

Nutrition Action®

JULY/AUGUST 2025

CENTER FOR SCIENCE IN THE PUBLIC INTEREST



Stroke

HOW TO PROTECT &
PRESERVE YOUR BRAIN

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myths

*The best
ice creams*

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An assault on science



PETER G. LURIE, MD, MPH

President, Center for Science in the Public Interest

In recent months, we've witnessed an assault on science and longstanding safeguards to protect the public's health on a scale never seen in U.S. history. True to our name, the Center for Science in the Public

Interest (*Nutrition Action's* publisher) is fighting back. Among the fronts:

■ **Lawsuit to restore NIH grants.** In April, we filed a lawsuit along with the ACLU and Protect Democracy (later joined by Emery Celli), challenging the National Institutes of Health's decision to cancel hundreds of research grants due largely to their vague connections to "gender identity," "DEI," or other topics the government dislikes.

Just as we went to press in June, Judge William G. Young (a Reagan appointee) ordered NIH to restore the grants, ruling that its policies forbidding those research topics were arbitrary and capricious, illegal, and void. NIH's actions represent racial discrimination and discrimination against America's LGBTQ community, Young also noted.

■ **The Straight Shot.** In May, CSPI launched "The Straight Shot," a webpage that's tracking the government's threats to vaccines. My co-editors are Josh Rising, former senior clinical ad-

visor to the FDA Commissioner; Joshua Sharfstein, former principal deputy FDA Commissioner; and Sarah Despres, former counselor to the Secretary of Health and Human Services.

Among our recent subjects: the mismanaged measles outbreak in the Southwest and HHS Secretary Kennedy's decision to remove all 17 experts on the FDA's Advisory Committee on Immunization Practices. (His new appointees include vaccine critics who lack the expertise to evaluate scientific evidence.)

■ **The MAHA Report.** In May, the MAHA Commission's "Make Our Children Healthy Again" report blamed the

chronic diseases that are plaguing our children on Kennedy's long-standing pet peeves, from vaccines to seed oils to lack of exposure to sunlight.

The sloppy, error-ridden document cited sources—likely generated by AI—that didn't exist.

The report had a few good ideas, like promoting whole, unprocessed foods. Yet the administration has slashed programs to bring local food into schools, is working to cut SNAP benefits, and wants to rip health insurance coverage from millions of people...all to help pay for tax cuts for people who earn more than \$1 million a year.

We'll keep fighting these and other outrages to protect your health.

Peter



To find out what is (or isn't) happening with vaccines, go to cspi.org/thestraightshot.

For more *Nutrition Action* articles, recipes, and advocacy opportunities, visit CSPI.ORG



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Stroke

HOW TO PROTECT & PRESERVE YOUR BRAIN

BY BONNIE LIEBMAN

Each year, 795,000 people in the U.S. have a stroke, and 165,000 die due to a stroke. Half of U.S. adults—and 75 percent of those aged 65 or older—have high blood pressure, the strongest risk factor for a stroke. Here's what to know.

1 Signs of a stroke? Call 911.

Feeling weak or numb in one arm or leg? Having trouble speaking or seeing? It's tempting to ask someone to drive you to the hospital or to wait to see if your symptoms fade.

Don't. Call 911 instead.¹ Why?

"The benefits of emergency treatment for an acute stroke decrease with the amount of time the brain is starved of blood and oxygen," explains Larry Goldstein, chair of the department of neurology at the University of Kentucky.

"Time saved is brain saved."

And treatment can start sooner if the hospital is ready for you.

"Calling 911 brings immediate first responders who can notify the hospital to prepare for you and bypass

waiting rooms to get you to the care you need without delays," says Goldstein.

Or the ambulance might bring you to a hospital that's farther away but better equipped to treat strokes.

"Calling 911 ensures rapid transport to the most appropriate hospital," says Goldstein.

Another reason not to ignore symptoms that disappear within an hour or so: You may have had a transient ischemic attack—that is, a temporary blockage of blood flow to the brain.

"The typical signs or symptoms of a transient ischemic attack—or a TIA, also called a mini-stroke or maybe a warning—are the same as that of a real stroke," noted Hardik Amin in 2023, when he chaired an American Heart Association panel that issued advice on diagnosing TIAs.² (Amin is

now co-director of the Comprehensive Stroke Center at Hartford Hospital in Connecticut.)

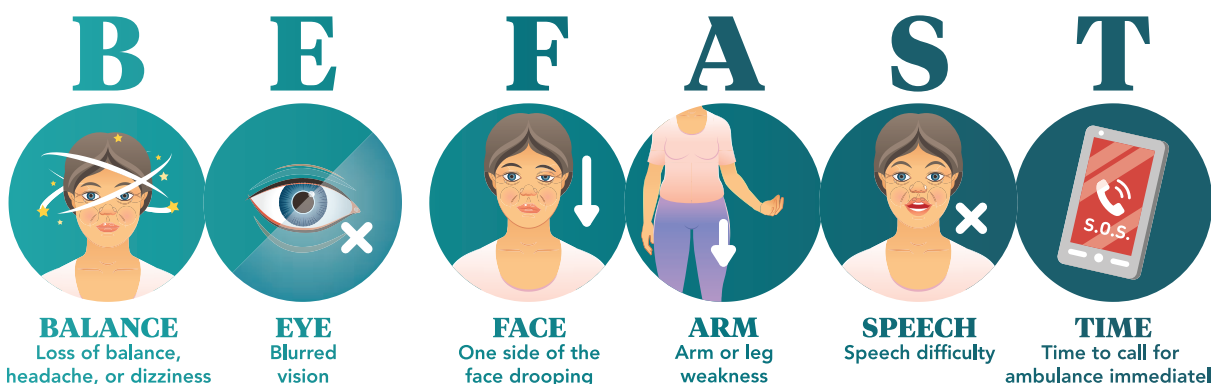
And nearly one in five people who have a suspected TIA will have a full-blown stroke within three months. Nearly half of those strokes will happen within two days.²

What's more, with the appropriate brain scans, two in five people with a suspected TIA will learn that they actually had a stroke instead of a TIA.²

One more reason to call 911: Doctors can now undo some of the damage caused by a stroke...but only if you get to the hospital in time.

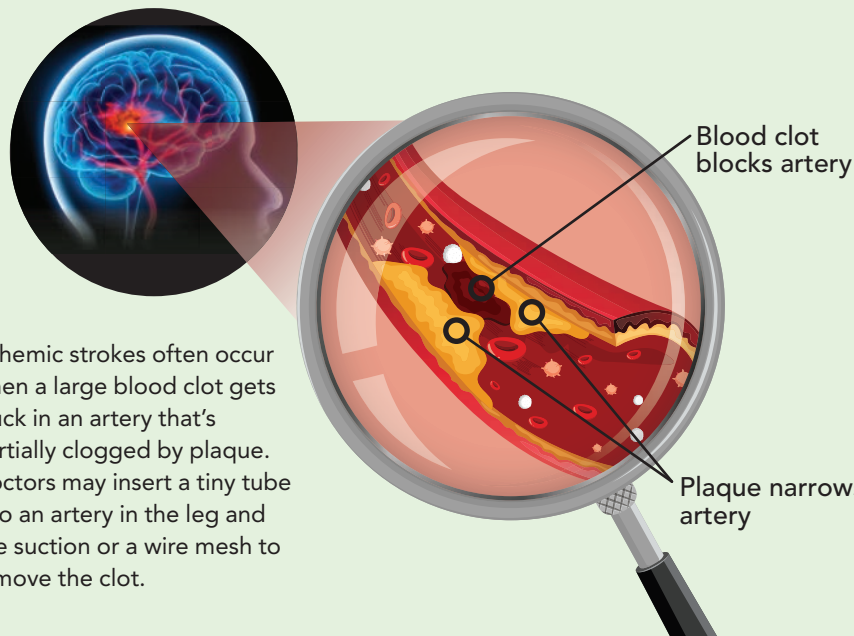
2 We've had a revolution in stroke care.

"The first revolution in stroke care came with studies showing that treatment with clot-busting drugs greatly improved outcomes in selected patients having a stroke," says Goldstein, who is also co-director of the Kentucky Neuroscience Institute.



SIGNS OF A STROKE. Adding B (balance problems) and E (eye or vision problems) to the usual FAST (Facial droop, Arm or leg weakness, Speech difficulty, Time) mnemonic covers all but 2.6% of stroke symptoms.

How a stroke can start



Ischemic strokes often occur when a large blood clot gets stuck in an artery that's partially clogged by plaque. Doctors may insert a tiny tube into an artery in the leg and use suction or a wire mesh to remove the clot.

Blood clots in the brain cause 87 percent of strokes in the U.S. (Those are called “ischemic.” The rest are due to a hemorrhage.) And since 1996, doctors have used tissue plasminogen activator (tPA) to break up the clots.³

The catch: tPA should be administered within 4½—and ideally, 3—hours after the first signs of a stroke.¹ “Even within that time frame, the sooner, the better,” says Goldstein.

And doctors can’t start until they get a CT scan to make sure that the stroke wasn’t caused by a hemorrhage.

But tPA has its limits. It works best for blood clots in the brain’s smaller blood vessels.

“Its benefit was less in those who had a big clot closing a larger brain blood vessel,” acknowledges Goldstein. And that matters.

“Almost 40 percent of acute ischemic strokes are due to a large vessel occlusion,” explained Bart Besinger, an associate professor of clinical emergency medicine at Indiana University, in a training video for emergency-department doctors.⁴

What’s more, added Besinger, “the bigger the vessel the stroke is in, the worse that patient is going to do. These are the bad strokes.”

That led to the next revolution in the war on strokes. Rather than break up the big clots in big blood vessels, doctors now simply take them out.

“With mechanical thrombectomy, a tube is put into the blood vessel to remove the clot,” explains Goldstein. The tube uses either suction or a wire mesh to pull the clot out.

“That was proven to greatly improve outcomes,” adds Goldstein.

But doctors need to do a certain type of brain scan to see if you need a mechanical thrombectomy, and some hospitals aren’t equipped to do them.

“Again, time is critical,” says Goldstein.

A thrombectomy is ideally done within six hours after stroke symptoms start.¹ However, in two later trials, the procedure also helped

people who had “wake up strokes”—that is, they were last symptom-free up to 16 or 24 hours earlier, and their symptoms may have started while they were asleep.^{1,5,6}

That doesn’t change the takeaway: Every minute counts.

“A meta-analysis in *JAMA Neurology*...looked at patients with an acute ischemic stroke due to a large vessel occlusion who had mechanical thrombectomy performed within four hours,” recalled Besinger.

“For every 10-minute delay in time to mechanical thrombectomy, that patient lost, on average, 1.8 months of healthy [life].”⁷

3 Women may have extra risks.

Men have a higher risk of stroke in young and middle age, but more women die of a stroke. That’s partly because women typically live longer. But it’s also because some conditions put them at greater risk.

