
Loss of appetite commonly occurs during sickness. Unfortunately, too many people, prodded by well-meaning friends and relatives, find that even when they don't feel like it, they're encouraged to eat. In this article, Alan Immerman argues that when illness causes a loss of appetite, it's the body's own wisdom at work.

It is an unwritten law to many people that when you are sick you should eat to "keep up your strength"—even if you have no appetite. Most people refuse to believe that there's probably a physical basis for this loss of appetite. For example, consider the following story.

Sheila Morgan was coming down with a case of the flu: the familiar mixture of sore throat, runny nose, fever, cough, weakness and nausea. She called her boss to say that she would be too sick to work, and then she went to bed. All Sheila wanted to do was rest in quiet until she felt better.

But before that could occur, her mother called. "Hi Sheila, how are you this morning?" Sheila answered: "Not too well mom, I'm coming down with a case of the flu and I called in sick." "Well," replied mother, "be sure to eat something to keep up your strength."

But, is this right? Is a sick person's loss of appetite a mistake by Mother Nature? No, it is no mistake—it is an expression of the body's need right then. As Dr. Herbert Shelton put it, "There is order in the processes of nature: haphazard nowhere reigns. This being so, there must be some profound reason for the suspension of the desire for food in most states of illness."¹

What is the reason for this suspension? No insight is gained by consulting medical texts. A typical statement is: "The mechanisms whereby hunger and appetite are modified in various disease states are poorly understood."² Therefore, only common sense is likely to help in understanding why appetite loss occurs and what should be done about it.

In this regard, Dr. Shelton, the "dean" of the natural hygiene movement, states: "The sick man's dislike of food would seem to be as significant as his dislike for noise, motion, light, close air and cold. Yet, while these latter dislikes are commonly respected, we tend to disregard his wishes and attempt to feed him in

WHY YOU LOSE YOUR APPETITE WHEN YOU'RE SICK

by Alan Immerman, B.S., D.C.

spite of the most obstinate repugnance to food. If the patient is chilly, we seek to warm him; if noise disturbs him, we seek to keep things quiet around him; if light disturbs him, we close the shades; if the air is close, we open the windows; we respect his desire to lie quietly and do not insist that he become active. But we insist that he must 'eat to keep up his strength.'³ Surely this is not the right thing to do.

Scientific proof that it may be hazardous to eat when you're ill is reflected in the observations of John Murray, M.D., and his wife Anne. These University of Minnesota Medical School researchers visited eastern Ethiopia, an area stricken with drought and famine, and observed the effect of feeding starving nomads in a shelter system. They

expected to see improved health upon refeeding but the opposite occurred: there was an outbreak of disease.³

This experience led the Murrays to formulate a hypothesis: that infection is suppressed by going without food and activated by feeding. To test this theory the researchers checked the older medical literature and did some tests on animals.

They found that many times in the last 200 years it has been observed that those fed the largest amount of food are the most likely to get sick and die. One of the many incidents reviewed by the Murrays is an experience in the English prison systems in the 1830s. Every year, each jail had to tell the government exactly how much it had spent on each prisoner for food. In four years, statistics were accumulated on about 100,000 prisoners. Analysis of this data showed a strikingly consistent relationship between the amount of food consumed and the amount of sickness and death. And the relationship was not what anyone expected: those consuming the least food were the healthiest!

During world war II, it was observed in concentration camps that those on a supposedly inadequate diet were more resistant to infection than those who thought they were well-fed. In one case, for instance, almost 100% of the well-fed German guards died of typhus while only 30% of the malnourished Russian prisoners died. One doctor concluded that "resistance seemed highest in those who, though on an inadequate diet, had not yet reached the level of gross hunger and malnutrition."³

Long before the 19th century, however, it was known that minimal food intake was the ideal. In Sparta, all men between the ages of 16 and 60 had to eat their main meal in a public dining room where they were given only small portions, because it had long been known that the highest state of health would result from minimal food consumption.

Dr. Immerman is ANHS
Research Director and
in private practice in
Scottsdale, Arizona.

APPETITE

The Murrays concluded their study of history and Ethiopian nomads with these statements: "Within certain limits undernutrition in humans and animals appears to decrease susceptibility to infection with viruses, malaria, and some bacteria... refeeding after starvation may cause diminished resistance... we are inclined to believe that Western nutritional standards are set too high for optimal defense against viral infection." Not

exactly what you are used to hearing from the family doctor!

Four years after their first article, the Murrays conducted a laboratory experiment to test their hypothesis. They infected mice with bacteria and then divided the mice into two groups: one group was allowed to follow its inner instinct and not eat, but the second group was force-fed. The result: increased death rate and shorter survival time in the fed mice.⁴

Other researchers have also attempted to study this question. In

one experiment, human blood was incubated with bacteria. It was found that blood taken from people who had been fasting for 36 to 60 hours was the most effective in destroying the bacteria.⁵

Often people become very concerned if they don't feel like eating for a few days. An older man came to me a few months ago, complaining of diarrhea and nausea. Though he felt very sick every time he ate, he continually forced food down at least twice a day. When I asked him why he ate in spite of severe nausea, he replied that "I won't get well unless I eat something."

This popular misconception probably results from the connection between starvation and infection that exists in some parts of the world. But it must be realized that there is a world of difference between a well-fed American going without food for a few days, and a poorly-fed Cambodian continually deprived of enough food to maintain health.

Another misunderstanding about the appetite loss accompanying disease is that this loss is the disease itself which must be crushed so that recovery may occur. But this is not the case at all; the real disease is the one that is *causing* the appetite loss! Proper treatment should consist of helping the body eliminate the *cause* of the appetite loss. When this is done, the desire to eat will return spontaneously. The symptom of appetite loss is no less a reflection of the body's need when sick than is the need to rest.

And so, the commonsense approach to appetite loss, confirmed scientifically, is to respect it. When you are sick and don't feel like eating, forget your mother's advice and don't eat until your appetite returns. This will speed your recovery by giving your body the best opportunity to heal itself.

BIBLIOGRAPHY

1. Dr. Shelton's *Hygienic Review*.
2. Thorn, G.W., et al., *Harrison's Principles of Internal Medicine*, 8th ed., McGraw-Hill, N.Y., N.Y., 1977, p.208.
3. Murray, M.J., *Perspectives in Biology and Medicine*, 20:471, 1977.
4. Murray, M.J., *American Journal of Clinical Nutrition*, 32:593, 1979.
5. Sanchez, A., et al., *American Journal of Clinical Nutrition*, 26:1180, 1973.

This is one of over two dozen articles Dr. Immerman has published in lay magazines and professional scientific journals. All evidence presented in these articles has been fully documented from scientific and medical journals.

Through his study of journal articles, and as a result of a 5 month internship at an inpatient health manor in New York, Dr. Immerman is well qualified to provide nutritional solutions to health problems. The approach taken is designed to allow the body to detoxify itself while providing optimum amounts of nutrients.

The Immerman Clinic offers physical, laboratory, and X-ray diagnosis; chiropractic manipulation and acupressure; nutritional counseling and supervision of fasting.

YOUR BODY WILL HEAL ITSELF IF YOU LET IT!