



Dietetics and Food Regimens

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1. FROM DIET TO DIETETICS

When we think of slimming diets, some of the first things that come to mind are smaller portion sizes, limiting **calorie** intake, giving up the tastiest foods, following particular instructions, manuals, regular checks, regular weigh-ins and everything else associated with **slimming diets**. Recently, the notion of diet has expanded to include food intolerances (to gluten, lactose and other substances) and a controlled food intake for health reasons (for example, people with cardiovascular problems must follow a very specific diet). The word 'diet' tends to bring to mind the idea of control over our bodies, guided by other people such as doctors, nutritionists, dietitians, personal trainers and so on, all **professionals** recognised as experts in health and the human **body**.

In truth, the word 'diet' means something else entirely. Its etymology dates back to the Ancient Greek word '*diaitìa*', meaning 'a way of living, daily habits' and therefore involving not only food, but all of the activities involving the body, such as sleeping, eating, drinking, physical exercise and sexual activity. For the Ancient Greeks, eating was just one of the different everyday actions that, together, constituted a 'di-

aitla'. This concept helped people to take care of themselves as a human being and a citizen.

The term 'diet' should therefore not only be understood in the restricted sense of a programme for weight loss – which is nevertheless one of its very important meanings with many significant practical consequences – but more generally as a way of living, a lifestyle that affects our food choices but not only. Take, for example, vegetarian or vegan diets. The abstention from eating foods of animal origin is certainly not a diet in the strict sense of eliminating certain foods, but depends on ethical motivations that reflect the individual's values (respect for animals, for the environment and so on), their way of thinking. In this case, what to eat or not eat is chosen on the basis of ethical and even political principles. Furthermore, the choice to be a vegan affects decisions regarding clothing (no leather is permitted), cosmetics and even home decoration, as products suitable for vegans must be made without the use of any animal-derived substances and must not be the result of the mistreatment of animals. There are also many religions that place restrictions on, or ban certain foods: foods that are always forbidden, foods that are forbidden at certain times because they are associated with religious celebrations or rituals, foods that are allowed in certain conditions, and so on. In these cases the elimination of specific foods or the insertion of foods with particular characteristics also constitutes a *dietetics* because it is based on a selection of foods based on religious or spiritual principles.

Over recent years, the Mediterranean diet (v. cap. xxx) has been hailed by the Western world as the best one available. It is not a diet in a strict sense, based on restrictions and sacrifice, but a dietetics in a broader sense with its variety of foods, combination of ingredients, recipes, kitchen tools, all of which also reflect a particular culture and its history. It is therefore much more than a simple list of prime materials. Rather, it is a real way of eating and living. So we need to think of a diet as something broader. Diets are systems of food selection, perspectives on the totality of foods. Even the slimming diet, in its strict sense, is not simply a list of foods that are permitted or forbidden, but involves cooking techniques (some are banned, such as frying, others preferred, like boiling or steaming), ways of shopping, a particular choice of raw materials or restaurant, information on the food's origin, and other actions that do not strictly fall within the field of food and gastronomy, such as general care for the body, one's own fitness (i.e. the gym), how one dresses, reading choices and favourite films and so on.

We can therefore think of diets as **regimens of meaning**, in which the term 'regimen' refers to a particular system governing our choices, not necessarily rules imposed by an external other but a general collection of criteria that guides our lives, from eating to walking, from sleeping to choosing a film to watch at the cinema. 'Meaning' here refers to everything

these choices signify to us and in society. For example, if I begin a slimming diet I choose to change my life goals entirely. I will think of food as a total of calories, my day will be punctuated by meals assigned by the dietician, I will be governed by periodic checks, I will evaluate my weight loss and my capacity for continuing this dietetic programme, whether I am tenacious or not, whether or not I am capable of resisting temptation and so on. Furthermore, being on a diet will mean a change in the way I shop, in my decisions about what to cook each day, perhaps involving my relatives, who might join me or not, and it will certainly influence my life outside the house. Similarly, if I decide to convert to vegetarianism, this will revolutionise what I usually buy, what I keep in my store cupboard and the various daily meals. It might lead me to introduce new ingredients (for example, tofu and tempeh, usually used as substitutes for meat and cheese in vegetarian and vegan diets, are not well known in the Mediterranean diet), but it will also cause me to change the way I see the world, the way I make choices regarding my social or work life, the way I interact with different associations, groups, and so on.

