

Dr. Atkins's high-protein diet made him famous 20 years ago. Now he's embraced some equally controversial treatments. The medical establishment still says baloney.

### **ALL YOU WANT**

People on the Atkins diet, which first came to fame 20 years ago, eat all they want of high-protein foods, such as eggs and steak, but they cut down on carbohydrates.

## **The Trials**

## **Of a Famous**

# **Fat Doc**

By Aimee Lee Ball

"I don't always follow the Atkins diet," says the doctor, here in his office. "When push comes to shove, it's still the best diet for me to lose weight. I just have to get way down to meat, fish, fowl, cheese, and salad."

**a**tkins... Atkins... The name should be familiar to anyone who ever stared down a scoop of cottage cheese in the continuing battle of the bulge. Twenty years ago, Robert C. Atkins gave us permission to throw away our calorie counters and melba toast, promising we could eat all the bacon cheeseburgers we wanted and still lose weight. *Dr. Atkins' Diet Revolution* sold more than 10 million copies—and incurred the skepticism or contempt of all health-care professionals who insist that permanent weight loss is achieved by the unsexy, unmagical means of eating less and exercising more.

Now Atkins is back in the controversy business. Although he does not have admitting privileges at any hospital and is not board-certified in internal medicine or anything else (he failed the boards and never again attempted to pass them), he *does* have a license to practice medicine, at an art-filled town house in midtown Manhattan, treating patients with AIDS and cancer and heart disease and multiple sclerosis, using unconventional, unproved, and unapproved therapies.

"If there's a voodoo doctor who is getting good results, I want to know how he's doing it," says Atkins. "That's the difference between me and other people. Good results warrant a serious look-see. I don't care if it *is* voodoo." Last summer, New York State demurred and temporarily suspended Atkins's license for using ozone on a breast cancer patient. A judge later ruled that the state health commissioner had acted capriciously and arbi-

STILL LIFE: BILL STEELE

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PHOTOGRAPHED BY MARY ELLEN MARK

trarily and restored Atkins's license five days later, but hearings in the matter are ongoing—a shocking miscarriage of justice, according to Atkins. “I just didn't think they would pick on people who practice medicine at our level of excellence,” he moans.

Atkins is popping cayenne pills when we meet. “I've got my own little favorites of the week,” he says. “I'm into cayenne pepper right now. It's good for your brain and good for your heart—two things I want to go on forever. I get to meet the pioneers in alternative medicine, and they come up with ideas, and then I test them. And some of them have been the best things I've discovered. All sorts of goodies. I keep my mind open, and that little trick makes me almost unique among physicians. I made it a rule never to reject anything out of hand just because it didn't sound logical. I get into a lot of trouble because of my open mind.”

The trouble with open-mindedness is that sometimes your brains fall out. Skirting the limits of medical and nutritional orthodoxy, Atkins asserts that

## A typical Atkins meal might include avocado soup, prepared with heavy cream and bacon.

much, if not most, obesity derives from an insulin disturbance that responds therapeutically to carbohydrate deprivation. When the body is deprived of carbohydrates for 48 hours, it receives a signal to mobilize fat as the next fuel to be used, he explains. When fat is metabolized, it eventually breaks down into carbon compounds called ketones, and this “ketosis” is Atkins's great fat melt-down. “Ketosis is one of life's charmed gifts. It's as delightful as sex and sunshine, and it has fewer drawbacks than either of them,” he says. To critics who worry that this metabolic state is similar

to that of diabetics right before they go into coma, Atkins responds that his “benign dietary ketosis” is quite different, that diabetics produce out-of-control levels of ketones because they don't have enough insulin, whereas his obese patients with too much insulin produce just enough ketones to provide immediate fuel. “It's a normal mechanism,” he says. “All we did was tap into it. The whole principle is how to get to the metabolic state where you're burning your fat the easiest possible way. The easiest possible way is to eat everything you want except carbohydrates. That's the advantage of the diet.” And I would not gain weight if I ate 4,000 calories of porterhouse steak and 3,000 calories of Roquefort dressing? “You would lose weight,” he says, “like everybody else.”

All of this is basically a crock, according to Jules Hirsch, M.D., a well-respected obesity researcher at Rockefeller University. “There's no reason to believe that ketosis is ever desirable,” he says. “This was a fad some years ago, the idea that if you got carbohydrate-starved, you became ketotic and might be less hungry. But there's no evidence to support that. Sure, obese people who don't have diabetes have very high insulin levels, and when they lose their obesity, that gets better. It doesn't matter what they eat—they just have to eat less of it. There is no present-day rationale for eating a diet that is low in carbohydrates for the treatment of obesity—absolutely no reason. I don't care what he says—he's just wrong. To some degree, I represent the obesity-research community in this country. The way to counter all this is to say, ‘Look, buddy, show me a peer-review article in the medical literature where people have looked at the data and compared your diet with some other kind of diet. If you don't have that, we don't want to hear about it.’”

