

According to the U.S. Centers for Disease Control and Prevention (CDC), anemia affects approximately 3.4 million Americans, people of all ages and from all walks of life.

The blood in our bodies is composed of three types of cells (red blood cells, white blood cells, and platelets) that circulate throughout the body. Red blood cells contain hemoglobin (Hb), a red, iron-rich protein that carries oxygen from the lungs to all of the body's muscles and organs. Oxygen provides the energy the body needs for all of its normal activities. Anemia occurs when the number of red blood cells (or the Hb in them) falls below normal and the body gets less oxygen and therefore has less energy than it needs to function properly.

Anemia may become worse if it is not treated, and it can lead to potentially serious, even life-threatening complications. When the number of red blood cells decreases, the heart works harder, pumping more blood to send more oxygen throughout the body. If the heart works too hard, it can develop a rapid heartbeat (tachycardia), and/or another serious condition known as left ventricular hypertrophy (LVH), an enlargement of the heart muscle that in turn can lead to heart failure.

There are close to 100 different types of anemia with many causes, including:

- Serious disease
- Vitamin or iron deficiencies
- Blood loss
- Genetic or acquired defects or disease
- Side effects of medication

Evidence shows that people who suffer from the following serious diseases are at greatest risk of developing anemia:

- Chronic Kidney Disease (CKD)
- Diabetes
- Cancer
- Heart Disease
- Rheumatoid Arthritis (RA)
- Inflammatory Bowel Disease (IBD)

Also at risk are:

- People over the age of 65
- People with HIV/AIDS
- Patients undergoing surgery

Major symptoms of anemia include:

- Extreme fatigue
- Weakness
- Shortness of breath
- Confusion or loss of concentration
- Dizziness or fainting
- Pale skin, including decreased pinkness of the lips, gums, lining of the eyelids, nail beds and palms
- Rapid heart beat (tachycardia)
- Feeling cold
- Sadness or depression

Because the symptoms of anemia are easily confused with the symptoms of other conditions, it is important to see a doctor for an evaluation if you are experiencing significant fatigue or other signs and symptoms listed above, or if you already have a serious disease

*Taken from [www.anemia.com](http://www.anemia.com).*

Iron Deficiency Anemia (IDA) is a condition where one has inadequate amounts of iron to meet body demands such as during periods of rapid growth and pregnancy. IDA is usually due to a diet insufficient in iron or from blood loss. Blood loss can be acute as in hemorrhage or trauma or long term as in heavy menstruation.

Most at risk are young children whose growth demands are great, the elderly whose diets are many times lacking and women who are pregnant or of childbearing age.

Fatigue is the most common complaint, along with malaise (vague feeling of physical discomfort or uneasiness) sensitivity to cold, shortness of breath, dizziness and restless legs syndrome (uncomfortable feeling in legs, sensations of pulling, tingling, crawling, accompanied by a need to move the legs).

*Taken from <http://irondisorders.org/disorders/ida/index.htm>.*

**Related websites:**

Anemia Lifeline: [www.anemia.com](http://www.anemia.com)

Iron Disorders Institute: <http://irondisorders.org/index.html>

Orange County Anemia Task Force: <http://www.oc.ca.gov/hca/public/nutrition/anemia.htm>

# CHILDREN'S NUTRITION

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Healthy eating starts at birth. Growing children exposed to a variety of healthy foods will learn good eating habits and grow into healthy adults. Nutritional needs vary at different ages. Use the resources below to learn more.

## **Related Websites:**

Children's Nutrition Guide: <http://www.keepkidshealthy.com/nutrition/>

- Offers a free, customized newsletter as well as separate pages for newborn, infant, toddler, pre-school, school age, and adolescent nutrition.

U.S. government's children's nutrition information: <http://www.nutrition.gov/>

- Lists of links regarding children's, teens and special needs children's nutrition.

Kansas State University's Nutrition Spotlight:

Infants: <http://www.oznet.ksu.edu/humannutrition/spotlight/marapr00.htm>

Children: <http://www.oznet.ksu.edu/humannutrition/spotlight/mayjun00.pdf>

Teens: <http://www.oznet.ksu.edu/humannutrition/spotlight/JulAug00.htm>

Feeding Kids Newsletter: [http://nutritionforkids.com/Feeding\\_Kids.htm](http://nutritionforkids.com/Feeding_Kids.htm)

- Nutrition tips and links to nutrition education ideas for children.

Food and Nutrition Center: <http://www.nal.usda.gov/fnic/etext/000100.html>

- List of nutrition education activities for kids.

Your blood cholesterol level has a lot to do with your chances of getting heart disease. High blood cholesterol is one of the major risk factors for heart disease. A risk factor is a condition that increases your chance of getting a disease. In fact, the higher your blood cholesterol level, the greater your risk for developing heart disease or having a heart attack. Heart disease is the number one killer of women and men in the United States. Each year, more than a million Americans have heart attacks, and about a half million people die from heart disease.

*Taken from: <http://www.nhlbi.nih.gov/health/public/heart/chol/wyntk.htm#important>*

Cholesterol is a waxy, fat-like substance that occurs naturally in all parts of the body and that your body needs to function normally. It is present in cell walls or membranes everywhere in the body, including the brain, nerves, muscle, skin, liver, intestines, and heart. Your body uses cholesterol to produce many hormones, vitamin D, and the bile acids that help to digest fat. It takes only a small amount of cholesterol in the blood to meet these needs. If you have too much cholesterol in your bloodstream, the excess is deposited in arteries, including the coronary arteries, where it contributes to the narrowing and blockages that cause the signs and symptoms of heart disease.

Two main nutrients in the foods you eat make your LDL ("bad") cholesterol level go up: saturated fat, a type of fat found mostly in foods that come from animals; and cholesterol, which comes only from animal products. Saturated fat raises your LDL-cholesterol level more than anything else in the diet. Eating too much saturated fat and cholesterol is the main reason for high levels of cholesterol and a high rate of heart attacks in the United States. Reducing the amount of saturated fat and cholesterol you eat is a very important step in reducing your blood cholesterol levels.

*Taken from: <http://www.nhlbi.nih.gov/chd/index.htm>*

**Related Websites:**

National Cholesterol Education Program: <http://www.nhlbi.nih.gov/chd/index.htm>  
<http://www.nhlbi.nih.gov/health/public/heart/chol/wyntk.htm>

Heartpoint's Cholesterol Page: <http://www.heartpoint.com/cholesterolmain.html>

# CULTURAL DIVERSITY AND NUTRITION

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A diet based off the Food Guide Pyramid can be very healthy and appropriate for some people but it is important to realize it will not work for everyone. Servings per day are based on a 2,000 calorie per day diet. This may be too much for some people and too little for others depending on age, activity level, etc. Also, although the pyramid contains a variety of foods, it does not include foods from many cultures.

