

Why Raw Milk?

(The purpose of this report is to bring to the attention of the Board of Health the reasons why there is an ever increasing number of families that are requesting access to clean raw milk and why prevention to access to raw milk constitutes a harmful action.)

More than ever people today are aware of health and lifestyle issues, and are interested in taking responsibility for their health and the health of their families. They are interested in the causes of disease and strategies for disease prevention. They are no longer willing to accept the medical paradigm that treats the symptoms of illness, but ignores the causes. In accepting responsibility, these well informed individuals find it hard to believe that their right to self determination, the right to choose foods that they believe clearly pose so little risk and provide so many benefits, have become illegal. They believe the denial of these rights constitutes a violation of fundamental constitutional rights of freedom of choice and self determination.

A 2000 World Health Organization study ranked the U.S. health care system at number 31 overall, first for the most expensive (1.4 trillion), spending almost twice the amount per capita than the next two most expensive countries, and first for the most degenerative disease. The U.S. was ranked consistently from 20th to 25th in areas including life expectancy and infant mortality (WHO, 2000). The contradiction is readily apparent.

The American public has a growing awareness of this contradiction and there is an increasing body of evidence that points to the current health crisis in this nation as rapidly spinning out of control. The plague of heart disease and cancer is being joined by the modern epidemic of diabetes, and the prediction by some scientists that one out of three Americans will soon become type II diabetic (Fallon, 2004). Additionally, obesity, allergies, asthma, autism, immune deficiency, and many other illnesses are overwhelming our children. Many people have lost faith in our health care system, and consequently are looking to what produces health.

A 1993 special article in the *New England Journal of Medicine* indicated that “in 1990 Americans made an estimated 425 million visits to providers of unconventional therapy. This number exceeds the number of visits to all U.S. primary care physicians (388 million). Expenditures associated with use of unconventional therapy in 1990 amounted to approximately \$13.7 billion, three quarters of which (\$10.3 billion) was paid out of pocket (NEJM, 1993).” Americans are looking for something that works.

“No one is really happy with the current system. Patients, physicians, the people who pay for care, all are frustrated. We haven’t gotten it right. Our system is out of balance...It’s a mess,” states Nancy Dickey, MD, former President of the American Medical Association (Weinberg, 2000). What is the solution?

Many of the early giants in nutrition research prior to World War II, Dr. Royal Lee, Dr. Weston A. Price, Frances Pottinger, Melvin Page, Agnes Fay Morgan and others, made the prediction that if we as a nation adopt and use the “fake foods of commerce” (foods that lack intrinsic nutritional content as a result of processing), instead of whole nourishing foods, then we will suffer from what has become known as the diseases of modern civilization: obesity, diabetes, high blood pressure, heart disease, cancer, immune deficiency and more (Anderson, 2003; Price, 1945; Pottinger, 1983). Starting in the 1920’s, Dr. Lee predicted that the public would become much better educated on the matter of food and that this would translate into a strong consumer demand for what he called “organically grown whole foods.” It is no longer a question of

whether these early nutritional researchers were right, but instead a matter of observing and recording how the predictions came to be.

In a 1971 USDA study on nutrition titled, "An Evaluation of Research in the United States on Human Nutrition," it was reported that: 1) major health issues are diet related; 2) The solution to illness can be found in nutrition; and 3) the real potential from improved diet is preventative in that it may defer or modify the development of a disease state. Not surprisingly, the Nixon Administration never released the report to the public. Now, more than 30 years later, the FDA, USDA, Department of Agriculture and the Department of Health and Human Services are reviewing the failed dietary guidelines that have led to an epidemic of obesity and chronic disease (USDA, 1971; Wise Traditions, 2004).

The alteration of foods and their nutrient content over the course of the last century has had a long-term negative impact on the ability to maintain optimum human health and definitely worsens or initiates chemical and food sensitivities. Simply stated, processed dead foods don't optimally support life without disease, or a happy well-functioning society. In the 1940's, Dr. Frances Pottinger experimented with large groups of cats fed a diet exclusively of milk. His results showed that the cats that ate raw milk lead healthy, active lives free of degenerative disease. Those that ate pasteurized milk suffered from acute illness and succumbed to the very degenerative diseases that are now flourishing in our population. By the third generation many of the cats were infertile and exhibited antisocial behavior. (Medically speaking, they were like many modern Americans) (Pottinger, 1983).