Atkins doesn't have that. “We've seen nothing but successes,” he maintains. “But some people get lost because they go off the diet and feel guilty, and some of them get lost because their insurance carrier won't pay anymore, and some of them get so well that they say, ‘I don't have to go anymore.’ So we

have no way of knowing how good our success is, when every single patient I've seen who comes back has a success. It's impossible to do the kind of clinical research that constitutes acceptable proof. I'm enough of a scientist to know what it would take to prove something to me, and I know I can't gather that kind of data. So I don't try. That's not my role.”

# a

Atkins is, of course, diametrically opposed to current nutrition gospel, which holds that fat is the chief malefactor and that carbohydrates lead to energy and health. The government's new food pyramid, replacing the four basic food groups, is the antithesis of the Atkins regimen. But to Atkins, government is part of a great triumvirate of Evil, which includes the pharmaceutical industry and the medical establishment. “One day,” he says, “I'm going to write a book called *The 17-Year Fiasco*, which is the story of the destruction of Western medicine. You have 17 years of patent protection if you can come up with a synthetic chemical that never existed on this planet before, and the net result is that more and more of those are getting used, and the natural therapies are falling by the wayside. This is what happened,” he continues. “The pharmaceutical industry moved into the catbird seat, and once they figured out how they could be the industry with the highest return on investment capital, they realized they had more and more power. They were subtly able to control the academics by saying, ‘You want a grant? Do our bidding.’ So the doctors really lost control.”

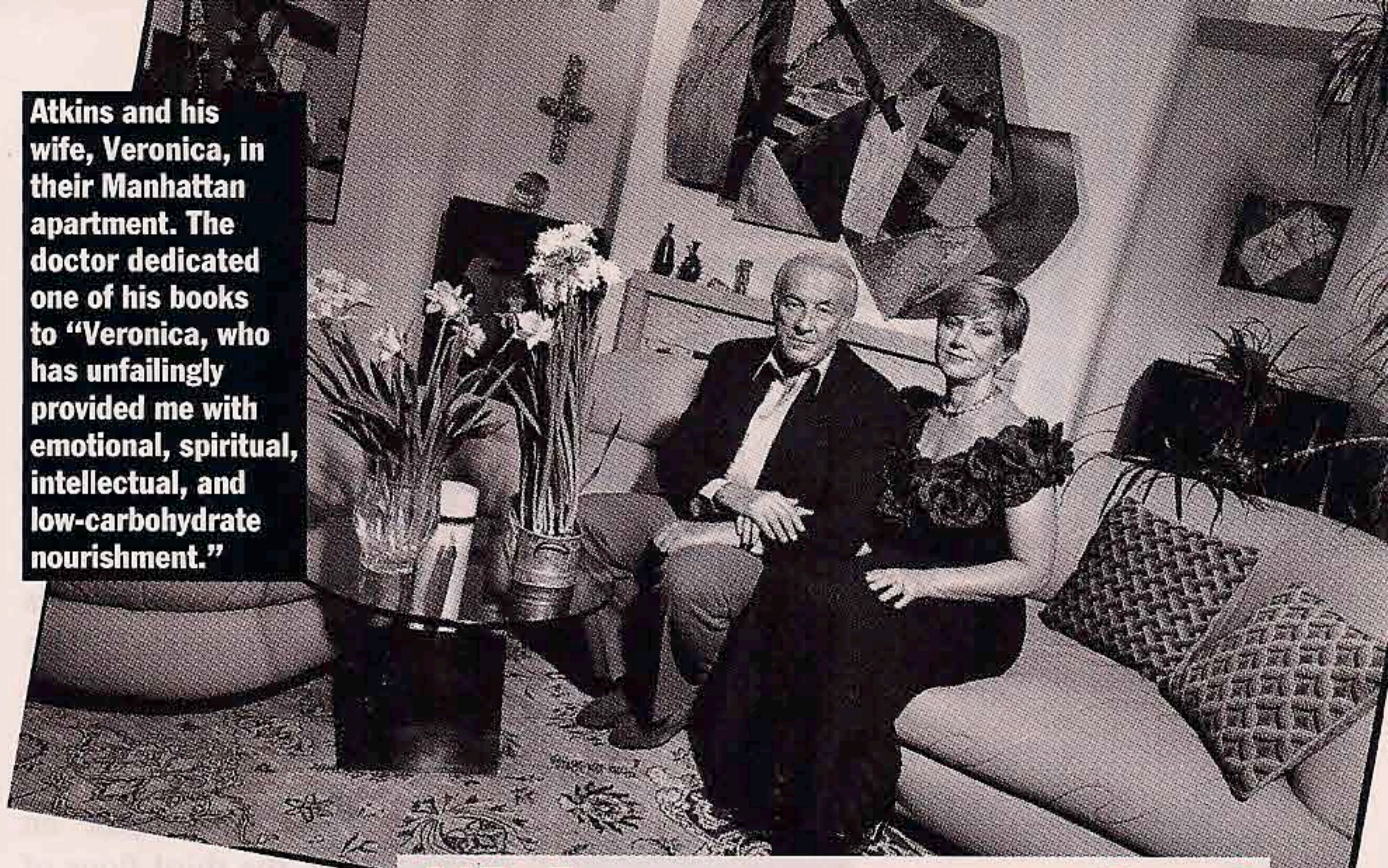
I hate the medical establishment as much as the next guy, and some of Atkins's tirade sounds the right note to those of us who gasp at exorbitantly priced pills, who feel that traditional medicine (or “consensus” medicine, as Atkins calls it) has failed us. But his diatribe is flawed. He likes to remind his detractors that the low-fat bandwagon is a recent phenomenon: “Look at the way people ate in the nineteenth century. They were liberal in the use of butter and lard, they were beef and pork eaters, and their eggs were unrestricted. Yet hardly anyone died of heart at-

