

Pure Facts

Newsletter of the Feingold® Association of the United States



June, 1997

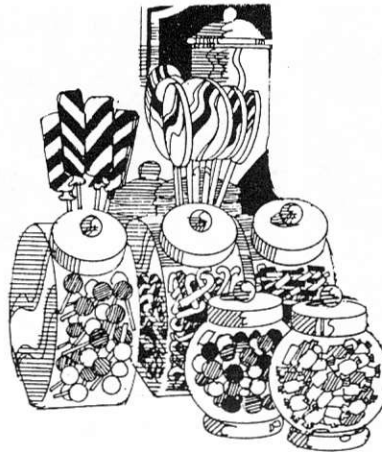
Vol. 21, No. 5

How some critics view the Program

Take a close look at one of the common criticisms of the Feingold Program. It says more about the critic than it does about the Program.

Feingold mom and long-time volunteer, Sandy Ehrenkranz, was recently featured in an article in the Stamford, Connecticut *Advocate*. She described how the Program changed her son's life 20 years ago, and how he is now a successful adult, husband and parent.

As is often the case, the journalist also interviewed others — one psychiatrist who supports our program and another who is an outspoken critic. The critic acknowledged that diet helps some children, but estimated that “no more than about 5 percent of the learning disabili-



ties out there are related to diet.” (He did not offer any documentation to support his estimate.)

A second criticism is one we hear often, and which puzzles many Feingold parents. This psychiatrist said, “What worries me most about Feingold is that it doesn't really deal with the realities of being a kid. I don't know that you can 100 percent eliminate some of these foods. Kids bring their lunches to school and swap treats. I don't think you'll find things like Ring Dings on this diet, and that can be trouble.”

Continued on page 3

Sensory Integration Dysfunction

A person who experiences the world differently is going to behave differently. If one or more of the senses is slow to develop, it will be difficult for a child to advance.

At our Annual Conference held in Orlando last year, the Developmental Delay Registry (DDR) sponsored a one day seminar titled, “After the Diagnosis: What to do next to help children with ADD, LD or developmental delays.” In a workshop DDR's Executive Director, Patricia Lemer, M.Ed., described ways parents and professionals can recognize the symptoms of possible sensory integration dysfunction.

Sensory stimulation is food for the nervous system, Patricia explained, and kids know when their nervous system is hungry. Just like we sometimes eat things that are not good for us, the



Professionals too often treat the symptoms of sensory processing problems, instead of addressing the causes.

nervous system may take in information in a way that is not organizing for the body and not productive. A professional skilled in sensory integration therapy can help a child organize what his/her body needs so he/she can use it in a productive way.

Sensory integration theory was conceived by a woman named Jean Ayres. It's based on the premise that when information is processed by the senses either a motor or behavioral response is the result. Whereas educational and medical interventions often treat the output, what should be treated is the problem with how the input is being

Continued on page 4

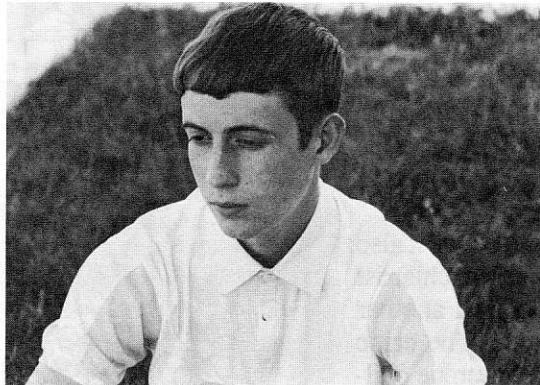
The Feingold® Association of the United States, Inc., founded in 1976, is a non-profit volunteer organization whose purposes are to support its members in the implementation of the Feingold Program and to generate public awareness of the potential role of foods and synthetic additives in behavior, learning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

Daniel, Then and Now

One of our long-time volunteers is retiring. Her son is now grown and successful, and she gives the Feingold Program much of the credit.

Twenty years ago, Hellen Carroll found an answer for the terrible days and sleepless nights which were a part of life with little Daniel. As an infant, the slightest noise would awaken him, and then it would be hours before he would get back to sleep. There were some patterns which began to emerge when he was very little, and Hellen suspected foods

played a part. After his grandma gave him cocoa flavored cereal the 3 year old spent the entire car ride home jumping between the front and back seats. (This was 23 years ago, before child car seats.) When Daniel's father left



free diet on their own, but the many mistakes meant their results were uneven. Finally Hellen read about the Association in *Prevention* magazine, and after reading the Feingold literature she was able to maintain her son's success.

