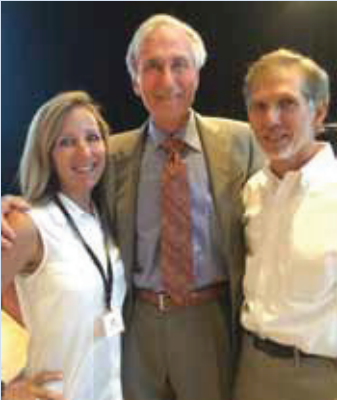


An Interview with John McDougall, M.D.

by Mark Huberman



Dr. McDougall, center with Wanda and Mark Huberman

During my recent visit to TrueNorth, I had the privilege of meeting, for the first time, Dr. John McDougall, one of the true pioneer medical doctors of the modern day “plant-based” health movement. He and his daughter, Heather, graciously invited my wife, Wanda, and I to attend part of his 3-Day Advanced Study Weekend, which happened to be taking place at the same time. It was a remarkable, first-class event (streamed live online) attended by approximately 300 people who were treated to powerful presentations by Anthony Lim, M.D., T. Colin Campbell, Ph.D., Jeff Nelson, Dean Ornish, M.D., and so many more. Shortly thereafter, I had the opportunity to sit down with Dr. McDougall and conduct this interview. I think you will quickly get a sense of Dr. McDougall’s “take no prisoners” style, which for me was reminiscent of the late Dr. Herbert Shelton, whose signature motto was, “Let us have the truth though the Heavens Fall.” Like Dr. Shelton, Dr. McDougall has long challenged the vested interests of the medical, food, and drug establishments and never cared who he might offend along the way. While you may find a few of his opinions controversial, there is no denying the soundness of the basic principles he advocates, the profound influence he has had on our health movement, and the key inspirational role that

he, like T. Colin Campbell, Caldwell Esselstyn, Dean Ornish and others have played in inspiring a whole new generation of physicians who are willing to advocate a plant-based diet.

From what I have read, you didn’t grow up in a family that followed anything close to a plant-based diet. Is that accurate?

That’s true. My mom and dad believed that the most important nutrients to feed their children were calcium and protein, and these usually came in the form of animal foods. They were in step with other parents at that time and, sadly, with most of the parents of today. My mom and dad believed that as long as you got enough protein and calcium that everything was not only sufficient, but superior, even though there’s never been a case of calcium or protein deficiency ever reported. As a result, I was well-nourished on a diet of bologna and eggs, bacon, and inch-and-a-half-thick steaks.

Did you grow up on a farm?

No, we lived in the suburbs of Detroit. What we ate was typical fare. My father was a very intelligent man, but he struggled and didn’t have a college education. As a result, he worked very hard at Ford Motor Company, and he and my mom provided for us kids the best they could. Unfortunately, “the best they could” included a diet that almost killed me. The food I was regularly eating sickened me throughout my childhood. I suffered from flus and lost my tonsils at age seven. My endurance was virtually nonexistent, and in junior high school I was the last kid left on the running field. I realize now that it was because I was on a low-carb diet.

Is it true that the beginning of your medical education started with a stroke you suffered at age 18?

Yes. In fact, it was almost 51 years ago to the day. It happened when I was at Michigan State University and I was put in isolation overnight because they thought I had an infection. Then I went to Grace Hospital in Detroit where they did a spinal tap that proved no infection. They did all kinds of heart and brain tests on me and maybe an echocardiogram. One thing I remember them doing to me was a “bilateral carotid artery stick,” which is an angiogram. Nowadays they do this through the leg, but back then they did it through my neck. I woke up the next morning after having two needles stuck in my carotid arteries with dye, where it showed a lacunar infarct, a rupture of a plaque in the right side of my brain. I woke up with a blood clot and my chin touching my chest. I also remember after two weeks of hospitalization that I could barely move my thumb. In all that time, they had done nothing helpful for me, so I signed myself out of the hospital.

The protocols for the treatment of stroke 51 years ago can’t be as advanced as they are today, right?

Actually, there has been no benefit to the patient in the last 50 years. The only difference in protocol is that today if I left the hospital I would leave on an anticoagulant of one kind or another, like Coumadin, or on statins.

How did the stroke affect you?

My entire left side was affected, and I still walk today with a pretty significant limp. So, I didn't completely recover. But in terms of relative recovery, I was pretty functional after about three months, and at about six months I gained maximum recovery. I still wind surf and play with the grandkids, and I actually carry some of the grandkids in the backpack; that is until they get too big!



Dr. T. Colin Campbell, Dr. Caldwell Esselstyn, Jr. and Dr. John McDougall at Dr. McDougall's Advanced Study Weekend (photo by Scott Hurlbert).

