

Nutrition *Action*

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HEALTH LETTER®
CENTER FOR SCIENCE IN THE PUBLIC INTEREST

SALT WARS

An interview with CSPI founder
Michael Jacobson about his new book

**REFLUX
RELIEF?**

**America's
health
by the numbers**

**The best
NUTS & SEEDS**

M E M O

SCIENCE, NOT POLITICS, PLEASE



It's time to dust off the Nation's advice for healthy eating.

Every five years, the U.S. Departments of Agriculture (USDA) and Health and Human Services (HHS) update the [Dietary Guidelines for Americans](#).

The *Guidelines* are used to set standards for healthy school lunches, home-delivered meals for seniors, and nutrition education programs, and to inform the advice given by many health professionals.

A distinguished panel of experts has examined the science that will be used to create the 2020–2025 *Guidelines*. In July, the panel issued its [Scientific Report](#).

When that advisory committee was appointed, some observers were worried about the number of members who had ties to the food industry.

But, in the end, they stuck to the science. The report largely aligns with recommendations that *Nutrition Action* and its publisher, the Center for Science in the Public Interest, have made for years. Among the highlights:

■ **Eat a healthy dietary pattern.** That means a diet *higher* in vegetables, fruits, nuts, unsaturated oils, legumes, whole grains, low-fat dairy, and seafood...and *lower* in red and processed meats, refined grains, and added sugars. That eating pattern is associated with a lower risk of cardiovascular disease, type 2 diabetes, breast cancer, colorectal cancer, excess weight, hip fractures, and premature death.

■ **Cut saturated fat and cholesterol.** Keep both as low as possible within a healthy dietary pattern. Limit saturated fat to less than 10 percent of calories—that's 20 grams a day for a 2,000-calorie diet—by replacing some sat fat with unsaturated fat from nuts, seeds, oils, and seafood.

■ **Slash added sugars.** Less than 6 percent of our calories should come from added sugars (down from 10 percent in the prior *Guidelines*). That's just 30 grams, or 7 teaspoons, a day...less than the 39 grams in a single can of Coke or the 50-gram current Daily Value.

■ **Limit alcohol.** That means no more than one drink a day for *all* adults (prior *Guidelines* recommended no more than two drinks a day for men).

The panel didn't look at salt. Instead, the new *Guidelines* will rely on a solid 2019 National Academy of Medicine [report](#) that advised adults to limit sodium to 2,300 milligrams a day.

All in all, the report is a remarkably clear upholding of strong advice on diet and health. But we can't let our guard down just yet.

The report is now at the USDA and HHS, an opaque stage in the process from which parts of the final *Guidelines* have emerged diluted or industry-friendly in years past. We'll be pushing to make sure they stick to the science.

Peter G. Lurie, MD, MPH, President
Center for Science in the Public Interest



A new scientific report stuck to the science. So should the 2020–2025 Dietary Guidelines.

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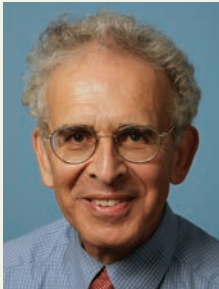
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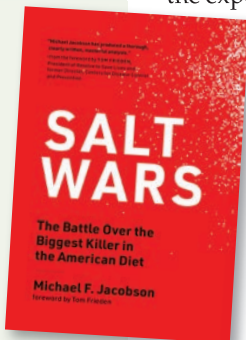
SALT WARS

Why we need to eat less salt...but haven't



Michael Jacobson is the co-founder and former president of the Center for Science in the Public Interest, which publishes *Nutrition Action*.

For 46 years after he earned a PhD from MIT, Jacobson led CSPI's efforts to improve the nation's diet. He spoke to *Nutrition Action's* Bonnie Liebman about his new book, *Salt Wars: The Battle Over the Biggest Killer in the American Diet*. The book, from MIT Press, will be in bookstores on October 20.



SALT 101

Q: Why do you call salt the biggest killer in our diets?

A: Salt raises blood pressure, and high blood pressure—or hypertension—increases the risk of heart attacks and strokes, two major killers in our society. Hypertension also increases the risk of chronic kidney disease, impaired memory and vision, and erectile dysfunction.

If you don't have hypertension now, odds are that someday, you will. Roughly 80 to 90 percent of Americans eventually develop high blood pressure as they get older. [See "Blood Pressure: On the Way Up," p. 4.]

The high-salt diet that Americans are eating is responsible for an estimated 100,000 premature deaths every year and roughly \$20 billion in healthcare costs. It's just an enormous health toll.

Nearly all experts agree that we should eat less salt. But opposition from the food industry and a handful of scientists has stalled efforts to cut the salt in the two biggest sources: packaged and restaurant foods.

Q: Can't people just take drugs to lower their pressure?

A: Drugs can be very effective in lowering blood pressure and the risk of heart attacks and strokes, but they're hardly the perfect answer. Many people stop taking the drugs over time because of the expense or because they don't feel any effect.

And one drug may not work, so you have to take two or three, and even that may not work. Drugs can also have side effects like disturbed sleep, headache, muscle cramps, an increased need to urinate, and erectile dysfunction.

So why not just try to keep your blood pressure low so you can avoid the side

effects and the costs and the visits to doctors.

Q: How much salt do we eat?

A: The average woman consumes about 3,000 milligrams a day, and the average man about 4,000 milligrams a day, mostly because men eat more food. Only about 2 percent of men and 20 percent of women consume less than the recommended 2,300 milligrams per day.

Q: And the salt shaker isn't the key culprit?

A: No. We get only 5 percent of our salt from the shaker, and another 5 percent or so from the salt we add when we cook at home. And about 15 percent occurs naturally in foods.

Roughly 70 percent comes from the salt and other food additives like monosodium glutamate that are added to processed and restaurant foods.

Q: Which foods are the biggest culprits?

A: Salt is everywhere. It's in processed meats like bacon and cold cuts, frozen dinners, soups, pizza, sandwiches. Breads and rolls supply more sodium than any other food category—in part because we eat them so often—but they supply only 6 percent of the salt we eat.

The foods that are highest in salt are restaurant meals. Some contain two or even three times as much sodium as somebody should eat in an entire day.



How High is High?

	Systolic	Diastolic
Normal	under 120	under 80
Elevated	120-129	under 80
High / Stage 1	130-139	80-89
High / Stage 2	140 or over	90 or over

The cutoffs apply to adults who aren't taking drugs to lower their blood pressure.

Source: [heart.org/en/health-topics/high-blood-pressure/the-facts-about-high-blood-pressure/](https://heart.org/en/health-topics/high-blood-pressure/the-facts-about-high-blood-pressure)

New York City and Philadelphia now require menus at chain restaurants to put warnings next to items that contain an entire day's worth of sodium or more.

Q: So it's not just salty-tasting foods?

A: Right. Nobody thinks bread tastes salty, but at Panera, the piece of baguette that comes on the side has nearly six times as much sodium as the chips. So you can't go by taste. You have to read labels. And restaurant foods don't come with sodium labels, though many chain restaurants post the numbers online.

Q: So what should people do?

A: You can eat a healthy diet with lots of fresh fruits and vegetables, beans, nuts, low-fat yogurt or milk, fish, and poultry, rather than processed foods. That will not only lower your sodium intake but also boost your potassium intake.

Potassium has long been known to lower blood pressure in people with hypertension. So replacing sodium with potassium could be a win-win. When cooking, I routinely use a lite salt, which is half sodium chloride and half potassium chloride.

Just check with your doctor before you use potassium salts if you have kidney disease or heart failure, or if you take drugs like ACE inhibitors, angiotensin II receptor blockers, or potassium-sparing diuretics.

