

Emily Kumler: I'm Emily Kumler and this is Empowered Health. Once upon a time I used to look at sort of peer reviewed research and take it as though it were truth and what I have learned in the course of especially looking at nutrition studies but also just sort of looking at medical studies in general is that these studies no longer hold the same weight that I once thought that they did. Now that I've learned more about the peer review process and also just all the different kinds of studies that are out there, which I feel like we talk a fair amount on this podcast about the difference between like [epidemiological research](#)<sup>1</sup> versus [doubly blind clinical trials](#)<sup>2</sup>. And our guest this week is somebody who I have so much respect for because first she, you know, sort of recognized a void in her field. So she's a psychiatrist. She was trained at Harvard and as she says, they got, you know, a couple of hours which you'll hear about, of nutrition training in med school and then none during her residency in psychiatry. And she realized that there might be something about the way we eat food or what foods we eat that directly impact our brain. And that so much of what you're taught in med school and certainly post med school work is about finding the right drugs to treat the right illnesses. And in her case she has found that she can treat a lot of people, most people who come to her by modifying the foods that they eat rather than putting them on psychiatric medication. Now that's fascinating and she and I could've spent the whole hour easily talking about that, but one of the other things that I have learned from her is just how important it is to go through research that's coming out today to look for conflicts, not just conflicts of interest but even like conflicts within the data. And she has done this in a way that I think is unrivaled. And so she basically takes all new research and she reads it really carefully and she goes back to sort of first principles and doesn't assume that anything is what it supposed to be. So she and I will talk a lot about how you know the sort of vegan movement versus the carnivore movement has created this sort of polarized environment and what is actually best for the human body. And she went through in such detail the [EAT Lancet report](#)<sup>3</sup>, which is the basis for sort of a lot of the vegan argument and she explains how there are conflicts interwoven into that document that make it really hard to make any kind of argument and she's going to break that apart in a way that is I think really, really, really thoughtful. So I'm not going to try and do it here in the intro, but just to give you a little bit of background in terms of things that we're going to talk about, she also is somebody who I feel like is just generally very thoughtful about her work and her approach to things, which I think is really important because when we're in this sort of polarized environment where people are

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<https://www.bmj.com/about-bmj/resources-readers/publications/epidemiology-uninitiated/1-what-epidemiology>

<sup>2</sup> <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/double-blinded>

<sup>3</sup> <https://www.thelancet.com/commissions/EAT>

having a really hard time listening to each other, one of the things that Dr. Ede Has sort of reminded me of is the power of listening, you know? So maybe it's not that surprising that it takes a psychiatrist to remind us all when it comes to nutrition that actually we really need to just take a second and listen to each other.

Dr. Ede: Hello everybody. So my name is [Dr. Georgia Ede](#)<sup>4</sup>. I am a psychiatrist based in Western Massachusetts and I specialize in nutrition science. I have a little bit of a different focus than a lot of psychiatrists do. Even a different focus than most nutritional psychiatrists do because in addition to my work, helping people to reduce or eliminate their need for psychiatric medications using nutrition strategies, I'm also very, very interested in nutrition science in general and how food affects not just the brain but also the body. And so over the past ten years I've spent a lot of time researching the research about nutrition and trying to understand, sort of get to the bottom of things about many of the different debates in the nutrition world and one of those being the plant versus animal debate, which is a very, very interesting and passionate topic for a lot of people. So I approach my work with a particular mindset. I think about what food contains and how we obtain those ingredients and how food affects the brain and the body. So anytime I'm thinking about giving people information or guidance about what to eat, I'm thinking about that particular food and how it works for or against a particular individual.

Emily Kumler: One of the things that I was sort of so excited to have you on and talk to you about is this idea that there is a real connection, which I think sometimes people don't realize that like what you eat really does impact your brain and your body in much more ways than just sort of making you fat or not. I mean that, that's probably, you know, one of the end results that we're all very focused on. But this idea that you have sort of done a deep dive into how somebody's psychological makeup or their mental health is impacted by what they eat. You're the first person that I've heard of who's doing that kind of research. And I think that's so valuable, right? When this sort of overmedicated environment that we live in.

Dr. Ede: Oh yeah. You know, [one in six people in the United States now take a psychiatric medication](#)<sup>5</sup> and I just refuse to believe that that's necessary. I think that, you know, like so many other chronic conditions that are becoming more common and more serious over time. I think that so much of our health has to do with how far we've gone astray with our diet. We simply have, and we'll talk about this today, we have the wrong information about what a healthy diet really is. And so I first became interested in this topic because just like I'm sure most of your listeners, I used to think of food as simply a way to control my

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<sup>4</sup> <https://www.diagnosisdiet.com/about-dr-edel>

<sup>5</sup> <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2592697>

weight. And you know, I knew that it had to be, you know, healthy and had, have nutrients in it. But I really just thought of food that way. And in four years of medical school, we had maybe two or three hours of nutrition training. And in four years of psychiatry residency at a Harvard training program, we received zero. We didn't talk about nutrition once in four years of psychiatry. So when I left residency, I thought of the brain as a bag of neuro-transmitters designed to be manipulated with medications. That's how I was trained. And I had to retrain myself when I became interested in this topic to think about things differently. And that's because my own, this is true for so many of us, more alternative practitioners, is because my own physical and mental health improved so much when I ignored the guidelines and tried different ways of eating and was able to heal myself. And so that's what I do now with other people. And I hope that by the end of our conversation, more people will think about food as not just a way to control their weight, but a way to control their brain chemistry.

