President's Message

Dear Fellow Students, SDFSA Members, Faculty, and Alumni,

I'd like to take this opportunity to introduce myself. My name is Aaron Flores and I am the 2005-2006 SDFSA President. This is my senior year and I will be graduating in the spring of 2006. I am honored to be serving as the President of this organization and it is a responsibility that I do not take lightly. In my brief tenure as President, I have already found that SDFSA is highly respected within not only the Family and Consumer Sciences Department, but also by the Associated Students. Our organization is extremely active in fundraising, campus events, and helping build campus leaders and our actions are not overlooked.

As President, I would like to share with you some of my goals for this academic school year. In addition to the Dietetic Internship and Career Symposium, we are also continuing to hold monthly Nutrition Lecture Series. These are events that SDFSA are known for and I hope to continue to live up to the high standards the previous officers have set for us. It is my main goal to motivate our members to find ways to be active in our organization. This organization does not do the great work we strive for through just the work of our fabulous Board. We need the members to help guide and give our organization meaning. I have charged our Board to work on bringing in existing and new members to help keep the foundation of this organization strong. By getting more people actively involved, we will insure that SDFSA will continue to be as strong or stronger when our time has come to move on. If you have not come to one of our regularly scheduled board meetings, I encourage you to stop in and hear about some of the things we are working on. I guarantee that we have something that will excite you!

Thank You, Aaron Flores

Advisor's Welcome Message

Fall 05

A friend is someone who leaves you with all your freedom intact, but who by what [s/he] thinks, obliges you to be fully who you are (by J. L. Herox).

As I look at the membership of SDFSA, it is clear that each of you is that special kind of *friend*. You encourage each other; you support one another; you work together in making SDFSA the best organization around! In turn, SDFSA is everyone's *friend*.

Welcome to *all* of our members who lead by incredible example, who encourage one another to accomplish so much, to bring out the most and the best in one another. I am honored to serve as your advisor and look forward to an exciting year!

Sincerely, Dr. Lisagor

"The Incredibles" Cathy Fusano, Vice President

As the obesity statistics in the U.S. continue to rise at an alarming rate, how "incredible" it would be to find a magic bullet to solve this ple as a magic bullet, many studies underway have identified several foods that can possibly aid in preventing many chronic diseases and over time "can help to stop damage at the cellular level that can develop into disease." What are these "incredible" foods? In SuperFoods Rx, authors Steven Pratt and Kathy Matthews have identified "fourteen foods that will change your life." These foods are oranges, spinach, beans, pumpkin,

walnuts, blueberries, tea, oats, broc-

coli, turkey breast, wild salmon, toma-

Why are these particular foods being designated as "super foods?" The beans, turkey breast and wild salmon are all excellent sources of protein. More specifically, the beans are high in fiber; contain folate, magnesium, alphalinolenic acid, vitamin B6 and fiber. A recent study in the July Journal of Nutrition, based on one serving of

toes, yogurt, and soy.

black beans per day, linked black beans to a lower oxidant qualities, particularly green tea, which we risk of heart attack. Turkey breast is one of the leanest of all meats and provides an excellent source of B vitamins, phosphorous, selenium, and zinc. The wild salmon is rich in omega-3 fatty ac-

ids which are important for fetal brain development and are linked to reductions in many inflammatory diseases. As a point of information, USDA testing data results show that farmed salmon contains an average of 35 percent less omega-3 fatty acids than the wild salmon (USDA 2002).

We are all familiar with these "incredible" health issue! While it is not as sim-foods: oranges, blueberries, spinach, broccoli, pumpkin, and tomatoes. Not only are these fruits and vegetables high in vitamins and minerals, they all contain antioxidants which are being studied for their disease preventative qualities, with blueberries being at the top of the list for antioxidants. Recent studies indicate that tomatoes need to be cooked in order to reap the benefits of the lycopene, a substance found in tomatoes that had been shown to reduce arterial aging and increase prostate health.

> Walnuts are definitely a "super food." When consumed in moderation (a little goes a long way), walnuts provide healthy fatty acids (linoleic and alpha-linolenic acid, an omega-3 fatty acid). Just five walnuts (28 g) supply our daily needs in those acids. The fatty acids in walnuts are unsaturated fats and help lower cholesterol, which may reduce

> > heart disease risks. In addition to the fatty acids, walnuts are a good source of protein (15.23g of protein per 100g), and contain many vitamins and minerals such as potassium, magnesium, phosphorous, iron, calcium, zinc, copper, vitamin B9, B6, E, and A.