It would have been nice to have known other kids on the diet, Daniel recalls, and there were times when

he cheated on the diet. His high school grades were entirely As with the exception of one B. He then repeated this remarkable feat in college.

Today, at age 26, Dan is the Computer Systems Administrator of a college computer lab. If he strays very far from his diet, he finds his thinking becomes "fuzzy" and it takes several days to get back to normal. He also

notes that he catches colds more easily if he goes off the diet.

Hellen's parents never fully accepted the diet that helped Daniel so much. One time the child's grandfather asked her "What are you going to do when he gets older and starts

on business trips, he liked to give Daniel a stick of gum and Hellen would have three days of a fussy, easily upset child on her hands.

A trip to the drive-in for a meal, and a cup of orange colored drink for Daniel, meant a bout of screaming and crying; they soon learned to stay away from the orange drink.

By the time Daniel was six the Carrolls put the puzzle pieces together. They tried to implement an additive-

temptation got the best of him and he ate foods he knew were not OK. But each infraction was followed by a reaction that distressed him as much as it did his family, and he soon decided it just wasn't worth the consequences. When he had a particularly bad reaction, Daniel sometimes felt like he wanted to die. As Daniel got into junior high and high school, his grades were very important to him, and he knew he couldn't maintain top marks if

'tipping the bottle?'" Thinking about the reactions the family had endured, Hellen responded, "Dad, he's been on a thousand 'drunks' with the additives." Years later, his friends would tease, "Dan, what are we going to do with you? You don't do liquor, don't do cigarettes and don't do drugs!" His advice to parents today is to get their child on the Feingold Program as early as possible, and you will both enjoy life a lot more.

Cylert warning

Abbot Pharmaceuticals, the manufacturer of pemoline (Cylert) has issued an "Important Drug Warning" to all physicians concerning its use.

They noted 13 cases of acute liver failure which have been reported to the Food and Drug Administration since 1975. This is far greater than the amount which would be expected to occur in the general population. The most rapid reaction occurred six months after the child began using the drug.

Abbot writes, "It is also not clear if the recommended baseline and periodic liver function testing are predictive of these instances of acute liver failure. Because of its association with life threatening hepatic failure, Cylert should not ordinarily be considered as a first line drug therapy for ADHD."

New latex source for allergy sufferers

Latex allergy, which was once rare, has become increasingly common as more and more health care professionals routinely use latex gloves in their work. The individual who develops a severe latex allergy can experience a serious reaction from even the tiniest exposure.

Now, guayule, a shrub which grows in the desert in the Southwestern U.S., may provide a safer alternative. It produces a form of latex which is not believed to trigger the allergic reaction of tropical rubber trees. Lab tests at the US Dept. of Agriculture and Johns Hopkins University indicate the new latex did not trigger allergens in humans and animals. The latex from guayule contains about one-tenth the proteins of tropical latex and these proteins are the source of the allergic reaction.

The American Academy of Allergy, Asthma & Immunology offers free information on latex allergy: 800-822-2762.

Critics, from page 1

In the same vein, other professionals often cite the impossibility of following a child around all day to supervise every bite he takes and to be certain no forbidden foods pass his lips.

Such a picture, which is so far from reality, may be funny to us, but it's important for us to realize that this is how some people view our program. Here are four assumptions fueling that view.

Assumption #1: All kids want Ring Dings.

Sure, most kids (and adults) enjoy eating desserts, and people on the Feingold Program do eat dessert. But is a commercially baked dessert necessarily going to be more desirable than a homemade treat? The biggest problem moms report is that all of the other kids at the lunch table want to trade their dessert for the Feingold kid's delicious brownie or chocolate chip cookie.

Assumption #2: Children can't learn cause and effect.

Feingold kids tend to be bright. Once they have experienced how it feels to be in control of their own bodies and minds, they are reluctant to give this up. They don't stick to their diet because somebody told them to, but because it is their choice. As one eleven-year old told a skeptic many years ago, "Do you think I'd stay on this stupid diet if it didn't work?"

The member packet encourages parents to make the diet the child's responsibility. There is no need for Mom to follow her child around and monitor every bite. Even the very youngest children quickly learn; it's not unusual for our 3 year olds to turn down food.

Assumption #3: 100% compliance is required.

