



Article 27\*

## The Non-Medicated Life: The Benefits of a Predominantly Plant-Based Diet, Part One

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*This is the 27th in a series on optimal diet and lifestyle to help prevent disease and responsibly avoid an over reliance on medications. This complementary approach is based in the medical evidence of the most successful research trials and the best science available. Any planned change in diet, exercise or treatment should be discussed with and approved by your personal physician before implementation. Consultation with a registered dietitian is strongly advised*

Medicines are a mainstay of American life and the healthcare system not only because they are perceived to work by the individual taking them, but also because their benefit may be shown by the objective assessment of scientific study. Clinical research trials have shown that some of the medicines of Western science may reduce the risk of heart attacks, strokes and cardiovascular death.

In the first 26 installments of The Non-Medicated Life, informed diet and lifestyle have been shown to accomplish naturally for the majority of individuals, many, if not most of the benefits of medications. This is especially true for the adoption of a predominately plant-based diet. As demonstrated in Part One, such a dietary focus may reduce cardiovascular risk dramatically by reducing cholesterol, lowering blood pressure, helping to avoid obesity, and reducing blood sugar and the risk of developing diabetes. Additionally, as will be addressed in Part two, which will include examples of a plant-based diet, such a focus when it supports natural farming methods, implemented locally, will reduce our profligate use of petroleum and contribute to a reduction in global warming. Indeed, with such a dietary focus what's good for the human can be shown to be good for the planet.

What is the optimal human diet? It is the diet of our ancestors of 150,000 years ago, when

the make up of human genes was determined by those individuals who survived in a time of relative scarcity. We were omnivorous of necessity, foraging for roots, nuts, and wild berries; hunting for the meat of animals when we could; cultivating the growth of native plants. An examination of human anatomy and biochemistry supports this notion. Human teeth contain both incisors for tearing flesh as well as flat molars for grinding plants, grain and nuts. Human biochemistry requires B-12 which can only be supplied by eating meat or animal products. The diet was predominately plant based, naturally high in fiber and low in saturated fat, simply because such were the foods which were available. These specific dietary fuels in turn selected for a unique biochemistry to best utilize such fuels.

Widespread scarcity and hunger have been part of the human experience up to only the last 100 years. Even the advent of agriculture 5-10,000 years ago supported the predominately plant-based makeup of the human diet. Such a plant-based diet contained more omega-3 fats than today. One hundred years ago, the ratio of omega-6 fats to omega-3 fats in the human diet was 3 to 1 in large measure due to the predominately plant-based makeup of the diet. Even the animals which were eaten contributed to the higher omega-3 levels in humans. The flesh of animals at that time contained more

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omega-3 because the diets of the animals themselves contained more omega-3. Wild and domesticated animals either consumed a plant-based diet or in the case of carnivorous animals consumed the flesh of animals which had eaten a plant-based diet.

In the 21st century and for a good part of the 20th century both the amount and composition of food changed. Meat was more available and compositionally contained less omega-3 fat. Animals raised on corn contain omega-6 fat which is the predominant fatty acid of the corn plant. With the consumption of more meat and fewer plant based calories, the ratio of omega-6 to omega-3 in the human diet changed to 30 to 1. Such a change has had a significant impact on cardiovascular health. As compared to omega-3 fats, omega-6 fats lead to increased inflammation in the arteries of the body and an increased constriction of blood vessels. Increased inflammation will increase the risk of heart attack and increased constriction of blood vessels will increase the risk of high blood pressure as well as heart attack.

The greater availability of meat which is high in saturated fat has led to a marked increase in this fat in the diet of humans in the Western world. Saturated fat, once consumed, results in the production of LDL or the “bad” cholesterol. LDL cholesterol then becomes deposited in the walls of the arteries including those of the heart and brain. This LDL deposition called a plaque is a necessary precondition for a heart attack or stroke. In populations in which the diet is predominately plant-based, the average LDL cholesterol in the blood runs about 70 mg/dl. and plaque formation as well as heart attacks and strokes are rare. In populations, however, in which the diet is predominately meat-based the average LDL cholesterol runs about 140 mg/dl. and heart attacks and strokes are epidemic.

Predominately meat-based diets also are more calorically dense than plant-based diets. The result is an increase in total calories resulting in a large proportion of the population becoming overweight or obese. An increase in body weight of more than 5 pounds above ideal may contribute to an elevation of blood pressure; an increase of more than 20 pounds above ideal weight may lead to both an elevation of blood fats called Triglycerides as well as a lowering of HDL or the “good” cholesterol. An increase of more than 20 pounds above ideal may also result in an increase in blood sugar, especially in individuals with a family history of diabetes. Without weight loss the pancreas of such an individual becomes damaged, insulin producing cells die, blood sugar continues to rise and diabetes ultimately results.

In summary, the optimal diet in humans is a predominately plant-based diet. Adoption of such a diet may dramatically lower cardiovascular risk by naturally lowering blood pressure, reducing the LDL cholesterol, raising the HDL cholesterol, reducing inflammation in the arteries of the body, and reducing the risk of obesity and diabetes. Examples of such a plant-based diet will be addressed in Part Two. With all the cardiovascular benefits which result, the adoption of a plant-based diet may be viewed as a natural way to avoid the proverbial bottle of pills in managing some of our most important health problems.

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