Emily Kumler: Well, yeah. And I think if you want to just sort of elaborate on that a little bit because you obviously had this sort of light bulb or like aha moment where you realized that what you were eating might be sort of anecdotally, right? Like you had this anecdotal experience basically where like what you were eating maybe was contributing to health issues that you were facing. And so you played around a little bit with it and ended up finding that you could heal yourself through diet. And is that what sort of led you to become the researcher that you're now very well known for?

Dr. Ede: It's exactly what happened to me in so many of my colleagues in the nutrition world where we're kind of challenging the conventional thinking. So what happened for me in a nutshell was I used to eat the way I was told to eat. I was actually well known by my friends and family for eating a healthy diet, you know, and so I ate high fiber, low fat, low cholesterol, you know, lots of, lots of plant foods and you know, soy milk and I mean cereal, you know, sort of high fiber cereals and everything was [low-glycemic index](#)<sup>6</sup>. And I ate that way and I exercise religiously. I used to run and go to the gym and workout every single day. And I thought it was really healthy. But then when I sort of hit my early forties, that all fell apart. And I started to feel unwell in a variety of ways. And I think may many of your listeners may identify with these things, things like [IBS](#)<sup>7</sup> and [chronic fatigue](#)<sup>8</sup> and [migraines](#)<sup>9</sup> and [fibromyalgia](#)<sup>10</sup> and I just didn't feel well and none of my very smart Harvard doctors were able to figure out what was

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<sup>6</sup> <https://www.healthline.com/nutrition/low-glycemic-diet#section6>

<sup>7</sup> <https://www.healthline.com/health/irritable-bowel-syndrome>

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<https://www.mayoclinic.org/diseases-conditions/chronic-fatigue-syndrome/symptoms-causes/syc-20360490>

<sup>9</sup> <https://www.mayoclinic.org/diseases-conditions/migraine-headache/symptoms-causes/syc-20360201>

<sup>10</sup> <https://www.mayoclinic.org/diseases-conditions/fibromyalgia/symptoms-causes/syc-20354780>

wrong. All the tests came back normal. But I knew that I was not, I was not well. And so I just started experimenting with my diet and it took me about six months and I kept a food and symptom journal and I gradually removed things and started to feel better. And the diet that I ended up with, and this was purely by trial and error, this was before there was much information on the internet about these things. I ended up with a diet that was mostly animal foods and very little plant foods. And I honestly thought that that diet was going to kill me because that's what I had been told that high cholesterol, high fat, high animal protein diet was unhealthy. So I thought, well, this diet has healed me of I've every single symptom that I had been struggling with. Countless symptoms. You know, I need to understand how this diet works. Is the state dangerous for me? And furthermore, I need to understand for my patients whether there's some information that I could learn that would help them as well. Because I had many patients who were struggling with a lot of these same conditions and I had never been able to help them with medication. I think that one of the most important things that I realized for myself was even though I wasn't trying to use the diet to address a mental health problem, all of my symptoms were physical except for the fatigue really. When I changed my diet, my mood, my energy, my concentration, my productivity all improved significantly. And so I just became curious as a psychiatrist, how does it affect the brain? And if I could figure that out or learn a lot more about it, maybe I would have more to offer patients. So that's how I became really passionate about this topic and studying the scientific studies.

Emily Kumler: And so before we get into the research that you have done so comprehensively, and I think in really sort of debunking a lot of what is conventionally believed to be true, which is really like sort of the point of the episode. But I do want to talk a little bit about, I feel like so many women and girls today are diagnosed with anxiety and depression and I don't know if it's more than ever, and I'm sure people could make an argument that you know, maybe there's an over-diagnosis or more people are comfortable getting treatment or screened or whatnot, but what did you learn in terms of like those sort of specific mental health concerns about diet? I'm sort of curious. It sounds a little bit almost like the, you know, popular [Whole30](https://whole30.com/)<sup>11</sup> of like just go back to eating like meat and vegetables and like cut out dairy, cut out gluten and see how you feel. And the big thing with the Whole30 that I always think is so interesting is that people often don't feel great, you know, while they're doing it. But when they add back in the things they were eating before, they realize, oh, now I'm getting headaches again. Or like now I'm really tired in the afternoon. And it's almost like the absence of the thing. You don't recognize it until you

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<sup>11</sup> <https://whole30.com/>

add it back in and the symptoms return. But I don't know much about this piece of like mental health and nutrition.

Dr. Ede: Sure. So what people who are listening, if you have anxiety or depression or any kind of a mental health issue, ADHD, difficulty concentrating or even if you or a family member have a serious mental illness, it's just incredible how much power there is in dietary changes if you know which changes are worth making. And so unfortunately the advice that we're given doesn't really help a whole lot. We understand a lot more about root causes of mental illness than most people think we do. And so for example, inflammation on a microscopic level in the brain, [inflammation is one of those root causes of most chronic illnesses](#)<sup>12</sup>, in the brain is no different. So inflammation, something called [oxidative stress](#)<sup>13</sup>, which just means that the cells in your body are an overdrive and they are releasing sort of like little free radicals, which are kind of like bulls in a China shop and they can cause internal damage to cells and even kill cells from the inside out. And [nutrient deficiencies](#)<sup>14</sup>, which are very common in our modern diet for a number of reasons. And something called [insulin resistance](#)<sup>15</sup> and insulin resistance makes it hard for the brain to access energy. And insulin resistance is also sometimes called [prediabetes](#)<sup>16</sup>. Now, the [majority of us in United States now have prediabetes](#)<sup>17</sup> and in many Western countries. So prediabetes is simply our body's carbohydrate metabolism is breaking down and it makes it very, very difficult for us to handle carbohydrates for many of us, even from whole foods like fruits and vegetables. So the metabolism of the brain, the nutrient availability to the brain and the inflammation and oxidation, which is caused primarily by processed foods, refined carbohydrates, vegetable oils, things like that, all of these things can be changed very easily. Well there are simple, it's not easy to make these changes, but they're really simple, straightforward changes that anybody can understand and apply if they have the right information.