If a child (or adult) is not particularly sensitive, or has been on the Program for more than a year, the sensitivities may have diminished. This is why some of the Feingold families are able to be relaxed about their diet on a Friday evening, knowing that a reaction to additives or too many salicylates

is likely to be worn off by the time they return to school on Monday. (While an occasional infraction might be tolerated, frequent slips are likely to bring a return of the old symptoms.)

Assumption #4: The child who eats differently will be singled out and feel different.

One pre-teen best summed up this issue when he said, "I would rather be different because of the food I eat than because of the way I act."

Would the same critics tell parents of a diabetic child that they should not use a special diet because the child might feel different?



Unlike other diets, the Feingold Program is so liberal, many of our children can eat at fast food restaurants simply by making good choices. The May issue of *Pure Facts* contained the most recent information on acceptable foods from McDonald's, Wendy's, Burger King, Papa John's, and Einstein Brothers Bagels. Clearly, many critics base their comments on assumptions that are not accurate.

As far as cheating is concerned, the reality of the Program is that most people have — either accidentally or deliberately — had several infractions. If the reaction is unpleasant, there is a strong motivation to get back on the Program. While we don't encourage deliberate cheats, these slips generally serve to reinforce the value of the Program, and motivate one to avoid the slip the next time.

Feingold families have their favorite "war stories." Joey had been doing well on the Program at home, but when he went away to his school's science camp he decided it would be cool to eat what all the other kids ate, despite the fact that Mom had made careful provisions for his food ahead of time. By the second day, Joey's behavior had gone so far out of control that the principal personally drove him home. After that Joey had a different outlook on his diet. Today he is a junior in college, planning a career in finance.

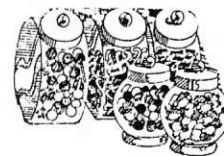
Most Feingold parents see their role not as preventing the child from making bad choices, but rather as helping him or her to be aware of the consequences for going off the Program and to decide if the price they will pay is too high. In most cases, though, the effects are so obvious to the child that nothing needs to be said.

Clearly, many critics base their comments on assumptions that are not accurate.

Children are expected to "say no" to drugs, alcohol, and cigarettes. Is it any more difficult to say "no" to Ring Dings? As one mom put it, "Tommy learned to say 'no' to Hi-C when he was in kindergarten; it wasn't hard to turn down drugs when he was a teenager."

Suppose the subject this psychiatrist discussed was not a diet, but some other facet of a child's life? What if the issue concerned school work? For example, how would a psychiatrist deal with a parent who worried that her child didn't study and might fail a spelling test? How about the dad who was afraid of his son striking out at a little league game? When a child fails to get a book back to the library in time and has to pay a fine, what would a psychiatrist tell the anxious mom?

No professional would recommend that a parent take total responsibility for her child, that she insulate him from any errors in judgment. True, the parent's job is to try and see that the lessons a child learns are not so hard, and the consequences not so serious that they cause harm, but mistakes are important teachers. We learn from mistakes in every aspect of our life, including what a chemically-sensitive person chooses to eat.



Many years ago, our critics liked to call us "neurotic mothers" for paying close attention to what our children ate. Now, some critics believe we really need to behave like neurotic mothers in order to follow the Program.

Sensory Integration, from page 1

processed. If the input is abnormal or is not being processed properly then the output is going to be abnormal. The more abnormal the processing of the input, the more abnormal the behavior or the motor response is.

Over time, disorganized output can eventually result in developmental delays. For Feingold children who are affected by something physiological such as food, nutritional, or environmental factors, the body's ability to process that sensory information may already be impaired.

For some children, being touched is an upsetting experience.

The **tactile system** (the sense of touch) is the only sense that is fully developed at birth. This is why we can use touch to calm an infant or child. The tactile system has two ways of responding: it has a protective mode and a discriminatory mode. The protective is the more primitive of the modes, where a touch is perceived as an assault. As the tactile system develops it becomes more discriminating. We are able to feel whether the sensation is hot or cold, whether the touch is light or heavy; we can discriminate whether the touch is reassuring or threatening.

The senses of touch, hearing and seeing are all related.

Children who have sensory integration problems have difficulty telling the difference between a touch which is a gentle nudge and one which is threatening. Their systems are in the protective mode rather than the discriminatory mode much of the time. This is called "tactile defensiveness," which can result in inappropriate reactions. What happens to such a child who gets pushed in line at school? He may strike back at the kid who touched him because the brain of the tactilely defensive child perceives he was hit, even though it might have been just a light touch. That light touch set off the protective mechanism in his brain that says "I got hit. I'm going to hit back."