The body chemistry of each person is different and what works for one person may not work for another. As individuals, we all have different food needs based on our bodies as well as our culture, moral beliefs, and preferences. It is up to each individual to decide what their needs are and the more information they are given, the better decisions they can make.

An easy way to incorporate cultural diversity into a class is to use a specific food that many cultures use (rice, beans, potatoes, etc) and demonstrate or discuss various ways different cultures prepare it. The University of Illinois Extension also offers a cultural diversity nutrition class curriculum (see below).

Some other important things to keep in mind:

#### Multicultural awareness

- Be aware of how own cultural background and experiences and attitudes, values, and biases influence nutrition counseling.
- Be able to recognize limits of own cultural competencies and abilities.
- Have moved from being culturally aware to being aware and sensitive to own cultural heritage and to valuing and respecting differences.

#### Multicultural food and nutrition counseling knowledge

- Understand food selection, preparation, and storage with a cultural context.
- Have knowledge of cultural eating patterns and family traditions such as core foods, traditional celebrations, and fasting.
- Familiarize self with relevant research and latest findings regarding food practices and nutrition-related health problems of various ethnic and racial groups.

*Taken from: [http://www.fiu.edu/~nutreldr/Ask\\_the\\_Expert/Oct\\_Nutrition\\_Ed/Nutrition\\_Ed.htm](http://www.fiu.edu/~nutreldr/Ask_the_Expert/Oct_Nutrition_Ed/Nutrition_Ed.htm)*

#### **Related Websites:**

Cultural Diversity as Part of Nutrition Education and Counseling:

[http://www.fiu.edu/~nutreldr/Ask\\_the\\_Expert/Oct\\_Nutrition\\_Ed/Nutrition\\_Ed.htm](http://www.fiu.edu/~nutreldr/Ask_the_Expert/Oct_Nutrition_Ed/Nutrition_Ed.htm)

- Includes tips as well as links to ethnic and regional food practices and appropriate educational materials.

University of Illinois Extension:

[http://web.aces.uiuc.edu/wellnessways/pdf/tg\\_CulturalDivFood.pdf](http://web.aces.uiuc.edu/wellnessways/pdf/tg_CulturalDivFood.pdf)

- Cultural Food Diversity Nutrition Class Curriculum

Food Stamp Nutrition Connection: <http://www.nal.usda.gov/fnic/foodstamp/Topics/ethnic.htm>

Diabetes is a disease in which the body does not produce or properly use insulin. Insulin is a hormone that is needed to convert sugar, starches and other food into energy needed for daily life. The cause of diabetes continues to be a mystery, although both genetics and environmental factors such as obesity and lack of exercise appear to play roles.

Approximately 17 million people in the United States, or 6.2% of the population, have diabetes. While an estimated 11.1 million have been diagnosed, unfortunately, 5.9 million people (or one-third) are unaware that they have the disease. Diabetes is more common in African Americans, Latinos, Native Americans, Asian-Americans and Pacific Islanders, as well as the aged population.

There are three major types of diabetes:

- **Type 1 diabetes** - Results from the body's failure to produce insulin, the hormone that "unlocks" the cells of the body, allowing glucose to enter and fuel them. It is estimated that 5-10% of Americans who are diagnosed with diabetes have type 1 diabetes.
- **Type 2 diabetes** - Results from insulin resistance (a condition in which the body fails to properly use insulin), combined with relative insulin deficiency. Approximately 90-95% (16 million) of Americans who are diagnosed with diabetes have type 2 diabetes.
  - **Pre-diabetes** - Pre-diabetes is a condition that occurs when a person's blood glucose levels are higher than normal but not high enough for a diagnosis of type 2 diabetes. It is estimated that at least 16 million Americans have pre-diabetes, in addition to the 17 million with diabetes.
- **Gestational diabetes** - Gestational diabetes affects about 4% of all pregnant women - about 135,000 cases in the United States each year.

People with diabetes have the same nutritional needs as anyone else. Along with exercise and medications (insulin or oral diabetes pills), nutrition is important for good diabetes control. By eating well-balanced meals in the correct amounts, you can keep your blood glucose level as close to normal (non-diabetes level) as possible.

*Taken from: <http://www.diabetes.org>*

## **Related Websites:**

Nutrition Education For New Americans Project: <http://multiculturalhealth.org/index/home>

- Bilingual diabetes handouts in 19 languages.

American Diabetes Association: <http://www.diabetes.org>

- Diabetic food guide pyramid:  
<http://www.diabetes.org/main/health/nutrition/foodpyramid/foodpyramid.jsp>

# DIETING AND EATING DISORDERS

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Searching for the perfect diet? Always worrying about counting calories and fat grams in order to control your weight can become difficult and tiresome. And, is there really a "perfect diet" out there anyway? After all, 95% of diets fail because diets don't work. Why else would people have to keep searching for new ones all of the time?

When was the last time you truly had fun dieting? Most likely you won't remember it as a pleasurable experience. After all, it doesn't feel so great to be getting hungry for lunch but forcing yourself to wait an extra hour. Do you remember feeling irritable? Did you get a headache or was your stomach growling? And, didn't those "forbidden" or "off limits" foods seem to be calling your name even more than ever? Gosh, that doesn't seem like very much fun, does it?

The reason diets don't work and aren't much fun is because your body needs food for energy, just like a car needs gas to drive. Food is fuel for your body! Your body knows what it needs in order to keep running efficiently--it needs the fuel of vitamin and nutrient rich foods from a variety of food groups. That's why it's important to listen to your body and respond to its natural hunger. It will tell you what it needs. And if you don't listen, it will find ways to keep reminding you--like headaches, a growling stomach, and obsessing about food.

- The first key to listening to your body is being able to detect when you are getting hungry. If you are indeed truly hungry, and not just looking for food to cure your boredom, stress, or loneliness, then it is time to refuel.
- The second key is being able to know when you have had enough. Listen to your body. When you begin to feel full, you will know that you have had enough to eat. The goal is to feel content--not uncomfortably stuffed but not starving either. Sometimes this means eating 5 or 6 smaller meals a day instead of 3 large meals. And, remember it takes about 20 minutes for your body to realize it's full. Also, be aware of what you are eating--sit, chew slowly, enjoy the tastes, smells, and textures of your food.
- The third key is moderation, nothing to extremes. Often people hear this advice and think it means they can eat whatever they crave, all the time. Obviously we cannot survive on potato chips or peanut butter cookies alone. And if you tried, chances are you'd probably start to crave some pasta or fresh fruit after awhile. These cravings are your body's way of helping you get the nutrients it knows you need.

Eat what you want, When you are truly hungry. Stop when you're full. And eat exactly what appeals to you. Do this instead of any diet, and you are unlikely to ever have a weight problem, let alone an eating disorder.