In short, being on a diet is a way of being in the world, a way of choosing, ruling out, prohibiting foods. It is a mental and cultural filter based on criteria that can be social, aesthetic, medical, political, ethical or religious, which gives form and meaning to what we eat, and in doing so contributes to the construction of our identity, our belonging to a social group or our bond with a particular community or culture.

So, whilst we usually think of a diet as something temporary, out of the ordinary, something we follow for a certain period of time in order to achieve a particular goal (weight loss), or as a style that is different from the mainstream (like certain extreme dietetics, such as fruitarians who only eat fruit, or respirians who aspire to free themselves entirely of food), in truth we are always within some form of diet because dietetics refers to the relationship between food choices and ways of living. Food choices are only one part of these ways of living, but they contribute to the way in which they are defined.

2. DIETETICS THROUGH HISTORY

In ancient times the concept of diet was different to today's, because it was a part of a more comprehensive whole regarding the individual and their actions. In Ancient Greece, the citizen of the *polis* was expected to take rational care of their own body, without subjecting themselves to a restrictive food regimen or an externally imposed one. It was sufficient to eat and drink with moderation, to feed oneself without excess of any kind (neither too much nor too little) in order to achieve the physical wellbeing that was the key to general wellbeing. Eating moderately and taking care of your body in a balanced way made you both healthy and a good citizen, as diet and civil life were considered to be two sides of the same coin. Similarly, even in modern times respected men were not to impose

too many food rules on themselves, nor were they allowed to eat to excess. The English gentleman of the 18th century, for example, was a public man who, precisely because he had to set an example, ate and drank with moderation. He was expected to demonstrate his own moral standing but avoid too many sacrifices. For instance, he was not allowed to follow strange ascetic practices that would have caused him to become weak and thus have a negative impact on his active life (Fig. x-x-x).



Fig. 1. Unknown Artist, Interior of a London coffee house, 1690-1700 ca., London, The British Museum. English gentlemen and intellectuals, towards the end of the 17th century, depicted as they drink coffee, smoke, read newspapers and debate. The coffee houses were public spaces visited by men at that time in order to discuss politics, art and science. These places were central to the affirmation and circulation of ideas during the Enlightenment, in which culture, political involvement and socialising went hand in hand.

That which the ancient and modern understanding of dietetics have in common is, first and foremost, the value of *measure*, the fact that they always strived for, and showed themselves publicly to be, balanced, as excesses (too much or too little) were a sign of inadequate moral fibre or an inability to be a good citizen. Secondly, the link between dietetics and the subject's moral qualities was explicit. Thirdly, self-regulation, the capacity to decide for oneself without turning to external orders given by others was fundamental. In the modern era, no one could tell a gentlemen or a wise man what and how much to eat. He was considered his own doctor because he knew his own body better than anyone else. Indeed, the gentleman had the right to ignore the advice of his own doctor, and to even disagree with him. This is because medicine as a structured science had not, at the time, yet reached the rank of indisputable scientific expertise. Today, on the contrary, dietetics is dom-

inated by a vision that is scientific and closely linked to the physiological and quantifiable aspects of eating.



Fig. 2. Johannes Eckstein, *John Freete and His Circle*, 1792, Birmingham, Birmingham Museums and Art Gallery. A political meeting held in a Birmingham tavern in the late 1700s. The protagonists of both paintings (here and above) are not shown eating or stuffing themselves at banquets, as happens in many paintings depicting the lavish dinners enjoyed by the rich and noble. The true nobleman shows himself to be virtuous when he is in company, but nor is he ascetic, unable to enjoy worldly pleasures. Indeed, as we see here, the men are shown drinking and smoking whilst absorbed in other activities.

The self-regulation typical of ancient and modern dietetics is a long way from our contemporary reality, in which people are unable to set themselves rules and risk falling into excess: obesity, unregulated eating, junk food, eating disorders of all kinds including orthorexia (a form of neurosis that provokes an excessive control over eating and an obsessive search for healthy food) and so on.