Completing the fourteen "super foods" are tea, oats, yogurt, and soy. Tea is on the list because of its anti-

hear so much about today. Since 1963, study after study has proven the beneficial effects of oats on cholesterol levels. Oats contain an antioxidant compound, avenanthramides, which is

unique to oats. This compound helps prevent free radicals from damaging LDL cholesterol which can reduce the risk of cardiovascular disease (study conducted by Tufts University and published in the June 2004 *Journal of Nutrition*). Yogurt, while be-

June 2004 Journal of Nutrition). Yogurt, while being a good source of protein and calcium, also "aids digestion, alleviates allergy symptoms, and lowers cholesterol." "Soy is an excellent source of protein and contains enough of all of the essential amino acids to meet human requirements when consumed at the recommended level of protein intake, and is considered equivalent to animal proteins in quality."

While all research on these "super foods" in many cases is not definitive, Colleen Doyle, director of nutrition and physical activity for the American Cancer Society, says these "super foods" "have to be part of an overall healthy diet. If you eat these foods and the rest of your diet is Twinkies and Big Macs, it's not going to work." My recommendation is to incorporate these foods into your diet and to continue to be educated on current

research studies regarding these health claims. Over time, we will see that eating the right foods will contribute to our quality of life. Please see the recipe I've included for an "incredible" way to start your day!

Enjoy!

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"Incredible" Cinnamon, Pumpkin, & Blueberry Oatmeal*

1 cup steel-cut oats

1/4 tsp. salt

½ cinnamon stick

1/4 cup preserved pumpkin or pumpkin pie filling

¼ cup fresh blueberries

- 1. In a medium saucepan, bring 4 cups water to a boil. Stir in the oats, salt and cinnamon stick. Reduce heat slightly and boil 10 minutes, stirring occasionally. Reduce heat to low and simmer 30 minutes; stir frequently until oatmeal thickens.
- 2. Stir pumpkin into oatmeal; divide between four warm bowls and top each with blue berries.

Makes 4 servings.

Nutrition Recommendations to Decrease the Risk of Cancer

Laura Gonzalez, Historian

Cancer is one of the top five killers worldwide and one third of the causes have been closely related to the lack of physical activity and an unhealthy diet. By being overweight or obese the risk several cancers increases. The reason behind this is the fact that obesity can lead to reflux into esophagus and can increase the amounts of hor-

mones, such as insulin and estrogen to stimulate cancer growth.

Anyone and
everyone can prevent the risk of cancer
by following a few simple guidelines that have
been recommended by the
American Cancer Society. Eat-

ing a variety of foods, especially those that are plant derived are strongly recommended. At least five servings of fruits and vegetables should be incorporated into our daily diet. Whole grain pasta, bread, rice, and cereals should be purchased instead of processed products. Foods that are fried, such as, French fries and chips should be limited. Red meats should be limited, instead fish, poultry, and beans are a better choice. Maintaining a healthy diet is very important. Adults are recommended to participate in

moderate/vigorous physically activity for at least 30 minutes per day and for children at least 1 hour is recommended. Small portions should be eaten at meal times in order to maintain a balanced calorie intake and physical activity (1).

For a healthy kitchen there are a number of basic ingredients, which every home should have. In the cupboard should be filled with pasta, brown or white rice, a variety of beans, potatoes, onions, low-fat soups, canned tuna in water, peanut butter, a variety of vinegars, and oils (canola

or olive). A refrigerator should be filled with a variety of fruits and vegetables, reduced-fat milk and yogurts, cheeses low in fat (mozzarella, Swiss, etc.), eggs, dressings reduced or fat-free, 100% fruit or vegetables juices (2). Just remember that we all have choices to make and you can decrease the risk of cancer by making healthier choices.



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Mental Illness in Minority US Populations: Does Nutrition Play a Role? By Joe Farar

22.1% of Americans

over the age of 18

suffer from a

diagnosable mental

disorder in a given

year.

Author's Note: This article, while intended for those of a nutrition persuasion (particularly those in the field of dietetics), it is applicable to all people interested in nutrition's potential benefits to mental health and its role on minority populations

in the United States. This article is not making any definitive claims but rather suggesting possible correlations and remedies.

Mental Illness and Nutrition

Over the course of our careers as dietitians, we will inevitably come across patients who have mental illnesses. While dietitians are not considered mental health specialists, it is important for us to be aware of these conditions and what relation it could have on overall

health. This article will discuss how nutrition and mental health may go hand-in-hand and what relation income and minority populations have on this.