*Taken from: [http://www.nationaleatingdisorders.org/p.aspWebPage\\_ID=286&Profile\\_ID=54933](http://www.nationaleatingdisorders.org/p.aspWebPage_ID=286&Profile_ID=54933)*

# DIETING AND EATING DISORDERS

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Eating disorders are serious emotional and physical problems that can have life-threatening consequences for females and males.

**Anorexia Nervosa** is characterized by self-starvation and excessive weight loss.

Symptoms include:

- Refusal to maintain body weight at or above a minimally normal weight for height, body type, age, and activity level
- Intense fear of weight gain or being “fat”
- Feeling “fat” or overweight despite dramatic weight loss
- Loss of menstrual periods
- Extreme concern with body weight and shape

**Bulimia Nervosa** is characterized by a secretive cycle of binge eating followed by purging. Bulimia includes eating large amounts of food--more than most people would eat in one meal--in short periods of time, then getting rid of the food and calories through vomiting, laxative abuse, or over-exercising.

Symptoms include:

- Repeated episodes of bingeing and purging
- Feeling out of control during a binge and eating beyond the point of comfortable fullness
- Purging after a binge, (typically by self-induced vomiting, abuse of laxatives, diet pills and/or diuretics, excessive exercise, or fasting)
- Frequent dieting
- Extreme concern with body weight and shape

**Binge Eating Disorder** (also known as Compulsive Overeating) is characterized primarily by periods of uncontrolled, impulsive, or continuous eating beyond the point of feeling comfortably full. While there is no purging, there may be sporadic fasts or repetitive diets and often feelings of shame or self-hatred after a binge. People who overeat compulsively may struggle with anxiety, depression, and loneliness, which can contribute to their unhealthy episodes of binge eating. Body weight may vary from normal to mild, moderate, or severe obesity.

**Other Eating Disorders** can include some combination of the signs and symptoms of anorexia, bulimia, and/or binge eating disorder. While these behaviors may not be clinically considered a full syndrome eating disorder, they can still be physically dangerous and emotionally draining. All eating disorders require professional help.

*Taken from:* <http://www.nationaleatingdisorders.org>

## **Related Websites:**

National Eating Disorders Association: <http://www.nationaleatingdisorders.org>

Anorexia Nervosa and Related Eating Disorders, Inc: <http://www.anred.com/>

# DIETING AND EATING DISORDERS

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## Weight Maintenance

The basic nutritional needs of most people are approximately 2,000 calories a day for women, and 2,500 for men. However, a professional athlete or manual laborer may need 4,000 or more. Pregnant women and nursing mothers require about 300-500 more calories/day than women who are neither pregnant nor nursing.

One pound of fat contains approximately 3,500 calories, so to lose one pound a week, a person should consume approximately 3,500 fewer calories per week. This can be done by reducing the daily intake by 500 calories per day (500 x 7 days will provide a deficit of 3,500 calories per week). To lose 2 pounds per week, a deficit of 1,000 calories per day is required.

If this seems impossible, remember that physical activity also contributes significantly to weight loss. The deficit of 500 to 1,000 calories can come from a combination of increased physical activity and reduced intake on a daily basis.

- A key to weight maintenance and weight loss is to increase daily activity -- things like taking the stairs, rather than the elevator or walking rather than driving when possible make a real difference.
- Adjust food intake gradually for lifetime changes. Reduce fat intake on a daily basis, and reduce intake of other high-calorie foods.
- Change habits that focus on food.
- Increase knowledge of the calorie content of foods and of calorie expenditure of various physical activities.

*Taken from: [http://www.1uphealth.com/health/intentional\\_weight\\_loss\\_5.html](http://www.1uphealth.com/health/intentional_weight_loss_5.html)*

# FARMERS' MARKETS

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## Certified Farmers' Markets of Sacramento

Meet the Farmers at the following Times and Locations  
For Other California Counties see: [www.California-Grown.net](http://www.California-Grown.net)

**Every Sunday**  
8 AM To Noon  
**State Parking Lot**  
**8th & W Streets**  
(Under Freeway)  
Open All Year

**Every Tuesday**  
9 AM To 1 PM  
**Ethan Way**  
**Cal Expo Parking Lot E**  
(Parking is Free)  
Open May thru Thanksgiving

**Every Tuesday**  
10 AM to 2 PM  
**Roosevelt Park**  
**9th and P Streets**  
(Around Park)  
Open May thru October

**Every Wednesday**  
10 AM to 2 PM  
**Chavez Plaza**  
**10th & J Streets**  
(Front of City Hall)  
Open May thru November

**Every Thursday**  
8 AM To 11:30 AM  
**Florin Mall**  
**Florin Rd Parking Lot**  
(Front of Sears)  
Open All Year

**Every Thursday**  
10 AM To 2 PM  
**Downtown Plaza**  
**4th and L Streets**  
(Next to Macy's)  
Open May thru September

**Every Saturday**  
8 AM To Noon  
**Country Club Plaza**  
**El Camino and Watt**  
(Next to Macy's)  
Open All Year

**Every Saturday**  
8 AM To Noon  
**Sunrise Mall**  
**Sunrise Blvd**  
(Behind Sears Auto)  
Open All Year

For Further Information Call (916) 688-0100

[http://www.california-grown.com/body\\_meetthegrowers.html](http://www.california-grown.com/body_meetthegrowers.html)

# FARMERS' MARKETS

## What's In Season?

From: University of California/Cooperative Extension  
 Sacramento County  
 Expanded Food And Nutrition Education Program (EFNEP)

MONTH	FRUIT		VEGETABLES	
<b>January</b>	Apples Avocados Grapefruit Lemons	Naval Oranges Tangerines Winter pears	Beets Cabbage Cauliflower celery	Lettuce Potatoes spinach
<b>February</b>	Apples Avocados Grapefruit Lemons	Naval Oranges Tangerines Winter pears	Artichokes Beets Broccoli Cabbage cauliflower	Celery Lettuce Potatoes spinach
<b>March</b>	Apples Avocados Grapefruit	Lemons Naval Oranges Winter pears	Artichokes Asparagus Beets Broccoli cabbage	Carrots Cauliflower Celery Potatoes spinach
<b>April</b>	Apples Avocados Grapefruit Lemons	Naval oranges Strawberries Winter pears	Artichokes Asparagus Beets Broccoli carrots	Cauliflower Lettuce Peas spinach
<b>May</b>	Avocados Cherries Grapefruit Lemons	Naval oranges Valencia oranges strawberries	Asparagus Beets Cabbage Carrots Celery lettuce	Onions Peas Potatoes Spinach Sweet corn tomatoes
<b>June</b>	Apricots Avocados Blueberries Cantaloupe Cherries Figs	Lemons Nectarines Peaches Plums Strawberries Valencia oranges	Carrots Celery Cucumbers Green (snap) beans lettuce	Onions Peppers Potatoes Summer squash Sweet corn tomatoes