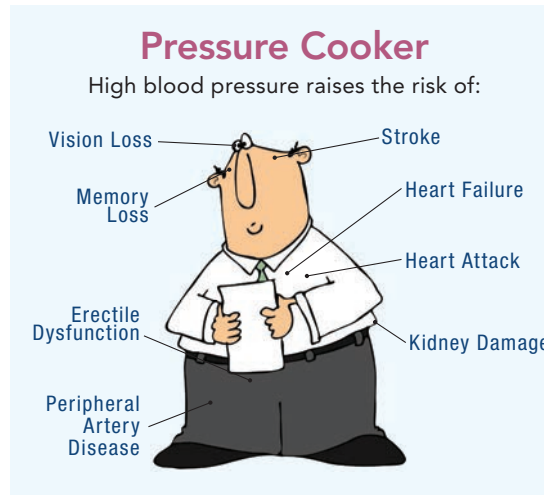
THE SCIENCE WAR

Q: What do you mean by Salt Wars?

A: One war is the battle over the scientific evidence. The other is over what government and industry should do about salt.

Q: Isn't the science settled by now?

A: It's settled to most scientists and to health authorities like the National Academy of Medicine, the World Health Organization, and the American Heart Association. They recommend that we



consume about a third less sodium. But a few vocal scientists argue that consuming less salt would be dangerous.

Q: What do they contend?

A: Their studies find a higher risk of heart attacks and strokes not only in people who consume excess sodium—say, 5,000 milligrams a day—but also in those who consume below-average levels—around 2,000 milligrams.

On the surface, some of those studies appear persuasive. For example, the PURE study looked at 100,000 people worldwide.

But the studies are misleading.

Q: How?

A: As in any observational study—which simply measures an exposure like sodium and then sees what happens to people over time—something else about the participants may explain their higher risk of disease. For example, some people who consume less sodium may be eating less food because they're ill or because they don't have enough food.

Q: And illness or poverty could explain their higher risk?

A: Right. But the most serious flaw is that those studies didn't accurately measure how much sodium people typically consume.

The only reliable way to estimate someone's long-term sodium intake is to have them collect all of their urine for 24 hours on several days.

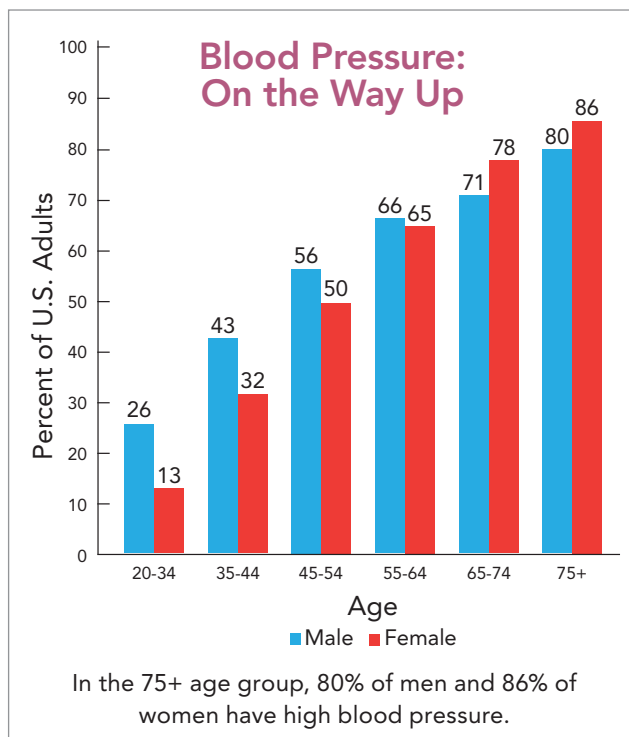
But the PURE researchers estimated each participant's sodium intake with only one "spot" urine collection—meaning that each person urinated into a container just once—at the beginning of the study. Then the researchers used a mathematical formula to estimate 24-hour sodium intakes.

Q: And that's inaccurate?

A: Yes. When a different team of scientists measured sodium with repeated 24-hour urine collections, they found that people who consumed the least sodium had no higher risk of dying over the next 24 years.

But then the scientists used PURE's formula to estimate the long-term sodium intakes of the same people. Sure enough, they found a higher risk in people who, according to the formula, consumed the least sodium.

That's really good evidence that PURE and similar studies were fatally flawed. When a National Academy of Medicine panel looked at those studies in 2019, it concluded that they were unreliable.



Salt Savings

You'd never know that some foods have less sodium without checking the Nutrition Facts label. One clue: Foods labeled "healthy" often have less. Even restaurant foods in our "Lower" column are loaded with sodium.

HIGHER		LOWER	
Arnold Organic 100% Whole Grain Bread (1.7 oz. slice) 200 mg		Pepperidge Farm 100% Whole Wheat Bread (1.7 oz. slice) 120 mg	
Perdue frozen chicken breasts with added salt "solution" (4 oz.) 260 mg		Perdue refrigerated chicken breasts (4 oz.) 75 mg	
Oscar Mayer Natural Slow Roasted Turkey Breast (2 oz.) 510 mg		Applegate Naturals Oven Roasted Turkey Breast (2 oz.) 250 mg	
Lean Cuisine Unwrapped Chicken Burrito Bowl (10.5 oz.) 620 mg		Healthy Choice Unwrapped Burrito Bowl (9 oz.) 350 mg	
Panera Heritage Ham & Swiss Sandwich 1,390 mg		Panera Napa Almond Chicken Salad Sandwich 750 mg	
Uno Thin Crust Super Roni Pizza (individual size) 2,790 mg		Uno Thin Crust Veggie Extravaganza Pizza (individual size) 1,800 mg	

Q: Those studies got huge headlines.

A: Journalists love man-bites-dog stories. We also saw that about 10 years ago when newspaper headlines declared that low-salt diets might be dangerous.

That was largely based on Italian studies on patients with severe congestive heart failure. Those who were put on a low-sodium, fluid-restricted diet were more likely to die. But they also got high doses of a powerful diuretic—an unwise treatment.

Q: Most media didn't mention that?

A: No. The American Heart Association said that the results in such a sick and highly medicated group had no relevance for most people, or even for most patients with heart failure.

To put the nail in the coffin, a few years later, a meta-analysis of the Italian studies was retracted. When the journal asked the researchers to supply the raw data from some of the studies, they said that it had been lost in a computer failure. It was essentially a dog-ate-my-homework excuse or an inexcusable failure to properly store data.

Still, those headlines got so much attention that they set back the cause of reducing sodium for years.

Q: Any chance that the science war will end?

A: In 2019, the National Academy of Medicine may have put the matter to rest. An expert panel combined the results of several randomized controlled trials on sodium and cardiovascular disease. And the experts found a lower risk in people who ate less sodium.

I haven't seen much argument since that report was published.

THE INDUSTRY WAR

Q: What about the second salt war?

A: The processed-food and restaurant industries have fought for decades to continue using as much salt as always, just as industry fought for years to keep using trans fat until it was banned.

Q: And the government?

A: In response to four decades of countless preventable deaths and government inaction, in 2010, a report by the Institute

of Medicine, which is now the National Academy of Medicine, urged the Food and Drug Administration to set mandatory limits on the sodium content of different food categories—potato chips, canned soups, pizza, and so on—and to gradually lower those limits over time.

So in 2016, the FDA proposed sodium targets for both packaged and restaurant

foods, though they were only voluntary.





Q: Did the industry object?