Before the heating of raw milk, milk is a living food rich in colloidal minerals, vitamins A, C and B complex, rich in essential enzymes which are necessary for the absorption and utilization of the sugars and fats in the milk. Milk also has a cortisone-like factor which is heat sensitive (i.e., destroyed by heat) in the cream; milk has an enzyme phosphates which allows the body to absorb the calcium from the milk; milk has lactase -- an enzyme which allows for the digestion of lactose; and milk has beneficial bacteria and lactic acids which allow these beneficial bacteria to implant in the intestinal tract (Cowan) .

The dangers of pasteurized dairy products are continuing to be documented. Currently, one of the most influential books is, *Don't Drink Your Milk* by Frank Oski, M.D., head of Johns Hopkins Department of Pediatrics. In this well referenced book he attributes most childhood health problems ranging from acne, anemia, anti-social behavior, asthma, bloating, recurrent bronchitis, congestion, cramps, diabetes, diarrhea, ear infections, eczema, hay fever, hives, juvenile rheumatoid arthritis, lactose intolerance, leukemia, renal disease, skin rash, vomiting, to name just a few, to the consumption of "Grade A Pasteurized Milk" (Oski, 1996)

As with any treatment process which alters the thing which is treated, there are side effects from pasteurization. It can: be used to mask low quality, dirty (as from insect and fecal material) milk; destroy the souring bacteria of milk so milk putrefies instead of sours; destroy beneficial and essential enzymes and hormones; impair the flavor (a sign of inferior nutrition), diminish the nutrient value, and devitalize the milk; greatly deplete vitamin content such as vitamins A, C, and B complexes; precipitate calcium and other minerals, making them unavailable for use; harm, damage and reduce the biological value of the protein by denaturing amino acids; curtail absorption and utilization of nutrients; make natural sugars or carbohydrates less available metabolically; destroy the active "anti-stiffness factor," a steroid nutrient (DeCava, 2002). The list can go on. Absent clear and convincing evidence that raw milk may be more dangerous than

pasteurized milk, it can readily be seen why many people choose to consume raw milk over pasteurized milk.

The Colorado Department of Public Health and Environment is dedicated to protecting the health and environment of the people. To protect the food supply from contamination, part of the current methodology is the use of pasteurization, ultra-pasteurization, and irradiation. These, however, often bring about unintended consequences of chronic disease, and with irradiation, the long term effects are simply not known. However, there is a growing awareness among the medical community and the general population which recognizes the risks of infection associated with the consumption of foods in their natural state, such as raw milk, is far less than the risks of long term, chronic degenerative disease. The cases of infection from the pathogens campylobacter and salmonella in raw milk are sporadic, and often relatively mild in nature and treatable with antibiotics (Merck, 2002). In 2003, the Center for Disease Control reported that there were 58 outbreaks of infection attributed to raw milk between 1972 and 2000 (46 outbreaks between 1973 and 1992 affected 1,733 people (AJPH, 1998). Contrast this to 76,000,000 food borne diseases in the U.S. affecting 25 percent of the population every year (CDC, 2003), this despite pasteurization, preservatives, irradiation, refrigeration, and plastic wrapping, all meant to keep food safe.

It is obvious to a growing number of people that the Department of Health is concerned about the possibility of sporadic incidents of raw milk as a carrier of human pathogens that may cause treatable bouts of gastroenteritis, and may not be aware of the debilitating long term diseases and effects of pasteurization. As informed citizens, we wish to have the freedom of self determination to make the decision to eat foods that have historically and traditionally contributed to keeping humans healthy and productive, for both ourselves and our families. We, as informed adults, are willing to accept the occasional risk of consuming foods in their natural state, as people have for hundreds of generations, rather than to burden our children with risk of chronic disease. It is our goal to help widen the vision of the Board of Health to realize that the short term gains of pasteurization can carry long-term, unintended consequences such as those described by Dr. Oski. Properly handled raw milk can provide protection for its consumers and provide long term benefits which simply cannot be provided following pasteurization.

Rather than simply banning the consumption of raw milk, perhaps a better role for public health authorities is to help producers of raw milk make the best possible products and to ensure that any contamination is minimal through the implementation of standards. Public health authorities could then concern themselves with quality as well as safety, while protecting the public's freedom to choose. We seek help in creating a system that allows citizens access to clean raw milk and foods from local sources that are based high standards, honesty and trust between the producer and consumer, rather than for the profits and convenience of corporate entities. We ask the Board of Health to help Colorado become a truly progressive state and join the 27 other states (plus the cities of Los Angeles and Chicago) and allow raw milk to be consumed by its citizens in a safe and manageable way without undue restraint, benefiting not only the individual, but local economies and the environment.

Respectfully submitted,

THE OWNERS OF COW SHARES AT GUIDESTONE FARM

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