# FARMERS' MARKETS

MONTH	FRUIT		VEGETABLES	
<b>July</b>	Apricots Avocados Blueberries Cantaloupe Grapefruit Honeydew melon lemons	Nectarines Peaches Pears Plums Strawberries Valencia oranges watermelon	Cabbage Carrots Celery Cucumbers Eggplant Green (snap) beans	lettuce Okra Onions Peppers potatoes Summer squash Sweet corn
<b>August</b>	Avocadoes Cantaloupe Figs Grapes Grapefruit Honeydew melon lemons	Nectarines Peaches Pears Persian melon Plums Valencia oranges watermelon	Cabbage celery Cucumbers Eggplant Green (snap) beans Green lima beans	Okra onions Peppers Potatoes Summer squash Sweet corn tomatoes
<b>September</b>	Apples Cantaloupe Figs Grapes Grapefruit Honeydew melon	Lemons Peaches Pears Persian melon Plums Valencia oranges	Cabbage Cucumbers Eggplant Green (snap) beans Green lima beans	Onions Peas Peppers Summer squash Sweet corn tomatoes
<b>October</b>	Apples Dates Figs Grapes lemons	Pears Persian melons Persimmons Valencia oranges	Broccoli Brussels sprouts Cabbage Carrots Cucumbers Eggplant Green (snap) beans Green lima beans	Okra Peas Peppers Potatoes Sweet corn Sweet potatoes Tomatoes Winter squash
<b>November</b>	Almonds Apples Avocados dates	Grapes Lemons Persimmons walnuts	Broccoli Brussels sprouts Cabbage carrots Cauliflower Celery Eggplant Green (snap)	Lettuce Peas Peppers Potatoes Sweet corn Sweet potatoes Winter squash
<b>December</b>	Almonds Apples Avocados dates	Grapefruit Lemons Navel oranges walnuts	Broccoli Brussels sprouts Carrots cauliflower	Celery Spinach Sweet potatoes Winter squash

There are many culinary uses for fats and oils including cooking, tenderizing baked goods and adding richness, texture and flavor to foods. Fat is one of the body's basic nutrients, providing energy by furnishing calories. All forms of fat are made up of a combination of fatty acids, which are the building blocks of fats much as amino acids are the building blocks of proteins.

Fats and oils are either saturated or unsaturated, the latter classification being broken down into monounsaturated and polyunsaturated fats. In general, saturated fats come from animal sources and are solid enough to hold their shape at room temperature (about 70°F). Exceptions to this rule are tropical oils such as coconut oil and palm oil, which, though of plant origin, are semisolid at room temperature and highly saturated. **Saturated fats** are the nutritional "bad guys" because they're known to be associated with some forms of cancer and to increase cholesterol levels, which can be a contributing factor to heart disease. In addition to the two tropical oils, the most commonly commercially used saturated fats are butter, lard, suet and hydrogenated vegetable oils such as margarine and vegetable shortening.

**Hydrogenated** (or partially hydrogenated) oils have been chemically transformed from their normal liquid state (at room temperature) into solids. During the hydrogenation procedure extra hydrogen atoms are pumped into unsaturated fat. This process creates trans fatty acids, converting the mixture into a saturated fat and obliterating any benefits it had as a polyunsaturate. Some researchers believe that hydrogenated oils may actually be more damaging than regular saturated fats for those limiting cholesterol in their diets.

**Unsaturated fats** are derived primarily from plants and are liquid (in the form of an oil) at room temperature. Generally speaking, oils are composed (in varying percentages) of both monounsaturated and polyunsaturated fats.

- **Monounsaturated** fats are known to help reduce the levels of LDL (the bad) cholesterol. The three most widely used oils that are high in monounsaturates are olive oil, canola oil and peanut oil.
- **Polyunsaturated** fats are also considered relatively healthy and include the following: safflower oil, soybean oil, corn oil and sesame oil.

**Omega-3 oils** are a particular classification of fatty acids found in some plants (such as flax seed) and in the tissues of all sea creatures. These special polyunsaturated oils have been found to be particularly beneficial to coronary health (purportedly lowering the bad LDL cholesterol and elevating the good HDL) as well as to brain growth and development. Among the popular fish that are particularly good sources of Omega-3 oil are sardines, herring, mackerel, bluefish, tuna, salmon, pilchard, butterfish and pompano. High cooking temperatures can destroy almost half the Omega-3 in fish, whereas microwave cooking doesn't appear to have an adverse effect on it. Canned tuna packed in water is a quick and easy way for many people to get their Omega-3 oil, but it's worth noting that combining it with the fat in mayonnaise offsets any positive effects. Canned salmon and sardines are also excellent Omega-3 sources.

*Taken from:* <http://www.allrecipes.com/encyc/terms/f/6444.asp>

#### **Related Websites:**

Health World: <http://www.healthy.net/asp/templates/article.asp?PageType=article&ID=2099>

- Excerpt from *Staying Healthy with Nutrition: The Complete Guide to Diet and Nutritional Medicine*

If you want to carve a few bucks from your grocery bill, discover a great hobby and eat fresh veggies straight from the plant, gardening is the only way to go. You don't even need a big yard to do it.

Any vegetable can be grown in containers. Herbs are very easy to grow and don't need much space. What container you use is up to you. Plastic buckets work well, as long as there are hole drilled in the bottom so that water can drain. You can also use a milk crate lined with a thick plastic bag (again, make drainage holes) or plastic or ceramic pots bought from a store.

Community gardens are another great way to save money by growing your own vegetables. They are also a good way to meet people and be involved in your community. There are several community gardens in Sacramento. Contact the Sacramento Area Community Garden Coalition (<http://www.saccommunitygardens.org/>) for more information.

If you get food stamps, growing a garden can be even cheaper. You can use your food stamps to buy seeds or starter plants for your garden.

**Related Websites:**

Sacramento Area Community Garden Coalition: <http://www.saccommunitygardens.org/>

Container Gardening: <http://www.my-container-garden.com/>

# HEART DISEASE

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When you think of heart disease, usually people think of Coronary artery disease (narrowing of the arteries leading to the heart), but coronary artery disease is just one type of heart disease. Heart disease includes a number of conditions affecting the structures or function of the heart.

They can include:

- Coronary artery disease (including heart attack)
- Abnormal heart rhythms
- Heart failure
- Heart valve disease
- Congenital heart disease
- Heart muscle disease (cardiomyopathy)
- Pericardial disease

Heart disease is the leading cause of death for both men and women in the U.S. It is important to learn about your heart to help prevent heart disease. And, if you have heart disease, you can live a healthier, more active life by learning about your disease and treatments and by becoming an active participant in your care.

Risk factors for heart disease are:

- Smoking
- High cholesterol
- High blood pressure
- Diet high in saturated fat and cholesterol
- Lack of exercise and/or obesity
- High levels of stress

To reduce your risk of heart disease, try these tips.