The media provides a clear representation of this process of dietetics becoming more scientific: television programmes, videos online and on social media, newspapers that focus on wellbeing and health all offer advice on how to eat healthily, providing information on various slimming diets, presenting the results of new scientific studies on the effects of a particular food or its components on our body, illustrating how muscles and organs work during physical exercise and so on. What's more, the trend of paying attention to food labels and nutritional tables, and therefore to the invisible content of food and its potential effects on health, is prevalent among consumers. In recent years, with increasing frequency in the wealthiest parts of the world, institutions and associations run programmes on health and food education that teach children, young people and parents how to eat well. What does 'eating well' mean to-

day? Where can individuals acquire knowledge about their own body and about what is necessary for their own wellbeing? They acquire it from medicine, from biology, from chemistry, from specialist knowledge. Our culture considers these fields to be exact and indisputable sources because of their physiological and quantitative basis. As such, care for the body is no longer the responsibility of the subject themselves but is delegated to experts and, more generally, to science.

An essential characteristic of today's dietetic is, in fact, that its basis is entirely scientific, based in particular on *nutritionism*, an ideology that brings together medicine, food science and the needs of food industry.

3. NUTRITIONISM

The idea of nutritionism is that eating well means eating well *biologically*, paying attention to what foods are made up of (protein, carbohydrates, fats, vitamins, etc.) and the energy they provide (calories). It is a concept developed over the last century, becoming established in the post-war period thanks to the expansion of the mass food market, the improvement of living standards in the Western world, and the development of the food industry. The principles of nutritionism were able to be economically exploited by the food industry, as it was possible to modify, add or eliminate any given nutrient from any food. Advertising also played a fundamental role in communicating this (a sector that, in the meantime, was growing in importance because of the increasingly competitive market and the improving quality of products). In a Europe that had just been ravaged by war, the nutritional value of foods was considered fundamental, so anything a food product contained that could strengthen the bodies of adults and children had to undoubtedly be promoted, advertised. It is within this context that nutritionism takes root and spreads, helping to modify the very way in which food is conceived (figs x-x).

With its focus on food's chemical and physical makeup, nutritionism has given rise to a completely new way of viewing food, on the basis of which nutritional value and energy content are more important than the food's taste, despite it being a product with its own organoleptic and sensory qualities, as well as its own history and cultural identity [see the chapters xxx xxx]. Thus food becomes the simple intake of nutrients. For example, bread and pasta are thought of as carbohydrates, eggs as protein and fats, vegetables as fibre and water, and so on. A new way of classifying food is born that we find normal today because it is so widespread, and has become a part of most people's basic knowledge. This does not mean that foods have lost their identity or their value. It means that the traditional way of viewing food is now combined with science, so the composition of the food we eat is viewed with regards to the effect it has on our physical health. If, as we have seen, in past interpretations of dietetics it was the individual's connection with morality and their civil qualities that domi-

nated, today it is health and the body's wellbeing. Choosing what to eat and what not to eat means taking care of one's own body, but in a different way to the past: not so much in order to become a better person but to be better physically and stay healthy. These changes in the way we think about what we eat demonstrate the importance of cultural, social and historical changes in the field of dietetics, food and cookery in general. And they confirm what we said at the beginning of this chapter, namely that food choices carry social and cultural meaning, and are in no way neutral.



Fig. 3. Fig. x – Advert from the 1940s promoting donuts with added vitamins for children, made by the American company the Doughnut Corporation of America. This advert is perfectly representative of the industrial logic of nutritionism, which not only gives importance to the substances the food contains, but adds them during the factory production process and then promotes them through advertising. In this case, as we see, it is not the donuts' taste that is promoted but their capacity to improve the energy levels of young consumers. The idea of food as fuel.



Fig. 4. The box of one of Kellogg's latest cereals places the nutritional table in the foreground, indicating its calorie content and that of other nutrients. It also specifically indicates its suitability for a female consumer due to its addition of other substances (iron, vitamin D, protein). Despite the distance in time between the two products, and the difference in the type of food, the basic logic of nutritionism remains the same, presenting the foods from the perspective of their nutritional value.