Tactile defensiveness is not just on the outside of the body. When there is tactile defensiveness in the mouth the child may have feeding problems or reject foods that are gritty or have unfamiliar textures or tastes.

Tactile defensiveness can also relate to hearing and vision. If a child's sense of touch is not functioning properly the other senses may not be able to develop appropriately. The sense of touch is more primitive than the visual and the auditory system. If there are tactile problems the child's ability to move up the **ladder of development** and use higher level of sensory integration will be affected. He/she may not be able to look and listen normally. If that tag in his shirt is driving him crazy, paying attention to what the teacher is saying will be difficult. How many of

Solve the sock seam problem by turning your child's socks inside out so the smooth seam is against the child's skin and the rough seam is on the outside.



you cut the tags out of your kids clothes? How many of your kids can't wear their socks unless that seam is exactly right? This is tactile defensiveness.

Occupational therapists use a technique of brushing a child's skin with a special brush to help normalize the information the skin is taking in and develop more normal tactile responses. (The palms of the hand and soles of the feet are the most sensitive

parts of the body and brushing should not occur on those places in the beginning. The child will probably not lose the defensiveness in those places.)

The **Proprioceptive system** deals with the information which is coming in through the muscles and joints. It is what allows you to sit in uncomfortable chairs for a long time without leaning on the table, without falling off. Your body's muscles are giving information to your brain that they are okay. This system allows you to feel comfortable with gravity.

The child who has problems in this area needs to have deep pressure applied to the muscles; the way to get that is by moving. A child whose muscles aren't giving the needed feedback will wiggle and squirm until he/she feels

Some children have difficulty sensing where they are in space.

secure, and can then pay attention to what is being taught. Proprioception is one of the systems most closely related to good self-control.

The **vestibular system** controls balance and is physiologically located in the inner ear. So what happens when a child has ear infections? The child's vestibular functioning will be affected. The vestibular system, like the tactile system, is already developing in utero. It's not as mature at birth as the tactile system, but a child knows when he's balanced and unbalanced and can detect motion. That's why kids love to be rocked. Rocking is calming because it stimulates the vestibular system. When a mom is required to stay in bed during pregnancy, the infant does not get the vestibular stimulation it would if the mother were moving around.

A child can have both a hypo and a hyper reaction to the vestibular system. Kids who get motion sickness are having an overreaction; others may crave motion and vestibular stimulation. Both of these reactions are at the abnormal ends of the scale. What sensory integration therapy does is help a child tolerate a certain amount of movement, but not crave it.

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Hierarchy of Development

Muscle tone is related to the vestibular system. Kids with low tone need continuous vestibular stimulation. They have trouble sitting still and staying alert at the same time. If you watch them during the day, they gradually fade, slouching down in their chair and may eventually slide off!

The sense of touch, which involves our largest organ, the skin, is the first to develop and is fully functional at the time of birth.

A good teacher will know when it's time to start working those muscles to increase that tone. If you have a mini trampoline at home, it's a great thing to have your child jump on it for a couple of minutes before going to school. If the teacher is willing, have her put a mini "tramp" in the classroom to give the restless student a break; that will make it easier for him to pay attention. Many tutors are using trampolines to help kids with memory skills such as the alphabet or number facts. The rhythm of jumping enhances the ability to pay attention and remember the information.

Rocking is calming because it stimulates the vestibular system — the system which controls balance.

The vestibular system is also involved with bilateral coordination — getting both sides of the body to work together. It is connected to several important aspects of brain function: the language center of the brain, eye movements and to the digestive tract. That's why kids throw up when they have too much vestibular stimulation.

Look at it like rungs of a ladder, where the bottom rungs (basic sensory channels) lay the foundation for development, and each rung provides the basis for the next steps above it. The top two rungs (cognitive and perceptual skills) are what go on in school.

When you have a child who is being treated academically or behaviorally and you approach the problems from the top down, it doesn't work. You have to work from the bottom up and also from the inside out because you have to teach the system how to monitor itself, how to organize itself and contain itself in an automatic way, rather than structure it from the top. One of the things that occurs at the top is self esteem; everyone talks about self esteem, as though we can hold it in our hand, like "we're going to increase his self esteem." Unless you move up the ladder, unless your body feels comfortable with gravity, unless you feel healthy, there is no way you can work on self-esteem from the top down. All the behavioral and emotional components can be related to one of these lower level sensory processes.