- Increase your intake of vegetables, fruits, whole grains and legumes.
- Limit fat intake. When you use added fat, use fats high in monounsaturates only.
- Eat a variety -- and just the right amount -- of foods high in protein. Commonly eaten protein foods (red meat, dairy products) are among the main culprits in increasing heart disease risk. By balancing animal, fish and vegetable sources of protein, you can reduce your risk.
- Limit intake of cholesterol.
- Eat complex carbohydrates (bread, rice, pasta and grains) and limit simple carbohydrates (regular soda, sugar, sweets).
- Eat small but more meals throughout the day (for example, eating 5 to 6 mini-meals).
- Reduce salt intake.
- Exercise regularly.
- Drink 32 to 64 ounces of water daily (unless you are fluid restricted).

*Taken from: <http://aolsvc.health.webmd.aol.com/>*

## **Related Websites:**

American Heart Association: <http://americanheart.org>

Fresh or dried herbs add flavor to foods without adding significant amounts of calories, fat or salt. Not sure what herb to add to which food? Use this list of common herbs and spices to start adding inexpensive and healthy flavor to your dishes!

Allspice: pumpkin pie, apple pie, gingerbread, winter squash, pickling, pate, ham

Anise: baked goods

Basil: Italian cuisine, vegetable, sauces, meats

Bay Leaves: stews, sauces, chili

Cardamom: baked goods (substitute for cinnamon to give more spice), Indian cuisine

Cayenne Pepper: Mexican cuisine, chili, hot and spicy dishes

Chives: garnish, soups, Mexican cuisine, Italian cuisine, dips

Cilantro: Mexican cuisine, salsa, guacamole, chili

Cinnamon: baked goods, rice pudding, Middle Eastern cuisine, cocoa, coffee, tea, chili

Cloves: baked goods, baked ham, coffee, tea

Cumin: Mexican cuisine, chili

Curry Powder: Middle Eastern cuisine

Dill: pickling, fish, salads

Ginger: baked goods, Japanese cuisine, peach deserts

Lemon Pepper: vegetables, fish, poultry

Marjoram: stews

Mint: lamb, iced tea

Mustard: salad dressing, fish

Nutmeg: baked goods, wild rice, eggnog, coffee

Oregano: Italian cuisine, vegetables, sauces, meats, fish, poultry

Paprika: garnish or to add color, fish, egg salad, stews

Poppy Seeds: salad dressing, poppy seed bread

Rosemary: beef, lamb, veal

Saffron: rice, risotto, pilaf

Sage: stuffing, poultry, pork

Tarragon: fish, béarnaise sauce, poultry

Thyme: chowders, soups, stews

### **Related Websites:**

Awesome Chef Recipes: [http://www.chef-recipes.com/cooking\\_with\\_herbs.htm](http://www.chef-recipes.com/cooking_with_herbs.htm)

Herbal Gardens: <http://www.herbalgardens.com/recipes/>

# HIGH BLOOD PRESSURE

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Blood pressure is the force required to move the blood through the arteries. There are two numbers used to measure your blood pressure. Together, they look like a fraction, but they are not really. Here is an example of a blood pressure reading: 132/84. When talking, we would say "one thirty two over eighty four."

The top number is the systolic pressure. It is the pressure inside the artery when the heart squeezes to pump blood through the body. The bottom number is called the diastolic pressure. It is the pressure inside the artery when the heart is relaxed and filling with blood. The numbers are recorded as "mm Hg," which shows how high the column of mercury is elevated by the pressure of your blood. You have high blood pressure, or hypertension, when systolic pressure (the top number) is consistently 140 mm Hg or greater. If you have high blood pressure, you are not alone. It is the most prevalent chronic adult illness in America today.

## **How high blood pressure can affect your health**

Long-term uncontrolled hypertension can increase your risk for stroke and heart disease by increasing the workload on your heart and arteries. Controlling high blood pressure means reducing your risk of stroke, heart attack, eye problems and kidney disease. Risk relates to not only how high but how long the blood pressure has been elevated.

Having other risk factors for cardiovascular (heart and vessel) disease adds to your overall risk.

The three major controllable risk factors for cardiovascular disease are high blood pressure, high blood cholesterol and smoking. The presence of any one of these factors increases your risk by about 30 percent. If you have two of them, your risk for cardiovascular disease is three times as great. If you have all three risk factors, you have seven times the risk.

Other major risk factors for cardiovascular disease include age, gender, diabetes, family history and your individual health history.

## **Treating high blood pressure**

Treating high blood pressure is a lifelong process requiring a team approach. As a part of the team, you can prevent future problems by understanding your condition, making lifestyle changes now, taking medication if needed and having your blood pressure checked as recommended.

Hypertension can't be cured, but it can be controlled. Although managing high blood pressure may require serious effort, the benefits in quality of life are very rewarding.

## **Ways to reduce your risk**

Lifestyle and hereditary factors influence your risk of developing high blood pressure and cardiovascular (heart and blood vessel) disease. Following these recommendations may reduce health risks and help control high blood pressure.

- **Lose and Maintain Weight** Being overweight can cause blood pressure to be increased. If you are overweight, losing just 10 pounds can make a difference. Weight loss can enhance the blood pressure-lowering effects of medications and decrease blood cholesterol, triglyceride and blood sugar levels.

# HIGH BLOOD PRESSURE

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- **Limit Alcohol** Excessive alcohol intake can raise blood pressure, contribute to weight gain and make controlling high blood pressure more difficult. If you have high blood pressure, avoid alcohol or do not exceed a daily intake of two drinks if you are a man or one drink if you are a woman. (A drink is defined as 12 ounces of beer, 5 ounces of wine or 1.5 ounces of 80-proof liquor.)
- **Exercise Regularly** Regular aerobic physical activity, such as walking at a mild to moderate pace for 30 to 45 minutes three to five times a week, may be beneficial for the prevention and treatment of high blood pressure. An increase in activity can also help reduce weight and stress.
- **Eat Healthy** When selecting healthy foods to help prevent and control high blood pressure consider the following:
  - Reduce your sodium intake to 2,400 mg per day. Too much dietary sodium can elevate blood pressure for some people with high blood pressure and may interfere with some blood pressure-lowering medications. Do not add salt to your food. Limit your use of convenience, fast and processed foods with added salt.
  - A high-potassium diet may help prevent and control blood pressure. To increase your intake of dietary potassium, include lots of fruits and vegetables, such as potatoes, cantaloupe, bananas, tomatoes, orange juice and squash.
  - A high-fat diet is a risk factor for heart disease. Reducing your intake of dietary fat can help control blood cholesterol. It also will help with weight loss.
- **Quit Smoking.** Smoking cigarettes can raise blood pressure, and smoking is a major risk factor for cardiovascular disease. That's why everyone needs to quit smoking—or better yet, never start!