The consolidation of nutritionism has brought with it a scientific way of viewing food, a socio-cultural phenomenon that is specific to our time.

All of this has had several consequences on people's diets, as certain foods are preferred to others because they are thought to be either more healthy or less harmful. But even more importantly, within the nutritionist paradigm we find differences in whether foods are considered healthy or unhealthy according to the dominant scientific theory of the time.

Take Coca-Cola. Invented as a digestive tonic by a pharmacist at the end of the 1800s, it was presented for a long time as an invigorating drink with restorative properties, an ability to cure ailments such as headaches (fig. x), even considered suitable for athletes (fig. x). Then, over the course of time, it came to be considered as a drink that was bad for your health, something to drink in moderation or to eliminate altogether due to its high levels of sugar and caffeine. Today, therefore, Coca-Cola have modified their products, offering versions of the drink without sugar or with reduced sugar, or without caffeine, even launching a line of plant-based drinks featuring oats, rice, almonds and so on (fig. xxx).

Something similar has happened in the sector of children's food. In today's society, in which obesity has become an emergency, parents and food producers have grown more aware of the nutritional values and calorie content of those foods sold for the youngest consumers. If up until a few years ago you could sell snacks and also pasta, yogurt and milk with added sugars, containing lots of butter, eggs or other fatty ingredients, today we tend to move in the opposite direction to reduce the use of those kinds of substances believed to be potentially damaging to children. Consequently, adverts for baby food have adapted, promoting precisely that which their products *do not contain* (fig. x), according to the dominant ideology or dietetic fashion of the time (see the focus on the fashion for gluten-free food).



Fig. 5. Advert for Coca-Cola (late 1800s). Coca-Cola was an invigorating drink that alleviated many physical ailments, and was therefore treated in the same way as a drug. This is because the criteria establishing what constituted a drug was very different then to that used today.



Fig. 6. Advert for Coca-Cola from 1909, dedicated to Bobby Walthour, a famous American cyclist of the era. Precisely because of its refreshing and invigorating qualities, it was considered a drink that would even enhance sports skills.



Fig. 7. There is no longer just one Coca-Cola but different versions with varying amounts of sugar, in response to the new demands of consumers who are careful about what they drink and, more generally, want to ride the current health-conscious wave.



Fig. 8. Moving in the same direction, in 2018 Coca-Cola launched AdeZ in Europe, a line of plant-based drinks (rice, oat, soy, coconut, etc.), suitable also for vegans and vegetarians. On the label we see 'Lactose-Free' and 'No added sugar'. 'Free (from)' seems to be one of the communicative trends of the moment.

Let's look at other examples. Scientists have long demonised fats, but today they tend to differentiate between the types of fat. And so, after being considered a food that was very fatty and one to be avoided, the avocado has today been re-evaluated as a food rich in 'good' fats that can be incorporated into a balanced diet. Similarly, proteins tend to be preferred in contemporary dietetics because they provide strength, muscle mass, tone and are therefore in line with the main health-conscious values of time: being physically slim and in good cardio-vascu-

lar health. However, these must be proteins with a low fat level, so it's a yes to turkey and a no to bacon, yes to egg whites but no to the yolks. Even carbohydrates, once a fundamental component of a daily diet, are now consumed in moderation, with their simple versions, found in fruit and vegetables, preferred to those found in bread and pasta.



Fig. 9. A few examples of baby food boxes that highlight what the product does not contain, as it is considered a substance to avoid at this particular moment in time ("without palm oil", "without milk", "without artificial colours").