According to the National Institute of Mental Health, 22.1% of Americans over the age of 18 suffer from a diagnosable mental disorder in a given year. (1) If one were to look at the current US census that would be over 62 million Americans! While no statistics have been done on how many patients dietitians see that have a diagnosable mental illness (to the author's knowledge), it is probably safe to assume that about 1 in 5 patients we see will have some form of mental illness.

Now hold on, you might be asking yourself, what does this have to do with nutrition? A lot actually!

According to a 2001 article in the Journal of Psychiatry entitled "Do Vitamins or Minerals (Apart From Lithium) Have Mood-Stabilizing Effects?" research conducted by agribusiness and mental health professionals have shown that sup-

plementing both human and animal diets with vitamins and minerals reduced the inci-

> dence of undesirable behavior. The study particularly focused on patients with bipolar disorder (manic depression) who took a mood-

stabilizing drug known as lithium (also

a mineral). What the studies found

were astounding; a good majority of the patients were able to quit their medications all-together and many were able to lower the dosage at which the medication had desirable effects on mood stabili-

zation! Apparently, the supplementation of extra nutrients in the diet reduced, if not, eliminated all symptoms of manic depression in these people. Other research has shown that the supplementation of omega-3 fatty acids in the diet can reduce the incidence of bipolar disorder. (2,3)

Studies conducted by Eugene Arnold have shown that the supplementation of omega-6 fatty acids are therapeutic in treating patients with attention deficit disorder. (4-6) Arnold's recent research suggests that a zinc deficiency might explain why some patients with ADHD do not show a more positive response to prescribed psychostimulants. (4)

Several large-scale double-blind placebocontrolled studies of RDA or high-dose multivitamin regimens in adults have reported improved scores of mood and cognition (7,8) as well as anxiety and somatic symptoms. (9)

SDFSA News

Despite the promising findings of these studies (and many others not mentioned), they in no way should be looked at as a "cure-all" for mental illness. As patient educators, we should look to studies such as these as suggestive aids to potential ailments. It is not in our jurisdiction to tell patients certain nutrients can cure a symptom if they have not been scrutinized fully by the FDA. The FDA clearly states that only drugs can be used to treat disease conditions. Nutri-

ents (i.e.: multivitamins) are not considered drugs unless they have undergone extensive testing and review by the FDA. The irony of this is that this will probably not happen anytime soon given vitamins, minerals, and macronutrients are not pat-

entable and thus, there is no profit-incentive by drug companies to fund this research, especially if these cheaper "nutritional supplements" can treat diseases just as effectively as an expensive drug! What we can do is *suggest* to patients that certain nutrients *may* help alleviate certain symptoms. Of course, that being said, we must be careful that the current nutrient(s) we are advocating usage of do not have negative interactions with a current medications the patient may be taking. Furthermore, in no way can we advocate or suggest to a patient that they get off their medication and try a nutrient cocktail over a pre-

scribed drug. You could be putting a patient at potential risk and you might be violating the law!

Mental Illness Prevalence, Is There a Connection?

While there are no conclusive studies on the proportion of mental illness distribution among different ethnic groups (to the author's knowledge), it could be said that minorities tend to experience greater symptoms of mental illness over those of Caucasian descent in the United States. According to a report by the Surgeon General entitled Mental Health: Culture, Race, and Ethnicity A Supplement to Mental Health, minorities have less access to, and availability of, mental

health services, are less likely to receive needed mental health services, in treatment often receive a poorer quality of mental health care, and are underrepresented in mental health research.

Lower social, economic, and political status may exacerbate these problems. (10) Given, the emphasis of proper nutrition may be even more important to emphasize, particu-



Igor, you blundering idiot ! I told you to steal a healthy brain ! Not the brain of a chessplayer !

larly to minority patients we may come across. One point to focus on would be that minority household incomes tend to be lower than the national average with exception to Asian American household income. (11) (It should be noted this is household income and not individual mean income. Each group may or may not have more contributing family members in one household and this must be taken into consideration) When there is less income, that means that food choices tend to become more limiting and thus, nutritional quality of the foods chosen may suffer as a result. It should be no surprise that if money

is less abundant a family would choose a cheaper product over a more expensive product that might have a better nutritional quality.

Ultimately, this leads us to make connections: Aside from socio-economic and political disparities that are visible in many minority populations, a nutritional deficit may also be contributing to the problems of mental illness due to less personal income (that is not to say that higher income

populations do not experience nutrition deficits as well; they just may be statistically less pronounced in those populations).

If this is indeed true, then we as dietitians have a role to play! While we are expected to know about nutrition, we should also have some understanding of how to shop economically; particularly, for foods of high nutritional value that are culturally sensitive to potential minority clients we may see. Getting accustomed to ethnic foods and their functional properties as well as their costs will help us better serve future clients.