When you went through medical school at Michigan State, was it true for you, as it was with so many of your colleagues, that nutrition was a nonexistent subject?

Completely. Even the meals we ate were devoid of nutrition. I can remember the lunches I ordered at Grace Hospital: I'd have a double cheeseburger for lunch, and bacon and eggs for breakfast—and I was a stroke victim! Today, in 2016, 51 years later, if I went to that hospital I'd receive the exact same education and meals. Nothing has changed.

Why do you think that is? Certainly many of your teachers and colleagues in modern medicine are good people with integrity, who love and believe in what they do. Why, with all the information out there today is the information and education in medical schools still so limited?

Because the people who run medical schools are just people with normal human behaviors, and one of those behaviors is to self-serve. It's natural. I tell all young physicians—even the progressive ones like my son, Craig, Colin Campbell's son Tom, and others—that they possess the truth and know how to cure heart disease and prevent it. They also know that heart surgery does not save the lives of the chronically ill. They likewise know that colonoscopy and PSA testing is a scam that harms millions of people. They know the truth is on their side, but they also know that practicing medicine like this makes it harder to send their kids to college.

It's not easy to make money from telling the truth. But there's a hundred-billion-dollar-a-year pot of money that's

being taken by the heart surgery industry, and that money is also available to doctors who are willing to tell the truth. It takes fighting for, but it's there for them: a hundred billion dollars, just in terms of heart surgery. The same is true with the cancer industry, which generates a couple hundred billion dollars.

Dr. Herbert Shelton, one of the founders of

the Natural Hygiene movement, wrote back in the 1920s that one of the most difficult things for human beings in any sphere, and certainly in medicine, is seeing beyond their education, conditioning, and training because it instills bias. Do you agree with that?

Yes, but it is mostly hard for human beings because of money. It's not because the information is not available. It's available for the inquisitive mind, or sometimes it just confronts you in the course of your life, like with me having a stroke. If I wouldn't have had a stroke, I wouldn't have become a doctor and I wouldn't be sitting here talking to you.

The information is available; it's just not grasped by most dietitians and physicians in training. The reason it's not grasped is that there's no financial future in talking about the truth; that's the problem! In medical schools today, only 11% of doctors decide to become generalists and the other 90% decide to become specialists. Why is this? Because specialists make twice as much money as a generalists.

But isn't this also because young doctors typically have a lot of debt to retire?

Yes, they do. If you are four or five hundred thousand dollars in debt when you get out of medical school, maybe that's all you can see. But is that a reason to be dishonest with yourself and the rest of your life? I'm almost 70 years old, but they have the rest of their lives. They're in their thirties and they have another 40 years to go. I would ask them: "Do you want to live out those years as a lie?"

Many doctors know they are doing things that are wrong, like colonoscopies, performing surgeries for chron-

"The information is available; it's just not grasped by most dietitians and physicians in training."

ic coronary artery disease, aggressively treating type II diabetes, and prescribing drugs for their multiple sclerosis patients that cost \$80,000 a year. They're risking 40 years of their life living a lie; this compared to doing the right thing and taking a risk financially. To me it's a no-brainer.

When you look back, was there an "ah-ha" moment where you felt you had figured out the truth?

If so, I can't really remember it. As you might guess, I've always been a questioning, angry student. It probably goes back to my college years where I really was ineffectual. I went to medical school and knew nothing about diet, but I sure knew that what they were teaching me had some flaws. Questioning my teachers almost got me thrown out of medical school, twice. Then during my internal residency, I had learned more about diet, and again, I almost got thrown out of my residency, twice. By good fortune and some friends, I graduated and became a doctor. Overall, it was a quick progression from ignorance and blindness to becoming more open-minded and with my eyes wide open, understanding that what I was doing was wrong.

When did you first begin running inpatient health programs where you would teach the benefits of a plant-based diet?

Around 1987 I worked at St. Helena Hospital in Napa Valley. St. Helena is notable because it's a Seventh Day Adventist hospital. I'm not an Adventist in my own faith, but I have been involved with the Adventist community because they have quite a history in thinking about health, dating back to Alan White, which goes back to the natural hygienists of the 1800s.

Speaking of the natural hygienists, are you familiar with the works of Jennings, Trall, Tilden, and Shelton?

A little bit. It's been a while since I read about them, but I've become familiar enough to know and respect the struggles they went through and the value of what they did. I've never taken, obviously, the course as strictly laid out by the natural hygienists.

When did you officially begin your "McDougall Programs" in Santa Rosa?

