership. Though often filled with well meaning love and sincerity, they show little coherent argument or rational thought. Sometimes they seem almost to want to put the superstition of ancient times on a pedestal. Hardly the way to make the progress that we all want.

One long article describes, with totally uncritical adulation, an ancient belief about health and disease called *Ayurveda*. For the past 3,000 years its followers have not had the slightest doubt that *all* illness is due to an imbalance of "the three doshas" - kapha (water and earth), pitta (fire and water) and vata (air and ether). The writer evidently believes that this is just as true today as it ever was. No amount of new knowledge is to be allowed to change it. Why did we ever bother with such things as Harvey's discovery of the circulation of the blood, let alone all the important things that we have learned since? Apparently there was no need for any progress or problem solving of this kind and it can all be safely ignored.

Another article gives the 70-year history of *Weleda UK, manufacturers of anthroposophic and homeopathic medicines*. "It will be heartening to many BHMA members", we are told, "that in today's money-obsessed world a company like Weleda is able to trade successfully while following the idealistic standards which take account of the spiritual as well as the physical nature of man originating from the work of Rudolf Steiner and others". We are not told quite what this means, but meanwhile it's good to know that Weleda manages to sell its wares so successfully, yet in a spiritual and idealistic way without being interested in anything so sordid as beating the competition in the booming market place of complementary medicine, a market not a whisker less commercial than the mainstream drug industry.

My third example is a long article entitled, *The Amber Fluid*. Whatever your health problem, *including when terminally ill*, apply this amber fluid to your head, neck, chest and arms ("all over the body is even better"). Then drink it, starting with a small amount. So what is this amber liquid? Here is a clue. The article ends, "remember, it's free, so what have you to lose?" You've guessed it, it's urine. Not someone else's urine, but your own, so it's always available. Exercise your kidneys. Make them do the same work twice. And, in case you were not able to be there, the World Conference on Auto Urine Therapy took place in Goa in February this year.

This BHMA newsletter is certainly not yet a journal for quacks and mystics, but it's in danger of going that way. Perhaps even the dear old BMA, with all its faults, has more right to call itself the British Holistic Medical Association. Though mainstream medicine has made some terrible mistakes (mainly where there has been a failure to compare outcomes in a reliable way), at its best it is far more truly holistic than most fringe medicine, because it at least makes a serious attempt to combine modern knowledge of the human body and the various causes of disease with all that is finest in skilled psychology and professional concern, aiming at quality of life and peace of mind.

**See also letter from Dr David Peters in [Newsletter 23](#).**

Thurstan Brewin Chairman

[Top of page](#)

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## The media and the power line scare

***With scant hard evidence to go on, the idea that overhead electric cables might cause cancer has sparked off endless media stories. Meanwhile, scientific reviews admitting to the lack of proven association go mysteriously unreported. Dr Neville Goodman tracks the shocking history of power cable hysteria.***

In March 1988, a BBC *Panorama* programme investigated the health risk from the electromagnetic fields of power lines. Eight years on, the answer to the question of whether this risk is real remains as elusive as ever, but electricity pylons are too powerful and sinister an image for the media to leave alone.

In October 1988, a *British Medical Journal* editorial (1), "Living under pylons" was sub-titled "If electromagnetic fields are carcinogenic the effect is weak." Channel 4, just one week earlier, showed, "The good, the bad and the indefensible: currently at risk." In this programme people described how power lines were causing headaches,

palpitations and clusters of suicides, aborted calves and addled eggs. "An ill wind blows over power lines," cried the *Observer* in January 1989. The *BMJ's* "Electromagnetic radiation in homes", in December 1989 (2), concluded there was no firm evidence for or against. In common with just about everyone who has written on this vexed subject, the author asked for high quality epidemiological studies. Channel 4, the previous year, had described the 80,000 people living near power lines as "the raw data of future medical surveys, with more unwitting volunteers being added week by week." I suppose it makes research rather less messy if the answer is assumed before the question has been properly posed, but it is unhelpful when the media choose to misrepresent epidemiology so completely. And I really do believe they have the choice, but prefer to be sensational.

The next buzz of activity followed a report from the US Environmental Protection Agency in June 1990. The pattern from studies, the authors concluded, "suggests, but does not prove, a causal link." This sparked off a series of headlines: "Electrical cancer findings diluted" (*Guardian*); "Agency backs electric field link in cancer" (*Hospital Doctor*); "Child cancer probe to focus fears over electricity" (*Observer*). In August 1990 a study linked male breast cancer with electromagnetic radiation, prompting:

"Electric jobs 'carry high cancer risk' (*Guardian*). A letter in the *Lancet* in October 1990 (3) pointed out that most of the articles in the media came from a small number of scientists and journalists convinced of the health risk, but that the views of others, who disagreed, never made it to the pages of newspapers.