*Taken from: [http://www.parknicolletclinic.com/HealthInfo/Medical\\_Conditions/Hypertension/Hypertension-allinfo/hypertension-allinfo.html](http://www.parknicolletclinic.com/HealthInfo/Medical_Conditions/Hypertension/Hypertension-allinfo/hypertension-allinfo.html)*

There are many things to keep in mind when facilitating nutrition classes with homeless populations. Often homeless individuals have a:

- Lack of cooking facilities. Many homeless people do not have access to kitchens, or even microwaves or can openers. Instruction on preparing “no cook” meals and available food resources in the area would be appropriate. If they are in transitional housing, they may have access to a shared kitchen, microwave or crockpot.
- Lack of secure food sources. Many homeless people do not have access to enough food. They may not know about federally sponsored programs (WIC or food stamps) that they could take advantage of. If they use a local food closet, they may not be able to transport or store the food. They may not have access to transportation to use supermarkets and may rely on more expensive convenience stores and restaurants. Budgeting strategies, increasing access to transportation and education on available resources (food stamps, WIC, hot meals, food closets, etc) would be appropriate.
- Health concerns. Many homeless people face multiple physical and mental health issues that will affect their diet. Diabetes, tuberculosis, and Hepatitis C are often found in high numbers in homeless populations. Some of these same diseases could also affect the safety of the person’s participation in food preparation during the classes. Mental health issues also often affect homeless populations and an individual’s diet.

The Hunger Commission, in collaboration with the H.E.A.L.T.H. Project, the SRO Service Center and St John’s Central Downtown Food Closet, has recently begun adapting the nutrition education curriculum and offering a series of nutrition classes to SRO residents. There does not seem to be much of a model for adapting nutrition education curriculum to homeless populations. One curriculum was adapted in the early 1990’s in Boston and more details can be found at: <http://www.rwjf.org/reports/grr/018177s.htm>

# LACTOSE INTOLERANCE

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Lactose intolerance is the inability to digest significant amounts of lactose, the predominant sugar of milk. This inability results from a shortage of the enzyme lactase, which is normally produced by the cells that line the small intestine. Lactase breaks down milk sugar into simpler forms that can then be absorbed into the bloodstream. When there is not enough lactase to digest the amount of lactose consumed, the results, although not usually dangerous, may be very distressing. While not all persons deficient in lactase have symptoms, those who do are considered to be lactose intolerant.

Common symptoms include nausea, cramps, bloating, gas, and diarrhea, which begin about 30 minutes to 2 hours after eating or drinking foods containing lactose. The severity of symptoms varies depending on the amount of lactose each individual can tolerate.

Between 30 and 50 million Americans are lactose intolerant. Certain ethnic and racial populations are more widely affected than others. As many as 75 percent of all African Americans and American Indians and 90 percent of Asian Americans are lactose intolerant. The condition is least common among persons of northern European descent.

Young children with lactase deficiency should not eat any foods containing lactose. Most older children and adults need not avoid lactose completely, but people differ in the amounts and types of foods they can handle. For example, one person may have symptoms after drinking a small glass of milk, while another can drink one glass but not two. Others may be able to manage ice cream and aged cheeses, such as cheddar and Swiss, but not other dairy products. Dietary control of lactose intolerance depends on people learning through trial and error how much lactose they can handle.

For those who react to very small amounts of lactose or have trouble limiting their intake of foods that contain it, lactase enzymes are available without a prescription to help people digest foods that contain lactose. The tablets are taken with the first bite of dairy food.

Lactose-reduced milk and other products are available at most supermarkets. The milk contains all of the nutrients found in regular milk and remains fresh for about the same length of time, or longer if it is super-pasteurized.

In planning meals, making sure that each day's diet includes enough calcium is important, even if the diet does not contain dairy products. Many nondairy foods are high in calcium. Green vegetables, such as broccoli and kale, and fish with soft, edible bones, such as salmon and sardines, are excellent sources of calcium.

Recent research shows that yogurt with active cultures may be a good source of calcium for many people with lactose intolerance, even though it is fairly high in lactose. Evidence shows that the bacterial cultures used to make yogurt produce some of the lactase enzyme required for proper digestion.

Taken from: <http://www.niddk.nih.gov/health/digest/pubs/lactose/lactose.htm>

## **Related Websites:**

National Digestive Diseases Clearinghouse:

<http://www.niddk.nih.gov/health/digest/pubs/lactose/lactose.htm>

# MENTAL HEALTH AND NUTRITION

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## Eating for Mental Health

### **Low Sugar**

Sugar sensitivity is often associated with symptoms of confusion, poor concentration, anxiety, irritability, aggression, fatigue, and depression. These symptoms can be reduced when foods containing sugar are avoided.

### **Low Glycaemic Index**

Glycaemic Index (GI) is a way of measuring the affect that a food has on blood sugar levels. Low GI foods are complex carbohydrates. Eating foods and meals with a low GI, which release their energy slowly, also helps avoid the roller coaster ride of energy and moods associated with large fluctuations in blood glucose levels.

### **Low caffeine**

Cutting down on stimulants such as caffeine—found in coffee, tea, chocolate and soda—reduces the highs and subsequent lows associated with the use of these foods and drinks, making for a smoother emotional ride through the day.

### **Low additives**

Additives and particularly artificial colorings have been found to be associated with behavior-disturbing symptoms, including those of attention deficit disorder and hyperactivity.

### **Hypoallergenic**

Many commonly consumed foods can be linked to mood swings and reducing the amount eaten can result in dramatic improvements to health. Common offenders are wheat (found in most breads, pastas, and pizzas) and dairy products (milk, butter, cheese and yogurt). If you want to completely eliminate these suspect foods from your diet, you are strongly advised to consult a health care professional before doing so.

### **Nutrients for mental health**

Low levels of nutrients have been associated with various symptoms of mental illness including anxiety, depression and even schizophrenia. Important nutrients to look for in foods are the essential fatty acids, particularly the omega-3 oils found in oil rich fish and flax seeds. Fats are an important part of the diet and research has linked diets that drastically cut down on all types of fat with an increase in symptoms of depression. Also particularly important for mental health are the B vitamins and the minerals zinc and magnesium. Eating foods naturally high in tryptophan, an amino acid found in protein, can also improve mood as the tryptophan is converted by the body to serotonin, an important brain chemical that regulates impulse control and elevates mood, self esteem and feelings of optimism.

*Taken from: [www.foodandmood.org](http://www.foodandmood.org)*

### **Related Websites:**

**Food And Mood:** [www.foodandmood.org](http://www.foodandmood.org)

- **Resources and information on their studies on mental health and nutrition.**

Safe Harbor: <http://alternativementalhealth.com/articleindex.htm>

- Articles on nutrition and mental health from a non-profit in LA.  
<http://alternativementalhealth.com/articles/walsh.htm>
- Articles on every mental health disorder and nutrition.

