

Please continue to send recipes, information about restaurants, stores, favorite websites, articles, sightings of new GF foods and anything else you would like to share with the group. Did you have a GF vacation? Did you go on a cruise? Did your GF child go to a camp? We would love to hear from YOU. This is your group and newsletter. We can learn from each other. You will find items submitted by your GF friends in this newsletter. If you sent me an item, and you don't see it in the newsletter, let me know. I have been known to lose emails.

## **Gluten Free in Central Arkansas, branch of GIG**

[www.centralarkansasgig.org](http://www.centralarkansasgig.org)  
[www.gluten.net](http://www.gluten.net)

### **August 2008**

Terri Murdoch is our new treasurer. Donations may be sent directly to her.

[paul.terri@sbcglobal.net](mailto:paul.terri@sbcglobal.net)  
11 Berwyn Dr  
Little Rock, AR 72227  
Phone: 501-312-1689

Gluten Free 101 classes are held on demand. Please contact either Terri Murdock or me for more information.

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### **Calendar for GFCA**

**Monday August 18 6 -8pm** - Tony Pipkin, MS, RD, LD will be speaking. Topic is "Getting Back to Basics: Gluten Free Nutrition"

**Monday, September 15 - to be announced**

**Monday October 20** - Jen Wright attended Gluten Free Baking International in Denver and the New York Culinary Institute. She will talk about the experience and share recopies and foods.

**There will be no formal meeting in November or December**

All general meetings are held in the community room of Whole Foods unless otherwise specified.

Whole Foods  
10700 N Rodney Parham Rd  
Little Rock, AR 72212  
(501) 312-2326

### **Meetings in Arkansas**

**Arkansas R.O.C.K.** For information about the next meeting, you may contact Melanie at 479-582-9232 or email her at [melaniefaught@cox.net](mailto:melaniefaught@cox.net) This group is based in Fayetteville. There is also an active Yahoo group to join <http://health.groups.yahoo.com/group/ArkansasROCK/>

**Gluten Free Fort Smith** meetings are held at the St Bartholomew Episcopal Church. For more information, contact Wood, Cindy [cwood@Rheemac.com](mailto:cwood@Rheemac.com)

**Hot Springs Village** meetings are (almost) always held on the third Tuesday of the month, at 10:30am at Cranford's Grocery store on Highway 5 right outside of Hot Springs Village. There are two contact persons: Marcia Clark, 501-915-9024, [marciarclark@suddenlink.net](mailto:marciarclark@suddenlink.net) or Jeannie Shapley, 501-321-8171, [cjshapley@cablelynx.com](mailto:cjshapley@cablelynx.com)

## Stores

**Whole Foods** is planning GF store tours and GF tasting on the first Saturday of each month. The first one was held on August 2. Sherri and I led groups through the store to help them find gluten free foods. Whole Foods had samples for tasting. We were also allowed to add to the samples from the shelves. After the tour, we watched Charlotte of Whole Foods put together a Quinoa salad.

Whole Foods will be expanding the shelf space for GF foods and wants to hear from you. What do you like? What do you want them to carry? Please let them hear from you.

Here is the next GF event at Whole Foods. Let me know if you are interested in helping with the store tour .

### Saturday, Sept. 6th

**11am-2pm**

**Gluten Free Tasting – Taste delicious new Gluten Free food!!**

**Gluten Free tour at Whole Foods - 1pm**

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## Recipe Corner

I have had a request to repost **Sherri's Italian Cream Cake**. It is so good.

1 pkg. Kinnikinnick white cake mix  
7-14oz canned coconut (according to taste)  
1/2-1 cup crushed pecans or walnuts  
Use the directions on the cake mix, substitute buttermilk for the liquid. Bake in two round pans so you can have frosting between layers.

Frosting

1 pkg. cream cheese  
1 stick butter  
1 pd. powdered sugar  
1 t. vanilla  
1/4 t. almond extract

Sherri says, "Mix the ingredients and put them into two round cake pans. Bake at 350 until a toothpick comes out clean. It is the most delicious and moist cake I have had since I became GF."

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## **Tortilla Chip Lasagna**

By: Rhonda Halvorson submitted by Terri M

1.5 pounds hamburger  
16 oz crushed tomatoes  
Small can sliced black olives  
1/2 tsp garlic powder

8 oz sour cream  
16 oz cottage cheese  
Small can green chilies

12 oz cheddar cheese, grated  
12 oz pepper jack cheese, grated

1 bag plain corn tortilla chips

### **Instructions**

Brown hamburger and add tomatoes, olives and garlic powder. In a separate bowl, mix sour cream, cottage cheese, and green chilies.

Layer 1/2 bag of tortilla chips, hamburger mix, sour cream mix, grated cheese. Repeat previous layer.