tacks." To corroborate his thesis, Atkins cites several studies of superior weight loss on a high-protein, low-carbohydrate diet, including one study nearly 25 years old that was partly financed by the National Livestock and Meat Board, which could be said to have a vested interest in the reputation of steak. But the diets in these studies differ from the Atkins diet in two important ways: They are *calorie-restricted* and include only *moderate* fat. A typical Atkins meal might be avocado soup (for eight), prepared with two cups of heavy cream and eight slices of bacon; chicken paprika, made with half a stick of butter and two cups of sour cream; and lemon mousse, made with seven eggs and a cup and a half of heavy cream. All of these recipes are from a pamphlet called *Veronica's Secrets*, written by Atkins's wife: 36 pages, \$9.95.

**b**ig business has turned us against meat, says Atkins, because manufacturers cannot reap the same usurious profit from a pork chop as from cereal, and he reasonably lambastes the companies that put processed foods on our supermarket shelves as the Devil's handmaidens. "This is not real food; it's invented, fake food," he complains in *Dr. Atkins' New Diet Revolution*. "It's filled with sugar and highly refined carbohydrates and with fat, not to mention a dreadful panoply of chemical additives." But the recipes in this book contain outrageous amounts of sugar substitutes, in everything from French toast to zabaglione. "The sugar substitutes are such that for the amount of the recipe, you're not getting very much," he responds when I point this out.

The unrestricted fat of the Atkins diet may sound like a heart attack waiting to happen, but he claims that his patients' cholesterol levels go down. "I wish we had the sheet of paper where we took everybody who'd been on the diet the past year and had their cholesterol level checked four times or more," he said. "Not only did these people lose 41 pounds—that was the median group—but the cholesterol was down 35 points. The good cholesterol consis-

Atkins and his wife, Veronica, in their Manhattan apartment. The doctor dedicated one of his books to "Veronica, who has unfailingly provided me with emotional, spiritual, intellectual, and low-carbohydrate nourishment."



tently went up, and the ratio consistently improved."

I asked to see that piece of paper for several weeks. Finally, he produced a sheaf of papers with some handwritten figures. Each page listed the weight, cholesterol, and triglyceride levels for a patient at the beginning of the study and after having been on the Atkins diet. It looked like a grade school science project. "I just can't get anybody to subsidize a study," he complained. "You start talking a million dollars if you want to do a study."

"You can't get Land O' Lakes butter to subsidize it?" I asked.

"I can't even get them to answer my phone calls," he said.

"And what we think of as high-fat foods—meat, butter, cheese..."

"That's dinner," said Atkins.