I started running my own programs in 2002 and we have been going strong for the past 14 years. We run six or seven private 10-day programs a year. We usually have 40 to 50 people in each program, most of whom have cancer, heart disease, or diabetes. I used to see all the patients personally until about a year and a half ago when I was joined

by Dr. Anthony Lim.

How do the 10-day programs work?

When patients arrive, they are immediately introduced to our food. We explain that this is not a drug rehab program, and some quickly find out where Starbucks is, and if they're drinkers, they hoard their alcohol in their room. We make absolutely clear that this is a food-based program.

Within the first 48 hours they are all seen by a medical doctor for a half-hour visit that includes a complete health history and physical. Most of their medications are stopped or reduced, and by that I mean all diabetic pills, most high-blood pressure pills, and most insulin for type II diabetes. Arthritic medication is moderated, and most indigestion and constipation medication is stopped. All heart medicines are also stopped.

A recent study of ours published in the *Journal of Nutrition* demonstrated that 85% of the 1,615 people in the program saw their medication stopped or reduced, and this almost always happens on day one of their initial intake. Then we feed them high-quality food, which happens to be vegan but that's not the focus. It also happens to be oil-free, which is a very important focus. And it happens to be starch-based, which I consider of para-

mount importance. People in the program learn that they are starch-eaters, and until they learn that, they will be totally out of control on any type of vegan, raw, or other diet.

Is their health monitored during the period in which they are there?

Yes. Every day they have an intake in the morning with blood pressure and blood sugar monitoring (if appropriate). We do blood work both at the beginning and end of the program.

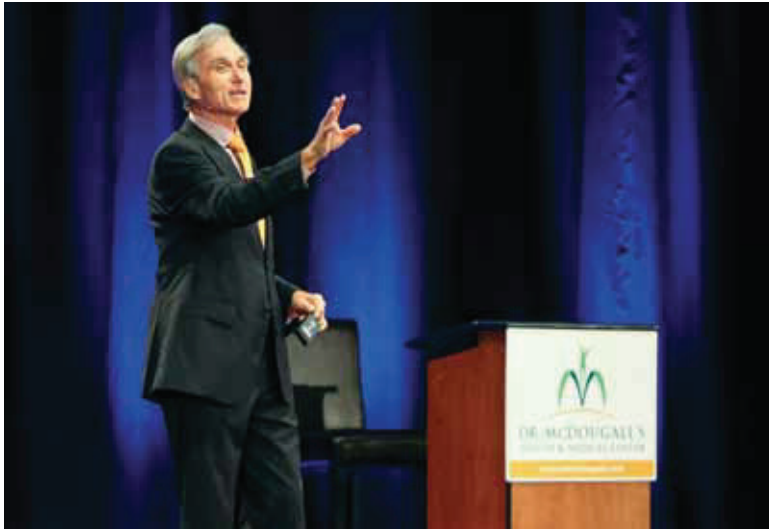
Has the program changed over the years?

Why should it? People look at me who have read my books from 35 years ago and they say, "You haven't changed." Well, why would I change? The truth hasn't changed. The sun still rises. Factory farming still causes global warming. The truth does not change. So there is no reason to. Of course, I certainly keep my eyes open to new information.

What is your 3-Day Intensive Program?

Once a year, for a lower price, we offer a 3-day program where all of our staff teaches from the same bible:

"95% of the 1,615 people in the program saw their medication stopped or reduced, and this almost always happens on day one of their initial intake."



Dr. McDougall lectures at his Advanced Study Weekend in September 2016. (photo by Scott Hurlbert)

The McDougall Program.

What is the history behind your 3-Day Advanced Study Weekends?

When I was a young doctor, I occasionally had the chance to go to medical meetings that were hosted by people who had nutritional orientations, such as Dennis Burkett and Nathan Pritikin. I thought this was a great concept, to bring together people of similar interests. For the past seven years I have been organizing bi-annual meetings, called “Advanced Study Weekends,” where the theme is nutrition.

However, the speakers I invite don’t have to agree with me and my philosophies. For example, we had a speaker at our last event who talked about the Mediterranean diet. Unfortunately, at the end of the meeting I had to stand up and tell him that pretty much everything he said was a lie. But I had to do that for my audience since most would not catch all the points of dishonesty in his lecture. In fact, at almost every Advanced Study Weekend there’s at least one lecturer who gets the full wrath of my personality, coupled with my very thorough understanding of the science. Political correctness has never been one of my outstanding characteristics.

Tell me about the McDougall adventures.