A: At first. The Grocery Manufacturers Association, which was the most influential food industry trade group, said yes, it could be useful for Americans to lower sodium, but then came up with 100 reasons



Eat a DASH Diet

Here's a 2,100-calorie version of the DASH (Dietary Approaches to Stop Hypertension) diet with fewer carbs than the original. It's rich in fruits and vegetables and low in bad fats, added sugars, and salt. (Note: servings are small.)

	Daily Servings
 Vegetables & Fruit 1 serving: ½ cup (or 1 cup greens) or 1 piece fruit	11
 Grains 1 serving: ½ cup pasta or rice or cereal or 1 slice bread	4
 Low-fat Dairy 1 serving: 1 cup milk or yogurt or 1½ oz. cheese	2
 Legumes & Nuts 1 serving: ½ cup beans or ¼ cup nuts or 4 oz. tofu	2
 Poultry, Fish, Lean Meat 1 serving: ¼ lb. cooked	1
 Oils & Fats 1 serving: 1 Tbs.	2
 Desserts & Sweets 1 serving: 1 tsp. sugar or 1 small cookie	2
 Wild Card Poultry, Fish, Lean Meat or Oils & Fats or Grains or Desserts & Sweets	1

Source: [JAMA 294: 2455, 2005.](#)

why sodium should not be lowered. The Salt Institute, the association of manufacturers like Morton Salt, just urged the FDA to abandon the targets.

Q: And now?

A: In the last few years, several major companies—like Unilever, Nestlé, and Mars—have declared their support for the FDA's voluntary targets. The Grocery Manufacturers Association lost several major food companies and morphed into the Consumer Brands Association. And, thankfully, the Salt Institute has gone out of business. So the political landscape has changed dramatically.

However, here we are four years later, and the FDA has not done a darn thing to finalize the targets.

Q: How do we know that companies can cut sodium?

A: If you compare different brands of almost any food—salad dressings, breads, packaged meats, pasta sauces—you'll find wide disparities in sodium content. [See "Salt Savings," p. 5.]

That proves that many companies could lower the sodium levels to match the best performers in each category.

Also, some foods sold at McDonald's, Burger King, and other chain restaurants in other countries have less salt than the same foods sold here.

Q: Why?

A: Many countries have made more progress than we have. The United Kingdom led the way. About 15 years ago, it set voluntary sodium targets, pressured food manufacturers to lower sodium, and mounted a campaign urging people to eat less salt.

After five years, sodium intakes fell by around 10 percent, which was about a quarter of the program's goal. But when there was a change in government, progress came to a halt.

Q: Are there other approaches?

A: Yes. Chile, Israel, Uruguay, and other countries have been very effective with food labeling. Foods with more than specified levels of sodium have "high in salt" warnings on the front of the package.

Similar symbols highlight foods high in saturated fat or sugar. A food could have two or three warning symbols.

After a couple of years, Chile lowered its threshold for a sodium symbol, and then dropped the threshold even further. That's what we need to do here.

Q: After 40 years of fighting the salt wars, where do we stand?

A: If we go back 40 years, when you and I wrote a petition asking the FDA to require food labels to disclose sodium, we had support from many scientists and expert committees that said that Americans should eat less sodium.

But since then, increasingly sophisticated research has demonstrated beyond a shadow of a doubt that we would benefit tremendously by eating lower-sodium diets.

Q: Yet the progress has been slow.

A: Yes. Despite the plethora of petitions, lawsuits, books, TV interviews, and meetings, the government and the food industry have failed to act. Americans are still consuming roughly 50 percent more sodium than experts recommend—and are suffering the consequences. The Industry War is essentially a stalemate. 🍌

Lower Your Pressure

Here's how much your systolic pressure could fall with diet and exercise if you have high blood pressure. If you don't, expect a drop of 2 to 4 points for each step.

Target	Tips
Cut sodium to 2,300 mg a day ↓ 5–6 points	Read labels, buy lower-salt foods, use lite salt, eat fewer processed and restaurant foods.
Get 3,500 to 5,000 mg a day of potassium ↓ 4–5 points	Fruits and vegetables have the most bang for your calorie buck.
Eat a DASH diet ↓ 11 points	It may also cut your risk of type 2 diabetes, some cancers, and memory loss.
Limit alcohol ↓ 4 points	If you drink, stop at 2 drinks a day for men (though 1 is better) and 1 drink a day for women.
Exercise ↓ 5–8 points	Aim for 90 to 150 minutes a week of aerobic and/or strength training.
Lose excess weight ↓ 5 points	Expect about a 1-point drop for every 2 pounds you lose.

Source: adapted from [J. Am. Coll. Cardiol. 71: e127, 2018.](#)

Quick Studies

A snapshot of the latest research on diet, exercise, and more.

Plant vs. Animal Meats



Plant-based meats are processed foods, but they may still protect your heart.

Researchers had 36 adults eat at least two servings a day of ordinary meats (like ground beef and sausage) for eight weeks and similar plant-based versions (supplied by Beyond Meat, which funded the study) for eight weeks.

LDL (“bad”) cholesterol was about 11 points lower, weight was 2 pounds lower, and TMAO (trimethylamine N-oxide) levels were about 40 percent lower when the participants ate the plant meats. TMAO, which is made by gut bacteria that dine on the carnitine in red meat, has been linked to a higher risk of heart disease.

What to do: Swap meats for plant-based meats that have less saturated fat (like the study did) to help your heart and cut greenhouse gas emissions.

[Am. J. Clin. Nutr. 2020. doi:10.1093/ajcn/nqaa203.](https://doi.org/10.1093/ajcn/nqaa203)

Do the Kegel

One out of three women aged 60 or older experience urinary leakage.

Researchers randomly assigned 319 women to 12 weeks of either individual or group pelvic floor muscle training. After a year, weekly episodes of leakage fell by 70 percent among those who got individual training and by 74 percent in those attending group sessions.

What to do: Do Kegel exercises to strengthen your pelvic floor. Go to pelvicfloorfirst.org.au to learn more.

[JAMA Intern. Med. 2020. doi:10.1001/jamainternmed.2020.2993.](https://doi.org/10.1001/jamainternmed.2020.2993)



Peppers & Parkinson’s?

Smokers have lower rates of Parkinson’s disease. That led researchers to wonder if the nicotine that occurs naturally in peppers could lower Parkinson’s risk, even though peppers have far less nicotine than tobacco.

The scientists tracked roughly 51,000 adults—none of whom had ever smoked—for 26 years.

Women who ate peppers (any kind) at least five times a week had roughly half the risk of Parkinson’s compared to women who ate them three times a month or less. The scientists saw no link between dietary nicotine and Parkinson’s in men.

What to do: It’s far too early to know if peppers can protect the brain. In the meantime, enjoy them. 🌶️

[Am. J. Clin. Nutr. 2020. doi:10.1093/ajcn/nqaa186.](https://doi.org/10.1093/ajcn/nqaa186)

Vitamin D & Vertigo

Vitamin D may help prevent benign paroxysmal positional vertigo (BPPV), which occurs when tiny crystals in the inner ear get dislodged.

Researchers randomly assigned 1,050 people who had been treated

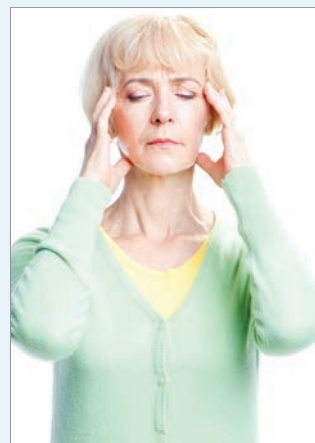
for BPPV—with a simple maneuver that moves the crystals back into place—to either an intervention or an observation group.

