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Thinking ahead

NEW CLUES TO
PROTECTING
MEMORY



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That's all she wrote!

BY BONNIE LIEBMAN



After more than 48 years, this will be my last issue of *Nutrition Action*. It's been quite a ride.

Even before I ever set foot in the office, I knew that working at the Center for Science in the Public Interest was the career for me. Fresh out of college, I had always been interested in science but I also wanted to work, well, in the public's interest.

So in 1974, after I read an article about CSPI's work in *The Washington Post*, I was hooked. In 1977, armed with a masters in nutrition, I became CSPI's first staffer with a graduate nutrition degree.

My first major assignment from CSPI's co-founder, Michael Jacobson, was to draft a petition urging the FDA to require food labels to disclose sodium levels. (Back then, labels only had to disclose nutrient levels if a food was fortified or made a claim like "low sodium." It wasn't until 1990 that CSPI's long battle to secure a law requiring Nutrition Facts on all packaged foods finally paid off.)



In 1986, I presented Arby's with an "award" for its misleading ads.



Then what?

Just for fun, I offered to write a review of *The Jewish Low-Cholesterol Cookbook* for *Nutrition Action*, which was then focused largely on nutrition policy. A few years later, I wrote an article about "nouveau junk food," which skewered quiche, croissants, and other trendy foods that had an undeserved healthy reputation.

By the 1980s, when *Nutrition Action* shifted its focus to helping everyday Americans stay healthy, I had found my niche at CSPI.



Here I am in the early 1980s with Mike Jacobson (left) and Greg Moyer, the *Nutrition Action* editor who recognized that readers wanted advice on staying healthy.

I could not only write about healthy (or unhealthy) foods. I could also scour scientific journals for the latest studies on diet and health, interview leading researchers, and let hundreds of thousands of readers like you in on what I'd learned. The reading, interviewing, and writing never got old.

Nor did the satisfaction of being part of an organization that was making a difference in people's lives.

Over the years, I worked on many CSPI petitions (for example, to require labeling of added sugars or ban misleading claims about fruit or whole grains), lawsuits against misleading

labels, written responses to countless proposed regulations, letters to the editor, and other advocacy efforts.

Some *Nutrition Action* articles broke through to broader print, TV, and radio audiences. Take our annual Xtreme Eating Awards, which spotlighted some of the worst dishes at chain restaurants. They not only made headlines; they helped CSPI convince Congress to require chain restaurants to post calories on their menus.

Today, with 70-plus staffers, CSPI is brimming with scientists, lawyers, and policy experts. And that matters more now than ever, with the National Institutes of Health, the Centers for Disease Control and Prevention, the Food and Drug Administration, leading research universities, and science itself under assault, and with misinformation coming not just from the food industry or influencers but from the government itself.

Despite the headwinds, CSPI will keep fighting to protect the health and safety of all consumers. And, like you, I'll be reading about those battles—and the latest on diet and health—in *Nutrition Action*. (For now, I'm still going to be writing Quick Studies. It's tough to go cold turkey.)

It's been a privilege to be part of CSPI and to share what's fascinated or infuriated me over the years. Thanks for making that possible. ☺

If you'd like to celebrate Bonnie and her nearly 50 years of service to CSPI, please make a gift at cspi.org/bonnie

Thinking ahead

NEW CLUES TO PROTECTING MEMORY

BY BONNIE LIEBMAN

Remember when your memory was better? "Cognitive aging" is normal. Alzheimer's disease and other dementias are not. Here's what's in the pipeline to diagnose, prevent, and treat those problems...and what you can do now.

1 Does lithium orotate protect the brain?

"New hope for Alzheimer's: lithium supplement reverses memory loss in mice," ran the August headline in *Nature*.¹

Though most of the study was done in mice, the researchers first tested the levels of 27 metals in the preserved brains and blood of deceased people who had had Alzheimer's, mild cognitive impairment, or normal cognition.²

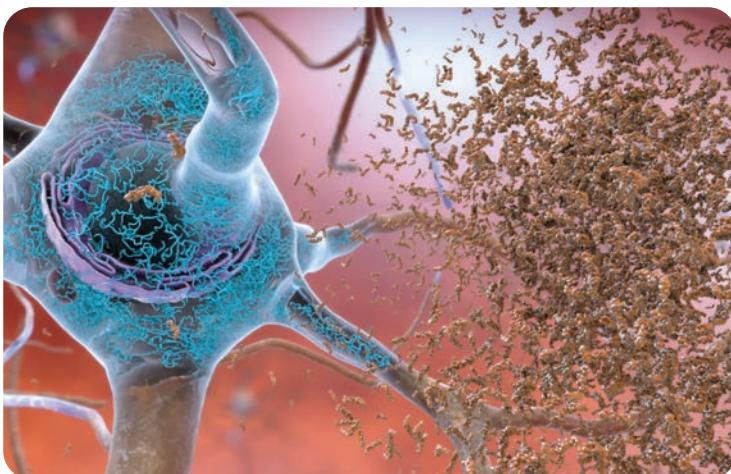
One metal stood out.

"They found a deficiency of lithium in people with mild cognitive impairment, and the deficiency was even worse in those with Alzheimer's disease," explains Ashley Bush, professor of neuroscience and psychiatry at The Florey Neuroscience Institute of the University of Melbourne in Australia. He wrote the editorial accompanying the study.³

"And what lithium was there was trapped in amyloid plaques," adds Bush, an expert on metals and neurodegenerative brain diseases. (Amyloid plaques and tau tangles are the hallmarks of Alzheimer's.)

Do plaques starve the brain of the lithium that it needs to function?

To find out, the researchers used "a mouse model that has been engi-



Alzheimer's leads to amyloid plaques (brown) and tau tangles (blue). In mice, lithium orotate curbed amyloid, tau, and cognitive decline.

neered to generate amyloid plaques," notes Bush.

Sure enough, when those mice were fed a lithium-deficient diet, they accumulated more amyloid and tau tangles and were worse at tasks like recalling the location of a platform in a water maze.

What's more, "microglia—cells that normally act as the brain's local immune defense—became pro-inflamm-

matory and had an impaired ability to clear amyloid," says Bush.

In contrast, "treatment with lithium reversed all the pathology that was seen in the mouse model. Lithium improved amyloid and tangles, improved synapses, reduced signs of inflammation, and the animals' cognition improved."

The researchers used lithium orotate, not lithium carbonate, a drug that's prescribed to treat bipolar disorder. Both are what scientists call "salts." "Lithium is the positive part of the salt, and the orotate or carbonate is the negative part," explains Bush.

"The researchers reasoned that salts that bind the positive and negative parts more strongly together are less likely to break apart and allow lithium to be trapped by amyloid."

"They studied 16 salts, and lithium orotate was the least likely to separate. And it was indeed superior to lithium carbonate in treating the mice."

What's the next step?

"This study raises the question: Is Alzheimer's due to a lithium deficiency?" says Bush. "That's not known."

More importantly, "this study should encourage clinical trials testing lithium orotate in people with mild cognitive impairment or Alzheimer's. That's what's needed before we can make any recommendations."

One upside: “The doses of lithium orotate used in the mice were much lower than a customary dose of lithium carbonate,” says Bush. “A lower dose of lithium would be good because lithium has toxicity problems. Blood levels can’t go beyond a certain level or you can get damage to kidneys, the thyroid, and other problems.”

What about the lithium orotate supplements you can buy online?

“The doses that are typically sold online—5 to 10 milligrams a day—are too low to cause toxicity problems, so they seem safe to take,” says Bush.

“But at this stage, there’s no evidence in humans that they’re beneficial, and we don’t know what dose to use.”

The bottom line: Research on lithium is just beginning. Stay tuned.

2 Anti-amyloid treatments don't improve memory.

The FDA has approved two blood infusions—lecanemab (Leqembi) and donanemab (Kisunla)—to reduce amyloid deposits in the brain. But many physicians may not convey the drugs’ limitations to their patients.

“They say ‘The drugs work,’ and the truth is, the drugs do slow the progression of the disease,” says David Knopman, professor of neurology at the Mayo Clinic. “But the drugs do not make people better. And they do not stop the disease. It’s only a slowing.”^{4,5}

“I don’t think that most docs really understand that efficacy data. They just take it at face value that Eisai—which sells lecanemab—says you get a 27 percent benefit. But that’s 27 percent less decline, not a 27 percent improvement.”

And a 27 percent slowing is modest.

Patients or their families may not even notice the difference.

Another source of confusion: How long patients need to take the drugs.

With lecanemab, you have to get infusions every 2 weeks for 18 months and then continue monthly—or weekly using an injection pen at home—indefinitely with a maintenance dose, says Eisai, because plaque keeps accumulating.

In contrast, donanemab is infused only monthly and for only 18 months.

“The fact is that we really don’t know what needs to be done after 18 months,” says Knopman.

That’s how long the trials for both

lecanemab may not make sense.

What’s more, adds Knopman, “after 76 weeks of biweekly infusions, people are tired.”

(Roughly one out of five people taking lecanemab or donanemab get swelling or small hemorrhages in the brain. These “ARIA” can be serious, but they typically occur early and cause no symptoms.)

Still, it’s not easy to stop treatment. “In the absence of real data, it’s a difficult decision for physicians and families,” says Knopman.

On the bright side, more treatments are on the way.

“First, Novo Nordisk has a trial testing Wegovy that should report results later this fall,” notes Knopman, referring to semaglutide, the GLP-1 weight-loss drug that’s also sold as Ozempic for people with type 2 diabetes.⁷ (One reason to test Ozempic: In clinical trials, people with type 2 diabetes who were randomly assigned to take GLP-1 drugs to lower the risk of cardiovascular disease also had a lower risk of dementia.)

“Second, there’s a new anti-tau agent that’s an ASO—an antisense oligonucleotide,” says Knopman.

