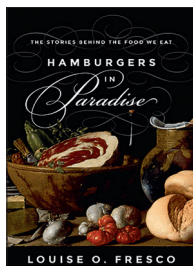


# Out of Hours Books

## Hamburgers in Paradise: The Stories Behind the Food We Eat

Louise O Fresco

Princeton University Press, 2015, HB,  
560pp, £29.95, 978-0691163871



### FASCINATING FOOD

Whatever you're eating right now, from a supermarket sandwich to a 10-course Chinese banquet, from a cassava root to a Bleep and Booster-style nutrition pill, or especially an apple, it has been comprehensively and painstakingly deconstructed by Louise Fresco. Who grows, or makes it, how, where, why, and how it gets to our table: 'farm to fork'. The revelations she describes are sometimes critical, often passionately favourable, but never amount to an evangelistic rant about industry, climate change, or fast food: always balanced. Fresco quotes the evangelist John Wesley: 'Catch on fire with enthusiasm and people will come for miles to watch you burn', which aptly describes other best-selling authors such as Greg Critser (*Fat Land: How Americans Became the Fattest People in the World*), Eric Schlosser (*Fast Food Nation: The Dark Side of the All-American Meal*), Nina Teicholz (*The Big Fat Surprise: Why Butter, Meat*

and Cheese Belong in a Healthy Diet), and even Robert Lustig (*Sugar: The Bitter Truth*), but the problem with evangelists is often that their cause is shouted loud, but no counterargument can be entertained.

This is a trap that Fresco elegantly avoids; every argument has a counterargument, for example, Italian supermarkets have forced smaller family-run businesses to close, but stock a wonderful range of beautiful foods. The book is at its brilliant best when it tells stories. 'In 1894 the Times predicted that by 1950 the streets of London would have disappeared under three meters of horse dung'. 'Acute hunger can drive people insane. Rotting meat, tulip bulbs, tree bark, soil, leather.' Many are personal, giving an autobiographical resonance, approaching voyeuristic at times. Fresco has led a fascinating life, living, working, preparing food and eating it, the world over, and it's a privilege to witness them: 'in Dharavi, the largest slum, I've seen eggplant and onion fields no bigger than a bath towel, on either side of the railroad tracks'. She sometimes reveals a little too many of her own cultural proclivities: 'Is organ transplantation a form of cannibalism?' and has a clear sympathy with vegetarianism, but as a soul-bearing exercise this can be forgiven.

The most fascinating story is of Paradise; the descriptions, history, symbolism, art, literature, and cultural aspects are compelling, with references to the 'erotic' Eve of Autun, Lucas Cranach the Elder's famous image *Adam and Eve*. Descriptions of Adam and Eve's banishment from Paradise into the wilderness are evocative, and copiously illustrated, marking the time

when humanity started to rely on hard work, hunting, and ultimately agriculture to survive, after the easy life in Eden.

The abiding and remarkable lingering taste of the book is optimism. This isn't the anticipated rant about food, retail, petrochemical industries, GM farming, climate change, and every political hot potato, but an enjoyable collection of stories, recollections (and statistics) with an ultimately uplifting tone.

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### The Diet Myth:

## The Real Science Behind What We Eat

Tim Spector

Weidenfeld & Nicolson, 2015, PB, 336pp,  
£14.99, 978-0297609193



### CHERISH YOUR GERMS

We cannot simply attribute obesity to gluttony and sloth. Some people really can eat more freely than others. Identical twin adults differ

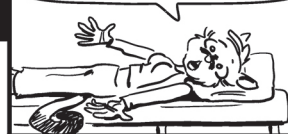
THIS IS JUST A QUICK ONE, SO I WON'T WASTE YOUR TIME, BUT AND THIS IS LIKE SO GROSS 'CAUSE MY COUSIN'S STAYING OVER FOR THE FINALS AND MY NOSE HAS BEEN LIKE KILLING ME FOR LIKE MONTHS... WHAT? MY NOSE, IT KILLS! LIKE I'M SO OVER IT, YOU KNOW IT'S ORDINARY.



AND LIKE ANYWAY SUDDENLY IT'S ALL "BANG"... WHAT? YEAH, MY NOSE, IT HIT ME AND ANOTHER THING MY LIVER WHERE IS IT BY THE WAY? ANYWAY I'M LIKE WHOA! HEY? OH IT WAS THE OTHER DAY, HANG ON...NO IT WAS THE OTHER DAY, ANYWAY I CAN'T AFFORD TO BE SICK AND THAT'S WHY I'M HERE.



