

Gee whiz: The healthy foods of my past

We live in a time of fabulous excess. I can go to my local supermarket and purchase almost any product imaginable. This abundance of available produce continues to amaze me. I can buy strawberries, grapes, avocados, peppers, pears, and more—year round. In addition, organically grown food and free-range meat is everywhere. Yet we live in a time where our population is unhealthier than ever. Obesity and its associated list of diseases—heart disease, diabetes, etc.—is a growing problem of epidemic proportion. Despite the widespread availability of these healthy foods our BMIs are rising like helium balloons.

My generation wasn't as overweight, so maybe it's time to revisit some of the healthy foods of my childhood. Perhaps if these mainstays were reintroduced to schools and families the obesity epidemic could be stayed or even reversed.

I am sure the double strands of my DNA are bound together by Cheez Whiz. Everyone born in the 1950s and 1960s knows that the only purpose for celery is as a receptacle for this orange

goo. I remain faithful in the belief that there is at least some real cheese in there somewhere. If you look up the definition of the word *whiz*, you will find that it is “to make a whirring or hissing sound as of an object speeding through air.” How can this be bad for you?

How about bologna? I went 30 consecutive days in grade 7 consuming at least some of this meaty goodness—fried, raw, in sandwiches, covered with Cheez Whiz—I ate it all. Now don't concern yourself too much with what is in bologna. On road trips through farmlands I can remember my parents pointing out cows, pigs, and chickens, but I don't recollect them saying, “Oh kids, look at the baby bolognas.” All I know is there is nothing like a fried bologna sandwich on Wonder Bread. What exactly is the “wonder” of this bread that we are supposed to wonder about? Carefully constructing a 1-inch layer of Skippy smooth peanut butter without tearing the bread was a wonder indeed. Not only would your mouth water anticipating the peanut adhesive stuck to the roof of your mouth, but you were elevating your fine motor skills to a

new level. What joy to wash this down with cherry Kool-Aid or orange Tang (the chosen beverage of astronauts).

I would be remiss to not mention Spam. We all accepted that there was some meat present, but the real mystery was the gelatin-like substance that bound it together. Clearly, this came from outer space (I think the astronauts brought it back to complement the orange Tang). It is a travesty that the word *spam* now stands for unwanted electronic messages.

So perhaps it is time to scrap the organic section at our local grocery stores and replace it with childhood foods of the baby boomer generation. Hello, the name says it all—we are booming. The problem is with all these so-called experts who testify that these products aren't natural or healthy. To them I say, “the proof is in the Jell-O pudding.”

—DRR

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Privacy

have become aware recently of how much personal information is tossed about indiscriminately, and how we seem to worry about this less than we should. The advent of social networking, with the technology to allow it, has meant that little personal information stays private for very long.

Confidentiality is at the heart of the doctor-patient relationship. Without it, we would have a hard time taking a proper history, and without it we could not be seen as reliable and trustworthy professionals. Our patients trust us to keep their personal information secret, even though the boundaries of such trust may be stretched when we discuss cases with colleagues or at rounds. And yet anyone walking the corridors of any reasonably sized hospital will pick up snippets of information that they really should not hear.

Sometimes it's much more than that. Imagine that your elderly mother

has been taken to the ER because of acute abdominal pain and vomiting. Now, imagine that you find her being interviewed at high volume (she is hard of hearing) and examined behind poorly drawn curtains in a busy unit. Her distress during the examination is heard (and partly seen) by all in the vicinity. Because she is by nature an undemonstrative person, her discomfort is extreme. It's a distressing scenario, and we cannot assume that she is prepared to surrender her dignity in order to receive care. Her distress—and yours—would be greatly reduced by the provision of privacy during her assessment. It's not much to ask.

But it's not just in clinical and hospital settings that privacy doesn't seem to be as important as it should be. The CMA's Code of Ethics requires physicians to disclose a patient's information to a third party only with the patient's consent or as required by law

(which relates to the public good). Pharmaceutical companies, in seeking to improve market share, have taken to using market research companies to probe how clinicians think when they formulate management plans. The market research companies dangle cash in front of clinicians to obtain "patient profiles," assuring respondents that such information will be kept confidential and will be used only to improve patient care (no mention of industry profits or market share).

When I responded to one of these requests by saying that I did not have consent from my patients to share their information with a market research company, I was assured again that the information "would be kept confidential." But, I said, if I've passed a patient's information on to you, then it is no longer being held in confidence by me—right? The market research company's response was tangential, assuring me that they adhered to the International Code on Market and Social Research. Good for you, I responded, but the fact will remain that I have breached a patient's confidence by passing on his or her details to you, and will have profited by doing so—with no benefit for the patient. I hoped for a further response, but didn't get one, and can only assume that my e-mail address has been removed from another list (or transferred to a black one).

From Hippocrates onward, we have all been made aware of the need to respect every patient's right to privacy. Expediency and legal issues mean that this right is sometimes stretched and very occasionally (because of legal considerations) waived. But in every case we should think twice before disclosing any patient information to others, and if in doubt seek consent from the patient to do so. We all have information about ourselves that we surrender with reluctance. Who we surrender it to should be up to us.

—TCR

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