Of the 500 people in the intervention group, 348 had insufficient vitamin D levels (under 20 ng/mL) when they entered the study. Only they were given vitamin D (400 IU) and calcium carbonate (500 mg) twice a day.

After a year, the full intervention group had 24 percent fewer episodes of vertigo than the observation group. The researchers calculated that four people with insufficient vitamin D would need to take vitamin D and calcium for a year to prevent one case of BPPV.

What to do: If you’ve had BPPV, get your vitamin D tested to see if you need more.

[Neurology 2020. doi:10.1212/WNL.0000000000010343.](https://doi.org/10.1212/WNL.0000000000010343)



All in GERD Time

How to find relief from reflux

BY CAITLIN DOW

Most people will feel the “burn” of heartburn at some point. But if you have gastroesophageal reflux disease, or GERD, it’s more than an occasional discomfort. Do you need to avoid coffee? Hot wings? Chocolate? Would a special pillow help? Do drugs for GERD boost the risk of Covid-19? Here’s the scoop.

“While most people think that reflux occurs because of an overproduction in stomach acid, it’s actually the contrary—it’s having low amounts of stomach acid that leads to this problem,” claims mercola.com.

How does low stomach acid cause reflux? Mercola doesn’t say.

“There’s no data to support that theory,” says Scott Gabbard, a gastroenterologist at the Cleveland Clinic. “Reflux isn’t an acid problem. It’s a valve problem.”

A valve called the lower esophageal sphincter (LES), to be precise. It’s the junction between your esophagus and your stomach.

“It’s a ring of muscle that’s supposed to open when you swallow and then close,” Gabbard explains.

“If that valve opens when it’s not supposed to, you’ve got an open conduit for stomach contents to come back up into the esophagus.”

That’s reflux. It happens to everyone occasionally. Most of us don’t even feel it.

“But if the reflux becomes troublesome with symptoms like frequent heartburn, sour taste in the mouth, or regurgitation, we call it gastroesophageal reflux disease,” says Carolyn Newberry, a gastroenterologist and assistant professor of medicine at Weill Cornell Medical College.

And that’s not rare. “Around 20 per-

cent of American adults have GERD symptoms on a weekly basis,” says Joel Rubenstein, research scientist at the Veterans Affairs Center for Clinical Management Research and director of the Barrett’s Esophagus Program at the University of Michigan Medical School.¹

What causes the lower esophageal sphincter to relax?



Got GERD? Instead of avoiding a long list of “trigger” foods, try an elimination diet to see what causes your symptoms.

In some cases, drugs like beta-agonists for asthma, calcium channel blockers for blood pressure, and benzodiazepines for anxiety may be to blame.

“And having elevated weight can do it,” notes Gabbard.

“Excess fat increases pressure in the abdomen, and it may actually have some hormonal effects that cause the sphincter to relax.”

GERD Grief

“The vast majority of people who have GERD will not have any long-term consequences,” says Rubenstein. But regularly bathing the esophagus in corrosive stomach acid can lead to serious complications in some people.

“People can develop esophagitis, which is inflammation in the esophagus,” says Newberry. In some cases, that can lead to esophageal ulcers.

Over time, acid exposure can cause the cells that normally line the esophagus to be replaced with cells that resemble the acid-resistant cells of the intestine.

That condition—Barrett’s esophagus—occurs in roughly 15 percent of people with GERD.²

Barrett’s has no symptoms, and it can lead to a deadly cancer.

“People with Barrett’s have an estimated lifetime risk of esophageal adenocarcinoma of about 5 to 10 percent,” says Rubenstein.³

“And the fatality rate for adenocarcinoma is very high.” Most patients live for less than a year.

“Many people aren’t diagnosed until that cancer is late stage,” notes Rubenstein. “Most patients with Barrett’s will not

progress to cancer,” he adds. “But we do endoscopies to identify those who will. Those who are screened tend to be diagnosed with an earlier-stage cancer and have better survival.”²

Trigger Warning

“There’s this thought that everybody with reflux needs to avoid coffee, chocolate, fatty foods, and all of the trigger foods on the lists that you find online,”



Can supplements with ingredients like licorice, chamomile, or aloe help? No good studies have looked.

Bye Bye, Burn

What else helps?

■ **Lose excess weight.** “By losing weight, particularly around the midsection, you’re decreasing the pressure in the abdominal cavity, which helps reduce reflux,” says Newberry.

In a study on nearly 30,000 Norwegians with reflux, those who

dropped the most weight were twice as likely to report a drop in reflux symptoms as those who dropped the least.⁶

■ **Eat earlier.** Not eating for a couple of hours before bedtime may help, though the evidence is limited.

One study had 30 people with reflux eat a Big Mac, fries, and a soda either six hours or two hours before bedtime.⁷

says Newberry. (Others include citrus, tomatoes, spicy foods, mint, and carbonated drinks.)

But there’s no good evidence that eliminating those foods extinguishes the flames of heartburn. “And it makes for a pretty bland diet and can give people anxiety about what they’re eating,” says Newberry.

Some spicy or acidic foods may irritate the esophagus, and others—like chocolate, mint, coffee, and alcohol—may relax the lower esophageal sphincter.⁴ Carbonated drinks can increase bloating, which could also cause the sphincter to relax. But no one has done randomized trials to see if avoiding those foods curbs heartburn.

A few small trials have tested high-fat meals. “Fatty foods don’t drain from the stomach as quickly, which may lead the stomach contents to back up and induce reflux,” says Newberry.

In one study of 15 people with reflux, a meal with 600 calories and 20 grams of fat resulted in less acid in the esophagus and less heartburn than a meal with 1,100 calories and 65 grams of fat.⁵

“Whether consuming less fat or lower-calorie meals works over the long term hasn’t been well studied,” says Gabbard.

Where does that leave someone with heartburn?

“I don’t want to send the message that diet has no role in reflux, because it does for many people,” says Newberry. “But you need to figure out what your triggers are.”

“I tell people to cut out a food category in that list of triggers for a week or two, then to reintroduce it. If the food bothers you, avoid it. If it doesn’t, it’s probably not a culprit for you.”



A study that tested the MedCline pillow had no control group, but sleeping on a wedge or your left side may reduce nighttime reflux.

“Eating within a couple of hours of going to bed increased nighttime reflux,” says Newberry.

■ **Elevate your torso.** “Nighttime reflux can be quite bothersome,” says Gabbard. “If you lie on your back, the valve is essentially level with the contents of

the stomach. And if you lie on your right side, the valve is submerged.”

“Lying on your left side at an incline positions the lower esophageal sphincter straight up,” says Gabbard. “So we studied a pillow that essentially locks patients in that proper position.” (See illustration, below.)

“In an earlier study in people without GERD, sleeping in that position decreased acid in the esophagus by 87 percent compared to lying flat.”⁸ (The study was funded by the pillow maker.)

In the more recent study, Gabbard instructed 25 patients with nighttime reflux to sleep on a special pillow (provided by the pillow maker) for at least 6 hours a night.⁹ After two weeks, “their score on a symptom scale improved by about 70 percent.”

But that study had no control group, so people may have felt better because they expected to or because symptoms tend to come and go over time.

Not ready to cough up \$280 for a pillow? Try sleeping on your left side or on a bed wedge or setting the head of your bed frame on blocks.

Dropping Acid

“Unfortunately, we don’t have any FDA-approved medications that work on the valve,” says Gabbard.

“Our medicines either neutralize acid or decrease acid production. So you still have things refluxing up. But if there’s less acid in it, it’s not damaging the esophagus.”