Developmental Hierarchy		
Cognitive Skills	Writing Spelling Reading Capacity for abstract thought & reasoning	Imagination Visualization Self Esteem
Perceptual Skills	Organization Attention Visual Perception Self Control	Speech & Language Concentration Auditory Perception
Fine Motor Coordination	Speech & Language Eye-Hand Coordination Controlled Oculomotor Skills	
Gross Motor Coordination	Balance Motor Planning Oral Motor	Visual Motor Integration Bilateral Integration Lateralization Body Percept
Innate Reflexes	Tactile Comfort Sucking Reflex Muscle Tone	Eye Movements Gravitational Security
Basic Sensory Channels	Tactile Auditory Vestibular	Visual Kinesthetic Proprioceptive

Physiological reactions which can interfere with the development of the higher senses include: nutrient deficiencies, immune system dysfunction, chemical sensitivities, inflammation, allergies.

For more information on Sensory Integration:

There will be a hands-on Sensory Integration workshop at our Annual Conference on Friday afternoon, June 27, 1997. The Conference will be held at the Old Colony Inn & Conference Center in Alexandria, VA. For details, call our New York office at (516) 369-9340.

The Developmental Delay Registry will have a display table with additional information about their fine work and the resources available for parents. To be placed on their mailing list or to receive more information about sensory integration call them at (301) 652-2263 or write to: DDR, 6701 Fairfax Rd, Chevy Chase, MD 20815

Feingold Resource Catalog

There are many aids available to help the chemically sensitive child and adult. FAUS has selected those which we have found to be the most useful.

Summer is a good time to help your child in the areas of greatest need — academic or social — as well as have fun while learning new skills. The Resource Catalog, which will be mailed to our members this summer, provides many of the hard-to-find items Feingolders seek. Here are a few samples:

Raising a Thinking Child Workbook is the "I can" problem solving program to help young children resolve everyday conflicts and get along with others.

Happy Father's Day!



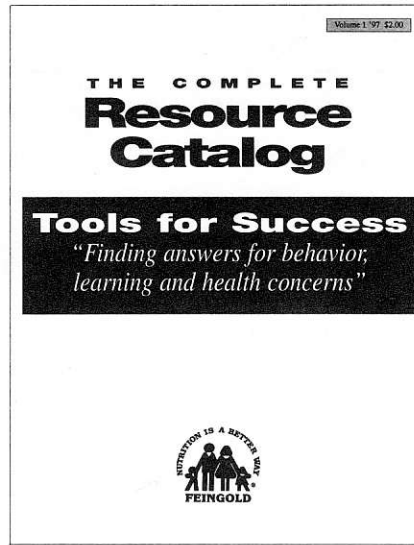
Father's Day is extra special this year, not only because it's a good time to recognize the wonderful men who support their children on the Feingold Program (and who notice they feel better as well), but June 15 is important for another reason. It's the 97th anniversary of the birth of a child named Benjamin, who grew up to become a doctor and change the lives of countless families.

Ben F. Feingold, M.D. knew his ideas would continue to meet with strenuous resistance, but he also knew that time and many caring volunteers would eventually bring about an understanding and acceptance of his work. He cared deeply about children he helped, and agonized over the ones who were not being reached.

Always at his side was his wife, Helene, who continues a life of accomplishments and service. Mrs. Feingold is being honored in our annual *Conference Journal*.

Audio and video tapes cover grammar, math, and geography. Many of these are taught as "sing-alongs" which make it fun for the child, and easier to remember facts.

Being the Best Me books, which cover kindergarten through 6th grade, teach children about social interactions and making friends



Last Call for Calendar Photos

Show your Feingolder how proud you are of him/her by bragging in our upcoming School Year Calendar. This annual project features photos of our children and teens, with a brief description of them or their experience with the Feingold Program.

We use informal photos or snap shots (no portraits or school photos, please). Write the child's name and address on the back, and mail them to: FAUS Calendar, PO Box 6550, Alexandria, VA 33206. The photos will be returned when the calendar is printed. They can be either black & white or color, as long as the image is sharp.

The calendar, which is mailed to all members in the United States, also contains seasonal hints and advertisements for some of the hard-to-find products we seek.

The catalog offers arts and craft supplies such as colored water pencils made with natural pigments and latex gloves in small sizes suitable for use by children.