Bake at 350 for 25-30 minutes.

Note: Prepare the day before, cover and refrigerate so chips become softened.

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## Restaurants

BJ had this to say about **Central Park Fusion Cuisine** "We ate at a new restaurant in Hot Springs and it was delicious. Matt (the chief) was wonderful in suggesting foods to eat. He sent me this attachment the next day. I had the Boursin Filet. Can't wait to go back for that again. I also had brulee for dessert---it was fantastic. People are always asking me for gluten free places to eat in Hot Springs."

I have attached a pdf menu of GF choices offered by this restaurant.

<http://www.centralparkfusion.com/index.html>

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## Free Triumph Dining Cards

Triumph Dining is leading the first-ever \$10k Challenge for Celiac Awareness and giving away

FREE American Dining Cards until the end of August. There's absolutely no purchase necessary; simply follow the directions below and get a FREE American Dining Card from Triumph Dining.

And, here's the best part: We're doing this to raise money for Celiac Disease Awareness! If we get 15,000 people to sign up for free dining cards, we'll make a \$10,000 donation to support a national celiac disease awareness campaign. When we hit our goal, we'll ask the gluten free community to help us decide which non-profit(s) receives the donation.

Together, we can build awareness on two fronts: With 15,000 more dining cards on the street, we'll be educating more restaurants about the gluten free diet faster. And, with \$10,000 funding behind a national campaign, we can diagnose and educate more Celiacs.

There are two ways for you to get your FREE dining card:

1. Visit

<http://www.triumphdining.com/freediningcard.aspx> and use the order form to sign up right now (Note: We're charging \$.70 s&h to help offset the cost of mailing -- Regular s&h normally costs \$2.00), **OR**

2. Send a self-addressed, stamped envelope to: Triumph Dining; Dining Card Department; 124 E Broad St, Suite B2; Falls Church, VA 22046

Please sign up now and forward this message on to your friends. We're working hard to give away as many dining cards as possible, but we'll need your help to get to 15,000!

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## **Newspaper Article**

### **Running over medical obstacles**

Thanks to The Journal Gazette of Ft Wayne, Indiana for giving me permission to share this article with you. If you want to see pictures of Amy, go to the original article <http://www.journalgazette.net/apps/pbcs.dll/article>

[le?AID=/20080809/SPORTS13/808090340/1/SPORTS](http://www.journalgazette.net/apps/pbcs.dll/article?AID=/20080809/SPORTS13/808090340/1/SPORTS)

by **Michael Rothstein**

Published August 9, 2008

Amy Yoder-Begley sat in her home this month, meticulously packing foods in preparation for the Beijing Olympics.

She had to make sure she had enough cereal and SoyJoy bars as part of a lifestyle she had grown accustomed to over the past two years. Without adjusting, she wouldn't be in the Olympics representing the United States in the 10,000 meters.

For a decade, Yoder-Begley knew something was wrong, but doctors were unsuccessful in finding a cause.

Yoder-Begley's training regimen used to look different than almost any other runner.

Because of her medical mystery, Yoder-Begley had to carefully scout her training spots. The East Noble graduate and Kendallville native trained on routes and tracks with nearby bathrooms. In a sport where endurance and the ability to control and test limits are paramount, Yoder-Begley couldn't make it through a workout without needing multiple breaks.

"I went through two years where I couldn't run 30 minutes without having to use the bathroom," Yoder-Begley said. "All my runs and all my workouts were geared around where can I stop and go to the bathroom."

Doctors investigated multiple diagnoses: ovarian cysts, irritable bowel syndrome, thyroid issues, even depression. Of all the heart, determination and desire Yoder-Begley has, it was a change in her gut that enabled her to reach the Olympics.

In January 2006, Yoder-Begley met with Dr. Dan Benardot, director of the laboratory for elite performance at Georgia State in Atlanta. Yoder-Begley described her symptoms – fatigue, anemia, bloating, the constant need to go to the bathroom. Without much examination, Benardot had the answer: Yoder-Begley had celiac disease.

“I was like ‘What?’ ” Yoder-Begley said. “He’s, like, you have a wheat allergy. I’m like ‘No I don’t, whatever.’ I had been told so many different things, and he was like ‘No, seriously.’”

“He was right.”

Celiac disease is a digestive disease that damages the small intestine, interfering with the absorption of nutrients. Those diagnosed can’t handle gluten, which is commonly found in wheat, rye and barley. It can also be on stamp adhesive, medicines, vitamins, shampoos and toothpaste.

When a person with celiac disease ingests gluten, it destroys the villi, small protrusions that line the small intestine and help absorb nutrients for the bloodstream. Eventually, the condition causes malnourishment.

A study by the University of Maryland in 2003 said one in every 133 Americans may have celiac disease.