The agent binds to the mRNA that produces tau proteins in neurons.⁸ Once bound, the agent—called MAPT_{RX}—recruits an enzyme that destroys that mRNA, so the neurons make less tau. “Those results are expected next summer,” notes Knopman, though they won’t be definitive because it’s only a “phase 2” trial.

A third treatment won’t have results for years. “It’s a drug called trintemab, which has what’s called a brain shuttle technology,” explains Knopman.

“That appears to greatly increase



It’s not clear if taking Leqembi indefinitely—what its ad calls “maintenance dosing”—is necessary, say some experts.

drugs lasted. Once they ended, “we had no control group,” he notes, so you can’t compare people who got the drugs to those who didn’t.

Knopman recently wrote an article with Eli Lilly, which sells donanemab. (Knopman has no current ties to Lilly, Eisai, or other relevant companies.)

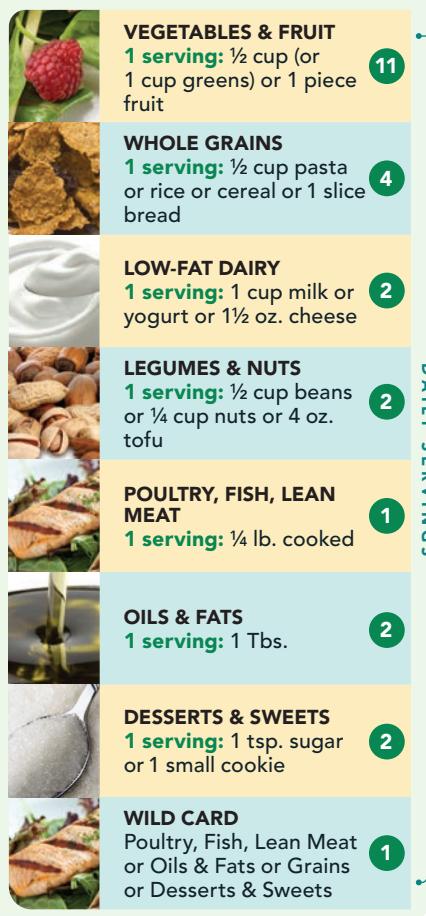
“With donanemab, if you don’t achieve close to full clearance of amyloid by between week 52 and 76, you’ll get negligible benefit from the treatment,” he explains.⁶

“And if you do get complete clearance, it takes 10 to 13 years for brain amyloid to re-accumulate.”

That’s why a “maintenance dose” of

Do the DASH

A MIND diet is like a DASH diet, except it's richer in blueberries, nuts, extra-virgin olive oil, leafy greens, and fish. And it should help protect the brain by keeping a lid on blood pressure. Here's a 2,100-calorie version.



the transfer of an anti-amyloid antibody into the brain. The early data appears to suggest that the drug may work better for removal of amyloid and be safer than lecanemab and donanemab.”⁹

“Hopefully, these new classes of treatments in the pipeline will add to the toolbox to treat Alzheimer’s.”

3 A blood test alone can't diagnose Alzheimer's.

In May, the FDA approved the first “device that tests blood to aid in diagnosing Alzheimer’s disease.”

The Lumipulse test measures the

blood levels of two proteins: p-tau217 and beta-amyloid 1-42.

The FDA is reviewing similar tests, but LabCorp, Quest Diagnostics, and other labs now also offer their own “lab-developed tests” for p-tau217 that haven’t been approved by the FDA.

“Blood tests for p-tau217 are being widely used,” says Knopman. Is he worried that doctors will use *only* a blood test to diagnose Alzheimer’s?

“I’m terrified of it. I don’t have the exact numbers, but Mayo alone is running a staggering number of samples a week.”

Yet a blood test is not definitive. “You couldn’t be more conceptually misled than to think that you can use a blood test alone to diagnose mild cognitive impairment or dementia,” says Knopman. “Those are *clinical* diagnoses.”¹⁰

“People might think, ‘My plasma p-tau217 says I’m in the Alzheimer’s range. Oh, I must have dementia,’ even though their neuropsych testing is blazingly normal. It’s scary.”

Blood tests can’t leapfrog over neuropsychological tests, says Knopman. Why?

For starters, the lab results mistakenly detect tau in about 20 percent of people with no symptoms.¹¹ “That’s good enough for screening but certainly not good enough as a stand-alone diagnostic test,” he notes.

And roughly 20 percent of people get results that fall into a neither-positive-nor-negative “gray area.”

Another reason not to rely solely on a blood test: neuropsychology test results might be borderline.

“The distinction between cognitively normal and mild cognitive impairment, or MCI, has some wobble to it, even in the best of hands,” Knopman points out.

“So you might end up treating people who are ultimately normal or who, even if they have elevated brain amyloid in PET scans, are still years from becoming symptomatic.”

We don’t know the “lag time”—that

is, how soon symptoms begin after blood levels change. In fact, an estimated 24 percent of older people with elevated amyloid are cognitively normal.¹²

What’s more, “most people still use the word Alzheimer’s to mean all dementia,” says Knopman. “But not all cognitive impairment and dementia is plaque-and-tangle disease.”

“Maybe a third of those patients have pure Alzheimer’s. Especially as they get older, many will also have cerebrovascular disease that contributes to their cognitive impairment.”

“Or they might have Lewy body dementia or a combination of those disorders and no Alzheimer’s pathology at all. It takes expertise to identify those conditions.”

Another group who shouldn’t get anti-amyloid treatment—people whose memory loss is too advanced.

“It’s quite clear that people who don’t just have mild dementia but are trending into the moderate range will not benefit from treatment,” says Knopman.



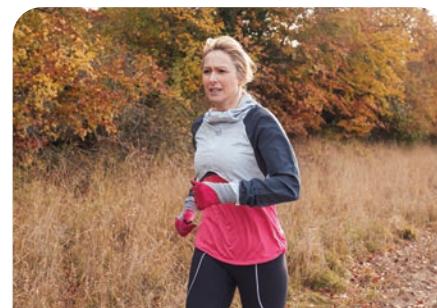
It takes more than a blood test to diagnose Alzheimer’s.

4 A healthy lifestyle helps.

The FINGER (Finnish Geriatric Intervention Study to Prevent Cognitive Impairment and Disability) trial got there first.¹³

“In 2015, the Finns reported that a large, multidomain lifestyle intervention in at-risk older adults could improve cognition,” says Laura Baker,

To protect your brain



professor of gerontology and geriatrics at Wake Forest University School of Medicine and Advocate Health.

But would it work in the U.S.? We differ in many ways.

"In Finland, people rarely miss their annual, or sometimes twice-a-year, check-up," notes Baker. "Here, we had people who had not seen a doctor for five years."

"And in Finland, there are bicycles everywhere. Here, the few people on bikes are really fit, not typical Americans. We eat a lot of processed foods. They don't."

So in 2016, the Alzheimer's Association invited Baker and others to start planning the U.S. POINTER trial.¹⁴

"We wanted people who were cognitively normal but had risks for decline like family history or mild cardiovascular disease," says Baker.

The 2,111 participants were randomly assigned to either a "structured" or a "self-guided" group.

The structured intervention included 38 team meetings, exercise training at a gym, encouragement to eat a MIND diet (see "Do the DASH," p. 6), cognitive challenges, social engagement, and a biannual review of their blood pressure, cholesterol, and hemoglobin A1c (blood sugar levels).

The self-guided group got healthy lifestyle advice and \$75 gift cards at six team meetings, plus annual clinic visits to check their blood pressure, blood sugar, and cholesterol.

After two years, "both groups

improved, but the structured group improved significantly more," says Baker. "Their scores were comparable to adults who were one to two years younger."

That's based on a "global cognitive score." Of its three components, executive function (planning, multi-tasking, problem solving) improved more in the structured group. Processing speed and episodic memory didn't.

"We're now analyzing other measures like brain imaging, sleep, and vascular health," says Baker.

One advantage of a "multidomain" program: "The intervention can be tailored to the person," she points out.

"For example, some adults have physical limitations and cannot safely exercise at moderate intensity. Others may have difficulty adhering to the MIND diet due to reduced access to healthy foods."

If so, they can make other changes. The same goes for cognitive challenges.

"We asked people to complete BrainHQ online training for about 20 minutes three times per week," says Baker. "Some people loved it, others did not. We also asked them to go out and meet people, learn a language, go to a library, watch a documentary, get out of their comfort zone."

The trial tried to make it easy for people to eat a healthier diet.

"The MIND diet is a Mediterranean-like diet but low in salt," says Baker. "The participants were asked to keep track of some foods: like did they get four servings a week of dark leafy greens, or three servings a week of blueberries, or how much sugar did they eat?"

Her take-home message: "Lifestyle does matter for brain health. By moving more, eating more fruits and vegetables, staying connected to people, and taking responsibility for your blood pressure, blood sugar, and cholesterol, you can protect your brain health."

Brain Training THAT WORKS



The POINTER participants used BrainHQ online exercises to train memory, attention, processing speed, and more.

Here's what else may preserve your memory.

- Aim for a systolic blood pressure below 120.
- Keep a lid on blood sugar and LDL ("bad") cholesterol with diet or medication.
- Don't smoke.
- Aim for a healthy weight.
- Exercise for at least 150 minutes a week.
- Stay mentally and socially active.
- Get 7 to 9 hours of sleep.
- Consider taking a daily multivitamin. That slowed cognitive decline modestly in an earlier clinical trial.^{1,2} At a minimum, you'll get vitamins B-12 and D that you may not get from food.
- Don't bother taking ginkgo,³ omega-3 fats,⁴ or Prevagen.⁵

¹ Am. J. Clin. Nutr. 118: 273, 2023.

² Alzheimers Dement. 19: 1308, 2023.