Fig. 10. Here are a number of foods usually considered junk food (sauces, ice cream, snacks, ready meals etc.) that are adapting to the health-conscious trend and use their labels to declare the ingredients they do not contain because considered dangerous. While this is important and useful for those who are actually intolerant, it is, however, a generalised trend that has now become a standard in food communication, a sort of rhetoric of 'without' (how important it is to state what the product does not contain), which we can consider another characteristic of contemporary dietetic culture

FOCUS1

Slimming Diets: A Contemporary Phenomenon

Slimming diets are a contemporary phenomenon, because they reflect the canons of beauty that require one to be toned and slim. But this has not always been the aesthetic standard. Not only has the collection of ideas that give us dietetics changed over time, the values of aesthetic standards have also mutated. Indeed, until the modern age, the notion of 'fat' was a predominantly positive one, both with regards to food (oils, butter, lard, meats are all found on the tables of the rich and noble) and people's physical make-up (men of a certain stature and full-figured women were considered beautiful and healthy). Physical abundance, as is still the case today in many countries, was considered a sign of economic wellbeing and social prestige. Eating to excess was a sign of a privileged position in the social hierarchy, whilst thinness signalled poverty, deprivation and illness. In the 1800s, things began to change because greater wellbeing became more widespread in Europe among the various social classes, and varied and plentiful food slowly became more available. There was a democratisation of food. This led the wealthy people in society to start preferring physical thinness to abundance, as a way of distinguishing themselves from the masses. And so, eating a lot in an ostentatious way, previously a habit of the rich, became common practice, first of the middle classes and later, over the years, with food available to all, of the working classes and the less educated. This situation still continues today in the wealthy countries of the world. The biggest problems with obesity, and the subsequent health crises, are found among the poorest and least well-educated sections of society.

Today, slimming diets are based on the principles of nutritionism and advocate goals that reflect the aesthetic values of the moment (muscular good looks and an absence of excess fat). There are a vast number in circulation, each with its own method, name, collection of manuals, products (supplements, specific foods, drinks, etc.) and a whole communicative apparatus behind it (logo, advertising, website, social media accounts, and so on). Contemporary diets can be considered as being in competition with one another because there are so many to choose from. And as competitors, as it were, each one presents and emphasises a certain way of being on a diet. There is the Fast Diet, the low-carb diet, the Super Metabolism diet, the diet by blood type, the anti-cancer diet, and so many others that are periodically fine tuned and then marketed, feeding the production of manuals, recipe books and ad hoc products.

Some highlight the speed of the method, others on how natural it is, some on cutting out carbohydrates, others on hyper-proteic foods, some on calorie counting, others on the food's glycaemic index and other complex biochemical mechanisms. For example, the Zone diet views food as a drug that can have an anti-inflammatory effect and presents a highly medicalised idea of eating and physical activity (fig.x), while Weight Watchers, based on a complex calculation in which calories = points, instead provides an idea of a diet closest to everyday eating in people's real lives (fig.x). The Dukan diet presents itself as the fastest and most efficient method, even for those who are not able to stay on a diet, its advantage being that there are no forbidden foods and that you can eat as much as you like of the allowed foods, all of which are protein-based (fig.x). Tisanoreica, based on meal substitutes (herbal teas, food supplements and so on), instead focuses on how natural its products are, as well as the fact that they work for everyone, from big-screen divas to manual labourers (fig.x). The so-called Paleo diet, according to which you must eat like primitive humans – predominantly meat and no cereals, promises to improve physical abilities through a return to what is presumed to be humanity's original way of life. Each diet presents itself to the consumer by focusing on a different advantage.



Fig. 11. The Zone Diet. This image is taken from the diet's website and shows an athlete providing a testimonial for the diet, placing particular importance on the food supplements produced by the brand, ZoneLabs. This gives us a clear impression of a diet suitable for those who wish to maximise and improve their physical abilities.



Fig. 12. Weight Watchers advert aimed at a male audience. Here we have US basketball player Charles Barkley, but unlike the image taken from the Zone diet's website, the testimonial does not depict him whilst he plays sport, but as looks directly at the camera, at the audience, with a knowing gaze. The phrase "The best part of Weight Watchers? I can still eat the food I like" demonstrates a fundamental aspect of communication by Weight Watchers, namely that it is a diet that adapts to the person's tastes and habits.



Fig. 13. Advert for the Dukan diet. As we see, the main message here is that, in this diet, there is an enormous variety of foods that are allowed in unlimited quantities, unlike traditional diets which (in theory) require sacrifices in food enjoyment and calorie counting. In truth, many slimming diets found today aim to present themselves not as a rigid set of eating rules that demand sacrifices and abstinence, but as lifestyles that adapt to the subject's preferences and tastes.