Emily Kumler: You know, I think one of the pieces to stick on with this is this idea that insulin resistance. Like I feel like people will very often say like, oh well when I was a kid I could write or my kids can, and I always like to hammer home the point that like, yeah, you've damaged your system. Right? So it's not that it's good for kids either, I guess. Right. That it's like you're damaging your system over time, creates these bigger problems and that if you don't feed your kids a lot of refined carbohydrates or you know, we can, we'll get into sort of like vegan diets for kids and stuff like that, but that this is not actually the way

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<sup>12</sup> <https://harvardmagazine.com/2019/05/inflammation-disease-diet>

<sup>13</sup> <https://www.ncbi.nlm.nih.gov/pubmed/10693912>

<sup>14</sup> <https://www.healthline.com/health/malnutrition>

<sup>15</sup> <https://www.healthline.com/nutrition/insulin-and-insulin-resistance#basics>

<sup>16</sup> <https://www.mayoclinic.org/diseases-conditions/prediabetes/symptoms-causes/syc-20355278>

<sup>17</sup> <https://www.cdc.gov/media/releases/2017/p0718-diabetes-report.html>

anybody should eat. And so I think there's this misnomer which I like to point out when we do talk a little bit about nutrition with children because I know we have a lot of moms who listen to the show. And I think just because your kid isn't overweight doesn't mean that they can handle the sugary processed stuff and that we all look to weight as this sort of bodily response to health, which is right. I mean it's accurate, but it's not the whole story and it certainly doesn't tell you the origin of the problem.

Dr. Ede: Thank you very much for saying that because that is critically important. You cannot tell if somebody is healthy simply by looking at their body. Now there are clues to, you know, to dietary issues in children, things like hyperactivity, dark circles under the eyes, gastrointestinal upset, getting sick all the time, being, you know, chronic congestion or constipation or other kinds of, you know, stomach aches. There are definitely--low energy. There are lots of [clues to dietary problems in kids](#)<sup>18</sup>. But, you know, if you've got a child of normal weight, who is, who appears healthy in every way, including all those ways that I just mentioned, it's still a very, very dangerous thing to feed them what we consider children's foods. They're all sweetened, all processed. [Sugar is very damaging to the brain](#)<sup>19</sup> and it's, it literally will put your brain on a path to destruction from, no matter what age you are. And we know from the science is very, very clear on this, that [Alzheimer's disease begins with insulin resistance](#)<sup>20</sup> in most cases and begins decades before any memory problems become apparent. And so you have to think about sugar as just like any other thing that you'd want to keep away from your children like cigarettes or like alcohol and really train them to eat carbohydrates from whole foods only, fruits and vegetables and this is really the only chance you have to give them those good habits. Once they're in high school, it becomes a lot more difficult. When they're young, that's when you can teach them and model for them these really healthy behaviors.

Emily Kumler: Yeah. And I think, you know, we've had [Dale Bredesen on the podcast](#)<sup>21</sup> and he talked a lot obviously about Alzheimer's inflammation and how, you know, there is the potential to sort of [reverse damage to by getting on these more anti-inflammatory kinds of diets](#)<sup>22</sup>. And certainly when we had Gary

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<sup>18</sup> [https://www.rch.org.au/kidsinfo/fact\\_sheets/Nutrition\\_older\\_children/](https://www.rch.org.au/kidsinfo/fact_sheets/Nutrition_older_children/)

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<https://www.psychologytoday.com/us/blog/neuronarrative/201204/what-eating-too-much-sugar-does-your-brain>

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<https://www.psychologytoday.com/us/blog/diagnosis-diet/201609/avoiding-alzheimer-s-disease-could-be-easier-you-think>

<sup>21</sup> <https://empoweredhealthshow.com/alzheimers-dale-bredesen-prevention/>

<sup>22</sup>

<https://www.omicsonline.org/open-access/reversal-of-cognitive-decline-100-patients-2161-0460-1000450.pdf>