³ JAMA 300: 2253, 2008.

⁴ Alzheimers Dement. (NY). 8: e12288, 2022.

⁵ cspci.org/cspci-news/prevagen-ordered-cease-memory-improvement-claims.

¹ Nature 2025. doi:10.1038/d41586-025-02471-4.

² Nature 645: 712, 2025.

³ Nature 645: 593, 2025.

⁴ N. Engl. J. Med. 388: 9, 2023.

⁵ JAMA 330: 512, 2023.

⁶ JAMA Neurol. 2025. doi:10.1001/jamaneurol.2025.3869.

⁷ Alzheimers Res. Ther. 17: 14, 2025.

⁸ JAMA Neurol. 80: 1344, 2023.

⁹ alzforum.org/therapeutics/trontinemab.

¹⁰ Alzheimers Dement. 2025. doi:10.1002/alz.14043.

¹¹ JAMA Neurol. 2025. doi:10.1001/jamaneurol.2025.3217.

¹² JAMA Neurol. 79: 228, 2022.

¹³ Lancet 385: 2255, 2015.

¹⁴ JAMA 334: 681, 2025.

Quick Studies

A snapshot of the latest research on diet, exercise, and more.

Dehydration & stroke risk



Does dehydration raise the risk of a stroke in older people?

Researchers examined the electronic health records (from 2018 and 2019) of 3.1 million adults aged 80 or older.

The roughly 560,000 who they identified as being dehydrated were four times more likely to have a stroke caused by a hemorrhage,

two times more likely to have a stroke caused by a blocked blood vessel, and three times more likely to have a TIA (transient ischemic attack) than those who were not dehydrated.

WHAT TO DO: Stay hydrated. This kind of study can't prove that dehydration raises the risk of a stroke. Something else about the stroke patients could explain their higher risk (though the researchers did take other factors into account). But older people are more likely to become dehydrated than their younger counterparts because they may have a reduced sense of thirst, a reduced ability to concentrate urine, and reduced muscle mass (muscle holds more water than fat does). So why take a chance?

J. Stroke Cerebrovasc. Dis. 34: 108430, 2025.

Mediterranean diet & psoriasis

Can a Mediterranean diet ease psoriasis?

Researchers randomly assigned 37 people with psoriasis to eat either a "standard low-fat diet" or a Mediterranean diet rich in extra-virgin olive oil, fruits, vegetables, beans, and whole grains, moderate in poultry, fish, and nuts, and low in dairy, red and processed meats, and sweets.

After 16 weeks, 9 of the 19 people on the Mediterranean diet—but none of the 18 on the low-fat diet—had at least a 75 percent drop in the Psoriasis Area and Severity Index.

WHAT TO DO: It's too early to know if a Mediterranean diet can curb psoriasis based on this small study. But it's heart-healthy, so whaddya got to lose?



JAMA Dermatol. 2025. doi:10.1001/jamadermatol.2025.3410.



Can saffron help with anxiety? It shows promise, says Google's AI overview. But the evidence is shaky.

Scientists randomly assigned 51 adults with complaints of anxiety, stress, fatigue, or depressed mood to take 30 milligrams a day of saffron

Saffron strikes out

extract or a placebo.

After 6 weeks, the saffron takers reported no less anxiety, depression, or fatigue than the placebo takers.

WHAT TO DO: Don't depend on saffron to curb anxiety.

Am. J. Clin. Nutr. 2025. doi:10.1016/j.jajcnut.2025.09.050.

Acupuncture & back pain



Got chronic low back pain? Acupuncture might help.

Scientists randomly assigned 800 adults aged 65 or older who had low back pain lasting at least three months to usual medical care or to either standard acupuncture (8 to 15 treatment sessions) or enhanced acupuncture (standard plus 4 to 6 additional sessions) over 12 weeks.

After 6 months, a "clinically meaningful"—30 percent or more—improvement on a disability questionnaire was reported by 39 percent of the standard group, 44 percent of the enhanced group, and 29 percent of the usual care group.

WHAT TO DO: This study isn't a slam dunk because getting a new treatment may have biased the acupuncture group's perception of pain. But acupuncture may help as much as typical treatments (often opioids or NSAIDs). For more, see June 2022, p. 8.

JAMA Network Open 8: e2531348, 2025.



Fewer vertebral fractures

A drug that is infused once, then again five years later, can curb vertebral fracture risk in women aged 50 to 60.

Researchers randomly assigned 1,054 women with spine or hip bone density in the normal or osteopenia (but not osteoporosis) range to get an IV infusion of zoledronate or a placebo when they entered the study, then again five years later. (Zoledronate is a bisphosphonate, like alendronate, aka Fosamax.)

In the 10 years following the first infusion, the zoledronate group had a 44 percent lower risk of having a new vertebral fracture compared to the placebo group. (A fracture occurred in 6 percent of the zoledronate takers vs. 11 percent of the placebo takers. A vertebral fracture often causes no symptoms.)

WHAT TO DO: If your age and bone density match those of the women in this study, ask your doctor about zoledronate.

N. Engl. J. Med. 392: 239, 2025.

GLP-1 drugs & cancer



Do GLP-1 drugs like semaglutide (sold as Ozempic or Wegovy) lower—or raise—the risk of some cancers?

Scientists compared the health records from 2014 to 2024 of about 43,300 adults with obesity or overweight who were prescribed GLP-1 drugs to the records of 43,300 similar people who weren't prescribed GLP-1 drugs.

The GLP-1 takers had a 25 percent lower risk of endometrial cancer and a 47 percent lower risk of ovarian cancer. They also had a 38 percent higher risk of kidney cancer. While the increased risk wasn't statistically significant, it was close.

WHAT TO DO: Stay tuned. It's too early to know if GLP-1 drugs lower or raise the risk of any cancer because something else about people who take them may explain their risks. (Note: Semaglutide causes thyroid C-cell tumors in rodents, so people with a family history of certain thyroid cancers shouldn't take it.)

JAMA Oncol. 11: 1186, 2025.

Keep your eye off the pickleball

As pickleball climbs in popularity, so are eye injuries.

In a national database covering 2 percent of hospital emergency departments, pickleball caused 73 eye injuries between 2005 and 2024. That's equal to 3,112 injuries nationwide, with 1,262 of them occurring in 2024 alone.

More eye injuries were caused by being hit by the ball than by a paddle or by falling. Lacerations and corneal abrasions were among the most common injuries.

WHAT TO DO: Love pickleball? Maybe try some protective eyewear.



JAMA Ophthalmol. 2025. doi:10.1001/jamaophthalmol.2025.3577, doi:10.1001/jamaophthalmol.2025.3882.



A DASH diet for type 2 diabetes

A DASH diet lowers blood pressure. Can it be adapted to also keep a lid on blood sugar?

Researchers randomly assigned 89 people with type 2 diabetes to a DASH diet that was tailored for diabetes (DASH4D) or a typical U.S. diet for 5 weeks each in random order.

The DASH4D diet was higher in fruits, vegetables, low-fat dairy, whole grains, beans, and nuts and lower in refined grains

and sweets than the typical diet.

Average blood glucose levels were lower (by 11 milligrams per deciliter) and were "in range" (not too high or too low) for 5 percent longer on the DASH4D diet.

WHAT TO DO: Try a DASH-like diet (see p. 6). It's surprisingly good for (almost) whatever ails you. 🍀

Nat. Med. 31: 3309, 2025.

Paying the tab

Alcohol's calorie cost

BY LINDSAY MOYER & MARLENA KOCH

How many calories are in that beer or wine?

Most alcohol labels aren't required to list calories...or even ingredients. (We've spent more than 20 years pushing the government to quit dragging its feet on those rules.)

So these numbers come from company websites and some labels. Percent alcohol by volume (ABV) is listed when available. Total sugars are also listed, except for beer, seltzer, wine, and liquor, which have little or none.

Sadly, alcohol contributes to 178,000 U.S. deaths every year due to car crashes, homicides, heart disease, breast cancer, and more. (And no, moderate drinking doesn't protect your heart.)

Want a healthier, non-alcoholic drink? Turn the page.

To see the calories, percent ABV, and sugars in more alcoholic drinks, go to csp.org/alcohol.

Photos: Ginn - stock.adobe.com (top); Sierra Nevada (bottom).

We've listed calories for a 12 oz. can or bottle. A draft pour is typically 16 to 20 oz.

Beer's calories come mostly from its alcohol and its carbs. Bud Light Next sheds calories by trimming the alcohol and dropping the carbs to zero.

A "light," "lo-cal," or "session" IPA has less alcohol and fewer calories than a regular IPA.

Light? A Platinum has almost as many calories as a regular Budweiser. (Any beer can call itself "light" if it labels its calories.)

Most regular beers start at 5% alcohol and have around 12 grams of carbs.

Higher-alcohol beers—like regular IPAs, imperial or double IPAs, and Belgian Tripels—hit 7% to 11% alcohol and 200 to 300 calories.

Most hard seltzers have half a teaspoon of sugar or less, and no more calories than light beer.

Lighter wines slash alcohol to cut calories.

5 oz. of a 12% ABV wine is considered a "single" drink. Most restaurants pour 6 oz. (140-calorie) or 9 oz. (220-calorie) glasses.

A shot of a typical liquor has 100 to 120 calories—all from alcohol.