A few examples:

■ **Atrial fibrillation.** “Women with atrial fibrillation have a higher risk of a stroke caused by a thromboembolism than men,” says Cheryl Bushnell, professor of neurology at Wake Forest University School of Medicine.⁸

How can atrial fibrillation—an irregular heart rhythm in the upper chambers (atria) of the heart—cause a blood clot that may travel to the brain? If blood isn’t efficiently pumped out of the atria, what’s left behind can pool and form blood clots, which can travel to the brain.

“Treating people who have AFib with anticoagulant medications leads to a huge reduction in stroke risk,” notes Bushnell, who chaired the panel that wrote the American Heart Association’s 2024 Guideline for the Primary Prevention of Stroke.⁹

■ **Early-onset menopause.** Women who go through menopause before age 45 have a greater risk of stroke.

“Estrogen helps keep blood vessels functioning normally, so if a woman is deprived of estrogen earlier than normal, it can have detrimental effects on the blood vessels,” says Bushnell.

But taking estrogen *after* menopause may increase stroke risk. Why?

“If a woman smokes or has had high blood pressure, high cholesterol, or diabetes, their blood vessels are stiffer, they’ve got plaque in them,” explains Bushnell. “When you add estrogen to that, you increase the risk of more plaque and more clots.”⁹

■ **Endometriosis.** “When uterine tissue is found outside of the uterus, it causes inflammation, so you have

a lot of inflammatory factors floating around in the abdomen and ultimately in the bloodstream,” says Bushnell. “That inflammation can increase the risk of heart attack and stroke.”⁹

■ **Migraine headaches.** “Migraines increase the risk of stroke, especially migraines with aura,” says Bushnell.

“That’s the bright or flashing lights that some people see before the headache. And migraines are more common in women.”⁹

4 Blood pressure matters most.

When it comes to stroke, one risk factor stands out: high blood pressure.

“To prevent plaque development and lower the risk of a stroke or heart attack, the body likes systolic blood pressure as low as it can get,” says Paul Whelton, professor of epidemiology at Tulane University and former dean of its School of Medicine and its School of Public Health and Tropical Medicine.

“The data are very compelling.”

Whelton ought to know. He co-led

the SPRINT trial, which randomly assigned people with hypertension to aim for a systolic blood pressure below either 140 or 120.

The trial was stopped early—after only three years—when it became clear that the 120 group had a 34 percent lower risk of a heart attack, stroke, or other cardiovascular event than the 140 group.¹⁰

Based on SPRINT’s results, Whelton chaired the expert panel that redefined “high” and “elevated” blood pressure.¹¹ He recently analyzed seven trials looking at blood pressure’s impact on stroke or heart attack risk.¹²

“Getting to less than 140 is critically important if your blood pressure is at a higher level,” he says. “You get additional benefit as you get below 130, and even more if you go down to 120 or lower.”

And many of us are above 120.









“At every decade of life, the average blood pressure marches upward,” says Stephen Juraschek, associate professor of medicine at Beth Israel Deaconess Medical Center in Boston. “Ninety percent of adults develop hypertension over their lifetime.”¹¹

The good news:

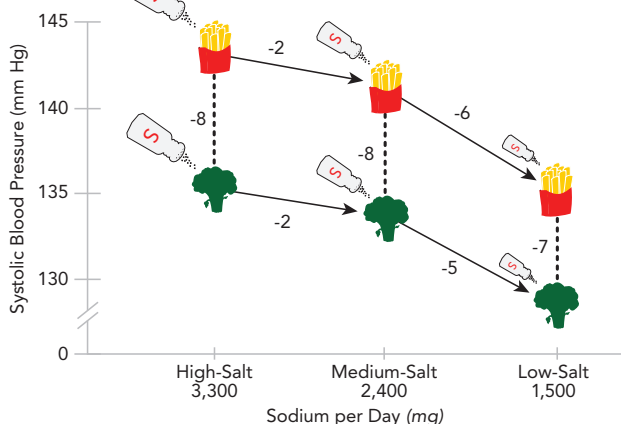
Diet can help lower blood pressure, whether or not you also need medications. Two key strategies: cutting sodium and eating a DASH (Dietary Approaches to Stop Hypertension) diet.¹³

“If you started with a systolic blood pressure of 150, it could drop as much as 20 points,” says Juraschek. “That’s on par or greater than some medications.”

Cutting sodium lowered blood pressure more in older people than in young-

DO THE DASH		
Load up on fruits and vegetables and cut back on salt, bad fats, and added sugars. Here’s a 2,100-calorie version of a DASH-OmniHeart diet mix. (Note: servings are small.) Add the “Wild Card” you prefer.		
		Daily Servings
	Vegetables & Fruit 1 serving: ½ cup (or 1 cup greens) or 1 piece fruit	11
	Grains 1 serving: ½ cup pasta or rice or cereal or 1 slice bread	4
	Low-fat Dairy 1 serving: 1 cup milk or yogurt or 1½ oz. cheese	2
	Legumes & Nuts 1 serving: ½ cup beans or ¼ cup nuts or 4 oz. tofu	2
	Poultry, Fish, Lean Meat 1 serving: 4 oz. cooked	1
	Oils & Fats 1 serving: 1 Tbs.	2
	Desserts & Sweets 1 serving: 1 tsp. sugar or 1 small cookie	2
	Wild Card Poultry, Fish, Lean Meat or Oils & Fats or Grains or Desserts & Sweets	1

DROP THE PRESSURE



GOT HYPERTENSION? Switching from a typical U.S. diet (fries) to a DASH diet (green vegetable) cut blood pressure by 7 or 8 points in people over age 45. Blood pressure fell 2 more points on a medium-salt diet and 5 or 6 more points on a low-salt diet.

Source: Adapted from *N. Engl. J. Med.* 362: 2102, 2010.

er people. Why?

“Older people may have reduced kidney function, making it harder to excrete sodium,” suggests Juraschek.

What might explain how the DASH diet trims blood pressure? Its fruits, vegetables, and low-fat milk and yogurt are rich in potassium.

“Potassium works in the kidneys to help the body dump sodium,” explains Juraschek.

And the DASH diet replaced most red meat with fish, poultry, beans, and nuts. It also limited sweets.

“So DASH targeted multiple different pathways to lower blood pressure,” Juraschek points out.

In OmniHeart, a later trial, researchers replaced some of DASH’s carbs with healthy protein or with unsaturated fats, making it more like a Mediter-

How to cut your risk of a stroke

■ **Treat high blood pressure.** High blood pressure helps clog arteries and damages blood vessel walls.

■ **Lower LDL cholesterol.** High LDL ("bad") cholesterol can narrow or clog blood vessels in the brain.

■ **Manage diabetes.** High blood sugar can damage blood vessels in the brain.

■ **Don't smoke.** Smoking cigarettes helps clog arteries, promote blood clots, and damage cells that line blood vessels.

■ **Lose excess weight.** Expect about a 1 point drop in pressure for every 2 pounds you lose.

■ **Keep moving.** Aim for both exercise (like brisk walking for 150 minutes a week) and not sitting for more than 11 hours a day.



■ **Eat a DASH-like diet.** Cover half your plate with fruits or vegetables. Fill the rest with low-fat dairy and beans, nuts, fish, poultry, and healthy fats. (See p. 5 for details.)

■ **Limit sodium.** Deli meats, soups, sandwiches, pizza, frozen dinners, and restaurant foods are some of the worst offenders.

■ **Limit alcohol.** The more you drink, the higher your risk. Aim for no more than 1 drink a day (for women) or 2 drinks a day (for men).

■ **Don't rely on supplements.** In clinical trials, vitamin D, fish oil (EPA & DHA), antioxidant vitamins (E, C, and beta-carotene), and B vitamins failed to lower stroke risk.

■ **Get a home blood pressure monitor.** Go to validatebp.org to find a reliable blood pressure device.



anean diet.¹⁴ That nudged blood pressure down another three points or so. And it's not just lower blood pressure. "We've shown direct effects of DASH on a biomarker of subclinical cardiac injury and a biomarker of inflammation," says Juraschek.

He's talking about high-sensitivity cardiac troponin, a sign of heart muscle damage, and high-sensitivity C-reactive protein.¹⁵

"These markers were reduced even in the short 12-week duration of the DASH-Sodium trial," says Juraschek.

5 Strokes can cause cognitive decline.

It's no surprise that a stroke can take a toll on your mind.

"A severe stroke can increase the risk of dementia 50-fold," says Deborah Levine, professor of medicine and neurology at the University of Michigan Medical School.

In one study, one out of three stroke patients had developed dementia after five years.¹⁶

The impact is worse on older people. Why? "Older adults have less

cognitive reserve to withstand a brain injury due to existing neurodegeneration," explains Levine.¹⁷

And 10 to 20 percent of adults may have had so-called silent strokes.⁹

"If you do CT scans or MRIs, you find a bunch of people who have had strokes and were never aware of it," says Tulane's Paul Whelton.

What's more, high blood pressure is a threat to your mind even if you never have a stroke. That link is clear in studies that track thousands of people for years.

"In observational studies, hypertension, particularly in midlife, is a major risk factor for dementia and cognitive impairment," says Levine.¹⁸

The SPRINT-MIND trial yielded stronger evidence in older adults.

"In that landmark trial in older adults at high risk for cardiovascular disease, lowering blood pressure to 120 reduced the risk of mild cognitive impairment," notes Levine.¹⁹

(SPRINT-MIND saw no difference in dementia, its primary outcome, possibly because the trial was cut short after only three years.)

How might hypertension cause dementia?

"Is it purely injury to blood vessels or does it increase or trigger the

amyloid or tau deposition seen in Alzheimer's disease, or is it other mechanisms, including inflammation?" asks Levine. "It's hard to say."

Her takeaway: If you're 40 or older, don't wait a year between doctor's visits to check your blood pressure.

"Get an accurate home blood pressure monitor and take your pressure twice daily for at least one week a month, with morning and evening readings," advises Levine.

"We have no current treatments that can prevent or stop dementia. Diagnosing and treating high blood pressure early and effectively is a strong strategy to reduce dementia and cognitive impairment independent of stroke." 🍷

¹ Stroke 50: e344, 2019.

² Stroke 54: e109, 2023.

³ N. Engl. J. Med. 333: 1581, 1995.

⁴ youtube.com/watch?v=oMd_dgsQt8E.

⁵ N. Engl. J. Med. 378: 11, 2018.

⁶ N. Engl. J. Med. 378: 708, 2018.

⁷ JAMA Neurol. 78: 709, 2021.

⁸ J. Stroke 25: 2, 2023.

⁹ Stroke 55: e344, 2024.

¹⁰ JAMA 315: 2673, 2016.

¹¹ Circulation 138: e426, 2018.

¹² Hypertension 81: 2329, 2024.

¹³ N. Engl. J. Med. 344: 3, 2001.

¹⁴ JAMA 294: 2455, 2005.

¹⁵ J. Am. Heart Assoc. 11: e026684, 2022.

¹⁶ Lancet Neurol. 18: 248, 2019.

¹⁷ Stroke 54: e272, 2023.