■ **Antacids** like Tums, Alka-Seltzer, Mylanta, and Rolaids neutralize acid

in the esophagus. They work quickly, but don’t last long, so they’re best for treating mild, occasional heartburn. (Alka-Seltzer tablets have roughly 600 to 1,200 milligrams of sodium per dose, so consider other antacids instead.)

■ Histamine-receptor antagonists

(H2RAs) like Pepcid and Tagamet make the stomach produce less acid, and they last longer than antacids. H2RAs also work more quickly than proton pump inhibitors.

“But they can stop working after two weeks or less,” says Gabbard. “So they may be better for short-term use.”

In April, the Food and Drug Administration asked companies to stop selling the H2RA drug ranitidine (also known as Zantac), and advised consumers to throw out any unused ranitidine.¹⁰

Tests found that levels of a contaminant in ranitidine called NDMA increase over time and at higher-than-room temperatures. NDMA is thought to be a human carcinogen.

But if you’ve been taking ranitidine, don’t panic.

“A study presented at a conference this year looked at health records from 65 million patients,” says Gabbard. “It found no link between ranitidine use and cancer compared with people who took another H2RA.” Though the study hasn’t been published yet, its results are reassuring.

■ **Proton pump inhibitors (PPIs)** like Prilosec, Prevacid, and Nexium are the most potent acid blockers on the market. They not only treat symptoms like heartburn and regurgitation but also heal inflammation in the esophagus. And they may trim the odds that Barrett’s esophagus progresses to cancer.¹¹

What about studies that found a slightly greater risk of kidney disease, dementia, and bone fractures in people who take PPIs? (See Oct. 2016, p. 10.)

“The problem is that those studies were observational, so there were many factors you can’t control for,” says Gabbard.

“Take 1,000 people on a PPI compared to 1,000 who aren’t, and the people on PPIs are overall in worse health. They have a worse diet, they’re more likely to

have obesity, and so on.”

Researchers try to control for weight and other possible “confounders,” but they can’t eliminate them all.

“So you may conclude that PPIs cause, say, kidney disease when something else is responsible,” says Rubenstein.¹² “The way to fix that problem is with a randomized controlled trial.”

In a recent trial, researchers randomly

“The main reason we have acid in our stomach is to kill the microorganisms that we ingest,” Rubenstein explains. “So decreased stomach acid may predispose a person to contract a GI infection.”

Could that explain the results of an online survey of roughly 53,000 Americans who reported having symptoms like abdominal pain, heartburn, or regurgitation?¹⁴

“Those taking a PPI once daily were roughly twice as likely to report having a positive Covid-19 test,” says Rubenstein. “And those who were taking twice daily PPIs were roughly four times more likely to report a positive Covid-19 test.”

“The study was observational, so it can’t prove that PPIs increase your risk of getting Covid-19,” he cautions. And with an online survey, researchers can’t confirm what people report.

While Rubenstein isn’t ignoring the results, “I don’t think they’re a reason for people to just stop taking their PPIs. It’s only one study.”

Covid-19 or not, “patients should make sure that they have a good reason for taking

a PPI,” says Rubenstein. “They are wonderfully effective drugs, especially for people with Barrett’s esophagus. But they are overused. If you don’t have Barrett’s, you can try stopping the PPI or using an H2 blocker, which is less potent. If your symptoms go away, you don’t need to be on the PPI.” 🍌



Don’t stop taking your proton pump inhibitor just because one study found a higher risk of Covid-19 in PPI takers.

assigned roughly 17,500 people to take a PPI or a placebo every day. After three years, the PPI takers were no more likely than the placebo takers to have broken a bone or be diagnosed with pneumonia, chronic kidney disease, dementia, or a handful of other health problems.¹³

That’s reassuring to Rubenstein. “It is possible that PPIs have very weak effects on those outcomes, but I don’t think we are ever going to have a larger trial,” he says.

And for many people, the benefits far outweigh a small, unproven risk, says Gabbard. “Some patients, like those with ulcers and Barrett’s esophagus, may need to be on PPIs for life.”

The trial did find a slightly higher risk of gastrointestinal infection in PPI takers than in placebo takers.

¹ *Gut* 63: 871, 2014.

² *Am. J. Gastroenterol.* 111: 30, 2016.

³ *Gastroenterology* 149: 302, 2015.

⁴ *J. Thorac. Dis.* 11: S1594, 2019.

⁵ *Clin. Gastroenterol. Hepatol.* 5: 439, 2007.

⁶ *Am. J. Gastroenterol.* 108: 376, 2013.

⁷ *Am. J. Gastroenterol.* 102: 2128, 2007.

⁸ *J. Clin. Gastroenterol.* 49: 655, 2015.

⁹ *Dis. Esophagus* 30: 1, 2017.

¹⁰ [fda.gov/news-events/press-announcements/fda-requests-removal-all-ranitidine-products-zantac-market](https://www.fda.gov/news-events/press-announcements/fda-requests-removal-all-ranitidine-products-zantac-market).

¹¹ *Lancet* 392: 400, 2018.

¹² *Gastroenterology* 152: 706, 2017.

¹³ *Gastroenterology* 157: 682, 2019.

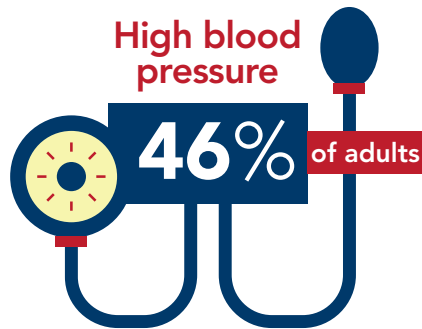
¹⁴ *Am. J. Gastroenterol.*, in press.

The State of our Union

BY BONNIE LIEBMAN

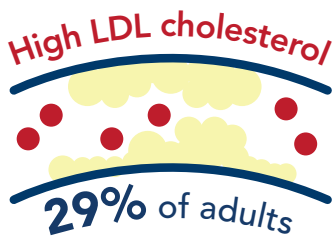
“Those at most risk for the most serious outcomes of Covid-19, including hospitalization and death, are people afflicted by diet-related chronic diseases (obesity, type 2 diabetes, and cardiovascular disease),” [wrote the experts](#) advising the government on the 2020 *Dietary Guidelines for Americans*.

And that includes many of us, judging by our weight, blood sugar, blood pressure, and cholesterol. Here’s a snapshot of the nation’s health. 🍌



Among people 65 and older, 78% have high blood pressure.

Source: [Circulation 141: e139, 2020.](#)

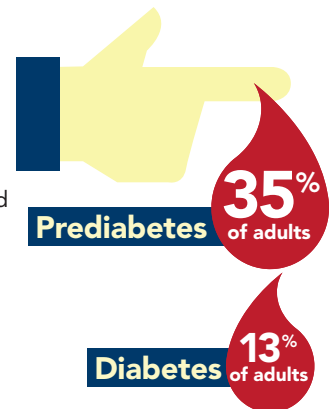


“High” means at least 130 milligrams per deciliter.

Source: [Circulation 141: e139, 2020.](#)

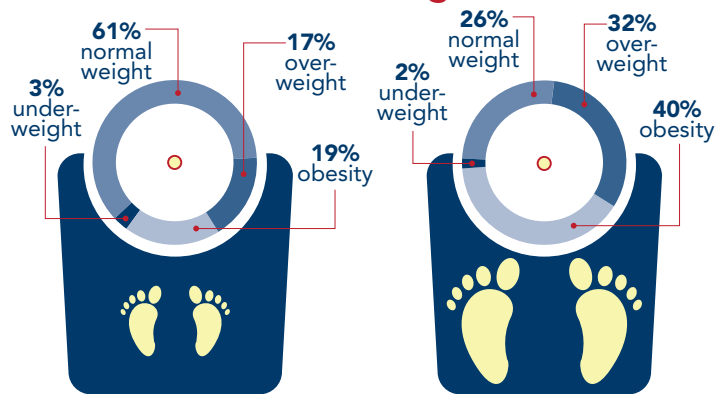
Diabetes & prediabetes

Among people 65 and older, 47% have prediabetes and 27% have diabetes (mostly type 2).