Beer (12 oz., unless noted)

	ABV (%)	Calories
Budweiser Select 55	2.4	55
Miller 64 Extra Light	2.8	64
Bud Light Next	4	80
Corona Premier	4	90
Michelob Ultra Pure Gold Organic Light	3.8	90
Blue Moon Light Citrus Wheat	4	100
Coors Light, Michelob Ultra, or Miller Lite	4.2	100
Corona Light	4	100
Dogfish Head 30 Minute Light IPA	4	100
Lagunitas DayTime Session IPA	4	100
Bell's Light Hearted Lo-Cal IPA	4	110
Bud Light	4.2	110
Guinness Draught Stout	4.2	130
Bud Light Platinum	6	140
Founders All Day IPA Session Ale	4.7	140
Heineken	5	140
Miller High Life	4.6	140
New Belgium Fat Tire Ale	5.2	140
Stella Artois (11 oz.)	5	140
Budweiser or Coors Banquet	5	150
Corona Extra	4.6	150
Hoegaarden	4.9	160
Lagunitas Hazy IPA	5.5	160
Blue Moon Belgian White	5.4	170
Bell's Porter	5.6	180
Sierra Nevada Pale Ale	5.6	180
Bell's Two Hearted IPA American IPA	7	210
Sierra Nevada Hazy Little Thing IPA	6.7	210
Founders Porter	6.5	230
New Belgium Tripel Belgian Style Ale	8.5	240
Sierra Nevada Torpedo Extra IPA	7.2	240
Sierra Nevada Big Little Thing Imperial IPA	9.5	250
Lagunitas Hazicus Maximus Hazy IPA	9	260
Bell's Double Two Hearted Ale	11	300

Hard Seltzer (12 oz.)

Bud Light Seltzer, Truly, Vizzy, or White Claw	5	100
High Noon Tequila or Vodka Seltzer	4.5	100
Truly Unruly	8	160
White Claw Surge	8	160
Bud Light Platinum	8	170

Wine (5 oz.)

Barefoot Bright & Breezy	6	70
Cupcake Lighthearted	8	80
Red or white wine, most varietals	12 ¹	120

Liquor (1 shot—1.5 oz.)

Gin, rum, tequila, vodka, whiskey, etc.	40	100
Gin, rum, tequila, vodka, whiskey, etc.	50	120



Liqueur (2.5 oz.)	ABV (%)	Calories	Total Sugars (tsp.)
Baileys Deliciously Light	16.1	140	2
St-Germain	20	190	6
Baileys Original Irish Cream	17	230	3
Cointreau	40	230	4



A liqueur's calories depend on its percent alcohol and its additions (sugar, cream, etc.).

Hard Cider (12 oz.)

Austin Eastciders Brut Super Dry	4.2	100	0.5
Angry Orchard Crisp Light	4.3	120	1.5
Austin Eastciders Original Dry	5	150	2
Angry Orchard Crisp Apple	5	180	4

Hard ciders are typically gluten-free (always check the label).

The more "dry" (less sweet) the cider, the lower the calories.

Hard Kombucha (12 oz.)

June Shine Acai Berry	6	140	0.5
June Shine Mango Daydream	6	150	0.5
June Shine Grapefruit Splash	6	160	1

Hard kombucha has a health halo, but most varieties have as many calories as beer.

Canned Cocktails (1 can, 12 oz. unless noted)

Cutwater Lime Ranch Water	5.9	120	0.5
Tip Top Espresso Martini (3.4 oz.)	22	160	2
June Shine Tequila Ranch Water	8	170	1
Cutwater Rum Mojito Lime & Mint	5.9	170	3
Simply Spiked Signature Lemonade	5	170	4.5
June Shine Passion Fruit Vodka Soda	8	180	1
Tip Top Gin Martini (3.4 oz.)	33	190	0.5
Tip Top Manhattan (3.4 oz.)	31	190	0.5
June Shine Sun Spritz	8	210	2.5
June Shine Tequila Margarita	10	220	1.5
June Shine Vodka Mule	10	240	2.5
Cutwater Long Island Iced Tea	13	350	5
Cutwater Lime Margarita	12.5	360	6.5
Cutwater Espresso Martini	13	540	7.5
Cutwater Piña Colada	13	550	7.5

Like a vodka soda, a "ranch water" (tequila, seltzer, lime) is lower in sugar and calories than most cocktails.

Mixers (1 can or bottle)

Club soda	0	0
Fever-Tree Light Premium Tonic Water (5 oz.)	20	1.5
Mr & Mrs T Original Bloody Mary Mix (5.5 oz.)	40	1.5
Canada Dry Tonic Water (10 oz.)	110	7

Check the percent alcohol (ABV). Some canned cocktails hit double digits, pushing the calories per can to 300, 500, or beyond.

Tonic water can have as many calories as sugary soda, but Fever-Tree Light adds far less sugar. Club soda is always calorie-free.

Chain Restaurant Cocktails (1 drink)

Outback classic martini	170	0
Outback Manhattan	180	0.5
Chili's classic margarita, on the rocks	190	5
Olive Garden berry sangria	210	6.5
Yard House old fashioned	230	4.5
Yard House mojito	230	7.5
Yard House Moscow mule	240	8
The Cheesecake Factory espresso martini	250	5
Chili's classic margarita, frozen	280	11
On the Border large house margarita, frozen	340	9.5

Thanks to the national menu labeling law, chain restaurants must list cocktails' calories (but not ABV). These examples are typical.

Classic cocktails with just a little sugar (like a Manhattan) or none (like a martini) range from 150 to 200 calories.

Most classic mojitos, Moscow mules, and "on the rocks" margaritas hover around 200 to 300 calories.

Big, sugary frozen margaritas hit 300-plus calories.

¹ Most wines range from 12% to 14% ABV.

Note: Most drinks are rounded to the nearest 10 calories. Total sugars are rounded to the nearest 1/2 teaspoon (1 teaspoon has 4.2 grams of sugar).

Sources: company information and USDA. The use of information from this article for commercial purposes is strictly prohibited without written permission from CSPI.



Bottoms up!

6 top zero-proof drinks

Nowadays, more of us are reducing alcohol or ditching it altogether, whether it's to improve health, cut empty calories, or feel better. Or maybe you're planning a pregnancy, a Dry January, or a night as designated driver.

Here's what to drink instead. They're all great tasting, modest in sugar (from added sugar or juice), and low-ish in calories per serving (anywhere from zero to what you'd get in half a light beer).

Craft-brewed water

If you're a craft beer fan, say hello to hop water.

Hoplark offers zero-calorie sparkling waters "brewed" with the pleasantly bitter hop plant flowers that give craft beers—especially IPAs—their character (see "Want to partake?"). Choose from cans named for their hops, like "citrus-forward" Citra or "pine-forward" Mosaic. Or go with Vanilla Bean or Lemongrass made with—you guessed it—real vanilla bean or lemongrass.



Buzz-free bubbles

Non-alcoholic wines have come a long way—so far, in fact, that some can stand in for a celebratory glass of bubbles without a tradeoff on taste.

Wölffer Estate would know. The company had been producing mostly alcoholic wines for decades before adding a handful of alcohol-removed wines to its repertoire.

More good news: Wölffer's **Spring in a Bottle Blanc de Blancs** sparkling wine is dry enough to give a 5 oz. glass just 6 grams (1½ teaspoons) of sugar and 40 calories. Cheers!



Mocktails that sparkle

Maison Perrier Chic cans are equal parts bubbles, fruit juice, flavor, and mocktail.

Care for a piña colada? Try a **Piña Fizz**. Each variety takes hints from a classic cocktail, but with just a fraction of the sugar (6 grams or less) and calories (30 or less)...and no syrups or mixers with food dyes (just natural colors from fruit and vegetable extracts).



Want to partake?

A 12 oz. can of an IPA beer *with* alcohol has around 200 calories. So even many non-alcoholic ones hover around 70 to 100. But a **Partake Non-Alcoholic IPA** takes it down to just 10 calories, without resorting to any tricks. (It has just four ingredients: water, barley, hops, and yeast.)

How can Partake go that low in calories yet still deliver such big IPA taste? For starters, plenty of hop flavors shine through. Then there's the "proprietary brewing method perfected over many years," says Partake's website. Translation: It's a secret.



Amaro, anyone?

Amaro is a liqueur that has been infused with botanicals (herbs, spices, etc.), which gives it bitter-sweet notes that aficionados love.



Each 7 oz. bottle of non-alcoholic **St. Agrestis Amaro Falso** holds two (strongly flavored) 40-calorie servings. So pour half in a glass with ice and a splash of seltzer, if you like. That limits the sugar to 2½ teaspoons.

Something special

Don't feel like having something that's trying to taste like beer, wine, or a cocktail? Sometimes you just want a beverage that feels like a special treat.

Something & Nothing calls itself a "premium soda," but it bears no resemblance to Coke or Sprite. Each 12 oz. can is sweetened with 40 to 60 calories' worth of fruit juices and is spiked with flavors like ginger, mint, cucumber, Thai basil, rose, or yuzu (a citrus fruit). One downside: At around \$2.70 per can, the cost isn't, um, nothing. ☺



Fitness fads?

WHAT TO KNOW ABOUT WEIGHTED VESTS & CREATINE

BY CAITLIN DOW

Some fitness trends vanish without a trace. Others explode ...and stick. Two fads you may have seen at the gym, online, or on your block: weighted vests and creatine. Does the science back the hype?

Weighted vests

"Every woman over 40 needs to buy a weighted vest," says one fitness influencer on Instagram. Why? Vest enthusiasts tout benefits for your bones, muscles, waistline, and more.

"2025 is the year of the vest," says Kristen Beavers, professor of medicine at Wake Forest University. "The way these vests are marketed, you'd think they can do anything. That's not true."

Why might a weighted vest do a body good? The idea is that by adding more weight to your body, your heart, lungs, and muscles have to work harder and the load on your bones increases.

Ready to run out and buy one? It may help you...a little.

Strength

"For older people who wore weighted vests, there were improvements in strength or function compared to those who didn't," says Beavers.

"They could get out of a chair faster; their balance was better."¹

That was a 1998 study. In a more recent pilot trial, 19 older adults were instructed to do a home-based exercise program three times a week that included lower-body strength training exercises plus walking for 30 minutes. Roughly half of the volunteers were randomly assigned to wear

a vest that weighed 10 percent of their body weight while exercising.