Also included are cookbooks for specialized diets.

As this newsletter goes to press, there is still room available for members and guests who wish to attend our 22nd Annual Conference to be held in Alexandria, Virginia June 26 - 29. Call (516) 369-9340 for details.

Pure Facts

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

Membership includes the *Feingold Handbook, Recipes & 2 Week Menu Plan*, regional *Foodlist* containing thousands of acceptable U.S. brand name foods, *Medication List*, a network of Program Assistants available by phone, and a subscription to *Pure Facts*. The cost in the U.S. is \$49 & \$6 shipping. A *Pure Facts* subscription, if ordered separately, is \$28/year.

For more information or details on membership outside the U.S., contact FAUS, P.O. Box 6550, Alexandria, VA 22306 (703) 768-FAUS.

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The next Pure Facts will be our combined July/August issue.

Feingold



News

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June 1997

Fast Foods

As we noted in the article on page one, those who are not well acquainted with the Feingold Program generally have many misconceptions. New books on ADD continue to picture our Program as sugar-free despite the fact that it never has been. Few things confuse these folks as much as our *Fast Food* pamphlet (included in the May issue of *Pure Facts*). It's hard to imagine that our "health nut" diet includes Big Macs and Coca Cola!

The inclusion of cola drinks raises questions for our members as well. We are often asked why Coke and Pepsi have appeared on *Fast Food* pamphlets, but are not found in the *Foodlist*. Here's why.

Before any product can be added to our *Foodlist*, we require the manufacturer to fill out a comprehensive form which provides information about all of the ingredients. FAUS is not interested in learning any recipe secrets; what we want to know is if there are any of the unwanted additives hidden in any of the ingredients. For example, BHA and BHT can be found in many places without having to be disclosed on the label.

Of all the food companies, those who manufacture colas have been the most secretive. In fact, in the 1960's Hollywood produced a comedy based on the intrigue surrounding the secret formula for one of the major cola drinks. For the few who guard the corporate secret, it's no joke! The good news is that so many Feingold members have been able to drink these sodas for many years. While the ingredients listed are not complete (i.e., "flavoring") they satisfy the requirements for inclusion in the *Fast Food* guide.

If you are brand new to the Program, you will get the best results by sticking to a careful Stage One diet; once you have successful results, you can gradually expand and test out other products, including brands not found in the *Foodlist* and fast foods. Most people find that they are quite sensitive for about the first year, and as they stay on the Program longer, their sensitivity gradually diminishes.

Mailing out your *Pure Facts*

We are experimenting with different ways of mailing your newsletter, with the hope of getting it to you as quickly as possible...and in the best condition.

In an effort to keep pace with the newest regulations for bulk mail, this issue is being sent in an envelope, with a bar code added to your address.

Thank You Thank You Thank You Thank You

...to Carole and Allen for your generous donation via the United Way and corporate matching campaigns.

...to Beth Cooney of the Stamford, Connecticut *Advocate* for your feature on the Feingold Program.

...to Renee Bouchard of the Glens Falls *Post Star* for your Feingold article. We have received many calls as a result of it.

...to all who have donated so generously to our Giving Campaign. Tax deductible donations can be made any time of the year and are greatly appreciated.

Remember a loved one or commemorate an important occasion such as a birthday, anniversary or graduation by making gift donations to:

The Feingold Association
127 East Main Street, Suite 106
Riverhead, NY 11901

Upon receipt of your check with the name and address of the honoree, we will send a tribute or memorial notification letter in your name.

Donations are tax deductible and are used to support our programs.

If you have misplaced your Giving Program brochure, or did not receive one, please call our 800 number and request another be mailed to you. Thank you.

(800) 321-FAUS

Attention: Virginia, Maryland, DC parents

Are you seeking a teacher's cooperation? Or would you like to introduce the teachers in your child's school to the Feingold Program? FAUS has a new brochure which is designed for teachers who are interested in our Conference workshops. They will be able to earn continuing education units (CEU's) from the University of Maryland by simply attending one or both workshops.

Whether you wish to gain the cooperation of your child's present or future teacher, providing a copy of this brochure lends impressive support for the use of diet, and for what you have been telling them all year.

Contact FAUS at our Alexandria, VA office for one or multiple copies (703) 768-3287. Principals, special ed teachers, counselors and other professionals will also benefit from our two-day workshop program.

