In 1866 Seventh-day Adventists opened a medical institution in Battle Creek, Michigan. Housed in a remodeled eight-room home, painfully limited in trained staff, it was a modest beginning. It carried the forbidding name of Western Health Reform Institute, and began with just one patient. In reality, it was a third-rate water cure center.

Adventists numbered only about 4,000 members in 1866. We lacked financial means and people of education. The decision to launch a medical institution was audacious.

The pioneers could not have foreseen what would come of their efforts. That against all odds this modest structure would flourish, expand, and in time spawn hundreds of other institutions across the United States and around the world. And that, in 1905, the new property purchased at Loma Linda would prosper and grow into a medical center renowned throughout North America and abroad.

Why did Adventists embark on a healing ministry? And why, with the huge challenges that providing such service entails today, do we stay with it?

First and fundamentally, because we are followers of Jesus Christ. He went everywhere, making men and women whole in body and soul. We seek to carry on His work.

Second, because we believe that the human body is valuable in itself. It was created by God and intended for His glory.

Third, because we believe that both natural and moral law derive from the same God over all.

Fourth, because we believe that the gospel invitation is to a better, happier life right here on earth, as well as the promise of endless life with God.

We Seventh-day Adventists (13 million strong worldwide today) feel called of God to share this message of wholeness—of transforming lives—to the whole world. It is a message brought into sharp focus and given urgency by pointed instructions that came from pioneer leader and visionary Ellen G. White.

After some 140 years we still carry on this ministry. Despite the challenges of these changing times—hospital mergers and consolidation, breathtaking (but expensive!) new procedures, increasing governmental control, pressure from insurance providers—we try to provide excellent health care in the spirit of Jesus.

I thank God that we do. I salute everyone involved—doctors, nurses, chaplains, support staff, administrators, board members, and so on. I am proud of you. And I am especially proud of all that the name Loma Linda represents. I praise God for these 100 years of making men and women whole.

During the last 47 years faculty members at Loma Linda University (LLU) have attracted major federal funding to conduct some of the largest population health studies in the world.

The scientific reasons that LLU has received more than $40 million in federal funds to study Adventists for 47 years are, of course, somewhat different from those previously expressed. The scientific world has little interest in the health or influence of Adventists per se; rather, it is the insights that the Adventists’ health experience can provide to benefit others that are of interest. In the 1950s the belief that tobacco was a health risk, especially for lung cancer, started to take root. (It was during this time that Drs. Mervyn Hardinge, Frank Lemon and Richard Walden were awarded the first of this research funding.) A population that did not smoke cigarettes provided a unique opportunity to compare its cancer experience with that of the general population. Indeed, the first large study of Adventists showed that they had only a 38 percent risk of dying from lung cancer, and a 76 percent risk of dying from any cancer, when compared to non-Adventists. These and similar results were included on the U.S. surgeon general’s reports to the nation and the U.S. government.

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The first major study of Adventist health, known as the Adventist Mortality Study, was conducted primarily between 1958 and 1965, and directed by Drs. Frank Lemon and Richard Walden. Much of the analysis, and a longer less formal followup through 1985, were managed by Drs. Roland Phillips, Jan Kuzma, and non-Adventist David Snowden. In 1974 Dr. Phillips was instrumental in securing funding for an even larger study called Adventist Health Study-1 (AHS-1), of 34,000 California Adventists, and data was collected through 1988. Drs. Paul Mills (also a non-Adventist), Larry Beeson, Pramil Singh, Kristian Linsted, Synnove Knjtsen, and Gary Fraser analyzed and published results from AHS-1, and these publications continue. The results from AHS-1 are highly regarded, and find a prominent place, for instance, in the seminal 1977 publication on diet and cancer funded by the World Cancer Research Fund and the American Institute of Cancer Research.

In 2001 we secured funding for Adventist Health Study-2 (AHS-2), the largest and most technically advanced study of Adventists to date. This will enroll more than 100,000 Adventists from across the United States and Canada.

There appears to be little question that the results of these studies have justified the huge effort and major funding, and this is why funding continues. The following is a brief overview of the major findings to date:

Not only was the cancer experience of Adventists noteworthy but the early work also demonstrated that their risk of dying from heart disease was reduced by 35 percent. It was later found to be closer to a 70-percent reduction in persons below age 60.

Adventists, therefore, are at much lower risk of these major killers. The question is Why? Our analyses show that a major part of the explanation has to do with diet. As compared to other Adventists, those who did not eat meat had much lower rates of heart disease, as did Adventists who ate small quantities of nuts each day and those who preferred whole-grain rather than white bread. Those who ate more fruit had lower risks of prostate, ovary, lung, and pancreatic cancers; those who were vegetarians had lower risks of colon and bladder and ovary cancers; those who ate more legumes had lower risks of colon and pancreatic cancers; those who ate more tomatoes had lower risks of prostate and ovary cancers; and those who drank soy milk regularly had a lower risk of prostate cancer.

Another feature of these results is that the vegetarian advantage is by no means always the result of absence of meat. Vegetarians eat more fruit, legumes, nuts, and vegetables. For some cancers it is the extra amount of these factors that is helpful, rather than the absence of meat alone.

California Adventists are at present the longest-living formally described population in the world.

Social changes, however, have worked against us. People are much busier today than they were in 1976, and less likely to spend two to three hours answering a questionnaire. Concern exists about confidentiality and the possibility of misuse of computerized information.

Gaining permission to use U.S. federal funds for research involving Canadian subjects required complicated negotiations and assurances, but we are delighted that these were successful.