Source: [cdc.gov/diabetes/data/statistics/statistics-report.html.](#)

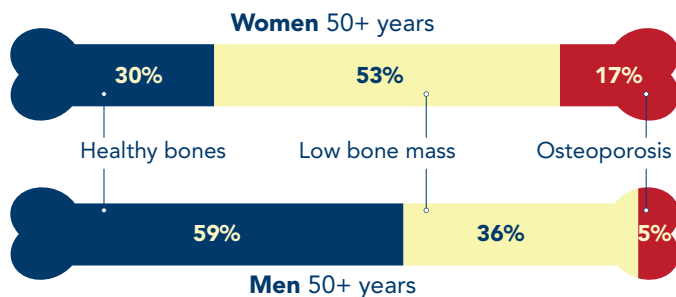
Excess weight



Normal-weight adults are a minority.

Sources: [cdc.gov/nchs/data/hestat/obesity_adult_15_16/obesity_adult_15_16.pdf](#), [cdc.gov/nchs/data/hestat/obesity_child_15_16/obesity_child_15_16.pdf](#).

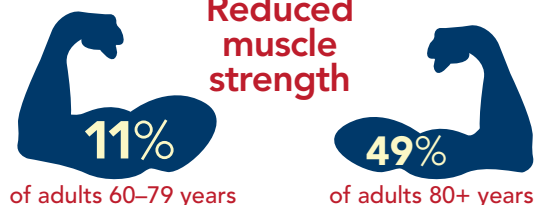
Bone loss



If your “T-score” on a bone scan is -1.0 to -2.5, you have low bone mass (osteopenia).
If it’s -2.5 or lower, you have osteoporosis.

Source: [Osteoporos. Int. 28: 1979, 2017.](#)

Reduced muscle strength



Experts use hand-grip strength as an indicator of muscle strength.

Source: [dietaryguidelines.gov/2020-advisory-committee-report/data-analysis.](#)

The Healthy Cook

Unbeetable!



Peppery arugula, Belgian endive, and other punchy greens are right at home in this salad, which uses a tangy mustard dressing to balance out the sweet beets. It's a satisfying stunner! 🥕

Beet Salad with Mustard Vinaigrette

🕒 SERVES 4

- | | |
|---|---|
| 1 Tbs. whole-grain mustard | 1. Make the dressing: In a medium bowl, whisk together the mustard, shallot, vinegar, oil, orange zest, and salt. |
| 1 small shallot, thinly sliced | |
| 1 Tbs. red wine vinegar | 2. Arrange the beets and salad greens on a platter or salad plates. |
| 2 Tbs. extra-virgin olive oil | |
| 1 tsp. orange zest | 3. Sprinkle with the wheat berries. |
| ¼ tsp. kosher salt | |
| 1 lb. cooked red and/or yellow beets, cut into wedges | 4. Spoon the dressing over the salad. |
| 2 cups salad greens | |
| ½ cup cooked wheat berries or farro | |

PER SERVING (1 cup): calories 140 | total fat 7 g | sat fat 1 g | carbs 18 g | fiber 3 g | total sugar 10 g | added sugar 0 g | protein 3 g | sodium 290 mg

The Healthy Cook's Kitchen

This month's recipe is from "Fall & Winter Vegetables," the latest collection from Healthy Cook Kate Sherwood. To order it or the other volumes in *The Healthy Cook's Kitchen* series ("Beans & Lentils," "Seafood," and "Spring & Summer Vegetables"), go to store.nutritionaction.com.



That's Nuts!

How to pick the healthiest nuts & seeds

BY LINDSAY MOYER & KAAMILAH MITCHELL

Nuts get lots of attention...and they deserve it. Healthy fats. Vitamins & minerals. A little plant protein. And talk about taste! The hard part: stopping after a serving. Here's our guide to enjoying the best nuts (and seeds). Turn the page for more tips, plus our Best Bites and Honorable Mentions.

1 Help your heart. The good news: When you add most nuts to your diet, it helps reduce LDL cholesterol. That should lower your risk of heart disease. Your best bets are walnuts, pecans, almonds, peanuts, pistachios, hazelnuts, and most seeds, rather than macadamias, cashews, or Brazil nuts (see "Have a Heart").

2 Mix it up. While almonds are nutrient rich, they're also heavily advertised. In fact, a cornucopia of nuts and seeds beat almonds for nutrients like calcium (sesame seeds), folate (peanuts), protein (pumpkin seeds), vitamin E (sunflower seeds), fiber (chia seeds), and magnesium (hemp seeds). So play the field.

3 Keep track. Nuts pack plenty of calories into a tiny bundle (see "Counting Calories," p. 14). Turn the page for our guide to counting out a 1 oz. serving. Or use a ¼ cup measure or inexpensive kitchen scale. Shelling your own nuts (like pistachios) may also slow you down.

4 Mind the sodium (it's easy). Salted nuts may have less sodium than you'd expect, since it's just sprinkled on top. But if you're watching every milligram, varieties that are unsalted (our Best Bites) or "lightly salted" (many Honorable Mentions) abound.

Tip: An ounce of some sunflower seed shells are dusted with a full day's worth of sodium. Shell them in your hands, not in your mouth. Or buy them shelled.

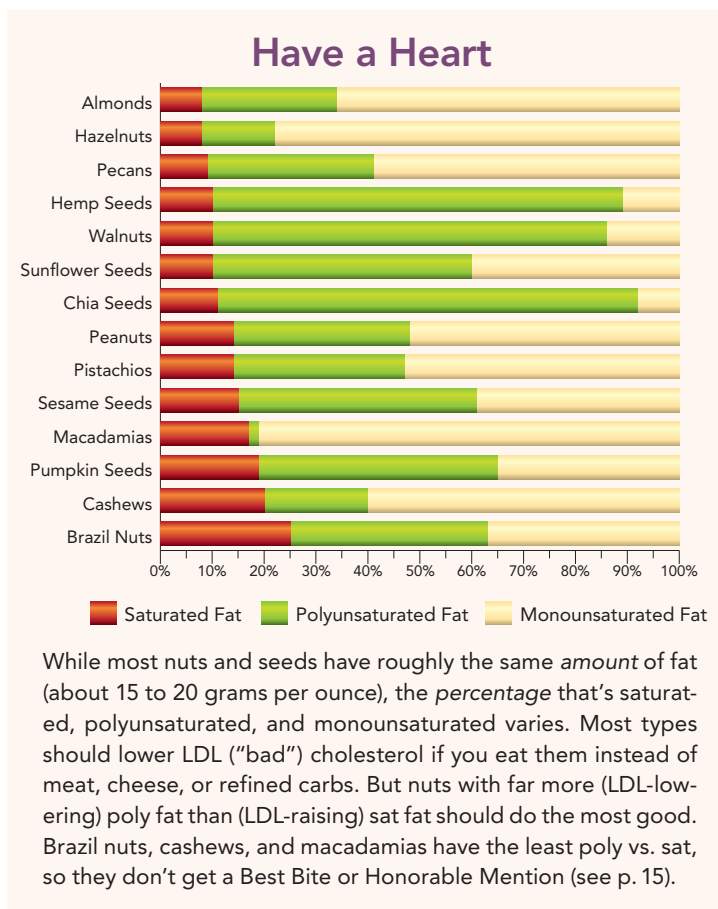
5 Don't glaze over. Our Honorable Mentions have no more than 3 grams (about ½ teaspoon) of added sugars per ounce. That keeps you in honey-roasted or cocoa-dusted territory. Glazed nuts can hit 2 or more teaspoons.