Taubes on, he talked a lot about sort of the impact of, you know, or the role of sugar. And you know, one of the things that I think Gary and I tend to joke about, but it's like really not funny, is that like if you looked at sugar as a drug, right? Like we give it to kids to pacify them, we use it in their celebrations. Like he has that great passage in his book "[The Case Against Sugar](#)"<sup>23</sup> about how like this is literally, I mean like everybody crashes right after they have it. So you give them more, it's like this sounds like cocaine or something, right? But it's everywhere and it's pervasive. And I think that, you know, also makes it a challenge, right? It's not like, you know, people may even have an awareness that sugar is bad, but then at the same time, well you can't not give people, you know, you can't not have birthday cake. And some of that stuff I think is so culturally ingrained that I think it's a perfect segue for us to talk a little bit about the EAT-Lancet efforts because I think that really for a lot of people solidified this idea that we shouldn't be eating meat, that you know, what's best for the body and best for the environment is really this, you know, sort of more vegan lifestyle. And there's something really compelling about combining. Like you're killing the planet and you're killing your body in a report that's by, you know, very reputable publication which we could spend a whole nother episode talking about. But you know, I think that report you have done an incredible autopsy on that report and the data behind it. And so I kind of just want to give you some space to get into all of that because what was widely like sort of widely covered in the media was not the deep dive into, you know, what was involved in their data sets or like where did they get this data from and the [food frequency questionnaires](#)<sup>24</sup> and you know, how often they actually asked people what they were eating. I mean, all of that stuff I feel like who should really be on a vegan diet and all of the caveats to that. So I'm just going to kind of hold some space for you over here and let you take it away.

Dr. Ede: Sure. Emily. So, thank you for that commentary. I really appreciate it. I did work hard to understand this report that the [EAT-Lancet report](#)<sup>25</sup>, which was published last January, so 2019. And uh, it was published in a journal called the Lancet, which is a very reputable scientific journal. And it was authored by a group, an international group of 37 scientists, led by [Dr. Walter Willett](#)<sup>26</sup> of Harvard, the Harvard University School of Public Health, who is perhaps the most influential nutrition researcher in the world. And so it carried a lot of weight, this document. And it received and continues to receive daily media coverage around the world and it's influencing lots and lots of big thinkers in the field. So, when I saw this report, I did two things with it. One is I wrote a critique of it, sort of a light lighthearted, but lightheartedly serious

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<sup>23</sup> <https://www.amazon.com/Case-Against-Sugar-Gary-Taubes/dp/0307701646>

<sup>24</sup> <https://index.nutrition.tufts.edu/data4diets/data-source/food-frequency-questionnaires-ffq>

<sup>25</sup> <https://www.thelancet.com/commissions/EAT>

<sup>26</sup> <https://www.hsph.harvard.edu/walter-willett/>

critique of it for Psychology Today. And that article is called "[EAT-Lancet's Plant-Based Planet 10 Things You Need To Know](https://www.psychologytoday.com/us/blog/diagnosis-diet/201901/eat-lancets-plant-based-planet-10-things-you-need-know)."<sup>27</sup> So I outlined the 10 important points from the report. And then I give a presentation that's available on line, the [free video online at Low-Carb Denver](https://www.youtube.com/watch?v=NknJ2vBuGqM&list=PLrVWtWmYRR2A2COXDLr21SYlmybqo1D35&index=19&t=0s)<sup>28</sup> in March, presenting a lot of the same information from a slightly different angle. So,

Emily Kumler:           And we will link out to both of those.

Dr. Ede:           Okay, great, because you know, we won't be able to cover every little thing. And if people are curious, both of those, both the article and the presentation are designed to be understandable by the general public. So the thing about EAT-Lancet report is, I don't know, 40, 50 pages long, but the nutrition section is only about eight pages long. Now it's very dense and difficult to understand as all nutrition science unfortunately is. But I have, I love reading things like this and trying to make sense of them. I worked in a lab that was a research assistant in a science labs for seven years before I went to medical school. So I'm not afraid to read these papers. And in any case, this 47 page document and I sort of read these eight pages repeatedly. And what I came to understand, the more, the more times I read it was that the authors, the authors who were essentially concluding in their report and trying to advocate in their report very strongly that everyone on the planet should eat as little meat as possible ideally none at all, no animal foods, not just red meat, but no animal foods whatsoever. That the authors who are advocating for a vegan diet, for the planet's inhabitants were actually repeatedly making arguments that formed an air tight case for the inclusion of animal foods in the human diet.

Emily Kumler:           So the opposite of what they said, their intention was.

Dr. Ede:           Opposite of what they said. And so if you now, I don't think they expect that anyone's going to read their report. And so when you actually read it and you have to read it several times to believe it, that you're believing what you're seeing because it's crystal clear, it's very, very obvious. They give repeated examples of how important animal foods are for infants, for growing children, for teenage girls, for aging adults, for the malnourished, for the impoverished, for pregnant women, for anybody with insulin resistance, which is now more than half the population, they make it crystal clear that their recommended diet is insufficient, inadequate or dangerous for all of those people.

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<https://www.psychologytoday.com/us/blog/diagnosis-diet/201901/eat-lancets-plant-based-planet-10-things-you-need-know>

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<https://www.youtube.com/watch?v=NknJ2vBuGqM&list=PLrVWtWmYRR2A2COXDLr21SYlmybqo1D35&index=19&t=0s>

Emily Kumler: So I feel like we just need to stop for a second. That is so like so confusing, right? Because here we are getting this, how do I say this? Like we're getting this basically like news blast about how eating meat and animal products is dangerous. Literally dangerous. Like it will kill you, you'll die earlier. You'll, you know, destroy the planet and in the report that everybody is citing as proof for that conclusion or those conclusions, they are what could be called contradicting themselves. I would also say like kind of covering their own asses. Like, right. Like that's so strange. Have you had any kind of correspondence with them? Or any of the authors just sort of say like, Hey, I'm a little confused by this. Like your conclusion says X , but in your nutrition section you're actually saying something contrary?