¹⁸ Lancet 404: 572, 2024.

¹⁹ JAMA 321: 553, 2019.

5 Protein myths

BY BONNIE LIEBMAN

“Low-carb,” boast some labels. “Fat-free” claim others. “Low-protein?” That’s not a thing. Protein is a selling point. But its overblown reputation has been fueled by a jumble of myths. Here’s the truth about some popular ones.

MYTH #1 Most people are getting too little protein

“What I hear from many people and social media is ‘I know what the RDA for protein is, but I think I might need more than average, so I’m going to have some extra protein,’” says Christopher Gardner, professor of medicine at the Stanford University School of Medicine.

But most people don’t understand how experts set the RDA—or Recommended Dietary Allowance—for protein and other nutrients.

(The RDA for protein is 0.8 grams for every kilogram—or 0.36 grams for every pound—you weigh.)

“They start by figuring out what the average person needs,” explains Gardner. “But if everybody got the average, half of us would get too little, because some people need more and some need less than average.”

So instead, the RDAs are set considerably above—technically, two “standard deviations” above—what the average person needs.

“That means 97.5 percent of the population meets or exceeds their requirement if they get the RDA,” says Gardner. “So aiming above the RDA is adding a safety buffer on top

of a safety buffer.”

In the U.S., only a few groups of adults get less than the RDA for protein. That includes an estimated 19 percent of females and 13 percent of males aged 71 or older.¹

“That’s primarily related to not eating enough food, because appetite sometimes decreases in older adults,” says Bettina Mittendorfer, senior associate dean for research at the University of Missouri School of Medicine.

Still, that means at least 8 out of 10

older adults *do* get enough protein. And the average adult (of any age) gets a third more protein than the RDA, and a quarter get twice the RDA, says Mittendorfer.²

Why? “It’s not because people go on a high-protein diet,” she explains. “It’s because they overconsume food.”

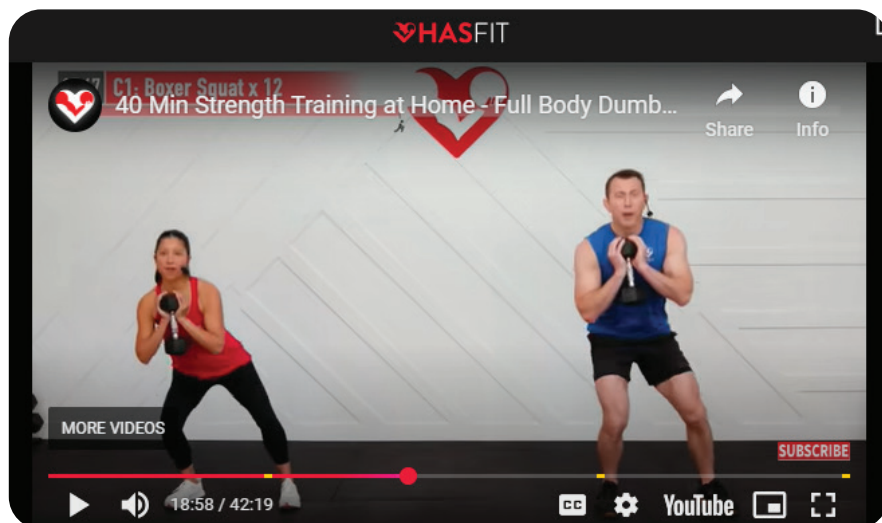
MYTH #2 Your body can store extra protein

“We all know the body has an infinite capacity to store fat,” says Gardner. “You can point to it in your belly and your butt and even in the pads of your hands.”

And your body doesn’t have to turn fat into something else to store the excess. You can tuck it away in a limitless inactive reservoir.



“It’s basically cheating,” says comedian Kumail Nanjiani’s ad for Quest, which crams protein into bars, chips, and cookies. Who needs ‘em?



To build—or not lose—strength, find a workout that fits your needs at HASfit.com, SilverSneakers.com, or FitnessBlender.com.

“And as athletes know, carbohydrate is stored in the liver and skeletal muscle as glycogen,” though in limited quantities, notes Gardner.

But protein is different. Some may be used to make muscle or other lean body tissues. But there’s no place to put the extra.

“If you eat extra protein today, by tomorrow, it gets turned into carbs or fat,” says Gardner. “You can’t store protein for later.”

Your muscles *would* act as a protein bank, however, if you were eating too little protein.

“If you were deficient in protein, you would steal it from your arm or leg muscles—not your heart or the muscles around your lungs, because you need your heart to beat and your lungs to function,” says Gardner.

“But you don’t have to be able to do a bicep curl or a squat.”

But breaking down any muscle comes at a cost. “Muscle isn’t just a storage depot like belly fat that’s not doing anything,” notes Gardner.

What’s the clearest sign that bodies aren’t equipped to store extra protein?

“Otherwise we would bulk up just by eating it,” says Mittendorfer. “And we don’t.”

MYTH #3 More protein means more muscle

Your body does need protein to make muscle, but only up to a point.

“You maximize muscle protein synthesis at about 25 to 30 grams of protein per meal,” says Mittendorfer.³

“If you’re below that, eating more can increase your muscle mass. But if you’re eating enough protein, increasing it further is unlikely to increase muscle mass or strength.”

Take the OPTIMen trial. Scientists randomly assigned 48 men aged 65 or older to get packaged meals each day that supplied either the RDA or 60 percent more than the RDA for protein.

After six months, there was no difference in either lean body mass or muscle strength or power.⁴ (Some of the study’s authors had ties to the meat, egg, or dairy industries.)

Protein’s impact on muscle depends on age. “For any amount of protein that older adults eat, they get less of a gain in muscle mass” than younger adults who eat the same amount of protein, says Mittendorfer. “That’s thought to cause the decline in muscle mass with aging.”

What’s more, extra protein *plus* strength training may boost muscle in

adults aged 18 to 45 (though most studies enroll people aged 18 to 30), but not in older people.^{5,6}

Why? “Younger people haven’t reached their growth potential,” Mittendorfer explains. “So extra protein has a little extra benefit with resistance exercise training in the young, but it’s small.”

Make no mistake, though. Regardless of age, it’s largely exercise, not protein, that matters most for your muscles.

For example, scientists randomly assigned 184 healthy people over 65 to one of five groups. Two groups took a protein supplement (20 grams of whey) twice a day and did either light or heavy resistance training three to five times a week. The other three groups took a supplement with either whey, collagen, or carbs twice a day but did no training.

After a year, only the exercise groups had better knee strength, and only the heavy-training group had larger thigh muscles.⁷ (The dairy industry partly funded the study.)

“The main effect on muscle comes from exercise training,” says Mittendorfer. “Gains in strength are bigger and occur sooner than gains in muscle size. And it’s strength you need to climb the stairs and maintain your health span.”

Does a higher dose of protein help if it comes right after a workout?

Researchers randomly assigned 50 people aged 40 to 64 to reach either 1.0 or 1.6 grams of protein per kilogram of body weight (both above the RDA) by eating an extra 15 or 30 grams of protein (as minced beef steak) immediately after a resistance workout three days a week, plus either 15 or 30 grams of protein (in a beef powder drink) one to two hours before bed each night. (The beef industry funded the study.)⁸

After 10 weeks, both groups got stronger. The difference between groups? Zip.

And in 2024, when the Agency for Healthcare Research and Quality examined studies published since 2000, it found “inconsistent results”

High-protein junk

Want to spike sales of a junk food? Just add protein.

Power down



"10g protein," boasts the Kodiak Chocolate Fudge Brownie Power Cup. Yes, it's made with whole grains (plus gluten, whey, and eggs). But the first ingredient in each 280-calorie cup is added sugar (half a day's worth). And the semi-sweet chocolate and palm oil supply 5 grams of saturated fat (a quarter of a day's worth). Where does the power come in? Never underestimate the power of marketing.

Saltzels



"FitZels are a super snack situation fitting 20g of protein for muscles," says Lenny & Larry's Everything Bagel FitZels. All it took was a dollop of pea protein to turn these white-flour pretzels into a health food. And to get the label's 20 grams of "plant-based protein," you'd have to eat the entire (3-serving) bag, along with its 380 calories and 900 milligrams of sodium.

White flour waffles



"10g complete protein," says Eggo Buttermilk Vanilla Protein Waffles. "Delicious goodness to KICKSTART your day." It's a food company's dream. Just dress up some waffles that are made mostly out of white flour, sugar, and oil with added vitamins, soy protein isolate, and

whey protein concentrate. Why would anyone bother with fruits, whole grains, yogurt, or other healthy breakfast foods?

MYTH #4 Animal protein beats plant protein

"There's a misconception that you have to get protein from animal foods, because if you shift to plants,

they're missing amino acids," says Gardner. "That's a myth. All plants have all nine essential amino acids."

(Your body can make 11 more non-essential amino acids.)

Plant proteins do differ in minor ways, but those differences don't matter (unless you have to survive, say, only on rice).

"Grains are proportionally lower in lysine, and beans are proportionally lower in methionine," notes Gardner. "But grains have a little more methionine than usual, and beans have a little more lysine than usual."

Does that mean you have to eat beans and grains together? Nope.

"If you weren't paying attention, and you just ended up eating enough protein by the end of the day, you'd get enough of all the amino acids without even counting," says Gardner.

"With a few rare exceptions, when you eat animal or plant protein, you can't absorb it until you break it down into its amino acids. Then your body reassembles them. Does it remember whether the amino acid came from broccoli or a pig? No. It's just a building block."

And don't expect animal protein to build more muscle or strength than plant protein.

In a recent study—funded by the beef industry—scientists randomly assigned 40 active adults aged 20 to 40 to eat either vegan (plant-only) or omnivore (plant-and-animal) diets provided by the researchers.¹⁰

"For each diet, half had their protein evenly distributed among five small meals and the other half had 10 percent of their protein at breakfast, 30 percent at lunch, and 60 percent at dinner," notes Gardner.

After nine days, the researchers took muscle biopsies to measure protein synthesis.