AND SHE'S LIKE YOU SHOULD SEE A DOCTOR AND I'M ALL NO WAY AND SHE'S WAY. AND I GO LIKE I SUPPOSE YOU'RE RIGHT AND SHE GOES YOU KNOW I'M RIGHT, YOU KNOW? AND... YEAH... THAT'S IT. SO HERE I AM.



I cannot confirm communication established, but patient apparently satisfied by end of consultation.



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by less than 1 kg in weight, suggesting a genetic element. But genes don't change in a generation, so what's going on?

Tim Spector, a professor of genetic epidemiology at King's College London, studies twins and the microbiology of bowel contents. This book presents his explanation of why people gain weight, fail to lose weight, and why allergy seems to be everywhere. The book is written for an intelligent lay audience, in a conversational style, well peppered with case histories and reports from research papers. Inadequate or maladapted bowel flora contribute to both obesity and allergies. Spector says the problems begin *in utero*. Avoiding peanuts and unpasteurised cheeses during pregnancy limits the diversity of a mother's own bowel flora and deprives the fetus of polyphenols (which act as antioxidants, lower lipid levels, and control genes moderating the immune system). A baby born by caesarean section may take over 3 months to develop normal bowel flora and antibiotics given to a mother limit the flora in breast milk. Antibiotics and gastroenteritis purge the gut, impairing digestion, absorption, and sometimes causing inflammation.

After gut purging, what you eat determines how swiftly your gut flora recover. Sugary foods, processed foods, and artificial sweeteners (as bad as sugar) impair the restoration of a healthy microbiome and raise blood sugar and insulin levels.

Spector offers support for the hygiene hypothesis. He recommends that a swab from mum's perineum should be swept over baby's face after a caesarean birth. He advocates playing in the dirt, having pets, perfunctory washing of food, following a Mediterranean diet, with garlic and olive oil (polyphenols), a little meat, plenty of fibre, yoghurt with probiotics, and lots of variety. He gives 'best before' dates short shrift, both for food and drugs. You might use some of the anecdotes in consultations, recommend the book to some patients, enjoy it yourself, and Spector even offers readers an opportunity to have their bowel flora tested.

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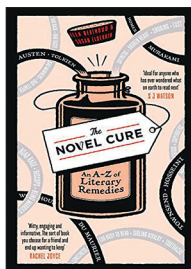
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## The Novel Cure

Ella Berthoud and Susan Elderkin

Canongate Books, 2015, PB, 464pp, £9.99,  
978-0857864215



## BOOKS AS THERAPY

This is a book of bibliotherapy: reading matter for anyone wishing to cure themselves of any ailment using cures from literature — a list of remedies for conditions ranging from abandonment to zestlessness, and everything in between. Not a novel that you want to sit and read in long sessions, but a book to dip into whenever you feel the need of some help from heroes and heroines of literature.

The illnesses are arranged in alphabetical order and each illness has a book (or a few) that can help with a cure. Each cure may take the form of reading how the protagonist went through a similar problem (*I am Legend* by Richard Matheson for coping without family), or help put you off creating a future problem (*Atonement* by Ian McEwan for lying). Sometimes it just helps you endure others (suggesting dealing with people who put you under pressure to have children by giving them a copy of *We Need to Talk About Kevin* by Lionel Shriver: enough to put anyone off reproducing!). This is a book for literary enthusiasts and its humorous and informative guides to different cures make a great source for choosing your next book to read — my reading list has now grown. The book even has advice for being a compulsive book buyer yet not having enough time to read. The recommendations are intriguing, presented with plenty of wit, and I wouldn't hesitate to prescribe this book to bibliophiles wondering what to read next, or to anyone with a love of literature.

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## A LIGHT BULB MOMENT

Many years ago, when I was a GP trainer, I went on a visit to an older lady. She was recently bereaved, arthritic, not far from the end of life herself. In those days we did more chronic visits, so that the content of the visit was as much personal as medical. With me I had my current registrar. She was bright, enthusiastic, knowledgeable. As we left, the lady asked me to change a light bulb in the kitchen; her hands were not up to it. I changed the light bulb; it was the work of moments.

As we got back into the car I saw a look of thunder on my registrar's face. She had not trained for 7 years in order to change light bulbs, she told me. If she'd wanted to change light bulbs she could have trained as an electrician, or even — yes, she would come out with it — as a nurse or an occupational therapist. I kept my peace; turned to other matters. Middle-aged now, probably a mother, still, I hope, a GP, these days she probably changes light bulbs for patients without even noticing that she's doing it. But what I could have said then, what I bit back because it would not have helped at that moment, was the following:

*'You trained for 7 years to acquire more; to acquire more skills, to acquire the status and respect due to a doctor. You did not train for 7 years to become less; you did not train for 7 years to become less human.'*

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