Dr. Ede: No, I have not written directly to any of the authors of the report. However, after I and several, I was not the only one who wrote a public critique of, of, of their document. There were others as well. [Diana Rogers](#)<sup>29</sup>, who's a registered dietician, [Dr. Zoe Harcombe](#)<sup>30</sup>, who is a nutritionist from the U.K., many others. We wrote some very public critical, respectfully written but critical of this document. And what ended up happening with the Lancet in November, analyzed all of their, their response on social media to their report. And they noticed that articles like mine were receiving in many cases, a lot more attention than articles that they had been promoting to support their work. And so when they analyzed all of this, they found that, that our work had disrupted their media message and had come across as more convincing often to undecided readers. And so we were having, we were actually making a big difference in how people understood the report that apparently ruffled some feathers because the Lancet published a critique of our critiques, essentially calling us liars and calling us, you know, propaganda machine and not taking issue with a single substantive comment we made. So in this Lancet report and in this Lancet article that criticizes the criticism, they're not criticizing the content of the criticism. They're criticizing the fact that there was criticism.

Emily Kumler: Well you see, this also drives me crazy because I feel like any good scientist is supposed to be incredibly critical of their own work. So it's not a popularity contest. It's not like, oh, you know, Dr. Ede got more Twitter responses than I then our magazine did and therefore like we need to up the ante. This was not an opinion piece, right?

Dr. Ede: No.

Emily Kumler: I mean this was a basically like what would be considered in journalism, a news report. And so if it's factual, then you have to stand by the facts. And if somebody is saying that your facts aren't right, then you either

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<sup>29</sup> <https://sustainabledish.com/>

<sup>30</sup> <https://www.zoeharcombe.com/>

need to, you know, correct what you have said or you need to put forward the evidence that you have that shows why the other side is incorrect with their criticism. They did neither of that.

Dr. Ede: That's exactly right. And that is a pattern. Dr. Walter Willett is no stranger to this debate. He knows exactly, I believe, you know, what the criticisms will be. I think he's very familiar with all of the arguments against his work and defends it nonetheless. And so it's hard to know of course, it's hard to know whether the people behind this report, whether they see the inconsistencies and understand their own writings. It's hard to say because as a psychiatrist, I understand that feelings and emotions are a lot more powerful than logic. And so it could be, there could be many, many reasons why 37 international scientists could write a report like this, which is so internally conflicted and so, so poorly recent. I mean, if you read it, you will see that they literally twist themselves into pretzels trying to get to their conclusions. Or in some cases they just make a huge leap and don't explain how they got there.

Emily Kumler: But they do literally say things like, you know, children under the age of two should not be on a vegan diet. Pregnant women should not be on a vegan diet. Like all the people, all of the sort of cohorts that you listed there, that's not, you're not, there's no hyperbole that's like directly ripped from the report.

Dr. Ede: No. And exactly. So in the Psychology Today article, I use only their quotes to show people what's in the report. I am not editorializing. I am not these are not my statements. These are their statements in quotes. And you know, I have these sort of ten items and we look at each quote and then we, and then what I do is I ask questions about the quote, well, if this is the case, then how can this be the case? So, you know, for example, I'll just give you an example of a quote. They're talking about Omega three fatty acids. Now [Omega-3 fatty acids are crucial to brain health](#)<sup>31</sup> and the ones that the brain needs the most, the one that the brain needs the most is called [DHA](#)<sup>32</sup>. Now DHA is only found in animal foods. It is very, [very difficult for us to convert enough of the type of Omega-3 that is found in plant foods to enough DHA for the brain's requirements](#),<sup>33</sup> particularly during pregnancy and the first two years of life. So in any case they say, because they don't want you to eat fish because it's an animal, they say, well fish has, this is a quote, fish has a high content of Omega three fatty acids which have many essential roles. Then they go on to say plant sources of ALA can provide an alternative to Omega three fatty acids. But the quantity required is not clear. They don't know how much plant ALA person might need to meet requirements. And the reason for that is

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<sup>31</sup> <https://www.healthline.com/nutrition/omega-3-fish-oil-for-brain-health#section2>

<sup>32</sup> <https://www.ncbi.nlm.nih.gov/pubmed/10479465>

<sup>33</sup> <https://www.ncbi.nlm.nih.gov/pubmed/9637947>

because the literature is very, very clear on this point. There's widespread agreement that plant ALA cannot meet the needs of a human being, particularly in early life. So, and then they go on to say quote about 28 grams per day or one ounce of fish can provide essential Omega three fatty acids. Therefore we have used this intake for the reference diet. We suggest a range of zero to 100 grams a day because high intakes are associated with excellent health.

Emily Kumler: But they haven't told you how to get it. If you can't eat fish.

Dr. Ede: They haven't told you how to get it. But they also say they say just a range of zero to 100 grams a day of fish. So the one of their recommendations is that you could actually eat zero grams per day of fish even though they just told you that you have to have these Omega three fatty acids and they're not really clear whether you can get them enough of them from plants. So this is the kind of pretzel twisting that happens where they'll say this is high intake as associate with excellent health, therefore we recommend that you could eat as little as zero grams of this per day.