William G. Johnson is the editor of the Adventist Review; Gary Fraser is the principal investigator of the Adventist Health Study.
No doubt you've read the November issue of National Geographic whose cover story featured “The Secrets of Long Life.” Adventist poked out their collective chests because we were mentioned in this article along with two other longevity all-stars, the residents of Okinawa, Japan and Sardinia, Italy. I think what impressed me most is that children of the other two groups are not adopting the health habits of their parents.

Young people in Sardinia are replacing their traditional Mediterranean diet—which includes plenty of vegetables, beans, and locally produced cheese—with junk food. Today obesity rates, virtually zero before 1940, have risen to nearly 10 percent and some of the traditional habits that fostered longevity in the older group are disappearing.

The youth of Okinawa are also losing their longevity edge. They have traded the low calorie diet of onions, soups and food grown in their own gardens with store-bought packaged foods. Potato chips, burgers, and French fries are the order of the day. They now have the highest rate of obesity in Japan.

Will Adventist youth succumb to the same fate as the other groups? Will we Adventist adults pass down our legacy of health? Will the Adventist youth accept? I think about Daniel and his three Hebrew friends. They were teenagers—some say fifteen, sixteen, seventeen, and eighteen. But their parents had so taught them that they were able to leave home and country and practice the internalized concepts of health that they had been taught and seen modeled in their home.

What makes youth want to pick up the health habits that our church recommends? First, I believe they need to be taught. Many of our young people pick up the same customs as their friends around them. They watch TV and are influenced to buy the same products it pushes. It will take educating, training, and reasoning for our youth to want to accept and practice the health teachings of our church. Have you read and discussed the new Ministry of Healing (Ministry of Health and Healing) with them? Its modern language will speak to them.

Then it will take surveillance. Some are making strides toward better health for our youth by waging campaigns to remove vending machines from our schools or stocking them with better, healthier foods. Some are calling for more funds to reintroduce physical education classes that were cut when budgets got tight. How are your church pot-lucks? And Campmeeting fare? Eternal vigilance is necessary.

One version of the Bible (Message), says “Don't become so well-adjusted to your culture that you fit into it without even thinking. Instead, fix your attention on God. You'll be changed from the inside out. Readily recognize what he wants from you, and quickly respond to it. Unlike the culture around you, always dragging you down to its level of immaturity, God brings the best out of you, develops well-formed maturity in you.” [Romans 12:2]

It will also require modeling. From our ministers and leaders to our parents, we need to live what we believe. All the time. One lady asked me, “Why are Adventists vegetarians when they are together but when they are alone they’re not?”

Then, we need to be kind in our approach. I think of the impotent man by the pool of Bethesda who was healed by Christ. He went to church for the first time in 38 years and was met by some mean-spirited church folk. “Why are you carrying that bed on the Sabbath?” was their first greeting. They didn't say “Happy Sabbath! We're glad to see you!” The inspection committee met him at the front door. You can’t do this. You can't wear this. You can't wear that. You can't eat that. He didn't come to church to be inspected. He came to church to be inspired. He didn't come to church to be picked over, but to be prayed over. We have some mean vegetarians and some even meaner vegans in some of our churches. They are not intentionally mean. Their zeal consumes them. Don't let your passion for the law drive out your love for the people. We have a wonderful health message but sometimes the health messenger is not at all kind.

Lastly, our youth need to know that health is not a matter of chance, but comes through obeying the laws of health. These laws will not only give good health but will perfect our characters. Mrs. White gives this advice, “One of the greatest aids in perfecting pure and noble characters in the young, strengthening them to control appetite and refrain from debasing excesses, is sound physical health. And, on the other hand, these very habits of self-control are essential to the maintenance of health ... Especially is youth the time to lay up a stock of knowledge to be put in daily practice through life. Youth is the time to establish good habits, to correct wrong ones already contracted, to gain and to hold the power of self-control, and to lay the plan and accustom one’s self to the practice of ordering all the acts of life with reference to the will of God and the welfare of our fellow creatures.” Review and Herald, Dec. 13, 1881. Let’s pass on the Adventist advantage and the legacy of health that God has given to our church!
Eight year old Pablo del Puerto lives in Maywood, New Jersey. He attends the Union City Spanish Seventh-day Adventist Church with his family. There, he is a member of the Primary Sabbath school, the children’s choir, and the Adventurers Club. Pablo believes that it is important to have a healthy lifestyle because our bodies are the temples of the Holy Spirit.

Recently, the public school that Pablo attends organized a talent show and Pablo decided to participate with a skit to help kids “Say No to Drugs.” Nobody suggested the topic of drug prevention to him. He selected this topic by himself, created the skit and invited two non-Adventist friends to participate with him in this performance.

Pablo and his friends Giselle (8 years old) and Milagros D’ambrogio (6 years old) practiced several times and then presented the skit at school. The three children, among other things, stated that drugs are bad. They can ruin your life and health. “Say No to Drugs.” And they made all the audience of parents, teachers, and children attending the talent show repeat with them: “Say No to Drugs.” It happened that the chief police officer of the town was present and he was very pleased to see this skit about drug prevention.

In addition, Pablo, Giselle and Milagros offered the same skit in Spanish at the Union City (New Jersey) Seventh-day Adventist Church. They presented the skit on Sabbath morning when the Listen and Winner magazines were promoted. They made the entire congregation repeat with them “Say No to Drugs” in Spanish (“Dile No A Las Drogas”). As a consequence of this skit presentation, Giselle, Milagros and their family visited the Adventist church for the first time. Giselle and Milagros’ mom was very pleased to see their children involved in this health prevention activity. And Pablo was very happy to be the Lord’s helper!