We run two vacations a year, and we take people to all kinds of interesting places like the Amazon, the Galapagos, Costa Rica (23 times now!) and, most recently, Alaska. We’re taking a group to Kauai in January. The main focus is to enjoy a nice vacation and also eat well. The average weight gain on a seven-day cruise is 10 pounds. If you

vacation in the U.S. you might be able to find food that is healthy. But if you leave our borders, it’s almost impossible to find food that does not contain animal products and oil, both of which contribute significantly to weight gain.

So when you organize these trips, do you take charge of the menu?

Oh, absolutely! Keep in mind that food is an extremely important part of every program and event we do. Just like the Advanced Study Weekends, all the meals on the trips are served according to the McDougall diet, with some regional flair, and the food is included in the price, whether you eat it or not. You can’t come and just pay for the lectures and go eat at IHop.

Does your website provide everything you need to know about your programs?

Yes, that’s where people can find everything. In fact, one of the things I am most proud of is that essentially everything is free on my website. All of the articles I’ve written on various subjects, from colonoscopy to treating type II diabetes, are free. There are probably 500 free recipes as well. A couple of months ago we developed a new McDougall Cookbook App, which has been in development for six or seven years. I think it is one of the best recipe apps out there.

You seem to attach a very high importance to food and don’t talk much about exercise, rest, fresh air, and emotional poise like many others do. Do you not consider these other factors as being integral to a healthy lifestyle?

No, I don’t. I’d say that food is between 90 and 99% important to a healthy lifestyle. One thing about food is you have 100% control over it. It can’t slip secretly by your lips. The food that I recommend is also about one-third as expensive as the food most Americans are eating today, so you save money. Switching to a plant-based diet is also kind to the environment and addresses the issue of cruelty to animals.

In my view it’s not “diet and lifestyle,” it’s just diet! The problem is that when you focus on the lifestyle, it gives you an excuse to take the pressure and focus off of diet. For example, you could have bacon and eggs for breakfast and a ham sandwich for lunch, and justify it because you did aerobics at the gym for an hour and a half. Exercise cannot compensate for dietary sins.

I believe that people will drop dead at an equal or greater rate whether or not they exercise—and in fact, you are more likely to be injured doing exercise than if you didn’t. I wind surf, and if I fall in the ocean there may be great white sharks nearby that could eat me alive! I know

that. But I don't do it for health, I do it for fun.

But you don't deny the benefits of exercise do you?

What are the benefits? I'm not any thinner or healthier because I wind surf. I just go out and have a good time. To put it into perspective, there are three things other than clean food you can't argue about in terms of being effective with no side effects. These three things have only benefits and no side effects, and they are: clean air, clean water, and sunshine.

You and I may argue about what is clean food and we'll leave that open for discussion. But what I'm saying is that exercise is something most people should do for enjoyment. If you look at the overall morbidity and mortality of people who exercise and those who don't, the greater risk goes to the exercise group; these are just clear, hard facts. So what is reasonable exercise? Well I think human beings are mostly designed to walk. At our 10-day programs we set aside time for patients to go on walks, take yoga classes, and swim because these things are enjoyable.

What about rest, meditation, and the like?

I certainly understand that people have different viewpoints. I particularly enjoyed hearing Dr. Dean Ornish at our last Advanced Study Weekend. Dean, of course, knows about all diet issues, but he is very much into love and relationships, good feelings, and so on. I enjoy his presentations and the way he expresses himself, and even appreciate the feelings he has towards me. But this is something I've never really gotten into. Dr. Anthony Lim, our program's medical director, is very kind and positive, and relates more to the softer side of people than I do.

I tend to think that many other aspects (aside from diet) can be a scapegoat for real problems. Throughout my medical training I would watch how my teachers would take a neurotic or depressed person, and turn their—what I consider to be normal—human emotions, into the causative factor of disease. And that's untrue. We know it from WWII studies of Western Europe where people were subjected to the tremendous stresses of Nazi Germany. I mean, how much more stressed could you be? And it should be noted that during that same time during WWII, heart disease virtually vanished in Western Europe, as well as type II diabetes and multiple sclerosis.

How were all the conditions that we call "emotional diseases" managed during times of great stress? And we could probably carry the story over to Cambodia and Thailand and the killing fields of Asia. We have to remember that the diseases that we're talking about are killing 90%

of Americans, and these same diseases didn't exist long ago in times of tremendous duress, stress, or whatever manner of inhumanity you want to cite.

It's the food! And until people walk up to the table and say, "I'm not going to allow that kind of food into my body," then they're not dealing with the problem of fixing their own health and the health of the world.

Looking back over the four decades that you have been teaching healthy eating, are you optimistic that people are becoming more enlightened about taking control of their health?