Emily Kumler: And so just to talk about Walter Willett's influence on this. I feel like, you know, a lot of people may not know his name but he is sort of like, you know, I wouldn't say like the modern day [Ancel Keys](#)<sup>34</sup> is maybe pushing it a little bit, but he is very powerful when it comes to sort of nutrition advice. And he's at Harvard and he is authored or coauthored, I don't even know how many papers. He's always been a huge low-fat guy. If he just, is it like one of these, I mean I'm asking you this sort of based on your research and also based on your expertise as a psychiatrist. Like is he just so mired in his own paradigm that the cognitive dissidence is like he's never, he will not change his mind because I know there are a lot of people have presented really compelling evidence to the contrary and in some cases I feel like he has made statements about, you know, and I don't want to get this wrong, but he's made statements that have gone against his dogma a little bit, but it doesn't seem like he's coming around to any of this. And at some point it seems like, and maybe I'm so in the weeds when it comes to this sort of like low carb community or whatever, like I feel like I'm constantly hearing from keto people about, you know, reversing all kinds of ailments and disorders and diseases. Like he must get all of that in spades. So what does it take for us to actually get to a point where there can be some agreement on this stuff because I think the veganism versus the low carb community is like as polarized as the Republicans and the Democrats, right? I mean it is like people are, I hate to say out for blood because that's like, but I mean some of the vegan people are like really, really activist about their belief that this is, you know, if you eat meat, you are destroying the planet and it's not good for your body. So like what do you say to

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<sup>34</sup> <https://www.sevencountriesstudy.com/about-the-study/investigators/ancel-keys/>

those people? And maybe on both sides to sort of say like, Whoa, like can we, can we try to extract some of the emotion from this? And at least, at the very least, I feel like everybody can agree that the research has been unbelievably terrible up until this point when it comes to nutrition.

Dr. Ede: So many good points there, Emily. So I'll take the last point.

Emily Kumler: Sure.

Dr. Ede: Emotions run deep on all sides of this debate. And not just on the vegan side of the debate. And so I witnessed that myself on social media every day. People attacking each other for what they eat, whether it's animals or plants. And so people have very, very strong feelings about food. We have really strong emotional attachments, cultural attachments to food, beliefs about food. And now what we're being told is that our food choices are having an impact on the planet and therefore we're made to feel guilty about food choices, responsible for the very, very wellbeing of the planet and the future of children. And so it's a huge important topic. Now, unfortunately, low carb versus plant-based makes no sense to me because, because there is a lot of common ground there. You do not have to eat animals to eat a low carbohydrate diet. Low carbohydrate has nothing to do with plants or animals. Insulin resistance. You can, address diabetes, obesity, et cetera. You can address those problems, lose weight, get your blood sugar under control without eating animal foods if you so choose. It's not about plants and animals. That debate is not about plants and animals. [So you can be a vegetarian low-carb](#)<sup>35</sup>, it's harder. It's harder to eat a vegan low carb diet, but it's not that difficult to eat a vegetarian low carb diet. You know, I step out of that one. But where the mythology really takes hold is in the plants versus animals for human health. There is just no scientific evidence. Absolutely none that animal foods are dangerous to human health. We'll leave dairy aside because I have my concerns about dairy, but we're talking about meat, seafood, poultry. Those foods are ancient foods which the brain and body evolved to obtain nutrients from. They're the only foods that contain every nutrient we need in the proper form, in the proper ratios and without any natural anti-nutrients. So a lot of plant foods contain naturally contain compounds that interfere with our ability to access their nutrients because they're trying to defend themselves from being eaten. So animal foods are the only whole foods, the only true super foods because they are the most nutritious and the least damaging to our health. And so, and that's just the opposite of what most people hear. The reason why people hear the opposite every day, all day long is because of a pseudoscientific that I'm quoting Gary Taubes here a pseudoscientific methodology. There's a type of experiment, or a type of, let me put it this way,

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<sup>35</sup> <https://www.healthline.com/nutrition/low-carb-as-a-vegetarian#section5>

the lion's share of nutrition studies that show up in headlines and in our dietary guidelines come from a type of nutrition study called an epidemiological study, and an epidemiological study is not a scientific experiment. It is a questionnaire based guesses, often a very, very biased guess at that about which foods are linked or associated with specific diseases. These are literally guesses. They are wild guesses based on people's very flawed memories, filling out questionnaires about how many cups of blueberries they ate over the past 12 months, that kind of ludicrous and, and then you may be able to generate a guests about, okay, maybe people who eat lots and lots of blueberries have less heart disease or dementia or what have you. But that's a guess. You need to test that in a clinical experiment and until you do that, you shouldn't be telling anybody how many blueberries to eat. And this is the problem with nutrition epidemiology. Professor Walter Willett is the grandfather of nutrition epidemiology. He designed these questionnaires. He designed this methodology. My guess is that he's very, very attached to it, that he's professionally attached to it, that he's emotionally attached to it, that he's financially attached to it. And I can't imagine it would be easy for him to come out and say that his methodology is useless and wrong.

Emily Kumler: Let's talk about the food frequency questionnaires cause I don't think people have any understanding of how flawed these things are. Right? And so studies, epidemiological studies sometimes look at populations of people, right? So I had one of my favorites is always like the Mediterranean diet. And like anybody who's spent any time in the Mediterranean knows that there's a huge difference between, you know, one country in the Mediterranean and another. So you're sort of like, well, which one are we talking about? I mean even in Italy, right? Like take a lot of pride in the fact that the North and the South are very, very different places. Right? And they eat different things. And so I always sort of say like when you're looking at something that's sort of seems to be conclusive in some overarching way, but it's an epidemiological study, you have to remember that no one can actually say anything about cause they're trying to find an association and they're often doing that by picking specific variables or data points that will sort of corroborate what their hypothesis is.