6 Watch clusters, coatings, and "snack" or "breakfast" mixes.

Some of them sully nuts' good name. Take Planter's line of Breakfast Blends. The Cinnamon Roll, for example, is anything but "part of a balanced breakfast." It's sugary peanuts and almonds plus palm-oil-coated "yogurt" blueberries and mini cookies. So each ounce delivers 3 teaspoons of added sugars—but only 3 grams of protein.

7 Handle with care. Thanks to all those unsaturated fats, nuts and seeds don't stay fresh forever. Freeze in a zipper bag or airtight container to extend their life.

And to really bring out their flavor, toast them in the oven at 325°F for 5 to 10 minutes. Just watch them closely. Nuts seem to go from untoasted to burnt in seconds.



What's a Serving?

Here's the typical number of nuts in a 1 oz. serving. An ounce of sunflower kernels or shelled pumpkin seeds (not shown) is about ¼ cup, or roughly 4 level tablespoons.



Almonds

23



Brazil Nuts

6



Cashews

18



Hazelnuts

21



Macadamias

10–12



Peanuts

40



Pecans

19 halves



Pistachios

49



Walnuts

14 halves

Sources: [International Tree Nut Council Nutrition Research & Education Foundation](#), [USDA FoodData Central](#).

Counting Calories

“KIND nut bars have nearly 20% less calories,” the company announced in January. Yet the list of ingredients hadn’t changed.

The new numbers came from studies led by David Baer, supervisory research physiologist at the USDA Agricultural Research Service in Beltsville, Maryland. (Those studies were partly funded by the nut industry.) Baer’s team measured how many calories people digested and absorbed from different nuts versus how many calories went out in their, um, waste.

In two studies, whole almonds averaged 19 to 25 percent fewer calories than what’s listed on most Nutrition Facts labels and in our chart on p. 15. That works out to about 30 to 40 fewer calories per ounce.^{1,2}

Why? Nuts aren’t just hard to crack; they’re also hard to chew.

“The more you chew, the more you’re grinding up the plant cell walls and making the nutrients inside available for digestion,” says Baer. That also explains why the calories in almond *butter* were no lower.² In a sense, it’s already been chewed for you.

Baer got similar results for walnut pieces (21 percent fewer calories) and cashews (16 percent), though not pistachios (5 percent). But those numbers are averages. Some volunteers—presumably champion chewers—absorbed no fewer calories. How well do *you* chew? Who knows.

Does the same go for other plants, like seeds or beans or corn? No one has looked. Baer is now testing lentils and chickpeas.

But even slimmed-down nuts are still high in calories per bite. Use our “What’s a Serving?” pictures to track *your* bites.

¹[Am. J. Clin. Nutr.](#) 96: 296, 2012. ²[Food Funct.](#) 7: 4231, 2016.

Go Nuts (and Seeds)

Don’t *add* nuts and seeds to your diet. Use them to *replace* calories from less-healthy foods.

■ **Lose the white-flour croutons.** Nuts (like walnuts, pecans, and hazelnuts) and seeds are crunchier and more flavorful anyway.

■ **Amandine, anyone?** Instead of breading, try chopped or sliced toasted almonds or pecans on top of chicken, fish, or green beans.

■ **Do better than bars.** Even the best dried fruit & nut bars (like some of KIND’s) have about a teaspoon of added sugars. Why not pour an ounce of nuts and a few bites of dried fruit (try raisins, figs, or unsweetened mango) into a reusable container instead?

■ **Bye bye, bacon.** Smoked almonds have more sodium than regular almonds, but they deliver the smoky flavor of bacon. Add them to salads, veggies, etc.

■ **Go beyond granola.** Old take on a parfait: sugary yogurt plus sugary granola. New take: plain yogurt plus toasted nuts (and fruit).

■ **Swap sugary cereal.** Add nuts and berries to sugar-free shredded wheat or oatmeal. 🍌

In a Nutshell

Best Bites (✓✓) have no added salt or sugar. **Honorable Mentions** (✓) can have up to 80 milligrams of sodium and 3 grams (about ½ tsp.) of added sugars per serving. Both are free of mix-ins like cookie pieces and pretzels. We disqualified cashews, macadamias, and Brazil nuts, but not mixed nuts that contain just some of those. Nuts and seeds are ranked from least to most sodium, then most to least protein, then least to most calories. Sweet nuts, seeds, mixes, and clusters are first ranked from least to most added sugars.

	Calories	Sodium (mg)	Protein (g)
Almonds (1 oz., about 23 nuts)			
✓✓ Unsalted, any brand	160	0	6
✓ Blue Diamond Lightly Salted	170	40	6
✓ Good & Gather (Target) Lightly Salted Roasted	170	40	6
✓ Trader Joe's 50% Less Salt	180	60	6
Blue Diamond Roasted Salted	170	85	6
Blue Diamond Crafted Gourmet ¹	170	140	6
Blue Diamond Smokehouse	170	150	6
Peanuts (1 oz., about 40 nuts)			
✓✓ Unsalted, any brand	160	5	7
✓ Planters Lightly Salted Cocktail	170	50	7
✓ Trader Joe's 50% Less Salt	180	60	8
✓ Good & Gather (Target) Lightly Salted Dry Roasted	160	75	7
✓ Planters Lightly Salted Dry Roasted	170	75	7
Planters Classic	170	100	7
Planters Dry Roasted	160	150	7
Miscellaneous Nuts (nuts in 1 oz., about ¼ cup)			
✓✓ Pistachios, unsalted, any brand (49)	160	0	6
Cashews, unsalted, any brand (18)	160	0	5
✓✓ Hazelnuts (filberts), unsalted, any brand (21)	180	0	4
Brazil nuts, unsalted, any brand (6)	190	0	4
✓✓ Walnuts, unsalted, any brand (14 halves)	190	0	4
✓✓ Pecans, unsalted, any brand (19 halves)	200	0	3
Macadamias, unsalted, any brand (10–12)	200	0	2
✓ Planters Roasted Pecans	200	45	3
Planters Deluxe Lightly Salted Whole Cashews	160	50	5
✓ Wonderful Pistachios Lightly Salted	150	65	6
Mixed Nuts (1 oz., about ¼ cup)			
✓✓ Planters Unsalted	170	0	6
✓✓ Good & Gather (Target) Raw	160	0	5
✓✓ 365 (Whole Foods) Roasted & Unsalted Deluxe	170	0	5
✓✓ Good & Gather (Target) Unsalted Roasted	170	0	5
✓✓ Planters NUT-rition Raw	170	0	5
✓ Planters NUT-rition Heart Healthy Mix	170	40	6
✓ Good & Gather (Target) Lightly Salted Roasted	170	40	5
✓ Planters Deluxe Lightly Salted	170	40	5
✓ Planters NUT-rition Essential Nutrients Mix	170	40	5
✓ 365 (Whole Foods) Roasted & Lightly Salted	170	45	6
✓ Planters Lightly Salted	170	45	6
✓ 365 (Whole Foods) Roasted & Lightly Salted Deluxe	170	45	5
✓ Planters Select Cashews, Almonds & Pecans	170	45	5
✓ Planters NUT-rition Men's Health Recommended Mix	160	50	7
✓ Planters Deluxe	170	80	5
Good & Gather (Target) Sea Salt Roasted	170	110	5

Seeds (1 oz. shelled or hulled, 3–4 Tbs.)