Fig. 14. Press advert promoting the Italian diet called Tisanoreica. Despite it being a method that requires the elimination of many types of food and the use of meal substitutes, the phrase "I'm not on a diet, I'm in Tisanoreica" clearly demonstrates the widely-accepted tendency to deny being on a diet. The goal is, first and foremost, to convince the greatest number of people possible to embrace this method, and then to try and change the common perception of a slimming diet as a series of sacrifices.

4. FOOD FASHIONS AND TRENDS: BETWEEN SCIENCE AND THE MEDIA

The mass media plays an important role in spreading nutritionalist ideology. Firstly because, as we have seen, the companies have used advertising to promote their own products, with the addition of some nutrient or other. Secondly, the media (television, newspapers, advertising campaigns, the internet) help to promote a scientistic culture of food, ensuring that nutrients and calories are terms understood by most people. As regards this last point, an important role is played by the so-called 'experts' who use mass media to teach us what is in our food, the negative or positive effects that certain substances can have on our body, the best foods for losing weight or improving our own health, and so on.

As such, the figure of the expert has become fundamental in food's representation on television. Today, in programmes devoted to cooking, healthy eating or losing weight, these experts are ever-present. Who are they? Doctors, dieticians, nutritionists, but also fitness experts and personal trainers. In international TV programmes on weight loss, for example, which feature the stories of obese people who have to lose lots of weight, we see the glorification of the expert and, more generally, of nutritionist ideology. These TV programmes demonstrate the effects on the body and mind of 'bad' eating. This term is used to refer to an incorrect diet that does not follow the principles of nutritionism (foods with a high calorie content, snacks filled with fattening ingredients, enormous portions, an excess of fats and sugars, etc.), before showing the intervention by these experts (doctors and personal trainers) who help the protagonists to transform themselves positively, that is, to lose weight and be more physically active.

Another contemporary phenomenon is the rise of 'myths' about eating that circulate easily and very quickly through the media, particularly online. For example, there was recently a controversy over the use of palm oil, which had been used for many years in the industrial production of many foods (spreads, snacks, baked goods, etc.) and cosmetics. The cause of this controversy was essentially ethical, linked to the fact that large-scale use of this oil would cause deforestation in certain parts of the world. But added to this environmentalist reason was the conviction that it is harmful to human health, because of the large quantities and the kinds of fats this oil is composed of, which could cause a rise in cardio-vascular problems. This information, spread through journalistic publications, websites on healthy eating and the environment, and then circulated on social media, created such a situation that many consumers began to avoid products containing palm oil. Recognising a potentially negative trend, food companies eliminated palm oil from production and rushed to communicate this both with their advertising and their packaging (stating 'without palm oil', as demonstrated above in fig. xxx).

Another example is that of gluten, a protein that must be avoided in all cases by people affected by coeliac disease. The market for gluten-free products has recently been transformed from a sector dedicated exclusively to coeliacs, into a desirable market for even non-specialist companies because of the unfounded, unjustified conviction that gluten is a substance to be avoided, even by those who are not coeliac (see Focus II).

Today we generally see a tendency to prefer products with fewer ingredients, because they are thought to be more simple, less artificial, potentially less damaging. There is, in today's society, a preference for natural, organic, homemade foods that are cultivated and produced in a non-industrial, artisanal way that has led to such an expansion of the organic market that almost every company has its own line of organic products. This phenomenon comes from a **food trend** that is increasingly common among consumers, and is connected to the nutritionist ideology we have been discussing: *healthism*, which, when it comes to food, means being careful to choose foods that are not harmful to our physical health.

Another example of this can be seen with sugar. Recently there has been a fashion for brown sugar, which is preferable to the traditional white sugar because it is less processed and therefore considered to be healthier. Beyond whether or not one is actually of better quality than the other, what matters when it comes to the culture of eating and dietetics, is that these convictions are shared and that they modify purchasing trends, consumer habits outside (in a café, drinks are now sweetened using raw cane sugar) and inside the home (unknown until fairly recently, brown sugar has now also substituted white sugar in many home kitchens).