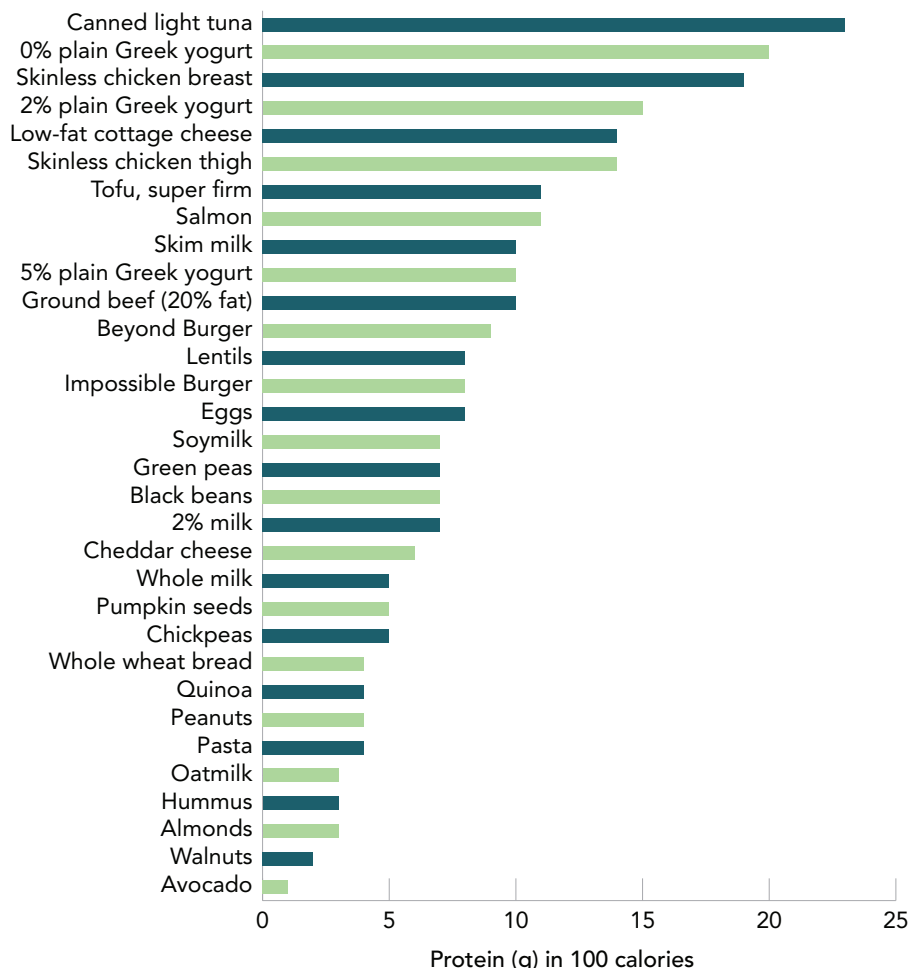
"Neither the protein source nor the distribution of protein over the day mattered," says Gardner.

Likewise, in a study of 34 active

on protein's impact on the loss of muscle mass, muscle strength, or physical performance with age.⁹

(The report was done to help experts update the RDA for protein. It's not clear when the years-long process will be complete.)

Protein per 100 calories



Here's how much protein you get for 100 calories of popular foods. For example, 100 calories of soy milk (7 grams) beats 100 calories of whole dairy milk (5 grams).

people aged 65 to 79, an omnivore diet led to no more muscle synthesis than a vegan diet.¹¹

"Most people can meet all their needs on a plant-based diet," says Gardner. "We can stop obsessing about getting enough protein or the right amino acids."

MYTH #5 Extra protein helps you eat less

"There's no good evidence that protein makes foods more satiating," says Gardner. He cites a study by Barbara Rolls, professor of nutrition at Penn State University.¹²

"She made five versions of lunch and dinner entrées—a chicken casserole and a shrimp stir-fry—that had 10, 15, 20, 25, or 30 percent of

calories from protein, but they all looked the same." That's because the ingredients were finely chopped.

"People were told to eat until they were full, and they all ate the same number of calories per day," says Gardner.

"If protein were more satiating, people would have eaten fewer calories on the days they got the higher-protein meals, but they didn't."

What about weight-loss diets?

In an oft-cited review, higher-protein diets reduced weight in people with excess weight by only one to two more pounds than other diets.¹³ (The review was funded by the beef, pork, dairy, and egg industries.)

POUNDS Lost, the largest and longest trial done, randomly assigned 811 people with excess weight to one

of four diets that were higher or lower in protein, fat, or carbs.¹⁴ All four diets cut 750 calories a day.

After two years, the average weight loss was nine pounds. Those assigned to the higher-protein diets (25 percent of calories) lost no more weight than those assigned to the lower-protein diets (15 percent of calories). Nor did cuts in fat or carbs lead to greater weight loss.

However, "at two years, both groups were eating about 20 percent of their calories from protein," notes Gardner. "It's as though—not in the first month when you're excited about a new diet, but a year out—you end up at about 20 percent."

Do you gain less weight if you overeat protein?

Researchers had 25 young people eat diets that got 5 (low), 15 (normal), or 25 (high) percent of their calories from protein.¹⁵ All the diets had 40 percent (roughly 1,000) more calories per day than the volunteers needed.

After two months, the high-protein group had gained as much weight as the normal-protein group (14 pounds).

In fact, it was the low-protein group that gained less weight (7 pounds). Why?

"Those who didn't get enough protein lost some muscle," says Mittendorfer.

So if you think that overdoing protein-fortified cookies, waffles, or popcorn is harmless, think again. It's no different than overdoing ordinary cookies, waffles, or popcorn. 🍪

¹ *Am. J. Clin. Nutr.* 108: 405, 2018.

² *Nature Metab.* 6: 359, 2024.

³ *J. Physiol.* 597: 1251, 2019.

⁴ *JAMA Intern. Med.* 178: 530, 2018.

⁵ *J. Nutr.* 155: 764, 2025.

⁶ *Br. J. Sports Med.* 52: 376, 2018.

⁷ *Am. J. Clin. Nutr.* 113: 790, 2021.

⁸ *Am. J. Physiol. Endocrinol. Metab.* 320: E900, 2021.

⁹ effectivehealthcare.ahrq.gov/products/effect-protein-intake/research.

¹⁰ *Med. Sci. Sports Exerc.* 2025. doi:10.1249/MSS.0000000000003725.

¹¹ *J. Nutr.* 155: 1141, 2025.

¹² *J. Am. Diet. Assoc.* 111: 290, 2011.

¹³ *Am. J. Clin. Nutr.* 101 (suppl): 1320S, 2015.

¹⁴ *N. Engl. J. Med.* 360: 859, 2009.

¹⁵ *JAMA* 307: 47, 2012.

The protein counter

Our chart ranks foods by grams of protein in a typical serving. How many grams do you need in a day? Multiply your weight in pounds by 0.36 (that works out to 50 grams for a 140-pound person). Within each section, foods are ranked from most to least protein, then least to most calories.

Meat, poultry, seafood, & eggs

(3 oz. cooked, unless noted)

	Protein (g)	Calories
Chicken breast, skinless	26	140
Turkey breast, skinless	25	120
Ground turkey, 7% fat	23	190
Ground beef, 20% fat	23	230
Tilapia	22	110
Chicken drumstick, skinless	21	130
Chicken thigh, skinless	21	150
Shrimp	20	80
Salmon	19	180
Canned light tuna	17	70
Egg (1 large)	6	70
Egg whites (3 Tbs.)	5	25

Plant-based meat, poultry, & eggs

Beyond Chicken Pieces Original (¾ cup)	21	150
Beyond Steak Original (¾ cup)	21	170
Beyond Burger (4 oz. patty)	21	230
Impossible Burger (4 oz. patty)	19	230
Morningstar Farms Grillers Prime Burgers (2.5 oz. patty)	16	140
Impossible Chicken Tenders (2 tenders, 3 oz.)	11	180
Morningstar Farms Original Sausage Patties (1.3 oz. patty)	9	80
Morningstar Farms Spicy Black Bean Burgers (2.4 oz. patty)	9	120
Just Egg Folded Plant Eggs (2 oz. egg)	6	80
Amy's California Veggie Burgers (2.5 oz. patty)	6	150
Just Egg liquid carton (3 Tbs.)	5	60

Beans & soy foods

Tempeh (3 oz.)	18	150
Tofu, super firm (3 oz.)	13	120
Edamame, shelled (½ cup)	9	90
Tofu, extra-firm (3 oz.)	9	90
Lentils or white beans (½ cup cooked)	9	120
Black or kidney beans (½ cup cooked)	8	110
Chickpeas (½ cup cooked)	7	130
Tofu, silken (3 oz.)	4	40
Hummus (2 Tbs.)	2	80

Yogurt—dairy or plant-based (5.3 oz., unless noted)

Chobani 20g Protein, all flavors (6.7 oz.)	20	140
Oikos Pro, all flavors	20	140
Plain Greek yogurt, 0%	16	80
Plain Greek yogurt, 2%	15	100
Icelandic Provisions Vanilla Bean Oatmilk Skyr (5 oz.)	12	150
Lifeway Lowfat Plain Kefir (1 cup)	10	110
Plain non-Greek yogurt, nonfat	6	60

Silk Vanilla Soymilk Yogurt	6	140
So Delicious Dairy Free Vanilla Coconut Yogurt	0	130

Milk—dairy or plant-based (1 cup)

Fairlife Fat Free Ultra-Filtered Milk	13	80
Dairy milk, fat free	8	80
Silk Original Protein Almondmilk	8	80
Dairy milk, 1%	8	110
Silk Original Soymilk	8	110
Dairy milk, 2%	8	120
Dairy milk, whole	8	150
Oatly Oatmilk	3	120
Silk Unsweet Almondmilk	1	30
So Delicious Dairy Free Original Coconutmilk	0	70

Cheese—dairy or plant-based

Cottage cheese, 2% low fat (½ cup)	13	90
Jarlsberg Lite Swiss Cheese (¾ oz. slice)	7	50
Ricotta, part-skim (¼ cup)	7	80
Shredded mozzarella, part-skim (¼ cup)	7	80
String cheese (1 oz. piece)	7	80
Cheddar, full fat (1 oz.)	7	110
Soft goat cheese (1 oz.)	5	70
Treeline French-Style Cashew Cheese (1 oz.)	3	80
Cream cheese, tub, full fat (2 Tbs.)	2	80
Daiya Dairy-Free Mozzarella Shreds (¼ cup)	1	90

Grains, pasta, & cereal

Kodiak Buttermilk Power Cakes Mix (½ cup)	15	220
Barilla Red Lentil Spaghetti (2 oz. dry)	14	190
Bob's Red Mill Protein Oats (⅓ cup dry)	10	190
Kashi Go Peanut Butter Crunch Cereal (¾ cup)	10	220
Whole wheat pasta (2 oz. dry)	8	200
Quinoa (1 cup cooked)	8	220
White pasta (2 oz. dry)	7	210
Whole wheat bread (1.5 oz. slice)	4	100

Nuts & seeds (1 oz.)

Hemp seeds, hulled	9	160
Pumpkin seeds	8	160
Peanuts	7	170
Pistachios	6	160
Almonds	6	180
Sunflower seeds	5	170
Cashews	4	160
Walnuts	4	190

Vegetables (cooked, unless noted)

Green peas (½ cup)	4	60
Portobello mushroom (3 oz.)	3	25
Broccoli (½ cup)	2	25
Avocado, raw (⅓ avocado)	1	80

Sources: company information, NIQ Product Explorer, USDA Food Data Central.

Quick Studies

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

What makes people eat more?



Does ultra-processing, calorie density, or soft texture make people overeat?

Scientists (partly funded by the food industry) had 69 adults eat as much as they wanted of one of several sandwiches on different days. Each was made largely of ultra-processed foods. The ingredients had either high or low calorie density (calories per bite) and either soft or hard textures.