The *Sun's* doctor had no doubt in January 1991: "people who live or work near electricity supply lines are more likely to develop diseases such as brain cancer or leukaemia". This conclusion came from years of "monitoring.. information and research studies from scientists around the world". The *Sun* may have been certain, but *Nature* wasn't: "EMF cancer link still murky." (4). *Nature* has a high citation index and impact factor; but it doesn't have a circulation of over 4 million in the UK.

August 1991: "Under the hissing sky" (*Guardian*). April 1992: "Hisses and grumbles under the pylons" (*Independent*). The *Independent* quoted an engineer saying that cancer cells grow more quickly near large magnetic fields. But they don't.

June 1993: "Health fears over pylons" (*Irish Times*). August 1993: "Parents sue over 'deadly power fields'" (*Guardian*). "Something nasty in the air" (*Sunday Telegraph*).

A new batch of Scandinavian studies prompted another *BMJ* editorial in October 1993 (5). Together with all the "evidence" presented by the media in the meantime, perhaps at last it was time to admit this disgraceful hazard to health. Not so. A solution was no nearer: "No causal relation has been established.. . [we await] results from the large case-control studies".

1994 started with an extraordinary story about a public house: "Power lines above pub spark concern over health" (*Independent*). Media coverage neglected to point out the risks to health from alcohol and tobacco. The year continued with "Children win right to fight Heseltine over 'cancer' cables" (March, *Times*); "Electricity shocks, but can it give you cancer?" (April, *Guardian*); "Leukaemia boy's parents sue power company" (May, *Times*); "Childhood cancer; and leukaemia linked to power lines" (June, *Daily Telegraph*).

Late in 1995, the Council of the American Physical Society issued a statement, described as the strongest position ever taken by a major scientific society on the issue. It said there was no consistent scientific link between electromagnetic fields and no plausible biophysical mechanism. They worried that the high costs of avoiding this unproven risk, and of attempted litigation by supposed victims of it, would reduce the funding and public attention needed for more serious environmental problems.

If the Council's statement provoked splash headlines, then I missed them. This year, 1996, it is business as normal. A team including Professor Henshaw of Bristol University published a paper in a respected scientific journal in February (6) showing that electric fields increase the concentration of radon and its breakdown products: "Evidence that high voltage electricity can cause cancer" (*Bristol Evening Post*). The *Guardian's* watching brief for Channel 4's *Dispatches* programme was, "for years scientists have been trying to explain the high incidence of cancers among people living near overhead power lines". But Henshaw's team was careful not to make any direct claim; and the *Guardian* had actually published an article by me in January sub-titled that I was warning "against jumping **to** conclusions about the causes of cancer". Coincidentally with Henshaw's paper; a short report in the *Lancet* claimed "Radon in the home not linked to cell damage" (7). Neither did Henshaw's plausible mechanism go unchallenged: "Cancer link to power cables 'exaggerated', say critics" (*Nature*) (8).

Among the epidemiological experts quoted in the media after Henshaw's paper was Mrs Williams of Ayrshire:

"There have been so many cases of cancer in this small bit of housing that there just can't be any other explanation." Mrs Cran agreed, "We know the pylons cause cancer, we just know" (*Observer*).

In March, the *Daily Mail* declared that, "A bedroom TV may boost child cancer risk" after getting access to so far unpublished findings from another group of scientists. Would a newspaper be so keen on pre-publication if this study had been one of the many with negative or equivocal findings?

Media distortions of this degree would be laughable if the possible consequences were not so serious. A spokesman for a power company estimated that action to reduce exposure to the levels demanded would add

£300 to the average electricity bill. In the recent TV programmes there were repeated references to other countries being "more advanced" because of their maximum permitted exposures. At the present level of knowledge, this shows only that their authorities are more easily swayed by pressure groups. It is not evidence of danger.

The Council of the American Physical Society, being honest, had to admit, "it is impossible to prove that no deleterious health effects occur from exposure to any environmental factor" Aye, there's the rub. ..this immensely complicated, messy affair; in which even the physicists are unclear quite how to measure the fields (and indeed what sort of field is the important one to measure) has enough "convinced" people, enough grieving parents, and enough hopeful lawyers to keep feeding the media with selective evidence for years to come.