This is not without saying: What about clients that will not alter their diet? In such a case, nutritional supplementation may be an option. While not ideal, getting some form of nutrient supplementation is better than none (i.e.: drinks like Boost and Ensure have been popular nutraceuticals used by dietitians at many hospitals for patients that may not get adequate nutrition or are on restricted diets). We can advocate particular supplements that may be lacking in the person's diet; however, we must not get complacent in thinking supplements are better than food. Ultimately, we should encourage getting nutrients from the diet as supplementation can result in inadequate absorption and toxicity.

Conclusions:

Supplementation of nutrients that may be lacking in the diet may potentially reduce the symptoms or presence of mental illness. While mental illness is found in all populations, minority populations in the United States may experience a greater degree of these symptoms due to potential nutritional deficits caused by less income. Dietitians have a role as patient educators to help

clients with less income to find foods that are acceptable to the client's income and cultural tastes, if any, and that are wholesome and nutritious.

Author's afterthoughts:

While the author tends to think mental illness is an exaggerated problem with respect to drug treatment, the author does not disregard that some drugs are therapeutic in some patients.

The author encourages all readers to do an exercise: go visit a market that sells foods that are popular cuisine in an ethnic group

other than your own. Compare and look at prices. See, if you can find any foods you think fit the criteria as inexpensive and providing high nutritional quality. Doing exercises like these will help you become better accustomed to clients likes and dislikes of culturally-sensitive foods and will help you find foods which fit in with a family's budget.

Finally, the author recommends all readers try different foods from different cultures. You might be pleasantly surprised at what you are missing out on! Eat, drink, and be merry!

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Study Abroad in **Mexico!**

Kathy Soltani, Publicity

This past summer, I got the great opportunity to travel to Mexico through a nutrition program with the Central Washington University. It was a great experience where I was able to learn about the culture and interact with the local people. As a future R.D, I believe that it is important to know about different cultures and ways of life and this experience was a perfect combination.

The program was a blend of classroom and fieldwork that provided unique opportunities for the students to get involved in the community and become familiar with nutrition, culture and language. Our group consisted of dietetic and nursing students who were mostly from Central Washington University. During the six-week program, we were involved in research project such as obesity, diabetes, nutrition in orphanages, water sanitation, and cancer in Mexico. Also, we were involved in community outreach programs and education. We worked with an organization

that helped educate underprivileged families about how to use soy in their daily cooking. Soy is a valuable source of protein and is more afford-

able than meat. Therefore, learning about these families. Also we were able to develop nutrition card games for children and organize events to teach children about nutrition.

Through this experience, I was able to live in a different country, learn new things, get involved in the community and meet diverse groups of people. I would highly recommend for students to look for these opportunities and get involved in educational programs abroad.





Kid's Fitness Challenge

Lisa Calanni, Member

On Saturday, October 15th, SDFSA members volunteered to join Executive Director, John Wardin and Kaiser Permanente in the Kid's Fitness Challenge, 2005, in Panorama City. This event represents a year-round initiative for school programs to help fight child obesity and to promote an active and healthy lifestyle for kids. Participation was free for students and family members, and they had the option to run, walk, or skate the 5k course. To encourage participation, many schools received funding for registering their students in groups of 50 or more.



It was great being able to contribute to such a worthy cause. We took some pictures to be able to share the day with you, too! Check out more pictures at http://sdfsa.constellation.net



Nutrigenomics By Lisa Calanni

In an era of everchanging technologies, scientific research and discoveries, we have gained much information on genetics and human

nutrition, specifically in the relationship of the two. The ways in which food components interact with the genome can have many effects in human health.

The emerging area of research being referred to is called Nutrigenomics. In essence, genomic information will be used to understand the basis of individual differences in response to dietary patterns¹. Therefore, certain deficiencies or chronic illnesses that one may be predisposed to, or are merely on the road to, may be prevented or treated through individual dietary therapies¹. Diet therapies would consist of consuming what are considered "nutraceuticals", or natural, bioactive chemical compounds that have health promoting, disease preventing or medicinal properties². Neutraceuticals common to many of us include phytochemicals which naturally exist in fruit and vegetable sources. Some examples of

the genetically related deficiencies include lactose intolerance, alcohol dehydrogenase deficiency, individual and population differences in blood lipid profiles and health outcomes after consumption of high fat diets¹. A physician may be able to identify a portion of your genotype using a fresh blood sample and quick analysis.