In an elite athlete, damage could be worse. Most athletes eat carbohydrates before an event. Many common carbohydrates such as pastas and breads, are devastating for those with gluten intolerance. And going undiagnosed, it can make what Yoder-Begley has accomplished – making the U.S. Olympic team – impossible.

“Very unlikely,” Benardot said of an undiagnosed athlete becoming an Olympian. “It would be very, very difficult, and I just don’t see how it’s possible. The demands at that level are so tremendous, that if you compromise the system in any way, you just can’t do it, can’t keep up with it.”

Within three weeks of being diagnosed, Yoder-Begley began seeing improvements. She could go on longer, uninterrupted runs. She recovered faster from the longer runs. Her joints didn’t hurt. She no longer felt bloated and could eat 4 to 6 hours before she ran rather than the 2 hours to which she had become accustomed.

Yoder-Begley was no longer worried about the anemia that had been previously diagnosed, likely caused by celiac disease. And, along with an eventual move to Nike’s Oregon Project, the

company’s running team, her path to the Olympics began.

“I have definitely seen a big change in every aspect of her life,” said her husband, Andrew Begley. “It’s been very nice. Unfortunately, she has a little damage. She’ll have osteoporosis. She’ll have some damage for life from it, but we caught it early enough that we can fix some of the damage of having celiac for 10 years without knowing it.”

Heading to the Olympic trials in Eugene, Ore., in June, Yoder-Begley had been running well and healthy. Then came the 10,000-meter race – and it started out slow.

She started figuring out what times she needed to hit in order to qualify for the Olympics. Yoder-Begley finished third in 31:43.60, 1.4 seconds under the qualifying cut.

“She’s been close, but she was more ready this time,” said her mom, Linda Yoder. “There’s always that little piece that says everyone else wants to be there, too. The way she did it made it a little intense.”

While preparing for the Olympics, Yoder-Begley spoke to the chefs at the Olympic Village and found out they wouldn’t accommodate her allergy. Without accommodations, she’d be living on SoyJoy bars, bananas, organic peanut butter and cereal for almost two weeks. She called the United States Olympic Committee and found a chef there who would cook for her.

She had him take food to Beijing but has to travel from the Olympic village to the American restaurant to eat.

“Their take on it is that they aren’t used to it,” Andrew Begley said. “They don’t want to be blamed for a poor performance at the Olympics.”

And Yoder-Begley doesn’t want to be sick before the race. She will take shuttle buses, a minor inconvenience in her attempt to stay healthy.

She’s envisioned the race already, figuring it’ll be slower than normal as the runners deal with heat, humidity and pollution. She thinks it might

be like the trials in Oregon, because that race went out slow, too.

“The goal is to stay in the race as long as possible,” Yoder-Begley said. “If they make a move, make a move and go with them.”

Yoder-Begley realizes that with a good performance in Beijing and her story being told, knowledge about her disease could skyrocket.

“It’d be great if it did,” Yoder-Begley said. “I’m finding more and more restaurants that have gluten-free menus. There are still places that don’t and kind of refuse to serve you, but I’m kind of hoping eventually people raise a little bit more awareness just about where their food comes from and what’s in it and stuff like that.”

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### **GF information**

**Labeling laws for allergens** - According to the FDA's Food Allergen Labeling and Consumer Protection Act of 2004 (FALCPA) , only the top eight allergens have to be disclosed in plain English on food labels and supplement labels. These are: wheat, dairy, soy, tree nuts, peanuts, fish, shellfish and eggs.

FALCPA's requirements apply to all packaged foods sold in the U.S. that are regulated under the Federal Food, Drug, & Cosmetic Act, including both domestically manufactured and imported foods. FDA regulates all foods except meat products, poultry products, and egg products. Those fall under USDA regulation.

If you want to read more about food labeling go to: <http://www.cfsan.fda.gov/~dms/wh-alrgy.html>

**Definition of GF** - The US has not defined GF yet. The current thought is that it will use 20ppm as this is the standard set by the Codex Alimentarius Commission.

**Oats** - Current research has shown that oats can be safely added to our diets. Because of cross contamination issues, be sure to use only GF oats. "Gifts of Nature" and "Gluten Free Oats" have been certified by the Gluten Free Certification Organization. "Bob's Redmill" and "Cream Hill Estates" carry lines of GF oat

products. There is a subset of people who will react to pure oats just like there are some people who react to soy or corn or any food. Some doctors say not to add oats until you have been GF for 6-12 months.

**Modified food starch** - in the US the source must be labeled if it is from something other than corn.

**Distilled products** - Alcohols and vinegars that are distilled are gluten free. Malt vinegar is not GF. Distilled products that have ingredients added after distillation may not be GF.