Victor Herbert has a word for people's believing in a diet that sounds too good to be true: "bullshit." Herbert is both a doctor and a lawyer, a professor of medicine and a chairman of the Committee to Strengthen Nutrition at Mount Sinai School of Medicine in New York, and a former president of the American Society for Clinical Nutrition. "The only way to lose weight is to eat, each day, fewer calories than you burn," says Herbert. "That's the basic fact, and all the rest is bullshit." Herbert can explain why people lose weight on the Atkins diet: It's boredom, not fat burning. You can eat only so much steak and eggs. If you can't have your favorite lasagna or doughnuts or potato chips,

**"I keep my mind open, and that makes me almost unique among physicians."**

you're automatically reducing calories.

Atkins is 63 and, to put the gentlest spin possible on it, not exactly a walking advertisement for his diet. And most people want their stockbroker to be rich, their hairdresser to have a great cut, and their diet doctor to be a sylph—an issue that occurs to Atkins's patients from time to time. "The heavier I am, the more it comes up, and the thinner I am, the less it comes up," he says. "I've been working on this struggle to control my weight for over 30 years, and what used to be easy psychologically is not so easy anymore. There's a 96 percent failure rate in maintained lost weight, and one of the reasons is that after you've lost the weight, the best thing that can happen is nothing, and that's not very exciting. I don't always follow the Atkins diet. When push comes to shove, it's still the best diet for me to lose weight. I just have to get way down to meat, fish, fowl, eggs, cheese, and salad."

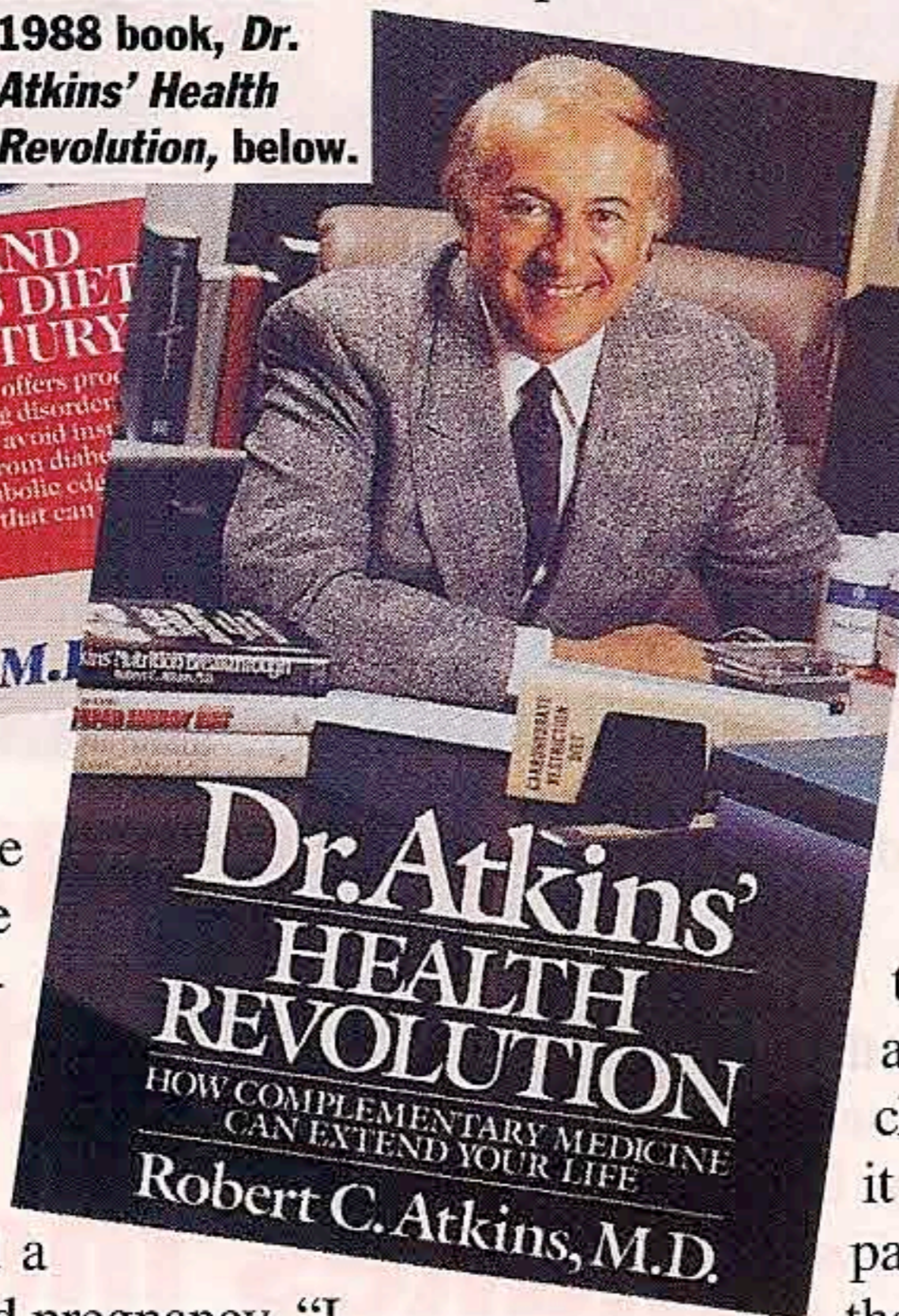
Atkins has a vigorous practice with patients who have more serious problems than flabby thighs, and Diana Pinto is one of them. In 1980 Pinto was diagnosed with multiple sclerosis—like