Emily Kumler: And from my perspective, I feel like epidemiology is great for generating a hypothesis, but to your point you cannot say anything about it unless it's been tested in a clinical trial. And most of these nutrition things have not been tested in clinical trials. You know, I think the other point to just sort of hang onto here is that it seems like there are, I mean at least a dozen that I know of, studies where they go in and they actually do like a food frequency questionnaire at the very beginning of the study and then they go back to those subjects some 10, 20 years later and they call this a longitudinal study and they figure out like what did the person die of? Or what ailments do they now have

and there is an assumption that they kept eating the same things for that period of time.

Dr. Ede: Yes.

Emily Kumler: Despite the fact that they didn't check in with them. So like what I ate 20 years ago doesn't resemble in any way what I eat today. But if I had been a part of a dietary study, they would have asked me, you know, Emily, what do you, record what you ate. You know, and it's probably not even today. It's probably like in the last six months, which is also really hard to kind of come up with any sort of accurate measure of what I'm eating on average over six months. Or even like how to answer that question, but then they don't actually ask me again. And so, you know, I think especially for, I mean maybe not maybe for everybody, but for our audience that's, you know, really a female audience and this podcast is really about female health. Like we all will try new diets. I don't know how many diets I've tried in my life, but like if somebody asked me what I was eating in college 20 years ago, it was like ramen noodles and beer and vodka. I mean like, that's like, that's not really what I eat anymore. But that would have been like, they would have assumed that I was eating ramen noodles, beer and vodka for 20 years. And so it's just like, I feel like when you break it out like that, it's unbelievable to me. And it makes me so angry that like this is called science, right? Or that this is given to people as some sort of advice about how to be healthy or how not to be healthy or like what's gonna make you sick.

Dr. Ede: Those are all fantastic points. And to make matters even worse because everything you just said is 100% true. To make matters even worse. So when you're given these questionnaires, and I've looked at lots and lots of these questionnaires, they will ask you know, how often over the past 12 months did you drink 2% milk? You know, that sort of a question, right? And you'll have to specify the quantity of the milk and how often per week you've been drinking it over the past year. And they ask you, you know, to average that and you, let's say that, you know, you gave up milk for lent, you've got to figure that in. Right? So, so of course, how, how can we answer a question like that? Most most people, unless you don't drink and drink milk at all, it'd be very, very difficult to answer that question with any degree of accuracy. But to make matters worse, these questionnaires do not allow you to choose to say, I don't know. I can't remember. I'm not sure. Which I think the lion's share of questions, the lion's share of people would want to answer many of those questions with that option. You are forced to quantify. You are forced to make a guess. And that is anti scientific and you're not measuring anything. People think, Oh, they looked at these diets over 20 years and they saw, you know, this is a very long study. It was 20 years long or this study had 50,000 people in it. So these studied 50,000 people for 20 years. How can that study not carry

weight? Well, it's only as good as the data that comes out of it and I would argue there is no data in an epidemiological study because data implies that you're measuring something, you haven't measured anything.

Dr. Ede: No one has measured what you've eaten over the past year. I ate a diet that it takes, my diet is limited to about 10 or 11 foods and I can't tell you what I ate last week. And I am serious about that. I can't. So this is not science, this is not data and these headlines get published before anything is tested. What the epidemiological nutrition studies that are put to the test, there've been a couple of analyses of these done when they actually do put them in to the test and clinical trials. These kinds of studies are wrong more than 80% of the time, which means that you'd be better off flipping a coin to figure out which diets are connected to which diseases.

Emily Kumler: Yeah. Or I feel like what more and more people are doing is like just self experimentation, right? Where it's like try eating the opposite of how you eat for a given period of time and see how you feel when you were doing that yourself. How long did it take for you to realize the benefits of switching your diet around?

Dr. Ede: Well, it took me about six months. I mean things were, you know, it was kind of rocky in the beginning cause I didn't know where I was going with it. And after a few months I noticed some trends, patterns emerging and I just kept sort of following those trends. And then I ended up after six months, it took after six months I was, I was well.

Emily Kumler: And so did you start like, did you stick on the same regimen that whole time or you were sort of adapting it as you went?

Dr. Ede: No, I was making changes along the way, especially in the beginning. The first few months I was making a lot of different changes in and out, back and forth, taking in, taking out, experimenting and then towards the end of the six months, the changes I was making were a lot fewer and it was more sort of fine tuning it. And then, you know, even many, many times since then I have gone back and tried to put certain things back into the diet to see if I had, you know, regained some tolerance in, because, you know, I used to be able to tolerate a wide variety of foods until I hit my early forties. So, and why is that? I don't know. Was it because of a course antibiotics? Was it because of exposure to some environmental toxin? Something about the microbiome broke down or some medication, I don't know. Stress, age, who knows, but or just cumulative damage from environmental toxins or dietary, eating the wrong way in my diet. So we don't know. But this happens to a lot of people. Over time, they'll, there'll be fine for a while and then they're not. Lots of people are becoming desperate to experiment with their own diets because the information

they have isn't working, they're getting less healthy or they're gaining weight or they're not feeling good and the diet that they are told to eat doesn't help.