There is an excellent site on the Internet from which up-to-date information [on this subject](#) can be accessed. The site is maintained by [John Moulder](#) who ends his fact sheets with the following sad truth:

**"Public controversy about electricity and health will continue either until future research shows that the fields are hazardous, or until the public learns that science cannot guarantee absolute safety"**

I wonder whether it is a lesson that the public has any interest in learning?

Neville W Goodman Consultant Anaesthetist Southmead Hospital, Bristol

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See also [Newsletter 23](#) and [Newsletter 24](#) and [Newsletter 25](#)

[Top of page](#)

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## Law: Advertising remedies for cancer

***It has long been illegal to advertise remedies for cancer; yet quack cures abound and are frequently promoted in the small ads. Lawyer Malcolm Brahams explains the rules***

The Cancer Act was passed in 1939. Many of its provisions were replaced by legislation brought in at the time the National Health Service was introduced but Section 4 of the Act survives. Its essential wording is:

"No person shall take any part in the publication of any advertisement containing an offer to treat any person for cancer or to prescribe any remedy therefore or to give any advice in connection with the treatment thereof"

Breach of this provision is a crime for which the offender can be subject to a fine or to a maximum of three months' imprisonment, or both.

In theory, if an offence is committed, it is the duty of local authorities to institute proceedings but, unfortunately, the Act is rendered almost toothless by the requirement that a prosecution can only be brought with the consent of the Attorney General or the Solicitor General.

If a person or body is prosecuted for this offence, various defences are available. The main one is that the advertisement was published only so far as necessary to bring it to the notice of MPs, local councillors, or members of the medical profession, including nurses and pharmacists, or persons training for those professions. It is also a defence that the publication was in a technical journal.

Finally, it is a defence if you published the advertisement in such circumstances that you did not know, and had no reason to believe, that you were taking part in its publication. In addition, the Act does not apply to advertisements published by a local authority or the governing body of a voluntary hospital, or to someone acting with the sanction of the Minister for Health.

The defence that you did not know the advertisement was being published has been tested in various cases that have come before the Courts. If you shut your mind to the obvious, you are deemed to have knowledge of what is going on but you would not be guilty if you "neglected to ascertain what could have been found out by making reasonable enquiries." There is clearly a great deal of room for argument about what someone's actual state of

knowledge might have been! If the accused did not mention cancer in the original advertisement but sent a follow-up letter claiming to provide a treatment or medicine which could cure cancer, then an offence under the Act would be committed.

The need to obtain consent before starting a prosecution and the various defences available mean that, in practice, not much use has been made of the Act.

There was earlier legislation of a similar nature applying to advertisements for treating venereal disease and, more recently, the government has taken powers under the Health and Medicines Act 1988, restricting not only the advertisement but also the sale of kits used to detect HIV.

In reviewing the position of the Cancer Act I was struck with the fact that Acts of Parliament dealing with medical matters were relatively few before the second world war compared with the substantial body of legislation that has been passed since 1945. All of this is, no doubt, for our protection as patients and consumers but I suspect that whatever the law says there will always be people out there advertising "quack" remedies for cancer.

Malcolm Brahams Vice-Chairman of HealthWatch

[Top of page](#)

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## Letter: more on selenium

*Dr R J Woodward, of the supplement manufacturer Larkhall Green Farm, writes,*

Dear Sir or Madam,

Your HealthWatch newsletter ([no 20](#)) has once again come into my hands and perhaps I might be permitted to make an observation.

Dr John Garrow in his article, "[Are we selenium deficient?](#)" states that supplements typically contain 100 to 200 µg of Se per capsule. Most supplements made by Larkhall Green Farm contain between 25 - 50 µg of organically bound selenium per tablet. If a supplement contains more than 50 µg it is always called a one-a-day Whilst I agree with Professor Garrow that it is right for people to eat more cereals, fresh vegetables and fish-I still don't see them doing it. All the supermarket trollies I see every week seem to be loaded with colas and canned and freezer items.

Yours sincerely

R. J. Woodward

*Professor John Garrow replies,*

Lamberts Healthcare Ltd lists as "most popular choice" Selenium 200 µg (recommended daily intake 1 capsule between meals), and also offer Selenium 50 µg (1 to 4 tablets between meals) or Selenium+A+C+E with 100 µg Se (1 to 2 tablets with meals). Higher Nature offer only Selenium 200 µg. The book written by Rita Greer and Dr Woodward called "The good nutrients guide" gives the Recommended Daily Allowance for selenium as 150 - 200 µg, but advises against taking more than 200 µg in supplemental form. Since I believe the optimum intake to be in the region of 50 - 100 µg a day I see no advantage (and possible disadvantages) in taking supplements which typically provide 100 to 200 µg Se.