I have no doubt that we have some real advantages these days. For 15 years of my life I was on talk radio doing syndicated shows. I thought talk radio would save the world; that was until all individual stations were bought up by four right-wing-leaning companies who all but destroyed talk radio. However, now with the internet, every young person is constantly connected to great information via their cell phones.

"I tend to think that many other aspects (aside from diet) can be a scapegoat for real problems."

Do you draw optimism from the fact that while you were a pretty lonesome cowboy presenting the McDougall Programs back in the 1970s, you are now joined in the effort by the many similar health programs being offered by Joel Fuhrman, the Esselstyns, the Campbells, and others?

There certainly has been a lot of progress. But just to bring things back to reality, there's an election very soon, and look at the two candidates and tell me if life makes sense. Incidentally, both candidates are relatively aged and are at risk for health problems. Last week I invited both candidates to enroll in my program and promised them that they could lose 10, 20, or 30 pounds easily, get control of their health, reduce their risk of heart disease, and improve their mental acuity and endurance. So far, I have not heard from them.

Many of your peers in this movement are varied in their approaches. For example, Dr. Alan Goldhamer and the Hygienists stress the importance of being "Vegan SOS-free," the Esselstyns urge the avoidance of nuts, oil, and avocados, and Dr. Joel Fuhrman encourages the use of nuts and seeds. Do you feel that these differences are outweighed by what they have in common and that they all get good results?

You're absolutely right. There's a strong coalition of men and women who are making great contributions to this movement, most of whom I invite to my weekends. Fortunately, the list is growing and there is no question we are going in the right direction. But it's not a question of where we're going and can we fix the problem, it's a question of can we do it in time.



Dr. John McDougall and Mary McDougall with their grandchildren. (Photos this page by Robert Stewart)

I want to ask you about your relationship with Dr. Alan Goldhamer.

Alan and I have been friends for probably 35 years, and we have both worked near each other since at least 1987. We now work literally down the street from each other. What Alan does initially with water fasting is something I don't do, and I don't have the knowledge or interest in doing it. But just because I don't know everything about it doesn't mean it's not valuable or important. I value Alan as a friend and as a professional colleague, and I respect the work he has done for more than 30 years. You can't fast forever, and when you stop the water fasting you must eat. For 30 years Alan has taught, basically, our plant-based, oil-free program, but without added salt or sugar.

It looks like you have a nice working relationship and a lot of mutual respect.

Alan and I have been personal and professional friends who have shared many things in life. In fact, I can't remember many disagreements, except maybe about the use of salt, an area that both Alan and my good friend, Jeff Novick, disagree with me about. I think you need to get some salt, but even if I am wrong about it not having such bad effects, the thing that Jeff Novick, Alan Goldhamer, I and everybody else has to agree on is that you must get people to eat the food. And when you take salt out of the diet, I have found that it's the number one thing that people miss. The food is tasteless. When you add salt it becomes tasty. So we've got to get people to eat the potatoes and the rice and the corn. And if I have to make a compromise in some people's points of view, by adding a little salt to the surface of the food, I will do it.

Doug Lisle recently said something like, "People are always


looking for reasons to support their bad habits." Do you agree with that?

Yes, that's one of my epitaphs: "People love to hear good news about their bad habits."

One of the things that impresses me the most is the role you have played for such a long time in bringing together so many of the leading voices of the plant-based health movement. Do you think you deserve special credit for that?

I am not looking for credit, and certainly not fame or money. I'll tell you what I am looking for, and that is to win. And whatever I have to do I will do, because when the game is over, when it's all said and done, whether I'm here or not, I want my grandkids to look back and say, "Grandpa, you tried your hardest."

P.T. Barnum once said that if you love what you're doing, you'll never work a day in your life. It sounds like that's what you're doing right now.

There is no doubt. I consider myself a very fortunate man. My good fortune started when I met my wife, Mary, which has certainly been one of the greatest gifts I've ever received, as well as continuing to have a job that I look forward to every single day. 



John and Mary McDougall



John McDougall, M.D. is a board certified internist and nutrition expert who teaches better health through a starch-based diet, and has been studying, writing, and speaking out about the effects of nutrition on disease for over 30 years. He and his wife Mary are the

founders of the McDougall Program, a 10-day residential program in Santa Rosa, California, and have authored several nationally best-selling books, with the most recent book just out, entitled, *The Healthiest Diet on the Planet*. The McDougall program promotes a broad range of dramatic and lasting health benefits, and can even reverse serious illnesses, including high blood pressure, heart disease, and diabetes, and all without drugs. A graduate of Michigan State University's College of Human Medicine, Dr. McDougall performed his internship at Queen's Medical Center in Honolulu, Hawaii, and his medical residency at the University of Hawaii.