Dr. ATKINS' NEW DIET REVOLUTION

In addition to promulgating his diet, Atkins now practices complementary medicine, as delineated in his 1988 book, *Dr. Atkins' Health Revolution*, below.

THE MOST EFFECTIVE AND LUXURIOUS WEIGHT-LOSS DIET OF THE TWENTIETH CENTURY

ROBERT C. ATKINS, M.D.



a cruel cosmic joke, she went numb from the waist down on her honeymoon. She says the only treatment orthodox medicine offered her was a regimen of steroids and a recommendation to avoid pregnancy. "I was really desperate," she says, "and that's how I ended up at Dr. Atkins's. I felt I had nothing to lose." What Atkins offered was intravenous injections of calcium-EAP, a mineral salt that is not approved in this country but that Atkins had sent to his staff from Germany, where it is legal, although the German Multiple Sclerosis Society urgently advises against it, as does the National Multiple Sclerosis Society. Pinto got her first shot almost eight years ago and saw tremendous improvement in her symptoms and energy. Now she has two children and a full-time job in financial analysis. "It gave me hope again," she says, "and I wasn't getting that anywhere else. You have to get to a point where you're so desperate that you say, What's the worst thing that could happen to me? Nothing."

Diana Pinto, meet Edith Furman. In 1987 Furman went to Atkins for treatment of multiple sclerosis. "I tried everything," she says. "I was a desperate person. I wasn't going to wait for the MS Society to find a cure." Atkins prescribed calcium-EAP. With the fifth injection, Furman went into cardiac arrest—no pulse, no blood pressure. Paramedics were called and took her to a New York hospital where she was admitted as a Jane Doe—her identity was unknown until Atkins's lawyer called his cousin, an administrator at the hospital. Furman says she was in a coma for two weeks

and required physical rehabilitation for a month. In the lawsuit brought by Furman, Atkins testified that he thought his office manager was contacting the hospital to provide the necessary information.

The case was settled for a substantial sum, says Furman's lawyer. But Atkins still uses calcium-EAP to treat a cornucopia of ailments.


You step off the elevator on the third floor of the Atkins Center for Complementary Medicine into a sea of reclining chairs. At first glance it looks like a beauty parlor, except that the poles on these

chairs are attached not to hair dryers but to intravenous tubes. Once a week, Pamela Wycoff (not her real name) is among the women who are hooked up. "I take the IV drips," she says. "That bag is filled with vitamins, and there are cancer killers in the bag."

Last year Wycoff entered a hospital for what she thought was the routine removal of an ovarian cyst. Instead, her surgeon removed both ovaries, which had stage-three cancer already invading the stomach wall. "They wanted to do chemotherapy right away," she says, "but I said, 'Wait a minute, I believe in alternative medicine.' I went to see Dr. Atkins, and it was like the whole world lifted." Atkins employs "natural" cancer-fighting therapies, including the herbal compound *essiac*, Siberian ginseng, mushrooms, Venus's-flytrap, mistletoe, and a camphor compound called 714x. "He takes you off sugar right away," says Wycoff. "Sugar promotes the growth of cancer cells. I'm now on shark cartilage, which is so incredible in inhibiting the cancer cells. It's disgusting taken by mouth—if you can't, you take it rectally." Every three months Wycoff gets a tumor marker test, which Atkins uses to detect a recurrence. "I've gained 11 (continued on page 189)



"If there's a voice I want to know"



Atkins contends that alternative, or complementary, medicine offers options beyond the arsenal of traditional medicine. Here, he is pictured with patients receiving vitamin-mineral treatments by IV.

STILL LIFE: DAVID COOK

odoo doctor who is getting good results, w how he's doing it," says Atkins.

## Fat Doctor

(continued from page 176) pounds," she says. "I've never felt better. I know I'll never have cancer again."