After 12 weeks, strength and function improved in both groups, but the vest wearers gained more strength, were able to walk farther in a six-minute test, and were able to get out of a chair more quickly than those who exercised without a vest.²

Bone health

Influencers and fitness forums often recommend a weighted vest to build (or not lose) bone. But few studies have even looked.

In one, 36 postmenopausal women with osteoporosis were randomly assigned to a control group that did no extra exercise or to walk on a treadmill for 30 minutes three times a week either with or without a weighted vest.

After six weeks, blood markers of bone health improved in both exercise groups, with no differences between groups. (The study was too short to look at bone mass, the more important outcome.) However, the weighted walkers lost four more pounds of fat, gained more muscle, and improved their balance more than those who walked without a weighted vest.³

Can a weighted vest help preserve bone during weight loss?

"We know that when people lose weight, they don't just lose fat," says Beavers. "They also lose muscle and



Don't count on a weighted vest to make your bones stronger, though they may give your strength, balance, and cardiovascular fitness a boost.



Creatine supplies muscles with the energy needed for short bursts of activity like weight lifting, which may help you get stronger over time.

bone. And for older adults, that has been shown to increase the risk of fracture.”

Why does weight loss cause bone loss?

“Your skeleton responds to the load that it’s placed under,” Beavers explains. “So if one reason that people lose bone with weight loss is because they literally don’t weigh as much, could we load them back and make their skeleton think that they are weight stable?”

To find out, she randomly assigned 133 older adults with excess weight to one of three groups: cutting calories only, cutting calories plus strength training three times a week, or cutting calories plus wearing a weighted vest for eight hours a day.

For the third group, “we replaced the weight that they lost via the vest,” says Beavers. “People would come in throughout the study, we’d weigh them, and based on how much weight they had lost or regained, we put weight in or took it out of the vest.”

After a year, all groups had lost roughly 10 percent of their starting weight. All also lost between 1.2 and 1.9 percent of the bone in their hips, with no differences between groups.⁴

“The weighted vest was not able to stop the loss,” says Beavers. “And neither was strength training.”

If not a weighted vest or resistance training, what would it take to build (or not lose) bone as we age?

“You probably need more impact,” says Beavers. That means things like running, dancing, playing tennis, or climbing stairs versus non-weight-bearing activities like cycling or swimming.

How to use a weighted vest

Want to give a weighted vest a whirl despite the mixed reviews? Buy one that you can add weight to, and start with about 5 percent of your weight, slowly building to 10 percent or so.

“But if you have back or joint pain, a vest might exacerbate it,” Beavers points out. Got osteoporosis? Talk to your doctor before investing in a weighted vest.

And some activities just aren’t weighted-vest friendly. “We don’t want you to do a lot of bending or twisting while wearing a vest,” says Beavers.

Gardening or doing yoga? “Please take the vest off,” she advises.

BOTTOM LINE: Don’t expect a daily walk with a weighted vest to curb bone loss. But there’s little harm in wearing one. You’ll make your workouts more challenging and may get a small boost in your strength, balance, and cardiovascular fitness.

Creatine

It’s hard to have a conversation with anyone about weightlifting or building muscle without hearing about creatine. It’s one of the most-studied supplements on the market.

What is creatine?

Creatine is a compound that helps supply muscles with backup energy for short, explosive movements like weight lifting or sprinting, allowing your muscles to continue contracting for a few more seconds.

So taking creatine may help you eke out a few more reps of bicep curls or push yourself faster in a sprint. And over time, that may help you build more strength and lean mass.

Our bodies naturally produce creatine, which is also found in meat, poultry, and seafood. (A 4 oz. serving contains a modest ½ gram or so.) But taking creatine supplements—a typical dose is 3 to 5 grams per day—is the best way to boost your muscles’ creatine reserves.

Bigger or stronger muscles?

Creatine helps you work harder so that you can build bigger muscles. It does nothing if you’re not pairing it with a consistent strength-training regimen. (It also does nothing for aerobic activities like long-distance running, swimming, or cycling.)

Just don’t expect to end up looking like a bodybuilder.

In one analysis of roughly 30 studies, volunteers who took creatine supplements and did resistance training packed on about two pounds more lean body mass than those who did resistance training and took a placebo.⁵ (Some of the authors of the analysis have received funding from companies that sell creatine.)

If you’re looking to gain muscle, two pounds is notable. “But lean mass is not necessarily muscle mass,” says Brad Schoenfeld, professor of exercise science at Lehman College in New

York City. Creatine can cause water retention, and that extra water gets counted as “lean body mass.”

So Schoenfeld and his colleagues (some have received funding from creatine companies) examined 10 studies that lasted for an average of about five months each.

The studies directly imaged and measured the size of the participants' muscles using techniques like ultrasound or computed tomography (CT scans) after the volunteers took creatine or placebo supplements and did resistance training.

Creatine's impact on muscle size? Tiny. On average, taking creatine while resistance training increased the thickness of upper- and lower-body muscles by roughly five-hundredths of an inch compared to doing resistance training alone.⁶

The trials included in Schoenfeld's analysis measured muscle size while the trials in the earlier analysis measured body mass, so their findings can't be compared. But estimates of creatine's impact on muscle growth may be a bit inflated, says Schoenfeld.

Creatine may help some people get stronger, though the effects tend to be small. In an analysis of 69 studies, creatine takers were able to bench about 3 pounds more—and squat about 12 pounds more—than placebo takers.⁷ (One co-author reported ties to the creatine industry.)

It's also not clear who benefits most from taking creatine. Most studies show less of a creatine-fueled boost in muscle size and strength in women and older adults.⁵⁻⁷

“And diet may make a difference,” says Schoenfeld. “Because creatine is found in meat, vegans and vegetarians tend to respond better to creatine supplementation because they have less in their bodies to start with.”⁸

► Heard that creatine can boost cognitive performance and memory? The evidence is weak. Go to cspionline.org/creatinine for more info.



If you're looking to maximize muscle growth and strength, you could consider taking creatine. But the gains will likely be modest.

Is creatine safe?

“I have not seen any good evidence of side effects that I would be wary of in healthy people,” says Schoenfeld.

In one analysis of roughly 26,000 volunteers who participated in 685 creatine studies, the authors reported no differences between creatine takers and placebo takers in 35 side effects like muscle cramps, headaches, kidney problems, or GI issues like nausea or diarrhea.⁹ (The analysis was partly funded by creatine companies.)

The primary concern with creatine is that it breaks down into a compound called creatinine, which is eliminated from the body through the kidneys. So, to be on the safe side, people with kidney disease should check with their doctor before taking creatine.

How should you take it?

Interested in trying creatine? First, look for a brand that has received a third-party certification, like those described by the Department of Defense's Operation Supplement Safety.¹⁰ That way, you can trust that the label matches what's in the package.

Some third-party companies also ensure that there are no unsafe levels of contaminants and that the supplements are free from substances banned by major athletic organizations.

Creatine typically comes as a powder that you mix into water or another liquid, though it's also available as chewable tablets or capsules.

Just be wary of gummies. In June, when the supplement-rating app company SuppCo tested creatine gummies (all were bestsellers on Amazon.com, said SuppCo), “four of the six failed our testing spectacularly, with almost no creatine whatsoever in them.”¹¹

BOTTOM LINE: Creatine is far from a magic bullet, and it doesn't work for everyone. “Think of it this way,” says Schoenfeld. “Creatine would be the cherry on top of the sundae, where the sundae is your training, nutrition, recovery, and sleep. It doesn't add a whole lot.” 

¹ J. Gerontol A Biol. Sci. Med. Sci. 53: M53, 1998.

² Phys. Act. Health 3: 108, 2019.

³ Rheumatol. Int. 33: 291, 2013.

⁴ JAMA Netw. Open 8: e2516772, 2025.

⁵ Nutrition 103: 111791, 2022.

⁶ Nutrients 15: 2116, 2023.

⁷ Nutrients 17: 2748, 2025.

⁸ Int. J. Environ. Res. Public Health 17: 3041, 2020.

⁹ J. Int. Soc. Sports Nutr. 22: 2488937, 2025.

¹⁰ opss.org/article/why-third-party-certification-is-important-dietary-supplements.

¹¹ supp.co/articles/suppcos-tested-creatine-testing-results-gummies-failed-lab-analysis.

The Healthy Cook



No spring chicken

These comfort foods are guaranteed to warm up your winter. Bonus: Each recipe features a “flexitarian” (flexible vegetarian) twist: I swap some chicken for extra beans, greens, or meaty-tasting mushrooms. Bring on the vegetables! ☺

GREEN CHICKEN CHILI

For less heat, remove the seeds and ribs from the peppers. If you like, you can top the dish with red onion, lime, cherry tomatoes, tortilla chips, cilantro, or avocado.

2	tsp. ground coriander	3	cloves garlic, minced
1	tsp. black pepper	1	cup chicken stock, ideally homemade
½	tsp. dried oregano	2	15 oz. cans no-salt-added white beans, undrained
1	lb. boneless, skinless chicken breasts	1	jalapeño pepper, minced
2	Tbs. olive oil	½	cup fresh cilantro, minced
1	white onion, diced	1	tsp. kosher salt
2	poblano peppers, diced		

1 In a small bowl, combine the coriander, black pepper, and oregano. Pat the chicken dry with paper towels and season with the spice mixture.

2 In a large, heavy skillet over medium heat, heat the oil until shimmering. Sauté the chicken until browned, 4–5 minutes. Turn and sauté until cooked through, 1–2 minutes. Remove from the pan and allow to cool. Using 2 forks, shred the chicken.

3 In the same skillet, sauté the onion and poblanos until the onion starts to brown, 3–5 minutes. Stir in the garlic and cook for 1 minute.