Obvious advantages of this research include preventative measures of diet related deficiency and disease, and treatment using diet therapy as an alternative to prescribed medications. This could lead to a direct reduction in medical care for the individual and government. However, there is still much to be learned in regard to factors affecting the genome, as well as the role nutrients may play. Error in diagnosis may be due to assessment techniques or incorrect evaluation of the results. There are also ethical and legal issues and social implications involved³. For example, if the food industry finds "gene-based diets" profitable, they could market toward specific genetic profiles or claim a product might help genetically4. This could leave those who are misdiagnosed in excess or deficient in amounts of nutrients specific to their dietary needs.

Genetic screening and applied diet therapy is a relatively young concept and although there aren't sufficient long-term studies for treatment,

SDFSA News

nutrition has proven to play a role in prevention of disease⁵. While waiting for the future to unveil the effects of nutrigenomics, we can counteract the role that genetics play in our health by taking control now and practicing our own preventive measures, which includes a well balanced diet and regular physical activity.

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No-Fry Potato & Spinach Latkes Aaron Flores, President

I use this recipe each year to make a low-fat version of the traditional Hanukah dish, latkes (pronounced "LAT-kahs"). It is traditional to celebrate Hanukah by eating fried foods. Since we all know the dangers of eating diets high in fat, this is the best solution I've found to help enjoy the holiday, but also stay healthy.

Ingredients:

4 tsp. olive oil divided

1 10oz. package of frozen chopped spinach (thawed)

1 onion cut into chunks

1 carrot, peeled cut into chunks

1 Tbsp fresh dill minced

3 medium Russet potatoes cut into chunks

2 eggs plus 2 egg whites lightly beaten

1/4 cup flour (white or whole wheat)

½ tsp. baking powder

3/4 tsp. salt

1/4 tsp. black pepper



Directions

- 1. Preheat oven to 450°F. Line two baking sheets with aluminum foil. Brush each baking sheet with one teaspoon of olive oil
- Squeeze out excess water from thawed spinach. Add spinach, onions, carrots, and dill to a
 food processor and pulse until mixture is fine. Add potatoes, egg, egg whites, and remaining 2
 teaspoons of oil. Process until finely ground. Blend in remaining ingredients (flour through
 pepper).
- 3. Drop mixture by rounded tablespoons onto the prepared baking sheets. Flatten slightly with the back of a spoon to form latkes. Bake uncovered for 10 minutes or until bottoms are golden brown and crisp. Turn latkes over. Back about 8 to 10 minutes longer, until golden brown.

Makes about 2 dozen laktes.

The Health Benefits of Drinking Water Tamanna Majed, Editor

Water plays a big role in how well our body functions. Yet most people have no idea how much water they should be drinking. The truth is that many of us don't' drink enough water, and from day to day we are in dehydration state. Almost 90% of the world's population is chronically dehydrated. The body is 60-70% water, which is 2/3 of our body weight. For example, blood is 83% water, muscles are 75% water, the brain is 74% water, and bone is 22% water. The simple put is the more water we drink, the healthier we can become.

"Water is critical to the balance of all the body's systems, including the brain, heart, lungs, kidneys and muscles. Proper hydration is the bedrock for maintaining healthy blood flow, kidney function, salt/electrolyte balance and digestive functions" -William W. Dexter, MD, FACSM, Director of Sports Medicine Program.

Drinking adequate amount of water will help to provide the following benefits:

- Relieve/Prevent: lower back pain, Chronic Fatigue Syndrome, headaches, migraines, asthma, allergies, colitis, rheumatoid arthritis, depression, hypertension, cholesterol, hangovers, neck pain, muscle pain, joint pain, bloating, constipation, ulcers, low energy levels, stomach pain, confusion and disorientation.
- <u>Maintain:</u> muscle tone, weight loss, clear and healthy skin.
- Regulate: body temperature, remove toxins and wastes, cushion and lubricate joints, decrease risk of kidney stones, protect tissues, organs and the spinal cord from shock and damage.
- Assist In: the digestion & absorption of food, and in transporting oxygen and nutrients to the cells.

Don't wait until you're thirsty to have a drink. If you are thirsty then you are already dehydrated and most likely the damage has already been done according to William W. Dexter. Constantly drink water throughout the day. Try to get a habit of bringing water bottle with you everywhere you go. An average person should drink about 8-12 glasses of fluid a day, however these numbers need to be adjusted to your activity level, bodyweight, and diet.



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SDFSAews



The Student Dietetic and Food Science Association was formed in 1974 when the American Dietetic Association encouraged student participation in professional organizations. It was formed to give dietetic and food science students a chance to learn about their chosen profession and to network with professionals in the field. SDFSA provides its members with valuable dietetic, nutrition and food science information.

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