A well-studied benefit of home-made food is a lower intake of sugar, excess salt, & highly-processed fats. Another advantage of home cooking is that it often features men in aprons. Pictured here are Dr. Hassell & his son Tor making the Homemade Mayonnaise on page 41.

Eating out at the . . . supermarket?

One-stop shopping! The supermarket does it all! “Home-made” soups, “fresh” deli salads, “natural” cooked chickens, hot and fragrant, looking for a loving home . . . it may seem like it doesn’t matter whether we cook our own food or not. Chicken is chicken, right? Well, no. Those hot ready-to-eat chickens may look the same but they have had some serious work done. For example, the ingredients of a popular rotisserie chicken are listed as salt, sodium phosphate, modified food starch (potato, tapioca), potato dextrin, carrageenan, sugar, dextrose, spice extractives, soy lecithin, and flavorings. As Michael Pollan suggests in his book Food Rules, “Avoid food products containing ingredients that no ordinary human would keep in the pantry.” The home-cooked chicken needs only two simple ingredients – salt and freshly ground pepper – and it’s THE MOST DELICIOUS CHICKEN IN THE WORLD.

The take-away? Leave it there.

Okay, we know that roasting a whole chicken at home is going to take 1½ hours, and you are tired and hungry and don’t feel like dealing with it. Here is a solution: bring home a package of chicken thighs (bone-in and with skin) and a container of chopped vegetables like butternut squash, available in the produce department of most supermarkets. (There are lots of ready-to-cook vegetables available, but plenty are also ridiculously easy to prepare from scratch, like cauliflower and asparagus.) So, preheat the oven to 400 degrees and prepare the chicken according to the recipe further on in this newsletter. Roast the vegetable pieces with the chicken (or separately, depending on the vegetable) on a rimmed sheet pan. Either way, in about 45 minutes you’ll have a hot chicken dinner and leftovers for tomorrow’s lunch.

The convincing case for home cooking

Home-made food is a world apart from the same foods produced commercially. Here are some reasons why preparing our own food is a critical health decision:

- Better health outcomes: Studies that emphasize home-prepared food\(^1\) show striking improvements in health outcomes such as reduced heart attack, stroke, and cancer, whereas studies that achieve weight loss using commercially processed foods do not show improvements in health outcomes.\(^2\)

- Reduced risk for diabetes and heart disease: People who prepare more of their own food are less likely to develop diabetes.\(^3\) Home-made food is cooked at lower temperatures and with fewer preparation steps than commercial options, leading to greater nutrient retention even when the raw materials are identical. Eating commercially-prepared foods increases our risk factors for diabetes and heart disease.\(^4\)

- Less added sugar, salt, and processed fats: Food we make ourselves will have much better ingredients than the commercial versions.\(^5\) Added sugar, salt, and fat sells – and most manufacturers are going to choose a cheap highly-processed fat rather than a high-quality extra-virgin olive oil.

- Weight management is easier: When we cook our own food we make better choices, eat less calories,\(^6\) and typically eat smaller portions with fewer hidden calories – in fact, about 200 calories a day fewer than commercially-prepared foods.\(^5\) That amounts to about ½ pound of weight loss per week!

- Home cooking is cheaper! Preparing our own food saves a LOT of money.\(^7\) However, it takes planning, careful shopping, and preparing our food from scratch. (The shopping list on the cookbook tab of our website can help you get started.)

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\(^1\) Estruch, R. et al. NEJM 2013;368:1279-90
\(^2\) Look AHEAD, NEJM 2013;369:1279-90
\(^3\) Zong, G. et al. Abstract 17285. Presented at: AHA Scientific Sessions; Nov. 7-11, 2015; Orlando, FL
\(^4\) Birlouez-Aragon, I. et al. AUCN 2010;91:1220-6
\(^5\) An, R.EJCN 2016;70:97–103
\(^7\) McDermott, A. and Stephens, M.B. Fam Med 2010;42(4):280-4
Frisk the fancy food, too

We all know we should avoid fast food – but we may be no better off eating at a nice restaurant instead! It appears that, in the real world, both sources have similar nutrition hazards.5 The unavoidable fact is, the more we can avoid eating food with hidden salt, sugar, starch, and low-quality fat, the better off we’ll be. As stated in food rule #34 from Food Rules, “Sweeten and salt your food yourself.” Then there’s rule #63: “Cook.”

So here is our recipe:

Roasted Chicken Thighs

This might be the simplest treatment of chicken we know. Thighs are our favorite both to eat and to prepare, and cooking with skin and bone intact is best for the meat. Cook as many as will fit in the pan: leftover chicken is very useful. Roasting a whole chicken is an option if you want the mix of white and brown meat or need a wishbone: see page 221 of Good Food, Great Medicine, 3rd edition.

Serves about 4–6, depending on thigh size (of the chickens)

4 – 8 chicken thighs (or breasts) bone-in, with skin salt and freshly ground pepper

Preheat oven to 400 degrees and lay out a roasting pan

1. Trim excess fat and skin overhang with kitchen scissors. (If you use kitchen tongs instead of your hands, it’s a very neat operation.)

2. Lay thighs skin side down in a roasting pan and season thoroughly and generously with salt and pepper. (This step is important for flavor! Under-seasoned meat makes people think fondly of the cooked chickens at the supermarket.) Then turn the thighs over so the skin side is up and sprinkle with more salt and pepper. (We eat the crispy cooked skin so we don’t season this side as heavily.)

3. Roast uncovered in the upper third of the oven for 45–60 minutes, depending on the size of the thighs. The skin should be nicely browned and the meat should pull easily from the bone.

Note:

- For an easy and complete meal, place the chicken thighs in a rimmed sheet pan and surround with chopped vegetables tossed in extra-virgin olive oil and sprinkled with salt and pepper. (See pages 169-174 for ideas.) Dense vegetables like squash or sweet potato can often share the same pan with the chicken, but quicker cooking vegetables like cauliflower florets or chopped cabbage can be cooked separately but in the same oven. Everything should be ready together. Yum!

Good Food, Great Medicine classes

The two-part class series targets weight loss, insulin resistance, and type 2 diabetes, and details steps for preventing or reversing them. The classes are based on the 3rd edition of Good Food, Great Medicine, which each participant will receive at the first class.

Good Food, Great Medicine class (part 1):

- Review inter-relationship of excess waistline and weight, insulin resistance (common to most cases of type 2 diabetes), and common chronic diseases.
- Discuss the role of the “key three” – a whole food Mediterranean diet, daily activity, and enough sleep.
- Work through the 14 simple steps that target your risk factors and produce effective, lasting change in your waistline, blood sugar, and other health risks.

Good Food, Great Medicine class (part 2):

- Explore practical application of whole food choices and menu planning. See demonstrations of a couple of foundational recipes from Good Food, Great Medicine. Review progress, find solutions to challenges, and fine-tune personal action plans.

Time: 6 – 8 pm Tuesday
Dates: 5/17/16 (Part 1) and 5/24/16 (Part 2)
Location: Providence St. Vincent Medical Center
Cost: $100 (2-class series)
Registration: Call 503.291.1777 to reserve a spot

Dr. Hassell’s speaking events


Sign up for this free monthly food and lifestyle newsletter at Goodfoodgreatmedicine.com

“Prove all things; hold fast that which is good.”
1 Thessalonians 5:21 (KJV)

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