4 Stir in the chicken stock and beans with their liquid. Simmer until thickened slightly, 7–10 minutes.

5 Add the jalapeño, cilantro, and the chicken with any juices. Cook until heated through, 1–2 minutes. Season with the salt.

TIME: 45 MINUTES | SERVES 6

PER SERVING (2 cups): calories 260 | total fat 7 g | sat fat 1 g | carbs 24 g | fiber 7 g | total sugar 2 g | added sugar 0 g | protein 26 g | sodium 400 mg

For cooking advice, write to Chef Kate at healthycook@cspi.org

CABBAGE & CHICKEN STIR-FRY

Who can get enough cabbage? Not me! I always keep a head in my fridge for stir-fries, salads, slaws, braises, you name it. Tip: It's easier to thinly slice the chicken if you freeze it for 15–20 minutes.

1	tsp. + 2 tsp. reduced-sodium soy sauce	½ Tbs. oyster sauce
1	tsp. + 1 Tbs. cornstarch	½ tsp. balsamic vinegar
1	tsp. + 1 Tbs. + 1 Tbs. peanut oil	1 cup chicken stock, ideally homemade
1	boneless, skinless chicken breast, sliced	1 Tbs. minced garlic or ginger
		6 cups chopped green cabbage

TIME: 20 MINUTES | SERVES 2

PER SERVING (3 cups): calories 310 | total fat 18 g
sat fat 3 g | carbs 13 g | fiber 2 g | total sugar 3 g | added sugar 0 g
protein 24 g | sodium 640 mg



- 1 In a medium bowl, whisk together 1 tsp. soy sauce, 1 tsp. cornstarch, and 1 tsp. oil. Toss with the chicken.
- 2 Make the sauce: In a small bowl, whisk together 2 tsp. soy sauce and 1 Tbs. cornstarch with the oyster sauce, vinegar, and stock. In a small pan over medium heat, heat 1 Tbs. oil until shimmering. Stir-fry the garlic until fragrant, 30–60 seconds. Add the stock mixture and simmer, whisking constantly, until thickened, 2–3 minutes.
- 3 In a large nonstick pan over medium-high heat, heat 1 Tbs. oil until shimmering. Add the chicken and sauté until browned, about 2 minutes, then stir-fry until cooked through, 1–2 minutes. Remove from the pan.
- 4 In the same pan, stir-fry the cabbage until charred in spots, 2–3 minutes. Toss the sauce and chicken with the cabbage.

STUFFED PORTOBELLO MUSHROOMS

The combination of mushrooms, tomato paste, sun-dried tomatoes, and soy sauce makes this dish super savory. I love the crunch of panko, but you can use whatever kind of breadcrumbs are in your pantry.

2	Tbs. tomato paste	1	lb. ground chicken breast
1	Tbs. + 1 Tbs. olive oil		
1	Tbs. balsamic vinegar	½	cup chopped oil- packed sun-dried tomatoes, drained
1	Tbs. reduced- sodium soy sauce	½	tsp. kosher salt
2	cloves garlic, minced	¼	tsp. black pepper
½	tsp. dried thyme	½	cup panko
4	large portobello mushrooms, stems removed	¼	cup grated parmesan

TIME: 45 MINUTES | SERVES 4

PER SERVING (1 stuffed mushroom): calories 310 | total fat 13 g
sat fat 2.5 g | carbs 16 g | fiber 3 g | total sugar 4 g | added sugar 0 g
protein 31 g | sodium 580 mg



- 1 Preheat the oven to 425°F. In a small bowl, whisk together the tomato paste, 1 Tbs. oil, vinegar, soy sauce, garlic, and thyme. Place the mushrooms on a foil-lined rimmed baking pan, gill side up. Spoon the tomato paste mixture onto the mushrooms. Roast until tender, 18–20 minutes.
- 2 Meanwhile, in a large bowl, mix the chicken, sun-dried tomatoes, salt, and pepper together. When the mushroom caps are tender, remove them from the oven and stuff them with the chicken mixture.
- 3 In a small bowl, mix the panko with 1 Tbs. oil until well coated. Stir in the parmesan. Sprinkle over the mushrooms. Roast until the chicken is cooked through, 15–20 minutes.

What to Eat Now

AND HOW THE FOOD INDUSTRY INFLUENCES WHAT WE BUY

Want to know not just what's *in* your food, but *why*? Marion Nestle's new book tours the supermarket, from the meat, fish, dairy, eggs, and produce sections to the ultra-processed foods in the center aisles. If you're confused about food, it's for good reason, she says. You're *supposed* to be confused. Here's a glimpse into what shapes our food shopping.

Why does the food industry try to influence what we buy?

MN: They want to sell as much food as possible at as high a price as possible to as many people as possible. If they don't, their stockholders get upset and their stock prices go down.

They behave like any other corporation in our investment system. Food companies aren't public health agencies. Once you understand that, you can better understand what you're confronted with when you go into a supermarket.

Hasn't that always been true?

MN: It's gotten worse. In the 1980s, there was an enormous increase in food production, enough so that the calories in the food supply went up to 4,000 per person per day—that includes men, women, babies. Most people need only half that.

And then, because of the shareholder value movement, which came into its own in the 1980s, publicly traded companies were expected to not only consistently make a profit, but to *grow* their profit. They have to report growth to Wall Street every 90 days, which ramps up the pressure on them.

Did those changes affect more than just the food industry?

MN: Yes. This system has induced many publicly traded companies to

treat workers poorly, produce profitable but unhealthful products, extract from and pollute the environment, lobby against regulation, and foist the health, social, and environmental costs of their practices on taxpayers.

How did the food industry respond?

MN: They put food everywhere. Foods and beverages are now more likely to be sold at places like gas stations, drugstores, and stores selling household items, like Walmart, Target, and Costco. My favorite example is bookstores. If you're old enough,



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you can remember when bookstores wouldn't let anybody with food anywhere near the books. Now bookstores sell their own food.

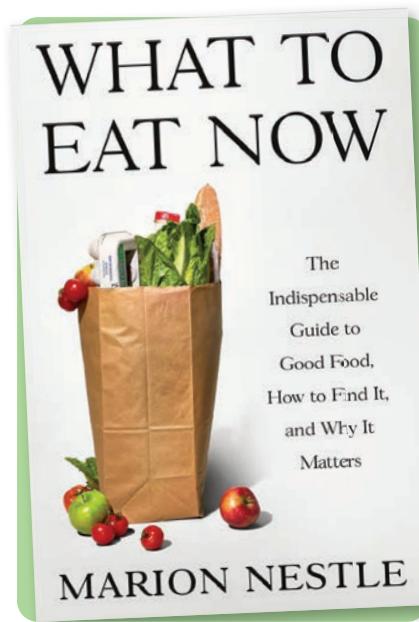
And aren't portions much larger?

MN: Yes. I remember when muffins, which used to have 200 calories, suddenly had 800 calories, when bagels went from what we would now call mini-bagels to the giants they are today, and when 7-Eleven added a 64-ounce Double Gulp soda to its lineup.

Many restaurant portions are so big they could feed four people. I think larger portions are enough to explain the obesity epidemic.

How has the supermarket industry changed?

MN: It's gotten more consolidated. The biggest four companies—Walmart, Kroger, Costco, and Albertsons—control half or more of all



food sales. Kroger and Albertsons each owns roughly 15 smaller chains. Walmart alone controls a quarter of the market. That's huge.

The bigger the chain, the more power it has to set wages and prices and exercise political power through campaign contributions and lobbying.

And we subsidize the wages of some of their employees?

MN: Yes. Stores like Kroger don't pay some of their workers enough to live on, so many are on SNAP—the Supplemental Nutrition Assistance Program—which used to be called food stamps. So taxpayers are subsidizing the employees' food purchases.

In 2020, a typical Kroger employee earned \$24,617. Meanwhile, Kroger's CEO earned more than \$20 million.

Why does the book focus on supermarkets?

MN: I use supermarkets as an organizing device, but the same issues apply anywhere food is sold. How is it positioned? How is it priced? What does the packaging look like? What messages does it transmit?

The industry studies every bit of that as if it were a bible. They know which foods bring people into the store, which foods people look at, which foods go with other foods. They know exactly what pushes consumers' buttons and makes them buy.

Like what?

MN: The more products you look at, the more products you buy. So stores are set up to make you do as much walking as possible, so you're exposed to as many products as possible and you're in the store as long as possible.

That's why the milk is always on the wall that's farthest from the entrance. That's not an accident. Yes, the milk has to be against a wall so it's easier to refrigerate, but it's almost always on a far wall.

What else do stores do?

MN: They want impulse buys. So they make the most profitable products the most visible. They're at the cash registers, the ends of aisles, or 60 inches above the floor—adult eye level—in



Stores expose you to as many highly profitable foods as possible.

the aisles. Companies pay slotting fees to put their products in those places.

Even the electronic self-checkout counters have products placed nearby, so at the last minute you'll grab them and toss them into your basket.

And they want you to see some products again and again?

MN: Yes. That's why drinks are not just in the drink aisles, but at the ends of aisles, at the entrance to the store, near the checkout. You can't go through a supermarket without running into drinks everywhere.

What other foods are highly profitable?

MN: Ultra-processed foods. They're relatively inexpensive, they're attractively and conveniently packaged, and they're backed by huge advertising budgets.

Why are they so profitable?

MN: Their ingredients can be purchased by food manufacturers when they're at their cheapest. And most have an enormous shelf life. Many breakfast cereals, for example, can sit on the shelf for a year or longer.

Sellers of processed foods say they are just giving you what you want: easy-to-eat foods requiring no preparation, tasting better than anything you could make yourself, and guaranteed not to get moldy or spoil.

So what's the problem?