How are eating myths born and developed then? They emerge, in part, as scientific trends of the moment, on the basis of which a particular substance is considered healthy or unhealthy (like the kind of sugar, palm oil, etc.). They are fed by food companies and their advertising campaigns (like the packaging that carries the label 'without palm oil'), and they are partially constructed and spread by the media (**food journalism**, TV programmes). Dietetics is not therefore a phenomenon that only affects the body in its physiological sense, but it is also profoundly influenced by social fashions and trends.

FOCUS 2

Gluten-Free Mania

We have recently witnessed what can be described as gluten-free mania, an apparently inexplicable boom in the sales of products that contain no gluten, the protein that cannot be consumed by those affected by coeliac disease. Its cause seems to be the belief that a gluten-free diet stops weight gain. Newspapers and websites dedicated to

health and eating, but also doctors, associations and institutional groups advocating for coeliacs in many parts of the world, are trying to fight this trend, which seems to be very much a fashion, explaining how unfounded the reasons are for following a gluten-free diet in order to lose weight, as well as its potential risks. It was advice given by a number of celebrities, including famous athletes, singers and actresses, who used their social media accounts and books (autobiographies, diet manuals and so on) to extol the virtues of eliminating gluten from one's diet, that has given rise and fed this dietetic phenomenon. Obviously, as we have already mentioned, companies have embraced the opportunity and many have included a gluten-free line in their offering.

Beyond the motivations of either side, it is interesting to analyse the kind of phenomenon this gluten-free mania is, especially in light of the considerations we have made so far on nutritionism and the media. Various issues come into play here, forming a fertile terrain for the birth and development of such a situation.

On one hand we have the diffusion of scientistic language, of nutritionism, meaning that something that was at one time unknown to most people – coeliac disease and the gluten protein – has become common knowledge. We know which foods contain gluten (cereals first and foremost, but also many other industrially produced products), and in a more or less autonomous way, or following the guru of the moment, the decision is made to stop eating these foods. This occurs to such an extent that the diet recommended by an actress or a singer can bring significant media coverage. At the same time, we have the phenomenon of competition between slimming diets (see Focus) that compete through adverts, testimonials and recipe books, in order to propose the most efficient way of losing weight and, more generally, to feel healthy. Thus the gluten free diet looks like one of many slimming diets on the market that use nutritionist principles of varying validity as leverage.

Thirdly, we have the alternating opinions voiced by many within society, with varying degrees of authority and experience. There are the celebrity testimonials, followed by many because they are models of beauty and physical attractiveness, but these are then questioned by scientists and experts, who aim to convince us otherwise in the name of different values: those of science, research, medicine. And the media? They act as platforms for both.

The case of gluten-free mania is a great example of how, within a certain society, food beliefs are created and fed, and how such beliefs, that represent a sort of degeneration of nutritionism, create real conflicts between various social subjects.



Fig. 15. In the first half of the 1900s, the Italian pasta company, Buitoni, promoted one of its key products, 'glutinated pasta', aimed specifically at children.



Fig. 16. The same company today sells a vast range of gluten-free products, including pre-cooked foods such as pizza.



La dieta senza glutine non è una moda.

La dieta senza glutine non è "più leggera" né dimagrante: è l'unica terapia oggi conosciuta per la celiachia, una malattia sistemica cronica scatenata dall'ingestione di cereali contenenti glutine in chi è geneticamente predisposto. Adottare autonomamente la dieta senza glutine rende impossibile la diagnosi corretta di celiachia, che prevede semplici esami del sangue e una biopsia intestinale. **Non metterti a dieta senza glutine prima di aver ricevuto la tua diagnosi, per evitare di esporti in futuro a complicanze, anche gravi.**

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Fig. 17. In 2015, AIC, Italian Coeliac Association (Associazione Italiana Celiachia) ran an information campaign to combat the fashion for gluten-free, highlighting the possible risks of such a diet for someone who is not coeliac. This kind of communication demonstrates the existence in society of a conflict between the various subjects involved (companies, consumers, doctors, associations, etc.).