For example, they used higher- vs. lower-fat cheese, chicken, mayo, and butter to change calorie density and harder vs. softer bread and raw carrots to alter texture.

The volunteers ate 484 more calories (1,123 vs. 639) from the calorie-dense lunches and 89 more calories (926 vs. 837) from the softer lunches. And they swallowed twice as many calories (1,143) from the calorie-dense soft lunch than they did from the less-dense hard lunch (570).

WHAT TO DO: Filling half your plate with vegetables or fruit is an easy way to cut calorie density, which mattered most (see Jan./Feb. 2024, p. 14).

J. Nutr. 2025. doi:10.1016/j.tjnut.2025.06.006.

GLP-1 drugs face off

Which GLP-1 drug leads to the most weight loss?

Researchers randomly assigned 751 people with obesity to the maximum doses of semaglutide (Ozempic or Wegovy) or tirzepatide (Mounjaro or Zepbound).

After 72 weeks, the semaglutide takers had lost 14 percent of their starting weight, while the tirzepatide takers had lost 20 percent. (The trial was funded by Eli Lilly, which makes tirzepatide.)

WHAT TO DO: Tirzepatide wins, but semaglutide is pretty darn good.

N. Engl. J. Med. 2025. doi:10.1056/NEJMoa2416394.



Who paid for that meat study?

Heard that red meat doesn't harm your heart? Think twice.

Researchers examined 44 clinical trials on red meat and cardiovascular outcomes like cholesterol, blood pressure, or inflammatory markers.

Trials that were funded by the red-meat industry reported either favor-

Go for the good carbs



Carbs have a bad rap, but some are linked to what some researchers call "healthy aging"—that is, living to age 70 without any of 11 major chronic diseases or impaired memory, physical function, or mental health.

Scientists tracked 47,513 women for 32 years. Those who ate the most high-quality carbs (from fruits, non-starchy vegetables, whole grains, and legumes) had a 51 percent higher likelihood of healthy aging than those who ate the least. In contrast, women who ate the most refined carbs (white flour, added sugar, and potatoes) had a 15 percent lower likelihood of healthy aging than those who ate the least.

WHAT TO DO: This study can't prove that good carbs can keep you healthy. (Something else about people who eat them may explain the links.) But what have you got to lose?

JAMA Network Open 2025. doi:10.1001/jamanetworkopen.2025.11056.



able (21 percent) or neutral (79 percent) cardiovascular outcomes. In contrast, those that were independently funded reported either unfavorable (73 percent) or neutral (27 percent) outcomes. Hmm.

WHAT TO DO: Be skeptical of results from industry-funded studies.

Am. J. Clin. Nutr. 121: 1214, 1246, 2025.



Dementia vaccine?

A shingles (herpes zoster) vaccine may cut the risk of dementia.

Researchers compared dementia diagnoses in residents of Wales who did—or did not—get a shingles vaccine when it became available there in 2013. Those who got the vaccine were 20 percent less likely to be diagnosed with dementia over the next seven years.

WHAT TO DO: It's too early to know if the shingles vaccine lowers the risk of dementia. Also, this study looked at the old live attenuated vaccine, not Shingrix, the new recombinant vaccine. But if you're 50 or older, it's worth getting the Shingrix vaccine so you don't get shingles, a painful, blistering rash caused by a reactivation of the virus that causes chicken pox.

Nature 641: 438, 2025.

Metformin for osteoarthritis?

Metformin, a drug that's widely used to treat type 2 diabetes, may also curb knee pain in people with osteoarthritis.

Researchers randomly assigned 88 people with excess weight who had knee pain due to osteoarthritis for at least six months to take either metformin (2,000 milligrams a day) or a placebo. After six months, the metformin takers reported less knee pain than the placebo takers. They also reported less stiffness and better function.

WHAT TO DO: The results are promising, but larger trials are needed, preferably with objective tests of knee function.

JAMA 333: 1804, 2025.



Ultra-processed foods & Parkinson's



Can ultra-processed foods raise the risk of Parkinson's disease?

Researchers tracked 42,853 health professionals for roughly 26 years. Those who averaged 11 servings of ultra-processed foods per day were roughly 2½ times more likely to develop at least three pre-Parkinson's symptoms than those who averaged just three servings per day. Those symptoms include constipation, body pain, and signs of depression.

(The researchers looked at what people ate at least six years before symptoms appeared to make sure that the symptoms weren't causing people to eat ultra-processed foods.)

WHAT TO DO: It's too early to know if ultra-processed foods cause pre-Parkinson's symptoms because something else about people who eat them may explain the results. But it can't hurt to limit unhealthy ultra-processed foods like sugary beverages and sweet snacks (see Sept./Oct. 2024, p. 16).

Neurology 104: e213562, 2025.

Better imaging for dense breasts?

Ordinary mammograms can miss cancers in women who have dense breast tissue.

Researchers randomly assigned 6,305 women with dense breasts and no signs of cancer on an ordinary mammogram to get further imaging. The trial is ongoing, but the authors have reported interim results. (The study was partly funded by GE Healthcare, which sells imaging devices.)

Invasive cancers were detected in 15 out of every 1,000 women who had an abbreviated MRI, in 16 out of every 1,000 who had a contrast-enhanced mammogram, and in 4 out of every 1,000 who had an automated whole breast ultrasound.

WHAT TO DO: Stay tuned. 📡

Lancet 405: 1935, 2025.



How sweet it is!

DRINKS WITH LITTLE OR NO SUGAR

BY LINDSAY MOYER

The best drink is a no-brainer (water!). But here are 10 healthy picks if you want a hint of flavor or juice, a low-sugar soda, an iced tea or coffee, or a non-alcoholic beverage that's low in calories (40 or less). All are either unsweetened or sweetened with no more than a teaspoon of added sugar, a little juice, or stevia or monk fruit extract.



Soda made simpler

Want a healthyish soda that's not too sweet?

New Spindrift Sodas get their flavor from 30 to 40 calories' worth of fruit juices, purées, and extracts, but no added sugar or other sweeteners. Choose from fruit-forward varieties like Ginger Ale, Orange Cream Float,

and Shirley Temple. Just don't expect any colas, root beers, or Dr Pepper lookalikes.

Tip: Want to dupe your favorite calorie-free diet soda? Try Zevia Zero Sugar Soda. It's sweetened with stevia extract and comes in 17 flavors.

Fizzy water + fruit

Plenty of companies use just a splash of fruit juice and/or purée to turn water into a special treat. Among them:

■ **Spindrift Sparkling Water.** Every 12 oz. can has only 5 to 20 calories and 0 to 4 grams of sugar. The refreshing flavors go beyond Lemon or Lime to pairings like Peach Strawberry or Blood Orange Tangerine, plus lemonades and teas like Mango Black Tea or Half Tea & Half Lemon.

■ **San Pellegrino Ciao!**

The fizzy newcomer takes a page out of Spindrift's playbook, but adds a little less juice (plus natural flavor). An 11 oz. can has just 5 to 10 calories and 0 or 1 gram of sugar.



Main squeeze

"Water enhancers" are tiny bottles of concentrated liquid sweetness designed to flavor your water with one squeeze. The concept is brilliant.

The problem: additives. Mio Berry Pomegranate drops, for example, get their sweetness from sucralose and acesulfame potassium and their color from Red 40 and Blue 1 food dyes—all of which we rate as "avoid" (see chemicalcuisine.org). Ditto for Crystal Light Blueberry Raspberry drops.

In contrast, Stur—available in some supermarkets and on sturdrinks.com—is an ingredient upgrade. Its Blue & Blackberry water enhancer, for example, gets its sweetness from stevia extract and its color from dashes of fruit and vegetable juice. Smart move, Stur!



Iced tea made easy

If you brew and ice your own tea, you have far more choices than with bottled store-bought (often sugary) iced teas.

Fruity white teas or caffeine-free tart herbal teas like hibiscus taste great iced and feel summery. Or add mint, berries, or lemon or orange to black or green tea. Want sweetness? Just add stevia extract or a teaspoon of sugar (15 calories).

Quart-size brew pouches like The Republic of Tea Iced Tea make brewing your own tea easy and yummy for just 0 to 15 calories per cup. Many are unsweetened. Some add sweetness from monk fruit extract. And the Matcha Green Tea Iced Tea Pouches get a tropical boost from coconut water crystals plus coconut flavor. Mmm.

Bubbles & beyond

LaCroix, Bubly, Polar, AHA, Nixie, Waterloo.

Whatever your preference, there's a can of calorie-free carbonated water with natural flavors and no sweeteners for you. Prefer stronger flavors? Try Waterloo. Less fizz? Try Bubly. Fun seasonal flavors? Try Polar.

Using an at-home sparkling water maker? Here's how to add flavor:

■ **Drops.** Buy a bottle of natural flavor with no sweeteners like SodaStream Bubly Drops or Ninja Thirsti Seltzer.

■ **Fruit, herbs, etc.** Squeeze in a wedge of lemon, orange, or lime. Or toss in a lightly mashed slice of cucumber and a sprig of fresh mint.



Hop to it

Beer isn't sugary, but its carbs and alcohol give it as many calories as soda. And drinking even three or four servings of alcohol a week is linked to a higher risk of breast cancer.

So why not consider a can of a refreshing hop-infused sparkling water instead?

Most have just two main ingredients—water and hops—so they're calorie-free. Hops are the citrusy flowers that give craft beers like IPAs their character (but not their alcohol).

Try a crisp Sierra Nevada Hop Splash or pick up one of the many varieties of Hoplark Sparkling Water.

Cheers!



Tried and true

Like water enhancers (see "Main squeeze"), powdered drink mixes have pluses and minuses.

You can stockpile servings without lugging plastic bottles home from the supermarket, you can easily find low-calorie versions, and you can dilute them in enough water to suit your taste buds. But

many brands use sweeteners like aspartame, acesulfame potassium, and/or sucralose, and some add food dyes.

Solution: True Lemon. Empty a packet into 16 oz. of water to add stevia extract, 1 gram of sugar, 10 calories, and a citrusy or tea flavor to your glass. (Choose from a variety of Lemonades, Limeades, and Iced Teas.) If you like your drinks less sweet, start with half a packet.



Buy it or brew it?

Nearly every beverage brand, from Starbucks to Califia Farms, now sells unsweetened iced or cold-brew coffee by the bottle, so it's easy to skip the sugar.

In a pinch, store-bought is fine. But it's almost as easy to

brew a little extra drip coffee in the morning and refrigerate the leftovers. Voilà! Iced coffee for tomorrow.

That's also a good way to make your own decaf iced coffee, which can be harder to track down in many stores and coffee shops.

Tip: Freeze some of your leftover coffee in ice cube trays. That way, the cubes won't water down your homemade iced coffee as they melt.



Turn up the tang

A little acidity can transform a low-sugar fizzy drink into a complex, pleasantly sweet-tart beverage.

A tangy winner: Trader Joe's Organic Sparkling Apple Cider Vinegar Beverages. Each 35-calorie can blends half a cup of fruit juice with a tablespoon of vinegar and dilutes it all with sparkling water. And the fun flavor combos—Ginger + Lemon, Blueberry + Pomegranate, and Lemon + Strawberry—are a real treat.