Emily Kumler: There's that great book, "[The Vegetarian Myth](#)."<sup>36</sup>

Dr. Ede: [Lierre Keith](#)<sup>37</sup>.

Emily Kumler: Yes. And I feel like Nina Teicholz has a very similar story of being a vegetarian and then feeling like her health started to decline. And obviously she's a great researcher too. And so, you know, sort of took it upon herself to look into this stuff. But I mean, why is this happening? I mean like, you know, I kind of feel like there is this, it's so appalling to think that the recommendations that are coming through to people have been flawed for so long and we're unable to correct them and that more and more people are getting really sick. And so, you know, I sort of feel like the conspiracy theory or like the people who are anti-conspiracy theory, right, are like, well this can't be. Right. Like if that were true then wouldn't we, you know, wouldn't everybody sort of be up in arms and changing this? And so what do you make of that?

Dr. Ede: Well, I think we want it to be true. I mean, I think most people want a plant-based diet to be the healthiest diet because it feels more compassionate. It feels better to not have to confront the realities of our biology, which is that we require, we evolved to require a certain amount of animal food in our diets. If you remove all the animal food from your diet, you will, you won't be able to survive because there are important gaping nutritional holes in a vegan diet that must be very, very carefully supplemented. And even if you very carefully supplement, which the vast majority of people who eat a plant based diet don't because these risks are downplayed by people who, many of the people who support and promote vegan diets. Even if you very carefully supplement, we don't know if that's as good as getting your nutrients from whole foods. So when people embark on a plant-based diet, they're doing a grand biological experiment. We don't really know if supplements are as good as whole foods.

Emily Kumler: And so what are some of those things that are, you know, causing that wreckage on a vegan diet?

Dr. Ede: Well, there are [certain nutrients which are not simply do not exist in plant foods](#)<sup>38</sup> and many others which exist in the wrong form and are harder for us to convert into the proper form. And then there are these things called [anti-nutrients](#)<sup>39</sup>, which interfere with our ability to access the nutrients that

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<sup>36</sup> <https://www.amazon.com/Vegetarian-Myth-Food-Justice-Sustainability/dp/1604860804>

<sup>37</sup> <https://www.lierrekeith.com/>

<sup>38</sup> <https://www.healthline.com/nutrition/7-nutrients-you-cant-get-from-plants#12>

<sup>39</sup> <https://www.hsph.harvard.edu/nutritionsource/anti-nutrients/>

plants do have in them. So for example, a really good example is spinach, people think of spinach is very high in iron and it is, but good luck getting the iron out of the spinach because, there are compounds within the spinach called [oxalates](#)<sup>40</sup>, which block virtually every molecule of that iron from entering your body. So there's no available iron in spinach. And so that's just one example, but there are, there are nutrients which don't exist in plant foods at all. And these are B1-2, vitamin B-12. I think a lot of people are aware of this nutritional hole. B12 is critical for making new blood cells for the development of the brain and the nervous system. Plenty of other important things. So you must supplement with B12 and it takes several years up to five years for B12 deficiency to develop. So it doesn't happen overnight. So people may feel initially a little better when they switch to a plant based diet, perhaps because they're eating healthier in general. They may have taken out some junk food, they may have had a dairy sensitivity and egg sensitivity, maybe eating a lot of junkies or processed meats, who knows? But lots of people do feel better when they switch to a plant-based diet. But if you're not carefully supplementing and making sure you're not eating junk food, you have to eat a whole foods plant based diet that's carefully, carefully supplemented. You can develop nutrient deficiencies over time of vitamin B12, of iron, of zinc, of vitamin K2 and the Omega three fatty acids. Um, and there are other, you know, nutrients that are harder to get. Some of the B vitamins are harder to get. Some of the amino acids are harder to get if you don't carefully plan your diet. So how these nutrient deficiencies affect any particular individual, A will take time to manifest themselves and B, will look a little different in each person. It could be depression, it could be anxiety, it could be gut issues, it could be fatigue, it could be skin issues or hair issues or dental issues. And so many of the students I worked at Smith college for five years as a psychiatrist and nutrition consultant. Many of my students, ate a plant-based, I was very, very popular diet on campus, a women's college

Emily Kumler:           Where I went to undergrad.

Dr. Ede:           Oh, that's right, Emily. Not a single one of the vegans students that I worked with was completely healthy. But it gets confusing and complicated because most of the students I saw, regardless of what they ate, weren't healthy because they're eating so much junk food in addition to whatever plants or animals that are eating or not eating, they're eating so much junk.

Emily Kumler:           Yeah. Hence the ramen noodle vodka diet that I referenced earlier.

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<sup>40</sup> <https://www.kidney.org/atoz/content/what-are-oxalate-kidney-stones>

Dr. Ede: How do you tease that apart? So, you know, no matter what you're eating, whether it's plants or animals, educate yourself about the nutritional holes. Supplement carefully. Keep an eye on not just your weight and your cholesterol, but your entire health and in your entire sense of wellbeing and keep an open mind and eat whole foods only no matter which diet you're eating. Keep the junk food out, the process foods out as much as you possibly can. Those rules apply to both sides of the fence.

Emily Kumler: I'm Emily Kumler and that was empowered health. Thanks for joining us. Don't forget to check out our website at [empoweredhealthshow.com](http://empoweredhealthshow.com) for all the show notes, links to everything that was mentioned in the episode, as well as a chance to sign up for our newsletter and get some extra fun tidbits. See you next week.