Pamela Wycoff, meet Vivian Coy. Vivian Coy, a native Texan living on Long Island, had a breast cancer recurrence after chemotherapy and came for alternative treatment with Atkins, who believes that adjuvant chemotherapy for this disease is wrong 94 percent of the time. "Taking a woman with breast cancer and doing chemotherapy on spec!" he rails. "There exists right now the technology to find out who has a recurrence and who doesn't by doing a simple blood test every two months." Coy was receiving an ozone gas injection, a treatment that is alleged to kill cancer cells. She became a little weak-kneed, according to Atkins, and since she lived alone two hours from the office, the doctor on duty sent her to a hospital. "She had a bad moment where she got in the hands of orthodox medicine for what somebody on my staff thought would be observation overnight," says Atkins. "They proceeded to give an ineffective therapy, did not call me to find

out what the story was with her, invented a diagnosis, and used it to start a prosecution." According to press accounts, the emergency-room doctor who treated Coy presents a different scenario: He found an embolism blocking a blood vessel in her brain and lodged a complaint against Atkins with the New York State Department of Health. Atkins's office said there was no embolism. There is an ongoing investigation. Coy returned to Atkins's office after the incident and resisted the state's attempts to obtain her medical records, confident in Atkins and his complementary medical treatment.

That confidence is misplaced, according to most cancer authorities. The American Cancer Society has declared ozone therapy to be ineffective and potentially harmful. Same thing for es-siac. "I have reviewed the data and find it scientifically naive and wholly unconvincing," says Irving Lerner, a St. Paul physician and chairman of the Committee of Unproven Methods of the American Society of Clinical Oncology. "I was a participant in the American Cancer Society's review of that literature. It would never meet the scien-

tific standards of Western medicine." The tumor-marker tests used to monitor breast cancer and ovarian cancer are not as precise as doctors might hope, not as good as the tests available for other cancers. "They have some limited value in tracking patients with these diseases," says Lerner. "No legitimate physician would rely on them exclusively." If an Atkins patient with ovarian cancer chose the marker tests in lieu of chemotherapy, says Lerner, "it might be efficient and it might not. If the post-operative marker tests were normal, that doesn't guarantee she's free of the disease. And if he tracks her correctly and finds that more cancer has occurred, it may well be that she's lost an opportunity to have eradicated that cancer with legitimate treatment. He may simply be documenting the failure."

As for shark cartilage, here is what the *Journal of the National Cancer Institute* has to say: Since a shark skeleton is made almost entirely of cartilage, and since sharks have a very low incidence of cancer, many scientists believe that shark cartilage may help inhibit angiogenesis, the process by which tumors supply themselves with