More than half of the U.S. population is overweight. But being obese is different from being overweight. An individual is considered obese when weight is 20% (25% in women) or more over the maximum desirable for their height. When an adult is more than 100 pounds overweight, it is considered morbid obesity. Rates of obesity are climbing. An ominous statistic is that the percentage of children and adolescents who are obese has doubled in the last 20 years.

Obesity is also defined as a BMI (body mass index) over 30 kg/m<sup>2</sup>. Patients with a BMI between 25 and 29.9 are considered overweight, but not obese. See also diet and calories.

The basic nutritional needs of most people are approximately 2,000 calories a day for women, and 2,500 for men. However, a professional athlete or manual laborer may need 4,000 or more. Pregnant women and nursing mothers require about 300-500 more calories/day than women who are neither pregnant nor nursing.

The body cannot store protein or carbohydrates, so excess protein or carbohydrate intake is converted to fat and stored. One pound of fat represents about 3,500 excess calories.

Obesity increases a person's risk of illness and death due to diabetes, stroke, coronary artery disease, hypertension, high cholesterol, and kidney and gallbladder disorders. Obesity may increase the risk for some types of cancer. It is also a risk factor for the development of osteoarthritis and sleep apnea.

Genetic factors play some part in the development of obesity -- children of obese parents are 10 times more likely to be obese than children with parents of normal weight.

*Taken from: [http://www.1uphealth.com/health/obesity\\_info.html](http://www.1uphealth.com/health/obesity_info.html)*

**Related Websites:**

1Up Health: [http://www.1uphealth.com/health/weight\\_management\\_info.html](http://www.1uphealth.com/health/weight_management_info.html)

American Obesity Association: <http://www.obesity.org/>

# OSTEOPOROSIS

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Osteoporosis is a preventable, treatable condition of weak, hollow, brittle bones that break easily. In its advanced stages, it is a painful condition affecting approximately 30 million Americans, causing fractures, typically of the hip, wrist, and spine. Osteoporosis greatly reduces independence and the quality of life of its victims; many die from complications of osteoporosis. In the U.S., one out of every two women, and one out of eight men, develop osteoporosis.

It is never too early or too late to improve bone health. Bones are living tissues. Throughout life, old bone is removed and replaced by new bone. Many factors affect the rate of bone addition and loss. Our bodies need calcium for proper heart, muscle and nerve function, to maintain blood pressure, and for blood clotting. If the diet doesn't provide enough calcium, we take it from our "calcium reservoir" (otherwise known as our bones). If old bone is removed at a rate that is too fast, or if the rate of new bone replacement occurs too slowly, then gradually bones become porous and fragile. For example, 40% of the bone's density can be lost during advanced osteoporosis.

A lifelong adequate intake of calcium and vitamin D, as well as phosphorus, zinc, vitamins K and C, copper and manganese, helps bone health by increasing (as much as is genetically possible) the amount of bone formed during youth and early adulthood. Adequate diet and hormone levels also slow down the rate of overall bone loss that occurs later in life. When recommended amounts of calcium are consumed during the bone-building years, maximum bone mass "reserves" with a consequent reduction in osteoporosis, and 50% fewer hip fractures later in life.

Many factors increase one's chance of developing osteoporosis. People at greatest risk for osteoporosis are older adults, especially women, who:

- have a family history of osteoporosis or of an adult family member breaking a bone (heredity influences peak bone mass in part because of vitamin D receptor- gene levels);
- are non-Hispanic white or Asian;
- are post-menopausal women not on hormone (estrogen) replacement therapy;
- have had low calcium intake after age 35;
- have had consistently low vitamin D intake or low sunlight exposure;
- do little weight-bearing exercise;
- smoke cigarettes;
- have a small, thin frame (adult body weight less than 125#);
- have never been pregnant;
- have a history of estrogen deficiency as a result of amenorrhea, late menarche, or an early menopause, either naturally or surgically;
- have or had excessive dieting;
- have a history of taking thyroid medication, cortisone-like medications, anti-seizure drugs, or certain other medications.

To find out more about preventing your risk for osteoporosis and bone fractures, or for treatment options, ask your health care provider. Having a bone mineral density scan is a painless test for osteoporosis especially important for women age 50 and over.

## **Dietary Factors Affecting Bone Health**

- High sodium or salt intake increases calcium excretion. Each 500 mg sodium increases calcium loss by a small amount, about 10 mg a day. This can contribute to poor calcium balance if calcium intake is not adequate.
- Meals that contain large amounts of phytates, in wheat bran and dried beans, or oxalates, in spinach and rhubarb, interact with calcium eaten during that meal resulting in a reduced amount of calcium being absorbed.
- Drinking too many soft drinks (over 5 a day) can disrupt calcium and phosphorus balance and reduce bone minerals over time especially if the diet is not adequate in essential minerals.
- Caffeine intake has only a minimal negative effect on bones, especially when calcium intake is adequate.

## **Exercise and Bone Health**

Regular physical weight-bearing activity improves the efficiency of calcium use and strengthens both bones and muscles. When bones are not used at all, as with people who are confined to bed or who have a plaster cast on, they slowly decrease in strength and thickness. Bone formation increases when pressure is applied to the bone. Physical weight-bearing activity over one's lifetime increases peak bone mass in the years up to age 30, and decreases bone loss later in life.

Recommendations are for at least 30 minutes of weight-bearing exercise 3 times a week or more. This includes walking, playing court games, and doing any activity that involves gravity and an impact on bones. Activities of daily living, including normal walking, standing, stair climbing and household chores, count too. It does not include non-weight-bearing exercise, such as swimming. In addition, strength training, such as lifting weights, is recommended at least twice a week. It is best to include a variety of physical activities, so that all the bones in the body are used. Be active; think fun. An additional benefit of exercise is that it improves overall flexibility, stability, and balance, and therefore can help prevent falls and help people recover from injury more quickly.

*Taken from:* <http://www.oznet.ksu.edu/humannutrition/spotlight/septoct99.htm>

### **Related Websites:**

National Osteoporosis Foundation: [www.nof.org](http://www.nof.org)

National Institutes of Health - Bone Diseases Center: [www.osteoporosis.nih.gov](http://www.osteoporosis.nih.gov)

# OTHER HEALTH CONCERNS

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## **Cancer and Nutrition Websites:**

The Cancer Nutrition Center: <http://www.cancernutrition.com/>

American Cancer Society: <http://www.cancer.org/>

## **HIV/AIDS and Nutrition Websites:**

HIV ReSources: <http://www.hivresources.com/Nutrition.htm>

CDC: <http://www.thebody.com/cdc/faqnut.html>

## **Hepatitis C and Nutrition Websites:**

HepCnet: <http://www.hepcnet.net/nutritionandhepc.html>

# PREGNANCY AND NUTRITION

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## By Barbara Rohrs

Pregnancy is the most nutritionally demanding time of a woman's life. Your body needs enough nutrients every day to support the growth of your baby. All the nourishment this developing baby needs comes from you, either through the foods you eat or the supplements you take.