MN: Many are deliberately designed to be irresistibly delicious, so that once you have a bag of them in front of you, you can't stop eating them. And they're often laden with sugar, salt, and calories or with additives.

Yes, there are a few healthier exceptions, of course, like some commercial whole wheat bread and

flavored yogurt. But if you get your calories from ultra-processed foods, you're not getting them from healthier foods that you have to cook.

Or from fresh fruits or vegetables that might spoil?

MN: Yes. And the food industry has normalized these foods so that many people get most of their calories from ultra-processed foods and snacks.

I would argue that it's possible to eat healthfully in any supermarket in America. There's a much greater variety of fruits and vegetables now in supermarkets everywhere I go. But you have to have the money, you have to know how to cook, and you need the time and energy to do it.

And food prices have gone up?

MN: That was one of the big shockers since I wrote the first edition of *What to Eat* in 2006. The prices we cited then have doubled.

Much of the increase happened since 2019, when supply-chain

problems during the Covid pandemic led supermarkets to raise prices. But the stores have kept prices high, greatly increasing their profits.

They used those record profits to buy back stock and raise executive compensation rather than reduce prices for consumers or improve wages or working conditions for their employees.

Have prices risen more for fruits and vegetables?

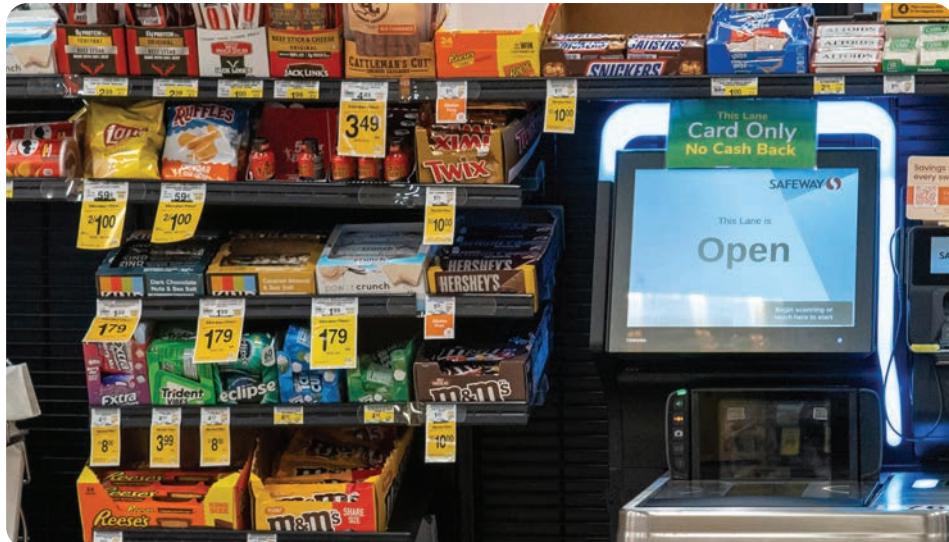
MN: Yes. To anyone on a budget, fruits and vegetables appear expensive. And they *are* expensive relative to other foods. The price of fruits and vegetables has gone up higher than the average for all foods, and much higher than the price of ultra-processed foods.

And it's hard to buy produce in low-income neighborhoods that have no supermarkets.

MN: Right. Supermarket chains avoid low-income areas. In general, they prefer to locate within a half-mile radius of a very large number of people who make \$100,000 a year or more.

Switching gears, how does the food industry shift food safety burdens onto consumers?

MN: Chicken is frequently loaded with toxic *Salmonella*, but from the



What if stores put fruits or vegetables instead of candy at self-checkout counters?

industry's standpoint, it doesn't matter because you're going to cook it. And if you're sloppy in your kitchen, it's your fault, not theirs.

Other countries have made more progress reducing *Salmonella* because they insist that the producers take responsibility for it.

And it's not just chicken?

MN: No. Fresh eggs carry the required safe-handling instructions: "To prevent illness from bacteria, keep eggs refrigerated, cook eggs until yolks are firm, and cook foods containing eggs thoroughly." But you need a magnifying glass to read it.

And we shouldn't have to run our kitchens like biohazard facilities.

Can't vegetables and fruit also be contaminated?

MN: Yes, because they may be grown next to confined animal feeding operations that discharge a lot of waste into the local water supply and land.

The FDA calls them "non-sterile environments." It's a wonderful euphemism, but we're talking about toxic bacteria from animal manure contaminating vegetables or fruit.

The book lists "what ifs" that would fix our food system. What are some examples?

MN: What if more of our farmland were used to grow fruits and vegetables instead of the corn and soybeans that are used as feed for animals

and fuel for automobiles? Maybe then, more people could afford to eat them.

What if supermarkets stopped taking slotting fees and devoted prime real estate to the healthiest products? What if the stores put packs of fruits and vegetables at cash registers? What if they insisted that their suppliers use sustainable production methods?

What if everyone in the food system paid workers fairly and treated them decently? What if they respected animal welfare? What if fast-food companies sold salads at a lower price than hamburgers?

Wow. We have such a long way to go. What's the best diet advice in the meantime?

MN: The same diet is appropriate for preventing practically every chronic disease. I love Michael Pollan's formulation: "Eat food. Not too much. Mostly plants."

That takes care of it, for human health and for the planet, because the healthiest diet for people also creates the lowest carbon emissions.

I'm an omnivore, but I don't eat a lot of meat. Most people would be better off if they replaced a lot of meat with vegetables. Unfortunately, the entire system is designed to make a very different diet the default. 

Oatmeal & beyond

THE HEALTHIEST HOT CEREALS

BY LINDSAY MOYER

Oatmeal is always whole grain. But many packets are pricey, too sugary for breakfast, or too low in calories and protein for a meal. (Five grams of protein doesn't make much of a dent in your 50-gram daily target.) Or maybe you want a new flavor, texture, topping, or grain. Here's how to expand your hot-cereal horizons.



Plain oats plus protein

If you're looking for plain unsweetened oats with roughly double the protein of regular oats (10 grams per serving), take your pick of Bob's Red Mill Protein Oats, Kodiak Classic Rolled Protein Oats, or Quaker Protein Old Fashioned Rolled Oats.

Bob bumps up the protein by tinkering with the oat itself; the company's Protein Oats are a special oat variety that was bred to be higher in protein. The other two add a little whey and pea protein (Kodiak) or soy protein (Quaker). None add sugar.

All three products are also unflavored, so think of each as a blank canvas. Add your own fruit, nuts, whatever.

Heads up: Because Kodiak and Quaker add protein, make sure you shake up the tub or bag before you pour out a serving. Otherwise, much of the extra protein could end up at the bottom of the container.

Want to make your own protein oats? Just add protein from toppings or mix-ins to your favorite plain oats. A cup of regular dairy or soy milk, for example, adds about 8 grams, while ultra-filtered milk (like Fairlife) has 13 grams. And a 5 oz. serving of Greek yogurt—add it after the oats are cooked—ups the protein by 15 grams or so.

For just a few extra grams (plus plenty of healthy fats), go with a tablespoon of peanut butter (4 grams of protein) or hulled hemp seeds (3 grams).

Top things off

Need to jazz up plain oats? Try one of these combos:

- Raisins or dates, walnuts or pecans, pumpkin spice
- Apricots (fresh or dried), toasted almonds
- Chopped apple or pear, cinnamon
- Blueberries (fresh or frozen), chia seeds, yogurt
- Banana, peanut butter (add a spoonful after heating, or mix in a powdered peanut butter like PB2)



Instant savings

If you invest a few minutes of prep time once a week, oats can be one of the cheapest healthy breakfasts.

For example, a 42 oz. canister of Whole Foods 365 Organic Quick Oats costs just \$6—about 20 cents per serving. Ditto for 365 Organic Old-Fashioned Rolled Oats. A box of 365 Organic Maple & Brown Sugar Instant Oatmeal, on the other hand, triples that, to about 60 cents a packet.

Even after adding spices, fruit, nuts, whatever, you should still come out ahead with the big tub. Bonus: If you portion out servings of oats and dry toppings into reusable containers, you'll ditch the boxed packets' excess packaging and set yourself up for a no-fuss breakfast whenever the mood hits. Just add water!



Gluten-free finds

Got celiac disease or non-celiac gluten sensitivity? Oats are naturally gluten-free, but they can be contaminated with gluten if they've been grown in the same fields—or processed on the same equipment—as wheat or other grains that naturally contain gluten. So if you

need to avoid gluten, only buy oats that are labeled "gluten-free." (For a list of which products in this article fit the bill, go to csp.org/GFgrains.)

And if you're avoiding oats because of an allergy—or just want something new—you're in luck. Three other gluten-free whole grains have roughly as much fiber and protein as oats:

TEFF

The Ethiopian staple cooks up smooth, thick, and creamy, with a nutty flavor that pairs well with raisins or chopped dates and toasted chopped walnuts or pecans.

Tip: If your package recommends rinsing the teff before cooking, use a coffee filter. The holes in many strainers are too big to contain the tiny grain.

QUINOA

Compared to teff, quinoa's texture is less porridge-y, and its taste is more neutral. That means your toppings can lean sweet or savory.

To go savory, top a bowl of quinoa (pronounced KEEN-wah) with a fried or hard-boiled egg, a few slices of avocado, and a vegetable or two (like raw or sautéed cherry tomatoes, baby kale or spinach, or scallions), and a dash of hot sauce or everything bagel seasoning.

MILLET

Think of millet as a slightly starchier version of quinoa. The taste? Like corn grits, but with more texture and whole grain. (Grits are milled—that is, refined—corn.)

Whole grain vs. whole grain

For each breakfast grain, here's how much fiber, protein, and calories to expect from a typical 40-gram serving (about $\frac{1}{4}$ to $\frac{1}{2}$ cup dry).