Sour aficionados might also like kombucha, which gets its funky kick and fizz as it ferments. A cup of most brands has just 30-or-so calories from fruit juice or (sometimes) added sugar.



Slash sugar from mocktails

Looking to replace all the alcohol and most (or all) of the sugar in a cocktail? Sparkling waters are on it!

■ **Spindrift Nojito and LaCroix Mojito.** Rum-free, sugar-free takes on a mojito's lime and mint flavors...and zero calories (LaCroix) or almost none (Spindrift).

■ **Spindrift Cosmopolitan.** An alcohol-free fizzy riff on the Cosmopolitan (cranberry, orange liqueur, lime, and vodka), but with only 10 calories from cranberry, orange, and lime juice and lime extract.

■ **Waterloo Craft Collection Mocktails.** Calorie-free canned sparkling waters with the natural-flavor essence of a tiki Mai Tai or Piña Colada or a citrusy Margarita. 🍹



The Healthy Cook



Dining alfresco

My summer ideal: enjoying an evening meal on the screened-in porch as the temperature begins to drop and the fireflies start to twinkle. I hope these summery dishes inspire you to dine outdoors with your family and friends. 🍷

ROASTED RED PEPPER GAZPACHO

A super-smooth chilled soup bursting with fresh produce is oh-so-refreshing in the summer heat. Any in-season vegetables that you enjoy raw make attractive (but optional) garnishes; I've used cherry tomatoes, cucumbers, and chives.

- | | | |
|-------------------------------|-----------------------------------|--|
| 3 cups chopped tomatoes | ½ white onion, chopped (optional) | 1 In a blender, combine all the ingredients and purée until very smooth. |
| 2 roasted red peppers | ¼ cup extra-virgin olive oil | 2 Transfer to a stainless steel bowl and refrigerate until cold, 1–2 hours, or freeze for 30 minutes. Transfer back to the blender and blend again before serving. |
| 1 cup chopped seeded cucumber | 1 Tbs. sherry or red wine vinegar | |
| | ½ tsp. kosher salt | |

TIME: 15 MINUTES + TIME TO CHILL | SERVES 4

PER SERVING (1 cup): calories 170 | total fat 14 g | sat fat 2 g | carbs 11 g | fiber 3 g | total sugar 7 g
added sugar 0 g | protein 2 g | sodium 250 mg

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

SALMON WITH MANGO GINGER SAUCE

In-season juicy, fragrant honey mangos (AKA Champagne or Ataulfo mangos) are my favorites. Can't find them? Use any ripe fresh mango or frozen mango that's thawed to room temperature.

- | | |
|---|--|
| $\frac{2}{3}$ cup chopped mango | 4 6 oz. skinless center-cut salmon fillets |
| 1½ Tbs. minced ginger | $\frac{1}{4}$ tsp. freshly ground black pepper |
| 1 Tbs. rice vinegar | 1 Tbs. extra-virgin olive oil |
| $\frac{1}{2}$ tsp. toasted sesame oil | |
| $\frac{1}{4}$ tsp. + $\frac{1}{4}$ tsp. kosher salt | |

TIME: 20 MINUTES | SERVES 4

PER SERVING (1 fillet + 2 Tbs. sauce): calories 410 | total fat 27 g | sat fat 6 g | carbs 5 g | fiber 1 g | total sugar 4 g | added sugar 0 g | protein 35 g | sodium 340 mg



- 1 Make the Mango Ginger Sauce: In a blender, purée the mango, ginger, vinegar, sesame oil, and $\frac{1}{4}$ tsp. salt with 1 Tbs. water until smooth.
- 2 Blot the salmon with a paper towel. Season with the remaining $\frac{1}{4}$ tsp. salt and the pepper.
- 3 In a large nonstick pan over medium-high heat, heat the oil until shimmering. Sauté the salmon until browned, 2–3 minutes, then turn and reduce the heat to medium-low. Sauté until cooked through, 1–3 minutes, depending on the thickness of the fillets.
- 4 Spoon the sauce over the salmon.

PERFECT PICNIC CHICKEN

Lightly coating the chicken with a cornstarch mixture is a technique from Chinese cooking that yields juicy, tender pieces. This do-it-all chicken is perfect for dinner, a salad, a sandwich...or even a picnic!

- | | |
|---|------------------------------------|
| 1 Tbs. + 1 Tbs. + 1 Tbs. extra-virgin olive oil | 1 tsp. ground or crushed coriander |
| 2 tsp. cornstarch | $\frac{1}{4}$ tsp. ground cumin |
| 1 Tbs. fresh lemon juice | $\frac{3}{4}$ tsp. kosher salt |
| 1 Tbs. smoked paprika | 1½ lbs. chicken breast tenderloins |

TIME: 30 MINUTES | SERVES 6

PER SERVING (3 oz. cooked): calories 200 | total fat 10 g | sat fat 1.5 g | carbs 2 g | fiber 1 g | total sugar 0 g | added sugar 0 g | protein 26 g | sodium 290 mg



- 1 In a large bowl, whisk together 1 Tbs. oil with the cornstarch, lemon juice, paprika, coriander, cumin, salt, and 1 Tbs. water. Toss with the chicken to coat evenly, then allow to sit for 10 minutes.
- 2 In a large nonstick pan over medium-high heat, heat 1 Tbs. oil until shimmering. Sauté half the chicken until lightly browned and cooked through, about 2 minutes per side. Remove to a sheet pan or plate and let rest for 3 minutes. Repeat with the remaining 1 Tbs. oil and chicken.

A dose of wellness?

3 TRENDING SUPPLEMENTS

BY CAITLIN DOW

Supplement makers have been busy conjuring up the latest crop of pricey pills that claim to boost your body's natural GLP-1, reverse aging, repair your gut, and more. Spoiler: Each one rests on shaky evidence.

1 A natural GLP-1 boost?

GLP-1 (or glucagon-like peptide-1) is a hormone secreted by cells in your gut after you eat. It helps control blood sugar, slows the rate at which food leaves your stomach, and blunts appetite. GLP-1 drugs mimic those actions of natural GLP-1, but with far more power.

Natural GLP-1 is gone almost as quickly as it appears: Within a few minutes, your body has already broken down most of it.

Ozempic (sold as Wegovy for weight loss) is a version of GLP-1 that resists that rapid breakdown, so it circulates in the blood for up to a week at far higher levels than natural GLP-1.

And supplement sellers want a piece of that Ozempic pie.

"I'm excited and proud of our cutting-edge formulation that uses both clinically-studied and patented ingredients to increase GLP-1 levels in the body, naturally," said Kourtney Kardashian in a press release when her supplement brand, Lemme, announced the launch of its new GLP-1 Daily.

Lemme GLP-1 Daily contains three active ingredients: Eriomin (a lemon fruit extract), Supresa (a saffron extract), and Morosil (an extract of

Moro red oranges). (Similar ingredients are often used in other GLP-1 supplements.)

No studies have tested Lemme. The evidence on its components? Skippy.

■ **Eriomin.** Eriomin has been shown to "increase GLP-1 levels," says Lemme.

Three randomized trials have tested Eriomin's effects on GLP-1 levels in people with prediabetes or type 2 diabetes.¹⁻³ (No studies have tested it in people with normal blood sugar.) All three were small, short (they lasted just three months), and funded by Eriomin's manufacturer.

One of the studies came up empty. In the other two, fasting levels of GLP-1 were 15-to-20 percent higher

in the Eriomin group than in the placebo group.^{1,2}

But a 15-to-20 percent bump in naturally occurring GLP-1 doesn't hold a candle to a GLP-1 drug. Blood levels of Wegovy, for example, are roughly 230,000 to 760,000 percent higher than the naturally occurring GLP-1 levels that were measured at the end of the Eriomin studies.

So it's no surprise that weight didn't change in any of the Eriomin studies.

■ **Morosil.** Morosil can "fight visceral fat, activate metabolism and support healthy weight management" when used "along with healthy diet and exercise," says Lemme's website.

In the study Lemme cites (funded by Morosil's manufacturer), researchers randomly assigned 136 adults with excess weight to take 400 milligrams of Morosil or a placebo every morning.⁴ All the volunteers were also asked to walk for 30 minutes three days a week and to follow a calorie-controlled diet.

After six months, the Morosil takers

had lost 4 percent of their starting weight, compared to 2 percent for the placebo takers. (A typical Morosil taker lost roughly 8 pounds, versus 4½ pounds for a typical placebo taker.)

That's a far cry from the 15-to-25 percent weight loss seen in GLP-1 drug trials.

And while waist circumference also dropped more in the Morosil takers (about 1.5 inches) than in the placebo takers (about 0.7 inches), people taking GLP-1 drugs typically lose 5 to 7 inches around their waist.



GLP-1 supplement curious? Don't expect more than a shadow of the weight loss (at best) that people get with a GLP-1 drug.

What about Lemme's claim that Morosil can "activate metabolism"? The study never looked at the participants' metabolism.

■ **Supresa.** In a company-funded study, researchers randomly assigned 60 women to take either 176.5 mg of the active ingredient in Supresa (the amount in Lemme GLP-1 Daily) or a placebo every day.⁵

"Within 8 weeks, 69% of Supresa participants reported a decrease in hunger," claims Lemme's website.

That's true. But so did 54 percent of the placebo takers, a fact the website omits. Nor does it report the primary results from the study: After eight weeks, there was no difference in weight between the groups. Oops.

BOTTOM LINE: Lemme overstates the ho-hum results of a handful of company-funded studies. Is that evidence compelling enough to drop \$80 for a one-time one-month supply of GLP-1 Daily? Hardly. (Interested in the evidence on other GLP-1 supplements? Head to cspi.org/glp1supplements.)

2 Fatty15 for longevity?

Fatty15—aka C15:0—is a supplement that contains pentadecanoic acid, a fatty acid with 15 carbon atoms that's found primarily in dairy fat.

It's "your healthy aging supplement" with "activities that support your metabolic, liver, red blood cell and cognitive health," claims fatty15's website. Is it?

"If cell membranes are low in C15:0, they can become fragile, leading to the Cellular Fragility Syndrome," says the website.

Never heard of Cellular Fragility Syndrome? That puts you in good company—pretty much everyone else on Earth.

The term was coined just last year in a paper published by a co-founder of fatty15's manufacturer.⁶ Other than in another paper by that co-founder, you'd be hard-pressed to find much mention of Cellular Fragility Syndrome in peer-reviewed studies.⁷

And don't put too much stock in

month after month.

Is there any evidence that C15:0 can improve health?

Though research is in its very early stages, some studies suggest that it might be beneficial. For example, a couple of studies link higher blood levels of C15:0 to a lower risk of type 2 diabetes and coronary heart disease.^{8,9}

But those studies don't prove that taking a C15:0 supplement does anything. Something else about

people with high levels of C15:0 in their blood may explain their lower risk.