Pregnant women need more calories and essential nutrients than other women. If the nourishment needed for baby's developing tissues and organs is inadequate when your baby needs it, he/she may not develop normally. It is important to eat the right foods every day since tissues and organs develop during certain weeks of your pregnancy. Your own health depends on your diet, too. While your body is supplying the nutrients your baby needs, your body still needs the same nutrients as before you were pregnant.

The Food Guide Pyramid for Pregnant Women helps you choose foods for both your needs. Increase your intake of nutrient-dense foods. Nutrient-dense foods contain more nutrients than calories. By following the Food Guide Pyramid for Pregnant Women you can get the nourishment you need.

- **Protein** is needed for the buildup of your uterus, breasts, blood supply, and baby's tissues. Low protein intake is related to smaller-than-average babies who may have health problems.
- **Folate** is required for protein tissue construction. Low folate levels are linked to birth defects, such as spina bifida. These defects form early in pregnancy, often before women know they are pregnant. It is important to eat enough foods high in folate like broccoli, dark green vegetables, and oranges before and during pregnancy.
- **Calcium** is needed by your baby for strong bones. If calcium is not supplied by the mother's diet, calcium is taken from the mother's long bones for the baby.
- Low **Zinc** levels during pregnancy are associated with long labor and small babies who may have health problems.
- **Iron** deficiency is common in pregnant women. Both mother and baby need iron for developing blood supplies. A developing baby also stores iron for use after birth. This increases the mother's iron needs. It is practically impossible to get enough iron from food. Doctors usually recommend supplements.

# PREGNANCY AND NUTRITION

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A good diet takes planning. Pregnant women should make sure to include:

- Sufficient calories for adequate weight gain
- A variety of foods from each food group
- Regular meals and snacks
- 30 grams of dietary fiber
- 10 or more cups of water each day
- Salt to taste
- No alcoholic beverages, including beer

No one can guarantee a baby will be born healthy and strong. However, these are steps mothers-to-be can take to make the best baby possible. Nothing offers greater benefits to mother and baby than good nutrition.

*Taken from: <http://ohioline.osu.edu/mob-fact/0001.html>*

**Related Websites:**

Food and Nutrition Information Center: <http://www.nal.usda.gov/fnic/etext/000083.html>

<http://www.wintercreekgardens.com/recipe.html>

- Recipes using fresh fruits and vegetables from an organic farm in Northern CA

<http://www.allrecipes.com>

- Large number of recipes, easy to search

<http://www.vegweb.com>

- Dairy and meat-free recipes even die-hard carnivores will like

Salt serves many purposes. It is the world's oldest food additive. Used in cooking, it intensifies the natural flavors, colors and textures of food. It is a vital ingredient in good health—your body needs salt to function. In industry, it is used to ensure food safety, regulate fermentation, and process meats and sausages.

### **What is salt?**

Sometimes the terms "salt" and "sodium" are used interchangeably, but technically this is not correct. "Salt" is sodium chloride. By weight, it is 40 percent sodium and 60 percent chloride.

### **What role does salt play in the body?**

Sodium is an essential nutrient, being a mineral that the body cannot itself manufacture. Because of sodium's importance to your body, several interacting mechanisms conserve salt, guarding against under-consumption and its threat to your body's nerves and muscles.

Chloride, too, is essential to good health. It preserves the acid-base balance in the body, aids potassium absorption, is a component of digestive stomach acid, and enhances the ability of the blood to carry carbon dioxide from respiring tissues to the lungs.

Salt is a valuable weapon in our public health campaign against iodine deficiency disorders (IDD). Adding iodine to salt has virtually eliminated IDD in Australia and many other areas although the World Health Organization has targeted elimination of IDD globally by the year 2000 as a top priority.

The nutrition information panel on packaged foods is a valuable source of information for those monitoring their sodium intake. Fruit and vegetables generally have a low sodium content and contribute little to total salt consumption. Cereals such as pasta, rice, rolled oats and other grains are also low in sodium. Breads have somewhat higher levels, contributing 120—400mg sodium per slice. Many cereals are low in sodium, though an average-sized bowl of breakfast cereal can contribute up to 500mg sodium. While fresh meat contains 60—90mg of sodium per 100 grams, processed meats such as sausages have 900—1000mg per 100g, while 100g of bacon contains around twice this amount. The recommended dietary allowance for sodium is 500mg.

*Taken from: <http://www.foodsciencebureau.com.au/nutrit/salt.htm>*

### **Herb blend to replace salt:**

- 2 teaspoons garlic powder
- 1 teaspoon basil
- 1 teaspoon oregano
- 1 teaspoon powdered lemon rind or dehydrated lemon juice

Put ingredients into a blender and mix well. Use instead of salt and enjoy!

Healthy adults ages 70 and over should follow different nutritional guidelines than other people. Seniors need approximately 1,600 calories per day.

**Related Websites:**

FDA: <http://www.fda.gov/opacom/lowlit/eatage.html>

- Nutrition problem-solving factsheet

Clemson Extension: <http://hgic.clemson.edu/factsheets/HGIC3642.htm>

- Food Safety for the Elderly

Medical College of Wisconsin: <http://healthlink.mcw.edu/article/1002896094.html>

- Senior Food Guide Pyramid

Kansas State University's Nutrition Spotlight:

<http://www.oznet.ksu.edu/humannutrition/spotlight/janfeb01.pdf>

- Issue of Spotlight newsletter dedicated to senior nutrition.

# SOLAR OVENS AND COOKING

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Did you know that on a sunny day, an acre of land receives almost 4,000 horsepower of heat energy? The sun provides us many times more solar energy than all the fossil fuels, including nuclear! Solar Cookers use this energy to cook food. It is not unusual to get a solar oven cooker over 350 degrees F. Solar Cookers can bake bread and cookies, as well as cook many other food items. Solar Cookers produce this heat by reflecting, concentrating, and adsorbing the sun's rays in the same way the dark seat in your car will get hot after being in the sun.

Solar Cookers are becoming available in many countries today and are being mass produced in South Africa. They can be used to sterilize water and reduce reliance on fossil fuels and consequently reduce pollution.

## **Useful Websites:**

Solar Cookers International: <http://solarcooking.org/>

- Sacramento organization website with links to FAQs, instructions and recipes.

More and more people are exploring vegetarianism every year. It is easy to maintain a cheap, low-fat, nutritious diet as a vegetarian. And even if you enjoy meat and don't want to become a vegetarian, incorporating a few vegetarian meals into your diet per week is delicious, nutritious, and inexpensive.

**Related Websites:**

Vegetarian Resource Group: <http://www.vrg.org>

- Recipes and links to vegetarian and vegan nutrition.

VegWeb: <http://vegweb.com>

- Large recipe collection. Vegetarian and vegan nutrition and support.