	Calories	Fiber (g)	Protein (g)
Oat bran	150	7	7
Bulgur	140	5	5
Oats (quick, rolled, or steel-cut)	150	4	5
Quinoa	150	3	6
Teff	150	3	5
Millet	150	3	4

Source: Bob's Red Mill (oat bran), USDA Food Data Central (other grains).



It's (all) in the bag!

Some products really have the whole package: oats, fruit, nuts, protein, flavor. Bonus points if they come in a big multi-serving bag that lets you choose how much (or how little) you want to eat. Two picks that fit the bill:

SEVEN SUNDAYS PROTEIN OATS

The Wild Berry, Apple Cinnamon, and Maple Almond varieties of Seven Sundays Protein Oats come brimming with good stuff like almonds, flax seeds, chia seeds, dried fruit, and enough "upcycled oat protein" (oat flour left over from making oat milk) to hit at least 10 grams of protein per $\frac{1}{2}$ cup (dry) serving. And the added sugar (6 to 8 grams) isn't bad.

But its convenience comes at a cost: We paid roughly \$9 for 16 oz. That works out to \$1 per serving.

BOB'S RED MILL OLD COUNTRY STYLE MUESLI

It's a perennial favorite of ours for a reason. It's chock full of yummy, nutrient-rich ingredients—we're talking whole grains (wheat, rye, oats, triticale), seeds (sunflower, flax), nuts (almonds, walnuts), and dried fruit (dates, raisins). It has no added sugar. And you can eat it hot or cold (like cereal or overnight oats).

What's more, Bob's large 40 oz. bag comes at a nice price. We paid just \$9. That comes to roughly 50 cents for each generous portion (twice the serving size listed on the bag's Nutrition Facts label).



Slashing sugar

Many instant oatmeal packets come with at least two teaspoons of added sugar and, well, not many oats. But Quaker has cracked the code on slashing sugar while keeping flavor.

If you're after the traditional aroma and taste of Maple & Brown Sugar, Apples & Cinnamon, or Cinnamon & Spice, grab a Quaker Lower Sugar Variety Pack. Each packet has just 2 to 4 grams of added sugar, thanks to sweet-tasting monk fruit extract. (Note: We rate monk fruit extract as "caution" because it hasn't been well tested in animals, but the fruit has been eaten in China for centuries. See chemicalcuisine.org.)

The packets are small, but you can bulk them up with extra quick-cooking oats, a chopped apple, and/or a spoonful of peanut butter.



Bran with benefits

Why trade in your everyday oatmeal for an occasional bowl of hot oat bran?

It's not just that oat's bran—its outer layer—has almost twice as much fiber as oatmeal and no less protein.

Texture-wise, oat bran is a nice change of pace. If you'd rather have a smooth bowl of porridge than chewy steel-cut oats every once in a while, give oat bran a try. It's surprisingly creamy.

And if you're a fan of lower-fiber non-whole-grain hot cereals like Cream of Wheat or grits, you've got even more reason to switch.

More texture, less time

One way to pick your perfect oats: Ask yourself how much time you have to make breakfast on a busy morning.

Depending on how the oats have been processed (rolled, chopped, etc.), cooking them runs the gamut from slow to speedy. Steel-cut oats have the thickest texture and the most chew, but they also take the longest to cook—about a half hour on the stovetop.

But if you're willing to trade some texture for time saved, quick steel-cut oats from Quaker and many other brands—they're cut into smaller pieces than regular steel-cut oats—take no more time than rolled ("old-fashioned") oats to cook in the microwave or on the stovetop, about 3 to 5 minutes.

Tip: If you cook your quick steel-cut oats in the microwave, use a deep, wide bowl that's larger than you'd think you need, so it doesn't overflow.

If you prefer regular steel-cut oats, try batch cooking. For four servings, bring 4 cups of water to a boil, stir in 1 cup of oats, reduce the heat to low, and simmer uncovered over low heat, stirring occasionally, for about 25–30 minutes, then refrigerate. To reheat one serving at a time, microwave with a splash of water and any fruit or other toppings.

You could also try bulgur—the quick-cooking, nutty-tasting whole-grain wheat that's the main ingredient in tabbouleh (a Middle Eastern bulgur salad)—for breakfast. It has no less fiber or protein than oats (see "Whole grain vs. whole grain").

The "fine" kind of bulgur only needs a 10-to-15-minute soak in boiling water. A coarser or "medium" grind needs a simmer (check the package for instructions). Try serving cooked bulgur with cinnamon, apples or pears, and walnuts or pecans.



Top seeds

Most hot cereals have no more than 200 calories per serving. That's not much of a meal. For more staying power, stir a spoonful of seeds into your cooked oats.

Chia and hulled hemp seeds (aka "hemp hearts") both pack in polyunsaturated (good) fats, zinc, iron, magnesium, and a few grams of fiber (chia) or protein (hemp) per tablespoon.

Whole Foods 365 Super Seed Trio combines chia and hemp seeds with ground flaxseed, another healthy-fat-and-fiber bonanza. (Tip: Once you open a bag of seeds, keep it in the fridge or freezer so its polyunsaturated fats stay fresh for longer.)

Or grab an all-in-one blend of oats and seeds like Trader Joe's Unsweetened Instant Oatmeal Packets, Trader Joe's Organic Rolled Oats with Ancient Grains & Seeds, or Purely Elizabeth Organic Original Superfood Instant Oatmeal. All three have oats, quinoa, and amaranth plus flax and chia seeds. Added sugar? Zip.



Protein-packed packets

It's not easy to find instant oatmeal with extra protein and little sugar, but two new product lines are raising the bar.

KODIAK PEAK OATMEAL

Kodiak bulks up its "Peak" oatmeals with added pea and milk proteins and cuts the sugar with monk fruit extract. The Berries & Cream, Banana Nut, and Maple & Brown Sugar packets deliver a reasonable 1½ to 2 teaspoons (7 to 9 grams) of added sugar.

And each serving is larger than typical instant oat packets, so you get a meal's worth of protein (20 grams) for only 300 calories.

QUAKER NO ADDED SUGAR PROTEIN

So far, Quaker makes only one variety of No Added Sugar Protein Instant Oatmeal. Each 180-calorie packet of Apples & Cinnamon supplies 10 grams of protein (from the oats and added whey protein) with zero grams of added sugar (its 5 grams of sugar all come from dried apples). Monk fruit and stevia extracts make up the rest of the sweetness.

How about a few more flavors, Quaker? 🍎



FOOD FIND

Good seeds

Pomegranates are the crown jewels of the fruit universe. Their dazzling ruby-red-coated edible seeds (they're really "arils"—sacs of juice with seeds inside) are like tiny gems that explode with flavor in your mouth.

To stop the arils from flying while you separate them from the inner white membrane, cut your pomegranate into chunks, then submerge them in a large bowl of water while you pluck away. The white stuff floats to the top while the edible seeds sink to the bottom. Voilà.

Many grocers sell plastic tubs of refrigerated arils or bags of frozen ones. But you could wind up paying for a soggy, less-crisp texture and plastic packaging waste. In this case, fresh is best.

A 5 oz. serving of arils (about $\frac{3}{4}$ cup) has an impressive 6 grams of fiber, plus 15 to 20 percent of a day's vitamins C, K, and folate, all for around 120 calories.

But don't get carried away with claims that pomegranate—or any other fruit or vegetable—is a superfood.

Why stress over whether pomegranates are better for you than blueberries, mangos, or some other fruit? They're all healthy. And most of us could stand to eat more fruits and vegetables, period. So play the field!

Easier to just drink pomegranate juice? Maybe. But not better. Both forms of pomegranate supply vitamins, but only the arils offer fiber. And drinking juice is unlikely to fill you up like chewing on whole, crunchy seeds will.

Lucky for you, it's pomegranate season!

QUICK DISH

RUBY RED POMEGRANATE SALAD

Divide 1 head chopped radicchio, 6 sliced radishes, 1 sliced and quartered navel orange, and $\frac{1}{2}$ cup pomegranate arils between 4 plates. Whisk together $1\frac{1}{2}$ Tbs. red wine vinegar, $1\frac{1}{2}$ Tbs. extra-virgin olive oil, and 2 Tbs. minced red onion and spoon over the salad. Season with $\frac{1}{4}$ tsp. kosher salt and top with $\frac{1}{4}$ cup microgreens (optional). Serves 4.



FOOD FAIL

Stack attack

"Classic coffee cake meets fluffy buttermilk pancakes in the biggest collab since eggs met bacon," says IHOP.

"Biggest" is right. The chain's **Coffee Cake Pancakes** take, um, the cake. The limited-time "Spotlight Stack," which was released in September, packs more sugar and calories than any other pancakes on the menu.

All told, the four white-flour pancakes plus cinnamon streusel, cinnamon spread, cream cheese icing, and whipped topping racks up 1,310 calories, 102 grams (that's 24 teaspoons!) of total sugar, and 23 grams of saturated fat (an entire day's worth).

That's as many calories as *three* McDonald's Double Cheeseburgers. You'd do less damage starting your day with *five* Dunkin' glazed donuts.

Less than half the calories (520) come from the pancakes. IHOP piles on 420 calories from the streusel (mostly white flour, sugar, and palm oil), adds 240 more from the cinnamon spread (sugar, palm-oil margarine, etc.), tacks on 100 from the icing (largely sugar, water, and cream cheese), and tops it all off with whipped topping (water, hydrogenated oil, sugar, etc.). Sheesh!

Of course, stacks of white flour, bad fats, and sugar are IHOP's specialty. It's got 1,280-calorie Oreo Cheesecake Pancakes, 1,010-calorie Blueberry Cheesecake Pancakes, 740-calorie Cupcake Pancakes, and more.

At IHOP, you've got a dozen ways to start your day with dessert.