And despite fatty15's claim that "C15:0 is so important to our longevity," no randomized trial has ever tested C15:0's ability to change markers of longevity in people.

What about other benefits? Only two randomized trials have been published, and neither has researchers

buzzing with excitement.

In one (partially funded by a company that sells oils for foods), researchers randomly assigned 88 women with non-alcoholic fatty liver disease to one of three groups: a control group, a group that ate a reduced-calorie Mediterranean diet, or a group that ate the same diet and took a daily supplement with 300 milligrams of C15:0.¹⁰

After 12 weeks, both Mediterranean-diet groups had lost more liver fat—and weight—than the control group. But the diet-plus-C15:0 group fared no better than the diet-only group, except for one possible glimmer of benefit: LDL ("bad") cholesterol dropped more in the C15:0 group, though the differences were modest.

A second randomized trial (partly funded by fatty15's manufacturer) gave 30 young adults with excess weight 200 mg of fatty15 or a placebo

Elevate your cells

Fatty15 is a science-backed, award-winning, and pure C15:0 supplement that supports your long-term health and wellness.*

Buy Now



No trials have tested fatty15's claims that it can boost longevity. Studies on metabolic health have largely come up empty.

fatty15's claim that "an estimated 1 in 3 people have a nutritional C15:0 deficiency." To correct a deficiency, a nutrient has to first be considered "essential." (That means your body doesn't make it, so you need to consume it to be healthy.)

But C15:0 isn't essential, according to the National Academies of Science, Engineering, and Medicine (which decides what nutrients we need). So you can ignore fatty15's claim that C15:0 is the "first essential fatty acid to be discovered in over 90 years."

Of course, that doesn't stop fatty15 from selling a blood test (for \$199) to tell you if you're "deficient" in C15:0. And, if you are, they're happy to supply you with a 30-day supply of fatty15 for only \$50 or so.

What a brilliant business plan: Create a problem, market a test for the problem, then sell a solution to the problem to keep the money rolling in

every day. After 12 weeks, body weight, waist circumference, and other markers of metabolic health were no different.¹¹

Worth noting: According to the fatty15 supplement label, a dose is 100 mg of C15:0. No studies have looked at that dose.

BOTTOM LINE: Fatty15 makes a fuss about its anti-aging potential, but no trials have ever looked at markers of longevity. Our take: Save your money.

3 Bovine colostrum to heal your gut?

Colostrum is the milk produced by all mammals in the first 24 to 72 hours after giving birth. “Bovine” means that it’s from cows. High in protein, antibodies, growth factors, and other nutrients, colostrum is a nutritional powerhouse for newborns and their undeveloped immune systems.

What has that got to do with adults?

“When you take ARMRA Colostrum you strengthen your body’s barriers, creating a tight seal that prevents threats from crossing into the bloodstream,” says the website of what is arguably the biggest name in bovine colostrum supplements.

In theory, if your intestines are more permeable than they should be (sometimes called a “leaky gut”), toxins, undigested food, microbes, and more could make their way into your bloodstream.

That could set off a cascade of reactions by your immune system, resulting in autoimmune problems like inflammatory bowel disease, metabolic disorders like type 2 diabetes, or anxiety, depression, and so on.

In reality, it’s unclear if a more-permeable gut (or, in some cases, an overreactive immune system) causes any of those health problems.

So far, most studies that have evaluated bovine colostrum’s ability to blunt gut permeability have been done in people doing strenuous exercise. Why?

A single bout of strenuous exercise like marathon running or long-distance cycling—especially when done in the heat—can temporarily increase markers of gut damage and permeability.¹²



Companies claim that their bovine colostrum supplements can heal your gut, boost your immune system, and more. The evidence? Lackluster.

In one analysis of nine studies in people doing strenuous exercise who took colostrum for several weeks, most (but not all) reported some benefit on some of those markers.¹³

But the studies were small, many were company-funded, and nearly all were conducted in young men.

What’s more, the studies typically gave volunteers between 20 and 60 grams a day of colostrum. One scoop of ARMRA has just 1 gram of bovine colostrum.

And despite claims from the wellness world that “leaky gut” is to blame for any number of health woes,

there is no evidence that the average person has excess gut permeability. So it’s not surprising that no studies have given bovine colostrum to healthy people and checked to see what happens to their gut.

What about ARMRA’s claim that its supplements “leverage immune intelligence to protect, restore, and enhance complete immune health”?

In one analysis of six randomized trials that gave people bovine colostrum or a placebo every day for an average of about two months, colostrum lowered the risk of an upper respiratory tract infection (like a cold or the flu) by about 25 percent.¹⁴

But most of those studies were company-funded and gave volunteers enormous doses—roughly 10 to 60 grams per day.

Only one study looked at respiratory infections using doses similar to what ARMRA and other companies sell. It came up empty.¹⁵

BOTTOM LINE: Most studies on bovine colostrum have used doses far higher than what you’d get from a supplement and have been largely funded by supplement makers. And even those studies report inconsistent evidence on colds, flu, and gut permeability. 🚫

¹ *Phytother. Res.* 33: 1921, 2019.

² *J. Med. Food* 25: 1050, 2022.

³ *Food Sci. Nutr.* 11: 7283, 2023.

⁴ *Nutrients* 14: 427, 2022.

⁵ *Nutr. Res.* 30: 305, 2010.

⁶ *Metabolites* 14: 355, 2024.

⁷ *Int. J. Mol. Sci.* 26: 3746, 2025.

⁸ *PLoS Med.* 15: e1002670, 2018.

⁹ *Front. Nutr.* 9: 963471, 2022.

¹⁰ *Am. J. Clin. Nutr.* 119: 788, 2024.

¹¹ *J. Nutr.* 154: 2763, 2024.

¹² *Sports Med.* 51: 113, 2021.

¹³ *Dig. Dis. Sci.* 69: 1345, 2024.

¹⁴ *J. Func. Foods* 99: 105316, 2022.

¹⁵ *Nutrients* 15: 1925, 2023.

The inside scoop

HOW TO FIND A BETTER ICE CREAM

BY LINDSAY MOYER & MARLENA KOCH

Ice cream is no health food, but some brands do far less damage than others. Our Better Bites don't pile on the added sugar or saturated fat like Ben & Jerry's or Häagen-Dazs. Check out our newest winners...and losers.

WHAT TO LOOK FOR

A $\frac{2}{3}$ -cup serving of our Better Bites (see p. 23) has:

- **No more than 4 grams of saturated fat.** That narrows the field to mostly light and reduced-fat ice creams.
- **No more than 16 grams of added sugar.** That's not *low*, but it's realistic if you're shunning low-calorie sweeteners (they're not for everyone's taste buds) or if you're buying plant-based ice creams, which don't get any sweetness from the lactose in milk.
- **No acesulfame potassium, sucralose, food dyes, or titanium dioxide.** We rate all four additives as "avoid" (see chemicalcuisine.org for details). The first two are low-calorie sweeteners that can replace some or all of an ice cream's sugar. Food dyes like Blue 1 or Yellow 5 show up in some mint chip ice creams. Titanium dioxide, while not a dye, lends a white color to foods.

LIGHTEN UP

If you don't love sugar-slashed ice creams like Halo Top, don't fret.

Two big brands (and some similar store brands) go lower in fat and calories than regular ice cream without using any low-calorie sweeteners:

■ **Edy's or Dreyer's Slow Churned Light Ice Cream.**

All but one of its dozen



flavors are Better Bites (food dyes disqualify the Mint Chocolate Chip). But if you're sensitive to the GI effects of some processed fibers, check the ingredients list: About half the flavors add soluble corn fiber and polydextrose.

■ **Breyers.** Breyers has no "light" line, but eight flavors are low enough in saturated fat and added sugar to meet our Better Bite limits (see p. 23). And even flavors with 5 or 6 grams of sat fat per serving, which just miss a Better Bite, are a big improvement over super-premiums like Ben & Jerry's or Häagen-Dazs, with their 10 to 18 grams per serving—that's half a day's to a full day's worth.

GO FOR THE HALO?



Halo Top racks up a bevy of Better Bites. But before you dig into a whole pint at one sitting—as the "calories per pint" on the tub suggests—consider the pros and cons:

■ **Sugar.** Halo slashes added sugar to new lows. A $\frac{2}{3}$ -cup serving of most flavors has no more than 5 grams. Bravo!

■ **Sweeteners.** Another plus: Halo shuns acesulfame potassium and sucralose in favor of safer stevia and monk fruit extracts, though the brand also adds the sugar alcohol erythritol. A 2023 study found a link between

blood levels of erythritol and heart attacks and strokes, but the evidence that *eating* erythritol raises risk is far from solid (see Jun. 2023, p. 11). Prefer to avoid it until we know more? For a list of products in this article that contain erythritol, go to cspi.org/additiveslist.

■ **GI effects.** Eating too much of Halo's inulin and soluble corn fiber could lead to gas or bloating in people who are sensitive to the two processed fibers. And researchers are studying whether emulsifiers like the cellulose gum in Halo (and other ice creams) could affect gut health in some people (see Sept./Oct. 2023, p. 3).

■ **Taste.** Some folks detect a low-cal sweetener aftertaste.

■ **Price.** Each serving will cost you up to three times as much as regular ice cream.

PROTEIN BY THE PINT?



“Good source of protein,” says the front of the Halo Top Peanut Butter Cup container. “18g of protein per pint.”

Halo Top has a reputation for packing protein, but per serving ($\frac{2}{3}$ cup for ice creams), it has only about 6 grams. That’s twice as much as you’d expect from regular ice cream, but it’s not high by any means.

You’d get about 12 grams of protein from a low-fat refrigerated Greek yogurt for the same 110 calories.

We found one ice cream with considerably more protein than Halo Top: newcomer Protein Pints packs 10 grams of protein in every 120-to-160-calorie serving. And two of its flavors (Chocolate and Strawberry) go light enough on their whole milk and cream to stay within our Better Bite sat fat boundary.

How do the Protein Pints add extra protein without boosting calories? They subtract some sugar calories. With help from monk fruit extract plus 10 to 12 grams of allulose per serving, they limit the added sugar (and its calories) to a mere 1 to 3 grams. If that’s enough allulose to upset your tummy, leave Protein Pints on the shelf. No GI troubles? Enjoy. (For more on allulose, turn the page for this issue’s Food Find.)

The bottom line: Think of a protein boost from your ice cream as a nice bonus. But if—like most U.S. adults—you’re already getting enough protein, low-protein ice cream isn’t a deal breaker.

A SUGARY BET

Most fruit sorbets aren’t even within striking distance of a Better Bite.

Take Häagen-Dazs. A $\frac{2}{3}$ -cup serving of its Mango Sorbet adds 40 grams of sugar—as much as a 12 oz. Coke. And its Passion Fruit & Sweet Pear Sorbet has a whole day’s max (50 grams). Sheesh!

Talenti Alphonso Mango (26 grams) is better than most.

Downsize to a half cup to get closer to a Better Bite.