Welcome to our new Program Assistant

Rancho Cucamonga, CA: Kim Tyrus (909) 484-0494

FAUS Product Information Center Report from Donna Curtis

Product Alert!

RICH'S Frozen Bread Doughs contain BHT and should be removed from your *Foodlist*.

LIFESTREAM Garden Vegetable Crackers contain tomatoes and red & green peppers; the product should be moved to Stage Two in your *Foodlist*.

Corn Sweeteners vs Corn Sweeteners

Many years ago some Feingold parents noticed their children reacted to foods that were sweetened with corn syrup/sweeteners. It clearly was not an allergy since the children could eat corn with no problem. As we learned more about the way foods are processed, it seemed the answer is in the way corn is changed into corn syrup. Many harsh chemicals are used, and it appears that a residue of these remains in the finished product; this may explain the reaction some people experience.

When FAUS researches foods, we ask if the product contains any corn sweeteners. If the manufacturer indicates that it does, the designation (CS) appears beside it in the PIC Report and *Foodlist*.

Some companies are using a sweetener made from barley malt and corn. These have also been given the (CS) notation. One such company is Sunspire, the manufacturer of a wide assortment of candies, including Sundrops, the popular chocolate drops with a natural colored coating.

A representative of Sunspire explained that there is a big difference between the two sweeteners:

"Whole grain malted barley and corn — this complex carbohydrate contains a mixture of natural malt sugars and proteins. It is derived from barley and kernels of corn through a natural process in which no chemicals are used and no nutrients are removed.

"Barley malt/corn kernels are boiled and a syrup is formed at the top. We remove this syrup and dry it. This is our sweetener. It is not like corn syrup, which is made using harsh chemicals." (If you are allergic to corn, this is not recommended.)

Essential Fatty Acids

Research conducted by the Hyperactive Children's Support Group in Great Britain and Laura Stevens et al at Purdue University in Indiana has revived interest in the use of essential fatty acid supplements for children with behavior, learning and health problems.

Several products made from evening primrose oil, an excellent source of these acids, have been researched and found to be acceptable for use on the Feingold Program. (FAUS does not maintain a position either for or against the use of supplements.)

PIC Report

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

Stage One

AGNES BAKE SHOP Foccacio; Whole Wheat Plus Burger Buns, Hot Dog Buns and Loaf (Hawaii only)
COLOSSO Ice Cream Cones: Cake, Sugar (CS)
EDENBLEND* Original (dairy substitute)

EDENSOY* Extra: Original, Vanilla

These products now have sweeteners made from malted corn.

EFALEX Focus; EFAMOL Active (Omega Combination); EFAMOL Fortify (EFA Calcium); EFAMOL Restore (Pure Evening Primrose Oil) Efamol Nutraceuticals Inc. Boston, MA (888) EFAMOL-1

FLYING COW Lowfat & Nonfat Milk (The dairy is in Vermont.)

FOOD FOR LIFE* Wheat & Gluten-Free White Rice Bread, Wheat & Gluten Free White Rye Bread

FOOD LION Chocolate Syrup (CS) (available at Food Lion supermarkets)

HORMEL Corned Beef (N)

JOSEPH'S LITE COOKIES Chocolate Chip (CS), Pecan Double Fudge (CS), Vanilla (CS)

These cookies are available in groceries, delis, bakeries and natural food stores.

MICHAEL SEASON'S Baked Potato Chips: French Onion (MSG/HVP), Lightly Salted

PASTA PRIMA Spinach & Mozzarella Ravioli with Italian Herb Cheese Sauce Mix (frozen entree)

VITAMITE 2% White Non-Dairy Beverage (CS), Non Fat Non-Dairy Beverage (CS)

These may be found in the dairy case.

Stage Two

AGNES BAKE SHOP McDougall Diet Multi-Grain Loaf or Rolls (apple) (Hawaii only)

FOOD FOR LIFE* Wheat & Gluten Free Brown Rice Bread (peach juice)

MICHAEL SEASON'S Triple Mix Popcorn (paprika)

The mail order address for the MT. NATURALS Children's Complete Chewable Wafers (Stage Two) should be listed in the back of your *Foodlist*:

Mt. Naturals, 20 New England Dr., Essex Junction, VT 05453. Call (800) 777-3737 for a free catalog.

Mt. Naturals Children's Complete Chewable Wafers (cherries) are listed under Chewable Multi-Vitamins in Stage Two of your *Foodlist*.

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