**Restaurant Fryers** - Ask if fried foods are cooked in a shared fryer. The fries or the chips may be GF, but if they are cooked in a shared fryer, there is a possibility of contact contamination.

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### **Food Labeling - request for comments**

One of the major dilemmas for the celiac community is how to deal with advisory labels on foods. Many choose to completely avoid products which display statements such as produced in the same plant with wheat products, or may contain wheat. Others may take a different approach based on personal experience. Regardless of the approach, these statements are a concern. We now have the opportunity to tell the FDA what we really think about such labeling.

The FDA has announced that it will hold a public meeting on September 16, 2008, to gather additional information about the use of advisory labeling of allergens in food. That information will be used to help the agency in determining:

- 1) how manufacturers currently use advisory labeling;
- 2) how consumers interpret different advisory labeling statements; and what wording is most effective in communicating to consumers the likelihood that an allergen may be present in a food.

The FDA is also interested in learning if consumers find advisory labels useful when deciding which foods to purchase. According to the Federal Register (FR) notice, the FDA is developing a long-term strategy to assist manufacturers in using allergen advisory

labeling that is truthful and not misleading, conveys a clear and uniform message, and adequately informs allergic consumers and their caregivers. Interestingly, the notice specifically focuses on the impact of advisory labels for those with food allergies. It makes NO MENTION of the impact advisory labels may have on individuals who must adhere to a strict gluten-free diet, i.e., those with celiac disease.

The official FR notice for the meeting can be accessed at:  
[www.cfsan.fda.gov/~lrd/fr080808.html](http://www.cfsan.fda.gov/~lrd/fr080808.html)

Comments on the questions outlined in the FR notice may be submitted in writing to:  
Division of Dockets Management (HFA-305),  
Food and Drug Administration, 5630 Fishers Lane, rm. 1061,  
Rockville, MD 20852; or  
electronically through [www.regulations.gov](http://www.regulations.gov).  
The Docket number is  
FDA-2008-N-0429. The deadline for the  
comments is January 14, 2009.

Additional information will be available on the  
ACDA website later today.

Beth Hillson  
President  
American Celiac Disease Alliance  
<http://americanceeliac.org>

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**Articles and abstracts**

**Urinary stone disease in adults with celiac disease: prevalence, incidence and urinary determinants.**

Department of Clinical and Experimental  
Medicine, Federico II University, Naples, Italy.

**PURPOSE:** Intestinal diseases may cause urinary stone disease via hyperoxaluria or diarrhea induced hyperconcentrated acidic urine. Data are missing on urinary stone disease in celiac disease, a common malabsorptive disorder. In this study we analyzed urinary stone disease and urine composition in adults with celiac disease.

**MATERIALS AND METHODS:** Study patients were 18 years or older, untreated, and newly

diagnosed with celiac disease by serum markers and jejunal biopsy. Clinical presentation of celiac disease was assessed focusing on 5 disorders of diarrhea, and deficiency of calorie (low body mass index or weight loss), lipid (low prothrombin time or low serum lipids), iron (low hemoglobin or low serum ferritin) and calcium (low serum calcium or low bone densitometry). Urinary stone disease history was assessed by questionnaire (imaging, stone excretion, stone disruption/removal). Urinary variables were measured in a 24-hour collection in a subgroup of patients. **RESULTS:** Under untreated conditions (baseline) urinary stone disease was independent of celiac disease presentation and more prevalent in patients with celiac disease than in a population sample used as a control (608 and 3,540, 7.9% and 5.0%, sex and age adjusted odds ratio 4.0, 95% CI 2.7-5.9). Excluding from analysis individuals with baseline urinary stone disease, the incidence of urinary stone disease history was not significantly different between the treated celiac disease (gluten-free diet) and control population (458 and 3,003, 2.4% vs 3.9%). The urine of untreated patients with celiac disease differed from that of healthy volunteers with 120% higher oxalate and 43% lower calcium (in 45 and 45, p <0.001). A gluten-free diet corrected urinary abnormalities (p <0.01).

**CONCLUSIONS: Urinary stone disease risk is high in untreated patients with celiac disease independent of overt malabsorption. Hyperoxaluria is likely the underlying disorder. A gluten-free diet reduces urinary stone disease risk and oxaluria.**

PMID: 18639267 [PubMed - in process]

[http://www.ncbi.nlm.nih.gov/pubmed/18639267?ordinalpos=15&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed\\_ResultsPanel.Pubmed\\_RVDocSum](http://www.ncbi.nlm.nih.gov/pubmed/18639267?ordinalpos=15&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_RVDocSum)

Hope you are enjoying the cooler weather. See you at the next meeting on August 18.

Anne Luther  
501-681-5544  
501-223-3981

Information in this newsletter is not medical advice. Please see your medical team for diagnosis and treatment