Or turn the page for The Healthy Cook’s recipe for Raspberry Mango Sorbet. If you’ve got raspberries, mango, and bananas on hand, you’ve got some smooth, creamy, sweet-tart sorbet on the way.



SO LONG, LACTOSE



Lactose intolerant? All plant-based ice creams are dairy-free, so they’re also free of lactose (milk sugar).

But if you want dairy’s taste and texture, all is not lost. Look for a dairy ice

cream that adds lactase enzyme to break down its lactose into more easily digestible sugars.

It’s a pity they’re in such short supply. Lactaid offers the most flavors, but they’re all full-fat ice creams with 7 or 8 grams of saturated fat per serving. The only Better Bite we found: Breyers Lactose Free Vanilla.

COCONUTS VS. ‘CADOS

The good news for plant-based eaters: The taste and texture of dairy-free ice creams just keep getting better.

We’re talking about the rich, dense mouthfeel of new oat-milk-based Ben & Jerry’s Non-Dairy, the oh-so-silky So Delicious Cashewmilk varieties, and velvety Oatly.

They all give full-fat dairy ice cream a run for its money. Alas, they also rack up similar totals: around 40 to 50 percent of a day’s saturated fat and added sugar per serving.

What gives? While refrigerated liquid oatmilk or cashewmilk is typically made with heart-healthy unsaturated oils like sunflower or canola, the ice creams also contain saturated-fat-laden coconut oil.

When it comes to picking a source for the fat in plant-based ice cream, avocados trounce coconuts.

True to its name, Cado uses avocado purée and/or avocado oil, not coconut oil, so it’s higher in healthy fat and lower in sat fat. Most flavors are Better Bites. And the texture is plenty dense and creamy.

What about Frönen, which sweetens its (non-avocado) plant-based ice creams with coconut sugar and/or honey? (Both may sound good, but neither is any healthier than regular cane sugar.)

While Frönen uses less of those sweeteners (12 to 15 grams of added sugar) than many plant-based brands, it gets its fat from coconut cream...and it adds enough to hit 9 to 15 grams of sat fat per serving. Yikes! 🚫



We all scream for...

Better Bites (✓) have no more than 4 grams of saturated fat and 16 grams of added sugar in a $\frac{2}{3}$ -cup serving. We disqualified products (marked with ●) with one or more risky additives: acesulfame potassium, food dyes, sucralose, or titanium dioxide. Ice creams and gelatos are ranked from least to most saturated fat, then added sugar. Sorbets are ranked from least to most added sugar.

Calories
Saturated fat (g)
Added sugar (g)
Additives

Light & Low-Sugar Ice Cream ($\frac{2}{3}$ cup)

✓ Halo Top ¹	100	1.5	5	
✓ Favorite Day Reduced Fat ¹	120	2	3	
✓ Halo Top Mix-Ins—except Sweet Cream Cold Brew ¹	160	2.5	12	
✓ Edy's or Dreyer's Slow Churned—except Mint Chocolate Chip ¹	150	2.5	13	
Edy's or Dreyer's Slow Churned No Sugar Added ¹	150	3	0	●
✓ Protein Pints Chocolate	120	3	1	
✓ Protein Pints Strawberry	120	3	1	
Edy's or Dreyer's Slow Churned Mint Chocolate Chip	150	3	12	●
Breyers No Sugar Added ¹	100	3.5	0	●
Halo Top Mix-Ins Sweet Cream Cold Brew	160	4	15	●
Breyers CarbSmart ¹	120	4.5	1	●
Protein Pints Cookie Dough	160	5	3	
Protein Pints Mint Chip	140	5	3	
Protein Pints Peanut Butter Chip	140	5	3	

Lactose-Free Ice Cream ($\frac{2}{3}$ cup)

✓ Breyers Lactose Free Vanilla	150	3	14	
Lactaid ¹	220	7	14	

Regular Ice Cream ($\frac{2}{3}$ cup)

✓ Breyers Extra Creamy Chocolate	140	3	13	
✓ Breyers Extra Creamy Vanilla	140	3	14	
✓ Breyers—Cherry Vanilla, Coffee, Pistachio Almond, or Rocky Road ¹	160	3.5	12	
✓ Breyers Butter Pecan	170	4	10	
Breyers Cookies & Cream	190	4	17	
Breyers Natural Strawberry	150	4.5	14	
Breyers Vanilla Chocolate Strawberry	160	5	14	
Breyers Chocolate Chip	170	6	14	
Breyers Natural Vanilla	170	6	14	
Breyers Chocolate	170	6	15	
Tillamook Peaches & Cream	200	6	17	
Breyers Mint Chocolate Chip	200	8	18	
Tillamook Mudslide	260	9	19	
Ben & Jerry's Strawberry Cheesecake	350	10	25	
Häagen-Dazs Creamy Mango	330	10	31	
Häagen-Dazs Strawberry	310	12	18	
Ben & Jerry's Half Baked	370	12	31	
Häagen-Dazs Matcha Green Tea	310	13	18	

Häagen-Dazs Vanilla	320	13	18	
Ben & Jerry's Cherry Garcia	340	13	31	
Ben & Jerry's Phish Food	390	13	34	
Ben & Jerry's Chunky Monkey	400	14	32	
Häagen-Dazs Chocolate Peanut Butter Pretzel	450	15	23	
Häagen-Dazs Mint Chip	360	15	25	
Ben & Jerry's Americone Dream	380	15	28	
Ben & Jerry's Peanut Butter Cup	460	18	26	
Ben & Jerry's Coffee Toffee Bar Crunch	400	18	27	

Gelato ($\frac{2}{3}$ cup)

Talenti Belgian Chocolate	290	7	33	
Talenti Chocolate Peanut Butter Cup	360	9	32	
Talenti Black Raspberry Chocolate Chip	310	11	28	

Plant-Based Ice Cream ($\frac{2}{3}$ cup)

✓ So Delicious Soymilk Creamy Vanilla	170	0.5	16	
✓ Cado—Cookies & Cream or Vanilla Bean	220	2	14	
✓ Cado Chocolate Mud Pie	230	2	15	
✓ Cado Java Chip	220	2	16	
✓ Cado Salted Caramel	220	2	16	
Cado Deep Dark Chocolate	220	2	18	
Cado Simply Lemon	230	2	18	
✓ Cado Choco Peanut Butter	230	3	16	
Cado Mint Chocolate Chip	230	3	17	
Cado Cherry Amaretto	230	3	18	
Breyers Non-Dairy ¹	140	4.5	16	
Oatly ¹	230	8	21	
Ben & Jerry's Non-Dairy (oat milk) ¹	330	9	30	
So Delicious Oatmilk ¹	220	10	20	
So Delicious Cashewmilk ¹	260	10	23	
So Delicious Coconutmilk Zero ¹	180	12	0	
Fröner ¹	210	12	13	

Sorbet & Sorbetto ($\frac{2}{3}$ cup)

Talenti Alphonso Mango	160	0	26	
Talenti Roman Raspberry	150	0	30	
Häagen-Dazs Summer Blueberry & Lemon	190	0	31	
Talenti Summer Strawberry	150	0	33	
Talenti Zesty Lemon	140	0	33	
Häagen-Dazs Raspberry	170	0	34	
Häagen-Dazs Mango	200	0	40	
Häagen-Dazs Sweet Lemon Coconut	240	0.5	41	
Häagen-Dazs Passion Fruit & Sweet Pear	220	0	50	

✓ Better Bite | ¹ Average of the entire line or the varieties listed.

● Contains one or more of: acesulfame potassium, food dyes, sucralose, or titanium dioxide (to see which, go to [cspi.org/additiveslist](https://www.cspi.org/additiveslist)).

Daily Values (DVs)—Saturated Fat 20 grams | Added Sugar 50 grams

Sources: company information and NIQ Product Explorer. Nutrition Facts and ingredients can change; always check the label. The use of information from this article for commercial purposes is strictly prohibited without written permission from CSPI.



FOOD FIND

Cream of the crop

Care for a splash of creamer in your coffee? Think twice.

Every tablespoon can add 4 to 6 grams of sugar and 30 to 40 empty calories. And “zero sugar” creamers often come with caveats. Many get their sweetness from sucralose and acesulfame potassium, which we rate as “avoid” because they may pose a cancer risk (see chemicalcuisine.org).

News flash: A welcome crop of zero-added-sugar creamers from **Silk**, **Natural Bliss** (made by Coffee-Mate), and **Chobani** shun sucralose and acesulfame potassium in favor of safer low-calorie sweeteners.

Plant-based **Silk Zero Sugar Vanilla Cinnamon Oat Creamer** has just 10 calories and zero saturated fat per tablespoon. It gets its sweetness from stevia extract and its great taste from creamy oatmilk. We have a winner!

Natural Bliss Zero Added Sugar and **Chobani Zero Sugar** creamers are a mix of dairy milk and cream, which bumps the saturated fat up to 1 gram and the calories to 20 per tablespoon, but they still shave unnecessary calories off sugary creamers.

Like Silk, Natural Bliss and Chobani use stevia. Chobani also adds allulose, which our bodies don’t completely digest and absorb. That could cause GI troubles in sensitive people who consume too much at one time. Fortunately, Chobani’s creamers have only a tiny bit (less than 1 gram per tablespoon).

We’ll drink to that.



FOOD FAIL

Pound foolish

“**Chili’s** Takes Another Swing at Fast Food with the Debut of the All-New **Big QP Burger** to its 3 For Me Menu,” boasted the chain in an April press release.

Why would Chili’s pick a fight with McDonald’s?

“For most consumer companies, inflation has been a curse,” explained a *Wall Street Journal* article. “But Chili’s has found an unusual way to turn inflation into a marketing pitch: since your fast-food burger costs so much, why not go just a little bit more upscale.”

Here’s why not. “Upscale” at Chili’s means a burger with enough calories (880), saturated fat (25 grams), and sodium (1,670 milligrams) to top a McDonald’s Quarter Pounder with Cheese (520 calories)...or even a *Double Quarter Pounder with Cheese* (740 calories).

But Chili’s doesn’t stop there. Its “3 For Me” menu features “bottomless chips and salsa, an unlimited fountain drink and the Big QP with fries for just \$10.99,” as its press release noted.

Order a sugary non-diet Coke, and your combo racks up a full day’s calories (2,210), along with nearly two days’ worth of sat fat (35 grams) and sodium (4,250 mg). And that’s before you hit the free refills.

The Big QP is one of the chain’s “Big Mouth Burgers”—they’re “burgers so big, you might need a game plan,” warns Chili’s.

Hmm... Maybe that plan should include a cardiologist on standby?

QUICK DISH

RASPBERRY MANGO SORBET

In a food processor, purée 6 oz. raspberries, 1½ cups chopped mango, and 2 chopped bananas. Pour into a wax-paper-lined metal rimmed baking pan and freeze until semisolid, 2–3 hours. Break into pieces, then process until smooth. Return to the lined baking pan and freeze until scoopable, 1–2 hours. Top with extra berries, if you’d like. Serves 4.