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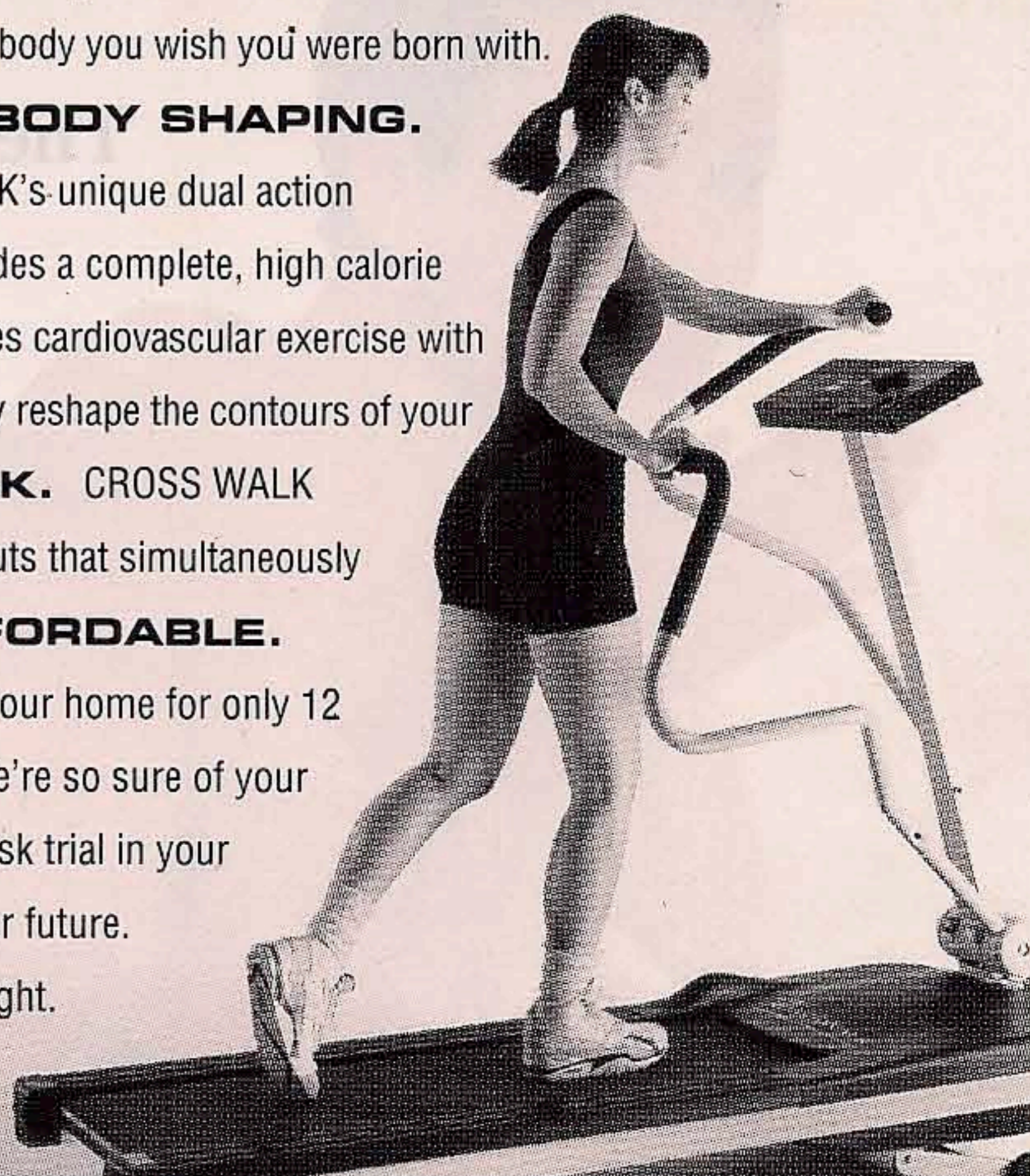
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nutrients to grow. But "it cannot be effective if swallowed in pill form or taken as a suppository.... The active proteins are too large to be absorbed through these routes and would be broken down into inert ingredients," according to the American Cancer Society. Animal studies are still being conducted. As for eliminating sugar from the diet to stop the growth of cancer cells, "to the very best of our knowledge from a scientific standpoint, that has no basis in fact," states Harmon Eyre, an Atlanta physician who is the medical director of the American Cancer Society. "The people in cancer would like to maintain an open mind about these things, but what we see are claims that go way beyond any evidence of science whatsoever."

Atkins rails against what he calls the cancer establishment, which he accuses of ruthlessly suppressing legitimate new cures and ideas. "Any moneymaking procedure in medicine gets incredible support, while the natural therapies that compete with them are slammed down," he says. "I hate to tell you what goes on with my alternative cancer therapy. Here I've

taken away their biggest payoff of all. I know it sounds like I'm into everything. But by not doing anything aggressive, I'm helping my patients more. I had three patients today who were told they needed a bypass, and none of them had any symptoms. But it's \$55,000 for the profession if you do a heart bypass. American medicine is out to make money."