Yours

John Garrow

[Top of page](#)

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## You too can be a nutritionist ... for £215

*Learn about alternative nutrition - every thing from swinging pendulums and food combining to The Gall Bladder Flush! The British Dietetic Association's Lyndel Costain went undercover to check out the training offered by a correspondence course for would-be "nutrition consultants".*

It cost me £215 to enroll as a student of a 10-week correspondence nutrition course from the British School of Yoga. The course consisted of reading often haphazardly put together lesson notes, then answering 10 questions. As the exact answers were found in the text, it was hard *not* to get them wrong.

No application of knowledge was required, and much of the nutritional science was flawed. Lessons covered:

- The Natural Therapists' Approach to Health;
- The Digestive System;
- Iron Deficiency;

- Vitamins and Minerals;
- What to do About Stress & The Healing Crisis;
- Self Diagnostic Procedures;
- The Sugar Menace;
- Allergies
- Disease States;
- Food Combining.

I likened it to a word-search puzzle rather than anything resembling a course that would 'qualify' me to diagnose and treat disease. Diagnostic tools included kinesiology (which relies upon changes in muscular resistance in the presence of a possible allergen) and swinging pendulums - a pendulum is held over a food or drug, the question is asked, "Is this good for me?", and the pendulum will, it is said, swing to indicate "yes or no"

Treatments' ranged from fasting and cleansing diets, through food combining to mega-doses of vitamins and minerals. My undisputed favourite was The Gall Bladder Flush. It is claimed that gallstones can be broken down, flushed out and 'passed' (doesn't say from where) as a greenish shale. The method is as follows: take a cleansing diet (fruit, vegetables, brown rice) for 5 days with daily lecithin, apple juice and water; on the 5th afternoon (after skipping lunch) take a teaspoon of Epsom salts in warm water at 4pm and 6pm; then from 8pm take 50 ml olive oil shaken with 15 ml lemon juice every 15 minutes until 8 doses are taken: go to bed and lie on the right side with right knee pulled up; try not to move, and go to sleep.

You can detect traces of logic in places - for example in the case of the Gall Bladder Flush above, the malic acid found in apple *might* be thought to break up gallstones, although in practice it does not. On the other hand the large volumes of olive oil, amounting to a few thousand calories, could well cause vomiting. We're assuming, of course, that the diagnosis of gallstones is correct in the first place, and not a misdiagnosis of gastric cancer, heart disease or indigestion.

Similarly odd treatments are detailed for an extensive range of health problems - colds, cancer, heart disease, food intolerance, diabetes, yeast infections, gastro-intestinal disorders, to name a few. Worrying stuff considering the course content - or lack of it.

Potentially harmful doses of vitamins and minerals are advised in places. Supplementing with vitamin C, for example, is recommended in quantities from 10 g/day and rising to 180 g/day (equivalent to more than 2,000 oranges!) when challenged by infection such as "heavy colds, pneumonia or AIDS". For comparison, the UK recommended daily allowance of vitamin C is 40 mg/day and doses of 10 g/day could cause problems in patients with kidney disease.

Safety considerations on nutrient supplementation left something to be desired. Take this statement, for example: "The fact that many people get bored or lose confidence in high dose supplement programmes is probably the greatest safeguard against the potentially harmful effects of these practices." In contrast, advice about drinking water was positively alarming: "Tap water is not suitable for human consumption - it is heavily laden with inorganic salts, additives and toxic chemicals and is a slow poison."

On the basis of the information given in this course, I fear that anyone who consults a BSY trained 'nutrition consultant' could be at risk of misdiagnosis, inappropriate treatment of medically diagnosed diseases, unnecessarily restrictive and unbalanced dietary advice, potentially harmful doses of some vitamins and minerals and bombardment with anecdotal information.

It is worth remembering that, while anyone can call themselves a 'nutrition consultant', state registered dietitians are the only profession with a recognised and regulated graduate qualification in nutrition and dietetics.

Lyndel Costain, PR Advisor, British Dietetic Association

***In December 1995 the BBC's Food and Drink Programme exposed the dubious quality of some so-called "nutrition consultants".***

As part of a survey carried out with the help of the British Dietetic Association and the British Diabetic Association, five such consultants were randomly selected from the classified advertisement section of consumer health magazines. A woman with non-insulin dependent diabetes had appointments with each, explained the common (and highly publicised) symptoms of diabetes as her presenting complaint (without revealing that she had diabetes) and waited for their diagnosis and prescription.

Only one suggested diabetes as a possible diagnosis, all gave inappropriate advice, and most actively discouraged contact with her doctor.

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