	Calories	Sodium (mg)	Protein (g)
✓✓ Hemp or pumpkin seeds, unsalted, any brand	160	0	9
✓✓ Sunflower seeds, unsalted, any brand	170	0	6
✓✓ Chia seeds, unsalted, any brand	140	0	5
✓✓ Sesame seeds, unsalted, any brand	160	0	5
✓ Trader Joe's Roasted & Salted Pumpkin Seeds	170	70	9
365 (Whole Foods) Organic Roasted & Salted Sunflower Kernels	160	110	6
David Sea Salt Pumpkin Pepitas	180	160	11
David Sunflower Kernels	190	220	5
David Jumbo Reduced Sodium Sunflower Seeds	190	2,070 [†]	8
David Jumbo Original Sunflower Seeds	190	2,820 [†]	8
David Jumbo Buffalo Style Ranch Sunflower Seeds	190	3,280 [†]	7

Sweet Nuts & Seeds (1 oz., about ¼ cup, unless noted)

	Calories	Sodium (mg)	Protein (g)	Added Sugars (tsp.)
✓ Blue Diamond Oven Roasted Dark Chocolate	160	35	5	0.5*
✓ Blue Diamond Toasted Coconut Almonds	160	35	5	0.5*
✓ Emerald Cocoa Roast Almonds (3 Tbs.)	150	45	5	0.5
Wonderful Honey Roasted Pistachios	180	90	5	0.5
365 (Whole Foods) Honey Roasted Peanuts	190	120	7	0.5
Blue Diamond Oven Roasted Blueberry	160	25	5	1*
Planters Cocoa Peanuts	160	70	6	1
Planters Salted Caramel Peanuts	160	95	6	1
Planters Honey Roasted Peanuts	160	105	6	1
Planters Honey Roasted Mixed Nuts	160	115	5	1
Emerald Honey Glazed Almonds (3 Tbs.)	150	160	4	2
Emerald Glazed Walnuts (3 Tbs.)	150	135	2	2.5

Mixes & Clusters (1 oz., ¼–⅓ cup, unless noted)

	Calories	Sodium (mg)	Protein (g)	Added Sugars (tsp.)
David Energy Packed Mix Sea Salt	170	230	7	0
Sahale Bean + Nut Snack Mix ¹	160	270	6	0
✓ Emerald 100 Calorie Natural Walnuts & Almonds with Dried Cherries (1 pouch, 0.7 oz.)	100	0	2	0.5
✓ Emerald 100 Calorie Cashews & Almonds with Dried Pineapple (1 pouch, 0.7 oz.)	100	20	3	0.5
✓ Emerald 100 Calorie Cashews & Almonds with Dried Cranberries (1 pouch, 0.7 oz.)	100	25	3	0.5
✓ KIND Clusters Nuts & Seeds Almond Cashew Sunflower	140	50	5	0.5
KIND Clusters Nuts & Seeds Almond Pumpkin Chia	150	50	6	1
KIND Nut Clusters Peanut Butter Dark Chocolate	150	65	5	1
Sahale Honey Almonds Glazed Mix	170	160	5	1
KIND Clusters Nuts & Fruit Almond Cranberry & Cacao	130	50	4	2
Nature Valley Snack Mix (1 pouch, 1.2 oz.) ¹	160	140	3	2
Planters Breakfast Blends Cinnamon Roll	140	50	3	3

✓✓ Best Bite. ✓ Honorable Mention. ¹ Average of the entire line. [†] Includes salt on the shells. * Estimate.

Daily Protein Target: 85 grams. **Daily Values** (for a 2,000-calorie diet): **Sodium:** 2,300 milligrams. **Added Sugars:** 50 grams (12 tsp.). To convert tsp. of added sugars to grams, multiply by 4.2.

Source: company information. The use of information from this article for commercial purposes is strictly prohibited without written permission from CSPI.



FOOD FIND

Butter Up



Want to mix up your salad? Lettuce help.

Supermarkets are awash in baby kale, baby spinach, baby arugula, and other young'uns.

When you don't want the robust taste of darker greens, try a mellow **baby butter lettuce** blend. The butter babies are as sweet as the grown-ups.

Like just about any greens, they offer fiber, vitamins A and K, and folate for next to no calories (just 20 or so in two cups).

Fresh Express blends green butter lettuce with the iron-rich red variety, which gives its **Sweet & Crunchy** salad a pop of color. Ditto for **Organicgirl Butter, Plus!**

Baby spinach fan? It's in butter blends like **Fresh Express Tender Ruby Reds** and **Earth-bound Farm Organic Spinach + Butter**.

Any of them would make a dynamite salad...our Dish of the Month, for example.

And don't forget full-sized heads of butter lettuce (often called Boston or Bibb). Their perfectly sized round leaves are ideal for sandwiches or lettuce cups.

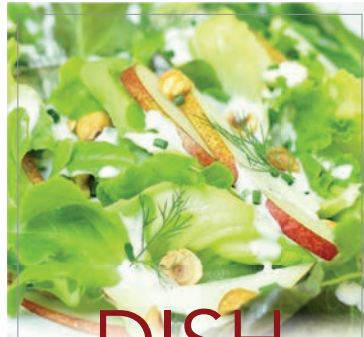
For a satisfying crunch, try **Little Gems**. They're like personal heads of romaine. If you buy them at a farmers market, there's no plastic packaging.

Organicgirl sells Little Gem leaves year-round in supermarkets. "The best of both worlds," says the website. "Sweet like butter and crunchy like romaine."

Talk about a sweet deal.

freshexpress.com—(800) 242-5472

Photos: Fresh Express (left), Lindsay Moyer/CSPI (right), Kate Sherwood & Jennifer Urban/CSPI (bottom).



DISH of the month

Pear & Hazelnut Salad

Whisk 1 Tbs. white balsamic vinegar with 2 Tbs. low-fat sour cream, 2 Tbs. mayo, 1 Tbs. dill, 1 Tbs. chives, and ¼ tsp. kosher salt. Spoon over 8 cups lettuce, 1 sliced pear, and ¼ cup hazelnuts. Serves 4.

FOOD FAIL



Breaking Bad

"Chock full of thick, juicy cuts of smoked and pork sausages, our **Double Sausage & Bacon Loaded Tots** mixes crispy bacon, golden tater tots, fluffy scrambled eggs, and decadent queso cheese sauce," says the box of **Devour All Day Breakfast**.



"So whether it's dawn or dusk, these tasty tots are tricked out with all the meats for whenever your breakfast craving hits."

That's right. Dawn, dusk, or anytime in between, breakfast is waiting! Who needs fresh fruit, whole grains, nuts, or low-fat dairy when you can reach into the freezer for a tray of roughly 50 ingredients, including two cancer-causing processed meats,

pasteurized process cheese, cornstarch, disodium dihydrogen pyrophosphate, sodium acid sulfate, modified cornstarch, xanthan gum, corn syrup solids, sodium phosphates, and sodium nitrite?

It's only a 9 oz. package, but Kraft Heinz manages to pack in 430 calories and more than half a day's sat fat (12 grams) and sodium (1,280 mg). Nice going!

Want another meat-and-potatoes (or white-flour) extravaganza? Try Devour's **Biscuits, Bacon & Creamy Sausage Gravy, Spicy Chorizo Queso Hash, or Steak N' Eggs with Creamy Gravy**.

"All food should be mouth-watering," says the box. "Period. End of story."

Um, don't be so sure.

devour-foods.com—(800) 255-5750

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