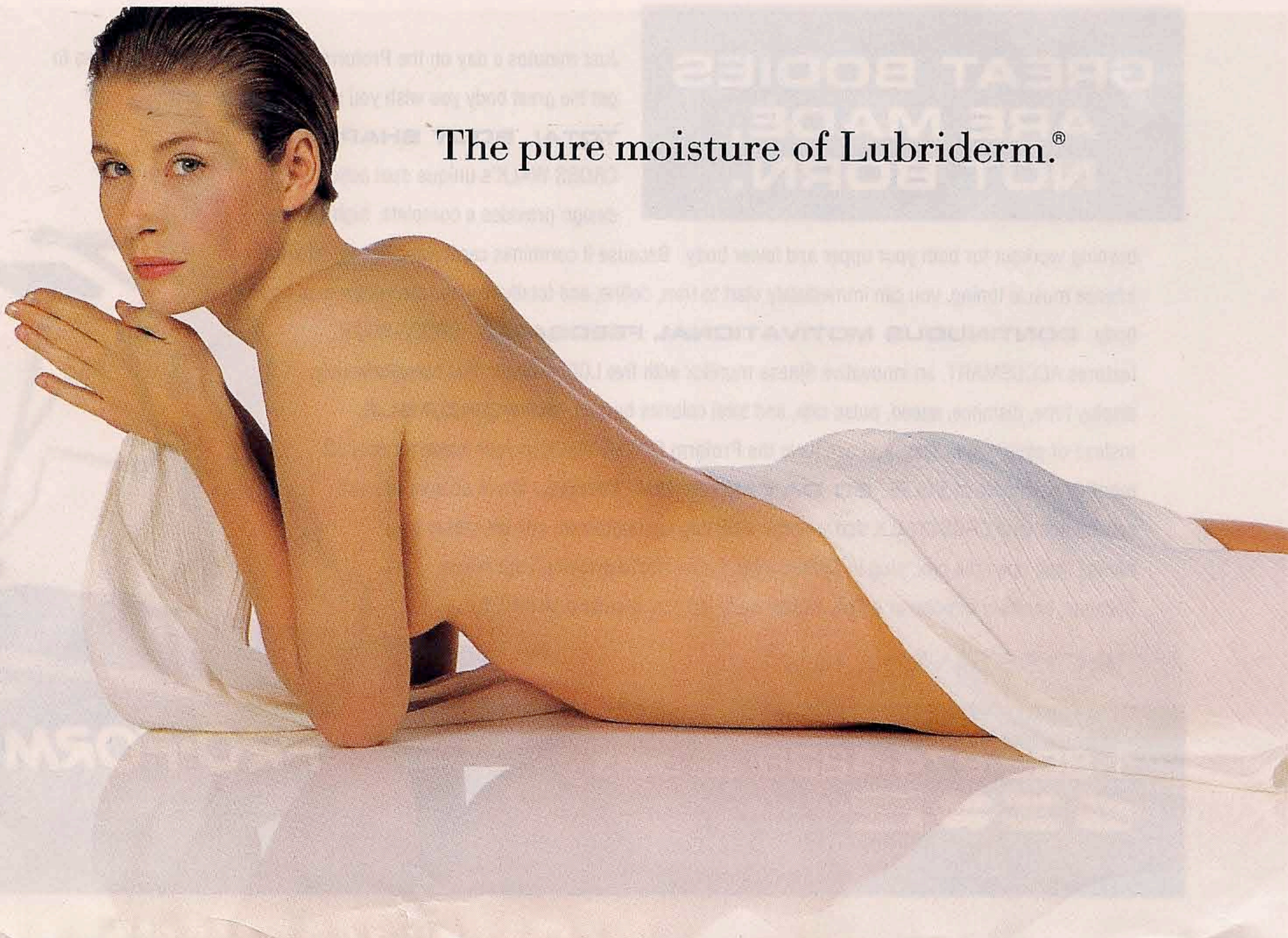
The nutritional supplements Atkins prescribes are dispensed from a pharmacy in his lobby. "These are my patients," he says. "It's mandatory that if I'm going to take responsibility for a patient's care, then I have to take responsibility for the quality of the product. Not only do we have the quality higher, but we've got the price lower."

One hundred tablets of Atkins's Basic Formula cost \$23.99. But every pharmacy and health food store in New York sells multivitamin tablets with similar lists of ingredients for as little as \$3.99. It is difficult to compare prices for the other vitamins and nutritional supplements in the Atkins line because he has combined them in "special formulations" to address certain health conditions. The labels themselves

make no claims. But between the code names on the bottles and the accompanying literature, it is not too hard to figure out that AA#5 is an antiarthritis formula, AH#3 is for antihypertension, and AI#6 is for acute infection. These three, as well as Atkins's autoimmune and diabetes formulas, are on the FDA's list of Unsubstantiated Claims and Documented Health Hazards in the Dietary Supplement Marketplace.

Being on the FDA's list of unsubstantiated claims hasn't seemed to hurt business. According to *Newsday*, Atkins heads five corporations. The Robert Atkins Professional Corporation grossed \$3.8 million in 1991. The Atkins Center for Complementary Medicine grossed \$5.3 million. His private medical practice grossed \$320,000 in 1991. And according to a Dun & Bradstreet Business Information Report, projected earnings for Wellness Communications, the company that publishes his monthly newsletters, were \$8 million for 1993.

I don't begrudge Atkins his millions if he is truly wise in some way that orthodox medicine just doesn't get. I do hope that he is simply marching to a



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different but valid drummer and that his patients will be well. “What we really have are two kinds of medical philosophies, with the mainstream not being aware that there *are* two kinds of medical philosophies,” he says. “I didn’t go into it to be a minority. I just was seriously pursuing ways in which I could get my patients better.” In light of the censure from the traditional medical community, and now from the state that granted his license, I asked if he couldn’t have chosen an easier life.

“No,” he said, surrounded by museum-quality art in his six-story townhouse office, a few minutes’ walk from his penthouse apartment on Sutton Place. “It’s all right, thank you. I’m happy.” ●